

Centralized medical procurement going to be a reality soon?

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In last few years, there has been much talk about rooting out corruption and eliminating discrepancies in the system of procurement of medical equipments and medicines. Now after lot of dilly-dallying on the issue, the union health ministry has at last set up a Central Procurement Agency (CPA) under the Societies Registration Act, 1860, in the name of Central Medical Services Society (CMSS).

CMSS has been constituted as a Central Procurement Agency under Department of Health and Family Welfare. The society will be responsible for procuring goods and store them in warehouses across the country for distribution to state governments for many national level projects. However, the agency that was expected to start functioning in the financial year 2012-13, has not been able to start its operation so far. As per sources, the tenders for the medical equipements and vaccines will be out by October, 2014 and by April, 2015, the taking over of entire government spply procurements would be complete.

The society was recently looking for professionals at middle management level to support the ongoing efforts for having an efficient system in place, and has openings for assistant general manager (drugs procurement), assistant general manager (quality assurance), and assistant general manager (logistics).

On October 3, 2011 the union cabinet had approved the health ministry's proposal to create a fully autonomous agency under the ministry of health as a Society under the Societies Registration Act, 1860 for efficient procurement and distribution of drugs for the health sector in the country. Subsequently, the CMSS was registered on March 22, 2012. The cabinet had also approved a one-time budgetary support of Rs 50 crore to establish the agency. The cabinet had also approved the creation of one post of the chief executive officer (CEO) for the agency of the rank of the Joint Secretary to government of India.

Currently the procurement of drugs, vaccines, contraceptives and medical equipments is done departmentally by the health ministry and through agents for its various disease control programmes. But the deficiencies, such as lack of professional expertise, absence of supply chain management system, manual collection of data and absence of any credible Management Information System (MIS) have been adversely affecting the system.