National AYUSH Grid

**Syllabus subtopic:** Issues relating to development and management of Social Sector/Services relating to Health, Education, Human Resources, issues relating to poverty and hunger.

**News:** The AYUSH Grid is envisaged as a comprehensive IT backbone covering the different silos of the AYUSH Sector.

**Prelims and Mains focus:** About the project and its significance in the health sector,
National Ayush Mission

**Ministry of AYUSH** has finalised components of AYUSH Grid Project in consultation with various stakeholders. The process of Expression of Interest (EOI) and Request for Proposal (RFP) for on-boarding of Project Management Consultancy (PMC) for the AYUSH Grid Project has been completed and the eligible agency discovered through the process has been selected.

Ministry of AYUSH has taken up various pilot projects like AYUSH Hospital Management Information System (A-HMIS), Yoga locator application, Telemedicine, Yoga Portal, A-HMIS trainings, IT course for AYUSH Professionals, etc. which shall be merged into AYUSH Grid Project after completion of pilot period.

Ministry of AYUSH has also signed Memorandum of Understanding (MoU) with **Ministry of Electronics and Information Technology (MeitY) for technical help in AYUSH Grid Project** and accordingly, Ministry has handed over projects of Dashboard, GIS facility for various functionalities of AYUSH and AYUSH Information Hub to National e-Governance Division(NeGD)/ Bhaskaracharya Institute for Space Applications and Geo-Informatics(BISAG).
Introduction

Department of AYUSH, Ministry of Health and Family Welfare, Government of India has launched National AYUSH Mission (NAM) during 12th Plan for implementing through States/UTs.

The basic objective of NAM is to promote AYUSH medical systems through cost effective AYUSH services, strengthening of educational systems, facilitate the enforcement of quality control of Ayurveda, Siddha and Unani & Homoeopathy (ASU &H) drugs and sustainable availability of ASU & H raw-materials. It envisages flexibility of implementation of the programmes which will lead to substantial participation of the State Governments/UT.

The NAM contemplates establishment of a National Mission as well as corresponding Missions in the State level. NAM is likely to improve significantly the Department’s outreach in terms of planning, supervision and monitoring of the schemes.

Vision

1. To provide cost effective and equitable AYUSH health care throughout the country by improving access to the services.
2. To revitalize and strengthen the AYUSH systems making them as prominent medical streams in addressing the health care of the society.
3. To improve educational institutions capable of imparting quality AYUSH education
4. To promote the adoption of Quality standards of AYUSH drugs and making available the sustained supply of AYUSH raw-materials.

Objectives

1. To provide cost effective AYUSH Services, with a universal access through upgrading AYUSH Hospitals and Dispensaries, co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospitals (DHs).
2. To strengthen institutional capacity at the state level through upgrading AYUSH educational institutions, State Govt. ASU&H Pharmacies, Drug Testing Laboratories and ASU & H enforcement mechanism.
3. Support cultivation of medicinal plants by adopting Good Agricultural Practices (GAPs) so as to provide sustained supply of quality raw-materials and support certification mechanism for quality standards, Good Agricultural/Collection/Storage Practices.
4. Support setting up of clusters through convergence of cultivation, warehousing, value addition and marketing and development of infrastructure for entrepreneurs.

Components of the Mission

Mandatory Components

- AYUSH Services
- AYUSH Educational Institutions
- Quality Control of ASU &H Drugs
• Medicinal Plants

**Flexible Components**

1. Out of the total State envelop available, 20% funds will be earmarked for flexible funds which can be spent on any of the items given below with the stipulation that not more than 5% of the envelop is spent on any of the components:
   • AYUSH Wellness Centres including Yoga & Naturopathy
   • Tele-medicine
   • Sports Medicine through AYUSH
   • Innovations in AYUSH including Public Private Partnership
   • Interest subsidy component for Private AYUSH educational Institutions
   • Reimbursement of Testing charges
   • IEC activities
   • Research & Development in areas related to Medicinal Plants
   • Voluntary certification scheme: Project based.
   • Market Promotion, Market intelligence & buy back interventions
   • Crop Insurance for Medicinal Plants

2. The financial assistance from Government of India shall be supplementary in the form of contractual engagements, infrastructure development, Capacity Building and supply of medicines to be provided from Department of AYUSH. This will ensure better implementation of the programme through effective co-ordination and monitoring. States shall ensure to make available all the regular manpower posts filled in the existing facilities. The procurement of medicines will be made by the States/UTs as per the existing guidelines of the scheme.

**Supporting Facilities under Mission**

1. In order to strengthen the AYUSH infrastructure both attached Central and State levels, financial assistance for setting up of the Programme Management Units (PMU’s) will be provided. The PMU will consist of management and technical professionals both at Central and State level and will be essentially on contract or through service provider.

2. The PMU staff will be engaged from the open market on contractual basis or outsourcing and the expenditure on their salary will be met out of admissible administrative and managerial cost for the mission period. This PMU will provide the technical support to the implementation of National AYUSH Mission in the State through its pool of skilled professionals like MBA, CA, Accounts and technical Specialist etc. All appointments would be contractual and Central Government’s liability will be limited only to the extent of Central share admissible for administrative and management costs on salary head for the mission period.

3. In addition to the Manpower cost for PMU, the States/UTs can avail the financial assistance for such administrative costs like office expenditure, travelling expenditure, contingency, Annual Maintenance Cost (AMC) of infrastructure including equipment’s, computer, software for HMIS, Training and Capacity Building for concerned personnel under each component, audit, monitoring & evaluation, project preparation consultancy and additional manpower for AYUSH Hospitals and Dispensaries. A total 4% of the net funds available for the State is earmarked for State/UTs administrative costs under the Mission.
Resource Allocation Framework

1. **For AYUSH Services, Educational Institutions and Quality Control of ASU&H Drugs:**
   - For special category states (NE States and three hilly States of Himachal Pradesh, Uttarakhand, Jammu and Kashmir) Grant-in-aid component will be 90% from Govt. of India and remaining 10% is proposed to be the State contribution towards all components under the scheme. For other States/UTs the sharing pattern will be 75%:25%.

2. **For Medicinal Plants:**
   - This component will be financed 100% by Central Government in North Eastern States and hilly State of Himachal Pradesh, Uttarakhand and Jammu & Kashmir whereas in other states it will be shared in the ratio of 90:10 between Centre and States.

3. **The Resource Pool to the States from the Government of India under the Mission shall be determined on the basis of following:**
   - Population with 70% weightage and 2 as multiplying factor for EAG States, Island UTs and Hilly States.
   - Backwardness determined on the basis of proxy indicator of per capita income will have 15% weightage and
   - Performance to be determined on inverse proportion of percentage of UCs due and pending as on 31st March of previous financial year will have 15% weightage.

4. **Components of National AYUSH Mission** will have certain core activities that are essential and other activities that are optional. For core/essential items 80% of the Resource pool allocated to the States can be used. For optional items, the remaining 20% of Resource pool allocated to the States can be used in a flexible manner, with the restriction that this 20% of Resource Pool can be spent on any of the items allowed with constraints that not more than 5% of the envelop is spent on any of the components:

5. **The amount of release against the Central share will be as follows:**
   - Entitled Central Share – (Unspent balance of the Grant-in Aid released in previous years + interest accrued).

**Action Plan**

- Indication of tentative State allocation by Department of AYUSH, Government of India - 31st December
- Budget Provision by the State Government along with matching State Share - 31st March
- Preparation of State Annual Action Plan by Executive Committee of the State AYUSH Society – 30th April
- The receipt of State Annual Action Plan in the Department of AYUSH, Government of India – 1st week of May

**Monitoring and Evaluation**

- Dedicated MIS monitoring and evaluation cell would be established at Centre/ State level. It is therefore proposed to have a Health Management Information System (HMIS) Cell at National level with three HMIS Managers and one HMIS Manager at State level.
- The concurrent evaluation of the AYUSH Mission shall be carried out to know the implementation progress and bottlenecks and scope for improvement. Third party evaluation will also carried out after two years of Mission implementation.
Expected Outcome

- Improvement in AYUSH education through enhanced number of AYUSH Educational Institutions upgraded.
- Better access to AYUSH services through increased number of AYUSH Hospital and Dispensaries coverage, availability of drugs and manpower.
- Sustained availability of quality raw-materials for AYUSH Systems of Medicine.
- Improved availability of quality ASU & drugs through increase in the number of quality Pharmacies and Drug Laboratories and enforcement mechanism of ASU & drugs.