

NATIONAL AYUSH MISSION

FRAMEWORK FOR IMPLEMENTATION



**Department of AYUSH
Ministry of Health & Family Welfare
Government of India**

FRAMEWORK FOR IMPLEMENTATION OF NATIONAL AYUSH MISSION (NAM)

1. Introduction:

Department of AYUSH, Ministry of Health and Family Welfare, Government of India has launched National AYUSH Mission (NAM) during 12th Plan for implementing through States/UTs. The basic objective of NAM is to promote AYUSH medical systems through cost effective AYUSH services, strengthening of educational systems, facilitate the enforcement of quality control of Ayurveda, Siddha and Unani & Homoeopathy (ASU &H) drugs and sustainable availability of ASU & H raw-materials. It envisages flexibility of implementation of the programmes which will lead to substantial participation of the State Governments/UT. The NAM contemplates establishment of a National Mission as well as corresponding Missions in the State level. NAM is likely to improve significantly the Department's outreach in terms of planning, supervision and monitoring of the schemes.

2. Vision:

- a. To provide cost effective and equitable AYUSH health care throughout the country by improving access to the services.
- b. To revitalize and strengthen the AYUSH systems making them as prominent medical streams in addressing the health care of the society.
- c. To improve educational institutions capable of imparting quality AYUSH AYUSH education
- d. To promote the adoption of Quality standards of AYUSH drugs and making available the sustained supply of AYUSH raw-materials.

3. Objectives:

- a. To provide cost effective AYUSH Services, with a universal access through upgrading AYUSH Hospitals and Dispensaries, co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospitals (DHs).
- b. To strengthen institutional capacity at the state level through upgrading AYUSH educational institutions, State Govt. ASU&H Pharmacies, Drug Testing Laboratories and ASU & H enforcement mechanism.
- c. Support cultivation of medicinal plants by adopting Good Agricultural Practices (GAPs) so as to provide sustained supply of quality raw-materials and support certification mechanism for quality standards, Good Agricultural/Collection/Storage Practices.
- d. Support setting up of clusters through convergence of cultivation, warehousing, value addition and marketing and development of infrastructure for entrepreneurs.

4. Components of the Mission:

4.1 Mandatory Components

- a. AYUSH Services
- b. AYUSH Educational Institutions
- c. Quality Control of ASU &H Drugs
- d. Medicinal Plants

The details are provided as separate guidelines for individual components of Mission.

4.2 Flexible Components:-

4.2.1 Out of the total State envelop available, 20% funds will be earmarked for flexible funds which can be spent on any of the items given below with the stipulation that not more than 5% of the envelop is spent on any of the components:

- a. AYUSH Wellness Centres including Yoga & Naturopathy*
- b. Tele-medicine
- c. Sports Medicine through AYUSH
- d. Innovations in AYUSH including Public Private Partnership
- e. Interest subsidy component for Private AYUSH educational Institutions
- f. Reimbursement of Testing charges
- g. IEC activities
- h. Research & Development in areas related to Medicinal Plants
- i. Voluntary certification scheme: Project based.
- j. Market Promotion, Market intelligence & buy back interventions
- k. Crop Insurance for Medicinal Plants

**The Yoga wellness Centres are eligible for Rs. 0.6 Lakhs as one time assistance for initial furnishing and recurring assistance of Rs.5.4 Lakhs p.a. for Manpower, maintenance etc. & Naturopathy hospitals 20-30 beds are eligible for Rs.15 lakhs (Rs. 12 Lakhs as recurring assistance p.a. including Manpower and Rs.3 Lakhs for non-recurring one-time assistance for treatment equipments). However, the stipulation that not more than 5% of the envelope is spent on any of the components may not be applicable in this component.*

4.2.2 The financial assistance from Government of India shall be supplementary in the form of contractual engagements, infrastructure development, Capacity Building and supply of medicines to be provided from Department of AYUSH. This will ensure better implementation of the programme through effective co-ordination and monitoring. States shall ensure to make available all the regular manpower posts filled in the existing facilities. The procurement of medicines will be made by the States/UTs as per the existing guidelines of the scheme.

5. Institutional Mechanism:

5.1 National Level:

5.1.1 Mission Directorate:

The Mission at National level will be governed by a National AYUSH Mission Directorate, constituted with following members.

S No.	Designation	Status
1	Secretary (AYUSH)	Chairperson
2	AS & FA or his nominee	Member
3	A.S. & M.D., NRHM, Department of Health	Member
4	CEO, NMPB	Member
5	Mission Director, Horticulture	Member
6	J.S. dealing with ASU &H drugs/Institutions	Member
7	Drug Controller General of ASU & H Drugs / Sr. Technical officer dealing DCC	Member
8	Advisers of Ayurveda, Homoeopathy, Unani, Siddha	Member
9	Joint Secretary in-charge of CSS-(will be ex-officio Mission Director of NAM)	Member Secretary

5.1.2 Any other expert may be co-opted as deemed necessary with the approval of Chairperson. This committee shall be responsible for approving State Annual Action Plan (SAAP) based on recommendation of the appraisal committee.

5.1.3 **Appraisal** Committee:

The Mission at National level will be facilitated by a National AYUSH Mission Appraisal Committee, constituted with following members.

S No.	Designation	Status
1	Joint Secretary i/c of NAM	Chairperson
2	J.S. dealing with ASU &H drugs/Institutions	Member
3	CEO/Dy. CEO, NMPB	Member
4	Mission Director, Horticulture or his representative	Member
5	Representative from NRHM, Deptt. of Health	Member
6	Representative of IFD	Member
7	Additional Drug Controller General of ASU & H Drugs / Sr. Technical officer dealing DCC	Member
8	Advisers/Joint Advisers/Dy. Advisers of Ayurveda, Homoeopathy, Unani, Siddha, and Medicinal Plants	Member
9	Director/Dy. Secretary i/c of NAM	Member Secretary

5.1.4 Any other expert may be co-opted as deemed necessary with the approval of Chairperson. This committee shall be responsible for appraising the State Annual Action Plan (SAAP) and submit to the governing body for approval.

5.2 State Level:

The Mission at State level will be governed and executed by a State AYUSH Mission Society, constituted with following members.

5.2.1 Composition of Governing Body:

Sl. No	Designation	Status
1	Chief Secretary	Chairperson
2	Principal Secretary/Secretary I/c of AYUSH/ (Health & F.W.)	Member Secretary
3	Principal Secretary/Secretary (AYUSH Medical Education)	Member
4	Principal Secretary (Finance)	Member
5	Principal Secretary (Planning)	Member
6	Principal Secretary Forests & Horticulture dealing with Medicinal Plants	Member
7	Mission Director, NRHM	Member
8	Commissioner (AYUSH)/Director General (AYUSH)/ Director Ayurveda, Unani, Homoeopathy, Siddha	Member
9	Nodal Officer, State Medicinal Plants Board	Member
10	State ASU &H Drug Licensing Authority	Member

5.2.2 Any other expert may be co-opted as deemed necessary with the approval of Chairperson.

5.2.3 Ordinary Business: Providing AYUSH System overview, review of AYUSH policy and programme implementations, inter-sectoral co-ordination, advocacy measures required to promote AYUSH visibility and approval of State Annual Action Plan (SAAP).

5.2.4 Composition of Executive Body:

S No.	Designation	Status
1	Principal Secretary/Secretary I/c of AYUSH/ (Health & F.W.)	Chairperson
2	Principal Secretary/Secretary (AYUSH Medical Education)	Vice-Chairperson
3	Commissioner (AYUSH) /Director General (AYUSH)/Director-Ayurveda, Unani, Homoeopathy, Siddha	Member Secretary
4	Mission Director, NRHM	Member
5	Representative of State Finance/Planning Department	Member
6	Representatives of Forest & Horticulture Department	Member
7	Nodal Officer, State Medicinal Plants Board	Member
8	ASU &H State Licensing Authority	Member
9	Senior Technical officers dealing with Ayurveda, Homoeopathy, Unani, Siddha, Yoga and Naturopathy and Medicinal Plants	Member
10	State AYUSH Programme Manager	Member

5.2.5 Any other expert may be co-opted as deemed necessary with the approval of Chairperson

5.2.6 Ordinary Business:

Review of detailed expenditure and implementation of Mission, Preparation of State Annual Action Plan and submit for approval for Governing body, Execution of the approved State Annual Action Plan including release of funds as per annual action plan, follow up action on decision of the Governing body, Monitoring and evaluation and Maintain accounts of the society, and administration of the society.

6. Supporting Facilities under Mission:-

6.1 In order to strengthen the AYUSH infrastructure both at the Central and State levels, financial assistance for setting up of the Programme Management Units (PMU's) will be provided. The PMU will consist of management and technical professionals both at Central and State level and will be essentially on contract or through service provider.

6.2 The PMU staff will be engaged from the open market on contractual basis or outsourcing and the expenditure on their salary will be met out of admissible administrative and managerial cost for the mission period. This PMU will provide the

technical support to the implementation of National AYUSH Mission in the State through its pool of skilled professionals like MBA, CA, Accounts and technical Specialist etc. All appointments would be contractual and Central Government's liability will be limited only to the extent of Central share admissible for administrative and management costs on salary head for the mission period.

6.3 The structure of PMU & application format is furnished at ANNEXURE-I (a) & I (b) respectively.

6.4 In addition to the Manpower cost for PMU, the States/UTs can avail the financial assistance for such administrative costs like office expenditure, travelling expenditure, contingency, Annual Maintenance Cost (AMC) of infrastructure including equipments, computer, software for HMIS, Training and Capacity Building for concerned personnel under each component, audit, monitoring & evaluation, project preparation consultancy and additional manpower for AYUSH Hospitals and Dispensaries. A total 4% of the net funds available for the State is earmarked for State/UTs administrative costs under the Mission.

7. Resource Allocation Framework:

7.1 For AYUSH Services, Educational Institutions and Quality Control of ASU&H Drugs:-

For special Category states (NE States and three hilly States of Himachal Pradesh, Uttarakhand, Jammu and Kashmir) Grant-in-aid component will be 90% from Govt. of India and remaining 10% is proposed to be the State contribution towards all components under the scheme. For other States/UTs the sharing pattern will be 75%: 25%.

7.2 For Medicinal Plants: This component will be financed 100% by Central Government in North Eastern State and hilly State of Himachal Pradesh, Uttarakhand and Jammu & Kashmir where as in other states it will be shared in the ratio of 90:10 between Centre and States.

7.3 The Resource Pool to the States from the Government of India under the Mission shall be determined on the basis of following:

- i. Population with 70% weightage and 2 as multiplying factor for EAG States, Island UTs and Hilly States.
- ii. Backwardness determined on the basis of proxy indicator of per capita income will have 15% weightage and
- iii. Performance to be determined on inverse proportion of percentage of UCs due and pending as on 31st March of previous financial year will have 15% weightage.

7.4 Components of National AYUSH Mission will have certain core activities that are essential and other activities that are optional. For core/essential items 80% of the Resource pool allocated to the States can be used. For optional items, the remaining 20% of Resource pool allocated to the States can be used in a flexible manner, with the restriction that this 20% of Resource Pool can be spent on any of the items allowed with constraints that not more than 5% of the envelop is spent on any of the components:

7.5 The amount of release against the Central share will be as follows:-

Entitled Central Share – (Unspent balance of the Grant-in Aid released in previous years + interest accrued).

8. Utilization Certificates:-

In respect of non-recurring grants, a certificate of actual utilization of the grants received for the purpose for which it was sanctioned in Form GFR 19-A should be submitted in order to sanction of further grant-in aid. In respect of recurring grants, release of grant-in aid in subsequent years will be done only after Utilization Certificate on provisional basis in respect of grants of the preceding financial year is submitted. Release of Grants-in Aid in excess of 75% of the total amount sanctioned of the subsequent financial year shall be done only after the Utilization Certificate and the annual audited statement relating to the Grants-in aid released in the preceding year is submitted.

9. Flow of funds:-

Grant-in Aid will be transferred through treasury route with effect from F.Y. 2014-15 onwards to State Governments which in turn will transfer the funds to the State AYUSH Society along with State Share. However, during current F.Y. 2013-14, Grant-in Aid shall be transferred as per existing pattern.

10. Preparation of State Annual Action Plan (SAAP) by the States:-

10.1 From 2014-15 onwards the following steps will be taken:

1. Indication of tentative State allocation by Department of AYUSH, Government of India - 31st, December
2. Budget Provision by the State Government alongwith matching State Share - 31st March
3. Preparation of State Annual Action Plan by Executive Committee of the State AYUSH Society – 30th April
4. The receipt of State Annual Action Plan in the Department of AYUSH, Government of India – 1st week of May

10.2 The State/UT shall submit the State Annual Action Plan (SAAP) as per the recommendation format furnished at **ANNEXURE-II**.

11. Monitoring and Evaluation:

11.1 Dedicated MIS monitoring and evaluation cell would be established at Centre/ State level. It is therefore proposed to have a Health Management Information System (HMIS) Cell at National level with three HMIS Managers and one HMIS Manager at State level.

11.2 The concurrent evaluation of the AYUSH Mission shall be carried out to know the implementation progress and bottlenecks and scope for improvement. Third party evaluation will also carried out after two years of Mission implementation.

12. Expected Outcome:

- a. Improvement in AYUSH education through enhanced number of AYUSH Educational Institutions upgraded
- b. Better access to AYUSH services through increased number of AYUSH Hospital and Dispensaries coverage, availability of drugs and manpower
- c. Sustained availability of quality raw-materials for AYUSH Systems of Medicine.
- d. Improved availability of quality ASU &H drugs through increase in the number of quality Pharmacies and Drug Laboratories and enforcement mechanism of ASU&H drugs.

SUPPORTING FACILITIES UNDER NATIONAL AYUSH MISSION**A Central Programme Management Unit (PMUs):**

Sr. No	Post*	Numbers
1	Programme Manager	4
2	Sr. Consultants	9
3	Jr. Consultants	4
4	Finance Managers	4
5	Accounts Managers	4
6	HMIS Manager	3
7	Monitoring and Evaluation Consultant	2
8	Accountant	2
8	Data Assistant	10
9	Office Assistant	2
10	Messengers/attendants	5

In addition, Office & Administration, Travelling Expenditure, Meetings and Seminars, Awareness Generation fund also kept for Central PMU.

B. State Level:

(i) PMU for UTs

Sr. No	Post*	Numbers
1	Programme Manager	1
2	Consultant	2

(ii) PMU for NE States

Sr. No	Post*	Numbers
1	Programme Manager	1
2	Consultants (one for HMIS)	2
3	Finance Manager	1

(iii) PMU for Other States

Sr. No	Post*	Numbers
1	Programme Manager	1
2	Consultants	2
3	Finance Manager	1
4	Accounts Manager	1
5	HMIS Manager	1
6	Data Entry Operator	1

In addition, Office & Administration, Travelling Expenditure and contingency funds also kept of State PMU.

* Note:- There will be provision for flexibility within overall limit for making suitable changes in the proposed posts with the approval of Chairperson of NAM.

ANNEXURE-I (b)

Proposal for creating supporting facilities in the State shall be submitted in following format which will be part of State Annual Action Plan (SAAP).

1. Facility to be established: PMU
2. Location of the unit
3. Infrastructure support required for unit at State level:

(Rs. In Lakhs)

Sl. No.	Component	Unit cost	Number	Total cost
1	Manpower			
1 (a)	Programme Manager			
1 (b)	Consultant			
1 (c)	Finance Manager			
1 (d)	Accounts Manager			
1 (e)	HMIS Manager			
1 (f)	Data Entry Operator			
2	Office and Administration Expenses			
3	Travelling Expenses			
4	Contingency (Recurring)			
5	Others (Specify)			
Total financial implication				

ANNEXURE-II

Recommendation of the State/UT Government in respect of the State Annual Action Plan (SAAP):

1. The State Annual Action Plan (SAAP) for sanction of financial assistance has been scrutinized by the Office of the
2. The State Government recommends a grant of Rs (Rupees) for implementation of State Annual Action Plan.
3. The grant is applied for purpose which is in accordance with the norms prescribed by the Department of AYUSH, Ministry of Health & Family Welfare, New Delhi.
4. It is also certified that:
 - (i) The State Government have examined the audited statement of accounts for the last 3 years and are satisfied that the grant-in-aid asked for by them is justified by their financial position and that all previous grants received by them from various sources have been utilized for the purposes for which the grants were sanctioned.
 - (ii) There is nothing against the facility or its office bearers/ staff which should disqualify them from receiving the financial assistance from the Government of India. It is also certified that the institution or and of its office bearers is not involved in any corrupt practices and court proceedings.
 - (iii) The information provided by the State/UT Government for its application for grant is true and complete in all respect.
 - (iv) The States/UTs has furnished utilization certificates and related documents in respect of the previous grant if any received.
 - (v) Provision has been kept in the State/UT budget for meeting matching contribution as follows:
 - (a) AYUSH Services, Educational Institutions and Quality Control of ASU&H Drugs:-
10% in case of North-Eastern States and Jammu & Kashmir, Himachal Pradesh, Uttarakhand and 25% in the other remaining State/UTs for meeting the State/UT share.
 - (b) Medicinal Plants:
100% Central Government Share for North Eastern States and hilly States of Himachal Pradesh, Uttarakhand and Jammu & Kashmir where as in other States/UTs it will be shared in the ratio of 90:10 between the Centre and the States.

Date.....

Signature with seal of the Secretary to the Government

NATIONAL AYUSH MISSION

Operational Guidelines

AYUSH SERVICES



**Department of AYUSH
Ministry of Health & Family Welfare
Government of India**

1. Objective

The main objective of AYUSH services is to enhance coverage of health care system through cost effective AYUSH Services by focusing on core competency areas of AYUSH through upgrading AYUSH Hospitals and Dispensaries, co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs), District Hospitals (DHs) and Setting up of upto 50 bedded Integrated AYUSH Hospitals.

2. Components of the AYUSH Services under National AYUSH Mission

Financial assistance will be provided to the States/ UT Governments for:-

2.1 Core/Essential Activities:-

- I. Co-location of AYUSH facilities at PHCs, CHCs and District Hospitals
- II. Upgradation of existing Government AYUSH Hospitals
- III. Upgradation of existing Government / Panchayat / Government aided AYUSH Dispensaries
- IV. Setting up of upto 50 bedded integrated AYUSH Hospitals
- V. Supporting facilities such as Programme Management Units at Central and State level
- VI. Supply of essential drugs to AYUSH Hospitals and Dispensaries
- VII. Public Health Outreach activity
- VIII. Mobility support at State and District level
- IX. Behaviour Change Communication (BCC)/Information Education and Communication (IEC)
- X. School Health Programme

2.2 Activities under Flexible Pool:-

- I. AYUSH Wellness Centres including Yoga & Naturopathy
- II. Tele-medicine
- III. Sports Medicine through AYUSH
- IV. Innovations on Mainstreaming of AYUSH including PPP

2.1. Core/Essential Activities:-

I- Co-location of AYUSH facilities at PHCs, CHCs and DHs:

I (a) Establishment of AYUSH OPD Clinics in the Primary Health Centres (PHCs)

i. One Time grant

Up to Rs 20.00 lakhs for undertaking addition/ alteration of existing premises; furniture, fixtures, equipments, etc. subject to the condition that expenditure on addition/ alteration of existing premises will not exceed 75 per cent of the total amount.

ii. Recurring grant

Rs. 0.30 lakhs per annum as lump Sum Contingency fund.

Rs. 3.00 lakhs per annum for procurement of drugs, Medicines, Diet and other consumables.

I (b) Establishment of AYUSH IPDs in Community Health Centres (CHCs)

i. One Time grant

Up to Rs. 30.00 lakhs for undertaking addition/ alteration of existing premises; furniture, fixtures, equipments, etc. subject to the condition that expenditure on addition/ alteration of existing premises will not exceed 75 per cent of the total sanctioned amount.

ii. Recurring grant

Rs. 0.50 lakh per annum as lump Sum Contingency fund.

Rs. 5.00 lakhs per annum for procurement of drugs, Medicines, Diet and other consumables.

I (c) Setting up of AYUSH Wings in District Hospitals

i. One Time grant

Up to Rs. 40.00 lakhs for undertaking addition/ alteration of existing premises; furniture, fixtures, equipments etc. subject to the condition that expenditure on addition/ alteration of existing premises will not exceed 75 per cent of the total amount.

ii. Recurring grant

Rs. 0.70 lakhs- per annum as lump Sum Contingency fund.

Rs. 5.00 lakhs per annum for procurement of drugs, Medicines, Diet and other consumables.

II. Supply of Essential Drugs to AYUSH Hospitals and Dispensaries

Rs 2.00 lakhs per annum for essential drugs (Ayurveda/ Siddha/ Unani) Rs 1.00 lakhs per annum for essential drugs (Homoeopathy)

III. Upgradation of exclusive/standalone Government AYUSH hospitals (other than PHCs/ CHCs/ DHs)

Financial assistance will be provided for upgradation and improvement of existing AYUSH hospitals under the State Government/Zila Parishads.

i. One Time grant

Up to Rs 75.00 lakhs for undertaking construction, renovation of existing premises; furniture, fixtures, equipments, etc. subject to the condition that expenditure on addition/ alteration of existing premises will not exceed 75 per cent of the total amount.

ii. Recurring Grant (per annum)

Rs. 0.70 Lakhs per annum as lump sum contingency fund

Rs. 4.50 Lakhs per annum for procurement of drugs, medicines, diet and other consumables.

iii. State may engage the following personnel as per their need and salary may be decided as per the local criteria:

- a. AYUSH Specialists having PG qualifications- 2 (two)
- b. AYUSH Medical Officer-1 (one)
- c. AYUSH Pharmacists- 2 (two)
- d. Para Medical Staff- Masseurs- 2 (two),
- e. Kshar Sutra Attendant-1/ Stri Roga Attendant- 1/Ilaj-bid-Tadbir attendant/Thokkanam attendant-1/Homoeopathy Attendant-1/Yoga Attendant-1

iv. Subject to the conditions that the additional requirement of personnel shall be assessed and projected keeping in view the personnel already in position. All the appointments will be contractual and the Central Government's liability will be limited to the extent of Central Share admissible for the cost on salary for the mission period.

IV. Upgradation of Government/Panchayat/Government aided AYUSH Dispensaries

i. One Time grant

Up to Rs 20.00 lakhs for undertaking construction, renovation of existing premises; furniture, fixtures, equipments, etc. subject to the condition that expenditure on addition/ alteration of existing premises will not exceed 75 per cent of the total amount.

ii. Recurring Grant (per annum)

Rs. 0.10 Lakhs per annum as lump sum contingency fund

V. Setting up of upto 50 Bedded Integrated AYUSH Hospitals:

i. One Time grant

Up to Rs 900.00 lakhs for undertaking construction, with lump sum provision for staff quarters furniture, fixtures, equipments, etc. subject to the condition that expenditure on addition/ alteration of existing premises will not exceed 75 per cent of the total amount.

ii. Recurring Grant (per annum)

Rs. 30.00 Lakhs per annum for medicines, diet and other consumables.

Rs. 120.00 Lakhs per annum for Salaries

iii. The Manpower and infrastructure requirements are furnished at ANNEXURE- IV

iv. The deployment of the manpower will be subject to the conditions that the additional requirement of personnel shall be assessed and projected keeping in view the personnel already in position. All the appointments will be contractual and the Central Government's liability will be limited to the extent of Central Share admissible for the cost on salary for the mission period.

VI. Public Health Outreach activity:

i. It is proposed to focus on increasing awareness about AYUSH's strength in solving community health problems resulting from nutritional deficiencies, epidemics and vector-borne diseases, Maternal and Child Health Care etc. This component is aimed to provide grant-in-aid to State Government initiatives for the roll out of proven AYUSH interventions for improving health status of the population and also the identified National Campaigns by the Department of AYUSH, like Geriatric Campaign, Anti-anemia Campaign etc. through distribution of medicines, organizing Health awareness camps etc. It is also proposed to link AYUSH educational institutions, exclusive AYUSH facilities and Public Health facilities where AYUSH

units are available, in making a referral mechanism to address the health issues of the community referred by the NGO in a sustained manner.

ii. Objectives:

- a. To reduce the incidence of the disease burden of communicable or non-communicable or both as the case may be in selected geographical area during specific period of time.
- b. To have public **awareness** about the importance of hygiene, dietary habits, prevention, promotion etc. through AYUSH systems of medicine in the area.
- c. To establish a **Community Based Surveillance System (CBSS)** for early identification of the outbreak.
- d. To increase the accessibility of AYUSH treatment of the population residing in the particular geographical region.

iii. Strategies:

- a. Formulation of specific module for the activities at that geographical region. The unit size of the implementation will be 2 blocks.
- b. Formulation and training of Health Education team:
 1. A Health education team may be formed constituting health professionals, Teachers, Public Health Activists, nominees from LSGDs in the locality and will be given adequate training.
 2. This trained health education team may take up community intervention through behavioral change communication techniques.
 3. This trained health education team may be used to conduct the regular health education classes as per schedule in every division of the panchayat, educational institutions etc. institution and also during special occasion with mass gathering like festivals, etc.
 4. The health education classes include videos, power point presentations, pamphlets etc.
 5. Selection and Training of field staff
 6. Training may be given for public intervention and collection of data for Community Based Surveillance System.
 7. Health Hygiene Campaign may be done in consensus with other stakeholder's of the projects namely the local health providers, the local leaders, local self government and the Self help groups in the area.
 8. To attain 100% public **awareness** about the importance of hygiene and vector control measures in the study area.

iv Medical camps - Medical camps either general health camps or medical camps for a particular purpose may be undertaken as a part of the project. AYUSH medicine may be given to the population to enhance their general health by raising their immunity against communicable diseases.

v. Peripheral OPD: A medical team comprising one doctor, pharmacist and field workers may attend the peripheral OPD. The team will be present at the OPD at regular period of interval.

vi Project evaluation (quarterly)- Quarterly progress report will be sent to Department of AYUSH

vii The financial assistance of Rs. 5.00 Lakh per unit of 2 Blocks for each district is provided for Public Health Outreach activity.

VII. Behavior Change Communication (BCC)

- i The disease burden of the country is shifting towards communicable diseases to non- communicable diseases. Early prevention and case detection is the most important strategy of all non-communicable diseases which are generally emerged due to life style deviations and ill-healthy diet. AYUSH systems of medicines are thrived in the country with well-founded principles of disease prevention, promotion of health and specific intervention considering patient and environmental and dietary factors.
- ii Mass media communication strategy incorporating AYUSH strengths in early prevention of diseases through promotion of healthy diet and life style to be adopted by the community will be advocated by the states for which adequate financial support is proposed to be provided under AYUSH flexipool. The financial assistance of Rs. 20.00 Lakh per annum for each State is provided for Behaviour Change Communication (BCC)/IEC activities:

VIII. Mobility Support:

- i. Successful generation of outcome envisaged under the mission can only be resulted by regular and systematic monitoring. Therefore, provision has been made for financial assistance for limited mobility support to the State and District functionaries for conducting essential monitoring activities. However, purchase of vehicles are not allowed.
- ii The financial assistance of Rs. 5.00 Lakh per annum at State Level and Rs. 1.20 Lakhs per annum for District Level.

IX. AYUSH Gram:

- i. AYUSH Gram is a concept wherein one village per block will be selected for adoption of method and practice of AYUSH way of life and interventions of health care. In AYUSH village AYUSH based lifestyles are promoted through behavioural change communication, training of village health workers towards identification and use of local medicinal herbs and provision of AYUSH health services. The elected village representatives are sensitized towards the concept so that there is also active participation from the community.
- ii. Objectives:
 - a. To spread awareness within community for practice of those dietary habits and life styles as described in AYUSH Systems of Medicine which help in preventing disease and promoting health.

- b. To advice people for preservation and cultivation of those herbs which are found in their surroundings by explaining them their medicinal values.
- c. To advice people about common ailments and its cure thorough use of herbs found in their localities.
- d. To raise campaign against communicable diseases like Malaria, T.B., Diarrhea etc. and measures for their prevention and treatment.

iii Strategies:

The AYUSH Medical Officers under the programme implement the health plans and train the health workers in identification of medicinal plants and utilization of home-remedies. The health workers keep the record of health status and health register of village and provide information regarding health related issues of the wards in village. He/She will also identify the medicinal herbs in the area to ensure its utilization, and protection. The members from Medicinal Plants Board will motivate the farmers to cultivate medicinal herbs and provide necessary information and assistance for cultivation of medicinal plants. The Self Help Groups involved in the programme will manufacture herbal preparations as home-remedies and with the help of health worker motivate villagers to utilize it for different health problems. Traditional healers of the village may also be involved in identification of medicinal plants and their use as home-remedies.

iv. Organization of Yoga Camps and Plantation of Medicinal Herbs in AYUSH dispensary premises may also be undertaken under the programme. As a part of awareness campaign, information of seasonal disorders and their prevention and management through cultural activities through street plays etc. may be conducted.

v. The AYUSH medical officer along with other staff contribute for effective implementation of National Health Programmes by helping to spread awareness about Ante-natal care, post-natal care, infantile care including breast feeding, immunization, communicable diseases, geriatric care etc. The AYUSH doctors will also undertake health checkup camps at schools in and around the selected villages. AYUSH training will also be imparted to ASHAs, Anganwadi workers, school teachers etc. Awareness building activities would be conducted through gram panchayats involving schools, anganwadis, self-help groups and other community organizations. The villages near to PHCs having road connectivity will be selected for this program. Treatment for sick people will be provided through the PHC/AYUSH Facilities.

vi. The record keeping and monitoring of the entire activity will be done by the District AYUSH officer who in turn will transmit the data to State Head Quarter.

vii. The financial assistance of Rs. 10.00 Lakhs per unit covering 10, 000 in population in 5 to 15 villages in a State.

X. School Health Programme through AYUSH:

i. Providing easy access to health, nutrition and hygiene education and services through AYUSH systems of medicine is a simple and cost effective tool which can go a long way in the prevention and control of communicable and non-communicable diseases. The main focus of School Health Programme through AYUSH is to address the health needs of School going Children both physical and mental through providing AYUSH services including Yoga and counselling. The component of the programme shall include the following:

- a. AYUSH Health and Nutrition education
- b. Education on home remedies and locally available medicinal plants and importance of growing medicinal plants in home gardens.
- c. Practice of Yoga
- d. Education on sexual and reproductive health issues
- e. Health screening:- Early detection and management of common problems eg;- visual and hearing problems, physical disabilities, common skin problems, learning disabilities etc.
- f. Nutrition, anaemia, worm infestation management
- g. Development and dissemination
- h. Referral linkages with health services and local remedial action. Referral linkages with AYUSH Medical colleges or AYUSH Hospitals for remedial and preventive measures may also be undertaken. Nodal teachers for AYUSH School Health programme should be identified

ii. The financial assistance of Rs. 1 Lakh per unit of 2 blocks covering for the State

2.2 Activities under Flexible Pool:-

- I. AYUSH Wellness Centres including Yoga & Naturopathy*
- II. Tele-medicine
- III. Sports Medicine through AYUSH
- IV. Innovations on Mainstreaming of AYUSH including PPP

**The Yoga wellness Centres are eligible for Rs. 0.6 Lakhs as one time assistance for initial furnishing and recurring assistance of Rs.5.4 Lakhs p.a. for Manpower, maintenance etc. & Naturopathy hospitals 20-30 beds are eligible for Rs.15 lakhs (Rs. 12 Lakhs as recurring assistance p.a. including Manpower and Rs.3 Lakhs for non-recurring one-time assistance for treatment equipment's). However, the stipulation that not more than 5% of the envelope is spent on any of the components may not be applicable in this component.*

2.3 For above mentioned Activities, the remaining 20% of Resource pool allocated to the States can be used in a flexible manner, with the restriction that this 20% of Resource Pool can be spent on any of the items allowed with constraints that not more than 5% of the envelop is spent on any of the components

3. General Pattern of Financial Assistance:

Pattern of assistance under the various components of the Mission shall be as indicated below:

- (i) Funding of different components will be done on a gap filling basis, based on the State Annual Action Plans (SAAPs). The financial assistance for the components will be limited to the actual requirement, subject to the ceiling prescribed.
- (ii) 75% of the admissible assistance will be provided as grants-in-aid by the Central Government and balance 25 % shall have to be met by the State/ UTs concerned, except for the North-eastern States and hilly States of Jammu & Kashmir, Himachal Pradesh and Uttarakhand, where the Central share will be 90 % and balance 10% to be met by the States.
- (iii) Admissible financial assistance under the mission will be transferred through treasury route with effect from F.Y. 2014-15 onwards to State Governments which in turn will transfer the funds to the State AYUSH Society along with State Share.

4. General Terms & Conditions

- i) Under the mission, financial assistance will be provided to the State/ UT Government for the specified components for promotion of AYUSH health care facilities as well as flexible components as per the proposal made in State Annual Action Plan (SAAP).
- ii) Funding of different components will be done on a gap filling basis. The financial assistance for the component will be limited to the actual requirement, subject to the ceiling prescribed above.
- iii) SAAP shall have to be submitted in duplicate in the prescribed format enclosed as Annexures along with requisite information details.
- iv) The grantee organization shall take necessary action to utilize the amount within the financial year provided that in the event of failure to utilize part or full of the amount during the year, details thereof shall be reported to the department for placing before the Screening Committee for decision.
- v) **The grantee organization shall have to submit quarterly reports indicating physical progress of the work, attendance of the patients/ visitors in the AYUSH unit, receptivity & acceptability of the facilities of health care rendered from the unit for specific diseases as well as financial position of expenditure along with relevant documents.** Subsequent Grant-in-aid will be provided after the submission of these documents periodically to the satisfaction of the Department.
- vi) a) Essential drugs and medicines required for implementation of the Mission will have to be procured from Essential Drugs List (EDL) for Ayurveda, Unani, Siddha and Homoeopathy published by Department of AYUSH, Government of India.

b) At least 50% of the Grant-in aid provided should be used for procuring

medicines from M/s Indian Medicine Pharmaceutical Corporation Limited (a Central Public Sector Undertaking) or from Public Sector undertakings, pharmacies under State Governments and Co-operatives manufactured in their own manufacturing units and having Good Manufacturing Practices (GMP) compliance, keeping in view the need for ensuring quality of AYUSH drugs and medicines.

- c) The remaining Grant-in aid provided under the Mission for purchase of medicines may be used for procuring medicines as per Essential Drugs List (EDL) of Ayurveda, Unani, Siddha and Homoeopathy published by Department of AYUSH, Government of India, from other Good Manufacturing Practices (GMP) compliant units having valid manufacturing licenses
- d) Essential non drug items like dressing items for first aid etc. may be provided out of the amount sanctioned for medicine/ essential drugs under different components required for achieving the desired objectives subject to a ceiling of five percent of the total amount sanctioned for the purpose.
- vii) The adequate AMC provision should be made for upkeep and maintenance service of the newly constructed building and purchased equipment/instruments out of grant-in-aid.
- viii) Proper Bio-Medical waste management system should be established in the hospital.
- ix) Water harvesting facility should be provided in the hospital building.
- x) The building should be environmental friendly and may suit to the local culture of the States.

APPLICATION FORM

Annexure- I

AYUSH Services

Part-I

1. Name of State / UT
2. Name, designation & address of the contact person including Tele. No., Fax No. and E-mail address:
3. Gist of proposal:

A. Core/Essential Activities:-

i) Co-location under NRHM

S. No.	Centre	No of units sought for One time assistance		No. of units sought for Recurring assistance			Total Amount
		No. of new Units	Amount	No. of New Units	No. of Units assisted previousl	Cumulative Amount	
1	2	3	4	5	6	7 (5+6)	8 (4+7)
1	PHC						
2	CHC						
3	DH						
	Total						

- (a) PHC - details to be given in format at: **1(a)**
(b) CHC - details to be given in format at: **1(b)**
(c) DH - details to be given in format at: **1(c)**

ii) **Drugs/ Medicines for Hospital/ Dispensaries:**

- Details to be given in format at:

For Hospitals:

For Dispensaries:

Total Amount

II (a)

II (b)

iii) **Upgradation the existing AYUSH Hospitals**

- Details to be given in format at:

Total Amount

(III)

iv) **Upgradation of the existing AYUSH Dispensaries**

- Details to be given in format at:

Total Amount

(IV)

v) **Setting up of upto 50 bedded AYUSH Hospital:**

- Details to be given in format at:

Total Amount

(V)

- vi) Public Health Outreach Activities:** Total Amount
- Details to be given in format at: (VI)
- vii) Behaviour Change Communication (BCC)/IEC:** Total Amount
- Details to be given in format at: (VII)
- viii) AYUSH Gram:** Total Amount
- Details to be given in format at: (VIII)
- ix) School Health Programme:** Total Amount
- Details to be given in format at: (IX)
- x) Mobility Support:**
- State/District Level:** Total Amount
- (Details to be given separately)
- B. Flexible Components:-** Total Amount

S N:	Component*	Per cost	unit	Units	Total cost
i	Wellness Centre through AYUSH including Yoga				
ii	Tele-medicine				
iii	Innovations on Mainstreaming of AYUSH including PPP				
iv	Sports Medicine through AYUSH				
v	others				

For above mentioned Activities, the remaining 20% of Resource pool allocated to the States can be used in a flexible manner, with the restriction that this 20% of Resource Pool can be spent on any of the items allowed with constraints that not more than 5% of the envelop is spent on any of the components.

(*Details to be given separately)

5. **Grand Total** of AYUSH Services components under State Annual Action Plan:
6. Whether grant-in-aid of similar nature has been received from any other source, if so, the details thereof:
7. Name of the authority responsible for submitting the utilization funds related documents and progress report:
8. Any other relevant information:

Signature with seal of the Secretary/Commissioner Health

Format- I (a)

For assistance to Primary Health Centre (PHC)												
S. No.	Location	Collocation of AYUSH System		Average Daily OPD attendance	Facilities available			Support required*				
	Block	Year	Stream (Ayur. / Hom. / Unani / Siddha)		Staff		Infrastructure / Equipment / Furniture	Infrastructure		Equipment / Furniture		Medicine / drug
	Sub				M.O.	Supporting Staff		Physical	financial	Physical	Financial	Financial
	District						Physical	financial	Physical	Financial	Financial	
1	2	3	4	5	6	7	8	9	10	11	12	13

Format- I(b)

For assistance to Community Health Centre (CHC)														
S. No.	Location	Collocation of AYUSH System		Average OPD attendance	No. of IPD beds	IPD (average Bed occupancy)	Facilities available			Support required*				
	Sub Division	Year	Stream (Ayur. / Hom. / Unani / Siddha)				Staff		Infrastructure/ Equipment /	Infrastructure		Equipment / Furniture		Medicine / drug
	District						M.O.	Supporting Staff		Physical	financial	Physical	Financial	Financial
									Physical	financial	Physical	Financial	Financial	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

Format- I (c)

For assistance to District Hospital (DH)														
S. No.	Location District	Collocation of AYUSH System if already made		Average OPD attendance	No of beds	IPD (average bed occupancy)	Facilities available			Support required*				
		Year	Stream (Ayur. / Hom. / Unani / Siddha)				Staff		Infrastructure / Equipment / Furniture	Infrastructure		Equipment / Furniture		Medicine / drug
							M.O.	Supporting Staff		Physical	financial	Physical	Financial	Financial
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

* For co-location at PHCs, CHCs, and DHs the State should not avail of funds from Department of Health, Government of India for same units, except for Manpower.
Format- II (a)

For essential drugs to AYUSH hospital									
S. No.	Location District	Average Daily OPD	No of Beds	IPD (average bed occupancy)	Existing facilities			Required facilities	
					Staff		Medicines available	Medicine / drug	
					M.O.	Supporting Staff		Amount	
1	2	3	4	5	6	7	8	9	

Format- II (b)

For essential drugs to AYUSH dispensary						
S.No.	Location Block Sub Division District	Average Daily OPD	Available Facilities			Support required
			Staff		Medicine	Medicine / drug
			M.O.	Supporting Staff		Amount
1	2	3	4	5	6	7

Format- III

Upgradation of exclusive/stand-alone AYUSH Hospitals other than PHCs/ CHCs/ DHs

S. No.	Name Location District	System of Medicine (Stream)	Average OPD attendance	No. of IPD beds	IPD (Bed occupancy) during previous year	Facilities available			Support required						
						Staff		Infra - structure	Staff				Infrastructure/ Equipment / Furniture		Medicine / drug/ contingency
						M.O.	Supporting Staff		M.O.		Supporting Staff		Physical	Financial	Financial
								Physical	Financial	Physical	Financial				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

1. The full justification for which the grant is required (Please give detailed break-up):
2. Give the specific details for their requirement with estimates of Capital Works; upkeep and maintenance of above facilities.
3. Whether the applicant has received any Assistance for the above purpose from the Central/State Govt/other Govt. Agency in the past? If so, the details thereof (year wise).

Format- IV

Upgradation of AYUSH Dispensaries

S. No	Name, Location & District	Status of Building(Rented/ own)	System of Medicine	Average OPD attendance	Facilities available			Infrastructural Support required		Contingency	Total	
					Staff		Infra - structure					
					M.O.	Supporting Staff		Building construction, alteration/ renovation	Equipment / furniture			
1	2	3	4	5	6	7	8	9	10	11	12	

1. The full justification for which the grant is required (Please give detailed break-up):
2. Whether the applicant has received any Assistance for the above purpose from the Central/State Govt/other Govt. agency in the past? If so, the details thereof (year-wise).

Format- V

Setting up of upto 50 bedded Integrated AYUSH Hospital

S. No.	Name Location District	System of Medicines (Streams)	Proposed No. of IPD beds	Facilities		Support required						
				Land (State Share)		Staff				Infrastructure/ Equipment / Furniture		Medicine / drug/ contingency
				Area	Approximate cost	Details of M.O.		Supporting Staff		Physical (Summary List)	Financial	Financial
						No.	Financial	No.	Financial			
1	2	3	4	5	6	7	8	9	10	11	12	13

Format- VI

Public Health Outreach Activities:

S. No.	Name, District, Block, of Location	Details of Activity Proposed	Number of expected beneficiaries	Outcome expected	Per Unit Cost	Total Cost
1	2	3	4	5	6	7

Format- VII

BCC/IEC:

S. No.	Name, Block, District of Location of the Proposed outreach activity	Details of Activity Proposed	Per Unit Cost	Total Cost
1	2	3	4	5

Format-VIII
AYUSH Gram:

S. No.	Name, Block, District of Location	Details of Activity Proposed	Number of expected beneficiaries	Outcome expected	Per Unit Cost	Total Cost
1	2	3	4	5	6	7

Format-IX
School Health Programme

S. No.	Name, Block, District of Location of the Proposed	Details of Activity Proposed	Number of expected school children benefited	Outcome expected	Per Unit Cost	Total Cost
1	2	3	4	5	6	7

Annexure- IV

Setting up of upto 50 bedded Integrated AYUSH Hospital

MANPOWER REQUIREMENT:

S. No.	Name of the Post	Required for upto 50 beds
1.	Medical Supdt.	1
2.	SMO (Specialist for Panchkarma/ Ksharsutra/ Homoeopathy/Ilaj-bid Tadbir/Thokkanam)	3
3.	Medical Officer	6(3+3)
4.	Resident Medical Officer	1
5.	Accounts Officer	1
6.	Assistant Matron	1
7.	Nursing Staff	12(6 + 6)
8.	Panchkarma Technician	2(1+1) M/F
9.	Yoga instructor	1*
10.	Pharmacist/Dispenser	3(1 + 2)
11.	Laboratory Technician	2 *
12.	Store Keeper/Clerk	2*
13.	Registration Clerk	1*
14.	Chowkidar	3 *
15.	Ward boys/Aayah	8 *
16.	Cook	2 *
17.	Peon	4 *
18.	Dresser	2 *
19.	Masseur	4(2+2)
20.	Sweeper/Jamadars	6 *
21.	Midwife	4 *

22. Following specialists services may be utilized on call:

Name of the posts	No. of posts required
1. Anaesthetist*	1
2. Radiologist*	1
3. Pathologist*	1
4. Ophthalmologist	1
5. General Surgeon	1
6. Gynaecologist	1

Posts 1 and 2 should be regular to be employed by the State Government.

Posts No. 3 to 13 may be contractual staff on consolidated salary.

Posts No. 15 to 22 staff may be outsourced.

***Common for both the systems.**

Annexure-V

Minimum space for provision of quality AYUSH health care facilities

I- At Primary Health Centre (PHC) level:

One doctor Room- 3.2 X 3.2 X2 Mtrs and one Pharmacy cum store for AYUSH- 6.4 X 3.2 Mtrs.

II- At Community Health Centre (CHC) level:

(a) Doctor Room- 3.2 X 3.2 X2 Mtrs for 2 AYUSH Doctors, one Pharmacy cum store for AYUSH- 6.4 X 3.2 Mtrs.

(b) In addition to the above, space required for specialized therapy follows:

1. Panchkarma/ Thokkanam Therapy Centre

- | | |
|--|-------------|
| i) 4 therapy rooms (each of 200 Sq. ft. area x 4) | 800 Sq. ft. |
| ii) 10 beds in pre-existing wards or space for accommodating 5 male and 5 female patients- | 500 Sq. ft |
| iii) Kitchen- | 200 Sq.ft. |
| iv) Office cum record room- | 200 Sq. ft. |

Total: 1700 Sq. ft

2. Kshar sutra Therapy Centre

- | | |
|---|-------------|
| i) Operation theatre | 200 Sq. ft |
| ii) Sterilization room (existing one can be used) | 200 Sq. ft. |
| iii) Recovery room | 200 Sq. ft. |
| iv) 10 beds in pre-existing wards or space for accommodating 5 male and 5 female patients – | 500 Sq. ft. |
| v) Office cum record room | 200 Sq. ft. |

Total: 1300 Sq. ft.

3. Regimental Therapy of Unani (Ilaj Bil Tadbeer) Centre

- | | |
|--|-------------|
| i) Therapy section (4 rooms each of 200 Sq ft. area) | 800 Sq. ft. |
| ii) 10 beds in pre-existing wards or space for accommodating 5 male and 5 female patients- | 500 Sq. |
| iii) Office cum record room | 200 Sq. |

Total: 1500 Sq. ft.

4. Yoga & Naturopathy Therapy Centre

i) Yoga hall	1200 Sq. ft.
ii) Therapy section	600 Sq. ft.
iii) Office cum record room	200 Sq. ft.
iv) Kitchen-	200 Sq. ft.

Total: 2200 sq. ft.

III- At District Hospital level:

i) 6 therapy rooms (each of 200 Sq. ft. area x 6)	1200 Sq. ft.	ii)
2 OPD rooms	200 Sq. ft.	
iii) 10 beds in pre-existing wards or space for accommodating 5 male and 5 female patients-	500 Sq. ft.	
iv) Kitchen (existing kitchen may be can be utilized)	200 Sq. ft.	
v) Office cum record room	200 Sq. ft.	

Total: 2300 Sq. ft

ANNEXURE -VI

Building Specification for upto 50 bedded Integrated AYUSH Hospital

Sl. No.	PARTICULARS	CARPET AREA in Sq. Ft. for 50 bed
1.	ADMINISTRATIVE BLOCK	1000
2.	Hospital Superintendent	250
3.	RMO	150
4.	Administrative Officer	150
5.	Record Room & Office	600
6.	Sanitary block (M/F)	150x2
	OPD & IPD	
1.	CMO office room with attached toilet	300 (150x2)
2.	Canteen, Kitchen & store	500
3.	Statistics Deptt. with computer facilities with Central Medical Record section	200
4.	Clinical laboratory for investigation	300
5.	OT Complex (1 theaters + side Theatre + wash + Changing + Autoclave + Staff + recovery room)	1000
6.	Labor room +Duty Room	200 +150=350
7.	Panchakarma/Thokkanam/Ilaj-bid-Tadbir Theatre (Therapy block) (Toilet, bath & circulation area)	1000 (500x2) M/F + 500=1500
8.	Central store for linen etc.	300
9.	Medicine store for Ayurveda/Homoeopathy/Unani/Siddha	1000
10.	Dispensing room for Ayurveda/ Homoeopathy/Unani/Siddha.	300
11.	Residents doctors Duty Rooms with Toilets	600 (150 X 4)
12.	4 wards of 10 beds each and Private Rooms (10 Nos.)	2000 (500x4) + 2000(10x200)=4000
13.	Nurses duty room	100
14.	Laboratory for pathological examinations	200
15.	Store room for linen and equipment	200
16.	Accommodation for Rehabilitation therapies including Physiotherapy and Occupational therapy, Electrotherapy, Diathermy, Ultraviolet and Infrared treatment, Hydrotherapy.	200
17.	Separate adequate area for Yoga and Naturopathy practice + Toilets	400 +100
18.	Registration & Record room	200
19.	Waiting hall for patients and attendants	600
20.	Examination rooms(Cubicles) and case demonstration room for Ayurveda and Homoeopathy in the outdoors	150 each x10 (6Ayurveda, 4 Homeopathy)
21.	Staff room with lockers	200
22.	Dressing Room	100
23.	Audiometry room	100
24.	Optometry Room	150
25.	Central Casualty Department accommodation for Resuscitation services (2 Beds)	400

ANNEXURE -VII

List of Equipments for 50 beds Integrated AYUSH Hospital:-

A. Panchakarma

1. Droni/Massage Table: Minimum 7ft.X2.5 ft. (wood or Fibre)
2. Appropriate stand to fix droni: 2.5 ft. height
3. Swedana/Sudation chamber and nadi swedan yantra
4. Footstool – 1
5. Stool – 1
6. Arm Chair - 1
7. Heating facilities
8. Heating Pan
9. Shirodhara stand and shirodhara table
10. Basti yantra
11. Uttara Basti Yantra for males and females
12. Bedpan (male and female)
13. Vamana set
14. Kidney trays
15. Nasyakarma set
16. Stethoscope – 1
17. Sphygmomanometer – 1
18. Thermometer – 1
19. Hot water – bath
20. Pressure cooker (5 litres) – 1
21. Small pillows covered with rexin sheet- 2
22. Small almirah – 1
23. Plastic aprons, gloves and masks
24. Knife and scissor – 1 each
25. Clock – 1 and stop watch – 1
26. Hot water facility
27. Exhaust fans – minimum 1
28. Sufficient light and ventilation
29. Autoclave equipment for sterilization

B. Ksharasutra:-

1. Ksharasutra Cabinet
2. Autoclave
3. OT instruments
4. OT table
5. Linen, cotton, Apron
6. OT light
7. Consumables

C. Uttarbasti:-

1. Sterilizer or autoclave
2. Hot water bag
3. Kidney tray
4. Sims speculum
5. Anterior vaginal wall retractor
6. Vulsellum
7. Uterine sound
8. Swab holder

9. Artery forceps
10. Toothed forceps
11. Metallic or disposable insemination canula
12. Good light source
13. Table having bars for giving lithotomy position
14. Disposable syringes
15. Sterilized gloves
16. Sterilized Gauze
17. Foley's catheter (Various sizes as per requirement)
18. Sterilized cotton
19. Sterilized tampons
20. Sterilized medicine (Medicated Ghee or oil or decoction used for treatment of Uttarbasti)

D. Raktamokshana (Leech Therapy):-

1. Storage Aquarium for fresh leeches : 20-25 litres capacity (May be with partitions)
2. Glass container (1 litre capacity) for : 5-10 (for each patient requires separate container and the may vary according to the number of patients)
3. Leeches : (As per the requirement usually 3-5 leeches per patient/treatment period)
4. Surgical table : 02
5. Surgical trolley : 04
6. Surgical tray : 05
7. Instrument : Different types of Forceps, Scissors, Needles, Suturing material etc. (As per the requirement)
8. Dressing tray with gloves, Bandage : (As per the requirement)
Cloth Bandages etc.
9. Materials : Turmeric, Saindhalavan, Jatyadi Ghrita, honey (As per the requirement)

NATIONAL AYUSH MISSION

Operational Guidelines

AYUSH EDUCATIONAL INSTITUTIONS



**Department of AYUSH
Ministry of Health & Family Welfare
Government of India**

1. Background

- 1.1 The educational Standards in AYUSH system of medicine is progressively improving with the vigorous implementation of minimum standards. There are 107 Government educational institutions in the country out of 508 Educational institutions. The onus for creating the required infrastructure and making provision for functional hospital and teaching faculty etc. in accordance with the Minimum Standard Regulations (MSR) lies with the concerned college/State Government/or the organization which has established the college. However, in order to assist the colleges to fill the gaps, this Department has been implementing Schemes for financial assistance to the teaching institutions since 9th Five year Plan onwards. With the available limited resources under the scheme around 20% of the institutions only could covered so far.
- 1.2 The independent evaluation of the scheme undertaken by the Department indicated that AYUSH institutions in the country are with poor infrastructure. They required filling up of critical gap areas for meeting the norms of Minimum Standard Regulations (MSR) which are implemented by the Government vigorously. The 11th Plan scheme made provision for financial assistance to the Under-Graduate and Post-Graduate colleges of Government and Government aided institutions. However, considering the cost escalation it became essential that the norms required to be modified. Further, the private institutions which were kept out of Grant-in-aid component are incidentally larger in number and thereby responsible for the major quantum and quality of Minimum Standards Regulations (MSR) being enforced by the Government of India. Hence, there is a need to support the private educational institutions on identified critical gap areas of hospital and college functionality like infrastructure and equipments.
- 1.3 In many States there are no educational institutions available. This affects the growth of AYUSH systems of medicine in these States. Therefore, it is proposed to support the efforts of States to set up AYUSH colleges in their States in Government sector with 75% or 90% funds as Grant in aid from Government of India and 25% or 10% funds as state share as the case applicable to general category states/UTs and NE & Hilly States respectively.
- 1.4 Therefore, it was decided by Government of India to continue the scheme with enhanced budget outlay as well as cost norms.

2. Objectives:-

1. To upgrade of Government/Government Aided AYUSH UG Educational Institutions
2. To upgrade of Government/Government Aided AYUSH PG Educational Institutions
3. To provide financial assistance to the states for setting up of new AYUSH educational Institutions in the States where it is not available in Government sector.

3. Components:

The following components will be supported under the National AYUSH Mission

3.1 CORE ACTIVITIES:

- a. Infrastructural development of AYUSH Under-Graduate Institutions
- b. Infrastructural development of AYUSH Post-Graduate Institutions/add on PG Pharmacy/Para-Medical Courses
- c. Setting up of new AYUSH educational Institutions in the States where it is not available in Government sector

3.2 FLEXIBLE ACTIVITIES:-

Interest subsidy component for Private AYUSH educational Institutions

3.1. CORE ACTIVITIES:-

3.1.a Infrastructural development of AYUSH Under-Graduate Institutions

State Govt./Govt.-aided institutions duly *permitted* by the Central Government for last five years under Indian Medicine Central Council (IMCC) Act 1970 and Homoeopathy Central Council Act, 1973 are eligible. Assistance will be given on a Detailed Project Report for upgradation of the UG Institution.

Pattern of assistance:

- | | | |
|-----|--|------------------|
| i) | Construction of OPD/IPD/Teaching Departments/Library/Laboratories/Girls' Hostel/Boys' Hostel, etc. | Rs. 210.00 Lakhs |
| ii) | Equipment, Furniture, and Library books | Rs. 90.00 Lakhs |

3.1.b Infrastructural development of AYUSH Post-Graduate Institutions/add on PG Pharmacy/Para-Medical Courses

State Govt./Govt.-aided institutions duly *permitted* by the Central Government for last five years under Indian Medicine Central Council (IMCC) Act 1970 and Homoeopathy Central Council Act, 1973 are eligible. Assistance will be given on a Detailed Project Report for upgradation of the PG institutions or for add on AYUSH Pharmacy/Para-Medical Courses.

Pattern of assistance:

- | | | |
|------|--|------------------|
| (i) | Construction of OPD/IPD/Teaching Departments/Library/Laboratories/Girls' Hostel/Boys' Hostel, etc. | Rs. 280.00 Lakhs |
| (ii) | Equipment, Furniture, Library books & Payment of stipend to students for new PGs | Rs. 120.00 Lakhs |

3.1.c Setting up of new AYUSH educational Institutions in the States where it is not available in Government sector

- | | | |
|-----|--|------------------|
| (i) | Construction of OPD/IPD/Teaching Departments/Library/Laboratories/Girls' Hostel/Boys' Hostel, etc. | Rs. 900.00 Lakhs |
|-----|--|------------------|

(ii) Equipment, Furniture, and Library books Rs. 150.00 Lakhs

1. This component is applicable to the States/UTs where Colleges of Ayurveda, Unani, Siddha and Homoeopathy are not available in Government sector.
2. The Grant-in aid provided by Government of India will be supplementary to the States contribution to complete the project. State Government should submit an undertaking that the remaining cost for the project shall be borne by the State Government.
3. Where the state contribution includes land or existing building, a certificate from the Competent Authority on valuation on land and building to be submitted alongwith application.
4. It will be completely a project based proposal to be appraised by a Committee comprising of State Secretary/State Director of ISM&H, concerned Advisers from Deptt. of AYUSH.

3.2 FLEXIBLE ACTIVITIES:-

3.2.a Interest subsidy for Development of Private AYUSH Educational Institutions

Private non-profitable educational institutions duly **permitted** by the Central Government for last five years under Indian Medicine Central Council (IMCC) Act 1970 and Homoeopathy Central Council Act, 1973 are eligible. Assistance will be given on a Detailed Project Report for upgradation of the UG/PG Institution.

Pattern of loan to be made available by the college from Nationalized Bank:

- | | | |
|------|---|--|
| (i) | Construction of OPD/IPD/Teaching Departments/Library/
Laboratories/Girls' Hostel/Boys' Hostel, etc.- | 70% of Project cost upto
Rs. 210.00 Lakhs (for UG)
Rs. 280.00 Lakhs (for PG) |
| (ii) | Equipment, Furniture, and Library books | 30% of Project cost upto
Rs. 90.00 Lakhs (for UG)
Rs.120.00 Lakhs (for PG) |
1. The assistance from Government of India will as Interest Subsidy at the rate of 6%. Maximum limit of total subsidy admissible will be Rs.25 Lakhs per Crore of loan from Nationalized Bank to be repaid over a period upto 7 years for infrastructure upgradation.
 2. To receive financial assistance of interest subsidy, the institution shall have to get a term loan from a nationalized Bank for the purpose of Upgradation of College infrastructure.
 3. Once the loan from the nationalized bank has been approved, the institution will apply to the State Governments for the interest subsidy scheme. The State Government will recommend the interest subsidy project and include in the State Annual Action Plan (SAAP) for the approval of the SAAP by Central Government.
 4. The State Government shall identify a nodal nationalized bank for operating the component of interest subsidy scheme. The interest subsidy amount for the entire eligible private institutions as per the approval from Government of India will be transferred.
 5. The nodal bank in turn will transfer the interest subsidy to the particular bank from which the educational institution has availed the loan.

6. The application of the private college should be part of the State Annual Action Plan. The application should contain the financial sanction of loan by the nationalized bank to the applicant college with repayment schedule, penal interest provisions and other terms and conditions.
7. The transfer of the interest subsidy should be done by the State nodal bank after ascertaining the permission status of the concerned college from the Department of AYUSH, Government of India.
8. In this regard an MOU will be entered with State Nodal Bank and State AYUSH Society/State Government.
9. Institutions applying within one year from the date of first disbursement of loan will be eligible.
10. The interest subsidy will be available only on interest levied by the nationalized Banks and credited directly to the loan account in the nationalized Bank after payment of instalment by the institution. Penal interest or other charges will not be reimbursed.
11. The interest subsidy will be for repayment period of seven years or actual period of repayment of loan whichever is earlier.
12. The interest subsidy will be admissible to the institution which pays regular instalments and interest to the Bank. If the institution becomes defaulter, it will not get interest subsidy for the default period and such defaulting period will be deducted from seven years period.
13. The interest subsidy will be considered from the date of payment of first instalments of term loan. Disbursement will be made only after commencement of upgrade course.
14. The private Institution should be duly permitted by the Central Government for the last 5 years under relevant sections of IMCC & HCC Acts to be eligible under the scheme.
15. If the Institution subsequently does not get permission from Government of India to run the course, it will not get assistance under this scheme for that period and the period of denied permission will be deducted from seven years period.

4. Guidelines for submission of application and implementation of Mission:

- 4.1 Institutions desirous of availing assistance under the Mission are required to forward their Detailed Project Report duly appraised as provided under the component along with Documents/undertaking along with an application format as annexed through the State Directorate of ISM&H which should be included in State Annual Action Plan (SAAP).
- 4.2 All applications shall be accompanied by a copy of the latest permission regarding the continuation of the permission to admit students by the applicant institution.
- 4.3 An institution would be considered for assistance only for one of the above components during 12th Plan. In case an institution has availed of assistance during the 11th Plan it would be eligible only for the balance of the revised guidelines of assistance.

ANNEXURE-I

APPLICATION FOR GRANT-IN-AID UNDER THE NATIONAL AYUSH MISSION FOR DEVELOPMENT OF AYUSH EDUCATIONAL INSTITUTIONS

A. BASIC INFORMATION

- 1 Name of the Institute with full postal address
Tel. No.
Fax No.
2. Status of the Institute & the college with which associated (i) Govt
(ii) Govt. aided
(iii) Private
- 3 Details of courses run by the college :-
(a) Graduate
(b) Post-Graduate (No. of Deptts.)
(c) Others
4. Name of the University with which the institution is affiliated (Year of affiliation):-
- 5 Year and month of recognition of the Institute by CCIM/ CCH/ Government of India, as the case may be. Whether the college has completed 5 years and a batch of students passed out.
- 6 Admission capacity allowed by CCIM/ CCH (Please attach copy of permission letter) (a) U.G.....
(b.) P.G. in each deptt.....
- 7 No. of students passed out every year (for last three years) (a) U.G.
(b) P.G. in each deptt.....
- 8 Whether the institute is following the syllabus prescribed by the CCH/CCIM and if so, since when. Whether the institution has been visited/inspected by CCIM/CCH, if so, a copy of their latest report may be attached.
- 9 A report indicating to what extent deficiencies, if any, pointed out in the last report of CCIM/CCH have been fulfilled.
10. (a) Whether the institution has its own attached hospital?
(b) If so, the No. of beds available.
(c) Average bed occupancy during the last one year

PURPOSE

1. The purpose for which the grant is required (Please give detailed breakup):
2. If the application is for capital works, give full details with justification for their plan with estimates of

Capital Works; upkeep and maintenance of above facilities duly approved by Architect of PWD,

CPWD, HSCC, NBCC or any other Govt. approved agency.

3. Whether the applicant has received any Assistance for the above purpose from the Central/State Govt./other Govt. agency in the past? If so, the details thereof (year-wise) and photocopies of the utilization certificate and other related documents/ letter of this Department accepting U.C., in respect of previous grants, if any, may be attached.
4. Annual expenditure of the Institute during the last three years (year-wise) statements in this connection duly approved by the audit authority in case of Govt. hospital and Chartered Accountant in case Govt. aided/ Private Institute may kindly be added.
5. Please indicate the details of the teaching staff of each teaching Department

Sl. No.	Name	Qualification	Full Time
(1)	(2)	(3)	(4) Yes/No

Signature of the applicant
(with rubber stamp)
Name in Block Letters
Phone
Date

B. RECOMMENDATION OF THE STATE GOVERNMENT

Sub: Grant-in-aid for AYUSH institutions

1. This institution has been visited by the
2. The proposal for sanction of financial assistance has been scrutinized by the Office of the.....
3. The State Government recommends a grant of Rs.....(Rupees.....) for the purpose of..... Which is/are considered essential for development and efficient working of the institution. The grant applied for is for purposes which are in accordance with the norms prescribed by the Central Council of Indian Medicine/Central Council of Homeopathy.
4. It is also certified that:
 - i. The college has completed 5 years of existence and one batch of students has passed out of the college.
 - ii. The State Government have examined the audited statement of account of..... for the last 3 years and are satisfied that the grant-in-aid asked for by them is justified by their financial position and that all previous grants received by them from various sources have been utilized for the purposes for which the grants were sanctioned.
 - iii. The State Government are satisfied that the institution has the experience and managerial ability to carry out the purposes for which the grant of financial assistance has been asked for.
 - iv. There is nothing against the utilization or its office bearers/staff which should disqualify them from receiving the financial assistance from the Government of India. It is also certified that the institution or and of its office bearers is not involved in any corrupt practices and court proceedings.
 - v. The information provided by the institution in paras.....of its application for grant is true and complete in all respect.
 - vi. The college has furnished utilization certificates and related documents in respect of the previous grant.

Signature of MISSION DIRECTOR (NAM)
of State Government
(with rubber stamp)

Name in Block Letters
Phone... ..
Date... ..

NATIONAL AYUSH MISSION

Operational Guidelines

Quality Control of Ayurveda, Siddha, Unani and Homoeopathy Drugs



Government of India

**Department of AYUSH
Ministry of Health & Family Welfare
Government of India**

- 1. Quality Control of Ayurveda, Siddha, Unani and Homeopathy drugs**
- 1.1 Regulation of Ayurveda, Siddha and Unani and Homeopathic (ASU&H) medicines in India is governed under the provisions of Drugs & Cosmetics Act, 1940 and the Rules thereunder. It is based on the national policies on Health-1983 & 2002, National AYUSH Policy- 2002 and strategies for standardization, quality control, research & development and consumers' safety. Growth & development of traditional Indian and homeopathic medicines in the interest of public health is expected within the objective of making accessible safe, effective and quality medicines to the people. Emerging global developments in the area of drug regulation are incorporated for ASU&H medicines in accordance with the national circumstances and regulatory needs of standardization & quality control, research & development, integration in health delivery system and availability of medicinal raw materials.
- 1.2 It is the State Licensing Authorities, who are responsible to implement the provisions of Drugs & Cosmetics Act and Rules for the manufacture and sale of ASU medicines. To strengthen regulatory mechanism and effectively oversee the quality control, action has been initiated to set up a broad-based Central Drug Controller for ASU&H drugs. This will help development of dynamic central-states relation of regulatory authorities to enforce quality standards of ASU&H drugs and ensure public safety from hazardous effects of improper drugs.
- 1.3 Presently, the central agencies for regulation of ASU&H drugs comprise of Department of AYUSH, Drug Controller General, Pharmacopoeia Commission of Indian Medicine, Pharmacopoeia Committees, Pharmacopoeial Laboratories, ASU Drug Technical Advisory Board and Drugs Consultative Committee. Department of AYUSH as Central Government administers the regulatory provisions for ASU medicines and the enforcement lies with the State Governments, for which Licensing Authorities with prescribed qualifications are appointed.
- 1.4 The country has 8896 manufacturing units of ASU&H drugs licensed by the State Authorities. Commercial production of drugs without license is not permitted. Compliance to Good Manufacturing Practices is mandatory for obtaining manufacturing license. Quality standards of identity, purity and strength of drugs and permissible limits of heavy metals, pesticide residue, and microbial load as prescribed in the Pharmacopoeia are mandatory to follow. Drug inspectors, Technical Committees and Drug Testing Laboratories are provided for the Licensing Authorities to take considered and objective decisions in licensing and quality control matters.
- 1.5 In order to provide financial assistance to the States for strengthening their ASU&H drug Regulatory Mechanism, the Centrally Sponsored Scheme for Quality Control of ASU&H Drugs was introduced towards the end of the 9th plan with an outlay of Rs. 40.00 Crores with the approval of Standing Finance Committee (SFC). So far 29 State Drug Testing Laboratories, out of 29 DTLs 2 States i.e. Delhi & Punjab have refunded the grant and 46 State

Pharmacies of Ayurveda, Siddha, Unani and Homoeopathy have been financially assisted. In addition to assistance to States for the above purposes, a provision was also made for providing back ended subsidy to Ayurveda, Siddha and Unani manufacturing units to become Good Manufacturing Practices compliant. The off take under enforcement mechanism and Good Manufacturing Practices component has been rather negligible. Only 30 States took assistance for strengthening of State Drug Enforcement Mechanism and 67 Ayurveda, Siddha, Unani units have been assisted for becoming Good Manufacturing Practices compliant.

2. Objective

- 2.1 To strengthen State Govt. ASU&H Pharmacies and Drug Testing Laboratories
- 2.2 Strengthening of ASU&H regulatory framework.
- 2.3 To improve the Quality of ASU&H Drugs to enable their export in International Markets.

3. Components

3.1 Mandatory Components:-

- a. Grant in aid to State/Govt. ASU&H Pharmacies/ State Govt. ASU&H Cooperatives, State Govt. ASU&H PSU's.
- b. Grant in aid to State Drug Testing Laboratories of Ayurveda, Siddha, Unani and Homoeopathy (ASU&H) Drugs.
- c. Grant-in-aid for strengthening of ASU&H Drug Control Framework.
- d. Grant in aid to State Licensing Authority of ASU&H Drugs for documentation publication and dissemination of quality control material for States.

3.2 Flexible Component:-

IEC activities

4. Administration & Monitoring Mechanism of the Scheme:

- 4.1 State/UT Government where Scheme is implemented will be involved in the monitoring of the Scheme. For this Purpose the committee should be constituted comprising the following members :-
 - a. One Representative of State Government/Drug Controller AYUSH
 - b. One representative from Department of AYUSH at the level of Joint Advisor (Ay.) dealing with Drugs.
- 4.2 The monitoring committee will submit their report to the Department on half yearly basis. In no case monitoring visit will be conducted by less than two members of the monitoring committee

Pattern of Financial Assistance

S. No.	Components	Funding Pattern
Mandatory		
1.	Grant in Aid to New State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Building & Equipment (One-time)	350.00 Lakhs (i.e. 70% of Rs. 500 Lakhs)
	Grant in Aid to New State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Manpower, Reagents, Chemical etc. (Recurring)	150.00 Lakhs (i.e. 30% of Rs. 500 Lakhs)
2.	Grant in Aid to Existing State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Building & Equipment (One-time)	150.00 Lakhs (i.e. 30% of Rs. 500 Lakhs)
	Grant in Aid to Existing State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Manpower, Reagents, Chemical etc. (Recurring)	150.00 Lakhs (i.e. 30% of Rs. 500 Lakhs as Recurring Grant was not provided earlier)
3.	Grant in Aid to New State Drug Testing Laboratories of ASU&H Drugs - Building & Equipment (One-time)	320.00 Lakhs (i.e. 80% of Rs. 400 Lakhs)
	Grant in Aid to New State Drug Testing Laboratories of ASU&H Drugs - Reagents, Chemical etc. (Recurring)	80.00 Lakhs (i.e. 20% of Rs. 400 Lakhs)
4.	Grant in Aid to Existing State Drug Testing Laboratories of ASU&H Drugs - Building & Equipment (One-time)	70.00 Lakhs (i.e. Rs. 320 Lakhs less Rs. 250 Lakhs already provided)
	Grant in Aid to Existing State Drug Testing Laboratories of ASU&H Drugs - Reagents, Chemical etc. (Recurring)	80.00 Lakhs (i.e. 20% of Rs. 400 Lakhs as Recurring Grant was not provided earlier)
5.	Grant in Aid for Strengthening of ASU&H Drugs Control Framework - Advance	20.00 Lakhs per unit as 1st instalment
	Grant in Aid for Strengthening of ASU&H Drugs Control Framework - Remaining	30.00 Lakhs Remaining as 2nd instalment to be paid in next year
6.	Grant in Aid to State Licensing Authority of ASU&H Drugs for documentation publication and dissemination of quality control material for states	8.00 Lakhs per annum
7.	Technical Manpower support for State DTL	25.00 Lakhs per yr, per Laboratory per year for 2 years
8.	Quality Testing of Drugs	5.00 Lakhs per year for testing of 500 survey/ statutory samples in NE States & UTs except Assam
		15.00 Lakhs per year for testing of 1500 drug samples for other States

5. GRANT IN AID TO STATE GOVT. ASU&H PHARMACIES/ STATE GOVT. ASU&H COOPERATIVES, STATE GOVT. ASU&H PSU'S.

5.1 The component provides for strengthening State/U.T.s Government pharmacies of ASU&H drugs. Government of India has notified Good Manufacturing Practices (GMP) for Ayurveda, Siddha & Unani & Homoeopathic drugs. This is aimed to ensure production of good quality medicines for the consumer. There is a legal binding on the pharmacies to implement the GMP requirements. These requirements are:

- a. Receiving and storing raw material.
- b. Manufacturing process areas
- c. Quality control Section
- d. Finished goods store
- e. Office.
- f. Rejected goods/drugs store.
- g. Various sections for manufacturing various categories of drugs.
- h. Other activities.

5.2 Similarly, specific equipment has been identified to manufacture the medicines in good hygienic conditions and cost effective manner. The implementation of GMP under Drugs and Cosmetics Act will require improvement in the existing infrastructure of Ayurveda, Siddha, Unani & Homoeopathic drugs manufacturing units. The State Governments will be supported through strengthening the building and machinery under this component.

5.2.1 Building

5.2.1.1 Office

- a. Raw material store.
- b. Packing material store.
- c. Finished goods store.
- d. Rejected goods store.
- e. Record Section.
- f. Quality Control Section.- For Pharmacognostical, Phytochemical, microbiological testing and other related facilities
- g. Storage facilities
- h. Manufacturing areas

5.2.1.2 Manufacturing Section:

- a. Anjana/Pisti Section.
- b. Churna Section.
- c. Tablet Section.
- d. Kupa Pakva/Furnace/Boiler Section.
- e. Capsules Section.
- f. Ointment Section.
- g. Pak/Avaleh Section.
- h. Syrup/Liquid Section.
- i. Asava/Aristha Section.
- j. Aschyotan/Netra Malham Section.
- k. Khamira Section.
- l. Kajal/Anjan Section.
- m. Others.

5.2.1.3 Quality Control Section

Area required = 10,000 sq. ft. to 20,000 sq. ft.

The State run pharmacy should have building space as shown above. They should clearly indicate in the scheme the existing infrastructure and the renovation/expansion proposed to be taken up.

5.2.2 Machinery & Equipment:

5.2.2.1 The details of pharmacy equipment are given below :-

LIST OF EQUIPMENTS REQUIRED FOR ONE PHARMACY FOR ASU&H DRUGS

SI No.	Name of Equipment's
1.	Kharal/Motorized Kharal.
2.	Generator
3.	Ball-mill sieves
4.	Shifter.
5.	Grinder.
6.	Disintegrator
7.	Pulveriser
8.	Powder mixer
9.	Ball mill
10.	Mass mixer
11.	Stainless steel trays.
12.	Driers
13.	Granulator drier
14.	Tablet compressing machines and sugar coating.
15.	Bhatt
16.	Electric muffle furnace.
17.	End/Edge runner
18.	Air conditioner
19.	De-humidifier
20.	Hygrometer. (Digital)
21.	Capsule filling machine
22.	chemical balance
23.	Tube filling machine
24.	Ointment mixer
25.	Tinctum press
26.	Bottle washing machine
27.	Filter press
28.	Gravity filter liquid filling tank with tap
29.	Gravity liquid filling machine
30.	P.P. copping machine
31.	Fermentation tanks container
32.	Distillation Plant.
33.	Maceration tank.
34.	Hot air oven. .
35.	Tube filling equipment.
36.	Autoclavee (Horizontal)

37.	Hammering machine No. II.
38.	Juice machine.
39.	Multi punches/Tablet machine.
40.	Vial sealing machine.
41.	Bottle cap sealing machine.
42.	Hydraulically operated pallet trucks.
43.	Dust extraction equipment
44.	Wet grinder.
45.	Reusable fiber board containers with ring seal.
46.	Instant boiler for steam generation.
47.	Weighing machines.
48.	Automatic Water Filling Unit (Bottle washing, grind automatic filling, capsules sealing, label pasting). - Approximate capacity 1 lakh bottle per day.
49.	Fermentation Unit- automatic temperature & pH control, estimation of alcohol (2000 4000 capacity).
50.	Steam Boiler Unit
51.	High Speed Laboratory Tablet Coating machine
52.	Capsule filling machine (Semi-automatic)
53.	Fermentation tanks (2000-5000 litres) 20 nos
54.	Double ball steam jacket, boiling pant - 5 nos.
55.	Any other item related to the pharmacy.

5.2.2.2 Total financial implications:

S. No.	Component	Funding pattern
1.	Grant in Aid to <u>New</u> State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Building & Equipment (One-time)	350.00 Lakhs (i.e. 70% of Rs. 500 Lakhs)
	Grant in Aid to <u>New</u> State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Manpower, Reagents, Chemical etc. (Recurring)	150.00 Lakhs (i.e. 30% of Rs. 500 Lakhs)
2.	Grant in Aid to <u>Existing</u> State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Building & Equipment (One-time)	150.00 Lakhs (i.e. 30% of Rs. 500 Lakhs)
	Grant in Aid to <u>Existing</u> State Govt. ASU&H Pharmacies/ State Govt. ASU&H Co-operatives, State Govt. ASU&H PSUs - Manpower, Reagents, Chemical etc. (Recurring)	150.00 Lakhs (i.e. 30% of Rs. 500 Lakhs as Recurring Grant was not provided earlier)

5.2.3 Working Capital:

The State/U.T. governments will ensure to provide working capital, raw material etc., to make the unit to achieve higher production capacity as soon as the building/equipment is procured with the help of Central Government assistance.

5.2.4 Manpower

State/U.T governments will ensure to undertake to bear the cost of manpower to run the additional machinery.

5.2.5 Eligibility to get the assistance:

- a. State Governments/U.T's/Universities/institutions will be eligible. The applicant's will give an undertaking to continue the scheme with their resources after *getting* assistance from Government of India.
- b. Ayurveda, Siddha, Unani & Homoeopathy Co-operatives/corporations pharmaceutical units with majority share of Government & Research Councils of Govt. of India pharmacies will also be eligible, provided they are recommended by the State Government/UT. In such cases funds will be directly released to the institutions.
- c. ASU & H Pharmacies which have availed grant under old scheme will also be eligible for additional amount as per the revised new scheme provided they have fully utilized earlier grant of Rs.2.00 crore and have acquired full production capacity.

PROFORMA-1

PROFORMA OF APPLICANT FOR GRANT IN AID TO STATE GOVT. ASU&H PHARMACIES/ STATE GOVT. ASU&H COOPERATIVES, STATE GOVT. ASU&H PSU'S.

1. Name and address of the State Government/Directorate of AYUSH (along with email, tel. No., fax no's.) or other institution:
2. Name of the in-charge of the Pharmacy (with qualification)
3. Place of Pharmacy with full address (Name of the Incharge)
4. Year of establishment of Pharmacy
5. Annual Budget
6. Covered area available for laboratory and various sections for Ayurveda, Siddha, Unani & Homoeopathy Pharmacy
7. Present activity of Pharmacy
8. Turnover of Pharmacy (give details for the last 2 years)
9. Existing manpower (with designations & qualifications)
10. Details of major existing equipment/machineries (this may be furnished in details in separate sheet)
11. Requirement of funds from Central Government (please use separate sheet)
 - (a) Building (specify with justification & map):
 - (b) Equipment with specification and justification and approximate cost:
 - (c) Manpower (with qualifications and nature of duties):
12. Total fund requirement from Central Government for (a), (b) and (c).

13. Contribution of the State Government/institution.
14. Willingness of the State Directorate to run the Pharmacy after availing the Central Government assistance.
15. Please specify how the infrastructure created shall be used for the scheme.
- 16- Whether any assistance has been received from any other Department of Central/ State/ UT Government for similar scheme. If so" please specify and attach a certificate.
17. How State Government Organization propose to increase annual turnover of Ayurveda, Siddha, Unani & Homoeopathy drugs.
18. How are the accounts of Organization being audited (Govt. Auditors/Chartered Accountant)
19. Name of the Schedule Bank where accounts are maintained
20. Names of two offices bearers responsible for jointly operating the accounts
21. Any other relevant information justifying the request for financial assistance under the Scheme.
22. No. of ASU&H drugs manufacturing units in the State.
23. Recommendation of the Director, Department of ASU&H State Government UTs or the Controlling Officer of the Organization.
24. In case of other institution - recommendation of Head of the institution / registrar of University

Signature,
Name, Designation of the Head of the Institution/Registrar of university
Tel/Fax No. with Office Seal.

6. GRANT IN AID TO STATE DRUG TESTING LABORATORIES OF AYURVEDA, SIDDHA, UNANI AND HOMOEOPATHY (ASU&H) DRUGS.

The component provides for strengthening of State/U.T.s Government Drug Testing Laboratories (DTLs) for testing of Ayurveda, Siddha, Unani & Homoeopathy drugs.

7. Objectives:

- 7.1 To strengthen Ayurvedic, Siddha, Unani and Homoeopathic State Drug Testing Laboratory for quality control and assurance to meet the requirements of Drugs and Cosmetics Act 1940 and rules there under.
- 7.2 To improve access to the drug testing facilities and expand the services and support systems like training of personnel involved in quality control and to provide guidance and help to the manufacturing industries in educating them about procedures for producing quality drugs as well as to set up in-house quality laboratories.
- 7.3 These laboratories will also cater to private drug manufacturers on quality assurance of the products on payment basis.
- 7.4 These laboratories need to be staffed with qualified scientific personnel supported by modern testing equipment. Long term objectives of the proposal are:
 - a. To make available the drug testing facilities for ASU&H drug throughout the country.
 - b. To ensure the quality of the drugs of these systems in conformity with the Drugs and Cosmetics Act 1940 and rules thereunder.
 - c. To check the production and marketing of sub-standard drugs.
 - d. To create awareness among the public about the quality of ASU&H drugs and restore public faith' in the genuine drugs available in the country.
- 7.5 The state laboratories will be responsible for statutory testing/analysis of Ayurveda, Siddha, Unani & Homoeopathy drugs provided by the Drug Control Authorities and submit the report thereon to the State Drug Control Authorities of AYUSH.
- 7.6 The big states like Maharashtra, Uttar Pradesh, Rajasthan, Madhya Pradesh etc. can establish more than one Drug Testing Laboratory if required.

8. INFRASTRUCTURE REQUIREMENT:-

8.1 Building Requirement:

To carry out the drug testing activities relating to Ayurveda, Siddha, Unani & Homoeopathic drugs, the following building components are required:

- | | |
|--|------------------------|
| 1. State Drug Analyst and Admn. Office | 200 x 2 = 400 sq. ft. |
| 2. Drug Sample Store (Strong Room) | =200 sq. ft. |
| 3. Chemistry Laboratories | 600 x 2 = 1200 sq. ft. |

4. Pharmacognosy/Botany Labs.	600 x 2 = 1200 sq. ft.
5. Instrumentation Room	= 500 sq. ft.
6. Ayurveda/Siddha/Unani/Homoeopathy Section	= 500sq. ft.
7. Store/Miscellaneous	
8. Animal house/etc.	
9. Microbiology section	= 2000sq.ft
Total	= 6,000 sq.ft.

For renovation or expansion of DTL building, tables, Fixture, Rack, Cooler/AC etc. per lab.

8.2 Human Resource Requirement For Drug Testing Laboratory:

8.2.1 Botany/Pharmacognosy Laboratory:

- Scientific Officer (M. Pharma/Ph.D) or B.Pharma/M.Sc.
- Analyst/Lab. Technician (B.Sc.)

8.2.2 Chemistry Section:

- Scientific Officer (M. Pharma / Ph. D) or B.Pharma/M.Sc.
- Analyst/Lab. Technician (B.Sc.)

8.2.3 AYUSH Section:

- Scientific Officer (Ay./S/U/H)
M. D (Rasashastra/Dravyaguna/Kusta Devasaj/pharmacy of ASU&H/Materia-Medica of Homoeopathy).
or
B.A.M.S./B.S.M.S./B.U.M.S./B.H.M.S.
- Lab Attendant
- Safaiwala

8.2.4 Micro-biology & Toxicology Section:

One expert with M.Sc./Ph.D/PG. in the concerned subject.

Note: As regards emoluments for contractual scientific manpower for Drug Testing Laboratory emoluments for Scientific Officer/ Analyst/ Lab. Technician etc. have been included. For Ph.D./M.D.(ASU&H)/M. Pharma/M. Tech. @ RS.25,000 + HRA PM., for M.Sc./B.A.M.S. @ Rs.20,000 PM + HRA, for B.Sc. @' Rs.15,000 PM + HRA per month have been indicated.

8.3 Equipment:-

Maximum Amount for Equipment component - Rs.320.00 Lakhs (80% of Total Grant-In-aid of Rs. 400.00 lakhs)

The details of the recommended DTL equipment's are as under:-

8.4 LIST OF EQUIPMENTS REQUIRED FOR ONE DRUG TESTING LABORATORY FOR ASU & H

S.No. CHEMISTRY SECTION

1. Alcohol determination apparatus complete
2. Volatile oil determination apparatus
3. Boiling point determination apparatus
4. Melting point determination apparatus
5. Refractometer
6. Polarimeter
7. Viscineter (sowalds, Redwood viscometer)
8. Tablet disintegration apparatus
9. Moisture determination apparatus (IC filtrator)
10. UV Spectro-photometer
11. Muffle furnace
12. Electric balance
13. Hot air oven(s) different range of temperature/ vacuum oven
14. Refrigerator
15. Glass/Steel distillation apparatus
16. Water supply demineralized exchange equipment
17. Air conditioner for sophisticated equipment
18. L.PG. Gas Cylinder with burners
19. Electric Water bath (temperature controlled)
20. Heating mantle
21. TLC apparatus with all accessories
22. Sieve size 10 to 120 with sieve shaker
23. Centrifuge machine
24. De-humidifier
25. Bench Top pH meter
26. Limit test apparatus (As Pb, heavy metals)
27. Microphotography scope
28. H.P.T.L.C. (High Profile Thin Layer Chromatography)
29. H.P.L.C. (Computer controlled) with Didavway detector
30. G.L.C. with F.1. Detector
31. Atomic absorption Spectrophotometer
32. Computer with PC etc. (on need basis)
33. Tablet Dissolution tester
34. Tablet Friability tester

S.No. PHARMACOGNOSY

1. Microscope Binocular (1) Zics.
2. Dissecting microscope
3. Rotary Microtome
4. Chemical balance

5. Micro slide cabinet
6. Aluminium slide trays
7. Hot air oven
8. Occular micrometer
9. Stage micrometer
10. Camera Lucida Prism type and mirror type
11. Hotplate (4)
12. Refrigerator
13. L.PG. Cylinder with burners
14. Other important equipment's, machineries, material and supplies as per requirements.
15. Generator.
16. Any other items related to the Laboratory.

S.No. MICROBIOLOGY SECTION

1. Laminar Air Flow Bench
2. BOD Incubator
3. Plain Incubator
4. Serological Water bath
5. Oven
6. Autoclave / Sterilizer
7. Microscope (High power)
8. Colony Counter
9. Other related Equipment and reagents

8.5 Total Financial implications

S. No.	Component	Funding pattern
1.	Grant in Aid to New State Drug Testing Laboratories of ASU&H Drugs - Building & Equipment (One-time)	320.00 Lakhs (i.e. 80% of Rs. 400 Lakhs)
	Grant in Aid to New State Drug Testing Laboratories of ASU&H Drugs - Reagents, Chemical etc. (Recurring)	80.00 Lakhs (i.e. 20% of Rs. 400 Lakhs)
2.	Grant in Aid to Existing State Drug Testing Laboratories of ASU&H Drugs - Building & Equipment (One-time)	70.00 Lakhs (i.e. Rs. 320 Lakhs less Rs. 250 Lakhs already provided)
	Grant in Aid to Existing State Drug Testing Laboratories of ASU&H Drugs - Reagents, Chemical etc. (Recurring)	80.00 Lakhs (i.e. 20% of Rs. 400 Lakhs as Recurring Grant was not provided earlier)
3.	Technical Manpower support for State DTL	25.00 Lakhs per yr, per Laboratory per year for 2 years

If Grant already availed the same amount will be deducted from grant in aid released under NAM.

8.6 Eligibility:

- a. All State Governments and (U.Ts are eligible to establish and strengthen their existing DTL for ASU&H Drugs.
- b. University laboratories and other national eminent laboratories of government & Research Councils, accredited by Department of AYUSH under the scheme will also be eligible. In this category, Laboratories already working on ASU&H drug testing etc. will be considered after visiting them.

- c. State DTL(AYUSH) laboratory which have already availed assistance will also be eligible for additional grant upto the total new permissible grant under the scheme provided they have used earlier grant of Rs.150.00 lakhs and the laboratory is functional.
- d. Not more than two Drug Testing Laboratories per state shall be supported and the funds earlier given to state laboratories will be deducted from the grant.
- e. Depending upon the number of drug samples tested in a year in a state, as a special case, more than one laboratory for AYUSH in a State could be considered under the scheme.

PROFORMA-2

PROFORMA OF APPLICANT FOR GRANT IN AID TO STATE DRUG TESTING LABORATORIES OF AYURVEDA, SIDDHA, UNANI AND HOMOEOPATHY (ASU&H) DRUGS

1. Name and address of the State Government/Directorate of ISM&H (alongwith email, tel no., fax nos.) or other institution:
2. Name of the Incharge of the Lab. (with qualification)
3. Place of Laboratory with full address (Name of the Incharge)
4. Year of establishment of Laboratory
5. Annual Budget
6. Covered area available for laboratory and various sections for Ayurveda, Siddha, Unani & Homoeopathy Drug Testing
7. Present activity of laboratory
8. Types of tests performed with the number of samples per annum (give details for the last 2 years)
9. Existing manpower (with assignments & qualifications)
10. Details of major existing equipment/machineries (this may be furnished in details in separate sheet)
 - i) Requirement of funds from Central Government (please use separate sheet)
 - (a) Building (specify with justification & map):
 - (b) Equipment with specification and justification and approximate cost:
 - (c) Manpower (with qualifications and nature of duties):
12. Total fund requirement from Central Government for (a), (b) and (c).
13. Contribution of the State Government/institution
14. Willingness of the State Directorate to run the DTL after availing the Central Government assistance
15. Please specify how the infrastructure created shall be used for the scheme
16. Whether any assistance has been received from any other Department of Central/ State/UT Government for similar scheme. If so, please specify and attach a certificate.
17. How State Government Organization propose to increase the number of sample Testing of Ayurveda, Siddha, Unani & Homoeopathy drugs.
18. How are the accounts of Organization being audited (Govt. Auditors/Chartered Accountant)
19. Name of the Schedule Bank where accounts are maintained

20. Names of two offices bearers responsible for jointly operating the accounts
21. Any other relevant information justifying the request for financial assistance under the Scheme.
22. No. of ASU&H drugs manufacturing units in the State.
23. Recommendation of the Director, Department of ISM&H' State Government UTs or the Controlling Officer of the Organization.
24. In case of other institution - recommendation of Head of the institution/registrar of University

Signature,

Name,

Designation of the Head of the Institution/Registrar of university

Tel/Fax No. with Office Seal.

9. STRENGTHENING OF ASU&H DRUG CONTROL FRAMEWORK

9.1 With a view to encourage further strengthening ASU&H Drug Control Framework in the States, it is proposed to provide an annual financial assistance of Rs.20.00 lakhs per unit as Ist instalment and 30.00 lakhs per unit as IInd instalment for the duration of the 12th Plan only. Expenditure incurred on the following items would be reimbursed:

- i. Purchase of vehicle (Two Wheelers) for State AYUSH Drug Inspectors for Unit Survey and collection of Drug Samples.
- ii. Expenditure on computerization of office of AYUSH Drug Controller/ Licensing Authority.
- iii. Expenditure on collection of statutory / survey samples (maximum Rs. 2.00 lakh per annum).
- iv. Expenditure on training of technical staff at Pharmacopoeial Laboratory for Indian Medicine (PLIM) / HPL / NABL as per approved cost norms.

9.2 The above expenditure will be made subject to the condition that there should be a functional Drug Testing Laboratory and a separate functional Enforcement Mechanism for ASU&H drugs and further that concerned States will prepare a data base of manufacturing units and their products and introduce dossier based licensing system for ASU&H medicines and also submit medicinal plants consumption/supply data of units in their States to the National Medicinal Plants Board and undertake minimum number of per unit drug testing as mentioned above. Support for engaging necessary regulatory manpower in State ASU&H Licensing Authorities/Drug Controllers be included in flexible component.

9.3 The grantee institute/State Govt. may apply in the following performa - 3 for seeking grant-in-aid under the Mission.

10. Funding Pattern:-

S. No.	Components	Funding Pattern
1.	Grant in Aid for Strengthening of ASU&H Drugs Control Framework - Advance	20.00 Lakhs per unit as Ist instalment
2.	Grant in Aid for Strengthening of ASU&H Drugs Control Framework - Remaining	30.00 Lakhs Remaining as IInd instalment to be paid in next yea

PROFORMA -3
APPLICATION FORM FOR GRANT-IN-AID FOR STRENGTHENING OF ASU&H
DRUG CONTROL FRAMEWORK

1. Name and address of the State Government/ Directorate of ISM&H (alongwith Tel, fax No.)
2. Details of Organization set up of Functional State Licensing Authority of ISM&H.
3. Infrastructure:
 - (a) Existing manpower and their qualifications (attach in separate sheet).
 - (b) Existing building and equipments (Computer etc.)
 - (c) Number of Drug Inspectors and their qualifications.
4. Number of licensed Ayurvedic, Siddha, Unani and Homoeopathy Pharmacies in the State.
5. Number of Government Drug Testing Laboratories and other approved Private Drug Testing Laboratories.
6. Number of survey samples collected & tested and prosecuted under the Drugs and Cosmetics Rules during last year.
7. Statutory samples collected, tested and prosecuted under the Drugs and Cosmetics Rules during the last year.
8. The status of re-orientation training given to the Drug Inspectors.
9. Number of manufacturing units to whom GMP Certificate is issued.
10. Requirement from Central Government:
 - (a) Provision of (Two Wheelers) for State AYUSH Drug Inspectors.
 - (b) Expenditure on computerization/ fax etc.
 - (c) Expenditure of ASU&H drugs samples to a maximum of Rs.2.00 lakhs.
 - (d) Expenditure on training of enforcement staff by PLIM/HPL/NABL accredited Labs as per guidelines
11. Total funds required from Central Government (From a to d).
12. How State Government/ Organization propose to increase the number of sample testing of ISM&H drugs.
13. How are the accounts of Organization being audited (Govt. Auditors/CA).
14. Name of the Scheduled Bank where accounts are maintained.
15. Name of the two office bearers responsible for jointly operating the accounts.
16. Any other relevant information justifying the request for financial assistance under the Scheme.
17. (i) No. of AYUSH drugs manufacturing units in the State.
(ii) Names of major units and their annual approximate sale.

Signature,
Name & Designation of the
Incharge of Laboratory/
Institution with seal

Recommendation of the Director, Department of AYUSH, State Govt./ UT's or the Controlling Officer of the Organization.

Place:
Designation

Signature, Name,

Tel./Fax No. with Office Seal

Date:

11. GRANT IN AID TO STATE LICENSING AUTHORITY OF ASU&H DRUGS FOR DOCUMENTATION, PUBLICATION AND DISSEMINATION OF QUALITY CONTROL MATERIAL FOR STATES

Grant in aid of Rs.8.00 lakhs to State Licensing Authority of ASU&H Drugs in every year during the 12th Plan for documentation, publication and dissemination of quality control material for each State will be provided to create awareness.

12. Funding Pattern:-

S. No.	Components	Funding Pattern
1.	Grant in Aid to State Licensing Authority of ASU&H Drugs for documentation, publication and dissemination of quality control material for states	8.00 Lakhs per annum

PROFORMA -4

**GRANT IN AID TO STATE LICENSING AUTHORITY OF ASU&H DRUGS FOR
DOCUMENTATION PUBLICATION AND DISSEMINATION OF QUALITY CONTROL
MATERIAL FOR STATES**

1. Name of State Drug Licensing Authority (AYUSH)
with complete address,
Tel. No., Fax, E-mail.
2. Detailed Proposal for seeking grant-in-aid for publication and dissemination of
quality control material for awareness Programme.
3. Any other information
4. Forwarding Authority

Place
Date

(Signature, Name, Designation)

Tel./Fax No. with Office Seal

1. GRANT IN AID FOR TESTING OF SURVEY/STATUARY SAMPLES

1. Grant in aid of Rs.5.00 lakhs per year for testing of 500 survey/statuary surveys in north Eastern States/ UTs.
2. Rs. 15.00 lakh grant in aid will be given per year to other states for testing of 1500 ASU Drug Samples per year.

2. Funding Pattern:-

Components	Funding Pattern
Quality Testing of Drugs	5.00 Lakhs per year for testing of 500 survey/ statutory samples in NE States & UTs except Assam
	15.00 Lakhs per year for testing of 1500 drug samples for other States

PROFORMA -5

GRANT IN AID FOR TESTING SURVEY/STATUARY SAMPLES

1. Name of State
with complete address,
Tel. No., Fax, E-mail.
2. Detailed Proposal for seeking grant-in-aid for testing of 500
survey/statuary samples.
3. Any other information
4. Forwarding Authority
5. Grant required.
6. Justification

Place
Date

(Signature, Name, Designation)

Tel./Fax No. with Office Seal

NATIONAL AYUSH MISSION

Operational Guidelines

MEDICINAL PLANTS



**Department of AYUSH
Ministry of Health & Family Welfare
Government of India**

NATIONAL AYUSH MISSION OPERATIONAL GUIDELINES FOR MEDICINAL PLANTS

1. PREAMBLE

- 1.1 Medicinal Plants form the major resource base of our indigenous health care traditions. The outreach and acceptability of AYUSH systems, both nationally as well as globally, are dependent on uninterrupted availability of quality medicinal plants based raw material. More than 90% of the species used in trade continue to be sourced from the wild of which about 2/3rd are harvested by destructive means.
- 1.2 The Cultivation of medicinal plants, therefore, is the key to meeting the raw material needs of the AYUSH industry besides offering opportunities for higher levels of income, crop diversification and growth of exports. Indian exports of medicinal plants and herbs are mostly in the form of raw herbs and extracts and account for almost 60-70% of the current exports of herbal/AYUSH products. The export of value added items require product development, setting up of processing facilities, quality assurance and brand promotion. Increasing concerns of unsustainable collection from the wild, disappearance of certain species on the one hand and concerns of quality and standardization on the other make it imperative to promote cultivation of species critical to AYUSH systems of medicine through appropriate financial incentives, policy, infrastructural and marketing support in a synergistic manner.

2. NEED AND JUSTIFICATION

- 2.1 With more than 95% of the AYUSH products being plants based, the raw material base needs to be shifted from forests to the cultivated source for its long term sustainability.
- 2.2 The global trade requires products of standardized phyto-chemical composition free from heavy metals, and other toxic impurities and certified to be organic or Good Agricultural Practices (GAP) compliant. This is possible only through the cultivation route where the chain of custody regime is easier to maintain.
- 2.3 Indian share of the world herbal trade is about 17%. Even here, the export of herbal products is largely in the form of raw herbs with 2/3rd of the export basket comprising raw herbs and extracts. This needs to change considering the US\$120 billion herbal market. It is for this reason that the scheme provides

for support to value addition and processing linked to the clusters of cultivation of selected plants that are in demand by the AYUSH industry and export.

3. NATIONAL MEDICINAL PLANTS BOARD

3.1 The National Medicinal Plants Board (NMPB) was set up through a Government Resolution notified on 24th November 2000 under the Chairmanship of Union Health & Family Welfare Minister. The objective of establishing the Board was to establish an agency which would be responsible for coordination of all matters relating to medicinal plants, including drawing up policies and strategies for conservation, proper harvesting, cost-effective cultivation, research and development, processing, marketing of raw material in order to promote and develop this sector. This was considered necessary as medicinal plants as a subject is handled by different Ministries/Departments like Environment & Forests, Agriculture, Science & Technology and Commerce. The Board, therefore, has the function of co-ordination with Ministries/Department/Organizations/State/UT Governments for development of medicinal plants in general and specifically in the following fields: -

- i) Assessment of demand/supply position relating to medicinal plants both within the country & abroad.
- ii) Advice concerned Ministries/Departments/Organisations/State/UT Governments on policy matters relating to schemes and programmes for development of medicinal plants.
- iii) Provide guidance in the formulation of proposals, schemes and programmes etc. to be taken by agencies having access to land for cultivation and infrastructure for collection, storage transportation of medicinal plants.
- iv) Identification, inventorization and quantification of medicinal plants.
- v) Promotion of *ex-situ* and *in-situ* cultivation and conservation of medicinal plants.
- vi) Promotion of co-operative effort among collectors and growers and assisting them to store, transport and market their produce effectively.
- vii) Setting up of database system for inventorisation, dissemination of information and facilitating the prevention of Patents being obtained for medicinal use of plants which is in the public domain.
- viii) Matter relating to import/export of raw material, as well as value added products either as medicine, food supplements or as herbal cosmetics

including adoption of better techniques for marketing of products to increase their reputation for quality and reliability in the country and abroad.

- ix) Undertaking and awarding Scientific, technological research and cost-effectiveness studies.
- x) Development of protocols for cultivation and quality control.
- xi) Encouraging the protection of Patent Rights and IPR.

3.2 In terms of the Cabinet Resolution of November 24, 2000 and the Cabinet Committee on Economic Affairs approval communicated vide Cabinet Secretariat's O.M. No. CCEA/23/2008 (I) dated 25th July, 2008, the composition of the Board is as under:-

- (a) Minister of Health & Family Welfare - Chairman
- (b) Minister of State, Health and Family Welfare - Vice Chairperson
- (c) Secretaries - Ministries/Departments of AYUSH, Environment & Forests, Scientific & Industrial Research, Bio-technology, Science & Technology, Commerce, Industrial Policy & Promotion, Expenditure, Agriculture & Cooperation, Agriculture Research & Education, Tribal Affairs, Tourism, Development of North Eastern Region.
- (d) Four nominated members having expertise in the field of medico-ethno-botany, pharmaceutical industry of ISM, marketing and trade, legal matters and patents.
- (e) Four nominated members representing exporters of ISM & H drugs, NGOs responsible for creating awareness and increasing availability of medicinal plants, growers of medicinal plants, research and development industry groups in the area of medicinal plants.
- (f) Two nominated members representing federations/co-operatives dealing with medicinal plants.
- (g) One member from Research Councils of Department of AYUSH, one member from Pharmacopoeial Laboratory of Indian Medicines/ Homoeopathic Pharmacopoeia Laboratory, Ghaziabad and two members representing State Governments (by rotation every two years).
- (h) Chief Executive Officer as Member Secretary in the rank of Joint Secretary to the Government of India.

3.3 During the 10th Plan the National Medicinal Plants Board (NMPB) implemented a Central Sector Scheme of "Setting up Medicinal Plants Board". During the 11th Plan, however, the Central Sector Scheme was modified to give sharper focus on promotional activities like resource augmentation, in-situ conservation, research

and development, ex-situ conservation of rare and endangered species, support to Joint Forest Management Committees for value addition/warehousing, capacity building and training of primary collectors and forest dwellers in good collection and sustainable harvesting practices etc. The scheme, was renamed as the “Central Sector Scheme for Conservation, Development and Sustainable Management” and was approved with the 11th Plan outlay of Rs. 321.30 crores. The component relating to commercial cultivation was taken out of the pre-revised Central Sector Scheme and formulated into a new scheme which sought to integrate cultivation with pre and post harvest activities, like, development of nurseries for quality planting material, cultivation of species in demand by the ASU industry, support for post harvest management, marketing, improvement of marketing infrastructure, organic/GAP certification, quality assurance and crop insurance. These components were incorporated in a new Centrally Sponsored Scheme of National Mission on Medicinal Plants, which was sanctioned during 2008-09 at an outlay of Rs. 630.00 crores for the 11th Plan.

3.4 The scheme is continued in the 12th Plan with some modifications based on experiences gained during its implementation as well as based on independent third Party evaluation.

4. Development and cultivation of medicinal plants under the Centrally Sponsored Scheme of National AYUSH Mission

Under NAM this component has been approved with a total outlay of Rs. 822 crores for implementation during the 12th Plan. The Central Government contribution will be 100% in the North East and hill states while The Central and State Government contribution will be 90:10 for the remaining states.

5 OBJECTIVES

5.1 Support cultivation of medicinal plants which is the key to integrity, quality, efficacy and safety of the AYUSH systems of medicines by integrating medicinal plants in the farming systems, offer an option of crop diversification and enhance incomes of farmers.

5.2 Cultivation following the Good Agricultural and Collection Practices (GACPs) to promote standardization and quality assurance and thereby enhance acceptability of the AYUSH systems globally and increase exports of value added items like herbal extracts, phyto-chemicals, dietary supplements, cosmeceuticals and AYUSH products.

- 5.3 Support setting up processing clusters through convergence of cultivation, warehousing, value addition and marketing and development of infrastructure for entrepreneurs to set up units in such clusters.
- 5.4 Implement and support certification mechanism for quality standards, Good Agriculture Practices (GAP), Good Collection Practices (GCP), and Good Storage Practices (GSP).
- 5.5 Promote partnership, convergence and synergy among stake holders involved in R&D, processing and marketing in the public as well as private sector at national, regional, state and sub state level.

6 STRATEGY

- 6.1 To adopt an end-to-end approach covering production, post harvest management, processing and marketing. This will be achieved by promoting cultivation of medicinal plants in identified clusters within selected districts of states having potential for medicinal plants cultivation and to promote such cultivation following Good Agricultural and Collection Practices (GACPs) through synergistic linkage with production and supply of quality planting material, processing, quality testing, certification, warehousing and marketing for meeting the demands of the AYUSH industry and for exports of value added items.
- 6.2 To promote medicinal plants as a crop alternative to the farmers and through increased coverage of medicinal plants and with linkages for processing, marketing and testing, offer remunerative prices to the growers/farmers. This will also reduce pressure on forests on account of wild collection.
- 6.3 To adopt communication through print and electronic media as a strong component of its strategy to promote integration of medicinal plants farming in the agriculture/horticulture systems with emphasis on quality and standardization through appropriate pre and post harvest linkages.
- 6.4 To promote and support collective efforts at cultivation and processing in clusters through Self Help Groups, growers cooperatives/associations, producer companies and such other organizations with strong linkages to manufacturers/traders and R&D institutions.

7 IMPLEMENTATION STRUCTURE

- 7.1 As indicated in the framework for implementation. In addition, National level institutional structure also will have the following:-

7.1.1 Technical Screening Committee (TSC)

Secretary (AYUSH) will have the powers to constitute Technical Screening Committee and nominate Chairman for scrutiny of Action Plan/project proposals received under different activities under the component. The committee will comprise of domain experts in the relevant field and may also include representative from one or more of the following organizations/Ministries:

- a. Representative from National Horticulture Board
- b. Representative from ICAR
- c. Representative from CSIR
- d. Representative from Department of AYUSH
- e. Representative of Secretary, North Eastern Council, Shillong
- f. Domain experts nominated by Secretary (AYUSH) - Two
- g. Representative from National Medicinal Plants Board-Member Secretary

Selection of agency to implement the component in States

7.2 The State Government may designate the Mission Director, State Horticulture Mission as the State implementation agency. In states, which are not covered under the National Horticulture Mission, the State Government may designate the State Agriculture Department as the nodal department for implementation. The funds will be released through the State AYUSH Societies to enable timely flow of funds for implementation of the projects. Alternatively the state government may select the State Medicinal Plants Board (SMPB) as the implementation agency in which case funds will be given to the SMPBs through State AYUSH Society. The states shall choose the most efficient and effective agency available in the state to implement this component.

7.3 The State Horticulture Mission, if designated as the State level implementation agency by the State Government, will implement the component in coordination with the Agriculture, AYUSH, industries department and SMPB and would have to be registered as a Society. It should also have the functional autonomy to receive funds and implement the component. The Panchayati Raj Institutions would be fully involved in identifying the agency for implementation at the district level and in identification of clusters and organizing growers into SHGs/cooperatives/ associations and producer companies. The

implementation agency will be working through State AYUSH Society or any other appropriate mechanism put in place by the State.

7.4 There will also be a Technical Screening Committee at the state level consisting of domain experts to appraise the proposals. The states will have the flexibility to adopt the appropriate model viz. Cooperatives, Federations, Forest Development Corporations, Joint Sector Companies for processing, warehousing, marketing etc. Wherever possible linkages will be developed with State Horticulture Mission in identification of clusters for cultivation and development of infrastructure of Post Harvest Management facilities like warehouses, marketing yards, drying sheds, testing labs and setting up of processing industries. The State Level implementation agency will have the following functions:

- (i) Prepare perspective and annual action plan with the technical support from a “Technical Support Group” at the state level with members from State Agriculture Universities, Facilitation Centres, ICAR, ICFRE, CSIR Institutions, and other experts in the field to oversee its implementation.
- (ii) Receive funds from the State Government for carrying on the activities, maintain proper accounts thereof and submit utilization certificate to the concerned agencies.
- (iii) Release funds to the implementing organizations like SHGs, cooperatives of growers, growers associations, producer companies responsible for different clusters and oversee, monitor and review the implementation of the programmes.
- (iv) Organise base-line survey and feasibility studies in different parts (District, sub-District, or a group of Districts) to determine the status of medicinal plants, its potential and demand, and tailor assistance accordingly. Similar studies would also be undertaken for other components of the programmes.
- (v) Assist and oversee the implementation of the component in different clusters selected with reference to their agro-climatic suitability for growing medicinal plants through farmers, Societies, NGOs, Growers, Associations, Self-Help Groups, State Institutions and other similar entities. The State implementation agency shall also be responsible for mobilizing growers to form SHGs/ Cooperatives/ Federations, producer companies and financial assistance will be available for promoting these grass root level

organizations, which may include the training and other incidental expenses like engaging animators etc.

(vi) Organise workshops, seminars and training programmes for all interested groups/associations at the State level, with help of the Facilitation Centres set up in State Agriculture Universities and ICAR/ICFRE/CSIR Institutions and other organisations having technical expertise.

7.5 At the district level, the component will be coordinated by the District Mission Committee (DMC) of the National Horticulture Mission in states where implementation is through the Horticulture Department. If implemented through the Agriculture Department, the District Mission Directorate will be registered as a society with Deputy Director (Agriculture)/District Agriculture Officer as its head. The District Mission Committee (DMC) will be responsible for project formulation and monitoring. The DMC will have representatives from concerned line Departments, Grower's Associations, Marketing Boards, Industries, Departments, Self Help Groups (SHGs) and other Non-Governmental Organisations as its members. The District Planning Committee and Panchayati Raj Institutions will be integrated/ involved in implementation of the programme as per the choice and discretion of the State Government.

7.6 The State implementation agency may also consider implementing the scheme in selected clusters by directly involving reputed NGOs, cooperatives, state government undertakings, growers associations, producer companies, self help groups without the requirement of routing the proposals through district level implementation agency. In that case, the project report of different organizations/clusters will be consolidated into the State Action Plan and submitted to the NMPB for its consideration. Organizations like Krishi Vigyan Kendras (KVKs) and Agriculture Technology Management Agencies (ATMAs) could also be involved in planning, implementation and monitoring at the district level and below for selected clusters. In such cases, the funds can also be released to the cluster level implementation agency directly without routing them through the District level agency.

7.7 The institutional arrangement for implementing the major activities under the component at the cluster/zone level i.e. technology dissemination, quality planting material, cultivation, post harvest management and marketing will vary depending upon the organizations/institutions present in the state covered under the programme. All the activities related to cultivation, processing,

marketing, quality assurance and certification in different clusters will be consolidated at the State level for better synergy between the Mission activities. State Governments are free to choose their own model, create or orient existing institutions to carry forward the objectives of the Mission in a holistic manner.

7.8 Linkages with other Schemes

Although the Scheme covers all the activities that are required to be supported for a successful end to end medicinal plants based agri-business, there may still be some components which can be dovetailed into the Action Plan from other Schemes of the other Ministries/ Departments and State Governments. For instance, components like micro irrigation, application of fertilizer, construction of irrigation tanks, setting up demonstration plots which are not a part of this scheme may be dovetailed from schemes of Ministries/ Departments concerned. This will ensure a convergence of cultivation with pre and post harvest management activities in its totality.

8 INTERVENTIONS

8.1 Support Cultivation of Medicinal Plants

8.1.1 Cultivation of medicinal plants has not taken off in the country, as the raw material sourced from the wild is available at cheaper rates even as it has deleterious effect on their wild populations. To make cultivation lucrative, it is necessary to support the effort - both technically and financially. A programme to support cultivation through subsidy was implemented during the 10th plan period. Whereas the programme has generally resulted in encouraging cultivation of many species of conservation concern and those in high demand by the AYUSH industry, a number of other species used in AYUSH medicine continued to be sourced from the wild. The scheme seeks to support cultivation of more and more species critical to AYUSH systems. The subsidy available for various medicinal plants has been revised so as to direct subsidy towards cultivation of the species required by AYUSH systems and those of conservation concern.

8.1.2 The cultivation is proposed to be done in conjunction with the processing facilities and markets available for medicinal plants. This is proposed to be done in clusters identified by State Governments through individuals, Self Help

Groups, Cooperative Societies of medicinal plants growers. Preference to cultivation in clusters through SHGs, growers, cooperatives, producer companies over individual centric cultivation will ensure targeting of subsidy to the small and marginal farmers. Therefore, small and marginal farmers will be organised into Self Help Groups and cooperative societies of medicinal plants growers or as producer companies to enable them to take up medicinal plants cultivation, which presently they are unable to do. Financial assistance on project basis will also be provided to State implementation agency for mobilizing the Growers cooperatives/ Federations as well as for preparation of cluster specific project reports/business plans to be eventually consolidated into State Action Plan.

- 8.1.3 Project for cultivation must clearly indicate the source of planting material/seed proposed to be used. Only identified seed source or nurseries supplying good quality planting material will be eligible to supply germplasm to growers seeking assistance under the scheme. The State should strive to chalk out a business plan/project report for each cluster. The Action Plan for the state also cover the list of organizations (public sector or private sector) for good quality planting material along with the details of their capacity, infrastructure, species available and being raised, their location etc. While chalking out the plan for availability of planting material the State should also take into account nursery facilities of various department (e.g. Department of Horticulture, Agriculture, Forests , State Directorate for AYUSH / traditional medicines, State Agricultural Universities, KVKs and Central facilities of CSIR, ICAR, ICFRE etc). If any planting material is proposed to be procured from outside the State and the same should also be clearly spelt out. The Annual Action Plans can also include specific provisions for maintaining gene pools / elite planting material / clonal and seedling seed orchards / hedge gardens / gene banks of medicinal plants. Such proposals will be taken from research wings of concerned State Departments / and appropriate State and Central Governments research and extensions wings organizations. These proposals should be included in the Annual Action Plan as specific components with clear cut time frame of operations linked to the seasonality of operation and clearly spelt out outcomes. The component for maintaining elite germ plasm and its evaluation can not be ad hoc one time proposition and therefore can be a part of the perspective plan chalked out by

the state and can be of a rolling nature within two Plan Periods. It is, however, important to understand that only such organizations should be involved in this component where such activity is an integral part of their core mandate so that they are in a position to sustain any such initiative in the long run from their own resources as well.

8.1.4 The cultivation is proposed to be taken up in areas where processing clusters will be set up as well as other areas where clusters for cultivation are identified with proper linkage with manufacturers/markets will also be provided support for cultivation through growers, SHGs, Cooperative Societies of medicinal plants growers, producer companies and corporate.

8.1.5 The species for which subsidy was provided @ 20% of the cost of cultivation will now be 30% and for those species for which subsidy was provided @ ranging from 50% or 75% of cost norms as admissible during the 11th Plan period will continue to be admissible. However, to offset increase in cost of cultivation on account of inflationary pressure, the basic cost norms for computing the subsidy will be as provided in the 11th Plan for such species, with increase of 10% in the cost norm for every successive year action plan, subject to concurrence of SFC. In order to further improve the range and scope of the programme to make it more effective and need based for the States, additional species of medicinal plants and aromatic plants with medicinal value can be grouped into 30%, 50% and 75% subsidy support under the scheme. The details can be seen in **Annexure-I**. The new species will, however, be included for subsidy support under the Scheme after due approval from the Standing Finance Committee (SFC) which will carefully consider the justification and provided cost norms before granting its approval. Once decision has been taken to include a certain species has been taken the SFC can consider 10% rise in cost norms in subsequent years provided funds were not parked idle for raising these species with the State for the previous financial year, in which case considering enhanced support to the farmers to offset inflation will be entirely the responsibility of the State concerned. This will also work as an incentive to discharge idle parking of funds in the State both for cultivation of species already included for cultivation during the 11th Plan or new species to be included during the 12th plan. The SFC can also exclude a species already included for financial support in case it is found that cultivation of this species

does not require further support, or its cultivation is not successful on account of certain factors.

8.2 Establishment of Seed / germ plasm Centers and nurseries for Supply of Quality Planting Material:

8.2.1 Cultivation of medicinal plants and eventual returns from such cultivation is largely dependent upon the quality of planting material used. However, as of now, there is no mechanism of providing quality germplasm or producing quality planting stock on commercial scale.

8.2.2 It is proposed to establish Seed Centres with Research Wing of State Forest Departments/Research Organisations/State Agriculture Universities to stock and supply certified germplasm of priority medicinal plant species for cultivation. Production and supply of seeds and quality planting material through NGOs and Corporates will also be permitted provided the quality can be certified through an accredited certification agency. Such centres would, however, not be set up in ICAR institutions as the latter have provision for such a component under their own schemes which can be used for housing germ plasm related to medicinal plants also.

8.3 Model Nurseries

8.3.1 To meet the requirement of quality planting material for cultivation assistance would be provided for new nurseries under the public as well as private sector. However in the private sector nurseries will be set up in pilot project mode after exercising due diligence and drawing up a strategy for undertaking such pilots. Infrastructure for model nurseries would include the following:

- i) Mother stocks block maintenance to protect from adverse weather conditions.
- ii) Raising root stock seedlings under net house conditions.
- iii) Propagation house with ventilation having insect proof netting in the sides and fogging and sprinkler irrigation systems.
- iv) Hardening/maintenance in insect proof net house with light screening properties and sprinkler irrigation systems.
- v) Pump house to provide sufficient irrigation and water storage.

8.3.2 A model nursery should on average have an area of about 4 hectares and would cost Rs. 25 lacs per unit. The model nurseries which would be established under the Public sector / SHGs will be eligible for 100% assistance

of a maximum of Rs. 25.00 lakhs per unit. The model nurseries would produce 2 – 3 lakhs plants depending upon the input costs and time required for the plant to be fit for planting. It would be the responsibility of the nurseries to ensure quality of the planting material. For model nurseries in the private sector the assistance will be 50% of the cost subject to a maximum of Rs. 12.50 lakhs per unit through public sector banks.

8.4 Small Nurseries

8.4.1 Small nurseries, covering area of about one hectare, will have infrastructure facilities to hold 60,000 to 70,000 plants. These plants will be maintained for a period of approximately 9-12 months. Infrastructure for the small nurseries will consist of a net house. Micro sprinkler irrigation system will be provided in the net house. The nurseries will also have provision for solar sterilization of soil media to meet the contingency requirement of containers/transfer from small to big containers.

8.4.2 Small nurseries would cost Rs. 6.25 lakhs per unit. The assistance will be to the extent of 100% of the cost for the Public sector / SHGs and 50% of the cost subject to a ceiling of Rs. 3.125 lakhs for the nurseries in the private sector through public sector banks. The small nurseries would produce at least 60,000 plants per year.

8.4.3 It would be the responsibility of the nurseries to ensure quality of the planting material. The private nurseries, initially on pilot basis ,will also be encouraged to move towards self accreditation. The nurseries could be multi-crop or crop specific depending upon the requirements of planting material in the locality/project area. Hence, the type of nursery proposed to be established should be clearly indicated in the Action Plan. The Action Plan should also contain an assessment of the existing nurseries, the number of planting material being produced, crop wise and the additional requirement of nurseries. The Cost norms are available at **Annexure-II**.

8.5 Support for Medicinal Plant Processing and Post Harvest Management including Marketing

8.5.1 It is estimated that as high as 30% of the raw material reaching the manufacturers is of poor quality and is, therefore, rejected. Cultivation of medicinal plants, therefore, needs to be supported with infrastructure for ware housing, drying, grading, storage and transportation. These facilities are essential for increasing the marketability of the medicinal plants, adding value to the produce, increasing profitability and reducing losses. APEDA has set up Agri Export Zones (AEZs) for medicinal and aromatic plants in the states of Kerala and Uttarakhand. Based on the experience gained in implementation of AEZs on medicinal plants in these states, the Scheme seeks to support infrastructure for processing and post harvest management in the different regions of the country in identified clusters/zones which are well endowed with infrastructure of marketing/trading centres, have tradition of medicinal plants as a farming option and has R&D institutions/SAUs for technology dissemination and capacity building. While the AEZs scheme implemented by APEDA has primary focus on exports, the present scheme seeks to add value to the medicinal plants cultivated/collected and meet large domestic requirement of the AYUSH industry. Additionally, the species having export market would also be covered with a view to increasing share of value added items in the exports of herbal/AYUSH products. The species targeted for export should be finalized after assessing the export market for such species. The units in the clusters have to be geographically proximate to each other so that all members of the cluster are in the position of easily utilizing the common facilities. The facilities being created would be shared by all shareholders and may be open to others on payment basis. The illustrative list of facilities to be created in the post-harvesting infrastructure is as follows:

- a. **Drying yards:-** Drying yards to accomplish the primary task of drying the products in hygienic conditions. In addition, cleaning and grading infrastructure is an essential activity to be linked to drying to increase the shelf life and the market price of herbs. Since herbs have to be dried in shades, drying yards with shade net provision or facilities for low temperature drying will have to be created.
- b. **Storage godowns:** – The storage godowns is expected to receive produce from nearby drying yards. The storage godowns are a link between drying yards and processing units. Storage godowns have to be adequately ventilated and set up at strategic locations. The storage

godowns and drying yards have to be located in such a manner that they are not very far from the farm lands and cater to the identified clusters of cultivation.

- c. **Processing unit:-** Processing unit based on the medicinal plants grown in the clusters would have to be set up, some of which will be plant specific. The processing unit should preferably be set up within the existing industrial estates, which have the necessary infrastructure of power, road network and linkages with rail head/sea ports.
- d. **Quality testing of raw material:-** Laboratories for testing of raw material and value added items and their certification for domestic consumption as well as exports would be done through the existing accredited laboratories. In the absence of such laboratories in the zone/ clusters new laboratories will be set up, preferably in a PPP Mode.
- e. **Marketing:-** The main objectives of providing assistance under this component are:-
 - i. To strengthen infrastructure of wholesale markets, agriculture mandies for marketing of medicinal plants.
 - ii. To set up herbal collection and retail outlets wherever they do not exist.
 - iii. To strengthen linkages between farmers and industry/traders.
 - iv. To disseminate information on market, prices, market trends to enable farmers in selection of appropriate medicinal crops.

The components admissible for assistance are:

1. **Market Promotion:-** The programmes for market promotion like media promotion, participation in exhibitions, trade fairs, hiring display facilities are project based but limited to Rs. 10 lakhs for each cluster will be eligible for 50% assistance under market promotion for the herbs/raw material produced by the cluster.
2. **Market Intelligence:-** The Action Plan may include collection, compilation and dissemination of market intelligence to growers. Any other innovative activity relating to market intelligence may also be supported under this component. The assistance for this component will be project based.
3. **Buy – back Interventions:-** The buy – back interventions in the form of buyer – seller meetings, flexible and innovative marketing arrangements, Creation of

revolving fund at Cluster level for marketing of medicinal plants, and mobilization assistance to SHGs, cooperatives, producer companies could be provided under this component of the scheme. Any other activity which seeks to strengthen marketing and institutionalize linkage between buyer and seller may be included under this component. The assistance will be project based.

The above mentioned interventions may be proposed under flexible activities under NAM.

4. **Market Infrastructure:-** Under this component herbal collection and retail outlets that are proposed to be set up at the village level can be given assistance up to Rs 20 lakhs. Assistance will also be available for upgradation/creation of infrastructure in the agriculture mandies for trading of medicinal plants wherever such mandies exist at the village level. Similarly, assistance will be provided to District/State agriculture mandies for creating and upgrading physical infrastructure for trading of medicinal plants. Assistance will also be available for setting up herbal mandies at State/District level. The level of financial assistance for collection and retail outlets through village bodies/SHGs/ Cooperatives will be Rs. 20 lakhs and for State/District level collection and retail outlets upto a maximum of Rs. 2 crores.

f. Quality testing, certification and insurance

- i. **Quality Testing:-** The quality testing of herbs/medicinal plants produced by growers is key to realization of remunerative prices. The growers will be entitled to 50% of the testing charges subject to a maximum of Rs. 5000 if the herbs/medicinal plants are tested in AYUSH/NABL accredited Laboratories (may be proposed under flexible activities).
- ii. **Certification:-** Organic and GAP certification are the key to ensuring quality of the medicinal plants/herbs and can secure benefits to farmers through better prices for their produce and to consumer by way of better quality of herbal/AYUSH products. The certification charges will be admissible on a group basis to the limit of Rs. 5 lakhs for 50 hectares of cultivation in groups/clusters.
- iii. **Crop Insurance:-** Medicinal plants are a new activity under farming and, therefore, farmers need to be covered with crop insurance. This component seeks to provide assistance towards payment of 50% of the premium for particular crop. The premium and the details of the scheme

will be finalized in consultation with Agriculture Insurance Corporation (may be proposed under flexible activities).

- 8.6 Detailed project report/business plan will be prepared for each cluster through consultancy firms, which have the core competence in this area, so as to establish synergy between other schemes of the Department of AYUSH and those of other Ministries before implementation of the scheme. The State implementation agency will be permitted to engage Project Management Consultants for preparing business plans/detailed project report for clusters selected for support under the Scheme. In areas outside the designated zones/clusters, support for creating infrastructure like packing, sheds, processing units, testing labs will also be provided if linked to clusters of cultivation. The assistance for units outside the designated clusters area would be provided only to the public sector/farmers cluster/ Panchyat/farmer's cooperatives/producers company. All the projects will be entrepreneur driven based on proper business plan and market surveys. The detailed project/business plan for different clusters will be consolidated into the State Action Plan to be submitted to NMPB. The State implementation agency will also be permitted to engage project management consultant.

9 ELIGIBILITY

9.1 Nursery

- 9.1.1 Government Organisation (State Agriculture/Forest/Horticulture Department)/Government R&D institution / SHGs, ICAR, CSIR, ICFRE, DBT, DST institutions,
- 9.1.2 NGO, Private entrepreneurs, farmers (They would get only 50% of the grant initially on a pilot basis)

9.2 For Cultivation;

- 9.2.1 Growers, farmers, cultivators
- 9.2.2 Growers Associations, Federations, Self Help Groups, Corporate, growers cooperatives.
- 9.2.3 Cultivation will be assisted only in case of clusters. Each cultivation cluster will have minimum 2 hectare of the land. Each cultivation cluster should be drawn from farmers having lands within a radius of not more than 15 km. Assistance will be available to willing farmers desirous of cultivating medicinal plants on the same land in successive years.

9.3 For Post Harvest Management and Processing and Value Addition (including marketing)

- I. SPV formed by at least three (3) enterprises/company/firms/partnership firms/producer's company/traders/ growers / co-operatives engaged in the business of medicinal plants/and their products shall be eligible for funding under the scheme. Minimum two acres of land is required for a SPV and the land should be in industrial estate/zone/park/cluster/area be designated by the competent authority of the State. The SPV may also have common facility units/laboratory on payment basis for members and outsiders. Separate SPV, however, will not be required in case a Public Sector Unit or the State Government plans to establish the processing / value addition
- II. Bank account should be opened in the name of SPV and the members should contribute at least Rs. 5 lakhs as corpus fund to demonstrate their commitment towards the project.
- III. Outside designated support for infrastructure for packaging, drying sheds, processing units shall be provided to only public sector/farmer's cluster/ Panchyat/farmer's cooperatives/producers company linked to cultivation cluster.
- IV. In case of the public sector 100% financial assistance will be provided limited to Rs. 400 lakhs per project which should be appraised by a scheduled bank for feasibility.
- V. 100% financial assistance limited to Rs. 10 lakhs each for constructing drying sheds and storage go-downs as an adjunct to cultivation cluster will be admissible each if set up by SHGs/ Cooperatives of medicinal plants growers.

Assistance for this will be limited to 50% if set up by individuals or the entrepreneurs.

10 PATTERN OF FINANCIAL ASSISTANCE

For Processing facilities and infrastructural support:

- 10.1 Financial assistance @ 30% of the project cost subject to a maximum of Rs. 30 lakhs will be admissible for setting up of quality test labs for testing of raw material and value added products in a PPP mode on the basis of an MoU between organization, State Implementation Agency and NMPB, admissible

under the flexible component. Additionally, financial assistance for market promotion through the media, participation in exhibitions, trade fairs, developing and hiring of display facilities will be available @ 50% of the project cost limited to Rs. 10 lakhs.

- 10.2 The subsidy for value addition, processing and testing facilities is back ended. However, requirement of credit will not be necessary, if the organization, cooperatives, Trusts, corporate, PSUs have surplus funds supported with bank certificates and the organizations are otherwise financially sound and are not in default with any financial institution.
- 10.3 The assistance from the National Medicinal Plants Board will be utilized only for physical infrastructure, civil works, construction of building, plants & machinery and equipments. All remaining expenses on purchase of land of SPV, salary of cluster development executive, joint participation in national and international exhibition, business delegation abroad and brand development etc. will be borne by SPV.

The component-wise pattern of assistance admissible under the scheme is given at **Annexure-III.**

11 INSTITUTIONAL STRATEGY:

- 11.1 The State implementation agency for the Medicinal plants component of the Mission should be such that it has the infrastructure at the district level and below. For this purpose departments like the Horticulture and Agriculture Department may be considered as appropriate as the State level implementation agency. The State Horticultural Mission may, therefore, be designated as the State implementation agency, if considered appropriate, by the State Government. If SMPBs are given the nodal responsibility, the States should appoint full time CEOs of the States Medicinal Plants Boards and it shall be mandatory to register the SMPBs as societies to enable flow of funds in states which do not have State Horticulture Mission.
- 11.2 Also, the states will be required to make Annual action plans and prepare road map for development of the sector. Assistance will be admissible to only those states who prepare the State Action Plan. Those states where processing zones/clusters will be established will have to prepare detailed project

reports/business plans for the identified zones/clusters group of clusters and incorporate specific business plan/project report into State Action Plan.

- 11.3 The National Medicinal Plants Board (NMPB) has set up Facilitation Centres (FCs) in the State Agriculture Universities and R & D Institutions of Ministry of Science & Technology (CSIR/DBT) to act as a service window to growers/farmers and entrepreneurs on technology transfer, capacity building and training, extension and market information on medicinal plants. The State implementation agency should work in close coordination with the Facilitation Centres (FCs) for technical handholding under the Mission. More such centres can be set up, if required in future.

12. PREPARATION AND SUBMISSION OF PROPOSAL

- 12.1 The State Government shall prepare an Annual Action Plan (Annexure-V) for the various activities under the Scheme and after approval at the State Mission level forward the same to the department of AYUSH as a component in the State Annual Action Plan (SAAP). The Action Plan shall contain inter-alia details of nursery, cultivation cluster and units of post harvest management and processing and value addition. The Action Plan may also be sent in a soft copy to the Board.
- 12.2 NMPB shall place the Medicinal Plant component of the Annual Action Plans before the Technical Screening Committee. The Annual Action Plan after screening by the TSC will be placed before the appraisal committee and approving body of NAM which shall accord approval and recommend release of financial assistance to the States through state consolidated funds to the State implementation agency in one or more instalments. The State implementation agency for this purpose shall be registered as societies for NAM under the Societies Registration Act so that the funds could be channelized through it directly for onward release to the District and sub-district/cluster level or to the SHG, Cooperative Society or the producer company at the cluster level as the case may be.
- 12.3 Release of the funds for the approved activities and to the individual farmers/cultivators/groups will be done by the State implementation agency based on the beneficiaries, groups and entrepreneurs identified for various activities in different clusters. The credit linked subsidy may be released after verification of the work in the field in one instalment but after certification by the

bank about the progress achieved on the ground. For long-gestation crops and other project activities the TSC may fix suitable number of instalments as may be required for smooth implementation of the Action Plan. The format for preparing the Action Plan is given at Annexure – V.

- 12.4 The State Implementing Agency may formulate project for marketing under National Mission on AYUSH in accordance with the guidelines at Annexure – VI for consideration of the Technical Screening Committee (TSC) and NAM.

13. MONITORING AND EVALUATION

- 13.1 Term end evaluation will be conducted at the end of the XII Plan. For effective planning and implementation of the activities under the scheme, Programme Management consultants will be permitted to be engaged both at Central and State levels for the duration of the scheme. The Project Management unit shall consist of as many consultants and support staff of data entry operators etc. as may be considered necessary for effective implementation and monitoring of the scheme. Independent concurrent monitoring and evaluation will also be carried out by engaging professional agencies with expertise in the field. The scheme will also be subjected to mid-term evaluation after 3 years of its implementation.

- 13.2 The state-wise physical targets and outlays will depend upon the proposals received from the state Governments and the availability of funds for the purpose. The TSC will have the authority to revise the targets and outlays among different activities within the overall outlay available under the scheme and allocate funds among states based on the utilization and physical progress achieved on the ground. The overall target is to provide financial assistance for cultivation spread over 1,50,000 hectares raise production of medicinal plants upto 3 lakh tones, reduce dependence on wild collection to about 50% and increase the share of value added items in exports.

13.3 Mentoring and Monitoring by the State Missions

Since the action plan/project is actually being implemented by the State Missions, it is advisable that the State Missions may monitor all their activities at the field level through their own set of experts and take corrective measures accordingly. Therefore, field mentoring and monitoring of all their activities, including cultivation by individual farmers may be carried out by the Implementing agencies and subsidies be linked to such monitoring systems for this purpose the services of retired officers of forest / horticulture / agriculture /

Departments, Scientists etc. may be hired by State Missions. State Mission may also set-up Committees at state / district / block level for monitoring and mentoring of the programme in respect of Medicinal Plants. State Government may also decide to involve State Medicinal Plant Boards in joint monitoring of the scheme components in which case one percent of the action plan can be sanctioned to the state concerned to strengthen the State Medicinal Plant Boards to facilitate the joint monitoring mechanism.

13.4 Third party monitoring

The comprehensive third party monitoring is important for the success of any scheme being implemented at the national level. There could be two types of arrangements - either through the system of experts or hiring an agency. Hiring an agency is a better option as there would be uniformity in monitoring in all the States. NMPB has already experience of hiring Agricultural Finance Corporation for monitoring of Central Sector Scheme. There is need to further upgrade the monitoring and now the monitoring should be done by a National Level Agency with adequate manpower and infrastructure and get the information about the implementation of each activity under the scheme including the cultivation by individual farmers and the location and area data be picked up through the GPS system so that the same can be used in GIS based systems. The data in GIS based system would be used by the concerned company (selected through a tender process) as well as to be provided to NMPB for further temporal and spatial analysis.

13.5 Other measures for Focused Monitoring & Mentoring

NMPB may develop a list of experts and nominate subject-wise/ species-wise expert as Chief Technical Adviser and identify the institutes as Centres of Excellence in different fields of medicinal plants. In consultation with State Missions, focused monitoring & mentoring visits may be organized once in six months. The visit of panel of experts required for the concerned State would help the State Missions through mentoring with respect to their important activities. It is also proposed that same team of experts shall monitor both schemes of National Medicinal Plants Board. The NMPB may establish more facilitation centres and strengthen the existing Facilitation Centres for focused monitoring as well as hand holding through Capacity Building initiative in the States.

LIST OF PRIORITIZED PLANTS FOR CULTIVATION UNDER SCHEME OF NMPB**PLANTS ELIGIBLE FOR 30% SUBSIDY**

#	Botanical Name	Common Name	Cost per acre (In rupees)
1.	<i>Abrus precatorius</i>	Chirmati, Chinnoti, Gudumani	*
2.	<i>Acorus calamus</i> Linn.	Vach	30,250
3.	<i>Adhatoda zeylanica</i>	Adusa	*
4.	<i>Aloe vera</i> (Linn.) Burn.	Ghritkumari	20,570
5.	<i>Alpinia calcarata</i>	Smaller Galangal	*
6.	<i>Alpinia galanga</i>	Greater Galanga	23,628
7.	<i>Andrographis paniculata</i> (Linn.) Burn	Kalmegh	12,100
8.	<i>Artemisia annua</i> (Linn.)	Artemisia	16,113
9.	<i>Asparagus racemosus</i> Willd.	Shatavari	30,250
10.	<i>Azadirachta indica</i> A. Juss	Neem	18,150
11.	<i>Bacopa monnieri</i> (L.) Pennell	Brahmi	19,360
12.	<i>Bergenia ciliata</i> Stern.	Pashnabheda	33,119
13.	<i>Boerhaavia diffusa</i> Linn.	Punarnava	14,520
14.	<i>Cassia angustifolia</i> Vahl.	Senna	12,100
15.	<i>Caesalpinia sappan</i> Linn.	Patang	25,918
16.	<i>Catharanthus roseus</i>	Sadabahar	12,100
17.	<i>Celastrus paniculatus</i>	Malkangani, Jyothismathi, Bavanthi Beeja	*
18.	<i>Centella asiatica</i> (Linn.) Urban	Mandookparni	19,360
19.	<i>Chlorophytum borivillianum</i> Sant.	Shwet Musali	1,51,250
20.	<i>Cinnamomum verum</i> Presl <i>C. tamala</i> and <i>C. camphora</i>	Dalchini, Tejpat, Kapoor	*
21.	<i>Citrullus colocynthis</i> Forsk	Indrayan, Colocynth, Chitrphala, Gavaksi, Kasturasa, Trapusi, Bitterm apple	*
22.	<i>Clerodendrum phlomoidis</i> L.f	Ami	*
23.	<i>Clitoria ternatea</i> L.(Blue & White variety)	Aparajita	*
24.	<i>Coleus barbatus</i> Benth. Syn. <i>Coleus forskholii</i>	Pather Chur	20,812
25.	<i>Coleus vettiveroides</i> K.C. Jacob	Hrivera	*
26.	<i>Convolvulus microphyllus</i>	Shankhpushpi	16,113
27.	<i>Cryptolepis buchanani</i> Roem & schult	Krsna sariva	20,598
28.	<i>Curcuma augustifolia</i>	Tikhur	*
29.	<i>Dacalophis hmiltonii</i>	Nannari	*
30.	<i>Digitalis purpurea</i> Linn.	Foxglove	*
31.	<i>Dioscorea bulbifera</i> Linn.	Rotalu, Gethi	30,250
32.	<i>Eclipta alba</i> Hassk.	Kesuria, Bhangru, Bhangra, Kesuti, Ajagara, Bringaraj, Kesar raja, Sumilaka, Suparna, Weed yam	*
33.	<i>Embelia ribes</i> Burm. f.	Vai Vidang	20,570
34.	<i>Emblica officinalis</i> Gaertn.	Amla	31,460
35.	<i>Ephedra gerardiana</i> Wall.	Somlata	*
36.	<i>Garcinia indica</i> Choisy	Kokum	30,250
37.	<i>Ginkgo biloba</i>	Ginkgo	*

38.	<i>Gymnema sylvestre R. Br.</i>	Gudmar	12,100
39.	<i>Hedychium spicatum Buch-Ham.ex Smuth</i>	Kapur kachari	19,360
40.	<i>Hemidesmus indicus R.Br.</i>	Anantmool, Indian Sarsaparilla	16,940
41.	<i>Holarrhena antidysenterica Wall.</i>	Kurchi/Kutaj	*
42.	<i>Hyoscyamus niger L.</i>	Khurasani ajwane	*
43.	<i>Ipomoea mauritiana / Ipomoea digitata</i>	Giant potato	*
44.	<i>Ipomoea petaloidea Choisy</i>	Vrddhadaruka	*
45.	<i>Ipomoea turpethum R. Br.</i>	Trivrit	*
46.	<i>Kaempferia galanga</i>	Indian crocus	*
47.	<i>Litsea glutinosa</i>	Listea	*
48.	<i>Lepidum sativum Linn.</i>	Chandrasur	*
49.	<i>Mucuna prurita Linn.</i>	Konch	9,680
50.	<i>Ocimum sanctum Linn.</i>	Tulsi	14,520
51.	<i>Oryza sativa cv Njavara</i>	Scented rice	*
52.	<i>Phyllanthus amarus Schum & Thonn.</i>	Bhumi amlaki	13,310
53.	<i>Piper longum Linn.</i>	Pippali	30,250
54.	<i>Plantago ovata</i>	Isabgol	*
55.	<i>Pluchea lanceolata (DC) CB Clark.</i>	Rasna	*
56.	<i>Plumbago rosea</i>	Leadwort	*
57.	<i>Pseudarthria viscida</i>	Moovila	*
58.	<i>Psoralea corylifolia L.</i>	Bakuchi	7,260
59.	<i>Rubia cordifolia Linn</i>	Manjishtha	48,400
60.	<i>Sida cordifolia</i>	Flannel weed	*
61.	<i>Solanum anguivi</i>	Katheli-badhi	*
62.	<i>Solanum nigrum Linn.</i>	Makoy	12,100
63.	<i>Stevia rebaudiana</i>	Madhukari	1,51,250
64.	<i>Tephrosia purpurea Pers</i>	Pawad, Dhamasia, Kalika, Plihari, Sharapunkha, Purple Tephrosia, Wild Indigo, Empali	*
65.	<i>Terminalia arjuna (Roxb.) Wt. & Arn.</i>	Arjuna	21,780
66.	<i>Terminalia bellirica Gaertn.</i>	Behera	19,360
67.	<i>Terminalia chebula Retz.</i>	Harad	19,360
68.	<i>Tinospora cordifolia Miers</i>	Giloe	13,310
69.	<i>Tragia involucrate</i>	Barhanta	*
70.	<i>Trichosanthes cucumerina</i>	Patol panchang	*
71.	<i>Valeriana hardwickii</i>	Tagar-ganth, Nihani	*
72.	<i>Vitex nigundo</i>	Nirgundi	12,100
73.	<i>Vetiveria zizanoides</i>	Khas- khas grass	*
74.	<i>Withania somnifera (Linn.) Dunal</i>	Ashwagandha	12,100
75.	<i>Woodfordia fruticosa Kurz.</i>	Dhataki	*

Plants eligible for 50% subsidy

#	Botanical Name	Common Name	Base cost per acre
76.	<i>Abies webbiana Lindl</i>	Talispatra	*
77.	<i>Acacia catechu</i>	Katha	*
78.	<i>Aegle marmelos (Linn) Corr.</i>	Beal	19,360
79.	<i>Albizzia lebbeck Benth.</i>	Shirish	18,150
80.	<i>Alstonia scholaris R.Br.</i>	Satvin, Saptaparna	16,141
81.	<i>Altingia excelsa Noronha</i>	Silarasa	*
82.	<i>Anacyclus pyrethrum DC.</i>	Akarkara	*
83.	<i>Atropa belledona</i>	Atropa	30,250
84.	<i>Coscinum fenastratum (Gertn) Colebr.</i>	Peela Chandan	*
85.	<i>Crataeva nurvala Buch – Ham.</i>	Varun	*
86.	<i>Curculigo orchoides</i>	Kali Musali, Musli shiya	*
87.	<i>Dactylorhiza hatagirea hatagirea (D.Don) Soo</i>	Salampanja	*
88.	<i>Desmodium gangeticum</i>	Sarivan	21,780
89.	<i>Gloriosa superba Linn.</i>	Kalihari	66,550
90.	<i>Glycyrrhiza glabra Linn.</i>	Licorice Roots, Mulethi	48,400
91.	<i>Gmelina arborea Linn.</i>	Gambhari	21,780
92.	<i>Hippophae rhamnoides Linn.</i>	Seabuckthorn	24,200
93.	<i>Inula racemosa Hk. f.</i>	Pushkarmool	18,295
94.	<i>Juniperus cumminis Linn</i>	Hapushal, Hanber, Juniper, Bet Hapusha	*
95.	<i>Jurinea macrocephala Benth.</i>	Dhoop, Jari-dhoop	*
96.	<i>Leptadenia reticulata (Retz) Wt. & Arn.</i>	Jivanti	30,250
97.	<i>Mesua ferrea Linn.</i>	Nagakeshar	*
98.	<i>Onosma hispidum Wall.ex Don</i>	Ratanjot	*
99.	<i>Panax pseudo-ginseng</i>	Ginseng	*
100.	<i>Parmelia perlata Ach.</i>	Saileya	*
101.	<i>Piper cubeba Linn. f.</i>	Kababchini	*
102.	<i>Plumbago zeylanica Linn.</i>	Chitrak	14,520
103.	<i>Pueraria tuberosa DC.</i>	Vidarikand	24,200
104.	<i>Premna integrifolia Linn.</i>	Agnimanth	12,100
105.	<i>Pterocarpus marsupium Roxb.</i>	Beejasar	26,620
106.	<i>Rauwolfia serpentina Benth. ex Kurz</i>	Sarpgandha	30,250
107.	<i>Rheum emodi</i>	Archa	98,010
108.	<i>Salacia reticulata, Salacia oblongata</i>	Saptachakra (Saptarangi)	*
109.	<i>Saraca asoca (Roxb.) De Wilde</i>	Ashok	30,250
110.	<i>Smilax china Linn.</i>	Hrddhatri (Madhu snuhi), Chob Lokhandi	24,200
111.	<i>Stereospermum suaveolens DC.</i>	Patala	*
112.	<i>Symplocos racemosa Roxb</i>	Lodh/Pathani	*
113.	<i>Tacomella undulate (Sm.) Seem.</i>	Rohitak	*
114.	<i>Tricopus zeylanicus</i>	Jeevani	*
115.	<i>Tylophora asthmatica</i>	Damabooti	*
116.	<i>Taxus wallichiana Linn.</i>	Thuner, Talispatra	*
117.	<i>Urarea picta (Jacq.) Desv.</i>	Prishnaparni	20,086
118.	<i>Valeriana wallichii</i>	Indian Valerian	*
119.	<i>Vateria indica</i>	Mandadhupa, Dupa	*
120.	<i>Viola Odorata</i>	Bunafsha	*
121.	<i>Zanthoxylum alatum</i>	Timoor	14,520

Plants eligible for 75% subsidy

#	Botanical Name	Common Name	Remark
122.	<i>Aconitum ferox</i> Wall./ <i>A. balfouri</i>	Vatsnabh	38,927
123.	<i>Aconitum chasmanthum</i> Stapf	Vatsnabh(API)	*
124.	<i>Aconitum heterophyllum</i> Wall. ex Royle	Atees	53,240
125.	<i>Aquilaria agallocha</i> Roxb.	Agar	16,141
126.	<i>Berberis aristata</i> DC.	Daruhaldi	30,250
127.	<i>Commiphora wightii</i> (Arn.) Bhandari	Guggal	*
128.	<i>Coptis teeta</i> Wall.	Mamira	*
129.	<i>Ferula foetida</i> Regel.	Hing	*
130.	<i>Gentiana kurroo</i> Royle	Trayamana	*
131.	<i>Mappia foetida</i> Miers.	Ghanera	*
132.	<i>Nardostachys jatamansi</i> DC.	Jatamansi	98,010
133.	<i>Oroxylum indicum</i> Vent.	Syonaka	21,780
134.	<i>Picrorhiza kurroa</i> Benth. ex Royle	Kutki	54,450
135.	<i>Podophyllum hexandrum</i> Royle.	Bankakri, Indian podophyllum	48,400
136.	<i>Polygonatum cirrhifolium</i> Wall.	Mahameda	*
137.	<i>Pterocarpus santalinus</i>	Raktachandan, Red sanders	27,346
138.	<i>Santalum album</i> Linn.	Chandan	23,570
139.	<i>Saussurea costus</i> C.B. Clarke	Kuth, Kustha	42,350
140.	<i>Swertia chirata</i> Buch-Ham	Chirata, Charayatah	39,930

Note:

* Base cost to be considered and approved by SFC

- (1) Economics on cultivation have been finalized based on reports of NABARD, CSIR, ICAR, ICFRE, Forest Deptt., NHB and other reliable sources.
- (2) Economics of species have been worked out on the basis of inputs in the form of elite quality planting material.
- (3) These cost norms do not include expenditure towards manpower, infrastructure development and cost of land.
- (4) More plants may be added to this list as and when cost norms become available.
10% increase in Base cost norms can be given in subsequent years subject to NAM approval.

Norms of assistance for nurseries and cultivation

	Programme	Estimated Cost	Admissible Assistance
1.	NURSERY		
	Production of planting material		
	a) Public sector		
	i) Model nursery (4 ha.)	Rs. 25 lakhs	Maximum of Rs. 25.00 lakhs
	ii) Small Nursery (1 ha.)	Rs. 6.25 lakhs	Maximum of Rs.6.25 lakhs
	b) Private Sector (initially on Pilot basis)		
	i) Model nursery (4 ha.)	Rs. 25 lakhs	50% of the cost limited to Rs. 12.50 lakhs
	ii) Nursery (1 ha.)	Rs. 6.25 lakhs	50% of the cost limited to Rs. 3.125 lakhs
2.	CULTIVATION		
	i) Species that are highly endangered and in high demand by AYUSH industry	As per Annexure – II	75% of the cost of cultivation
	ii) Species that are endangered and sources of supply are declining	As per Annexure – II	50% of the cost of cultivation
	iii) Other species in demand by AYUSH industry and for exports	As per Annexure – II	30% of the cost of cultivation

**NORMS OF ASSISTANCE FOR POST HARVEST MANAGEMENT, PROCESSING
& VALUE ADDITION AND MANAGEMENT SUPPORT**

	Programmes	Estimated Cost	Admissible Assistance
1.	POST HARVEST MANAGEMENT		
	i) Drying sheds	Rs. 10.00 lakhs	100% assistance for Govt. / Semi-Govt. / Public Sector and 50% for SHGs / Cooperatives/ Private sector
	ii) Storage godowns	Rs. 10.00 lakhs	100% assistance for Govt. / Semi-govt. / Public Sector and 50% for SHGs / Cooperatives/ Private sector
2.	PROCESSING AND VALUE ADDITION		
	i) Processing unit	Rs. 400 lakhs	100% assistance in case of Govt / Semi-govt. / SHGs / Cooperatives / Public Sector limited to Rs. 400 lakhs / unit
	ii)Marketing infrastructure:-	<ul style="list-style-type: none"> • Rs. 10.00 lakhs for rural collection center. • Rs. 200 lakhs for district collection center. 	Project based. 100% assistance to Public Sector and 50% assistance to Private Sector /SHGs / Cooperatives
	iii)Organic/GAP certification	Rs. 5 lakhs for 50 ha.	Assistance up to 50% of the cost limited to Rs. 10,000/ha for maximum area of 4 ha/ beneficiary spread over a period of three years would be provided for organic / GAP cultivation. For certification Rs. 5.00 lakhs for 50 ha. will be provided
	iv) Demonstration plots	-	Project based depending upon species cultivated and infrastructure created limited to Rs. 10.00 lakhs / plot of minimum 2 acres
	v) Setting up of seed/ germ plasm centres	-	Rs. 25 lakhs/ centre

14. MEDICINAL PLANT PROCESSING CLUSTERS

Each of the cluster development projects including collection cluster implemented by a Special Purpose Vehicle (SPV) for medicinal plants processing units in a cluster shall be eligible for funding under the scheme upto 60% of cost of the core interventions, 25% of the cost of add on interventions, within overall ambit of 60% of the project cost subject to maximum of Rs. 10.00 crore per cluster. The assistance is further subject to the following:

(i) Assistance for engagement of CDEs and other management support of SPV shall not exceed 5% of the overall project cost.

(ii) Assistance for engaging engineers / architects / construction management / other experts for execution of civil works shall not exceed 5% of the overall project cost.

(a) Project cost for the purpose of the scheme shall mean the total cost of proposed interventions.

(b) The scheme would be modular in nature with a provision to add interventions to the approved project DPR while implementation is on. The addition however, should be in conformity to the overall project and the scheme objectives and subject to approval by Standing Finance Committee (SFC)

(c) SPVs may dovetail funds from other sources as well for the project, provided there is no duplication of funding for the same component / intervention.

However, in cases of such dovetailing, it shall be ensured that the contribution of the participating units of SPV is at least 10% of the overall project cost.

Activities under the flexible component of Medicinal Plants

1. Research & Development in Medicinal Plants
2. Voluntary Certification Scheme
3. IEC Activities
4. Market Promotion, Market intelligence and Buy back interventions- Project based
5. Reimbursement of Testing charges – 50% of Testing charges subject to maximum of Rs. 5,000/- per test
6. Crop insurance – 50% of the premium payable

Administrative support:

Management Support, Capacity Building, IT Support, Audit, Monitoring and Evaluation.

FORMAT FOR SUBMITTING DETAILED ACTION PLAN

Description

1.	Background Information		
	1.1	Geography and Climate	
	1.2	Potential for Medicinal Plants	
	1.3	Existing infrastructure[warehouse/cold storages, markets, mandies, manufacturing units, nurseries (public and private sector), R&D institutions, testing laboratories, certification agencies, farmers associations/cooperatives/SHGs]	
	1.4	Land availability (cluster-wise)	
	1.5	Existing level of cultivation	
2.	SWOT analysis		
3.	Details of the Annual Action Plan		
	3.1	Objective and strategy	
	3.2	Implementation agency at the State level with contact address, phone, e-mail ID	
	3.3	Salient aspects of the Annual Action Plan and the implementation details at district/sub-district level and how different organisations are proposed to be brought together to achieve the Mission objectives	
	3.4	Components wise physical targets - details of nursery, cultivation cluster and units of post harvest management and processing and value addition and financial outlays	
	3.4.1	Nursery	
		(a) Public sector	
		(b) Private sector	
	3.4.2	Cultivation (species-wise proposed area and financial outlays for different clusters)	
	3.4.3	(a) Storage/warehousing	
		(b) Drying/grading sheds	
		(c) Processing unit	
		(d) Quality testing laboratory	
		(e) Support for quality testing	
	3.4.4	Marketing	
		(a) Market promotion	
		(b) Market intelligence	
		(c) Marketing infrastructure	
		(d) Buy – back interventions including mobilisation of SHGs/cooperatives	
	3.4.5	Certification and Insurance	
		(a) Organic/GAP certification	
		(b) Crop insurance	
	3.5	Linkages	
	3.5.1	With R&D Institutions/Facilitation centres	
	3.5.2	With AYUSH industry cluster scheme	
	3.5.3	With National Horticulture Mission	
	3.5.4	With Manufacturing units/traders for marketing	
4.	Mission Management		
	4.1	Project Management Consultant	
	4.2	Salary of the contractual staff, monitoring, travel and other	

		administrative expenses	
5.	Annexures		
		Map of the State giving potential areas and location of existing and the proposed infrastructure under the Action Plan	
		Details of nursery, cultivation cluster, units of post harvest management and processing and value addition may be given in the tables as mentioned	

NURSERY

Format for furnishing of information by States regarding establishment of Nurseries developed under Centrally Sponsored Scheme of "National Mission on Medicinal Plants" of NMPB

(i) Name of the State:				
(ii) Total number of Nurseries (Model/Small)				
Contact person for each Nursery		Year - _____		
Name & Address, Phone / Fax / E-mail	Type of Nursery (Model / Small)	Name of species	Location of Nursery	Assistance Sought

CULTIVATION CLUSTER

Format for furnishing of information by States regarding Clusters of cultivation developed under Centrally Sponsored Scheme of "National Mission on Medicinal Plants" of NMPB

(i) Name of the State:				
(ii) Total number of Clusters				
Contact person for each cluster		Year - _____		
Name & Address, Phone / Fax / E-mail	No. of farmers covered	Name of Plant species and Area covered		
		Species	Area (Ha.)	Assistance Sought

Units of Post Harvest Management and Processing and Value Addition

Format for furnishing of information by States regarding PHM Units developed under Centrally Sponsored Scheme of "National Mission on Medicinal Plants" of NMPB

(i) Name of the State:			
(ii) Total number of PHM / Processing Units			
Contact person for PHM / Processing Unit	Year - _____		
Name & Address, Phone / Fax / E-mail	Details of PHM / Processing Units	No. of Units	Assistance Sought
	Drying sheds		
	Storage Godowns		
	Processing Units		
	Market promotion		
	Market infrastructure		
	Buy back intervention		
	Marketing infrastructure		
	Testing charges / reimbursement		
	Organic / GAP certification		
	Crop Insurance		

Guidelines for Project based support for Marketing under National Mission

1. **Market Promotion:** There is already provision for 50% financial assistance. The Committee was of the view that sources of the balance 50% of the projects cost should be specified before approval of the projects. After discussions, it was decided that:-

- 1.1 Initially the project on Market promotion would be approved, 'in-principle' only.
- 1.2 50% of NMPB share (i.e. 50% of the project cost) as first instalment to be released.
- 1.3 Balance 50% may be released on re-imburement basis after the event is over.

Note:- For advertisement, DAVP guidelines shall be followed and for advertisement in newspaper, only National daily with all India circulation shall be selected.

2. **Market Intelligence:** 100% assistance may be provided to Implementing Agencies. The number of projects to be taken-up in each state would, however depend on number of clusters of cultivation. After detailed discussions, following was decided by the Committee:

- 2.1. Number of projects to be taken up in each state will not exceed 10 numbers.
- 2.2. Financial assistance would be provided on 100% basis.
- 2.3. Financial assistance would be limited to Rs.10.0 lakhs per project including recurring expenditure restricted to Rs. 5.0 lakhs / year.
- 2.4. No regular staff would be taken up for market intelligence but implementing agency would implement the programme by hiring services of Marketing Consultancy organizations.
- 2.5 One project should cover minimum of 200 hectares cultivation.

3. **Buy-back Intervention:** In addition to growers / farmers and organizing buyer-seller meeting, there should be some incentive to industry so that their procurement of raw material from growers/farmers remains economically beneficial. The percentage of financial assistance may be linked with quantum of

procurement but would not exceed 10% of the procurement cost which will be shared as 75% by growers / farmers and 25% by Purchasers / Industry.

4. Market Infrastructure:

4.1 Rural centres for collection and sale: The Rural centres for collection and sale may work on weekly basis and basic facilities like Auction Platforms, Storage godown; Drying shed with supporting services may be provided. Land would be provided by respective Public /SHG / Cooperatives and would not form part of the project cost. The guidelines in brief would be as under:

- a. Maximum assistance per Rural centres for collection and sale - Rs. 20.0 Lakhs / unit.
- b. Rural centres for collection and sale may be basically collection centre in production areas.
- c. No. of Rural centres for collection and sale may depend on number of clusters of production.
- d. These centres to be linked with District centres /whole sale markets.
- e. Basic infrastructure like Auction Platform, Drying shed, Storage Godown and supporting services to be provided.
- f. Land to be made available by respective SHG/ cooperative society

Eligibility

100% assistance to Govt / Semi-govt. / SHGs / Cooperatives / Public Sector. Credit linked back ended subsidy @ 40% of the capital cost of project in general areas and 55% in case of Hilly and scheduled areas for private sector.

4.2 District centres for collection and sale / **Whole sale market: Main features:** Maximum assistance per District centres for collection and sale is Rs. 200.0 Lakhs

- a. The District centres for collection and sale would operate on a Hub-and-Spoke Format wherein the main Market (the hub) would be linked to a number of the spokes Rural Markets (Collection centers)
- b. The Rural Markets would be conveniently located at key production centers to allow easy farmers / collector's access and the catchments area of each spoke would be based on meeting the convenient needs of farmers, operational efficiency and effective capital utilization of the

investment.

- c. The District centres for collection and sale would establish backward linkages with farmers through the collection centers and forward linkages through wholesalers, distribution centers, processing units and exporters.
- d. Collection Centers in the villages would integrate producers, collectors and retailers, processing units and exporters into the market system.
- e. An electronic auction system would be established to ensure transparency in price fixation and competition.
- f. The scheme will attract and facilitate private sector investment in the agribusiness sector, by assisting the key stakeholders-entrepreneurs, producers, processing industry manufacturers and exporters.
- g. Producers, farmers, collectors and their associations and other market functionaries from any part of the country may use the infrastructure and facilities of the wholesale Market directly or through the collection centers.
- h. The District centres for collection and sale would provide one-stop solution in terms of providing logistics support including transport services, warehouse facility etc.

Eligibility

100% assistance to Govt / Semi-govt. / SHGs / Cooperatives / Public Sector. Credit linked back ended subsidy @ 50% limited to Rs. 100.00 lakhs to private sector

4.3 Commodities

The commodities to be marketed by the District centres for collection and sale will include medicinal plants, herbs etc.

4.4 Location

The State Government will approve the number and indicative location of the District centres for collection and sale based on the demand, economic viability, commercial considerations etc. Core facilities and essential services to be provided at the District Mandies/ Wholesale Markets:

1. Electronic auction facility	8. Material handling equipment (palletisations and plastic crates)	15. Basic lodging services
2. Storage facility	9. Movement and parking facility for vehicles	16. Storage area of plastic crates
3. Temperature controlled warehouse	10. Futures trading facility	17. Standards for the produce arriving at the market
4. Sorting, grading, washing and packing lines	11. Transport services	18. Bulk weighment etc
5. Labeling of produce	12. Banking services including settlement to transactions	19. Drinking water, toilets and information desks
6. Price displays/bulletin services	13. Vehicle fuelling services	20. Emergency services, policing/ general security and Fire fighting services
7. Quality testing facility	14. Waste and refuse treatment and disposal	

In addition to the above, the District centres for collection and sale will provide the following user facilities and services free of charge to the users.

- a. Price information display screens both at the central and the collection centers (Rural Mandi) for medicinal plants
- b. Advisory on inputs, prices, quality for AYUSH Industry.

4.5 Approval of the Proposal:

The proposals would be submitted by respective Mission Director, duly approved by their State Mission for consideration of TSC of NMPB and NAM.

4.6 Release of Funds

The funds will be released based on the progress of works in three instalments. The State authorities will have to monitor the implementation and furnish quarterly progress reports of utilization of central assistance.