Women and Child Development Department

1.2 Integrated Child Development Services Scheme

Highlights

The Integrated Child Development Services (ICDS), a Centrally sponsored scheme, was launched in 1975-76 with the main objective of improving the nutritional standard and health status of children in the age group of zero to six years and to enhance the capability of mothers to look after the health of their children. Performance audit of the scheme brought out deficiencies in its implementation. Coverage of children and women beneficiaries under various components of the scheme was inadequate. About 44 per cent of the children in the age group of zero to six years were malnourished at the end of 2009-10. Huge funds were drawn in advance of requirement and were kept in bank accounts. About one-fifth of the targeted Anganwadi buildings were not constructed despite availability of funds. Facilities such as drinking water and toilets were not available in 73 and 57 per cent Anganwadi Centres respectively. Non-testing of food to check adequate micronutrients, non-maintenance of records of referral services, etc. also indicated deficient implementation of the scheme.

Funds amounting to ₹ 10.62 crore were drawn in advance of requirement, of which ₹ 4.54 crore remained unspent for 12 to 24 months of their drawal.

(Paragraph 1.2.7.3)

Coverage of beneficiaries under ICDS increased by only two *per cent*, despite increase of 29 *per cent* in Anganwadi Centres during 2005-10.

(Paragraph 1.2.8.1)

Against the target of constructing 1,179 Anganwadi buildings, only 965 buildings were constructed during 2005-10. Funds amounting to ₹ 7.10 crore remained unspent.

(Paragraph 1.2.8.2)

Out of 17,444 Anganwadi Centres, drinking water facilities in 12,760 Anganwadi Centres and toilet facilities in 9,922 Anganwadi Centres were not available.

(Paragraph 1.2.8.3)

Shortfall in the coverage of children under the Supplementary Nutritional Programme ranged between 46 and 57 *per cent* while in the case of mothers, it was between 25 and 30 *per cent.*

(Paragraph 1.2.9.1)

Achievement of targets for enrolment of children for non-formal pre-school education declined from 84 to 58 *per cent* during 2005-10.

(Paragraph 1.2.12.1)

There were shortfalls between 13 and 23 *per cent* in the achievement of targets for imparting training to staff.

(Paragraph 1.2.14.2)

1.2.1 Introduction

The Integrated Child Development Services (ICDS) scheme, a Centrally sponsored scheme, was started in 1975-76. The objectives of the scheme were:

- to improve the nutritional standard and health status of children in the age group of zero to six years;
- to reduce the incidence of mortality, morbidity, malnutrition and school dropouts among children;
- to achieve effective co-ordination and policy implementation amongst the various concerned departments and
- to promote child development and enhance the capability of the mother to look after the normal health and nutritional needs of the child.

These objectives were to be achieved with a package of services such as supplementary nutrition, immunization, health check-ups and referral services, non-formal pre-school education to children between three and six years of age and nutrition and health education to all women in the age group of 15-45 years. The scheme was implemented in 137 ICDS projects through 17,444 Anganwadi Centres (AWCs) as of March 2010. Though the scheme was being implemented for the last 35 years, about 44 *per cent* children were malnourished at the end of March 2010.

1.2.2 Organisational set up

The Financial Commissioner and Principal Secretary to the Government of Haryana, Women and Child Development Department is the administrative head at the Government level. The Director, Women and Child Development is the overall in-charge for administration, co-ordination, implementation and monitoring of the scheme and is assisted by a Joint Director, a Chief Accounts Officer, a Deputy Director at the Directorate level, Programme Officers (POs) at the district level and Child Development and Project Officers (CDPOs) at the block level. The ICDS package of services is delivered through AWCs set up in every village or ward of urban slum areas by Anganwadi Workers (AWWs).

1.2.3 Audit Objectives

The main objectives of the performance audit were to assess whether:

- the planning for the implementation of the scheme was adequate for achievement of its objectives;
- adequate funds were provided by the Central/State Governments and were utilised for the intended purposes;
- adequate facilities were provided in each Anganwadi Centre;
- the prescribed procurement procedure was adopted and various components of the scheme were implemented economically and effectively and as per the prescribed guidelines and
- implementation of the scheme was effectively monitored and periodically evaluated to ensure improvement in the nutritional and health standards of children.

1.2.4 Audit criteria

The audit findings were benchmarked against the following criteria:

- Scheme guidelines.
- Norms for identification of beneficiaries.
- The prescribed procurement procedure and quality assurance norms of food.
- Punjab Financial Rules as adopted by the Haryana and
- The prescribed monitoring mechanism.

1.2.5 Audit methodology and coverage

The methodology adopted was to test check records with reference to provisions of the guidelines of the scheme, the Punjab Financial Rules and Government orders and instructions. The sample for audit covered records relating to budget, expenditure, manpower policies, inventory control and various registers required to be maintained under the guidelines of the scheme. Records relating to implementation of the scheme for the period 2005-10 were test-checked between January and April 2010 in the Directorate of Women and Child Development. Five[14] out of 20 districts along with three[15] blocks under each district (15 blocks) and three AWCs under each block. Districts were selected by using the probability

[14] Faridabad, Hisar, Jind, Kaithal and Sonipat.

[15] Faridabad (NIT), Faridabad (Rural), Ballabgarh (Urban), Hisar (Urban), Hisar I, Narnaund, Jind (Urban), Jind (Rural), Alewa, Kaithal (Urban), Kaithal (Rural), Pundri, Sonipat (Urban), Sonipat (Rural) and Kathura.

proportionate to size sampling (PPS) method. The number of beneficiaries were also kept in view while selecting the districts.

An entry conference was held in January 2010 with the Director, Women and Child Development Department in which important issues regarding implementation of the scheme, audit objectives and audit criteria were discussed. A meeting was held with the Director in July 2010 in which all the audit findings were discussed. An exit conference was held in November 2010 with the Financial Commissioner and Principal Secretary to Government of Haryana, Women and Child Development Department. The views of the department were taken into consideration while finalising the performance audit report.

Audit findings

1.2.6. Planning

Proper planning and survey of beneficiaries are imperative for achieving the objectives of programmes/schemes. It was observed that surveys of children within the age group of zero to six years and lactating and pregnant mothers were carried out by AWWs regularly but surveys to identify all the women in the age group of 15-45 years to educate them about the importance of nutrition and healthcare, as envisaged in the scheme, were not conducted.

The services under the ICDS package are delivered through AWCs set up at the village level and wards of urban slums. Infrastructure like buildings for AWCs along with facilities of drinking water, toilets, tables and chairs, toys, etc. were to be created for efficient and smooth delivery of quality services. A long-term Perspective Plan was essential so that the envisaged facilities were provided within a specific timeframe. It was, however, noticed that though the scheme was being implemented in the State from 1975-76, the department had not prepared any Perspective Plan for providing these facilities in the centres. Due to lack of planning, a large number of AWCs were deficient of various facilities as discussed later in paragraph 1.2.8.3.

1.2.7 Financial management

1.2.7.1 Funding pattern

Except for the cost of supplementary nutrition[16], the Government of India (GOI) provided *cent per cent* funds for implementation of the scheme upto 2008-09. The expenditure on administration from the year 2009-10 was to be borne by the

[16] Additional nutritive diet containing 500 calories and 20 to 25 gram protein to pregnant/nursing mother and 300 calories and 8 to 10 gram protein to zero to six years old children.

Centre and State Government in the ratio of 90:10. From 2005-06, GOI also extended assistance for supplementary nutrition at the rate of half of the financial norms laid down for various categories of beneficiaries or 50 *per cent* of the actual expenditure on supplementary nutrition, whichever was less. In addition to this, out of eight State Plan schemes viz. providing best mothers' awards, arranging sports meets for women, constitution of village level committees, *sakshar mahila samooh*[17], granting of nutrition awards and awards for improving the declining sex ratio, providing swings to Anganwadi Centres implemented under ICDS, a specific scheme to curb anaemia amongst children of zero to six years and pregnant/lactating mothers was also funded by GOI.

1.2.7.2 Budget provision and expenditure

The budget provisions and expenditure during 2005-10 were as under:

Table 1: Budget provisions and expenditure under ICDS

(₹ in crore)

Year	Budget estimates		Revised estimates		Expenditure		Excess (+)/ savings (-)	
	Central Plan	State Plan/ Non-Plan	Central Plan	State Plan/ Non-Plan	Central Plan	State Plan/ Non-Plan	Central Plan	State Plan/ Non-Plan
2005-06	51.96	5.16	54.17	5.04	54.17	5.04	-	-
2006-07	60.62	8.24	59.79	9.04	59.79	9.04	-	-
2007-08	67.00	24.86	65.17	28.24	65.17	28.24	-	-
2008-09	71.00	37.31	87.98	31.10	87.98	32.17	-	(+) 1.07
2009-10	138.53	43.56	112.94	64.65	108.13	64.65	(-) 4.81	-

Note: **Figures for the year 2009-10 are provisional.**
Source: **Detailed Appropriation Accounts.**

Table 2: Budget provisions and expenditure under Supplementary Nutrition Programme (Central/State Plan Schemes funding on sharing basis)

(₹ in crore)

Year	Budget estimates	Revised estimates	Expenditure	Excess (+)/ savings (-)
2005-06	64.89	40.46	40.46	-
2006-07	57.57	68.11	72.74	(+) 4.63
2007-08	139.63	136.03	136.90	(+) 0.87
2008-09	144.02	117.24	117.24	-
2009-10	181.00	145.71	145.71	-

Note: **Figures for the year 2009-10 are provisional.**
Source: **Detailed Appropriation Accounts.**

Budget estimates of the Supplementary Nutrition Programme were not prepared on a realistic basis.

The Director stated (July 2010) that the surrender of funds under Supplementary Nutrition Programme during 2005-06 was due to the availability of ready-to-eat food at lower rates than the rates fixed by GOI. Excess expenditure in 2006-07 was attributed to upward revision of nutritional norms while the savings in 2008-09 and 2009-10 were reportedly due to less attendance of beneficiaries and diversion of funds towards the Old Age Pension Scheme of the State by the Finance Department.

1.2.7.3 Parking of funds

The following table depicts the funds drawn in advance of requirements from the

[17] Group of literate women.

treasuries for various purposes, the amounts utilised/deposited back in treasuries and unspent balances:

Table 3: Details showing parking of funds

Month of drawal	Purpose	Amount drawn (₹ in lakh)	Month of expenditure/ deposit into treasury	Amount of expenditure/ amounts deposited into treasury (₹ in lakh)	Balance (₹ in lakh)
March 2006	Purchase of furniture and durries for AWCs	143.92	May 2007 June 2007 January 2008 March 2008 January 2008 April 2008	53.49 43.07 34.68 6.31 2.18* 4.19*	Nil
March 2007	Purchase of registers for AWCs	25.85	May 2008	24.13	1.72
March 2008	Printing / binding of pre-school education Kits	86.59	July 2008 August 2009	43.00 34.56	9.03
March 2009	Printing of folders	29.40	November 2009 February 2010	21.76 7.64*	Nil
March 2009	Purchase of medicines	776.33	October 2009 March 2010 March 2010	70.02 111.19 152.30	442.82[18]
		1062.09		**608.52**	**453.57**

*** indicates the amount deposited back in treasuries.**
Source: Records of the department.

Funds amounting to ₹ 10.62 crore were drawn in advance of requirement, of which ₹ 4.54 crore remained unspent for 12 to 24 months after their drawal.

From the above table, it is evident that out of ₹ 10.62 crore drawn from the treasuries, ₹ 6.08 crore was utilized/deposited back in the treasuries after eight to 25 months. The balances amounting to ₹ 4.54 crore were lying with the department as of March 2010 in the form of bank drafts and fixed deposit receipts outside the Government account for 12 to 24 months from the time of their drawal from the treasuries, which was irregular. The Finance Department also clarified (March 2009) that drawing of funds in anticipation of requirements and parking unutilised funds outside Government account was against State Financial Rules.

During the exit conference, the Director, while admitting the facts, stated that the funds were drawn to avoid lapse of the budget grants and assured that this practice would not be repeated in future.

1.2.8 Implementation of scheme

1.2.8.1 Establishment of Anganwadi Centres

Anganwadi Centres (AWCs) are the focal point for delivering the package of services under ICDS to the children and mothers at their doorsteps. AWCs were

[18] Interest of ₹ 23.86 lakh was earned on this amount.

to be set up in every village with a population of 500-1500 (revised to 400 or more from November 2008).

The table below details the number of ICDS projects, AWCs sanctioned, and coverage of population (eligible children and pregnant and lactating mothers) during 2005-10:

Table 4: Number of Anganwadi Centres and coverage of population

(Population in lakh)

Year	Number of ICDS projects	Number of AWCs	Population (Children and mothers)		Population not covered (*per cent*)
			To be covered (Targets)	Actually covered (Achievement)	
2005-06	116	13,546	22.56	11.93	10.63 (47)
2006-07	128	16,359	24.66	14.06	10.60 (43)
2007-08	137	17,444	25.67	13.38	12.29 (48)
2008-09	137	17,444	25.83	13.00	12.83 (50)
2009-10	137	17,444	25.90	12.21	13.69 (53)

Source: Progress report of the department.

Although AWCs increased by 29 *per cent*, increase in coverage of population was two *per cent*..

Although there was an increase from 13,546 to 17,444 i.e., 29 *per cent* in the number of AWCs during 2005-10, the increase in coverage of population was only two *per cent* (from 11.93 lakh to 12.21 lakh) by the end of March 2010.

The Director stated (July 2010) that the monitoring mechanism had been strengthened to ensure participation of community members and stakeholders, for which all the Deputy Commissioners of districts had been asked to monitor the implementation of ICDS scheme at the grassroot level to increase the attendance of beneficiaries in AWCs.

Further, as per the guidelines, an AWC was to be considered operational when both the Anganwadi Worker (AWW) and the Anganwadi Helper (AWH) were in position in the AWCs and the services of SNP and pre-school education were delivered for 300 days in a year. It was observed that services of SNP and pre-school education were delivered for 300 days during the years 2005-06 to 2009-10 but both the AWW and the AWH were not in position in all the AWCs during the period. The AWCs not having both AWW and AWH were also shown as operational by the department as depicted in the table below:

Table 5: Number of AWCs shown operational not conforming to norms

Year	Number of AWWs in position	Number of AWHs in position	Number of AWCs required to be shown as operational	Number of AWCs shown as operational	Number of AWCs shown as operational but not conforming to norms
2005-06	13,427	13,484	13,427	13,546	119
2006-07	16,234	16,249	16,234	16,359	125
2007-08	17,149	17,020	17,020	17,444	424
2008-09	17,276	17,116	17,116	17,444	328
2009-10	17,271	17,060	17,060	17,444	384

Source: Data supplied by the department.

Thus, 119 to 424 (one to two *per cent*) AWCs shown as operational during 2005-10 did not conform with the norms. The Director stated (February 2010/November 2010) that additional charge of AWCs was given to the nearby AWWs and the Programme Officers (POs) were directed to initiate action for filling up the vacant posts of AWWs at least three months before the

vacancy actually occurred. The reply indicates that the POs had not taken timely action to fill up the vacant posts of AWWs and AWHs during 2005-10 to ensure providing of services for child development as provided in the scheme.

1.2.8.2 Construction of Anganwadi Centre buildings

The AWC is not only the place where the package of services under the ICDS scheme is delivered but also a focal point for village women where they can congregate and discuss various issues freely. Most of the AWCs were functioning in village *chaupals*, *dharamshalas*, rented buildings, primary schools and at the residences of AWWs and AWHs. In order to provide a clean and healthy environment to the beneficiaries, the Government released ₹ 32.14 crore for the construction of 1,179 AWCs to the Panchayati Raj Department through the concerned Additional Deputy Commissioners during 2005-10 as per details given below:

Table 6: Construction of Anganwadi Centres

Year	Number of AWCs to be constructed	Funds released (₹ in crore)	Cost per AWC (₹ in lakh)	Target month for completion	Number of AWCs constructed as of June 2010	Funds utilised for construction (₹ in crore)	Shortfall (percentage)	Delay in months	Funds remaining unspent (₹ in crore)
2005-06	363	7.55	2.08	December 2005	356	7.40	7 (2)	54	0.15
2006-07	256	5.32	2.08	March 2007	243	5.05	13 (5)	39	0.27
2007-08	207 63	9.29	3.44	March 2008 December 2008	243	8.36	27 (16)	27 18	0.93
2008-09	87 203	9.98	3.44	March 2009 December 2009	123	4.23	167 (58)	15 6	5.75
Total	**1,179**	**32.14**			**965**	**25.04**	**214 (18)**		**7.10**

Source: Data supplied by the department.

Against the target of constructing 1,179 AWC buildings, only 965 buildings were constructed despite availability of funds.

The Director stated (July 2010) that the remaining AWCs could not be completed on due dates due to elections, delays in site selection/disputes, etc. The reply of the department is not acceptable as the model code of conduct was not applicable to the ongoing construction works. Further, the model code of conduct was in force for only 30 days in 2008-09 and 114 days in 2009-10 for Lok Sabha and Vidhan Sabha elections and for short periods (34 to 48 days) for by-elections in some constituencies. The Financial Commissioner and Principal Secretary stated (November 2010) during the exit conference that 43 more AWCs had been constructed as of October 2010. Even after taking the latest position into account 171 AWCs (2005-06: 7, 2006-07: 10, 2007-08: 21 and 2008-09: 133) remained incomplete.

1.2.8.3 Facilities in Anganwadi Centres

Drinking water facilities were not available in 12,760 AWCs and toilet facilities were not available in 9,922 AWCs.

Under the scheme, stress was laid on providing safe drinking water and hygienic and sanitary conditions in the AWCs. Though the ICDS scheme was being implemented in the State from 1975-76, inadequate facilities persisted in the AWCs as of July 2010. In 5,238 (30 *per cent*) *out* of 17,444 AWCs, neither drinking water nor toilet facilities were available. Out of remaining the 12,206 AWCs, drinking water facilities were not available in 7,522 AWCs and toilet facilities were not available in 4,684 AWCs. Thus, drinking water and toilet facilities were available only in 4,684 (27 *per cent*) and 7,522 (43 *per cent*) AWCs respectively. Though the scheme was being implemented for about 35 years, the department was not able to provide these facilities in all the AWCs in a time-bound manner.

During exit conference, the Director, while admitting the facts stated that funds of ₹ 3.99 crore had been released in the current year to provide for these facilities, including provision for cooking and storage space for supplementary nutrition.

The Government sanctioned ₹ 8.80[19] crore during 2007-09 for providing infrastructural facilities for children like swings, tables and chairs at AWCs. Out of this, ₹ 5.80 crore was placed at the disposal of Village Level Committees (VLCs) through the concerned POs and ₹ three crore was diverted by the Finance Department towards the Old Age Pension Scheme. The purchases were to be made by VLCs in rural projects under the supervision of the Deputy Commissioners (DC)/Additional Deputy Commissioners (ADC) and POs and by committee of DC/ADC and POs in urban projects. It was observed that in 17 out of 21 districts (information in respect of Rohtak, Ambala, Jhajjar and Yamunanagar was not available at the Directorate), as against the allocation of ₹ 4.79 crore, only ₹ 4.28 crore was spent. The balance ₹ 0.51[20] crore was available with the VLCs in 10 districts. Delays in purchasing the material deprived children in AWCs of play material, tables and chairs.

The Director, while admitting the facts, stated (July 2010) that POs had been directed to request the committees constituted for the purpose to finalise the purchases within a month.

1.2.9 Supplementary Nutrition Programme

Under the Supplementary Nutrition Programme (SNP), all children upto the age of six years and pregnant/lactating mothers were to be enlisted. The AWWs were responsible for conducting surveys of the villages, identifying and enlisting children up to six years as well as pregnant and lactating mothers for providing supplementary nutrition.

1.2.9.1 Inadequate coverage of beneficiaries

Supplementary nutrition was to be provided for 300 days in a year as per the programme. Details of the coverage of eligible beneficiaries during 2005-10

[19] 2007-08: ₹ 4.80 crore and 2008-09: ₹ 4 crore.

[20] Bhiwani: ₹ 0.03 crore; Faridabad: ₹ 0.01 crore; Fatehabad: ₹ 0.06 crore; Gurgaon: ₹ 0.06 crore; Jind: ₹ 0.03 crore; Karnal: ₹ 0.02 crore; Narnaul: ₹ 0.05 crore; Panchkula: ₹ 0.05 crore; Panipat: ₹ 0.09 crore; Rewari: ₹ 0.11 crore.

are given below:

Table 7: Coverage of beneficiaries under SNP

(Beneficiaries in lakh)

Year	Eligible beneficiaries		Beneficiaries provided supplementary nutrition		Shortfall *(per cent)*	
	Children	Expectant and lactating mothers	Children	Expectant and lactating mothers	Children	Expectant and lactating mothers
2005-06	19.21	3.35	9.55	2.38	9.66 (50)	0.97 (29)
2006-07	20.84	3.82	11.19	2.87	9.65 (46)	0.95 (25)
2007-08	21.67	4.00	10.53	2.85	11.14 (51)	1.15 (29)
2008-09	21.79	4.04	10.15	2.85	11.64 (53)	1.19 (29)
2009-10	21.85	4.05	9.39	2.82	12.46 (57)	1.23 (30)

Source: Progress reports of the department.

Shortfall in coverage of children under SNP ranged between 46 and 57 *per cent*, while in the case of pregnant/ lactating mothers, it ranged between 25 and 30 *per cent.*

As can be seen from the table 7 the shortfall in the coverage of eligible children ranged between 46 and 57 *per cent* while in the case of expectant and lactating mothers, it ranged between 25 and 30 *per cent*.

In the test-checked districts, the shortfall in the coverage of children (zero to six years) and pregnant/lactating mothers ranged between 49 and 56 *per cent* and 26 and 37 *per cent* respectively **(*Appendix 1.1*)**.

To ensure the benefits of the ICDS scheme, nutrition and health education was to be provided to all women in the age group of 15-45 years with priority to nursing mothers. It was, however, observed that adequate attention was not paid towards this activity as discussed in paragraph 1.2.11. This as well as the lack of basic facilities of safe drinking water, toilet, hygienic and sanitary conditions at AWCs as discussed in paragraph 1.2.8.3 resulted in less coverage of beneficiaries.

The Director, while admitting the facts, stated that with a view to increase the attendance of beneficiaries in AWCs and to implement SNP in an effective manner, several initiatives like providing creative pre-school kits, attractive and colourful tables and chairs, different types of recipes for providing food to the children, etc. had been taken.

1.2.9.2 Supply of ready-to-eat food

To improve the nutritional and health status of children in the age group of zero to six years, pregnant and lactating mothers, ready-to-eat food was to be provided under SNP. For this purpose, four supply orders for ₹ 5.34 crore were placed (February to June 2006) with a firm to supply Multi-Cereal Energy Mix Food. As per the supply orders, the food material was to be inspected by the State Level Committee. Each supply was subject to laboratory tests in any two Government approved laboratories. Further, the food material to be supplied to the POs were to be inspected by District Level Committees headed by the DCs before supplying it to the AWCs. The supplies made by the firm were to be tallied with the samples approved by the State Level Inspection Committee. Three[21] out of 19 POs, to whom the food material was supplied, observed that it was not as per the norms and rejected and returned the same to the firm while the other 16 POs

[21] Fatehabad, Gurgaon and Rohtak.

accepted the food material as per details given below:

Table 8: Details of substandard material

Sr. No.	Month of supply orders	Quantity ordered	Quantity rejected by three POs	Quantity accepted by other POs	Cost of quantity accepted (₹ in crore)
		(In quintals)			
1	February 2006	6,624.00	365.80	6,258.20	1.16
2	March 2006	6,624.00	285.00	6,339.00	1.17
3	April 2006	8,018.20	662.20	7,356.00	1.36
4	June 2006	7,581.00	420.80	7,160.20	1.32
	Total	**28,847.20**	**1,733.80**	**27,113.40**	**5.01**

Source: Departmental records.

Ready-to-eat food costing ₹ 5.01 crore was served to beneficiaries in 16 districts although it was declared sub-standard in three other districts.

It was observed that these three POs brought the matter to the notice of the Directorate but no action was taken to check the quality of food material supplied in the other districts by the same supplier. Since the supplier was the same in all the districts, the possibility of serving sub-standard 27,113.40 quintal food material costing ₹ 5.01 crore, purchased at the rate of ₹ 1,850 per quintal, to the beneficiaries by 16 other POs could not be ruled out. The Director stated (February 2010) that the District Level Inspection Committees were to ensure the quality of food as per sample and laboratory reports sent to them. The reply is not acceptable as the Director should have taken cognizance of the fact that sub-standard food was supplied in three districts by the supplier. The risk of supplying sub-standard food in the other 16 districts also could not be ruled out.

Purchase of gur/sugar coated *chana* not suitable for consumption for children was injudicious.

Similarly, gur/sugar coated *chana* was purchased for ₹ 11.55 crore and provided to beneficiaries between December 2005 and April 2006. As per reports received from 14[22] districts, the beneficiaries did not like it as the *chana* (gram) used in preparing this item was hard and not fit for consumption of children, especially in the summer season. The Director stated (February 2010) that no objections were raised by any of the POs except PO, Karnal regarding supply of sub-standard quality of food. He also stated that since the chana was hard and not suitable for children upto six years, the department decided (January 2006) to serve it to the pregnant and lactating mothers and adolescent girls. It was also decided to discontinue the supply of this item after the summer of 2006-07.

From January 2007, the system of procurement of ready-to-eat food from contractors/manufacturers was dispensed with and Government decided (November 2006), on the directions of the Supreme Court that food would be prepared by Self Help Groups (SHGs) under the supervision of Village Level Committees (VLCs). As per directions of the Directorate issued in January 2007 to all the POs and reiterated in March 2008, the quantum of protein and calories of the food material as provided in the guidelines was to be ascertained and samples were to be got tested from time to time from the District Food Laboratories. It was observed that no food sample was sent for laboratory testing nor were any tests carried out by any of the AWCs in the test-checked projects. The Director stated (February 2010) that all the POs were directed to instruct the CDPOs/Supervisors

[22] Bhiwani, Fatehabad, Gurgaon, Hisar, Jind, Jhajjar, Kaithal, Karnal, Kurukshetra, Narnaul, Rewari, Rohtak, Sirsa and Yamunanagar.

under their control to contact the VLCs/SHGs to ensure the quality of food served to the beneficiaries regularly. The reply is not acceptable as no laboratory test was carried out to ascertain the nutritious value of the food as per the scheme guidelines and to ensure that the food served to the beneficiaries had adequate protein and calorific value.

1.2.9.3 Recommended Dietary Allowances

No separate test to ascertain micronutrients in food provided to infants/children was carried out.

Micronutrients are essential to the nutritional requirements of infants and young children, adolescent girls and pregnant and lactating women and due focus is necessary to provide micronutrients in supplementary nutrition provided under ICDS. In view of this, GOI decided (January 2006) to provide 50 *per cent* of the recommended dietary allowances for different micronutrients (calcium, iron, iodine, zinc, Vitamin A, riboflavin, ascorbic acid, folic acid, Vitamin B 12) to children between six months and six years through 80 grams of ready-to-eat energy food/raw material. To ensure the content of these micronutrients, it was necessary to get the food items tested from Government laboratories.

Scrutiny of the laboratory tests carried out in April and May 2006 at the Directorate level revealed that tests were carried out only to ascertain the contents of protein and calories in the food. No separate test to ascertain the contents of micronutrients was carried out. Further, no laboratory test was ever carried out by any of the 45 AWCs test-checked to check the contents of micronutrients in ready-to-eat food. The Financial Commissioner and Principal Secretary stated (November 2010) that due to delay in finalisation of tenders for ready-to-eat food items containing micronutrients, food items with micronutrients could not be supplied during January to October 2006. Thus, food was served to the beneficiaries without confirming the addition of micronutrients in the food served during January to October 2006.

1.2.10 Package of health services

1.2.10.1 Immunisation

Shortfall in immunisation of expectant mothers ranged between 17 and 24 *per cent* during 2005-10.

To protect children in the age group of zero to six years against various diseases like diphtheria, whooping cough, tetanus, poliomyelitis, measles, etc. all children and expectant mothers were required to be immunised as per the prescribed schedules of the Health Department. For this purpose, AWWs were required to prepare a list of children below six years of age as well as of expectant mothers in co-ordination with the Health Centres. Details of targets and achievements under

immunisation of women and children are given below:

Table: 9: Details of targets and achievements under immunisation

(Beneficiaries in lakh)

Year	Yearly targets of BCG[23], DPT[24], Polio and Measles	Achievements (Percentage)				Yearly targets of TT[25] for mothers	Achievements (*per cent*)	Shortfall (*per cent*)
		BCG	DPT	Polio	Measles			
2005-06	3.96	4.02 (102)	3.91 (99)	3.88 (98)	3.86 (97)	4.65	3.80 (82)	0.85 (18)
2006-07	4.54	4.42 (97)	4.29 (94)	4.29 (94)	4.26 (94)	5.31	4.02 (76)	1.29 (24)
2007-08	4.23	4.53 (107)	4.44 (105)	4.44 (105)	4.39 (104)	4.95	4.09 (83)	0.86 (17)
2008-09	4.31	4.36 (101)	4.16 (97)	4.16 (97)	4.29 (100)	5.05	3.90 (77)	1.15 (23)
2009-10	4.33	4.53 (105)	4.30 (99)	4.30 (99)	4.48 (103)	5.04	3.96 (79)	1.08 (21)

Source: Figures supplied by the department.

Although the targets in the case of children were almost achieved, the shortfall in the case of pregnant women ranged between 17 and 24 *per cent* during 2005-10. The Director stated (July 2010) that POs had been directed to cover all the beneficiaries under the immunisation programme.

1.2.10.2 Health check-ups and referral services

Proper records of providing referral services were not maintained by AWCs.

In order to detect diseases and evidence of malnutrition or infection etc., general check-ups of all children under the age of six years was to be done after every three to six months. A close watch over their nutritional status was also to be kept by serially recording their height and weight once in a month and referring serious cases to appropriate hospitals for specialised treatment.

The nutritional status of children examined on the basis of weight measurement at AWCs during 2005-10 was as under:

Table 10: Year-wise details of malnourished children

Year	Total number of children weighed	Number of malnourished children			Total number of malnourished children	Percentage
		Grade I (Mild)	Grade II (Moderate)	Grade III and IV (Severe)		
2005-06	16,94,135	5,82,393	2,04,326	3,607	7,90,326	47
2006-07	19,03,392	6,49,426	2,11,452	2,030	8,62,908	45
2007-08	19,38,545	6,59,210	2,06,040	1,135	8,66,385	45
2008-09	20,63,878	6,91,612	2,18,187	1,031	9,10,830	44
2009-10	20,59,565	6,87,333	2,08,883	1,480	8,97,696	44

Source: Progress reports supplied by the department.

As is evident from the above table, there was no substantial improvement in the nutritional status of the children. The percentage of malnourished children ranged between 44 and 47 during 2005-10.

Details of cases required to be referred and actually referred to PHCs/CHCs were maintained only in four[26] out of the 15 test-checked blocks.

The Director stated (July 2010) that the records of referral cases would be maintained in future.

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23 Bacillus Calmette Guerin.

24 Diphtheria Pertussis and Tetanus.

25 Tetanus Toxoid.

26 Ballabgarh (Urban), Faridabad (Rural), Hisar (Urban) and Narnaund.

1.2.10.3 Supply of medicine kits

As a vital input to provide essential health check-ups and referral services, each AWC was to be provided with a medicine kit consisting of easy to use dispensable medicines as remedies for common ailments like cough, common cold, skin infections, etc. The kits were to be procured within the first six months of each financial year.

Scrutiny of records revealed that the supply of medicine kits was delayed by 12 days to six months from the stipulated period during 2005-06 and 2006-07. Mebendazole tablets meant for deworming of children were supplied only in Fatehabad and Hisar districts in November 2006 and January 2007 respectively out of the 21 districts in the State. Against the requirement of 18.31 lakh tablets (Fatehabad 6.54 lakh and Hisar 11.77 lakh), only two lakh tablets were supplied in each district. It was observed that though the supplier had not supplied the tablets, the department had not taken any action to procure these tablets from any other source. Medicine kits were not procured and issued to the AWCs in the State during 2009-10. Further, as per the scheme, the medicines were required to be procured within first six months of the financial year, but the proposal for procurement was initiated only in September 2009 and the financial sanction was accorded by the Government in February 2010. The supply orders were placed with four firms in March 2010 to supply medicines within four to eight weeks and funds to the tune of ₹ 1.04 crore were drawn from the treasury in March 2010 itself to avoid lapse of the budget grant. Thus, delay in supply/non-supply of the medicines at the AWCs deprived the children of the benefits of the scheme.

The Director stated (July 2010) that the medicines for the year 2009-10 could not be purchased due to operation of the model code conduct prior to elections. The reply is not convincing as the model code of conduct was in force upto 28 May 2009 (58 days) and from 31 August 2009 to 25 October 2009 (56 days) during 2009-10.

1.2.11 Nutrition and health education

No targets were fixed for educating women about nutrition and health care.

Under the ICDS scheme, Nutrition and Health Education (NHED) was to be given to all women in the age group of 15-45 years with priority to expectant and lactating mothers through publicity, special campaigns, home visits, etc. It was observed that targets to educate women were not fixed. The position regarding the number of women educated through home visits in test-checked blocks is given in ***Appendix 1.2***. An analysis of the data revealed that out of the test-checked blocks, the number of women educated through home visits were negligible in Ballabgarh (Urban), Narnaund and Jind (Urban) blocks while no data in this regard was supplied by the Pundri and Kathura blocks.

Further, the department had not conducted any survey to identify the total number of women in the age group of 15-45 years, which was the target group under this component. In the absence of this, the extent of coverage under the component could not be ascertained in audit.

During the exit conference in November 2010, it was stated that no targets for coverage of women were fixed but targets for home visits were fixed. Further, NHED was also provided through mass media like advertisements through newspapers, jingles on the radio and organising special camps at block and village levels. The reply is not convincing as no documented plan was made to educate all the women in prescribed age group i.e. 15 to 45 years.

1.2.12 Non-formal pre-school education

1.2.12.1 Enrolment for pre-school

As per the scheme, children between three to six years of age were to be provided non-formal pre-school education through AWCs to develop desirable attitudes, values and behaviour patterns among them. Targets for enrolment of children and achievements thereagainst were as under:

Table 11:Targets and achievements under non-formal pre-school education

(Number in lakh)

Enrolment of children for pre-school education decreased from 84 *per cent* to 58 *per cent* during 2005-10.

Year	Targets	Achievements (Percentage)
2005-06	5.41	4.55 (84)
2006-07	6.54	5.25 (80)
2007-08	6.91	4.56 (66)
2008-09	6.91	4.21 (61)
2009-10	6.30	3.65 (58)

Source: Departmental records.

The enrolment of children in AWCs decreased to 3.65 lakh in 2009-10 from 5.25 lakh in 2006-07 although the number of AWCs increased from 16,359 to 17,444 during the corresponding period.

The Director stated (January 2010) that the attendance of children for non-formal pre-school education in AWCs had decreased as the parents preferred to send their wards to Government/private schools. During the exit conference, it was also stated that the AWCs would be modernised to attract the children for non-formal pre-school education by introducing English teaching and issuance of performance certificates to children to facilitate their admission for further education.

Records of children in the test-checked blocks regarding joining of primary schools after their non-formal pre-school education were maintained only in four[27] blocks. In the absence of confirmed records, it could not be ascertained in audit as to whether all the children had joined primary schools after their non-formal pre-school education or not.

The Director, while admitting the facts, stated (July 2010) that the POs had been directed to maintain the records and send the reports of children joining primary schools to the Directorate.

[27] Ballabgarh (Urban), Faridabad (Rural), Hisar (Urban) and Narnaund.

1.2.12.2 Pre-school education kits

The pre-school education component under ICDS scheme is a crucial component, which aims at school readiness and development of positive attitudes towards education. Pre-school education kits were to be procured each year for all AWCs to strengthen pre-school education in AWCs. The Government could prepare kits of two types, one for the age group of zero to three years (Kit 'A' consisting of early stimulation play material) and the other for the age group of three to six years (Kit 'B' containing material which helped to develop pre-number concepts, vocabulary building, storytelling, conversation, etc.). Each AWC was to be provided with one or the other kit in each alternate year.

It was observed that despite drawal of funds[28] in advance in each year, pre-school education kits were procured and supplied to AWCs after delays of 16 to 28 months during 2005-08 as detailed below:

Table 12: Delay in procurement of PSE kits

Year	Nature of kits	Month of receipt	Delay from start of session
2005-06	Ankur Abhyas Pustika and Ankur Manual (Kit B)	October 2006 and February/ March 2007	18 to 24 months
2006-07	Kits containing early stimulation material (Kit A)	August/November 2007	16 to 19 months
2007-08	Ankur Pustika (Kit B)	November 2008 to August 2009	19 to 28 months

Source: Records of the Directorate.

The delays in procurement of kits was mainly due to delays in processing the cases in the department as also delays in printing of the kits by the printers. No such kits for the years 2008-09 and 2009-10 were procured due to delays in finalising the contents of the kits by the Directorate. Thus, inordinate delay/non-procurement of kits during 2005-10 defeated the national goal of GOI of improving the quality of school education in AWCs through a new initiative of regular provision of pre-school education kits in AWCs.

The Director stated (July 2010) that delays in the procurement of kits were due to late supply of material by the Printing and Stationery Department and delays in finalisation of the contents of kits.

1.2.13 Other points

1.2.13.1 Excess printing of Growth Monitoring Weight Books

The Government sanctioned (March 2007) ₹ 30 lakh for the printing of Growth Monitoring Weight Books (GMWB) for monitoring and evaluation of the growth of children. For this purpose, 24,057 books were printed (2007-08) from a firm at the rate of ₹ 124.70 per book. It was noticed that the number of operational AWCs in the State during 2006-07 was 16,359, which increased to 17,444 during

[28] February 2006: ₹ 67.33 lakh; March 2007: ₹ 81.79 lakh and March 2008: ₹ 86.59 lakh.

2007-08 and remained static upto 2009-10. The maximum requirement of books was 17,444 books, against which 24,057 books were got printed, resulting in excess printing of 6,613 books. Thus, non-assessment of requirement of books with reference to AWCs in operation resulted in an extra expenditure of ₹ 8.25 lakh.

The Director stated (July 2010) that more than one book was required in some AWCs, where the number of children was more than 200. The reply is not convincing, as the average number of children in AWCs was not more than 125 during 2007-10. Further, the department had not identified the AWCs, which required more than one GMWB.

1.2.13.2 Specific scheme to curb anaemia

Under a specific scheme to curb anaemia, all children in the age group of zero to six years, pregnant and lactating mothers and adolescent girls were to be provided iron and folic acid tablets. Children were also to be given mebendazole tablets for deworming.

Rule 2.10 (b) (5) of the Punjab Financial Rule as adopted by Haryana, provides that no money should be drawn from the treasury unless it is required for immediate disbursement.

Against withdrawal of ₹ 7.76 crore, medicines worth ₹ 3.34 crore were procured.

For purchase of medicines under the 'Specific scheme to curb anaemia', the department withdrew ₹ 7.76 crore from the treasury in March 2009 and kept the amount in the form of Remittance Transfer Receipts upto 15 June 2009 and thereafter in the form of Fixed Deposit Receipts (FDRs), which was against the above mentioned financial rule. The department placed two supply orders in March 2009 to procure medicines of ₹ 7.76 crore, out of which medicines worth ₹ 3.34 crore only (43 per cent) were supplied during 2009-10. Thereafter, no medicines were supplied by the agency. It was observed that though the suppliers did not supply the medicines even within the extended period i.e. up to November 2009, no efforts were made to procure the medicines from any other source.

The Director stated (July 2010) that the firm could not supply the medicines due to inadequate infrastructure with the firm and the supply orders were cancelled due to non-supply of the medicines after the extended period. It is not clear from the reply as to whether the capacity of the firm was taken into account before placing the supply orders due to which the medicines could not be procured as per the supply orders.

Thus, despite drawal of funds, the department failed to purchase the required quantity of medicines, depriving the beneficiaries of benefits of the scheme.

1.2.13.3 Short recovery of penalty

To equip AWCs with information on the scheme to curb anaemia, a folder to record the health status of children was devised by the department for distribution to the beneficiaries at AWCs and to all the Civil Surgeons. For this purpose, an

order for printing five lakh folders for ₹ 29.40 lakh was placed (March 2009) with a firm to supply the folders by 30 April 2009, failing which penalty at the rate of two *per cent* per week was to be imposed. As the delay in supply of printed folders ranged from 18 to 25 weeks, penalty of ₹ 11.73 lakh was to be imposed. The department released ₹ 21.76 lakh to the firm and withheld an amount of ₹ 7.64 lakh for the delayed supply, which was deposited (February 2010) back into the treasury. Penalty amounting to ₹ 4.09 lakh was short-recovered.

The Director stated (July 2010) that the firm offered the material for inspection on 28 July 2009. Therefore, penalty up to that period was imposed, which worked out to ₹ 7.64 lakh. The reply of the department is not acceptable as the material was supplied in September-October 2009.

1.2.14 Manpower management

1.2.14.1 Shortage of staff

The shortage of staff in the cadre of supervisor and AWW affected the implementation of the scheme.

As stated earlier, the Director, Women and Child Development is the overall in-charge for implementation of the scheme. He is assisted by POs at the district level and CDPOs at the block level. The ICDS package of services is delivered through AWCs set up in every village or ward of urban slum areas by AWWs. Field level functionaries comprising AWWs, Supervisors, CDPOs and POs play an important role in implementation of the scheme. The POs/CDPOs are responsible for implementation of the scheme and provide links between the scheme functionaries and the administration. Any shortage of field level functionaries adversely affects the implementation of the scheme. However, there was shortage of staff as per details given below:

Table 13: Statement showing shortage of staff

Year	Name of post	Sanctioned strength	Persons in position	Shortage
2005-06	PO	22	20	02
	CDPO	128	113	15
	Supervisor	654	648	06
	AWW	13,546	13,427	119
2006-07	PO	22	20	02
	CDPO	128	116	12
	Supervisor	654	641	13
	AWW	16,359	16,234	125
2007-08	PO	23	23	-
	CDPO	137	127	10
	Supervisor	687	624	63
	AWW	17,444	17,149	295
2008-09	PO	23	23	-
	CDPO	137	124	13
	Supervisor	687	621	66
	AWW	17,444	17,276	168
2009-10	PO	24	23	1
	CDPO	140	124	16
	Supervisor	687	606	81
	AWW	17,444	17,271	173

Source: information supplied by the department

The shortage of staff in the cadre of CDPO, Supervisor and AWW affected the implementation of the scheme as there was shortfall in coverage of beneficiaries under SNP, non-formal pre-school education, immunisation, health check-ups and nutritional and health education.

1.2.14.2 Training

There was a shortfall (13 to 23 *per cent*) in imparting training to staff.

As per the guidelines, CDPOs, Supervisors, AWWs and AWHs were required to be trained or oriented for the task assigned to them.

There was a shortfall in achievement of targets (13 to 23 *per cent*) of imparting training to staff during 2005-10 (upto September 2009) as shown in ***Appendix 1.3***. The major shortfall was in imparting of orientation/job training to AWHs. Against the target of imparting training to 7,250, only 4,691 AWHs were imparted training during 2005-10. Shortfall in imparting training had adverse impact on providing quality of services to children and women.

1.2.15 Monitoring and evaluation

A monitoring cell established in the Directorate was responsible for collecting and analysing periodic work reports as timely intervention was necessary for ensuring effective programme implementation. The AWWs were submitting monthly reports indicating the number of children, expectant/nursing mothers provided with supplementary nutrition and immunisation every month to the CDPO through Supervisors for checking, consolidation and further submission to the Director. The monitoring cell was compiling the statistical information received from AWCs. The cell was expected to report cases of underperformance to higher authorities and ensure follow-ups for improvement in services. It was observed that the monitoring cell had issued letters to the underperforming districts/units but had not followed up further to bring about the improvement. The working of the monitoring cell was not effective as there were substantial shortfalls in coverage of beneficiaries/population under the various components of the scheme.

It was stated (November 2010) that the department had devised a new format in September 2010 for monitoring the implementation of the scheme right from Supervisor/CDPO level to the Minister level.

The Health Department conducted a survey and examined the children of AWCs under Bal Swasthya Yojna during July-August 2010 to assess their health status. The survey disclosed that out of 8.93 lakh children examined, 2.37 lakh children (27 *per cent)* were anaemic.

1.2.16 Conclusion

The overall impact of implementation of the scheme was far from satisfactory as about 44 *per cent* children in the targeted age group were malnourished at the end of 2009-10. There were significant shortfalls in the coverage of targeted beneficiaries/ population under various components of the scheme such as SNP, immunisation, etc. Health check-ups of a significant number of children were not conducted to detect diseases and other evidence of malnutrition. Poor quality of food was supplied to children and pregnant/lactating mothers in certain projects. Further, drinking water and toilet facilities were not available in 73 and 57 *per cent* AWCs respectively. There were shortfalls in enrolment of children for non-formal pre-school education. The objectives of improving the nutritional and health standard of the children and enhancing the capability of mothers to ensure the nutritional and health standards of their children, thus, remained largely unachieved.

1.2.17 Recommendations

On the basis of performance audit, the following recommendations are made:

- The department should prepare a Perspective Plan to provide basic amenities such as drinking water, hygiene and sanitation in all the AWCs.
- Medicines and pre-school education kits should be made available to each AWC every year as per the norms.
- The specific scheme to curb anaemia should be implemented more rigorously to minimise cases of anaemia in the children of the State.
- Anganwadi Centres should keep proper records of health check-ups and referral cases for further follow-up.
- The department should ensure that records in respect of children who joined primary schools or dropped out after completing the stage of non-formal pre-school education are maintained at AWCs to monitor and assess the usefulness of such education towards developing their behaviour and pattern and further education.
- The scheme needs to be reviewed in the view of decline in the number of children for non-formal pre-school education and availability of facilities in Government/private schools.

These points were demi-officially referred to the Financial Commissioner and Principal Secretary to Government of Haryana, Women and Child Development Department in June 2010. Reply had not been received (August 2010).

Appendix 1.1

(Reference: Paragraph 1.2.9.1; Page 29)

Statement showing the shortfall in coverage of beneficiaries under SNP in the test-checked districts

Sr. No.	Name of district	Period	Total population within project		Number of SNP beneficiaries		Shortfall in coverage (*per cent*)	
			Zero-six years	Pregnant and lactating mothers	Zero-six years	Pregnant and lactating mothers	Zero-six years	Pregnant and lactating mothers
1	Hisar	2005-10	6,85,703	1,22,645	3,36,239	90,181	3,49,464 (51)	32,464 (26)
2	Jind	2005-10	6,35,626	1,08,849	2,93,703	78,062	3,41,923 (54)	30,787 (28)
3	Kaithal	2005-10	5,17,703	91,939	2,61,528	67,335	2,56,175 (49)	24,604 (27)
4	Sonepat	2005-10	6,50,982	1,08,257	2,90,978	79,398	3,60,004 (55)	28,859 (27)
5	Faridabad	2005-10	9,64,756	1,73,892	4,24,124	1,10,180	5,40,632 (56)	63,712 (37)

Source: Information supplied by the Directorate

Appendix 1.2

(Reference: Paragraph 1.2.11; Page 34)

Statement showing women educated under Nutrition and Health Education

Name of District	Name of block	Number of women educated				
		2005-06	2006-07	2007-08	2008-09	2009-10
Faridabad	Faridabad, NIT	-	-	3,868	2,889	3,493
	Faridabad (Rural)	3,950	4,040	4,434	3,060	4,490
	Ballabgarh (Urban)	-	-	775	765	720
Hisar	Hisar (Urban)	-	800	904	9,057	NA
	Hisar I	5,190	5,636	6,860	11,530	6,840
	Narnaund	1,220	1,281	1,276	1,230	1,230
Jind	Jind (U)	-	-	825	1,031	2,035
	Jind (R)	4,092	3,724	3,710	3,625	3,225
	Alewa	1,022	442	1,692	786	2,720
Kaithal	Kaithal (U)	-	-	1,799	12,913	12,272
	Kaithal (R)	3122	3,583	2,693	2,693	2,767
	Pundri	NA	NA	NA	3,134	NA
Sonipat	Sonipat (U)	-	3,380	3,540	3,570	3,588
	Sonipat (R)	9,999	9,999	9,999	9,999	9,999
	Kathura	NA	NA	NA	NA	NA

Source: Information supplied by CDPOs.

Appendix 1.3

(Reference: Paragraph 1.2.14.2; Page 39)

Statement showing targets and achievements of training programmes for different cadres during 2005-10

Category of staff	Name of Training	2005-06		2006-07		2007-08		2008-09		2009-10		Total		Shortfall	Percentage
		T	A	T	A	T	A	T	A	T	A	T	A		
AWH	Orientation/ Job Training	800	522	2,100	1,908	3,900	1,877	-	50	450	334	7,250	4,691		
	Refresher training Course	7,250	5,342	840	835	2,200	2,538	11,000	7,614	7,040	6,425	28,330	22,754		
	Total	**8,050**	**5,864**	**2,940**	**2,743**	**6,100**	**4,415**	**11,000**	**7,664**	**7,490**	**6,759**	**35,580**	**27,445**	**8,135**	**23**
AWW	Job Training	350	275	2,450	1,920	1,575	1,362	350	278	315	281	5,040	4,116		
	Refresher training course	6,440	5,399	600	626	1,760	2,239	9,200	7,774	8,000	6,890	26,000	22,928		
	Total	**6,790**	**5,674**	**3,050**	**2,546**	**3,335**	**3,601**	**9,550**	**8,052**	**8,315**	**7,171**	**31,040**	**27,044**	**3,996**	**13**
Supervisor	Job Training	16	22	125	14	25	19	-	-	50	39	216	94		
	Refresher training course	304	417	375	266	625	416	225	176	250	179	1,779	1,454		
	Total	**320**	**439**	**500**	**280**	**650**	**435**	**225**	**176**	**300**	**218**	**1,995**	**1,548**	**447**	**22**

T: Targets and A: Achievements

Source: Information supplied by the Directorate.