Chapter-III

Parliamentary Committees and Governmental Accountability

Parliamentary committee system is considered to be an effective mechanism of securing governmental accountability to the parliament. Despite the variations in the nature and competence of the parliamentary committees across the polities, functional responsibility of securing accountability of the executive is assigned mainly to the parliamentary committees in larger parts of the world. It is a well established principle of parliamentary democracy that parliament has to be accountable to the people for its policies and action. As logical corollary, accountability of parliament to the people necessitates parliamentary control over the government. The parliamentary control over executive is intended to ensure efficient, effective and accountable government. Parliamentary control over the executive and making them accountable to the legislature is a requisite of effective functioning of parliamentary democracy. In a parliamentary democracy the relationship between the people and parliament is mediated through a structure of governance. ‘The parliament represents the people and the government is accountable to the parliament. The government itself consists of the political executive and administrative executive. The administrative executive is accountable to the political executive, which in turn is accountable to the parliament.’

Needless to add accountability is a key to effective and transparent governance. An accountable and transparent governance system helps in establishing harmony between the government and people.
The committee system occupies pivotal position in the structure of ensuring accountability of the government to the parliament. Ensuring governmental accountability to the parliament is one of principal objectives of the parliamentary committees. How do the parliamentary committees attempt to secure governmental accountability and how far the committees have proved to be effective in discharging their assigned responsibility are the main focus of this chapter. The chapter is confined to the Indian experiences.

The chapter examines the role and working of the parliamentary standing committees in securing governmental accountability. The problem has been examined on two interrelated aspects: i) on the generic issues of process, procedures and competence of the committee; and ii) on specific issue of effectiveness. The generic issues related to the structure, role and functions of the committee system in India have been already examined in previous chapter. The present chapter specifically examines the issue of effectiveness. Effectiveness of the committee can be examined from two different perspectives. The first perspective would focus mainly on the working of the committee. The working of the committee in case is measured in terms of frequency of the meeting on specific issue, attendance of the members in the meetings, number of Reports presented, number of recommendations made and accepted. The second perspective goes beyond the number and quantitative data. It concentrate mainly on the nature of observations/recommendations made by the committee; and impact of the recommendations of the committee on policy governance. The present chapter attempts to judiciously combine both the
perspectives for in-depth understanding of the working of the parliamentary standing committee.

In this regard the role and working of the committee with special reference to the issues of securing governmental accountability has been examined. For critical examination of the issue, the focus has been given to the Departmentally Related Parliamentary Committees (DRSCs). It may be recalled that DRSCs have been assigned mainly four important functions stipulated under the Rules of Procedures to conduct the Business in House of the parliament. ² Out of the four functions three have direct bearing on the scrutiny and accountability of the government. These include the following: i) to consider the Demands for Grants of the concerned Ministries/Departments and make a report on the same to the Houses; ii) to consider national basic long term policy documents presented to the Houses, if referred to the committee by the Chairman of Rajya Sabha or the Speaker Lok Sabha as the case may be and make reports thereon; and iii) to take up for scrutiny, the Annual Reports/subject based on annual reports pertaining to the respective Ministries/Departments.³ Through all the three mechanisms, the DRSCs attempt to secure governmental accountability to the parliament. This becomes more clear once the role and working of one of the DRSCs is critically examined. In this regard it is important to note that mere assignment of responsibility is not sufficient. It is more important to examine as to what extent the committees affectively discharge their responsibility. Are the committees constrained by the limitation of their competence? Do the members of the committee take interest in the work of the committee? Do they attend the meeting regularly? What is the contribution of the committee in the
entire process of deliberation in the committee? Are the recommendations of the committees taken into consideration by the government in policy and governance? In case of non acceptance of the recommendations/ observations of the committee what is the option left with the committee to deal with the government? These are some of the questions raised relate directly to the role and competence of the parliamentary committees in India. Answer to some of the generic questions may be easily found and connected to the exposition about the committee system in the previous chapter. The present chapter focuses on the working and effectiveness of the parliamentary committee on the basis of certain verifiable parameters of examination and evaluation.

It is in the above mentioned context that the Departmentally Related Parliamentary Committee on Health and Family Welfare has been taken as a case for in-depth understanding and analysis besides analytical reference to generic cases. The Departmentally Related Parliamentary Committee on Health and Family Welfare was constituted in year 2004. The constitution of the committee was a result of restructuring of the DRSCs in 2004 which raised the number of DRSCs from 17 to 24. At the time of its constitution the Departmentally Related Parliamentary Committee on Health and Family Welfare consisted of three departments- Department of Health, Department of Family Welfare and Department of AYUSH. The Department of Health and Department of Family Welfare got merged in 2005 and brought together as Department of Health and Family Welfare. Again in year 2007 a separate department as Department of Health Research was created.
focus of the present chapter is mainly on the Department of Health and Health Research.

Select Reports of the Departmentally Related Parliamentary Committee on Health and Family Welfare committee have been critically examined for the purpose of evaluating the status and working of the committee and ascertaining its role in securing governmental accountability. Reports of the committee- covering the period from 2004-2005 to 2008-2009- have been purposely selected. The Reports have been examined and analysed on the following parameters- i) number/frequency of the meetings of the committee; ii) attendance of members in the Committee; iii) number of recommendations made by the committee, and iv) number of recommendations accepted by the government. Besides these four parameters, the deliberation in the committee on specific issues of concern as recorded in the Reports of the committee has been specifically considered for analysing the role of the committee in securing governmental accountability.

**Frequency of the Meetings of the Committee and Attendance of the Members**

The effective functioning of the committee system depends on many factors including the status and competence provided to the committees in the structure of parliamentary democracy. Among these, the conduct of the business of the committee is equally important. How far the work of the committee is taken up seriously could be one of the most important indicators of the actual working of the committee. There could be three important indicators in this regard: i) frequency of the meetings; ii) attendance of the members; and iii) contributions of the members in the deliberation of the committee. For mapping out the first two indicators eighteen
Reports on Demands for Grants and corresponding Action Taken Reports, covering the period from 2004-2005 to 2008-2009 have been examined. Three Reports relating to the functioning of PSUs have also been taken into account. Since Fifty Second Reports is Action Taken Reports in continuation of the Thirty Fourth and Thirty Eighth Reports on the same subject, it has also been included for examination and analysis. The Table-1 provides a comparative perspective on the two variables of frequency of the meetings and attendance of the members in the meetings.

**Table-1**

**No. of Meetings and Attendance of the Members at a Glance**

<table>
<thead>
<tr>
<th>Sl No.</th>
<th>Details of Reports</th>
<th>No. of meetings of the committee</th>
<th>No. of members nominated on the committee</th>
<th>No. of members present</th>
<th>Percentage of attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>First Report DFG*</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>15</td>
<td>48.38</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; meeting</td>
<td></td>
<td>14</td>
<td>45.16</td>
</tr>
<tr>
<td>2</td>
<td>Second Report DFG</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>13</td>
<td>41.93</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; meeting</td>
<td></td>
<td>14</td>
<td>45.16</td>
</tr>
<tr>
<td>3</td>
<td>Third Report DFG</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>10</td>
<td>41.93</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; meeting</td>
<td></td>
<td>14</td>
<td>45.16</td>
</tr>
<tr>
<td>4</td>
<td>Fourth Report ATR**</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>12</td>
<td>38.70</td>
</tr>
<tr>
<td>5</td>
<td>Fifth Report ATR</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>12</td>
<td>38.70</td>
</tr>
<tr>
<td>6</td>
<td>Sixth Report ATR</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>12</td>
<td>38.70</td>
</tr>
<tr>
<td>7</td>
<td>Seventh Report DFG</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>16</td>
<td>51.61</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; meeting</td>
<td></td>
<td>14</td>
<td>45.16</td>
</tr>
<tr>
<td>8</td>
<td>Eighth Report DFG</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>13</td>
<td>41.93</td>
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<tr>
<td></td>
<td></td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; meeting</td>
<td></td>
<td>14</td>
<td>45.16</td>
</tr>
<tr>
<td>9</td>
<td>Ninth Report DFG</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>13</td>
<td>41.93</td>
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<tr>
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<td>14</td>
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<tr>
<td>10</td>
<td>Thirteenth Report ATR</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>12</td>
<td>38.70</td>
</tr>
<tr>
<td>11</td>
<td>Fourteenth Report ATR</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; meeting</td>
<td>31</td>
<td>12</td>
<td>38.70</td>
</tr>
<tr>
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<td>2nd Meeting</td>
<td>1st Meeting</td>
<td>2nd Meeting</td>
</tr>
<tr>
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<td>-------------</td>
<td>-------------</td>
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<td>-------------</td>
</tr>
<tr>
<td>12</td>
<td>Fifteen Report ATR</td>
<td>31</td>
<td>12</td>
<td>38.70</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Sixteenth Report DFG</td>
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<td>12</td>
<td>41.93</td>
<td>32.25</td>
</tr>
<tr>
<td>14</td>
<td>Twentieth Report ATR</td>
<td>31</td>
<td>10</td>
<td>32.25</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Twenty Second Report DFG</td>
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<td>12</td>
<td>38.70</td>
<td>32.25</td>
</tr>
<tr>
<td>16</td>
<td>Twentieth Fifth Report ATR</td>
<td>31</td>
<td>11</td>
<td>35.48</td>
<td></td>
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<tr>
<td>17</td>
<td>Twenty Ninth Report DFG</td>
<td>31</td>
<td>11</td>
<td>35.48</td>
<td>38.70</td>
</tr>
<tr>
<td>18</td>
<td>Thirty Fourth Evaluation Report</td>
<td>31</td>
<td>17</td>
<td>54.83</td>
<td>35.48</td>
</tr>
<tr>
<td>19</td>
<td>Thirty Seventh Report ATR</td>
<td>31</td>
<td>19</td>
<td>61.29</td>
<td></td>
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<tr>
<td>20</td>
<td>Thirty Eighth Evaluation Report</td>
<td>31</td>
<td>21</td>
<td>67.74</td>
<td>51.61</td>
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<tr>
<td>21</td>
<td>Fifty Two ATR Report</td>
<td>31</td>
<td>13</td>
<td>41.93</td>
<td></td>
</tr>
</tbody>
</table>

*DFG- Demands for Grants; **ATR- Action Taken Report

Source: The figures presented above have been quelled & calculated from the Departmentally Related Parliamentary Committee on Health and Family Welfare Reports on Demands for Grants and corresponding Action Taken Reports of different years covering the period between 2004-2005 to 2008-2009. Three Reports Thirty Fourth, Thirty Eighth, and Fifty Two relate to the functioning of PSUs. Since Fifty Second Report is Action Taken Report in continuation of the Thirty Fourth and Thirty Eighth Reports on the same subject, it has been taken for study and analysis.  

It is evident from the available data quelled from twenty one Reports of the committee presented in the Table-1 that the frequency of the meetings of the committee is not very encouraging. In case of all the Reports selected for analysis in this chapter, meetings of the committee did not exceed two in case of original reports and one in case of Action Taken Reports. Given the nature of work and wide range
of issues for discussion the frequency of the meeting appears to be insufficient. How does the committee manage to transact the entire business related to Demand for Grants in just two meetings is a question that needs further exploration. So far as the meeting of the committee on Action Taken Report is concerned, it is evident from the above table that meeting has been invariably limited to one. In case of Action Taken Report even the duration of the meeting is alarmingly short. A cursory glance over the Minutes of the Reports covered in the study reveals that most of the meetings are disposed off in less than an hour. In one case (Fourth Report on Action Taken) it was just twenty five minutes. One can understand the constraints of time available for the purpose. However, a very short duration of meeting is a concern that needs to be addressed. It is also desirable to increase the frequency of the meetings.

It may be recalled that the basic intent behind the creation of DRSCs was to overcome the limitation of time constraints for disposing off the business of the parliament especially related to discussion on the budget proposal. Pre-budget scrutiny of the proposal by the parliamentary committee is already in vogue in many countries. In-depth examination and informed discussion on Demands for Grants of the ministries/department by the DRSCs can better be possible by increasing the number and frequency of the committee’s meetings.

Attendance of the members in the meetings of the committee in twenty one Reports selected for the study and analysis in this chapter is alarmingly low. It appears to be a more serious concern. The Table-1 clearly indicates that the percentage of attendance of the members in the meetings is very low in majority of the cases. It is only in five
cases out of twenty one that the attendance of the members crossed fifty percent. In no case attendance of the members reached even the level of three fourth of the total membership of the committee. Out of thirty two meetings there are only two occasions wherein attendance of the members crossed sixty percent. In fifteen meetings the attendance of the members was below forty percent. If this is the status of attendance of the members in meetings of the committee it calls for serious churning of the process and pattern of membership in the committees. There could two plausible reasons for the low attendance of the members; either members do not take the work of the committee seriously or they do not have interest in the works of the committees. Ideally a member of the committee should have reasonable expertise and experience in area of concern of the committee. A cursory glance on the pattern of membership of the committee indicates that there is no essential linkage between the membership of the committee and required expertise. Analysis of the membership of the committee indicates there is hardly a match between expertise required for the effective discharge of responsibilities and the mode of appointment and pattern of membership of the committee. It hardly needs additional emphasis that the members may not find the work of the committee interesting in case of mismatch. Obviously in this case very few members could actively participate in the meetings of the committee and contribute in the deliberation in the committee.

**Recommendations/Observations of the Committee and their Acceptance**

Observations and recommendations of the committee is one of the most crucial aspects of understanding the meaningful functioning and effectiveness of the committee. In a sense it indicates the actual working of the committee system.
Observations/recommendations are made by the committee on specific issues help in understanding the working of the committee and their effectiveness. The very nature and content of observation and recommendations indicate the seriousness of the committee. If the issue is threadbare examined by the committee and it is properly discussed and deliberated in the light of the background materials, there is greater possibility of well informed observation/recommendations of the committee on the subject. It may be recalled that the committee may ask the concerned Ministry/Department for background materials for the examination of the Demands for Grants. The background materials may include the following:

viii) Performance Budget of the current year  
ix) Annual report of the previous year  
x) Detailed Demands for Grants for the current year  
xi) A brief summary of Demands for Grants, Analysis of Demands for Grants i.e. percentage increase in various heads over the last 2-3 years may also be given.  
 xii) A detailed note on the funds allocated during current Five Year Plan, amount actually spent, target fixed for various activities vis-à-vis actual achievements and the reasons for not achieving the targets if any.  
xiii) The amount earmarked during previous two Annual Plans, the amount spent and the achievements made against the target fixed for various activities.  
xiv) A note on advance planning for the subsequent five year plan and notes on various schemes/projects under implementation by the Department/Ministry separately for each scheme.  

The committee is supposed to make observations and recommendations on Demands for Grants on the basis of the examination of the above background materials. Observations/recommendations made by the committee are not essentially and automatically accepted by the Ministry/Department concerned. The observations/recommendations of the committee may or may be accepted by the government. The level of acceptance of the observations/recommendations made by the committee is one of most important test grounds of the effectiveness of the committee. Whether
the observation/recommendations of the committee are taken seriously by the concerned Ministry/Department or not is one of the indicators of adjudging the effectiveness and impact factor of the committee. This seriousness if the ministry/departments on the observations and recommendations of the committee can be determined on the basis of action taken by the ministry/department on the observations/recommendations of the committee. If the recommendations/observations of the committee are not taken seriously and no action is taken as corrective measures by the ministry/department, there can hardly be any impact factor of the committee. In this case the whole idea of the committee system will remain under question.

It is interesting to note that the DRSCs in India substantially influence the public policies and fix up the accountability of the concerned Departments/Ministries through their reports on Demands for Grants, review of Annual Reports of the Ministries/Departments and examination of long term policy documents. Despite the fact that the DRSCs in India have only recommendatory power and not the binding power related to their recommendations, they have substantially made their presence felt in influencing the policies of the government and in making them accountable to the parliament during the last two decades of their existence.11

It is interesting to ascertain the effectiveness of the committee in influencing the government on specific issue of policy on the basis of critical analysis of the select Reports. Analysis of Reports provides insights into understanding the role of the committee in ensuring government accountability. This has been done on the basis of analysis of the recommendations/observations of the committee at two levels. The
first level analysis attempts to get insight from the gap between the observations/recommendations made by the committee and their acceptance by the government. The Table-2 included below presents the details related to recommendations/observations of the committee. The data quelled from the twenty one Reports of the committee- both original and Action Taken Reports- presented in the Table-2 provides a view on the recommendations in quantitative terms. The number of observations and recommendations accepted by the government is one of the indicators of the effectiveness of the committee. In case a large number of recommendations are accepted by government this would certainly imply the effectiveness of the committee. However, the non acceptance of some observations/recommendations does not essentially mean deficient working of the committee. It must be reiterated here that some of the observations and recommendations of the committee may have far reaching influence on policy and governance. Therefore, the second level analysis gives emphasis on nature and content of some of the observations/ recommendations also. A deeper understanding of the dynamics of the committee functioning comes from the analysis deliberations in the committee and analysis of the select Reports. The second level analysis attempts to do the same in the ensuing section of the chapter.

### Table-2

**Glance at Observations/Recommendations of the Committee**

<table>
<thead>
<tr>
<th>Details of Reports</th>
<th>No of Recommendations made</th>
<th>Accepted by govt.</th>
<th>% of acceptance</th>
<th>Replies not accepted</th>
<th>Not to be pursued</th>
<th>Reply Awaited</th>
</tr>
</thead>
<tbody>
<tr>
<td>First DFG*</td>
<td>50</td>
<td>20</td>
<td>40%</td>
<td>25</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>
The Table-2 clearly indicates that there is a mismatch between the observations/recommendations made by the committee and their acceptance by the concerned ministry/department. It is evident from the table that the committee made large number of observations/recommendations on various issues covered under the examinations of the Demands for Grants of the ministry/departments or examination of issues related to functioning of the PSUs. The rate of acceptance of the observations/recommendations appears to be low. Invariably the percentage of acceptance has been well below the average of fifty percent except for the Twenty Second Report of the Demands for Grants of the ministry. In this case the committee made some 115 recommendations/observations. Out of 115,
recommendations/observations 63 were accepted amounting to nearly fifty-five percent. There were twelve other recommendations/observations on which the committee did not want to pursue its recommendations/observations on specific issue in view of the replies of the government. It implies that the committee was convinced with reply provided by the Ministry/Department.

In most of the cases very few observations/recommendations of the committee have been accepted. The analysis of Seventh and Ninth Reports on Demands for Grants, for instance, indicates that the committee made 79 and 43 recommendations respectively relating to budgetary allocations, various programmes and schemes of the government under the jurisdiction of the ministry/department. Out of 79 and 43 recommendations/observations only 21.51 and 20.93 percent for the respective Demands for Grants were accepted by the government. In this regard question arises as to why there is such a low acceptance of the observations and recommendations of the committee. And if there is such a low percentage of the acceptance then what is relevance and locus standi of the committee. Answer to both the questions requires deeper exploration. In the first case it important to point out that some of the observations/recommendations made by the committee may not be effected immediately due to variety of constraints. Some of them may have wider context wherein the departmental/ministerial action is not effected exactly in line with the observations/recommendations of the committee. Despite the fact of low acceptance, the observations/recommendations of the committee remain important.

The Action Taken Reports of the committee presented to the Houses also act as a mechanism of fixing responsibility of non performance/under performance/
deficient performance of the ministry/department concerned. The minister is answerable to the House for its non/under/deficient performance. This could be one of the ways of securing accountability of the government to the parliament. The concerned ministry is answerable to its non performance. Obviously the concerned ministry department attempts to take corrective measures as compliance to the observations and recommendations of the committee. In this regard it is important to note that during the Fourteenth Lok Sabha a new initiative was taken to strengthen the Parliamentary Committee System. The Speaker of the Lok Sabha issued a Direction 73-A on 1 September 2008 which provides that the Minister concerned shall make, once in six months, a Statement in the House regarding the status of the implementation of the recommendations contained in the Reports of the DRSCs of the Lok Sabha with regard to his/her Ministry presented to the House. The significance of the new Direction 73-A is that it directs the Government to spell out the status of the implementation of Committee Reports. Prior to the issue of Direction 73-A, the Government was merely informing Parliament whether the Committee recommendation was accepted or not accepted by the Government.14 This kind of initiative would further enhance the value of the parliamentary committees in India.

**Analysis of Select Reports**

The second level analysis of select Reports becomes even more important for understanding the role of the committee in ensuring government accountability and ascertaining the effectiveness of the committee. Here attempt is made towards in-depth analysis and understanding of the content and nature of observations and
recommendations of the committee and action taken by the government thereon. For this purpose, both the original reports of Demands for Grants and Action Taken Reports for the period indicated above have been analysed. More specifically, the four Reports relating to the functioning of Public Sector Units have been specifically considered.

The Reports of the committee on Demands for Grants contains observations and recommendations of the committee whereas the Action Taken Reports reflect the compliance/ action taken on specific observations/recommendations. For in-depth analysis, the First Report on Demands for Grants 2004-2005 and the Fourth Report of Action Taken on the observations/recommendations has been analysed in a more detailed manner. Other Reports of the period cover similar kind of issues. Therefore, these Reports have also been touched upon for mapping out the observations/recommendations in the specific context of ensuring governmental accountability.

In its first Report on Demands for Grants and fourth Report of Action Taken thereon, the committee made many observations/recommendations on critical areas of concern falling within the purview of the Department of Health. Some of the issues included budgetary allocation, policies, health schemes and programmes related to the health sector. The issue of budgetary allocation is one of areas of concerns. The committee took note of the allocation made for the period and had observed that without proper allocation the major programmes and institutions would be adversely affected. The committee reiterated its concern that the areas such as public health should be spared from the cuts imposed by the Planning
Commission/Finance Ministry. The committee also recommended enhancement of allocation for the department. However, the committee pointed out the issue of under utilization of funds allocated during the Ninth Plan. The committee also recommended for mid-term appraisal of all the programmes/institutions of the Department, especially those not performing well, and for taking remedial measures whatever required. Reply of the government on these issues was not accepted by the committee meaning thereby that the Department did not perform and complied with the observation and recommendation of the committee.

The Central Government Health Scheme was another area of examination by the committee. The committee made observations on there major areas of concern:

i. The idea of decentralizing the work relating to reimbursement of claims of pensioners to their respective Departments from where they had retired. The Department had apprised about the non-acceptance of the scheme by the majority of the pensioners. The Committee asked the Department that the committee would like to have the feedback from the Department regarding percentage of pensioners who had shown reluctance/non acceptance to this reported move of the Department.

ii. Second observation related to Drugs Formulary. The committee in this regard observed, “It seems that the Department has no time bound action plan for notification of the drugs formulary. The Committee feels that notification of the new Drugs formulary would lead to quality control of drugs being provided through CGHS dispensaries. The Committee enjoins upon the Department to get all the formalities completed for notification of drugs formulary.”

iii. The third observation related to double shift in the CGHS dispensaries. The Committee expressed its dissatisfaction about the justification given by the Department for having a single shift system for the dispensaries. The
Committee further recommended that the Department should first make an assessment about the requirement of staff for running CGHS dispensaries in double shift. Based on that, the Department might take steps to have additional workforce for the CGHS dispensaries.  

It becomes evident from the Action taken Report on the committee did not accept the reply of the Department on the last two observations. In case of Drug Formulary the committee expressed deep concern over the undue delay in issuing of notification on the Drug Formulary. Similarly on the issue of double shift in the CGHS dispensaries the committee did not accept the reply of the Department and recommended for restoring the Double Shift. In the case of the first recommendation the pensioners themselves did not opt for the decentralized scheme. In this case the committee did not want to pursue the matter further.

The other set of observations/recommendations of the committee relate to three government hospitals; namely, the Safdarjung Hospital, Ram Manohar Lohia Hospital and the All India Institute of Medical Sciences. In case of Safdarjung Hospital the committee made three observations relating to the following: i. expansion of the hospital; ii. Construction of multistoried building; and steps for providing teaching faculty, para-medical staff and other infrastructure facilities for making the medical college fully functional. The committee was not convinced of the reply of the Department and reiterated its concerns. In case of Rammanohar Lohia Hospital the committee observed the following-

i. “The Committee is anguished to note that during the first two years of the Tenth Plan, nothing beyond obtaining EFC approval for the Post Graduate Institute could be achieved. The construction work is yet to start. The Committee feels that at this sluggish pace, the proposed
teaching institute may not be established during the Tenth Plan. The Committee feels that a time bound Action Plan for completion of this Project must have been chalked out by the Department in consultation with the hospital authorities. The Committee strongly feels that the Department should strictly adhere to this Action Plan so that the proposed Dental Institute is established at the earliest. If setting up of this PG institute requires more funds, the Committee recommends that the same may be provided by the Department.”

The committee was informed on Action Taken as follows:

“The foundation stone for the Post Graduate Courses at Dr. RML Hospital has been laid by the Hon’ble Union Health Minister on 25th November, 2004. Land has already been acquired and an allocation of Rs.30 crores has been proposed under the Plan Head (for the year 2005-06) for construction of building of PGIMER. Initiative has been undertaken to complete the construction work of the PGIMER in a time bound manner. Necessary steps are also being taken to ensure that the required manpower for teaching is available to run the PG Courses at the Institute so that the Institute starts functioning at the earliest.”

Reply of the Department in this case was accepted by the committee.

In case of All India Institute of Medical Sciences the committee made observations on three critical issues; namely, establishment of Trauma Centre, Completion of B.R. Ambedkar Institute Rotary Cancer Hospital of AIIMS; and setting up of AIIMS type institution in select states.

In the first case the committee observed as follows,

The Committee is deeply anguished to observe that although considerable time has elapsed the Trauma Centre is yet to be established. The Committee observes that the revised EFC for Trauma centre is yet to be approved. Rs. 17.65 crores is proposed to be utilized for the construction of Trauma Centre in 2004-05. Thereafter, approximately Rs. 47.05 crore would be required for
procurement of equipment. The Committee apprehends that due to procedural formalities, formal approval of revised EFC may take some more time, which would result in cost escalation in the initial proposed amount for setting up of Trauma Centre. The Committee is of the strong view, that the Department in coordination with the AIIMS should get all the procedural formalities expedited so that the Trauma Centre becomes functional at the earliest."\textsuperscript{21}

In the second case it was observed,

The Committee expresses its serious concern over the unduly long time being taken for completion of B.R. Ambedkar Institute Rotary Cancer Hospital of AIIMS. Initial cost of Rs. 19.50 crore in the project has reached Rs. 136.25 crore. Project was to be completed in September, 1996, Eight years has elapsed since then, approval of revised EFC proposal is yet to be obtained. The Committee apprehends that there would be a further increase in the cost of the project. The Committee fails to comprehend the factors responsible for the tardy progress of such a vital project that too in the leading premier Institute located in the Capital. The Committee recommends that the Department should monitor the completion of project under a time bond Action Plan and to take effective steps to make the Cancer Institute functional at the earliest.\textsuperscript{22}

In both the above cases the committee did not accept the reply of the Department. Non-acceptance of the reply in this case reflects poor performance of the government which, in turn, makes the government accountable. In case of the third, the following was observed the committee,

… last year a Scheme called Pradhan Mantri Swasthya Suraksha Yojana was formulated wherein it was decided in principle to set up one AIIMS type institution each in the States of Bihar (Patna), Chhattisgarh (Raipur), Madhya Pradesh (Bhopal), Orissa (Bhubaneswar), Rajasthan (Jodhpur) and Uttaranchal (Rishikesh). Under this Scheme, it is also proposed to upgrade
one medical college each in the States of Andhra Pradesh, Jharkhand, J&K, Tamil Nadu, UP and West Bengal to the level of proposed AIIMS like institutions. The Committee observes that these States were chosen as they were underserved in terms of medical infrastructure, high incidence of mortality and morbidity etc.\textsuperscript{23}

In this regard the department submitted the reply as follows:

the proposal to set up six AIIMS like institutions and upgradation of 7 medical colleges under the Pradhan Mantri Swasthya Suraksha Yojana has been considered by the Expenditure Finance Committee on 24.11.2004 and will now be placed before the Cabinet Committee on Economic Affairs for clearance. Pending these clearances, start-up activities like construction of boundary wall, the process for selection of Project Consultant for providing comprehensive consultancy services and selection of architectural concepts/designs for AIIMS like institution have been taken up.\textsuperscript{24}

The submission of the committee was accepted by the committee.

Other observation of the committee includes

against a provision of Rs. 6 crores for the project in 2003-04, Rs. 60 crores have been provided during 2004-05. The Committee would like to point out that the estimated cost for the project is Rs. 4158 crore with Rs. 280 crore being the expenditure on each new AIIMS and recurring expenditure of Rs. 60 crore to be borne by the Central Government annually. The Committee expresses its extreme dissatisfaction with the pace of progress made in the project so far specially in the light of wide publicity given to the project. The Committee finds that only in principle approval by the Planning Commission and the Ministry of Finance has been accorded so far. The Scheme is currently in the process of being placed before the Expenditure Finance Committee. The Committee would like to emphasise that all the procedural formalities should be completed at the earliest. The Committee is also surprised to note that only Rs. 60 crores have been provided for this project during 2004-05. The Committee is of the view that this project should be
completed within the time limit of 3 years and necessary funds should be provided at the RE stage during the current year itself.25

The Department in this regard submitted that

the tentative cost of setting up each institute comes around Rs. 284.50 crores and annual estimated recurring cost on salaries, maintenance etc., comes to Rs. 60 crores per institute. Rs.6 crores have been released for boundary wall construction. During the year Rs. 60 crores were provided for the scheme in the Budget. However, at RE stage the provision has been reduced to Rs. 10 crores due to delay in Project Clearance. Sufficient budget provision will be kept for the financial year 2005-06 after receipt of Plan budget from the Planning Commission.”26

The reply of the Department was accepted by the committee.

One of major area of concern in the Report related to prevailing vacancies in the central government hospitals, institutions autonomous organizations. In this regard the committee made the observation that

The Committee takes a serious view of this position. The Committee was given to understand that these posts were lying vacant for a considerable time. The Committee notes that the Department has been repeatedly pleading for exempting technical posts under it from the operation of Department of Personnel and Training orders regarding reduction in staff and abolition of vacancies, but with no success. The Committee is of the view that direct recruitment at various levels and filling of vacancies in the health institutions is vital in the interest of public health. Department of Personnel instructions should not be made applicable in the case of technical posts. The Committee therefore, strongly recommends that the Department should approach the Department of Personnel, once again, for exemption, if necessary at the highest level so that continuing vacancies in a large number of operational posts of doctors, nurses, para-medical and other supporting staff are filled up without any further delay.27

The Department submitted the following reply in this regard:
Due to the instructions of the Government, the Department of Personnel & Training vide their O.M. 2.8.2001- PIC dated 16.5.2001, prescribing limit that the direct Recruitment can be resorted only against the 1/3rd of the vacancies arising in a year subject to a further 1 per cent ceiling of the total sanctioned strength. Thus department is not in a position to fill up all the posts of doctors in various Government hospitals including Safdarjung Hospital.

As it has been found difficult to apply these instructions for vacancies in Health Sector, the Ministry has already taken up the matter at the highest level seeing exemption of technical/scientific posts from the purview of the DOPT instructions dated 16.5.2001 so that the shortage of manpower is met.

The committee further observed;

Last year, the Committee had commented on the adverse impact of existence of a large number of vacancies of medical and Para-medical Staff in the Central Government Hospitals on the public health services. The Committee observes that as suggested by it, the Department has taken up the issue of seeking exemption of technical/Scientific posts from the purview of Department of Personnel and Training instructions dated 16.05.2001. The Committee hopes that this measure would lead to induction of required technical manpower. The Committee is, however, constrained to note that some vacancies including CHC posts, although cleared by the Steering Committee are yet to be filled up by the Lady Hardinge Medical College and Smt. S.K. Hospital, New Delhi and JIPMER, Pondicherry and also CHS Division. The Committee is not aware about the action, if any, taken by the concerned authorities in this matter. The Committee reiterates that existing vacancies against sanctioned posts duly cleared by the Screening Committee should be filled up on priority basis.

Another set of observations/ recommendations of the committee relates to different central sector programmes operating in different states for controlling variety of
diseases. These include the following: the National Vector Bonre Disease Control Programme; Japanese Encephalitis; Kala-Azar Control Programme; Tuberculosis Control Programme; Leprosy Control Programme; National Programme for Control of Blindness; National Mental Health Programme; National Aids Control Programme; National Cancer Control Programme; National Illness Assistance Fund.

The committee was tooled a critical view on the implementation of each of the programmes. It was only in case of National Aids Control Programme that was appreciated for good work. There were two critical areas of concern raised by the committee; one related fund allocation and under utilization and another related to the gap between the set target and achievement level. Observations/recommendations of the committee are interesting in this regard. The committee is so critical in the case of some the programmes that it gives the impression that the observations of the committee is coming from the parties in opposition.  

It may be recalled that the composition of the committee is as such that different parties are represented in the committee in proportion to their strength in the House. Obviously in this case the ruling party representation remains substantial. Despite this fact the kind of observations the committee made in the above mentioned cases in particular other items covered in this Report in general that loudly speaks of the success of the committee system. The observations/recommendations of the committee have far reaching implications for securing governmental accountability for its under performance.

The detailed exposition related to the First Report on Demands for Grants 2004-2005 and the Fourth Report on Action Taken made above unequivocally establishes the
relevance of the committee with regard to securing governmental accountability. The other Reports covered in the study for the period also fall in line with the above mentioned Reports with just minor variations in the cases of coverage and observations and recommendations of the committee. The Reports of the committee covering the period 2005-2006, 2006-2007, 2007-2008, and 2008-2009 assume importance for the purpose of understanding the role of the committee over a period of duration of the Lok Sabha.\textsuperscript{31}

In most of the cases, the issue of budgetary allocation and utilization has themajor point of examination and observations/ recommendations of the committee. In almost all the select Reports relating to the Demands for Grants the committee expressed two major concerns; one related to inadequate budgetary allocation and another relating to under utilization of the funds. In the first case the committee has been making reference to the goal contained in the National Health Policy 2002 which implies manifold increase in the public spending on health. Allocation of 2\% of GDP on health is one of the reference points that the committee has been emphasizing in its Report. It has specifically emphasized in the First Report and the Seventh Report. The committee emphatically made its point that without adequate allocation the health programmes of the country would be adversely affected. In some the case the committee has been instrumental in increasing the allocation for the specific health sector programme. It is clear in the case of Sixteenth Report wherein there is mention of the enhancement in allocation.

Analysis of all the select Reports reveals that the committee has been very critical on the issue of fund utilization. In none of the cases the funds have been
fully/adequately utilised. In most of the cases under utilization of funds is a major concern expressed by the committee. This issue directly relates to poor performance of the government. If the committee has recorded its observation on the issue it has implication for fixing responsibility of under performance with the government.

One of pertinent observations of the committee in the case of the Seventh Report on Demands for Grants is worth mentioning. The committee observes;

The Committee is dismayed to note that as a result of declining trend of allocation of non-plan funds, Department is compelled to divert plan funds to non-plan to meet the obligations of some major health institutions. The Committee feels that this cannot be considered a healthy development, being against the prescribed norms. Diversion of Plan funds to non-plan side very well indicates the poor status of schemes of the Department, very vital for the development of the country as a whole.\(^{32}\)

The observation of the committee assumes importance with regard to its position of interrogating the development in financing pattern. On the issue of fund utilization, the following observation of the committee is important

While on one side, Department is advocating imposition of 2% cess for generation of additional funds, it is not in a position to utilize the allocated plan funds due to poor management and incapacity of implementing agencies. The Committee would like to emphasize that the Department should take remedial measures in the light of findings of mid-term appraisal of various schemes.\(^{33}\)

Other observations/recommendations related to the functioning of the central government hospitals, institutions, autonomous organizations, central sector programmes and scheme. The committee observations and recommendations in these cases broadly fall in line with the central concerns raised in the first Report with minor variations on specific issues.
One of the significant observations of the committee in the case of Seventh Report deserves special mention. The committee observed,

The Committee feels that there is a need for reassessing the role of District Collector and if possible, involvement of some other Govt. representative who can be assisted in his monitoring/supervision with public representatives from village level Panchyat to local MPs. The Committee would also like to point out that in view of inadequate eye care facilities in rural areas and difficult terrains, involvement of NGOs should be increased.

This observation becomes important with regard to role allocation in the implementation of health programmes.

In case of Sixteenth Demands for Grants Report committee made observation on the issue of public-private partnership in health sector which is important to mention here. The committee observed,

While welcoming the initiative, the Committee has a word of caution for the Govt. The track record of private sector participation in health sector has not been very helpful so far as public at large is concerned. A number of corporate Hospitals have come up on Govt. land acquired at nominal rates. However, the management of such Hospitals has miserably failed to provide free treatment to the poor as agreed to by them at the time of starting such hospitals. The Committee would like to point out that this so-called public-private sector has now penetrated in the State Health Systems also. The Committee is not much convinced by the contention of the Department that this experiment will be confined to the area of public (medical) education only. The Committee would like to be apprised about the full details of this initiative.

This observation is of crucial importance for rethinking on shift in public policy,
The committee made a large number of recommendations in the case of its Twenty-Second Report. All the recommendations are important in their own respect pointing out one aspect of policy and governance or the other. However, one of the observations are crucially important with regard to the federal-state relations and fiscal resource transfer. The committee observed,

The Committee is fully aware that health being a state subject, Central funds are to be spent through the agencies of State Governments alone. It is also true that absorption capacity varies from State to State. The Committee would like to emphasize once again that the Centre has to play a more pro-active role. The main priority for the Department should be to extensively monitor both the implementation of all the schemes and functioning of those premier institutions/hospitals, constantly showing unsatisfactory performance level. The Committee wonders whether any exercise has been initiated so far so as to analyse their status during the Tenth Plan. The Committee strongly feels that with the Eleventh Plan already begun, such an analysis should be made, if not done already, without further delay, followed by remedial measures.\textsuperscript{36}

The Twenty –Ninth Report on Demands for Grants Relates to the newly created Department of Health Research of the time. The committee made observations on wide range of issues. One of the issues relates to the coordination. In this case the committee observed,

\textbf{The scheme seeks to coordinate between organizations and institutes under the Central/State Governments in the areas of promotion of special studies in medicines and health for this purpose the Department will have to coordinate with a number of Departments like Department of Science and Technology, Department of Bio-technology, Department of Agricultural Research and Education, Department of Space, Department}
of Environment and Forests, Disaster Management Authority etc. The Committee feels that coordination with various Government Departments/agencies in the field of health research is the most important activity entrusted to the Department. A number of Government Departments/agencies are engaged in research activities in the field of health care and for getting better results and health care facilities, proper coordination and exchange of information with the Government Departments/agencies is a must. The Department will have to make all out efforts for effective coordination and monitoring with all the Government Departments/agencies engaged in the field of health research. The Committee would like to be informed of the efforts made by the Department in this regard as also the outcome of such efforts. 37

It is evident from the analysis of all the five Reports on the Demands for Grants and corresponding Action Taken Reports for the period between 2004-2005 to 2008-2009 that committee has made substantial observations/ recommendations on crucial issues of concern. The observations of the committee at times directly relate to the functioning of the government. It is neither envisaged nor expected that all the recommendations/observations of the committee would be implemented in letter and spirit. But one point emerges out of the analysis that observations of the committee may have far reaching implications in influencing policy and governance and attaining transparency and accountability in governance.

Committee on the Functioning of the PSUs

It is important to reemphasise the point that the committee recommendations become important in influencing the decision of the government on many issues of critical concerns. It also depends as to what extent the committee is committed to a goal. If committee vigorously pursues an issue it may bring the desired results. This
point is attested by the analysis of the 34th, 38th, 43rd and 52 second Reports of the committee. The above Reports relate to the functioning of the PSUs under the purview of the Ministry/Department.

During the course of scrutiny of Demands for Grants, 2008-09 of the Department of Health and Family Welfare, the Department-related Parliamentary Standing Committee on Health and Family Welfare had taken note of suspension of manufacturing license of the three vaccine producing PSUs, namely, the Central Research Institute (CRI), Kasauli, the Pasteur Institute of India (PII), Coonoor, and the BCG Vaccine Laboratory (BCGVL) Chennai. In view of the adverse impact of such a move on the vaccine availability in the country, and consequently the Universal Immunization Programme, the Committee had recommended revival of the three vaccine producing PSUs at the earliest. Since then, the Committee has been vigorously pursuing with the Ministry the issue of making these units functional at the earliest. An extensive analysis of the background leading to closure of these units, which have remained major contributors of life-saving vaccines for our newborn children for decades, inherent constraints being faced by them, adverse fallout of their closure, specially on the Universal Immunization Programme and the very apparent lack of initiative on the part of the Central Government made by the Committee resulted in an exhaustive report, i.e. 34th Report presented to Parliament on the 18th February, 2009. However, instead of a pro-active follow-up action on the part of the Ministry, it took seven months for it to come out with its Action Taken Note. However, the committee continued to pursue the Department/Ministry to revoke the suspension of licenses of the three public sector units through its Reports.
The government finally ordered the revoke of the suspension of licenses of the three public sector units on 26th February 2010. In this case the committee’s observations/recommendations and concentrated efforts brought positive results.

To sum up, one may safely conclude that the parliamentary Standing Committees in India have been successful to a large extent in securing governmental accountability to the Parliament. Analysis of Reports in the chapter clearly establishes this point. Observations and recommendations of the committee have been instrumental in influencing the policy and governance to a great extent. If we take just the case of budgetary allocation, the committee has raised its concern on two issues- one related to insufficient allocation of resources for meeting the requirements of health and the other focused on under utilization of funds by the concerned departments. If resources and funds are not utilized on time it reflects the deficient working of the government. Similarly, there have been many issues related to the functioning of the institutions, their requirements and delivery of services. The committee has been raising concerns on each of the issues in its different Reports. The schemes and programmes have also been examined. In each case committee has been making observations and recommendations. Some of the observations and recommendations are accepted and effected by the government. Many others are not accepted. The table related to recommendations clearly indicates this point. It is important to note that even in those cases where the observations/recommendations of the committee are not accepted or effected by the government, they may serve as guide for policy making and governance in the future. In this regard it needs to be reiterated that the status and role of the parliamentary committees in India have been conceived as
persuasive and advisory one unlike in many other countries wherein recommendations of the committee have binding mandate. Despite these limitations the committees in India have played very important role in the whole process of policy and governance besides playing a role of securing governmental accountability.

**Notes**


3 Ibid.


7 For details about each of the Reports included in the Table please refer to bibliography of the thesis.


12The figures presented above have been quelled & calculated from the Departmentally Related Parliamentary Committee on Health and Family Welfare Reports on Demands for Grants and corresponding Action Taken Reports of different years covering the period between 2004-2005 to 2008-2009. Since Forty Third and Fifty Second Reports are Action Taken Reports in continuation of the Thirty Fourth and Thirty Eighth Reports on the functioning of the PSUs, they have been taken for study and analysis. For details about each of the Reports included in the Table please refer to bibliography of the thesis.

13Explanations on different columns included in the table:i) Recommendations/observations made- means recommendations/observations made by the committee in specific Report; ii) Recommendations accepted means recommendations/observations of the committee made in specific Report accepted by the government; iii) Percentage of acceptance means percentage of recommendations/observations accepted by the government to the total recommendations/observations made; iv) Replies not accepted means replies of the government on specific recommendations/observations not accepted by the committee; v) not to be pursued means the committee does not want to pursue its recommendations/observations on specific issue in view of the replies of the
government; vi) Reply awaited means final replies of the government on recommendations/observations are still awaited by the Committee.


17Ibid

18Ibid

19Ibid, p.4


22Ibid, p.5

23Ibid, p.5

29 Ibid, p.24
30 It is interesting to read the observations of the committee, reply of the Department on the issue and further observations made by the committee on the same on each of the cases. See for all the details First Report on Demands for Grants 2004-2005 (Demand No. 47) of the Department of Health, Ministry of Health and Family Welfare; and Fourth Report on Action Taken by Government on the Recommendations/Observations Contained in the First Report on Demands for Grants 2004-2005 (Demand No. 47) of the Department of Health, Ministry of Health and Family Welfare.

33 Ibid