## GOVERNMENT OF INDIA MINISTRY OF SOCIAL JUSTICE & EMPOWERMENT LOK SABHA

### UNSTARRED QUESTION NO. †1417 TO BE ANSWERED ON 08.12.2015

### **†1417. CSS FOR SENIOR CITIZENS**

### SHRI ALOK SANJAR: SHRI VIRENDER KASHYAP:

#### Will the Minister of SOCIAL JUSTICE AND EMPOWERMENT be pleased to state:

(a) the details of the Centrally sponsored schemes being implemented for the welfare of senior citizens;

(b) whether the Government has taken any concrete steps to make the said schemes more effective; and

(c) if so, the details and outcome thereof?

#### ANSWER

# MINISTER OF STATE FOR SOCIAL JUSTICE AND EMPOWERMENT (SHRI VIJAY SAMPLA)

(a) to (c) This Ministry does not implement any Centrally Sponsored Schemes for the welfare of senior citizens. However, Ministry of Health and Family Welfare launched the "National Programme for the Health Care of Elderly" (NPHCE) during the year 2010-11 under a Centrally Sponsored Schemes for providing dedicated health care facilities to senior citizens (above 60 years of age) at primary, secondary and tertiary health care delivery system.

The basic aim of NPHCE is to provide separate and specialised comprehensive health care to the senior citizens at various levels of state health care delivery system including outreach services.

The major activities of the NPHCE are:-

- i) Setting up of Geriatric department in indentified Regional Geriatric Centres(RGC) with OPD care services and 30 bedded Geriatric ward for providing indoor services. RGCs will also undertake PG Courses in Geriatric for developing Human Resource.
- ii) Setting up of Geriatric units at all District Hospitals that will provide specialist services. A 10 bedded Geriatric Ward will also be set up for providing indoor services.
- iii) Establishment of Rehabilitation unit at all Community Health Centres(CHCs) and Geriatric clinic twice/week
- iv) Setting up weekly Geriatric clinic by trained Medical Officer at Primary Health Centres(PHCs).

v) Information, education and Communication (IEC) on healthy life style, home care to the bed ridden and supported devices for the needy elderly persons at the sub-centre level.

As on date, a total of 104 districts of 24 States/UTs and 08 regional Geriatric Centres have been covered under NPHCE.

The Ministry of Rural Development is also implementing a Centrally Sponsored Schemes of National Social Assistance Programme (NSAP), under which Old age pension is provided under Indira Gandhi National Old Age Pension Scheme(IGNOAPS) to persons of the age of 60 years or more and belong to below poverty line(BPL) household. Under IGNOAPS, central assistance of Rs. 200/-p.m. is provided in the age group of 60-79 years and Rs. 500/- is provided to the persons of 80 years or more. Rate of assistance under IGNOAPS is restricted only to the BPL households and not to all senior citizens.

As part of the Government's decision Direct Benefit Transfer (DBT) in Phase-1 was rolled out from 1st July, 2013 in the 3 Pension Schemes of NSAP on pilot basis in 121 districts. Now from 12<sup>th</sup> December 2014, the DBT has been extended to across the country. The total no. of beneficiaries digitized is 271 lakh, beneficiaries having Bank/Post Office Accounts are 161 lakh.

In order to increase the transparency and accountability in the implementation, it had been decided to computerise the data base of the beneficiaries under various schemes of NSAP. Accordingly, the software namely NSAP-MIS had been developed by NIC. The software captures all the essential process and includes modules on identifications, disbursement of pension, release of funds, verification, sanction of pension, ground for refusal etc.

The Ministry of Social Justice & Empowerment is implementing a Central Sector Scheme of Integrated Programme for Older Persons (IPOP) under which grants-in-aid are given for running and maintenance of *inter-alia*, Old Age Homes, Day Care Centres, Mobile Medicare Units etc. The main objective of the Scheme is to improve the quality of life of Older Persons by providing basic amenities like shelter, food, medical care and entertainment opportunities etc.

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