

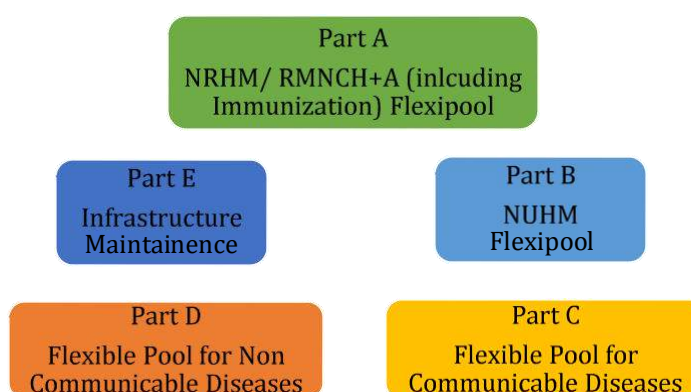
Mission Flexipools by NHM

Introduction:

In order to improve the planning and implementation of public health programs as per regional requirements. So, NHM introduced “Mission Flexi Pool” which provides states to allocate the NHM funds to different health care programs as per the state’s health and welfare needs.

Implementation of the practice:

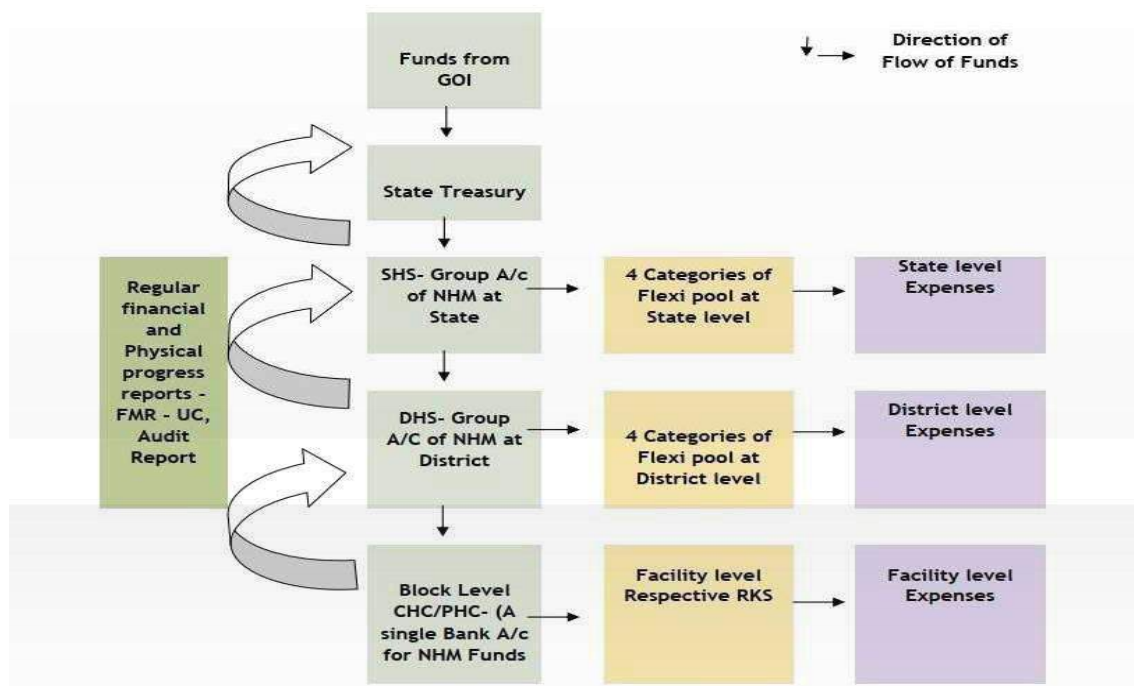
In order to empower States to carry out health reforms with additional resources and appropriate flexibility as per local needs. Planning and implementation are decentralized to the States (State Health Mission developing State Health Action Plan) to Districts (Districts Health Mission developing District Health Action Plan) to Block Health Action Plan which are a community-owned and as per local needs, keeping in view the implementation guidelines of various programs. Funds in NHM are pooled under “Mission Flexi Pool”. It is divided into five components under which funds are utilized for respective programs, as follows:



There is a separate financial envelope tied to Part A to D with the flexibility provided to all States to allocate funds through various strategies as per the local needs and broad national priorities. The number of components under Flexi-pool varies from State to State. At least 70 % of funds of State under Part A- NRHM –RMNCH flexible pool is allocated to the districts, with high priority districts allocation are at least 30 % more per capita than non-priority districts.

The NHM funding between the Centre and States is in the ratio of 60:40 (for all states except NE and 3 Himalayan States), 60 from Central government and 40 from State.

States are required to work towards an increase of at least 10 % in expenditure every year. Maximum funds must be spent at lower levels i.e. at least 70% at Block and below, 20 % District level and 10 % at State Level. For implementation and supervision of the scheme, Decentralized planning and funds dispersion from Top to Bottom is done. There is periodic reporting at each level through their supervisory units to GOI. The fund flow mechanism is as follows:



Results

This mission gave flexibility to States in designing and executing Programme Implementation Plan and prioritising States' local health needs. This also allowed states to implement different innovative programs that later rolled out across many other states of India.

Lessons Learnt

Re-appropriation of funds by different States for different programs leads to effective utilisation and healthcare planning. Tracking of the funds utilized by the states for different programs can be difficult due to unique fund distributions under any pool. Some programs are addressing this by reporting budget and utilisation at the end of the fiscal year.

Conclusion

Mission Flexipool provides de-centralization to district and block level which helps to improve public health care facilities across every corner of India as per their local needs. Other CSS and sectors may also look at adopting such practice promoting flexibility and efficiency in fund utilisation thereby prioritizing the local health needs.

Further reading

- i. https://nhm.gov.in/images/pdf/NHM/NHM_more_information.pdf
- ii. <https://darpg.gov.in/sites/default/files/National%20Health%20Mission.pdf>