H & FWD - 28

DEPARTMENTALLY RELATED STANDING COMMITTEE ON DEVELOPMENT (F) DEPARTMENTS

(2026-27)

SIXTEENTH ASSEMBLY

TWENTY EIGHTH REPORT

HEALTH AND FAMILY WELFARE DEPARTMENT

DEMANDS FOR GRANT

(2026-27)

GRANT NO. 29

(Presented to the House on 22nd July, 2026)

ASSAM LEGISLATIVE ASSEMBLY SECRETARIAT,
DISPUR, GUWAHATI-781006.

INTRODUCTION

I, the Chairman of the Departmentally Related Standing Committee on Development (F) Departments, Assam Legislative Assembly, having been authorized by the Committee to present the **TWENTY EIGHTH REPORT** of the Committee on Demands for Grant **(Grant No. 29)** relating to the **Health and Family Welfare Department** for the year **2026-2027**.

1. In pursuance of Rule 260-I (1) of the Rules of Procedure and Conduct of Business in Assam Legislative Assembly, Hon'ble Speaker has been pleased to constitute the Departmentally Related Standing Committee on Development (F) Departments on **10th July, 2026** for a period of one year **(ANNEXURE-I)**.

2. The Committee scrutinized the various documents and relevant papers including the status report received from the Health and Family Welfare Department and also took the personal evidence of the Departmental representatives of the Department on the said Demands for Grant in its meeting held on **16th July, 2026**.

3. The Committee considered the Draft Report and approved it on **18th July, 2026**.

4. The Committee places on record its appreciation to the representatives of the Health and Family Welfare Department for extending their co-operation to the Committee and the officials of Assam Legislative Assembly Secretariat attached to the Departmentally Related Standing Committee on Development (F) Departments for their full co-operation and unstinted assistance.

5. The Committee also places on record its thanks to the representatives of the Finance Department and also the Transformation & Development Department for assisting the Committee in its deliberation.

DISPUR :
Dated 18th July, 2026

18/7/2026

(PRITHIRAJ RAVA)
CHAIRPERSON,
DRSC ON DEV.(F)DEPTTS.
ASSAM LEGISLATIVE ASSEMBLY.

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COMPOSITION OF THE COMMITTEE

CHAIRPERSON :

Shri Prithiraj Rava, MLA

MEMBERS :

1. Shri Sanjay Kishan, MLA
2. Shri Mrinal Saikia, MLA
3. Shri Shiladitya Dev, MLA
4. Shri Krishna Kamal Tanti, MLA
5. Shri Binod Hazarika, MLA
6. Shri Bhuban Gam, MLA
7. Shri Suruj Dehingia, MLA
8. Dr.Milon Das, MLA
9. Dr.Asif Md.Nazar, MLA
10. Md.Ashraful Islam Seikh, MLA
11. Md.Nurul Islam, MLA
12. Smti. Sewli Mohilary, MLA

SECRETARIAT :

1. Shri Rajib Bhattacharyya, Secretary, AAS.
2. Smti Pankaj Baishya, Joint Secretary, AAS.
3. Smti Nilakhi Dutta Goswami, Under Secretary.
4. Shri Samit Chowdhury, Assistant Research Officer.

CHAPTER -I
REPORT

Status Report and Brief Report on Grant No. 29 related to the Health & Family Welfare Department.

1.Director of Health Services, Assam

The Director of Health Services, Assam is committed to provide better Health Care Facilities to the public of Assam through the various level Health Institution like as Civil Hospitals, Sub-Divisional Civil Hospitals, Model Hospitals, PHC/CHC/FRU/MPHC, Sub Centers, SHC, SD etc.

It is a public service department which provides curative, preventive, promotive maternity, child health care and primary health care facilities to rural and urban areas of the state of Assam through the different types of health institutions in the state. The Directorate is responsible for execution for all public health and disease control programme under various National Programmes. The Directorate is related with other various affairs like policy matters, PAC, preparation of budget matter, related to Nursing Homes, training of doctors and paramedical staffs and other establishment matter. Utmost efforts have been made to improve quality services to the patients in collaboration with the support of the National Health Mission (NHM), Assam.

The main functions of this Directorate are broadly classified as under:

1. Primary Health Care Facilities
   a) Rural Health Care Facilities
   b) Urban health Care Facilities

2. Prevention & Control of Communicable & Non-Communicable Diseases, the national programmes are now implemented and executed through NHM Assam and supervised by the Director of Health Services, Assam, are as follows:

   1) National Vector Borne Diseases Control (NVBDCP)
   2) Integrated Diseases Surveillance Programme (IDSP)
   3) National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)
   4) National Programme of Control of Blindness & Vision Impairment (NPCBVI)
   5) National Tuberculosis Elimination Programme (NTEP)
   6) National Programme for Health care of Elderly (NPHCE)
   7) National Leprosy Eradication Programme (NLFP)
   8) National Iodine Deficiency Disorder Control Programme (NIDDCP)
   9) National Tobacco Control Programme (NTCP)
   10) National Mental Health Programme (NMHP)
   11) National Programme for Prevention and Control of Deafness (NPPCD)
   12) National Oral Health Programme (NOHP)
   13) National Programme for Prevention and Control of Fluorosis (NPPCF)
   14) National Programme for Palliative Care (NPPC)

3. Other Programs included are:
   1) Public Health Education.
   2) Evaluation & Statistics.
   3) School Health Services

The Director of Health Services, Assam is the Head of the Department who

exercises control, gives direction and guidance in respect of all plans and programmes. He is also assisted by a team of both technical and non-technical stall of the Department which consists of Addl. Director of Health Services (G),Addl DHS(Hills) Addl DHS (SP) Addl. DHS(Upper Assam Region), Addl. DHS(Lower Assam Region) and Addl. DHS (BTAD). The Addl. DHS (Upper Assam Region) is posted at Jorhat while Addl. DHS(Lower Assam Region) is posted at Guwahati. Moreover, the Addl DHS (BTAD) is posted at Kokrajhar who acts as the in-charge Director of Health Services of BTR area. In the district level, the Joint Director of Health Services is the head of district organization, who is assisted by CM&HO (CD), Addl. CM& HO (FW), DIO, DMO etc. with regard to communicable and non-communicable diseases like TB, Malaria, Leprosy etc., and at Sub-Divisional level, the Sub-Divisional Medical & Health officer (SDM&HO). Their services are being utilized for implementation and supervision of all health programmes. The Superintendent of all hospitals and in-charge of District and Sub-Divisional Civil Hospitals (Deputy Superintendents) are also playing key roles for implementation of schemes launched by health department from time to time.

1. Performance Budget/Annual Report of the Director of Health Services, Assam

BUDGET UTILIZATION STATUS FOR THE FINANCIAL YEAR 2025-26 UNDER THE DIRECTORATE OF HEALTH SERVICES, ASSAM

Under EE (Establishment Expenditure) (Grant. No.29)

(Rupees in Lakhs)

Sl No.	Detail & Sub Detail Head	Particulars	Budget Provision	Expenditure	Percentage of Expenditure
1	01-01	01 - 01 Salaries - Pay	188129.43	137348.8592	73.01
2	01-09	01 - 09 Salaries - Honorarium	0.11	0	0
3	01-12	01 - 12 Salaries - Arrear Salary / DA	1316.60	279.42353	21.22
4	02-01	02 - 01 Wages to Casual Employees	256.7	9.10440	3.55
5	03-01	03 - 01 Travel Expenses - Regular	89.43	53.82244	60.18
6	04-01	04 - 01 Office Expenses - Postage Stamp	2.38	1.368	57.48
7	04-02	04 - 02 Office Expenses - Telephone Charge	13.30	7.14133	53.69
8	04-03	04 - 03 Office Expenses - Electricity and water charge	1434.03	1271.21876	88.65
9	04-05	04 - 05 Stationery and Printing of Forms	29.45	22.48711	76.36
10	04-08	04 - 08 Office Expenses - Maintenance Of Vehicles	9.69	0.88211	9.10
11	04-09	04 - 09 Office Expenses - Petrol, Oil And Lubricants (POL)	22.51	4.63988	20.61
12	04-10	04 - 10 Office Expenses - Books And Periodicals	1.9	0.18090	9.52
13	04-11	04 - 11 Office Expenses - Refreshment Expenses	0.95	0.76812	80.85
14	04-12	04 - 12 Office Expenses - Other Contingency	9.41	0	0
15	04-13	04 - 13 Office Expenses - Hiring Of			

		Staff Vehicles	95.95	8.08200	8.42
16	04-99	04 - 99 Office Expenses - Others	13.30	2.2985	17.28
17	05-01	05 - 01 Payment For Professional And Special Services - Remuneration For Professional Services	66.5	0	0
18	05-02	05 - 02 Payment For Professional And Special Services - Legal Service	95.95	90.4	94.22
19	06-01	06 - 01 Rents, Rates & Taxes / Royalty - Rents For Hired Building	39.9	29.04844	72.8
20	06-02	06 - 02 Rents, Rates & Taxes / Royalty - Rates &Taxes	38.95	37.72554	96.86
21	08-02	08 - 02 Advertising, Sales And Publicity Expenses - Printing Of Publicity Materials	0.01	0	0
22	10-02	10 - 02 Scholarship And Stipend - Stipends	123.5	0	0
23	14-99	14 - 99 Minor Works - Other	20.89	18.24395	87.33
24	17-03	17 - 03 Maintenance - Machinery And Equipment	100.75	1.98164	1.97
25	17-05	17 - 05 Maintenance - Asset Maintenance	235.68	219.71131	93.22
26	19-02	19 - 02 Materials & Supplies - Medicine	5.51	0.22558	4.09
27	19-03	19 - 03 Materials & Supplies - Diet	1662.5	1354.90033	81.5
28	19-05	19 - 05 Materials & Supplies - Utensil	57	0	0
29	19-07	19 - 07 Materials & Supplies - Linen And Other Room Furnishing	475	449.63735	94.66
30	19-99	19 - 99 Materials & Supplies - Others	47.5	23.88691	50.29
31	26-01	26 - 01 Other Charges - Affiliation Fees	2.85	0	0
32	26-02	26 - 02 Other Charges-Disaster Management	38.00	8.85367	23.30
33	26-03	26 - 03 Other Charges - Training	33.25	6.41020	19.28
34	26-04	26 - 04 Other Charges - Organisation of Events/Fair & Functions	0.48	0	0
35	26-09	26 - 09 Other Charges - Decreetal Amount	224.2	206.16888	91.96
36	26-10	26 - 10 Other Charges - Conduct Of Recruitment Exams / Deptt Exams	307.8	12.66730	4.12
37	26-13	26 - 13 Other Charges - Transportation Charges	2.89	0	0
38	99-02	99 - 02 Information Technology - Purchase Of Hardware	47.5	37.94062	79.87
		Total under EE	**195051.75**	**141508.078**	**72.55**

BUDGET UTILIZATION STATUS FOR THE FINANCIAL YEAR 2025-26 UNDER THE DIRECTORATE OF HEALTH SERVICES, ASSAM

Under SOPD (Grant No.29)

(Rupees in Lakhs)

Head of Account	Budget Provision	Expenditure	Percentage of Utilization
4210 - 02 - 789 - 0000 - 000 - 13 - 01 - SOPD-G GA V	50	50	100
Total under SOPD			

Total under EE & SOPD

(Rupees in Lakhs)

Sl No	Scheme	Budget Provision	Expenditure	Percentage of Utilization	Remarks
1	EE	195051.75	141508.078	72.55	
2	SOPD-G	50	50	100.00	
3	SOPD-SS	20	19.99930	100.00	Drawn amount is refunded to source.
4	CSS	180	179.99368	100.00	
Total		**195301.75**	**141758.071**	**72.59**	

Activities of the year 2025-26

a. **Recruitments**

Keeping in view of offering 1 lakh jobs by the Government of Assam, and in line with other Directorates of H&FW Department's recruitment on non-gazetted posts, the Directorate of Health Services, Assam appointed 884 nos. of selected candidates against the existing vacant posts of Grade-III (Technical) during the calendar year 2025 in various health institutions in the state for better efficacy in health-care delivery system.

The summary in detail appointment made above during the calendar year, 2025 are as follows:

i. ANM : 179 nos.
ii. Staff Nurse : 440 nos.
iii. Staff Nurse (Critical Care) : 265 nos.

Grand Total : 884 nos.

Further, 191 nos. of non-gazetted posts under Grade-III (Non Technical) category are already advertised vide No. HSE/Recruitment/Grade-III/79/2025/2055 dated 02.09.2025 and submission of online application process is completed. However next process of the recruitment i.e. conduct of written examination, skill test cum viva voce etc., Government in Health & Family Welfare Department write a letter addressing to the Controller of Examination, office of the Director of Medical

Education, Assam to continue the next process of recruitment vide letter No. 335958/48 dated 01.01.2026. Now the matter is under purview of the Controller of Examination, office of the Director of Medical Education, Assam

Furthermore, as desired by the Government vide Letter ECF No. 730791/35 dated 21.05.2026, the vacancy position of 3,192 nos. of non-gazetted posts under Grade-III (Technical & Non-Technical) and Grade-IV (MTS) posts are submitted to the Government for the purpose of recruitment vide Letter No. HSE/Recruitment/Grade-III/79/2025/1161 dated 26.05.2026. Accordingly, upon receipt of the Government's approval, the recruitment process for appointment shall be initiated by publishing the advertisement at the earliest.

Furthermore, in view of the **Minutes of the Meeting of the Task Force for Creation of 2 Lakh Government Jobs in Assam, Chaired by the Chief Secretary to the Government of Assam on 27.05.2026** and in pursuance of the Government letter vide ECF No. 793673/55 dated 16.06.2026, anticipated vacancy positions of **1,757** nos. of Non-Gazetted Grade-III (Technical & Non-Technical) and Grade-IV (MTS) posts arising during the period from 01.06.2026 to 31.03.2031 thereof are submitted to the Government vide Letter No. HSE/ECF-803120/14 dated 26.06.2026.

(b) Medical Reimbursement:

Medical Reimbursement Bills received at Director of Health service and its status

Medical Reimbursement claims are treated as first-come, first-served basis and subject to fulfillment of the required criteria i.e., Essentiality Certificate duly signed by the Authorized Medical Attendant/ Discharge Summary / related bills with breakup details. RMBC with referral hospital and referral to the ailment, Admissibility Report furnished by the concerned Jt. DHS as per CGHS Rate etc along with the all other Departments, GOA.

Status of Medical Re-imbursement Claim during the Financial Year 01-04-2025 to 31-03-2026

Total Bill Received	Bill under Process	Bill Despatched	Remarks
2316	00	2316	100%

(c) Activities for Registration of Birth & Deaths:

BIRTH REGISTRATION IN PORTAL IN THE CALENDAR YEAR 2024					
State Total	Rural	171896	164610	29	336535
	Urban	147884	139345	25	287254
	Total	319780	303955	54	623789

BIRTH REGISTRATION IN PORTAL IN THE CALENDAR YEAR 2025					
State Total	Rural	185157	177515	28	362700
	Urban	141456	134538	10	276004
	Total	326613	312053	38	638704

DEATH REGISTRATION IN PORTAL IN THE CALENDAR YEAR 2024					
State Total	Rural	71368	41050	4	112422
	Urban	45663	25039	1	70703
	Total	117031	66089	5	183125

DEATH REGISTRATION IN PORTAL IN THE CALENDAR YEAR 2025					
State Total	Rural	71368	41050	4	112422
	Urban	45663	25039	1	70703
	Total	117031	66089	5	183125

(d) Clinical Establishment (Registration & Regulation) Act, 2010

STATUS REPORT OF REGISTRATION OF NON- GOVT. CLINICAL ESTABLISHMENT up to March, 2026

HOSPITAL/ NURSING HOMES			DIAGNOSTIC LABORATORIES			IMAGING CENTRES			SINGLE DOCTORS CLINIC			OTHER INSTITUTES		
Total No. of Institutes	Total Registered under CEA	%	Total No. of Institutes	Total Registered under CEA	%	Total No. of Institutes	Total Registered under CEA	%	Total No. of Institutes	Total Registered under CEA	%	Total No. of Institutes	Total Registered under CEA	%
		85.			97.			98.			95.			8
533	458	93	1471	1431	28	888	874	42	3130	3004	97	750	645	6

STATUS REPORT OF REGISTRATION OF GOVT. CLINICAL ESTABLISHMENT SUBMITTED up to March, 2026

MEDICAL COLLEGES			CIVIL HOSPITAL/ SDCH			CHCS/MODEL HOSPITALS			PHCS			SUB-CENTRES		
Total No. of Institutes	Total Registered under CEA	%	Total No. of Institutes	Total Registered under CEA	%	Total No. of Institutes	Total Regd under CEA	%	Total No. of Institutes	Total Regd under CEA	%	Total No. of Institutes	Total Registered under CEA	%
18	17	99.44	50	50	100	263	255	96.96	986	947	96.04	4574	4198	91.7

ACHIEVEMENT TOWARDS PREPARTION OF DRAFT ON RANGE OF RATES

1. On 19/09/2025, this Directorate has organized a conference between the Committee and the delegates from various Private institutes vide letter No.CEA/Range of Rates/147/2025/68, dated 16/09/2025 and decided to request the Association of Healthcare Providers of India, North East Chapter-I to prepare a draft list recommending the range of rates.
2. Accordingly in response to this Directorate request, Association of Healthcare Providers (India), North East Chapter-I submitted a letter vide AHPI NE1/2025-26/25, dated 17/12/2025 and inform about the need for a personal interaction with this Directorate along with senior healthcare leaders of the region.
3. This Directorate has organized a meeting on 2nd March, 2026 with the senior healthcare leaders of the region and the executive body of the Association of Healthcare Providers (India), North East Chapter-I. The Meeting decided to constitute a sub-Committee for the same between the Govt. Officials and the healthcare leaders of the region.

FORMULATION OF DRAFT GUIDELINES FOR ORGANIZATION AND DELIVERY OF INTENSIVE CARE SERVICES

1. On 24th September, 2025, the State Council has conducted One Day Regional Conference with 212 nos. of private facilities and discuss broadly about the preparation of formulation of draft guidelines for organization and delivery intensive care services as per instruction of Hon'ble Supreme Court as well as Govt. of Assam.

3. Fiscal targets achieved during the last three years:

(Rupees in Lakhs)

Sl No	Schemes	Budget Provision	Expenditure	Percentage of Expenditure
1	SOPD for the FY 2022-23	1753.32	1135.77085	64.78 %
2	SOPD for the FY 2023-24	2393.38	1076.5804	44.98 %
3	SOPD for the FY 2024-25	2989.6	1478.1784	49.44 %
4	SOPD for the FY 2025-26	50	50	100 %

4. Action taken report on the recommendation made by the Committee in its 27th Report of DRSC Development (F) for the year 2025-26:

OBSERVATIONS AND RECOMMENDATIONS FOR THE YEAR 2025-2026		
Sl. No.	**Observations and Recommendation**	**Action Taken**
1	The Committee during its course of deliberations with the Department observes that all the necessary arrangements are not yet done for utilizing fund from the Tied Fund of Jal Jeevan Mission and Swach Bharat for cleaning of Hospitals at Block level or under Municipal Corporation as recommended earlier in the year 2024-25. The Committee, therefore, recommends that the Department expedites the process and complete it as soon as possible.	Not under the purview of D.H.S, Assam
2	The committee observes that due to shortage of Govt. doctors the people cannot avail necessary medical treatment on Government hospitals as per requirement in many parts of the State. The Committee, therefore, recommends that the Department takes necessary action to ensure that at least 1 (one) doctor is posted at PHC level. In addition, the committee also recommends that the department makes necessary arrangement for sending a specialist doctor at least ¾ times in a month to District hospitals for the greater interest of public. Also, the Committee is of the opinion that a GNM Nurse should be posted in each of the State PHCs.	Due to the shortage of Govt. doctors the people cannot avail necessary medical treatment in Government Hospitals as per requirement in many parts of the state. In this regard, regular recruitment process of doctors is undertaken for smooth functioning of the Govt. Hospital. It is pertinent to mentioned here that, recently 400 Nos. of Medical Officers (M&HO-I) were recruited by the Medical and Health Recruitment Board, Assam on 1st April, 2025 and they will report for duty in various health institutions of the state just after notification of their places of posting. To ensure that, at least 1 (one) doctor in each PHCs of the state by proper rationalization of Doctors as well as thorough recruitment policy of the Govt. shall be facilitated in health care delivery system. Further for deputation of specialist doctors (at least 3/4 times in a month) to PHC from District Hospitals for the greater interest of public, the Govt. may set proper guidelines and issue notification for the purpose. Staff Nurses

		were posted in each PHCs of the state as per sanctioned post and vacancy. NHM, Assam also place GNM Nurse in each PHC by way of recruitment and rationalization of human resource.
3	The Committee observes that in many Civil Hospitals Oxygen machines are out of order and oxygen plants are not properly maintained causing threat to the serious patients. The Committee therefore recommends that the Department pursues the matter with the Government and make necessary provision so that the oxygen plant in medicals are monitored and maintained centrally by the respective department of State Government.	The status of Oxygen plant and machine as received from concerned Joint Directors are as follows : i. <u>DHEMAJI</u> :-The Dhemaji Civil Hospital Oxygen machine are functional and are maintained properly by trained staffs. ii. <u>BARPETA</u>: - The Oxygen machine is maintained properly at Barpeta Civil Hospital, Kalgachia. However, the Oxygen plant is non-functional at Barpeta Civil Hospital, Kalgachia, therefore, the Jt.DHS, Barpeta has communicated to the MD, NHM, Assam for urgent repairing. iii. <u>BONGAIGAON</u>: - There is 2 (two) Nos. of Oxygen Generation Plant at Bongaigaon Civil Hospital in Bongaigaon District. Details are as follows. a. **500 L.P.M.: Till now the operator is not provided by the concerned authority.** b. **1000 L.P.M.: Some part of Oxygen copper pipe about 10 to 12 Mtr was stolen and accordingly FIR has been lodged and already informed to the ED. NHM, Assam.** iv. <u>LAKHIMPUR</u> :-The North Lakhimpur Civil Hospital was amalgamated with the Lakhimpur medical College & Hospital and therefore the said matter is now under the control of LMCH/DME, Assam. v. <u>KAMRUP</u> :- The Kamrup District Civil Hospital does not have Oxygen Generation Machine.However the oxygen plant in Singimari Model Hospital is functional on the other hand the oxygen plant in Rangiya and Moinakhurong Model Hospital is non functional. vi. <u>NAGAON</u> :- The Nagaon Civil Hospital is amalgamated with Nagaon Medical College & Hospital. vii. <u>Dhubri</u> :- The Dhubri Civil Hospital is amalgamated with Dhubri Medical College

		& Hospital. viii. **Dima Hasao** :- The Oxygen Generate Machine of Haflong Civil Hospital is functional. The Mission Director, NHM, Assam issued work order to the Tata Advanced System Limited for repairing and supply of spares of non-functional Medical Oxygen Plant (MOP) vide No. ECF No: 554520 Dated: 27-11-2024. Accordingly, the Oxygen Generate Machine have been restored and waiting for execution of AMC as advised by the aforesaid to avoid any major damage. ix. **Charaideo**:- As report by Jt. DHS, Charaideo, the Oxygen Generation plant of Sonari District Hospital, Charaideo is functional and fully operational. **Udalguri** :- The Oxygen Plant of District hospital, Udalguri is non functional due to faulty relays in generator's electrical panel. Medfreshe Pvt. Ltd. Has submitted an estimate of Rs. 4,85,700/- for repairs and Rs. 11,91,487/- for consumable replacement. Due to lack of funds, the plant is yet to be repaired. The matter was discussed with the governing body Chairman & the estimate has been emailed to Commissioner & Secretary to the Govt. of Assam x. **Cachar** :- As report by Jt. DHS, Cachar, S.M. Dev Civil Hospital, Silchar currently does not have any Oxygen Generation Plants. xi. **Sribhumi** :- The Oxygen Plant of Karimganj Civil Hospital rectified on 09/04/2025 and functional now. Oxygen Plant is maintaining properly. Now the 2nd Compressor and servo stabilizer need to repair for that required additional fund. xii. **Hailakandi**:- Oxygen Machine of Civil Hospital is properly maintained and functional, but due to Leakage/damaged oxygen pipe line the oxygen plant is non operational. Junior Engineer (Instrumentation), Junior Engineer (Civil), NHM & Site Engineer (Contractor) has been jointly inspected the damaged oxygen pipe line and submitted the

		estimate with quotation for the repairing work of the oxygen pipe line to Superintendent of Civil Hospital, Hailakandi. xiii. **Morigaon**:- As per report of Jt. DHS, Morigaon, the Oxygen Generation plant of STHG Civil Hospital, Morigaon is non functional due to AMF Panel and transformer barrel fuse problem. The problem will be resolved in 10 days. xiv. **Goalpara**:- As per report of Jt. DHS, Goalpara, the oxygen plant is not functioning due to damaged electrical transformer issue. xv. **Golaghat**:- As per report from Jt.DHS, Golaghat Oxygen plants in SKKCH, Golaghat ,SKMCH,Bokakhat are properly maintained & there are no machinery defects in these three hospitals. Regular monitoring of the oxygen plants by the ICU in-charge. But the oxygen plant In Sarupathar CHC is not fumctional due to the pipeline issue. xvi. **Chirang**:- As per report from Jt.DHS,Chirang the oxygen machine needs repairing . But the jumbo & B Type oxygen cylinder running smoothly in JSB Civil Hospital (DH), Kajalgaon. The oxygen machines Are maintained properly. xvii. **Hojai**:- As per report from Jt.DHS,Hojai the oxygen generation plant provided to District Civil Hospital, Hojai under CSR of Dalmia cement is functional(although one of the two compressors is damaged) but the plant provided under PM Cares fund is currently out of order . The plant provided under CSR of Dalmia cement is maintained by District Civil Hospital with its own fund. The plant under PM Cares fund is not repaired till date though it is informed to the Central monitoring Team. xviii. **Dibrugarh** :- As per report from Jt.DHS, Dibrugarh there is no Civil Hospital in Dibrugarh district. Although there is one oxygen plant is set up at Naharkatia SDCH, the oxygen plant is not yet functioning as its external electrification is yet to be completed and also to be handed over to the authority.

		xix.	**Biswanath** :- As per report from Jt.DHS, Biswanath the oxygen plant machine of District Hospital Biswanath is functional and maintained by District Hospital. On the other hand the oxygen plant machine of Swahid Knaklata Baruah Civil Hospital is not functional ,, update is required . The required action taken will be given shortly for update.
		xx.	**Sivasagar** :-The Oxygen Generation plant of Sivasagar Civil Hospital is functioning but in need of servicing.
		xxi.	**Kamrup(M)** :-As per report of Jt,. DHS, Kamrup(M) the oxygen Generation plant in District Hospital Sonitpur was installed during the time of Covid pandemic, at present it is out of Order .
		xxii.	**Tinsukia**:- At Tinsukiaall oxygen machines are functional and are being properly maintained under the BEMMP Programme. In addition, at LGB Civil Hospital has two oxygen generation plants with capacities of 300 LPM and 800 LPM and both plants are running in good condition.
		xxiii.	**Jorhat** :-During the covid pandemic period Oxygen plant Machine with 250 LPM capacity was installed, it is functional, which is reported by the Jt. DHS, Jorhat.
		xxiv.	**Kokrajhar** :-There are two nos. of oxygen plant in RNB Civil Hospital,one of this is 200 LPM, PSA, which is functional and second one is 500LPM, LMO Tank , which is non functional.
		xxv.	**Nalbari** :-In Nalbari District, during the COVIP pandemic period Oxygen plant i.e. PSO (1000 LPM) and LMO(13 kl) was installed. But amalgamation of SMK Civil Hospital ,Nalbari with Nalbari Medical College and Hospital Nalbari, the plant is not functioning as the Hospital building has already dismantled.
		xxvi.	**Sonitpur :-** 10 KL capacity of Oxygen Generation plant is available in Kanaklata Civil Hospital is in working condition. But annual maintenance is to require to the whole services.
		xxvii.	**South Salmara-** The PSA plant is functional , however it is not operational due to the non availability of oxygen

		pipeline connectivity to thr new hospital building .Further , the LMO tank has been installed but is yet to be connected to the hospital manifold system. xxviii. **Majuli :-** In majuli District the Oxygen plant is out of order since four months which reported by the Joint DHS, Majuli xix. **Baksa:-** 1. Restoration & Commissioning Activities: The required repair, replacement, or commissioning activities necessary for the total restoration of the plant have been completed by M/s Unissi India Pvt. Ltd. During their service period (i.e. February, 2026). Consequently, the plant remains completely non-operational at present. 2. Oxygen Generation & Supply: There is currently no oxygen generation taking place and no pipeline supply is being delivered from this PSA Plant to the hospital manifolds. 3. Oxygen Purity: Oxygen generate purity levels tested, measured or verified within the accepted therapeutic range (i.e 92%). 4. Operational Deficiencies / Pending Issues: (i) Power Supply Restoration: The dedicated Voltage Stabilizer and the Diesel Generator (DG) set are currently non-functional, preventing a stable power feed to the plant. (ii) Output pipe Repair: During the site inspection conducted by the authorized service engineer from the company last month (May 2026), output pipe leakages were detected at several distinct points. These leakages remain unresolved till date.
4	The Committee observes that the CHC in Mankachar cannot meet the expectation of public	As reported by Jt. DHS, South Salmara at present daily OPD patients of Mankachar CHC in average is around 120 and emergency patient being

	due to less manpower and insufficient infrastructure. Therefore, the Committee recommends that the Department take necessary steps to upgrade this CHC into FRU in greater public interest.	around 40. According to concerned Jt. DHS all the patient getting treatment due to shortage of manpower and insufficient infrastructure they are not getting the quality treatment. Therefore this Directorate has already forwarded a letter to JT.DHS South Salmara for submission of a proposal regarding Up-gradation CHC to FRU for interest of public service of the vast surrounding areas Vide this Directorate letter No.HSHD/MISC/92/2025/388 dtd 14/05/2025.
5	The Committee during its course of discussion observes the construction works of many PHCs are taking much longer time than expected. . The Committee recommends that the incomplete work should be completed within maximum time period of 6 months and make the PHCs functional with full staff and other essential requirements.	All the construction works are being done by NHM, Assam. Since, the construction are not done from this Directorate, the posts to be created and other essential requirements for the new construction will be made as and when proposals are received from the concerned Jt. DHS.
6	The Committee observes that Food Safety Inspector is not properly maintained by the Department and also there are many vacancies of Food Security Officers across the State. The Committee recommends that the Department should take necessary steps to fill the vacancies of Food Security Offi9cer and routine vigilances should be conducted for maintaining food safety.	All Food Safety officers are working properly in almost all Districts. As regards appointment of Food Safety Officers Government may like to take decision
7	The Committee observed that the Rangapani PHC under Bongaigaon District is not completed yet despite the recommendation made for the last year (2024-25). Therefore, the Committee strongly recommends that the Department take up the matter seriously and complete it within the next 180 days from the commencement of the sitting.	As per report from Jt.DHS, Bongaigaon there is no Rangapani PHC. The Ayush Dispensary construction work at Rangapani SD is already completed and handed over. The concerned the then Hon'ble MLA, 17 No. of Srijangram LAC inaugurated the Building (Assam Type) on 20/08/2025 it is functional thereafter. Moreover, a Building less Sub-Centre construction work is going on. 90% work is already completed at site.

8	The Committee observes that the Service Rules of Government Physiotherapists are not yet created and also their pay fixation is not yet done. Moreover, many health workers such as Lab Technicians and other employees also do not have their Service Rule creation for all the employees working under health department who does not have service rule within next six (6) months and the copies of the same to be presented to the Committee within the stipulated time.	It is pertinent to note that, Service Rule of Laboratory Technicians are available . However, the preliminary works for formation of Service Rule for the post of Physiotherapists as well as other posts also are under process for creation of promotional avenues etc. The draft Assam Physiotherapy Service Rules were initially prepared by this Directorate and forwarded to the Government on 05.06.2024 vide Directorate Letter No. ECF 491731. Subsequently, the Government sought certain rectifications to the draft Service Rules. Accordingly, after incorporating the necessary corrections, the revised draft Service Rules was resubmitted to the Government on 05.03.2026 vide Directorate Letter No. ECF 491731/71. However, Health & Family Welfare Department examine the Draft Service Rule and requested to the DHS, Assam for revision and resubmission of the draft Assam Physiotherapy Service Rules along with a proposal for creation of promotional posts. In compliance with the instructions, the Directorate of Health Services, Assam is presently preparing the revised proposal for submission to the Government. Regarding the grade pay fixation for Physiotherapists, the ROP 2017has recommended a grade pay of Rs. 7400/- for Physiotherapists and Rs. 8700/- for direct recruit Physiotherapists possessing a Bachelor's Degree in Physiotherapy, which corresponds to the earlier grade pay of Rs. 3300/- (ROP 2017, Page No. 473). The Directorate has sought clarification from the Government on the applicable grade pay for Physiotherapists with a Bachelor's degree vide Directorate Letter No.HSE/Misc/263/2023/2679 dated 08/04/2024, and the matter is currently under the Government's consideration.
9	During the course of discussion the Committee was informed that the whole medical staff who are on attachment including doctors of Assam Legislative Assembly Health Centre is withdrawn as per Government norms. The Committee recommends that though the establishment is withdrawn as per government norms the withdrawal order should be re-considered and keep them as earlier for the greater convenience of the Hon'ble Members of Assam Legislative Assembly. Moreover, till this health centre becomes full fledged Hospital the same medical staff should be continued.	In pursuance to the Government letter vide No.GAD-541006/6 dated 19-01-2025, attachment services of all the Grade-III & Grade- IV employees under Directorate of Health Services, Assam was withdrawn vide this Directorate order No. HSE/608780/2 27-01-2025. Subsequently, Health & Family Welfare Department, Government of Assam, vide notification ECF No. 596844/28 dated 24-03-2025, stayed the withdrawal of attachment services of all medical staff under Health & Family Welfare Department serving at Bidhan Sabha Swasthya Kendra, Old MLA Hostel, Assam Legislative Assembly, Dispur. The concerned incumbents working on attachment are permitted to continue their duties at Assam Legislative Assembly, Dispur in the same capacity until further order.

10	During the course of discussion the Committee observes that majority of Tea-Tribe women are anaemic. Anaemia is becoming a major concern for the women of Tea garden community. The Committee, therefore, recommends that the department should take necessary steps so that every eligible women of Tea-Tribe Community can avail the facilities of Poshan and Arunoday Scheme of Government of Assam. Also department should try to create awareness amongst them about anaemia and other health issues. With these observations, the Committee recommends that the total amount of Rs. 539124.70 lakhs as sought for under Grant No. 29 Health and Family Welfare Department for the Financial year 2025-26 be approved by the August House.	Not under purview of D.H.S, Assam
11	The Committee observes that in South Salmara there is no model hospital but posts are already sanctioned in the name of Sukchar Model Hospitalwhich is not constructed till date due to non-availability of land. Moreover, one Ayush hospital at Monjuri, which was sanctioned in 1986, for which posts are also created but Ayush Hospital is not yet constructed. The Committee recommends that the department takes necessary steps to construct one model Hospital at Kalapani and another Ayush Hospital at Monjuri as proposed earlier.	As per report of Jt. DHS, South Salmara, land for construction of Model Hospital is available at Kalapani area. Therefore, this Directorate has already forwarded a letter to the Govt. for giving us suggestions and instructions regarding construction of Model Hospital at Kalapani, South Salmara Vide this Directorate letter No.HSHD/Misc/ 192/ 2021/ Pt-I/2025/407, Dated 21/05/2025. The matter regarding the Ayush Hospital is not related to this Directorate.

Preliminary Status Paper, Grants No 29:

Introduction:

1. National Health Mission, Assam

The National Rural Health Mission (NRHM) was launched by the Hon'ble Prime Minister on 12th April 2005, to provide accessible, affordable and quality health care to the rural population, especially the vulnerable groups. The Union Cabinet vide its decision dated 1st May 2013, has approved the launch of National Urban Health Mission (NUHM) as a Sub-mission of an over-arching National Health Mission (NHM), with National Rural Health Mission (NRHM) being the other Sub-mission of National Health Mission.

NRHM seeks to provide equitable, affordable and quality health care to the rural population, especially the vulnerable groups. Under the NRHM, the Empowered Action Group (EAG) States as well as North Eastern States, Jammu and Kashmir and Himachal Pradesh have been given special focus. The thrust of the mission is on establishing a fully functional, community owned, decentralized health delivery system with inter-sectoral convergence at all levels, to ensure simultaneous action on a wide range of determinants of health such as water, sanitation, education, nutrition, social and gender equality. Institutional integration within the fragmented health sector was expected to provide a focus on outcomes, measured against Indian Public Health Standards for all health facilities

Vision of National Health Mission (NHM):

"Attainment of Universal Access to Equitable, Affordable and Quality health care services, accountable and responsive to people's needs, with effective inter-sectoral convergent action to address the wider social determinants of health".

The fund flow from the Central Government to the states would be as per the procedure prescribed by the Government of India. At present Ratio of Central and State Share is 90:10.

Government of Assam has taken special attention for improvement of health of the people of Assam. It gives me immense pleasure to highlight the rapid strides made by the Government of Assam in the Health & Family Welfare Department.

Keeping the commitment of the Nation to achieve the SDG goals, Government of Assam is also committed towards achievement of United Nation's **Sustainable Development Goals** in the State. Socio-economic development is the foundation of this transformation covering a wide spectrum of activities including affordable & accessible healthcare to all. Accordingly, Health & Family Welfare Department, Government of Assam has initiated spectrum of activities to achieve SDG Goal - 3 **"Ensure healthy lives and promote well-being for all at all ages".**

Government of Assam has taken special attention for improvement of health of the people of Assam. The rapid strides made by the Government of Assam in the Health & Family Welfare Department. Various schemes have been implemented and various projects have been undertaken under National Health Mission, Assam.

Keeping the commitment of the Nation to achieve the SDG goals, Government of Assam is also committed towards achievement of United Nation's Sustainable Development Goals in the State.

Maternal Mortality Ratio (MMR) of Assam was 195 as per SRS (2018-20) which has come down to 110 per 1 lakh live births as per SRS (2021-23) as per Sample Registration System (SRS). Similarly, Infant Mortality Rate (IMR) of Assam has also come down from 36 (SRS, 2020) to 30 (SRS, 2023). Under 5 Mortality Rate (U5MR) of the State has also come down from 40 (SRS, 2020) to 33 (SRS, 2023). Total fertility rate (TFR) has also come down from 2.1 (SRS, 2020) to 2.0 (SRS, 2023).

Major achievement in free hemodialysis services in the State under **Pradhan Mantri National Dialysis Programme.** At present, 434 Hemodialysis machines are functioning in 75 centres to provide free hemo-dialysis services to the patients. Total 35,451 patients benefited and 11,26,890 free hemo-dialysis sessions conducted till March 2026 since inception.

With Chief Minister's **Free Diagnostics Scheme** total **20,65,575** patients availed **free CT Scan Services ; 59,09,604** patients availed **free X-Ray Services** and with **free Laboratory services** total 2.11 core patients availed free laboratory services till 30th April 2026.

Total **14,064** children benefited under Free Treatment for **Children having Congenital Heart Disease (CHD)** since inception till 14th May 2026.

Under **Snehasparsha** scheme total 1,270 children benefited under the scheme and 4,282 children benefited under **Snehasparsha Plus** scheme since inception.

Since inception, total **23,118** children of Assam having cleft lip and cleft palate got free operation under **Mission Smile** till 31st March 2026.

Total 1,76,330 pregnant women benefited under **Wage Compensation Scheme for Pregnant Women of Tea Gardens** and Rs. 191.13 crores disbursed to 1.91 lakhs beneficiary's bank account since inception.

3. DIRECTORATE OF AYUSH, ASSAM

GRANTNo.29.

Present Status Report:

The Directorate of AYUSH, Assam, was established in the year 2012, vide Govt.Notificatio No.HLB.221/2009/21 dated 28/02/2011.

Components under Directorate of AYUSH, Assam:

Educational Institutes:	(I) Govt. Ayurvedic College, Guwahati with attached 164 bedded College Hospital. (II) SJN Homoeopathic Medical College and Hospital, Panjabari, Guwahati.
Enforcement Mechanism Cell of AYUSH Drugs:	To ensure the quality and safety of AYUSH Drugs. Provision rissuing License for manufacturing Ayurveda, Siddha, Unani, Sowa Rigpa Drugs under State Drug Licensing Authority (SDLA).(Approx.27nos.ofAyurvedic Manu facturing unit in the State of Assam at present.)
Drug Testing Laboratory (AYUSH):	To ensure the standard and quality of AYUSH Drugs Through drugs testing. Situated at the campus of Govt.AyurvedicCollege,Guwahati-14.
State Ayurvedic Pharmacy:	Situated at the campus of Govt. Ayurvedic College, Guwahati. Classical Ayurvedic Medicines are prepared for supply to the patients of Govt. Ayurvedic College Hospital,Guwahati-14 as well as forte aching purpose to The students and for research purposes.
Assam State Council of Indian Medicine	To regulate the qualification and Registration of ISM Medical Practitioners and Pharmacist [D. Pharm. (Ayurveda)] in the State of Assam. Total nos. of Registered Medical Practitioners: 2094 (as on date).Total Registered Ayurvedic Pharmacist: 138.
Board of Homoeopathic System Medicine, Assam:	To regulate the qualification and Registration of Homoeopathic Medical Practitioners in the State of Assam. Total nos. of Registered Practitioners:2171 (as on date)

2. **Officials of the Directorate of AYUSH: -**

Sl. No.	Name of Posts	Existing Post	Man in Position.
1.	Director (i/c)	1(one)	Dr.Indranoshee Das, ACS
2.	OSD (underattachment)	1(one)	Smt. Angshulekha Dutta Pathak, ACS
3.	Jt. Director (under attachment)	1(one)	Dr. Sashi Sonowal
4.	Dy. Director (under attachment)	2(two)	1. Dr. Deepen Baruah 2. Dr. Gauri Sankar Ramchiary

3. **The other office staffs are as follo ws: -**

Sl. No.	Existing Posts	No. of Post
1.	F.A.O.	1(one)
2.	Superintendent	1 (one)
3.	U.D.A.	2(two)
4.	Accountant	1(one)
5.	Cashier	1(one)
6.	L.D.A.	4(four)
7.	Stenographer	1(one)
8.	Office Supervising Assistant	1(one)
9.	Typist cum Computer Operator	3(three)
10.	Computer Operator	1(one)
11.	Driver	2(two)
12.	Office Peon	2(two)
13.	Chowkider	1(one)
14.	Peon cumchowkider	4(four)

4. **AYUSH IN ASSAM: -**

(Ayurveda, Yoga, Naturopathy, Unani, Siddha, Sowa-Rigpa and Homoeopathy)

In Assam, Ayurveda and the Homoeopathy Systems of Medicine of AYUSH is running under Government sector for strengthening of health care facilities in every aspect.

Educational Institutes along with attached Hospital: -

Ayurveda-1 and Homoeopathy-1

AYUSH Doctors are appointed and engaged under State Health Services, NAM and NHM.

Ayurveda:

Govt. Ayurvedic College & Hospital, Jalukbari, Kamrup (Metro), Guwahati-14.

Facilities:

UG Course (BAMS): 63 in take capacity.

PG Course [MD/MS (Ayurveda)] in 6(six) specialties: -

(i) Ayurveda Samhita & Siddhanta (Basic Principle in Ayurveda)
(ii) Kayachikitsa (General Medicine)
(iii) Rachana Sharir (Anatomy)
(iv) Roga Nidanevam Vikritivigyan (Methods of Diagnosis, Diagnostic Procedures and Pathology)
(v) Prasuti evamStriroga (Gynecology and Obstetrics)
(vi) Shalya (General Surgery)

Hospital: OPD and IPD facilities in different departments/specialties with 164 bed capacity.

Homoeopathy:

- The 3 (three) Homoeopathic Medical Colleges in the State has been amalgamated in one i.e.at SJN Homoeopathic Medical College & Hospital, Guwahati vide Govt. Notificatione-fileNo.135603/237, dated: 29/11/2022.

  UG Course (BHMS): Total 63 in take capacity.

  Hospitals are running with OPD facilities in different specialties.

  The Directorate of AYUSH has paid special attention for development of AYUSH educational institutions namely Govt. Ayurvedic College, Guwahati-14 and SJN Homeopathic Medical College & Hospital, Panjabari, Guwahati.The Directorate of AYUSH is looking after the infrastructure development, initiatives for imparting quality AYUSH education and providing AYUSH health care services in the existing College & Hospitals as well as in the AYUSH health care services in the stateof Assam.

  5. **National Ayush Mission, Directorate of Ayush: -**

  Major Achievements of National Ayush Mission in the state of Assam since inception

  The National Ayush Mission, Assam was launched in the year 2015 after the Ministry of Ayush, Govt. of India has launched the National Ayush Mission in the month of September, 2014 to address the gap in the health services by providing AYUSH Health Services/ Education throughout the length and breadth of the country. Under NAM special focus is to be given for improvement of

- Providing cost effective AYUSH services.
- Co-location of AYUSH facilities at PHC, CHC and DH.
- Up-gradation of state pharmacies, drug testing facilities etc
- Supporting medicinal plants cultivation and adopting GAP to provide good quality

raw material

- Providing marketing and development entrepreneurs and setting up of warehouses and promotion of cluster cultivation

Since inception, the National Ayush Mission, Assam has worked relentlessly for development of Ayush sector in the state. The major achievements of NAM, Assam are outlined as follows:

i. Operationalization of 2 Nos. of 50 Bedded Ayurvedic Hospital at Dudhnoi, Goalpara and Majuli.

IPD services have been started in both hospitals.

ii. 35 Nos. of Yoga and Wellness Centers in all jails of the state and at Govt. Ayurvedic College, SJN Homoeopathic College, Administrative Staff College and at Assam Secretariat.

Jiva Dhara Scheme an initiative to imparting Yoga to Differently-Abled Children

iv. Operationalization of 500 Nos. of Ayushman Arogya Mandir (Ayush) in the state of Assam.

Ayushman Arogya Mandir (AAM) are established as holistic wellness model by integrating Ayush principles into primary healthcare, empowering communities for self-care to reduce disease burden and costs, and providing comprehensive preventive, promotive, curative, and rehabilitative services. AAM also aims to enhance medical pluralism through co-location of Ayush facilities at health centers, promote public health action through community engagement, and ensure universal access to quality primary healthcare through existing infrastructure upgrades and trained staff. The quality of these centersare achieved by accreditation of these centers through Kayakalp and entry level accreditation of NABH in a phased manner. Till date 75 Nos. of AAMs has successfully completed Kayakalp assessment and 12 Nos. of AAMs have accredited NABH.

Since March 3, 2025, the AAMs have become not just wellness centers but active Yoga classrooms. With over 500 Ayush AAMs functional across Assam and these centres conducted structured Yoga sessions are all age groups, track individual participation for long-term impact and also serve as rural entry points to prevent health care and incorporating herbal gardens and lifestyle counseling under one roof.This initiative is redefining healthcare by blending Ayurveda, Yoga and Community-driven care.

v. 18 Nos. of Ayush wings in the premises of District Hospitals.

vi. Public Health Programs initiated under NAM, Assam:

a. Public Health Outreach Activities (PHOA): -
Launched to promote AYUSH-based health awareness and outreach campaigns.

b. Supraja: -

Holistic maternal and child care program currently implemented at the Government Ayurvedic College, Guwahati.

District	Health Institutions	No. of Beneficiary covered till Aril, 2026
Kamrup (M)	Govt Ayurvedic College, Guwahati	892

c. **Ayurvidya: -**

The scheme has been implemented in convergence with Samagra Shiksha, Assam with an objective to Promotion of healthy lifestyle at integrative diet education, creates awareness about medicinal plants & home remedies and to educate children about the role of yoga for physical & mental well-being.

- The program has been launched on 8th March 2024.
- NAM, Assam in convergence with Samagra Siksha Abhiyaan (SSA), Assam.
- Initiated in all 7 aspirational districts of Assam and Majuli District

District	No of Schools covered	No of Beneficiary Covered
Baksa	30	1621
Barpeta	30	2211
Darrang	30	3451
Hailakandi	30	1877
Udalguri	29	1244
Majuli	30	1303
Goalpara	30	2133
Dhubri	30	2166
Total	239	16006

vii. Capacity Building & Training organized by the NAM, Assam

(a) Induction Training of Newly recruited Community Health Officers (Ayush). The training was held from 24th February 2024 to 5th of March 2024. It was a complete residential program organized by the NAM, Assam

(b) Two-day Induction cum orientation training of 101 Nos. of newly appointed Medical Officers (Ayur) under Health & FW Department.

(c) Trained 1003 Nos. of Ayush Medical Officers of the state on Trauma Care. The program was organized in collaboration with Life Line Foundation on Vadodara, Gujarat.

(d) Completed a training for the Master Trainers for Musculoskeletal Disorder.

viii. Establishment of a new Ayurvedic College: -

The National Ayush Mission Assam is constructing a new Ayurvedic College in the premises of 50 Bedded Ayurvedic Hospital. Dudhnoi. The construction is going in full swing.

ix. Establishment of Integrated Ayush Hospital: -

The NAM, Assam is constructing 4 nos. of Integrated Ayush Hospital at Baksa, Kokrajhar, Morigaon and Koliabor. Another 30 bedded Integrated Ayush Hospital is going to construct at Diphu, Karbi Anglong and one 10 bedded Integrated Ayush Hospital at Bajali.

x. Establishment of 100 Nos. of Ayush Dispensaries

The NAM Assam is constructing 100 Nos. Ayush Dispensaries in the state of Assam. The dispensaries are almost in the completion stage and it has been expected that the dispensaries are going to be functional in a very short period of time.

xi. Expansion of DPMU

The NAM Assam is going to set up District Program Management Unit (DPMU) in all the 33 districts of Assam.

xii. Swasthyavan Samaj, Swasthyavan Assam A state-wide wellness movement aimed at promoting preventive health care through Yoga, lifestyle awareness, and traditional practices. The program envisions a community driven approach to well-being across schools, panchayats and public health institutions.

xiii. A Study on the Documentation of Traditional and Tribal practices in the context of Ayush prevalent in the State of Assam is being

implemented in collaboration with the IITG. xiv. The reservation policy for the staff of NAM, Assam has been adopted

along with Maternity Leave rule for the female staff of NAM, Assam.

6. **Financial Achievement during Last F.Y. 2025-26: -**

i) National Ayush Mission, Assam received Rs.6666.67 Lakhs against which Rs. 6345.18409 lakhs have been spent during the F.Y. 2025-26.

Fiscal Achievement during last 3 years.

Sl. No.	Financial Year	Amount Received	Amount Expenditure
1	2023-24	3857.167	3857.167
2	2024-25	7235.411	7235.411
3	2025-26	6666.670	6345.184

7. **A Brief note in respect of Grant 29: -**

National Ayush Mission, Assam received fund under Grant 29 through Health & Family Welfare Department, Govt. of Assam, as mother sanction from Ministry of Ayush under

SNA SPARSH platform.

8. **Directorate of AYUSH: -**

1. Performance Budget/Annual Report of the Department during the F.Y.2025-26

(Rupees in lakh)

Sl. No.	Name of the Scheme	Budget Allocation	Proposal Submitted	Sanction Amount	FOC Issued	Remarks
01	2210-02-200-2970-036-26-99-SOPD-G-GA-V (Swasthyaban Samaj Swasthyaban Assam)	190.00	138.40	138.40	0.00	Govt.of Assam, Finance Department had not issued FOC for amounting Rs.132.50 lakhs during the F.Y. 2025-26 hence same may be proposed for the next year.
02	2210-02-200-7318-000-26-99-SOPD-G-GA-V (Documentation of Traditional and Tribal Practices)	47.50	25.00	25.00	25.00	

2. Physical Target achieved during the last Three (3) Years (Scheme wise):

During the year 2022-23

No major component was there in respect of Directorate of AYUSH under Health & F.W. Department (Grant No-29)

During the year 2023-24

No major component was there in respect of Directorate of AYUSH under Health & F.W. Department (Grant No-29)

During the year 2024-25

No major component was there in respect of Directorate of AYUSH under Health & F.W. Department (Grant No-29)

9. Brief note in respect of Grant No.29:

Budget provision for Directorate of AYUSH (Health & F.W. Department) is made under Grant No-29 by Govt. of Assam. There is total 24 Head of Accounts under Directorate of AYUSH, Assam. The major components of said heads are given below.

Sl. No	Head of Account	Budget Provision for the year 2025-26 (Rupees in lakh)
01	2210-02-200-2970-036-26-99-SOPD-G-GA-V (Swasthyaban Samaj Swasthyaban Assam)	190.00
02	2210-02-200-7318-000-26-99-SOPD-G-GA-V (Documentation of Traditional and Tribal Practices)	47.50

- Major Activities: - To promote Ayurvedic and other Traditional Medicine through seminar among the masses and research activity at IIT, Guwahati.

10. ACTION TAKEN REPORT: -

Related to Grant No.29, by National AYUSH Mission, Directorate of AYUSH, Health and Family Welfare Department, onthe following observations and recommendations of 67th Report of year 2025-26 of DRSC Development (F), Assam Legislative Assembly.

Sl. No.	Observation and Recommendations (Grant No. 29)	Action Taken Report
11	The committee observes that in South Salmara there is no model hospital but posts are already sanctioned in the name of Sukchar Model Hospital which is not constructed tilldate due to non - availability of land. Moreover, one AyushHospital at Monjuri, which was sanctioned in 1986, for which posts are also created but Ayush Hospital is not yet constructed. The Committee recommends that the department takes necessary steps to construct one Model Hospital at Kalapani and another Ayush Hospital at Monjuri as proposed earlier.	The matter was taken up before inception of Directorate of Ayush. The Directorate of Ayush was created in the year 2012. Up to 2012, Ayush related matter was looked after by the Directorate of Health Services, Assam. A joint two-day field visit was conducted to South Salmara,Mankachar District on 29th and 30th July 2025 by a combined state and district-level team headed by Dr. Indranoshee Das, ACS, Joint Secretary, Health and Family Welfare Dept. cum Director of AYUSH. The team commenced the visit with an inspection of the Monjuri State Dispensary (Ayur). The field visit report was shared with te District Commisioner, South Salmara. Further a letter was sent to the District Commisioner, South Salmar with regard to allotment of land for construction of Ayush Hospital at Monjuri vide e letter No. AYUSH/E.688562/1 dated 18/8/2015. A proposal to construct a 10 bedded Integrated AYUSH Hospital has been submitted in the State Annual Action Plan (SAAP) for the year 2026-2027 for approval and allocation of fund by the Ministry of Ayush, Govt. of India.

4.Report pertaining to Assam State AIDS Control Society (ASACS)

1. Preliminary Status Paper Grant No. 29

Assam State AIDS Control Society (ASACS) receives fund through National Health Mission (NHM), Assam from Health and Family Welfare Department, Govt. of Assam under Grant No. 29

2. Performances Budget/Annual Report of the Department 2025-26

Activities & Achievements:

Assam State AIDS Control Society (ASACS) was established in 1998 under Societies Registration Act 1860. Since its inception ASACS has been implementing National AIDS & STI Control Programme (NACP) as a central sector scheme under different phases and has come a long way in its fight against HIV/AIDS in the state and crossed many milestones under the guidance of National AIDS Control Organization (NACO) and Govt. of Assam. At present, ASACS is implementing National AIDS Control Programme Phase 5 since 2021.

As per HIV Estimation Report 2025, Assam has a total number of 33145 people living with HIV as reported As per the aforesaid report, adult HIV prevalence rate in Assam is 0.13 per cent which is lower than the HIV prevalence rate of India which is 0.20 per cent.

Sustainable Development Goal (SDG) aims to end AIDS as public health threat by 2030. In order achieve that goal, National AIDS Control Organization (NACO) has set 95-95-99 goal which states that 95 per cent of the people who are living with HIV know their HIV status, 95 per cent of the people who are detected with HIV are put into treatment and 99 per cent of those who are in treatment are virally suppressed.

In order to achieve the aforesaid goals, Assam State AIDS Control Society (ASACS) has been conducting various campaigns like Integrated Health Campaign (IHC) in HIV vulnerable districts across the state. The districts include : Nagaon, Tinsukia, Cachar, Kamrup (M) and Karimganj. Apart from that, index testing of the spouse/ partners of HIV positive persons are done to ensure that if the spouse/ partners are tested positive they are immediately put into treatment. HIV screening and testing are also done in jails and other closed settings of Assam. As awareness is the key to keep HIV at bay 360 degree Intensified IEC Campaign is conducted every year in all high prevalent districts of Assam to create HIV awareness amongst the masses across Assam. In 2025-26, awareness campaigns were conducted in 30000 villages in 25 districts of Assam. By conducting such campaigns, Assam has been able to increase the first 95 from 52.38 % in 2022-23 to more than 95 % in 2025-26. The second 95 stands at 75.6 % and third 95 is also more than 95 per cent.

Assam State AIDS Control Society (ASACS) has initiated various interventions like increase in the number of Integrated Counselling & Testing Centres (ICTC) where HIV testing is done. There are 106 ICTC centres located at different hospitals across Assam. Secondly, there are 76 nos of Targeted Intervention projects implemented through NGOs who are working across the state amongst the high risk population like injecting drug users (IDU), female sex workers (FSW), Man having sex with man (MSM), transgenders, transport workers and migrants. The TI NGOs provide prevention services including regular HIV screening and testing of HIV.

In order to control the spread of HIV, early detection is important because when a person is detected HIV positive, he or she is directly put into Anti-Retroviral Treatment (ART) and when HIV infected person adheres to HIV treatment, there is less chance of spreading HIV to others because he/she becomes aware of his/her HIV status and more importantly his/hers viral load comes down. For HIV treatment, Assam has 12 nos of ART Centres and 10 nos of link ART Centres in different hospitals and medical colleges. like increase in the number of Integrated Counselling & Testing Centres (ICTC) where HIV testing is done. There are 106 ICTC centres located at different hospitals across Assam. Secondly, there are 76 nos of Targeted Intervention projects implemented through NGOs who are working across the state amongst the high risk population like injecting drug users (IDU), female sex workers (FSW), Man having sex with man (MSM), transgenders, transport workers and migrants. The TI NGOs provide prevention services including regular HIV screening and testing of HIV.

Different Service facilities of Assam State AIDS Control Society:

Preventive Services			
1.	Targeted Intervention (TI) Projects run by NGOs	FSW	1
		MSM	1
		IDU	8
		Trucker	3
		Migrant	3
		Core Composite	60
	Total		76
	Opioid Substitute Therapy (OST) Centres		6
	Satellite OST Centre		10
	OPD/OST		10
2.	Information, Education & Communication and Mainstreaming	Red Ribbon Club	320
3.	Integrated Counselling and Testing Centre (ICTC)	Stand Alone ICTC	105
		Mobile ICTC	2
	Total		107
4.	Sexually Transmitted Infection (STI) Clinic	Designated STI/RTI Clinic	31
	Regional STI Training, Referral & Research Centre		1
	State STI Reference Centre		1
5.	Laboratory Services	State Reference Centre for HIV	3
Care, Support and Treatment Services			
6.	Antiretroviral Therapy (ART) Programme	ART Plus Centre	2
		ART Centre	11
		Link ART Plus Centre	2
		Link ART Centre	16
	CD4 Testing Centre		5
	Care Support Centre (run by NGOs)		3
	Child Care Home (run by NGO) (funded from State Govt. of Assam)		1

Apart from the above, Govt of Assam has been providing fund for various AIDS-related activities in the state which may be listed as follows.

Schemes for AIDS-related activities under Govt. of Assam

Sl. No	Name of Scheme	Activities
1.	ASACS Welfare Services	• Special Care Home for orphans of infected/affected by HIV. • Reimbursement for People Living with HIV(PLHIV)for transportation, investigation and medicine cost. • Financial Assistance to Widows of AIDS Victims. • Financial Assistance to Children infected/affected with HIV/AIDS
2.	Strengthening of services under ASACS	• Improvement of Anti-Retroviral Therapy (ART) Centres • Diagnosis of HIV under ICTC • OPD-OST (Opioid Substitution Therapy) Dispensing Centres for injecting drug users. • Strengthening of Laboratory services • IEC Activities for Awareness of HIV/AIDS
3.	ASACS Employees Welfare Fund	• Death benefit to NOK of ASACS employees who die in harness on duty @ Rs. 5.00 lakhs. • Medical Reimbursement facility up to Rs. 5.00 lakhs per annum towards in-patent treatment of the employees under ASACS and their dependent family members
4.	Support to Assam State Blood Transfusion Council (ASBTC)	• Strengthening of Blood Banks • Consumable & Equipment Management in Govt Blood Bank • Promotion of Voluntary Blood Donation

Financial Achievement of ASACS:

i. **NACO Fund**

National AIDS Control Organization (NACO) has allocated Rs. 6244.21 lakh in the financial year 2025-26 under approved Annual Action Plan. Total fund received from NACO in 2025-26 is Rs. 4868.71 lakh and expenditure made till 31st March 2025-26 is Rs 4862.87 lakh.

ii. **State Govt Fund**

Since the year 2008-09, Govt of Assam has provided funds under SOPD for AIDS related activities. During 2024-25, an amount of Rs. 125.00 lakhswere received from the state government and the expenditure was Rs 296.79 lakh. During 2025-26, no amount was sanctioned for AIDS related activities and an amount of Rs. 204.65 lakh were unspent balance form the previous year as on 1st April 2025.

Financial Achievement of Blood Transfusion Services under State Govt Fund:

Since the year 2008-09, Govt of Assam has provided funds under SOPD for Blood Transfusion Services. During 2024-25, an amount of Rs. 822.55 lakh have been received

for Blood transfusion Services and an amount of Rs 232.82 lakh was expended. During 2025-26, an amount of Rs 300.00 lakh was sanctioned for Blood Transfusion Services and an amount of Rs 1907.00 were unspent balance form the previous year as on 1st April 2025.

Fiscal Target Achieved during the last 3 years (scheme wise detailed information)

Assam State AIDS Control Society has started receiving fund from Govt. of Assam under the Grant No. 29 since 2008-09 in addition to the budget received from National AIDS Control Organization every year. The detail of fund utilized by Assam State AIDS Control Society (ASACS) and Assam State Blood Transfusion Council from the Govt. of Assam under the different Head of Accounts till 2025-26 is given below:

Head of Account	Utilization of fund (Rs. In Lakh)		
	2023-24	2024-25	2025-26
Four Special Care Home for HIV affected children (under the HoA 2210-03-800-3594-988-32-99 SOPD G)	38.10	50.95	29.20
Reimbursement for PLHIV for Transportation cost and Investigation under ASACS (under the HoA 2210-03-800-3594-662-32-99 SOPD G)	109.70	34.62	13.45
Improvement of ART Centres under AIDS Control Society under the HoA 2210-03-800-3594-993-32-99 SOPD G)	93.37	0	14.52
Assistance to widows of AIDS victim under Aids Control Society (under the HoA 2210-03-800-3594-994-32-99 SOPD G)	85.00	51.00	43.00
Strengthening of Blood Bank at GMCH under AIDS Control Society (under the HoA 2210-03-800-3594-663-32-99 SOPD G)	241.04	0	320.61
Strengthening of Assam Blood Transfusion Council (ASBTC) (under the HoA 2210-03-800-3594-127-32-99 SOPD G)	252.41	27.27	827.81
Consumable and Equipment Management in Govt Blood Bank (under the HoA 2210-03-800-3594-126-32-99 SOPD G)	458.07	205.55	758.58
IEC Activities for awareness of HIV/AIDS (under the HoA 2210-03-800-3594-408-32-99 SOPD G)	29.38	0	6.06
ASACS Employee Welfare Fund (under the HoA 2210-03-800-3594-405-32-99 SOPD G)	5.00	0	18.18
Diagnosis of HIV under ICTC (under the HoA 2210-03-800-3594-765-32-99 SOPD G)	113.99	91.30	26.36
Strengthening of Laboratory Services (under the HoA 2210-03-800-3594-764-32-99 SOPD G)	21.41	28.70	38.84
Renovation/Strengthening of Govt Blood Bank excluding GMCH (under the HoA 2210-03-800-3594-148-32-99 SOPD G)	34.51	0	0
OPD-OST Dispensing Centre for Drug Users (under the HoA 2210-03-800-3594-154-32-99 SOPD G)	57.09	40.22	15.12
Financial Assistance to Children affected/infected with HIV(under the HoA 2210-03-800-3594-NS-32-99 SOPD G)	0	0	0
Total	1539.07	529.61	2111.73

2. Office of the Director of Health Services(FW), Assam

TA+NTA

PERFORMANCE BUDGET / ANNUAL REPORT
FINANCIAL STATEMENT
EE CS (SALARY)

(Rs. in Lakhs)

YEAR	BUDGET PROVISION	FUND RELEASED BY GOVT. OF INDIA	EXPENDITURE	REMARKS
1	2	3	4	5
2024-2025	37106.76	17740.00	32360.69 (April 2024 to March 2025)	
2025-2026	38494.57	19942.08	30737.77 (April 2025 to March 2026)	
2026-2027	13963.13 Vote on Account Budget	15200.00	7934.45 (April 2026 to June 2026)	

(EE) (SALARY & NON SALARY LIKE TE/OE/RRT)

(Rs. in Lakhs)

YEAR	BUDGET PROVISION	FUND RELEASED BY GOVT. OF INDIA	EXPENDITURE	REMARKS
1	2	3	4	5
2024-2025	10346.38	NIL	7096.60 (April 2024 to March 2025)	
2025-2026	11046.84	NIL	7179.89 (April 2025 to March 2026)	
2026-2027	3955.62 Vote on Account Budget	NIL	1586.38 (April 2026 to June 2026)	

TA+NTA

STATEMENT SHOWING THE SCHEMEWISE FUND RELATED BY GOVERNMENT OF INDIA UNDER FAMILY WELFARE PROGRAMME 100% CENTRALLY SPONSORED SCHEME (EE CS) FOR THE YEAR 2024-2025 ,2025-2026 and 2026-2027

2024-2025

Rs. in lakhs

SL No	NAME OF SCHEME	GOVT OF INDIA RELEASED	EXPENDITURE (April 2024 to March 2025)	REMARKS
1	2	3	4	
1	Direction & Administration	2051.86	3419.04	
2	Health & FW Trg. Centre	44.38	127.32	
3	Training of ANM/ LHV	410.50	814.83	
4	Sub-centre	14708.18	27484.41	
5	Urban FW Centres	525.08	515.09	
TOTAL		17740.00	32360.69	

2025-2026

Rs. in lakhs

SL. NO.	NAME OF SCHEME	GOVT. OF INDIA RELEASED	EXPENDITURE (April 2025 to March 2026)	REMERKS
1	2	3	4	
1	Direction & Administration	2265.70	3232.07	
2	Health & FW Trg. Centre	110.48	135.44	
3	Training of ANM/ LHV	289.65	743.43	
4	Sub-centre	16929.60	26086.78	
5	Urban FW Centres	346.65	540.05	
TOTAL		19942.08	30737.77	

2026-2027

Rs. in lakhs

SL. NO.	NAME OF SCHEME	GOVT. OF INDIA RELEASED	EXPENDITURE (April 2026 to June 2026)	REMERKS
1	2	3	4	
1	Direction & Administration	1680.87	786.85	
2	Health & FW Trg. Centre	51.26	35.30	
3	Training of ANM/ LHV	244.14	183.24	
4	Sub-centre	12993.57	6793.88	
5	Urban FW Centres	230.16	135.18	
TOTAL		15200.00	7934.45	

Note:- The Grants-in-aid now sanctioned provisionable and is subject to adjustment on the basis of Audit Figures of expenditure in terms of Ministry of Health & Family Welfare Department letter No. G-27017/4(3)/2013-NHRM (Finance), dated:30-09-2014 and the excess amount is reimbursable by Govt. of India.

OBJECTIVES OF THE DIRECTORATE:-

1. Ensure full Immunization of pregnant women and children from vaccine preventable diseases.
2. Implement all vaccination related program as per need of Public Health intervention.
3. Maintain sex ratio by implementation of PC&PNDT Act.
4. Administration and directs the ANM schools and related nursing education.

FUNCTIONS OF DIRECTORATE.

The Director of Health Services (FW), Assam implements the centrally sponsored Family Welfare Programme in the State. The following components are under the State Family Welfare Programme.

1. Direction & Administration.
2. Information, Education & Communication.
3. Universal Immunization Programme.
4. Transport through State Health Transport Organization.
5. Rural Family Welfare Centre (Main Centre at Block Primary Health Centre).
6. Rural Family Welfare Sub- Centre.
7. Post Partum Programme in the district Hospital & Medical Colleges.
8. Imparting training of various of categories of health workers at the State Institute of Health & Family Welfare Training Centre, which under the administrative control of DHS(FW), Assam & ANM Training Centres in the districts.

The Addl. Chief Medical & Health Officer (FW) is responsible for implementing the Family Welfare Programme at district level.

Services delivered by the DIRECTORATE to the Citizens.

1. Free supply and administering of all vaccines for inoculation of infants, children & pregnant women from vaccine preventable diseases. Tetanus, Toxiod, Diphtheria, Tuberculosis, Whooping Cough, Japanese Encephalitis, Hepatitis -B, Measles, Polio Militias, Rota Virus, Rubella. Etc.
2. Create awareness in the community about the Pre conception & Pre natal Diagnostics Technique Act 1994 for prevention of female foeticide and improve declining sex ratio.
3. Ensure full Immunization of pregnant women and children from vaccine preventable diseases.
4. Implement all vaccination related program as per need of Public Health intervention.
5. Maintain sex ratio by implementation of PC&PNDT Act.
6. Administration and directs the ANM schools and related nursing education.

- The Full Immunization coverage achieved by the State for the year 2025-26 is 89.58%.
- Government of India sex ratio 943 and Assam is at 958 as per 2011 Census, which is a positive indicator.

UNIVERSAL IMMUIZATION PROGRAMME

The Government of Assam is committed to reducing child mortality and morbidity in the State by improving Full Immunization coverage through immunization against twelve life threatening vaccine preventable diseases.

1. **Routine Immunization:** Assam has achieved during 2024-25 (April, 24 to March,2025) Immunization Coverage of 599283 children(92%) and during 2025-26 (April, 25 to March,2026) Full Immunization Coverage of 581085 children(89.58%) (Data source from HMIS portal).

2. **U-WIN** : Assam was among the early adopters, initiating the U-WIN pilot in January 2023 across two districts - Bongaigaon and Dibrugarh. Since then, the state has demonstrated notable progress in expanding U-WIN operations and improving service delivery indicators in both government and private health institutions. Full-scale implementation of U-WIN has been in done since January 2025. Assam is the first state to implement Routine Immunization (RI) sessions through the UWIN portal in private health facilities. The initiative began with a successful pilot in Guwahati and has since been scaled up across the state from June'25, aiming to achieve 100% immunization coverage.

   The percentage of Routine Immunization (RI) sessions planned and conducted via U-WIN improved significantly, from 94% in January"25 to 99% in March 26, demonstrating better integration of the platform in immunization workflows.

   In the financial year 2025-26, Assam has achieved 85.7% registration of pregnant women in the U-WIN portal, placing the state at the 8th position nationally. During this financial year (2025-2026), a total of 3,62,098 sessions have been conducted against 3,64,671 planned, resulting in a high 99.24% adherence to session planning. On average, 7(seven) infants are vaccinated per session, indicating consistent vaccination coverage and efficient use of session resources. The most notable progress is observed in 2025-26 when 4,43,545 live births were registered and 4,28056 newborns received the Hep-B birth dose.

   Assam, in a unique initiative on 7th March 2026, celebrated healthy childhood and digital empowerment, by ceremonially launching the issuance of two lakh digital Certificates to Mothers of eligible children who have completed Full Immunisation schedule through the U-WIN portal.
   The launch was done by Hon'ble Minister, Health & Family Welfare, Irrigation etc. Departments Government of Assam Shri Ashok Singhal.

3. **School Health Immunization Programme (SHIP)** : Ensuring Full Immunization prior to School admission and completion of pending vaccinations for enrolled children :

- To ensure that all children entering the Anganwadi Centre (AWC) and school system are fully immunized according to the National Immunization Scheduled.
- To create a structured mechanism for AWC and school-based identification and follow-up of children with incomplete immunization.
- To institutionalize AWC and school-health system convergence for long-term immunization monitoring and compliance.

As part of the rollout, all districts have held District Task Force for Immunization (DTFI) meetings chaired by the Deputy. Commissioner/Additional Deputy Commissioner to ensure interdepartmental coordination with SSA and WCD. Training activities have begun across the state, all districts are completing training sessions for health staff and school teachers. In addition, mapping of schools under each Sub-Centre is ongoing to support detailed planning and micro-mapping for immunization.

4. **Pulse Polio Immunization :** India, including Assam, was declared Polio-free on 27 March 2014. To sustain this status, Assam has consistently achieved high vaccination coverage during Pulse Polio campaigns. In SNID 2024-25 (8-10 December 2024), 42 lakh children (96%) were vaccinated across 27 districts, and during SNID 2025-26 (12-14 October 2025), 35 lakh children (96%) were vaccinated across 26 districts. And from 28th June,2026 NID is conducted all the districts of Assam.

5. **Adult Japanese Encephalitis Vaccination:** The Adult Japanese Encephalitis (JE) Vaccination Campaign was done in selected districts based on the incidence of outbreaks and case fatality rates in the 15-65 years age group. With the support from MoHFW, Govt. of India campaign was taken up in 2 (Two) Districts namely Dhubri and Sribhumi from 8th January, 2026. As the JE cases were increasing in the state, so, Govt. of Assam took up special campaign in 4 (Four) Nos. districts from 19th January, 2026 namely Sonitpur, Majuli, Charaideo, and Bongaigaon, as per consultations with the National Vector Borne Disease Control Programme (NVBDCP).

   During the campaign, the Inactivated JE vaccine has been administered to the target population. The eligible age group for the Adult JE Vaccination Campaign is 15-65 years. All preparatory activities for the campaign were undertaken in coordination with the National Vector Borne Disease Control Programme (NVBDCP). Total 19.96 lakhs (80%) nos. beneficiaries were vaccinated during this period.

   Catch-Up session for MR Elimination : To eliminate Measles & Rubella in the 4 round of catch up session were conducted across all the districts of State with 1st round from 21st July to 26th July`2025 followed by subsequent rounds in August, September and November. The drive was conducted for urgent action with concerted efforts on MR elimination 9 month to 5 years and Full/Complete immunization coverage (0-2 years). The catch-up session is aimed to cover all the SCs with HRA, High dropouts, under-served population, low performing SCs, vacant SCs in the identified blocks.

6. **Targeting Zero Dose Immunization Challenges of Assam (TICA)** is a programme started on 16th May,2025 in collaboration with Guwahati Medical College Hospital (GMCH) & Directorate of Health Services (FW),Assam, Govt. of Assam and National Health Mission, Assam funded by Bill & Melinda Gates foundation (BMGF) for strengthening the immunization coverage in the State to achieve 100% coverage with special focus on Hard to reach areas(HRA) - tea garden, flood prone area, hilly terrain as well as urban slum population with financial support for vehicle, boat and ANM hiring. In addition, all the Medical Colleges of the state are involved in supportive supervision of RI session for quality improvement.

7. **HPV Vaccination:** HPV vaccination campaign was launched on 28th February 2026 targeting 3.32 lakh girl children who are 14 years old but not completed 15th birthday. From the 1 st week of May, campaign accelerated in the districts with the average target of 6000 vaccination for completion within 30 days. Currently 4000 to 5000 vaccination conducted per day, 2,50000 beneficiaries vaccinated till 7th July'2026 through average 600 session site (Cold chain point).

8. **Miscellaneous Activity :**

- **The ANM course in 10 (Ten) Government ANM schools :** As per approval of the Government the ANM training in the 10(ten) ANM School was restarted from December,2025 after a gap of 13 (thirteen) years and total 278 ANM trainees are selected. The selected candidates are studying in the respective ANM school as per desired by the ANM trainees at the time of their counseling.
- In the Financial Year 2025-2026 after successful conduct of written examination and viva skill test examination total 634 ANMs have been appointed in different districts of Assam.
- A State Refrigerated Vaccine Van for DHS(FW) has been procured by State Government in the financial year 2025-26 for transportation of Routine Immunization vaccines from State to districts.

Status Report on implementation of PC & PNDT Act.1994 in case of Assam upto March/2026

The Assam CSR is 964 in 2019-20 as per NFHS - 5 (Source)

As per direction of Govt. of India and Verdicts of Honorable Supreme Court of India, the PC & PNDT Act has been fully implemented in Assam along with other states of India, from the year 2002 onwards.

1. **Number of USG Clinics Registered by the DAA in the State:**

At Govt. Level = 279
At Private Level = 2098
Total = 2377 upto March '2026

2. **Reporting :**

1. Quarterly and monthly reporting are done regularly.
2. Inspection done 1289 nos. USG clinics/laboratories all over Assam.

Activities undertaken to reverse skewed sex Ratio in Assam

1. State level & District level capacity building workshop and awareness workshops are held during the year.
2. State level and district level review meetings were held.

Action Taken against Violated USG centre under PC & PNDT Act in Assam

- Total Seized / Sealed = 17 nos.
- Total Registration Certificate Cancelled & Close of Hospital/Clinic/centers = 466 nos.

- **Total SLP Cases filed against judgment in the Gauhati High Court - 2 nos.**
- Total Court Cases prosecuted = 17 nos,
    - Kamrup (Metro) - 8 nos.
    - Nagaon-3 nos.
    - Tinsukia-3 nos.
    - Sonitpur - 1 no.
    - Cachar - 1 no.
    - Kamrup R - 1 no.
- Two Doctor and two proprietors are convicted u/s 23 of the PC & PNDT Act and Rules.

BRIEF NOTE

i. Rural Family Welfare Centre (Main Centre):-

This Rural Family Welfare Centre (Main Centre) constitutes vital and important part of the National Family Welfare Programme,. The activities of the Rural Family Welfare Centre (Main Centre) relate to population control programme like, IUD insertion, Immunization, Intensive Pulse Polio Immunization , Vit-A supplementation , Japanese Encephalitis vaccination etc. The IEC personnel of the Rural Family Welfare Centre (Main Centre) are responsible for awareness among the rural population regarding the importance of following small family norms and adopting Family Planning measures.

(ii) Post Partum Centre :-

The Post Partum Centre is directly concerned with the welfare of pregnant woman , new born care , Post natal care, services etc. Thus it constitutes a vital part of the Family Welfare Programme .

(iii) Transport - P.O.L. (State Health Transport organization):-

The Government vehicle are serviced and maintained through the State Health Transport organization which is necessary for proper implementation & monitoring of schemes. The Vaccine Vans under Family Welfare Programme is utilized for transporting vaccine from Head Quarter to all the District H.Q, District H.Q. to Block PHC, then peripheral institutions and vaccine sites including hard to reach areas.

4. Action taken report on the recommendation made by the Committee in its 27th Report of DRSC Development (F) for the year 2025-26:

OBSERVATIONS AND RECOMMENDATIONS FOR THE YEAR 2025-2026

Sl. No.	Observations and Recommendation	Action Taken
1	The Committee during its course of deliberations with the Department observes that all the necessary arrangements are not yet done for utilizing fund from the Tied Fund of Jal Jeevan Mission and Swach Bharat for cleaning of Hospitals at Block level or under Municipal Corporation as recommended earlier in the year 2024-25. The Committee, therefore, recommends that the Department expedites the process and complete it as soon as possible.	Matter not related with this Directorate.
2	The committee observes that due to shortage of Govt. doctors the people cannot avail necessary medical treatment on Government hospitals as per requirement in many parts of the State. The Committee, therefore, recommends that the Department takes necessary action to ensure that at least 1 (one) doctor is posted at PHC level. In addition, the committee also recommends that the department makes necessary arrangement for sending a specialist doctor at least ¾ times in a month to District hospitals for the greater interest of public. Also, the Committee is of the opinion that a GNM Nurse should be posted in each of the State PHCs.	Posting of Doctors in PHC level is under disposal of Government.
3	The Committee observes that the CHC in Mankachar cannot meet the expectation of public due to less manpower and insufficient infrastructure. Therefore, the Committee recommends that the Department take necessary steps to upgrade this CHC into FRU in greater public interest.	Matter not related with this Directorate
4	The Committee during its course of discussion observes the construction works of many PHCs are taking much longer time than expected. The Committee recommends that the incomplete work should be completed within maximum time period of 6 months and make the PHCs functional with full staff and other essential requirements.	CHCs and FRUs are not under the disposal of DHS(FW),Assam.

5	The Committee observes that Food Safety Inspector is not properly maintained by the Department and also there are many vacancies of Food Security Officers across the State. The Committee recommends that the Department should take necessary steps to fill the vacancies of Food Security Offi9cer and routine vigilances should be conducted for maintaining food safety.	Construction works of PHCs are not disposal of DHS(FW), Assam.
6	The Committee observed that the Rangapani PHC under Bongaigaon District is not completed yet despite the recommendation made for the last year (2024-25). Therefore, the Committee strongly recommends that the Department take up the matter seriously and complete it within the next 180 days from the commencement of the sitting.	Matter not related with this Directorate.
7	The Committee observes that the Service Rules of Government Physiotherapists are not yet created and also their pay fixation is not yet done. Moreover, many health workers such as Lab Technicians and other employees also do not have their Service Rule creation for all the employees working under health department who does not have service rule within next six (6) months and the copies of the same to be presented to the Committee within the stipulated time.	Matter not related with this Directorate.
8	During the course of discussion the Committee was informed that the whole medical staff who are on attachment including doctors of Assam Legislative Assembly Health Centre is withdrawn as per Government norms. The Committee recommends that though the establishment is withdrawn as per government norms the withdrawal order should be re-considered and keep them as earlier for the greater convenience of the Hon'ble Members of Assam Legislative Assembly. Moreover, till this health centre becomes full fledged Hospital the same medical staff should be continued.	Matter not related with this Directorate.
9	During the course of discussion the Committee observes that majority of Tea-Tribe women are anaemic. Anaemia is becoming a major concern for the women of Tea garden community. The Committee, therefore, recommends that the department should take necessary steps so that every eligible women of Tea-Tribe Community can avail the facilities of Poshan and Arunoday Scheme of Government of Assam. Also department should try to create awareness amongst them about anaemia and other health issues. With these observations, the Committee recommends that the total amount of Rs. 539124.70 lakhs as sought for under Grant No. 29 Health and Family Welfare Department for the Financial year 2025-26 be approved by the August House.	Matter is under consideration of Government.

10	The Committee observes that in South Salmara there is no model hospital but posts are already sanctioned in the name of Sukchar Model Hospital which is not constructed till date due to non-availability of land. Moreover, one Ayush hospital at Monjuri, which was sanctioned in 1986, for which posts are also created but Ayush Hospital is not yet constructed. The Committee recommends that the department takes necessary steps to construct one model Hospital at Kalapani and another Ayush Hospital at Monjuri as proposed earlier.	Poshan and Arunoday Scheme are not under the disposal of DHS(FW),Assam.
11		Kalapani Model Hospital and Ayush Hospital at Monjuri is not under the Disposal of DHS(FW),Assam.

After presentation of the Budget in the House on 10th July, 2026, the Departmentally Related Standing Committee on Development (F) Departments has scrutinized the Demands for Grant for the Financial Year 2026-27.

Rs. in Lakhs.

	REVENUE	CAPITAL	TOTAL
VOTED	426325.21	36702.10	463027.31
CHARGED	449.00	0.00	449.00

Under the following heads, an estimated budget allocation has been fixed as shown.

• 2210	Medical and Public Health	385426.40
• 2211	Family Welfare	39704.78
• 2215	Water Supply & Sanitation	1194.03
• 4210	Capital Outlay on Medical & Public Health	36554.21
• 4211	Capital Outlay on Family Welfare	147.89
	Grand Total	463027.31

Out of the total Budget provision **(Voted)** of Rs. 463027.31 lakhs made for the financial year 2026-27, Rs. 426325.21 lakhs and Rs. 36702.10 lakhs have been earmarked under the Revenue and Capital head respectively.

Out of the total Budget provision **(Charged)** of Rs. 449.00 lakhs has been made for the financial year 2026-27.

The Action Taken Report on the recommendations made in the Twenty-Seventh Report submitted by the Health & Family Welfare is appended at Annexure-II.

ANNEXURE-I

ASSAM LEGISLATIVE ASSEMBLY SECRETARIAT
N O T I F I C A T I O N

The 10th July, 2026

No.LA-DRSC.Dev.(F)Deptts.2/2026/22, In pursuance of Rule 260 H (1) of the Rules of Procedure and Conduct of Business in Assam Legislative Assembly, the Hon'ble Speaker, Assam Legislative Assembly has been pleased to nominate the following Members to constitute the Departmentally Related Standing Committee on Development (F) Departments, Assam Legislative Assembly.

1.	Shri Prithiraj Rava, MLA	Chairperson
2.	Shri Sanjay Kishan, MLA	Member
3.	Shri Mrinal Saikia, MLA	Member
4.	Shri Shiladitya Dev, MLA	Member
5.	Shri Krishna Kamal Tanti, MLA	Member
6.	Shri Binod Hazarika, MLA	Member
7.	Shri Bhuban Gam, MLA	Member
8.	Shri Suruj Dehingia, MLA	Member
9.	Dr.Milon Das, MLA	Member
10.	Dr. Asif Md.Nazar, MLA	Member
11.	Md.Ashraful Islam Seikh, MLA	Member
12.	Md.Nurul Islam, MLA	Member
13.	Smti. Sewli Mohilary, MLA	Member

And in pursuance of the Rule 260 I (3) of the Rules of Procedure and Conduct of Business in Assam Legislative Assembly, the Hon'ble Speaker has been pleased to appoint **Shri Prithiraj Rava, MLA and Member** of the Committee as the **Chairperson** of the Departmentally Related Standing Committee on Development (F) Departments, Assam Legislative Assembly.

The term of the Committee shall be for a period of one year with effect from the date of its constitution.

Sd./- Rajib Bhattacharyya, AAS
Secretary,
Assam Legislative Assembly.

Annexure-II

Action taken report on the recommendation made by the Committee in its 27th Report of DRSC Development (F) for the year 2025-26:

OBSERVATIONS AND RECOMMENDATIONS FOR THE YEAR 2025-2026		
Sl. No.	Observations and Recommendation	Action Taken
1	The Committee during its course of deliberations with the Department observes that all the necessary arrangements are not yet done for utilizing fund from the Tied Fund of Jal Jeevan Mission and Swach Bharat for cleaning of Hospitals at Block level or under Municipal Corporation as recommended earlier in the year 2024-25. The Committee, therefore, recommends that the Department expedites the process and complete it as soon as possible.	NHM Assam had communicated to the Ministry of Health & Family Welfare regarding enhancement of the untied grants for health facilities. The matter was discussed, and the Ministry informed that, as per the National Guidelines, only the prescribed untied grants can be provided under NHM. Any additional requirement may be met through SOPD funds. The NHM provides the untied fund as follows- District Hospital - Rs. 10,00,000/- SDCH - Rs. 5,00,000/- CHC / Model Hospital / UCHC - Rs. 5,00,000/ PHC / UPHC - Rs. 1,75,000/ UPHC (rented building) - Rs. 1,00,000/ AAM – Sub Centre - Rs. 50,000/- Sub Centre - Rs. 20,000 The communication has been made to JJM, Assam also, but district has not received fund
2	The committee observes that due to shortage of Govt. doctors the people cannot avail necessary medical treatment on Government hospitals as per requirement in many parts of the State. The Committee, therefore, recommends that the Department takes necessary action to ensure that at least 1 (one) doctor is posted at PHC level. In addition, the committee also recommends that the department makes necessary arrangement for sending a specialist doctor at least ¾ times in a month to District hospitals for the greater interest of public. Also, the Committee is of the opinion that a GNM Nurse should be posted in each of the State PHCs.	Due to the shortage of Govt. doctors the people cannot avail necessary medical treatment in Government Hospitals as per requirement in many parts of the state. In this regard, regular recruitment process of doctors is undertaken for smooth functioning of the Govt. Hospital. It is pertinent to mentioned here that, recently 400 Nos. of Medical Officers (M&HO-I) were recruited by the Medical and Health Recruitment Board, Assam on 1st April, 2025 and they will report for duty in various health institutions of the state just after notification of their places of posting. To ensure that, at least 1 (one) doctor in each PHCs of the state by proper rationalization of Doctors as well as thorough recruitment policy of the Govt. shall be facilitated in health care delivery system. Further for deputation of specialist doctors (at least 3/4 times in a month) to PHC from District Hospitals for the greater interest of public, the Govt. may set proper guidelines and issue notification for the purpose. Staff Nurses were posted in each PHCs of the state as per sanctioned post and vacancy. NHM, Assam also place GNM Nurse in each PHC by way of recruitment and rationalization of human resource.
3	The Committee observes that in many Civil Hospitals Oxygen machines are out of order and oxygen plants are not properly maintained causing threat to the serious patients. The Committee therefore recommends that the	The status of Oxygen plant and machine as received from concerned Joint Directors are as follows : DHEMAJI:-The Dhemaji Civil Hospital Oxygen machine is functional and is maintained properly by

	Department pursues the matter with the Government and make necessary provision so that the oxygen plant in medicals are monitored and maintained centrally by the respective department of State Government.	trained staffs. BARPETA: - The Oxygen machine is maintained properly at Barpeta Civil Hospital, Kalgachia. However, the Oxygen plant is non-functional at Barpeta Civil Hospital, Kalgachia, therefore, the Jt.DHS, Barpeta has communicated to the MD, NHM, Assam for urgent repairing. BONGAIGAON: - There is 2 (two) Nos. of Oxygen Generation Plant at Bongaigaon Civil Hospital in Bongaigaon District. Details are as follows. 500 L.P.M.: Till now the operator is not provided by the concerned authority. 1000 L.P.M.: Some part of Oxygen copper pipe about 10 to 12 Mtr was stolen and accordingly FIR has been lodged and already informed to the ED. NHM, Assam. LAKHIMPUR:-The North Lakhimpur Civil Hospital was amalgamated with the Lakhimpur medical College & Hospital and therefore the said matter is now under the control of LMCH/DME, Assam. KAMRUP :- The Kamrup District Civil Hospital does not have Oxygen Generation Machine.However the oxygen plant in Singimari Model Hospital is functional on the other hand the oxygen plant in Rangiya and Moinakhurong Model Hospital is non functional. NAGAON:- The Nagaon Civil Hospital is amalgamated with Nagaon Medical College & Hospital. Dhubri :- The Dhubri Civil Hospital is amalgamated with Dhubri Medical College & Hospital. Dima Hasao :- The Oxygen Generate Machine of Haflong Civil Hospital is functional. The Mission Director, NHM, Assam issued work order to the Tata Advanced System Limited for repairing and supply of spares of non-functional Medical Oxygen Plant (MOP) vide No. ECF No: 554520 Dated: 27-11-2024. Accordingly, the Oxygen Generate Machine have been restored and waiting for execution of AMC as advised by the aforesaid to avoid any major damage. Charaideo:- As report by Jt. DHS, Charaideo, the Oxygen Generation plant of Sonari District Hospital, Charaideo is functional and fully operational. Udalguri :- The Oxygen Plant of District hospital, Udalguri is non functional due to faulty relays in generator's electrical panel. Medfreshe Pvt. Ltd. Has submitted an estimate of Rs. 4,85,700/- for repairs and Rs. 11,91,487/- for consumable replacement. Due to lack of funds, the plant is yet to be repaired. The matter was discussed with the governing body Chairman & the estimate has been emailed to Commissioner & Secretary to the Govt. of Assam Cachar :- As report by Jt. DHS, Cachar, S.M. Dev Civil Hospital, Silchar currently does not have any Oxygen Generation Plants. Sribhumi :- The Oxygen Plant of Karimganj Civil Hospital rectified on 09/04/2025 and functional now. Oxygen Plant is maintaining properly. Now the 2nd Compressor and servo stabilizer need to repair for that

required additional fund.

Hailakandi:- Oxygen Machine of Civil Hospital is properly maintained and functional, but due to Leakage/damaged oxygen pipe line the oxygen plant is non operational. Junior Engineer (Instrumentation), Junior Engineer (Civil), NHM & Site Engineer (Contractor) has been jointly inspected the damaged oxygen pipe line and submitted the estimate with quotation for the repairing work of the oxygen pipe line to Superintendent of Civil Hospital, Hailakandi.

Morigaon:- As per report of Jt. DHS, Morigaon, the Oxygen Generation plant of STHG Civil Hospital, Morigaon is non functional due to AMF Panel and transformer barrel fuse problem. The problem will be resolved in 10 days.

Goalpara:- As per report of Jt. DHS, Goalpara, the oxygen plant is not functioning due to damaged electrical transformer issue.

Golaghat:- As per report from Jt.DHS, Golaghat Oxygen plants in SKKCH, Golaghat ,SKMCH,Bokakhat are properly maintained & there are no machinery defects in these three hospitals. Regular monitoring of the oxygen plants by the ICU in-charge. But the oxygen plant In Sarupathar CHC is not fumctional due to the pipeline issue.

Chirang:- As per report from Jt.DHS,Chirang the oxygen machine needs repairing . But the jumbo & B Type oxygen cylinder running smoothly in JSB Civil Hospital (DH), Kajalgaon. The oxygen machines Are maintained properly.

Hojai:- As per report from Jt.DHS,Hojai the oxygen generation plant provided to District Civil Hospital, Hojai under CSR of Dalmia cement is functional(although one of the two compressors is damaged) but the plant provided under PM Cares fund is currently out of order . The plant provided under CSR of Dalmia cement is maintained by District Civil Hospital with its own fund. The plant under PM Cares fund is not repaired till date though it is informed to the Central monitoring Team.

Dibrugarh :- As per report from Jt.DHS, Dibrugarh there is no Civil Hospital in Dibrugarh district. Although there is one oxygen plant is set up at Naharkatia SDCH, the oxygen plant is not yet functioning as its external electrification is yet to be completed and also to be handed over to the authority .

Biswanath :- As per report from Jt.DHS, Biswanath the oxygen plant machine of District Hospital Biswanath is functional and maintained by District Hospital. On the other hand the oxygen plant machine of Swahid Knaklata Baruah Civil Hospital is not functional ,, update is required . The required action taken will be given shortly for update.

Sivasagar :-The Oxygen Generation plant of Sivasagar Civil Hospital is functioning but in need of servicing.

Kamrup(M) :-As per report of Jt,. DHS, Kamrup(M) the oxygen Generation plant in District Hospital Sonitpur was installed during the time of Covid

pandemic, at present it is out of Order .

Tinsukia:- At Tinsukiaall oxygen machines are functional and are being properly maintained under the BEMMP Programme. In addition, at LGB Civil Hospital has two oxygen generation plants with capacities of 300 LPM and 800 LPM and both plants are running in good condition.

Jorhat :-During the covid pandemic period Oxygen plant Machine with 250 LPM capacity was installed, it is functional, which is reported by the Jt. DHS, Jorhat.

Kokrajhar :-There are two nos. of oxygen plant in RNB Civil Hospital,one of this is 200 LPM, PSA, which is functional and second one is 500LPM, LMO Tank , which is non functional.

Nalbari :-In Nalbari District, during the COVIP pandemic period Oxygen plant i.e. PSO (1000 LPM) and LMO(13 kl) was installed. But amalgamation of SMK Civil Hospital ,Nalbari with Nalbari Medical College and Hospital Nalbari, the plant is not functioning as the Hospital building has already dismantled.

Sonitpur :- 10 KL capacity of Oxygen Generation plant is available in Kanaklata Civil Hospital is in working condition. But annual maintenance is to require to the whole services.

South Salmara- The PSA plant is functional , however it is not operational due to the non availability of oxygen pipeline connectivity to thr new hospital building .Further , the LMO tank has been installed but is yet to be connected to the hospital manifold system.

Majuli :-In majuli District the Oxygen plant is out of order since four months which reported by the Joint DHS, Majuli

Baksa:-

1. Restoration & Commissioning Activities:

The required repair, replacement, or commissioning activities necessary for the total restoration of the plant have been completed by M/s Unissi India Pvt. Ltd. During their service period (i.e. February, 2026). Consequently, the plant remains completely non-operational at present.

2. Oxygen Generation & Supply:

There is currently no oxygen generation taking place and no pipeline supply is being delivered from this PSA Plant to the hospital manifolds.

3. Oxygen Purity:

Oxygen generate purity levels tested, measured or verified within the accepted therapeutic range (i.e 92%).

4. Operational Deficiencies / Pending Issues:

(I) Power Supply Restoration:

The dedicated Voltage Stabilizer and the Diesel

		Generator (DG) set are currently non-functional, preventing a stable power feed to the plant. (ii) Output pipe Repair: During the site inspection conducted by the authorized service engineer from the company last month (May 2026), output pipe leakages were detected at several distinct points. These leakages remain unresolved till date.
4	The Committee observes that the CHC in Mankachar cannot meet the expectation of public due to less manpower and insufficient infrastructure. Therefore, the Committee recommends that the Department take necessary steps to upgrade this CHC into FRU in greater public interest.	As reported by Jt. DHS, South Salmara at present daily OPD patients of Mankachar CHC in average is around 120 and emergency patient being around 40. According to concerned Jt. DHS all the patient getting treatment due to shortage of manpower and insufficient infrastructure they are not getting the quality treatment. Therefore this Directorate has already forwarded a letter to JT.DHS South Salmara for submission of a proposal regarding Up-gradation CHC to FRU for interest of public service of the vast surrounding areas Vide this Directorate letter No. HSHD/MISC/92/ 2025/388 dtd 14/05/2025.
5	The Committee during its course of discussion observes the construction works of many PHCs are taking much longer time than expected. . The Committee recommends that the incomplete work should be completed within maximum time period of 6 months and make the PHCs functional with full staff and other essential requirements.	All the construction works are being done by NHM, Assam. Since, the construction are not done from this Directorate, the posts to be created and other essential requirements for the new construction will be made as and when proposals are received from the concerned Jt. DHS.
6	The Committee observes that Food Safety Inspector is not properly maintained by the Department and also there are many vacancies of Food Security Officers across the State. The Committee recommends that the Department should take necessary steps to fill the vacancies of Food Security Offi9cer and routine vigilances should be conducted for maintaining food safety.	All Food Safety officers are working properly in almost all Districts. As regards appointment of Food Safety Officers Government will take decision
7	The Committee observed that the Rangapani PHC under Bongaigaon District is not completed yet despite the recommendation made for the last year (2024-25). Therefore, the Committee strongly recommends that the Department take up the matter seriously and complete it within the next 180 days from the commencement of the sitting.	As per report from Jt.DHS, Bongaigaon there is no Rangapani PHC. The Ayush Dispensary construction work at Rangapani SD is already completed and handed over. The concerned the then Hon'ble MLA, 17 No. of Srijangram LAC inaugurated the Building (Assam Type) on 20/08/2025 it is functional thereafter. Moreover, a Building less Sub-Centre construction work is going on. 90% work is already completed at site.

	The Committee observes that the Service Rules of Government Physiotherapists are not yet created and also their pay fixation is not yet done. Moreover, many health workers such as Lab Technicians and other employees also do not have their Service Rule creation for all the employees working under health department who does not have service rule within next six (6) months and the copies of the same to be presented to the Committee within the stipulated time.	It is pertinent to note that, Service Rule of Laboratory Technicians are available. However, the preliminary works for formation of Service Rule for the post of Physiotherapists as well as other posts also are under process for creation of promotional avenues etc. The draft Assam Physiotherapy Service Rules were initially prepared by this Directorate and forwarded to the Government on 05.06.2024 vide Directorate Letter No. ECF 491731. Subsequently, the Government sought certain rectifications to the draft Service Rules. Accordingly, after incorporating the necessary corrections, the revised draft Service Rules was resubmitted to the Government on 05.03.2026 vide Directorate Letter No. ECF 491731/71. However, Health & Family Welfare Department examine the Draft Service Rule and requested to the DHS, Assam for revision and resubmission of the draft Assam Physiotherapy Service Rules along with a proposal for creation of promotional posts. In compliance with the instructions, the Directorate of Health Services, Assam is presently preparing the revised proposal for submission to the Government. Regarding the grade pay fixation for Physiotherapists, the ROP 2017 has recommended a grade pay of Rs. 7400/- for Physiotherapists and Rs. 8700/- for direct recruit Physiotherapists possessing a Bachelor's Degree in Physiotherapy, which corresponds to the earlier grade pay of Rs. 3300/- (ROP 2017, Page No. 473). The Directorate has sought clarification from the Government on the applicable grade pay for Physiotherapists with a Bachelor's degree vide Directorate letter No. HSE/Misc/263/2023/2679 dated 08/04/2024, and the matter is currently under the Government's consideration.
9	During the course of discussion the Committee was informed that the whole medical staff who are on attachment including doctors of Assam Legislative Assembly Health Centre is withdrawn as per Government norms. The Committee recommends that though the establishment is withdrawn as per government norms the withdrawal order should be re-considered and keep them as earlier for the greater convenience of the Hon'ble Members of Assam Legislative Assembly. Moreover, till this health centre becomes full fledged Hospital the same medical staff should be continued.	In pursuance to the Government letter vide No.GAD-541006/6 dated 19-01-2025, attachment services of all the Grade-III & Grade-IV employees under Directorate of Health Services, Assam was withdrawn vide this Directorate order No. HSE/608780/2 27-01-2025. Subsequently, Health & Family Welfare Department, Government of Assam, vide notification ECF No. 596844/28 dated 24-03-2025, stayed the withdrawal of attachment services of all medical staff under Health & Family Welfare Department serving at Bidhan Sabha Swasthya Kendra, Old MLA Hostel, Assam Legislative Assembly, Dispur. The concerned incumbents working on attachment are permitted to continue their duties at Assam Legislative Assembly, Dispur in the same capacity until further order.
10	During the course of discussion the Committee observes that majority of Tea-Tribe women are anaemic. Anaemia is becoming a major concern for the women of Tea garden community. The Committee, therefore, recommends that the department should take necessary steps so that every eligible women of Tea-Tribe Community can avail the facilities of Poshan and Arunoday Scheme of Government of Assam. Also department should try to create awareness amongst them about anaemia and other health issues.	The observations of the Committee have been noted. The State has made significant progress in addressing anaemia through focused interventions for screening, treatment, Iron-Folic Acid supplementation, and awareness generation, particularly among women of the tea tribe community in tea garden areas through existing health programmes. Screening for Sickle Cell Disease and Hb E disorders has also been intensified and expanded across the State.

	With these observations, the Committee recommends that the total amount of Rs. 539124.70 lakhs as sought for under Grant No. 29 Health and Family Welfare Department for the Financial year 2025-26 be approved by the August House.	
11	The Committee observes that in South Salmara there is no model hospital but posts are already sanctioned in the name of Sukchar Model Hospital which is not constructed till date due to non-availability of land. Moreover, one Ayush hospital at Monjuri, which was sanctioned in 1986, for which posts are also created but Ayush Hospital is not yet constructed. The Committee recommends that the department takes necessary steps to construct one model Hospital at Kalapani and another Ayush Hospital at Monjuri as proposed earlier.	A letter was sent to Jt. DHS, South Salmara district vide no. NHM/ECF/393086 dated 23/04/2025 for submission of detail proposal for taking further necessary action. Jt. DHS, South Salmara has informed that a piece of land for 2.5 bighas are available for construction of a Model Hospital at Kalapani. The matter was taken up before inception of Directorate of Ayush. The Directorate of Ayush was created in the year 2012. Up to 2012, Ayush related matter was looked after by the Directorate of Health Services, Assam. A joint two-day field visit was conducted to SouthSalmara,Mankachar District on 29th and 30th July 2025 by a combined state and district-level team headed by Dr. Indranoshee Das, ACS, Joint Secretary, Health and Family Welfare Dept. cum Director of AYUSH.The team commenced the visit with an inspection of the Monjuri State Dispensary (Ayur). The field visit report was shared with te District Commisioner, South Salmara. Further a letter was sent to the District Commisioner, South Salmar with regard to allotment of land for construction of Ayush Hospital at Monjuri vide e letter No. AYUSH/E.688562/1 dated 18/8/2015. A proposal to construct a 10 bedded Integrated AYUSH Hospital has been submitted in the State Annual Action Plan (SAAP) for the year 2026-2027 for approval and allocation of fund by the Ministry of Ayush, Govt. of India.

CHAPTER-II
GRANT NO 29
OBSERVATIONS AND RECOMMENDATIONS:

1) The Committee observed that there is a shortage of staff at the Ayushman Arogya Centres across the State.

Accordingly, the Committee recommends that the Department augment the manpower at the Centres to ensure efficient delivery of Healthcare Services.

2) The Committee observed that there is a shortage of dialysis centres in various constituencies of Assam.

Accordingly, the Committee recommends that the Department should increase the number of dialysis centres across the State to ensure better access to dialysis services.

3) The Committee observed that several Government buildings, Medical Colleges, Hospitals and other Healthcare Institutions etc are either under construction, in a damaged condition or lacks adequate hygiene facilities. Particular attention was drawn to the Tezpur Civil Hospital and a Nursing School, where the buildings were reported to have been damaged due to earthquake.

The Committee further noted the urgent need for construction of a Nursing College Hostel building at Kanaklata Civil Hospital Complex, as the Nurses residing in the hostel are left without adequate accommodation.

In view of the need for timely completion of construction work, repair of damaged infrastructure and improvement of hygiene facilities, the Committee strongly recommended that the Department should direct the District Authorities to conduct field visits, carry out vigilant inspections, and submit a detailed status report on the condition of the infrastructure. The Committee further recommended that, wherever buildings are found to be damaged beyond repair, fresh proposals for the construction of new buildings be submitted without delay.

4) The Committee observed that, following the delimitation exercise, certain newly created Assembly Constituencies, particularly Srijangram and Parbatjhora, do not have access to 100-bedded hospitals within their respective constituencies, although such facilities are available in the nearby areas.

In addition, the Committee observed that certain Assembly Constituencies, such as Mahmora, do not have a District Hospital and are served only by a Model Hospital.

The Committee, therefore, recommended that the Department review the status of availability of 100 bedded hospitals, CHCs, PHCs, SCs etc in all Assembly Constituencies across the State and take necessary steps to expedite the proposal for establishment of a Co-District Hospital at areas like Mahmora and accord priority to the establishment of Co-District Hospitals in rural and tea garden areas where such facilities are not available and submit a detailed status report to the Committee.

5) The Committee was of the opinion that the Health Department plays a vital role in safeguarding public health of a nation.

The Committee, therefore, recommended that the Department take up the matter with the Government for enhancement of the budgetary allocation to meet the growing healthcare needs of the State.

6) The Committee observed that certain contractors quoted abnormally low rates in bidding for tenders and, after being awarded the work, failed to execute the projects satisfactorily, resulting in delays and incomplete construction work. Accordingly, the Committee strongly recommended that the Department conduct inspections at all sites where work remain incomplete and take immediate action against the defaulting contractors, including cancellation of the concerned work orders, wherever warranted, and issuance of fresh Notices Inviting Tender (NITs) for completion of the remaining work.

The Committee further recommends that the Department, if feasible, fix a reasonable limit on the percentage of bids to as low as 10% only so that contractors cannot quote excessively low rates merely to secure the work and subsequently fail its execution.

7) The Committee observed that, due to the negligence of the staff of certain rehabilitation centres, unfortunate incidents involving patients enrolled in these centres have occurred.

Accordingly, the Committee strongly recommended that the Department direct the District Authorities to conduct surprise inspections through medical teams to assess the functioning of these rehabilitation centres and take appropriate corrective measures wherever necessary.

8) The Committee observes that the existing dietary charges presently being paid by various Government Health Institutions range from Rs.55.00 to Rs.93.75 per patient per day, which is not financially feasible.

The Committee recommends that an additional budget of Rs 25.35 crore be provided under the Budget Head: 2210-01-110-0163-000-19-03.

9) The Committee observed that centralized laundry services are presently operational in only eight (08) districts of the State, while the service is under implantation on a pilot basis in two (02) additional districts. Considering the importance of providing clean and hygienic linen to patients and maintaining infection control standards in Government Health Institutions, the Directorate has decided to extend centralized laundry services to all districts of Assam.

The Committee recommends that an additional budget of Rs.16.18 crore be provided under the Budget Head: 2210-01-110-0163-000-19-03.

10) The Committee observed that only Chest (TB) Hospital serving North Bank of Brahmaputra has been completely damaged. Considering its importance in providing health care services, the Committee strongly recommends the Department to take necessary steps for construction of a new Chest Hospital building equipped with all required infrastructure and facilities.

The Committee recommends that the budgetary allocations provided under Grant No.29 for the Financial Year 2026-27 for the Health and Family Welfare Department be approved by the August House.

The Action Taken report on the recommendations made in the report may be submitted to the Committee within 90 (Ninety) days from the date of its presentation to the House.