

Chapter - 3

Building Infrastructure

Chapter 3: Building Infrastructure

This chapter deals with creation and utilisation of building infrastructure for delivery of quality health services.

3.1 Availability of AYUSH Healthcare infrastructure in the State

The State Government did not prescribe any norm for establishment of AYUSH healthcare facilities (AHCs). There was uneven distribution of the primary, first and second referral hospitals amongst the four geographical regions of the State, as given in **Table-3**, below:

Table 3: Details showing availability of healthcare infrastructure in four geographical regions of the State

Name of services	Total Population	Total Number					
		Medical Colleges & Hospitals	50-bedded integrated hospitals	25 Bedded hospitals	15-bedded hospitals	4 bedded hospitals	Dispensaries
Eastern Region (28 districts)							
Ayurveda	81875325	2	3	28	28	731	133
Unani		1	1	0	3	78	30
Homeopathy		4	2	0	0	0	728
Western Region (30 districts)							
Ayurveda	74269658	3	0	24	22	523	108
Unani		0	1	0	4	51	28
Homeopathy		3	0	0	0	0	396
Central Region (10 districts)							
Ayurveda	31488736	1	1	13	15	276	43
Unani		1	1	0	1	36	12
Homeopathy		2	1	0	0	0	332
Bundelkhand Region (7 Districts)							
Ayurveda	12178522	2	5	6	5	123	32
Unani		0	0	0	1	7	3
Homeopathy		0	1	0	0	0	129

(Source: Statistical Diary of Uttar Pradesh)

However, the unevenness extended to districts as well. Audit noticed that the availability of Ayurvedic hospitals/dispensaries, Unani hospital/dispensaries and Homeopathic dispensaries in a district ranged between 5 to 64, 0¹ to 11 and 2 to 67. Even after taking into consideration the size and population of the region, there was uneven distribution of AHCs in the districts. For instance, district Ballia with an area of 1981 sq. km. and population of 32.40 lakh is having 64 Ayurvedic Hospitals/Dispensaries whereas the district Kaushambi, with an area of 1780 sq. km. and population of 16.00 lakh, i.e. 90 per cent of the area and 49 per cent of the population of Ballia, is having only 5 Ayurvedic hospitals/dispensaries which is only 7.8 per cent of the Ayurvedic dispensaries available in Ballia.

The Government stated (January 2025) that hospitals are constructed as per government directives/approvals of the District Monitoring Committees; and efforts are being made to remove the regional disparities. Reply confirms that there was no norm for establishment of AYUSH healthcare facilities.

¹ Chitrakoot, Etawah, Gautam Buddha Nagar, Hapur, Jhansi, Mainpuri, Maharajganj, Mathura, Shamlī,

3.2 Creation and upgradation of healthcare infrastructure

As per the approval granted under NAM, SAS awarded the work of construction and upgradation of healthcare infrastructure to EAs. The details given in **Table 4** indicates position (August 2024) of construction and upgradation of healthcare infrastructure under NAM, since inception of SAS (2015-16) to 2022-23:

Table 4: Details showing construction and upgradation of healthcare infrastructure under NAM during 2015-16 to 2022-23

Name of the work	Sanctioned during	Number of units			
		Sanctioned	Awarded for work	Completed	Incomplete
Construction of new buildings					
Fifty-bedded Integrated AYUSH Hospital	2015-16 to 2022-23	25	25	18	7
30 bedded hospital	2022-23	1	1	0	1
Ayurvedic dispensaries	2021-22	250	250	224	26
Upgradation of existing buildings					
Dispensaries into HWC	2019-20 to 2021-22	1034	1034	891	143
15/25 bedded hospitals	2016-17 & 2021-22	12	7	7	0
4 bedded hospitals	2016-17 & 2021-22	49	30	23	7
Ayurvedic dispensaries	2017-18 & 2021-22	73	73	68	5
Unani dispensaries	2017-18 to 2020-21	40	40	31	9
Homeopathic dispensaries	2015-16 to 2019-20	302	302	285	17

(Source: information furnished by SAS)

The works sanctioned and awarded during 2018-19 to 2022-23 are discussed in succeeding paragraphs:

3.2.1 Construction of Fifty Bedded Integrated AYUSH Hospitals

AYUSH Services component of NAM, *inter alia*, includes setting up of Fifty-bedded Integrated AYUSH Hospitals (FIAH) and provides one-time grant up to ₹9.00 crore for undertaking construction work for each FIAH.

GoI approved 25 FIAHs and sanctioned funds of ₹ 249.00 crore for the State of UP during the year 2015-16 and 2022-23. Out of the sanctioned funds, SAS released ₹177.16 crore to EAs. EAs incurred a total expenditure of ₹ 141.83 crore (October 2023). Against the approved 25 FIAHs, 18 FIAHs were completed and seven² FIAHs were incomplete (August 2024). Audit observed discrepancies in construction of FIAHs, as discussed below:

3.2.1.1 Selection of site without adequate care

Paragraph 212 of UPBM provides project identification with preparation of a feasibility report which should, *inter alia*, include analysis of the existing

² Saharanpur, Unnao, Shravasti, Hardoi, Gorakhpur, Sambhal and Mirzapur.

situation, nature, and magnitude of the problems to be addressed, alternative strategies, preliminary site³ investigations etc. Paragraph 378 of FHB Volume VI provides that no work shall be commenced on the land unless it has been handed over by a responsible Government Officer.

Scrutiny of records revealed that the site for construction of FIAHs were proposed without adhering to the aforesaid provisions, as discussed below:

- NAM approved (2015-16) construction of a FIAH in Kushinagar. Executive Committee (EC) of SAS, however, changed (December 2019) the site from Kushinagar to Bulandshahr due to the dilapidated condition of the existing building in Kushinagar. The change was approved (July 2020) by NAM. The work was started belatedly (September 2021), and completed (January 2024) after lapse of more than eight years of its sanction.
- NAM approved (2017-18) construction of an FIAH in Saharanpur. Against the cost of ₹ 7.05 crore ascertained by GoUP, first instalment of ₹ 2.65 crore was released (March 2018) to EA. The construction was started on the land acquired (March 2018) by District Magistrate, Saharanpur in the village Bidvi. The erstwhile lease holders of the land, alongwith few others, challenged the acquisition⁴. As a result, the work was stopped after incurring a total expenditure of ₹ 1.18 crore. Similarly, FIAHs sanctioned (2018-19) for Maharajganj and Agra were cancelled due to land issues.
- NAM approved (2017-18) construction of an FIAH for the district of Sonbhadra. Since inception (August 2018) of work, though villagers informed scarcity of water in the area, no corrective step was taken. After encountering problem in lifting of water⁵, a survey conducted (December 2022) at the instance of Project Engineer found indication of massive unfractured hard rock. FIAH, therefore, was running with scarcity of water and during summer season, the supplies were provided through water tankers.

The Government stated (January 2025) that the site of FIAH, Kushinagar was changed as the land was not in proper shape; the land of FIAH Saharanpur became disputed after commencement of the work; funds for construction of FIAHs of Maharajganj and Agra has been refunded to NAM; and availability of water in FIAH, Sonbhadra has been started (November 2023) by repairing of the submersible pump. Reply confirms that the proposal for construction of FIAHs were forwarded without adhering to the conditions given in Paragraph 212 of UPBM.

3.2.1.2 Delays in establishing the Hospitals

Audit noticed that against the 25 FIAHs, sanctioned during 2015-16 to 2022-23:

³ Paragraph 204 of UPBM cautions wasteful expenditure due to execution works without availability of land.

⁴ The Proposal was not passed in Land Management Committee of the village, and the Gram Pradhan refused to accept the proposal in a meeting held (November 2021) subsequently under the chairmanship of CDO, Saharanpur.

⁵ Against the provision of 140 metres, drilling was executed upto the depth of 236 metres but due to low pressure, lifting of water upto the overhead tank was not possible.

- Only 11 FIAHs⁶, out of 19 FIAHs⁷ sanctioned during 2015-16 to 2018-19, were inaugurated in December 2021 and made functional upto March 2023⁸ due to delayed completion of work. Of these, FIAH, Lucknow was not taken over (October 2023), whereas FIAH, Kanpur Nagar was taken over (August 2023) conditionally due to non-completion of works.
- GoUP submitted proposals of ₹ 46.50 crore, ₹ 21.20 crore, ₹ 15.00 crore and ₹75.00 crore for construction of thirteen, eight, six and five FIAHs during the years 2018-19, 2019-20, 2020-21 and 2022-23 respectively. GoI did not approve these 32 proposals mainly due to not completing of earlier approved FIAHs and other desired/required formalities⁹.

Thus, due to improper selection of site and delayed completions of the hospitals, the benefits of the scheme were either extended belatedly or not extended to the targeted beneficiaries at all.

The Government stated (January 2025) that out of 19 FIAHs sanctioned during 2015-16 to 2018-19, 16 FIAHs have been operationalised¹⁰; action for delayed completion of 6 FIAHs sanctioned during 2020-21 and 2021-22 is being taken; eight FIAHs not approved by GoI were approved in subsequent SAAPs and the Government has its own parameters for sanctioning the projects. The fact remains that no action for delayed completion of 11 FIAHs has been taken, and GoI did not approve other 24 FIAHs mainly due to non-completion of earlier projects.

3.2.2 Construction of new Dispensaries

Under NAM, one time grant of ₹ 30 lakh is provided for construction of new building and procurement of furniture, equipment, IT provision for AYUSH Health Management Information System (HMIS) etc., in cases where the AYUSH dispensaries were running in a rented building, or the existing Government building is dilapidated and beyond economical repairs.

Audit observed that based on the proposal submitted in SAAP for the year 2021-22, GoI sanctioned (December 2021) ₹ 73.50 crore for construction of 250 new dispensaries. SAS nominated (December 2021) UP Projects Corporation Limited (UPPCL) as EA for the work; and released¹¹ (December 2021) an advance of ₹ 2.99 crore to the UPPCL. At the instance of SAS, UPPCL submitted (December 2021) a model estimate of ₹ 29.90 lakh, which included ₹23.90 lakh for civil work and ₹ 6.00 lakh for furniture and hospital equipment (F&HE). The estimate submitted by UPPCL was forwarded (December 2021) to UP Public Works Department, Lucknow (PWD) for technical examination.

⁶ Amethi, Bareilly, Deoria, Kanpur Dehat, Kanpur Nagar, Kaushambi, Lalitpur, Lucknow, Sant Kabir Nagar, Sonbhadra and Varanasi.

⁷ Five (Bareilly, Bulandshahr, Kanpur Nagar, Lucknow and Varanasi), One (Basti), Ten (Amethi, Ballia, Deoria, Jalaun, Kanpur Dehat, Lalitpur, Kaushambi, Saharanpur, Sant Kabir Nagar, Sonbhadra) and Five (Maharajganj, Agra, Raebareli, Baghpat and Fatehpur) FIAHs sanctioned during 2015-16, 2016-17, 2017-18 and 2018-19.

⁸ Transfer certificates mentioning dates of completion was issued during November 2021 and June 2022.

⁹ The state did not submit cost estimate as well as commitment towards creation of regular post for proposed hospitals alongwith SAAP for the years 2019-20 and 2020-21.

¹⁰ Two are completed whereas stay order has been issued by Hon'ble High Court on FIAH, Saharanpur.

¹¹ In anticipation of approval of the estimate submitted (December 2021) by E-n-C.

After vetting¹² (January 2022), PWD evaluated cost of the work for ₹ 23.17 lakh, excluding F&HE. Audit further noticed that:

- The Chairman of SAS directed (December 2021) to delete the F&HE component from the detailed estimate and hence, UPPCL provided (January 2021) an estimate of ₹ 6.00 lakh for construction of boundary wall, gate, interlocking, branding etc. in place of F&HE. After revision in rates of GST from 12 *per cent* to 18 *per cent*, UPPCL revised the estimates of civil work for ₹ 24.81 lakh and estimates of boundary wall and gate for ₹ 4.59 lakh¹³ (total: ₹29.40 lakh) per dispensary, which was approved (February 2022) by SAS. Though, the cost of ₹29.40 lakh per dispensary included cost of civil work as well as cost of F&HE, IT provision for AYUSH HMIS etc, SAS approved entire cost of construction on civil works only. Even the civil work did not include works for branding F&HE etc.
- GoI sanctioned construction of 250 dispensaries based on the list of sites provided (December 2021) by the Director, Ayurveda Services. Mission Director, informed (March 2022) the Director, Ayurveda Services that 49 sites were not available, indicating that the selection of sites were not done with proper care. Though list of new sites was provided (March 2022) to EA; 26 HWCs were incomplete and work on 4 dispensaries was not started (September 2023) for want of sites.
- After making (December 2021) payment of ₹ 2.99 crore, SAS released four instalments of ₹67.23 crore¹⁴ to EA during December 2021 to July 2023, duly putting on record that the quality of work carried out was satisfactory. The frequent complaints received from the districts/DAUOs, however, indicated that the quality of the works was not up to the mark¹⁵. For instance, a three-member committee constituted (June 2022) by the District Magistrate, Deoria for inquiring various irregularities reported in construction of Ayurvedic dispensary, Nautan Hathiyagarh, Deoria found that against the provision of one metre, foundation of the building was only 15 cm deep; brick soling was done without Plain Cement Concrete (PCC) work on foundation; bricks used were of substandard quality; and submersible pump was installed after boring upto 60 meters only, against the provisions of 75 metres. However, neither any penalty was imposed, nor the firm was blacklisted.

The Government stated (January 2025) that since new dispensaries were to be constructed in place of old dispensaries and their equipment could be reused, the cost of equipment has been utilised in civil work and EA has suspended the erring official. Reply does not address the issue as SAS incurred excess expenditure against the norm on civil works. The Government did not reply regarding selection of the sites.

¹² E-n-C, however, returned (January 2022) the estimate highlighting various discrepancies; and sought some further information/document. SAS communicated (January 2022) the discrepancies to UPPCL. UPPCL rectified the discrepancies and submitted (January 2022) revised lay out and estimate of ₹ 29.98 lakh to PWD.

¹³ The estimate of ₹ 4.59 lakh included boundary wall and gate without branding.

¹⁴ First (December 2021): ₹ 2.99 crore; Second (March 2022): ₹ 11.71 crore; Third (June 2022): ₹ 25 crore; Fourth (January 2023): 18.37 crore; Fifth (July 2023): ₹9.16 crore, total ₹67.23 crore (including advance of ₹2.99 crore).

¹⁵ There are various other complaints of similar nature from other districts against EA.

3.3 Upgradation of Hospitals and Dispensaries

3.3.1 Upgradation of 4-bedded and 15/25 bedded Hospitals

AYUSH Services component of NAM, *inter alia*, provides¹⁶ one time grant up to ₹ 75 lakhs and ₹ 20 lakh for undertaking construction and renovation of existing premises of Government AYUSH hospitals and dispensaries respectively.

Audit noticed that GoI approved upgradation of two 15/25-bedded hospitals and 10 Ayurveda dispensaries during the year 2016-17, which were completed in December 2018 and September 2018 respectively. GoI also approved (2021-22) upgradation of ten 15/25-bedded Ayurvedic hospitals and 39 Ayurveda dispensaries during the year 2021-22 at a total cost of ₹ 15.34 crore. GoUP nominated (June 2022) C&DS as EA for the work. Out of the approved ten 15/25-bedded and 39 Ayurveda dispensaries, work for only five¹⁷ 15/25-bedded and 20¹⁸ 4-bedded hospitals (against the approval of dispensaries) respectively were awarded (June 2022) and funds of ₹ 4.83 crore was released to EA, without executing any agreement and without prescribing scheduled dates of start and completion of work. EA completed (October 2024) five 15/25-bedded and thirteen 4-bedded hospitals, and the work on seven 4-bedded hospitals were in progress despite lapse of 18 months of award of work.

The Government stated (January 2025) that out of the sanctioned ten 15/25 bedded hospitals, five were in a dilapidated condition and their upgradation was not possible; in Appraisal Committee Meeting (July 2022), civil work of only 20 four-bedded Ayurvedic hospitals were approved, of which work on 13 hospitals have been completed, two are in progress, work on remaining 5 hospitals were executed out of the funds available locally; and execution of MoU has now been started. Reply indicates lack of proper mechanism in selection of hospitals for upgradation, awarding of the works and completion of work in a given time frame.

3.3.2 Upgradation of Dispensaries to Health and Wellness Centres

GoI decided (January 2019) to upgrade at least 12,500 HWCs¹⁹ under *Ayushman Bharat* by the Ministry of AYUSH. Accordingly, it approved (March 2020) the proposal to operationalise these HWCs under the broad umbrella of NAM in a phased manner by 2023-24.

Audit noticed that GoI sanctioned 1034 dispensaries for upgradation as HWCs for the State of UP during 2019-20 to 2022-23. The details given in **Table-5** indicates status of operationalisation of the HWCs:

¹⁶ Including furniture, fixtures, equipment, etc. and recurring Grant of ₹ 0.70 Lakhs per annum as lump sum contingency fund is provided.

¹⁷ The remaining 5 hospitals were in a dilapidated condition.

¹⁸ 17 hospitals were in a dilapidated condition and one hospital was previously constructed under Zila Yojna.

¹⁹ To provide primary healthcare through AYUSH; to establish a holistic wellness model based on AYUSH; and to provide the informed choice to the needy. It includes preventive and promotive measures for self-care.

Table 5: Details showing sanction of HWCs and funds released

Year	HWCs proposed in SAAP (No.)	No. of HWCs sanctioned	Budget approved			Budget released		Total
			Recurring	Non-recurring	Total	Recurring	Non-recurring	
2019-20	523	324	2255.60	2434.82	4690.42	2255.60	2434.82	4690.42
2020-21	268	268	833.51	1620.37	2453.88	833.51	1620.37	2453.88
2021-22	279	279	1442.43	1911.15	3353.58	1442.43	1911.15	3353.58
2022-23	60	60	310.20	411.00	721.20	142.20	290.60	432.80
	103	103	532.51	293.55	826.06	0	169.95	169.95
Total	1233	1034	5374.25	6670.89	12045.14	4673.74	6426.89	11100.63

(Rupees in lakh)

(Source: State AYUSH Society)

Audit noticed irregularities in implementation of the component, as discussed in succeeding paragraphs:

3.3.2.1 Lack of bottom-up approach in selection of dispensaries for upgradation as HWCs

Operational Guidelines for HWCs provide that the first stage for each state is to develop a road map with the number of HWCs that is required to be created in a phased manner. The guidelines further provide need-based location of HWCs, where health care facilities are comparatively lacking, based on a joint exercise of Departments of Health and AYUSH to avoid overlapping of catchment areas.

Audit observed that there was no planning in the department for creation of HWCs in a phased manner. While proposing names for the upgradation of HWCs, neither joint exercise for identification of health care facilities for upgradation was conducted, nor the need-based location of HWCs were ensured. As a result, the Director, Ayurveda proposed 42 such HWCs during 2019-21, of which 28 were not found feasible for upgradation²⁰ and nine HWCs were already upgraded. UPSCIDCO further (October 2021) informed SAS that the work on 32 out of 324 HWCs and 42 out of 268 HWCs sanctioned during 2019-20 and 2020-21 respectively were not required as it were already done by other construction agency/existence of newly constructed building or building being in a dilapidated condition. Further, as per guidelines, HWCs were to be established at a site where comprehensive healthcare facilities were lacking. Audit noticed that 92 HWCs were established in the dispensaries/hospitals where YWCs were already established. These instances indicate that need-based selection²¹ of location of HWCs, where the health care facilities were lacking, was not ensured.

The Government stated (January/February 2025) that need-based list for upgradation, provided by the districts and consolidated at Directorate level, was included in SAAP, since there was no Sub-centre of Health Department for upgradation as HWC, there was no need to hold joint exercise with the same, and there was no restriction on establishment of HWCs in already established YWCs. The reply is not acceptable as inclusion of not feasible/already upgraded dispensaries for upgradation indicates lack of proper system for selection of site; joint exercise with Health Department was required under the guidelines to avoid overlapping of catchment areas, and HWCs were to be established where health care facilities were lacking.

²⁰ Due to dilapidated condition of buildings (24), water logging (3) and the buildings belonging to allopathy (1).

²¹ Since human resource provided in YWC was one Yoga Trainer and one Assistant, and in HWC was two Yoga Instructors, establishing HWCs in already running YWCs resulted in duplicity of resources one place.

3.3.2.2 Upgraded HWCs lacked basic requirements

As per Operational Guidelines for HWCs, essential requirement for strengthening of HWC included electricity supply. The cost norm for upgradation of a dispensary to HWC also included non-recurring and recurring grants of ₹ 0.35 lakh and ₹ 0.05 lakh per HWC for lap-top and IT networking. Further, NAM guidelines required one male (M) and one female (F) Yoga Instructor (YI) in each HWC and has fixed criteria for various stages of functionality of HWCs, which is progressive stage²², functional stage-I²³ and functional stage-II.

Audit noticed that out of 1034 HWCs sanctioned during 2018-19 to 2022-23, electricity and internet connection was not available (January 2025) in 219 (21 per cent) and 528 (51 per cent) HWCs respectively. Further, no IT equipment was provided to these HWCs.

The Government stated (January 2025) that electricity and internet connection is available in 815 and 506 HWCs and tendering process for procurement of desktop was in progress.

3.4 Lack of adequate facilities in building infrastructure

Delivery of quality service through public health care system requires availability of basic facilities in the hospitals/dispensaries. AYUSH Department of GoUP has not standardised norms for providing basic facilities in its dispensaries and hospitals. However, *Ayushman Bharat* guidelines on HWCs issued (2020) by GoI and sanctions granted (July 2015) by GoUP on cost norms based on the standardised layouts for construction of dispensaries and 4, 15 and 25 bedded Ayurvedic hospitals, included facilities as summarised in **table 6**:

Table 6: Details showing facilities required in different categories of HCFs

Category	Facilities included
HWCs	Examination space, waiting space, space for audio-visual aids, space for wellness activities, space for practice of yoga and space for demonstration of medicinal plants.
Dispensary	MO's Room (1), Examination Room (1), Waiting Area (1), Dispensary (1) and Toilet (1)
4-Bedded hospital	MO's Room (1); Examination Room (1); Waiting Area (1); Dispensary (1); 4-bedded ward (1); Toilet attached to MO Room (1); and Western Commode (WC) (1), Toilet (1), Bathroom (1) attached to Ward.
15-Bedded hospital	MO's Room (2) with attached Toilet (1); Sister's Room (1); Operation Theatre (1), 4-bedded Ladies Ward (1) with attached WC (1) and Bathroom (1); 11-bedded Gents Ward (1) with attached WC (2) and Bathroom (1), Multipurpose Hall (1); Dressing Room-cum-store (1), Dispensary (1); Dispensary Store and Lobby (1)
25-Bedded hospital	Medical Officer's Room (1) with attached Toilet (1); Sister's Room (1); Operation Theatre (1), 4-bedded Ladies Ward (1) with attached WC (1) and Bathroom (1); 11-bedded Gents Wards (2) with attached WC (2) and Bathroom (2), General Store (1) Multipurpose Hall (1); Lobby (1), Dressing Room (1), Dispensary (1) and Dispensary Store.

Joint Physical Verification (JPV) by audit team and information furnished by test checked dispensaries, hospitals and HWCs revealed that:

²² (1) Infra structure completed; (2) Branding completed; (3) Herbal Garden Established; (4) Essential Medicine supply available (5) Deployment of CHOs; and (6) Deployment of Yoga Instructors.

²³ (1) Training of CHOs completed; (2) Training of Yoga Instructors completed; (3) OPD started (4) Training of ASHA completed (5) IT equipment purchased; (6) Laboratory Services available.

- Out of selected 7 Ayurveda, 3 Unani and 16 Homeopathic dispensaries (total 26 dispensaries), separate dispensary for medicine were not available in 8 dispensaries (2 Ayurveda and 6 Homeopathy), waiting space was not available in 11 dispensaries (2 Ayurveda, 1 Unani and 8 Homeopathy) and toilet was not available in 11 dispensaries (4 Ayurveda, 2 Unani and 5 Homeopathy).



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- Out of selected 18 Ayurveda and 16 Unani 4 bedded hospitals, MO room was not available in 2 hospitals (1 Ayurveda and 1 Unani), Examination room was not available in 29 hospitals (14 Ayurveda and 15 Unani), dispensary for medicine was not available in 9 hospitals (5 Ayurveda and 4 Unani), Waiting Area was not available in 13 hospitals (6 Ayurveda and 7 Unani).
- Out of selected two 15-bedded Ayurvedic hospitals, Sister's room was not available in one hospital and dispensary store was not available in the other hospital, attached toilets, OT, and lobby was not available in both the hospitals. Similarly, out of five selected 25-bedded hospitals, attached toilet, Sisters' room, OT, dispensary store, lobby and toilets (4-units) were not available in two, three, five, one and two hospitals respectively.
- Out of 32 Ayurvedic (7 dispensaries, 18 four-bedded, 2 fifteen-bedded and 5 twenty-five-bedded hospitals), 19 Unani (3 dispensaries, 16 four-bedded) and 16 homeopathic (all dispensaries) health care facilities, 19 Ayurvedic (4 dispensaries, 9 four-bedded, 2 fifteen-bedded, 4 twenty-five bedded), 13 Unani (four-bedded) and 11 homeopathic dispensaries were running in the rented or voluntarily provided buildings.
- JPV of 8 HWCs²⁴ in eight test checked districts revealed that examination room was not available in two HWCs, waiting space was not available in one HWC; adequate space for audio visual aids were not available in 3 HWCs, appropriate space for wellness activities and for practice of yoga was not available in one HWC; and adequate space for demonstration of medicinal plants in the garden or display of potted plants was not available in one HWC.
- JPV of 83 test checked AHCFs (26 dispensaries, 34 four-bedded, 7 fifteen/twenty-five bedded, eight HWCs and eight YWCs) revealed that, condition of 13 buildings (3 dispensaries and 10 four-bedded hospitals) were not good.

²⁴ As per paragraph 5.3 of Ayushman Bharat guidelines, building infrastructure for HWCs require provision of space for outpatient care, diagnostic services, display of IEC materials including audio-visual aids, wellness activities including yoga and physical exercise, demonstration of medicinal plants in the garden or display of potted plants.

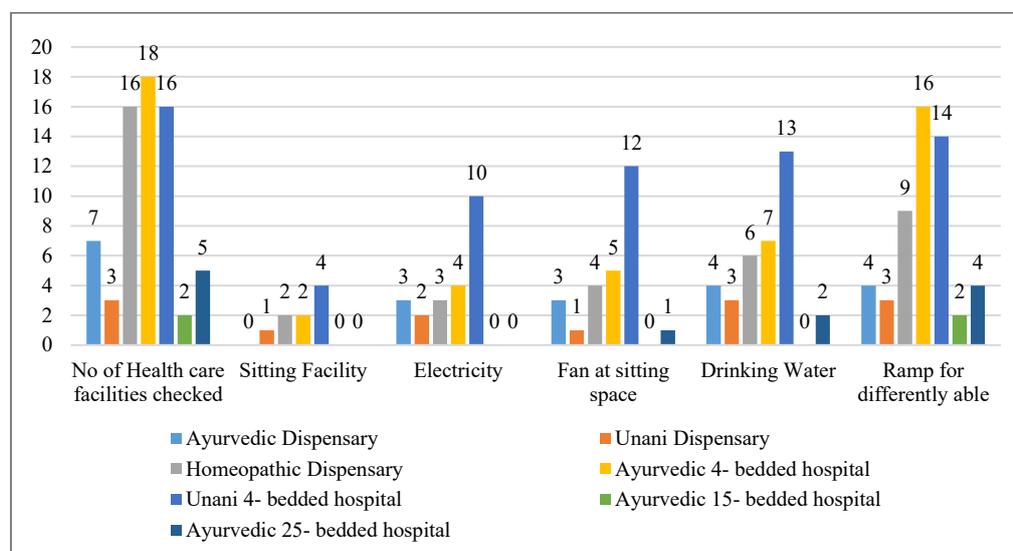
- Indian Public Health Standards²⁵ (IPHS) 2022 for PHCs required to adopt earthquake proof measures in hospital buildings and to take environmental clearance which includes seismic safety. Department of AYUSH has neither standardised nor adopted the IPHS for its Primary HCFs. Information furnished by 25 Ayurvedic, 19 Unani and 16 Homeopathic dispensaries/hospitals and 8 HWC test checked in audit revealed that none of the building structures was earthquake proof. Further, provision of seismic safety was not made in any of the buildings.

The Government furnished (January 2025) no relevant reply except stating that instructions have been issued (October 2023) for standardisation of lay out plans of different construction works and buildings; and MO rooms, dispensary for medicine and waiting space would be provided in Unani hospitals.

3.5 Lack of basic amenities in the Hospitals and dispensaries

Joint Physical Verification of dispensaries and 4,15 and 25 bedded revealed that basic amenities were not available in many AHCFs as shown in **Chart 1**:

Chart 1: No of test checked primary healthcare facilities where basic amenities were not available



(Source: Information furnished by test checked hospitals and dispensaries)

The Government stated (January 2025) that the facilities, wherever lacking, are being provided from the state budget through the concerned Directorates.

To sum up, the structure of health care facilities was not uniform in all the three system of medicine. There was uneven distribution of primary, first and second referral units amongst the four geographical regions, and inequitable distribution of AYUSH health care facilities in districts within the region. Delays in completion of construction and upgradation of the buildings of AYUSH healthcare facilities; and failure of the Department in timely operationalisation of these buildings served to aggravate the problem of inadequate access to quality health care. A total of 25 fifty bedded integrated hospitals (FIAHs) were sanctioned during 2015-16 to 2022-23. Out of 19 FIAHs sanctioned during 2015-16 to 2018-19, only 11 FIAHs were

²⁵ IPHS provides norms for healthcare centres running under allopathic system of medicine

inaugurated in December 2021 and made functional upto March 2023 due to delayed completion of work. The dispensaries and hospitals also lacked basic facilities. Further, out of 1034 HWCs sanctioned during 2018-19 to 2022-23, electricity and internet connection was not available (January 2025) in 219 (21 *per cent*) and 528 (51 *per cent*) HWCs respectively.

Recommendation 3: The Government should explore the possibility of a uniform structure of health care facilities in all three systems of medicine, and also ensure its equitable distribution amongst all the four geographical regions and also in districts within the region.

Recommendation 4: The Government should ensure timely completion of construction and upgradation works and also timely operationalisation of the health care facilities.

Recommendation 5: The Government should ensure availability of basic facilities in the dispensaries and hospitals.

