

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

**LOK SABHA
UNSTARRED QUESTION NO. 3001
TO BE ANSWERED ON 6TH DECEMBER, 2019**

ROGI KALYAN SAMITIS

3001. DR. (PROF.) KIRIT PREMJBHAI SOLANKI:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) the objectives and the rationale behind the constitution of Rogi Kalyan Samitis;
- (b) the total number of Rogi Kalyan Samitis that have been set up in the country, State/UT-wise;
- (c) the criteria for eligibility and selection of the members of a Rogi Kalyan Samiti; and
- (d) whether Rogi Kalyan Samitis have been successful in meeting their intended objectives and if so, the details thereof?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI ASHWINI KUMAR CHOUBEY)**

- (a): The Rogi Kalyan Samities (RKSs)/ Hospital Management Society (HMS) were introduced in 2005, as a forum to improve the functioning and service provision in public health facilities, increase participation and enhance accountability. The broad objectives of the RKS are to serve as a consultative body to enable active citizen participation for the improvement of patient care and welfare in health facilities.
- (b): A statement showing numbers of Rogi Kalyan Samitis registered, State/UT-wise, under National Health Mission, up to June, 2019 is given at **Annexure-I**.
- (c): The Rogi Kalyan Samiti (RKS) comprises of a Governing Body (GB), which is responsible for policy formulation and oversight, and an Executive Committee (EC), responsible for, implementing policy decisions and facilitating operation of patient centric services. The members of these two bodies of RKS are selected according to their 'suggested composition' in the RKS Guidelines, which is given at **Annexure II**.
- (d): Under National Health Mission every year Common Review Mission (CRM) teams are directed to visit public health facilities to oversee the functioning of RKS along with implementation of various schemes and programmes in selected States. The CRM teams' observations indicate that RKS are receiving the untied funds every year and are making useful contributions towards improvements in provisions of healthcare services and patient amenities. However there is a need to further build the capacities of RKS members to improve the functioning of RKS. The findings of CRM are shared with States/UTs for corrective action.

Annexure-I

Statement showing State/UT-wise Rogi Kalyan Samitis registered, , under
National Health Mission

Sl.no.	State	RKS registered
1	Bihar	2003
2	Chhattisgarh	999
3	Himachal Pradesh	667
4	Jammu & Kashmir	795
5	Jharkhand	582
6	Madhya Pradesh	1617
7	Orissa	1795
8	Rajasthan	3008
9	Uttar Pradesh	1710
10	Uttarakhand	330
11	Arunachal Pradesh	228
12	Assam	1221
13	Manipur	126
14	Meghalaya	150
15	Mizoram	85
16	Nagaland	167
17	Sikkim	30
18	Tripura	153
19	Andhra Pradesh	1385
20	Goa	36
21	Gujarat	2200
22	Haryana	640
23	Karnataka	2930
24	Kerala	1296
25	Maharashtra	3535
26	Punjab	670
27	Tamil Nadu	2586
28	Telangana	1074
29	West Bengal	1223
30	A&N Island	29
31	Chandigarh	5
32	D&N Haveli	6
33	Daman & Diu	6
34	Delhi	34
35	Lakshadweep	9
36	Puducherry	48
	All India	33378

Source: NHM-MIS report as on June 2019.

1. (a) Composition of Governing Body (GB) at District Hospital

- (i) GB chairperson: in-charge Minister/ local MP/ president Zila Panchayat/ District Magistrate
- (ii) Member Secretary: Medical Superintendent/Civil Surgeon/Hospital- in- charge
- (iii) Members (ex-officio)

- District Magistrate, (if not chairperson)
- Local MLA, in whose jurisdiction the health facility is located
- Chairperson of Zilla Panchayat
- Mayor/Chairperson of the Urban Local Body at the District Hospital headquarters.
- Chief Executive Officer, District Panchayat
- Commissioner/Chief Municipal Officer, Municipal Corporation/Council.
- Chief Medical and Health Officer
- Medical Superintendent In-charge of DH- Member Secretary
- District AYUSH Officer
- District Officer of Departments of Women and Child Development, Water and Sanitation, Education, Social Welfare, Public Health Engineering Department, Public Works Department, (including Electrical and Mechanical), Electricity Board.
- Individuals/ institutional donors who contribute equal to or more than the stipulated amount for associate membership

- (iv) Nominated Members (names to be recommended by Member Secretary / District Magistrate)

Á Three eminent citizens, of whom one must be a female, nominated by the Chairperson from the names recommended by Member Secretary/ District Magistrate

Á Two Civil society representatives

Á One Representative of local medical college, if any. The senior specialists in-charge of different wards and DPHN/Nurse Matron should be invited as permanent special invitees.

(b) Composition of Executive Committee at District Hospitals –

- (i) Chairperson - District Magistrate
- (ii) Member Secretary - Civil Surgeon/Hospital in Charge.
- (iii) Members (ex-officio)

Á Chairperson of Standing Committee on Health of Zila Panchayat

Á Chief Executive Officer, District Panchayat

Á Commissioner/Chief Municipal Officer, Municipal Corporation/ Council.

Á Chief Medical and Health Officer

Á District AYUSH Officer

- Á District Officer of Departments of Women and Child Development, Water and Sanitation, Education, Social Welfare, Public Health Engineering Department, Public Works Department (including Electrical and Mechanical), Electricity Board.
- Á Individuals/ institutional donors who contribute equal to or more than the stipulated amount for associate membership
- Á Senior specialists in-charge of different wards and DPHN/Nurse Matron

(iv) Nominated Members

- Á Three eminent citizens, of whom one must be a female, nominated by the Chairperson
- Á Two Civil society representatives
- Á One Representative of local medical college, if any.

2. (a) Composition of Governing Body (GB) at Sub District Hospital (SDH)/CHC

(i) Chairperson: Member of Legislative assembly/ Sub District Magistrate / Block Development officer Panchayat Samiti

(ii) Member Secretary: Medical Superintendent/MO in-charge of the facility.

(iii) Members:

- Á Block Medical Officer,
- Á AYUSH doctor from CHC,
- Á Block Development Officer, Programme Officer,
- Á ICDS, Block Education Officer, block level representatives of Education, Drinking Water and Sanitation, Social Welfare
- Á Two eminent citizens and two civil society representatives.

(b) Composition of Executive Committee at SDH / CHC –

- Chairperson should be Sub-District Magistrate and Member Secretary should be the Medical Superintendent/MO in-charge of the facility
- Members would include one PRI representative who should be Chairperson of the Health sub- Committee of the Janpad Panchayat /Block Panchayat.
- Block Medical Officer, Block level of cers of ICDS, Water and Sanitation and Education.
- Two eminent citizens and two civil society representatives that are GB members.
- Individuals/ institutional donors who contribute equal to or more than the stipulated amount for associate membership
- Chairperson may call such other Officer/person as special invitee.

3. Composition of Governing Body (GB) at Primary Health Centre (PHC):

(a) Composition of Governing Body at PHC: Members would include AYUSH Medical Officer, Anganwadi Supervisor, two eminent citizens, two civil society representatives, Chairperson/member of Janpad Health Sub-Committee, School headmaster

(b) Composition of Executive Committee at PHC –

- Chairperson should be Medical Officer and Member Secretary, AYUSH MO or staff nurse nominated by MO I/C.
 - Members would include one nominated Pharmacist, the CDPO, block staff of Department of Drinking Water and Sanitation and Department of Education, Chairperson/Member, Janpad Panchayat - Health Sub - committee
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