

# Guidelines for SWACHH BHARAT MISSION (GRAMIN)



MINISTRY OF DRINKING WATER AND SANITATION GOVERNMENT OF INDIA

Website: www.mdws.nic.in



एक कदम स्वच्छता की ओर

## **Guidelines**

## FOR SWACHH BHARAT MISSION (GRAMIN)

(Effective from 2<sup>nd</sup> October, 2014)



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Abbreviations			
AEO Assistant Executive Officer			
AIP	Annual Implementation Plan		
AIR	All India Radio		
ANM	Auxiliary Nursing Midwife		
APL	Above Poverty Line		
ASHA	Accredited Social Health Activist		
BCC	Behavioral Change Communication		
BDO	Block Development Officer		
BPL	Below Poverty Line		
BPMU	Block Project Management Unit		
BSO	Block Sanitation Officer		
CBO	Community-Based Organisation		
CCDU	Communication and Capacity Development Unit		
CEO	Chief Executive Officer		
CLTS	Community-Led Total Sanitation		
CRSP	Central Rural Sanitation Programme		
CSC	Community Sanitary Complex		
CSR	Corporate Social Responsibility		
DAVP	Directorate of Advertising & Visual Publicity		
DD	Doordarshan		
DRDA	District Rural Development Agency		
DSBM	District Swachh Bharat Mission		
DSBMMC	District Swachhh Bharat Mission Monitoring Committee		
DWSC	District Water and Sanitation Committee		
DWSM	District Water and Sanitation Mission		
GOI	Government of India		
GP	Gram Panchayat		
GSS	Gram Swachhata Sabha		
HRD	Human Resource Development		
IAY	Indira Awas Yojana		
ICDS	Integrated Child Development Scheme		
IEC	Information, Education and Communication		
IHHL	Individual Household Latrine		
IPC	Interpersonal Communication		
JMP	Joint Monitoring Program		
KRC	Key Resource Centre		
M&E	Monitoring & Evaluation		
MDWS	Ministry of Drinking Water and Sanitation		
MHM	Menstrual Hygiene Management		
MIS	Management Information System		
MLALADS	Member of Legislative Assembly Local Area Development Scheme		
MLC	Member of Legislative Council		
MNREGS	Mahatma Gandhi National Rural Employment Guarantee Scheme		

MPLADS	Member of Parliament Local Area Development Scheme
NBA	Nirmal Bharat Abhiyan
NFDC	National Film Development Corporation
NGO	Non-Governmental Organisation
NGP	Nirmal Gram Puraskar
NIC	National Informatics Centre
NRC	National Resource Centre
NRDWP	National Rural Drinking Water Program
NRHM	National Rural Health Mission
NRLM	National Rural Livelihood Mission
NSSC	National Scheme Sanctioning Committee
NSSO	National Sample Survey Organisation
ODF	Open Defecation Free
PAC	Plan Approval Committee
РС	Production Centre
РНС	Public Health Centre
PHED	Public Health Engineering Department
PPP	Public Private Partnership
PR	Panchayati Raj
PRA	Participatory Rural Appraisal
PRI	Panchayati Raj Institution
PTA	Parent Teachers Association
RALU	Rapid Action Learning Unit
RDAC	Research and Development Approval Committee
RSM	Rural Sanitary Mart
SBCC	Social & Behavior Change Communication
SBM (G)	Swachh Bharat Mission (Gramin)
SHG	Self Help Group
SLSSC	State Level Scheme Sanctioning Committee
SLTS	School Led Total Sanitation
SLWM	Solid and Liquid Waste Management
SO	Support Organisation
SPMU	State Project Monitoring Unit
SSA	Sarva Shiksha Abhiyan
SSBM	State Swachh Bharat Mission
SWSM	State Water and Sanitation Mission
TSC	Total Sanitation Campaign
VGF	Viability Gap Funding
VHSNC	Village Health, Sanitation & Nutrition Committee
VO	Village Organisation
VWSC	Village Water and Sanitation Committee
WASH	Water, Sanitation and Hygiene
WSSO	Water and Sanitation Support Organisation



#### 1. BACKGROUND

The rural sanitation programme in India was 1.1 introduced in the year 1954 as a part of the First Five Year Plan of the Government of India. The 1981 Census revealed rural sanitation coverage was only 1%. The International Decade for Drinking water and Sanitation during 1981-90, began giving emphasis on rural sanitation. Government of India introduced the Central Rural Sanitation Programme (CRSP) in 1986 primarily with the objective of improving the guality of life of the rural people and also to provide privacy and dignity to women. From 1999, a "demand driven" approach under the "Total Sanitation Campaign" (TSC) emphasized more on Information, Education and Communication (IEC), Human Resource Development (HRD), Capacity Development activities to increase awareness among the rural people and generation of demand for sanitary facilities. This enhanced people's capacity to choose appropriate options through alternate delivery mechanisms as per their economic condition. Financial incentives were provided to Below Poverty Line (BPL) households for construction and usage of individual household latrines (IHHL) in recognition of their achievements.

1.2 To generate awareness on sanitation, the Nirmal Gram Puraskars (NGP) were awarded to recognise the achievements and efforts made at the GP level in ensuring full sanitation coverage and achieving other indicators of open defecation free GPs. While the award gained popularity in bringing about a desire in the community for attaining Nirmal Status, there have been issues of sustainability in some awardee GPs.

1.3 The "Nirmal Bharat Abhiyan" (NBA) the successor programme of the TSC, was launched from 1.4.2012. The objective was to accelerate the sanitation coverage in the rural areas so as to comprehensively

cover the rural community through renewed strategies and saturation approach. Nirmal Bharat Abhiyan (NBA) envisaged covering the entire community for saturated outcomes with a view to create Nirmal Gram Panchayats. Under NBA, the Incentives for IHHLs were enhanced and further focussed support was obtained from MNREGA. However there were implementation difficulties in convergence of NBA with MNREGA as funding from different sources created delays.

To accelerate the efforts to achieve universal 1.4 sanitation coverage and to put focus on sanitation, the Prime Minister of India launched the Swachh Bharat Mission on 2nd October, 2014. The Mission Coordinator shall be Secretary, Ministry of Drinking Water and Sanitation (MDWS) with two Sub-Missions, the Swachh Bharat Mission (Gramin) and the Swachh Bharat Mission (Urban), which aims to achieve Swachh Bharat by 2019, as a fitting tribute to the 150th Birth Anniversary of Mahatma Gandhi, which in rural areas shall mean improving the levels of cleanliness in rural areas through Solid and Liquid Waste Management activities and making Gram Panchayats Open Defecation Free (ODF), clean and sanitised. The Mission shall strive for this by removing the bottlenecks that were hindering the progress, including partial funding for Individual Household Latrines from MNREGS, and focusing on critical issues affecting outcomes.

1.5 The Guidelines of SBM (G) and the provisions hereunder are applicable with effect from 02.10.2014.

## 2. A. GOAL: To achieve "Swachh Bharat" by 2019.

#### 2. B. OBJECTIVES

2.1 The main objectives of the SBM(G) are as under:

- Bring about an improvement in the general quality of life in the rural areas, by promoting cleanliness, hygiene and eliminating open defecation.
- Accelerate sanitation coverage in rural areas to achieve the vision of Swachh Bharat by 2nd October 2019.
- c) Motivate Communities and Panchayati Raj Institutions to adopt sustainable sanitation practices and facilities through awareness creation and health education.
- d) Encourage cost effective and appropriate technologies for ecologically safe and sustainable sanitation.
- e) Develop wherever required, Community managed sanitation systems focusing on scientific Solid & Liquid Waste Management systems for overall cleanliness in the rural areas.

#### 3. STRATEGY

3.1 The focus of the Strategy is to move towards a 'Swachh Bharat' by providing flexibility to State Governments, as Sanitation is a state subject, to decide on their implementation policy and mechanisms, taking into account State specific requirements. This is focused to enable States to develop an Implementation Framework that can utilise the provisions under the Mission effectively and maximize the impact of the interventions. The Government of India's role would be to complement the efforts of the State Governments through the focused programme being given the status of a Mission, recognizing its dire need for the country. It is suggested that Implementation Framework of each State be prepared with a road map of activities covering the 3 important phases necessary for the Programme:

- (i) Planning Phase
- (ii) Implementation Phase
- (iii) Sustainability Phase

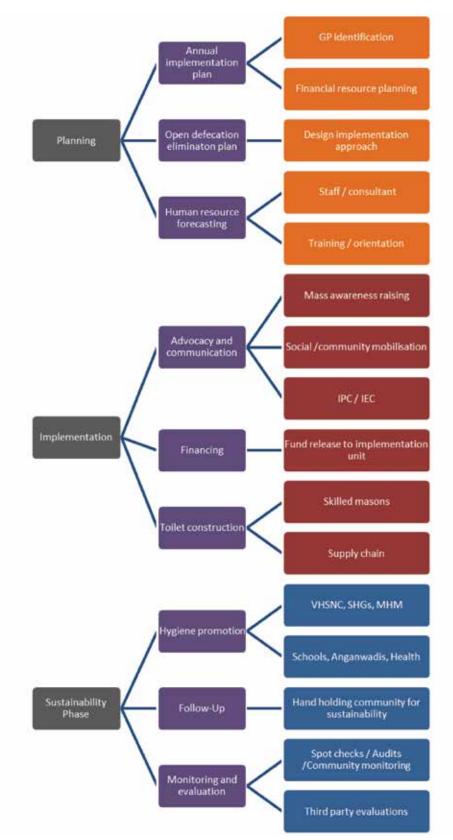
Each of these phases will have activities that need to be specifically catered for with concrete Plans of Action, which shall need specific preparation and planning.

3.2 A schematic representation of the SBM Programme Implementation Diagram is represented below as an illustrative model.

3.3 In the context of the various interventions identified in the Implementation Framework, certain approaches can be considered.

The suggested approach would be to adopt the Community led and Community Saturation approaches focusing heavily on collective behavioral change. Emphasis is to be placed on awareness generation, triggering behaviour change and demand generation for sanitary facilities in Houses, Schools, Anganwadis, places of Community congregation, and for Solid and Liquid Waste Management activities. Focus will be on Inter Personal Communication (IPC), especially of triggering of demand and use of toilets through social and behavioural change communication and houseto house interventions. Since Open Defecation Free villages cannot be achieved without all the households and individuals conforming to the desired behaviour of toilet use, every day and every time, community action and generation of peer pressure on the outliers are the key. Therefore behavior change communication should focus on triggering entire communities. Communitybased monitoring and vigilance committees are essential to create peer pressure. Delivery mechanisms





## SBM Programme Implementation Diagram

would be adopted to meet the community needs, which is to be decided by the States. In the context of striving for saturation and its consequent implications, it is suggested that the planning for implementation should be the District level. There should be suitable targeting of GPs and an appropriate district wide IEC/ IPC/social mobilization campaign should be carried out.

Significant strengthening of the Implementation mechanism is envisaged. Administrative and technical experts (e.g. on IEC and BCC, capacity building, technical supervision, SLWM and Monitoring and Evaluation) are to be made available at the State, District and Block levels.

An army of 'foot soldiers' or 'Swachhata Doots' on sanitation could be developed and activated. These would be through using existing arrangements like Panchayati Raj Institutions, Co-operatives, ASHAs, Anganwadi workers, Women Groups, Community Based Organisations, Self Help Groups, Water linemen/ pump operator etc. who are already working in the GPs, or through Swachhata Doots engaged specifically for the purpose. In case existing employees of other line Departments are to be utilised, their original Line Departments have to be in clear agreement to the expansion of their roles to include activities under the Swachh Bharat Mission. Further, as an alternative to creating a cadre of Swachhata Doots in the villages, the State may work through Civil Society Organisations with a mutually agreed upon incentive structure. In case the CSO route is adopted, the Swachhata Doots may be responsible to the CSO, who will also take the responsibility of paying the Incentives to such Swachhata Doots. There needs to be at least one person or a couple of persons supported by a community-based vigilance committee in every village who shall be responsible for motivating, assisting construction and ensuring sustained latrine use by every person in each household in the village. Capacity building of each of these persons has to be ensured. Role of such workers and also Health and ICDS workers to communicate to the Community, the consequences of poor sanitation and open defecation and their impact on health, is emphasised.

The provision of Incentives for individual household latrine units to the rural households is available to States (from the IHHL component) which may wish to provide the same so that tangible assistance is available for creation of infrastructure in addition to extensive motivational and behavioral change interventions (from the IEC component). This may also be used to maximize coverage so as to attain community outcomes.

States will have flexibility regarding the utilization of the IHHL Incentive. Reputed Civil Society Organisations (CSOs), Self Help Groups (SHGs), NGOs, international, national and local level organizations with a proven track record of working in specific fields in the social sector, may be involved in IEC/BCC/ triggering, capacity building, monitoring and if found appropriate, in implementation. Local level mobilisation on sanitation has to be focused, as this cannot be substituted by other Communication methods.

Availability of water in the Villages is an important factor for sustaining sanitation facilities created. Conjoint programmes may be proritised at the District and GP levels under the SBM(Gramin) and the National Rural Drinking Water Programme (NRDWP), to maximize the availability of water for sanitary purposes.



Rural School Sanitation focusing on separate toilets for girls and boys remains a major intervention which shall be implemented under the programmes of the Department of School Education. Water will be provided inside the toilets for both boys and girls. Toilets in Anganwadis shall be provided by the Department of Women and Child Development. Children can be effective sanitation communicators to spread the message of safe sanitation to all. This Mission shall specifically focus on such a campaign, involving educational institutions in rural areas.

An illustrative list of technology options, with cost implications will be provided to meet the customer preferences and location- specific needs. This list shall be continuously updated as new technologies are found. This needs to be communicated to the beneficiaries providing them with the choice of technological options. MDWS would assist in the preparation of such information. It shall be ensured that sanitary toilets are constructed, which ensure safe confinement and disposal of feaces. Appropriate participation of the beneficiary/communities, financially or otherwise in the setting up of the toilets is advised to promote ownership and sustained use, both at the household and community levels.

An effective monitoring mechanism shall be put in place for monitoring both - Outputs (Toilet Construction) and Outcomes (Toilet usage) suitably, which could inter-alia be in the monitoring of open defecation in the GP. In view of the time scale of the Mission, the monitoring system shall also have - Rapid Action Learning Units (RALU) at the National, State and District levels tasked with studying and analyzing action taken across the country in the rural sanitation programme, evaluating their impact, identifying good practices for up-scaling and also suggesting innovations and a range of options for implementation.

#### 4. IMPLEMENTATION

4.1. Implementation of SBM (G) is proposed with 'District' as the base unit, with the goal of creating ODF GPs. The District Collectors/Magistrates/CEOs of Zilla Panchayats are expected to lead the Mission themselves, so as to facilitate district wide planning of the Mission and optimum utilization of resources. The Baseline Survey data of 2013 collected by States and entered on the IMIS of MDWS by 31.1.2015 will be considered as the base for States where the survey is complete. For other States the data entered on completion of the Survey will be taken as the base data.

4.2 A project proposal shall be prepared by the District, scrutinized and consolidated by the State Government into a State Plan. The State Plan with district wise details will be shared with the Government of India (Swachh Bharat Mission-Ministry of Drinking Water and Sanitation). This Plan will include a 5 year Plan along with 5 independent Annual Plans which merge into the 5 year Plan. These plans shall be approved by the Ministry each year. On the basis of formative research and consultation rounds, the State shall develop a tailor-made Communication Strategy, a Communication Plan, and material and will train community mobilisers to use these tools. The State plans shall provide details of the IEC, BCC, Triggering exercise, Capacity building, Implementation, Financial support and Monitoring activities planned in each district, consolidated for all Gram Panchayats. The District-wise plans will have Gram Panchayatwise details. The State Project Implementation Plans currently prepared by States on a perspective basis shall be revised based on the Baseline data and the revised norms of the SBM(G). The States will be

allowed to make inter-district changes in allocation of resources to the individual districts within the overall funding of the state as a whole as per the approved Annual Implementation Plan (AIP), in consultation with the MDWS.

4.3. Funds are to be made available for these preliminary IEC works including for triggering behaviour change. This will endeavor to reach every household in every community and shall disseminate information regarding the need for safe sanitation, the ill effects of open defecation, and getting the population oriented towards satisfying their felt-needs. The feeling of shame and disgust can be introduced in the target population with focused communication at the community level where an entire community can be triggered into positive action towards elimination of open defecation and restoring community pride. Individual households will be provided a menu of options for their household latrines, both in terms of technology, design and cost. To bring about the desired sustainable behavioural changes for relevant sanitary practices, intensive IEC and advocacy, based on Inter Personal Communication (IPC) with participation of one or more of the following - Government representatives like Swachhata Doots/ASHAs, ANM workers, Anganwadi workers/CSOs/NGOs/Panchayati Institutions/ Rai resource organizations/local SHGs with a good track record is envisaged. Thus a mix of Individual and Community led approaches is envisaged to achieve the desired outcomes. The participation of local community oriented organizations has to be obtained to garner belief in the community and develop their confidence in the programme. Thus the actual approach has to be decided at the District level and the identification and selection of such groups and organizations has to be carefully done taking into account their experience and capabilities.

4.4 The proliferation of educational facilities in the rural areas provides the opportunity to utilize an approach that should essentially include an element that involves school and college children as potential agents of change in homes. This needs to be leveraged to the maximum extent possible and be included in any plan made to upscale sanitation facilities and use.

4.5 The built-in flexibility in the menu of options is to give the poor and the disadvantaged families an opportunity for subsequent upgradation of their toilets depending upon their requirements and financial condition. The provision of Incentives can be used appropriately as decided by the State governments. A synergistic interaction between the Government agencies and other stakeholders is essential.

The provision of Incentives for individual 4.6 household latrine units to the rural households is available to States that wish to provide the same. This may also be used to maximize coverage so as to attain community outcomes. States will have flexibility regarding the utilization of the Incentive. Incentives, if given, may be to the Individual households or where the community model is necessarily adopted to trigger the demand in GPs/Blocks/Districts, the community as a whole or as a combination of both. Since the Incentive for one IHHL is Rs. 12000, the State will be eligible to receive the entire amount (shared between the Central and State Governments). However the Incentive charged on the Mission will be used entirely on the sanitation sectors. States will decide on the methodology of the actual construction of toilets to follow triggering of demand under the Programme. Fund flow for IEC, Triggering, Capacity building, Monitoring activities can be done through the Gram Panchayats or through other agencies like administrative departments, CSOs, NGOs, SHGs etc. as decided by the State. Ideally,



the construction activities should be taken up by the individual beneficiaries themselves with support from/ or through agencies in the village. States may decide to provide Incentives to households in two phases, one at the pre-construction stage and the other on completion of construction and usage. However, the community incentive, if any, can only be released after the village unit is open defecation free for a significant length of time. Both of these outcomes to be measured through a robust follow up monitoring system.

4.7 Since National Rural Livelihood Mission (NRLM) is being implemented across India through a huge network of SHGs, Village Organizations (VOs) of SHGs in the villages, Block level and District level Federations of SHGs for improving quality of life, beside strengthening livelihood options, States may tie up with State Project Management Units of NRLM in the respective states for utilizing the huge network of SHGs for effective IEC and BCC, triggering demand and promoting area specific toilet design and specification. The SHGs can also be effectively used as a micro financing unit for sanitation infrastructure. The Revolving Fund available under the SBM(G) may also be utilized through the NRLM mechanism. Arrangements for this can be made at the State level. SHGs may also be utilized for working as Rural Sanitary Marts (RSMs) in remote areas where bulk procurement and delivery of quality hardware for toilet construction may be assured through such a system. Funding for this shall also be permitted under the SBM(G).

4.8 The Mission shall aim to saturate, on priority, the States/ Districts/ GPs in all major river basins of India e.g. Sutlej, Ravi, Beas, Ganga, Yamuna, Godavari, Narmada, Tapti, Kaveri, Brahmaputra. This will ensure the outcomes required for pollution free rivers, in addition to ODF communities.

4.9 A robust Monitoring arrangement has to be put in place to monitor the Open Defecation Free status of a village, the implementation of Solid and Liquid Waste Management projects as well as the construction and use of Household, Schools, Anganwadi toilets and Community Sanitary Complexes. The monitoring has inter-alia also to use a robust community led system, like Social Audit.

4.10 Rapid Action Learning Units (RALU) should be put in place at the National, State and District levels (if found to be required by States), to monitor, to provide advice on corrective action and upscale good practices. The RAL Units will be small, flexible and specialized to meet these needs and to find quick and effective ways forward, developing, sharing and spreading solutions. This will be based on learnings about Action (what is happening in the field) and from Action (by trying out through Innovative action). These units will carry out activities including being upto date with field activities under SBM(G), brainstorming and search; field trials of innovative approaches; research and sharing and feedback. The RALU will be funded through the Administration component of the SBM(G), from which Monitoring and Evaluation funds are to be provided.

4.11 To accelerate coverage in Gram panchayats selected under the Sansad Adarsh Gram Yojana, these GPs may be selected on priority for coverage under the SBM(G).

#### 5. COMPONENTS OF SBM (G)

The Programme components and activities for SBM (G) implementation are as follows. All States will develop a detailed implementation strategy and plan based on but not limited to the components mentioned below:

### 5.1 Start-Up Activities

The start-up activities include

- Updation of Base line survey Conducting of preliminary survey to assess the status of sanitation and hygiene practices
- b. Orientation of key personnel at the District/GP level and preparation of District Plans
- c. Preparation of State Plan (Programme Implementation Plan PIP).

All States to ensure entry of Baseline data on the IMIS. Any household not entered by the States on the MIS will not be entitled for funds under SBM(G).

The Baseline survey data will be updated by States in April of every year to take into account changes in the GP during the preceding year. This does not envisage resurvey of GPs, but only entry of incremental changes that may have happened in the GP in the preceding year. The updates will be based on a summary revision of the Baseline data. Claims and objections will be filed by individual households for addition or deletion to the Baseline data. The summary revision will be based on a transparent disposal of claims and objections in a Gram Sabha meeting. This will help in updating the status of households in relation to possession of IHHLs. Once a village obtains ODF status, the maintenance of the status will be the responsibility of the community. Any new household added to the village must have access to toilets. The State will also be given the option to make corrections in the MIS Baseline data, after approval from MDWS, where there are reasonable explanations for such changes.

Expenditure on Start-up Activities will be booked against the IEC Component.

### 5.2 IEC Activities

5.2.1 IEC (Information, Education and Communication) is a very important component of the Programme. IEC shall strive to bring about community-wide behaviour change and to trigger the demand for sanitary facilities in the rural areas for households, Schools, Anganwadis, Community Sanitary Complexes and Solid and Liquid Waste Management projects (SLWM) through provision of information and awareness generation. The activities carried out under these components will be 'area specific', 'community specific' and should also involve all sections of the rural population. IEC is not a one-time activity. IEC strategy and plan to be focused on creation of demand leading to behaviour change, construction and use of toilets in a sustained manner. Initially the focus should be on triggering of community action for provision of toilet access to every household. Once the toilets are gradually being put in place, the focus should start including sustained use as an important intervention.

5.2.2 'Triggering' or 'Nudging' of Communities for Behaviour change leading to usage of toilets leading to an open defecation free environment shall be given priority. Effective use of available manpower, information, technology and media shall be utilised to communicate the message of the benefits of safe sanitation and hygiene. It is essential that complete information is made available to the beneficiaries regarding the range of technology and cost of the toilets that are possible to construct. There is a need to communicate the appropriateness of designs so as to ensure that unnecessary expenditure is not incurred by households and communities by overdesigning. An Expert Committee on Technologies set up by MDWS and the Innovation Forum on the MDWS website shall be suggesting new and innovative technologies which shall be circulated to States. These are illustrative lists



and do not restrict the state to go for better and/or lower cost options, where possible. States shall have the flexibility to identify and use technologies which result in safe sanitation as per their requirements.

5.2.3 Interpersonal communication, door to door contact and Triggering are recognised as the most significant tools for attaining sanitation goals. In order to strengthen Communication machinery at the village level with participatory social mobilization, Guidelines for engagement of Village Level Motivators (Swachhata Doot / Sanitation Messengers), have been issued separately. As part of this strategy, in addition to Swachhata Doots, field functionaries like Bharat Nirman Volunteers, ASHA, Anganwadi workers, School Teachers and CSOs, NGOs, SHGs and other organizations etc may be engaged at the GP level for demand creation and taking up behaviour change communication in the GP. There should however be at least one person in each GP who is made responsible for the sanitation communication and should preferably work on this on a full time basis. The Motivator can be given a suitable incentive from the funds earmarked for IEC, as decided by the State Government. The incentive can be performance based i.e. in terms of motivating number of households and Schools/ Anganwadis to construct latrines and use them, and should continue for at least 1 year post construction so that sustainability of usage is ensured.

5.2.4 Other methods of Communication may also be used to spread the message of safe sanitation utilizing various forms of media. An important part of crystallizing Community level action towards ODF is the adoption of a GP wide resolution or pledge which should be taken as a milestone of the Triggering activity. This may be included in the IEC plan as a significant mile-stone.

The "Sanitation and Hygiene Advocacy and 5.2.5 Communication Strategy Framework, 2012-17 (copy available in MDWS website), adopted by Government of India, could be used for formulating State and District specific IEC strategy for rural sanitation and hygiene such as washing hands with soap and water at critical times and proper menstrual hygiene. Keeping with the strategy framework, three main approaches, namely (i) Awareness raising phase, (ii) Advocacy and (iii) Social & Behavior change communication (SBCC) would be adopted and states could formulate state and district specific IEC strategies. The strategy has to be adapted appropriately to State specific contexts and the revised targets of achieving Swachh Bharat by 2019.

5.2.6 Based on the Communication Strategy, each State is to prepare a State level communication and mass awareness plan that targets the State's entire population. This Plan is to be a Perspective Plan focusing on a long term strategy of communicating key messages on sanitation. An Annual Communication Plan shall also be included in the AIP of the State. State IEC Consultants shall be responsible for preparation of these plans. Assistance of other agencies with expertise in preparing and implementing IEC, BCC plans can be taken.

5.2.7 Districts are to prepare a detailed IEC plan as the first part of their Annual Implementation Plans as per their overall strategy to reach all sections of the community. This is to be done utilizing the resources of the IEC consultant available at the District level and the State level. Local NGOs may be used for Interpersonal communication; selecting motivators; triggering activities etc. Recommendations and advice of RALU should feed into the IEC plans. Assistance of other agencies with expertise in preparing and implementing IEC, BCC plans can be taken. The Annual IEC Action Plan should be approved by the DWSC/DWSM. The Communication and Capacity Development Units (CCDUs) / Water and Sanitation Support Organizations (WSSOs) set up at the State level having IEC Consultants must also support the districts in developing good IEC plans, implementing and monitoring the same.

5.2.8 Funds required for implementing the IEC plan shall be provided under this component to Blocks, Gram Panchayats and/ or agencies involved in its implementation. The development of all material/ templates may be standardized by the District or the State Mission, if required in consultation with expert agencies.

5.2.9 Creation of Swachh GPs incorporating ODF status and Solid and Liquid Waste Management systems is the goal of the Mission. It is important to ensure that such status is sustainable for every GP. The IEC funds should be broadly used both in the pre-ODF and the post-ODF phases so that sustaining the movement is possible. The project districts, however, shall have the flexibility of deciding this division depending on the baseline survey reports and rate of acceleration of sanitation coverage.

5.2.10 Funds available under IEC may be used for imparting hygiene education to the rural communities, general public, as well as students in educational institutions. Although WASH in Schools will be in the domain of the HRD Ministry/Department of School Education, the IEC plan should include a component for raising awareness among students, teachers and parents.

5.2.11 Out of the national allocation under SBM(G), 8% is to be utilised on IEC activities. 3% is to be utilized

at the Central level (MDWS) on a national pan-India campaign. This shall highlight national priorities on sanitation hygiene and cleanliness. In the States, 5% of allocation shall be used on IEC/BCC/IPC and all related Communication activities and on Capacity building.

This has to be accounted for at the district level, with 3.75% of each district allocation being utilised within the district at the GP/Block and District levels for IEC/BCC/IPC, and 0.25% for State level activities.

Out of each district project, 0.75% is to be used for Capacity Building Activities at the District/Block/GP level for IEC/BCC activities while 0.25% for activities at the State level. The Centre-State sharing for this IEC funding will be in the ratio of 75:25 between GOI and the State Governments.

The entire State level Plan for IEC should be approved by the State Level Scheme Sanctioning Committee.

5.2.12 Girls and women have hygiene and sanitation needs linked to their menstrual cycle. Funds available for IEC may be used to raise awareness, disseminate information and skills on Menstrual Hygiene Management. IEC plans should include this component for raising awareness among all stakeholders.

## 5.3 Capacity Building

5.3.1 This component is for building capacities of stakeholders and sanitation workers, the Swachhata Doots/Sena, members of PRIs, VWSCs, functionaries of BPMU, DWSM, ASHA, Anganwadi workers, SHG members, masons, CSOs/NGOs etc. The training is to be on various approaches of IEC promoting Behavioural change including Triggering (CLTS), SLTS, IPC and House to House communication etc., masonry work,



plumbing, as well as for construction and maintenance of toilets and for Solid and Liquid Waste Management works.

Central and State level Training Institutes, Resource Centers /Key Resource Centers (KRCs), District Resource Centers, and empanelled NGOs/CBOs and agencies with experience in capacity building should be engaged for such trainings.

5.3.2 The Annual Action Plan of each district shall have details of the annual Capacity Building Action plan covering every GP in the district, with identification of the training institute/agency, training components and of the intended trainees, with definite timelines. The Capacity building exercise shall be monitored by district authorities, Swachhata mission of the States and at the District and State levels.

5.3.3 Funding for the Capacity Building Action plan will be from the IEC budget of upto 0.75% of each Districts total project cost, out of which 0.25% can be spent at the State level. The sharing pattern of expenditure will be in the ratio of 75:25 between GOI and the State Government.

## 5.4 Construction of Individual Household Latrines

5.4.1 A duly completed household sanitary latrine shall comprise of a Toilet Unit including a substructure which is sanitary (that safely confines human feaces and eliminates the need of human handling before it is fully decomposed), a super structure, with water facility and hand wash unit for cleaning and handwashing. The Mission aims to ensure that all rural families have access to toilets. There are various models of toilets available based on safe sanitation technologies like the Twin Pit, Septic tank, Bio toilets amongst others. The Ministry encourages the development of other safe technologies and States shall disseminate information about available technologies and their costs to the beneficiary to enable him/her to make an informed choice. States can also consider the construction of 'Row' toilets and Complexes for a group of families, mainly where it is not possible to construct IHHLs. It should be ensured that the toilets constructed for Individual households meet the minimum design specifications to ensure their sustainability. Care shall be taken to ensure that these toilets are not over-designed and overconstructed i.e. building extra large pits which are not required, to keep them affordable and also to prevent problems like contamination of drinking water. States have to ensure through effective communication that such tendencies are restricted. Appropriate information has to be provided to the beneficiary regarding the maintenance of the toilets provided. The Toilets must have a superstructure acceptable to the beneficiaries, as the poor quality of toilets constructed has been one of the main complaints against earlier sanitation programmes. Various options for the Superstructure should be explored and information about the options available provided to the beneficiary for him/her to choose from.

For optional design specifications of some of the onsite technologies of toilets, a Handbook on Technical Options for on-site Sanitation, issued by the Ministry may be referred at http://www.mdws.gov.in/sites/ upload\_files/ddws/files/pdfs/Final%20Handbook.pdf. This publication shall be updated from time to time.

5.4.2 Incentive as provided under the Mission for the construction of Individual Household Latrines (IHHL) shall be available for all Below Poverty Line (BPL) Households and Above Poverty Line (APL) households restricted to SCs/STs, small and marginal farmers, landless labourers with homestead, physically handicapped and women headed households.

5.4.3 The Incentive amount provided under SBM(G) to Below Poverty Line (BPL) /identified APLs households shall be up to Rs.12,000 for construction of one unit of IHHL and provide for water availability, including for storing for hand-washing and cleaning of the toilet.

Central Share of this Incentive for IHHLs shall be Rs.9,000/- (75%) from Swachh Bharat Mission (Gramin). The State share will be Rs.3,000/-(25%). For North Eastern State, and Special category States, the Central share will be Rs. 10,800/- and the State share Rs.1,200/- (90% : 10%). The beneficiary is to be encouraged to additionally contribute in the construction of his IHHL to promote ownership. State Governments have the flexibility to provide higher incentive for a household toilet, for higher unit costs from sources other than SBM(G). However, this additional funding cannot be from the Central share of any other Centrally Sponsored Scheme.

Special category states are those States declared as such by the Government of India from time to time, with the objective to bring these States at par with the development levels of other states. In addition to the NE States including Sikkim, currently Uttarakhand, J&K and Himachal Pradesh are Special Category states. Ideally, the construction activities should be taken up by the individual beneficiaries themselves with support from/or through agencies in the village.

States shall have the flexibility to decide on the implementation mechanism to be followed in the state. The construction of household toilets may be undertaken by the individual beneficiaries themselves with support from/or through agencies in the village. States may also decide to give the Incentives to the Individuals, or where the community model is necessarily adopted to trigger the demand in GPs/Blocks/Districts, to Communities or to the Gram Panchayats on the achievement of community objectives.

Payment of Incentives may be either in cash or in the form of construction materials or credit vouchers for such materials. In case of Individuals being paid the incentive, if required, States may decide to provide Incentives to households in two phases, one at the pre-construction stage and the other on completion of construction and usage. However, the Community/GP incentive, if any, can only be released after the village unit is open defecation free for a significant length of time. Both of these outcomes to be measured through a robust follow up monitoring system.

Any Incentive for the IHHL, provided to the Community/GP, if given, shall be used only for sanitation activities in that area. The ultimate objective is to ensure behavior change and wean people away from open defecation.

5.4.4. All houses constructed with the Central or/ and State assistance should invariably have suitable sanitation facility as an integral part. Provision will be separately included in the Indira Awas Yojana Programme for provision of functional toilets for IAY houses. Till such provision is made in the existing IAY, funding will be continued from the Swachh Bharat Mission (Gramin).

5.4.5 APL families not covered by the above incentives will be motivated and triggered to take up construction of the household latrines on their own. The IEC activities focusing on behaviour change will provide comprehensive coverage to all the families in the GP without exception. APL families facing fund problems



may be assisted through the Revolving fund as outlined in the guidelines, or through low cost financing from NABARD, Banks and Financial Institutions.

5.4.6 Construction of "insanitary latrines" as defined "The prohibitions of Employment As Manual Scavenger and Rehabilitation Act, 2013" at Para 2.(1) (e) is not permitted in the rural areas. The existing "insanitary latrines" if any, should be converted to sanitary latrines and the sharing pattern for incentive for the targeted beneficiaries shall be identical to that of construction of individual house hold latrines.

5.4.7 Priority : Under the Programme, priority shall be accorded to cover households having:

- Old Age Pensioners / Widow Pensioners / Disability Pensioners (National Social Assistance Programme {NSAP} beneficiaries)
- Pregnant and lactating mothers covered by Maternal Health Programmes of Central and State Governments, including Janani Suraksha Yojana under National Rural Health Mission; and
- Girl children covered by any Scheme benefiting the girl child.

## 5.5 Availability of Sanitation Material- through Rural Sanitary Marts (RSM), Production Centers (PC), Self Help Groups (SHG).

5.5.1 In many States, good quality sanitary material and hardware are accessible through the market with the private sector providing such material competitively. In such States RSMs/PCs are not required.

5.5.2 However in a few States, the penetration of the market with respect to sanitary materials is still inadequate. In such cases, States can decide to utilize

the provision of the Rural Sanitary Marts (RSM) and Production Centres (PC).

5.5.3 The Rural Sanitary Mart (RSM) is an outlet dealing with the material, hardware and designs required for the construction of sanitary latrines, soakage and compost pits, vermi-composting, washing platforms, certified domestic water filters and other sanitation and hygiene accessories etc. The main aim of having a RSM is to provide material, services and guidance needed for constructing different types of latrines and other sanitary facilities for a clean environment at a place near the residence of the beneficiaries. RSMs need to ensure that a variety of pans (Rural, Ceramic, HDP, Fiberglass) are available for choice by the beneficiaries at reasonable rates. RSM should necessarily have those items, which are required as a part of the sanitation package. It is a commercial venture with a social objective.

5.5.4 Production Centers are the means to produce cost effective affordable sanitary materials at the local level as per local demand suitable for rural consumption. States have to ensure that a monitoring mechanism is set up to ensure that the quality and cost of the products being produced and marketed are of acceptable standards. They could be independent or part of the RSMs.

5.5.5 The Production Centers/Rural Sanitary Marts can be opened in areas where they are required and operated by SHGs/Women Organizations/Panchayats/ NGOs etc. Support of private entrepreneurs may also be taken for ensuring an effective supply chain.

In all cases, the Gram Panchayats have to ensure the availability of a pool of trained masons in the area whose services can be utilised for the construction of toilets. 5.5.6 DWSM/DWSC/GPs should have a Memorandum of Understanding (MoU) with the RSMs/PCs along with a system of joint monitoring evolved to ensure that the RSMs & PCs are on track with production plans as per requirement. RSMs should have a method of quality certification of its products and a band of trained masons and motivators.

5.5.7 Quality standards (where notified by BIS or by MoDWS) for each of the items of purchase should be strictly adhered to. This is an important requirement as poor quality products supplied from the RSM/PC can significantly derail the programme.

5.5.8 An interest free loan up to Rs.5 lakh can be given in each case for establishing a RSM/PC out of the Revolving fund available with the district. Loans from the Revolving fund for RSM/PC shall be recovered in 12-18 installments after one year from the date of receiving the loan. States may decide on the number of RSMs/PCs to be set up as per requirement, ideally with one such unit per block. However large blocks having more than 10000 population may have multiple RSM/PCs.

5.5.9 The RSM/PC will prepare a Business Plan for each financial year and submit it to the DWSM/DWSC for review. Such Plan should be practical enough to provide hardware support for saturating all the villages in its areas of operation with IHHLs and other forms of toilets. The Business Plan should also reflect sufficient income generation to be able to return the amount to the Revolving Fund of the DWSM/DWSC in fixed installments. Each RSM/PC should report to DWSM/ DWSC every six months about its performance against the Business Plan. The District RALU shall monitor the performance of the RSM/PC and provide feedback of necessary interventions to the RSM/PC and to the DWSM/DWSC. 5.5.10 There are an increasing number of Self Help Groups (SHGs) that have come into being under various livelihood support programmes. These SHGs are present extensively in many States. The potential for a sanitation supply chain built around SHGs can be explored and set up by states, which can address the problem of reach, given the widespread adoption of SHGs in the country. States can decide to extend suitable financial support to the SHGs in line of the RSMs and PCs, if necessary, by adopting suitable convergence frameworks with the parent programme.

### 5.6 Provision of Revolving Fund in the District

5.6.1 A Revolving Fund will be available at the district level out of the SBM(G) funds. The Revolving fund may be given to Societies, Self Help Groups or other groups as decided by the states, whose credit-worthiness is established, for providing cheap finance to their members for the construction of toilets. Loan from this fund should be recovered in 12-18 installments. States will have the flexibility to decide the other terms and conditions for sanction from the Revolving fund.

This Revolving fund can be accessed by APL households not covered for Incentives under the guidelines. Households which have availed Incentives under any Sanitation scheme earlier can also access such finance as loans. Those households (BPL and APL) covered under the Incentive can also approach for financing under the Revolving Fund to meet the additional cost of improved toilets with bathing facility. Registered SHGs with proven credentials can approach the DWSM for such funding. Upto 5% of the district project outlay subject to maximum of Rs. 1.50 crore, can be used as Revolving fund, including for funding the setting up of RSMs/PCs. Provision of the Revolving Fund in a district shall be approved by the DWSM/ DWSC. The Revolving fund shall be shared between Centre and State on an 80:20 basis.



### 5.7 Micro Financing of Construction of Toilets

5.7.1 To enable the provision of low cost financing to Individual households for the construction of household latrines and to leverage the network of NGOs and SHGs identified by agencies like NABARD and other financial Institutions, in the wake of the need for universalisation of sanitation facilities, possibilities of setting up a microfinancing arrangement should be explored. This will facilitate converging financial resources, management skills and outreach capabilities to cover the demand of toilets by households not eligible for direct incentives under SBM(G), and /or those households interested to build a more expensive toilet by availing finance.

5.7.2 States and Districts may examine possibilities to access credit at the local level to further the financing of sanitation activities which may be taken up either independently or in convergence with Swachh Bharat Mission activities. Such financing can be inter-alia through banks, recognized financial institutions or through livelihood programmes.

### 5.8 Community Sanitary Complex (CSC)

5.8.1 Community Sanitary Complexes comprising an appropriate number of toilet seats, bathing cubicles, washing platforms, wash basins etc, can be set up in a place in the village acceptable and accessible to all. Ordinarily such complexes shall be constructed only when there is lack of space in the village for construction of household toilets and the Community/ GP owns up the responsibility of their operation and maintenance and gives a specific demand for the same. Such Complexes can be made at public places, markets, bus stands etc., where large congregation of people takes place.

The maintenance of such Complexes is very essential for which Gram Panchayat should own

the ultimate responsibility and the Operation and Maintenance should be assured. User families, in case of complexes specifically meant for households, may be asked to contribute a reasonable monthly user charge for cleaning & maintenance. For complexes in places of community congregation, pay and use model may be encouraged. The proposal for putting up CSC will be approved by the State level Scheme Sanctioning Committee (SLSSC). Suitable Operation and Maintenance and Monitoring guidelines may be issued by the State to ensure proper maintenance of the complex.

The Ministry has issued a Handbook on Establishment and Management of Community Sanitary Complexes in Rural Areas. The same may be referred for establishing such complexes in rural areas. The book can be downloaded from the website of the Ministry at:

http://www.mdws.gov.in/sites/upload\_files/ddws/ files/pdfs/CommunitySanitaryComplexes\_2Jun2011\_ PRESS.pdf

5.8.2 The maximum support per-unit prescribed for a Community Sanitary Complex is Rs. 2 lakh. Sharing pattern amongst Central Government, State Government and the Community shall be in the ratio of 60:30:10. The Community contribution, however, can be made by the Panchavat out of its own resources, from grants of the Finance Commission, from any other fund of the State duly permitted by it, or from any other source as obtained from the State, District or GP. For, funding the CSCs/public toilets, states may also source additional funds from CSR/CSO/NGO for raising the cost of individual complexes. The mode may be Public-Private-Partnership (PPP)/VGF which should cater to the need of operation and maintenance of the facilities. Water supply to these CSCs will have to be assured under the NRDWP before a CSC is sanctioned.

### 5.9 Equity and inclusion

5.9.1 Equity and inclusion issues are of significance in the sanitation and hygiene sectors. Providing access to the different categories of people who are not able to access and use safe sanitation facilities shall be a priority of the implementing agencies. These categories of people may include among others, those who are socially and economically marginalised, those who are unable to use sanitation facilities constructed with standard designs. Women, children, people of certain castes, faiths and ethnicities, older people, pregnant women, people with disabilities, geographically marginalised populations in remote areas, as well as those living in areas where it is difficult to construct simple toilets due to high water tables, sandy soils or hard rock may be given priority while planning for coverage. Requirements and sensitivities relating to gender including dignity and safety issues shall be taken into account at each stage of planning, implementation and post implementation management of sanitation issues.

5.9.2 Issues relating to women's personal hygiene namely menstrual hygiene are to be focussed under the SBM(G). Girls and women have hygiene and sanitation needs linked to their menstrual cycle. Women suffer in the absence of knowledge about safe practices on Menstrual Hygiene Management (MHM). There are several examples where CSOs and SHGs have worked with the community, informed them about menstrual hygiene practices and also developed economic models to meet the demand for sanitary napkins. This is one area where CSOs and SHGs can play a key role.

5.9.3 Funds available under the IEC component may be used for IEC in this matter and to raise awareness and skills on Menstrual Hygiene Management in all places and specifically amongst adolescent girls in schools. IEC plans should include this component for raising awareness among all stakeholders. Funds under the SLWM components can also be used for setting up of Incinerators in Schools, PHCs and Public toilets, for the safe disposal of menstrual hygiene waste.

5.9.4 Provision of sanitary facilities sensitive to the needs of people with disabilities, shall be included in the technologies that may be used for the construction of toilets. Suggestive models and cost estimates shall be prepared and circulated for the same.

### 5.10. Solid and Liquid Waste Management

5.10.1 The objective of SBM(G) is to bring about improvement in the cleanliness, hygiene and the general quality of life in rural areas. Solid and Liquid Waste Management (SLWM) is one of the key components of the programme. To create clean villages, it is essential that the IEC interventions focus on Solid and Liquid Waste Management so as to create a felt need for these activities amongst the population. This must lead to the setting up of systems for the scientific disposal of waste in such a way that has a tangible impact on the population. The Community /Gram panchayat has to be motivated to come forward and demand for such a system, which they have to subsequently operate and maintain.

5.10.2 Once the demand is created, to ensure that the resources are used efficiently, SLWM is to be taken up in project mode for each Gram Panchayat (GP) with financial assistance capped for a GP on number of household basis to enable all GPs to implement sustainable SLWM projects. The total assistance under SBM(G) for SLWM projects shall be worked out on the basis of total number of households in each GP, subject to a maximum of Rs.7 lakh for a GP having up to 150 households, Rs.12 lakh up to 300 households, Rs.15



lakh up to 500 households and Rs.20 lakh for GPs having more than 500 households. Funding for SLWM project under SBM(G) is provided by the Central and State Government in the ratio of 75:25. Any additional cost requirement is to be met with funds from the State/GP, and from other sources like Finance Commission funding, CSR, Swachh Bharat Kosh and through the PPP model.

5.10.3 Under Solid and Liquid Waste Management, the following activities inter-alia may be undertaken:

- i. For Solid Waste Management: States are to decide the technologies suitable to their areas. Technologies identified by the Committee on Technologies may also be considered for implementation. Collection, segregation and safe disposal of household garbage, decentralised systems like household composting and biogas plants shall be permitted. Activities related to maximum reuse of organic solid wastes as manure should be adopted. Such technologies may include vermi-composting or any other composting method, individual and community biogas plants. Funds allocated for Solid and Liquid Waste Management may be used to implement safe disposal solutions for menstrual waste (used sanitary cloths and pads) and setting up incinerators in Schools, Women's Community Sanitary Complexes, Primary Health Centre, or in any other suitable place in village and collection mechanisms etc can be taken up. Technologies may include appropriate options that are socially acceptable and environmentally safe.
- For Liquid Waste Management: States are to identify suitable technologies. Methods adopted for management of liquid wastes may focus on maximum reuse of such waste for agriculture

purposes with least operation and maintenance costs. For collection of waste water, low cost drainage/ small bore system, soakage pit may be adopted.

For treatment of waste water the following technologies may inter-alia be considered:

- a. Waste Stabilization Pond (WSP) technology
- b. Duckweed based waste water treatment.
- c. Phyto rid Technology (developed by NEERI)
- d. Anaerobic decentralized waste water treatment. For details of the technologies suitable for rural areas, a handbook "Technical options for Solid and Liquid Waste Management in Rural areas" and other publications under preparation to be issued by the Ministry of Drinking Water and Sanitation may be referred. These publications can be accessed on the website under the head "Publication" or on URL http:// www.mdws.gov.in/

5.10.4. All GPs are to be targeted for coverage with a SLWM project. SLWM Projects for each GP should be part of the annual District Plan. The Annual District Plan should be approved by State level Scheme Sanctioning Committee (SLSSC). Each individual SLWM project may be approved at the DWSC level as per the technical and financial rules of the individual States. The objective is to initiate SLWM projects in all GPs without delay.

5.10.5 Every State should have at least one SLWM Consultant at the State level and one SLWM Consultant in each District DWSM/DWSC to guide the preparation of the SLWM projects for each GP. Assistance of Professional agencies/NGOs may be sought to prepare/ develop/test/implement such projects. The Project preparation, supervision and monitoring costs of SLWM projects payable to such Agencies may be made a part of the project cost itself. Maintenance costs for the first 5 years of operation may be made a part of the Project cost. SLWM projects can be made financially viable by dovetailing funds from other programmes and sources of funding like MNREGS, MPLAD, MLALAD funds, Finance Commission funds, CSR contribution, Swachh Bharat Kosh, donor funding etc. Funding from programmes of other Ministries and departments may also be converged.

5.10.6 Sustainable Operation and Maintenance systems have to be put in place before the SLWM projects are taken up.

5.10.7 The Ministry of Drinking Water and Sanitation shall publish information and manuals including technical information on SLWM on the MDWS website from time to time. [http://www.mdws.gov.in/ publications]

### 5.11 Administrative Charges

5.11.1 States shall be permitted to utilise funds under this component as per its requirement. The Administrative Charges shall normally permit expenditure on salary of temporary staff and agencies deployed for the execution of various components of the SBM(G) at State, District, Block and GP levels, Support services, fuel charges, vehicle hire charges, stationery, monitoring & evaluation activities, TA/DA to Inter-State and Inter-District Survey teams deputed for monitoring and verification, exposure visits.

In order to implement the projects professionally, Specialists/ Consultants/Agencies from the fields of IEC, Human Resource Development, School sanitation & Hygiene education, SLWM, Monitoring and Evaluation etc. may be hired at the State and District levels for the project period. 5.11.2 State Governments are advised to post a Government officer as a full time Block Sanitation Officer. Till that is not made operational, the State governments may specifically officially assign SBM activities to a senior official posted at the Block level. He may be assisted by a Block Coordinator and a Data Entry Operator engaged on contract who shall be provided emoluments as decided by the State. This Block level arrangement shall be tasked with handholding, supervising and monitoring every GP in the implementation of the scheme.

5.11.3 Every Block shall be provided with one computer with accessories. Internet connection including monthly charges shall be permissible per block.

5.11.4 Administrative component to be utilised under the project annually, will be up to 2% of programme expenditure in a year. This will be adjusted at the district level where the authority will be to incur expenditure of 1.8%. The State will be authorised to incur expenditure upto 0.2% of total program expenditure of all districts taken together. Sharing pattern of expenditure will be 75:25 between Centre and State, which will be adjusted at the end of financial year. Unspent balance in this component will be carried over to the next year.

5.11.5 To ensure that Monitoring and Evaluation activities are carried out in the States, 5% of all the funds available at the State level for administrative expenditure shall be utilised for monitoring and Evaluation studies related to the programme. State will make arrangements for concurrent monitoring and social audits. Third party independent evaluations and impact studies may also be conducted by reputed national level agencies empanelled for the purpose.

5.11.6 The following items of expenses are specifically prohibited under "administrative expenses":



- a. Purchase of vehicles
- b. Purchase of land and buildings
- c. Construction of official buildings and rest houses (this excludes toilet units needed for SBM(G) projects)
- d. Expenses for any political party and religious organisations
- e. Expenses for gifts and donations
- f. Temporary transfer of funds to any other scheme or fund in the state.

## 6. NATIONAL SCHEME SANCTIONING COMMITTEE

6.1. National Scheme Sanctioning Committee (NSSC) will be constituted under the SBM(G) for specific periods to approve or revise the Perspective Plan called the Project Implementation Plan (PIP) for the States/Districts, and the Annual Implementation Plan (AIP) as and when received the State/UT Governments duly approved by the State Level Scheme Sanctioning Committee (SLSCC) and finalized by the Appraisal Committee.

The constitution of the NSSC shall be as follows:

- 1. Secretary, Ministry of Drinking Water And Sanitation Chairperson
- 2. Additional Secretary & Financial Advisor, Ministry of Drinking Water and Sanitation
- 3. Secretary in-charge of rural sanitation of the State whose proposal is to be considered
- 4. Joint Secretary in-charge of Sanitation, Ministry of Drinking Water And Sanitation - Member Secretary
- 5. Two experts on rural sanitation as nominated by the Chairperson

### 7. IMPLEMENTING AGENCIES

7.1. Implementation of SBM(G) requires large scale social mobilization and monitoring. A 5-Tier implementation mechanism should be set up at the National/State/District/Block/Village level as given below :

## 7.2 National Swachh Bharat Mission (G) – NSBM(G)

7.2.1 The Swachh Bharat Mission will be set up at the Ministry of Drinking Water and Sanitation. Secretary DWS will be the Mission Director, to be assisted by Additional Secretaries, Joint Secretaries, Directors, Deputy Secretaries and Technical advisors as is decided by the Government of India from time to time.

7.2.2 The Mission will have a Monitoring and Evaluation Cell which shall be responsible for carrying out relevant and suitable annual or biannual Monitoring exercises of the implementation of the SBM(G) in States, in consultation with other agencies like NSSO and Registrar General of India. The Cell shall be responsible for coordination with States and Districts on Monitoring. The Cell shall also monitor the reports and publications being brought out by various agencies and organizations regarding the changing sanitation situation in the country.

The Cell will also have the responsibility of monitoring the activities of all other Ministries of Government of India and individual States / UTs with respect to the Swachh Bharat Mission.

The Cell will work towards developing the SBM (G)-MIS of the Ministry in coordination with the NIC.

7.2.3 The Mission will have a Communication Cell that shall prepare and implement the Annual and long term Communication plan of the Swachh Bharat Mission (G)

of the MDWS. The Cell will coordinate with the Ministry of I & B, DAVP, DD, AIR, NFDC and other communication agencies on the plan. The cell will also monitor the Communication plan and activities of states to ensure commonality of focus and purpose.

7.2.4 The National Resource Centre (NRC), a group of experts in various aspects of sanitation and water supply, situated within the MDWS shall be a technical assistance unit to the Swachh Bharat Mission(G).

## 7.3 State Swachh Bharat Mission [SSBM(G)]-State Water and Sanitation Mission (SWSM)

7.3.1 As a step towards achieving coordination and convergence among State Departments dealing with Rural Sanitation, Rural Drinking Water Supply, School Education, Health, Women and Child Development, Water Resources, Agriculture, Publicity etc. a State Swachh Bharat Mission (Gramin) - should be set up at the State/UT level. It shall be a registered society under the aegis of the Department/Board/ Corporation/ Authority/Agency implementing rural water supply and sanitation programme in the State.

7.3.2 While States shall decide on an appropriate structure, there should be an Apex Committee at the State level to aid and advise the State Mission. The Committee should be headed by the Chief Secretary with Secretaries in-charge of PHED, Rural Development (RD), Panchayati Raj (PR), Finance, Health, Information and Public Relations (I&PR) as members. Principal Secretary / Secretary of the Department looking after Sanitation in the State shall be the nodal Secretary responsible for all the SSBM(G) activities and for convening the meetings of the Mission.

Experts in the field of sanitation, hydrology, IEC, HRD, MIS, media, NGOs etc. may be co-opted as members.

The State Swachh Bharat Mission (Gramin) SSBM(G), may be located within the implementing Department of the State government with the Minister-in-Charge of the Department as the Chairperson of the Governing Body. The Principal Secretary/Secretary in charge of the implementing Department will be the Vice Chairman and the Mission Director the Member Secretary.

7.3.3 The SSBM(G) Directorate headed by a senior State level official shall supervise implementation of SBM(G) in the project districts in the State, facilitate convergence mechanism between line departments, ensure preparation of the Annual Implementation Plan for each district as per the requirement of the district, consolidate the same into the Annual Implementation Plan of the State, share and discuss the same with the MDWS/NSBM(G), receive Grant-in-aid from Centre and disburse to the DWSMs/ Zila Parishad/ DRDA as per requirement. States shall provide adequate administrative, technical and support staff for the State Mission. Remuneration of all Government employees in the Mission will be borne by the State. The SSBM(G) can engage technical experts as Consultants to be supported under the programme.

7.3.4 The State Level Scheme Sanctioning Committee (SLSSC) is a Committee comprising of representatives of various Technical Departments, Institutions and Organizations as decided by the State Government to examine and approve district projects and other proposals of technical nature at the State level. The Committee shall have a representative from Ministry of Drinking Water and Sanitation.

7.3.5 Water and Sanitation Support Organization (WSSO)/ Communication and Capacity Development Unit (CCDU) currently in place for sanitation shall be merged with the SSBM(G). In case drinking water supply and sanitation



are being looked after by different departments, the WSSO(Sanitation) may be merged with the SSBM(G).

7.3.6 Accounting arrangements for the SSBM(G) shall be as existed for the SWSM, and as amended by the MDWS and State Government from time to time.

7.3.7 The administrative support component of the SSBM(G) shall ideally consist of the following minimum human resources:

Director:	
State Coordinator:	
Consultants:	
HRD/Capacity Building Specialist:	1
IEC Specialist:	1
M & E Specialist:	1
SLWM Specialist:	1
MIS Specialist:	1
Accountant:	1
Data Entry Operator:	2

States are to decide on the specializations and emoluments of all Consultants. However States should keep parity with the emolument structure of other programmes like the MNREGS and the NRLM.

### 7.4 District Swachh Bharat Mission [DSBM(G)]

7.4.1 **A District Swachh Bharat Mission** is to be formed at the district level. This may be done by suitable changes in the existing District Water and Sanitation Mission/Committee (DWSM/C). As the line departments will play catalytic role in implementation of the programme, the role of the District Collector/ Magistrate/CEO Zilla Panchayat shall be pivotal. While States shall decide on an appropriate mechanism, the suggested composition of DSBM(G) is as follows:

- DSBM(G) shall be headed by Chairman of Zilla Parishad. The District /Deputy Commissioner/ Magistrate/CEO Zilla Panchayat shall be the Executive Vice Chairman.
- The members would be all MPs/MLAs and MLCs of the District and Chairperson of the concerned Standing Committees of the Zilla Parishad or their representatives; CEO/AEO of the Zilla Parishad; District Officers of Education, Health, Panchayati Raj, Social Welfare, ICDS, PHED, Water Resources, Agriculture, Information and Public Relation;
- NGOs can be identified by the DSBM(G) and coopted into the Mission as members.
- The CEO of the District Panchayat/Parishad; the Executive Engineer of PHED/District Engineer of the ZP/ any other officer approved by SSBM(G) shall be the Member Secretary.
- The Mission shall meet at least quarterly.
- DSBM(G) should plan and advise on implementation of the district SBM (G) with appropriate IEC strategies and convergence mechanisms with all line departments.

7.4.2 A District Swachh Bharat Mission Management Committee (DSBMMC) chaired by the District Collector/Magistrate and comprising of all district level officers of relevant departments and all BDOs/ Block level officer in charge of sanitation shall be formed, and shall meet once every month to plan and monitor the implementation of the Mission. The Committee will carry out regular Block and GP level reviews. The District /Deputy Commissioner/Magistrate/CEO Zilla Panchayat shall be the nodal officer responsible for the implementation of the Mission. Remuneration of all Government employees in the Mission will be borne by the State. The DSBMMC can engage technical experts as Consultants to be supported under the programme.

7.4.3 Accounting arrangements for the DSBM(G) shall be as existed for the DWSM, and as amended by the MDWS and State Government from time to time.

7.4.4 At the Implementation level is the district, the following human resource shall ideally be ensured in the DSBM(G):

District Coordinator i/c of SBM(G):	1
Assistant Coordinator (Tech.)	1
Consultants:	
IEC/Equity/Social and	
Behavioural Change Communication:	1

HRD/Capacity Building:	1
M & E cum MIS:	1
Technical expert -Sanitation & Hygiene: SLWM :	1 1
Accountant:	1
Data Entry Operator	2

States are to decide on the specializations and emoluments of all Consultants. However States should keep parity with the emolument structure of other programmes like the MNREGS and the NRLM.

## 7.5 Block Programme Management Unit (BPMU)

7.5.1 The role of Block level intervention in the rural sanitation sector needs to be significantly strengthened to provide guidance, support and monitor sanitation status in GPs. The Block level is the ideal unit for providing support to a GP or a group of Gram

Panchayats. States should finalise the Block level arrangements as per their requirements.

7.5.2 Ideally State has to set up a Block Programme Management Unit (BPMU). The BPMU shall work as bridge between the District experts and the GPs and provide continuous support in terms of awareness generation, motivation, mobilization, training and handholding of village communities, GPs and VWSCs. The BPMU will serve as an extended delivery arm of the District Mission in terms of software support and act as a link between [DSBM(G)] and the GPs/ VWSCs/ village communities.

The State Governments are expected to post a Government officer as a full time Block Sanitation Officer (BSO). Till such arrangements are made, the State may designate a senior block level official as the BSO. He may be assisted by a Block Coordinator and a Data Entry Operator engaged on contract who shall be provided emoluments to be decided by State. This Block level arrangement shall be tasked with handholding, supervising and monitoring of the programme and the quality of toilets being constructed and their usage in every GP. Social Mobilisers may be needed at the Block level to assist village level workers or Swachhata Doot / Sena.

7.5.3 States can also set up a sub-block i.e. cluster level units in places where there are a large number of GPs in a Block. A team of Social mobiliser and technical supervisor may be engaged for 20-30 GPs. States are to decide on the emoluments of all persons engaged at the Block and Cluster levels.

7.5.4 Capacity building and Generating awareness including Triggering demand among the village community on various aspects of sanitation will be



taken up by BPMUs though the designated CSO etc./ Swachhata Doot/ Sena. It will also help the GPs in achieving ODF status, sustaining and building on it with effective motivation and low cost management of solid and liquid wastes.

7.5.5 Expenditure towards these personnel may be incurred from the Administrative head of the SBM(G).

## 7.6 Gram Panchayat/ Village Water and Sanitation Committee

7.6.1 The Gram Panchayats can have a pivotal role to play in the implementation of the programme. States may decide to channel the fund flow for activities at the GP level through the Gram Panchayat institution. All Institutions and Committees working within the GP framework have to prioritise sanitation within their programmes.

7.6.2 A Village Water and Sanitation Committee (VWSC) shall be constituted as a sub-committee of Gram Panchayat, for providing support in terms of motivation, mobilization, implementation and supervision of the programme. The VWSC should play a crucial role in the comprehensive and saturation approach to ODF Grams. The membership of a VWSC may have representation from each Ward of the GP and 6 more members. 50% of the members should be women. There should be representation from SCs and STs and poorer sections of the society. This Committee should function as a Standing Committee on Water and Sanitation of the Gram Panchayat and should be an integral part of the Village Panchayat. The composition and functions of the VWSC may be determined by the State Government.

7.6.3 A separate account may be opened for each Village and Water Sanitation Committee of a GP

and "Sarpanch/Pradhan" of the GP should be the chairperson of each VWSC. The Swachh Bharat Funds should be routed through the account of the VWSC/GP. The account shall be subject to audits held from time to time including Social Audit.

7.6.4 The GPs and the VWSCs shall endeavor to make their GPs ODF and Swachh at the earliest. States should recognise and confer awards on such GPs.

7.6.5 While the participation of the local bodies is advised, there shall be flexibility at the State and District levels to decide on the methodology of the implementation of the programme depending on local conditions and the role that the GPs and the VWSCs shall play.

#### 7.7 Swachhata Doot/Sena

7.7.1 There is a need for a dedicated, trained and properly incentivized sanitation work force at the GP level. This has been brought out by many Monitoring and Evaluation and Research studies carried out in the country. These Swachhata Doots/Sena, need to carry out the multiple formalities and communication that needs to be completed in the course of triggering of demand and subsequent toilet construction. Identification of a beneficiary, assisting in the IEC, maintaining records and tracking progress are essential activities that are needed to be carried out at the GP level.

The GP/VWSC can engage Swachhata Doots or Swachhata Sena to carry out and be responsible for all such sanitation related activities in the GP. These Doots should preferably be from the target GPs. The State may decide to assign this function to CBOs/NGOs/SHGs/ etc. States are to decide on the guidelines for their engagement and the honorarium/remuneration to such Doots, which is essential to attract dedicated and serious workers. Use of ASHAs, Anganwadi workers, ANM workers can be considered, however ideally they should serve on a full time basis. Expenses on the Swachhata Doots may be borne on the IEC component of the SBM(G). However no permanent cadre of Swachhata Doots is to be created. The Incentives to anyone including Swachhata Doots who motivate households for toilet construction which results in the household moving away from open defecation may be upto Rs. 150 per case. States may however decide on an appropriate amount as per requirement. Further provision of Post-construction honorarium should also be provided to ensure sustainability.

## 7.8 Role of MDWS in ensuring Adequate Infrastructure:

7.8.1 The creation of adequate infrastructure for the implementation of the SBM(G) in the State at various levels, shall be monitored by the MDWS, which may issue necessary advisories on the matter. Approval of the AIP of the States and release of assistance may be made contingent on compliance with such directions.

### 8. ROLEOFPANCHAYATIRAJINSTITUTIONS

8.1 As per the Constitution 73rd Amendment Act, 1992, Sanitation is included in the 11th Schedule. Accordingly, Gram Panchayats have a pivotal role in the implementation of SBM(G). The programme may be implemented by the Panchayati Raj Institutions at all levels. Their exact role shall be decided by the States as per the requirement in the State. The GPs will participate in the social mobilization for the triggering demand, construction of toilets and also maintenance of the clean environment by way of safe disposal of waste. Experienced and reputed NGOs can be considered for participation for assisting in carrying out Inter-personal Communication and Training. Community Complexes constructed under the SBM(G) will be maintained by the Panchayats/Voluntary Organizations/Charitable Trusts through funds available from Finance Commissions, user charges, other State funds, CSR funds etc. Gram Panchayats can also contribute from their own resources for School Sanitation and Solid and Liquid Waste Management infrastructure over and above the prescribed amount. Districts shall endevour to obtain support for GPs from Businesses, Corporates, Social organisations and Institution like Banks and Insurance Companies for the creation of assets and the operation and maintenance. The GPs will act as the custodian of the assets such as the Community Complexes, environmental sanitation infrastructure, drainage etc. constructed under SBM(G). GPs can also open and operate the Production Centers/Rural Sanitary Marts.

8.2 GPs can play a key role in promoting regular use, maintenance and up-gradation of toilets, SLWM components and Inter-Personal Communication for hygiene education. Agencies who are in the frontline of implementation have a key role in ensuring that safety standards are being met with all components of SBM(G) e.g. the distance between water source and a latrine – regulating pit-depth, pit lining to prevent pollution, collapse of pit etc. The same will apply to key hygiene behaviour such as keeping the environment around hand pumps / water sources clear and tidy and free of human and animal excreta.

8.3 Both Block-level and District-level PRIs must regularly monitor the implementation of the Programme. GPs must also play a role in the monitoring of the SBM(G) programme. The GP will organise and assist in organizing Social Audits of the Programme. Social audit meeting will be held in each GP once in six months. The



DSBM(G) and the BPMU shall be responsible to ensure that this schedule is adhered too.

8.4 An important part of crystallizing Community level action towards ODF is the adoption of a GP wide resolution or pledge to be taken as milestone of the Triggering activity. This can to be an important of the process towards ODF status in the GP, and has to be used appropriately and effectively.

8.5 The responsibility of Social audit of the programme shall be given to any specific village level body/committee/SHG etc. which shall be carried out in coordination with the GP.

## 9. ROLE OF COMMUNITY BASED ORGANISATIONS/NON GOVERNMENTAL ORGANISATIONS/SELF HELP GROUPS/ SUPPORT ORGANISATIONS

9.1 lf utilized effectively, CBOs/NGOs/SHGs/ other Organisations can have a catalytic role in the implementation of SBM (G) in the rural areas. The outreach and ground level connect that such organisations can deliver, can be tapped in the Programme to achieve positive results. They can be considered for active involvement in the IEC activities including in Triggering leading to demand generation and sustained use of the facilities, Capacity building, assistance in construction and ensuring sustained use of sanitation facilities. Ideally every GP should have one Support Organization (S.O.) associated with it for assisting in furthering the sanitation programme.

The State and District Missions may take necessary steps to provide for an S.O. to each GP.

9.2 Awareness generation and information dissemination: These Organisations can generate mass

awareness of the community against open defecation, hygiene and environmental sanitation ,safe drinking water etc. by planning and implementing diverse, effective and multiple evidence based participatory communication strategy.

9.3 Institutional building: CBOs/NGOs/SHGs/other Organisations can be engaged for implementation of block level institutions like BPMU by engaging human resources ,following the stipulations in respect of qualifications, experience, compensations etc. They can play a significant role in the capacity building of the community in developing and implementing Village Sanitation and Water Security Plan, Environmental sanitation, inclusive of Solid and Liquid Waste Management(SLWM) and capacity building of members of PRI, VWSC ,VOs and grass-root level workers .

9.4 Capacity building: These organisations can be effectively engaged for capacity building process as National, State and District level Key Resource Centers. After ensuring their credentials and past records, they may be engaged for preparing modules for functionaries (i.e. District Coordinators, Block Coordinators, Cluster Coordinators, BDOs, PRI, grass root level workers like "Swachhata Doot", ASHA, Anganwadi workers, SHGs, PRI, Teachers , members of VWSCs , Masons etc.

9.5 RSM/Providers of Quality Hardware for Toilets: In many states, varieties of options of toilet parts like Pan, Pan Trap, Tiles, Rings for pits, lid of pit, pipes, doors, roof are available even at block level. Households have the options of purchasing varieties of toilet parts at their own choice at block level, near GPs. However, in some States where GPs are situated in remote areas RSM is still an inevitable requirement for ensuring supply chain of individual house-hold toilets, community toilets school toilets and anganwadi toilets. CBOs/NGOs/

SHGs/other Organisations may be engaged effectively in ensuring quality bulk supply of hardware for toilets. However, to ensure sustainability through supply of quality components and construction of toilets, the specifications of materials like Ceramic Pans, Pan Traps, Pipes, Super Structure of bricks, brick lining in pits or rings made of concrete, depth and diameter of pit ,roof of asbestos/tin, doors with iron frame ,twin pits etc. should be stipulated.

9.6 Monitoring and Evaluation: CBOs/NGOs/SHGs/ other Organisations may also be engaged to conduct monitoring and evaluation surveys and PRAs specifically to determine key behavior and perception changes regarding sanitation, hygiene, water use, O&M, etc, either by themselves or as a partner to the GP. The S.O. can assist in Social Audits.

9.7 Selection of CBOs/ NGOs/ SHGs/ other Organisations: It has to be ensured that organisations of repute, good track record and experience in social sectors are engaged. They should be selected by a fair and transparent process based on competence, ability and capacity. Keeping in view the state specific requirements vis-à-vis prevailing situation, the eligibility or qualifying criteria should be defined. The agencies selected should have evidence based skill, specialization and experience in the desired field. Adequate resources need to be allocated, so that capacities of CSOs can be built, for enabling them to deliver effectively. Monitoring the performance of such organizations has to be done once every six months by the District Collector /Deputy Commissioner/Magistrate/CEO Zilla Panchayat and only those showing satisfactory results are to be retained. As these organizations shall be working at the GP and Block levels, it shall be the responsibility of the District Collector /Deputy Commissioner/Magistrate/CEO Zilla Panchayat to ensure the engagement and performance of these agencies.

9.8 These Organisations should work in the supervision of the DSBM(G) and the BPMU and in coordination with the district-level RALU. States shall choose such dedicated CBOs/NGOs/SHGs/other Organisations with a good track record following a transparent process. The work of these Organisations should be reviewed at least quarterly.

# 10. ROLE OF CORPORATE BODIES/PSU and CORPORATE SOCIAL RESPONSIBILITY

10.1 Corporate houses should be encouraged to participate in the SBM(G) as an essential part of the Corporate Social Responsibility (CSR). There is realisation that a healthy workforce can contribute towards better services for their output. The issues of getting popularity for marketing of their products and services or mere status also attract corporate houses towards taking up social causes and increasing interaction with people. Thus, SBM(G) can serve as a platform for the Corporate Houses to help address their CSR.

10.2 The Corporate/PSUs may take up the issues of sanitation through IEC, HRD or through direct targeted interventions such as:

- a) Establish demonstration fields / rural sanitation parks for exposure of various technology options available under SBM to the rural populace.
- b) Organise exhibitions / sanitation melas.
- c) Provide necessary exposure to the children in Schools about proper sanitation and hygiene
- Provide additional incentive to rural households in form of suitable sanitary materials or create sanitation facilities for the rural populace through appropriate local organisation
- e) Provide sanitary complexes in market or other public places / around work places or alike



- Provide assistance in effective Solid and Liquid
   Waste Management technology and resources
- g) Provide trained manpower for maintenance of sanitation facilities and/or SLWM establishments
- h) Propagate the programme through mass media and GP level interventions.
- Adopt habitations/villages/GPs to make them ODF

10.3 The MDWS has issued guidelines to facilitate the involvement of CSR resources in sanitation works. States can use these guidelines as a base to develop their own procedure to attract/receive and utilise CSR funds.

(http://mdws.gov.in/sites/upload\_files/ddws/files/pdfs/ Guide\_Line\_Sanitation\_CSR.pdf)

The MDWS has also enlisted 32 CBOs/NGOs services of which can be utilised for the CSR supported sanitation projects. State Swachh Bharat Mission (G) will have a dedicated person who will be responsible to solicit and process CSR projects in the State. At the district level, one consultant shall be identified to work on CSR projects with Corporates, Businesses, Funding agencies as well as Gram panchayats and Implementing CBOs/NGOs.

10.4 The MDWS will assist in coordinating the implementation of CSR projects in sanitation.

### **11. PROJECT FUNDING**

11.1 SBM(G) Component-Wise earmarking and funding pattern

S.N.	Component	Amount earmarked as percent of	Contribution Share		
		the SBM(G) project outlay	GOI	State	Beneficiary Household/ Community
a.	IEC, Start Up Activity and Capacity Building	Up to 8% of total project cost, with 3% to be utilized at the Central level and 5% at State level.	75%	25%	0%
b.	Revolving Fund	Up to 5%	80%	20%	0%
С.	(i) Individual Household Latrines	Actual amount required for full coverage	Rs.9,000 (75%) (Rs.10,800) (90%) in case of NE States, J&K and Special category States )	Rs.3000 (25%) (Rs. 1,200) (10%) in case of NE States, J&K and Special category States )	0%
	(ii) Community Sanitary Complexes	Actual amount required for full coverage	60%	30%	10%
f.	Administrative charges	Up to 2% of the project cost	75%	25%	0%
g.	Solid/Liquid Waste Management (Capital Cost)	Actual amount as per SLWM project cost within limits permitted	75%	25%	0%

No additional funding from any other Centrally Sponsored Scheme will be permitted.

## 12. ANNUAL IMPLEMENTATION PLAN (AIP)/ f) INCENTIVISING GOOD PERFORMANCE

12.1 The main objective of the Annual Implementation Plan (AIP) is to provide a definite direction to the programme for creation of Swachh Grams. It is also required to provide basis for monthly and quarterly monitoring of physical and financial progress during the course of the financial year vis-à-vis the planned activities.

Achievements against the AIPs shall be the basis to Incentivise States who perform well. Performances against the AIPs shall be evaluated and performances of States published on the MDWS website. A dashboard that ranks States periodically on a range of performance indicators would be prepared and shared with States.

12.2 The States AIP should include detailed sections on the planning, implementation, and sustainability phases.

The following information shall be required in the AIP:

- a) report on the progress made by the State in achieving the objectives of SBM(G) during the previous year against the AIP objectives;
- b) reasons and comments for variation, if any;
- c) a detailed plan of the IEC, triggering and capacity building activities proposed to be taken up in the ensuing financial year;
- a plan of activities with physical and financial estimates under each component of the SBM(G) for the proposed financial year with agreed time -lines. A summary of district level Plans is to be provided;
- e) Monthly Quarterly projected targets, so as to be able to monitor progress;

- Plans to ensure sustainability of the interventions made;
- g) Details of plans for monitoring and evaluation to be carried out at the State level;
- Write-ups of success stories, best practices, innovations introduced, new technologies used etc.

12.3 The AIPs for the District should be prepared by consulting the plans of the Gram Panchayats. These GP plans should be consolidated into Block Implementation Plans and further into the District Implementation Plan. The State Mission will suitably consolidate the District Implementation Plans as the State Implementation Plan.

12.4 There shall be a Plan Appraisal Committee (PAC) in the Ministry of Drinking Water and Sanitation, chaired by the Joint Secretary (Sanitation), with Principal Secretary i/c of Sanitation of the relevant State, the State SBM(G) Coordinator and the Director (Sanitation) in MDWS as members. The States/UTs shall prepare the AIP and submit the same before the commencement of the financial year on the basis of the balance works to be completed, to the Plan Approval Committee (PAC) in the MDWS. The proposed AIPs shall be discussed in the PAC and finalised with or without suggestions/ modifications. The final AIP shall be prepared by the States based on allocation of funds and forwarded to the Ministry within a fortnight of the discussions in the PAC and shall be put up to the NSSC for approval consequent to which it will be also be uploaded in the website through the online monitoring system. The recommendation of PAC for a financial year shall be valid for that financial year. Achievements in the AIP by the State in the preceding year shall be taken into account while finalising the AIP of the following year. States shall be permitted to prepare a supplementary



AIP during the year if the progress of the AIP is satisfactory and further achievements are considered possible.

12.5 AIP should be prepared following the conjoint approach highlighting comprehensive sanitation and water coverage on the basis of identification of Gram Panchayats. The enlistment of Gram Panchayats should be done in a manner such that all the Gram Panchayats in a Block/District are covered progressively so as to make the State "Swachh". The District AIP shall include details of IEC, IPC and Triggering exercise that will be taken up in the target GPs. The AIP budgeting should follow the cost norms of SBM(G) and should be compiled to project the financial demand of Central Share during the year.

#### 12.6 Incentivisation

12.6.1 States performing as per their plans will be incentivized. States achieving their targets prior to scheduled dates shall be further incentivized.

### 13. RELEASE OF FUNDS

## 13.1 Release from Centre to State level implementing body

13.1.1 The funds under SBM(G) will be released by the MDWS to the State Government accounts electronically as per directions of the Ministry of Finance issued from time-to-time. The State Governments shall release the funds to the State Swachh Bharat Mission (Gramin) {SSBM(G)} within 15 days of transfer of funds from Government of India. Any delay in such release shall lead to a penalty, i.e. a penal interest @12% p.a. for the delay. The SSBM(G) will operate a single Savings bank account in any Nationalized Bank or a bank authorized by the State Government, through which State Government funds are operated for all

transactions relating to SSBM(G) including Central share, State share, Beneficiary share or any other receipt. The details of the SSBM(G) bank account has to be communicated to MDWS along with the name of the bank, IFSC Code and A/c. No. etc. and should not be changed during the implementation of the project without prior permission of the MDWS. The funds released under the programme shall be through the Central Plan Scheme Monitoring System (CPSMS) of the Government of India.

13.1.2 On the basis of approved demand of States as decided in the AIP every year and the availability of funds at the national level, a national allocation to all the States will be worked out for release of funds in two installments. In all cases where the second installment has been released unconditionally during the preceding year, States will be eligible for automatic release of the 1st. installment during the financial year. Other States will be eligible for only 25% of the allocation. As per Ministry of Finance instructions, the fund released in the first installment shall be 50% of the amount approved in the PAC and shall be reduced by the amount of opening balance/unspent balance in excess of 10% of the previous year's release to the State.

13.1.3 The 2nd. installment of funds, as approved in AIP, will be released on fulfillment of the following conditions:

- Receipt of a specific proposal from the State/UT with recommendation of the State Government with district wise physical and financial progress reports;
- Annual Performance Report as required by MDWS from Time to time.
- Statement of Achievements of monthly/quarterly progress against the targets specified in the AIP;

- Commitment of the State to release of proportionate State share into the SWSM account within fifteen days of release of Central share;
- Utilization of 60% of the available funds with the SWSM i.e. opening balance, funds released as first installment of Grant-in-aid under SBM(G) during the year and interest earned thereon, Central Share and State Share separately ;
- Submission of Audited Statements of Accounts of the preceding financial year as per Annexure-II;
- Submission of Utilization Certificates for Central and State Share separately in the prescribed Performa as per Annexure-III duly signed by the Member Secretary of SWSM, for the preceding financial year;
- Any other condition(s) that may be specified by the Central Government from time to time.

13.1.4 Any further release of funds during the financial year including Incentives for good performance will be on the basis of production of necessary documents as may be required by the MDWS.

### 13.2 Release from State level to District level

13.2.1 The States/UTs shall release the Central grants received along with the matching State share to the District implementing agency/agencies {DSBM(G)} within 15 days of receipt of Central grants. SBM(G) funds released to the districts shall be on the basis of the District plans, the extent of demand generation in the district, the expenditure pattern and the balance funds. States shall enter the data of the transfer of funds to districts on the IMIS within 48 hours of the issue of such release order. States shall ensure the availability of funds in districts to ensure effective implementation of the programme.

13.2.2 In case the States fails to transfer funds (Central share and matching State share), to the districts within 15 days of receipt from the Government of India, a penal interest @12% p.a. for the delay, shall be required to be transferred by the State Government to the Implementing Agencies along with the principal amount of the fund.

13.2.3 Inter district transfer of funds made available under SBM(G) are allowed once during the financial year subject to the following:

- (a) Transfer of funds should be against changed physical targets (under AIP) in both districts,
   i.e. change in the fund availability in a district should reflect in the activities being taken up;
- (b) The transfer should be with prior approval of the Central Government:
- (c) Inter district transfer of funds, has to be reflected in IMIS of this Ministry by the State / District with 3 days of such transfer.

13.2.4 As the District is the unit of implementation of the program, funds for the implementation of the Programme shall be managed at the district level. The District Implementing Agency will transfer the funds for the various activities taken up, to the Gram Panchayat or any other agency which has carried out the activities including for the distribution of Incentives. The availability and utilisation of funds at the district level shall be monitored through the IMIS.

## 13.3. Interest earned on Funds Released under SBM(G)

13.3.1 The SBM(G) funds (Central and State) should be kept in a savings bank account. The household / beneficiary contribution, if any, need not be deposited in this account. The interest accrued on SBM(G) funds



shall be treated as part of the SBM(G) resource. The District Implementing Agency has to submit utilization of interest accrued on SBM(G) funds along with claim/s for subsequent installments and it should be reflected in the Utilization Certificates.

### 14. MONITORING

14.1 Effective Monitoring of the Programme is essential. Monitoring of Outcomes will be the prime focus to be measured in terms of Toilet usage as reflected in creation of ODF communities. Monitoring of Outputs will also be done for administrative purposes in terms of monitoring of expenditure and assets created. The Monitoring framework should be able to identify the following:

- Whether adequate IEC/IPC/Triggering activities have been carried out for behavior change;
- Whether toilets have been constructed as reported;
- Whether Constructed Toilets are being used;
- Whether ODF communities/GPs have been created;

14.2 The monitoring framework proposed will essentially be of 2 types:

- (i) Annual Monitoring Survey: This shall be through a process initiated at the national level, focusing on a 3rd Party independent monitoring of the sanitation status in rural areas across the country. Independent agencies shall take up such monitoring which shall conform to national and international requirements like the Joint Monitoring Programme (JMP).
- (ii) Concurrent monitoring: There shall be a concurrent monitoring of the implementation of the Programme, ideally using community level participation. This should ideally use Information

and Communications Technology (ICT), to feed data into the SBM (G) –MIS. The data of such monitoring shall be the main source of information for the Mission Directorates and the RALU at various levels.

Other monitoring activities in addition to the above may also be taken up.

14.3 The Swachh Bharat Mission (Gramin) at the national level, state Level and district level will have dedicated specialized Monitoring units constituting experts in the district which shall be responsible for monitoring the Mission activities which shall include Field level monitoring. Monitoring reports will be prepared by the unit every quarter. The Monitoring should be at GP/Cluster (where required)/Block and district levels.

14.4 Use of independent agencies/CSOs/NGOs for the concurrent monitoring of the programme is permitted. Central and State Missions may engage such agencies with experience in monitoring activities and having presence in the respective States, for this purpose. Independent 3rd party evaluations of the programme can also be carried out at Central and State levels. This is to be done by MDWS using Monitoring and Evaluation funds. At the State level upto 5% of the permissible expenditure in the Administrative component may be utilised for M&E activities.

# 15. MANAGEMENT INFORMATION SYSTEM (MIS) - REPORTS

15.1. The Ministry of Drinking Water and Sanitation has developed an online monitoring system for SBM(G). Household level data with respect to sanitation facilities of all Gram Panchayats in the country are to be made available on the MIS by States on the basis of the Baseline Survey 2012-13. States shall be permitted

to update the Baseline Survey status once a year in the month of March-April.

15.2 The main focus on the monitoring arrangements for the Mission is that of Toilet usage through creation of ODF Communities. The MIS shall be upgraded to enable reporting of creation of ODF communities and their sustenance.

15.3 All SBM(G) Project districts are to submit their physical and financial progress reports of the implementation of the Programme every month through this online MIS for which user-ids and passwords have been provided to States, Districts and Blocks. GP wise physical and financial progress for every month are to be entered alongwith photographs of the toilets in the SBM MIS, by the 10th of the following month by the Block or District level Sanitation Missions. A mobile based application for the same has been created in the IMIS to enable uploading of photos from site. The same has to be approved at the State level by the 15th of the month before it is forwarded by the MDWS. States shall be permitted to update the Baseline Survey status once a year in the month of March-April.

15.4 Monitoring of the SBM(G) project should be carried out at all levels. At the District level, the District Collector /Deputy Commissioner/Magistrate/CEO Zilla Panchayat shall review the progress of the Mission in each Gram Panchayat once in every fortnight. Similarly, Secretary in-charge of rural sanitation in the State must review progress with the District Officials on a monthly basis.

### 16. EVALUATION

16.1. The States/UTs should conduct Periodical Evaluation Studies on the implementation of the SBM(G) programme at the State level. Evaluation

studies may be conducted through reputed Institutions and Organizations as decided by the State. Copies of the reports of these evaluation studies conducted by the States/UTs should be furnished to the Government of India. Remedial action should be taken by the States/UTs on the basis of the observations made in these evaluation studies. The cost of such studies can be charged to the Administrative charges component of the SBM(G).

16.2 At the central level, the performance of the States under the Mission shall be evaluated from time to time through agencies of repute.

# 17. TECHNOLOGY and RESEARCH

17.1 The SBM(G) shall encourage suitable safe sanitation technologies for Toilets and Solid Liquid Waste Management Systems. The MDWS has a Committee for Suitable Technologies to examine technologies suitable for upscaling and implementation.

The Mission already has a list of minimal acceptable technologies for which assistance under this programme will be available. This will be updated from time to time. States can decide on technologies suitable for their areas. The beneficiary/communities shall also participate in the selection of technologies to be implemented.

17.2 Funding for research on all activities related to the Swachh Bharat Mission shall be available. Research Institutes, organizations and NGOs with proven track record in the areas of Sanitation and National / State level institutions involved in the research/studies related to the issue of Health, Hygiene, Water Supply and Sanitation should be involved to develop new technologies of human excreta and waste disposal systems in the rural areas. The research/study outcome



should enable improvement of technology, making it more affordable and environmentally safe to suit the requirements of different geo-hydrological conditions. This will encourage and promote ecologically sustainable long term solution for disposal of wastes. Research/study on latrine design, sustainable methods/ technologies for Solid and Liquid Waste Management in rural areas, appropriate technology to suit varying soil conditions, high water table situations, floods, water scarcity conditions, coastal areas will priorities. Ecological sanitation / on-site waste be management will be encouraged to prevent high costs of waste transportation and pollution of water bodies through discharge of untreated waste. Research on interventions like IEC, capacity building, and monitoring and evaluation will be permitted.

17.3 A Research and Development Approval Committee (RDAC) chaired by Secretary, and consisting of technical and non-technical members to be decided

by the MDWS from time to time shall examine all research proposals and accord approval, if found suitable.

17.4 States can also take up research proposals at their level under the Mission.

### 18. ANNUAL AUDIT

18.1 All audit requirements of the Government of India and the CAG as decided from time to time will be followed.

18.2 The SSBM(G) will ensure that the accounts are audited by a Chartered Accountant selected from a panel approved by the CAG, within six months of the close of the financial year in accordance with the General Financial Rules of the Government of India and submit the audited statement of accounts to the Ministry.

### Annexure – IA

# AUDIT REPORT [Consolidated Audit Report for SBM(G)]

Containing following points (documents) :-

- 1. Auditor's Report
- 2. Receipt & Payment Account.
- 3. Income & Expenditure Account
- 4. Balance sheet
- 5. Notes Forming Part of Accounts (Reporting about physical output)
- 6. Auditor's observations as 'Annex'

(In case of any observation, reply countersigned by Chartered Accountant is required)

Signature\_\_\_\_\_

Name in full\_\_\_\_\_

Office Stamp of competent authority of SWSM

Dated\_\_\_\_\_

N.B: All the documents should be in original & countersigned by Competent Authority of SWSM with official stamp.



### Annexure – I B

# **AUDITOR'S REPORT**

То

The State Swachh Bharat Mission Address

1. We have audited the attached 'Balance Sheet' of State Water and Sanitation Mission ('the Grantee') "Account – Swachh Bharat Mission (Gramin) (SBM(G))" as at March 31, 20\*\* and also the 'Income and Expenditure Account' and 'Receipts and Payment Account' for the year ended on that date annexed thereto. These financial statements are the responsibility of the Grantee's management. Our responsibility is to express an opinion on these financial statements based on our audit.

2. We conducted our audit in accordance with auditing standards generally accepted in India. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

- 3. Further to our comments in the Annexure referred to above, we report that:
- i. We have obtained all the information and explanations, which to the best of our knowledge and belief were necessary for the purposes of our audit;
- ii. In our opinion, proper books of account as required, have been kept by the Grantee so far as appears from our examination of those books;
- iii. The balance sheet, income and expenditure account and receipts and payment account dealt with by this report are in agreement with the books of account;
- iv. In our opinion, and to the best of our knowledge and according to the explanations given to us and subjects to our observations annexed herewith we report that :
  - a. The Balance Sheet, gives a true and correct view of the state and affairs of the Grantee "Account Swachh Bharat Mission (Gramin) (SBM(G))" as on 31.3.201\*.

#### Swachh Bharat Mission (Gramin)

- b. The Income and Expenditure Account gives a true and correct view of excess of income over expenditure for the period ended 31.03.201\*.
- c. The receipts and Payment Account gives a true and correct view of the transactions under the programme/ scheme for the period ended on 31.03.201\*.
- iv. Expenditure reported in the Income and Expenditure account is properly reflected in the Utilization Certificate(s) for the same period.

Signature of Chartered Accountant with Seal)

Name in full\_\_\_\_\_

Membership No.\_\_\_\_\_

CAG Empanelment No. & Year

Contact No.

E-mail ID:



# Audit Report for the year 201\*-1\*

### State Swachh Bharat Mission (Gramin)

Receipt & Payment Accounts for the period 1st April, 201\* to 31st March, 201\* Name of the scheme - Swachh Bharat Mission (Gramin) (SBM-G)

(₹ in lakhs)

Receipt	Amount	Payment	Amount
1. Opening Balance		1. Advances given to	
(i) Cash in Hand		(i) Implementing Agencies	
(ii) Cash at Bank		(ii) Any other agencies etc.	
(iii) Deposits at Division/Districts etc.		2. Expenditure incurred for the purpose of approved	
2. Receipt of Grants		work undertaken under (SBM-G):	
(i) Central Government		(i) IHHL	
(ii) State Government		(ii) Sanitary Complex	
(iii) Others		(iii) School Toilets^	
3. Interest received from Banks		(iv) Toilets for Anganwadi^	
(i) SWSM level		(v) SLWM	
(ii) DWSM/DWSC level		(vi) IEC etc.	
(iii) Others		3. Audit Fees	
4. Refund of Advance/ Loan/Grant from		4. Expenses on Administration	
(i) Implementing Agencies		a. Training	
(ii) Any other agencies etc.		b. Staff support services	
5. Miscellaneous		c. Monitoring and Evaluation	
		d. Printing and Stationery	
		e. Bank Charges	
		f. Rent and Taxes	
		5. Miscellaneous Expenses etc.	
		6. Closing Balance	
		(i) Cash in Hand	
		(ii) Cash at Bank	
		(iii) Deposits at Division/Districts etc.	

Signature of Competent Authority Name in full Office seal Contact No. E-mail ID:

(Signature of Chartered Accountant wit	h Seal)
Name in full	
Membership No	
CAG Empanelment No. & Year	
Contact No.	
E-mail ID:	

# Audit Report for the year 201\*-1\* State Swachh Bharat Mission (Gramin)\_\_\_\_\_

Income & Expenditure Accounts for the period 1st April, 201\* to 31st March, 201\* Name of the Scheme - Swachh Bharat Mission (Gramin) (SBM-G)

(₹ in lakhs)

Expenditure	Amount	Income	Amount
<ol> <li>Expenditure incurred for the purpose of approved work undertaken under (SBM-G):         <ol> <li>IHHL</li> <li>Sanitary Complex</li> <li>School Toilets</li> <li>Toilets for Anganwadi</li> <li>SLWM</li> <li>IEC etc.</li> </ol> </li> <li>Audit Fees</li> <li>Expenses on Administration         <ol> <li>Training</li> <li>Staff support services</li> <li>Monitoring and Evaluation</li> <li>Printing and Stationery</li> <li>Bank Charges</li> <li>Rent and Taxes</li> </ol> </li> <li>Miscellaneous Expenses etc.</li> <li>Excess of Income over Expenditure carried over to Balance Sheet.</li> </ol>		<ol> <li>Grants -in -Aid/Subsidy received From         <ul> <li>(a) Central Govt.</li> <li>(b) State Govt.</li> <li>(c) Other Agencies</li> </ul> </li> <li>Interest received during the year from the Bank Accounts         <ul> <li>Received during the year</li> <li>Add: Accrued during the year</li> <li>Less: related to previous year</li> </ul> </li> <li>Refund of unutilized grants by the Implementing Agencies</li> <li>Miscellaneous Receipts</li> <li>Excess Expenditure carried over to Balance sheet.</li> </ol>	

Signature of Competent Authority	(Signature of Chartered Accountant with Seal)
Name in full	Name in full
Office seal	Membership No
Contact No.	CAG Empanelment No. & Year
E-mail ID:	Contact No.
	E-mail ID:



# ANNEXURE – I E

# Audit Report for the year 201\*-1\* State Swachh Bharat Mission (Gramin)

Balance Sheet as on 31st March, 201\*

Name of the scheme - Swachh Bharat Mission (Gramin) (SBM-G)

(₹ in lakhs)

CAPITAL FUND AND LIABILITIES	Previous Year Amount	Current Year Amount
Accumulated Fund		
Opening Balance		
Add/Deduct		
Balance Transferred From Income & Expenditure Account		
Current Liabilities		
(i) Outstanding Expenses/Payables		
(ii) Any other Liability		
Total		
ASSETS		
Fixed Assets		
(i) Vehicles		
(ii) Furniture & fixtures		
(iii) Office Equipment		
(iv) Computers & Peripherals		
(v) Others etc.		
Current Assets & advances		
(i) Stock		
(ii) Temporary Transfer of Funds to other schemes recoverable		
(iii) Closing Balance		
(a) Cash in Hand		
(b) Cash at Bank		
(c) Account Receivables and Advances recoverable		
(i) Implementing Agencies		
(ii) Other Agencies		
(iii) Staff		
(iv) Suppliers etc.		
Total		
Signature of Competent Authority	(Signature of Charte	red Accountant with Seal)

Name in full Office seal Contact No. E-mail ID: (Signature of Chartered Accountant with Seal) Name in full\_\_\_\_\_ Membership No.\_\_\_\_ CAG Empanelment No. & Year Contact No. E-mail ID:

### Notes Forming part of the Accounts:

Physical Output under State Swachh Bharat Mission (Gramin) (SBM-G) for the utilized funds as reported in the Income and Expenditure Account:

Con	iponents	Performance/Number of Units constructed
١.	Individual Household Latrines – BPL/APL	
П.	Sanitary complex	
III.	School toilet units	
IV.	Anganwadi Toilets	
V.	Solid and Liquid Waste Management (SLWM)	
VI.	Rural Sanitary Mart	
VII.	Production Centers	

Signature of Competent Authority	(Signature of Chartered Accountant with Seal)
Name in full	Name in full
Office seal	Membership No
Contact No.	CAG Empanelment No. & Year
E-mail ID:	Contact No.
	E-mail ID:



### Swachh Bharat Mission (Gramin) (SBM - G)

YEAR 201\*-1\*

AUDITOR'S OBSERVATIONS

NAME OF THE ORGANISATION RECEIVING GRANTS :

SI. No.	ISSUES	Observations of the Auditor
1	Opening Balance & Closing Balance of the Receipts and Payments account tallies with that of Cash Book.	
2	Opening Balance adopted tallies with Closing Balance of the last year	
3	Whether grantee or other implementing agencies have diverted / inter-transferred funds from one scheme to another Central Scheme or State funded Scheme during the period in contravention to the existing guidelines? If so details thereof.	
4	Are there any mis-utilisation / unrelated expenditure and mis-appropriation of funds by the grantee or other implementing agencies during the year? If so details thereof.	
5	There is only prescribed number of bank accounts for the scheme	
6	There does not exist any minus balance at any stage during the year.	
7	Where the Sanction Order of the Ministry specifies certain conditions at the time of release of funds, whether the same has been fulfilled.	
8	Scheme funds are being kept only in savings account	
9	Interest earned has been added to the scheme fund	
10	Whether interest money is being utilized strictly for the programme purposes as laid down in the existing guidelines	
11	State share, as per programme guidelines, for the year has been received during the year	
12	All receipts / refunds have been correctly accounted for and remitted in to the Bank account of the scheme	
13	Scheme funds are not being kept in the State Treasury	
14	Bank Reconciliation is being done regularly	
15	Name and address of the previous Auditor.	

### Signature of Competent Authority

Name in full	Name in full
Office seal	Membership No
Contact No.	CAG Empanelment No. & Year
E-mail ID:	Contact No.
	E-mail ID:

(Signature of Chartered Accountant with Seal)

# **Utilization Certificate**

### State Swachh Bharat Mission (Gramin) (Name of State)

(Central Share / State Share)

Reference No.:

Date:

SI. No.	Letter No. and date	Amount	Certified that out of Rs of grants-in-aid
			sanctioned during the year in favour of State
			Swachh Bharat Mission (Gramin) (Name of State) vide
			Ministry of Drinking Water And Sanitation, Government of India
			Letter No. given in the margin and Rs on account of
			unspent balance with the District Swachh Bharat Missions
			(Gramin) (as per list attached) of the previous year, a sum
			of Rs has been utilized by the <b>District Swachh</b>
			Bharat Missions (Gramin) (as per list attached) for the
			purpose of approved work undertaken under Swachh Bharat
			Mission (Gramin), for which it was sanctioned and that the
			balance of Rs remaining unutilized with the <b>District</b>
			Swachh Bharat Missions (Gramin) (as per list attached)
			at the end of the year shall be carried forward to the next year
			for implementation of the programme.

# 2. Physical Output for the above utilized funds

Components	Performance/Number of Units constructed
Individual Household Latrines - BPL	
Individual Household Latrines – Identified APL	
Individual Household Latrines – Total APL	
Sanitary complex	
Schools Toilet Units	
Anganwadi Toilets	
Rural Sanitary Mart	
Production Centres	
Projects undertaken against Flexi-fund	



3. Certified that I have satisfied myself that the conditions on which the grants-in-aid was sanctioned have been duly fulfilled / are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

### Kinds of checks exercised

- 1. Audited Statement of Accounts of SSBM(G)
- 2. Audited Statement of Accounts of DSBM(G)s
- 3. Previous Utilisation Certificates
- 4. Physical Verification Reports
- 5. Review Mission Reports
- 6. Any other document/check

Countersigned by Member Secretary (SWSM)

Signature
Name
Designation
(Chairman SSBM(G)
Date

(affix official seal)

# STATE SWACHH BHARAT MISSION GRAMIN (SSBM- G)

### CHECKLIST for submitting proposal for Release of funds under SSBM (G)

S. No.	Documents Utilization Certificates in original for previous year separately for	Whether enclosed/ fulfilled (Please tick)	
1.			
	a) Central funds	Yes	No
	b) State funds	yes	No
2.	a) Utilization Certificates has file reference	Yes	No
	b) Signed by Chairman and Member Secretary (SWSM)	Yes	No
	c) Countersigned by the Principal Secretary/ Secretary of the concerned Department	Yes	No
	d) With official Seal	Yes	No
	e) Name, Designation, contact number, e-mail IDs of the signatories	Yes	No
3.	Certificate to the effect that the districts have utilized 60% of total available resources.	Yes	No
4.	Audit Report/ Audited Statement of Accounts as per prescribed format for the previous year has been submitted.	Yes	No
5.	If audited by Chartered Accountant, he is a CAG empanelled Chartered Accountant	Yes	No
6.	Copy of the letter issued by O/o CAG has been furnished in support of empanelment	Yes	No
7.	The figures in UCs are in agreement with Audit Report		
	a) Grants	Yes	No
	b) Expenditure	Yes	No
	c) Opening/ Closing Balance	Yes	No
8.	If not, clarifications have been given for the variations	Yes	No
9.	Action taken Report on the observations made by the Auditor in the Audit Report after getting it vetted by the Auditor has been furnished.	Yes	No
10.	The State matching share has been released.	Yes	No
11.	Review Mission Report from all districts have been received by State	Yes	No



Annexure - IV

# Publications of Government of India / Ministry of Drinking Water and Sanitation for reference

SI. No	Reference
1.	Handbook on Technical Options for On Site Sanitation
2.	Technical options for Solid and Liquid Waste Management in rural areas
3.	Handbook on Scaling up Solid and Liquid Waste Management in Rural Areas
4.	Sanitation and Hygiene Communication Strategy 2012
5.	Gram Panchayat Handbook
6.	Establishment and Management of Community Sanitary Complexes in Rural Areas
7.	Swachhata Doot guidelines 2011
8.	Framework for Solid and Liquid Waste Management
9.	Guidelines on Solid and Liquid Waste Management (SLWM) in Rural Areas 2014

For any further information contact:

# Ministry of Drinking Water and Sanitation Government of India

4th Floor, Paryavaran Bhawan, CGO Complex Lodhi Road, New Delhi-110003 Phone: 011-24362705; Fax: 011-24361062 E-Mail: js.tsc@nic.in Website: www.mdws.nic.in