CHAPTER-II
PERFORMANCE AUDIT

HEALTH DEPARTMENT

Medical Education in Bihar

2.1 Introduction

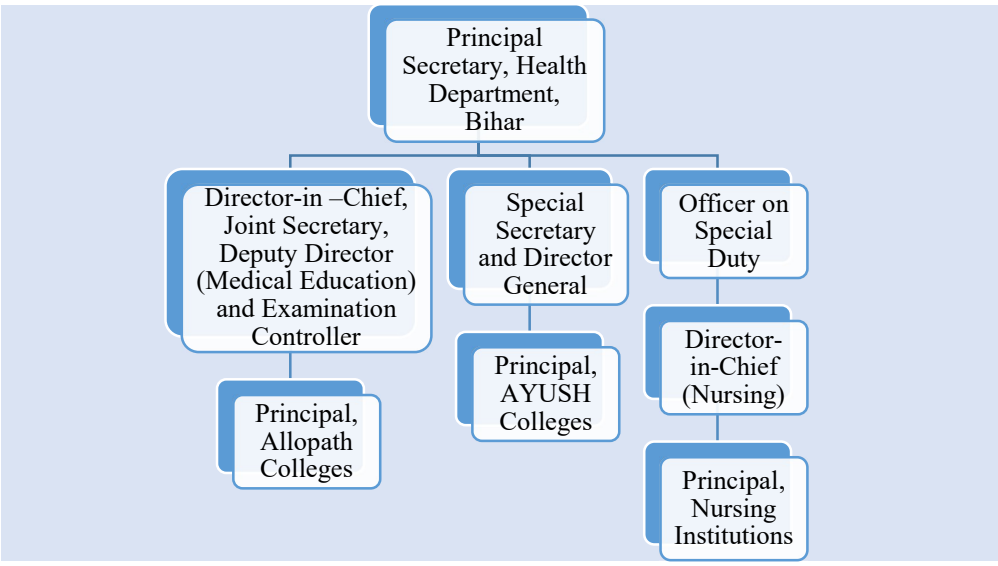
One of the dominant discourses in the public health domain within the context of provision of Universal Health coverage is the shortage of adequate number of qualified medical doctors and other healthcare professionals in India. The World Health Organisation (WHO) recommends a doctor-to-population ratio of 1:1000. To respond to this challenge, there has been a major thrust on increasing the capacity of graduate and post-graduate training programs, both in modern medicine systems as well as the traditional Indian system of medicine. The system of modern medicine is largely regulated by the Medical Council of India (MCI) and governed under the Ministry of Health and Family Welfare, whereas traditional medicine – AYUSH (Ayurveda, Yoga, Unani, Siddha, and Homeopathy) – is regulated through the Central Council for Indian Medicine (CCIM) and Central Council of Homoeopathy (CCH). The traditional Indian system of medicine is governed under an independent Ministry of AYUSH of Government of India (GoI).

Medical Council of India (MCI) recommends to Central Government cases for granting permission and recognition to start new medical colleges and to increase intake capacity for under-graduate (MBBS), post-graduate (MD/ MS/Diploma) and super-speciality (DM/M.Ch.) courses. Similarly, Dental Council of India (DCI), Central Council of Homeopathy (CCH), CCIM and Indian Nursing Council (INC) regulate dental colleges, homeopathy colleges, Ayurvedic/Unani colleges and nursing institutes respectively. The regulatory bodies prescribe norms in respect of the infrastructure to be available in the medical institutes including attached hospitals.

2.2 Organisational set-up

In Bihar, the Health Department is responsible for overseeing the functioning of medical institutions in the State. The Principal Secretary of the Department is responsible for managing the affairs and policies related to medical education. The organisational chart of the Health Department for medical education is as follows:

Chart no.-2.1
Organisational Set-up



(Source: Health Department)

Government of Bihar (GoB) created (May 2010) Bihar Medical Services and Infrastructure Corporation Limited (BMSICL) for implementation of infrastructure projects of the Health Department.

2.3 Why was this topic chosen?

National Health Policy, 2017 envisages as its goal the attainment of the highest possible level of health and wellbeing for all through a preventive and promotive health care orientation in all developmental policies, and universal access to good quality health care services. This would be achieved through increasing access, improving quality and lowering the cost of healthcare delivery.

The state of Bihar lags far behind the targets to improve health indicators as envisaged in the 12th Five Year Plan and as compared with the all-India status as shown below:

Particulars	Targets for 2012-17	Actuals (India)	Actuals (Bihar)
Infant Mortality Rate (IMR)	Up to 25	33	35
Maternal Mortality Ratio (MMR)	Up to 100	130	165
Total Fertility Rate (TFR)	Up to 2.1	2.2	3.2

(Source: Registrar General of India (Sample Registration System Data))

As per Health Index Report 2019 of NITI Aayog, among the 21 larger States, Bihar registered the maximum negative incremental change in overall performance index score, was placed at the lowest rank in key inputs/processes domain which relates to availability of health systems, service delivery, accreditation *etc.* and was third lowest in health outcomes domain which includes Still Birth Rate, Neonatal Mortality Rate, Under Five Mortality Rate, MMR, TFR, Low Birth Rate, Sex Ratio at Birth, immunisation coverage, institutional deliveries, tuberculosis cases and treatment success rate and HIV patients.

The doctor-nurse-midwife population ratio of India was 221 for one lakh population against which Bihar's ratio was 19.74

Niti Aayog, in its SDG India Index, Baseline Report 2018, has set a national target value for 2030 for number of governmental physicians, nurses and midwives per 1,00,000 population as 550. The doctor-nurse-midwife population ratio in Bihar was 19.74 per one lakh population against the national average of 221.

This topic was selected to assess the steps taken by the GoB to address the requirement of healthcare professionals in the State in terms of setting up medical colleges, augmenting capacity and infrastructure in medical colleges and providing quality medical education.

2.4 Audit objectives

The objectives of the Performance Audit were to assess whether-

- planning for implementation of schemes for opening of new medical colleges, increase in intake capacity and upgradation/strengthening of Government medical colleges was robust and plans were effectively implemented;
- physical infrastructure, equipment and manpower in medical and nursing institutions, mode of teaching (rural internship/refresher courses *etc.*) were adequate, effective and in consonance with relevant norms;
- provision of fund was adequate and its utilisation was efficient and effective; and
- monitoring of medical education was adequate, effective and in place.

2.5 Audit criteria

The audit criteria have been sourced from the following:

- Guidelines and Regulations of MCI, DCI, CCH, CCIM and INC;
- Guidelines of Indian Public Health Standard, guidelines/instructions/ indicators issued by *Niti Aayog* on SDG and 12th Five-Year Plan;
- Bihar Financial Rules (BFR), Bihar Treasury Code (BTC), Bihar Budget Manual and Bihar Public Works Accounts and Department Code; and
- Guidelines and instructions issued by GoI and GoB.

2.6 Audit coverage and methodology

The performance audit was conducted during August- November 2018 covering the period 2013-18. Audit focused on medical education imparted in government allopathy (medical, dental and physiotherapy and occupational therapy), AYUSH and nursing institutes. 23 institutes[1] out of 47 State Government institutes were selected for the performance audit on the basis of Probability Proportional to Size without Replacement (PPSWOR) method of random sampling. The list of selected institutes is at ***Appendix- 2.1***.

[1] *Five out of nine government medical colleges, four out of seven government AYUSH colleges, one Dental College, one College of Physiotherapy and Occupational Therapy and 12 out of 29 nursing institutes.*

The audit methodology consisted of document analysis, responses to audit queries, collection of information through questionnaires, and joint physical verification. An entry conference was held in August 2018 with the Principal Secretary, Health Department, wherein audit objectives, methodology, coverage and criteria were discussed. The draft report was issued to the Department in February 2019. An exit conference was also held in February 2019 with the Department to obtain its views on audit findings. No response was furnished by the Department in spite of reminders issued in April, June, September and October 2019.

Audit findings

2.7 Planning for capacity enhancement

Evaluation of the present system and assessment of future requirement is a part of the planning process. Discrepancy between the current condition and desired condition must be measured to appropriately address the need.

There was a vacancy of zero to 92 *per cent* as per desirable density envisaged in 12th Five Year Plan document

The 12th Five Year Plan document envisaged (2013) a desirable density of 85, 49, 15 and 255 for physicians, AYUSH doctors, dentists and nurses respectively for one lakh population. The requirement and its availability in Bihar was as follows:

Table no.-2.1
Requirement and availability of doctors and nurses

Particulars	Requirement as per 12th Five Year Plan@	Availability as per actuals (31 March 2018)*	Shortfall (in *per cent*)
Physicians	89845	34992	61
AYUSH doctors	51793	53918	NIL
Dentists	15855	4886	69
Nurses	269535	21896	92

@ Population of Bihar as per Press release of Ministry of Statistics and Programme Implementation dated 28/8/2018

* Data as per State Councils after taking attrition rate (25 *per cent* for doctors and 40 *per cent* for nurses).

The details of State government medical institutes in Bihar as on March 2018 was as follows:

Table no.-2.2
Details of existing government medical institutions

Type of Institution	No. of institutes	Number of UG seats
Medical Colleges	9	950
Dental College	1	40
Physiotherapy and Occupational Therapy college	1	40
AYUSH Colleges[2]	7	140
Nursing College	1	40

[2] *One Unani college (Government Tibbi College Patna), one Homeopathy College (Government RBTS Homeopathic Medical College, Muzaffarpur) and five Ayurveda colleges (Government Ayurvedic College, Patna, Government Ayodhya Shivkumari Ayurvedic College, Begusarai, Government Ayurveda College Buxar, Government Ayurveda College Bhagalpur and Government Ayurveda college Darbhanga)*

Type of Institution	No. of institutes	Number of UG seats
General Nursing and Midwifery (GNM)#	7	406
Auxiliary Nurse and Midwives (ANM)	22	1530
Paramedical Institutes (in Medical colleges)		996

 # One GNM School and Nursing college is running in one institute i.e. Indira Gandhi Institute of Medical Sciences), Patna
(Source: Health Department)

Besides, allopath and AYUSH colleges were having 517 post-graduate seats and 12 super-specialist seats.

The Department did not prepare any long-term strategic plan to assess the requirement of medical institutions and health care personnel.

The Department did not prepare any long-term strategic plan to assess the requirement of medical institutions and health care personnel for the State. However, 12 medical colleges (including one dental college) in Bihar with proposed annual intake capacity of 1,200 undergraduates and 113 nursing institutions with annual intake capacity[3] of 4,920-6,780 are in the process of development. Besides, 33 paramedical institutes with intake capacity[4] of 1,320-1,980 were also planned to be established, as shown in Table 2.3.

2.7.1 Establishment of new medical institutions

During the last decade, medical colleges/institutes were planned to be established in Bihar under different schemes as detailed below:

Table no.-2.3
Details of proposed medical institution since 2006-07

Type of Institutions	Under State Plan (2006-07)		Under Centrally sponsored schemes (2010-14)		Under SaatNischay[5] (2016-17)	
	No. of colleges	Total no. of seats	No. of colleges	Total no. of seats	No. of colleges	Total no. of seats
Medical Colleges	3##	300	3	300	5	500
Dental College	1	100	--		--	
Nursing College	--		--		16	640-960
General Nursing and Midwifery (GNM)	--		10	600	23	920-1380
Auxiliary Nurse and Midwives (ANM)	--		10	600	54	2160-3240
Paramedical Institutes	--		--		33	1320-1980

Two colleges out of these three started functioning by 2018 which are included in the nine medical colleges shown in table 2.2
(Source: Health Department)

Audit noticed that:

- Out of three medical colleges and one dental college proposed under State Plan, construction of one medical college (Pawapuri) was completed after a

[3] *93 nursing institutes under Saat Nischay planned for intake capacity of 40 to 60 seats and rest 20 institutes under CSS planned for 60 seats.*
[4] *Each paramedical institute planned for intake capacity of 40 to 60 seats.*
[5] *The main development focus of the State Government is now around seven resolves (Saat Nischay) which includes higher technical education.*

delay of more than five years. The rest were still under construction with a delay of 10 years.

- Three medical colleges proposed under Centrally Sponsored Scheme were planned to be constructed by December 2018. However, the work had not yet commenced (December 2018). Out of 10 GNM and 10 ANM schools, all ANM schools were constructed after a delay of three to four years and nine GNM schools were completed with a delay of three to seven years.
- Construction work of five medical colleges proposed under *Saat Nischay* (to be completed by May 2020) was yet to commence. Out of 126 nursing/ para-medical institutes, 61 were to be completed by 2018-19, however, only two could be completed by November 2018.

The details are discussed in the succeeding paras.

2.7.1.1 Establishment of new medical colleges under State Plan

GoB accorded (March 2007) administrative approval of ₹984 crore for construction of three medical colleges at Pawapuri, Madhepura and Bettiah (₹328 crore each). These were to be completed by March 2010. Execution of medical college of Pawapuri was entrusted to Bihar Rajya Pul Nirman Nigam Limited (BRPNNL) in March 2010 and of Madhepura and Bettiah to BMSICL in November 2012. No reason was found on record regarding delay of three to five years in entrustment of works to these executing agencies. Tenders were invited by the executing agencies in July 2010, September 2013 and August 2013 and works were awarded to contractors in January 2011, October 2014 and May 2017 respectively. There was delay in disposal of tenders by BMSICL as well as delay in execution by BRPNNL. Resultantly, the works could not be completed within the stipulated time and administrative approvals were revised to ₹ 2,170 crore[6] (221 *per cent*) by May 2013. Out of these colleges, construction of only one college *i.e.* medical college at Pawapuri was completed in September 2016 with an expenditure of ₹ 600 crore (November 2018) while the remaining two were still to be completed (December 2018). Thus, delay in completion of colleges was attributable to delay in entrustment of works to executing agencies, delay in tendering process as well as in execution of works which also led to cost overrun.

Students were enrolled in medical colleges since academic session 2013 in Pawapuri and Bettiah by utilising the infrastructure of concerned district hospitals and also the newly constructed buildings of medical college of Pawapuri which were handed over in a phased manner since 2013. Academic activities in medical college of Madhepura were yet to commence (December 2018).

2.7.1.2 Establishment of dental college under State Plan

As Bihar had only one Government dental college and hospital at Patna, GoB decided (February 2007) to establish a new dental college and hospital in Paithana,

[6] *₹ 613.11 crore for Pawapuri (March 2010), ₹ 781.25 crore for Madhepura and ₹ 775.34 crore (May 2013) for Bettiah.*

Nalanda with a view to improve dental care facility in the State. Administrative approval was accorded by GoB in March 2007 for ₹55.80 crore and the work was to be completed by 2008-09. However, Audit noticed that even after lapse of 11 years, the work was yet to commence (November 2018) which was attributable to delayed release (March 2007 to July 2012) of funds to District Magistrate, Nalanda for land acquisition, delay in selection (September 2013) of executing agency *i.e.* BMSICL, initiation of tendering process in February 2014 despite the fact that the land was acquired by the district administration in June 2011 and cancellation of tenders thrice by BMSICL *etc*. There was lack of due diligence on the part of BMSICL as in the first tendering process, the lowest tenderer, after technical and financial evaluation, was declared disqualified (May 2015), the second tendering process, which was invited in May 2015 was cancelled (May 2016) due to expiry of bid validity and in the third case, tender was invited (November 2017) but cancelled (March 2018) due to non-finalisation of qualification criteria by BMSICL. Tender was again invited for the fourth time (April 2018) and finally letter of acceptance was issued in November 2018.The first Bill of Quantity (BOQ) of this work was approved (October 2014) for ₹308.31 crore. Subsequently, for the similar category of work, BOQ was revised and approved (November 2017) for ₹ 328.81 crore. All these administrative and procedural delays not only led to a cost overrun of ₹ 20.50 crore, but also deprived citizens of envisaged additional dental care facility.

2.7.1.3 Establishment of medical colleges under Centrally Sponsored Scheme

GoI approved (February/March 2014) establishment of three new medical colleges at Purnea, Chhapra and Samastipur at a total cost of ₹ 567 crore[7] (₹ 189 crore each), with intake capacity of 100 students for each college. The projects were to be executed by BMSICL and they were to be made functional by December 2018. However, audit observed (April 2019) that these projects were at a preliminary stage only, a meagre amount of ₹ 0.18 crore[8] was spent (August 2018) against release of ₹ 145.46 crore[9] and the construction work was yet to commence (December 2018). The delay was attributable to identification/transfer of land (June 2018) to the Department and delay in tendering process for Chhapra and Purnea medical colleges. In case of the proposed medical college at Samastipur, Detailed Project Report (DPR) was not approved (July 2017) by GoI as the available land area was less than the norms prescribed by MCI. Therefore, subsequently, a new site was selected and DPR preparation was under process (December 2018). This clearly indicated lack of due diligence on the part of the Department as it could not identify the land as per prescribed norms which led to delay in commencement of the project.

As per NIT for medical colleges of Purnea and Chhapra, the due date for completion of construction was 36 months from the commencement of work. However, the work was not yet awarded (December 2018). Thus, time over

[7] *75:25 share between Centre and State*

[8] *₹ 0.18 crore spent for medical college at Chhapra only till August 2018.*

[9] *₹ 72.73 crore each for medical college at Chhapra and Purnea.*

run will deprive prospective students of the opportunity of obtaining medical education in these colleges.

2.7.1.4 Establishment of nursing institutes under Centrally Sponsored Scheme

With a view to increase the overall availability of nursing personnel as well as to correct their uneven spread, GoI decided (2010-12) to establish 10 General Nursing and Midwifery schools (GNM) and 10 Auxiliary Nurse and Midwives schools (ANM) under Centrally Sponsored Scheme, each having 60 seats with an estimated cost of ₹ 150 crore[10]. The Central Government expected these schools to be fully functional by 1 January 2012. State Government was to ensure availability of land and completion of construction within 12-14 months. In case construction took time, the State Government was to explore the possibility of running these schools from rented premises.

Audit observed that 10 ANM schools were completed by the executing agency during July 2015 to May 2016 with expenditure of ₹ 42.23 crore, whereas nine GNM schools were completed during December 2015 to July 2019 with expenditure of ₹ 72.43 crore[11]. In case of the remaining one GNM school at Purnea, the delay was due to non-availability of clear land for hostel block. Though there was delay of more than three to seven years in completion of construction, the possibility of running these schools in rented premises by 1 January 2012 was not explored by the Department. The reason for the same was neither found on record nor communicated to Audit by the Department. Thus due to lackadaisical approach of the Department, 1200 students every year remained deprived of nursing education during 2012-18.

2.7.1.5 Establishment of medical colleges under *Saat Nischay* of State Government

Against the proposed 12 medical colleges (including one dental college), only two became functional.

GoB approved (May 2016) construction of five medical colleges at an estimated cost of ₹ 2,000 crore (₹ 400 crore each) at Begusarai, Vaishali, Bhojpur, Madhubani and Sitamarhi under "*Saat Nischay"* to create additional opportunity for medical education in Bihar. The projects were to be executed by BMSICL and completed in four years with scheduled milestone of 25 *per cent* per annum. The Department requested (July 2016) the respective District Magistrates to identify and make available suitable land for the colleges. At three places (Madhubani, Begusarai and Vaishali) land was transferred (November 2018) to the Department and DPR was under preparation, and at the remaining two places, the identified land was yet to be transferred (December 2018). At this pace, the projects were behind schedule and may not be completed by the stipulated time, thereby depriving students of medical education for the delayed period.

[10] *₹ 10 crore each for GNM School and ₹ 5 crore each for ANM School. 85:15 share between Centre and State.*

[11] *Does not include the expenditure of GNM School Madhepura as the same is included in Govt. Medical College Madhepura.*

2.7.1.6 Establishment of new nursing and para medical institutes under *Saat Nischay*

GoB approved (July 2016) construction of 126 institutes having intake capacity of 5040-7560, at an estimated cost of ₹1401.03 crore[12] under "*Saat Nischay*" across all the districts of Bihar to create a better environment for technical education, address shortage of staff and generate employment. The projects were to be executed by BMSICL and completed by 2020-21 in a phased[13] manner.

Audit observed (November 2018) that out of construction of 126 institutes **(Details in Appendix 2.2):**

- Only two[14] were completed (September 2018 and November 2018),
- In 90 cases, work orders were issued but pace of work was slow even after expenditure of ₹138.45 crore (August 2018). The progress of work was ranging from 0 to 10 *per cent* in 22 works, 11 to 50 *per cent* in 40 works and 51 to 98 *per cent* in 28 works. The delay was attributed mainly to slackness on the part of the contractor, lack of availability of encumbrance-free site and subsequent change of land.
- Work orders were not issued in 22 cases because of requirement of change of site, requirement of dismantling of old building *etc.*
- In case of 12 works tenders were not invited mainly because of non-identification of land by the Department and non-preparation of DPRs by the executing agency.

Against the proposed 126 nursing institutes to be constructed from 2017-18 to 2020-21, only two were completed till November 2018.

According to the Government's own commitment, academic activities were to begin in 61institutes by 2018-19 having total intake capacity of 2,440-3660 students. However, no academic activity could start in these institutes even by March 2019.

2.7.2 Increasing intake capacity of existing medical colleges

2.7.2.1 Increase of post graduate seats under Centrally Sponsored Scheme

Under the Centrally Sponsored Scheme (March 2009) "Strengthening/up-gradation of State Government medical colleges" 199 post-graduate seats were to be increased in six medical colleges[15] at a cost of ₹ 74.43 crore[16] as

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[12] *₹ 329.34 crore for 33 Para Medical institutes, ₹ 423.96 crore for 16 BSc Nursing Colleges, ₹ 307.14 crore for 23 GNM Schools and ₹ 340.59 crore for 54 ANM Schools.*

[13] *2017-18 – 30, 2018-19 – 31, 2019-20 – 32, and 2020-21 – 33.*

[14] *Para Medical Institute Rohtas and ANM School Jagdishpur.*

[15] *Anugrah Narayan Magadh Medical College, Gaya (ANMMC Gaya)-14, Sri Krishna Medical College, Muzaffarpur (SKMC Muzaffarpur)-26, Jawahar Lal Nehru Medical College, Bhagalpur (JLNMC Bhagalpur)-58, Darbhanga Medical College, Darbhanga (DMC Darbhanga)-39, Patna Medical College, Patna (PMC Patna)-4 and Nalanda Medical College, Patna (NMC Patna)-58.*

[16] *75:25 share between Centre and State*

per recommendation of Technical Evaluation Committee (TEC)[17] with the objective of addressing shortage of faculty in pre and para clinical disciplines[18] and to ensure that specialists are available at Primary Health Centres (PHCs)/ Community Health Centres (CHCs)/district level. Components of the scheme included purchase of equipment, civil works relating to hostels, demonstration rooms, operation theatres, teaching beds, skill labs, library *etc.* Works were to be executed by the respective medical colleges. A total of 63 post-graduate seats (32 *per cent*) were increased (November 2018) in these six medical colleges against the planned 199 seats as detailed in the following table:

Table no.-2.4
Increase of PG seats under Centrally Sponsored Scheme

Sl. No.	Name of College	Number of seats to be increased	Number of seats increased	Sanctioned amount (₹ in crore)	Expenditure (₹ in crore)
1	DMC	39	13	7.09	2.65
2	NMC	58	26	18.79	6.43
3	PMC	4	0	2.69	0.34
4	JLNMC	58	4	23.49	8.58
5	SKMC	26	10	18.12	4.66
6	ANMMC	14	10	4.25	0.23
Total		**199**	**63**	**74.43**	**22.89**

Only 63 post-graduate seats were increased till November 2018 in six medical colleges against the planned 199 seats.

Audit test-checked the records of three[19] medical colleges wherein 101 post-graduate seats were to be increased against which only 39 seats (39 *per cent*) could be increased. The Department-wise information in respect of increase of seats is available in ***Appendix-2.3***. Further, it was noticed that though three to four Departments in these colleges incurred expenditure of ₹ 4.51 crore on infrastructure, equipment and faculty but no seat was increased. Non-increase of seats was attributable to lack of complete infrastructure, equipment and faculty as recommended by TEC though funds amounting to ₹ 6.53 crore were lying unspent (November 2018). The colleges were to get the work done by themselves and the fund was to be refunded to GoI in case of non-increase/ starting of PG seats in these medical colleges. However, the colleges could not take action to complete the works and PMC Patna had refunded (August 2015 and March 2018) total unspent balance of ₹ 1.14 crore.

Thus, despite availability of funds for purchase of equipment and construction works by the medical colleges, the State was deprived of the benefits of increased number of seats for post-graduate doctors.

[17] *Chaired by Special Director General Health Services, GoI to evaluate the proposals for onward submission to Empowered Committee for approval.*

[18] *Pre-Clinic subjects include anatomy, physiology, biochemistry, community medicine. Para Clinical subjects include pathology, pharmacology and microbiology.*

[19] *PMC Patna, NMC Patna and DMC Darbhanga.*

2.7.2.2 Increase of under graduate seats

The Twelfth Five Year Plan envisaged strengthening of the existing Government medical colleges so that the seats could be increased to the maximum level of 250. The existing medical colleges of the State were to be strengthened in terms of infrastructure, medical equipment and teaching and non-teaching staff in accordance with MCI norms.

In order to achieve the goal, GoB decided (July 2014) to create 3,639 posts of teaching staff of various categories in six[20] medical colleges. The Department sent (February 2016) requisition to Bihar Public Service Commission (BPSC) for recruitment of 1,171 (32 *per cent*) Assistant Professors only and that too after 19 months of Cabinet decision. No reasons were on record for not initiating any step towards recruitment of remaining staff. Due to delayed submission of required information like panel selection for scrutiny of applicants, backlog details, roster clearance *etc.*, by the Department to BPSC, advertisement could be published in April 2017 only, after more than one year of sending proposal to BPSC and the recruitment could not be finalised (December 2018). Thus, existing seats of these medical colleges could not be increased which resulted in depriving students from getting medical education.

2.7.2.3 Lack of initiative for increasing intake capacity in AYUSH

The National Rural Health Mission (NRHM), launched in 2005, has renewed the emphasis on strengthening Indian Public Health Systems in order to achieve the national goal for health for all. NRHM adopted a strategy of "Mainstreaming AYUSH and Revitalising Local Health Traditions", with the objective of co-locating AYUSH doctors at PHCs and CHCs and utilise their services to expand the basket of choices for patients.

Government *Tibbi*[21] College (GTC), Patna and Government Ayurvedic College (GAC), Patna have undergraduate intake capacity of 40 each. The minimum norms prescribed by CCIM was for upto 60 seats. However, audit observed that the colleges were offering 40 seats during 2013-18[22]. Neither the colleges nor the Department took any effective steps for increasing the number of seats from 40 to 60, thereby depriving 180[23] potential candidates of the opportunity of seeking admission in Unani and Ayurvedic undergraduate course during this period of five years.

Further, GoI declared (2006) GAC Patna as a model institute for Ayurveda and envisaged 100 undergraduate seats and post-graduate courses in at least five departments. GAC, Patna was already running post-graduate courses in two departments. However, due to shortage of teaching faculty and absence of requisite accreditation, seats could not be increased as envisaged.

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[20] *ANMMC Gaya, DMC Darbhanga, JLNMC Bhagalpur, NMC Patna, PMC Patna and SKMC Muzaffarpur.*

[21] *For Unani courses*

[22] *GTC Patna- 2013-18 (five years) and GAC Patna- 2014-18 (four years).*

[23] *GTC Patna- 100 seats and GAC Patna- 80 seats.*

On being pointed out by audit, Principal, GTC Patna stated (December 2018) that suitable initiative has already been taken to get 60 UG seats. Principal GAC Patna accepted (October 2018) that the college had minimum standard of 60 seats, however they had applied for 100 UG seats. The reply corroborates the facts that the college was already having capacity for 60 seats. As a result, 20 additional seats for which resources were available could not be put to use each year.

2.7.2.4 Non-functional Ayurveda Colleges

In four out of five *Ayurveda* colleges of GoB having 110 seats[24], admissions were not done since more than 10 years due to non-fulfilment of CCIM norms. The existing infrastructure of these colleges was also idle.

In four out of five Ayurveda colleges having 110 seats, admission did not take place for more than a decade

During test-check of *Rajkiya Ayodhya Shivkumari Ayurved Mahavidyalaya,* Begusarai (GAC Begusarai)*,* audit noticed that GoI had decided (August 2008) not to grant permission for admission to UG course on the recommendation of CCIM due to various shortcomings such as shortage of teaching and non-teaching staff, absence of adequate infrastructure facilities like area for teaching department, library and dissection hall, number of beds and bed occupancy, functional labour room, equipment like X-ray, ECG and USG in the hospital. In subsequent years (2009-18) also, CCIM had again visited (last visit in April 2017 for academic year 2017-18) and pointed out similar deficiencies. Though the college was communicating the shortcomings noticed to the Department with a request to sort out those deficiencies, the Department failed to take effective remedial steps and consequently, GoI denied permission for admission every year. As a result, the college remained idle and potential students were deprived of 300 undergraduate seats during 2008-18.

2.7.2.5 Non-granting of permission for admission by GoI

Audit also observed other instances where admissions could not be done due to non-compliance with norms of the concerned regulatory bodies, as stated below:

- Due to non-rectification of deficiencies pointed out by CCIM like non-availability of required number of higher faculty and genuinely functional Ayurveda hospital in GAC Patna, permission for admission in 2013-14 was not granted by GoI.
- GoI did not allow PDC to admit students in undergraduate course in 2015-16 on the recommendation of DCI because of deficiencies such as shortage of teaching staff including Principal, non-completion of teaching and internal assessment programme and shortage of infrastructure like dental chairs, mobile dental van, dental material, non-establishment of Satellite Dental Centres, poor maintenance of dental chairs, non-functional library and non-availability of e-library and photographic section.

[24] *Buxar-40, Bhagalpur -20, Darbhanga -20 and Begusarai -30*

2.7.3 Augmentation of tertiary healthcare services

Five[25] medical colleges of Bihar were identified in *Pradhan Mantri Swasthya Suraksha Yojana* (PMSSY) by GoI to augment tertiary healthcare services and facilities for quality medical education in seven to eight super-speciality departments. The State had to provide encumbrance-free site for construction of buildings. In the following two test-checked government medical colleges, audit observed that:

- For PMC Patna, both GoI and the State government agreed on the works to be executed under the PMSSY scheme (March 2017). Central Public Works Department (CPWD) issued the tender (December 2017) for upgradation of super-speciality departments. However, the tender opening date was extended four times and was finally cancelled (May 2018) as the college failed to provide the encumbrance-free land. Resultantly, work could not be started even after lapse of 18 months.
- In DMC Darbhanga, the construction work was to be completed by May 2018. However, the work could not be completed as the college was unable to hand over the encumbrance-free site due to delay in shifting of electric lines, poles, existing services, water supply lines, dismantling of store, canteen, waiting lounge/porch *etc.*

Principal, PMC Patna accepted (October 2018) the facts. Principal, DMC Darbhanga replied (October 2018) that the college had provided land for the establishment of a super-speciality hospital and other works were being executed by the Central agencies. Further, correspondence was made with Director in Chief (Administration) to create teaching and non-teaching posts in August 2017. However, no action was taken in this regard till October 2018.

2.7.4 Under-utilisation of seats

22 to 53 *per cent* students left under-graduate courses of dental,physiotherapy, ayurvedic and homeopathy mid-way.

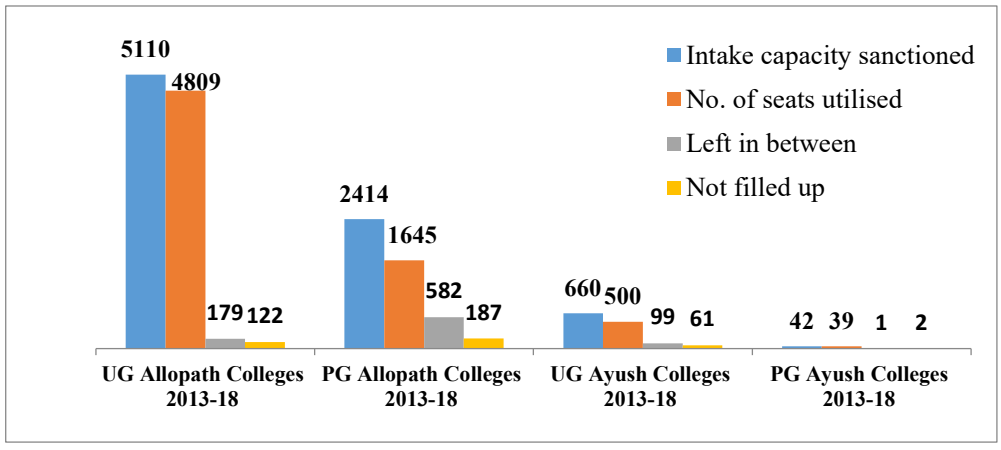
Nine medical colleges, one dental college, one physiotherapy and occupational therapy and three AYUSH medical colleges under the control of the State Government were functional during 2013-18 with intake capacity of 5770 undergraduates and 2456 postgraduate seats. Audit observed that 183 seats could not be filled up and 278 students left the course at undergraduate level, while 189 seats could not be filled up and 583 students left the course in between at post-graduate level (Details in ***Appendix-2.4***). It was further noticed that the percentage of students leaving undergraduate courses in between was more in dental, physiotherapy, ayurvedic and homeopathy (ranging between 22 to 53 *per cent*).

Under-utilisation of seats was attributable to non-allocation of seats, non–appearance of candidates for admission till the last round of counselling and

[25] *SKMC Muzaffarpur and DMC Darbhanga – November 2013, JLNMC Bhagalpur, ANMMC Gaya and PMC Patna - August 2016*

students enrolled in dental, AYUSH and physiotherapy streams leaving the courses mid-way *etc.* primarily due to getting admission in allopathy course.

Chart no.-2.2
Underutilisation of seats



(Source: Data provided by the colleges)

The above audit findings clearly indicate that there was lack of overall planning for long-term assessment of the requirement of the State in respect of number of medical institutes as well as the number of seats in the medical institutes. The delay in establishment of proposed medical institutes, non-increase in intake capacity and under-utilisation of seats of the existing medical institutes in medical colleges resulted in depriving potential students of the opportunity of medical education.

Recommendations

The Department should:

- ***identify the bottlenecks and ensure completion of all ongoing construction work of medical colleges without delay; and***
- ***make efforts to fulfil the norms of regulatory authorities on priority, so that seats in colleges are fully utilised and increased wherever planned.***

2.8 Quality of medical education

2.8.1 Shortage of teaching and non-teaching staff

Regulatory bodies prescribe minimum teaching and non-teaching staff for various medical education courses. Details of sanctioned strength and persons-in-position of teaching and non-teaching staff as on 31 March 2018 in test-checked medical and nursing institutes were as follows (College-wise details in ***Appendix-2.5***):

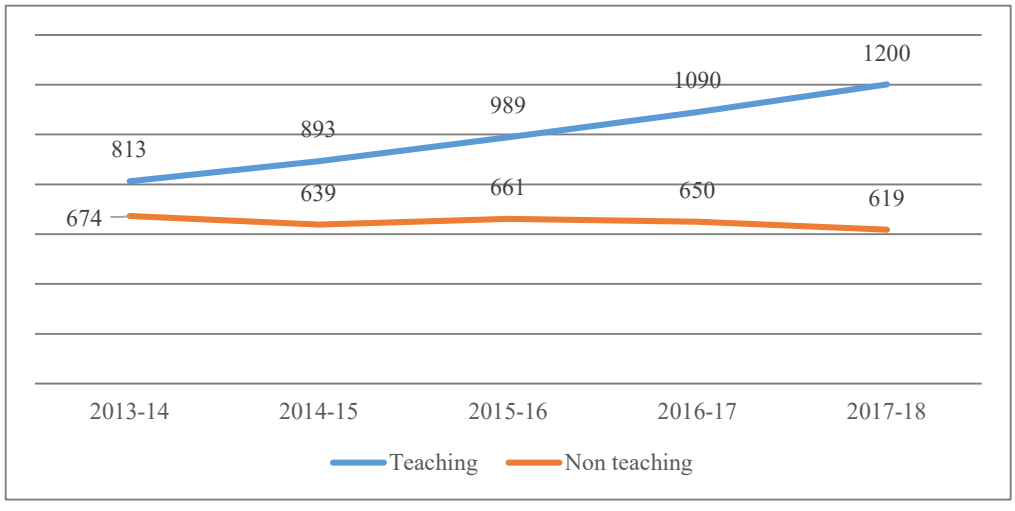
Table no.-2.5
Sanctioned strength and availability of teaching and non-teaching staff

Sl. No.	Institutions	Sanctioned strength		Persons-in-position (Figures in brackets indicate contractual staff)		Number of vacancies (Figures in bracket indicate percentage of vacancies w.r.t. SS)	
		Teaching	Non-teaching	Teaching	Non-teaching	Teaching	Non-teaching
1	Medical Colleges[26]	1864	773	932 (258)	302 (91)	932 (50)	471(61)
2	AYUSH Colleges	277	433	150 (8)	128 (1)	127(46)	305 (70)
3	Physiotherapy College	18	Nil	8 (0)	Nil	10(56)	-
4	Dental College	50	105	47 (43)	61 (30)	3 (6)	44 (42)
5	Nursing Institutions	121	139	63 (26)	128 (52)	58 (48)	11 (8)

(Source: Data provided by respective institutes)

It may be seen from the above table that shortage of teaching faculty as well as non-teaching staff in all streams of medical education was ranging from six to 56 *per cent* and eight to 70 *per cent* respectively. No post of non-teaching staff was sanctioned in Bihar College of Physiotherapy and Occupational Therapy.

Chart no.-2.3
Details of persons-in-position in medical institutes



(Source: Health Department)

Scrutiny of year-wise position of persons-in-position for the period 2013-18 revealed that there was a declining trend in respect of non-teaching staff. Further, in 13 medical institutes[27], there was decrease in percentage of persons-in-position during the period 2013 to 2018.

Against the INC norm of teacher-student ratio of 1:10, Audit observed that in test-checked GNM and ANM schools, the ratio ranged between 1:13 to 1:50 and 1:20 to 1:100 respectively. Shortage of faculty resulted in shortfall in teaching hours which adversely affected the quality of education.

[26] *Excluding IGIMS Patna*

[27] *PMC Patna, NMC Patna, DMC Darbhanga, RBTS Muzaffarpur, GTC Patna, GAC Patna, GAC Begusarai, two GNM schools at PMCH Patna and DMCH Darbhanga and four ANM schools at Biharsharif, Samastipur, Sitamarhi and Saharsa*

2.8.1.1 Shortfall in teaching hours

Medical Council of India stipulates minimum teaching hours for various subjects of undergraduate medical education. Test-check of records of five[28] medical colleges related to teaching hours of seven pre-clinical and para-clinical subjects revealed that the shortfall in actual teaching hours ranged between 14 to 52 *per cent* against the MCI norms as shown in the following table:

Table no. 2.6
Shortfall in teaching hours

Sl. No.	Name of pre-clinical and para-clinical subjects	Teaching hours prescribed by MCI	Average teaching hours for batches enrolled during 2013-15[29]	Shortfall of teaching hours	Percentage of shortfall
1	Anatomy	650	427	223	34
2	Physiology	480	232	248	52
3	Biochemistry	240	170	70	29
4	Pathology	300	185	115	38
5	Pharmacology	300	203	97	32
6	Microbiology	250	151	99	40
7	Forensic Medicine	100	86	14	14

(Source: Regulation of MCI and information furnished by test-checked medical colleges)

College-wise deficiency in teaching hours were ranging from 23 *per cent* to 48 *per cent* ***(Appendix-2.6)***. Further, shortfall in teaching hours was also noticed in Government RBTS Homeopathic Medical College (RBTS), Muzaffarpur, BCPO Patna and GTC Patna. Principal, GMC Bettiah stated (January 2020) that reasons for shortfall in teaching hours was due to huge deficiency of teaching faculty.

2.8.1.2 Shortfall in attendance

Norms of bodies regulating medical education require a minimum 75 *per cent* attendance for passing a particular subject. During scrutiny of attendance records of three colleges[30], audit noticed instances where students were allowed to appear in the examination even though 75 *per cent* attendance was not attained. Principal, BCPO and RBTS Muzaffarpur replied that necessary action would be taken in future.

2.8.1.3 Filling up of vacancies in medical institutes

- Health Department initiated (February 2016) the process of recruitment of 1,171 Assistant Professors which has been **discussed in para No. 2.7.2.2**.
- Health Department decided (April 2015) to send a proposal to BPSC for appointment of eight Homeopathy lecturers and 86 Ayurveda lecturers.

[28] *DMC Darbhanga, GMC Bettiah, IGIMS Patna, NMC Patna and PMC Patna.*

[29] *Pre-clinical subjects are taught in first and second semester whereas para-clinical subjects are taught during third to fifth semester. Audit scrutinised the teaching hours for the batches enrolled during 2013-15.*

[30] *BCPO Patna, RBTS Muzaffarpur and IGIMS Patna.*

However, it sent the proposal for recruitment of eight Homoeopathy lecturers (December 2015) and 86 Ayurveda lecturers (June 2015) without formulation of recruitment rules which was a pre-requisite for advertisement by BPSC. The Department framed recruitment rules only in February 2017 which delayed the advertisement by more than two years, as the same could be published only in August 2017 for Homeopathy lecturers and in September 2017 for Ayurveda lecturers. Recruitment of lecturers was still under process (January 2019).

Recommendation

The Department should expedite the recruitment process and develop a system for regular and periodical recruitment.

2.8.2 Insufficient infrastructure in medical, AYUSH and nursing institutes

The bodies regulating medical, dental, AYUSH and nursing colleges/schools, prescribe norms regarding the minimum level of infrastructure *viz.* library with sufficient number of books and journals, seating capacity; laboratories with sufficient space and facilities; lecture hall/demonstration room equipped with audio-visual aids and sufficient seating capacity; equipment and hostel facilities *etc.* required in these institutions as well as in the attached hospitals.

The Audit team along with representatives of medical, AYUSH and nursing colleges conducted (August – November 2018) joint physical verification of the test-checked institutes. Significant deficiencies noticed during the verification in infrastructure (classroom, library, laboratory, hostels *etc.*) vis-à-vis norms of regulatory bodies are mentioned in ***Appendix-2.7***. Insufficient infrastructure created a poor learning environment and may affect the quality of education. Significant deficiencies noticed were as follows: -

- MCI regulation envisaged that there should be provision for e-Class and lecture halls must have facilities for conversion into e-Class/Virtual class for teaching. Three[31] test-checked medical colleges had no facility for E-class/ virtual class for teaching, thereby depriving students from the benefit of modern teaching and learning modes.
- Guidelines of INC envisaged that the hospital attached with the ANM School should have 150 beds including 30-50 beds of Obstetrics & Gynaecology. Audit observed that five[32] ANM schools had less than 150 beds in the attached hospitals whereas in five[33] ANM schools beds of Obstetrics & Gynaecology were less than the prescribed ratio. Principal, ANM School, Biharsharif replied (October 2018) that the school was old (established in 1970) and from the beginning the school was attached with the Sadar

[31] *DMC Darbhanga, NMC Patna and GMC Bettiah.*

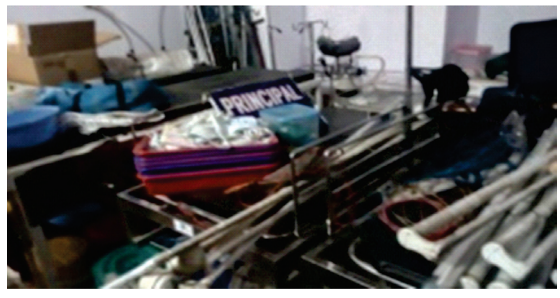
[32] *ANM Schools [Samastipur (82), Sitamarhi (75), Begusarai (108) Bhagalpur (104) and Gaya(65)]*

[33] *ANM Schools [Samastipur(19), Sitamadhi (20), Begusarai (28), Chhapra (25) and Biharsharif (20)]*

Hospital. The fact remains that number of beds were not as per INC norms and the possibility of cancellation of recognition cannot be ruled out.

- In eight[34] test-checked nursing schools, classrooms were overcrowded due to less space than the prescribed minimum norms of INC and the shortfall ranged from 37.74 to 79.17 *per cent*. Five[35] nursing schools have no audio-visual aids while in three[36] nursing schools such aids were not installed since 2015-16 due to construction work.

Space constraint in GNMDMC Darbhanga



Uninstalled audio visual aids in ANM School Samastipur

- Two[37] medical colleges, Patna Dental College (PDC) and GAC Patna had inadequate seating capacity in the library as per applicable norms and the shortfall ranged from 25 to 67 *per cent.* GMC Bettiah had inadequate books and the shortfall was 79 *per cent.* In DMC Darbhanga, books were stacked in a scattered manner on the floor. Principal, GMC Bettiah replied (October 2018) that due to non-availability of fund the requisite books were not purchased. The reply is not acceptable as substantial amount (29 to 84 *per cent*) under office expenses head was surrendered during 2013-15 and 2016-17.

Library in GNM DMC Darbhanga

- Five[38] out of 12 test-checked nursing schools had insufficient seating capacity in the library as prescribed by the INC and the shortfall ranged from 50 to 90 *per cent*. There was no seating arrangement in libraries of

[34] GNM School DMCH Darbhanga (GNM DMCH), ANM Schools at Begusarai, Biharsharif, Chhapra, Gaya, Saharsa, Samastipur and Sitamarhi.

[35] *ANM Schools at Chhapra, Gaya, Saharsa, Begusarai and Sitamarhi*

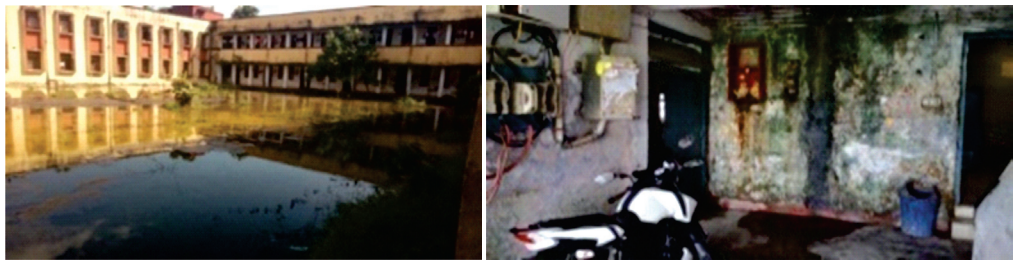
[36] *GNM School, PMCH, Patna (GNM PMCH), ANM Schools at Biharsharif and Samastipur.*

[37] *PMC Patna and DMC Darbhanga*

[38] *College of Nursing IGIMS Patna, GNM PMCH; ANM Schools at Bhagalpur, Saharsa and Samastipur.*

five[39] nursing schools. In nine nursing schools[40], updated edition of books were not available.

- MCI regulation envisaged that there should be one well-equipped Central Research Laboratory in the medical college, which will be under the control of the Dean of the college. None of the test-checked medical colleges except IGIMS Patna and NMC Patna had Central Research Laboratory which may affect the research work in these colleges. Besides, the regulation also envisaged that there should be well-equipped and updated central laboratories preferably along with common collection centre for all investigations but three[41] test-checked medical colleges had no central laboratories.
- In one GNM and three ANM test-checked schools[42] the skill laboratory was not running as there was lack of adequate space as prescribed in the norms. Further, in ANM School, Samastipur, all equipment and chemical substances of skill laboratory were kept in a room in very poor condition and no practical classes were conducted.
- In DMC Darbhanga, the condition of the hostel was very critical as rooms were damp and dark, sewage water was leaking over the electric wiring and roof and walls were damp and damaged. There was water logging and bushes were growing around the hostel.



Hostel of GNM DMC Darbhanga

- The availability of seats in the hostels was not adequate in two[43] GNMs. In GNMDMCH, six to eight girls were accommodated in each four seater room due to unauthorised occupancy of hostel rooms by staff nurses of DMCH Darbhanga. The surroundings of the hostel was unhygienic.
- Two hundred and fifty students were studying in the College of Nursing IGIMS Patna. Though hostel provision was mandatory, there was provision for only 98 students (49 rooms, two-seater), as a result of which all students could not be accommodated in the hostel.
- In the test-checked ANM schools (except at Saharsa and Chhapra), there was no separate residential facility and students were accommodated in the

[39] *GNM DMCH, ANM Schools at Begusarai, Biharsharif, Chhapra and Sitamarhi.*
[40] *GNM Schools at NMCH Patna, PMCH Patna and DMCH Darbhanga; ANM Schools at Begusarai, Bhagalpur, Biharsharif, Saharsa, Samastipur and Sitamarhi.*
[41] *NMC Patna, DMC Darbhanga and GMC Bettiah.*
[42] *GNM DMCH, ANM Schools at Biharsharif, Gaya and, Samastipur.*
[43] *College of Nursing IGIMS Patna and GNM DMCH*

academic building in a few rooms. In all the test-checked ANM schools (except Sitamarhi) six to 14 students were staying in a room in unhygienic condition. In ANM School, Sitamarhi, 21 students were accommodated in 10 rooms of the academic building which was condemned and dangerous. Besides, 70 students were accommodated outside the premises in two halls which were also in poor condition. Except for ANM School, Bhagalpur, none of the test-checked ANM schools had sufficient number of bathrooms and toilets.

Hostel of GNM DMC Darbhanga

Hostel of ANM School, Bhagalpur

- The hostel of ANM School, Gaya was in a dilapidated condition. Plaster from the ceiling and walls was falling. The ceiling and wall of the bathrooms were damp. Principal-in-charge and warden stated (September 2018) that the school was closed during rainy season due to seepage of rain water from roof.

Hostel building of ANM School, Gaya

Hostel building of ANM School, Gaya

- In RBTS Muzaffarpur, no hostel was provided to girls students.
- In GAC, Patna, only 10 to 44 *per cent* beds of girl's hostels were occupied during 2013-18. There were no recreation facilities, common room and mess in the girls' hostel situated at Rajendra Nagar which was located nearly four km away from the college and there were no transport facilities for students. At the request of the students, they were accommodated in three rooms situated in the academic building in poor condition (30 girls). Principal, GAC Patna replied (October 2018) that the hostel was allotted as per the students' request and to improve the condition, necessary action would be taken.
- Weeds/ unwanted plants/ tall grasses had grown in Herbal Garden of GAC Patna which adversely affected the growth of medicinal plants and indicated poor maintenance. This may affect imparting of practical classes to students.

Principal, GAC Patna replied (October 2018) that fund was provided to the Forest Department for the renovation work and necessary action would be taken.

Recommendations

- ***The Department should ensure creation of an enabling environment such as library with sufficient books and journals, classrooms equipped with audio-visual aids, and proper hostels to facilitate quality learning.***
- ***Special efforts need to be taken for improving the infrastructure in nursing institutes.***

2.8.3 Lower than minimum occupancy of indoor beds

Medical Council of India stipulates a minimum 75 *per cent* average occupancy of indoor beds in a hospital attached with a medical college.

In three[44] test-checked medical colleges, deficiency in occupancy of indoor beds during 2013-18 ranged between 25 to 31 *per cent* with respect to the minimum prescribed norm of 75 *per cent.* This may affect imparting of clinical training to students.

Table no.-2.7
Bed occupancy of test-checked teaching hospitals

Year	Total no. of beds available	Minimum requirement for 75 *per cent* occupancy of beds	Actual occupancy	Deficiency in occupancy w.r.t. minimum requirement (*per cent*)
2013-14	2328	637290	440303	31
2014-15	2328	637290	453820	29
2015-16	2461	673699	480947	29
2016-17	2455	672056	491486	27
2017-18	2515	688481	514471	25

(Source: Data provided by medical colleges)

2.8.4 Shortage of equipment in medical colleges

The Minimum Standard Requirements for the Medical College Regulation, 1999 as amended up to August 2017 of MCI prescribes a minimum requirement of equipment for various departments of medical colleges.

In 20[45] test-checked departments of selected five[46] medical colleges, non-availability/shortage of medical equipment against the prescribed norms ranged between 38 to 92 *per cent* during 2017-18 ***(Appendix-2.8)***.

[44] *DMC Darbhanga, IGIMS Patna and NMC Patna.*
[45] *One department (Pharmacology) of IGIMS Patna, one department (Ophthalmology) of GMC Bettiah and three departments (Orthopaedics, Anaesthesiology, Otorhinolaryngology) of NMC Patna did not furnish information.*
[46] *GMC Bettiah, DMC Darbhanga, IGIMS Patna, NMC Patna and PMC Patna.*

There was shortage of all types of equipment (clinical and non-clinical) in two[47] departments of IGIMS Patna, eight[48] departments of GMC Bettiah and one[49] department of DMC Darbhanga. Equipment are to be purchased by medical colleges and BMSICL. Despite the shortage of equipment, these colleges (except IGIMS, Patna) could spend only ₹31.70 crore (82 *per cent*) out of allotted fund of ₹38.87 crore during 2013-18. Shortage of equipment may adversely affect the practical training and education of medical students. It was noticed that the Department was not having any specific plan for procurement of medical equipment till October 2018. A Manual for the procurement of Drug and Medical equipment-2018 was notified only in October 2018 which specifies the procurement and planning policy.

2.8.4.1 Idle and out of order equipment

Audit observed instances of equipment lying idle or out of order for a period ranging from one to nine years as shown in the following Table:

Table no.-2.8
Idle and out of order equipment

Sl. No.	Audit entity	Name of equipment/ items lying idle or out of order	Period since lying idle or out of order	Cost of equipment/ items (₹ in lakh)	Remarks
1	RBTS, Muzaffarpur	Ultrasound machine, X-ray machine etc.	2009-10	19.52	These items were purchased for setting up of new hospital before completion of the building. There is lack of technical manpower to operate the machines and they are lying idle (September 2018).
2	Patna Medical College Patna	Automated electrophoresis in Pathology Department	October 2016	28.00	The machine was out of order and the department intimated (October 2016) the college administration about it, but no steps to repair it were taken by the college administration (October 2018).
		Ultrasound machine in Gynaecology Department	January 2017	NA	The machine was out of order and the department intimated (May 2017) the college administration about it, but no steps to repair it were taken by the college administration (October 2018).
		TMT machine in TB and Chest Department	January 2014	NA	The machines were out of order but no steps for repair was taken by the college administration (October 2018).

[47] *Dermatology and psychiatry*
[48] *Radio diagnosis, Pathology, Orthopaedics, Dermatology, TB & chest, Medicine, Forensic Medicine and Psychiatry*
[49] *Psychiatry*

Sl. No.	Audit entity	Name of equipment/ items lying idle or out of order	Period since lying idle or out of order	Cost of equipment/ items (₹ in lakh)	Remarks
3	DMC Darbhanga	11 ECG machines	February 2014	12.65	Machines were supplied (February 2014) to the medical college by BMSICL despite not being required by the college.
4	Nalanda Medical College Patna	B Scan- A+B Probe	August 2015	14.49	The machine was purchased (April 2012) by the medical college and was out of order since August 2015.
5	GMC Bettiah	Colonoscope in Obstetrics & Gynaecology department	2014	NA	The machine was not installed since its purchase.
		Suction machine, D&C set, Fetal Doppler, BP apparatus, each in two numbers	NA	NA	Not functional
		Mortuary in Anatomy department	May 2017	NA	Not functional
6	GTC Patna	X-Ray machine	2011-12	NA	The machine was lying idle in the store room due to unavailability of technician/ radiographer

As may be seen from the above table, the machines/equipment were idle or out of order as there was unavailability of technical manpower to operate them, machines were supplied without requirement or effective steps were not taken for repairing the equipment. Idle machines would have an adverse effect on training of medical students.

2.8.5 Rural internship

Rural internship in medical colleges

For award of MBBS degree, MCI stipulates successful completion of one-year compulsory rotating internship including two months' time for community medicine. In community medicine interns get exposure to immunisation programmes, family welfare planning procedures, locally prevalent endemic diseases, national health programmes, linkage with other agencies such as water supply, food distribution and environment/social agencies, provide health education to individual/ community and get managerial skills, and delegation of duties to paramedical staff and other health professionals. For these they are required to be attached with community health centres, district hospitals, primary health centres, rural health training centres *etc.* and do at least a one week village attachment with village health centres, ASHA sub-centres *etc.* Every medical college was to have three primary health centres (PHC)/rural

health training centres (RHTC) attached to it for this. Similarly, in dental colleges, as required by DCI, interns were to pursue three months' rural services for understanding different aspects of community-related dental health aspects. Further, community health nursing field practice/internship was also required for students of nursing institutions.

Scrutiny of internship programmes (community medicine/rural service) in test-checked institutes revealed the following deficiencies (Details in ***Appendix 2.9***).

- Cases were noticed where interns were not exposed to community health education, village community health issues and prevention and control of locally prevalent endemic diseases and health education programme. They were also not imparted training by medical colleges to demonstrate linkages with other agencies.
- Accommodation facility was not adequately provided by the concerned institutes/PHCs during rural internship.
- Deficiencies in attendance during rural internship were noticed.

2.9 Financial Management

Funds were provided for medical education under Plan and Non-Plan heads to the institutes for their functioning. In addition, funds for creation of infrastructure and procurement of equipment was provided to BMSICL/BRPNNL. The budget provision and expenditure incurred for medical education under Plan and Non-Plan heads during 2013-14 to 2017-18 was as follows:

Table no. 2.9
Budget allotment and actual expenditure

(₹ in crore)

Year	Plan			Non Plan		
	Budget	**Expenditure**	**Surrender**	**Budget**	**Expenditure**	**Surrender**
2013-14	374.51	225.88 (60)	148.63 (40)	336.94	293.38 (87)	43.56 (13)
2014-15	521.92	207.59 (40)	314.33 (60)	380.67	304.53 (80)	76.14 (20)
2015-16	598.38	521.50 (87)	76.88 (13)	463.28	431.39 (93)	31.89 (7)
2016-17	854.77	755.35 (88)	99.42 (12)	572.96	488.02 (85)	84.94 (15)
2017-18	703.40	593.00 (84)	110.40 (16)	662.00	597.55 (90)	64.45 (10)
Total	**3052.98**	**2303.32 (75)**	**749.66(25)**	**2415.85**	**2114.87 (88)**	**300.98(12)**
Parenthesis indicates figures in percentage						

(Source: Health Department)

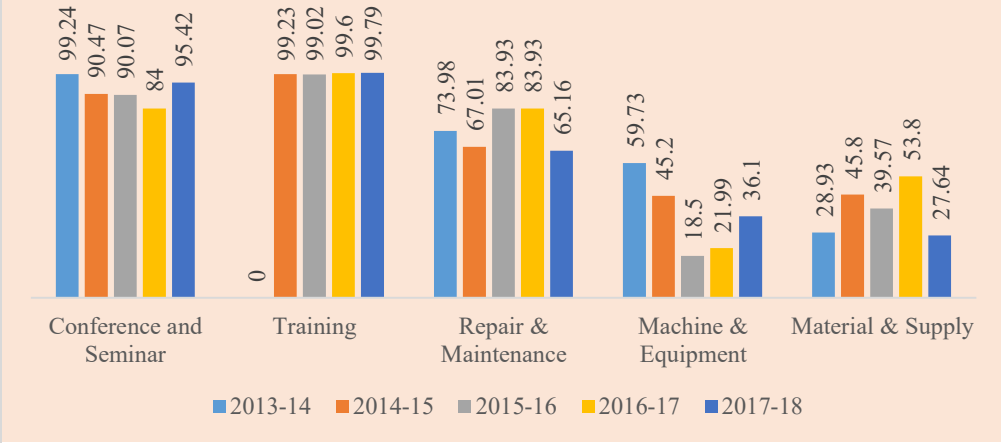
Against the total budget provision of ₹ 5468.83 crore under medical education during the year 2013-18, only ₹ 4418.19 crore (81 *per cent*) was spent, leading to surrender of ₹ 1050.64 crore (19 *per cent*).

Scrutiny of head-wise surrender revealed that under the object head 'Training' and 'Conference, Workshop and Seminar', the surrender of funds during 2013-18 was ranging from 84 to 100 *per cent*. The head-wise position of

surrender of funds which are directly related to medical education can be seen in the following chart:

Chart no.-2.4
Surrender in selected heads of accounts

(figures in *per cent*)



(Source: Health Department)

Further, it was observed that only 75 *per cent* amount was spent under Plan head during the period which was attributable to poor progress of construction works taken up under different schemes of State Government as discussed earlier. Audit noticed the following financial irregularities during construction activities and running of colleges (Details in ***Appendix 2.10***):

Table no.-2.10
Financial irregularities in construction activities of medical institutions

(₹ in crore)

S No	Name of work/institute	Amount of irregularity	Reasons
1.	Construction of medical colleges at Pawapuri and Madhepura	78.09	Non-adherence to the clauses of the contract agreement and relevant rules resulted in excess payments/ inadmissible payments.
2.	Construction of medical colleges at Madhepura, Bettiah and Pawapuri	7.35	Fees paid to supervision consultants was charged to work expenses resulting in loss to the State exchequer.
3.	Construction of medical colleges at Madhepura and Pawapuri	21.41	Excess payment of centage charges to BRPNNL and BMSICL
4.	Construction of medical college at Bettiah	45.71	Work was approved in March 2007 but awarded in November 2016. There was delay at every stage and it took six to 15 months to evaluate the tender. The tender was cancelled thrice. Difference in cost of BoQ as per 2nd and 3rd NIT was ₹ 45.71 crore (due to change of SoR), however, scope of work was reduced in 4th NIT. Test check of certain items in BoQ revealed an increase to the extent of approximately 10 *per cent.*
5.	Construction of 10 ANM schools	3.20	BMSICL received ₹ 45.42 crore for construction against which ₹ 42.22 crore was spent (May 2018). The balance amount was not refunded.

Following financial irregularities were also noticed during audit of the test-checked medical institutions:

Table no.-2.11
Financial irregularities in test checked medical institutions

S No	Name of work/Institute	Amount (in crore)	Irregularity
1.	Medical College (VIMS), Pawapuri and GMC, Bettiah	190.50	College and hospital were to generate revenue to meet their recurring expenditure. During 2013-18, recurring expenditure of medical college and hospital at Pawapuri and Bettiah were ₹ 83.58 crore and ₹108.01 crore respectively. However, total revenue generated by medical college at Pawapuri was ₹ 1.09 crore only. No plan was prepared as to how the revenue would be generated to meet recurring expenditure. Revenue generation of Bettiah medical college and hospital was not provided to audit.
2.	DMC Darbhanga, NMC Patna, GAC Patna and RBTS Muzaffarpur	7.30	AC bills were drawn during 2005-18 for ₹ 43.58 crore but DC bills of ₹ 7.30 crore were not submitted (November 2018).
3.	PMC Patna and DMC Darbhanga	0.15	Bond money of ₹ 15 lakh received (April 2018) from one PG student was lying idle in absence of any directions for its utilisation. In DMC, bond was not taken from 98 students out of 107 PG students admitted (2017-18).
4.	PMC Patna, NMC Patna, DMC Darbhanga, ANMMC Gaya, SKMC Muzaffarpur and JLNMC Bhagalpur	2.76	Full amount of State share (25 *per cent*) was not released against the GoI share (75 *per cent*) in Centrally Sponsored Scheme during the period 2009-13.
5.	GAC, Patna	2.95	Separate bank account was not maintained for GoI funds amounting to ₹ 2.95 crore received (2010-13) by the college. No cash book was maintained either. Further, diversion of fund amounting to ₹ 0.33 crore was made for salary payments in 2012-13.
6.	PMC Patna, NMC Patna and DMC Darbhanga	15.18	Against the approved amount of ₹ 28.57 crore, the colleges could not utilise released amount of ₹ 15.96 crore (including interest of ₹ 2.57 crore) resulting in non-release of balance amount by GoI during 2013-18.
7.	GTC Patna, GAC Patna, PDC Patna and GMC Bettiah.	0.38	Services like security, cleaning and other housekeeping provided to the institutes were exempted from service tax. However, service tax was paid (July 2013 to July 2017) for the services provided during October 2012 to March 2017 by the colleges.

Recommendations

The Department should:-

- ***ensure the timely execution and completion of the works with adherence to the terms and conditions of the contract;***
- ***monitor the expenditure incurred on the works and ensure the refund of balance payment by the executing agencies;***
- ***check that the centage charged by the executing agency are correct and no excess payment was charged to the works; and***

- ***ensure taking bond from the students and issue guidelines for its accounting and utilisation.***

2.10 Monitoring and Supervision

Medical colleges and hospitals, AYUSH colleges and hospitals, control of all officers serving in the department, establishment and regulation of medical colleges, provision and regulation of medical qualification, administrative charge of all buildings occupied *etc*. are the business of the Health Department, as stipulated in Rules of Executive Business, 1979.

2.10.1 Irregular/fake admission in Government Tibbi College Patna

In GTC Patna, having intake capacity of 40 students for BUMS course, one-third of the students were to be admitted from pre-Tib orientation course which was restricted to 10 students from November 2016. However, Audit observed that each year the college gave admission to 14 students from pre-Tib course during 2013-18. Thus, against 62 students who could get admission from pre-Tib course during this period, the college admitted 70 students.

Students with fake mark-sheets were admitted in GTC Patna.

Audit also attempted to verify the genuineness of certificates of all the 70 candidates from pre-Tib orientation course and received responses from the concerned colleges and universities in respect of 66 students. Certificates submitted by 15 students were not found issued by the concerned colleges and universities. Admission of students without checking the authenticity of the certificates submitted by the candidates is a matter of great concern. Principal GTC Patna replied (February 2019) that investigation was being done in this regard.

Admission through pre-Tib course in excess of capacity as determined by CCIM was therefore not in accordance with the norms and was also at the cost of opportunity available to students seeking admission through entrance examination.

2.10.2 Students with doubtful identities admitted in nursing schools

Ineligible students got admission and passed out from the institutes, however, no action was taken against them.

Audit noticed that Bihar Combined Entrance Competitive Examination Board (BCECEB) referred cases of two students admitted in 2011 in ANM School Samastipur and two students admitted in GNMDMCH during 2011 and 2012 to Forensic Science Laboratory (FSL) Patna in December 2011 and February 2013. The investigation report of FSL confirmed (February - June 2015) that two samples each of the handwriting of these students, one taken at the time of examination and the other taken at the time of counselling, did not match. Three students passed out after completion of their courses and one left in between. Despite orders of BCECEB (December 2016 and September 2017) to the concerned authorities to initiate steps to cancel the admissions and take legal action, no action was taken against the three students who had passed out.

Principal, ANM School, Samastipur replied that action against the student was under process. Principal, GNMDMCH replied that the investigation in this regard was done by BCECE Board, Patna.

In GNM NMCH, one student was allowed to pursue the GNM course, although audit observed mismatches in the photographs and signatures in her documents. The matter has been referred to BCECEB (November 2018) for verification.

2.10.3 Irregular admission in post graduate seats in Patna Medical College

In PMC Patna, Audit noticed that during 2014, six departments[50] had 13 more post-graduate students than the sanctioned intake capacity. Further 14 students were admitted in two departments[51] where no seat was sanctioned by the Central Government/MCI. The MCI objected (December 2015) to the admission of these 27 irregularly admitted students. Principal, PMC Patna replied (February 2019) that admission to such seats was being done since the last 40 years as per information available on the MCI website. Further, the Principal stated (February 2019) that MCI had done inspection in light of the stated matter and their decision was awaited.

2.10.4 Irregular decision of Government to relax MCI criteria in admission to medical colleges in 2014

Admission to MBBS courses is regulated by Regulations on Graduate Medical Education, 1997 framed by MCI in exercise of powers under Section 33 of the Indian Medical Council Act. Rule 5 of the regulations *ibid* stipulate requirement of at least 50, 40 and 45 *per cent* marks for general, SC/ST or other backward classes and differently abled (DQ) category candidates respectively.

Audit observed that in the MBBS examination conducted by BCECE Board in 2014, 67 students of SC/ST and DQ category did not obtain the minimum qualifying percentage marks. In order to fill up the above seats the State Government/Department decided (September 2014) to relax the minimum qualifying criteria prescribed by MCI for SC/ST and DQ category candidates from 40 and 45 *per cent* respectively to 32 *per cent* and allowed their admission to MBBS course. MCI had denied (September 2014) permission for such relaxation. The decision of the Government was contrary to the provisions framed by MCI which resulted in making ineligible candidates eligible for admission to the course.

In court cases filed by students and also by MCI, Hon'ble High Court Patna (September 2015 and December 2015) stated that no State can act in derogation to MCI regulations and set aside the orders passed by the State Government. However, considering that there was no mistake on the part of the students who had been admitted, the Hon'ble Court held that the academic career of

[50] *Anaesthesia, Child health, Pathology, OBG, Radio-diagnosis and Orthopaedics.*
[51] *MD Psychiatry, MD/MS OBG*

the students should not be ruined, if they attained necessary proficiency while pursuing their MBBS course.

2.10.5 Irregular admission in BAMS course

GoI had prohibited (August 2008) GAC Begusarai from admitting students from session 2008-09 (as detailed in para 2.7.2.4).Audit observed that in contravention of the GoI's orders, the college admitted 25 students for the academic session 2008-09. CCIM also raised the issue (October 2008) of colleges taking admission despite not having permission for the same. Consequently, on the direction of the Department (June 2009), such students were adjusted in GAC Patna.

Weak supervision by the Department was also evident from the following:

- Test-check in two GNM and seven ANM schools disclosed that against the intake capacity of 838 students sanctioned by INC, 1,942 students were admitted during 2015-18 on the basis of allotment letters issued by the BCECE Board whereas the Board stated (January 2019) that counselling was done on the basis of information provided by the Department in respect of the number of seats. The Department did not furnish any comment in this regard. (***Appendix-2.11*****).**
- In PMC Patna, NMC Patna and GAC Patna, either there was no College Council to draw up the details of curriculum and training programme, enforcement of discipline and other academic matters or the Council held insufficient number of meetings ranging from zero to three during 2013-18 against the required number of minimum four meetings in a year[52].
- None of the 10 test-checked nursing schools (except ANM School at Begusarai and Bhagalpur) had School Management Committees to monitor curriculum implementation and examination.
- There was no regulatory body and registration council for physiotherapy and occupational therapy in BCPO Patna.
- As per norms, all nursing faculty, including Principal of GNM School, should spend at least four hours a day in clinical area for clinical teaching. However, in GNM School, DMCH, the Principal stated (October 2018) that this norm was not followed and action would be taken as per the norms.
- In 2015, BCECE Board prepared the merit list by awarding marks for one wrong question to all candidates who appeared in the undergraduate entrance examination, whereas in a similar situation in the post-graduate entrance examination, the merit list was prepared after reducing the marks of seven wrong questions. Thus, two different approaches were adopted in similar conditions which was attributable to non-formulation of rules/ regulations for implementation of the provisions of the BCECE Act 1995 by the Board and Government. BCECE Board replied (September 2019) that preparation of the merit list is the exclusive right of the Board.

[52] *except for the year 2014-15 when NMC Patna had organised four meetings*

- Test-checked institutions did not have strong anti-ragging measures. Surprise checks, constitution of anti-ragging squad, engagement of professional counsellors, and organisation of joint sensitisation programmes for freshers were not done in all the institutions. Thus, the norms of the regulatory bodies were not adhered to.

Recommendations

The Department should:

- ***strictly adhere to the norms of regulatory authorities;***
- ***strengthen the counselling procedure and thoroughly check the veracity of documents at the time of admission and ensure prompt action on fraudulent cases;***
- ***take steps for creation of regulatory body and registration council for physiotherapy and occupational therapy course; and***
- ***take steps for framing rules and regulation for implementation of the provisions of the BCECE Act, 1995.***

2.11 Conclusion

Bihar is the third most populous state in India accounting for 8.6 *per cent* of the total population of the country. The national average of governmental doctor-nurse-midwife population ratio is 221 for one lakh population against which the state's average was just 19.74. Despite the critical shortage of doctors, nurses and other paramedical staff in Bihar, there was no long-term strategic plan to assess the requirement of medical institutions for addressing the gap in availability of trained healthcare personnel. During the period from 2006-07 to 2016-17, Government of Bihar planned to establish 12 medical colleges, 113 nursing institutes and 33 paramedical institutes. However, the projects undertaken for construction of new medical colleges and subsequent capacity enhancement were excessively delayed. Projects taken up during 2007-08 (medical colleges at Madhepura and Bettiah, dental college at Nalanda and several nursing institutes) could not be completed even after a decade. Admissions were not undertaken in the last 10 years in four out of five Ayurveda colleges due to non-fulfilment of CCIM norms. Plans to increase seats in medical colleges could not materialise for want of adequate infrastructure and teaching staff. Despite the severe shortage of medical institutions in Bihar, even the existing institutes were running with vacant posts of teaching staff ranging from six to 56 *per cent* and non-teaching staff ranging from eight to 70 *per cent*, resulting in shortfall in teaching hours.

Deficient financial management was evident from savings of 25 *per cent* under the plan head during 2013-18, attributable to inordinate delays in construction projects.

Audit observed instances of inadequate infrastructure like over-crowded classrooms and libraries, absence of laboratories, required equipment and books,

and pathetic conditions in hostels which not only violated the norms prescribed by the regulatory authorities but also created an environment not conducive to academic pursuit. Rural internship to aspiring medical students suffered from various shortcomings thereby depriving the interns of a holistic exposure to the rural scenario and the capacity to function independently in the future.

Deficient monitoring and supervision of the medical institutions by the Department was evident as audit observed instances where students were granted admission on the basis of forged marksheets or by resorting to fraudulent practices as well as admission of students in excess of the sanctioned seats.

APPENDIX-1.2

(Refer: Paragraph-1.3; Page-2)

Statement showing various types of irregularities in outstanding paragraphs of Inspection Reports

Year	No. of IRs	Fraud/misappropriation/ embezzlement/ losses detected in audit	Recoveries &instances of overpayments detected in audit	Violation of contractual obligations and undue favours to contractors	Avoidable/excess expenditure	Wasteful/infructuous expenditure	Expenditure incurred without sanction of competent authority	Diversion of funds from one scheme to another or from one object head to another	Drawal of funds at the fag end of financial year with a view to avoiding lapse of funds	Incurring of expenditure on banned items or items of special nature without approval of competent authority	Purchase of stores/ stock in excess of actual requirements with a view to avoiding lapse of funds	Idle investment/ idle establishment/ blockade of funds	Payment of idle wages to staff	Delays in commissioning of equipment/ idle equipment and consequences owing thereto	Non-achievement of objectives/unfruitful expenditure	Miscellaneous observations	Total paragraphs
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
2008-09	921	119	330	108	85	317	39	222	3	4	12	326	17	5	215	3476	5278
2009-10	992	154	297	163	141	310	48	234	3	3	1	286	25	21	306	3282	5274
2010-11	830	57	315	66	84	214	19	164	1	6	16	242	19	17	244	2675	4139
2011-12	169	9	62	51	20	53	6	24	2	0	4	70	5	2	78	723	1109
2012-13	590	21	197	85	204	183	51	128	8	27	9	284	25	36	219	2281	3758
2013-14	869	102	213	145	231	284	43	119	13	73	13	434	32	39	319	3502	5562
2014-15	901	129	364	210	184	242	31	112	12	7	13	458	11	32	309	3580	5694
2015-16	949	57	271	203	316	392	106	205	25	11	61	532	17	22	444	3872	6524
2016-17	995	65	184	348	410	388	86	194	68	97	79	640	25	40	595	4816	8035
2017-18	544	39	110	338	151	292	33	34	50	11	8	748	19	10	333	2808	4984
Total	**7760**	**752**	**2343**	**1717**	**1826**	**2675**	**462**	**1436**	**185**	**239**	**216**	**4020**	**195**	**224**	**3062**	**31015**	**50367**

APPENDIX-1.3

(Refer: Paragraph-1.5; Page 4)

Status of Audit Memos relating to Performance Audits/Compliance Audit Paragraphs for the Audit Report ending March 2018

Sl. No.	PA/LDP	Name of PA/TA	Reply received on PA/TA from Department	No. of units audited	No. of unit did not produce certain records	No. of Memos issued	No. of Memos on which full reply received	No. of Memos on which partial reply received	No. of Memos on which reply not received
1	PA	Medical Education in Bihar	No	34	22	298	185	17	96
2	CA	Maintenance of roads under Long Term Output and Performance-based Road Assets Maintenance Contract (OPRMC) Phase-1	Yes	07	00	13	12	00	01
3		Implementation of recommendations and Utilisation of 14th Finance Commission Grants by Local Bodies	Panchayati Raj Department-Yes Urban Development and Housing Department-No	94	52	1229	977	34	218
		Total		**135**	**74**	**1540**	**1174**	**51**	**315**

APPENDIX-1.4

(Refer: Paragraph-1.8; Page-5)

Statement showing status of placement of Separate Audit Reports of Autonomous Bodies in the State Assembly

Sl. No.	Name of Autonomous bodies	Status of entrustment	Rendering of accounts to audit		Issuance of SAR		Date of placement in the Legislature	Remarks
			Year of accounts	Date	Year of accounts	Date		
1	Bihar State Legal Services Authority, Patna	Permanent	2015-16 & 2016-17	22.02.2018 & 15.10.2018	2015-16	22.06.2018	Not available	Audit of Annual Accounts of BSLSA for 2016-17 is yet to be taken up.
2	Bihar State Housing Board, Patna	Upto 2015-16	2011-12	03/04/2014	Upto 2008-09	27/08/2014	Not placed in the Legislature	SARs for the period 2009-10 to 2011-12 have not been finalised. Authenticated Annual Accounts from the year 2012-13 onwards have not been received.
3	Bihar State Khadi and Village Industries Board, Patna	2009-10	2009-10	12/09/13	2009-10	21/04/2014	Upto 2001-02	Entrustment for the period from 2010-11 onwards has not been received under Section 19(3).
4	Rajendra Agriculture University, Pusa, Samastipur	2013-14	2012-13 2013-14	21/06/2016	2012-13 2013-14	26/07/2017	Upto 2013-14	Entrustment upto 2010-11 received in November 2006. Entrustment extended in March 2016. However, the entrustment period has not been mentioned in the entrustment letter and is being pursued. The University has been converted into Dr Rajendra Prasad Central University with effect from 07 October 2016.
5	Bihar Agricultural University, Sabour, Bhagalpur	2014-15	2013-14	13/07/2015	2012-13 2013-14	28/10/2016	Upto 2013-14	Approved Annual Accounts of Financial Year 2014-15 has been called for which is still awaited. Entrustment for the period from 2015-16 onwards has not been received and is being pursued.

(Source: Information compiled by different sectors of this office)

Appendix 2.1
(Refer: Paragraph-2.6; Page-9)
List of units selected for Performance Audit

Sl. No.	Stream	Name of the Institution
1	Allopath-Medical	Darbhanga Medical College, Darbhanga (DMC Darbhanga)
2	Allopath-Medical	Government Medical College, Bettiah (GMC Bettiah)
3	Allopath-Medical	Indira Gandhi Institute of Medical Science, Patna (IGIMS Patna)
4	Allopath-Medical	Nalanda Medical College, Patna (NMC Patna)
5	Allopath-Medical	Patna Medical College, Patna (PMC Patna)
6	Allopath-Dental (Medical)	Patna Dental College, Patna (PDC Patna)
7	Allopath-Physiotherapy and Occupational therapy (Medical)	Bihar College of Physiotherapy and Occupational Therapy, Patna (BCPO Patna)
8	AYUSH-Homeopathy	Government RBTS Homeopathic Medical College, Muzaffarpur (RBTS Muzaffarpur)
9	AYUSH-Unani	Government *Tibbi* College, Patna (GTC Patna)
10	AYUSH- Ayurvedic	Government Ayurvedic College, Patna (GAC Patna)
11	AYUSH-Ayurvedic	Government *Ayodhya Shivkumari* Ayurvedic College, Begusarai (GAC Begusarai)
12	Nursing- B.Sc. (Nursing) and GNM	College of Nursing IGIMS Patna
13	Nursing- GNM	GNM School DMCH Darbhanga (GNM DMCH)
14	Nursing- GNM	GNM School NMCH Patna (GNM NMCH)
15	Nursing- GNM	GNM School PMCH Patna (GNM PMCH)
16	Nursing-ANM	ANM School, Begusarai
17	Nursing-ANM	ANM School, Bhagalpur
18	Nursing-ANM	ANM School, Biharsharif, Nalanda
19	Nursing-ANM	ANM School, Chhapra (Saran)
20	Nursing-ANM	ANM School, Gaya
21	Nursing-ANM	ANM School, Samastipur
22	Nursing-ANM	ANM School, Sitamarhi
23	Nursing-ANM	ANM School, Saharsa

Appendix- 2.2

(*Refer: Paragraph-2.7.1.6; Page-15)*

Status of construction of 126 institutes under *Saat Nischay*

(₹ in lakh)

S No.	Name of institute	A.A. Amount	Date of Work Order	Physical progress as on 15.11.18 (in %)	Expenditure up to August 2018
1.	Para Medical Institute, Sadar Hospital, Rohtas	998.00	05.08.2017	100	838.63
2.	ANM School, Jagdishpur	630.72	06.09.2017	100	192.43
	Total	**1628.72**			**1031.06**
3.	GNM School, Katihar	1335.38	26.04.2017	0	0
4.	GNM School, Khagaria	1335.38	24.03.2017	57	646.83
5.	GNM School, Munger	1335.38	24.03.2017	77	844.19
6.	GNM School, Araria	1335.38	24.03.2017	10	0
7.	GNM School, Mahuli, Jamui	1335.38	12.02.2018	55	337.02
8.	GNM School, Rajapakar, Vaishali	1335.38	25.09.2018	10	0
9.	GNM School, Hathua, Gopalganj	1335.38	01.02.2018	20	0
10.	GNM School, Budhaul, Nawada	1335.38	29.01.2018	20	104.97
11.	GNM School, Arwal	1335.38	28.02.2018	30	542.04
12.	GNM School, Barka Katra, Bhabhua	1335.38	04.05.2018	25	0
13.	GNM School, Bhojpur	1335.38	29.05.2018	15	0
14.	GNM School, Sukhpur, Supaul	1335.38	29.05.2018	12	198.5
15.	GNM School, Raghopur Balath, Madhubani	1335.38	17.07.2018	15	0
16.	GNM School, Maharajganj, Siwan	1335.38	08.05.2018	35	354
17.	GNM School, Kishanganj	1335.38	31.03.2018	0	0
18.	GNM School, Pawapuri, Nalanda	1335.38	28.04.2018	22	286.09
19.	ANM School, Araria	630.72	24.03.2017	11	0
20.	ANM School, Forbesganj, Araria	630.72	24.07.2017	98	229.82
21.	ANM School, Uda Kishunganj, Madhepura	630.72	05.05.2017	55	200.38
22.	ANM School, Jainagar, Madhubani	630.72	28.06.2017	90	255.64
23.	ANM School, Tarapur, Munger	630.72	16.06.2017	90	122.25
24.	ANM School, Simri Bakhtiyarpur, Saharsa	630.72	14.07.2017	25	68.27
25.	ANM School, Nirmali, Supaul	630.72	16.06.2017	32	86.22
26.	ANM School, Bagha, West Champaran	630.72	17.05.2017	60	307.74
27.	ANM School, Sonepur, Saran	630.72	20.07.2017	65	170
28.	ANM School, Virpur, Supaul	630.72	20.07.2017	85	372.89
29.	ANM School, Biraul, Darbhanga	630.72	02.11.2017	0	0
30.	ANM School, Neemchak Bathani, Gaya	630.72	04.01.2018	60	229.45

S No.	Name of institute	A.A. Amount	Date of Work Order	Physical progress as on 15.11.18 (in %)	Expenditure up to August 2018
31.	ANM School, Tekari, Gaya	630.72	07.11.2017	50	200.65
32.	ANM School, Manihari, Katihar	630.72	21.09.2017	98	257
33.	ANM School, Gogari, Khagaria	630.72	12.01.2018	40	129
34.	ANM School, Dhamdaha, Purnea	630.72	18.08.2017	0	0
35.	ANM School, Patori, Samastipur	630.72	09.10.2017	60	140.4
36.	ANM School, Mahnar, Vaishali	630.72	28.12.2017	17	65
37.	ANM School, Piro, Bhojpur	630.72	10.07.2018	32	0
38.	ANM School, Sherghati, Gaya	630.72	02.11.2017	35	111.04
39.	ANM School, Jhanjharpur, Madhubani	630.72	07.11.2017	90	329.1
40.	ANM School, Banmankhi, Purnea	630.72	29.01.2018	95	243.05
41.	ANM School, Bikramganj, Rohtas	630.72	27.02.2018	60	117
42.	ANM School, Khairail, Supaul	630.72	22.10.2017	0	0
43.	ANM School, Mahua (CHC Rajapakar), Vaishali	630.72	25.09.2018	10	0
44.	ANM School, Narkatiyaganj, West champaran	630.72	07.11.2017	75	371
45.	ANM School, Dalsinghsarai, Samastipur	630.72	09.10.2017	50	137.37
46.	ANM School, Areraj, East Champaran	630.72	02.12.2017	10	125.11
47.	ANM School, Arwal	630.72	28.02.2018	28	0
48.	ANM School, Kahalgaon, Bhagalpur	630.72	15.03.2018	50	114.03
49.	ANM School, Benipatti, Madhubani	630.72	17/05/2018	22	0
50.	ANM School, Phulparas, Madhubani	630.72	28.04.2018	0	0
51.	ANM School, Benipur, Darbhanga	630.72	17.05.2018	48	0
52.	ANM School, Manjhaul, Begusarai	630.72	13.02.2018	0	0
53.	ANM School, Bakhri, Begusarai	630.72	13.02.2018	2	0
54.	ANM School, Baliya, Begusarai	630.72	12.02.2018	18	0
55.	ANM School, Sikarhana, East Champaran	630.72	01.02.2018	60	309.04
56.	ANM School, Chakia, East Champaran	630.72	31.03.2018	16	67.19
57.	ANM School, Rosra, Samastipur	630.72	29.06.2018	18	0
58.	ANM School, Pupari, Sitamarhi	630.72	17.05.2018	0	0
59.	ANM School, Baikunthpur, Gopalganj	630.72	15.03.2018	25	0
60.	ANM School, Madhepura	630.72	31.03.2018	10	0
61.	B.Sc. Nursing Colleges (ANMMCH, Gaya)	2649.76	05.05.2017	58	669.21

S No.	Name of institute	A.A. Amount	Date of Work Order	Physical progress as on 15.11.18 (in %)	Expenditure up to August 2018
62.	B. Sc. Nursing College, DMCH, Darbhanga	2649.76	31.03.2017	65	1052.29
63.	B. Sc. Nursing College, GMC Bettiah,	2649.76	10.07.2017	13	0
64.	B. Sc. Nursing college, GMC Purnea	2649.76	31.03.2017	28	274.23
65.	B. Sc. Nursing College, JLNMCH, Bhagalpur,	2649.76	31.03.2017	92	726.26
66.	B. Sc. Nursing College, PMCH, Patna,	2649.76	18.08.2017	0	0
67.	B. Sc. Nursing College , SKMCH, Muzaffarpur	2649.76	31.03.2017	42	373.36
68.	B. Sc. Nursing College VIMS, Pawapuri, Nalanda	2649.76	31.03.2017	95	1081.92
69.	Para Medical Institute, Araria	998	24.03.2017	11	0
70.	Para Medical Institute, Sadar Hospital (Old Campus), Banka	998	05.05.2017	93	550.26
71.	Para Medical Institute, SDH Hathwa, Gopalganj	998	31.03.2017	65	400
72.	Para Medical Institute, Sadar Hospital, Katihar	998	26.04.2017	0	0
73.	Para Medical Institute, Old Sub-divisional Hospital, Khagaria	998	24.03.2017	57	0
74.	Para Medical Institute, Sadar Hospital, Madhubani	998	09.05.2017	0	0
75.	Para Medical Institute, Leprosy Hospital Munger	998	24.03.2017	77	0
76.	Para Medical Institute, Sadar Hospital, Purnea	998	31.03.2017	28	0
77.	Para Medical Institute, Sadar Hospital, Saharsa	998	31.03.2017	28	187.67
78.	Para Medical Institute, Sadar Hospital, West Champaran	998	10.07.2017	13	0
79.	Para Medical Institute, Sadar Hospital, Buxar	998	07.08.2017	85	457.52
80.	Para Medical Institute, Mahuli, Jamui	998	12.02.2018	55	0
81.	Para Medical Institute, Rajapakar, Vaishali	998	25.09.2018	10	0
82.	Para Medical Institute, Sadar Hospital Chhapra, Saran	998	04.05.2018	18	0
83.	Para Medical Institute, Nungarh, Lakhisarai	998	12.09.2018	28	0
84.	Para Medical Institute, Supaul	998	29.11.2018	0	0
85.	Para Medical Institute, Budhaul, Nawada	998	29.01.2017	20	0

S No.	Name of institute	A.A. Amount	Date of Work Order	Physical progress as on 15.11.18 (in %)	Expenditure up to August 2018
86.	Para Medical Institute, Sadar Hospital, Arwal	998	28.02.2018	30	0
87.	Para Medical Institute, Sadar Hospital, Bhojpur	998	29.05.2018	15	0
88.	Para Medical Institute, Pawapuri Medical College Campus, Nalanda	998	28.04.2018	22	0
89.	Para Medical Institute, Patkoikla, Kochadhaman, Kishanganj	998	31.03.2018	0	0
90.	Para Medical Institute, Madhepura	998	31.03.2018	8	0
91.	Para Medical Institute, Sub-divisional hospital, Maharajganj, Siwan	998	08.05.2018	30	0
92.	Para Medical Institute, Sarangpur, Bhabhua	998	26.10.2018	2	0
	Total	**93,006.40**			**13,845.00**
93.	GNM School, Ashokdham, Balgudar, Lakhisarai	1335.38	**Work order not issued**		
94.	GNM School, Aurangabad	1335.38			
95.	GNM School, village-Mirzapur, Begusarai	1335.38			
96.	GNM School, Sitamarhi	1335.38			
97.	GNM School, Sadar hospital, East Champaran	1335.38			
98.	GNM School, Sheohar	1335.38			
99.	ANM School, Madhaura, Saran	630.72			
100.	ANM School, Paliganj, Patna	630.72			
101.	ANM School, Pakri Dayal, East Champaran	630.72			
102.	ANM School, Haveli, Kharagpur, Munger	630.72			
103.	ANM School, Navgachhia, Bhagalpur	630.72			
104.	ANM School, Raxaul, East Champaran	630.72			
105.	ANM School, Belsand, Sitamarhi	630.72			
106.	ANM School, Barsoi, Katihar	630.72			
107.	ANM School, Vayasi, Purnea	630.72			
108.	ANM School, Teghra, Begusarai	630.72			
109.	Para Medical Institute, Village-Jamuawan (Ghosi), Jehanabad	998			
110.	Para Medical Institute, Sadar Hospital, Aurangabad	998			
111.	Para Medical Institute, Sadar Hospital, Sheohar	998			

S No.	Name of institute	A.A. Amount	Date of Work Order	Physical progress as on 15.11.18 (in %)	Expenditure up to August 2018
112.	Para Medical Institute, Sadar Hospital, East Champaran	998	**Work order not issued**		
113.	Para Medical Institute, Sadar Hospital, Sitamarhi	998			
114.	Para Medical Institute, Makhdumpur PHC, Sheikhpura	998			
115.	GNM School, Government Medical College, Samastipur	1335.38	**Tender not invited**		
116.	ANM School, Dumrao, Buxor	630.72			
117.	B. Sc. Nursing College, Government Medical College, Begusarai	2649.76			
118.	B. Sc. Nursing College, Government Medical College, Ara, Bhojpur	2649.76			
119.	B. Sc. Nursing College, Government Medical College, Chhapra	2649.76			
120.	B. Sc. Nursing College, Government Medical College, Madhepura	2649.76			
121.	B. Sc. Nursing College, Government Medical College, Madhubani	2649.76			
122.	B. Sc. Nursing College, Government Medical College, Mahua, Vaishali	2649.76			
123.	B. Sc. Nursing College, Government Medical College, Samastipur	2649.76			
124.	B. Sc. Nursing College, Government Medical College, Sitamarhi	2649.76			
125.	Para Medical Institute, Sherpur, Begusarai	998			
126.	Para Medical Institute, Samastipur	998			

Note: In Katihar, Khagaria, Munger, Jamui, Nawada, Nalanda and Siwan there was combined building for GNM & paramedical, in Araria & Arwal there was combined building for GNM, ANM & paramedical and in Purnea there was combined building for B.Sc. Nursing and paramedical, hence combined expenditure has been shown against GNM schools/B.Sc Nursing college.

Appendix-2.3

(Refer: Paragraph-2.7.2.1; Page-16)

Increase of postgraduate seats under Centrally Sponsored Scheme

(₹ in crore)

Sl. No.	Department	Name of the College	Seat(s) to be increased	Seat(s) increased	Deficit	Amount approved	Available amount			Amount spent
							Central share	State share	Interest	
1	Anesthesia	DMC Darbhanga	3	0	3	0.60	2.66	0.67	0.50	0.00
2	Anatomy		4	0	4	0.09				0.00
3	Biochemistry		1	0	1	0.00				0.00
4	Community Medicine		4	0	4	0.57				0.20
5	Forensic Medicine		2	0	2	0.65				0.12
6	General Medicine		6	5	1	0.25				0.25
7	General Surgery		1	0	1	1.30				0.00
8	Microbiology		1	0	1	0.55				0.49
9	Obst. & Gynaecology		4	4	0	1.30				0.89
10	Orthopedics		2	2	0	0.72				0.20
11	Pediatrics		4	2	2	0.86				0.50
12	Pharmacology		2	0	2	0.00				0.00
13	Psychiatry		1	0	1	0.00				0.00
14	Physiology		2	0	2	0.20				0.00
15	Radio Diagnosis		2	0	2	0.00				0.00
Sub Total DMC			**39**	**13**	**26**	**7.09**	**2.66**	**0.67**	**0.50**	**2.65**

Sl. No.	Department	Name of the College	Seat(s) to be increased	Seat(s) increased	Deficit	Amount approved	Available amount			Amount spent
							Central share	State share	Interest	
1	Anesthesia	NMC Patna	7	0	7	2.20	7.05	1.76	1.83	0.02
2	Anatomy		4	0	4	0.43				0.02
3	ENT		4	2	2	0.50				0.46
4	Forensic Medicine		1	0	1	0.07				0.00
5	General Medicine		9	9	0	3.00				0.07
6	General Surgery		4	4	0	1.50				1.09
7	Microbiology		3	0	3	0.32				0.00
8	Obst. & Gynaecology		2	2	0	0.50				0.48
9	Ophthalmology		4	0	4	0.25				0.15
10	Orthopedics		4	4	0	1.02				0.67
11	Pediatrics		4	4	0	2.14				0.14
12	Pathology		4	0	4	0.50				0.00
13	Psychiatry		1	0	1	0.00				0.00
14	Radiology		3	0	3	6.00				3.17
15	Skin & VD		3	1	2	0.06				0.16
16	TB & Chest		1	0	1	0.30				0.00
Sub Total NMC			**58**	**26**	**32**	**18.79**	**7.05**	**1.76**	**1.83**	**6.43**
1	Anatomy	PMC Patna	2	0	2	0.75	1.00	0.25	0.24	0.34
2	Microbiology		1	0	1	0.88				
3	Physiology		1	0	1	1.06				
Sub Total PMC			**4**	**0**	**4**	**2.69**	**1.00**	**0.25**	**0.24**	**0.34**
Grand Total			**101**	**39**	**62**	**28.57**	**10.71**	**2.68**	**2.57**	**9.42**

Appendix-2.4

(Refer: Paragraph-2.7.4; Page 19)

College wise statement of seats utilised during 2013-18

UG Course					
Name of College	**Intake capacity sanctioned**	**No. of seats vacant**	**Left the course in between**	**Total number of seats remained unutilised**	**Total seats utilised**
PMC Patna	750	0	2	2	748
GMC Bettiah	500	38	17	55	445
IGIMS Patna	500	2	2	4	496
DMC Darbhanga	500	14	2	16	484
NMC Patna	500	10	1	11	489
ANMMC Gaya	500	10	2	12	488
SKMC Muzaffarpur	500	9	0	9	491
JLNMC Bhagalpur	500	9	0	9	491
VIMS Pawapuri	500	15	0	15	485
BCPO Patna	200	0	76	76	124
PDC Patna	160	15	77	92	68
Total Allopath (A)	**5110**	**122**	**179**	**301**	**4809**
GAC Patna	160	2	35	37	123
RBTS Muzaffarpur	300	30	59	89	211
GTC Patna	200	29	5	34	166
Total AYUSH(B)	**660**	**61**	**99**	**160**	**500**
Grand Total (A) + (B)	**5770**	**183**	**278**	**461**	**5309**
PG Course					
PMC Patna	1103	65	290	355	748
IGIMS Patna	98	2	0	2	96
DMC Darbhanga	816	47	233	280	536
NMC Patna	239	42	41	83	156
ANMMC Gaya	24	4	4	8	16
SKMC Muzaffarpur	50	27	0	27	23
JLNMC Bhagalpur	74	0	14	14	60
PDC Patna	10	0	0	0	10
Total Allopath (A)	**2414**	**187**	**582**	**769**	**1645**
GAC Patna	32	2	1	3	29
RBTS Muzaffarpur	10	0	0	0	10
Total AYUSH (B)	**42**	**2**	**1**	**3**	**39**
Grand Total (A) + (B)	**2456**	**189**	**583**	**772**	**1684**

Appendix-2.5

(Refer: Paragraph-2.8.1; Page-20)

Sanctioned strength and availability of teaching and non-teaching staff

S No	Name of the institutions	Teaching						Non-teaching					
		Sanctioned strength	Persons-in-position			Shortage	Shortage in percentage	Sanctioned strength	Persons-in-position			Shortage	Shortage in percentage
			Regular	Contractual	Total				Regular	Contractual	Total		
1.	PMC Patna	576	280	45	325	251	43.6	272	86	11	97	175	64.3
2.	NMC Patna	546	185	32	217	329	60.3	160	51	28	79	81	50.6
3.	DMC Darbhanga	507	198	16	214	293	57.8	185	72	22	94	91	49.2
4.	GMC Bettiah	235	11	165	176	59	25.1	156	2	30	32	124	79.5
	Total	**1864**	**674**	**258**	**932**	**932**	**50**	**773**	**211**	**91**	**302**	**471**	**60.9**
5.	BCPO Patna	18	8	0	8	10	55.6	0	0	0	0	0	0
6.	Patna Dental College Patna	50	4	43	47	3	6	105	31	30	61	44	41.9
	Total	**68**	**12**	**43**	**55**	**13**	**19**	**105**	**31**	**30**	**61**	**44**	**41.9**
7.	RBTS Muzaffarpur	58	35	0	35	23	39.7	148	33	0	33	115	77.7
8.	GTC Patna	67	36	8	44	23	34.3	146	39	1	40	106	72.6
9.	GAC Patna	81	46	0	46	35	43.2	72	36	0	36	36	50
10.	GAC Begusarai	71	25	0	25	46	64.8	67	19	0	19	48	71.6
	Total	**277**	**142**	**8**	**150**	**127**	**46**	**433**	**127**	**1**	**128**	**305**	**70.4**
11.	College of Nursing, IGIMS Patna	41	19	0	19	22	53.7	29	4	6	10	19	65.5
12.	GNM PMCH Patna	14	1	3	4	10	71.4	2	1	6	7	-5	-250
13.	GNM DMCH Darbhanga	11	3	2	5	6	54.5	14	2	1	3	11	78.6
14.	GNM NMCH Patna	14	3	7	10	4	28.6	10	3	25	28	-18	-180

S No	Name of the institutions	Teaching						Non-teaching					
		Sanctioned strength	Persons-in-position			Shortage	Shortage in percentage	Sanctioned strength	Persons-in-position			Shortage	Shortage in percentage
			Regular	Contractual	Total				Regular	Contractual	Total		
15.	ANM School Gaya	7	2	1	3	4	57.1	16	17	0	17	-1	-6.25
16.	ANM School Bhagalpur	2	0	2	2	0	0	3	4	1	5	-2	-66.7
17.	ANM School Chhapra	4	2	1	3	1	25	9	11	1	12	-3	-33.3
18.	ANM School Begusarai	4	3	1	4	0	0	12	12	0	12	0	0
19.	ANM School Biharsharif	8	0	4	4	4	50	9	6	1	7	2	22.2
20.	ANM School Samastipur	8	1	2	3	5	62.5	8	7	1	8	0	0
21.	ANM School Sitamarhi	4	2	2	4	0	0	13	4	5	9	4	30.8
22.	ANM School Saharsa	4	1	1	2	2	50	14	5	5	10	4	28.6
	Total	**121**	**37**	**26**	**63**	**58**	**48**	**139**	**76**	**52**	**128**	**11**	**7.91**
	Grand total	**2330**	**865**	**335**	**1200**	**1130**	**48**	**1450**	**445**	**174**	**619**	**831**	**57.3**

Appendix-2.6

(Refer: Paragraph-2.8.1.1; Page-22)

Teaching hours of test-checked Medical Colleges

Department	Name of the College	Required teaching hours	Average required teaching hours	2013	2014	2015	Total	Average	Percentage	Deficiency %
Anatomy-I	DMC Darbhanga	650		385	452	463	1300			
Biochemistry-I	DMC Darbhanga	240		141	176	175	492			
Forensic Medicine	DMC Darbhanga	100		112	100	106	318			
Microbiology	DMC Darbhanga	250		149	-	118	267			
Pathology	DMC Darbhanga	300		146	115	131	392			
Pharmacology	DMC Darbhanga	300		161	144	143	448			
Physiology-I	DMC Darbhanga	480		232	282	306	820			
	Total	**2320**	**331.43**	**1326**	**1269**	**1442**	**4037**	**201.85**	**60.90**	**39.10**
Anatomy-I	GMC Bettiah	650		382	339	347	1068			
Biochemistry-I	GMC Bettiah	240		-	126	116	242			
Forensic Medicine	GMC Bettiah	100		60	58	91	209			
Microbiology	GMC Bettiah	250		150	118	156	424			
Pathology	GMC Bettiah	300		-	136	200	336			
Pharmacology	GMC Bettiah	300		-	198	208	406			
Physiology-I	GMC Bettiah	480		-	153	108	261			
	Total	**2320**	**331.43**	**592**	**1128**	**1226**	**2946**	**173.29**	**52.29**	**47.71**
Anatomy-I	IGIMS Patna	650		537	484	611	1632			
Biochemistry-I	IGIMS Patna	240		189	219	248	656			
Forensic Medicine	IGIMS Patna	100		106	94	83	283			
Microbiology	IGIMS Patna	250		149	138	154	441			

Department	Name of the College	Required teaching hours	Average required teaching hours	2013	2014	2015	Total	Average	Percentage	Deficiency %
Pathology	IGIMS Patna	300		254	256	272	782			
Pharmacology	IGIMS Patna	300		252	229	279	760			
Physiology-I	IGIMS Patna	480		256	318	246	820			
	Total	**2320**	**331.43**	**1743**	**1738**	**1893**	**5374**	**255.90**	**77.21**	**22.79**
Anatomy-I	NMC Patna	650		451	388	-	839			
Biochemistry-I	NMC Patna	240		173	192	201	566			
Forensic Medicine	NMC Patna	100		79	72	87	238			
Microbiology	NMC Patna	250		181	182	247	610			
Pathology	NMC Patna	300		192	150	206	548			
Pharmacology	NMC Patna	300		167	216	228	611			
Physiology-I	NMC Patna	480		231	248	237	716			
	Total	**2320**	**331.43**	**1474**	**1448**	**1206**	**4128**	**196.57**	**59.31**	**40.69**
Anatomy-I	PMC Patna	650		340	343	460	1143			
Biochemistry-I	PMC Patna	240		148	134	145	427			
Forensic Medicine	PMC Patna	100		65	99	79	243			
Microbiology	PMC Patna	250		130	118	117	365			
Pathology	PMC Patna	300		178	169	186	533			
Pharmacology	PMC Patna	300		192	219	209	620			
Physiology-I	PMC Patna	480		216	201	217	634			
	Total	**2320**	**331.43**	**1269**	**1283**	**1413**	**3965**	**188.81**	**56.97**	**43.03**

Appendix -2.7

(Refer: Paragraph-2.8.2; Page-23)

Details of insufficient infrastructure in test-checked medical institutions

A. Medical Colleges

Sl. No.	Infrastructure as per clause of Minimum Standard Requirement for the Medical College, Regulation 1999 and norms for anti-ragging measures	Audit Observations
1	**Campus:** (Clause A.1.1): Medical College, should be housed in a unitary campus near its teaching hospital.	GMC Bettiah was not housed in a unitary campus.
2	**Administrative Block:** (Clause A.1.2): There should be an administrative block, accommodation for college council room, office superintendent's room, separate common room for male and female students with attached toilets, cafeteria etc.	In DMC Darbhanga and GMC Bettiah, separate common room for male and female students with amenities and cafeteria were not available. In PMC Patna, college council room and office superintendent's room were not available. Besides, in DMC Darbhanga office superintendent's room was also not available.
3	**Lecture theatre:** (Clause A.1.5): There should be well-equipped lecture theatres with facilities for conversion into E-class.	Three test-checked medical colleges (DMC Darbhanga, NMC Patna and GMC Bettiah) had no facilities for conversion into E-class/virtual class for teaching.
4	**Library:** (Clause A.1.4) There shall be an air-conditioned Central Library with seating arrangement for at least 200/300 and amenities with 7000/11000 books for 100 / 150 admission respectively.	Two Medical Colleges (PMC Patna and DMC Darbhanga) had inadequate sitting capacity and shortfall was ranging from 25 to 56 *per cent.* GMC Bettiah had inadequate books and shortfall was 79 *per cent*. Besides, in DMC Darbhanga no air conditioner was installed in the new library, computer room did not have chair/ table/computer/ nodes/other furniture/air conditioner etc. There was an e-library room within the central library building with nothing inside the room and no facility for Information Technology in teaching medicine.
5	**Laboratories:** (Clause A.1.19-a): There should be 6 laboratories (150 Sqm. area each).	In two test-checked Medical Colleges (DMC Darbhanga and PMC Patna), area of six laboratories were lower than the norms.
	Central Research Laboratories: (Clause A.1.19-b)	Three of the test-checked Medical Colleges (DMC Darbhanga, PMC Patna and GMC Bettiah) had no Central Research Laboratory.
	Central Laboratories: (Clause B.4)	Three test-checked medical colleges (DMC Darbhanga, NMC Patna and GMC Bettiah) had no such laboratories although they had separate laboratories at department levels.
6	**Hostel**: (Clause B.12): College should have hostel provision for at least 75% of the total intake of students at a given time equipped with specified facilities.	In GMC Bettiah there was no own hostel facility whereas in two GMCs (DMC Darbhanga and NMC Patna) recreation facility was not available. In DMC Darbhanga except for one newly constructed girl's hostel, condition of the hostels was very poor. In IGIMS Patna visitor room, sick room, recreation room, laundry room and luggage room was not available in girls' hostel. Four to eight girls were living in one room.
7	**Central Kitchen**: (Clause B.7): There should be Central Kitchen which shall be commodious, airy, sunny and clean with proper flooring with exhaust system.	Three medical colleges (PMC Patna, DMC Darbhanga and NMC Patna) had no central kitchen.
8	**Central Workshop**: (Clause A.1.8): There should be central workshop for repair & maintenance.	Three test-checked medical colleges (DMC Darbhanga, NMC Patna and PMC Patna) had no such central workshop.

Sl. No.	Infrastructure as per clause of Minimum Standard Requirement for the Medical College, Regulation 1999 and norms for anti-ragging measures	Audit Observations
9	**Day Care Centre**: (Clause A.1.22)	None of the test checked medical colleges except IGIMS Patna had Day Care Centre.
10	**Staff Quarters:** (clause B.10.2): There should be sufficient number of quarters for teaching and non-teaching staffs.	In GMC Bettiah such facility was not available whereas in PMC Patna the quarters were not sufficient. However, vital facilities like uninterrupted water supply power supply etc., were not maintained in DMC Darbhanga.
11	**Examination Hall** (clause A.1.6): There should be one Examination Hall of capacity 250 with area of 250 sqm.	In DMC Darbhanga one non-functional examination hall was available.
12	**Intercom Network**: (clause A.1.15): Intercom network including paging and bleep system between various sections, hospitals and college should be available for better services, coordination and patient care.	No Intercom Network facility was available in DMC Darbhanga.
13	**Biometric fingerprint attendance machine**: (clause A.1.23-a): The Council shall install biometric fingerprint attendance machine in all the Medical Colleges for capturing faculty attendance.	In DMC Darbhanga, 16 machines were not working out of installed 25 devices (biometric fingerprint attendance machine).
14	**CCTV Camera: (Clause A.1.23-b):** Every medical college shall have CCTV system in the medical college and shall provide live streaming of both classroom teaching and patient care in the teaching hospital.	In DMC Darbhanga, no CCTV facilities were available in all vulnerable places.
15	**Demonstration Room**: (clause A.2 (1)-B): As per minimum standard there should be demonstration rooms with required facilities so as to accommodate at least 50 to 60 students.	In DMC Darbhanga, no demonstration room with such specification was available.

B. Dental College

Sl. No.	Infrastructure as per clause of Revised BDS Course Regulation 2007 and norms for anti-ragging measures	Audit observations
1	**Administrative Block:** (Clause 1): The college should have an Administrative Block with minimum required infrastructure.	Administrative officer's room and pantry were not available in the administrative block.
2	**Lecture Hall:** (Clause 03 of general facilities): College should have four lecture halls with specified minimum required infrastructure.	In the college, three classrooms (75 *per cent*) were available out of which two classrooms were not equipped with A.C., audio visual aids etc.
3	**Library:** (Clause 02 of general facilities): college should have library with desired facility /amenity.	There was sitting capacity for 34 (33 *per cent*) persons against the minimum required capacity of 50 *per cent* of 206 students. Besides, college lacked required facilities in the library.
4	**Hostel facility:** (Clause 13): The hostel accommodation should be provided.	College had no own hostel facility. Despite alternate arrangement, college failed to provide hostel facility to most of the male students.
5	**Auditorium:** (Clause (16): There should be an auditorium with 400 capacity and amenities.	Auditorium had sitting arrangement of 100 students without audio/video facility, reception counter, green room, lobby area in the college.

Sl. No.	Infrastructure as per clause of Revised BDS Course Regulation 2007 and norms for anti-ragging measures	Audit observations
6	**Staff Quarters:** (Clause 14 of general facility): All the staff members, teaching and non-teaching working in the institution shall be provided adequate accommodation.	The college had no staff quarter.
7	**Artist Room:** (Clause 6 of general facility).	The college had no artist room.
8	**Dental Chairs and Units:** (Clause regarding requirement of Dental Chairs and units):	Department-wise shortfall varied from zero to 37.5 *per cent*.
9	**Examination Hall:** A separate hall for university and other examination furnished with chairs and –individual tables to accommodate 125 students at a time.	Separate examination hall was not available in the college.
10	**Play Ground:** (Clause 15 of general facility) There shall be facilities for both in-door and out-door games in the premises.	Playground was not available in the college.
11	**Pollution Control Measures**: (clause 10 of General facility): All the dental institutions should take adequate pollution control measures by providing insemination plant, sewage water treatment plant, landscaping of the campus etc.	Pollution Control measures as per the norms was not available in the college.
12	**Laboratories:** (clause 17 of general facility): There should be laboratories for dental subject, medical subject and clinical subject with specified area.	In the college, laboratories for medical subjects were running in PMC, Patna as the college did not have its own. However, the records/information related to available area of laboratories of dental and clinical subjects was not made available to audit.
13	**Distilled Water Plant:** (clause 18 of general facility)	No distilled water plant was available in the college.

C. AYUSH Colleges

Sl. No.	MSR for Ayurvedic College and attached Hospital and Homeopathic college, CCIM and norms for anti-ragging measures etc.	Audit Observations
1	**Central Library**: (Clause 4 of Schedule II) A central library should have seating capacity for at least 100 students with specified requirements.	In GAC Patna, the college had 50 *per cent* sitting capacity against the norms and the central library had no librarian. Further, updated edition of the books was also not available.
2	**Herbal Garden**: (Clause Schedule III): A well-developed medicinal plant garden with 250 species of medicinal plants should exist with the college.	Maintenance in the Herbal Garden was very poor. Unwanted weeds and plants were noticed and only 212 against 250 species of plants were available.

D. GNM Schools

Sl. No.	Syllabus and regulations of GNM and regulation for anti-ragging measures	Audit Observations
1	**Teaching Block:** (Clause teaching block of physical facility): There should be a teaching block of 20000 square feet including Lecture Hall, Laboratories, Labs, Halls, Separate common rooms, Faculty room etc with specified amenities (Clause 5a to 5d, 6 and 7)	Two GNM Schools (GNM PMCH and GNM DMCH) possessed less area (8787 sq. feet and 2506 sq. feet respectively) for teaching block. Common room, staff room, Multipurpose hall, A.V. room & store room, CHN & Nutrition Lab, Paediatrics Lab, Pre-clinical science lab were not available in GNM DMCH. However, there was a very small chamber for the Principal and the Principal discharged her duty from computer lab (consequently computer lab was non-functional). None of the test-

Sl. No.	Syllabus and regulations of GNM and regulation for anti-ragging measures	Audit Observations
		checked GNM schools had chamber for the vice-Principal except in GNM NMCH. In GNM PMCH, there were no amenities in the teaching block. In College of Nursing IGIMS Patna common room and multipurpose hall were shared with IGIMS Patna.
2	**Classrooms: (**Clause 1 and 7 for Physical facilities): There should be at least three classrooms with adequate accommodation capacity, proper lightening, well ventilation, requisite furniture and equipment as per the norms. Besides, school should also possess audio visual aids and have room for its safe storage.	In GNM DMCH, there was only two lecture halls against the required number of minimum three as per the norms. Size of the lecture halls were less against the norms and the requisite facilities for conducting classes were also deficit. Besides, in GNM PMCH there was no audio-visual aids room & store room with basic as well as advanced training aids.
3	**Library:** (Clause 4 for Physical facilities) There should be a separate library in the school with specified required accommodations.	Three GNM Schools (College of Nursing IGIMS Patna, GNM PMCH and GNM DMCH) had less sitting capacity and shortage ranged between 85 to 100 *per cent* and without specified amenities. All the test-checked GNM schools had no separate budget for library. All test-checked GNM schools had no updated edition of books except College of Nursing IGIMS Patna. In GNM DMCH there was no library committee, no Internet facility in the library, poor lighting facilities without ventilation, no cabin for librarian, no intercom facility, no provision for catalogue cabinets, racks for student bags, book display racks, bulletin boards and stationery items like index cards, borrowers cards, labels and registers, no separate record room with steel racks, built-in shelves and racks, cupboards and filing cabinets for proper storage of records and other important papers/ documents belonging to the college and no librarian was posted in the school library.
4	**Hostel facility:** (Clause of physical facilities): There should be separate hostel for boys and girls with required amenities and infrastructure in respect of hostel rooms, toilets and bathroom, recreation facilities, visitors room, kitchen and dining hall, pantry, washing and ironing space, wardon's room, telephone facility, canteen, transport etc.	Two GNM Schools (College of Nursing IGIMS Patna and GNM DMCH) had hostel without adequate seats. In GNM DMCH, girls had to live together in six to eight numbers in the same room as there were less number of available free rooms due to unauthorised occupant. In two GNM Schools (GNM DMCH and GNM PMCH), required furniture in the hostel was not as per the norms. None of them had intercom and washing & ironing facility, three GNM schools (GNM DMCH, GNM PMCH & GNM NMCH) had no transport and pantry facility, three GNM schools (GNM DMCH, GNM PMCH & College of nursing IGIMS Patna) had no canteen, two GNM schools (GNM DMCH and GNM PMCH) had no geyser facility, three GNM schools (GNM NMCH, GNM PMCH & College of nursing IGIMS Patna) had insufficient space in dining hall and GNM DMCH had non-functional/ non-furnished dining hall. Two GNM schools (GNM PMCH and GNM NMCH) had no recreation room while two GNM schools (GNM DMCH and GNM NMCH) had no reading room. In GNM DMCH, visitor room was not available.
5	**Multipurpose Hall:** (Clause 3 of General facilities) stipulates for multipurpose hall (MP Hall) with aids.	GNM DMCH had no multipurpose hall, College of Nursing, IGIMS Patna had no separate MP Hall. GNM PMCH had multipurpose hall but not with prescribed dimensions.

Sl. No.	Syllabus and regulations of GNM and regulation for anti-ragging measures	Audit Observations
6	**Other Facility:** (Clause 8 of general facilities): There should be **s**afe drinking water & adequate sanitary/ toilet facilities available for men and women separately.	Two GNM Schools (GNM DMCH and GNM PMCH) such facilities were deficit against the norms. In GNM DMCH sufficient toilets were available but were kept locked by staff nurses who reside in other rooms of the academic building.
7	**Laboratories:** (Clause 2 & 6): There should be at least six laboratories with specified equipment (1. Nursing Practice Laboratory, 2. Community Health Nursing &Nutrition Laboratory, 3. Advance Nursing Skill Laboratory, 4. Computer Laboratory, 5. OBG & Paediatric Laboratory, 6. Pre-Clinical Science Laboratory	1. In all the GNM Schools except College of Nursing, IGIMS, the demonstration beds-students ratio were in the range from 1:33 to 1:66 against the minimum norms of 1:6; College of Nursing IGIMS Patna (1:5), GNM DMCH (1:50), GNM NMCH (1:66) and PMCH (1:33).
		2. Two GNM Schools (GNM DMCH and GNM NMCH) had no Community Health Nursing & Nutrition Laboratory while there were deficiencies in articles and equipment against the prescribed norms in the laboratory of GNM PMCH.
		3. Audit observed that out of four test-checked GNM schools, in GNM DMCH due to space constraint skill lab was not running efficiently and effectively.
		4. Two GNM Schools (GNM DMCH and GNM NMCH) were deficit in number of computers in the laboratory. In GNM DMCH computer laboratory was used as office room and Principal, teachers and other staff used that room for various official purposes.
8	**Playground:** (clause 11 of physical facility): As per the norms, playground should be spacious for outdoor sports like Volleyball, football, badminton and for Athletics.	In GNM DMCH, playground was not available.
9	**Close watch:** The institution shall identify, properly illuminate and keep a close watch on all locations known to be vulnerable to occurrences of ragging incidents.	In GNM DMCH and GNM NMCH, no CCTV facilities were available.

E. ANM Schools

Sl. No.	Syllabus and Regulation of ANM school and anti-ragging guidelines	Audit Observations
1	**Classroom and Audio Visual Aid:** (Clause of physical facilities): There should be two adequately large classrooms having sufficient accommodation capacity with necessary audio visual aid and other equipment and articles.	Three ANM schools (Chhapra, Bhagalpur and Sitamarhi) had only one classroom. Classrooms were overcrowded in seven ANM schools (In Biharsharif 95 students were accommodated in the classroom of 50 capacity whereas in Chhapra and Gaya 90 and 140 students were respectively accommodated in the class room having less area than the norms for 40-60 students. Four ANM schools (Samastipur, Saharsa, Sitamarhi and Begusarai) had less area than the minimum norm). Further, five ANM Schools (Begusarai, Chhapra, Gaya, Saharsa and Sitamarhi) had no audio-visual aid facilities. In ANM Samastipur such audio-visual aid facilities were available but were un-installed and were non-functional whereas in ANM Biharsharif these were non-functional and no visual classes were organised since 2015-16. In ANM Chhapra, two rooms of teaching block were occupied by office of the Regional Additional Director, Health Department, Saran, Chhapra.

Sl. No.	Syllabus and Regulation of ANM school and anti-ragging guidelines	Audit Observations
2	**Library:** (Clause of physical facilities): There should be a library room of adequate size in order to accommodate 40 students with sufficient number of books and amenities. Besides, library should have updated edition of textbooks, referral books, few professional journals and general knowledge magazines as well as story books etc. in sufficient numbers.	ANM Sitamarhi has no library facility. In seven test-checked ANM schools library was running in very small rooms with seating capacity ranging from zero to 20 (Biharsharif (Nil), Begusarai (Nil), Chhapra (Nil), Bhagalpur (7), Sitamarhi (Nil), Saharsa (20) and Samastipur (12)) and shortage range from 50 *per cent* to 100 *per cent*. Besides, in five test-checked ANM schools (Biharsharif, Samastipur, Sitamarhi, Saharsa and Bhagalpur) updated edition of books were not available.
3	**Nursing Laboratory:** (Clause of physical facilities)	Six ANM schools (Sitamarhi, Biharsharif, Bhagalpur, Chhapra, Gaya and Samastipur) were running without nursing lab while in ANM school, Sitamarhi nursing lab was in condemned condition.
4	**Nutrition Laboratory:** (Clause of physical facilities).	Nutrition laboratory was not available in five ANM Schools (Biharsharif, Bhagalpur, Chhapra, Gaya and Sitamarhi) whereas in ANM school, Samastipur the lab was running in too small a room to run efficiently and effectively.
5	**Hostel Facilities:** (Clause Residential Facilities for students): ANM training School being a residential programme, has to have adequate hostel for the students with specified facilities.	None of schools (except Saharsa and Chhapra) had separate building for the school and hostel and all students were accommodated in academic building. In all test-checked schools (Except Sitamarhi) students were accommodated in few rooms ranging from 06 to 14 students in each room. Besides, in two ANM schools (Bhagalpur and Sitamarhi) students were accommodated in groups of 35 to 40 students in a hall. In two ANM schools (Begusarai and Gaya) the buildings used for hostel purpose were badly damaged while in ANM school, Sitamarhi, the building of the school was in dilapidated condition and was declared condemned. In two ANM schools (Biharsharif and Samastipur), a dining hall with accommodation capacity for 20 was without proper seating arrangement and purified water facility, a very small store room, no recreation room, no facilities for hot and cool water and no telephone connection was available. Besides, there was no sick room and visiting room in ANM school, Biharsharif. A two seater sick room (presently used by Principal as Principal Chamber) and a visiting room without amenities was available in ANM school, Samastipur. There were insufficient toilets (70 *per cent*) available in ANM school, Samastipur. In ANM school, Chhapra, there was water logging and unhygienic condition around the bathrooms of hostel and surrounding of hostel was also found water logged.
6	**Transport facilities**: (Clause for physical facility): There should be transport facilities for community health nursing practice.	None of the test-checked ANM schools had own transport facilities.
7	**Toilets facility:** As per the norms, there should adequate toilet facility in the school building for the students and teachers at least in the ratio of 1:10.	In ANM school, Biharsharif only one toilet was available in the school building for teachers (Male and Female), official staffs, guards and 200 students. Thus, the ratio was 1:214 in comparison to 1:10. There was only one bathroom available in teaching block of ANM school, Chhapra.

Sl. No.	Syllabus and Regulation of ANM school and anti-ragging guidelines	Audit Observations
8	**CCTV Camera**	There were no CCTV facilities in four ANM schools (Begusarai, Saharsa, Biharsharif and Samastipur) for close watch as anti-ragging measures.
9	**Staff Quarters**: There should be family accommodation available in or near the campus of the Hospital/CHC Rural Health Treatment Centre for 80 *per cent* of the teaching staff. A family quarter should be provided for the warden in the hostel so that she could be residential to look after the students, and available at the time of emergency.	Such quarters were not available in two ANM Schools (Biharsharif and Samastipur).

Appendix-2.8

(Refer: Paragraph-2.8.4; Page-27)

Shortage of equipment in medical colleges

Sl. No.	Department	Requirement	IGIMS, Patna	GMC, Bettiah	DMC, Darbhanga	NMC, Patna	PMC, Patna	Total
			Less than norms (in *per cent*)	Less than norms (in *per cent*)	Less than norms (in *per cent*)	Less than norms (in *per cent*)	Less than norms (in *per cent*)	Less than norms (in *per cent*)
1	Anatomy	38	45	71	18	42	68	49
2	Physiology	85	72	76	95	54	86	77
3	Biochemistry	32	44	91	91	62	-	72
4	Pathology	82	51	100	51	70	-	68
5	Microbiology	52	48	94	-	50	79	68
6	Community Medicine	76	78	97	92	80	92	88
7	Forensic Medicine	91	77	100	88	75	92	86
8	Pharmacology	14	-	93	64	71	86	78
9	Medicine	53	89	100	70	79	87	85
10	Paediatrics	49	65	98	-	10	-	58
11	Surgery	42	69	95	76	76	-	79
12	Orthopaedics	25	16	100	80	-	-	65
13	Otorhinolaryngology	178	25	99	60	-	62	61
14	Obs. & Gynaecology	97	27	69	-	56	77	57
15	Anaesthesiology	51	25	96	75	-	94	72
16	TB & Chest	13	85	100	-	69	85	85
17	Dermatology, Venerology & Leprosy	8	100	100	88	50	25	73
18	Psychiatry	13	100	100	100	85	77	92
19	Ophthalmology	39	8	-	62	44	-	38
20	Radio-Diagnosis	10	10	100	90	40	-	60

Appendix-2.9
(Refer: Paragraph-2.8.5; Page -30)
Rural Internship/community Health Nursing Program

Norms of the regulatory body	Deficiencies observed
MCI stipulates successful completion of one-year compulsory rotating internship including two months' time for community medicine is essential for award of MBBS degree. In community medicine interns get exposure to immunization programmes, family welfare planning procedure, locally prevalent endemic disease, national health programmes, linkage with other agencies as water supply, food distributions and environment/social agencies, provide health education to individual/ community and get managerial skill, delegation of duties to paramedical staff and other health professional. For these they required to be attached with community health centres, district hospitals, primary health centres, rural health training centres *etc.* and at least one week village attachment such as village health centres, ASHA Sub centres etc. Every medical college was to have three primary health centres (PHC)/rural health training centres (RHTC) attached to it for this.	• Interns of PMC Patna and NMC Patna were not exposed to prevention and control of locally prevalent endemic diseases, nutritional disorders and health education programme during 2013-18. Interns of PMC Patna were attached to village for one day only as transportation could not be arranged by college. Interns of NMC Patna and IGIMS Patna were not attached to village during 2013-18, resultantly they were not exposed to village community health issues, working of ASHA *etc*. None of the medical colleges organised any training programme during 2013-18 for interns showing linkages with other agencies such as water supply, food distribution and other environmental/social agencies. • Residential facilities for interns were not available in RHTCs attached to three[1] medical colleges. Although residential facility was available in RHTC, Kalyanpur attached with DMC Darbhanga but students did not stay there. Transport facility was not available in NMC Patna for rural and RHTC visits. • All the test-checked 16 interns of PMC Patna and five out of 15 test-checked interns of NMC Patna attached for one month with RHTC Fatuha (2016-17) and RHTC Sampatchak (2014-18) respectively did not complete the internship programme as per schedule. • In IGIMS Patna attached RHTC Maner, attendance of one student (September–October 2017) was found marked only for five days but RHTC reported 'nil' absent to IGIMS Patna. Further one student (period October-November 2017) was not found enrolled in attendance register but RHTC reported 'nil' absent for the student. • In DMC Darbhanga attached RHTC, Kalyanpur attendance of two students was not found marked for four days in attendance register (November 2016) but nil absentee was sent by the RHTC. MO, RHTC Kalyanpur (November 2018) replied that the attendance was missed to mark due to mistake. • It was noticed that 11 interns of PMC Patna were attached to PHC Fatuha during April 2016 to September 2016 for rural internship. Cross check of records (November 2018) of PHC Fatuha disclosed that these interns did not attend the internship at PHC Fatuha and they graduated without exposure to community health education. Principal PMC replied (February 2019) that investigation would be done and the facts would be intimated.

[1] *GMC Bettiah, NMC Patna and PMC Patna*

Norms of the regulatory body	Deficiencies observed
As per DCI, interns were to pursue three months' rural services for understanding different aspects of community related dental health aspects.	• In Patna Dental College Patna (PDC Patna), interns did not pursue three month rural services during 2013-17. Besides, PHC for internship was attached with the college only from 2017-18.
Norms of GNM education requires adequate infrastructure for students for exposure to community health nursing experience.	• In three[2] out of four test-checked GNM schools/College of Nursing, there was no accommodation facility for students at Community Health Nursing Centre which may adversely affect the intended aim and benefit of community health nursing field program. • Besides, due to paucity of funds, 76 students of Batch 2013 and 2014 did not complete rural internship in GNM PMCH, thus depriving them of necessary exposure. • Further, three PHCs were attached with GNM NMCH Patna. Out of three, Audit test-checked records of one PHC Sampatchak and observed that 165 students sent on community visit (2015-16 and 2017-18) did not attend the programme at PHC, Sampatchak.
Provisions of ANM Guidelines of INC	• Audit observed that out of eight test-checked ANM schools, in five[3] ANM schools six to 24 students, instead of four to five in a batch, were posted in sub centre/PHC. • In two ANM Schools (Samastipur and Gaya) students were not exposed to national health and family welfare programs during internship. • Besides, none of the test-checked ANM schools (except Sitamarhi) had residential facility at the attached PHC. • In ANM School, Saharsa community health nursing at PHC was not running after 28/7/2016.

[2] *GNM DMCH, GNM NMCH and GNM PMCH*

[3] *ANM School, Biharsharif (6 to 15), ANM School, Bhagalpur (8 to 24), ANM School, Gaya (13), ANM School, Samastipur (22) and ANM School, Sitamarhi (6-7).*

APPENDIX-2.10

(Refer: Paragraph-2.9; Page-30)

Financial irregularities in construction/management of medical institutes

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
1	Vardhman Institute of Medical Sciences, Pawapuri	M/s Nagarjuna Construction Company Ltd., Hyderabad	BRPNNL	5.21	As per clause of the contract, sales tax, purchase tax, turnover tax, service tax, VAT, octroi or any other tax on the material in respect of the contract shall be payable by the contractor and BRPNNL will not entertain any claim whatsoever in respect of the same. Contrary to this clause BRPNNL paid ₹0.93 crore and ₹4.28 crore to the contractor against reimbursement of Excise duty on steel and VAT respectively to the Contractor.
2	Vardhman Institute of Medical Sciences, Pawapuri	M/s Nagarjuna Construction Company Ltd., Hyderabad	BRPNNL	23.29	Clause 11 of General Conditions of Contract stipulates that compensation for escalation in price shall be available only for the work done during the stipulated period of the contract. No escalation shall be paid for the work executed in the extended contract period even if extension of time is granted without any action. Contrary to this clause, BRPNNL made payment to the contractor for price escalation for the work done after the stipulated period of time.
3	Vardhman Institute of Medical Sciences, Pawapuri	M/s Nagarjuna Construction Company Ltd., Hyderabad	BRPNNL	45.41	Rule 159(vii) of Bihar Public Works Department Code stipulates that in exceptional cases only, time extension can be allowed. Clause 5.3 of the contract also stipulates that request for extension of time may be considered if application is received within 14 days of happening of events. Contrary to this, due to irregular recommendation as well as grant of time extension to the contractor by the executing agency, Government was deprived of liquidated damage charges which was a maximum of 10 *per cent* of the tendered value from the contractor.

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
4	Vardhman Institute of Medical Sciences, Pawapuri	M/s. D.D.F. Consultant Pvt. Ltd.	BRPNNL	0.63	As per clause of agreement, supervision fee to the consultant was linked with the actual cost of work executed and was fixed @ 0.75 *per cent* of the work value executed. 1. The gross amount paid to the contractor was ₹539.59 crore, against which supervision fee @ 0.75% comes to ₹ 4.05 crore. Against this, the consultant was paid ₹ 4.64 crore. 2. Further as the amount of ₹ 5.21 crore paid towards reimbursement of additional VAT and Central Excise Duty was inadmissible hence supervision fee and fee for preparation of DPR on this amount would also be inadmissible. Thus, gross payment to the contractor towards works executed excluding these inadmissible payments was ₹ 534.38 crore and supervision fee @ 0.75% comes to ₹ 4.01 crore against the paid amount of ₹ 4.64 crore resulting in excess payment of ₹ 0.63 crore.
5	Government Medical College, Madhepura	M/s L&T Ltd.	BMSICL	3.55	As per clause of contract, the mobilisation advance given to the contractor was to be recovered along with interest at the rate equivalent to SBI PLR. However, it was recovered @ 10% contrary to the SBI PLR which was ranging from 13.40 to 14.75 *per cent* during the period. Due to this less recovery of interest, excess payment was made to the contractor.
			Total	**78.09**	
6	Government Medical College, Madhepura		BMSICL	1.79	Besides preparation of PPR, DPR, design and drawing, the executing agencies also engaged consultants for supervision of works including checking of bills of the contractor and recording of measurement. These functions were to be performed by the executing agencies for which they were charging centage to the Government. Hence payment to supervision consultant should have been met from the centage itself but the executing agency charged these to works expenses resulting in loss to the exchequer
7	Government Medical College, Bettiah		BMSICL	0.48	
8	Vardhman Institute of Medical Sciences, Pawapuri		BRPNNL	5.08	
			Total	**7.35**	

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
9	Government Medical College, Madhepura		BMSICL	10.97	Despite revision in centage charge on 25.01.2016, BRPNNL continued charging centage at the old rate and BMSICL started charging at revised rate *w.e.f.* August 2017 instead from 25.01.2016 which resulted in excess charge of centage.
10	Vardhman Institute of Medical Sciences, Pawapuri		BRPNNL	7.54	
11	Vardhman Institute of Medical Sciences, Pawapuri		BRPNNL	2.44	Centage on inadmissible payments as referred in Sl. No. 1 & 2 above was also not admissible. Price escalation of ₹23.29 crore was paid prior to January 2016 and in respect of reimbursement of VAT and additional Excise duty ₹3.84 crore out of total ₹5.21 crore was paid prior to January 2016. Hence centage on ₹27.13 crore (23.29 + 3.84) @ 9 *per cent i.e.* ₹2.44 crore was also inadmissible.
12	Vardhman Institute of Medical Sciences, Pawapuri		BRPNNL	0.46	BRPNNL charged centage also on fees paid to supervision consultants. As discussed at Sl. No. 08 above, charging of fee paid to supervision consultant to work expense was inadmissible. Hence, centage charged on these professional fees was also inadmissible.
			Total	**21.41**	
13	Government Medical College, Bettiah		BMSICL	**45.71**	The work was assigned to BMSICL in November 2012, There was delay at every stage. First NIT was invited in August 2013. NIT was cancelled thrice. 4th NIT was invited in June 2016, Letter of acceptance was issued in November 2016 and agreement was executed in May 2017. In 2nd NIT, all the tender evaluation formalities such as evaluation of technical and financial bid, selection of agency and negotiation of rate was completed but this NIT was arbitrarily and injudiciously cancelled which resulted into cost overrun besides delay in execution as the rate in BOQ had to be revised in the third NIT on the basis of SoR of 2014 which was earlier based on SoR of 2013 due to which BOQ amount was escalated by ₹45.71 crore. The selected agency in 2nd NIT agreed to execute the work on his quoted price.

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
					Further, in 4th NIT, the amount of BOQ was kept lower by reducing the scope of work however, test check of certain items in BOQ revealed that there was increase to the extent of approximately 10 *per cent.*
14	Construction of 10 ANM school		BMSICL	**3.20**	BMSICL received ₹45.42 crore for construction of 10 ANM schools under CSS and spent ₹42.22 crore under the scheme. All the works were completed and handed over (May 2018) but BMSICL did not refund the unspent balance of ₹3.20 crore to GoB.
15	Vardhman Institute of Medical Sciences, Pawapuri and Government Medical & Hospital, Bettiah			**190.5**	Administrative approval for establishment of medical college at Madhepura, Bettiah and Nalanda (Pawapuri) was accorded in March 2007 with the condition that a college fee and user charges of the hospital would be fixed in such a manner that there will be no burden of recurring expenditure on the government. Medical college at Pawapuri i.e. VIMS was functioning since 2013-14. Medical College and Hospital at Bettiah i.e. GMC&H, Bettiah was functioning since 2013-14. VIMS, Pawapuri and GMC&H, Bettiah incurred recurring expenditure of ₹83.58 crore and ₹108.01 crore respectively on college and hospital during 2013-18. VIMS, Pawapuri generated fees and user charges of ₹1.09 crore during the 2013-18. This implied that the colleges & hospital were not generating sufficient revenue to cover their recurring expenditure as envisaged in their administrative approval causing extra burden on the state exchequer.

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
16	Darbhanga Medical College, Darbhanga, Government Ayurvedic College, Patna, RBTS Homeopathy college, Muzaffarpur and Nalanda Medical College, Patna			**7.30**	Bihar Treasury Code, 2011 stipulates submission of DC bills within 06 months from the month of drawal of AC bills. DC bills of ₹7.29 crore out of ₹43.38 crore was pending from one to 12 years which was attributable to the fact that the amount was transferred to different agencies and subsequently the DDOs failed to obtain utilisation certificates from those agencies. Pending DC bills in DMC Darbhanga was ₹1.18 crore, in NMC Patna ₹2.23 crore, in RBTS Muzaffarpur ₹0.46 crore and in GAC Patna ₹3.42 crore.
17	Patna Medical College, Patna and Darbhanga Medical College, Darbhanga			**0.15**	To discourage PG students from leaving the course midway, GoB decided (April 2017) that from 2017-18 session, every student taking admission in PG courses would execute and submit a bond for payment of ₹15 lakh and all the stipend received if they left the course midway would be recovered. Department did not prescribe the manner of deposit or utilisation of amount taken from student as bond money. As a result in PMC, ₹15.00 lakh taken (April 2018) from one student of the 2017-18 batch, who left the course midway, was lying idle in the bank account. Further, in DMC college authorities had taken bond from only 09 students out of 107 admissions.
18	Patna Medical College & Hospital Patna, Nalanda Medical College & Hospital Patna, Darbhanga Medical College & Hospital Darbhanga, ANM Medical College & Hospital Gaya, SK Medical College & Hospital Muzaffarpur, JN Medical College & Hospital Bhagalpur			**2.76**	A Centrally Sponsored Scheme (CSS) to increase PG seats in the six state government medical colleges was initiated in 2009-10 with funding pattern of 75 *per cent* by GoI and 25 *per cent* by GoB. GoI released (March 10 to September 2012) ₹29.06 crore against which the State could release (2018) only ₹6.93 crore (19 *per cent*) in place of ₹9.69 crore.

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
19	Government Ayurvedic College, Patna			**2.95**	In CSS for development of model Ayurvedic institutions / Centre of Advanced Studies, it was directed that the grantee institute shall maintain a separate account of grant received with a scheduled national bank. Under the scheme, GACP received ₹2.95 crore from GoI during 2010-13 but did not maintain separate bank account. Rather it kept the funds in already existing bank accounts of the college. Besides, no cashbook was maintained for this fund. Utilisation certificate revealed that the college had spent ₹1.80 crore from this fund. Scrutiny of Bank statement disclosed that only ₹0.82 crore was available (September 2018) in the bank in place of ₹1.15 crore, indicating short balance of ₹0.33 crore. Short balance of ₹0.33 crore was attributable to diversion of the funds towards salary payment during 2012-13 as banker cheques of salary was not credited to the bank. The amount was yet to be recouped (September 2018). To check the actual balance in bank, Bank Reconciliation Statement was to be prepared but no reconciliation of bank balance was carried out by the college (September 2018).
20	Patna Medical College Patna, Nalanda Medical College Patna and Darbhanga Medical College Darbhanga			**15.18**	Under CSS to increase PG seats, in three test checked medical college an amount of ₹28.57 crore (DMC - ₹7.09 crore, NMC – ₹18.79 crore and PMC – ₹2.69 crore) was approved (August 2010) by GoI against which ₹15.96 crore, including interest of ₹2.57 crore was made available to these three colleges (DMC – ₹3.83 crore, NMC –₹10.64 crore and PMC – ₹1.49 crore). PMC refunded (August 2015 and March 2018) an amount of ₹1.14 crore as it could not utilise the same. Despite availability of ₹15.96 crore to the colleges, they could spend only ₹9.42 crore (November 2018). An amount of ₹15.18 crore could not be released to the colleges due to non-utilisation of earlier released funds.

Sl. No.	Name of the Medical College	Name of the Contractor/ Consultant	Name of the Executing Agency	Amount (*in crore*)	Nature of payment
21	Government *Tibbi* College, Patna	M/s New Patliputra Security Services, Patna	Respective colleges	0.17	Excess payment in the form of Service Tax was made to the outsourced agency hired for security, cleaning and other housekeeping services though the services were exempted from Service Tax during July 2012 to March 2017 vide serial No. 9 of Mega Exemption Notification No. 25/2012-ST dated 20.06.2012 as amended vide Notification. No. 06/2014-ST dated 11.07.2014 and 10/2017-ST dated 08.03.2017
22	Government Ayurvedic College, Patna	M/s Pragati Constructions, Patna		0.04	
23	Patna Dental College, Patna	M/s Elite Falcon's, Patna and Intelligence Services, Patna		0.02	
24	Government Medical College, Bettiah	M/s Lahri Enterprises, Bettiah and M/s Goswami Security Service Pvt. Ltd., Muzaffarpur.		0.15	
				0.38	
			Grand Total	**374.98**	

APPENDIX- 2.11

(Refer: Paragraph-2.10.5; Page-35)

Excess selection/nomination of candidates over approved intake capacity of INC

SL	Name of Institute	2015-16		2016-17		2017-18	
		Sanctioned seat by INC	Admission done	Sanctioned seat by INC	Admission done	Sanctioned seat by INC	Admission done
1	GNM PMCH	40	65	40	65	40	65
2	GNM DMCH	40	50	40	50	40	50
3	ANM School, Gaya	30	135	30	134	30	123
4	ANM School, Bhagalpur	30	99	30	98	30	91
5	ANM School, Chhapra	50	66	50	83	50	87
6	ANM School, Begusarai	20	50	-	-	20	50
7	ANM School, Biharsharif	48	100	30	95	30	95
8	ANM School, Sitamarhi	20	49	20	46	20	45
9	ANM School, Saharsa	20	51	20	49	20	51
	Total	**298**	**665**	**260**	**620**	**280**	**657**

(Source: Data provided by BCECE Board and nursing school)