

MINUTES OF THE REVIEW MEETING ON EXPENDITURE IN DME INSTITUTIONS HELD ON 20.5.14

A review meeting for the DME Institutions in Chennai along with the attached Institutions was conducted under the chairmanship of PROJECT DIRECTOR, TAMIL NADU HEALTH SYSTEM PROJECT

The Following Officials Participated:

1. Dr. Geetha Lakshmi, DME
2. Dr. Geetha, DD DME
3. Dr. Vimala, Dean-MMC
4. Dr. Meenakshi Sundaram, Dean-SMC
5. Dr. Ramakrishnan, , Dean-KMC
6. Nodal officers and representatives from Madras Medical College, Stanley Medical College, Kilpauk Medical College and their attached institutions.

Officials From TNHSP

7. Selvi .Kalaiaarasi, DRO
8. Mr. Syed Rajak sahib IEC Expert,
9. Dr.Ravi Babu Sivaraj, Joint Director i/c
10. Dr.Sathish Raghavan , Deputy Director
11. Dr.Malathi, Deputy Director
12. Medical Officers From CMCHIS TNHSP
13. Representatives from Health sprint, TPAs, ENCORE

DME discussed about the difficulties faced by the Nodal officers and suggested/ instructed the following action.

DME instructed the following:

1. Department wise expenditure statement and the consolidated expenditure statement should be sent to DME and TNHSP before 5th of every month. One accounts officer should be identified in the institution to consolidate the expenditure report. The CMCHIS expenditure statement should always be available with the Dean's office .
2. Purchase Inventory should be started immediately and it should be available for viewing of inspecting officials.
3. Head of the departments should review CMCHIS every month with regard to pre auth applied, need more info and claims pending submission.
4. The follow up procedures available under the scheme are underutilised , instructed to increase the utilisation of follow up procedures .
5. DME has requested that a separate account officer be posted in each institution for expenditure monitoring to put entries in software to avoid errors.
6. DME also requested that whenever a problem arises in the software regarding Username and password, it should be provided as early as possible.
7. DME opined that ward managers be employed to attend to address claims/ pending/Need more info (action: Head of Institution/Nodal officer.)

The Project Director reviewed the expenditure performance of the Institute as well as department wise performance and the following decisions are taken:

- The software expenditure entry department wise was reviewed. The performance of dermatology and neurosurgery departments of MMC, Dental College, paediatric surgery, radiology, medical oncology, paediatrics departments of Stanley medical college, general surgery department of Kilpauk Medical College, are low and the Deans/ Superintendents/ Director and Nodal Officers of the Institutions are instructed to reconcile the entry made in software with the records and if necessary to update their entry.
- The performance of Orthopaedic trauma dept in MMC (expenditure entry is 105%), IOG old entity (136%) and RSRM (122%) seems unreal and should be reconciled.
- The breakup of transferring the Old Entity fund to various departments of Stanley medical college is handed over, but a deficit of Rs. 50 lakhs is present, which has to be tallied and submitted to TNHSP.
- The Superintendent of Royapettah hospital informed that the HOD, surgical oncology department is not permitting to utilise the excess fund available with them for Institutional development. TNHSP to issue instruction.
- Government Ophthalmology Institute and Government Tondiarpet Hospital were instructed to complete their expenditure software entry before 25th of May 2014.
- DME has suggested that if expenditure entry in software is not completed before 25th of May, the future claim amount will be freeze and will not be deposited in their account until the entry is complete.
- GH Otteri hospital expenditure is low so was asked to submit their plan of action for the remaining fund.
- The fund generated by all the government institutions under CMCHIS should be utilised before 30-6-14, otherwise the money will be utilised as corpus fund for high end procedures being done under the scheme or reallocated to other institutions where there is a need for funds.
- An Action Plan for the utilisation of the funds available with the departments/Institutions, with due justification to TNHSP before 07/06/2014, in the following format and TNHSP will decide upon the retaining of the unutilised funds with the departments.

Pre auth		claim		Amount received in bank	Expenditure done	balance	Committed expenditure	Net balance	Action plan for the remaining amount
count	Amt	count	Amt						

- A series of meetings for individual institution should be conducted to tally the accounts, in which a team of AOs (one each from DME, Institution, TNHSP) will physically verify the expenditure of the institution. The institution will be requested to bring the Bank Statement/

Passbook, records of expenditure, and cash book for verification. TNHSP to draw a schedule starting before June 1 st 2014. Every day 1 or 2 institutions starting with the smaller institutions and poor expenditure institutions first may be scheduled.

- The list of proposals pending with PWD after depositing funds with PWD, may be forwarded to TNHSP to take it to the knowledge of the concerned official in the PWD JC Engineer level meeting for further follow up.
- Doctors should not be employed under the scheme generated fund.
- Scheme generated fund should be spent according to modified G.O Ms No 320 Health and Family welfare Dept. dated 19/11/12.

Sd Project Director

True copy sd by


27/5/14
Medical Officer

TNHSP