



# Pradhan Mantri Matru Vandana Yojana (PMMVY)



## SCHEME IMPLEMENTATION GUIDELINES

Ministry of Women and Child Development  
Government of India, New Delhi  
September, 2017



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## LIST OF ABBREVIATIONS

Sl. No.	Abbreviations	Description
1	ANC	Ante-Natal Check-up
2	ANM	Auxiliary Nurse & Midwife
3	ASHA	Accredited Social Health Activist
4	AWC	Anganwadi Centre
5	AWH	Anganwadi Helper
6	AWW	Anganwadi Worker
7	BCG	Bacille Calmette Guerin
8	CAS	Common Application Software
9	CDPO	Child Development Project Officer
10	CGMS	Continuous Glucose Monitoring System
11	CHC	Community Health Centre
12	CMO	Chief Medical Officer
13	CNO	Central Nodal Officer
14	DAVP	Directorate of Advertising and Visual Publicity
15	DBT	Direct Benefit Transfer
16	DDO	Drawing and Disbursing Officer
17	DEO	Data Entry Operator
18	DG	Director General
19	DNO	District Nodal Officer
20	DPO	District Programme Officer
21	DPT	Diphtheria, Pertussis and Tetanus
22	DSC	Digital Signature Certificate
23	EID	Aadhaar Enrolment ID
24	GOI	Government of India
25	H&FW	Health and Family Welfare
26	ICDS	Integrated Child Development Services
27	IEC	Information Education and Communication
28	IFSC	Indian Financial System Code
29	IGMSY	Indira Gandhi Matritva Sahyog Yojana -Also known as 'old MBP'
30	IPPB	India Post Payments Bank
31	JAM	Jan Dhan Account, Aadhaar and Mobile Number
32	JSY	Janani Suraksha Yojana
33	LGD	Local Government Directory
34	LMP	Last Menstrual Period
35	MBP	Maternity Benefit Programme
36	MCH	Mother and Child Health
37	MCP	Mother and Child Protection
38	MCTS	Mother & Child Tracking System

Sl. No.	Abbreviations	Description
39	MGNREGS	Mahatma Gandhi National Rural Employment Guarantee Scheme
40	MH&FW	Ministry of Health and Family Welfare
41	MO	Medical Officer
42	MPR	Monthly Progress Report
43	MWCD	Ministry of Women & Child Development
44	NER	North Eastern Region
45	NGO	Non-Governmental Organisation
46	NHM	National Health Mission
47	NIPCCD	National Institute of Public Cooperation and Child Development
48	OBGY	Obstetrician/ Gynaecologist
49	OPV	Oral Polio Vaccine
50	PAN	Permanent Account Number
51	PDS	Public Distribution System
52	PFMS	Public Financial Management System
53	PHC	Primary Health Centre
54	PMMVY	Pradhan Mantri Matru Vandana Yojana
55	PMMVY-CAS	PMMVY- Common Application Software
56	PMSMA	Pradhan Mantri Surakshit Matritva Abhiyan
57	PO	Post Office
58	PRI	Panchayati Raj Institutions
59	PSU	Public Sector Undertaking
60	PW&LM	Pregnant Women & Lactating Mother
61	RCH	Reproductive & Child Health
62	SC	Schedule Caste
63	SDA	Software Development Agency
64	SHG	Self Help Group
65	SMC	Steering and Monitoring Committee
66	SNO	State Nodal Officer
67	SoE	Statement of Expenditure
68	ST	Schedule Tribe
69	SW	Social Welfare
70	UIDAI	Unique Identification Authority of India
71	ULB	Urban Local Bodies
72	UT	Union Territory
73	VHSNC	Village Health, Sanitation and Nutrition Committee
74	VHSND	Village Health Sanitation and Nutrition Day
75	WCD	Women and Child Development

# GUIDELINES



## 1. INTRODUCTION

- 1.1 Under-nutrition continues to adversely affect majority of women in India. In India, every third woman is undernourished and every second woman is anaemic. An undernourished mother almost inevitably gives birth to a low birth weight baby. When poor nutrition starts in-utero, it extends throughout the life cycle since the changes are largely irreversible. Owing to economic and social distress many women continue to work to earn a living for their family right up to the last days of their pregnancy. Furthermore, they resume working soon after childbirth, even though their bodies might not permit it, thus preventing their bodies from fully recovering on one hand, and also impeding their ability to exclusively breastfeed their young infant in the first six months.
- 1.2 From 01.01.2017, the Maternity Benefit Programme would be implemented in all the districts of the country in accordance with the provision of the National Food Security Act, 2013. The programme is named as 'Pradhan Mantri Matru Vandana Yojana' (PMMVY).
- 1.3 Under PMMVY, a cash incentive of ` 5000/- would be provided directly in the account of Pregnant Women and Lactating Mothers (PW&LM) for first living child of the family subject to their fulfilling specific conditions relating to Maternal and Child Health.
- 1.4 The eligible beneficiaries would receive the remaining cash incentives as per approved norms towards maternity benefit under Janani Suraksha Yojana (JSY) after institutional delivery so that on an average, a woman will get ` 6000/- .
- 1.5 PMMVY, a Centrally Sponsored Scheme, would provide grants-in-aid to the State Governments/ Union Territory Administrations (UTs) in a dedicated Escrow account for the purpose of direct benefit transfer to the beneficiaries.
- 1.6 PMMVY will be implemented using the platform of Anganwadi Services scheme of Umbrella ICDS under Ministry of Women and Child Development in respect of States/ UTs implementing scheme through Women and Child Development Department/ Social Welfare Department and through Health system in respect of States/ UTs where scheme will be implemented by Health & Family Welfare Department. The list of PMMVY implementing departments for each State/UT is at **Annexure A**.
- 1.7 PMMVY shall be implemented through a centrally deployed Web Based MIS Software application and the focal point of implementation would be the Anganwadi Centre (AWC) and ASHA/ ANM workers.

...

## 2. THE PROGRAMME

### 2.1 Objectives of PMMVY

- 2.1.1 Providing partial compensation for the wage loss in terms of cash incentives so that the woman can take adequate rest before and after delivery of the first living child.
- 2.1.2 The cash incentive provided would lead to improved health seeking behaviour amongst the Pregnant Women and Lactating Mothers (PW&LM).

### 2.2 Target beneficiaries

- 2.2.1 All Pregnant Women and Lactating Mothers, excluding PW&LM who are in regular employment with the Central Government or the State Governments or PSUs or those who are in receipt of similar benefits under any law for the time being in force.
- 2.2.2 All eligible Pregnant Women and Lactating Mothers who have their pregnancy on or after 01.01.2017 for first child in family.
- 2.2.3 The date and stage of pregnancy for a beneficiary would be counted with respect to her LMP date as mentioned in the MCP card.
- 2.2.4 **Case of Miscarriage/Still Birth:**
  - (i) A beneficiary is eligible to receive benefits under the scheme only once.
  - (ii) In case of miscarriage/still birth, the beneficiary would be eligible to claim the remaining instalment(s) in event of any future pregnancy.
  - (iii) Thus, after receiving the 1<sup>st</sup> instalment, if the beneficiary has a miscarriage, she would only be eligible for receiving 2<sup>nd</sup> and 3<sup>rd</sup> instalment in event of future pregnancy subject to fulfilment of eligibility criterion and conditionalities of the scheme. Similarly, if the beneficiary has a miscarriage or still birth after receiving 1<sup>st</sup> and 2<sup>nd</sup> instalments, she would only be eligible for receiving 3<sup>rd</sup> instalment in event of future pregnancy subject to fulfilment of eligibility criterion and conditionalities of the scheme.
- 2.2.5 **Case of Infant Mortality:**

A beneficiary is eligible to receive benefits under the scheme only once. That is, in case of infant mortality, she will not be eligible for claiming benefits under the scheme, if she has already received all the instalments of the maternity benefit under PMMVY earlier.
- 2.2.6 Pregnant and Lactating AWWs/ AWHs/ ASHA may also avail the benefits under the PMMVY subject to fulfilment of scheme conditionalities

### 2.3 Benefits under PMMVY

- 2.3.1 Cash incentives in three instalments i.e. first instalment of ` 1000/- on early registration of pregnancy at the Anganwadi Centre (AWC)/ approved Health facility as may be identified by the respective administering State/ UT, second instalment of ` 2000/- after six months of pregnancy on receiving at



least one ante-natal check-up (ANC) and third instalment of ` 2000/- after child birth is registered and the child has received the first cycle of BCG, OPV, DPT and Hepatitis-B, or its equivalent/ substitute.

2.3.2 The eligible beneficiaries would receive the incentive given under the Janani Suraksha Yojana (JSY) for Institutional delivery and the incentive received under JSY would be accounted towards maternity benefits so that on an average a woman gets ` 6000/-.

## 2.4 Conditionality and Instalments

2.4.1 PW&LM shall receive a cash benefit of ` 5000/- in three instalments at the following stages as specified in the table given below:

Conditionality and Instalments		
Instalment	Conditions	Amount
First Instalment	Early Registration of pregnancy	` 1,000/-
Second Instalment	Received at least one ANC (can be claimed after 6 months of pregnancy)	` 2,000/-
Third Instalment	i. Child Birth is registered  ii. Child has received first cycle of BCG, OPV,DPT and Hepatitis-B or its equivalent/substitute	` 2,000/-

2.4.2 The eligible beneficiaries would receive the remaining cash incentive as per approved norms towards the Maternity Benefit under JSY after institutional delivery so that on an average, a woman will get ` 6000/-.

## 2.5 Closure of old Maternity Benefit Programme

2.5.1 The beneficiaries under old Maternity Benefit Programme in 53 pilot districts (**Annexure M**), who have already received first instalment of maternity benefit, shall be entitled for receiving cash incentive as per approved norms towards maternity benefit under JSY and also the third instalment under PMMVY if they or otherwise eligible under the scheme and fulfil the conditions laid down for incentive under JSY and third instalment under PMMVY.

2.5.2 The eligible beneficiaries in 53 pilot districts who have registered under old Maternity Benefit Programme (IGMSY) on or after 01.01.2017, but have not received first instalment may register under PMMVY.

2.5.3 Conditions for subsuming registered beneficiaries under old Maternity Benefit Programme in PMMVY for 53 pilot Districts: -

- a. Under the old Maternity Benefit Programme, maternity benefit of ` 6000/- was disbursed to the beneficiaries in two equal instalment of ` 3000/- each. The first instalment of ` 3000/- was provided after second trimester of pregnancy to those beneficiaries who have got them registered at the Anganwadi Centre/ health centre with at least two antenatal check-ups. The second instalment was provided after registering the birth of the child and completing immunization of the child, as per the conditions of the scheme.
- b. Thus, if a woman has already received first instalment of maternity benefit under old Maternity Benefit Programme, she shall be entitled for receiving the cash incentives as per approved norms under JSY for institutional delivery and for third instalment under the PMMVY, if she is otherwise eligible under the scheme and fulfil the conditions laid down for incentives under JSY for institutional delivery and third instalment under PMMVY.

• • •

### 3. PROCESSING OF CLAIMS

The following procedure shall be followed for processing of the cases so as to ensure that the payment of the instalment is made in the account of the eligible beneficiary preferably within 30 days of registration and submission of the claim along with complete details of fulfilment of the conditionalities under the scheme.

#### 3.1 Registration and submission of claims to AWW/ASHA/ANM

##### 3.1.1 Registration under the Scheme:

- a) The eligible women desirous of availing maternity benefits are required to register under the scheme at the Anganwadi Centre (AWC)/ approved Health facility depending upon the implementing department for that particular State/UT.
- b) For registration, the beneficiary shall submit the prescribed application **Form 1-A**, complete in all respects, along with the relevant documents and undertaking/consent duly signed by her and her husband, at the AWC/ approved Health facility. While submitting the form, the beneficiary will be required to submit her and her husband's Aadhaar details with their written consents, her/husband/family member's Mobile Number and her Bank/Post Office account details.
- c) The prescribed form(s) can be obtained from the AWC/ approved Health facility free of cost. The form(s) can also be downloaded from the website of Ministry of Women and Child Development (<http://wcd.nic.in>).
- d) The beneficiary would be required to fill up the prescribed scheme forms for registration and claim of the instalment and submit the same at the Anganwadi Centre/ approved Health facility. The beneficiary should obtain acknowledgment from Anganwadi Worker/ASHA/ANM for record and future reference.
- e) Brief instructions on filling up of the prescribed form(s) are as follows (for the details refer to the Scheme Forms series 1, 2, 3 and 4; and **Annexure B** and **Annexure C**):
  1. For registration and claim of first instalment, duly filled Form 1-A along with copy of MCP Card (Mother and Child Protection Card), Proof of Identity of Beneficiary and her Husband (Aadhaar Card or permitted Alternate ID Proof of both (as per **Annexure D**)) and Bank/ Post Office Account details of the beneficiary is required to be submitted.
  2. For claiming second instalment, beneficiary is required to submit duly filled up **Form 1-B** after six months of pregnancy, along with the copy of MCP Card showing at least one ANC.
  3. For claiming third instalment, beneficiary is required to submit duly filled up **Form 1-C** along with copy of child birth registration and copy of MCP card showing that the child has received first cycle of immunization or its equivalent/substitute.
  4. In case a beneficiary has complied the conditionalities stipulated under the scheme but could not register/submit claims within the stipulated time can submit claim(s) as given at para 3.6.
  5. The AWW / ASHA / ANM will facilitate opening of the beneficiary's Aadhaar seeded Bank / Post Office account in case she does not already have the same in her name or seeding the existing Bank / Post Office account with Aadhaar.

6. The beneficiary may submit **Form 2-A** for seeding of her Bank Account with her Aadhaar, if not seeded earlier.
7. The beneficiary may submit **Form 2-B** for seeding of her Post Office Account with her Aadhaar, if not seeded earlier.
8. Even if the beneficiary does not have the Aadhaar, the AWW / ASHA/ ANM will ensure opening of the Bank / Post Office Account and facilitate getting the Aadhaar Card.
  - a) The beneficiary/ her husband may submit **Form 2-C** to enrol for Aadhaar or update the details registered with UIDAI.
9. Beneficiary may submit **Form 3** for updating/change of details registered under the scheme in the following conditions:
  - a. Change in address and/or mobile number;
  - b. Inclusion of Aadhaar Number of Beneficiary or her Husband in case it is not provided at the time of registration;
  - c. Change in Bank/ Post Office Account;
  - d. Change in name as in Aadhaar;
10. The beneficiaries already registered under old MBP scheme and received only the first instalment may submit duly filled up Form 1-A and Form 1-C for claiming the third installment under PMMVY subject to fulfillment of eligibility and conditionalities.
11. If the beneficiary and/or her husband does not have Aadhaar, they can provide an Aadhaar EID number or register their request for Aadhaar enrolment (Form 2-C) along with any proof of identity in Form 1-A.

#### **3.1.1.1 General Instructions:**

- a) Beneficiary and her husband are required to enrol for Aadhaar on their own or through facilitation by the implementing Department in the State/UT to become entitled for third instalment for which Aadhaar numbers of beneficiary & her husband are mandatory. For anyone providing Alternate ID proof under the scheme, it is compulsory to enrol for Aadhaar within 90 days from date of registration under the scheme.
- b) The beneficiaries from the State of Assam, Meghalaya and Jammu & Kashmir are exempted from the requirement for submission of Aadhaar as per notification issues under Section-7 of Aadhaar Act, 2016 (refer Annexure D).
- c) The pregnancy of a beneficiary would be counted with respect to her LMP date as mentioned in the MCP card.
- d) Every registered beneficiary under **PMMVY** will receive a Mother and Child Protection (MCP) Card from Anganwadi Centre/ ASHA / ANM of the locality. The MCP Card will be used as a means of verification of the conditionality (ies) for payment.

#### **3.1.2 Processing of the claim for First Instalment**

- a. For claiming the installment, the beneficiary shall submit duly filled up Form 1-A along with the relevant documents at the AWC/ Village/ Approved health facility.
- b. The beneficiary will be eligible to claim the first instalment under the scheme only if she registers her pregnancy at the AWC or with ASHA/ANM within a time frame of 5 months (i.e. 150 days) from the LMP date (both dates are as captured in the MCP card).

- c. The processing for disbursement of benefits to the beneficiary shall be completed well before 30 days of registration at AWC/ Village/ approved health facility so that the benefits could be transferred within 30 days to the beneficiary from the date of registration under the scheme.
- d. The individual desirous of availing benefits under PMMVY shall submit the details as prescribed in Registration Form & fulfilment of conditionalities in Form 1-A to AWW/ASHA/ANM along with requisite documents.
- e. On receipt of complete application form and requisite documents, the AWW/ASHA/ANM will register the beneficiary under PMMVY and send the details within a week to Supervisor/ANM.
- f. The proposal received from AWW/ASHA/ANM would be checked by Supervisor/ ANM, consolidated and shall be submitted every week to the concerned CDPO/ Health Block Officer (Medical Officer) for the payment processing/ online registration.

### **3.1.3 Processing of the claim for Second Instalment**

- a. For claiming the second installment, the beneficiary shall submit duly filled Form 1-B along with the relevant documents to AWW/ASHA/ANM along with requisite documents.
- b. The beneficiary shall submit the proof of fulfilment of conditionalities in Form 1-B along with photocopies of the requisite documents.
- c. On receipt of complete claim form and requisite documents, the AWW/ASHA/ANM will send the details within a week to Supervisor/ANM for processing disbursement of second instalment of maternity benefit.
- d. The proposal received from AWW/ASHA/ANM would be checked by Supervisor/ ANM, consolidated and shall be submitted every week to the concerned CDPO/ Health Block Officer (Medical Officer) for the payment processing.
- e. The processing for disbursement of second instalments of maternity benefits to the beneficiary shall be completed well before 30 days from the date of receiving claim in Form –1-B related to proof of fulfilment of conditionalities.

### **3.1.4 Processing of the claim for Third Instalment**

- a. For claiming the installment, the beneficiary shall submit duly filled up Form 1-C along with the relevant documents to AWW/ASHA/ANM.
- b. The beneficiary shall submit the proof of fulfilment of conditionalities in Form 1-C along with photocopies of the requisite documents.
- c. The beneficiary must furnish details of her and her husband's Aadhaar, if not already furnished, in order to become eligible for receiving third instalment under PMMVY.
- d. On receipt of complete claim form and requisite documents, the AWW/ASHA/ANM will send the details within a week to Supervisor/ANM for processing disbursement of third instalment of maternity benefit.
- e. The proposal received from AWW/ASHA/ANM would be checked by Supervisor/ ANM, consolidated and shall be submitted within a week to the concerned CDPO/ Health Block Officer (Medical Officer) for the payment processing.
- f. The processing for disbursement of third instalments of maternity benefits to the beneficiary shall be completed well before 30 days from the date of receiving claim in Form 1-C related to proof of fulfilment of conditionalities.

### 3.2 Processing by Supervisor/ANM

The form received from AWW/ASHA/ANM shall be verified and submitted to CDPO/MO within a week from the date of receipt. The detailed instructions in this regard are at Annexure B and Annexure C.

### 3.3 Processing by CDPO/MO

The form received from Supervisor/ANM will be verified and entered into the WWW.PMMVY-CAS.GOV. IN web-based MIS for disbursement of benefits to eligible beneficiaries, as per the details given in User Manual for the PMMVY-CAS software. CDPO/MO will ensure that the details received or entered in the database and sanctioned within a week from the date of receipt of the forms.

### 3.4 Processing for initiation of payment by State Nodal Officer (SNO)

The SNO will ensure that the payments are initiated within three working days from the receipt of sanctioned list from CDPO/MO after verifying the correctness of the data.

### 3.5 Amount and conditions for payment of incentives

- a. The beneficiary will receive a total cash incentive of ` 5000/- in three instalments, subject to the fulfilment of specific conditions.
- b. The payment shall be credited to the Bank/ Post office account of the beneficiary, as the case may be and not in the husband's/family member's/joint account.
- c. The conditionalities for the three instalments under the scheme are (**refer Annexure E** for details):
  - i. **First Instalment**

Amount: ` 1000/- in case of early registration of pregnancy on fulfilment of the conditions mentioned below:

Proof of early registration of pregnancy in MCP card (registration of pregnancy within 150 days from the date of LMP), duly certified by an officer/functionary of Health Department not below the rank of ANM.
  - ii. **Second Instalment**

Amount: ` 2000/- after 6 months of pregnancy on fulfilment of the conditions mentioned below:

At least one Ante-Natal Check-up of beneficiary duly certified on MCP card by an officer/functionary of Health Department not below the rank of ANM.
  - iii. **Third Instalment**

Amount: ` 2000/- on fulfilment of the conditionalities mentioned below:

Child birth is registered. Birth Certificate issued by an authorised authority of the State/UT will be accepted as proof of child birth.

Proof that child has received first cycle of BCG, OPV, DPT and Hepatitis-B or its equivalent/ substitute, the MCP card being duly certified on MCP card by an officer/functionary of Health Department not below the rank of ANM.
- d. The immunization is to be completed preferably within 14 weeks of birth of the child as per the schedule issued by MHFW (Annexure L). The AWW/ ASHA/ ANM will check the MCP card of the beneficiary at the beginning of the fifth month to ensure that all the immunization of the infant has taken place.

### 3.6 Bunching of Instalments

Beneficiaries should apply preferably just after fulfilment of conditionalities to make proper use of the benefits received under the scheme towards meeting the scheme objectives. In case she could not apply within the normal time frame, the following may be considered: \_

- i. No maternity claim under the scheme shall be admitted after 730 days of pregnancy. LMP registered in the MCP card will be the date of pregnancy to be considered in this respect.
- ii. The instalments may be claimed independently and not interlinked with each other, subject to fulfilment of eligibility criteria and conditionalities.
- iii. A beneficiary can apply, at any point of time but not later than 730 days of pregnancy, even if she had not claimed any of the instalments earlier but fulfils eligibility criterion and conditionalities for receiving benefits.
- iv. In cases where LMP date is not recorded in MCP card viz. a beneficiary is coming for claim of third instalment under the scheme, the claim in such cases must be submitted within **460 days** from the date of birth of the child beyond which period no claim shall be entertained.
- v. Under bunching of instalments, a number of combinations are possible. For the sake of clarity, the forms to be submitted and conditionalities to be verified are given in table below:

**Table: Bunching Combinations**

S.No	Case	Forms to be filled by Beneficiary	Verification by AWW/ASHA/ANM
1.	Beneficiary has not claimed the first instalment under the scheme and applies for claiming the <b>first instalment only</b> .	Form 1-A	<ul style="list-style-type: none"> <li>• Early registration of pregnancy within 150 days from the date of LMP</li> </ul>
2.	Beneficiary who has not claimed the first instalment under the scheme but applies directly for claiming the <b>second instalment only</b> .	Form 1-A; Form 1-B	<ul style="list-style-type: none"> <li>• At least one ANC</li> </ul>
3.	Beneficiary who has not claimed the first instalment under the scheme and applies directly for claiming <b>both first and second instalments</b>	Form 1-A; Form 1-B	<ul style="list-style-type: none"> <li>• Early registration of pregnancy within 150 days from the date of LMP</li> <li>• At least one ANC</li> </ul>
4.	Beneficiary who has registered herself under the scheme and <b>claimed the first instalment</b> , and applies directly for claiming <b>the third instalment only</b> under the scheme	Form 1-C	<ul style="list-style-type: none"> <li>• Child Birth Registration</li> <li>• Child has received first cycle of BCG, OPV, DPT and Hepatitis-B or its equivalent/ substitute</li> </ul>
5.	Beneficiary who has registered herself under the scheme and <b>claimed the first instalment</b> , and applies directly for claiming <b>both second and third instalment together</b> under the scheme	Form 1-B; Form 1-C	<ul style="list-style-type: none"> <li>• At least one ANC</li> <li>• Child Birth Registration</li> <li>• Child has received first cycle of BCG, OPV, DPT and Hepatitis-B or its equivalent/ substitute.</li> </ul>
	Beneficiary who has <b>not claimed</b> the first and second instalment under the scheme and applies directly for claiming <b>the third instalment only</b> under the scheme	Form 1-A; Form 1-C	<ul style="list-style-type: none"> <li>• Early registration of pregnancy within 150 days from the date of LMP</li> <li>• Child Birth Registration</li> <li>• Child has received first cycle of BCG, OPV, DPT and Hepatitis-B or its equivalent/ substitute.</li> </ul>

S.No	Case	Forms to be filled by Beneficiary	Verification by AWW/ASHA/ANM
	Beneficiary who has <b>not claimed</b> the first and second instalment under the scheme and applies directly for claiming <b>second and third instalment together</b> under the scheme	Form 1-A; Form 1-B; Form 1-C	<ul style="list-style-type: none"> <li>At least one ANC</li> <li>Child Birth Registration</li> <li>Child has received first cycle of BCG, OPV, DPT and Hepatitis-B or its equivalent/substitute.</li> </ul>
	Beneficiary has <b>not claimed</b> the first and second instalment under the scheme and applies directly for claiming <b>first, second and third instalment together</b> under the scheme	Form 1-A; Form 1-B; Form 1-C	<ul style="list-style-type: none"> <li>Early registration of pregnancy within 150 days from the date of LMP</li> <li>At least one ANC</li> <li>Child Birth Registration</li> <li>Child has received first cycle of BCG, OPV, DPT and Hepatitis-B or its equivalent/substitute.</li> </ul>

### 3.7 Payment to beneficiaries

All eligible beneficiaries who have applied and complies with the conditionalities will receive payments through Direct Benefit Transfer (DBT) to their individual Bank/ Post Office Accounts that is specified by them in their application form(s) on approval by the competent authority. That is:

- i. Transfer of benefits would be through DBT in Bank/Post Office account only.
- ii. No disbursement would be made in the form of “cash” or “cheque”.
- iii. Mode of money transfer will be through banks and post offices which are on-boarded on PFMS.

### 3.8 Verification of the Conditionalities

#### 3.8.1 Verification by AWW/ASHA/ ANM

Means of verification of each conditionality (details at Annexure E)

- i. MCP card for early registration of pregnancy, ANC and immunization.
- ii. Birth Certificate by a competent authority of the State/UT will be accepted as proof of child birth.

#### 3.8.2 Verification by Supervisor/ ANM

- i. During field monitoring visits, the Supervisor/ ANM should check (details at Annexure E) the PMMVY register (**Form 4**) for correctness and verify the fulfilment of conditions by checking the MCP cards. Supervisor/ ANM shall provide an acknowledgement on PMMVY register after receiving the forms from AWW/ ASHA/ ANM.
- ii. While receiving the Monthly Progress Report (MPR) from the AWW/ ASHA /ANM, the supervisor/ ANM should check it for correctness.

#### 3.8.3 Verification by Sanctioning Officer (CDPO/MO)

- i. The CDPO/MO must check if all the forms are complete with the mandatory document enclosed.
- ii. While receiving the Monthly Progress Report (MPR) from the Supervisor /ANM and CDPO/MO should store it safely (refer to **Section 6.1.2**).

#### **3.8.4 Special Conditions**

- a) If the beneficiary fulfils the conditions for the 3<sup>rd</sup> instalment but the infant does not survive beyond 6 months of age, she will be given the 3<sup>rd</sup> instalment.
- b) If the beneficiary delivers twins/triplet/quadruplet, it will be counted as first live child in the family.
- c) In case of intra-State or inter-State migration due to any reason, the beneficiary can avail the remaining benefit(s) on production of Aadhaar number; or MCP card and acknowledgement slip at the nearest AWC/ approved Health facility (depending on implementing agency at State/ UT level) and after fulfilling the conditions for each instalment.
- d) In case of false claim by the beneficiary, the amount paid to her would be recovered failing which, she will be liable for action as per law.

#### **3.9 Roles and Responsibilities at various levels**

The roles and responsibilities of the AWW, AWH, ASHA, Supervisor/ANM, and other PMMVY personnel is at Annexure C.

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## 4. IMPLEMENTATION MODALITIES

### 4.1 Implementing Department

The scheme would be implemented by MWCD at the Central level while at the State/ UT level the concerned State/ UT have the option to implement the scheme either through WCD/Social Welfare Department or through H&FW Department. The names of implementing departments reported by the States/ UTs are enclosed at Annexure A.

### 4.2 PMMVY Section/Cell in MWCD

- a) The existing Maternity Benefit Programme section in MWCD will administer the scheme.
- b) In order to ensure effective implementation of the scheme, PMMVY Cell shall be established at the National level in MWCD, New Delhi.
- c) The Cell shall work under the overall supervision of the Joint Secretary dealing with the scheme. This cell would be supported by Director and Under Secretary dealing with PMMVY. The cell shall also be supported by contractual staff. One senior consultant (National Program Coordinator) shall be hired along with one Data Entry Operator to support smooth implementation of the program.
- d) The composition and function of PMMVY cell are at **Annexure F**.
- e) The budgetary norms for engagement of contractual staff are at **Annexure G**.

### 4.3 Establishment of PMMVY Cell in States / UTs

- a) Every State/UT would establish a State/UT level PMMVY Cell within the Department of Women and Child Development/Department of Social Welfare/Department of Health & Family Welfare, which will be under the supervision of concerned State/UT Secretary. The Director dealing with the scheme in State/UT will be responsible for the day to day implementation of the scheme at the State/UT level.
- b) The composition and function of State/UT PMMVY cell are at Annexure E
- c) The budgetary norms for engagement of PMMVY staff are at Annexure-G.
- d) The engagement of contractual staff for establishment of PMMVY cell (at State/UT level and district level) shall be done as per States/UT guidelines in extant for such category of posts.
- e) Each of the above-mentioned staff hired should have clear Terms of Reference (as decided by the State/ UT) and be given remuneration as per Budget earmarked in the Scheme. Contracts for all such staff would be renewed annually based on performance.

f) Minimum qualification and experience for the contractual staff to be hired are as under:

Designation	Education qualification	Experience/Competencies
State Programme Coordinator	Postgraduate preferably in Social Sciences/Life sciences/ Nutrition/ Medicine / Health management / Social work/ Rural management	<ul style="list-style-type: none"> <li>i. At least 3 years' experience of working with the Government/Non-Government organizations.</li> <li>ii. Proficiency in using MS-office.</li> <li>iii. Proficiency in local language and English</li> </ul>
District Programme Coordinator		<ul style="list-style-type: none"> <li>i. At least 1-year experience of working with the Government/Non-Government organizations.</li> <li>ii. Proficiency in using MS-office</li> <li>iii. Proficiency in local language and English</li> </ul>
State Programme Assistant	Graduate preferably in in Social Sciences /Social work/Rural management/Statistics	<ul style="list-style-type: none"> <li>i. At least 2 years' experience of working with Government/ Non- Government organizations.</li> <li>ii. Proficiency in using MS-office, data entry and analysis.</li> <li>iii. Proficiency in local language and English</li> </ul>
District Programme Assistant		<ul style="list-style-type: none"> <li>i. At least 1-year experience of working with Government/ Non-Government organizations.</li> <li>ii. Proficiency in using MS-Office and data entry.</li> </ul>

#### 4.4 Use of Flexi Funds

To be used as per guidelines issued by Department of Expenditure, Ministry of Finance, Government of India vide Office Memorandum number F.NO. 55(5)/PF-II/2011 dated 6<sup>th</sup> September 2016 (**Annexure H**).

#### 4.5 Payment of DBT Transaction Charges

The payment of DBT Transaction Charges, if any, will be as per the instructions issued from time to time by the Ministry of Finance, Government of India.

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## 5. FUND FLOW AND DISBURSAL MECHANISM

### 5.1 Fund Flow

- a) Funds under the Scheme will be transferred from MWCD through PFMS in dedicated Escrow Account maintained by the State/UT at State/UT level. The State/UT will also credit their respective share to this Escrow account as per the cost sharing ratio between the Centre and State/UT. The fund available in the dedicated Escrow account are meant for transfer to the beneficiaries under the scheme. In no case, the funds from this account should be diverted for any other purpose. The funds from this account shall be transferred to the beneficiaries through PFMS in DBT mode.
- b) To meet the administrative and other expenditures the funds shall also be transferred by MWCD to the States/UTs as per schematic norms through PFMS in the State/ UT treasury. The State/UT after crediting their respective shares shall make it available to the Department for smooth implementation of the scheme.
- c) The State/UT shall ensure that sufficient fund is maintained in escrow account for making payment to the beneficiaries.

### 5.2 Escrow Account

- a) To ensure dedicated and timely availability of funds to the beneficiaries, without parking of funds at the State/UT level, States/UTs shall maintain a State/UT level Escrow Account for the Scheme. The fund transfer from Government of India and State/UT will be to this account for the further transfer to beneficiary's account.
- b) The States/UTs after opening the Escrow account for PMMVY shall submit the detail to MWCD as per prescribed format jointly signed by the Secretary concerned and the bank authority. The prescribed format is at **Form 5-A**.
- c) MWCD shall transfer the fund to this dedicated Escrow account.
- d) This account is mandatorily required to be an escrow account and must be opened in a bank as per instructions issued by Ministry of Finance for banking arrangements of the State/District Level Implementing Agencies handling Central Sector/ Centrally sponsored Schemes of various Ministries of Government of India vide O.M. No. S-11012/3(1) Bank/Ref. Case/2010/RBD/1688-1772 dated 10.11.2016 (**Annexure I**).
- e) For initiation of payment from the Escrow account to the beneficiaries, the State/UTs shall appoint a State/UT level Nodal officer (NO) who will obtain Digital Signature Certificate (DSC) well in advance to process the payment to beneficiaries. The detailed roles and responsibilities of NO are at Annexure C.
- f) Any changes in the authorized signatory must be in conformity with the banking regulations.
- g) The amount due for payment to the eligible beneficiaries on fulfilment of conditionalities will be available to the nodal officer through PMMVY-CAS. To avoid delay, the Nodal officer shall initiate payment to the beneficiaries at least twice a week.
- h) The payment to the beneficiaries shall be made on 'first-in-first-out' basis.

### 5.3 Sanctioning Authority

- a) In States/UTs where the scheme is being implemented by Department of Women & Child Development/ Social Welfare, CDPO, Anganwadi services shall be the approving authority for payment to be made to the eligible beneficiaries fulfilling the conditionalities of the scheme. He/ She will be responsible for correctness of the list submitted for payment to authority initiating payment at the State/UT level.
- b) Similarly, in the States/UTs where the scheme is being implemented by H&FW Department, the MO, at Block level shall be the approving authority for payment to be made to the eligible beneficiaries fulfilling the conditionalities of the scheme. He/ She will be responsible for correctness of the list submitted for payment to authority initiating payment at the State/UT level.
- c) All the payments to the beneficiary shall be made only through the Direct Benefit Transfer (DBT) mode.
- d) All the payment will be initiated by the officer who is the designated owner of the escrow account through PFMS.

### 5.4 Disbursement Mechanism

- a) The State Government/UT Administration shall project the number of prospective beneficiaries and their requirement of funds and submit it to MWCD by 31<sup>st</sup> December for the next Financial Year.
- b) On the basis of the approval, Government of India will release funds in four quarterly instalments for the implementation of the PMMVY to the States/UTs. The first two instalments will be released on notional basis and subsequent instalment upon submission of Statement of Expenditure by the State/UT based on the actual expenditure reflected therein.

### 5.5 Financial Provisions

- a) The Government of India funds would be based on the following cost sharing ratio between the Centre and the States/UTs:

All States/UTs (with legislature)	60:40
NER and Himalayan States	90:10
Union Territories without legislature	100% funding by Central Government

- b) Financial provisions under the PMMVY are in **Annexure G**. While incurring expenditure the States/UTs should ensure that the expenditure under various heads should be kept within the prescribed limits.

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## 6. RECORDS, REPORTS, MONITORING AND EVALUATION

### 6.1 Records

#### 6.1.1 General Instructions

Under the scheme the forms contain sensitive and personal information of beneficiary and her husband such as Aadhaar number, bank details, medical reports etc. Therefore, such records, both in physical or electronic form, should be kept in custody of authorised personnel only and in no case should be made available in any form to an unauthorised person. The documents containing personal details of the beneficiary should never be placed on notice board for information of public.

#### 6.1.2 Guidelines for Record Retention

- a) All the physical forms/registers need to be stored in a safe place by the official in possession of the document (field functionaries, CDPO/MO, Supervisor/ANM etc.) and will be shared/transferred with/to an authorised personnel only, if the sharing/transfer is justified under the guidelines of the scheme.
- b) The application forms received under Form Series 1, 2 and 3 should be destroyed after three years from date of archiving of these documents.
- c) Form 4 (PMMVY Register) may be retained up to 5 years and thereafter the same may be destroyed.

#### 6.1.3 PMMVY Register (Monthly Progress Reports)

PMMVY register (to be opened every financial year) has to be maintained at the AWC/Village by AWW or by ASHA/ ANM (**Form 4**). This register is meant to keep a record of all beneficiaries under a particular AWC/ ANM/ ASHA area who have applied under the Scheme. The register needs to be filled in blue ink/ ball point pen as per instructions given Annexure B.

This register will give the monthly progress report of the scheme which will be submitted to Supervisor/ ANM.

#### 6.1.4 Reports Generated from PMMVY-CAS

The reports generated from PMMVY-CAS shall be sent to AWC/Village/Approved Health Facility for updation of payment details, reasons for rejection of claims etc. The details are given in **Annexure J**.

#### 6.1.5 Utilisation Certificate and Statement of Expenditure

- a) The MPR by the AWW/ ASHA /ANM will be verified by Supervisor / ANM and submitted to the CDPO/MO as described in Annexure B.
- b) The monthly status of funds in escrow account shall be emailed to MWCD by 5th of every month in the prescribed format given in **Form 5-A**.
- c) Quarterly and Annual Statement of Expenditure (SoE) along with Physical and Financial report in prescribed formats (Form 5) will be consolidated by the State/UT to be sent to MWCD, by the following dates:

- a. Annual physical and financial report for previous year : by 31<sup>st</sup> May
  - b. Quarter ending 30<sup>th</sup> June : by 15<sup>th</sup> July
  - c. Quarter ending 30<sup>th</sup> September : by 15<sup>th</sup> October
  - d. Quarter ending 31<sup>st</sup> December : by 15<sup>th</sup> January
  - e. Quarter ending 31<sup>st</sup> March : by 15<sup>th</sup> April
- d) Time schedule for submission of monthly status of funds in escrow account, Statement of Expenditure, Physical and Financial reporting may be strictly adhered, to enable MWCD to release the funds to States/UTs in time.

## 6.2 Monitoring and Review of the Programme

The composition of committees to be formed at various levels is given at **Annexure K**.

- a) Monitoring and review of the programme shall be done by MWCD.
- b) Steering and Monitoring Committees would be formed at State/UT, District, Project and Village-level to ensure effective implementation of the Scheme. These will be sub-committees of ICDS Committees and members from Banking/Post Office may be added. Formation of separate PMMVY committees at State/District/Project/Village-level would be at the discretion of the States/UTs.
- c) These committees shall review, monitor and advise on matters relating to the implementation of the Scheme. They shall review progress of the scheme and strengthen the coordination and convergence between concerned Departments, consider the bottlenecks faced during the implementation of the scheme and suggest modifications required for improving the implementation. The Committees should meet as per timeline indicated in Annexure K or earlier, if needed, as per the discretion of the Chairperson. Technical experts, NGOs or civil society groups may also be invited, if considered appropriate.
- d) Where the scheme is implemented by other than Department of Women & Child Development, similar processes will be followed by the Department implementing the PMMVY and Report will be sent to Ministry of Women and Child Development by the implementing Department of the State / UT on a monthly basis.
- e) Access of the PMMVY implementing software and beneficiary's relevant data would be granted to the monitoring/implementing agencies.

## 6.3 Social Audits/Addressing Grievances

- a) A grievance can be defined as any sort of discontent/dissatisfaction, which needs to be redressed in order to bring about the smooth functioning of the scheme. Some indicative examples of grievances could be:
  - i. No services provided by the AWW /ANM/ASHA
  - ii. Irregular (delayed or short) payments of the instalments to the beneficiaries
  - iii. Exclusion of some beneficiaries owing to caste/class/personal bias
  - iv. Victimization
  - v. Corruption
- b) The States /UTs may consider setting up a formal grievance redressal mechanism at project/Health block and district level for handling complaints, determining the time limits and responsible units for

addressing complaints and taking necessary action. Existing grievance redressal units, e.g., Collector's grievance redressal unit / Zila Parishad Council at district-level, may be considered for addressing grievances related to this Scheme.

- c) Issues and grievances related to the scheme should be discussed in the meeting of the Village Health, Sanitation and Nutrition Committee (VHSNC) or Village-level PMMVY Steering and Monitoring Committee and forwarded to the project-level steering and monitoring committee for necessary action.
- d) Entitlements under the scheme, eligibility criteria and list of beneficiaries should be pasted at the AWC/ Village to maintain transparency. It would be ensured that Aadhaar, Bank/Post-Office account and other personal details of beneficiaries are not made public as stipulated under the provisions of IT Act, 2000 and Aadhaar Act, 2016.
- e) Further for Social Audits, the PMMVY should be an agenda point during the Gram Sabhas. Wherever possible, special Women Gram Sabhas (Mahila Sabhas) may be convened by the Women Sarpanch/ Panchayat member. During the Mahila Sabhas, names of the PMMVY beneficiaries should be informed to the community members by the Anganwadi Worker/Member Secretary of Village-level PMMVY Steering and Monitoring Committee (refer Annexure K). Representatives of Women SHG-Federations, Bank, Post office and District PMMVY Cell may also be invited to these meetings. Mahila Sabha meetings may be held twice a year.
- f) In areas where Mahila Sabhas are not in existence, the PMMVY Steering and Monitoring Committee at village-level may hold such a meeting by inviting community members.

#### **6.4 Evaluation:**

NITI Aayog will monitor the Scheme every month. For an initial period of two years after the launch of the Scheme. After six months of roll out, a detailed evaluation will be carried out to bring mid-course corrections, if any.

For this purpose, NITI Aayog shall constitute a PMMVY Technical Committee under chairpersonship of CEO, NITI Aayog.

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### 7. CAPACITY BUILDING AND CONVERGENCE

#### 7.1 Capacity Building & Information Education and Communication (IEC) activities:

- a) Separate provisions have been made under the scheme at State/UT and District level (State/UT PMMVY Cell and District PMMVY Cell) for each State/UT for Capacity Building and IEC activities.
- b) All functionaries of PMMVY right from State/UT level up to grass root workers need to be sensitized on PMMVY. Wherever possible, these sensitization workshops should be organized in coordination/jointly with the Health Department as health services provision is a significant part of the PMMVY.
- c) NIPCCD along with its Regional Centres would organize trainings, either through cascade model, vertical training or as the States/UTs deem appropriate. NIPCCD would also include the PMMVY training in its regular job and refresher training courses of all field functionaries under the scheme.
- d) State/UT ICDS and Health Departments through their training Institutes shall ensure all concerned personnel are trained under the PMMVY.
- e) Capacity building shall include training of PRI members.
- f) IEC activities at sector/project/district level and State/UT level shall be organized for spreading awareness about the scheme and sensitizing all concerned. A one-page pamphlet informing the intended beneficiaries about the scheme, criterion to be met to receive the financial benefits and mechanisms to receive the money and from whom and when may be considered to be distributed to the service providers and beneficiaries.
- g) Advertisements as IEC may be used to spread mass awareness about the scheme.

#### 7.2 Inter-departmental convergence:

The implementation of PMMVY requires close coordination with the following Departments. VHSND would be the platform for convergence of services from different Departments.

##### a) Health Department:

- a) Ensuring MCP cards are available and used.
- b) Ensuring timely ANC of pregnant women and vaccination of child
- c) Promote ANC done under the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)
- d) Promoting institutional delivery, early initiation of breastfeeding, colostrum feeding and exclusive breastfeeding for first six months.
- e) Organizing sensitization and training programs for PMMVY for all concerned staff.

##### b) Panchayati Raj Institutions:

- a) Organizing community awareness events.
- b) Providing additional incentives to mothers through their own funds.



- c) Conducting social audits/addressing grievances.
- d) Ensuring registration of Child Birth
- c) **UIDAI:** The beneficiaries and their husband without Aadhaar may be provided Aadhaar number.
- d) **Information / Public Relations Department:** Publicity and mass reach through - All India Radio, Song and Drama Division, Directorate of Advertising and Visual Publicity (DAVP), Division of Field Publicity, State IEC Bureau, Print Media, Regional TV channels, social media etc.
- e) **Lead State and District Post Office/Banks:** For opening of JAM Account (Jan-Dhan accounts seeded with Aadhaar and Mobile number) for PMMVY beneficiaries and devising appropriate cash transfer mechanism for smooth transactions in all the districts.
- f) **State Training Institutes/Medical Colleges** for ensuring their training curriculum includes training on the PMMVY.

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