

NINTH MIZORAM LEGISLATIVE ASSEMBLY



**PUBLIC ACCOUNTS COMMITTEE
(2024-2026)**

EIGHTH REPORT

On

**ACTIONS TAKEN BY THE GOVERNMENT AGAINST THE
RECOMMENDATIONS CONTAINED IN THE SEVENTH REPORT
OF THE PUBLIC ACCOUNTS COMMITTEE (2024-2026)**

*(Ref. Report of the Comptroller & Auditor General of India Performance Audit of
Select District Hospitals in Mizoram for the year ended 31st March 2019)*

Relating to

HEALTH AND FAMILY WELFARE DEPARTMENT

Presented to the House on 10.03.2026

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(i)

COMPOSITION OF PUBLIC ACCOUNTS COMMITTEE
(2024-2026)

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Pu Lalchhandama Ralte

Members

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2. Pu W. Chhuanawma
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| 5. Pu Samuel Saihlupuia Sailo | - | Under Secretary |
| 6. Pu John Lallawmsanga Sailo | - | Committee Officer |
| 7. Pu JH Lalmawizuala | - | Committee Officer |

INTRODUCTION

1. I, the Chairman, Public Accounts Committee, as authorised by the Committee to present the Report on its behalf, present this Eighth Report of Public Accounts Committee, relating to Health and Family Welfare Department, Government of Mizoram, to the House.
2. The Seventh Report of the PAC (2024-2026) was presented to the House on the 28th of August, 2025. Implementation Report of the Government to the Recommendations contained in the Eighth Report were received on 30th of October 2025. The Committee considered the implementation reports at its 32nd Sitting on the 20th of January, 2026.
3. Annexures are kept in the Assembly Secretariat for reference.
4. The Committee examined and adopted this Report on the 26th of February, 2026.

LALCHHANDAMA RALTE
Chairman
Public Accounts Committee

(iii)

REPORT

1. The Seventh Report of Public Accounts Committee relating to Health & Family Welfare Department dealing with the Report of the Comptroller and Auditor General of India for the year 2018-2019 (Special Audit on Select District Hospitals) was presented to the House on 28th August, 2025.

2. The Committee examined the implementation report submitted by the Health & Family Welfare Department, and the decision of the Committee may be categorised as follows:
 - i) Chapter I - Implementations which have been accepted by the Committee.

 - ii) Chapter II - Implementations which the Committee decided not to pursue in view of the Government's reply.

 - iii) Chapter III - Implementations which have not been accepted by the Committee and on which it has made further recommendations.

CHAPTER – I

IMPLEMENTATIONS WHICH HAVE BEEN ACCEPTED BY THE COMMITTEE

(Ref: The Report of the Comptroller & Auditor General of India for the year 2018-2019)

I. Para 3.1.2 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.1.1 RECOMMENDATION

(vide para 1.16 of the Seventh Report of the Public Accounts Committee)

The Committee expresses concern regarding certain instances where a particular equipment is funded from different sources, but is absent in its sanctioned location. **The Committee recommends that instances of displacement of equipment from sanctioned locations be avoided henceforth, and the Department take prudent action in the purchase, allocation, and maintenance of equipment.**

1.1.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“Office order to this effect has been issued vide.No.D.12019/1/2023-DHME (PRO) dated 29^h September, 2025 and sent to all District Hospitals. (Copy enclosed at Annexure - 1)”

II. Para 3.1.2 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.2.1 RECOMMENDATION

(vide para 1.17 of the Seventh Report of the Public Accounts Committee)

The Committee, observing the limited number of specialists available with the state Government, **recommends that the Department ensure specialist doctors are provided with the necessary equipment to carry out their duties effectively and without interruption.**

1.2.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department will continue to do its best to ensure specialist doctors are provided with the necessary equipment to carry out their duties effectively and without interruption.”

III. Para 3.2.2 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.3.1 RECOMMENDATION

(vide para 4.16 of the Seventh Report of the Public Accounts Committee)

The Committee recommends that the Department promote/enforce procurement of generic drugs/ medicines and prescribe in generic name.

1.3.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“Office order to this effect has been issued Vide No.B.17011/24/2015 DHME/GEN Dated the 30th September, 2025 (Copy enclosed at Annexure -2)”

IV. Para 4.1.1 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.4.1 RECOMMENDATION

(vide para 5.15 of the Seventh Report of the Public Accounts Committee)

The Committee, while noting the problems faced by the District Hospitals in achieving ideal goals and standards, appreciates the steps taken by the Department so far with respect to the registration service in the District Hospitals. The Committee, however, **recommends that the Department continue in its pursuit to achieve the development/improvement of online registration of patients with retrievable previous patient history to achieve quality healthcare facilities.**

1.4.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department has implemented Nextgen e-Hospital in the Districts Hospitals which is a Hospital Management Information System, which is ABDM system makes it possible for the patient to register through Scan & Share, a process by which the patient scans a Hospital QR code and the patient is registered for the consultation. Moreover, the integration with ABDM system allows the patient to have a Personal Electronic Medical Records which can be accessed by the patient from Personal Health Record App (PHR app, e.g. ABHA, Arogya Setu, etc.) and can also be viewed by the treating doctors within the software with consent from the patient.”

V. Para 4.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.5.1 RECOMMENDATION

(vide para 7.17 of the Seventh Report of the Public Accounts Committee)

The Committee appreciates the action taken by the Department in giving priority to the Senior Citizens, pregnant women, children and emergency cases. The Committee **recommends that the continuation of this gesture be ensured in all healthcare providers in the State.**

1.5.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Officials of Civil Hospital are committed to ensure the continuation of this gesture.”

VI. Para 4.1.4 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.6.1 RECOMMENDATION

(vide para 8.17 of the Seventh Report of the Public Accounts Committee)

The Committee, observing the importance of proper record keeping, recommends that the State Government should take steps for the implementation of / and enhancement of the online Registration process and ensure documentation/ computerisation of the clinical history of patients for easy retrieval of patient information.

1.6.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department has implemented Nextgen eHospital in the Districts Hospitals which is a Hospital Management Information System, which is compliant with Ayushman Bharat Digital Mission. The integration with ABDM system makes it possible for the patient to register through Scan & Share, a process by which the patient scan a Hospital QR code and the patient is register for the consultation. Moreover, the integration with ABDM system allows the patient to have a Personal Electronics Medical Records which can be access by the patient from Personal Health Record App (PHR app e.g. ABHA, Arogya Setu etc.) and can also be viewed by the treating doctors within the software with consent from the patient.”

VII. Para 4.2 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.7.1 RECOMMENDATION

(vide para 9.16 of the Seventh Report of the Public Accounts Committee)

The Committee has noted its concern with the high referral rates in the District hospitals and noted the Department's representative's comments, "there has been a kind of propensity with doctors to refer patients for a long time. The Government makes efforts to address the issue". The Committee understands the involvement of many efforts like upgradation of manpower capacity, equipment etc. for the achievement of the statement.

The Committee, therefore, recommends that the efforts made by the Government to address the issue of high referral rates be brought to fruition with proper long-term and short-term plans.

1.7.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

"The Department has implemented Nextgen eHospital in the Districts Hospitals which is a Hospital Management Information System, which is compliant with Ayushman Bharat Digital Mission. The integration with ABDM system makes it possible for the patient to register through Scan & Share, a process by which the patient scan a Hospital QR code and the patient is register for the consultation. Moreover the integration with ABDM system allows the patient to have a Personal Electronics Medical Records which can be access by the patient from Personal Health Record App (PHR app e.g. ABHA, Arogya Setu etc.) and can also be viewed by the treating doctors within the software with consent from the patient."

VIII. Para 4.4 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

1.8.1 RECOMMENDATION

(vide para 11.15 of the Seventh Report of the Public Accounts Committee)

The Committee recommends that the Department initiate action to equip all district hospitals with operation theatre.

1.8.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“All district Hospitals are equipped with Operation Theatres and the Operation Theatres are included in the ongoing constructions of the three new district hospitals at Saitual, Khawzawl and Hnahthial.”

CHAPTER – II
IMPLEMENTATIONS WHICH THE COMMITTEE DECIDED NOT
TO PURSUE IN VIEW OF THE GOVERNMENT’S REPLY

-Nil-

CHAPTER – III

IMPLEMENTATIONS WHICH HAVE NOT BEEN ACCEPTED BY THE COMMITTEE AND ON WHICH IT MADE FURTHER RECOMMENDATIONS

I. Para 3.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.1.1 RECOMMENDATION

(vide para 2.15 of the Seventh Report of the Public Accounts Committee)

The Committee regrets the unavailability of records of calibration, as highlighted in the Audit Report, for the years 2015-16, 2016-17, and 2018-19, with respect to the Annual Maintenance Contract of the equipment during the audit. This, according to the Committee, highlights the Department's negligence and raises questions of accountability.

The Committee recommends that the Department take due action in the loss of government records as necessary.

3.1.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“Office order to this effect has been issued vide.No.D.12019/1/2023DHME (PRO) dated 29th September, 2025 and sent to all District Hospitals (Copy enclosed at Annexure-I)”

3.1.3 FURTHER RECOMMENDATION

The Committee, in view of ensuring accountability, **further recommends that the concerned authorities prepare a structure that mandates periodic submission of records of maintenance and calibration of diagnostic equipment to the Directorate for ready reference.**

II. Para 3.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.2.1 RECOMMENDATION

(vide para 2.18 of the Seventh Report of the Public Accounts Committee)

The Committee recommends that DHs ensure proper maintenance of the record of periodic maintenance as well as calibrations of diagnostic equipment.

3.2.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“Office order to this effect has been issued vide.No.D.12019/1/2023DHME (PRO) dated 29th September, 2025 and sent to all District Hospitals (Copy enclosed at Annexure-I)”

3.2.3 FURTHER RECOMMENDATION

The Committee, in view of ensuring accountability, **further recommends that the concerned authorities prepare a structure that mandates periodic submission of records of maintenance and calibration of diagnostic equipment to the Directorate for ready reference.**

III. Para 3.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.3.1 RECOMMENDATION

(vide para 2.16 of the Seventh Report of the Public Accounts Committee)

The Committee, while understanding the impracticality of achieving IPHS norms in the short term, observed the necessity to ensure the availability of a full range of essential equipment in every DH, particularly in view of the increasing reliance on diagnostics for the treatment of patients.

The Committee therefore recommends that the Department chart out a 5-year or 10-year action plan to ensure the availability of a full range of essential equipment in every DH. Furthermore, the Committee recommends that the Department ensure the avoidance of obsolescence of equipment purchased.

3.3.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department will chart out a 5-year action plan to ensure the availability of full range of essential equipment in every District Hospital and ensure obsolescence of equipment purchased.”

3.3.3 FURTHER RECOMMENDATION

The Committee further recommends that the action taken by the State Government regarding the charting out of the 5-year action plan to ensure the availability of a full range of essential equipment in every District Hospital, and to ensure the obsolescence of equipment purchased, be forwarded to the Committee.

IV. Para 3.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.4.1 RECOMMENDATION

(vide para 2.17 of the Seventh Report of the Public Accounts Committee)

The Committee recommends that proper maintenance of equipment through Annual Maintenance Contracts may also be ensured to reduce the breakdown time of critical equipment for diagnosis.

3.4.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

The Department is in the process of collecting all the critical equipment which are not covered by Annual Maintenance Contract and Comprehensive Maintenance Contract and will take necessary steps to ensure coverage of equipment through Annual Maintenance Contract.

3.4.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

V. Para 3.2.1 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.5.1 RECOMMENDATION

(vide para 3.16 of the Seventh Report of the Public Accounts Committee)

The Committee noted the financial constraints of the State Government in acquiring essential medicines. The Committee further observes that the budget preparation process for the procurement of drugs and medical equipment is conducted in a conservative manner, with bare necessity being observed in the calculation, as stated by the Department.

The Committee, therefore, **recommends that the budget of the Department under ‘Materials & Supplies’ of the Department be approved to ensure the availability of essential drugs in each District Hospitals as per the Mizoram Essential Drugs List, 2023.**

3.5.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“In compliance with the Public Accounts Committee's (PAC) recommendations, the Department will again submit proposal for enhanced budget allocation under Materials & Supplies during the budget preparation of Health & Family Welfare Department at the end of the year, 2025.”

3.5.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

VI. Para 4.1.1 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.6.1 RECOMMENDATION

(vide para 5.16 of the Seventh Report of the Public Accounts Committee)

The Committee recommends that improvement in reduction of waiting time in all the District Hospitals and Civil Hospital Aizawl be achieved by the Department.

3.6.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department has discussed the issue with officials from Civil Hospital, Aizawl, and it was reported that discussions are ongoing for the introduction of the Hospital Management Information System (HMIS) at Civil Hospital, Aizawl, which will help reduce waiting time. The proposal will be put up in the RKS meeting on 23/10/2025. It was also discussed that more awareness will be generated regarding the online OPD registration, which has greatly reduced waiting time since its inception but is not being utilized by the public as expected. The hospital has also taken steps to ensure that the staff members arrive on time to begin registration, which is crucial to reducing waiting time.”

3.6.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

VII. Para 4.1.2 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.7.1 RECOMMENDATION

(vide para 6.15 of the Seventh Report of the Public Accounts Committee)

The Committee noted that the Department now provides an online registration facility in the District Hospitals, as stated by the Department during its Oral Evidence.

The Committee recommends that the Department take necessary action to enhance the efficiency of the existing online registration facility in all district hospitals and particularly in Civil Hospital, Aizawl.

3.7.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“As stated above, Civil Hospital, Aizawl is in the process of introducing Hospital Management Information system (HMIS) at Civil Hospital, Aizawl which will be discussed in the RKS meeting on 23/10/2025.”

3.7.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

VIII. Para 4.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.8.1 RECOMMENDATION

(vide para 7.15 of the Seventh Report of the Public Accounts Committee)

The Committee noted that the Department now provides an online registration facility in the District Hospitals, as stated by the Department during its Oral Evidence.

The Committee recommends that the Department take necessary action to enhance the efficiency of the existing online registration facility in all district hospitals and particularly in Civil Hospital, Aizawl.

3.8.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“As stated above, Civil Hospital, Aizawl is in the process of introducing Hospital Management Information system (HMIS) at Civil Hospital, Aizawl which will be discussed in the RKS meeting on 23/10/2025.”

3.8.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

IX. Para 4.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.9.1 RECOMMENDATION

(vide para 7.16 of the Seventh Report of the Public Accounts Committee)

The Committee observed the CAG report which stated that the ideal average number of patient load per day in the three sampled DHs in OPD is worked out, ranging from 88 to 147 patients in Lawngtlai DH and Champhai DH and 280 to 467 patients in Aizawl CH respectively. In comparison to the average daily patient load handled in the sampled DH with the ideal average number of OPD per day, the average patient load per day in Lawngtlai DH and Champhai DH were within/ below the optimum average patient load during the period covered under audit.

Civil Hospital, Aizawl on the other hand, had an average number of patient ranging from 1,225 to 1,314 patients per day during 2014-19 which was much higher than the optimal average patients per day. This indicates that the number of registration counters needed to be increased in CH Aizawl.

The Committee recommends that the number of registration counters in Civil Hospital, Aizawl be increased and the online registration facility be enhanced to improve its reliability.

3.9.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department has discussed the issue with officials from Civil Hospital, Aizawl who reported that lack of space and lack of human resource to operate the counter is the main hurdle in increasing the number of registration counters. All Departments of Civil hospital is currently confined in a very limited space due to the planned demolition and reconstruction of Block A and B for which financial sanction has been received from PMJVK. All departments in Block A and B has to be shifted in whatever space available. Once construction is completed, there will be enough space for extra registration counters.

As stated above, more awareness will be generated regarding on-line registration and the officials of Civil Hospital are in close contact with the providers to ensure its reliability.”

3.9.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

X. Para 4.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.10.1 RECOMMENDATION

(vide para 8.15 of the Seventh Report of the Public Accounts Committee)

The Committee recommends that proposals for the recruitment of essential specialist doctors in each of the District Hospitals, as stated by the Department in their reply, be followed till completion.

3.10.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department is committed to follow up the proposal for recruitment of essential specialist doctors for District Hospitals.”

3.10.3 FURTHER RECOMMENDATION

The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

XI. Para 4.1.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.11.1 RECOMMENDATION

(vide para 8.16 of the Seventh Report of the Public Accounts Committee)

The Committee appreciates the action taken by the Department in managing with its limited manpower and **recommends that the Department chart out a 5 – 10 year plan to enhance the availability basic facilities / services in the OPD of each district hospitals as per IPHS norms or standard issued by the State Government.**

3.11.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“The Department will chart out a 5-10 year plan to enhance the availability basic facilities / services in the OPD of each district hospitals as per IPHS norms or standard issued by the State Government.”

3.11.3 FURTHER RECOMMENDATION

The Committee further recommends that a copy of the 5-10 year plan to enhance the availability of basic facilities / services in the OPD of each district hospital as per IPHS norms or standards issued by the State Government, and steps taken to implement the same be forwarded to the Committee.

XII. Para 4.3 of the Report of the Comptroller & Auditor General of India for the year 2018-19; Select District Hospitals.

3.12.1 RECOMMENDATION

(vide para 10.15 of the Seventh Report of the Public Accounts Committee)

The Committee observed the CAG Audit text which stated, “The IPH Standards envisage that DHs should have an Intensive Care Unit (ICU) to attend to critically ill patients such as major medical and surgical cases, head injuries, severe haemorrhage, *etc.* requiring highly skilled life saving medical aid and nursing care. The IPH Standards further provide that the number of beds in the ICU may be restricted initially to five *per cent* of the total bed capacity of the hospital and gradually expanded to ten *per cent*. Life saving equipment such as High End Monitor (HEM), Ventilator, Thrombosis Prevention Device (TPD), Oxygen therapy for each bed and common Ultrasound (USG) and Defibrillator which are essential to save critical patient should be available.”

The Committee stressed the necessity of the Intensive Care Unit to attend to critically ill patients such as major medical and surgical cases, head injuries, severe haemorrhage, *etc.* in the District Hospitals. The Committee, therefore, **recommends that the Department continue to pursue making available ICU services in the District Hospitals.**

3.12.2 ACTION TAKEN BY THE GOVERNMENT

(vide letter no.G.25015/1/2025-HFW/Pt.I dated 30th October, 2025)

“4 Bedded ICU has been made functional on 08/10/2025. ICU facility is now available at District Hospital Siaha, Champhai, Civil Hospital Aizawl and Lunglei and ZMC&H. The Department will continue to make efforts to make ICU service available, which will require apart from the equipment, specialized doctors to operate the ICU. Availability of ICU will therefore depend on filling up the sanction post, creating more sanction post as well as availability of doctors to fill up the sanctioned post and constant availability of specialist doctors. If an ICU is set up at District Hospital and the Anaesthesiologist is transferred and not replaced by an Anaesthesiologist, the ICU can become redundant.”

3.12.3 FURTHER RECOMMENDATION

The Committee, highlighting the importance of District Hospitals at the district level, further recommends that the Government take action to ensure that ICUs are not disrupted by the absence of Anaesthesiologists.

SUMMARY FURTHER RECOMMENDATION

3.1.3 The Committee, in view of ensuring accountability, further recommends that the concerned authorities prepare a structure that mandates periodic submission of records of maintenance and calibration of diagnostic equipment to the Directorate for ready reference.

3.2.3 The Committee, in view of ensuring accountability, further recommends that the concerned authorities prepare a structure that mandates periodic submission of records of maintenance and calibration of diagnostic equipment to the Directorate for ready reference.

3.3.3 The Committee further recommends that the action taken by the State Government regarding the charting out of the 5-year action plan to ensure the availability of a full range of essential equipment in every District Hospital, and to ensure the obsolescence of equipment purchased, be forwarded to the Committee.

3.4.3 The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

3.5.3 The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

3.6.3 The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

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3.8.3 The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

3.9.3 The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

3.10.3 The Committee further recommends that a report consisting of the completed action and outcome be forwarded to the Committee.

3.11.3 The Committee further recommends that a copy of the 5-10 year plan to enhance the availability of basic facilities / services in the OPD of each district hospital as per IPHS norms or standards issued by the State Government, and steps taken to implement the same be forwarded to the Committee.

3.12.3 The Committee, highlighting the importance of District Hospitals at the district level, further recommends that the Government take action to ensure that ICUs are not disrupted by the absence of Anaesthesiologists.