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

LOK SABHA UNSTARRED QUESTION NO. 3242 TO BE ANSWERED ON 5TH AUGUST, 2016

JANANI SHISHU SURAKSHA KARYAKARAM

3242. SHRI LAKHAN LAL SAHU:

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

(a) whether the Government has reviewed/assessed the implementation of Janani Shishu Suraksha Karyakaram (JSSK) in the country;

(b) if so, the details thereof and the findings thereof along with the short comings thereon; and

(c) the corrective steps taken/being taken by the Government to remove the said shortcomings?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI FAGGAN SINGH KULASTE)

(a): Periodic reviews and field visits are undertaken at various levels to assess the implementation of Janani Shishu Suraksha Karyakram (JSSK) by the States.

Since the launch of JSSK, 5th, 6th & 7th, 8th & 9th Common Review Mission (CRM) have also independently reviewed the implementation of JSSK in selected districts of the States.

National Health Systems Resource Centre (NHSRC) has also undertaken periodic independent field visits.

Deloitte has also conducted review of JSSK in the States of J&K, Rajasthan, Uttarakhand and West Bengal in June 2013 and is currently undertaking 2nd round of evaluation study on JSSK in 7 states of Bihar, Madhya Pradesh, Rajasthan, Uttar Pradesh, Chhattisgarh and Jharkhand and Assam.

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- (b): The following observations are based on the reports of these visits:
 - Policy articulations and dissemination of information on the entitlements is present in all states.
 - The awareness about the entitlements of pregnant women under the JSSK scheme has improved.
 - The JSSK entitlement for pregnant women and sick infants upto one year of age is operational across all states, resulting in considerable reduction in out of pocket expenditures.
 - Free drugs, diagnostics, diet and assured home to facility transport as well as drop back has improved across all the states.
 - OPD and IPD services are provided free of cost to all pregnant beneficiaries in all the states.
 - The provision for free diagnostic facilities, including basic lab tests, for pregnant women has improved significantly in most of the states.
 - Provision for blood for pregnant women and sick infants is available at all the District Hospitals visited.
 - Free diet is being provided to the pregnant beneficiaries in most of the States
 - Awareness & IEC on JSSK needs further improvement
 - Close monitoring by State & District on any out of pocket expenditure
 - Out of pocket expenditure on drug, diagnostics and referral transport for pick up or drop back is still existing
 - Emphasis on entitlements for infants needs improvement
 - Grievance Redressal is still weak and require strengthening across all states.

(c): The corrective steps taken/being taken by the Government for effective implementation of JSSK are

- Periodic Regional and State level Review meetings
- Communication through different channels with State Governments including letters, video-conferencing etc.
- Field visits by Central level teams to monitor the progress of implementation.
- Quarterly reporting from the States on achievements of free entitlements under JSSK.
- Popularizing the Scheme through Information Education & Communication (IEC) & Behaviour Change Communication (BCC) strategies including mass media.
- Field level workers like ANMs and ASHAs are promoting this programme at the ground level through interpersonal communication.
- Referral transport for pregnant women, and infants is being provided by the States as per their local needs, using different models which include a network of emergency response vehicles using toll free number, government ambulances, available transport under public private partnership etc.
- A mechanism of regular supportive supervisory visits to the states and districts to monitor the implementation of JSSK is also put in place and is effective in the implementation of the programme.

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