

## PHYSICAL VERIFICATION REPORT

(Conducted by Dy. Director, Planning on 29-11-2011)

1. Name of Project: Construction of District Hospital at Reasi
2. Funding Agency: Health & Medical Education Department (Plan)
3. Executing Agency: J&K Project Construction Corporation Ltd.
4. Year of Start: 2008
5. Year of completion: 2011 (3 years)

6. Financial Status of Work:

(Rs. in crores)

Estimated Cost	34.39
Funds Released	8.10
Value of Work Done	8.85
Work Done Liability	0.75

7. Need of the Project:

In the DPR, JKPCC Ltd. has given the following justification for constructing a 100 bedded district hospital at Reasi :-

- (a) The sub-district hospital was not sufficient for meeting the growing public demand for health care facilities in the newly carved district.
- (b) The occurrence of road accidents in the hilly district is frequent and the emergency patients arriving from far flung areas need to be treated within the district.
- (c) There is a lot of tourist flow due to SALAL Project & Shiv Khori Cave Temple. The tourists can be provided better medical care facilities in case of illness at Reasi which is in vicinity of the tourist destinations.

8. Physical Status of Work:

S.No.	Major works	Physical Achievement
	Hospital Components	
1	OPD Block (Spilled over 3 floors)	90%
2	IPD Block (Spilled over 3 floors)	0%
3	Emergency/Diagnostic Block (Spilled over 3 floors)	10%
3	OT Block (Spilled over 3 floors)	0%
4	Canteen/Kitchen Block (Single Storey)	0%
5	Store Block (Single Storey)	0%
6	Mortuary Block (Single Storey)	0%
7	Ambulance Garage/Driver's Quarters (Two Floors)	0%
	Residential Components	
8	Doctor's Quarter (6Nos in 3 Storeyed building)	0%
10	Paramedical staff Quarters (3 Storey)	0%
11	Employees Quarter (6Nos in 3 storeyed building)	0%
	Allied Components	
12	Leveling of ground	Completed only for OPD & Emergency Block
13	Construction of main feeder road	90%
14	Parking	Completed only for OPD Block
15	Landscaping	0%
16	Sewer line	Completed only for OPD Block
17	Electric transformer, sub-station,etc.	Only electric transformer installed & commissioned
18	Water Storage tank	Completed only for OPD Block
19	Underground sump	Completed only for OPD Block
20	Security post, gate and chain link fencing	0%

## 9. Brief History:

The decision to construct a District Hospital at Reasi was taken by the Hon'ble Chief Minister during the course of DDB meeting held at Reasi on 28-04-2008. It was also decided that the JKPCC Ltd. would take up the construction work and an amount of Rs 2.50 crore was earmarked during (2008-09). The DPR mentions that instructions were also issued for including components, such as, a 100 bedded IPD, OPD, Emergency, OT, and Residential Block as well as other ancillaries in the hospital complex.

State land of about 100 kanals across a local nallah flowing along the Reasi-Salal-Mahore road close to the Degree College, Reasi was selected by the District Administration for taking up the construction work.

Accordingly, the JKPCC Ltd. prepared the DPR with cost offer of Rs 34.39 crore and submitted it to Director Health Services, Jammu along with detailed drawings in July 2008. The Project drawings were approved by the Director, where-as the DPR was forwarded to H&ME Department for accord of AA and Technical Vetting. The AA/Technical Vetting is yet to be accorded by the concerned authorities.

Based on the approval to the drawings conveyed by Director, Health Services, Jammu, the construction work was taken up by JKPCC Unit, Reasi in 2008-09 itself although the AAA/ Technical Vetting was pending since Plan funds to the tune of Rs 2.60 crore had been placed at their disposal for utilization during that year.

## 10. Field Observations:

During the field inspection it was found that over a period of four years, only the following few works have been executed by JKPCC Ltd. by expending an amount of Rs 8.10 crore provided to it against the project cost of Rs 34.39 crore :-

- a) A 3 storeyed OPD block completed but lift is yet to be installed.
- b) RCC pillars of Ground floor of Emergency Block raised upto lintel level but slab not yet laid.

- c) A bridge constructed over the local nallah and blacktopped parking area developed a little ahead connecting the hospital site with Reasi –Salal- Mahore road.
- d) Power supply provided from nearby electric lines through an electric transformer.
- e) Underground water tank constructed and 8 PVC water tanks of 2000 gallons capacity each fitted on the attic floor of the IPD block.
- f) A portion of catch water drain in front of the OPD Block constructed and retaining wall along the edge of OPD Block terrace & Emergency block terrace constructed.

The outer view of the OPD Block which is ready is quiet attractive and looks like any modern Corporate office with aluminum frames and glass work on the facia of 1<sup>st</sup> and 2<sup>nd</sup> floors. Granite has been used on the entry steps of OPD Block. Vitrified tiles laid in the waiting areas and rooms with wall cladding upto about 4 feet height. Tiles have also been used in the toilets. Good quality kota stone (single piece for each step) has been used on the stairways. Steel railings have been fixed along stairways and other locations inside the building where ever these were required. The attic floor is reported to have been treated with chemicals to provide proper weathering. The quality of workmanship of civil works executed seemed good.

All the electrical appliances such as ceiling fans (Bajaj), electric tubes (Bajaj), and flood lights (Havell's), electric boards / switches used in the OPD block are of good quality. But, the workmanship quality in fixing of switch boards was not good in a few rooms and the fact was also acknowledged by the concerned DGM of JKPCC who assured that the contractor would be asked to do the necessary rectification.

The sanitary fittings in the toilets were also found to be satisfactory. However, there was no special facility in the toilets for physically challenged persons/ patients. Imported Mirindi wood has been used in the frames of doors & windows of the rooms.

Some modification and cleaning work was under progress in the OPD block on the day of visit. A few beds had also been arranged in some portion of the 2<sup>nd</sup> and 3<sup>rd</sup> floor to utilize them as male/ female wards. Certain partitions were given to a few rooms/waiting areas of

upper floors to use them as OTs. Sign boards are also fixed above the doors of different rooms in the building. The DGM informed that the OPD block would be used as an emergency hospital for the time being and, as such, certain modifications are being carried out accordingly as per the desire of the authorities concerned.

However, there is just one stairway but no ramp facility and presently there is no way for carrying patients on wheel beds/chairs from the Ground floor where Emergency OPD would function to the temporary wards/OTs that have been developed on the 2<sup>nd</sup> and 3<sup>rd</sup> floor as the lift has also not been installed as yet.

The quality of black topping work done to develop parking area in front of the building & civil works on the bridge across the local nallah connecting the hospital site with Reasi-Mahore road was found satisfactory. The joint in between two structures of the OPD Block had been properly filled with thermocol and covered with camouflaging coloured metal strip.

It was observed that the site selected for construction of the hospital complex was slanting due to which the different blocks in the hospital complex would be constructed at varying levels and at certain distance, about 30 to 40 feet, from each other along the slope. This would require construction of huge retaining walls at the edge of each level. Two such retaining walls had already been constructed along the edges of land levelled for constructing the OPD and the Emergency Blocks. On inquiring about the connectivity between different blocks, the DGM told that there is provision for constructing a connecting corridor between different blocks at the end portion of each Block.

On asking about any interference by the locals in executing the project, DGM informed that some portion of private land on the rear side of the Hospital Complex was required for constructing the OPD Block and laying foundation of Emergency Block so that the layout of the hospital complex did not get distorted as against the approved drawings. The land owners had then spared their land for construction of hospital on the assurance of the district administration that it would construct a road along the rear fence of the hospital complex. However, the construction work of the said road which would be of about 500 meters stretch from Reasi- Mahore road towards the rear side of the complex has not been taken up as yet.

The DGM further informed that the locals had been approaching them for fulfilling their demand ever since the construction work of hospital was taken up by them. He also told that the locals were supportive till date but could play mischief in future in case their demand is not met.

11. Problem Areas/Suggestions along with critical analysis:

- 1) Statistics not used in planning the project :- Although announcement was made by the Hon'ble Chief Minister to construct a 100 bedded District Hospital along with other allied facilities but no statistical study seems to have been conducted either by the concerned authorities in Health Department or by the JKPC. Either of the two should have gone for a statistical investigation to collect figures of inpatient occupancy in the already functioning sub district hospital at Reasi, number of tourists visiting the different tourist destinations in and around Reasi, frequency of accidents that occurred in the hilly district during the last few years. This data was vital because statistics of the area need to justify the need for a 100 bedded hospital. Had these figures been collected, it would have been beneficial in assessing the present need and the future demand. The requirement could be of a 50 bedded hospital or may be a 150 bedded hospital instead of a 100 bedded one. Since the DPR prepared by JKPC did not comprise of any such details, it was for the funding department i.e. H&ME to look into the details so as to justify the construction work which it was going to fund in the subsequent years.
- 2) Wrong site selection results in excess cost of project: - The site selected for the hospital seems inappropriate as it is across a local nallah along the Reasi-Mahore road and would involve huge expenditure on account of construction of a bridge, land leveling/development and construction of retaining walls. Depending on the selected site, the layout of the hospital has been prepared in such a manner that different blocks would be constructed on different levels. Although the provision of a connecting corridor has been kept in the project for going from one block to the other (emergency to OT, OT to IPD etc) located on different levels. This would not just involve huge expenditure on civil works in the form of constructing extra pillars, beams & RCC flooring/roofs for the corridors but would also lead to

wastage of time & cause inconvenience to the public/staff in taking bed ridden patients from one block to other within the hospital complex.

- 3) Project under execution for last three years without AAA/Technical Vetting: - The DPR has neither been administratively approved nor technically vetted although funds have been released by H&ME Department to the executing agency continuously for the past three years. If the Department really intend to construct the hospital within a stipulated time frame it should have obtained the AA/Technical vetting from competent authorities and provided funds against the entire project cost in 3-installments, say 25%, 50%, 25% over a period of 3 years so that the health infrastructure could be executed within time frame proposed by JKPC in the DPR.
- 4) Project not benefitted from re-appropriation of unspent plan funds carried out at the end of each financial year: - At the end of every year there is saving of funds in the Annual Plan under different schemes which are re-appropriated towards important projects. Health is a vital sector, but this project does not seem to have financially benefitted even once while re-appropriation of plan funds by P&DD during the last 3 years. Most often plan funds are seen to be have been parked in the civil deposit, expended to book material/machinery for schemes to be executed during the next year or placed in the account of Collector for acquisition of land, etc. The plan funds need to be judiciously utilized. The P&DD needs to properly prioritize the essential projects and re-appropriate funds at the year end on such demanding projects where ongoing execution work is suffering instead of retaining funds elsewhere without any immediate utility.
- 5) Stoppage of work: - It is a matter of concern that the construction work of the district hospital has come to stand still due to inadequate annual allocation of funds. The H&ME department needs to re-strategize the balance funding by fixing new timelines so that remaining works are completed without further delay which eventually would result in escalation of project cost. The Plan Budget of the Health Sector needs to be expanded at least for the next couple of years so that all the

incomplete works taken in hand which have been stopped (includes district Hospital Rajouri) are completed.

- 6) Inappropriate utility of infrastructure: - Another matter of concern is that the partially constructed building is going to be utilized temporarily for the purpose other than what it was actually meant for. The OPD block is going to be utilized as a mini-Emergency Hospital by making modifications within the building. The same strategy of the Health department was observed while inspecting district Hospital Rajouri & this unappreciable trend seems to continue at Reasi and may be in other districts as well. However, it needs to be ensured that minimum changes are made so that the building can be utilized as an OPD when the entire complex is ready.
- 7) Inefficiency of JKPCC Ltd. in utilizing funds: - The Government needs to encourage competitive bidding for executing construction works instead of allocating projects directly to the JKPCC. The present policy of the Government to make things easy for JKPCC seems to be adversely affecting its efficiency. Competitive bidding will help in better working of the corporation for it will have to prove its worth against its rivals in the private sector who are presently also discouraged without being offered an equal opportunity in taking up public works through the bidding process. The JKPCC Ltd. charges 17.5 % as construction cost for executing projects assigned to it by the State Government (i.e. about Rs 1.42 crore against release of Rs 8.10 crore for this project) and yet its pace of execution does not seem satisfactory. The below two tables need to be examined:

Table 1

(Rs in Crore)

Year	Funds Released	Value of work done
2008-09	Rs 2.60 crore	Rs 0.90 crore
2009-10	Rs 3.00 crore	Rs 2.70 crore
2010-11	Rs 2.50 crore	Rs 3.70 crore
2011-12 (ending 11-2011)	Nil	Rs 1.55 crore
Total	Rs 8.10 crore	Rs 8.85 crore

Table 2

(Rs in Crore)

Year	Cumulative funds released to JKPCC	Work Done Expenditure	Unspent funds available with JKPCC
2008-09	2.60	0.90	+1.70
2009-10	5.60	3.60	+2.00
2010-11	8.10	7.30	+0.80
2011-12 (upto11/11)	0.00	8.75	- 0.55

Table 1:- It indicates that JKPCC has expended against annual allocation to a level which seem to be satisfactory.

Table 2:- When we work out the cumulative releases i.e. availability of funds during each year the figures of unspent funds available with JKPCC at the end of previous three years are not pleasing and indicates their poor utility.

Table 2 also implies that even had the entire funding been provided to JKPCC for the project within three years, its claim to complete the work within stipulated time frame seems exaggerated. Public money allocated during a specific period needs to be optimally utilized. JKPCC Ltd. must earn from its 17.5% construction charges and not from dividends on account of interest on the balance amount available with it at end of each financial year.

- 8) Non availability of staff in health institutions:- Another aspect which need to be analyzed is requirement of adequate number of Doctors, Surgeons, Medical and Para medical staff to run the 100 bedded district hospital. It is unlikely that H&ME department would have achieved much progress in the matter during the last 4 years. Creation of new posts requires concurrence from Planning/Finance and approval from the State cabinet. The already functioning hospitals, especially those in rural areas/town of Reasi is facing shortage of staff and conditions there would worsen in case new posts are not created for the

new district hospital and in position staff from other hospitals is dispersed into the new hospital. Before taking up any new construction work in Health Sector it is necessary to access the states' financial resources to run these institutions. Health institutions involve huge recurring expenditure on a/c of salary, machinery, equipments, TE/POL, electricity etc. apart from the construction cost which is one time expenditure and available under plan with out much difficulty when justified. In these circumstances it is advisable to execute and run our new upcoming health institutions under PPP mode.

- 9) Local demand for construction of road behind the hospital complex: - The demand of the locals for constructing a road on the rear side of the hospital as per the assurance given by the district administration need to be addressed to immediately. Separate provision of fund could be kept under district plan by the Deputy Commissioner concerned.

Physical Verification Conducted by:	Madan Gopal Sharma, Deputy Director Planning, Monitoring Cell, Chief Minister's Secretariat.
Officers of Executing Agency who accompanied during field visit:	Sh. Janak Raj, Chief Planning Officer, Reasi Sh. Kulbant Singh Johal, Deputy General Manager Sh. Gill, Manager JKPCC Ltd. Unit Reasi.