GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA
STARRED QUESTION NO.292
TO BE ANSWERED ON THE 23RD MARCH, 2021
SPECIAL AUDIT COMMITTEE REPORT ON FINANCIAL IRREGULARITIES AT SIC

292 SHRI RAM NATH THAKUR:

Will the Minister of Health and Family Welfare be pleased to state:

(a) when the report of Special Audit Committee regarding financial irregularities at Sports Injury Centre (SIC), Safdarjung Hospital, Delhi was submitted;

(b) the findings and recommendations of the Committee;

(c) the comments of Government on the Special Audit Committee Report;

(d) the actions taken till date based on the findings;

(e) whether the Central Vigilance Commission (CVC) is required to be consulted;

(f) the current status and whether Government contemplates to take action in this matter of public interest; and

(g) whether the Audit Committee Report has been pending for more than 2 years without any substantive action and, if so, the reasons therefor?

ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(DR. HARSH VARDHAN)

(a) to (g) A Statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO RAJYA SABHA STARRED QUESTION NO. 292* FOR 23RD MARCH, 2021

(a) & (b) The Special Audit Committee constituted to look into various irregularities involved in the procurement of equipment in Sports Injury Centre (SIC) Safdarjung Hospital, submitted its report to the Ministry on 30th November, 2018.

The major recommendations of the Committee *inter-alia* include the following:-

i. Considering large scale irregularities and violation of General Financial Rules (GFRs) /Central Vigilance Commission (CVC) instructions, the Government may consider detailed investigation in the matter.
ii. Annual requirement of Orthopaedic implants be objectively assessed and attempts should be made to discover the lowest rates, by leveraging benefits of economy of scales.
iii. Procurement of equipment, devices and services may be rationalized keeping in view the usefulness and usability of the same.
iv. The Indenting Officer (HOD) may be made personally accountable for submitting false indent.
v. Usage of high value equipment and devices may be audited annually.
vi. Appropriate systems and procedures may be put in place for enhanced rationalization, objectivity, transparency and economy in procurement of equipments, devices and consumables.
vii. The officers associated with indent and procurement processes may be exposed to latest relevant GFRs and instructions issued by Government, CVC, Competition Commission of India (CCI), etc. through appropriate training modules.

(c) to (g) The detailed examination of the various recommendations of the Special Audit Committee were carried out at various levels *i.e.* Safdarjung Hospital, SIC, Directorate General of Health Service (Dte.GHS) and the Ministry. As advised by the Special Audit Committee, detailed investigation has been carried out through various Committees in the matter. As regard fixing up of responsibilities, action is being taken as per Vigilance Manual.

As regards systemic improvement, procurement of items through GeM and adherence to GFR is being strictly emphasised by the Ministry. Committees are in place for evaluation of technical and financial bids received through tenders to identify the lowest bidder. Further, internal Audit Team has also carried out audit of the central Government Hospitals.

In-house training sessions have been organised by Dte.GHS and Finance Division of the Ministry to create awareness on Delegation of Financial Power Rules (DFPR) and GFR from time to time. Systemic improvements are continuous process and are being proactively encouraged.

*****