

### Performance Audit Report Director Malaria Control Program, Sindh Hyderabad

### **AUDITOR-GENERAL OF PAKISTAN**

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#### PREFACE

Auditor-General conducts audits subject to Article 169 and 170 of the Constitution of the Islamic Republic of Pakistan 1973, read with sections 8 and 12 of the Auditor- General's (Functions, Powers and Terms and Conditions of Service) Ordinance 2001. The audit of Director Malaria Control Program Sindh, Hyderabad was carried out accordingly.

Directorate General Audit Sindh, Karachi conducted audit of the Director Malaria Control Program Sindh, Hyderabad during December 2018 for the period 2012-13 to 2017-18 with a view to reporting significant findings to stakeholders. Audit examined the economy, efficiency, and effectiveness aspects of the programme. In addition, Audit also assessed, on test check basis whether the management complied with applicable laws, rules, and regulations in managing the programme. The Audit Report indicates specific actions that, if taken, will help the management realize the objectives of the program.

The Audit Report is submitted to the Governor of Sindh in pursuance of the Article 171 of the Constitution of the Islamic Republic of Pakistan 1973, for causing it to be laid before Provincial Assembly.

Dated:

Javaid Jehangir Auditor-General of Pakistan

### Abbreviations and Acronyms

AI:Active IngredientAMS:Assistant Medical SuperintendentAPI:Annual parasite IndexBDN:Basic Development NeedsBER:Blood Examination RatioCDC:Communicable DiseasesCFV:Control Flow ValueCNIC:Computerized National Identity CardDDT:Dichlorobiphenyl trichloroetheneDDO:Drawing & Disbursing OfficerDMCP:Director Malaria Control Programme, HyderabadDoMC:Directorate of Malaria Control Programme PakistanEM:Environmental managementGFR:General Financial RulesICP:Inter Provincial CoordinationIGR:Insect Growth Regulator
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GFR:General Financial RulesICP:Inter Provincial Coordination
ICP: Inter Provincial Coordination
IGR: Insect Growth Regulator
INTOSAI: International Organization of Supreme Audit Institutions
IRS: Indoor Residual Spraying
ITN: Insecticide Treated Nets
IVC: Interrelated vector Control
IVM: Integrated Vector Management
LLIN: Long Lasting Insecticidal Nets
MCP: Global Malaria Control Program
MEP: Malaria Eradication Programme
MHC: Mother & Child Health
NRSP: National Rural Support Program
PC-I: Planning Commission Proforma-I
PSDP: Public Sector Development Program
PLYC: Pakistan Lions Youth Council
RBM: Roll Back Malaria
RDT: Rapid Diagnostic Test

SPPR:	Sindh Public Procurement Rules
SPR:	Slide Positivity Rate
UCs:	Union Councils
UNICEF:	United Nation International Children Emergency Fund
UNDP:	United Nation Development Program
ULV:	Ultra-Low Volume (Fumigation/ spraying machine)
WHOPES:	WHO Pesticide Evaluation Scheme
WHO:	World Health Organization

#### **Executive Summary**

Directorate General Audit Sindh conducted performance audit of Malaria Control Programme Sindh, Hyderabad during the month December 2018. In terms of performance of the program the objectives of the performance audit were to review the emergency guidelines to control malaria spread, whether DMCP is achieving its objectives including increasing awareness of the program and whether patients are receiving quality treatment. In terms of program monitoring and reporting, the objectives include whether DMCP is effectively monitoring and analyzing statistical data and updating its strategy accordingly. The performance audit also looked at whether all necessary rules and regulations are followed for procurement, recruitment, utilization of resources etc. and whether DMCP has effective systems like asset management system. The audit was conducted in accordance with International Organization of Supreme Audit Institutions (INTOSAI) Auditing Standards.

As part of the audit we found that overall the program was failing to achieve its objectives. This was evidenced by the fact that there is an increasing trend of malaria patients in Sindh with a general failure in prevention of the disease. All main indicators remained above the desired level and there was a general improper environment for early diagnosis, treatment & storage of anti-malaria material. The audit found that there was ineffective handling and early diagnoses of malaria patients, non-availability of public diagnostic facility centers at 1220 health centers and inefficient working of available centers. The audit also found that the distributions of LLINs to all concerned districts was not made which impacted the functioning of the program and that record was not available in the districts for onward distribution of LLINs distribution record to end users. A very serious issue that the audit also found was the improper collection of blood sample without using blood lancets.

In terms of program management and regulatory issues audit also found multiple problems in program implementation. The program remained ineffective due to an acute shortage of technical staff and in some cases we also found there were irregular appointments of seasonal laborers. Audit also found evidence of doubtful payments and withdrawals by the DDO, irrational expenditure over procurement of blood lancets when inventory was already available, non-deduction of sales tax, non-recovery of stamp duty and non-deposit of tender fees. There was also unauthorized expenditure on electronic media, irregular, expenditure without inviting open tenders, excess procurement in violation of PC-I and irrational procurement decisions that led to excess procurement and blocking of public funds. The audit also found that there was a general non-pursuance which led to the inefficient working of surveillance laboratory as the early diagnosis of 10,444 patients could not be confirmed.

The audit also found that there was potential embezzlement in issuance of anti-malarial material. There was also ineffective utilization and distribution of motorcycles and discrimination and nepotism in distribution of LLINs.

Amongst its key recommendations, the audit recommends that the strategy of the Programme should be reviewed and modified to reduce morbidity and mortality associated with malaria and measures should be taken to halt malaria and strategy to control all the main indicators be modified. Further the various entomological activities of the Programme should also be performed regularly to make IRS, LLIN and larviciding activities more effective and the vector control guidelines should be modified accordingly to improve the effectiveness of the Programme. It is also recommended that the blood sample from patients should be collected by using blood lancets, and in line with the WHO guidelines, so that the chance of contamination and risks to patients' health are reduced. It is also imperative that all health facility centers be equipped so that they can undertake an early and effective diagnosis of the malaria patients.

In terms of recommendations relating to program implementation, audit recommends that the human resource management of the Programme should be improved to enhance the results of program implementation. These include ensuring there is an effective mechanism for engaging seasonal laborers for IRS activities and ensuring that recruitment rules and regulations are followed in letter and spirit, staff are adequately trained and the right people are put at the right jobs. Audit also recommends that an effective internal audit be undertaken on a regular basis to strengthen the financial management and compliance with rules and regulations applicable to the Programme. In order to improve various procurement activities audit recommends significant improvements in the current processes. These include; ensuring procurement of materials are made in line with the provision of approved PC-I, developing and implementing an effective procurement plan to avoid blockage of public funds, strictly following SPPRA rules and regulations. The Programme should also ensure there are effective inventory, asset management and distribution systems in place to help implement the Programme effectively.

#### 1. INTRODUCTION

#### **1.1 Background:**

Malaria is one of the global public health problems and imposes a major health hazard in developing countries. It is a major health problem, threatening health of people due to prevailing socio-economic conditions and epidemiological situation specially in Pakistan. Malaria control program was initiated in Pakistan in 1950s and has passed through several evolutionary phases. In Pakistan, initially Malaria Eradication Program was started in 1961 & in Sindh in 1963. During Eradication period due to support of foreign aid, 100% houses were sprayed throughout the country. In 1976, the eradication program was re-named as Malaria Control Program. During this period, spray was restricted only to positive localities with more stress upon detection and treatment of cases.

In 1977 Malaria control activities were integrated with the Communicable Disease Control & Malaria Control program was integrated with General Health Services in Sindh Province during 1978.

Since 2002, DMCP has been working to combat Malarial disease in Sindh Province, for which development schemes in various phases have been executed. Under 18<sup>th</sup>amendment, Federal Ministry of Health along with its attached departments including Directorate of Malaria Control was devolved on 30<sup>th</sup> June 2011.

Keeping in view the important role played by the Directorate of Malaria Control, the honorable Prime Minister of Pakistan approved the revival of this Directorate with effect from 1st July 2011 and placed under the administrative control of Ministry for Inter Provincial Coordination (IPC).

- a. To act as Principal Recipient for all Global fund supported Health initiatives
- b. Preparation of proposals and liaison with international agencies for securing support of such partner agencies.
- c. Providing technical and material resources to the provinces for successful implementation of disease control strategies and disease surveillance.

In pursuance of Cabinet Division's decision; the Directorate of Malaria Control transferred from Ministry of Inter Provincial Coordination to Ministry of National Health Services & Regulation Authority.

DMCP, in co-ordination with DoMC Islamabad and District Health Office of each district has been working to control Malaria disease. There are various centers/hospitals from where the statistical data is collected and strategy for controlling the disease is formulated. The provincial monitoring unit of DoMC Islamabad is engaged in providing technical and material resources to this directorate at 951 centers through two different Non-Government Organizations, i-e Pakistan Lions Youth Council (PLYC) and National Rural Support Programme (NRSP), for successful implementation of disease control strategies and disease surveillance in 13 districts of Sindh province:

Whereas around 600 different centers within the vicinity of remaining 11 districts are being controlled by the DMCP; in coordination with District Health Office for successful implementation of disease control strategies and disease surveillance.

- **1.2 Vision:** Eliminate Malaria in Sindh
- **1.3 Mission:** The mission of the Malaria Control Program lingers is to reduce the burden of Malaria in Sindh to the extent that it would no serious public threat. to eradicate it in line with Global Action Plan 2008.
- **1.4 Goal:** The goal is to halt the malaria by 2020 and reverse its incidence.

#### **1.5** Objectives of the Programme:

#### 1. As per PC-I 2012-15 & 2015-16, the following objectives were set:

- a. Reduction in morbidity and mortality associated with malaria by controlling and keeping malaria burden by 50% and keeping plasmodium Falciparum at <30% as against existing >34% by 2015.
- b. Increase proportion of population coverage in malaria risk area using effective malaria prevention, control and proper treatment measures;
- c. Promoting Integrated Vector Management (IVM) to control mosquito vector;
- d. To build capacity, by improving initial and continuing training and infrastructure facilities;

- e. Prevention and control of Malaria in Epidemic situations and complex emergencies:
- f. Ensuring involvement of other sectors, to coordinate, share resources rationally, set standards and avoid duplication;
- g. By doing a, b, d & e above, the incidence of malaria would be halted, roll backed and reversed effectively by the year 2016 as per Sustainable Development Goal 3.3 and leading to its gradual elimination as per WHO global Malaria Action Plan 2008.

#### 2. As per PC-I 2016-18 the following objectives were set:

- a. More than 80% of suspected Malaria cases are parasitological confirmed using microscopy using microscopy or RDT an all confirmed Malaria cases received prompt and affective treatment with an appropriate anti-malaria drug within 24 hours of onset of fever
- b. To ensure and sustain 80% coverage of multiple prevention interventions in the target population (High Endemic UCs) as per national guidelines by 2020
- c. To increase community awareness up to 80% on the benefits of early diagnosis, prompt treatment and malaria prevention measures using health promotion, advocacy and BCC interventions by 2020
- d. to enhance technical and managerial capacity in planning, implementation, management and MEAL (Monitoring, Evaluation Accountability and Learning) of Malaria control and interventions by 2018
- e. To ensure and sustain availability of quality assured strategic information (epidemiological, entomological, and operational) from all public sector health facilities for informed decision making by 2018.
- f. To ensure provision of malaria prevention, treatment and control services in humanitarian crises and emergencies by 2017.

#### **1.6** Achievements of the Programme:

As per the DMCP following were the achievements of the Programme:

a. 320 new Microscopy Centers have been established in various districts, so the number of such centers have increased from 280 to 600. Further 422 Microscopes were issued to District training center DoMC and trained Microscopist/Malaria Supervisors have been posted & provided with new Microscopes.

- b. Fumigation was conducted with 93,659 Liters Deltamethrin 1.5EC (Liquid) and 16,811 Liters Permethrin (25 EC) insecticides were consumed by the ULV Machines during the peak season of last 10 years as well as during flood & rains.
- c. 203,617 Kg Alphacypermethrin WP 5% had been distributed all over Sindh Province out of which 174,386 Kg Alphacypermethrin WP 5% had been consumed during the Indoor Residual Spray (IRS) and resultantly 4,970,039 rooms were sprayed. The remaining Insecticides were consumed by the District Health Officer after the flood. The IRS was conducted by the District Health Officers on self-basis at IDP's camps daily all over the Province due to the Flood/Heavy rains during the year 2010 and 2011. 2,000 Kg Alphacypermethrin WP 5% was used for Chikungunya outbreak at Karachi; the IRS spray was carried out in district Malir around Chikungunya positive cases. Around 58,000 houses were sprayed during the months of December 2016 and January 2017 and 2,000 Liters Insecticide was handed over to KMC Karachi for fumigation during the outbreak when it was again reported in the month of April 2017 in various towns of Karachi. This caused an extra burden on the program.
- d. Larviciding was also conducted with Temephos Granules 1% 15,650 Kg.
- e. Temephos Granules 2% 15,502 Kg, Fenthion Granules 126,550 Kg &Temephos (50 EC Liquid) 26,371 Liters were consumed by 360 spray pumps in positive pits.
- f. 45 ULV Machines (80 Liters capacity), 178 ULV Machines (10 Liter capacity) and 73 ULV Machines (5 Liter Capacity) have been procured & distributed to the all districts of Sindh province.
- g. 238,121 Long Lasting Insecticide Treated Nets were issued to Districts.
- h. Slide collection was as shown in succeeding table.

Year	Target	Actual Collection
2012	1,125,000	1,785,499
2013	1,200,000	1,275,543
2014	1,200,000	1,151,001
2015	1,200,000	1,177,981
2016	1,200,000	1,486,997
2017	1,600,000	1,534,598
2018	1,600,000	1,484,921

#### 1.7 Cost of the Programme and year-wise financing

**a) Provincial:** Sindh government assisted the DMCP program through PSDP by releasing following funds to achieve the program set objectives (Rs in million)

releasing following funds to demove the program set objectives. (its in minion)							
Name of Scheme under which the funds released.	Year	Budget Grant	Releases	Expenditure	Savings		
Phase-II	2012-13	105.000	105.000	104.834	0.165		
Strengthening/ Extension of	2013-14	234.380	234.380	223.987	10.401		
Provincial Malaria Control	2014-15	108.051	108.051	107.964	0.084		
Programme in Sindh.	2015-16	81.889	81.884	77.534	4.354		
Phase-III	2016-17	116.117	75.000	74.851	0.148		
Strengthening of Provincial Malaria Control Programme in Sindh. (Govt. of Sindh Share, funds by Federal Govt. were not released)	2017-18	161.919	100.572	100.470	0.101		

b) **Federal Government Portion:** The Federal government assisted the DMCP through PSDP by releasing following funds to achieve the program set objectives.

Brief	Year	Allocation	Released	Expenditure	Savings
Ministry of National	2013-14	26.040	26.040	26.040	
Health Services,	2014-15	26.040	44.268	44.268	
regulation &	2015-16	17.360	8.232	8.225	
coordination	2016-17	41.840	41.840	40.790	1.049
sponsored funds under roll back malaria Programme in Sindh for achievement of objective of this programme	2017-18		7.812	7.805	0.006

#### (Rs in million)

#### 2. AUDIT OBJECTIVES

- **2.1** Review whether the emergency guidelines for vector control & monsoon plan were prepared to control the malaria spread;
- **2.2** Whether the DMCP has been successful in accomplishing its objectives for which it was established;
- **2.3** Whether qualitative treatment is provided to the patients and DMCP monitors the emerging parasite resistance to anti-malarial medicines and mosquito resistance to insecticides;

- **2.4** Whether the procurement was made in light with the government rules/ SPPRA and their exit proper asset management system;
- **2.5** Whether recruitment was made as per rules and human resources are utilized properly to get maximum output from given resources;
- **2.6** Whether DMCP arranges the mass awareness program for educating the people of Sindh regarding benefits of early diagnosis, prompt treatment and malaria prevention measures using health promotion, advocacy and Behavior Change Communication interventions;
- **2.7** Whether the statistical data of patients collected is being analyzed properly for the evaluation & updating the strategy of DMCP & surveillance system for monitoring;
- **2.8** Whether the DMCP Sindh, Hyderabad is performing its functions economically, efficiently and effectively;

#### 3. AUDIT SCOPE

- **3.1** The audit reviewed programme documents and record for the years 2012-13 to 2017-18, held focused group discussion with Director, Epidemiologist, Entomologist, Malaria superintendent, Microscopist and their teams, visited selected microscopy centers and Sindh reference lab.
- **3.2** The audit scrutinized design and operational performance of the project.
- **3.3** The Performance Audit covered operations and spectrum of activities of selected sites of Hyderabad, Matiari, Jamshoro and Dadu districts.
- **3.4** The detailed activity of scrutiny of record of remaining sites could not be carried out due to limited resources and time constraint.
- **3.5** Data availability was based on Government based centers only.

#### 4. AUDIT FINDINGS AND RECOMMENDATIONS

#### 4.1 Organization and Management:

# 4.1.1 Irregular engagement of seasonal labours for IRS activities-Rs 37.898 million

Circular No. FD (Exp: IX)/767/91(B)prov dated 23<sup>rd</sup> April 1996 issued by Finance Department Sindh, "No appointment of work charged establishment/contingent paid staff be made without prior approval of Finance Department".

During performance audit of DMCP, it was observed that an amount of Rs 37.898 million was drawn for payment to contingent paid staff (seasonal labor) for IRS activities (details at Annexure 4.1.1). Audit raised the following observations:

- 1. Approval from Finance Department for engagement / appointment of Contingent Paid Staff/ seasonal labours was not obtained.
- 2. Detailed estimates in line with PC-I provision of Spray work i.e., Area to be sprayed, quantity of Insecticides and labor required was not prepared to authenticate the claim.
- 3. Appointment letter/Engagement letters were not available, only payment vouchers showing the payment was available.
- 4. There does not exist the proper mechanism of appointment of seasonal labours, besides it could not be authenticated whether employees were otherwise working in any other Govt. Department on regular or contractual basis or not.
- 5. Whole of above amount was drawn from public exchequer in favor of DDO, Payment was not made through pre-audit cheques in favor of labours subsequently the transparency could not be authenticated.

(Rs in million)

		1			-
Cost Center	2013-14	2015-16	2016-17	2017-18	Total
HB5039			0.161		0.161
HB5144			5.123	5.860	10.983
HD9421	16.250	8.532			24.782
HD9573		1.972			1.972
Total	16.250	10.504	5.284	5.860	37.898

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that there should be a proper mechanism of engaging seasonal labours for IRS activities in line with Finance department government of Sindh and undertaking from them should be obtained stating that they are not working any other department.

#### (OM#23)

#### 4.1.2 Irregular payment of inadmissible allowances-Rs 0.104 million

Government of Sindh allowed / increased various allowances at the rates for Medical Doctors on Non-Teaching Side (General Cadre, Dentist & Dental Surgeon and Specialist) w.e.f., 1<sup>st</sup> July, 2011 vide notification no FD(SR-III)5/40-2002(C). This notification states "Hard work allowance at the rate of Rs. 6,000/- per month has been allowed to Medical Doctors treating patients of notified infectious diseases such as TB, Swine Flu etc."

During performance audit of DMCP, it was noticed that Dr. Manzoor Hussain, Additional Director bearing employee personal number 10025492 drawn hard work allowance of Rs 0.104 million during 2012-13 & 2013-14 in violation to the notification, as the malaria disease is not notified as infectious diseases.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the concerned officer may be approached for recovery and amount be remitted into "C03824-Recoveries of overpayments".

(OM#16)

#### 4.1.3 Ineffective working of Programme in acute shortage of technical Staff.

Section 8.1.3 of Guidelines for the treatment of malaria - 3rd edition "...... In humanitarian emergencies, when there are many patients and many present late, effective triage, with immediate resuscitation and treatment, are essential. In epidemic situations, severe malaria is often managed in temporary clinics or in situations in which staff shortages and the high workload make intensive case monitoring difficult." During performance audit of DMCP, it was observed from sanctioned & working strength that there had been widespread of staff shortage since 2012 in all districts of Sindh. These staff include; Malaria Superintendent, Assistant Entomologist, Non-Medical Evaluator, Malaria Supervisor, Senior Microscopist and Insect Collector etc. The DMCP had written many recurring correspondence letters to the Secretary to govt of Sindh, Health Department for filling vacant posts and creating new posts, despite that no progress noticed (details at Annexure 4.1.3).

This widespread shortage of staff in Malaria Control Programme across all districts in Sindh has been identified as one of most critical constraints to the achievement of goals and objectives of programme. Furthermore, the widespread shortage of staff is also impairing the health service provision of malaria control program and results outbreak and chronic prone of malaria since many years.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the vacant positions needs to be filled in line with recruitment rules and regulation for effective running of programme.

#### (**OM#17**)

#### 4.1.4 Non-placement of right person at right position

According to Services, General Administration & Co-ordination Department Government of Sindh letter no S.O. IX. Reg(S&GAD)/11-/16-80 dated 30<sup>th</sup> March 1982, various measures were prescribed to ensure discipline and efficiency among all ranks. Para-b of above letter states, "Workload should be rationally distributed among various members of section/office so that no one is allowed to have free time at the cost of others"

During performance audit of DMCP, it was observed that the programme management did not prepare the job description as a result of which the right person was not placed for right job. Subsequently the non-technical and untrained persons were posted at microscopy centers for early diagnosis. For instance, the tin smith is working as microscopist. This is not only waste of human resource of programme but resulted into ineffective working. The improper placement of staff resulted the inappropriate administration of medicine to the patients as evident in relevant para of this report.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that proper job description be prepared so that the right person be placed for right place for effective results. This would not only minimize the time for effective output but lead the programme to take measures for strengthening of early diagnosis, preventive measures and proper treatment.

(**OM#18**)

## 4.1.5 Non-availability of Public Diagnostic facility centers at 1,220 Health facility centers

As per strategy of Govt of Sindh for health facility centers, it was the first & foremost role of provincial govt to Strengthen district health systems starting with most under-developed districts of Sindh.

During performance audit of DMCP, it was noticed from statistical data that there were 2,187 health facility centers to cover the whole population of Sindh province. The DMCP covered 967 (44%) health facility centers either by establishing microscopy or RDT centers for early diagnosis of malaria, whereas such facility of early diagnoses of malaria disease did not exist at 1,220 health facility centers (details at Annexure 4.1.5).

Due to non-availability of public diagnostic facility centers, the major portion of the population was not covered under malaria control programme & the goal of programme "Eradication of Malaria" was not achieved.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that maximum health facility centers be covered to diagnose the malaria patients and strategy for controlling of malaria disease be revised accordingly.

(OM#38)

#### 4.1.6 Malaria Programme running without Entomological surveillance system

During performance audit of DMCP, it was noticed that entomological activities were not performed during 2012-13 to 2017-18. Due to non-performance of entomological activities the management failed to achieve following objectives:

- 1. The Malaria vector species were not identified.
- Species specific vector densities & vector composition were not measured; Vector blood feeding habits (zoophilic, anthropophilic) were also not determined & other vector behavior (exophilic, endophilic, exophage, endophage) were not assessed;
- 3. Vector susceptibility to insecticides was not monitored (frequency, intensity and mechanisms of resistance), subsequently the anti-malaria medicine was not assessed;
- 4. rates of infection of the vector with the malaria parasite (sporozoite rate, oocyst rate) was not measured; and
- **5.** the aquatic habitats of immature stages of vectors and habitat characteristics were not identified

Due to non-achievement of above entomological objectives the incurrence of expenditure on vector control interventions (IRS, LLIN, Larviciding) stands wasteful and ineffective as evident from the epidemiological data wherein the number of patients increasing, and API ratio remained above controlled level.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the entomological activities be performed regularly to make IRS, LLIN and larviciding activities more effective further recommends to modify the vector control guidelines accordingly.

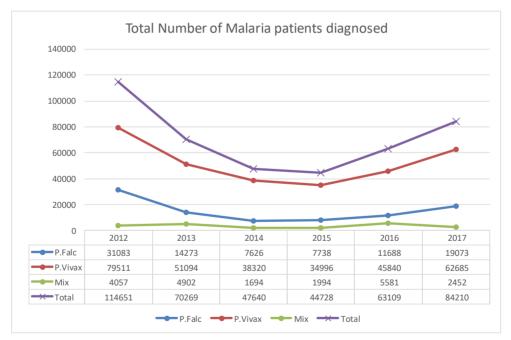
(OM#01)

#### 4.1.7 Increase trend in malaria patients noticed in Sindh province as whole

As per objective set in PC-I, one of the core objectives of the programme was "Reduction in morbidity and mortality associated with malaria by controlling and keeping malaria burden by 50% and keeping plasmodium Falciparum at <30% as against existing >34% by 2015".

During performance audit of DMCP, it was noticed that the number of malaria patients were increased in 2015 to 2017. During 2015, malaria among 44,728 patients were diagnosed, whereas the number of patients were increased to 63,109 and 84,210 during succeeding two years. This shows that the preventive mechanism of the program was not in line and management failed to implement its planned strategy.

The increase in number of patients leads the programme toward failure as the objective of the programme was to reverse the incidences and reduction of morbidity and mortality associated with malaria.



The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the strategy be reviewed, and appropriate measures be taken to reduce in morbidity and mortality associated with malaria.

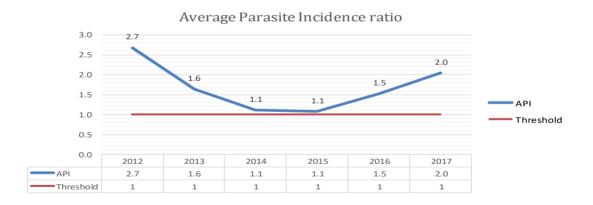
#### (OM#02)

#### 4.1.8 Parasite incidence remained above the prescribed threshold

As per PC-I for the years 2012-15 & 2015-16, the program's goal was to halt the malaria by 2015 and reverse its incidence. Furthermore, as per PC-I for the years 2016-17 the goal was to reduce malaria specific morbidity by 75% (API <1) through quality assured diagnostic, treatment and prevention services accessed by all.

During performance audit of DMCP, it was noticed that Provincial Average Parasite Incidence (API) remained above 1 whereas as per PC-I, the same was required to be below 1. The provincial and districts patients' data was analyzed in depth & following observations were noticed:

- i. At provincial level, instead of lowering the API ratio below 1, it was found increasing from 1.1 in 2015 to 2.00 in 2017 as evident from below Chart.
- ii. At district level various districts were found at risk as the API ratio was found 21.2 at Tharparkar, 9.4 at Sujawal, & 8.8 at Mirpurkhas.



From above chart, it is concluded that API is accelerating with passage of time which proves the failure of management. This increase leads the programme toward failure as the objective of the programme was to reverse the incidences and reduce the morbidity and mortality associated with malaria. The matter was reported to the management in January 2019, but no reply was received.

Audit requires that measures be taken to halt malaria and strategy to control API be modified accordingly.

#### (OM#03)

#### 4.1.9 Failure of management in multiple prevention of malaria disease

As per WHO policy recommendations for malaria vector control, "The specific vector control interventions recommended by WHO are categorized as either core or supplementary interventions. IRS is an operational procedure and strategy for malaria vector control that involves spraying interior surfaces of dwellings with a residual insecticide in order to kill or repel endophilic mosquitoes) with a WHO recommended insecticide".

During performance audit of DMCP, it was noticed that the management failed to take multiple prevention to control the occurrence of malaria disease. The management planned 20,941,161 rooms to be sprayed for IRS activities against which only 2,377,342 rooms were sprayed whereas the remaining 18,563,819 rooms were not sprayed, which proves the failure of management in preventing the malaria disease. Besides this, it was also noticed that, the before and after spray density was not carried out by entomologists due to which it could not be authenticated whether the vector control activity (IRS) were performed effectively or otherwise.

Detail	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
IRS Activities Planned	3,312,270	3,718,055	3,625,656	3,442,517	3,509,189	3,333,474
Achievement	-	1,252,321	-	647,064	167,307	310,650
Non- achievement	3,312,270	2,465,734	3,625,656	2,795,453	3,341,882	3,022,824

Due to non-performance of IRS activities the malaria parasite incidences increased in succeeding years as evident from statistical data of patients.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that rooms for IRS activities be planned in light with SPR, API and other relevant incidences. The IRS activities be performed prior commencement of peak seasons to control and reduce the spreading of malaria disease.

#### **(OM#04)**

# 4.1.10 Failure of management to collect the required number of slides within Karachi

As per WHO guideline, for early diagnoses and rapid treatment to the malaria patients the Blood Examination Ratio should be above 5%. The Blood examination ratio is the relation of total slides collection & total population of vicinity.

During performance audit of DMCP, it was noticed that the Blood examination ratio remained below 5% within Karachi, densely populated city of Sindh. Being the key performance indicator of early diagnoses and rapid treatment throughout the province, it was mandatory for the management to collect the maximum number of slides to maintain blood examination ratio above five so that the major portion of population be covered. In lieu of this the management covered very nominal portion of the population within Karachi.

Detail	2012	2013	2014	2015	2016	2017
Slides Collected	106,910	83,288	79,965	69,093	87,023	88,154
Population Date provided by EPI to DOMCP	15,309,905	15,309,905	15,309,905	14,722,438	14,722,438	14,722,438
BER ratio	0.70%	0.54%	0.52%	0.47%	0.59%	0.60%

Non-collection of required number of slides resulted in less coverage of population for early diagnosis and proper treatment.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the mechanism of collecting the required number of slides be strengthened to achieve the required BER ratio.

(OM#05)

### 4.1.11 Inappropriate administration of antimalarial medication based on improper clinical diagnosis to 4,582 patients

The national malaria case management guidelines issued by DoMC states that "confirmed vivax malaria patients, confirmed falciparum malaria and mixed infect should be administrated medicine dosage respectively, for effective control of malaria".

During performance audit of DMCP, it was noticed that 424,607 patients were diagnosed as Malaria patients throughout the Sindh province. From 424,607 positive cases only 123,681(29.13%) positive slides were reconfirmed in Sindh reference laboratory. Among those 123,681 positive slides, result of 1088 positive cases was changed. This means that if the patient was diagnosed with Plasmodium vivax at early diagnosis center, it had plasmodium falciparum and vice versa.

Year	Total Positive case	Total positives cases received for re- confirmation	Confirmed Positive Cases	Errors found in positive cases	%age	Estimated no of mis- positive
2012	114,651	27,163	26,884	244	0.91%	1,040.58
2013	70,269	21,452	20,254	111	0.55%	385.10
2014	47,640	18,440	12,243	365	2.98%	1,420.29
2015	44,728	14,060	14,008	110	0.79%	351.23
2016	63,109	18,197	13,871	117	0.84%	532.32
2017	84,210	24,369	13,923	141	1.01%	852.81
	424,607	123,681	101,183			
		Total	1,088		4,582.32	

As per treatment guidelines, treatment for malaria is based upon the type of malaria parasite infecting the blood and where the patient got the infection; because different types of malaria are resistant to certain medicines. The right drugs for each type of malaria are necessary for a complete cure of the disease. Due to wrong diagnoses of patients at district level the patients were prescribed wrong dose. The number of patients would have been increased to 4,582 at same error ratio, if remaining 300,926 slides had been received at Sindh reference laboratory for reconfirmation. Such incidence of change in results occurred majorly in district Khairpur, Umerkot, Ghotki and Sukkur (details at Annexure 4.1.11).

This negligence of malaria staff put the patients at risk as the wrong dosage has adverse health effects, this proves that malaria was not effectively diagnosed & controlled.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that proper trainings to the malaria staff be imparted to improve the proper diagnosis & treatment mechanism for the safety of patients, the responsibility be fixed against the person(s) found at fault.

#### (OM#06)

# 4.1.12 Failure in early diagnoses and Prompt treatment subsequently 70,533 malaria patients were affected

Chapter No.04 of "Malaria Case Management, desk guide for clinicians and health providers issued by technical assistance management agency to the national health and population facility, Pakistan in December 2007", Pakistan's national case management policy discourages treatment based on clinical diagnosis. Care providers are urged to use parasitological confirmation to guide the treatment of malaria following the diagnostic approach.

During performance audit of DMCP, it was noticed that 8,423,706 slides were used by microscopy centers throughout Sindh during 2012 to 2017. Out of which 424,607 slides were diagnosed as positives cases whereas remaining 7,999,099 slides were declared as negative. As per standing operating procedures, every microscopy center is bound to send 10% of negative slides for reconfirmation at the Sindh reference laboratory established at provincial office. In violation to same, district-based microscopy centers sent only 127,019 (1.59%) slides.

Year	Total Slides	Total Positive case	Total negative cases received for re- confirmation	Non-receipt of negative cases for confirmation	Negative Cases confirmed as positive	Error Ratio	Estimated
2012	1,787,511	114,651	16,639	1,656,221	190	1.14%	19,102
2013	1,277,556	70,269	17,186	1,190,101	164	0.95%	11,521
2014	1,153,015	47,640	19,560	1,085,815	283	1.45%	15,993
2015	1,179,996	44,728	23,494	1,111,774	202	0.86%	9,761
2016	1,489,013	63,109	21,716	1,404,188	158	0.73%	10,375
2017	1,536,615	84,210	28,424	1,423,981	74	0.26%	3,781
	Total	424,607	127,019	7,872,080	1071		70,533

During reconfirmation the results of those negative slides, it was pointed out that 1,071 patients had malaria but were not declared/diagnosed, as a result of which the patients were not treated. The number of such patients would have been increased to 70,533 at same error ratio, if the remaining 7,872,080 negative slides had been received and reconfirmed at Sindh Reference laboratory. District wise statement shows that District Shikarpur, Sukkur, Khairpur and Thatta stands on top of such inefficiency (Details at Annexure 4.1.12).

This negligence of malaria staff put the patients at risk as they were not prescribed any treatment due to erroneous/ non-diagnoses; this proves that the objective of programme for prompt treatment was not effectively achieved.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that proper trainings to the malaria staff be imparted to improve the proper diagnosis & treatment mechanism for the safety of patients. The responsibility be fixed against the person(s) found at fault.

#### (**OM#07**)

#### 4.1.13 Improper environment for early diagnosis, treatment& storage of antimalaria material

As per international standards, the loss of potency during storage may influence the efficacy and safety of pharmaceuticals. Pharmaceutical products require controlled storage and transit conditions in order to ensure that their quality is not compromised. Storage is an important aspect of the total drug control system. Proper environmental control (i.e., proper temperature, light, and humidity, conditions of sanitation, ventilation, and segregation) must be maintained wherever drugs and supplies are stored in the premises.

During performance audit of DMCP Sindh, Hyderabad, it was noticed that there were no proper cold storages to maintain the efficacy of the storing of medicine, reagent chemicals, slides and anti-malaria material. Audit team visited store of main office, diagnostic centers of District Hyderabad, Dadu, Jamshoro and Matiari. During visit of main office store, it was noticed that;

- a) The expensive ULV machines (80 liter), which were procured without need as evident from stock position, were lying at open space of main office. (Picture-1).
- b) The medicines were not stored with proper storage protocols which effected the efficacy & potency. (Picture-2).
- c) Early diagnosis material including microscopy slides and RDT kits were stored along with other hygienically adverse items (Picture-3).
- d) Newly procured machines were stored along with obsolete material (Picture-4).

During visits of diagnostic centers, it was observed that in various sentinel sites there was no power backup in case of electricity breakdowns. The microscopes were operative on electricity, thus during the breakdown of electricity the patients were not diagnosed. The concerned Hospitals were very reluctant to take utmost care of attached sentinel sites especially in respect to proper storage of anti-malarial items and its distribution mechanism. (Picture-5). Due to these conditions, the patients preferred to pay for private labs rather than trusting on government centers. There was no proper monitoring system to verify the expiry of available material. During physical visits of the audit team on dated 07-12-2018 the expire blood lancets were found available at sentimental sites (Picture-6).

Furthermore, due to various reasons, the poor patients have to make several visits for obtaining treatments/injections as various centers were not having complete malaria dose for patients. It was also noticed that the patients were frequently treated with primaquine without analyzing glucose-6-phosphate dehydrogenase (G6PD) test. The administration of primaquine tablet to below 5 years' children put the patients at major risk of life loss. This shows that the malaria staff was not trained to be aware of the ill treatment/ wrong dosage side-effects. patients were not educated for the pros and cons of the diseases, its ailment and events faced after start of medication.

The above weaknesses reflect poor internal control.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the internal controls should be strengthened, and proper ambience be created for treatment of the patients.

(OM#39)

#### 4.2 Financial Management:

### 4.2.1 Wasteful expenditure over procurement of blood lancet-Rs 107.691 million

Rule 4 of SPPR 2010, Principles of Procurements "While procuring goods, works or services, procuring agencies shall ensure that procurements are conducted in a fair and transparent manner and the object of procurement brings value for money to the agency and the procurement process is efficient and economical.

During performance audit of DMCP, it was noticed that the management procured excess quantity of blood lancet which blocked public funds of Rs 215.390 million. The procurement was made without need & stock assessment as evident from the stock register. The closing balance and issuing quantity clearly depict that there was no need, such as during the year 2012-13, quantity of 1,953,000 blood lancets was available against which in succeeding three years' cumulative quantity of 171,7,600 numbers were issued. This proves that enough quantity was available to cater the need but instead, procurement proves the incurrence of extravagant expenditure Rs 107.691 million.

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Year	Opening Balance Qty in no	Procured Qty in no	Issued Qty in no	Balance Qty in no	Rate per pkt (200 lancets per pkt)	Amount
2012-13	1.953	2.000	0.460	3.493	313	5.466
2013-14	3.492	2.080	0.937	4.635	460	10.660
2014-15	4.635	2.200	0.320	6.515	615	20.033
2015-16	6.515	2.134	0.929	7.720	572.7	22.106
2016-17	7.720	1.435	0.936	8.220	578	23.755
2017-18	8.220	1.44	0.778	8.882	578	25.668
Total		11.289	4.360			107.691

Procurement of material without assessing the need caused blockage of public money.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the procurement be made keeping in view the actual requirement, for this the procurement plan be prepared to avoid blockage of public funds.

#### (OM#30)

#### 4.2.2 Doubtful payment to DDO instead of vendors for Rs 45.419 million

Appendix 18-A of Sindh Financial Rules; Every officer should realize fully and clearly that he will be held personally responsible for any loss sustained by government through fraud or negligence on his part and that he will also be held responsible for any loss arising from fraud and negligence on the part of any other government officer to the extent to which it may be shown that he contributed to the loss by his own actions or negligence.

During performance audit of DMCP, it was noticed that various bills of different heads amounting to Rs 45.419 million in favor of DMCP bearing Vendor no 30000163 were presented in District Accounts Office Hyderabad, subsequently same were passed and cheques were issued in favor of "Director Malaria Control programme". (Details at Annexure 4.2.2) As per rules, the cheques are to be issued in favor of payees only instead of DDO, thus huge payment stands irregular. Furthermore, it was also noticed from the cash book that the DMCP drawn funds of an amount of Rs 44.982 million in cash from public exchequer instead of through cross cheques. (Details at Annexure 4.2.2-A). However the bank statement was not furnished due to which authentication of disbursed amount could not be made.

The drawing of huge amount from public exchequers in favor of DDO caused ineffective utilization of funds.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the bills be prepared in favor of actual payees and preaudit cheques must be issued in favor of them to rule out the question of transparency.

(OM#24 & 22)

#### 4.2.3 Unauthorized expenditure on Electronic Media-Rs 39.813 million

Para 6 of Advertisement Policy Notification 01<sup>st</sup> July 2011 published in The Sindh Government Gazette on 19009-2011, "All advertisements of Sindh Government Departments, Local Bodies/Councils and Organizations under the control of Sindh Government ...... shall be routed to the daily newspapers/ periodicals, & electronic media through Sindh Information Department being custodian of Sindh Government's Public relations and Publicity"

During performance audit of DMCP, it was observed that an amount of Rs 39.813 million was paid to various service renderers engaged for procurement of Electronic Media (i.e., telecasting/broadcasting TV/Radio Spots) in violation of Advertisement Policy of Government of Sindh referred above. (Details at Annexure 4.2.3) As per above policy no department of Government of Sindh (except Information Department) is authorized to appoint Advertising Agency(ies) or give advertising on print/electronic media.

Paid to	2013-14	2015-16	2016-17	2017-18	Grand Total
M/s. Connect Marketing Karachi	621,460				621,460
M/s. S.S. Marketing (Pvt)Kcy				16,148,260	16,148,260
M/s. View Communication Karachi.	1,945,440				1,945,440
M/s. S.S. Marketing Hyd	3,753,999	10,428,122	5,337,980		19,520,101
M/s. Galaxy Supplier Adv Company Karachi				1,577,740	1,577,740
Grand Total	6,320,899	10,428,122	5,337,980	17,726,000	39,813,001

Deviation from prescribed procedure constituted weak internal control.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the public funds be utilized in line with government rules and regulations. The advertising expense should be incurred taking on board the concerned department.

(OM#26)

#### 4.2.4 Non-Deduction of Sales Tax on Services – Rs 3.739 million

Chief Minister Instructions vide letter No.DS (Staff)/CMS/12/01/2012 dated 29.11.2012 wherein all Administrative Secretaries and their respective DDOs/Officers of all institutions/departments to comply with provision of SST Special Procedure (Withholding Rule, 2011) which states that 'the accounting office responsible for making payment shall deduct and withhold the tax amount and shall transfer the same amount, so deducted at source during a month to Sindh Government's head of account "B-02384"---Sindh Sales Tax on Services".

During performance audit of DMCP, it was observed that an expenditure of Rs 28.765 million was incurred for the public awareness about malaria under head "Television Spot and Radio Spot", but the Sindh Sales Tax on services was not deducted. (Details at Annexure 4.2.4)

Non-deduction of sales service tax resulted in loss to Government exchequer amounting to Rs 3.739 million.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the payment to the service renderers be made after withholding of sales tax on services.

(OM#36)

#### 4.2.5 Irregular expenditure without inviting open tenders-Rs 3.177 million

Rule 17 (1) & (2) of Sindh Public Procurement Rules, 2010 states that procurement over one hundred thousand rupees and up to one million rupees shall be advertised by timely notification on the Authority's websites and in print media in the manner and format prescribed in these rules. The advertisement shall appear in at least three widely circulated and leading daily newspapers of English, Urdu and Sindhi language.

During performance audit of DMCP, it was observed that an expenditure of Rs 3.177 million was incurred on procurement of various items without inviting open tenders detailed as under. (Details at Annexure 4.2.5)

Deviation from prescribed rules resulted in procurement of material on expensive rates.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the SPPR be implemented in letter and spirit while placing procurement order to achieve the economical and competitive rates.

#### (OM#35)

#### 4.2.6 Non-recovery of Stamp Duty-Rs 1.801 million

According to Para 22-A of stamp act, "It is the duty of the competent authority to recover the stamp duty and affix the same, while execution of agreement @ 0.30 paisa per hundred rupees of the value of the agreement or against tender cost."

During performance audit of DMCP, it was observed that payments amounting to Rs 600.492 million were made to various suppliers but stamp duty amounting to Rs 1.801 million (detailed at Annexure 4.2.6) @ 0.30 paisa per hundred rupees of the value of procurement was not recovered and affixed the same.

Due to this negligence of the management the government sustained loss.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires expediting recovery under stamp duty from the contractor and deposit into relevant account.

#### (**OM#27**)

#### 4.2.7 Non- deposit of tender fees-Rs 0.371 million

According to rule 5 of General financial rules, "Moneys received as dues of Government or for deposit in the custody of Government should be credited into the Public Account in accordance with the Treasury Rules".

During performance audit of DMCP, it was noticed that 233 bidders purchased tender/bidding documents of Rs 0.371 million for various items to participate in tendering process (detailed at Annexure 4.2.7), but the collected amount was not remitted into the government account. Furthermore, it was also noticed that there was no system for preparing register of sale of tender forms.

Due to this negligence of the management the government sustained loss.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the responsibility be fixed against the person(s) at fault besides recovering the collected amount deposited into government account.

(OM#14)

#### 4.2.8 Blockage of Govt Funds

Rule 4 of SPP Rules 2010, Principles of Procurements "While procuring goods, works or services, procuring agencies shall ensure that procurements are conducted in a fair and transparent manner and the object of procurement brings value for money to the agency and the procurement process is efficient and economical.

During performance audit of DMCP, it was noticed that the management procured various articles which remained un-utilized even after closure of financial year. (Details at Annexure 4.2.8). Due to this irrational decision of procurement of excess material, the money lost its time value as the procured items were not utilized in same year.

Procurement of material without assessing the need caused blockage of public money.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the procurement be made keeping in view the actual requirement, for this the procurement plan be prepared to avoid blockage of public funds.

(OM#29)

#### 4.2.9 Embezzlement in issuing of anti-malarial material-Rs 67.264 million

As per Appendix 18-A of Sindh Financial Rules, every officer should realize fully and clearly that he will be held personally responsible for any loss sustained by government through fraud or negligence on his part and that he will also be held responsible for any loss arising from fraud and negligence on the part of any other government officer to the extent to which it may be shown that he contributed to the loss by his own actions or negligence.

During performance audit of DMCP, it was noticed that the management procured various articles amounting to Rs 67.264 million which were shown as issued to the various DHO offices for anti-malaria activities, but same were not received by those district health offices. In this regard audit team sent letters to all DHO office for enquiring the endorsement of total material issued by DMCP. Out of 22 districts, 14 districts responded till finalization for draft report. From which it was worked out that various items which were shown as issued by the DMCP were not received by respective DHO office (details at Annexure 4.2.9). This shows that either the material was not issued to those districts or the material was stolen during transportation.

Due to this negligence of the management, the govt. sustained huge loss of public money.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the responsibility be fixed against the person(s) at fault besides conducting the detailed inquiry in the matter.

(OM#34)

#### 4.3 **Procurement and Contract Management:**

#### 4.3.1 Excess Procurement of items in violation to PC-I-Rs 13.732 million

Appendix 18-A of Sindh Financial Rules, every officer should realize fully and clearly that he will be held personally responsible for any loss sustained by government through fraud or negligence on his part and that he will also be held responsible for any loss arising from fraud and negligence on the part of any other government officer to the extent to which it may be shown that he contributed to the loss by his own actions or negligence.

During performance audit of DMCP, it was noticed that the management violated the PC-I while procuring the impregnated bed nets & blood lancets (pickers), due this violation of PC-I, an excess expenditure of Rs13.732 million was incurred. As per PC-I, the management had to procure 85,000 impregnated bed nets & 6,600,000 blood lancets(prickers) against which 101,175 impregnated bed nets & 7,849,400 blood lancets(prickers) were procured.

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Year	Items	Qty to be purchased as per PC-I	Qty Procured as per store data	Excess (Qty)	Excess (%age)	Procurement rate Approx.	Excess
2013-14	T	23,000	25,108	(2108)	9%	632	1.332
2014-15	Impregnated Bed Nets	23,000	34,605	(11605)	50%	632	7.334
2015-16	Ded Nets	39,000	41,462	(2462)	6%	632	1.556
Su	b-Total	85,000	101,175			0%	
2013-14		1,800,000	2,080,000	(280,000)	16%	460 per 200	0.644
2014-15	Blood	1,800,000	2,200,000	(400,000)	22%	615 per 200	1.230
2015-16	Lancet	1,800,000	2,133,800	(333,800)	19%	572 per 200	0.955
2016-17		1,200,000	1,435,600	(235,600)	20%	578 per 200	0.681
Su	b-Total	6,600,000	7,849,400			0%	
			Grand Total				(13.732)

Procurement in violation of PC-I resulted incurrence of an excess expenditure of Rs13.732 million.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the procurement of material be made in line the provision of approved PC-I.

#### (**OM#10**)

(Rs in million)

#### 4.3.2 Excess issuance of blood lancet than the requirement-Rs 1.741 million

Para 149 of GFR, "When materials are issued from stock for departmental use, Manufacture, sale, etc. the officer in charge of the stores should see that an indent in the prescribed form has been made by a properly authorized person, examine it carefully with reference to the orders or instructions for the issue of stores and sign it, after making suitable alterations under his dated initials in the description and quality of material, if he is unable to comply with the requisition in full.

During performance audit of DMCP, it was noticed that 620,838 blood lancets of an amount of Rs1.741 million were issued to various districts in excess to the actual requirement. 1,250,762 slides were collected from different districts against which 1,871,600 blood lancets were issued. This shows that there was no proper asset management and inventory control mechanism and the material is issued to the districts without weighing and assessing the need and past consumption record. Due to this negligence of the management the excess blood lancets of Rs1.741 million were issued (details at Annexure 4.3.2).

The excess issuance of blood lancets resulted blockage and ineffective utilization of public funds.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the material be issued to the respective centers by analyzing the past consumption record and actual requirement. No material in excess to the requirement be issued.

#### (OM#31)

#### 4.3.3 Irregular distribution of 40,509 LLINs-Rs 25.601 million

Section 04 of Long-lasting insecticidal nets distribution strategy (up-dated) March 2015 developed by DoMC states, "To get the full benefits of LLINs usage, WHO has introduced the concept of "Universal Coverage". The approach is now modified from targeted coverage (children <5 and pregnant women) to universal

coverage i.e. everyone living in a malicious area must sleep under an LLIN/ITN, every night (100% coverage) throughout the year.

During performance audit of DMCP, it was noticed that 40,509 Long lasting Integrated nets (LLINs) amounting to Rs 25.601 million approx. were distributed irregularly without keeping in view the key finding indicators i-e SPR, AFI & API. (Details at Annexure 4.3.3). Undue favor was extended to District Larkana & Nawabshah as the API of those districts was lower than other districts like Tharparkar, Badin & Thatta. The key performance indicators of each district are shown in Annexure-II to this para. The discriminatory distribution of LLINs put the patients at high risk among those districts having more SPR & API.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the LLINs be issued on transparent manner to the actual beneficiaries on need basis.

(**OM#11**)

## 4.3.4 Irregular multiple prevention activities/ Discriminatory selection of localities for IRS activities

As per section 6.1 "Guidelines for planning and implementation of malaria vector control at district level", the selection of union council / localities should be on the basis of high disease incidence with due consideration to the vector status action should be taken in the following sequence..... for the whole district.

During performance audit of DMCP, it was noticed that 869,515 households were shown as sprayed during 2012 to 2017 on favoritism & discrimination basis without proper selection of localities. The selection of the localities was not made on merit basis as 113,345 households of Larkana (API lower than 4), 62,536 households of Nawabshah (API lower than 5) were sprayed whereas the API of Tharparkar, Thatta, Khairpur and Badin was higher than those districts (Details at Annexure 4.3.4).

Due to non-performance of IRS activities on merit basis among, the malaria parasite incidences increased as evident from statistical data of patients.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that IRS activities be planned in light with SPR, API and other relevant incidences on merit basis. The IRS activities be performed prior commencement of peak seasons to control and reduce the spreading of malaria disease.

#### (**OM#37**)

#### 4.4 Asset Management:

#### 4.4.1 Non-accountal of LLINs -Rs 115.652 million

Rule 115 (a) of Sindh Financial Rules Vol-I states "all quantities received or issued from the store should be entered in the stock account under the respective heads of the dates the transactions take place and balance struck off every month which should be correspond to the quantitative in the stock at the close of each month."

During performance audit of DMCP, it was noticed that 182994 impregnated bed nets amounting to Rs 115.652 million approx. (Details at Annexure 4.4.1) were shown distributed among various beneficiaries throughout the Sindh but the distribution record was not available in the office. There were practices of maintaining the stock registers which depict the issuance of the LLINs to concerned district Health officers but the center-wise record showing the names, CNIC no, address of end users was not maintained. Due to this, it could not be authenticated whether the LLINs were issued to end users or not. Audit holds the view that there should be proper mechanism of distribution to utilize the LLINs effectively& in transparent manner.

Due to non-maintenance of the distribution record the audit could not authenticate the distribution.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that there should be proper inventory and asset management system.

**(OM#40)** 

#### 4.4.2 Non-issuance of LLINs to the concerned districts-Rs 57.079 million

Section 04 of Long-lasting insecticidal nets distribution strategy (up-dated) March 2015 developed by Directorate of Malaria Control Pakistan states, "Strategically, the continuous distribution of LLINs is important to maintain a high level of coverage in the community. The lifespan of the current generation of LLINs is expected to be 3 years (Please remember there is no LLINs which has been recommended by WHOPES for 5 years)......continuous distribution system offers individuals and households in communities to access LLINs at any time during the year when there is a need to replace or acquire a LLIN.

During performance audit of DMCP, it was noticed that 90,315 LLINs amounting to Rs 57.079 million (Details at Annexure 4.4.2) were procured for various districts but same were not distributed to those districts. As per PC-I, 235,187 LLINs were to be distributed among various districts against which only 169,681 were distributed. This shows that the distributions of LLINs were not made on transparent manner..

Distribution of LLINs on favoritism and ambiguous basis deprived the actual beneficiaries.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the LLINs be issued on transparent manner to the actual beneficiaries.

#### (OM#12)

#### 4.4.3 Irregular allotment of motorcycles

As per PC-I Implementation strategy 6(h) "The malaria supervisors are provided with motorcycle for collection and reporting of microscopic slides from and to the microscopy center for provision of rapid treatment to affected persons. Further they also monitor the field sprays carried out by the seasonal labour at targeted spots".

31

During performance audit of DMCP, it was noticed that the management had procured 79 motorcycles during the period 2012-13 to 2015-16. As per PC-I provision the motorcycles were to be provided to the malaria supervisors for collection of microscopic slides from and to the microscopy center for provision of rapid treatment to affected persons. In contradiction to which the management issued 62 motorcycles to Malaria Supervisor whereas Six (06) motorcycles were allotted to un-authorized employees who were not on the strength of this office & remaining motorcycles were issued to irrelevant staff of Directorate of Malaria office. Details as in table;

S. No.	Name	Designation/office	Engine	Chassis
1	Mr. Muhammad Ayoub	Senior Clerk DGHSS Office Hyd:	AB70-700005	LMC-100005
2	Mr. Muhammad Tasneem	Driver DGHSS Office Hyd	SS-38477	SS-38817
3	Mr. Abdul Maroof	Driver Health Karachi	AB70-7000188	LMC-100188
4	Mr. Muhammad Nadeem	Health Department Kcy	AB70-7000131	LMC-100131
5	Mr. Anwarddin	PS to Secretary Health HAS-2051	RMI-537063	SR70-872541
6	Mr. Muhammad Idress	Driver Secretary Health HAS-2086	RMI-539785	SR70-873029

This resulted ineffective utilization of motorcycles which subsequently hindered in achieving the targeted objectives.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the mechanism of issuing the motorcycles be devised keeping in view the proper utilization of public funds. Either the motorcycle cost recovered.

(OM#15&25)

#### 4.5 Monitoring and Evaluation:

## 4.5.1 Improper collection of blood sample without using blood lancet-Rs 9.900 million

As per 3.2.1 WHO guidelines on drawing blood: best practices in phlebotomy, "The use of a hypodermic needle and syringe is the most common means of blood sampling" further as per 1.1.1 of same, "If a blood sample is poorly collected, the results may be inaccurate and misleading to the clinician, and the patient may have to undergo the inconvenience of repeat testing. The three major issues resulting from errors in collection are haemolysis, contamination and inaccurate labelling".

During performance audit of DMCP, it was noticed that 8.411 million numbers of slides were collected for early diagnosis of malaria. Blood sample of 4.360 million numbers of patient were collected properly by using blood lancet, while the blood sample of 4.051 million numbers of patients were collected without using blood lancet. This shows that either the technician collected sample by reusing of same blood lancet or through an improper method, which put the patients at risk from blood borne pathogens. These pathogens include human immune deficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and those causing viral haemorrhagic fevers. Besides this negligence of the management blood lancets of Rs 9.900 million remained unutilized and lost its value.

(Rs in million)

				(Its II	i iiiiiiiiiiiii)
Year	No of Slides collected	Blood Lancet Utilized	Blood Sample collected without utilizing blood lancet	Rate of Blood Lancet per 200	Amount
2012-13	1,785,499	460,200	1,325,299	313	2.074
2013-14	1,275,543	937,200	338,343	460	0.778
2014-15	1,151,001	320,200	830,801	615	2.555
2015-16	1,177,981	929,200	248,781	572.7	0.712
2016-17	1,486,997	935,600	551,397	578	1.593
2017-18	1,534,598	777,600	756,998	578	2.188
Total	8,411,619	4,360,000	4,051,619		9.900

Improper collection of blood samples put the patients at risk from blood borne pathogens.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the blood sample from patients be collected by using blood lancet & in line with the above-mentioned WHO guidelines.

#### (OM#32)

#### 4.5.2 Non-pursuing for recovery of snatched vehicle-Rs 1.791 million

Rule 23 of G.FR Volume-I "Every Government officer should realize fully and clearly that he would be held personally responsible for any loss sustained by Government through fraud or negligence on his part and that he will also be held personally responsible for any loss arising from fraud or negligence on the part of any other Government officer to the extent to which it may be shown that he contributed to the loss by his own action or negligence. Detailed instructions for regulating the enforcement of such responsibility are embodied in Appendix 2 of GFR Volume-I"

During performance audit of DMCP, it was observed that one corolla GLI costing to Rs 1.791million (purchased vide cheque no.2324540 dated 27.05.2016) was snatched from driver of director on dated 22-10-2017. The driver lodged FIR vide no 567/17 on same date at police station Darkshan, Karachi. After lodging FIR, the department did not correspond with anti-car lifting cell (ACLC) authorities or any other authority for recovery of Government vehicle besides this no departmental enquiry was conducted to prob the matter in depth. Furthermore, while inquiring about the vehicle file, the incumbent management informed that the ex-director has taken up the vehicle file along with her after retirement. Due to non-availability of vehicle car, the engine number and chassis number of the snatched car was not made known. This negligence and non-seriousness create the doubt of self interest in the matter.

Non-pursing for recovery of stolen car resulted loss to government.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that responsibility be fixed against the person(s) at fault concerned authorities may be persuaded for expedite recovery of the stolen car.

#### (OM#28)

#### 4.5.3 Inefficient working of surveillance laboratory

Sindh reference laboratory is established at head quarter of DMCP to reconfirm and recheck 100% of positive slides and 10% of negative slides. The staff posted at Sindh reference laboratory is bound to recheck all the received slides from each diagnosis center.

During performance audit of DMCP, it was noticed that 8,423,706 slides were used by microscopy centers throughout Sindh during 2012 to 2017. The efficiency report of the Sindh reference laboratory depicted that 13,504 positive slides and 8,554 negative slides were not re-checked during the period mentioned. This inefficiency shows that there does not exist effective surveillance system which put the monitoring factor of program at risk.

Detail	2012	2013	2014	2015	2016	2017	Total
Total Positive Slides Received for confirmation	27,163	21,452	18,440	14,060	18,196	24,367	123,678
Total Positive Slides rechecked	26,884	20,254	21,231	14,011	13,871	13,923	110,174
Positive slides result changed	244	111	366	110	117	141	1,089
Positive Slides no rechecked at Lab	279	1,198	(2,791)	49	4,325	10,444	13,504
Inefficiency		6%			24%	43%	

Due to non-confirmation of 10,444 slides the results of early diagnostic centers could not be authenticated.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that the microscopist/ technician be recruited and posted at Sindh reference laboratory to strengthen the working of surveillance system besides, the available staff be utilized properly to increase the efficiency of monitoring system.

#### (**OM#08**)

#### 4.5.4 Inefficient working of early diagnostic centers of 11 districts

Sindh reference laboratory is established at head quarter of DMCP to reconfirm and recheck 100% of positive slides and 10% of negative slides. Each diagnostic center is bound to send all the positive slides and 10% of negative slides for reconfirmation & re-checking.

During performance audit of DMCP, it was noticed that microscopy centers of (11) eleven districts failed to send the positive slides for reconfirmation and rechecking of results subsequently the chances of inappropriate administration of medicine to the patients could not be ruled out. (Details at Annexure 4.5.4).

S. No	District	S. No	District
1	Jamshoro	2	Jacobabad
3	Qambar Shahdadkot	4	Matiari
5	Tando Muhammad Khan	6	Badin
7	Shaheed Benazirabad (formerly Nawabshah)	08	Kashmore (formerly Kandhkot)
9	Sujawal	10	Khairpur
11	Ghotki		

Audit holds the view that management failed to strengthen its internal control as those districts were being provided anti-malarial material without receiving the required material for re-verification. Non-communication of positive & negative slides to the surveillance research laboratory resulted inefficiency of early diagnostic centers.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that actions be initiated against the defaulters who fail to send all positive and 10% of total negative slides at Sindh reference laboratory for rechecking. Policy and mechanism be devised properly for implementation by each diagnostic center.

(OM#09)

#### 4.6 Environment:

#### 4.6.1 Non-existence of proper Disposal of waste

Section 07 of Long-lasting insecticidal nets distribution strategy (up-dated) March 2015 developed by DoMC states, "Waste disposal has become one of the major challenges for any program dealing large scale distribution of LLINs. If LLIN packaging (individual wrapper and baling material) is not managed properly, it may result.

- i. Pesticide poisoning when the packaging is reused for food storage
- ii. Pesticide pollution in soil and groundwater
- iii. Dangerous persistent toxins from uncontrolled open air burning.

Therefore, all stakeholders involved with LLIN distribution programs can reduce the risk from any of this event."

DMCP distributed about 182,994 LLINs among 23 districts from 2012 to 2017, but no strategic document, showing the comprehensive guidelines (in line with Environment Protection Agency (EPA)) for appropriate disposal of LLIN wastes (bags and damaged LLINs) during LLIN distribution operation in these districts, was prepared. Besides this, no evidence of taking following safety measures and precautions was witnessed:

i. All personal involve in LLINs operation must wear proper Personal Protection Equipment (PPEs) during all stages of operation for collection, sorting, recycling and disposing of LLINs packaging.

ii. Incinerate LLINs bags and baling material only if specified high-temperature incineration conditions for pesticide-tainted plastic can be guaranteed and if FAO/WHO and Basel Convention guidelines as well as national regulations and requirements can be strictly followed.

iii Store used LLIN packaging to be recycled or disposed of in a dry ventilated and secure facilities.

iv Dispose of LLIN packaging away from any residences, in a landfill that will not leach contaminants, if the manufacturer does not recommend recycling or incineration.

Due to non-taking of above safety measures the following dangerous risks to could not be ruled out:

- a) Reuse of LLIN bags for any purposes to avoid the risk pesticides poisoning.
- b) Burning of bags and baling material in open air.
- c) Disposal of packing as ordinary waste or in improper sanitary landfills.

The matter was reported to the management in January 2019, but no reply was received.

Audit requires that proper guidelines be adopted while disposing of the waste of LLINs to avoid such recurrent risk.

(OM#13)

#### 4.7 Overall Assessment:

Performance audit of DMCP was carried out with the objective to evaluate whether the DMCP is performing its functions economically, efficiently and effectively. For the purpose it was planned to review and analyze the mechanism of vector control, rapid diagnosis & prompt treatment of patients, procurement management, human resource management, surveillance system for monitoring and mass awareness among public regarding malaria disease.

During the activity, major weaknesses were found in the following areas;

- a. Vector control mechanism was not effective and transparent;
- b. Patients were not diagnosed and treated properly;
- c. Irrational decisions of procurement were made without need assessment; extravagant expenditure was incurred which blocked huge amount of public money & resulted cost & time over run;
- d. Programme was lacking human resource management system;
- e. Monitoring work and research work was not found at all;

4.7.1	<b>Performance rating :</b>	Poor
4.7.2	Risk rating of project:	High

#### 5. CONCLUSION

#### 5.1 Key issues for the future:

The findings indicate poor planning and weak implementation capacity. The programme has failed to improve the health of population, to provide risk protection against malaria, to raise mass awareness for preventing the spread of malaria. There is no decrease in rate of morbidity and that of mortality after 2015, as the key performance indicators of the programme are worsening. The programme has been executed without proper planning as the relevant operational guidelines have so far not been developed. The vector control mechanism is not transparent and fair as the distribution of LLIN and IRS activities are performed without considering the main indicators. It has failed to establish appropriate processes and mechanism for collaboration, informing, directing, managing and monitoring the activities. The rapid diagnostic centers are not working properly which compel the general public to opt for private treatment. Procurements are not conducted in a fair and transparent manner, keeping in view value for money and that the procurement process is inefficient and uneconomical. There is inadequate management of financial performance, financial reporting and disclosures as the reconciliation process is too week. The human resources of the programme is not recruited to cater for the needs of the Programme and the available staff is not utilized properly to get effective results. The management has failed to establish and implement appropriate human resource policies and procedures. The surveillance system of monitoring is absent as no activity in this regard was performed due to shortage of the funds. The assets of the programme are not properly utilized, losing their useful life without effective utilization. The programme coverage with respect to spread of malaria and pace of intervention is inadequate and that management has failed to conduct its operation economically, efficiently and effectively. The project has remained inefficient in establishing and maintaining appropriate information and communication system and infrastructure requirements.

#### 5.2 Lessons Learnt:

- > Vector control mechanism should be strong enough to halt the malaria disease.
- Proper working of early diagnostic centers and prompt treatment to the patients is must for success of the programme.

- Clear understanding of the issues and comprehensive approach is extremely important for proper integrated planning for desired result.
- Transparent procurement of medicines and proper storage and transportation is must for getting the desired effects.
- > Proper placement of staff is essential for betterment of the programme.
- Commitment of the concerned authority is essential for implementation of programme.
- > Awareness campaigns and community participation are must for health education.
- > Internal controls should be strong enough to achieve planned targets.
- Monitoring the progressive target achievement may be adopted as good management practice.
- While the performance is hampered by the usual list of issues ranging from implementation delays and cost over runs, there may be proper mechanism for handling such issues effectively.
- > Specific time-bound action plans be in place to improve the performance.

#### Acknowledgement:

We wish to express our appreciation to the Management and staff of DMCP for the assistance and cooperation extended to the auditors during this assignment.

#### **Pictures**

#### **Picture-1 to Picture-4**

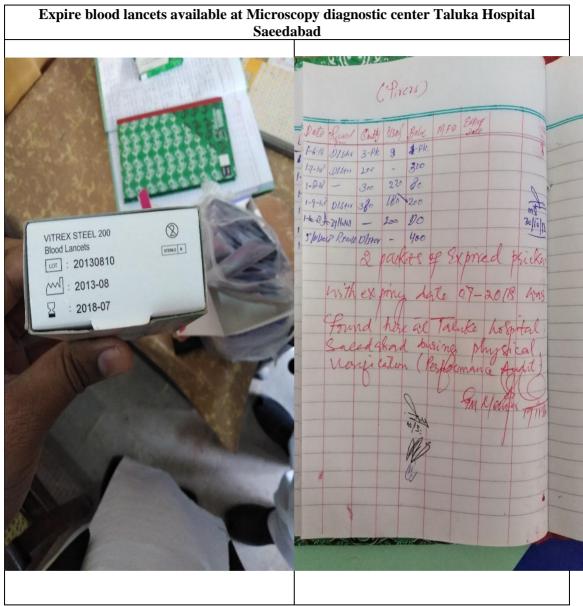




Picture-5



Picture-6



# ANNEXES

#### (Annexure 4.1.1)

#### Irregular appointment of Seasonal labours for IRS activities-Rs37.898 million

Cost Center	Vendor No	G/L	<b>Document No</b>	<b>Document Date</b>	Cheque No	<b>Posting Date</b>	Amount
HB5144	30000163	A03770	1900648032	220602018	3149111	22.06.2018	38,693
HB5144	30000163	A03770	1900630896	130602018	3117289	13.06.2018	67,500
HB5144	30000163	A03770	1900630898	130602018	3117289	13.06.2018	67,500
HB5144	30000163	A03770	1900630893	130602018	3117289	13.06.2018	24,750
HB5144	30000163	A03770	1900604972	060602018	3115649	06.06.2018	67,500
HB5144	30000163	A03770	1900604974	060602018	3115649	06.06.2018	67,500
HB5144	30000163	A03770	1900605199	060602018	3115649	06.06.2018	67,500
HB5144	30000163	A03770	1900604938	060602018	3115649	06.06.2018	65,250
HB5144	30000163	A03770	1900604949	060602018	3115649	06.06.2018	65,250
HB5144	30000163	A03770	1900604945	060602018	3115649	06.06.2018	63,000
HB5144	30000163	A03770	1900604958	060602018	3115649	06.06.2018	54,000
HB5144	30000163	A03770	1900604965	060602018	3115649	06.06.2018	54,000
HB5144	30000163	A03770	1900604961	060602018	3115649	06.06.2018	51,750
HB5144	30000163	A03770	1900604952	060602018	3115649	06.06.2018	31,500
HB5144	30000163	A03770	1900589104	300502018	3114374	30.05.2018	67,500
HB5144	30000163	A03770	1900589109	300502018	3114374	30.05.2018	67,500
HB5144	30000163	A03770	1900589113	300502018	3114374	30.05.2018	67,500
HB5144	30000163	A03770	1900589098	300502018	3114374	30.05.2018	63,000
HB5144	30000163	A03770	1900583162	280502018	3114075	28.05.2018	81,000
HB5144	30000163	A03770	1900583155	280502018	3114075	28.05.2018	78,750
HB5144	30000163	A03770	1900585148	280502018	3114075	28.05.2018	76,500
HB5144	30000163	A03770	1900585151	280502018	3114075	28.05.2018	76,500
HB5144	30000163	A03770	1900585155	280502018	3114071	28.05.2018	76,500
HB5144	30000163	A03770	1900585157	280502018	3114071	28.05.2018	76,500
HB5144	30000163	A03770	1900585162	280502018	3114075	28.05.2018	76,500
HB5144	30000163	A03770	1900585165	280502018	3114071	28.05.2018	76,500
HB5144	30000163	A03770	1900585145	280502018	3114075	28.05.2018	76,250

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HB514430000163A037701900556725160502018307483316.05.201854,000HB514430000163A037701900556730160502018307483016.05.201854,000HB514430000163A037701900556783160502018307483016.05.201854,000HB514430000163A037701900556783160502018307483016.05.201854,000HB514430000163A037701900556784160502018307483016.05.201854,000HB514430000163A037701900556785160502018307483016.05.201854,000HB514430000163A037701900556785160502018307483016.05.201854,000		30000163		1900556729	160502018		16.05.2018	
HB514430000163A037701900556725160502018307483316.05.201854,000HB514430000163A037701900556730160502018307483016.05.201854,000HB514430000163A037701900556783160502018307483016.05.201854,000HB514430000163A037701900556784160502018307483016.05.201854,000HB514430000163A037701900556784160502018307483016.05.201854,000								,
HB514430000163A037701900556725160502018307483316.05.201854,000HB514430000163A037701900556730160502018307483016.05.201854,000HB514430000163A037701900556783160502018307483016.05.201854,000HB514430000163A037701900556783160502018307483016.05.201854,000								,
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HB5144         30000163         A03770         1900556725         160502018         3074833         16.05.2018         54,000	_							
								,
HB5144 30000163 A03770 1000556722 160502018 3074833 16 05 2018 54 000								,
HB5144         30000163         A03770         1900556717         160502018         3074833         16.05.2018         54,000								,

1127121	20000105	1103770	Total	00010 2013	1007001	00.10.2015	37,898,568
HD9421	30000163	A03770	5100015266	08010-2013	1587584	08.10.2013	1,422,000
HD9421	30000163	A03770	5100015269	08010-2013	1588910	08.10.2013	1,776,000
HD9421	30000163	A03770	5100017846	22011-2013	1601288	22.11.2013	676,500
HD9421	30000163	A03770	5100019499	11012-2013	1603532	11.12.2013	1,599,000
HD9421	30000163	A03770	1900213491	0101-2014	1648088	01.01.2014	355,500
HD9421	30000163	A03770	1900227015	1001-2014	1649587	10.01.2014	355,500
HD9421	30000163	A03770	1900324348	1703-2014	1713755	17.03.2014	90,000
HD9421	30000163	A03770	1900355803	0304-2014	1715311	03.04.2014	370,500
HD9421	30000163	A03770	5100031571	0805-2014	1752748	08.05.2014	535,500
HD9421	30000163	A03770	5100034854	0306-2014	1755951	05.06.2014	562,500
HD9421	30000163	A03770	5100034853	0306-2014	1755951	05.06.2014	1,068,000
HD9421	30000163	A03770	5100034878	0306-2014	1755953	05.06.2014	1,123,500
HD9421	30000163	A03770	5100034852	0306-2014	1755955	05.06.2014	1,275,000
HD9421	30000163	A03770	5100034849	0306-2014	1755957	05.06.2014	1,599,000
HD9421	30000163	A03770	5100034850	0306-2014	1755956	05.06.2014	1,647,000
HD9421	30000163	A03770	5100040068	2406-2014	1827493	24.06.2014	633,000

(Annexure 4.1.3)

Name of Post	BPS	Sanctioned Strength	Working Strength	No of Vacant Posts
Senior Evaluator	17	1	0	1
Admin Cum Supply Officer	17	1	0	1
Assistant	16	4	2	2
Transport Officer	16	1	0	1
Malaria Superintendent	16	10	0	10
Non Medical Evaluator	16	7	0	7
Assistant Entomologist	16	4	1	3
Steno typist	14	2	0	2
Computer Operator	12	2	0	2
Accountant	11	1	0	1
Junior Clerk Cum0Typist	11	2	0	2
Auto Electrician	8	1	0	1
Senior Mechanic	8	1	0	1
ULV Spray Machine Operator	8	13	0	13
Microscopist	6	56	8	48
Malaria Supervisor	5	10	0	10
Welder	5	1	0	1
Driver	4	9	4	5
Workshop Boy	1	2	0	2
Naib Qasid	1	7	3	4
Malhi	1	1	0	1
Sanitation Worker	1	8	1	7
				125

### Sanctioned working strength of Head office

#### (Annexure 4.1.5)

District	Population (in 2017)	No of Total Health Units	No of Mic Centers	Public RDT Centers	Coverage ration	Shortage	API in 2017
Thatta	979,817	47	9	22	66%	16	21.24
Sujawal	781,967	55	9	25	62%	21	9.42
Mirpur Khas	1,505,876	107	17	54	66%	36	8.83
Tharparkar	1,649,661	282	18	37	20%	227	5.33
Tando Allahyar	836,887	57	6	30	63%	21	4.51
Khairpur	2,405,523	183	33	85	64%	65	4.35
Tando Muhammad Khan	677,228	39	5	17	56%	17	4.14
Umerkot	1,073,146	92	12	46	63%	34	3.67
Jacobabad	1,006,297	51	19	-	37%	32	3.66
Badin	1,804,516	148	17	53	47%	78	2.28
Larkana	1,524,391	72	15	54	96%	3	2.23
Naushahro Firoze	1,612,373	110	22	60	75%	28	1.85
Shaheed Benazirabad (formerly Nawabshah)	1,612,847	117	28	-	24%	89	1.71
Kashmore (formerly Kandhkot)	1,089,169	67	9	-	13%	58	1.36
Matiari	769,349	44	12	-	27%	32	1.25
Shikarpur	1,231,481	66	23	-	35%	43	1.12
Qambar Shahdadkot	1,341,042	71	8	45	75%	18	1.05
Ghotki	1,647,239	59	14	-	24%	45	0.97
Dadu	1,550,266	86	15	-	17%	71	0.93
Jamshoro	993,142	51	10	-	20%	41	0.82
Sukkur	1,487,903	70	16	39	79%	15	0.79
Hyderabad	2,201,079	64	22	_	34%	42	0.54
Sanghar	2,057,057	108	30	_	28%	78	0.54
Karachi Central	16,054,988	141	31	-	22%	110	0.20
	47,893,244	2,187	400	567		1,220	

#### Non-availability of Public Diagnostic facility centers at 1220 Health facility centers

#### (Annexure 4.1.11)

District	2012	2013	2014	2015	2016	2017	Total
Khairpur	12	3	27	12	16	75	145
Umerkot	37	8	66	10	12	4	137
Ghotki	13	17	49	13	9	1	102
Sukkur	13	10	53	11	2	8	97
Sanghar	49	9	18	2	3	8	89
Mirpur Khas	10	7	38	6	4	11	76
Karachi Central	10	8	32	13	5	1	69
Tharparkar	15	18	13	2	10	4	62
Dadu	19	5	3	13	15	0	55
Shikarpur	14	4	29	4	2	0	53
Thatta	12	2	22	12	3	0	51
Larkana	11	12	5	3	8	9	48
NaushahroFiroze	22	0	3	1	8	0	34
Badin	0	0	2	3	11	1	17
Hyderabad	2	1	2	1	2	7	15
TandoAllahyar	5	1	0	0	0	8	14
Jacobabad	0	3	4	0	0	0	7
Kashmore (formerly Kandhkot)	0	0	0	4	0	2	6
Matiari	0	3	0	0	3	0	6
Sujawal					4	2	6
	244	111	365	110	117	141	1088

Mistreatment/ mishandling to the 4582 malaria patients

#### (Annexure 4.1.12)

District	2012	2013	2014	2015	2016	2017	Total
Shikarpur	55	24	85	50	60	1	275
Sukkur	52	38	35	40	16	3	184
Khairpur	0	35	15	19	5	4	78
Thatta	12	9	19	26	0	6	72
Dadu	4	2	15	10	21	9	61
Karachi Central	1	6	17	7	27	2	60
Umerkot	30	5	5	13	1	2	56
Sanghar	10	11	14	15	3	1	54
Larkana	7	2	9	7	11	2	38
Hyderabad	8	2	16	2	4	1	33
Tharparkar	5	8	9	2	3	2	29
NaushahroFiroze	0	7	21	0	0	0	28
Mirpur Khas	0	4	17	3	1	1	26
Sujawal					0	23	23
Badin	0	0	0	2	0	16	18
Matiari	0	8	0	2	0	0	10
TandoAllahyar	5	1	2	0	0	0	8
Shaheed Benazirabad (formerly Nawabshah)	0	0	0	1	6	0	7
Ghotki	0	0	4	1	0	0	5
Jacobabad	0	2	0	1	0	0	3
Kashmore (formerly Kandhkot)	1	0	0	1	0	0	2
Tando Muhammad Khan	0	0	0	0	0	1	1
	190	164	283	202	158	74	1,071

## Failure in early diagnoses and Prompt treatment subsequently 70533 malaria patients were affected

(Annexure 4.2.2)

#### Doubtful payment to DDO instead of vendors for Rs45.419 million Abstract

			(Rs in	n million)			
Head of Account	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	Grand Total
Other	-	16.250	-	10.504	5.285	5.860	37.899
Training domestic	-	1.681	0.289	0.697	-	-	2.668
P.O.L Charges	0.423	1.055	0.386	0.118	0.077	-	2.061
Others	0.206	0.469	0.159	0.327	0.140	-	1.301
Conference/seminars/workshops/ symposia	-	0.300	0.200	0.150	0.150	-	0.800
Uniforms and protective clothing	0.027	0.034	0.037	0.043	-	-	0.141
Stationery	0.026	0.026	0.028	0.033	-	-	0.113
Transportation of Goods	-	-	-	-	0.100	-	0.100
Travelling allowance	0.086	0.001	-	-	-	-	0.087
Payments to Govt. dept for service rendered	-	-	-	0.053	0.032	-	0.085
Printing and publication	0.037	0.037	-	-	-	-	0.074
Exhibitions fairs and other national celebrations	-	0.052	-	-	-	-	0.052
Advertising & Publicity	-	-	-	_	-	0.038	0.038
Grand Total	0.805	19.905	1.099	11.925	5.784	5.898	45.419

#### **Detailed Annexures**

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
1	2017	HB5144	A03770	1900648032	22.06.2018	3149111	22.06.2018	38,693
2	2017	HB5144	A03770	1900630896	13.06.2018	3117289	13.06.2018	67,500
3	2017	HB5144	A03770	1900630898	13.06.2018	3117289	13.06.2018	67,500
4	2017	HB5144	A03770	1900630893	13.06.2018	3117289	13.06.2018	24,750
5	2017	HB5144	A03770	1900604972	06.06.2018	3115649	06.06.2018	67,500

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
6	2017	HB5144	A03770	1900604974	06.06.2018	3115649	06.06.2018	67,500
7	2017	HB5144	A03770	1900605199	06.06.2018	3115649	06.06.2018	67,500
8	2017	HB5144	A03770	1900604938	06.06.2018	3115649	06.06.2018	65,250
9	2017	HB5144	A03770	1900604949	06.06.2018	3115649	06.06.2018	65,250
10	2017	HB5144	A03770	1900604945	06.06.2018	3115649	06.06.2018	63,000
11	2017	HB5144	A03770	1900604958	06.06.2018	3115649	06.06.2018	54,000
12	2017	HB5144	A03770	1900604965	06.06.2018	3115649	06.06.2018	54,000
13	2017	HB5144	A03770	1900604961	06.06.2018	3115649	06.06.2018	51,750
14	2017	HB5144	A03770	1900604952	06.06.2018	3115649	06.06.2018	31,500
15	2017	HB5144	A03770	1900589104	30.05.2018	3114374	30.05.2018	67,500
16	2017	HB5144	A03770	1900589109	30.05.2018	3114374	30.05.2018	67,500
17	2017	HB5144	A03770	1900589113	30.05.2018	3114374	30.05.2018	67,500
18	2017	HB5144	A03770	1900589098	30.05.2018	3114374	30.05.2018	63,000
19	2017	HB5144	A03770	1900583162	28.05.2018	3114075	28.05.2018	81,000
20	2017	HB5144	A03770	1900583155	28.05.2018	3114075	28.05.2018	78,750
21	2017	HB5144	A03770	1900585148	28.05.2018	3114075	28.05.2018	76,500
22	2017	HB5144	A03770	1900585151	28.05.2018	3114075	28.05.2018	76,500
23	2017	HB5144	A03770	1900585155	28.05.2018	3114071	28.05.2018	76,500
24	2017	HB5144	A03770	1900585157	28.05.2018	3114071	28.05.2018	76,500
25	2017	HB5144	A03770	1900585162	28.05.2018	3114075	28.05.2018	76,500
26	2017	HB5144	A03770	1900585165	28.05.2018	3114071	28.05.2018	76,500

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
27	2017	HB5144	A03770	1900585145	28.05.2018	3114075	28.05.2018	76,250
28	2017	HB5144	A03770	1900582853	28.05.2018	3114074	28.05.2018	67,500
29	2017	HB5144	A03770	1900582857	28.05.2018	3114074	28.05.2018	63,500
30	2017	HB5144	A03770	1900582871	28.05.2018	3114074	28.05.2018	63,000
31	2017	HB5144	A03770	1900582886	28.05.2018	3114071	28.05.2018	63,000
32	2017	HB5144	A03770	1900582828	28.05.2018	3114074	28.05.2018	54,000
33	2017	HB5144	A03770	1900582832	28.05.2018	3114074	28.05.2018	54,000
34	2017	HB5144	A03770	1900582838	28.05.2018	3114074	28.05.2018	54,000
35	2017	HB5144	A03770	1900582840	28.05.2018	3114074	28.05.2018	54,000
36	2017	HB5144	A03770	1900582844	28.05.2018	3114074	28.05.2018	54,000
37	2017	HB5144	A03770	1900582889	28.05.2018	3114071	28.05.2018	54,000
38	2017	HB5144	A03770	1900582895	28.05.2018	3114071	28.05.2018	54,000
39	2017	HB5144	A03770	1900582912	28.05.2018	3114071	28.05.2018	54,000
40	2017	HB5144	A03770	1900583013	28.05.2018	3114071	28.05.2018	54,000
41	2017	HB5144	A03770	1900583109	28.05.2018	3114071	28.05.2018	54,000
42	2017	HB5144	A03770	1900583126	28.05.2018	3114071	28.05.2018	54,000
43	2017	HB5144	A03770	1900583133	28.05.2018	3114075	28.05.2018	54,000
44	2017	HB5144	A03770	1900583148	28.05.2018	3114075	28.05.2018	54,000
45	2017	HB5144	A03770	1900583150	28.05.2018	3114075	28.05.2018	54,000
46	2017	HB5144	A03770	1900582817	28.05.2018	3114074	28.05.2018	51,750
47	2017	HB5144	A03770	1900582822	28.05.2018	3114074	28.05.2018	51,750

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
48	2017	HB5144	A03770	1900583141	28.05.2018	3114075	28.05.2018	47,250
49	2017	HB5144	A03770	1900582865	28.05.2018	3114074	28.05.2018	33,750
50	2017	HB5144	A03770	1900582849	28.05.2018	3114074	28.05.2018	29,250
51	2017	HB5144	A03770	1900558431	17.05.2018	3112991	17.05.2018	85,500
52	2017	HB5144	A03770	1900558411	17.05.2018	3112991	17.05.2018	56,250
53	2017	HB5144	A03770	1900558415	17.05.2018	3112991	17.05.2018	56,250
54	2017	HB5144	A03770	1900558419	17.05.2018	3112991	17.05.2018	56,250
55	2017	HB5144	A03770	1900558421	17.05.2018	3112991	17.05.2018	56,250
56	2017	HB5144	A03770	1900558448	17.05.2018	3112991	17.05.2018	56,250
57	2017	HB5144	A03770	1900558452	17.05.2018	3112991	17.05.2018	56,250
58	2017	HB5144	A03770	1900558453	17.05.2018	3112991	17.05.2018	56,250
59	2017	HB5144	A03770	1900558456	17.05.2018	3112991	17.05.2018	56,250
60	2017	HB5144	A03770	1900558403	17.05.2018	3112987	17.05.2018	54,000
61	2017	HB5144	A03770	1900558404	17.05.2018	3112987	17.05.2018	54,000
62	2017	HB5144	A03770	1900558424	17.05.2018	3112987	17.05.2018	54,000
63	2017	HB5144	A03770	1900558430	17.05.2018	3112987	17.05.2018	54,000
64	2017	HB5144	A03770	1900558434	17.05.2018	3112987	17.05.2018	54,000
65	2017	HB5144	A03770	1900558435	17.05.2018	3112987	17.05.2018	54,000
66	2017	HB5144	A03770	1900558438	17.05.2018	3112987	17.05.2018	54,000
67	2017	HB5144	A03770	1900558443	17.05.2018	3112987	17.05.2018	54,000
68	2017	HB5144	A03770	1900558445	17.05.2018	3112987	17.05.2018	54,000

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
69	2017	HB5144	A03770	1900558407	17.05.2018	3112987	17.05.2018	47,250
70	2017	HB5144	A03770	1900556674	16.05.2018	3074833	16.05.2018	67,500
71	2017	HB5144	A03770	1900556684	16.05.2018	3074833	16.05.2018	67,500
72	2017	HB5144	A03770	1900556707	16.05.2018	3074833	16.05.2018	67,500
73	2017	HB5144	A03770	1900556788	16.05.2018	3074830	16.05.2018	67,500
74	2017	HB5144	A03770	1900556789	16.05.2018	3074830	16.05.2018	67,500
75	2017	HB5144	A03770	1900556791	16.05.2018	3074830	16.05.2018	67,500
76	2017	HB5144	A03770	1900556810	16.05.2018	3074832	16.05.2018	67,500
77	2017	HB5144	A03770	1900556816	16.05.2018	3074832	16.05.2018	67,500
78	2017	HB5144	A03770	1900556818	16.05.2018	3074832	16.05.2018	67,500
79	2017	HB5144	A03770	1900556904	16.05.2018	3074832	16.05.2018	67,500
80	2017	HB5144	A03770	1900556690	16.05.2018	3074833	16.05.2018	65,250
81	2017	HB5144	A03770	1900556711	16.05.2018	3074833	16.05.2018	65,250
82	2017	HB5144	A03770	1900556792	16.05.2018	3074830	16.05.2018	65,250
83	2017	HB5144	A03770	1900556819	16.05.2018	3074832	16.05.2018	65,250
84	2017	HB5144	A03770	1900556911	16.05.2018	3074832	16.05.2018	65,250
85	2017	HB5144	A03770	1900556802	16.05.2018	3074830	16.05.2018	63,000
86	2017	HB5144	A03770	1900556813	16.05.2018	3074832	16.05.2018	63,000
87	2017	HB5144	A03770	1900556907	16.05.2018	3074832	16.05.2018	63,000
88	2017	HB5144	A03770	1900556713	16.05.2018	3074833	16.05.2018	54,000
89	2017	HB5144	A03770	1900556714	16.05.2018	3074833	16.05.2018	54,000

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
90	2017	HB5144	A03770	1900556717	16.05.2018	3074833	16.05.2018	54,000
91	2017	HB5144	A03770	1900556722	16.05.2018	3074833	16.05.2018	54,000
92	2017	HB5144	A03770	1900556725	16.05.2018	3074833	16.05.2018	54,000
93	2017	HB5144	A03770	1900556730	16.05.2018	3074830	16.05.2018	54,000
94	2017	HB5144	A03770	1900556783	16.05.2018	3074830	16.05.2018	54,000
95	2017	HB5144	A03770	1900556784	16.05.2018	3074830	16.05.2018	54,000
96	2017	HB5144	A03770	1900556785	16.05.2018	3074830	16.05.2018	54,000
97	2017	HB5144	A03770	1900556729	16.05.2018	3074832	16.05.2018	49,500
98	2017	HB5144	A03770	1900556693	16.05.2018	3074833	16.05.2018	31,500
99	2017	HB5144	A03770	1900556803	16.05.2018	3074830	16.05.2018	31,500
100	2017	HB5144	A03770	1900556814	16.05.2018	3074832	16.05.2018	29,250
101	2016	HB5144	A03770	5100035892	22.06.2017	2805126	22.06.2017	1,600,875
102	2016	HB5144	A03770	5100035895	22.06.2017	2805126	22.06.2017	1,334,250
103	2016	HB5144	A03770	5100035898	22.06.2017	2805126	22.06.2017	801,000
104	2016	HB5144	A03770	5100035896	22.06.2017	2805126	22.06.2017	694,750
105	2016	HB5144	A03770	5100035897	22.06.2017	2805126	22.06.2017	693,000
106	2016	HB5039	A03770	1900225868	23.01.2017	2568197	23.01.2017	90,000
107	2016	HB5039	A03770	1900225868	23.01.2017	2568197	23.01.2017	71,000
108	2015	HD9573	A03770	1900540108	26.06.2016	2469638	26.06.2016	76,000
109	2015	HD9421	A03770	5100086243	15.06.2016	2408217	15.06.2016	1,304,000
110	2015	HD9573	A03770	1900475810	15.06.2016	2408218	15.06.2016	237,000

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
111	2015	HD9573	A03770	5100085828	14.06.2016	2408218	14.06.2016	711,000
112	2015	HD9421	A03770	5100082671	03.06.2016	2406278	03.06.2016	948,000
113	2015	HD9573	A03770	1900431102	03.06.2016	2406278	03.06.2016	474,000
114	2015	HD9421	A03770	5100081486	30.05.2016	2324541	30.05.2016	2,014,000
115	2015	HD9421	A03770	5100081487	30.05.2016	2324541	30.05.2016	830,000
116	2015	HD9573	A03770	1900411206	30.05.2016	2324541	30.05.2016	474,000
117	2015	HD9421	A03770	5100080878	25.05.2016	2324294	25.05.2016	2,488,000
118	2015	HD9421	A03770	5100080890	25.05.2016	2324281	25.05.2016	948,000
119	2013	HD9421	A03770	5100040284	26.06.2014	1828178	26.06.2014	360,500
120	2013	HD9421	A03770	5100040069	24.06.2014	1827492	24.06.2014	801,000
121	2013	HD9421	A03770	5100040068	24.06.2014	1827493	24.06.2014	633,000
122	2013	HD9421	A03770	5100034850	03.06.2014	1755956	05.06.2014	1,647,000
123	2013	HD9421	A03770	5100034849	03.06.2014	1755957	05.06.2014	1,599,000
124	2013	HD9421	A03770	5100034852	03.06.2014	1755955	05.06.2014	1,275,000
125	2013	HD9421	A03770	5100034878	03.06.2014	1755953	05.06.2014	1,123,500
126	2013	HD9421	A03770	5100034853	03.06.2014	1755951	05.06.2014	1,068,000
127	2013	HD9421	A03770	5100034854	03.06.2014	1755951	05.06.2014	562,500
128	2013	HD9421	A03770	5100031571	08.05.2014	1752748	08.05.2014	535,500
129	2013	HD9421	A03770	1900355803	03.04.2014	1715311	03.04.2014	370,500
130	2013	HD9421	A03770	1900324348	17.03.2014	1713755	17.03.2014	90,000
131	2013	HD9421	A03770	1900227015	10.01.2014	1649587	10.01.2014	355,500
132	2013	HD9421	A03770	1900213491	01.01.2014	1648088	01.01.2014	355,500

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
133	2013	HD9421	A03770	5100019499	11.12.2013	1603532	11.12.2013	1,599,000
134	2013	HD9421	A03770	5100017846	22.11.2013	1601288	22.11.2013	676,500
135	2013	HD9421	A03770	5100015269	08.10.2013	1588910	08.10.2013	1,776,000
136	2013	HD9421	A03770	5100015266	08.10.2013	1587584	08.10.2013	1,422,000
				Sub-Tota	l			37,898,568
137	2015	HD9573	A03801	1900525061	23.06.2016	2469210	23.06.2016	499,407
138	2015	HD9421	A03801	1900525394	23.06.2016	2469210	23.06.2016	197,997
139	2014	HD9573	A03801	1900491058	24.06.2015	2133031	24.06.2015	289,270
140	2013	HD9421	A03801	1900455418	07.06.2014	1756648	07.06.2014	35,000
141	2013	HD9421	A03801	1900455413	07.06.2014	1756648	07.06.2014	34,400
142	2013	HD9421	A03801	1900455428	07.06.2014	1756648	07.06.2014	34,400
143	2013	HD9421	A03801	1900455419	07.06.2014	1756648	07.06.2014	33,600
144	2013	HD9421	A03801	1900455414	07.06.2014	1756648	07.06.2014	32,800
145	2013	HD9421	A03801	1900455421	07.06.2014	1756648	07.06.2014	32,800
146	2013	HD9421	A03801	1900455422	07.06.2014	1756648	07.06.2014	32,800
147	2013	HD9421	A03801	1900455423	07.06.2014	1756648	07.06.2014	32,800
148	2013	HD9421	A03801	1900455432	07.06.2014	1756648	07.06.2014	31,800
149	2013	HD9421	A03801	1900455434	07.06.2014	1756648	07.06.2014	31,800
150	2013	HD9421	A03801	1900455430	07.06.2014	1756648	07.06.2014	31,100
151	2013	HD9421	A03801	1900455431	07.06.2014	1756648	07.06.2014	31,100
152	2013	HD9421	A03801	1900455416	07.06.2014	1756648	07.06.2014	31,000
153	2013	HD9421	A03801	1900455415	07.06.2014	1756648	07.06.2014	30,600

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
154	2013	HD9421	A03801	1900455408	07.06.2014	1756648	07.06.2014	26,000
155	2013	HD9421	A03801	1900455409	07.06.2014	1756648	07.06.2014	26,000
156	2013	HD9421	A03801	1900455411	07.06.2014	1756648	07.06.2014	26,000
157	2013	HD9421	A03801	1900455412	07.06.2014	1756648	07.06.2014	12,200
158	2013	HD9421	A03801	1900390615	08.05.2014	1752560	08.05.2014	34,800
159	2013	HD9421	A03801	1900390625	08.05.2014	1752560	08.05.2014	34,800
160	2013	HD9421	A03801	1900390698	08.05.2014	1752560	08.05.2014	34,800
161	2013	HD9421	A03801	1900390703	08.05.2014	1752560	08.05.2014	34,800
162	2013	HD9421	A03801	1900390821	08.05.2014	1752560	08.05.2014	34,800
163	2013	HD9421	A03801	1900390560	08.05.2014	1752560	08.05.2014	34,000
164	2013	HD9421	A03801	1900390708	08.05.2014	1752560	08.05.2014	34,000
165	2013	HD9421	A03801	1900390544	08.05.2014	1752560	08.05.2014	32,800
166	2013	HD9421	A03801	1900390677	08.05.2014	1752560	08.05.2014	32,800
167	2013	HD9421	A03801	1900390713	08.05.2014	1752560	08.05.2014	32,800
168	2013	HD9421	A03801	1900390722	08.05.2014	1752560	08.05.2014	32,800
169	2013	HD9421	A03801	1900390706	08.05.2014	1752560	08.05.2014	30,000
170	2013	HD9421	A03801	1900390639	08.05.2014	1752560	08.05.2014	29,800
171	2013	HD9421	A03801	1900390607	08.05.2014	1752560	08.05.2014	29,400
172	2013	HD9421	A03801	1900390664	08.05.2014	1752560	08.05.2014	29,400
173	2013	HD9421	A03801	1900359233	18.04.2014	1715821	18.04.2014	35,000
174	2013	HD9421	A03801	1900359271	18.04.2014	1715821	18.04.2014	35,000

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount		
175	2013	HD9421	A03801	1900359274	18.04.2014	1715821	18.04.2014	35,000		
176	2013	HD9421	A03801	1900359294	18.04.2014	1715821	18.04.2014	35,000		
177	2013	HD9421	A03801	1900359313	18.04.2014	1715821	18.04.2014	35,000		
178	2013	HD9421	A03801	1900359325	18.04.2014	1715821	18.04.2014	35,000		
179	2013	HD9421	A03801	1900359362	18.04.2014	1715821	18.04.2014	35,000		
180	2013	HD9421	A03801	1900359378	18.04.2014	1715821	18.04.2014	35,000		
181	2013	HD9421	A03801	1900359385	18.04.2014	1715821	18.04.2014	35,000		
182	2013	HD9421	A03801	1900359396	18.04.2014	1715821	18.04.2014	35,000		
183	2013	HD9421	A03801	1900359243	18.04.2014	1715821	18.04.2014	34,600		
184	2013	HD9421	A03801	1900359254	18.04.2014	1715821	18.04.2014	34,600		
185	2013	HD9421	A03801	1900359368	18.04.2014	1715821	18.04.2014	34,000		
186	2013	HD9421	A03801	1900359373	18.04.2014	1715821	18.04.2014	34,000		
187	2013	HD9421	A03801	1900359187	18.04.2014	1715821	18.04.2014	31,300		
188	2013	HD9421	A03801	1900359198	18.04.2014	1715821	18.04.2014	31,300		
189	2013	HD9421	A03801	1900359217	18.04.2014	1715821	18.04.2014	31,300		
190	2013	HD9421	A03801	1900359261	18.04.2014	1715821	18.04.2014	31,200		
191	2013	HD9421	A03801	1900359266	18.04.2014	1715821	18.04.2014	31,200		
				Sub-Tota	1		1	2,668,174		
192	2013	HD5613	A03805	1900517611	24.06.2014	1828193	24.06.2014	1,280		
193	2012	HD9421	A03805	1900554137	19.06.2013	1494454	19.06.2013	85,990		
	Sub-Total									

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
194	2016	HB5144	A03806	1900590288	20.06.2017	2804125	20.06.2017	99,800
				Sub-Tota	l			99,800
195	2016	HB0272	A03807	1900545891	08.06.2017	2801575	08.06.2017	11,321
196	2016	HB0272	A03807	1900545880	08.06.2017	2800649	08.06.2017	9,965
197	2016	HB0272	A03807	1900545871	08.06.2017	2800649	08.06.2017	7,343
198	2016	HB0272	A03807	1900201024	06.02.2017	2570134	06.02.2017	10,916
199	2016	HB0272	A03807	1900254573	06.02.2017	2570134	06.02.2017	9,873
200	2016	HB0272	A03807	1900102714	27.10.2016	2512233	27.10.2016	10,906
201	2016	HB0272	A03807	1900102716	27.10.2016	2512233	27.10.2016	6,685
202	2016	HB0272	A03807	1900046335	08.09.2016	2508739	08.09.2016	10,690
203	2015	HD9573	A03807	1900525047	23.06.2016	2469210	23.06.2016	4,790
204	2015	HD9573	A03807	1900511509	21.06.2016	2470385	21.06.2016	46,636
205	2015	HD5613	A03807	1900431179	03.06.2016	2406278	03.06.2016	24,038
206	2015	HD9573	A03807	1900431085	03.06.2016	2406278	03.06.2016	12,178
207	2015	HD5613	A03807	1900319333	21.04.2016	2319566	21.04.2016	12,148
208	2015	HD5613	A03807	1900201945	08.02.2016	2226612	08.02.2016	10,296
209	2015	HD5613	A03807	1900032645	10.09.2015	2136284	10.09.2015	8,832
210	2014	HD9421	A03807	1900485422	22.06.2015	2132725	22.06.2015	18,290
211	2014	HD9421	A03807	1900485433	22.06.2015	2132725	22.06.2015	10,261
212	2014	HD5613	A03807	1900456360	15.06.2015	2045849	15.06.2015	44,545
213	2014	HD5613	A03807	1900456368	15.06.2015	2045849	15.06.2015	43,750

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
214	2014	HD5613	A03807	1900456375	15.06.2015	2045849	15.06.2015	43,119
215	2014	HD5613	A03807	1900377339	21.05.2015	2041501	21.05.2015	21,800
216	2014	HD5613	A03807	1900330134	08.05.2015	2040786	08.05.2015	12,807
217	2014	HD9421	A03807	1900324325	23.04.2015	2038290	23.04.2015	20,057
218	2014	HD5613	A03807	1900247404	26.02.2015	1963270	26.02.2015	20,300
219	2014	HD5613	A03807	1900205356	03.02.2015	1961287	03.02.2015	14,164
220	2014	HD9421	A03807	1900178595	14.01.2015	1899500	14.01.2015	25,877
221	2014	HD9421	A03807	1900178586	14.01.2015	1899500	14.01.2015	21,500
222	2014	HD9421	A03807	1900178576	14.01.2015	1899500	14.01.2015	20,130
223	2014	HD9421	A03807	1900178591	14.01.2015	1899500	14.01.2015	15,765
224	2014	HD5613	A03807	1900149466	17.12.2014	1897880	17.12.2014	6,985
225	2014	HD5613	A03807	1900113944	19.11.2014	1896203	19.11.2014	10,615
226	2014	HD5613	A03807	1900050770	23.09.2014	1831978	23.09.2014	17,445
227	2014	HD5613	A03807	1900035577	08.09.2014	1830657	08.09.2014	18,198
228	2013	HD9421	A03807	1900523524	26.06.2014	1828193	26.06.2014	72,570
229	2013	HD9421	A03807	1900520993	25.06.2014	1828193	25.06.2014	37,430
230	2013	HD9421	A03807	1900508700	21.06.2014	1826815	21.06.2014	16,660
231	2013	HD9421	A03807	1900493718	17.06.2014	1826643	17.06.2014	127,904
232	2013	HD9421	A03807	1900493329	17.06.2014	1826643	17.06.2014	28,267
233	2013	HD9421	A03807	1900483675	16.06.2014	1825228	16.06.2014	156,982
234	2013	HD9421	A03807	1900483674	16.06.2014	1825228	16.06.2014	142,537

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
235	2013	HD5613	A03807	1900441293	02.06.2014	1755670	02.06.2014	114,621
236	2013	HD5613	A03807	1900441282	02.06.2014	1755670	02.06.2014	74,646
237	2013	HD9421	A03807	1900441418	02.06.2014	1755670	02.06.2014	49,758
238	2013	HD5613	A03807	1900441299	02.06.2014	1755670	02.06.2014	26,430
239	2013	HD5613	A03807	1900390788	08.05.2014	1752560	08.05.2014	3,565
240	2013	HD5613	A03807	1900315365	10.03.2014	1713353	10.03.2014	11,738
241	2013	HD9421	A03807	1900226992	10.01.2014	1649587	10.01.2014	118,140
242	2013	HD9421	A03807	1900169154	02.12.2013	1602615	02.12.2013	13,671
243	2013	HD9421	A03807	1900158773	26.11.2013	1601664	26.11.2013	5,770
244	2013	HD9421	A03807	1900136455	08.11.2013	1592163	08.11.2013	54,303
245	2012	HD9421	A03807	1900554214	19.06.2013	1492067	19.06.2013	93,321
246	2012	HD9421	A03807	1900554183	19.06.2013	1492067	19.06.2013	78,939
247	2012	HD9421	A03807	1900554196	19.06.2013	1492067	19.06.2013	19,627
248	2012	HD9421	A03807	1900532046	14.06.2013	1478513	14.06.2013	58,109
249	2012	HD5613	A03807	1900337270	14.03.2013	1349625	14.03.2013	59,378
250	2012	HD5613	A03807	1900337277	14.03.2013	1349625	14.03.2013	56,441
251	2012	HD5613	A03807	1900114970	02.11.2012	1196785	02.11.2012	7,807
252	2012	HD5613	A03807	1900104241	24.10.2012	1195960	24.10.2012	49,834
		•		Sub-Tota	1	•		2,060,673
253	2015	HD5613	A03901	1900531805	24.06.2016	2469494	24.06.2016	33,000
254	2014	HD5613	A03901	1900478260	18.06.2015	2047034	18.06.2015	28,600

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
255	2013	HD5613	A03901	1900520905	25.06.2014	1828193	25.06.2014	26,000
256	2012	HD5613	A03901	1900553849	19.06.2013	1492068	19.06.2013	26,300
				Sub-Tota	1			113,900
257	2013	HD5613	A03902	1900521604	25.06.2014	1828193	25.06.2014	37,000
258	2012	HD5613	A03902	1900553861	19.06.2013	1492068	19.06.2013	36,720
	•			Sub-Tota	1			73,720
259	2016	HB5144	A03903	1900545716	08.06.2017	2800649	08.06.2017	97,750
260	2016	HB5144	A03903	1900545716	08.06.2017	2800649	08.06.2017	52,229
261	2015	HD9421	A03903	1900474666	15.06.2016	2408217	15.06.2016	149,710
262	2014	HD9421	A03903	1900478252	18.06.2015	2047034	18.06.2015	200,000
263	2013	HD9421	A03903	1900455455	07.06.2014	1756647	07.06.2014	299,860
				Sub-Tota	1			799,549
264	2015	HD5613	A03906	1900431187	03.06.2016	2406278	03.06.2016	42,940
265	2014	HD5613	A03906	1900488443	23.06.2015	2132914	23.06.2015	37,000
266	2013	HD5613	A03906	1900520915	25.06.2014	1828193	25.06.2014	34,000
267	2012	HD5613	A03906	1900568405	21.06.2013	1491976	21.06.2013	26,800
	•			Sub-Tota	1			140,740
268	2017	HB5144	A03907	1900605082	06.06.2018	3115649	06.06.2018	38,693
		•		Sub-Tota	l	•		38,693
269	2016	HB5144	A03915	1900598187	30.06.2017	2805273	30.06.2017	28,000
270	2016	HB5144	A03915	1900598184	30.06.2017	2805273	30.06.2017	4,200

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
271	2015	HD9421	A03915	1900546900	29.06.2016	2470385	29.06.2016	21,670
272	2015	HD9421	A03915	1900485984	16.06.2016	2410270	16.06.2016	31,494
				Sub-Tota	1			85,364
273	2013	HD9421	A03918	1900455458	07.06.2014	1756754	07.06.2014	51,590
				Sub-Tota	1			51,590
274	2016	HB5144	A03970	1900588290	19.06.2017	2804093	19.06.2017	14,620
275	2016	HB5144	A03970	1900513151	01.06.2017	2800652	01.06.2017	33,160
276	2016	HB5144	A03970	1900513156	01.06.2017	2800652	01.06.2017	31,830
277	2016	HB5144	A03970	1900513154	01.06.2017	2800652	01.06.2017	14,600
278	2016	HB5144	A03970	1900513147	01.06.2017	2800649	01.06.2017	12,740
279	2016	HB5144	A03970	1900513149	01.06.2017	2800652	01.06.2017	12,250
280	2016	HB5144	A03970	1900513153	01.06.2017	2800652	01.06.2017	7,410
281	2016	HB5144	A03970	1900513150	01.06.2017	2800652	01.06.2017	5,110
282	2016	HB5144	A03970	1900513158	01.06.2017	2800652	01.06.2017	4,130
283	2016	HB5144	A03970	1900513160	01.06.2017	2800649	01.06.2017	2,580
284	2016	HB5144	A03970	1900513152	01.06.2017	2800652	01.06.2017	1,570
285	2015	HD9573	A03970	1900531973	24.06.2016	2469490	24.06.2016	100,000
286	2015	HD9421	A03970	1900525114	23.06.2016	2469210	23.06.2016	99,000
287	2015	HD9421	A03970	1900474591	15.06.2016	2408217	15.06.2016	24,530
288	2015	HD9421	A03970	1900474624	15.06.2016	2408217	15.06.2016	24,372
289	2015	HD9421	A03970	1900474631	15.06.2016	2408217	15.06.2016	23,205

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
290	2015	HD9421	A03970	1900474608	15.06.2016	2408217	15.06.2016	21,340
291	2015	HD9421	A03970	1900474614	15.06.2016	2408217	15.06.2016	18,405
292	2015	HD5613	A03970	1900431197	03.06.2016	2406278	03.06.2016	15,990
293	2014	HD9421	A03970	1900485374	22.06.2015	2132725	22.06.2015	64,610
294	2014	HD9421	A03970	1900485364	22.06.2015	2132725	22.06.2015	41,350
295	2014	HD9421	A03970	1900455939	15.06.2015	2045849	15.06.2015	16,550
296	2014	HD9421	A03970	1900455931	15.06.2015	2046373	15.06.2015	14,585
297	2014	HD5613	A03970	1900456349	15.06.2015	2045925	15.06.2015	8,800
298	2014	HD9421	A03970	1900175809	13.01.2015	1899500	13.01.2015	9,350
299	2014	HD9421	A03970	1900175834	13.01.2015	1899500	13.01.2015	3,550
300	2013	HD9421	A03970	1900508686	21.06.2014	1826815	21.06.2014	113,000
301	2013	HD9421	A03970	1900493550	17.06.2014	1826643	17.06.2014	53,250
302	2013	HD5613	A03970	1900482517	14.06.2014	1826643	14.06.2014	6,400
303	2013	HD9421	A03970	1900455464	07.06.2014	1756647	07.06.2014	49,878
304	2013	HD9421	A03970	1900455462	07.06.2014	1756647	07.06.2014	48,421
305	2013	HD9421	A03970	1900455468	07.06.2014	1756647	07.06.2014	43,855
306	2013	HD9421	A03970	1900455465	07.06.2014	1756647	07.06.2014	42,400
307	2013	HD9421	A03970	1900455472	07.06.2014	1756647	07.06.2014	41,028
308	2013	HD9421	A03970	1900455461	07.06.2014	1756647	07.06.2014	39,102
309	2013	HD9421	A03970	1900455463	07.06.2014	1756647	07.06.2014	32,060
310	2012	HD5613	A03970	1900568401	21.06.2013	1491976	21.06.2013	6,300

Sr.No	Year	Cost Center	G/L	Document No	Document Date	Cheque No	Posting Date	Amount
311	2012	HD9421	A03970	1900554473	19.06.2013	1492069	19.06.2013	116,270
312	2012	HD9421	A03970	1900554424	19.06.2013	1492069	19.06.2013	53,820
313	2012	HD9421	A03970	1900554440	19.06.2013	1492069	19.06.2013	29,898
	Sub-Total							1,301,319
	Grand Total						45,419,360	

(Annexure 4.2.2-A)

## Doubtful cash payments from DDO account for Rs44.982 million

S.No.	Month	Page No. of cash book	Amount	S.No.	Month	Page No. of cash book	Amount
1	August-2011	4	16,145	13	June-2014	24	95,440
2	February -2012	11	1,860	14	October-2014	25	35,643
3	May-2012	13	2,610	15	December-2014	26	10,615
4	June-2012	14	61,026	16	January-2015	27	6,985
5	June-2012	15	439,915	17	February -2015	28	14,164
6	September-2012	18	49,834	18	March-2015	29	20,300
7	Novemer-2012	19	123,626	19	June-2015	30	240,821
8	June-2013	21	95,182	20	September-2015	31	8,832
9	April-2014	22	11,738	21	March02016	33	10,296
10	Apr014	22	3,565	22	May02016	34	12,148
11	June-2014	23	215,697	23	June02016	35	82,248
12	June-2014	24	6,400	24	June02016	35	31,515

25	October02016	36	10,690	51	April-2014	69	1,104,000
26	November-2016	37	10,906	52	May-2014	70	1,027,300
27	January-2017	38	20,789	53	Jun3-2014	71	7,511,043
28	June-2017	39	11,321	54	June-2014	73	3,592,613
29	June-2017	40	13,308	55	June-2014	74	770,019
30	March02018	41	335,015	56	January 2015	75	109,962
31	March02018	41	2,000	57	June-2015	77	657,189
32	November-2011	52	35,656	58	June02016	78	2,488,000
33	December-2011	54	299,925	59	June02016	78	948,000
34	January-2012	55	284,400	60	June02016	79	2,014,000
35	January-2012	55	706,545	61	June02016	79	830,000
36	February -2012	56	256,614	62	June02016	80	948,000
37	April-2012	57	30,155	63	June02016	81	277,542
38	April-2012	57	2,701,030	64	June02016	82	1,680,831
39	May-2012	58	1,563,370	65	June02016	83	369,797
40	May-2012	59	753,600	66	June02016	83	102,586
41	May-2012	59	362,400	67	June02016	84	53,164
42	June-2012	60	142,800	68	June-2017	85	262,970
43	June-2012	61	1,612,372	69	June-2017	86	113,762
44	June-2012	62	308,400	70	June-2017	86	32,200
45	June-2012	63	630,390	71	June-2017	88	295,801
46	June-2012	65	914,713		Total		44,982,293
47	October-2013	66	3,198,000				
48	November-2013	66	54,303				
49	December-2013	67	2,294,941				
50	January 2014	68	829,140				

#### (Annexure 4.2.3)

Year	Contractor Name	Nature of Work	Amount
2013-14	M/s. View Communication Karachi.	T.V Spots	1,945,440
2013-14	M/s. S.S. Marketing Hyd: &	T.V Spots	1,824,361
2013-14	M/s. Connect Marketing Karachi	T.V Spots	621,460
2015-16	M/s. S.S. Marketing Hyd: &	T.V Spots	7,162,500
2016-17	M/s. S.S. Marketing Hyd:	T.V Spots	2,087,739
2017-18	M/s. S.S. Marketing (Pvt)Kcy	T.V Spots	13,608,790
2013-14	M/s. S.S. Marketing Hyd: &	Radio Spots	1,929,638
2015-16	M/s. S.S. Marketing Hyd: &	Radio Spots	3,265,622
2016-17	M/s. S.S. Marketing Hyd:	Radio Spots	1,645,841
2016-17	M/s. S.S. Marketing Hyd: &	Radio Spots	1,604,400
2017-18	M/s. S.S. Marketing (Pvt)Kcy	Radio Spots	2,539,470
2017-18	M/s. Galaxy Supplier & Adv: Company Karachi	Radio Spots	1,577,740
	Total		39,813,001

Unauthorized expenditure on Electronic Media-Rs39.813 million

# (Annexure 4.2.4)

## Non-Deduction of Sales Tax on Services

			(1	Rs in million)
S. No	Payment Made to	Amount Paid	Rate Sales Tax on Service	Recovery
1	M/S S.S Marketing & Advertising Co Hyderabad	23.087	13%	3.001
2	M/S View Communication Karachi	5.014	13%	0.651
3	Connect Marketing Communication	0.664	13%	0.086
	Total	28.765		3.739

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## (Annexure 4.2.5)

## Irregular expenditure without inviting open tenders

(Rs in million)

Sr #	Vendor Name	Cheque #	Particulars of Procurement	Amount	
1	M/s International Enterprises	2135716 07.09.2015	Impregnate Bed Net 3,605Nos @632.47	2.668	
2	M/s SS Marketing & Advertising Co	2408215 15.06.2016	<ol> <li>Dell Core I 7 laptop and HP ENVY touch laptop @ 80,000 x 2 =160,000</li> <li>Message regarding prevention and control with wooden frame along with hard board sheet and laminated plastic (Paramount in Sindhi 23x34) 1,400 unit @ 250 =349,600</li> </ol>	0.509	
	Total				

## (Annexure 4.2.7)

### Stamp duty

Stamp duty								
Year	Contractor Name	Detail of Contract	Contract Actual Value	Stamp Duty				
2013-14	M/s. International Enterprises Karachi	Supply of Insecticide	105,769,620	317,309				
2013-14	M/s. A to Zee International Hyd:	Supply of Spray Pump	32,748,000	98,244				
2013-14	M/s. International Enterprises Karachi	Supply of ULV Machine	23,600,000	70,800				
2013-14	M/s. International Enterprises Karachi	Supply of Bed Net	12,580,000	37,740				
2013-14	M/s. Hamza Enterprises Hyd:	Supply of Medicine	9,999,926	30,000				
2013-14	M/s. Hamza Enterprises Hyd:	Supply of Blood Lancet	4,092,296	12,277				
2013-14	M/s. View Communication Karachi.	T.V Spots	2,016,000	6,048				
2013-14	M/s. S.S. Marketing Hyd: &	Radio Spots	1,999,625	5,999				
2013-14	M/s. S.S. Marketing Hyd: &	T.V Spots	1,890,530	5,672				
2013-14	M/s. Connect Marketing Karachi	T.V Spots	664,000	1,992				
2013-14	M/s. Lab Link Enterprises Hyderabad	Supply of Microscope Slides	395,000	1,185				
2014-15	M/s. International Enterprises Karachi	Supply of Insecticide	40,650,000	121,950				
2014-15	M/s. International Enterprises Karachi	Supply of Bed Net	20,700,000	62,100				
2014-15	M/s. International Enterprises Karachi	Supply of ULV Machine	17,360,100	52,080				
2014-15	M/s. International Enterprises Karachi	Supply of Insecticide	9,855,000	29,565				
2014-15	M/s. Hamza Enterprises Hyd:	Supply of Medicine	8,345,000	25,035				
2014-15	M/s. Hamza Enterprises Hyd:	Supply of Medicine	7,286,850	21,861				
2014-15	M/s. A to Zee International Hyd:	Supply of Spray Pump	5,335,700	16,007				
2014-15	M/s. A to Zee International Hyd:	Supply of Spray Pump	4,780,000	14,340				
2014-15	M/s. Hamza Enterprises	Supply of Consumable Kit & Regent	4,709,917	14,130				
2014-15	M/s. A to Zee International Hyd:	Supply of Medicine	4,669,200	14,008				
2014-15	M/s. Hamza Enterprises Hyd:	Supply of Blood Lancet	2,769,390	8,308				

Year	Contractor Name	Detail of Contract	Contract Actual Value	Stamp Duty
2014-15	M/s. Al0Beruni Scientific Store Hyderabad	Supply of Microscope	2,504,300	7,513
2014-15	M/s. RTJ Enterprises Hyd:	Supply of Medicine	1,393,950	4,182
2014-15	M/s. Hamza Enterprises Hyderabad	Supply of Microscope Slides	818,693	2,456
2015-16	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of Bed Net	23,712,000	71,136
2015-16	M/s. Edgro Private Limited Karachi	Supply of Insecticide	9,736,890	29,211
2015-16	M/s. S.S. Marketing Hyd: &	T.V Spots	7,500,000	22,500
2015-16	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of Spray Pumps	5,000,000	15,000
2015-16	M/s. Hamza Enterprises Hyd:	Supply of Blood Lancet	3,962,608	11,888
2015-16	M/s. Ali Akbar Enterprises Lahore	Supply of Insecticide	3,575,000	10,725
2015-16	M/s. S.S. Marketing Hyd: &	Radio Spots	3,419,500	10,259
2015-16	M/s. International Enterprises Karachi	Supply of Insecticide	2,667,700	8,003
2015-16	M/s. Hamza Enterprises Hyd:	Supply of Consumable Kit & Regents	2,556,971	7,671
2015-16	M/s Zafa Pharmaceutical Lab :Karachi	Supply of Medicine	2,472,000	7,416
2015-16	M/s. Hassaan Distributor Hyd:	Supply of Medicine	2,184,000	6,552
2015-16	M/s. Hamza Enterprises Hyd:	Supply of Consumable Kit & Regents	2,091,714	6,275
2015-16	M/s. Indus Motor Co Limited Karachi	Purchase of Car	1,791,000	5,373
2015-16	M/s. Mafh Distributor Hyd	Supply of Motorcycle	1,501,500	4,505
2015-16	M/s. A to Zee International Hyd:	Supply of Microscope Slides	999,983	3,000
2015-16	M/s Sanofi Aventis Pakistan Karachi	Supply of Medicine	897,980	2,694
2015-16	M/s. Hamza Enterprises Hyd:	Supply of Microscope	596,156	1,788
2016-17	M/s. Edgro Private Limited Karachi	Supply of Bed Net	35,015,527	105,047

Year	Contractor Name	Detail of Contract	Contract Actual Value	Stamp Duty
2016-17	M/s. Edgro Private Limited Karachi	Supply of Insecticide	16,449,760	49,349
2016-17	M/s. Edgro Private Limited Karachi	Supply of ULV Machine	11,580,000	34,740
2016-17	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of Spray Pumps	7,520,584	22,562
2016-17	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of Bed Net	5,927,702	17,783
2016-17	M/s. Hamza Enterprises Hyd:	Supply of Consumable Kit & Regents	5,511,918	16,536
2016-17	M/s. Hamza Enterprises Hyd:	Supply of Blood Lancet	4,851,610	14,555
2016-17	M/s. International Enterprises Karachi	Supply of Insecticide	3,580,000	10,740
2016-17	M/s. International Enterprises Karachi	Supply of Insecticide	3,440,000	10,320
2016-17	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of Spray Pumps	2,266,875	6,801
2016-17	M/s. S.S. Marketing Hyd:	T.V Spots	2,156,440	6,469
2016-17	M/s. Hamza Enterprises Hyd:	Supply of Consumable Chemical	2,147,102	6,441
2016-17	M/s. S.S. Marketing Hyd:	Radio Spots	1,700,000	5,100
2016-17	M/s. S.S. Marketing Hyd: &	Radio Spots	1,680,000	5,040
2016-17	M/s. Lab Link Enterprises Hyd:	Supply of RTD Kit & Microscope Slides	1,455,000	4,365
2016-17	M/s.Lavish Enterprises Sukkur	Supply of Medicine	1,429,974	4,290
2016-17	M/s. Mafh Distributor Hyd	Supply of Protective Cloth	524,700	1,574
2016-17	M/s. Lab Link Enterprises yd:	Supply of Lab: Equipment	374,960	1,125
2016-17	M/s. Mafh Distributor Hyd	Supply of Lab: Equipment	69,948	210
2017-18	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of ULV Machine	21,294,000	63,882
2017-18	M/s. Z.R Engineering Lahore	Supply of Insecticide	17,421,500	52,265
2017-18	M/s. S.S. Marketing (Pvt)Kcy	T.V Spots	15,577,245	46,732

Year	Contractor Name	Detail of Contract	Contract Actual Value	Stamp Duty
2017-18	M/s. Hamza Enterprises Hyd:	Supply of Blood Lancet & Microscope Slides	6,760,352	20,281
2017-18	M/s. M.I Enterprises Pharmaceutical Distributor Hyd:	Supply of Medicine	6,006,000	18,018
2017-18	M/s. Hamza Enterprises Hyd:	Supply of Consumable Chemical	5,364,620	16,094
2017-18	M/s. Edgro Private Limited Karachi	Supply of Bed Net	4,984,200	14,953
2017-18	M/s. Mohsin & Hassan Enterprises Hyderabad	Supply of Spray Pumps	4,414,798	13,244
2017-18	M/s. S.S. Marketing (Pvt)Kcy	Radio Spots	2,913,300	8,740
2017-18	M/s. Galaxy Supplier & Adv: Company Karachi	Radio Spots	1,805,180	5,416
2017-18	M/s. Edgro Private Limited Karachi	Supply of Insecticide	1,556,170	4,669
2017-18	M/s. A to Zee International Hyd:	Supply of RDT Kits	1,425,000	4,275
2017-18	M/s. Mafh Distributor Hyd	Supply of Protective Cloth	890,120	2,670
2017-18	M/s. Popular International Kcy:	Supply of Microscope	799,920	2,400
Total			600,492,604	1,801,483

## (Annexure 4.2.7)

Sr.No	F.Year	Non- depositing of tender fe	Item	tender fees
1	2013-14	m/s FSK Enterprises Karachi	Insecticide	500
2	2013-14	M/S international Karachi	Insecticide	500
3	2013-14	M/S Auriga chemical enterprises Lahore	Insecticide	500
4	2013-14	M/S international Karachi	Insecticide	500
5	2013-14	M/S panorama corporation Karachi	Insecticide	500
6	2013-14	m/s FSK Enterprises Karachi	ULV Machine	500
7	2013-14	M/S M.J International Karachi	ULV Machine	500
8	2013-14	M/s B.Mitco (pvt) Limited Karachi	ULV Machine	500
9	2013-14	M/S Auriga chemical enterprises Lahore	ULV Machine	500
10	2013-14	M/s Lab Link Enterprises Hyd	ULV Machine	500
11	2013-14	M/s Paras Enterprises Karachi	ULV Machine	500
12	2013-14	M/s International Enterprises Karachi	ULV Machine	500
13	2013-14	M/S panorama corporation Karachi	ULV Machine	500
14	2013-14	M/s connect Marketing communication Karachi	T.V SPOTS	500
15	2013-14	M/s view communication Karachi	T.V SPOTS	500
16	2013-14	M/s Delta communication Karachi	T.V SPOTS	500
17	2013-14	M/s S.S Marketing & advertisement co0 Hyderabad	T.V SPOTS	500
18	2013-14	M/s Hamza Enterprises Hyd	Microscope Slide	500
19	2013-14	M/s Lab Link Enterprises Hyd	Microscope Slide	500
20	2013-14	M/s Mohsin & Hasan Enterprises Hyd	Microscope Slide	500
21	2013-14	M/s Al Beruni scientific store Hyd	Microscope Slide	500
22	2013-14	M/s Mafh Distributer Hyderabad	Microscope Slide	500
23	2013-14	M/s Paras Enterprises Karachi	Microscope Slide	500
24	2013-14	M/s Hamza Enterprises Hyd	Anti Malaria Drug & Medicine	500
25	2013-14	M/s Lab Link Enterprises Hyd	Anti Malaria Drug & Medicine	500
26	2013-14	M/s Hassan Distributer Hyd	Anti Malaria Drug & Medicine	500
27	2013-14	M/s Cara way pharmaceutical Lahore	Anti Malaria Drug & Medicine	500
28	2013-14	M/s Mafh Distributer Hyderabad	Anti Malaria Drug & Medicine	500
29	2013-14	M/s Paras Enterprises Karachi	Anti Malaria Drug & Medicine	500
30	2013-14	M/s Hamza Enterprises Hyd	Consumable chemical kits & Regents	500
31	2013-14	M/s Lab Link Enterprises Hyd	Consumable chemical kits & Regents	500
32	2013-14	M/s Mohsin & Hasan Enterprises Hyd	Consumable chemical kits & Regents	500

Non- depositing of tender fees-Rs 371,500

Sr.No	F.Year	Name of Bidder	Item	tender fees
33	2013-14	M/s Al Beruni scientific store Hyd	Consumable chemical kits & Regents	500
34	2013-14	M/s Mafh Distributer Hyderabad	Consumable chemical kits & Regents	500
35	2013-14	M/s prime Scientific store Hyd	Consumable chemical kits & Regents	500
36	2013-14	M/s Hamza Enterprises Hyd	Blood Lancet	500
37	2013-14	M/s Mohsin &Hasan Enterprises Hyd	Blood Lancet	500
38	2013-14	M/s Al Bruni scientific store Hyd	Blood Lancet	500
39	2013-14	M/s Mafh Distributer Hyderabad	Blood Lancet	500
40	2013-14	M/s Paras Enterprises Karachi	Blood Lancet	500
41	2013-14	m/s FSK Enterprises Karachi	Impregnate Bed Nets	500
42	2013-14	M/S M.J International Karachi	Impregnate Bed Nets	500
43	2013-14	M/s B.Mitco (pvt) Limited Karachi	Impregnate Bed Nets	500
44	2013-14	M/S Auriga chemical enterprises Lahore	Impregnate Bed Nets	500
45	2013-14	M/s International Enterprises Karachi	Impregnate Bed Nets	500
46	2013-14	M/S panorama corporation Karachi	Impregnate Bed Nets	500
47	2013-14	M/s view communication Karachi	Radio Spots	500
48	2013-14	M/s Delta communication Karachi	Radio Spots	500
49	2013-14	M/s S.S Marketing & advertisement co0 Hyderabad	Radio Spots	500
50	2013-14	M/s Hamza Enterprises Hyd	Spray Pump	500
51	2013-14	M/s B.Mitco (pvt) Limited Karachi	Spray Pump	500
52	2013-14	M/S Auriga chemical enterprises Lahore	Spray Pump	500
53	2013-14	M/s Shan general order supplier Hyd	Spray Pump	500
54	2013-14	M/s Al Beruni scientific store Hyd	Spray Pump	500
55	2013-14	M/s prime Scientific store Hyd	Spray Pump	500
56	2013-14	M/s A to Zee International Hyd	Spray Pump	500
57	2013-14	M/s B.Mitco (pvt) Limited Karachi	Microscope Slide	500
58	2013-14	M/s Lab Link Enterprises Hyd	Microscope Slide	500
59	2013-14	M/s Platinum corporation Karachi	Microscope Slide	500
60	2013-14	M/s Hamza Enterprises Hyd	Microscope Slide	500
61	2013-14	M/s western scientific traders Karachi	Microscope Slide	500
62	2013-14	M/s Al Beruni scientific store Hyd	Microscope Slide	500
63	2013-14	M/s Paras Enterprises Karachi	Microscope Slide	500
64	2014-15	M/s Hassan Distributer Hyd	Anti Malaria Drug & Medicine	2,000
65	2014-15	M/s RTJ enterprises Hyd	Anti Malaria Drug & Medicine	2,000
66	2014-15	M/s A to Zee International Hyd	Anti Malaria Drug & Medicine	2,000

Sr.No	F.Year	Name of Bidder	Item	tender fees
67	2014-15	M/s Hamza Enterprises Hyd	Anti Malaria Drug & Medicine	2,000
68	2014-15	M/s Shamim & co Karachi	Anti Malaria Drug & Medicine	2,000
69	2014-15	M/s ABA Enterprises Hyd	Anti Malaria Drug & Medicine	2,000
70	2014-15	M/s Essa Business Group Hyderabad	Anti Malaria Drug & Medicine	2,000
71	2014-15	M/s Paras Enterprises Karachi	Anti Malaria Drug & Medicine	2,000
72	2014-15	M/s Lab Link Enterprises Hyd	Anti Malaria Drug & Medicine	2,000
73	2014-15	M/s Paras Enterprises Karachi	Anti Malaria Drug & Medicine	2,000
74	2014-15	M/s Z.I Enterprises Hyd	Anti Malaria Drug & Medicine	2,000
75	2014-15	M/s Humza Enterprises Hyd	Anti Malaria Drug & Medicine	2,000
76	2014-15	M/s Jawed Enterprises Hyd	Anti Malaria Drug & Medicine	2,000
77	2014-15	M/s Hamza Enterprises Hyd	Consumable chemical kits & Regents	2,000
78	2014-15	M/s Lab Link Enterprises Hyd	Consumable chemical kits & Regents	2,000
79	2014-15	M/s Huda Traders Karachi	Consumable chemical kits & Regents	2,000
80	2014-15	M/s Z.I Enterprises Hyd	Consumable chemical kits & Regents	2,000
81	2014-15	M/s Musaji Adam & Sons Karachi	Consumable chemical kits & Regents	2,000
82	2014-15	M/s International enterprises Karachi	Insecticide	2,000
83	2014-15	M/S Auriga chemical enterprises Lahore	Insecticide	2,000
84	2014-15	M/s Edgro (PRIVATE) limited Karachi	Insecticide	2,000
85	2014-15	M/s Nikon International Karachi	Insecticide	2,000
86	2014-15	M/s Z.R Engineering Lahore	Insecticide	2,000
87	2014-15	M/S panorama corporation Karachi	Insecticide	2,000
88	2014-15	M/s Warrior chemical (pvt) Ltd: Lahore	Insecticide	2,000
89	2014-15	M/s International Enterprises Karachi	Impregnate Bed Nets	2,000
90	2014-15	M/s Lab Link Enterprises Hyd	Impregnate Bed Nets	2,000
91	2014-15	M/s Edgro (PRIVATE) limited Karachi	Impregnate Bed Nets	2,000
92	2014-15	M/s B.Mitco (pvt) Limited Karachi	Impregnate Bed Nets	2,000
93	2014-15	M/s Nikon International Karachi	Impregnate Bed Nets	2,000
94	2014-15	M/s panorama corporation Karachi	Impregnate Bed Nets	2,000
95	2014-15	M/s A to Zee International Hyd	Spray Pump	2,000
96	2014-15	M/s Paras Enterprises Karachi	Spray Pump	2,000
97	2014-15	M/s Al Beruni scientific store Hyd	Spray Pump	2,000
98	2014-15	M/s Huda Traders Karachi	Spray Pump	2,000
99	2014-15	M/s B.Mitco (pvt) Limited Karachi	Spray Pump	2,000
100	2014-15	M/s Lab Link Enterprises Hyd	Spray Pump	2,000

Sr.No	F.Year	Name of Bidder	Item	tender fees
101	2014-15	M/s International Enterprises Karachi	ULV Machine	2,000
102	2014-15	M/s Edgro (PRIVATE) limited Karachi	ULV Machine	2,000
103	2014-15	M/s Lab Link Enterprises Hyd	ULV Machine	2,000
104	2014-15	M/s Huda Traders Karachi	ULV Machine	2,000
105	2014-15	M/s B.Mitco (pvt) Limited Karachi	ULV Machine	2,000
106	2014-15	M/s Nikon International Karachi	ULV Machine	2,000
107	2014-15	M/s panorama corporation Karachi	ULV Machine	2,000
108	2015-16	M/s Edgro (PRIVATE) limited Karachi	Insecticide	2,000
109	2015-16	M/s Nikon International Karachi	Insecticide	2,000
110	2015-16	M/s Friends Environment Solutions Lahore	Insecticide	2,000
111	2015-16	M/s Ali Akbar Enterprises Pvt: Ltd Lahore	Insecticide	2,000
112	2015-16	M/s Z.R Engineering Lahore	Insecticide	2,000
113	2015-16	M/s Mohsin & Hasan Enterprises Hyd	Impregnate Bed Nets	2,000
114	2015-16	M/s Edgro (PRIVATE) limited Karachi	Impregnate Bed Nets	2,000
115	2015-16	M/s Nikon International Karachi	Impregnate Bed Nets	2,000
116	2015-16	M/s Z.R Engineering Lahore	Impregnate Bed Nets	2,000
117	2015-16	M/s T.K Medical Instrument co Karachi	Impregnate Bed Nets	2,000
118	2015-16	M/s Edgro (PRIVATE) limited Karachi	Consumable chemical kits & Regents	2,000
119	2015-16	M/s Musaji Adam & Sons Karachi	Consumable chemical kits & Regents	2,000
120	2015-16	M/s Nikon International Karachi	Consumable chemical kits & Regents	2,000
121	2015-16	M/s Hamza Enterprises Hyd	Consumable chemical kits & Regents	2,000
122	2015-16	M/s A to Zee International Hyd	Consumable chemical kits & Regents	2,000
123	2015-16	M/s Mohsin & Hasan Enterprises Hyd	Consumable chemical kits & Regents	2,000
124	2015-16	M/s Z.I Enterprises Hyd	Consumable chemical kits & Regents	2,000
125	2015-16	M/s Lab Link Enterprises Hyd	Consumable chemical kits & Regents	2,000
126	2015-16	M/s Edgro (PRIVATE) limited Karachi	Spray Pump	2,000
127	2015-16	M/s Nikon International Karachi	Spray Pump	2,000
128	2015-16	M/s Hamza Enterprises Hyd	Spray Pump	2,000
129	2015-16	M/s Mohsin & Hasan Enterprises Hyd	Spray Pump	2,000
130	2015-16	M/s A to Zee International Hyd	Spray Pump	2,000
131	2015-16	M/s T.K Medical Instrument co Karachi	Spray Pump	2,000
132	2015-16	M/s Hamza Enterprises Hyd	Microscope	2,000

Sr.No	F.Year	Name of Bidder	Item	tender fees
133	2015-16	M/s Science tech equipment company Karachi	Microscope	2,000
134	2015-16	M/s Z.I Enterprises Hyd	Microscope	2,000
135	2015-16	M/s Lab Link Enterprises Hyd	Microscope	2,000
136	2015-16	M/s Hamza Enterprises Hyd	Motorcycle	2,000
137	2015-16	M/s A to Zee International Hyd	Motorcycle	2,000
138	2015-16	M/s Suzuki south (al Saeed motor) Karachi	Motorcycle	2,000
139	2015-16	M/s Mafh Distributer Hyderabad	Motorcycle	2,000
140	2016-17	M/s Nikon International Karachi	Insecticide	2,000
141	2016-17	M/s Pak china chemical (pvt) ltd	Insecticide	2,000
142	2016-17	M/s Lab Link Enterprises Hyd	Insecticide	2,000
143	2016-17	M/s Edgro (PRIVATE) limited Karachi	Insecticide	2,000
144	2016-17	M/s A to Zee International Hyd	Insecticide	2,000
145	2016-17	M/s Nikon International Karachi	Impregnate Bed Nets	2,000
146	2016-17	M/s Mohsin &Hasan Enterprises Hyd	Impregnate Bed Nets	2,000
147	2016-17	M/s Lab Link Enterprises Hyd	Impregnate Bed Nets	2,000
148	2016-17	M/s Edgro (PRIVATE) limited Karachi	Impregnate Bed Nets	2,000
149	2016-17	M/s Zee logistics Lahore	Impregnate Bed Nets	2,000
150	2016-17	M/s A to Zee International Hyd	Impregnate Bed Nets	2,000
151	2016-17	M/s Mohsin &Hasan Enterprises Hyd (Alternative bid)	Impregnate Bed Nets	2,000
152	2016-17	M/s Q.A Traders Hyderabad	Consumable chemical kits & Regents	2,000
153	2016-17	M/s Hamza Enterprises Hyd	Consumable chemical kits & Regents	2,000
154	2016-17	M/s Lab Link Enterprises Hyd	Consumable chemical kits & Regents	2,000
155	2016-17	M/s A.S Enterprises Lahore	Consumable chemical kits & Regents	2,000
156	2016-17	M/s Mod scientific traders Karachi	Consumable chemical kits & Regents	2,000
157	2016-17	M/s Mod scientific traders Karachi (alternative)	Consumable chemical kits & Regents	2,000
158	2016-17	M/s popular international Hyderabad	Consumable chemical kits & Regents	2,000
159	2016-17	M/s A to Zee International Hyd	Consumable chemical kits & Regents	2,000
160	2016-17	M/s Sky pharma Distributer Hyderabad	Consumable chemical kits & Regents	2,000
161	2016-17	M/s Nikon International Karachi	Spray Pump	2,000
162	2016-17	M/s Mohsin Hassan Enterprises Hyderabad	Spray Pump	2,000
163	2016-17	M/s Lab Link Enterprises Hyd	Spray Pump	2,000
164	2016-17	M/s Edgro (PRIVATE) limited Karachi	Spray Pump	2,000

Sr.No	F.Year	Name of Bidder	Item	tender fees
165	2016-17	M/s A to Zee International Hyd	Spray Pump	2,000
166	2016-17	M/s A to Zee International Hyd (Alternative)	Spray Pump	2,000
167	2016-17	M/s ZamZam Enterprises Hyderabad	Spray Pump	2,000
168	2016-17	M/s Nikon International Karachi	ULV Machine	2,000
169	2016-17	M/s creek pharmaceutical Karachi	ULV Machine	2,000
170	2016-17	M/s Lab Link Enterprises Hyd	ULV Machine	2,000
171	2016-17	M/s Edgro (PRIVATE) limited Karachi	ULV Machine	2,000
172	2016-17	M/s Hamza Enterprises Hyd	ULV Machine	2,000
173	2016-17	M/s popular international Hyderabad	Microscope	2,000
174	2016-17	M/s Hamza Enterprises Hyd	Microscope	2,000
175	2016-17	M/s Lab Link Enterprises Hyd	Microscope	2,000
176	2016-17	M/s Global marketing services Karachi	Microscope	2,000
177	2016-17	M/s Lab Link Enterprises Hyd	Laboratory Equipment	2,000
178	2016-17	M/s Mafh Distributer Hyderabad	Laboratory Equipment	2,000
179	2016-17	M/s Global marketing services Karachi	Laboratory Equipment	2,000
180	2016-17	M/s Hamza Enterprises Hyd	Protective clothing	2,000
181	2016-17	M/s Mafh Distributer Hyderabad	Protective clothing	2,000
182	2016-17	M/s S.S Marketing & advertisement co0 Hyderabad	Electronic media	2,000
183	2016-17	M/s Galaxy supplier & adv: company Karachi	Electronic media	2,000
184	2016-17	M/s ideal media marketing Noori Abad	Electronic media	2,000
185	2017-18	M/s Edgro (PRIVATE) limited Karachi	Insecticide	2,000
186	2017-18	M/s warrior chemical Lahore	Insecticide	2,000
187	2017-18	M/s Elahi Brothers Karachi	Insecticide	2,000
188	2017-18	M/s Z.R Engineering Lahore	Insecticide	2,000
189	2017-18	M/s Hamza Enterprises Hyd	Impregnate Bed Nets	2,000
190	2017-18	M/s Edgro (PRIVATE) limited Karachi	Impregnate Bed Nets	2,000
191	2017-18	M/s C.O.I Enterprises Karachi	Impregnate Bed Nets	2,000
192	2017-18	M/s Bilal construction company Sukkur	Impregnate Bed Nets	2,000
193	2017-18	M/s S& T corporation Hyderabad	Impregnate Bed Nets	2,000
194	2017-18	M/s Mohsin Hassan Enterprises Hyderabad	Impregnate Bed Nets	2,000
195	2017-18	M/s Z.R Engineering Lahore	Impregnate Bed Nets	2,000
196	2017-18	M/s Hamza Enterprises Hyd	Consumable chemical kits & Regents	2,000
197	2017-18	M/s popular international Hyderabad	Consumable chemical kits & Regents	2,000

Sr.No	F.Year	Name of Bidder	Item	tender fees
198	2017-18	M/s Mod scientific Traders Karachi	Consumable chemical kits & Regents	2,000
199	2017-18	M/s Mod scientific traders Karachi (alternative)	Consumable chemical kits & Regents	2,000
200	2017-18	M/s Moon enterprises Lahore	Consumable chemical kits & Regents	2,000
201	2017-18	M/s Platinum corporation Karachi	Consumable chemical kits & Regents	2,000
202	2017-18	M/s Platinum corporation Karachi (Alternative)	Consumable chemical kits & Regents	2,000
203	2017-18	M/s Hamza Enterprises Hyd	Consumable chemical kits & Regents	2,000
204	2017-18	M/s A to zee international Hyderabad	Consumable chemical kits & Regents	2,000
205	2017-18	M/s Edgro (PRIVATE) limited Karachi	Spray Pump	2,000
206	2017-18	M/s platinum corporation Hyderabad	Spray Pump	2,000
207	2017-18	M/s S& T corporation Hyderabad	Spray Pump	2,000
208	2017-18	M/s Mohsin Hassan Enterprises Hyderabad	Spray Pump	2,000
209	2017-18	M/s Al0sharique Trading company Hyderabad	Spray Pump	2,000
210	2017-18	M/s Hamza Enterprises Hyd	ULV Machine	2,000
211	2017-18	M/s Edgro (PRIVATE) limited Karachi	ULV Machine	2,000
212	2017-18	M/s platinum corporation Hyderabad	ULV Machine	2,000
213	2017-18	M/s S& T corporation Hyderabad	ULV Machine	2,000
214	2017-18	M/s Mohsin Hassan Enterprises Hyderabad	ULV Machine	2,000
215	2017-18	M/s A to zee international Hyderabad	ULV Machine	2,000
216	2017-18	M/s popular international Hyderabad	Microscope	2,000
217	2017-18	M/s Hamza Enterprises Hyd	Microscope	2,000
218	2017-18	M/s luck lab international Karachi	Microscope	2,000
219	2017-18	M/s platinum corporation Hyderabad	Microscope	2,000
220	2017-18	M/s platinum corporation Hyderabad (Alternative)	Microscope	2,000
221	2017-18	M/s Science tech equipment company Karachi	Microscope	2,000
222	2017-18	M/s S& T corporation Hyderabad	Microscope	2,000
223	2017-18	M/s Hamza Enterprises Hyd	Laboratory Equipment	2,000
224	2017-18	M/s Global marketing services Karachi	Laboratory Equipment	2,000
225	2017-18	M/s platinum corporation Hyderabad	Laboratory Equipment	2,000
226	2017-18	M/s S& T corporation Hyderabad	Laboratory Equipment	2,000
227	2017-18	M/s scientific supplier Karachi	Laboratory Equipment	2,000
228	2017-18	M/s Mafh Distributer Hyderabad	Laboratory Equipment	2,000
229	2017-18	M/s Mafh Distributer Hyderabad	Protective clothing	2,000

Sr.No	F.Year	Name of Bidder	Item	tender fees
230	2017-18	M/s Shafique electrical services Hyderabad	Protective clothing	2,000
231	2017-18	M/s S.S Marketing & advertisement co0 Hyderabad	Electronic media	2,000
232	2017-18	M/s Galaxy supplier & adv: company Karachi	Electronic media	2,000
233	2017-18	M/s ideal media marketing Noori Abad	Electronic media	2,000
		Total		371,500

#### (Annexure 4.2.8) Irrational decision of Procurement of material subsequently public funds blocked

Year	Machine	Opening Balance	Procured	Issued	Balance
2012-13	ALPHACYPERMETHRIN 5% WP	8,352	56,100	2,940	61,512
2013-14	ALPHACYPERMETHRIN 5% WP	61,512	3,269	58,820	5,961
2014-15	ALPHACYPERMETHRIN 5% WP	5,961	-	1,250	4,711
2015-16	ALPHACYPERMETHRIN 5% WP	4,711	5,000	4,711	5,000
2016-17	ALPHACYPERMETHRIN 5% WP	5,000	11,515	4,875	11,640
2017-18	ALPHACYPERMETHRIN 5% WP	11,640	16,502	18,312	9,830
2012-13	BED NETS	20,572	23,000	11,510	32,062
2013-14	BED NETS	32,062	25,108	30,109	27,061
2014-15	BED NETS	27,061	34,605	25,075	36,591
2015-16	BED NETS	36,591	41,462	17,680	60,373
2016-17	BED NETS	60,373	50,022	30,160	80,235
2017-18	BED NETS	80,235	10,000	68,460	21,775
2012-13	DELTAMETHRINE LIQUID 1.5 EC	2,934	13,157	2,733	13,358
2013-14	DELTAMETHRINE LIQUID 1.5 EC	13,358	6,950	15,219	5,089
2014-15	DELTAMETHRINE LIQUID 1.5 EC	5,089	21,439	10,560	15,968
2015-16	DELTAMETHRINE LIQUID 1.5 EC	15,968	16,423	15,550	16,841
2016-17	DELTAMETHRINE LIQUID 1.5 EC	16,841	17,621	2,437	32,025
2017-18	DELTAMETHRINE LIQUID 1.5 EC	32,025	13,445	16,508	28,962
2012-13	FENETHION GRANULS	4,125	-	956	3,169
2013-14	FENETHION GRANULS	3,169	-	2,193	976
2014-15	FENETHION GRANULS	976	-	100	876
2015-16	FENETHION GRANULS	876	-	667	209
2012-13	MICROSCOPES PROCURED	121	30	8	143
2013-14	MICROSCOPES PROCURED	143	20	127	36
2014-15	MICROSCOPES PROCURED	36	30	6	60
2015-16	MICROSCOPES PROCURED	60	5	24	41

Year	Machine	Opening Balance	Procured	Issued	Balance
2016-17	MICROSCOPES PROCURED	41	-	25	16
2017-18	MICROSCOPES PROCURED	16	8	14	10
2013-14	PERMETHRINE 25 EC	-	14,311	7,600	6,711
2014-15	PERMETHRINE 25 EC	6,711	2,500	1,100	8,111
2015-16	PERMETHRINE 25 EC	8,111	-	4,580	3,531
2016-17	PERMETHRINE 25 EC	3,531	-	700	2,831
2012-13	SPRAY PUMPS	263	76	184	155
2013-14	SPRAY PUMPS	155	407	314	248
2014-15	SPRAY PUMPS	248	335	193	390
2015-16	SPRAY PUMPS	390	276	268	398
2016-17	SPRAY PUMPS	398	377	57	718
2017-18	SPRAY PUMPS	718	200	364	554
2016-17	TEMEPHOS GRANULS 1%	-	12,000	9,000	3,000
2017-18	TEMEPHOS GRANULS 1%	3,000	5,620	6,650	1,970
2013-14	TEMEPHOS GRANULS 2%	-	15,502	7,175	8,327
2014-15	TEMEPHOS GRANULS 2%	8,327	-	3,250	5,077
2015-16	TEMEPHOS GRANULS 2%	5,077	-	4,500	577
2013-14	TEMEPHOS LIQUID 500 E	-	23,871	18,640	5,231
2014-15	TEMEPHOS LIQUID 500 E	5,231	2,500	2,900	4,831
2015-16	TEMEPHOS LIQUID 500 E	4,831	-	4,700	131
2014-15	ULV MACHINE OF 05 LITERS	-	70	8	62
2015-16	ULV MACHINE OF 05 LITERS	62	3	42	23
2012-13	ULV MACHINE OF 10 LITERS	39	-	38	1
2016-17	ULV MACHINE OF 10 LITERS	-	22	2	20
2017-18	ULV MACHINE OF 10 LITERS	20	15	11	24
2017-18	ULV MACHINE OF 50 LITERS	-	10	1	9
2012-13	ULV MACHINE OF 80 LITERS	-	20	-	20
2013-14	ULV MACHINE OF 80 LITERS	20	25	24	21
2014-15	ULV MACHINE OF 80 LITERS	21	-	12	9
2015-16	ULV MACHINE OF 80 LITERS	9	-	5	4
2016-17	ULV MACHINE OF 80 LITERS	4	15	4	15
2017-18	ULV MACHINE OF 80 LITERS	15	-	1	14
2012-13	TAB: ARTEMETHER 80/480MG	42,927	-	24,128	18,799
2016-17	TAB: ARTEMETHER 80/480MG	-	53,300	19,680	33,620
2012-13	TAB: ARTEMETHER 40/240MG	-	70,000		70,000

Year	Machine	Opening Balance	Procured	Issued	Balance
2012-13	TAB: ARTEMETHER 40/240MG	70,000	53,311	30,912	92,399
2013-14	TAB: ARTEMETHER 40/240MG	92,399	93,998	104,654	81,743
2014-15	TAB: ARTEMETHER 40/240MG	81,743	-	57,111	24,632
2016-17	TAB: ARTEMETHER 40/240MG	-	136,500	3,000	133,500
2017-18	TAB: ARTEMETHER 40/240MG	133,500		17,280	116,220
2018-19	TAB: ARTEMETHER 40/240MG	116,220			116,220
2012-13	TAB: ARTESUNATE 100MG	14,404	35,000	23,860	25,544
2013-14	TAB: ARTESUNATE 100MG	25,544	66,709	41,018	51,235
2014-15	TAB: ARTESUNATE 100MG	51,235	102,218	66,812	86,641
2015-16	TAB: ARTESUNATE 100MG	86,641	24,000	29,160	81,481
2016-17	TAB: ARTESUNATE 100MG	81,481		45,980	35,501
2017-18	TAB: ARTESUNATE 100MG	35,501		28,770	6,731
2013-14	ARTESUNATE 50MG	-	26,659	-	26,659
2014-15	ARTESUNATE 50MG	26,659	36,283	24,840	38,102
2015-16	ARTESUNATE 50MG	38,102	12,500	22,316	28,286
2016-17	ARTESUNATE 50MG	28,286		24,080	4,206
2012-13	SYP: ARTEMETER 30ML	7,651	60,000	15,328	52,323
2013-14	SYP: ARTEMETER 30ML	52,323	3,913	32,700	23,536
2012-13	SYP: CHOLOROQUINE/NIVAQUINE 60ML	3,619	25,000	3,580	25,039
2013-14	SYP: CHOLOROQUINE/NIVAQUINE 60ML	25,039	-	21,456	3,583
2014-15	SYP: CHOLOROQUINE/NIVAQUINE 60ML	3,583	-	2,832	751
2015-16	SYP: CHOLOROQUINE/NIVAQUINE 60ML	751	19,058	751	19,058
2016-17	SYP: CHOLOROQUINE/NIVAQUINE 60ML	19,058	-	14,528	4,530
2012-13	TAB: CHLOROQUINE/NIVAQUINE 250mg	-	500,000	371,000	129,000
2013-14	TAB: CHLOROQUINE/NIVAQUINE 250mg	129,000	1,045,254	701,008	473,246
2014-15	TAB: CHLOROQUINE/NIVAQUINE 250mg	473,246	1,863,846	796,914	1,540,178
2015-16	TAB: CHLOROQUINE/NIVAQUINE 250mg	1,540,178	-	716,500	823,678
2016-17	TAB: CHLOROQUINE/NIVAQUINE 250mg	823,678	440,000	719,000	544,678
2017-18	TAB: CHLOROQUINE/NIVAQUINE 250mg	544,678	-	470,339	74,339
2012-13	CLEAN SLIDES	-	27,770	5,480	22,290
2013-14	CLEAN SLIDES	22,290		13,442	8,848
2014-15	CLEAN SLIDES	8,848	13,793	4,265	18,376
2015-16	CLEAN SLIDES	18,376	10,482	9,443	19,415
2016-17	CLEAN SLIDES	19,415	10,000	11,856	17,559
2017-18	CLEAN SLIDES	17,	17,000	13,718	20,841

Year	Machine	Opening Balance	Procured	Issued	Balance
2018-19	CLEAN SLIDES	20559,841		7,598	13,243
2012-13	BLOOD LANCET	9,765	10,000	2,301	17,464
2013-14	BLOOD LANCET	17,464	10,400	4,686	23,178
2014-15	BLOOD LANCET	23,178	11,000	1,601	32,577
2015-16	BLOOD LANCET	32,577	10,669	4,646	38,600
2016-17	BLOOD LANCET	38,600	7,178	4,678	41,100
2017-18	BLOOD LANCET	41,100	7,200	3,888	44,412
2018-19	BLOOD LANCET	44,412	-	3,210	41,202
2016-17	RAPID DIGNOSTIC KIT (RDT)	-	15,000	500	14,500
2017-18	RAPID DIGNOSTIC KIT (RDT)	14,500	30,000	14,608	29,892
2018-19	RAPID DIGNOSTIC KIT (RDT)	29,892		11,750	18,142

### (Annexure 4.2.9)

Item	District		Material	issued by Di	rectorate of N	Ialaria			Ma	terial Receiv	ed by DHO o	fice			Sho	rt/Excess Ree	ceipt of Ma	terial		Net Shor tage	Avg Price Per Unit	Total
		2012-	2013-14	2014- 15	2015- 16	2016- 17	2017- 18	2012- 13	2013- 14	2014- 15	2015- 16	2016- 17	2017- 18	2012- 13	2013- 14	2014- 15	2015	2016- 17	2017- 18			
Alphacypermethrine 5% WP in Kg	T.Allahyar		1,500	-	-	-	300		500				300	-	1,000	-	-	-	-	1,000	610	610,000
Alphacypermethrine 5% WP in Kg	Jacobabad	500	4,000	-	-	-	500	1,000	3,000					(500)	1,000	-	-	-	500	1,000	610	610,000
Alphacypermethrine 5% WP in Kg	Kashmore	820	2,000	-	-	-	100	500	820	200			100	320	1,180	(200)	-	-	-	1,300	610	793,000
Alphacypermethrine 5% WP in Kg	Matiari	-	1,940	-	500	150	410	250	240	625	250	600	460	(250)	1,700	(625)	250	(450)	(50)	575	610	350,750
Alphacypermethrine 5% WP in Kg	N.Feroze	-	3,500	-	-	-	400							-	3,500	-	-	-	400	3,900	610	2,379,000
Alphacypermethrine 5% WP in Kg	Shikarpur	-	3,000	-	-	-	800		300				500	-	2,700	-	-	-	300	3,000	610	1,830,000
Bed Nets	Dadu	400	1,700	1,000	1,400	3,300	4,500	-	500	-	1,000	1,000	1,000	400	1,200	1,000	400	2,300	3,500	8,800	584	5,139,200
Bed Nets	Nawabshah	200	1,100	1,700	1,900	2,950	7,000	200	1,000	1,500	1,500	2,000	6,000	-	100	200	400	950	1,000	2,650	584	1,547,600
Bed Nets	Hyderabad	200	3,209	525	530	1,050	3,950	200	3,209	525	530	1,000	3,950	-	-	-	-	50	-	50	584	29,200
Bed Nets	Jacobabad	2,000	2,700	1,000	900	2,000	4,100		1,000	1,000	900	2,000	2,000	2,000	1,700	-	-	-	2,100	5,800	584	3,387,200
Bed Nets	Kashmore	700	1,000	1,500	500	500	1,500	1,000	200	1,000	1,200	500	1,000	(300)	800	500	(700)	-	500	800	584	467,200
Bed Nets	Matiari	-	800	500	300	500	2,500	200	300	500		500	2,000	(200)	500	-	300	-	500	1,100	584	642,400
Bed Nets	M.Khas	600	-	800	800	200	1,000	1,000	800	200	200	500		(400)	(800)	600	600	(300)	1,000	700	584	408,800
Bed Nets	N.Feroze	-	1,700	1,000	700	2,000	1,310						1,000	-	1,700	1,000	700	2,000	310	5,710	584	3,334,640
Bed Nets	Shikarpur	500	1,000	1,300	500	500	1,500		1,000	300	300	1,000	500	500	-	1,000	200	(500)	1,000	2,200	584	1,284,800
Bed Nets	Tharparkar	-	500	1,000	-	100	-			500	500			-	500	500	(500)	100	-	600	584	350,400
Bed Nets	Thatta	-	1,000	1,000	500	600	3,000		500		500		2,000	-	500	1,000	-	600	1,000	3,100	584	1,810,400
BLOOD LANCET	Dadu	115	250	75	200	144	150							115	250	75	200	144	150	934	508	474,472
BLOOD LANCET	Hyderabad	284	150	68	201	200	300							284	150	68	201	200	300	1,203	508	611,124
BLOOD LANCET	Jacobabad	275	250	150	490	290	400							275	250	150	490	290	400	1,855	508	942,340
BLOOD LANCET	Kashmore	-	150	50	365	100	125							-	150	50	365	100	125	790	508	401,320
BLOOD LANCET	Larkana	18	300	150	616	780	200							18	300	150	616	780	200	2,064	508	1,048,512
BLOOD LANCET	Matiari	25	150	200	100	150	250							25	150	200	100	150	250	875	508	444,500
BLOOD LANCET	M.Khas	-	-	150	-	-	-							-	-	150	-	-	-	150	508	76,200
BLOOD LANCET	N.Feroze	125	250	-	300	200	-							125	250	-	300	200	-	875	508	444,500
BLOOD LANCET	Sanghar	125	300	150	300	390	400							125	300	150	300	390	400	1,665	508	845,820
BLOOD LANCET	Shikarpur	200	175	50	200	200	200							200	175	50	200	200	200	1,025	508	520,700
BLOOD LANCET	Sujawal			-	152	138	20							-	-	-	152	138	20	310	508	157,480
BLOOD LANCET	Tharparkar	104	150	-	150	18	250							104	150	-	150	18	250	672	508	341,376
BLOOD LANCET	Thatta	-	350	-	126	-	50							-	350	-	126	-	50	526	508	267,208
Deltamethrine Liquid 1.5 EC Liter	Dadu	-	300	1,100	800	500	620		1,000		500	300	240	-	(700)	1,100	300	200	380	1,280	574	734,720
Deltamethrine Liquid 1.5 EC Liter	Jacobabad	704	500	800	1,200	864	1,160	70	500	1,000	1,000	864	440	634	-	(200)	200	-	720	1,354	574	777,196
Deltamethrine Liquid 1.5 EC Liter	N.Feroze	-	800	-	400	700	500						600	-	800	-	400	700	(100)	1,800	574	1,033,200
Deltamethrine Liquid 1.5 EC Liter	Shikarpur	-	300	-	400	360	440		200		400	360	240	-	100	-	-		200	300	574	172,200
Fenethion Granuls in Bags	Dadu	50	60	20	-	-	-				40			50	60	20	(40)		-	90	241	21,690
Fenethion Granuls in Bags	M.Khas	-	-	-	50	40	-	8			50			(8)	-	-	-	40	-	32	241	7,712
Fenethion Granuls in Bags	N.Feroze	-	160	-	-	-	-							-	160	-	-		-	160	241	38,560
Fenethion Granuls in Bags	Shikarpur	8	60	-	-	-	-		60					8	-	-	-	-	-	8	241	1,928

Item	District		Material	issued by Di	rectorate of M	Ialaria			Ma	aterial Receiv	ed by DHO of	ffice			Sho	rt/Excess Re	ceipt of Mat	erial		Net Shor tage	Avg Price Per Unit	Total
		2012-	2013-14	2014-	2015-	2016- 17	2017-	2012-	2013-	2014-	2015-	2016-	2017-	2012-	2013-	2014- 15	2015	2016-	2017-			
Microscope	Kashmore		6	-	-	-	10		5		10		1	-	1	-	-10	-	-	1	50396	50,396
Microscope	N.Feroze	-	5	-	5	-	-							-	5	-	5	-	-	10	50396	503,960
Microscope	Shikarpur	3	5	-	-	-	-		5					3	-	-	-	-	-	3	50396	151,188
Microscope	Sujawal			-	2	3	-					3		-	-	-	2	-	-	2	50396	100,792
Microscope	Tharparkar	-	6	-	-	•	-			5				-	6	(5)	-		-	1	50396	50,396
Permethrine Liquid 25 EC	Dadu	-	-	200	600	-	100							-	-	200	600	-	100	900	2197	1,977,300
Permethrine Liquid 25 EC	T.Allahyar		-	300	300	-	120						120	-	-	300	300	-	-	600	2197	1,318,200
Permethrine Liquid 25 EC	Nawabshah	-	-	-	500	500	100	-	-	-	500	-	100	-	-	-	-	500	-	500	2197	1,098,500
Permethrine Liquid 25 EC	Jacobabad	-	-	-	300	-	51							-	-	-	300	-	51	351	2197	771,147
Spray Pumps	Dadu	16	15	10	10	-	20		15		12		20	16	-	10	(2)	-	-	24	20790	498,960
Spray Pumps	N.Feroze	10	-	-	15	-	30							10	-	-	15	-	30	55	20790	1,143,450
Spray Pumps	Sanghar	-	23	15	-	-	10	2	13	5			10	(2)	10	10	-	-	-	18	20790	374,220
Spray Pumps	Tharparkar	10	15	10	-	15	40			15	10	35	20	10	15	(5)	(10)	(20)	20	10	20790	207,900
SYP: ARTMETHER 30ml	Dadu	300	1,440	960	-	-	-		1,440					300	-	960	-		-	1,260	55	69,300
SYP: ARTMETHER 30ml	Jacobabad	2,500	1,440	1,216	-	-	-							2,500	1,440	1,216	-		-	5,156	55	283,580
SYP: ARTMETHER 30ml	Matiari	-	1,440	240	-	-	-	500						(500)	1,440	240	-	-	-	1,180	55	64,900
SYP: ARTMETHER 30ml	M.Khas	-	240	1,040	-	-	-	500						(500)	240	1,040	-	-	-	780	55	42,900
SYP: ARTMETHER 30ml	N.Feroze	300	1,440	-	-	-	-							300	1,440	-	-	-	-	1,740	55	95,700
SYP: ARTMETHER 30ml	Shikarpur	1,500	1,440	-	-	-	-		1,440	144				1,500	-	(144)	-	-	-	1,356	55	74,580
SYP: ARTMETHER 30ml	Tharparkar	-	1,680	-	-	-	-							-	1,680	-	-	-	-	1,680	55	92,400
SYP: ARTMETHER 30ml	Thatta	1,000	1,440	-	-	-	-		1,440					1,000	-	-	-	-	-	1,000	55	55,000
SYP: CHOLOROQUINE/ NIVAQUINE 60ml	Kashmore	-	576	144	-	-	-					500		-	576	144	-	(500)	-	220	28	6,160
SYP: CHOLOROQUINE/ NIVAQUINE 60ml	N.Feroze	-	864	-	216	576	-							-	864	-	216	576	-	1,656	28	46,368
TAB: ARTEMETHER 40/240mg	Dadu	-	1,656	-	2,400	960	-		1,472					-	184	-	2,400	960	-	3,544	92	326,048
TAB: ARTEMETHER 40/240mg	T.Allahyar		736	576	-	-	-							-	736	576	-	-	-	1,312	92	120,704
TAB: ARTEMETHER 40/240mg	Jacobabad	-	552	5,504	4,800	1,920	-							-	552	5,504	4,800	1,920	-	12,776	92	1,175,392
TAB: ARTEMETHER 40/240mg	Matiari	-	736	2,016	960	960	-		736	2,016	177	960		-	-	-	783	-	-	783	92	72,036
TAB: ARTEMETHER 40/240mg	M.Khas	-	-	1,472	-	-	-		1,280					-	(1,280	1,472	-	-	-	192	92	17,664
TAB: ARTEMETHER 40/240mg	N.Feroze	-	736	-	960	960	-							-	736	-	960	960	-	2,656	92	244,352
TAB: ARTEMETHER 40/240mg	Sujawal			-	-	960	-							-	-	-	-	960	-	960	92	88,320
TAB: ARTEMETHER 40/240mg	Thatta	-	1,656	1,920	-	-	-		1,565	1,920				-	91	-	-	-	-	91	92	8,372
TAB: ARTEMETHER 80/480MG	Dadu	1,500	-	-	-	2,400	-						500	1,500	-	-	-	2,400	(500)	3,400	209	710,600

Item	District		Material	issued by Di	rectorate of N	Ialaria			Ma	iterial Receiv	ed by DHO of	ffice			Sho	rt/Excess Ree	ceipt of Mat	terial		Net Shor tage	Avg Price Per Unit	Total
		2012- 13	2013-14	2014- 15	2015- 16	2016- 17	2017- 18	2012- 13	2013- 14	2014- 15	2015- 16	2016- 17	2017- 18	2012- 13	2013- 14	2014- 15	2015 -16	2016- 17	2017- 18			
TAB: ARTEMETHER 80/480MG	Jacobabad	3,250	1,750	-	-	2,208	2,400	3,250	1,750			2,400		-	-	-	-	(192)	2,400	2,208	209	461,472
TAB: ARTEMETHER 80/480MG	N.Feroze	-	2,250	-	-	-	-							-	2,250	-	-	-	-	2,250	209	470,250
TAB: ARTEMETHER 80/480MG	Shikarpur	1,000	750	-	-	1,920	500		750			1,710	500	1,000	-	-	-	210	-	1,210	209	252,890
TAB: ARTEMETHER 80/480MG	Sujawal			-	-	-	900							-	-	-	-	-	900	900	209	188,100
TAB: ARTESUNATE 100mg	Dadu	1,200	1,320	1,980	1,380	1,800	-		880		1,200	500		1,200	440	1,980	180	1,300	-	5,100	93	474,300
TAB: ARTESUNATE 100mg	Hyderabad	1,440	1,320	1,580	240	1,880	1,150	1,440	1,320	1,500	240	1,880	1,150	-	-	80	-	-	-	80	93	7,440
TAB: ARTESUNATE 100mg	Kashmore	1,200	1,320	1,880	1,200	-	3,000	1,200	1,320	880	1,200		3,000	-	-	1,000	-	-	-	1,000	93	93,000
TAB: ARTESUNATE 100mg	Matiari	-	1,760	1,200	1,200	1,080	1,980	2,600			1,080		1,980	(2,600 )	1,760	1,200	120	1,080	-	1,560	93	145,080
TAB: ARTESUNATE 100mg	M.Khas	-	-	1,472	240	-	-		880	240				-	(880)	1,232	240	-	-	592	93	55,056
TAB: ARTESUNATE 100mg	N.Feroze	-	3,400	500	-	-	-							-	3,400	500	-	-	-	3,900	93	362,700
TAB: ARTESUNATE 100mg	Shikarpur	1,250	2,200	1,100	1,920	-	-		2,200	1,100	1,920			1,250	-	-	-	-	-	1,250	93	116,250
TAB: ARTESUNATE 100mg	Thatta	-	1,800	1,700	960	500	500	480	1,320	1,200	960	500	500	(480)	480	500	-	-	-	500	93	46,500
TAB: ARTESUNATE 50mg	Dadu	-	-	1,980	940	1,760	-							-	-	1,980	940	1,760	-	4,680	52	243,360
TAB: ARTESUNATE 50mg	T.Allahyar		-	1,100	-	-	-							-	-	1,100	-	-	-	1,100	52	57,200
TAB: ARTESUNATE 50mg	Nawabshah	-	-	2,420	2,900	2,700	1,136	-	-	2,200	2,700	2,700	1,540	-	-	220	200	-	(404)	16	52	832
TAB: ARTESUNATE 50mg	Jacobabad	-	-	-	396	-	-							-	-	-	396	-	-	396	52	20,592
TAB: ARTESUNATE 50mg	Kashmore	-	-	880	1,100	-	-		800	1,100				-	(800)	(220)	1,100	-	-	80	52	4,160
TAB: ARTESUNATE 50mg	Larkana	-	-	5,000	1,800	2,880	-							-	-	5,000	1,800	2,880	-	9,680	52	503,360
TAB: ARTESUNATE 50mg	M.Khas	-	-	-	300	-	-							-	-	-	300	-	-	300	52	15,600
TAB: ARTESUNATE 50mg	Tharparkar	-	-	1,100	-	-	-							-	-	1,100	-	-	-	1,100	52	57,200
TAB: ARTESUNATE 50mg	Thatta	-	-	1,100	1,100	500	-							-	-	1,100	1,100	500	-	2,700	52	140,400
TAB: CHLOROQUINE/N IVAQUINE 250mg	Dadu	20,000	30,000	52,500	42,000	44,000	-	23,000	30,000		44,000	22,000	22,000	(3,000)	-	52,50 0	(2,00 0)	22,000	(22,00 0)	47,500	1	47,500
TAB: CHLOROQUINE/N IVAQUINE 250mg	Jacobabad	33,000	40,000	63,414	44,000	44,000	30,000	33,000	32,800	30,000	44,000	44,000	44,000	-	7,200	33,41 4	-	-	(14,00 0)	26,614	1	26,614
TAB: CHLOROQUINE/N IVAQUINE 250mg	Kashmore	15,000	22,000	52,500	13,000	-	10,000	15,000	32,000	10,000	10,000	22,000	20,000	-	(10,00 0)	42,50 0	3,000	(22,00 0)	(10,00 0)	3,500	1	3,500

Item	District		Material	issued by Di	rectorate of M	Ialaria			М	aterial Receiv	ed by DHO o	fice			Sho	ort/Excess Re	ceipt of Ma	terial		Net Shor tage	Avg Price Per Unit	Total
		2012- 13	2013-14	2014- 15	2015- 16	2016- 17	2017- 18	2012- 13	2013- 14	2014- 15	2015-	2016- 17	2017- 18	2012- 13	2013- 14	2014- 15	2015	2016- 17	2017- 18		Olin	
TAB: CHLOROQUINE/N IVAQUINE 250mg	Larkana	28,000	50,000	74,000	132,00 0	155,00 0	88,000	28,000	50,000	74,000	11,000	177,00 0	88,000	-	-	-	121,0 00	(22,00 0)	-	99,000	1	99,000
TAB: CHLOROQUINE/N IVAQUINE 250mg	N.Feroze	-	55,000	32,500	44,000	20,000	-							-	55,000	32,50 0	44,00 0	20,000	-	151,50 0	1	151,500
TAB: CHLOROQUINE/N IVAQUINE 250mg	Sanghar	15,000	41,000	20,000	22,000	22,000	52,000	24,000	40,000	10,000	22,000	22,000	12,000	(9,000 )	1,000	10,00 0	-	-	40,000	42,000	1	42,000
TAB: CHLOROQUINE/N IVAQUINE 250mg	Shikarpur	14,000	40,000	20,000	20,000	22,000	22,000		40,000	20,000	2,000	22,000	20,000	14,00 0	-	-	18,00 0	-	2,000	34,000	1	34,000
TAB: CHLOROQUINE/N IVAQUINE 250mg	Sujawal			12,500	-	27,000	15,000				22,000	5,000	15,000	-	-	12,50 0	(22,0 00)	22,000	-	12,500	1	12,500
TAB: CHLOROQUINE/N IVAQUINE 250mg	Tharparkar	23,000	22,000	10,000	-	11,000	1,000	23,000	22,000		10,000	1,000		-	-	10,00 0	(10,0 00)	10,000	1,000	11,000	1	11,000
TAB: CHLOROQUINE/N IVAQUINE 250mg	Thatta	-	40,000	32,500	22,000	30,000	10,000	5,000	40,000	10,000	22,000	20,000	10,000	(5,000 )	-	22,50 0	-	10,000	-	27,500	1	27,500
Temephos Granuls 1% in KG	Nawabshah	-	-	-	-	1,000	700	-						-	-	-		1,000	700	1,700	452.5	769,250
Temephos Granuls 1% in KG	Jacobabad	-	-	-	-	1,200	300						200	-	-	-	-	1,200	100	1,300	452.5	588,250
Temephos Granuls 1% in KG	Matiari	-	-	-	-	-	250							-	-	-	-	-	250	250	452.5	113,125
Temephos Granuls 1% in KG	N.Feroze	-	-	-	-	750	200							-	-	-	-	750	200	950	452.5	429,875
Temephos Granuls 1% in KG	Thatta	-	-	-	-	500	300					500	200	-	-	-	-	-	100	100	452.5	45,250
Temephos Granuls 2% in KG	T.Allahyar		250	500	-	-	-		50	500				-	200	-		-	-	200	90	18,000
Temephos Granuls 2% in KG	Jacobabad	-	375	500	500	-	-		1,125					-	(750)	500	500	-	-	250	90	22,500
Temephos Granuls 2% in KG	N.Feroze	-	375	-	-	-	-							-	375	-	-	-	-	375	90	33,750
Temephos Granuls 2% in KG	Sujawal			-	-	577	-							-	-	-	-	577	-	577	90	51,930
Temephos Granuls 2% in KG	Tharparkar	-	375	-	-	-	-	200						(200)	375	-	-	-	-	175	90	15,750
Temephos Liquid 500 E in Liter	Dadu	-	1,000	200	200	-	-	1,000			200			(1,000	1,000	200	-	-	-	200	3690	738,000
Temephos Liquid 500 E in Liter	Nawabshah	-	2,000	-	-		-	-						-	2,000	-		-		2,000	3690	7,380,000
Temephos Liquid 500 E in Liter	Thatta	-	1,000	-	-	131	-	1,000				100		(1,000	1,000	-	-	31	-	31	3690	114,390
ULV Machine 05 Liter	N.Feroze	-	-	-	4	-	-							-	-	-	4	-		4	211966	847,864
ULV Machine 05 Liter	Sanghar	-	-	1	3	-	-			1	2			-	-	-	1	-	-	1	211966	211,966
ULV Machine 05 Liter	Thatta	-	-	-	2	1	-					1		-	-	-	2	-	-	2	211966	423,932
ULV Machine 10 Liter	Dadu	1	-	-	-	-	1				-			1	-	-		-	1	2	179529	359,058
ULV Machine 10 Liter	Kashmore	4	-	-	-	-	-	2						2	-	-				2	179529	359,058
ULV Machine 10 Liter	N.Feroze	1	-	-	-	-	1							1	-	-			1	2	179529	359,058
ULV Machine 10	Sujawal			-	-	-	1				ł			-	-				1	1	100854	1,008,547
Liter ULV Machine 80	N.Feroze	-	2	-	-	-	-							-	2	-				2	100854	2,017,094
Liter ULV Machine 80	Shikarpur	-	-	1	-	-	-							-	-	1	-	-		1	7 100854	1,008,547
Liter				-																	7	67,264,183

## (Annexure 4.3.2)

		or should hancet	the require	ment-K51./41 mm		1
Year	District	No of Slides Collected	No of Blood Lancet issued	Excess Issuance	Rate	Amount
	Hyderabad	48,609	56,800	(8,191)		
2012-13	Tando Muhammad Khan	19,572	25,000	(5,428)	1.565	(21,313)
	Jamshoro	14,109	30,000	(15,891)		
	Kamber	17,515	30,000	(12,485)		
	Larkana	55,541	60,000	(4,459)		
2013-14	Matiari	23,138	30,000	(6,862)	2.3	(132,024)
	Sukkur	19,818	30,000	(10,182)		
	TandoAllahyar	19,136	20,000	(864)		
	Tando Muhammad Khan	13,341	20,000	(6,659)		
2014-15	Kamber	18,260	25,000	(6,740)	3.75	(81,622)
	Matiari	20,196	40,000	(19,804)		
	Ghotki	33,644	40,000	(6,356)		
	Hyderabad	34,629	40,200	(5,571)		
	Jacobabad	35,050	98,000	(62,950)		
	Jamshoro	10,601	20,000	(9,399)		(629,153)
2015-16	Kamber	20,904	50,000	(29,096)	2.86	(029,155)
2013-10	Kashmore	25,584	73,000	(47,416)	2.00	
	Larkana	84,284	123,200	(38,916)		
	Matiari	19,501	20,000	(499)		
	NaushahroFiroze	52,140	60,000	(7,860)		
	Sujawal	18,748	30,400	(11,652)		
2016-17	Ghotki	44,445	50,000	(5,555)	2.89	(417,584)
2010-17	Kamber	26,152	66,000	(39,848)	2.09	(+17,304)

Excess issuance of blood lancet than the requirement-Rs1.741 million

Year	District	No of Slides Collected	No of Blood Lancet issued	Excess Issuance	Rate	Amount
	Larkana	95,602	156,000	(60,398)		
	Matiari	20,388	30,000	(9,612)		
	Nawabshah	68,843	80,000	(11,157)		
	Sanghar	66,233	78,000	(11,767)		
	Sukkur	33,844	40,000	(6,156)		
	Ghotki	44,293	130,000	(85,707)		
	Hyderabad	59,595	60,000	(405)		
	Jacobabad	75,999	80,000	(4,001)		
2017-18	Kamber	19,669	25,000	(5,331)	2.89	(459,697)
2017 10	Kashmore	15,565	25,000	(9,435)	2.07	(15),0)7)
	Matiari	15,640	50,000	(34,360)		
	Sanghar	60,174	80,000	(19,826)		
		1,250,762	1,871,600	0620,838		<u>(1,741,393)</u>

## (Annexure 4.3.3)

## Discrimination and favoritism in Distribution of 40509 LLINs-Rs 25.601 million

6 N	District		1	Fotal issue	d Bed Net	s			Total prov	vision of B	ed Nets a	s per PC-l	[		Ex	cess Issuan	ce of Bed N	ets	
Sr.N	District	2012	2013	2014	2015	2016	2017	2012	2013	2014	2015	2016	2017	2012	2013	2014	2015	2016	2017
1	Larkana	2,800	4,700	3,500	1,200	2,300	8,500	1,000	1,000	1,000	1,000	1,500	4,200	(1,800)	(3,700)	(2,500)	(200)	(800)	(4,300)
2	Nawabshah	200	1,100	1,700	1,900	2,950	7,000	1,000	1,000	1,000	1,000	1,500	4,200		(100)	(700)	(900)	(1,450)	(2,800)
3	Badin	400	1,700	1,000	1,400	3,300	4,500	1,000	1,000	1,000	1,000	1,500	4,200		(700)		(400)	(1,800)	(300)
4	Jacobabad	2,000	2,700	1,000	900	2,000	4,100	1,000	1,000	1,000	1,000	1,500	4,200	(1,000)	(1,700)			(500)	
5	Ghotki	700	1,700	1,500	1,000	1,000	4,000	1,000	1,000	1,000	1,000	1,500	4,200		(700)	(500)			
6	Khairpur	0	500	1,100	100	4,700	3,500	1,000	1,000	1,000	1,000	1,500	4,200			(100)		(3,200)	
7	Hyderabad	200	3,209	525	530	1,050	3,950	1,000	1,000	1,000	1,000	1,500	4,200		(2,209)				
8	Dadu	0	500	1,000	1,050	1,000	2,050	1,000	1,000	1,000	1,000	1,500	4,200				(50)		
9	Kamber	1,000	1,200	1,700	500	1,500	4,000	1,000	1,000	1,000	1,000	1,500	4,200		(200)	(700)			
10	N-Feroz	0	1,700	1,000	700	2,000	1,310	1,000	1,000	1,000	1,000	1,500	4,200		(700)			(500)	
11	Umerkot	200	1,000	800	1,600	1,200	3,400	1,000	1,000	1,000	1,000	1,500	4,200				(600)		
12	Kashmore	700	1,000	1,500	500	500	1,500	1,000	1,000	1,000	1,000	1,500	4,200			(500)			
13	Shikarpur	500	1,000	1,300	500	500	1,500	1,000	1,000	1,000	1,000	1,500	4,200			(300)			
14	Karachi	510	2,500	50	200	1,300	0	1,000	1,000	1,000	1,000	1,500	4,200		(1,500)				
15	Sukkur	1,300	1,000	500	1,000	700	500	1,000	1,000	1,000	1,000	1,500	4,200	(300)					
16	Jamshoro	0	800	1,400	400	60	1,350	1,000	1,000	1,000	1,000	1,500	4,200			(400)			
17	DOMC	0	0	0	2,100	300	0							0	0	0	(2,100)	(300)	0
				Year v	vise total E	Excess Qty	of issued b	ed nets						-3100	-11509	-5700	-4250	-8550	-7400
				Grand To	otal Qty of	Excess Iss	ued Qty of	Bed Nets								-4050 25.601			

#### (Annexure 4.3.4) Discrimination and favoritism in multiple prevention activities/ Discriminatory selection of localities for IRS activities

					acı	ivities							
District				IRS						A	PI		
District	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	Total	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Larkana		30,468		40,603	30,453	11,821	113,345	3.50	1.62	1.35	2.18	2.59	2.23
Shaheed Benazirabad (formerly Nawabshah)		29,814		21,313		11,409	62,536	4.21	2.15	1.37	1.93	1.67	1.71
Khairpur		25,575		18,563		9,990	54,128	8.95	7.17	4.88	4.46	5.15	4.35
Umerkot		30,406		15,530	4,937	3,130	54,003	5.40	2.15	1.85	1.26	1.38	3.67
Karachi		18,502		8,981	13,159	8,044	48,686	0.17	0.12	0.11	0.11	0.15	0.20
Dadu		23,447		9,566	9,400	4,723	47,136	1.54	1.08	1.31	0.84	0.86	0.93
Thatta		24,831		10,415		8,460	43,706	6.42	5.30	3.08	6.20	8.95	21.24
Ghotki		24,825		15,072		3,041	42,938	1.95	1.37	1.31	1.35	1.37	0.97
Badin		24,242		9,153		7,258	40,653	4.02	2.92	1.60	1.08	1.53	2.28
Sanghar		23,298		13,033		2,998	39,329	1.76	0.99	0.60	0.43	0.54	0.54
Shikarpur		19,548		9,310		5,180	34,038	3.37	1.52	1.20	1.39	1.18	1.12
Mirpur Khas		19,065		10,016		2,962	32,043	3.41	4.43	2.16	2.70	6.42	8.83
Hyderabad		17,487		5,022	4,358	2,898	29,765	0.86	0.22	0.11	0.12	0.22	0.54
Tharparkar		13,608		4,545	5,018	5,936	29,107	18.24	5.63	2.08	1.07	3.76	5.33
Sukkur		11,908		11,373		5,349	28,630	2.94	1.00	0.74	0.86	0.80	0.79
TandoAllahyar		11,732		5,668		8,100	25,500	2.00	2.47	1.39	0.77	2.63	4.51
Jacobabad		20,006		4,353		Nil	24,359	1.03	2.64	2.21	1.85	2.76	3.66
NaushahroFiroze		14,121		6,669		2,660	23,450	3.94	2.42	2.19	1.93	2.19	1.85
Kashmore (formerly Kandhkot)		17,072		4,278		Nil	21,350	2.49	0.76	0.61	1.60	1.52	1.36
Matiari		11,422		5,970		2,898	20,290	2.99	1.11	0.91	1.48	1.78	1.25
Tando Muhammad Khan		11,823		4,983		2,659	19,465	3.70	1.29	0.82	0.46	0.44	4.14
Qambar Shahdadkot		8,777		8,160		Nil	16,937	0.93	0.98	1.20	1.16	1.62	1.05
Sujawal		-		5,022	5,022	3,214	13,258				1.23	4.48	9.42
Jamshoro		Not Reported		4,863		Nil	4,863	1.20	0.72	1.01	0.67	0.85	0.82
Total		431,977	-	252,461	72,347	112,730	869,515						

Year	Item	Issued quantity	Amount (@ 632 per bed net) approx.
2012-13		11,510	7,274,320
2013-14		30,109	19,028,888
2014-15	immerses at a d had mate / L L INIa	25,075	15,847,400
2015-16	impregnated bed nets / LLINs	17,680	11,173,760
2016-17		30,160	19,061,120
2017-18		68,460	43,266,720
	Total	182,994	115,652,208

(Annexure 4.4.1) Non-availability of LLINs distribution record-Rs 115.652 million

## (Annexure 4.4.2)

District		Dist	ibutio	n of L	LINs		Pro	ovision	of LL	INs As	s per P	C-I		Non-	issuar	ce of L	LINs	
District	2012	2013	2014	2015	2016	2017	2012	2013	2014	2015	2016	2017	2012	2013	2014	2015	2016	2017
Nawabshah	200	1,100	1,700	1,900	2,950	7,000	1,000	1,000	1,000	1,000	1,500	4,200	800	(100)	(700)	(900)	(1,450)	(2,800)
Badin	400	1,700	1,000	1,400	3,300	4,500	1,000	1,000	1,000	1,000	1,500	4,200	600	(700)	0	(400)	(1,800)	(300)
Jacobabad	2,000	2,700	1,000	900	2,000	4,100	1,000	1,000	1,000	1,000	1,500	4,200	(1,000)	(1,700 )	0	100	(500)	100
Ghotki	700	1,700	1,500	1,000	1,000	4,000	1,000	1,000	1,000	1,000	1,500	4,200	300	(700)	(500)	0	500	200
Khairpur	0	500	1,100	100	4,700	3,500	1,000	1,000	1,000	1,000	1,500	4,200	1,000	500	(100)	900	(3,200)	700
Hyderabad	200	3,209	525	530	1,050	3,950	1,000	1,000	1,000	1,000	1,500	4,200	800	(2,209)	475	470	450	250
Dadu	0	500	1,000	1,050	1,000	2,050	1,000	1,000	1,000	1,000	1,500	4,200	1,000	500	0	(50)	500	2,150
Kamber	1,000	1,200	1,700	500	1,500	4,000	1,000	1,000	1,000	1,000	1,500	4,200	0	(200)	(700)	500	0	200
N-Feroz	0	1,700	1,000	700	2,000	1,310	1,000	1,000	1,000	1,000	1,500	4,200	1,000	(700)	0	300	(500)	2,890
Umerkot	200	1,000	800	1,600	1,200	3,400	1,000	1,000	1,000	1,000	1,500	4,200	800	0	200	(600)	300	800
Mirpurkhas	600	0	800	800	200	1,000	1,000	1,000	1,000	1,000	1,500	4,200	400	1,000	200	200	1,300	3,200
Thatta	0	1,000	1,000	500	600	3,000	1,000	1,000	1,000	1,000	1,500	4,200	1,000	0	0	500	900	1,200
Kashmore	700	1,000	1,500	500	500	1,500	1,000	1,000	1,000	1,000	1,500	4,200	300	0	(500)	500	1,000	2,700
Sanghar	200	500	1,000	500	1,000	1,300	1,000	1,000	1,000	1,000	1,500	4,200	800	500	0	500	500	2,900
Shikarpur	500	1,000	1,300	500	500	1,500	1,000	1,000	1,000	1,000	1,500	4,200	500	0	(300)	500	1,000	2,700
Karachi	510	2,500	50	200	1,300	0	1,000	1,000	1,000	1,000	1,500	4,200	490	(1,500)	950	800	200	4,200
T.A. Yar	0	500	800	0	600	4,000	1,000	1,000	1,000	1,000	1,500	4,200	1,000	500	200	1,000	900	200
Sukkur	1,300	1,000	500	1,000	700	500	1,000	1,000	1,000	1,000	1,500	4,200	(300)	0	500	0	800	3,700
Matiari	0	800	500	300	500	2,500	1,000	1,000	1,000	1,000	1,500	4,200	1,000	200	500	700	1,000	1,700
Jamshoro	0	800	1,400	400	60	1,350	1,000	1,000	1,000	1,000	1,500	4,200	1,000	200	(400)	600	1,440	2,850
T.M.Khan	200	500	400	0	300	2,500	1,000	1,000	1,000	1,000	1,500	4,200	800	500	600	1,000	1,200	1,700
Sujawal	0	0	0	0	500	3,000	1,000	1,000	1,000	1,000	1,500	4,200	1,000	1,000	1,000	1,000	1,000	1,200
Tharparkar	0	500	1,000	0	100	0	1,000	1,000	1,000	1,000	1,500	4,200	1,000	500	0	1,000	1,400	4,200
	10,72	27,42	23,58	16,39	29,57	61,97	25,01	25,01	25,01	25,01	36,51	98,61	15,59	5 400	4,62	10,57	14,39	39,74
	2	2	9	5	6	7	2	3	4	5	6	7	0	<u>5,400</u>	5	0	0	0
			169,	,681					235	,187						5 x 632 millio		

Non-issuance of LLINs to the concerned districts-Rs57.079 million

# (Annexure 4.5.4)

## Inefficient working of Early diagnostic center

District	Detail	2012	2013	2014	2015	2016	2017
Iamshoro	Positive Slides Received	No	No	No	No	No	No
Jamshoro	Total Positive Cases Reported	949	570	805	514	651	630
Qambar Shahdadkot	Positive Slides Received	No	No	No	No	No	338
Qambai Shahuaukot	Total Positive Cases Reported	1,054	1,117	1,363	1,491	2,090	1,351
Tando Muhammad Khan	Positive Slides Received	No	No	No	No	No	688
Tando Munaminad Khan	Total Positive Cases Reported	2,308	803	511	229	219	2,068
Shaheed	Positive Slides Received	No	No	No	115	145	126
Benazirabad (formerly Nawabshah)	Total Positive Cases Reported	5,514	2,814	1,799	2,413	2,094	2,137
Jacobabad	Positive Slides Received	No	545	376	623	112	No
Jacobabau	Total Positive Cases Reported	1,028	2,650	2,215	1,686	2,511	3,327
Matiari	Positive Slides Received	No	50	No	258	252	89
Matian	Total Positive Cases Reported	1,957	727	596	894	1,077	756
Dadin	Positive Slides Received	No	No	275	711	1,042	885
Badin	Total Positive Cases Reported	5,452	3,962	2,175	1,537	2,183	3,264
Kashmore (formerly	Positive Slides Received	59	53	No	68	86	30
Kandhkot)	Total Positive Cases Reported	2,136	649	524	1,338	1,277	1,142
Vh a marrie	Positive Slides Received	No	2,532	3,952	1,044	1,800	2,305
Khairpur	Total Positive Cases Reported	18,996	15,229	10,353	9,150	10,552	8,919

District	2012	2013	2014	2015	2016	2017
Jamshoro	No	No	No	No	No	No
Tando Muhammad Khan	No	No	No	No	No	Yes
Sujawal	No	No	No	No	No	Yes
Qambar Shahdadkot	No	No	No	No	Yes	Yes
Badin	No	No	No	Yes	Yes	Yes
Shaheed Benazirabad (formerly Nawabshah)	No	No	No	Yes	Yes	Yes
Matiari	No	92	No	195	341	110
Jacobabad	No	Yes	Yes	Yes	Yes	No
Kashmore (formerly Kandhkot)	Yes	No	No	Yes	Yes	Yes
Khairpur	No	Yes	Yes	Yes	Yes	Yes
Ghotki	Yes	No	Yes	Yes	Yes	Yes

Negative Slides not received at all