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FINANCIAL ADMINISTRATION RELATED PROBLEMS IN HEALTH & FAMILY WELFARE PROGRAMMES IN HARYANA: A CASE STUDY

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ABSTRACT

All (state) activities depend first on the treasury. Therefore, a king shall devote his best attention to it. A king with a depleted treasury eats into the very vitality of the citizens and the country.

Kautilya, the Arthasastra

Public Finance Administration or generally additionally referred to as Government Finance Administration may be a field that's fast increasing in its scopes, and is contemplate as among the foremost necessary portfolio within the government. Finance is that the fuel of administration. Finance moves the machinery of state. Sound financial administration is the crux of the efficient administration of government operations. Whatever may be the system of government-capitalist, socialist or a mixed economy the financial administration is very important to sustain these systems. ¹

KEYWORDS: Organization, Climate, Culture, Psychological Well-being, Manager.

INTRODUCTION

Financial Administration Defined

The term Financial Administration consists of two words viz. 'Finance' and 'Administration'. The word 'administration' refers to organisation and management of collective human efforts in the pursuit of a conscious objective. The word 'Finance 'refers to monetary (money) resource. Financial Administration refers to that set of activities which are related to making available money to the various branches of an office, or an organisation to enable it to carrying out its objectives. Whether it is the Department of Agriculture, Railways, Road Transport Corporation, Primary Health Centre, Municipality or Gram Panchayat, or for that matter, a family, its day-today activities would depend upon the availability of funds with which financial administration.

DEFINITIONS

L d White Every administrative act has its financial implications; either creating a charge on the treasury or making a contribution to it.

Gladstone Budgets are not merely matters of arithmetic but in a thousand ways go to the root of prosperity of individuals, the relations of classes and the strength of kingdoms

Plowden Committee Budget is a process in which the instruments of taxation and the expenditure are used to influence the course of economy

F. A. Nigro Financial administration is of special importance today for the simple reason that, while there seems to be no limit to



¹S. L. Geol, Public Financial Administration, Regal Publication, 2008, p. 2

Available online at www.lbp.world

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what we may ask of government, there is always a limit to the funds available.

Hoover Commission Financial administration is at the core of modern government.

Willoughby Budget is an integral and indispensable tool of administration. He also observed the real significance of the budget system lies in providing for the orderly administration of the financial affairs of a government.

Lloyd George; Government is finance

Morstein Marx Finance is as universally involved in administration as oxygen is in the atmosphere².

Historical Development of Public Finance Administration

During World War I & II this definition was given by the Hoover Commission, USA, 1949. Zaherawati During the period of World War I & II, the "Line Item Budgeting" system was used. This system emphasized on the control of public (governmental) expenditure on the various programs.

Thus, each item to be purchased by the assorted governmental departments ought to enlist the things to be bought in details. This is often to make sure (prevent) the misuse of public cash & overspending. When war II when war II, the look Program Budgeting System were used. This method emphasized on the requirement for detail designing of the assorted governmental programs – to make sure the viable of any programs. This method is a lot of versatile than the road Item Budgeting system. The PPBS is additionally called the "Performance Budget" or the "Rational Comprehensive Approach."

PPBS = Performance Budget = Rational Comprehensive Approach

Finance Administration of Health and Family Welfare in India

The Ministry of Health and Family Welfare (MoHFW) has two departments (i) the Department of Health and Family Welfare, and (ii) the Department of Health Research. The Department of Health and Family Welfare is responsible for functions including (i) implementing health schemes, and (ii) imparting medical education and training. The Department of Health Research is broadly responsible for conducting medical research.

The Ministry of Health and Family Welfare graded eighth in terms of the entire monetary fund allocation in 2017-18. This note analyses the money allocation trends and key problems regarding the health sector.

In 2017-18, the MoHFW received Associate in Nursing allocation of Rs 48,853 crore. This allocation is a rise of 23rd over the revised estimates of 2016-17. Note that the budget estimates for 2017-18 exceed the budget estimates of 2016-17 by Rs 10,646 crore. Below the Ministry, the Department of Health and Family Welfare received the very best allocation (97%) at Rs 47,353 cror. This was followed by the Department of Health Research (3%) at Rs 1,500 crore. Table 4.1 provides details on the two departments under the MoHFW.

Table 1.1
Budget allocations for the MoHFW (in Rscrore)

Major Heads	Actual	Budget revised	Budget estimate
	2015-16	2016-17	2017-18
Health & family welfare	33,121	38,343	47,353
Health research	993	1,345	1,500
Total	34,114	39,688	48,853

Sources Demand No. 42 & 43, Ministry of Health and Family Welfare, Union Budget 2017-18

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² Dr. S. B. M. Marume, Prof. D. Ndudzo "Public Financial Administration" International Journal of Business and Management Invention 2016, Volume 5, Issue 6, pp. 15-16

The revised estimates in 2016-17 for the Department of Health and Family Welfare overshot the budget estimate of that year by Rs 1,282 crore. Similarly, the Department of Health Research also, overshot the budget estimates by Rs 200 crore.

NIOHFW for the year 2017-18.

4%

17%

4%

55%

8%

12%

© National A DS & STD Control

PM Sw asthys Suraksha Yojana

PH uman Resources for Health & Medical Education

Figure 1.1
Contains the split in the allocation under the MoHFW for the year 2017-18.

Key allocation trends are as follows

■ Autonomous Bodies

• The National Health Mission (NHM) received the best allocation at Rs 26,690 large integer and constitutes 55th of the full ministry allocation.

■ National Health Mission

- This was followed by allocation to autonomous institutes (12%) like AIIMS that saw a rise of 100 percent at Rs 6,088 crore.
- Other high expenditure heads below the MoHFW area unit Human Resources for Health & Medical Education (8%) at Rs 4,025 crore, PradhanMantriSwasthya Suraksha Yojana (4%) at Rs 3,975 large integer and National AIDS and STD management Programme (4%) at 2,000 crore.

India's public health expenditure as a percentage of GDP is relatively low as compared to other countries

Table 4.2 shows the public expenditure on health as a percentage of GDP by various countries in 2013.

Table 1.2
India's public health expenditure as a percentage of GDP is relatively low as compared to other countries

· ·	•	•	
Public (as a % of GDP)	health		expenditure
1.1			
3.1			
4.3			
4.7			
6.3			
	Public (as a % of GDP) 1.1 3.1 4.3 4.7	Public health (as a % of GDP) 1.1 3.1 4.3 4.7	Public health (as a % of GDP) 1.1 3.1 4.3 4.7

Sources Health Status Indicators, National Health Profile, 2015, Ministry of Health and Family Welfare

In 2011, the High Level Expert Group (HLEG) on Universal Health Coverage constituted under the

Planning Commission made certain recommendations with respect to the provision of universal health coverage. Universal health coverage includes ensuring equitable access to affordable and appropriate health services of assured quality. The HLEG recommended that the central and state governments must increase public expenditure on health to, (i) at least 2.5% of the GDP by the end of 2017, and (ii) at least to 3% of GDP by 2022.

Financial budget for Haryana all department

The finance minister proposed a budget of `102329.35 crore for the fiscal 2017-18, an increase of 13.18 per cent over RE 2016-17 of `90412.59 crore. This is the first time in the State that the Budget has crossed the figure of one lakh crore, excluding food grain procurement operations. The Budget outlay of `102329.35 crore comprises 21.88 per cent as capital expenditure of `22393.51 crore and 78.12 per cent as revenue expenditure of `79935.84 crore. "Antyodaya" and "minimum government and maximum governance" are the guiding principles to make the State a better place to live in. In order to fulfill this vision, a strategy as well as an action plan based on nine priority areas vise, (i) agriculture, (ii) rural development, (iii) urban development; (iv) infrastructure, (v) education andIT governance; (vi) health; (vii) women empowerment (viii) development of youth and (ix) culture have been framed.

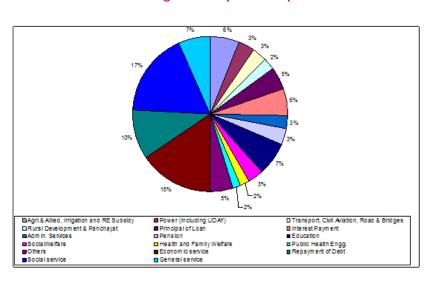


Figure - 1.2
Financial budget for Haryana all department

Financial budget for Heath and family welfare programmes in Haryana

Recognizing that health and family welfare sector is very important for socio-economic development. The proposed to allocate `3839.90 crore in 2017-18 for health and family welfare which is an increase of 15.52 per cent over the RE outlay of `3323.95 crore in 2016-17. The State Government has made it a priority to provide affordable, convenient and modern medical facilities in the State. All essential medicines are being provided free of cost in Government hospitals. MRI and CT scan machines have been installed in six district hospitals and three Medical Colleges on PPP mode. Besides, letters of award for installations of these machines have been issued in respect of five more district hospitals. For the first time, dialysis services have been started in four districts and are being installed in another ten districts. Ultramodern Cath-Labs are also proposed to be set up in four district hospitals namely, Panchkula, Gurugram, AmbalaCantt. and Faridabad. The State Government envisages opening a medical college in every district. Detailed Project Report of Government Medical College in Bhiwani has been approved by the Ministry of Health and Family Welfare, Government of India. The construction work will commence soon. The Medical

University at Kutail, Karnal will have "State of the Art" 750 bed multi-specialty and super specialty hospital. Construction of medical colleges in Jind is likely to begin in 2017-18. Medical Council of India (MCI) has already conducted inspection of KalpanaChawala Medical College, Karnal and it is likely that the first batch of MBBS for 100 seats will be admitted in the 16 academic year 2017-18. Further, a Dental College will also be established in the ShaheedHasan Khan Mewati Government Medical College, Nalhar to provide better oral healthcare and dental education to the people of socioeconomic backward district of Mewat.

Budget Allocation and Expenditure of Health Services in Haryana (2011-2017)

TABLE -1.3

Budget Allocation and Expenditure of Health Services in Haryana (2011-2017)

(Amount in lakhs rupess)

Year	Allocation	Revised budget	Expenditure
2011-2012	76227.38	76227.38	66321.13
2012-2013	98448.42	98448.42	82843.36
2013-2014	114759.23	114872.73	91178.80
2014-2015	147266.83	155918.05	128740.46
2015-2016	165984.31	178364.08	155514.16
2016-2017	175731.41	190009.40	166233.65
2017-2018	175354.77	200751.95	97775.16
Total	1643772.35	1704592.01	788606.72

Source Annual Report of Health Department, Haryana (2011-2017)

Budget allocation of health and family welfare services in Haryana is highlighted in the table 1.3 shows that total budget of allocation was Rs1643772.35`from 2011-2012 to 2017-2018 and the budget was released by the state government from 2011-2012 to 2017-2018 was `1704592.01`The table shows that the total expenditure of the year was 2011-2017 was `788606.72.

Table –1.4

Budget Allocation and Expenditure of family welfare Services in Haryana (2011-2017)

(Amount in lakhs `)

Year	Allocation	Revised budget	Expenditure
2011-2012	11775.25	11775.25	8296.65
2012-2013	12335.27	12335.27	9217
2013-2014	14033	14033	10460.49
2014-2015	15735.54	15735.54	11739.15
2015-2016	17199.96	17426	12930.15
2016-2017	17023.44	20510	14225.29
2017-2018	10391.85	23093	7756.05
Total	98494.31	114908.06	74624.78

Source Annual Report of Health Department, Haryana (2011-2017)

And highlighted in the table 1.4 shows that total budget of allocation family welfare was `98494.31 from 2011-2012 to 2017-2018 and the budget was released by the state government from 2011-2012 to

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2017-2018 was `114908.06 the table shows that the total expenditure of the year was 2011-2017 was `74624.78.

Schemes Wise Distribution of allocation and expenditure Budget in Health and Family Welfare Haryana (2011-2017)

The table 1.5 Show that the total amount has been given to the General Hospitals, Haryana for the implementation of the schemes. The implementation policy/programmes of the center and state Health programme particular in the selected area of the researcher during the study

TABLE-1.5

Schemes Wise Distribution of Allocation Budget in Health and Family Welfare Haryana (2011-2017)

Allocation (Amount in Lakhs `)

SCHEMES	2011- 12	2012-13	2013-14	2014-15	2015-16	2016-17	Total
Janani Suraksha Yojana	950.00	1900.00	1090.00	1590.00	800		6330.00
Devi RupakUtthanparivarkalyan Yojana	50.00	60.00	55.00	49.50	50.00	50.40	314.49
AIDS Control	-	-	-	800.00	2067.60	3300	6167.6
Disease Control	1191.7 4	1200.90	1370.65	1476.30	1587.15	1763.55	8590.83
NHM	5272.0 0	11410.0 0	12400.0 0	32730.2 0	38263.0 0	39725.0 0	139800.2 7
RashtriyaMazdoorSwasthyaBi ma Yojana for BPL family	-	-	-	-	-	200.00	200.00

Source Health Department, Panchkula (2016-17)

Table 4.6 shows that the budget has been allocation to the Devi RupakUttanEvaimPariwarKaliyan Yojana is `314.9 from 2011-12 to 2016-17, the budget allocation to the Janani Suraksha Yojana `6330.00from 2011-12 to 2016-17, the budget allocation to the Aids control programme `6167.6 from 2011-12 to 2016-17, the budget allocation to the Disease control programme `8590.83 from 2011-12 to 2016-17, the budget allocation to the NHM `139800.27 from 2011-12 to 2016-17, the implementation for the BPL family of the schemes given in above table RashtriyaMazdoorSwasthyaBima Yojana `200.00 to 2017.

Table defines that except Janani Suraksha Yojana, there is increase in allotment of fund from 2011-12 to 2016-17. The increase of fund in devirupak is 0.80%, in AIDS control programme 412.5% in Disease control programme 47.98%, in NHM 26.51%.

TABLE-1.6
Schemes Wise Distribution of Expenditure Budget in Health and Family Welfare Haryana (2011-2017)
(Amount in Lakhs `)

Schemes	2011- 12	2012- 13	2013-14	2014-15	2015-16	2016-17	Total
Janani Suraksha Yojana	880.00	792.43	434.61	737.76	611		3455.8
Devi RupakUttam Yojana	41.43	44.97	18.04	46.07	44.72	42.66	238.6
AIDS Control	-	-	-	800.00	2067.60	3300.00	6167.6
Disease Control	1024.0 3	1108.7 6	1218.05	1365.82	1428.58	1617.07	7762.31
Nhm	4700.0 0	9638.0 0	10664.0 0	31483.2 0	38263.0 6	39725.0 1	134473.2 7
RashtriyaMazdoorSwasthyaBi ma Yojana for BPL family	-	-	-	-	200.00	200.00	

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Source Health Department, Panchkula (2016-17)

Table 1.6 shows that the budget has been expenditure to the Devi RupakUttanEvaimPariwarKaliyan Yojana is `238.6 from 2011-12 to 2016-17, the budget expenditure to the Janani Surksha Yojana `3455.8 from 2011-12 to 2016-17, the budget expenditure to the Aids control programme `6167.6 from 2011-12 to 2016-17, the budget expenditure to the Disease control programme `7762.31 from 2011-12 to 2016-17, the budget expenditure to the NHM `134473.23 from 2011-12 to 2016-17, the implementation for the BPL family of the schemes given in above table 4.7 RashtriyaMazdoorSwasthyaBima Yojana `200.00 from 2011 to 2017.

Financial allocation and expenditure of Health and Family welfare services in selected general hospitals in

During the study the researcher collected the data for the budget estimates for selected four general hospitals. An attempt has been made to analyses the trend about budget allocations and expenditure regarding Health and Family welfare in Haryana related Hospitals shows on the table. 4.10

TABLE-1.7 Budget Allocation of Health and Family Welfare Services in Four Selected District Hospital (2013-2017)

Allocation			(Amount in Lakh `)		
Year /hospital	Civil hospital Hisar	Civil hospital Rohtak	Civil hospital Sec-10, Gurugram	LNJP hospital Kurukshetra	
2013-14	1192.00	784.00	187.00	250.6	
2014-15	1581.00	995.75	373.56	198.57	
2015-16	1793.68	129.50	428.00	109.00	
2016-17	2300.00	1503.00	628.86	135.00	
Total	6866.68	3412.25	1617.42	693.17	

3412.25 1617.42 Source Health Department, Panchukla, (2016-17)

Above table 1.7 indicates the budget allocation to Health and Family Welfare services currently operation in selected district. Budget allocation by the Haryana Government selected four district hospital was `6866.68 from 2013-14 to 2016-17 allocated to the General Hospital, Hisar, The Budget was allocation to the general hospital, Rohtak `3412.25 from 2013-14 to 2016-17. The Budget was allocation to the General Hospital, Gurugram (Sec-10) `1617.42 from 2013-14 to 2016-17 and the budget was `693.17 from 2013-14 to 2016-17 allocated to the general (LNJP) Hospital Kurukshetra.

Budget Expenditure of Health and Family Welfare Services in Four Selected District Hospital (2013-2017)

	Expenditure		(Amount in Lakh `)		
Year	Civil hospital	Civil hospital	Civil hospital	LNJP hospital	
/hospital	Hisar	Rohtak	Sec-10, Gurugram	Kurukshetra	
2013-14	1161.00	784.00	164.81	104.00	
2014-15	1468.00	974.00	324.00	85.00	
2015-16	1690.00	1250.88	399.00	59.62	
2016-17	1928.00	1503.00	628.86	68.62	
Total	6247.00	4511.88	1516.67	317.24	

Source Health Department, Panchukla, (2016-17)

(Amount in Lakh ')

Above table 1.8 indicates the budget expenditure to Health and Family Welfare services currently operation in selected district. Budget expenditure by the Haryana Government selected four district hospital was `6247.00 from 2013-14 to 2016-17 allocated to the General Hospital, Hisar, The Budget was expenditure to the general hospital, Rohtak `4511.88 from 2013-14 to 2016-17. The Budget was expenditure to the General Hospital, Gurugram (Sec-10) `1516.67 from 2013-14 to 2016-17 and the budget was `317.24 from 2013-14 to 2016-17 expenditure to the general (LNJP) Hospital Kurukshetra.

Financial Allocation and expenditure of Health and Family Welfare CHCs

Financial Allocation and expenditure of Health and Family Welfare selected (community Health Centre) Siswal (Dist. Hisar), Meham (Rohtak), Farukhnagar (Gurugram) collected the data for the budget estimates for selected community Health Center shows as the table:

Table -1.9

Budget Allocation of Health and Family Welfare Services Selected Community Health Centers (2013-17)

Allocation			(Amount in Lakn)			
Year /CHC	Community Health center	Community Health center	Community Health center	Community Health center		
	Siswal (Hisar)	Meham(Rohtak)	Farukhnagar	Mathana		
			(Gurugram)	(Kurukshetra)		
2013-14	395.84	114.62	331.52	538.00		
2014-15	466.84	775.00	379.52	639.90		
2015-16	476.00	815.90	487.00	733.00		
2016-17	519.93	697.00	508.00	756.50		
Total	1858 61	2402 52	1706 04	2667.4		

2402.52 1706.04 Source Health Department, Panchukla, (2016-17)

Above table 1.9 show the financial allocation health and family welfare services currently operation in selected district each community Health center Budget Allocation by the Haryana Government selected for community Health Center was `1858.61 from 2013-14 to 2016-17 allocated to the community Health Center, Siswal (Hisar), The Budget Allocation to the community Health Center, Meham (Rohtak) `2402.52 from 2013-14 to 2016-17 and the budget was allocation to the community Health Center Farukhnagar (Gurugram) `1706.04 from 2013-14 to 2016-17. The Budget was `2667.4 from 2013-2014 to 2016-2017 allocates to the community Health Center, Mathana (Kurukshetra). The pattern of allocated as highlighted in the table expenditure

TABLE - 1.10

Budget Expenditure of Health and Family Welfare Services Selected Community Health Centers (2013-17)

Expenditure

(Amount in Lakh `)

Year /CHC	Community Health center	Community Health center	Community Health center	Community Health center
	Siswal (Hisar)	Meham(Rohtak)	Farukhnagar	Mathana
			(Gurugram)	(Kurukshetra)
2013-14	395.84	115.62	331.50	533.00
2014-15	463.00	718.00	372.93	639.90
2015-16	476.00	795.66	465.00	656.88
2016-17	515.00	697.00	508.00	748.00
Total	1849.84	2326.28	1677.43	2577.78

Source Health Department, Panchukla, (2016-17)

Above table 1.10 indicates the financial expenditure health and family welfare services currently operation in selected district each community Health center Budget expenditure by the selected for community Health Center was `1849.84 from 2013-14 to 2016-17 expenditure to the community Health Center, Siswal (Hisar), The Budget expenditure to the community Health Center, Meham (Rohtak) `2326.28 from 2013-14 to 2016-17 and the budget was expenditure to the community Health Center Farukhnagar (Gurugram) `1677.43 from 2013-14 to 2016-17. The Budget was `2577.78 from 2013-2014 to 2016-2017 expenditure to the community Health Center, Mathana (Kurukshetra).

Financial Allocation and expenditure of Health and Family Welfare PHCs

Financial allocation and expenditure in Haryana selected primary health centers Chuli Bgrain (Hisar), LakhanMajra (Rohtak), Pipli (Kurukshetra), Bhangrola (Gurugram) — During the study the researcher collected the data for the budget for selected primary health center shows as the table.

Table – 1.11

Budget Allocation of Health and Family Welfare Services Selected Primary Health Centers (2013-17)

Allocation (Amount in Lac`)

Year /CHC	Primary Health center	Primary center	Health	Primary center	Health	Primary Health center
	Chuli Bagrian (Hisar)					Pipli
		Lakhanmajra		Bhangrola		(Kurukshetra)
		(Rohtak)		(Gurugram))	
2013-14	14.00	4.72		2.96		12.00
2014-15	16.53	6.00		3.00		19.00
2015-16	15.99	5.97		4.00		22.71
2016-17	17.57	11.00		5.00		12.00
Total	64.09	27.69		14.96		65.71

. Above table 1.11 show the financial allocation health and family welfare services currently operation in selected district each Primary Health center Budget Allocation by the Haryana Government selected for community Health Center was 64.09from 2013-14 to 2016-17 allocated to the Primary Health center, Chuli Bagrian (Hisar), The Budget Allocation to the Primary Health center, LakhanMajra (Rohtak) 27.69from 2013-14 to 2016-17 and the budget was allocation to the Primary Health center Bhangrola

(Gurugram) 14.96 from 2013-14 to 2016-17. The Budget was 65.71 from 2013-2014 to 2016-2017 allocates to the Primary Health center, Pipli (Kurukshetra).

TABLE -1.12

Budget Expenditure of Health and Family Welfare Services Selected Primary Health Centers (2013-17)

Expenditure (Amount in Lac `)

Year / CHC	Primary center	Health	Primary Health center	Primary center	Health	Primary Health center Pipli
		Bagrian	LakhanMajra	Bhangrola		(Kurukshetra)
	(Hisar)		(Rohtak)	(Gurugram)		,
2013-14	10.00		3.91	2.64		11.00
2014-15	12.00		4.00	3.00		18.89
2015-16	12.54		4.81	3.66		21.62
2016-17	11.72		9.80	4.00		12.00
Total	46.26		22.52	13.30		63.51

Above table 1.12 indicates the financial expenditure health and family welfare services currently operation in selected district each Primary Health center. Budget expenditure by the selected for Primary Health center was 46.26 from 2013-14 to 2016-17 expenditure to the Primary Health center, Chuli Bagrian (Hisar), The Budget expenditure to the Primary Health center, LakhanMajra (Rohtak) 22.52from 2013-14 to 2016-17 and the budget was expenditure to the Primary Health center Bhangrola (Gurugram) 13.30from 2013-14 to 2016-17. The Budget was `63.51 lakh from 2013-2014 to 2016-2017 expenditure to the Primary Health center, Pipli (Kurukshetra).

CONCLUSION AND REMARKS

The state government sanctions the budget, decides the financial powers of the hospital, CHCs and PHCs officials from time to time and the pay and accounts office pre- audits and passes the bills submitted by the health intuitions.

Adequate supply of budget is an immense need to bring success in any welfare scheme and it becomes more prominent when it is associated with the health of the people.

It is also a tough task to meet the health of such a large population size. Hence all we need extra budget to fulfill the demands like more health institutions, more medical staff, more effective conveyance system and more measures to make people aware about these schemes and programs.

Healthy mind needs a healthy body which results into the overall health of the people. But, amazingly the government does not notice this basic fact because share of the health budget in Haryana is only 3.75 percent of the total. At national level only 1.1 percent of total GDP of India is used in health sector. However, Govt. of Haryana has increased. The budget 15.52 percent during 2017-18 i.e 3839.90 crore in 2017-18 from 3323.95 crore in 2016-17. This budget is divided into three parts viz. health services, family welfare schemes of Aayush.

Budget of health service has increased by 30 percent from 2011 to 2017-18 i.e. `76227.38 in 2011-12 to `175354.77 in 2017-18. The family welfare schemes allocated budget has declined to `10391.85 in 2017-18 from `11755.25 in 2011-12, however, the govt. has revised budget in 2017-18 to `23093.

In family welfare schemes, three is huge increase in AIDS control scheme i.e. `800 lakh in 2014-15 to `3300 Rs in 2016-17 i.e. more than 400 percent. Budget of Janani Suraksha Yojana has decreased to `800 lakh in 2015-16 from `950 lakh 2011-12. There is `47.95 percent increase in the budget of disease control from 2011-12 to 2016-17. A small increase is also legislated of National Health mission has increased to `39725 to 2017-18 i.e. `653.5 percent more from 2011-12.

The budget allocated to the sample health institution i.e. civil hospital Hisar has received about

`2300.00 in 2016-17 followed by civil hospital Rohtak i.e. `1503.00 of civil hospital Kurukshetra i.e. `135.00 Civil hospital, Gurugram has received `628.86, during 2016-17. Every CHS has received increased budget continuously except CHC Kurukshetra where budget is declined to `135.00. In 2016-17 from `2506.00 in 2013-14.

The budget allocated to the sample health and family welfare Institutions i.e. community health center, Siswal (Hisar), has received about `519.93 In 2016-17 followed by Community Health Center, Mathana (Kurukshetra) `756.50 Community Health Center Meham (Rohtak) `697.00 lakh and Community Health Center Faruknager (Gurugram) has received `508.00 during 2016-17.

The budget allocated to the sample health and family welfare Institutions i.e. primary health center, Chuli Bagrian (Hisar), has received about `5.20 crore In 2016-17 followed by primary Health Center, Pipli (Kurukshetra) `12.00, primary Health Center LakhanMajra (Rohtak) `11.00 and primary Health Center Bhangrola (Gurugram) has received `5.00 during 2016-17.

In fact, in overall scenario of the health budget it is difficult to meet the objectives of state's health & welfare policies and programmes in limited resources particularly when our population size is much bigger, Govt. aims to facilitate more & more people with their health policies &programes there should be a free-flow budget. More health facilitates top the people is not only their right but also the duty of the state governments.

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