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Title: Discussion on the motion for consideration of the Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry Bill, 2008.

MR. DEPUTY SPEAKER: Now, we take item no. 26 – Shri Anbumani Ramadoss.

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): Sir, the Jawaharlal Institute of Post-Graduate Medical Education and Research (JIPMER) was established in 1964 along with institutions like AIIMS, PGI, and MER with the primary objective of developing pattern of teaching in under-graduate and post-graduate medical education and to establish and demonstrate high standards in education. However, due to constraints in the process of manpower selection, lack of academic autonomy, and lack of flexibility in administrative and financial matters, JIPMER could not grow. Even at the time of establishing JIPMER, there was a demand for establishing the same through an Act of Parliament. During the last three years, number of new projects like establishment of super-specialty blocks, trauma care centres, dedicated oncology blocks, nursing college, etc. have been sanctioned.

The Government is also in the process of sanctioning of expansion projects like the MCH block, expansion of super specialty block, etc. Without the required technical manpower, the actual benefit of the upgradation of the Institute will not be available to the common man.

The Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry Bill, 2008, which was passed by the Rajya Sabha on the 23rd of April, 2008 will empower the Institute with academic autonomy, develop its own curriculum, set new trends in medical education, and to award its own degrees and also research purposes. It will also provide the Institute the required flexibility in manpower selection, particularly the faculty members who are now recruited through the Union Public Service Commission, as a part of the Central Health Service.

I beg to move:*

"That the Bill to declare the Institution known as the Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry, to be an institution of national importance and to provide for its incorporation and matters connected therewith, as passed by Rajya Sabha, be taken into consideration."

MR. DEPUTY SPEAKER: Motion moved:

"That the Bill to declare the Institution known as the Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry, to be an institution of national importance and to provide for its incorporation and matters connected therewith, as passed by Rajya Sabha, be taken into consideration."

* Moved with the recommendation of the President.

SHRI KIREN RIJIJU (ARUNACHAL WEST): Mr. Deputy-Speaker, Sir, I rise to take part in a very important Bill – Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry Bill, 2008.

Before I speak on the Bill, I would like to recall that JIPMER, Puducherry is a very important Institute for the people of my Region, North-East because a lot of brilliant doctors had been passed out from this Institute. I keep this Institution in very high esteem, and today, on this occasion, I would like to submit a few points.

Sir, JIPMER began as Friends Medical Hospital which was known for quality medicine and with the *de jure* transfer of Puducherry to India, the Institute came directly under the administration of the Director-General of Health Services, Government of India. Now, we are looking towards the autonomy of the Institution so that the administrative problems and the problems of the staff of JIPMER, which they are facing for a long time, can be resolved. I believe, the hon. Minister is doing something in this direction, and this Bill will go a long way in solving the problems.

JIPMER, AIIMS and PGI, Chandigarh were established together. But if you see the budgetary allocation, last year JIPMER got the annual budget of Rs. 56 crore whereas AIIMS got the annual budget of Rs. 300 crore.[\[H34\]](#)

15.00 hrs.

The AIIMS is a very important institution, all know it. But at the same time, the Jawaharlal Institute of Postgraduate Medical Education and Research (JIPMER) is a symbol of an institution in the South India, which should be treated at par with the AIIMS, if not more; and the focus should be given equally for all the institutions. Today, with the objective of making it as an institution of national importance, I believe the financial allocations from now onwards for JIPMER would be in lines with the category of the AIIMS.

Sir, one of the important things, which we come to know, is that the infrastructure of JIPMER, the hardware, is not up to the mark. The entire infrastructure, which we see in JIPMER, is very old. Introduction of new equipment, new laboratories, new classrooms, strengthening of the medical students, etc., require modern infrastructural facilities for JIPMER, which is not visible today. I hope that with the intervention of the Central Government, definitely, something concrete would come up and this institution would continue serving the people of the country in a better way.

I have also interacted with some of the passed out students, who are doctors now as well as the present students. The ward orderly and the nursing staff, I believe, are to be recruited on a contractual basis on the lines of the AIIMS. The main problem is being faced by the interns. Some of the interns have to push the trolleys themselves; they have to carry the blood samples from laboratories, classrooms and all around. The behaviour of the ward orderly is very casual.

SHRI TATHAGATA SATPATHY (DHENKANAL): Yes, it is the practical problem being faced by the interns. It is the interns, who do it.

SHRI KIREN RIJIJU : So, the encouragement, which should be coming from the Government, is to give more autonomy. The institute should be given the powers to decide themselves in hiring the people on contractual basis so that the performance of the staff could be assessed properly. They should be allowed to decide as to who should be working, who should be brought under contractual service, and who should be discharged on the basis of the failure to their duties. All these things are possible only if a true and genuine autonomy is granted to the institution. Otherwise, it is a very long time taking process. Even for appointment of a clerk, you have to take permission from the Director-General, Health Services, and the Government of India, which takes a long time. When we are working on granting of giving autonomy to all the major institutions in the country, it should be considered to give greater autonomy to JIPMER also.

Now, taking opportunity of this occasion -- I think, we have requested the hon. Minister many a time before -- I am coming to our traditional medicine system. One of the important and long pending demands is the recognition of Sawa Rigpa Chikista Paddati, which is also known as Amchi system under the Indian System of Medicines. Now, you have recognized AYUSH -- Ayurveda, Yoga, Unani, Siddha and Homeopathy. My suggestion is that within the AYUSH, we may add one more S for Sawa Rigpa, just below S meant for Siddha. I feel that the recognition of Sawa Rigpa is very necessary because it spread in the entire region of Himalaya and it goes right up to far Eastern countries. The origin of this system of medicine is India, but it is not being recognized in this country whereas it is being widely recognized elsewhere! China is even patenting this system of medicine. Now, people believe that it is their system of medicine, whereas the fact is that it belongs to India. It is our property. [\[r35\]](#)

It satisfies all the conditions for recognition. The system has its own fundamental principles of health and diseases and a very comprehensive health care system. If you go by the literature also, it satisfies all the conditions you have stipulated. It has its literature on the concept and diagnosis management of the diseases. It is an indigenous system with unique base of modalities. This system is today also used and practised as health care system in remote areas of Himalayan region as *amchi* system from Ladakh to my State, Arunachal Pradesh. Today we see that the western world is also looking towards this traditional system because modern allopathy system has lot of side effects. This *sawarikpa* system, *amchi* system has its own richness and that is a good reason why the western people are reposing more faith in this system of medicine. The only thing is that it requires recognition from our own Government, the Government of India. It is not coming forward. I feel that the Health Minister is a very knowledgeable person of this field and is seized of the matter. Hon. Speaker also appreciated the hon. Minister on many occasions as a very knowledgeable Health Minister, but I cannot appreciate it as long as he is not fulfilling my demand or concern of the members. My compliment will come, but it depends on how the Minister acts on my request.

We do not have a medical university in my State, Arunachal Pradesh. We have one homeopathy institute in Arunachal Pradesh, Arunachal Pradesh Homeopathy Institute which has been included under Rajiv Gandhi Central University, but they are not issuing permanent registration because this Institute is not included in the Second Schedule of Central Council of Homeopathy Act, 1973. I think, the matter is on the table of the hon. Minister. I am going to meet him, but since I have got this opportunity to speak today, I would request the hon. Minister to kindly see that those students who have passed during the last two years, are recognised as doctors. They have all the requisite qualifications, but they are not called doctors for want of inclusion of this Institute in the Second Schedule of Central council of Homeopathy Act, 1973. If he issues an order immediately or makes an immediate intervention, this problem can be solved.

Since the hon. Minister comes from South India and I come from the far North-East, we have to have proper coordination. I had raised one matter last month regarding the NEIGRIHMS, Shillong. When NEIGRIHMS was contemplated by hon. former Prime Minister, late Rajiv Gandhi, the objective was that it should be a premier medical institute in the North-East at par with AIIMS. It got delayed due to various reasons, but during the NDA time, it was realised and now it has been established. There were some controversies which I will not go into. The hon. Minister knows about it and I had also raised this matter. I am getting a lot of memoranda and lot of complaints from the people in that area, but I have not played politics on that line. I could have raised it on many platforms, but I do not want to do politics on that very important institute. I believe, the Health Minister will understand the whole affair. I am not against any kind of linkage with any institute in South India, but we must see that the poor patients of North-East are not required to travel to South India. Travelling to South India does not mean anything, but it is a very costly affair. That is the problem which we can solve where the intervention of the hon. Minister is required so that the people of North-East can be treated in the North-East itself.

I know that South India is very advanced in medical system. So, the expertise in, and advancement of, the Institute in South India can definitely come to our rescue. The hon. Minister himself hailing from the South India will definitely give a big boost to this effort, without undermining my sentiment and the sentiments of the people. There is something on the line of outsourcing. NEIGRIHMS has been outsourced from South India. [\[ss36\]](#) This kind of misconception that has crept into the mind should not really come forward.

Mr. Deputy-Speaker, Sir, I had some more points to mention, but I believe that I should not take much time. Therefore, I thank you for allowing me to speak on this very important topic. Thank you.

SHRI S.K. KHARVENTHAN (PALANI): Thank you, Sir. First of all, I want to congratulate and appreciate our hon. Health Minister, Dr. Anbumani Ramadoss, for bringing this landmark Bill to upgrade the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) into a National-level institute like AIIMS.

I want to congratulate our hon. Minister for introducing reservation in All-India Common Medical Entrance Examination before I

discuss about the provisions in the Bill. He has taken a step after 14 years, and given reservation for SC & ST students. He has also given a very good scheme to this country under the guidance of our hon. Prime Minister, namely, the National Rural Health Mission. In the same manner, he has brought this Bill before this august House.

First of all, I want to mention about the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER), Pondicherry. This is one of the premier medical college and hospitals in India. The origin of the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) can be traced to 1823 when a medical school called "Ecole de Medicine de Pondichery" was established by the French Government. After Pondicherry's transfer to India, the Government of India took over the medical college in the year 1956.

The medical college was upgraded as a Regional Centre on 13 July 1964, and it was christened as the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER). The hospital is under the direct administrative control of Directorate General of Health Services (DGHS), Ministry of Health and Family Welfare, Government of India. The institute is affiliated to Pondicherry University, and they conduct a number of medical and paramedical courses. The Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) is having Under Graduate, Post Graduate as well as Ph. D. courses.

Recently, a survey was conducted by NDTV, during the year 2007, and they have given the ranking of medical colleges throughout the country. The first place is occupied by AIIMS, New Delhi, which is under the Government of India; second place is occupied by Christian Medical College (CMC), Vellore -- which is a private institution run by Christian Missionary; and the third place is occupied by the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER), Pondicherry, and it is also with the Government. A large number of people -- not only from India, but from all the Asian countries -- come to these hospitals, particularly, the CMC hospital and the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER).

I want to mention about the medical education in this country before mentioning about certain provisions of this Bill. As compared to the medical education throughout the world, the Indian medical education attracts a number of countries and students. We are also getting a large number of NRIs coming to join and educate themselves in one of the best medical colleges in India, namely, the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER).

Medical education in India is also given important consideration from international point of view. The Medical Council of India controls medical education in India. The universities and colleges in all the States -- that give medical education -- are monitored and timely inspected by the Medical Council of India every year. They allow colleges and universities to grant MBBS, MS, MD, BDS or any graduate or post-graduate degree or diploma provided those colleges are strictly adhering to the standards set by the Medical Council of India.

There is a provision in this Bill itself that after upgrading this institute they are going to start a medical college, nursing college, dental college and also Rural Health Centres. I think that it is clearly mentioned in its provisions.[\[37\]](#)

Institutions like AIIMS and JIMPER starting new medical colleges is a welcome move. However, with the permission of the Medical Council of India, private medical colleges are coming up everywhere in the country. It is not possible for a poor student to get admission in any of those colleges. If a poor student gets a good rank in the entrance examination, he can get admission into these colleges without having to pay any capitation fee. Otherwise, only children of rich people can afford to go to these medical colleges. There is one medical college in Tamil Nadu which is offering a seat for MBBS plus MD course and MBBS plus MS course, on payment of Rs.1 crore. On payment of Rs.1 crore, a student can study both the courses in seven years. So, medical education has become a saleable product in the market. Some private medical colleges involved in this kind business have been set up even without having any infrastructure facilities, without any proper laboratories, without sufficient faculty members, without proper library and other facilities.

A large number of girls from Kerala and Tamil Nadu go to the Gulf countries and the European countries after coming out of the nursing colleges. What is the position of the nursing colleges in the country? In my village Dharapuram there is a nursing college. There are no infrastructure facilities there. There is no teacher. Nothing is there. After this Bill is passed, JIPMER would be starting a medical college and nursing college. It is a welcome step taken by our Government and the hon. Minister.

Further, I want to mention certain points with regard to the Bill.

SHRI C.K. CHANDRAPPAN (TRICHUR): Sir, the hon. Member is raising a very important issue that these institutions are being approved without any infrastructure.

MR. DEPUTY-SPEAKER: Without even the teachers.

SHRI C.K. CHANDRAPPAN : There are medical institutions working in our country without any infrastructure.

MR. DEPUTY-SPEAKER: It is happening not only Kerala but in other parts of the country also.

SHRI C.K. CHANDRAPPAN : I think the Minister will give an answer to this point. How do they work? It is happening all over the country. It is a state of anarchy.

SHRI S.K. KHARVENTHAN : All medical colleges are controlled by the Medical Council of India. All nursing colleges are controlled by the Nursing Council. Dental colleges are monitored by Dental Council. Each Council has its Chairman, Vice-Chairman, and Members. They have their own inspection teams. The Nursing Council sends a team to inspect a college before extending the approval of affiliation. The team gives a negative report and says that that institution should not be approved. However, the approval is still given. If this is the situation, what is the purpose of having that Council?

Our girls are going abroad and working. They expect a very good service from Malayalee and Tamil Nadu girls in the European countries. How can this kind of a mushroom growth of institutions provide good education? This is a pathetic situation in the country. To avoid all these things, I humbly request the hon. Minister that instead of starting a medical college by this Institute, JIPMER, instead of starting a nursing college, instead of starting a dental college, a number of medical colleges, a number of dental colleges, a number of nursing colleges should be started by this Institute. This is my humble request.

Clause 5(1) of the Bill deals with the composition of the Institute. Clause 5(1)(k) says that three Members of Parliament of whom two shall be elected from among themselves by the Members of the House of People and one from among themselves by the Members of the Council of States. There is another provision under Clause 8 which says that the President and other Members shall receive such allowance from the Institute as may be prescribed.

We are aware of the problem of office of profit that has come up in the last couple of years. I would like to know whether a Member of either Rajya Sabha or Lok Sabha who is nominated as a member of this Institute and draw allowances from this Institute will attract the provisions of the office of profit law. That provision has to be clarified.[\[KMR38\]](#)

Another important thing is the provision of Clause 6(b), which is dealing about the out-going Member –an out-going member shall be eligible for re-nomination or re-election. The period of this Committee is five years. Each Member serves for a period of five years. If a Member is renominated for five years and then again for five years, it would spoil the institution. If a Member sits there for 10 years or 15 years, it would yield a good result. For example, in all the universities, syndicate member is nominated for a maximum of two term. Even I was a syndicate member in Ambedkar Law Institute only for two terms. I was not eligible for the third term. Whether he is an ex-officio member or elected member or nominated member, this provision has to be changed. For how many terms an out-going member shall be eligible for re-nomination or re-election? Whether it is for two terms or three terms or 10 years or 15 years? This has to be clarified. Otherwise, we must make a provision that a member can continue for 15 years or 20 years.

Another important thing is the objects of the institute – it is clause 12. The object is to develop patterns of teaching in undergraduate and postgraduate medical education in all its branches so as to demonstrate a high standard of medical education. As earlier mentioned by me, this Institute is going to give a very good medical education for the students. While doing so, the Government has to take steps to appoint necessary teaching faculty who are of international standards. Not only satisfying the local norms, we have to develop our youth. For example, if you go anywhere in the USA, our Orthopaedic Surgeons are welcomed by the foreigners and giving importance to our young doctors. So, we have to develop our youth in such a fashion. Faculty members and others who are appointed should have good qualification.

In the same manner, clause 13 deals about the medical college, nursing college and dental colleges, about which I submitted earlier, and I reiterate that a number of institutes have to be opened. Very important step taken through this Bill is welcome, which is clause 13(f)(v) – about rural and urban health organisations. Our Minister is very much interested in the National Rural Health Mission. After the introduction of the National Rural Health Mission, huge allocation has been made. Even in the constituency of each Member of Parliament, three hospitals are selected. They are also conducting Mega Health Care, inviting all people and providing very good and valuable service. Likewise, under JIPMER, it would render very valuable service to the rural people in the medical field.

Furthermore, clause 13(g) deals with training the teachers from different medical colleges in India. It is a very good step. At present, there is no such facility exclusively to teach the teachers. For example, after the assumption of office by the UPA Government, a National Judicial Academy at Bhopal was constituted, which is a unique institute in this country. We are calling the sub-ordinate Judiciary; we are making all arrangements, including accommodation; they are staying for a week; and judicial officers are given very good training. Likewise, a separate block should be opened in the JIPMER and all facilities should be provided; doctors and teachers from various fields should be invited; and training should be given. This is a very good proposal brought by the Government.

Another clause 13 (m) deals with reservation, at least 20 seats out of every 75 seats in undergraduate courses in the Institute for local applications. Previously, there was no such facility in JIPMER. It is a new proposal. It is a welcome step. For each 75 students, they are going to select 20 students, which would help the local people, the Puducherry people. Poor people and downtrodden would get admission in the Institute. As per this sub-clause, at least 20 seats out of every 70 seats are reserved. [\[r39\]](#)

If the number of seats is increased from 75 to 150, automatically the seats under reservation have to be increased from 20 to 40. If number of seats is increased, the seats under reservation accordingly should be increased. This is my humble submission.

With respect to the fee structure, I would say this. The national level institutes like IIMs and IITs are getting huge fees. JIPMER is getting very meagre amount as fees. After developing this as a national Institute, the fee structure should not be changed. Normal fee has to be collected. Then only we can give good service for the sake of education to the people from poor and downtrodden classes.

One or two persons every day are coming to us and getting letters for admission into JIPMER for treatment because it is giving the best treatment and free treatment. People from all parts, not only from South India, but also from the North and the East like Kolkata and Assam, are coming to JIPMER for treatment, as they go to Vellore Medical College and others, particularly for heart surgery and kidney transplantation. It gives very good treatment and cheap treatment. So, the medical expenses should not be increased even after making it as a national Institute. They are going to start medical colleges, dental colleges and nursing colleges. They also should be run at reasonable rates. It should not be increased; then only it will help the poor people of this country.

With respect to C&D employees, I would say this. Previously this Bill was taken up in the Rajya Sabha a few months back and Members discussed about the C&D employees; the local people agitated; and they are protected under 28 (1); and so, the C&D employees' rights are protected under that.

Considering all these things, it is a very welcome step taken by our Government and particularly by Dr. Anbumani Ramadoss; he, being a doctor himself, is doing a lot of social service and he knows the mood of the people of this country. He has brought forward a very valuable Bill before the august House. I fully support and welcome this Bill. Thank you.

DR. RAM CHANDRA DOME (BIRBHUM): Thank you. I rise to support this Bill, namely, the Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry Bill, 2008.

At the outset, I must congratulate the Minister, Dr. Anbumani Ramadoss, my good friend, for bringing such a good legislation to make the pioneer Institute in the South, an autonomous Institute, for the overall improvement of teaching, training, research and medical services there.

Being a member of the Standing Committee on Health and Family Welfare, we have examined this Bill thoroughly and we have visited that place also. We have taken evidence of all the stakeholders. At that time, there was a storm, out of some genuine apprehensions among the section of doctors, faculty members, paramedics, staff and local people; and there was a great agitation against awarding of autonomous status to this Institute. But we, the members of the Standing Committee, unanimously have taken evidence of all stakeholders. We appreciated the ground realities there, with proper understanding of the problems. The Standing Committee unanimously recommended proper amendments to this Bill, taking into consideration all those representations. [\[MSOffice40\]](#)

Sir, I am happy that the hon. Minister and the Government ultimately have accepted all the major amendments and have incorporated them in the revised Bill. Altogether, 34 amendments have been accepted by the Government. That is a welcome

decision. I believe, with these amendments the Bill has been enriched and has become very purposeful. Definitely, these amendments have improved the very objective of this Bill.

Sir, giving autonomy to the institute is a very noble mission because it has been suffering from a number of constraints like funds, lack of faculty and a number of other constraints. Without proper autonomy and decision making authority, the main objective of giving training, research and medi-care services to the people was hampered a lot. I believe with this legislation majority of those constraints will be removed and this institute will become a pioneer institute and also become an equivalent institute to the other autonomous Central institutes of our country

Sir, apprehensions of the people were genuine so far as medi-care services were concerned. Poor people were getting these services free of cost or at a very affordable price. Their apprehension was that they will miss this opportunity once the institute would get autonomy. Local faculty members are also very much apprehensive of their career prospects. Other paramedical staff also has some apprehension with regard to their transfer, posting and promotion. But all these things have been taken care of in this amendment Bill. This Bill has been unanimously passed by the Rajya Sabha after incorporating a number of amendments.

A provision has been made with regard to local students getting admission in the undergraduate courses. Against an intake of 75 students, 20 seats have been reserved for them. I am very happy about it. Our Standing Committee had also made recommendations on this issue. I would like to request that this should be extended to the postgraduate course also. The service conditions of local staff, particularly their pension should be taken care of. They should be given protection in this regard so that they are not deprived of any opportunity so far as their promotion or gradation is concerned.

Nowadays, adequate autonomy for such institutes is very much required but awarding autonomy alone is not enough. Financial support in terms of budgetary allocation should also be taken care of because that is much more important and the institute also deserves so. [\[R41\]](#) That is why, I propose much more financial allocation should be provided for this in the current Budget.

In our Committee, when we examined the status of faculty position, we found that it was in a very bad condition. In the farthest end of our country, quality faculty members are not interested to go and many of the faculty positions are remaining vacant for a long time, thereby hampering teaching, research and training of the Institute. This part should be taken care of. These vacant posts of faculty members should be filled immediately for serving the interest of teaching, training and research.

Similarly, in other grades like nursing staff and para-medical staff etc. also there are many vacant posts for a long time thereby causing difficulties in rendering services to people. This part should be taken care of immediately and vacant posts should be filled up.

The students were very much apprehensive that after getting autonomous status, the fee structure may go up, thereby depriving the poor students of getting quality education. We recommended from our Committee on this point that the fee structure should not be such that poor students cannot afford studies. That part has been taken care of by this Bill. I am really happy on this issue.

While speaking on this Bill, I must point out some other ills which are prevailing in our pioneer Central Government institutes in our country like All India Institute of Medical Sciences, Post Graduate Institute of Medical Education and Research, Chandigarh and other central institutes. Our recent experiences are not very good particularly in regard to the pioneer institute like AIIMS situated in our national capital. In all respects this is a prestigious and noble Institute and at the same time this Institute is enjoying much more patronisation from the Central Government. But even then, there are so many ills in this Institute in respect of teaching, training, treatment rendered to the poor patients and moreover in research works. These are not satisfactory at all. Is it what we expected after investing so much budgetary allocation in this Institute? Even after that, ills are there. My suggestion to the Minister is to take particular care of this so that the prestige of this Institute could be maintained.

The upgradation programme of some medical colleges of our country up to the level of AIIMS is proposed by the Department. Though this programme has been taken up for the last few years yet the progress of work is not at all satisfactory. [\[R42\]](#)

The Budget allocation is not adequate. That is why the Government should take urgent steps to fulfil this commitment.

Sir, my next point is about opening of new medical colleges. Many of my colleagues here have mentioned about this point and it is a fact that it is a difficult task. These days, particularly at the backdrop of privatisation, liberalisation and globalisation, the poor people have become a victim of this era. The State Governments are very much constrained to open new medical colleges on their own, but if the Government would deny its responsibility to open new medical colleges, then who else will open? Is it the corporate sector? Rampant corporatisation of the education and health sector has disastrous consequences all over the country. There is no social control. These are very sensitive and vital sectors. The corporate sector is benefiting out of these two sectors. They only have a profit motive. Quality of both education and health services are not maintained. There is no one look after this

aspect. A definite social control should be brought about in these matters by way of legislation to contain mushrooming of private medical colleges. On the contrary, the Government should take the responsibility of opening new medical colleges. The Central Government should help the State Governments. There is uneven development. It is a big country. The poorer States are unable to open medical colleges. The private sector is not willing to go to the remote areas to open medical colleges. This cannot be allowed to go on. There should be a rational policy and the Government cannot deny their responsibility in these vital sectors. Therefore, I would like to urge upon the Government to re-assess their policy so that these anomalies and issues of uneven development are redressed without any further loss of time.

Sir, my next point is about vaccination. Children are vaccinated as a preventive measure from diseases. The Government talks about universal immunisation. But vaccines are produced in other countries. There are three very eminent vaccine producing laboratories in our country. One is the Pasteur Institute, the other one is at Kanur in Kerala; another in Kasauli in Himachal Pradesh. But recently the Government has ordered to suspend their production. We do not know the reason. It is very unfortunate. I urge upon the Government for restoration of the activities of these institutes by reversing their order.

MR. DEPUTY-SPEAKER: You have two more Members to speak from your Party. You may conclude now.

DR. RAM CHANDRA DOME : Sir, with these words, I conclude my speech. I support the Bill.

श्री शैलेन्द्र कुमार (चायल) : माननीय उपाध्यक्ष जी, जवाहर लाल नेहरू स्नातकोत्तर आयुर्विज्ञान शिक्षा संस्थान पुडुचेरी विधेयक, 2008 पर बोलने के लिए मैं खड़ा हुआ हूँ। इस विधेयक का समर्थन करते हुए कुछ अपनी बातें मैं कहना चाहूँगा। जैसा कि सर्वविदित है कि भारत के संविधान में यह उल्लिखित है कि सभी को शिक्षा, स्वास्थ्य और रोजगार की व्यवस्था होनी चाहिए। मुझे याद है कि डाक्टर राम मनोहर लोहिया जी ने कहा था, उनका नारा था कि रोटी, कपड़ा सस्ती हो और दवा, पढ़ाई मुफ़ती हो। इस नारे पर अमल करने की अगर सही मायने में किसी ने शुरुआत की थी, तो वह उत्तर प्रदेश से हुयी थी, तत्कालीन मुलायम सिंह जी की सरकार में इसकी शुरुआत हुयी थी। यह विधेयक सदन में प्रस्तुत किया गया है और एम्स की तर्ज पर, अखिल भारतीय आयुर्विज्ञान संस्थान, नयी दिल्ली की तर्ज पर यह संस्थान खोलने वाला विधेयक है। आप एक राष्ट्रीय महत्व की संस्था बनाने जा रहे हैं।

15.46 hrs. (Shri Devendra Prasad Yadav *in the Chair*)

मैंने इसमें पढ़ा कि माननीय स्वास्थ्य मंत्री, भारत सरकार इसके अध्यक्ष होंगे, भारत सरकार के सचिव पदेन सदस्य, पुडुचेरी विश्वविद्यालय के माननीय कुलापति जी इसके पदेन सदस्य होंगे और प्रदेश के मुख्य सचिव भी इसके सदस्य होंगे। इसके साथ ही साथ इस सदन से भी दो माननीय संसद सदस्य और एक सदस्य का राज्य सभा से निर्वाचन इसमें होना है। यह बहुत ही अच्छी बात है। ये जितने पदाधिकारी हैं या डायरेक्टर्स आफ बोर्ड के मेंबर्स हैं, इनसे संस्थान को काफी बल मिलेगा।

सभापति महोदय, मैं आपका ध्यान आकर्षित करना चाहूँगा कि इसी तर्ज पर उत्तर प्रदेश में लखनऊ, रायबरेली में एक संजय गांधी आयुर्विज्ञान शिक्षा संस्थान है। जिसमें बहुत अच्छे-अच्छे डाक्टर, विशेषज्ञ और अच्छे इविवर्मेन्ट्स आदि की व्यवस्था है। फिर भी कभी-कभी हम लोग सोचने के लिए मजबूर हो जाते हैं। ये संस्थान इसलिए खोले जाते हैं कि जो बहुत गरीब व्यक्ति हैं, जिसके पास धन नहीं है और जो गंभीर बीमारियों से ग्रसित है, कम से कम अच्छे और उच्च स्तरीय संस्थानों में उसका इलाज हो सके, लेकिन कभी-कभी हम लोग इस बारे में सोचने के लिए मजबूर हो जाते हैं।

गरीबों के लिए भारत सरकार ने स्वास्थ्य से संबंधित तमाम स्कीमें चलाई हैं। इसके बारे में मैं विस्तार से नहीं जाना चाहूँगा। इस सदन में कई बार पक्ष-विपक्ष दोनों तरफ से सम्मानित सदस्यों ने अपनी बात प्रस्तुत की है, लेकिन माननीय मंत्री जी हमारा मकसद होना चाहिए कि हर आदमी को जिसके पास पैसा नहीं है, उसे अच्छी से अच्छी दवा और इलाज की सुविधा मुहैया हो सके। यह देखा गया है कि ऐसे बड़े-बड़े संस्थानों और खास तौर पर, मैं एम्स की तरफ आपका ध्यान आकर्षित करना चाहूँगा कि आज अगर हमारे निर्वाचन क्षेत्र से कोई मरीज आता है, जो गरीब है, गंभीर बीमारी से ग्रसित है, वह लोकल स्तर पर डाक्टर को दिखाता है, जिले स्तर पर और प्रदेश स्तर पर अच्छे डाक्टर को दिखाता है, बाद में अगर उसे आयुर्विज्ञान संस्थान, नयी दिल्ली को रेफर किया जाता है, तो यहां उसको इलाज करने में बड़ी असुविधा होती है। उसके लिए हम लोगों को सिफारिश करना पड़ती है। कहीं डायरेक्टर को फोन करना पड़ता है, कहीं पत्र लिखना पड़ता है, तब जाकर कहीं उसका इलाज हो पाता है। ज्यादातर देखा गया है कि बहुत से ऐसे मरीज हैं, जो गंभीर बीमारियों से ग्रसित हैं, जिसे विशेषज्ञ डाक्टर देखते हैं, उसके बाद उसकी जांच शुरू होती है। उसकी जांच में इतना वक्त लगता है कि कभी-कभी मरीज बीच में ही दम तोड़ देता है। [p43] उसके साथ ही कभी-कभी यह भी होता है कि फलां मशीन खराब है, ऑपरेशन नहीं हो सकता, आप इतने दिन बाद आइए। फिर हफ्ते, दस दिन या पन्द्रह दिन बाद की दूसरी डेट दे दी जाती है, जबकि मरीज बड़ी गंभीर बीमारी से ग्रसित होता है, उसका तत्काल इलाज होना चाहिए। इस ओर हमें विशेष ध्यान देना होगा कि ऐसे इविवर्मेन्ट्स जो बहुत जरूरी हैं, उनकी ऑनलाइन व्यवस्था होनी चाहिए। अगर एक उपकरण खराब हो तो दूसरा उपकरण चालू करके तत्काल इलाज की सुविधा होनी चाहिए।

अभी सम्मानित सदस्य ने कहा कि हम सिफारिश करते हैं तो वह कभी-कभी मानी नहीं जाती। एम्स की बात हो या तमाम प्रदेश स्तरीय आयुर्विज्ञान संस्थान, शिक्षा संस्थान आप खोल रहे हैं, यदि उनमें सम्मानित संसद सदस्य या विधायक वहां के डायरेक्टर को पत्र लिखते हैं या टेलीफोन करते हैं तो उस मरीज को प्राथमिकता देनी पड़ेगी, क्योंकि हमारे पास तमाम मरीज रोज नहीं आते। जो गरीब, निरीह होता है, जिसकी स्थिति दयनीय होती है, वही आता है और हमें उसके लिए सिफारिश करनी होती है। आपको यह व्यवस्था सुनिश्चित करनी चाहिए।

टाइम बाउंड इलाज की व्यवस्था होनी चाहिए। कभी-कभी यदि मरीज डाक्टर को दिखाता है, तो उसके बाद जांच इतने लम्बे अंतराल की हो जाती है कि मरीज बीच में ही दम तोड़ देता है। उसकी तत्काल जांच होनी चाहिए और इलाज होना चाहिए, तभी हमारा मकसद पूरा हो पाएगा।

उत्तर प्रदेश में संजय गांधी आयुर्विज्ञान संस्थान में लोग बहुत दूर-दूर से इलाज करवाने के लिए आते हैं, दो सौ, तीन सौ किलोमीटर दूर से आते हैं। यदि वे परिवार के साथ आते हैं तो मरीज किसी तरह एडमिट हो जाता है, लेकिन उसके परिवार के रहने की व्यवस्था कैम्पस में नहीं हो पाती। अगर आप आयुर्विज्ञान संस्थान को पुडुचेरी में खोल रहे हैं तो कम से कम मरीज के परिवार के लोगों के लिए रहने की व्यवस्था पर्याप्त मात्रा में होनी चाहिए। संजय गांधी आयुर्विज्ञान संस्थान, लखनऊ में मरीज के परिवार के तमाम लोग बाहर होटलों में रहते हैं और उनका इलाज से ज्यादा आने-जाने और रूकने में खर्च हो जाता है। इस व्यवस्था को भी देखना पड़ेगा।

मैं दवा के बारे में कहना चाहता हूँ। कभी-कभी पर्चा लिखा दिया जाता है कि दवाई बाहर से ले आइए। जब व्यक्ति बाहर जाता है तो उसे दुगुने-तिगुने दाम पर दवाई मिलती है या कभी-कभी दवाई उपलब्ध नहीं हो पाती है। गंभीर बीमारियों की जो बहुत जरूरी दवाइयां हैं, उनके लिए कैम्पस के अंदर ही व्यवस्था की जाए, तभी हमारा मकसद पूरा हो पाएगा।

अभी तमाम साधियों ने डाक्टरों के बारे में कहा। बहुत से डाक्टर ऐसे हैं जो आयुर्विज्ञान संस्थान की नौकरी छोड़कर अपने प्रिवेट नर्सिंग होम खोल रहे हैं, जहां अच्छे तरीके से इलाज कर रहे हैं और बहुत पैसा भी कमा रहे हैं। आप जानते हैं कि नर्सिंग होम की स्थिति क्या है। नर्सिंग होम की स्थिति का मतलब यह है कि यदि मरीज वहां जाए तो वह बेचारा कर्ज लेकर, जेवर भिरवी रखकर इलाज करवाता है। वहां मनमाने ढंग से दाम वसूले जाते हैं। यदि आज आयुर्विज्ञान संस्थान में डाक्टर हैं तो उन्हें अच्छा वेतन, रहने और उनके बच्चों के लिए शिक्षा आदि की व्यवस्था वहीं होनी चाहिए। मुझे बहुत खुशी है कि संजय गांधी आयुर्विज्ञान संस्थान में वहां के डाक्टरों के बच्चों की शिक्षा के लिए सेंट्रल स्कूल खोला गया है। वहां बहुत बड़ा कैम्पस है। यदि डाक्टर वहां नहीं रहेंगे या उन्हें सुविधा नहीं मिलेगी तो वे मरीज की सेवा नहीं कर सकते। इसलिए इसे भी देखने की जरूरत है।

मैं एक बात कहकर अपनी बात समाप्त करूंगा। मैं आपके माध्यम से मंत्री जी का ध्यान आकर्षित करना चाहूंगा कि उत्तर प्रदेश में पिछली तात्कालिक सरकार माननीय मुलायम सिंह जी की थी। वहां से पांच मेडिकल कॉलेज प्रस्तावित होकर केन्द्र सरकार में प्रस्ताव लंबित पड़ा है। मैंने पृष्ठकाल में पृष्ठ उठाए थे और बहस के समय भी यह बात कही थी। उसे मंजूरी दी जाए चूंकि उत्तर प्रदेश देश का सबसे बड़ा हृदय प्रदेश है। अगर उत्तर प्रदेश का विकास नहीं होगा तो मेरे ख्याल से देश का विकास नहीं होगा।

इन्हीं शब्दों के साथ मैं अपनी बात समाप्त करता हूँ और इस बिल का समर्थन करता हूँ।

श्री शंखलाल माझी (अकबरपुर) : सभापति महोदय, मैं भी माननीय सदस्य के साथ अपने को एसोसिएट करता हूँ।

सभापति महोदय : ठीक है, आप एसोसिएट हो सकते हैं।[\[N44\]](#)

SHRI A. KRISHNASWAMY (SRIPERUMBUDUR): Sir, I rise to support the Jawaharlal Institute of Post Graduate Medical Education and Research, Puducherry Bill, 2008.

Sir, this is one of the famous and prestigious institution of this country which produced a lot of doctors and Post-Graduate doctors in this educational Institute.

Sir, today, the medical courses are highly expensive, but when compared to other institutes, those who study in the JIPMER, without spending a lot of money have come out as very good doctors from this Institute.

Sir, I congratulate the hon. Minister for bringing forward such a very good legislation. This Institute was started in 1964 to give high standards of education in this country and to have an excellent patient care. These two things have been done very nicely. But in today's scenario, it is going a little bit down day-by-day. So, to develop this Institute, the hon. Minister has brought this Bill as a national importance institution as like AIIMS and other hospitals and the Medical Research Centre in Chandigarh.

Sir, I want to register one of my points regarding the Members. It is mentioned in the Bill that the Institute shall consist of following Members. In this

I felt very happy to see that Members of Parliament would be nominated. It is a very welcome suggestion. But two Members from Puducherry and one Member from Lok Sabha and the other Member from Rajya Sabha have been identified for selection. This Institute is in Puducherry and most of the people from Tamil Nadu are taking treatment there. So, why can you not post one of the MPs from Tamil Nadu there? ...*(Interruptions)* It is clearly stated in the Bill that two Members of Parliament from the Union Territory of Puducherry, one from the Lok Sabha to be nominated by the hon. Speaker of Lok Sabha and the other one to be nominated by the Chairman of Rajya Sabha will be there in the Institute. So, you are putting a total of four Members there. ...*(Interruptions)*

DR. ANBUMANI RAMADOSS: That is old one. This is a new one. ...*(Interruptions)*

SHRI A. KRISHNASWAMY : I am very sorry. But most of the people from Tamil Nadu are taking treatment there. So, you should post one of the Members from Tamil Nadu there. A total of 39 Members of Parliament from Tamil Nadu are supporting this Bill.

So, the hon. Minister should consider this request.

Now, I come to the other aspect of terms of office. It is mentioned that they are posted for five years. It should be reduced to three years. If you post them for five years, it will lead to monopoly and corruption. I would request the hon. Minister to reduce it to three years. I hope the hon. Minister would consider this small request.

15.59 hrs (Shri Varkala Radhakrishnan *in the Chair*)

Lastly, I would like to say something about my constituency. Last week, the measles vaccine killed three children of my constituency. The State Government has suspended the officers and doctors. The vaccine comes from the Government of India and in my constituency there are accusing the Central Government. So, I would request the hon. Minister to take serious note about the supply of medicines. Three children dieing is not an ordinary issue. I visited their homes in my constituency last Sunday. One old lady of 45 years caught hold of my hand and cried that after 25 years of her marriage, she got one baby. She was complaining that her stomach is a dried stomach. She will not get a baby in future and after the delivery of her baby, they removed her uterus so that in future she would not get a child.[\[a45\]](#)

16.00 hrs.

Her entire family was upset. Even our hon. Chief Minister had given Rs. 3 lakh for her family. But she said this money will not support me. Only my baby can support me in future. She was crying that she would not get a baby in future. So, the Minister should take some serious steps about supplying this vaccine. In 2004-2005, the Minister told us that one of the AIIMS will be opened in Tiruchi or Salem. I request the hon. Minister that from JIPMER, you can give diplomas in dental surgery and nursing. My demand is to have one institute in my constituency in Gumidipoondi in Thiruvalluvar district. Our MOS, Health, also goes by that road very frequently. So, I request you if you could bring one hospital to this road, I shall be grateful because Gumidipoondi is very backward area. Nellore people can also come there because it is very near to that place. This is one of the important Bills having national importance. I support the Bill and I congratulate the hon. Minister for bringing such a wonderful Bill. I support it on behalf of the DMK Party.

SHRIMATI ARCHANA NAYAK (KENDRAPARA): Thank you for giving me an opportunity to participate in the discussion on the Jawaharlal Institute of Post Graduate Medical Education and Research, Puducherry Bill, 2008. The JIPMER Bill had drawn the attention of the whole nation in December, 2007 as the Government suffered a major embarrassment in Rajya Sabha when Opposition and the Left Parties teamed up to force the Government to withdraw the Bill. The then Parliamentary Affairs Minister, Shri P.R. Dasmunsi, said that this was the first time that a Bill after being scrutinized by the Standing Committee and the Cabinet was being taken back to the Cabinet. "It is very unfortunate and an embarrassing situation. We will take it back to the Cabinet." He said.

The JIPMER Bill seeks for conversion of the Centrally-administered premier health institute into an autonomous institution. The move is opposed by several people in the Union Territory of Puducherry. Members of the JIPMER Anti-Autonomy People's Action Committee met in New Delhi on 18th April, 2008. They insisted that the MPs should ensure that when the autonomy Bill is introduced in Parliament, four main features should be incorporated in it. They have threatened to organize agitations including *bands* in Puducherry. One of the four demands of the Committee is for continuing the reservation in medical seats for residents of Puducherry. At present, 20 seats of the total 75 were reserved for the residents of Puducherry. The present Bill in its amended form has taken care of the demand in sub clause (m) of clause 20 of the Bill.

The other demand of the Action Committee is that the existing free treatment for the public to continue. Sub clause (n) of the clause 25 of the new Bill has taken care of the demand. Another demand of the Action Committee was that the existing fee structure for medical education should be retained and in no case should it be raised to more than what is prescribed in the medical college directly run by the Central Government. The Bill has taken care of this demand also. [\[MSOffice46\]](#)

Sub-clause (n) of Clause 25 of the Bill stipulates that free treatment shall be provided to the poor patients in the same manner as are being provided in the medical institute of the Central Government.

Sir, ample provisions should be made in the JIPMER Bill so as to ensure that the institute is run smoothly and efficiently to render

service to the humanity.

On this occasion, I would like to request the hon. Health Minister that he should take steps for the immediate completion of AIIMS at Bhubaneswar, Orissa.

With these words, I conclude my speech and I support the Bill.

*SHRI M. APPADURAI (TENKASI) : I thank the chair for giving me an opportunity to speak on the bill moved by our Hon. Union Health Minister to grant autonomous status to the Jawaharlal Institute of Post-graduate Medical Education and Research, Puducherry. I welcome this move. Now, it is like calm after storm. The moment this announcement came regarding the granting of autonomous status to JIPMER, there was hue and cry. Both public and the employees were agitated that the facilities they were getting from the Government institute may not continue at the hands of an autonomous body. Public feared that they may not get free medical treatment. Parents feared that fees for medical studies may be increased. Employees apprehended that pension and other benefit may not continue. Hence there was an opposition to this move. So the Bill has been reintroduced with necessary amendments. The priority in admission given to the residents of Puducherry must continue. This Bill provides for 20 out of 75 seats to the students from Puducherry. Apart from continuing free medical facility to the poorer sections of the society the interests of employees must be protected .

Under 20(1) of the Bill it is provided that the pensionary benefits for the employees of the institute shall continue. It is a welcome change from the earlier version of the Bill. While assuming power, this Government promised that AIIMS like higher institutes for Medical Education and Research would be established in many other parts of the country. I am pained to note that no such institute has come up so far. I would like to ask of you as to whether you would be establishing atleast one before the expiry of the tenure of this Government. I urge upon this Government to pursue further to fulfil its promise. This Bill is a move in that direction.

With the autonomous state more funds and more foreign collaboration will flow. With this the new autonomous institute can enhance its quality of service

*English translation of the speech originally delivered in Tamil.

and standard of Education and Research. Such an higher grade institute must be set up in the pattern of AIIMS in the south of Tamil Nadu either in Madurai or Tirunelveli. Even after 62 years of independence Medical Education continues to remain a proposition beyond the reach of the poor. Hospitals in the private sector are thriving but the Government hospitals remain undernourished. It is the ground reality that there is always scarcity in Government hospitals either for doctors or for medicines. In my Tenkasi constituency, instead of 60 doctors the total strength there, only 16 doctors have been posted. At the same time more and more of our medical graduates are going away and out of the country seeking better pastures in foreign countries like USA, England and Japan. Even to-day we have just one doctor for 25 thousand people. So naturally the poor and the needy could not get medical facilities. Just because the Government are not filling vacant posts our medical graduates go out of the country. This brain drain gives rise to inadequate medical care in the public sector that alone can benefit the poor. Rise in private hospitals have given rise to Private Medical Colleges also. In Puducherry a small Union Territory, more than 5 Private Medical Colleges are there. In that small territory there is one Government institute with so many Medical Institutions in the private sector that do not have enough of trained faculty and adequate infrastructure facilities. But they collect lakhs and lakhs of rupees. Hence there must be proper monitoring to plug the loopholes. Recently more than five children have died in Tamil Nadu and one child died in my constituency due to vaccines. Only poor meet with this kind of tragic ends. Our planning and execution fail to address the needs of the poor. That is why I ask of you as to whom do we aim at. Whom do we serve? Whose false is this? Is it fate? I do not believe in God but I believe that doctors who save life are like Gods. Reiterating the views of the rationalist Chief Minister of Tamil Nadu who tread the path of

Periyar let me tell you that I do not leave it to fate. Hence there must be attempts to bring out more qualified doctors and nurses from this institution to serve the poor and the needy with better medical care. Expressing my support to this Bill, let me conclude.

श्री वीरचन्द्र पासवान (नवादा) : महोदय, जवाहरलाल स्नातकोत्तर आयुर्विज्ञान शिक्षा और अनुसंधान संस्थान, पुडुचेरी विधेयक, 2008 के समर्थन में बोलने के लिए मैं खड़ा हुआ हूँ। भारत सरकार द्वारा यह बहुत ही सराहनीय कदम उठाया गया है और मैं समझता हूँ कि देश में जहां कहीं भी आयुर्विज्ञान के क्षेत्र में इसकी जरूरत महसूस की जा रही है, वहां इस तरह का प्रयास किया जाना चाहिए। इस सदन को और सरकार के संज्ञान में ऐसे संस्थान की स्थापना की बात को लाया जाता है, तो निश्चित तौर पर दूसरी जगहों पर भी इस तरह के संस्थान की स्थापना की जानी चाहिए। जैसे स्नातकोत्तर स्तर पर आयुर्विज्ञान की शिक्षा तथा अनुसंधान की व्यवस्था यहां की गई है, वैसी व्यवस्था अन्य राज्यों में, प्रदेशों में करने की आवश्यकता है।[\[R47\]](#)

चूंकि यह संस्थान मूर्त रूप लेने जा रहा है, इसमें बहुत नोक-झोंक निकालने या इसके किर्याकलापों का उल्लेख करने की गुंजाइश नहीं है। जब यह अस्तित्व में आएगा तो इस पर विस्तृत चर्चा होगी। जो विधेयक प्रस्तुत है और उसमें जो बातें उभर कर सामने आई हैं, उसे रखना चाहूंगा। मैं संस्थान के गठन के संबंध में कुछ बातों को रखना चाहूंगा। इस संस्थान के अध्यक्ष भारत सरकार के स्वास्थ्य एवं परिवार कल्याण मंत्रालय के माननीय मंत्री होंगे और इसमें कौन सदस्य होंगे, उनका उल्लेख किया गया है। स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के सचिव, इसके पदेन सचिव होंगे, पुडुचेरी विश्वविद्यालय के कुलपति पदेन सदस्य होंगे और इसी तरह से राज्य के मुख्य सचिव पदेन होंगे। इसके अलावा बहुत सारे सदस्यों को रखने की बात कही गई है।

DR. ANBUMANI RAMADOSS: Hon. Member, we have got a new copy today as passed by the Rajya Sabha.

SHRI VIRCHANDRA PASWAN : Oh! it is old copy.

DR. ANBUMANI RAMADOSS: I think, you are referring to the old copy. You go to the new copy; there you can see all the changes which we have initiated. We have removed a large number of clauses; 34 amendments have been made in the new copy which is available here.

SHRI VIRCHANDRA PASWAN : Thank you hon. Minister for giving this information.

महोदय, इसमें संसद का प्रतिनिधित्व दिया गया है। ओल्ड कापी में एक लोक सभा और एक राज्य सभा का सदस्य लेने की बात थी। राज्य सभा द्वारा पारित अपडेट बिल जो मेरे साथी ने दिया है, उसके लिए माननीय मंत्री जी को धन्यवाद देता हूँ। उसमें दो लोक सभा और एक राज्य सभा का मੈम्बर होगा। ऐसे संस्थानों में अधिक से अधिक जन प्रतिनिधियों की हिस्सेदारी और प्रतिनिधित्व होना चाहिए। इसलिए लोक सभा से चार और राज्य सभा से दो सदस्य न केवल पुडुचेरी से बिलौन करने वाले हों बल्कि लोक सभा के सदस्य के रूप में जिन को सदन या अध्यक्ष महोदय या सभापति महोदय महसूस करते हैं कि उनको नाम निर्देशन होना चाहिए, उनको रखा जाए।

इसी तरह से मैं देख रहा हूँ कि वहां असेम्बली है। मैंने इसे देखा नहीं है और मंत्री जी मेरे संज्ञान में लाएंगे। पहले वाले विधेयक में विधान सभा से कोई प्रतिनिधित्व नहीं है। मैं चाहूंगा कि निश्चित तौर पर जनता के प्रतिनिधि जो विधान सभा में निर्वाचित होते हैं, उनके बीच से भी कोई आना चाहिए जैसे अन्य विश्वविद्यालयों और शिक्षण संस्थानों में माननीय विधायक रहते हैं। माननीय मंत्री जी बैठे हैं। चूंकि पुडुचेरी में विधान सभा है इसलिए मैं सरकार से आग्रह करूंगा कि विधान सभा से अधिक से अधिक उचित प्रतिनिधित्व देना चाहिए ताकि इसे लोक उपयोगी बनाया जा सके। विस्तृत चर्चा में नहीं जाना चाहता हूँ। मैंने एक बात का पहले ही उल्लेख किया है कि इस तरह की जरूरत अन्य राज्यों में भी है। मैं बिहार से आता हूँ, बिहार में भी आयुर्विज्ञान केंद्र और स्वास्थ्य सेवाओं की अति आवश्यकता है। बिहार में इस तरह का एक भी उच्च शिक्षा संस्थान नहीं है, जिस तरह से शिक्षण संस्थान हमारे देश की विभूति के नाम पर पुडुचेरी में खोला गया है उसी तरह से हमारे राज्य में लोक नायक कर्पूरी ठाकुर जी, जन नायक कर्पूरी ठाकुर जी हैं, वहां पर दलितों के सामाजिक न्याय नेता, श्री भोला पासवान शास्त्री, जो तीन बार मुख्यमंत्री रह चुके हैं और लोक नायक जयप्रकाश नारायण जैसे महान् लोगों के नाम पर आयुर्विज्ञान क्षेत्र में उच्च स्तरीय शिक्षण संस्थान खोलने की आवश्यकता है। मैं चाहता हूँ कि इन बातों को सरकार गंभीरता से ले। मैं कहता हूँ कि न केवल बिहार बल्कि देश के अन्य राज्यों में होने चाहिए क्योंकि मेडिकल एजुकेशन जीवन का एक अहम हिस्सा है, इसके बगैरे स्वस्थ ह्यूमेन रिसोर्सिस की कल्पना नहीं कर सकते हैं। अगर हम देश को विकसित करना चाहते हैं, दुनिया के अन्य देशों के मुकाबले में अपने देश को खड़ा करना चाहते हैं तो ह्यूमेन रिसोर्सिस भी स्वस्थ होने चाहिए। स्वस्थ रहने के लिए हेल्थ सर्विस होनी चाहिए और हेल्थ सर्विस को लाने के लिए मेडिकल एजुकेशन की जरूरत है। इस तरह

से जो प्रयास पुडुचेरी में किया गया है, वह प्रयास अन्य राज्यों में भी किया जाए। मेरे यही दो तीन प्वाइंट हैं कि जनप्रतिनिधियों को ऐसे शिक्षण संस्थानों में अधिक से अधिक प्रतिनिधित्व दिया जाए और देश के महान नेता, जिन्होंने समाज, देश, राज्य के लिए, पिछड़ों और दलितों के लिए कार्य किया है उनके नाम पर इस तरह के शिक्षण संस्थान बनाए जाने चाहिए, इनका गठन किया जाना चाहिए।

इन्हीं शब्दों के साथ मैं इस विधेयक का समर्थन करता हूँ।

MR. CHAIRMAN : Now, I would request Prof. Ramadass to speak. You are the real beneficiary of this Bill. So, you can speak about the Bill and give your practical experience. You are directly benefited by Shri Anbumani's favour.

PROF. M. RAMADASS (PONDICHERRY): Sir, perhaps you are the first Chairman in the last four years who has given me flexibility of time, and I must be grateful to you for that at the first instance.

Sir, on behalf of Pattali Makkal Katchi and its founder President and our beloved leader, Dr. Ayya, I welcome and support this Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry Bill, 2008.

Sir, before I go into the merits of this Bill, I would like to inform this House that as the lone Lok Sabha Member of Puducherry, it is a day of joy and jubilation for me, it is a moment of pride that Puducherry today is going to be bestowed with an institution of national importance.

Sir, as you have rightly said, we are the beneficiaries, and the people of Puducherry should be celebrating this as an occasion of a great moment, after this august House passes this Bill.

Some of the Members who had spoken to me, earlier especially Dr. Ramachandra Yadav said that there were some storms in Puducherry, and some agitations in Puducherry against this Bill. I should tell, as a Member of that Territory, that those agitations were all motivated, those agitations were carried out without reading out the provisions of the Bill, without understanding the nuances of the Bill, and without understanding the implications of the Bill. How can one comment on a Bill without even seeing the provisions of the Bill? That was the situation. It was like groping in the dark. One who is afraid of his own shadow. It was only that type of people who were creating some problems. [H48]

Politically, I should tell you that there are four major political parties in Puducherry -- the Congress, the ruling party; the Dravida Munetra Kazhagam, the alliance partner; Pattali Makal Kachi; and the Communist Party of India. All these four parties unanimously supported this Bill in its draft form itself even before it could be amended.

There are 30 Members in the Puducherry Legislative Assembly and 27 Members irrespective of political affiliation supported this Bill. In fact, the people of Puducherry were craving for this occasion as to when this Institute will be upgraded into an institution of national importance so that the local people would get the best healthcare, would get quality medical education which would enable them to go higher and higher in the societal ladder. Therefore, it is not correct to say that there were big agitations. But still, as a democrat, our hon. Health Minister took into account all those apprehensions and tried to convince them by saying that our intentions, the intentions of the UPA Government are not to defraud or defray anybody.

Therefore, we feel that it is a moment of joy because after hither and thither, stumbling here and there, we are now able to see the dawn of the day today after passing this Bill.

The second thing, which I would like to say is that I should compliment the hon. Minister not only for piloting this Bill but also for doing many great things in the interest of the Institute even before it could be converted into an institution of national importance. I belong to Puducherry; I have seen this Institution from 1966 itself when I went to JIPMER as a candidate for admission. The Institution was established in 1964 . After completing my PUC, I sought admission in that college in 1965. Therefore, from my student days to the stage of a professor in the Central university, I have observed the working of JIPMER. In the last 50 years, no Central Health Minister visited this Institution although it is a Central Institution affiliated to the Ministry of Health and Family Welfare. It was only this Health Minister who visited as many times as possible, went through the Institute, studied the facilities available, identified the deficiencies, pointed out the mistakes and tried to rectify all those deficiencies within the last four years.

Today, in the last four years, there has been a sea change in the composition of this Institute. There has been a tremendous improvement in the healthcare; and there has been a greater awakening about this Institute in the last four years. Thanks to the large number of initiatives that our hon. Minister has taken, even before it could be converted into an Institution of national importance.

Sir, the CT scan, which was there in the Institute, was not working. It was made operational. We got a world class MRI machine there. We have got an emergency block constructed in the last four years. We have got a state-of-the-art lab there where people from all over the country come and take treatment with the dedicated cardiologists there. We have super speciality block created there. We have filled up 65 and above faculty positions in the college or in the Institute, which were lying vacant for many years because of the hurdles. We have established a nursing college there. We have constructed an auditorium. We have established a Regional Centre for Cancer.

Sir, an hon. Member from the CPI was asking about the National Rural Health Mission. He was saying: "What is this? The National Rural Health Mission is not percolating down to the common man." He must have asked me how this is working. It is only on 12th of April that under this National Rural Health Mission, we conducted a mega event, a mega health camp in a place called Manadipet, which is the remotest village, a village afflicted by poverty, a village afflicted by illiteracy, with the people who had not seen the facility of modern medicines. We took the medical service to the doorsteps of these common people there. We organised a mega health campaign in which about 5,000 people participated. [r49]

They have been taken up for the follow up action in the future also. Therefore, I should compliment the Minister for all the hard work that he has rendered to enhance the image of JIPMER, Puducherry.

If one has to appreciate this Bill, one must also understand the background in which this Bill has been brought. The Union Territory of Puducherry has got a population of 10 lakhs spread over four regions – Mahe, Karaikal, Yanam and Puducherry. This institute was closely associated with the history of Puducherry itself. You know, Sir, as not only an old learned lawyer but also as a historian and a man who is connected with Mahe and therefore the Union Territory of Puducherry, that the Union Territory of Puducherry was an erstwhile French colony. It was under French rule for more than 138 years. It was liberated from the yoke of French rule in 1954. Jawaharlal Nehru, the architect of modern India, the first prime Minister of this country, adopted Puducherry as his pet child. He said 'we will give you whatever you want; we will create whatever infrastructure you want; you are an infant now and we will create everything for you.' So, on the eve of the merger of Union Territory of Puducherry with the Indian Union, Jawaharlal Nehru gave us a gift and that gift was Dhanwantri Hospital. It was the first institution.

MR. CHAIRMAN : What about Mahe? It is also a part of Puducherry.

PROF. M. RAMADASS : Sir, as you told me, I have half an hour to speak. I am coming to this. I am only at history stage of it. I will come back to you. Mahe will definitely benefit. ...(*Interruptions*) Therefore, the merger of Union Territory of Puducherry with the Union of India signaled the establishment of Dhanwantri Hospital in 1954 itself. After merger, it remained as a direct Union Territory. It was not brought under the Union Territories Act. In 1963 when the first Union Territories Act was passed, the Union Territory of Puducherry also came under the ambit of the Union Territories Act, 1963. Immediately after that when the status of Puducherry was elevated, the status of Dhanwantri Medical College was also elevated by Pandit Jawaharlal Nehru. At that time, it was upgraded into Jawaharlal Institute of Post-Graduate Medical Education and Research in 1964 after it became a Union Territory.

It was established by the Ministry of Health and Family Welfare at that point of time and it appointed a committee under the chairmanship of Shri K.L. Rao in which Dr. A.L. Boliyar was also a member. This Committee, after going into various aspects of JIPMER, recommended that this JIPMER should be upgraded into an institute of national importance in 1965 itself, along with All India Institute of Medical Science and on the lines of PGIMS, but unfortunately, the Ministry of Health did not take that suggestion into account. Had it been done, JIPMER would have become an All India Institute of Medical Science at that point of time itself.

I think, the destiny would have it. It was destined to this Health Minister that what could not be done in the last 44 years, we are doing it today because the destiny feels that it is this Health Minister who must make it an institute of national importance. Perhaps nobody in his position today in the Ministry of Health would have done this even in 2008. Therefore, after 44 years, today this institution is being upgraded as an institute of national importance because of the untiring and ceaseless efforts of the Minister and the democratic way in which he has done this. Therefore, I wish to say to this august House that this institution should have been upgraded as an institute of national importance in the year 1965 itself as per the direction or suggestion of the K.L. Rao Committee.

In the last many years, during its existence JIPMER has proved to be a pioneer institution in the country. [\[SS50\]](#) It must be admitted and acknowledged that the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) had proved to be one of the best institutions in South India. The admission procedures are *pukka*, and there is no element of favouritism for anybody. We have selected the best talented students in the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) who have proved to be outstanding surgeons, medical practitioners not only in India, but elsewhere in the world also. Therefore, the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) has got credibility of producing great men and women in the medical field.

MR. CHAIRMAN: I am giving you extra time to speak on this issue.

SHRI C.K. CHANDRAPAN (TRICHUR): You are being specially favoured.

PROF. M. RAMADASS : Yes, Sir. Let not my thought process be shattered.

MR. CHAIRMAN: I am giving you extra time as you represent this place.

...(*Interruptions*)

PROF. M. RAMADASS : It is but natural. I know that you are a man of social justice. ...(*Interruptions*)

MR. CHAIRMAN: The Bill is sponsored by Dr. Anbumani Ramadoss, and you are speaking. Both are correct.

...(Interruptions)

PROF. M. RAMADASS : Therefore, this institution is reputed to have produced great men and women in the field of medical sciences.

This institute was established at a time when the Government of Pondicherry did not have healthcare facilities in its hospitals, and everybody from Pondicherry, Karaikal, Mahe, Yanam and also adjoining areas of Tamil Nadu, Andhra Pradesh and Karnataka flocked to the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) for getting the best facilities. We had the best Principals, best Directors there, who could meet this challenge by providing qualitative medical service there. Therefore, we should acknowledge all these things. But in spite of all these accomplishments, the people of Pondicherry were feeling that the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) was deteriorating in its quality and deteriorating in providing the best services both to the students as well as to the patients. It is because the institution was working under a restrictive regime under the control of the Central Government Health Services (CGHS). Even today, as the BJP Member who initiated the discussion said, the institution does not have academic autonomy to design its own courses. It is affiliated to the Pondicherry University. It is a very paradoxical situation. The Pondicherry University itself does not have a Department of Medicine and Department of Specialised Medical Courses, but you are annexing or affiliating the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) to the Pondicherry University. One can imagine the kind of quality that can be ensured in the teaching curriculum to the students of the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER). Therefore, it was felt that this affiliation with the Pondicherry University has to be severed, and the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) should emerge as an autonomous educational academic institute. This is one reason.

The second reason is that the institute somehow was able to get financial resources from the CGHS, but it was not able to get faculty positions filled-up for many years. In many of the Departments there were positions that were lying vacant for many years because the selection process of the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) was a peculiar process. One has to advertise the positions and wait for the UPSC clearance, and people agree to come when UPSC conducts interviews. But after coming and seeing Pondicherry, they will remain there for six months and leave the positions. They also have to work under the CGHS orders, and many faculty members -- who are eminent surgeons and other practitioner -- did not like the restrictive regime and left the institute. As a result, the institute was starved of faculty members, and no qualitative education was imparted to students. Therefore, in many of the Departments, the positions were remaining idle.

MR. CHAIRMAN: Please conclude your speech as the names are coming to me one after the other.

PROF. M. RAMADASS : I will take another 10 minutes. ...(Interruptions)

SHRIMATI M.S.K. BHAVANI RAJENTHIRAN (RAMANATHAPURAM): Let him take his own time to speak. ...(Interruptions)

MR. CHAIRMAN: There are a number of speakers who wish to speak on this Bill. You have already been given the time of four speakers to speak on this issue.

PROF. M. RAMADASS : I do not want to argue with you. ...(Interruptions) The third and the greatest malady afflicting the Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER) was that the decision-making powers of the institute were vested with the DGHS and the Ministry of Health and Family Welfare and not with the Director in Pondicherry. [\[r51\]](#) Therefore, for every activity the Director will have to send the file to Delhi; it will go to the Deputy Director, DGHS; it will go to the Director, DGHS; it will go to Joint Secretary, Ministry of Health and Family Welfare; it will go to the Secretary; and then it will go to the hon. Minister; and if necessary it will go to Planning Commission; it will go to Finance Committee; and then AFC, TFC, FFC and all kinds of FFCs will come. Once a file is sent, the Director will have to forget about the file and carry on his activity without doing anything. As a result, a number of improvements could not be done because the decision-making power was centralised at Delhi. Even to replace a bulb, the Director will have to send a file direct from Puducherry to Delhi and nobody knows when it will come. This was also afflicting the institution and its functioning to a very great extent.

An expanding institution cannot thrive in the absence of finances. As the BJP Member rightly said, the budget for the last year was only Rs.56 crore for this institute which is providing as many courses as are provided in the AIIMS. However, while AIIMS is having a separate budget for Rs.300 crore, JIPMER was having only Rs.56 crore. Therefore, the institution was haunted by dearth of finance, paucity of funds. That also made the institution to be sick.

The restrictive regime in terms of academic restrictions, in terms of decision-making restrictions, in terms financial restrictions, all these restrictions crippled the functioning of the institute. As a result the medical health care in JIPMER deteriorated to the

greatest extent. What was ironical was that the General Hospital in Puducherry was providing better facilities than a Central institute JIPMER. It has come down to such a level. It is under that circumstance that the hon. Minister took over as the Minister of Health and Family Welfare. The general public also felt that why such an institution of excellence has come down to the nadir of destruction and that it should be improved. People are feeling that way. Fortunately or otherwise, I also became Member of the Parliament during that point of time and I represented this case to the Ministry of Health and Family Welfare.

MR. CHAIRMAN : Please conclude. Let us hear others also. You have covered all the points.

PROF. M. RAMADASS : I have some more things to say, Sir.

The institution in its functioning today requires the removal of restrictions. Just as the economy has been liberated from the restrictive *Raj*, liberated from the control *Raj*, the JIPMER had to be relieved from this restrictive *Raj*. This is what is being done by the present Bill. We are not only upgrading it into a national institute, but we are conferring this institute with all kinds of powers so that they can develop into a premier institution in the country.

Many people think that we are converting this into an autonomous institution. But many of the people who can read the Bill can easily see that nowhere in the Bill there is the word autonomy. All agitations and apprehensions founded on the ground that it is becoming an autonomous institution. What is being done is that we are upgrading an ordinary institute into an institute of national importance.

When the whole country is asking for setting up of national institutes and when AIIMS like institutions are coming up at different places, you are bestowing Puducherry with one of the institutes of national importance. It is again a tribute not only to the people of Puducherry but we are paying a tribute to Jawaharlal Nehru in whose name this institute has been established. We are paying great tribute to that architect of modern India who wanted medical education to be spread. On this day if Jawaharlal Nehru had been alive, he would have felt very happy to congratulate our hon. Minister for this pioneering effort that he is making. [\[KMR52\]](#)

I would take only five more minutes. This, I am saying seriously.

MR. CHAIRMAN : Please conclude.

PROF. M. RAMADASS : I am speak on the Bill; I am not speaking anything other than that. The Bill spread over 32 clauses, provides for an Institute Committee with 22 Members, a Governing Body, many Standing Committees, and ad-hoc Committees. All these Committee would take decisions there itself with regard to academic matters, with regard to financial matters and all other matters incidental thereto. Therefore, the Institute will get complete decision-making powers. They need not come to Delhi for anything. Therefore, all decisions will be quickened, expedited and constructive work can be done in a better way.

Secondly, there have been 15 functions or objectives of Bill for doing many things, about which I want to explain, but you are not giving me time.

Another important advantage is mentioned in section 15 of this Bill, which says that the JIPMER would have a separate budget.

MR. CHAIRMAN: If you are not concluding, you will not get this Bill passed today. If you want to get this Bill passed today, please conclude.

PROF. M. RAMADASS : No, Sir, please do not take such a serious stand.

MR. CHAIRMAN: You please conclude. I want to see that the Bill is passed. If you take further time, it will not be passed today. You must realize that. Do you not want clause-by-clause consideration today?

PROF. M. RAMADASS : I want, Sir.

MR. CHAIRMAN: Then, you conclude your speech.

PROF. M. RAMADASS : I also want to allay the fears of the employees that the conditions of the employees would not be altered in any way or would be detrimental to them. They would be governed by the Pension Rules of the Government of India. They would be governed by the institutional rules which would be framed by the Government of India. Therefore, all apprehensions are not correct. Everyone now is in favour of this Bill.

MR. CHAIRMAN: Do not worry. Dr. Anbumani Ramadoss would look into all those matters. Why do you worry?

PROF. M. RAMADASS : I am concluding, Sir.

Common man would get better services; and people were saying about fee structure, etc. I would say that the JIPMER would

collect the lowest fee structure in India for students.

MR. CHAIRMAN: Please conclude.

PROF. M. RAMADASS (PONDICHERRY): And the 26 per cent reservation that exist for Puducherry students would continueâ€¦.
...(Interruptions)

MR. CHAIRMAN: The Minister would look into all those things. He has already taken a decision to give the status of 'All-India Institute'.

PROF. M. RAMADASS : I am concluding, Sir. In view of the intrinsic merits of this Bill, and its ability to spread qualitative, relevant and excellent medical education as well as excellent medical care to the people of Puducherry and to the citizens of India, I wholeheartedly welcome this Bill. I congratulate the hon. Minister of Health for piloting this Bill and making the people of Puducherry joyous. Thank you, Sir.

SHRI TAPIR GAO (ARUNACHAL EAST): Hon. Chairman, Sir, I rise here to support this Bill and I personally, on behalf of the people of this country, really appreciate our hon. Minister of Health, who has got the vision and has got the dream to wipe out the disease from this country and from the world. Disease is such a thing where it has got no regards for the VIPs; nor it has any pity on the poor. So, heritage institutions like JIPMER, which is 185 years old, from the days of France rule till today. I have got this opportunity to join and congratulate the people of this country, and especially the brothers and sisters of Puducherry.

For upgrading an institution to the level of national importance and giving autonomy to an institution but if we do not give more funds to such institutions means not doing anything. [\[r53\]](#)

In India, we have got lots of institutions where they have been upgraded; and autonomy as well has been given to those institutions, which are not only in the field of medicine, but in other fields also. But they are mostly defunct because of non-availability of funds. Therefore, I would like to request the hon. Minister of Health to give more funds to such institutions so that they come up to world class.

JIPMER is mostly known among the people of North East because a lot of patients go to this Institution and more students from this region are coming out of this Institution. So, the people of North East are very familiar to this Institute. So, more funds should be given to this Institution so that the faculty, equipment and technology can be upgraded by which the poorer people can get services from JIPMER.

Here, I would like to say that in European countries nowadays, people prefer Ayurvedic and Homoeopathic medicines. So, these subjects may kindly be included in this Institution.

Employment welfare – the hon. Member, who spoke prior to me, said that there was a lot of agitation against this Bill due to some misapprehension, by the local people of Puducherry. Here I would like to request that while we are giving national importance to this Institute, the cases that have been registered against those people may be withdrawn so that these people can also join the mainstream with the upgradation of this Institute.

I would like to request you that your vision is very important for this country. But you are missing one instrument and one weapon whereby the country could salute your service and by which it will remember you in future. The previous Government has proposed to establish six AIIMS-like Institutions all over the country. Had the same kind of input that you put into this Bill of JIPMER, been put into establishing six AIIMS-like institutions, people of this country could have got the services.

Second point is that in all the Central institutions, the staff shortage is there all over the country. So, our institutions are unable to provide more services to the poor people. I request you to kindly look into the problem of shortage in the staff of Central Medical institutions so that the facilities could be extended to these people.

In future, when JIPMER comes up as an established Institute, if the seats are increased from the existing ones, then they may look into the proportionate increase in the seats of reserved quota in the future so that SC/ST/OBCs can get the benefit in proportion to the increase in the number of seats.

I have some of my own experience of this morning. Social, human and psychology subject should be given more importance in

medical colleges. This morning, I had been to Ram Manohar Lohia Hospital with a dehydrated patient at about 6 a.m. [\[MSOffice54\]](#)

In front of the patient one of the doctors there scolded me like anything. Instead of being patient-friendly our respected doctors are very rude nowadays. I told the doctor that I am a Member of Parliament who is pushing the patient into the emergency room and in spite of attending him you are scolding me. How will you treat the common poor patients in your emergency ward? This is just to give you an example. We need patient-friendly behaviour from our doctors. Therefore, I would request you to give more importance to subjects like Psychology in JIPMER. It is because of your vision and leadership that institute is going to come up as a world-class institute. We need good doctors, nurses and other staff coming out of that institute. Therefore, in that institute subjects like Sociology and Psychology may be given more importance.

With these words I conclude my speech. Thank you, Sir.

SHRI FRANCIS FANTHOM (NOMINATED): Mr. Chairman, Sir, I would like to commend the hon. Minister for bringing this piece of legislation to re-model and to re-engineer the Jawaharlal Institute of Post-graduate Medical Education and Research at Puducherry. It is indeed a remarkable piece of thinking that has gone into the structure that has been planned at Puducherry. The Minister and his colleagues have obviously taken a lot of effort and pain. I would like to mention this in particular because some of the constraints that have been observed in the national institutes of medical science and research have now come to force in terms of our appreciation and care has been taken that the future and the growth of medical education and research at Puducherry and at this particular institute is not constrained. The vision, therefore, is an integrative vision where there is a provision that there will be two or more medical colleges associated with the institute. There would be at least one or more hospitals associated with the institute and there would be at least one nursing college and several centres that will augment and enhance the auxiliary services that are required to support the medical services. The vision that is being indicated from this Bill is extremely forward looking and I would, therefore, like to commend the Minister for having brought this Bill for discussion.

I would also like to mention that the need to liberate and the need to remove restraints that operate at the national centres of research, particularly in the sphere of medical research as has been envisioned in this Bill, needs to be dovetailed into all other national institutes of medical research and training. The kind of supportive instruments that have been included here need to be exhibited there as well. As the representative from Puducherry was mentioning, there seemingly is a kind of liberation of the restrictive elements that were operating in JIPMER which now seems to be finding a broader canvas of addressal. I would like to think that such restraints whether they are at JIPMER - and now re-engineered into a national institute of importance - or any other national institute, our vision, understanding and our approach to solutions should be on the same lines. [\[R55\]](#) I am sure the Minister would take this forward.

17.00 hrs.

I would also like to take this opportunity to congratulate the people of Puducherry for this extremely important Institute that is coming to the Union Territory there. This Institute, as has been shown in the Bill, has an integrated certifying and accrediting authority that has been enshrined within the powers of the structure that the Institute shall have. This again is a forward looking instrument and will definitely go a long way to seeing that this Institute finds shape in its understandings as an Institute of national importance.

I would like to conclude by mentioning – I know the hon. Minister would have this in mind – that there are vistas of medical sciences and research now emerging. Be it in the sphere of molecular biology or nano-technology, be it in the sphere of research, in the sphere of oncology or stem cell research or whatever it be, these forward domains need to be reflected in our national Institutes and attract the best doctors in their specialised fields put up at this Institute so that they reflect not only a desire to excel in the sphere of medical sciences but also practice a realism to realise what is important in the sphere of medical sciences.

Sir, I thank you for allowing me to speak on the Bill. I would like to commend and support the Bill.

MR. CHAIRMAN : Shri Francis George, please be brief. After all, it is for establishing a medical Institute. I do not find any dispute about it. It is not a political topic.

SHRI K. FRANCIS GEORGE : Sir, please allow me to speak.

MR. CHAIRMAN: You can speak a few words and sit down.

SHRI K. FRANCIS GEORGE : Sir, the Jawaharlal Institute of Post-Graduate Medical Education and Research is being elevated to the position of Institute of national importance. In fact, before coming to the House, I was under the impression that this is going to be a university or a deemed university or an autonomous institution. Now, after going through the Bill I find that it is none of them. It is just an elevation to the status of an Institute of national importance. Even then it is a very laudable step that has been taken by the hon. Minister considering the fact that this Institute is one of the oldest institutes of its kind in our country.

If I understand correctly, it was started back in 1823 by the French as an ordinary medical school. In 1956, the Government of India took over after the transfer of power and after that this Institution has been serving not only the people of Puducherry but also the people of adjacent areas of Tamil Nadu, Karnataka and even people from Kerala. If I understand correctly, people go there for specialized treatment. It is said that any day about 4000 out patients are treated in that hospital and also various specialized treatments are being offered in that hospital. But at the same time it is very astonishing to note that there are 600 vacancies to be filled as of now and also a lot of infrastructure development which is required is yet to take place in this very oldest of Institutes of our country.[\[R56\]](#) It is only very pertinent and natural that we take a decision to alleviate this to one of the institutes of national importance in our country, which means, raising it to the status of AIIMS, Delhi, or PGI, Chandigarh. I understand that the Bill had a long and tortuous journey from the Rajya Sabha to the Lok Sabha. There had been difference of opinion on whether the issues like protection of employees, reservation policy and free treatment that are being provided in that institute would continue once this institution gets an elevated status. The hon. Minister had to again go back and get the Bill revised and now I understand that all these apprehensions have been taken care of and all are out to support this Bill.

After according elevation, the idea is to have better fund mobilisation and also better development of infrastructure of the institute. I would like to know, how better fund management and development of infrastructure is being proposed by the hon. Minister? Now, if there are not changes in the existing structure of administration and also from what are being allocated by the Centre, how are funds going to be generated? If the hon. Minister proposes to develop this institute into an institute of excellence we need funds for which the Government of India will have to be very liberal and go out of its way to help this institute. It is then only that we can, in real sense, elevate this institute into a national institute of importance and excellence.

Sir, I would like to make a suggestion here. Since this institute is being elevated to the status of a national institute, the hon. Minister can think of starting a project on a disease called Alzheimer. I would not say that this is the newest disease ever heard of, but the number of patients suffering from this ailment has gone up substantially. A large number of people are getting affected by this dreaded disease. It is a disease that looks innocuous and simple but I would say that this is one of the most dreaded ailments that a human being can suffer from. So, it would be very good if the hon. Minister can take the initiative and start a research project on this particular ailment in this institute.

Sir, the National Knowledge Commission has come out with a Report relating to the various fields including the field of medical education. I would like to quote from the Report. It says:

"The quality and quantity distribution and availability of human resources for the health sector in India at present needs to be improved substantially to deliver traditional, rural-oriented and equitable health services. Over the years, health related institutions and training has become more urban oriented, doctor-centric and technology driven. Medical education should be both nationally sensitive and globally competitive to realize this objective. Our medical education system needs radical reforms."

There are several recommendations of this Commission. I hope, the hon. Minister will take particular care to implement those recommendations in this particular institute to start with and then at the national level.

17.09 hrs (Shrimati Sumitra Mahajan *in the Chair*)

Madam, I would like to know about a promise made by the previous Government and also by this Government about starting various medical institutions in various parts of the country that would have the status of an All India Institute of Medical Sciences. One such institute was promised to be raised was the Trivandrum Medical College. But nothing has happened so far. It is good to learn that work is going on. I would like to ask the hon. Minister if he is going to elevate it to the status of AIIMS.

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): If the State Government wants, then they can do it. It is a State Government institute.

SHRI K. FRANCIS GEORGE : The State Government has never said no to that. I do not know. All State institutes are to be elevated to the status of AIIMS with the help of the Central Government. That is what I understand. That is what was mentioned in the Budget. It is good that a model institution is coming up in the Southern part of country. Along with that other such institutes in other parts of the country should also be considered by the hon. Minister. I would once again like to congratulate the hon. Minister for taking this initiative so that the Southern part of the country also gets an institute of an elevated status of a

national institute.

DR. BABU RAO MEDIYAM (BHADRACHALAM): Madam, I thank you for giving me an opportunity to speak on this Bill.

At the outset, I want to congratulate the hon. Minister, Dr. Anbumani Ramadoss for his new and innovative measures in the field of health. He has specially paved the way for social justice in allowing the reservation for SCs and STs in the all-India Medical Examination. There are many other steps which he has taken in respect of AIIMS and other institutions. I congratulate him for all these measures.

As regards this Bill, it is a very welcome step. JIPMER, Puducherry is being elevated to an Institute of national importance. I read the old Bill where I saw relevant provisions. I found that only two Members of Parliament were mentioned. But when I saw 'the Bill as passed by Rajya Sabha', I felt that the sentence has been put correctly mentioning three elected Members from both the Houses, that is, two from Lok Sabha and one from Rajya Sabha. Hence, I support the Bill.

Regarding the functions of the Institute, one function is mentioned at page 5(g), that is, train teachers from different medical colleges in India. This is a very important step that is provided in this Bill because today, medical education has become a very commercial one. Common people are not able to enter into medical studies because day-by-day, it is becoming costly. Now the trend is towards private medical colleges. Medical education and medical training are being treated as very costly affairs in our country. Hence, I request the hon. Minister to enlighten on this point.

We are having the MCI, the Ministry for Health and the State Government Departments. It has become so easy now to put up a medical college. No norms are being observed. I remember to see a cartoon in a popular Telugu daily. One gentleman is putting up a Medical College board in front of his house. His neighbour is asking as to why he is putting up that board and whether he is starting a medical college. Then the first man responded that he is going to start a medical college from the next day. The neighbour asked him whether he has gone mad. Then, he added that he went to the State capital to get a medical seat for his son but the Minister concerned sanctioned him a medical college. This is the situation. The MCI and the Ministry are having some guidelines for it but they are not at all observing them. Without any infrastructure, they are just starting a medical college. I want to know as to how is it possible to do it. I request the hon. Minister to enlighten us as to how private medical colleges are cropping up.

I am interested to know about training in medical profession. Today, the medical profession needs a committed faculty. For example, in the faculty of Anatomy, there is no sufficient Anatomy faculty in our country but the number of colleges and the seats are being increased. Anatomy is a basic subject and a medical student is expected to gain structural knowledge of the human body. But training is not sufficient. Hence if JIPMER takes up such a training programme for all the medical faculties, it will be a very welcome step. Hence, I support this Bill.

As regards disputes mentioned in clause 26 page 7, it is said that when disputes arise between the Institute and the Central Government, the decision of the Central Government is final. In the case of AIIMS, we witnessed many things and they were tackled by the hon. Minister very effectively by bringing in a legislation. The decision of the Central Government shall be final in cases of disputes. Though autonomy is given to such institutes, when a dispute arises between the Central Government and the Institute - the provision given here is a very good - the decision of the Central Government is final [\[MSOffice57\]](#) and binding.

I welcome this. There are certain all India level medical institutes in our country, like the AIIMS, the JIPMER and the Post-Graduate Institute of Medical Education and Research at Chandigarh. My suggestion is that we should have a common Bill for all these institutions for controlling and coordinating both medical services and their administrative affairs. If we have common norms and common guidelines for all these institutions, then it would be easy for us to monitor them. Otherwise, for each institute, we are bringing a separate Bill. This is time consuming. Hence, I would request the hon. Minister to bring a common Bill before the Parliament.

With these suggestions, I once again congratulate the hon. Minister for bringing in this Bill. I support the Bill.

DR. KARAN SINGH YADAV (ALWAR) : Madam Chairman, I rise to support this very nice piece of legislation which our hon. Minister has brought in today, which aims to give national status to JIPMER in Puduchery. It was long awaited. I must compliment the hon. Minister for the hard work he has put in this regard. The aspirations of the people of Puduchery and the neighbouring districts of Tamil Nadu from where most of the patients go for the treatment to this Institute is being fulfilled today. I can see the joy on Dr. Ramdoss's face, who is an economist and also the Member of Parliament from that area. When he returns home, he carries a great package of health for his voters. I wish I will also be in the same position some time. As a Member of the Standing Committee on Medical and Health, I have visited that Institution. As a doctor, I heard a lot about that Institution. It is a Central Government Institution. The medical education, the graduate and the post-graduate education, provided in that Institution is of great standard. Graduates and post-graduates of that Institution are teaching in various medical colleges in our country and abroad. As it is being run by the Central Government, from a far off place, that is Delhi, the logistics are not in favour of that Institution. There are a lot of hurdles regarding recruitment of faculty, regarding the development of new courses, and for starting new super specialities. Every time they have to run to Medical Council of India which we have known in the past years has tarnished the image of medical education in this country.

I think it is a very well thought out legislation which will make this Institution on par with the Post-Graduate Institute of Medical Education and Research, Chandigarh and with All India Institute of Medical Sciences. Now, a lot more research activity and academic activity would come into existence in that particular Institution.

I must compliment the Minister, who has brought laurels to his Ministry by not only creating the National Rural Health Mission but also by bringing in legislation on anti-smoking, and some other Bills which are in the pipeline, like the Drugs and Cosmetics Bill, Paramedical and Physiotherapy Bill. His pursuance to see that medical education in this country gains reputation and status by making the Medical Council of India an instrument deserves to be complimented. [\[MSOffice58\]](#)

I am sure, we, as medical men, expect a lot from our hon. Minister of Health. I hope that in the next Session he would bring the Medical Council of India (Amendment) Bill because medical education has become very expensive. Privatisation has taken too much of place in this country. We want that more medical colleges should come up in the Government sector. We want the reservation policies to be implemented in the Government sector as well as in the private sector.

Madam, here I would like to congratulate our hon. Minister of Health who has been responsible for asking the Medical Institute as well as the PGI to start 27 per cent reservation for OBC in the very first go, not the staggered reservation, as it is being done in other institutes. It will be done because of his commitment.

Madam, for the last 50 years in the pre-PG Central Entrance Test, there was no reservation for Scheduled Castes or Scheduled Tribes. It was after his taking over as a Chair, he saw to it that the reservation is implemented for Scheduled Castes and Scheduled Tribes in Post-Graduate courses. Here, I would like to request the hon. Minister of Health one thing. Now the reservation for OBCs is also being made possible in these Central institutes as well as in the Central PG and UG Entrance Examinations.

We have met a lot of people in Puducherry. All the faculty members of that institute have with one voice said that this should be raised to that institution. All the students who came were in support of the Bill. It was only a few politically motivated employees who thought that after this Bill is enacted, they will be called as an institute's servant and not a Central Government servant. What a kind of logic is this? They find that being an employee of a Central Government; they have a higher status than being an employee of an institute. Those kinds of notions were there.

There were certain apprehensions about the reservation which was being given to the local Puducherry students in medical colleges. There were certain apprehensions that once it becomes an institute, it will become costlier. I have seen the Bill and everything has been taken care of. The reservation continues for the local residents of Pudicherry. The fee structure remains the same and the extra funding which will now go to the Institute and the autonomy that Institute would now get, the Director and the President will have, I am sure the time is not far off when Puducherry Institute will be as high as the PGI Chandigarh or the All India Institute of Medical Sciences.

Madam, with these few words, I once again congratulate the hon. Minister of Health and I commend this Bill and support this Bill.

श्री स्युजाज सिंह शाक्य (इटवा): सभापति महोदया, आपने मुझे जवाहर लाल रनातकोतर आयुर्विज्ञान शिक्षा और अनुसंधान संस्थान, पुडुचेरी विधेयक, 2007 के संबंध में बोलने की अनुमति दी, इसके लिए मैं आपको धन्यवाद करता हूँ और माननीय स्वास्थ्य मंत्री जी को यह बिल लाने के लिए बधाई देता हूँ। यह वर्ष 1964 में स्थापित संस्थान है लेकिन राष्ट्रीय महत्व का दर्जा इसे अब दिया जा रहा है। आज हमारे देश में इतनी बड़ी जनसंख्या है। आप नई दिल्ली स्थित आयुर्विज्ञान संस्थान में चले जाएं वहां हजारों की संख्या में मरीजों की भीड़ होती है। दुर्भाग्य से पूरे देश में चंडीगढ़ और दिल्ली में ही इस तरह के बड़े संस्थान दो ही हैं। अब माननीय मंत्री जी ने पुडुचेरी में इस संस्थान को राष्ट्रीय महत्व का दर्जा और पूर्ण अधिकार देने का काम किया है, इसके लिए वह बधाई के पात्र हैं। सिर्फ पुडुचेरी में ही नहीं बल्कि पूरे देश में जितने राज्य हैं, आज सभी राज्यों में इस तरह की संस्थान खोलने की जरूरत है क्योंकि जब दिल्ली में कहीं कोई गंभीर समस्या पैदा होती है तो लोग दिल्ली के अखिल भारतीय आयुर्विज्ञान संस्थान की तरफ लगे जाते हैं। अब हजारों की संख्या में वहां भीड़ लगी रहती है, लोग परेशान रहते हैं, पड़े रहते हैं और फिर वहां से वापिस जाते हैं। गरीब लोग उम्मीद लगाए रहते हैं और केवल दिल्ली की ओर भागने का काम करते हैं। इस तरह का बड़ा संस्थान केवल पुडुचेरी में खोला गया है, मैं आपके माध्यम से मंत्री जी से कहना चाहता हूँ कि पूरे राज्य में इस तरह के संस्थान खोलने का काम करें।^[r59]

आज इस बात की विशेष जरूरत है, क्योंकि जिस तरह की नई बीमारियां बढ़ रही हैं, महंगाई बढ़ रही है, इसके कारण लोग प्राइवेट संस्थानों में अपना इलाज नहीं करा पाते हैं, मैं कहना चाहूंगा कि इसमें लोक सभा से चार सदस्य हों, मेरे पास पुराने विधेयक की कापी है, इसमें केवल दो सदस्य दिये गये हैं। मंत्री जी ने अभी बताया था कि इसमें शायद तीन सदस्य रखे गये हैं। मैं कहना चाहता हूँ कि इसमें और अधिक सदस्यों और जनप्रतिनिधियों को रखने की जरूरत है, चाहे वे राज्य की पंचायत, जिला पंचायत या विधान सभा से हों, उन्हें भी इसमें रखने की जरूरत है। क्योंकि जो जनप्रतिनिधि होता है, वह वहां की समस्याओं से ज्यादा वाकिफ होता है। मैं यह भी कहना चाहूंगा कि उन्हें और भी अधिकार देने की जरूरत है, क्योंकि हमारे इटावा में माननीय मुलायम सिंह यादव ने एक ग्रामीण मिनी पी.जी.आई. खोलने का काम किया है। उन्होंने बहुत अच्छा काम किया है। उतर प्रदेश में कई जगहों पर मिनी पी.जी.आई. खोले गये हैं। वहां हजारों की संख्या में प्रतिदिन ओ.पी.डी. में मरीज आते हैं। तीन हजार से चार हजार मरीज एक छोटे से डिस्ट्रिक्ट में आते हैं। हम उसमें सदस्य हैं, लेकिन हमें जो अधिकार होना चाहिए, वह अधिकार हमें नहीं दिया गया है। हम लोग कोई बात कहते हैं तो वहां डायरेक्टर से लेकर अन्य अधिकारियों की मोनोपोली रहती है। मैं यह बात इसलिए कह रहा हूँ कि माननीय मंत्री जी जो अधिकार दिये जाएं, वे जनप्रतिनिधियों को भी दिये जाएं। मंत्री जी बहुत अच्छा काम कर रहे हैं। जनप्रतिनिधि चाहे छोटा हो या बड़ा हो, वह जनता के बीच की समस्याओं को ज्यादा जानता है और उसका यह भाव रहता है कि हम जनता की अधिक से अधिक सेवा कर सकें। इसलिए मंत्री जी उन्हें अधिकार भी देने का काम करें। चाहे वे पंचायतों, जिला पंचायतों से हों या विधायक हो। उन सबको भी इसमें शामिल करने का काम करें। मैं पुनः निवेदन करूंगा कि इस तरह के संस्थान आप पूरे राज्य में खोलने का काम करें, तभी इस देश की समस्या और जो आने वाली नई गंभीर बीमारियां हैं, उनका निदान हो सकता है।

श्री राम कृपाल यादव (पटना) : सभापति महोदया, आपने मुझे बोलने का समय दिया, इसके लिए मैं आपको धन्यवाद देता हूँ। मैं जवाहरलाल रनातकोतर आयुर्विज्ञान शिक्षा और अनुसंधान संस्थान, पुडुचेरी विधेयक, 2008 के समर्थन में खड़ा हुआ हूँ। मैं सबसे पहले माननीय मंत्री जी के प्रति आभार व्यक्त करता हूँ, जिन्होंने विशेष रूप से मैडिकल शिक्षा के उत्थान के लिए एक बहुत बड़ा कदम उठाया है। जो इलाका वर्षों से उपेक्षित रहा है, उस इलाके के आम लोगों की जो भावना थी, उसे देखते हुए उन्होंने बहुत स्वागत योग्य कदम उठाया है। आज जरूरत इस बात की है कि देश के हर इलाके में इस तरह की पढ़ाई की व्यवस्था होनी चाहिए। अभी क्या हालात है, इसे मिलाकर देश में इस स्तर के चार आयुर्विज्ञान संस्थान खोले गये हैं। मैं समझता हूँ कि ये नाकाफी हैं। जिस तरह से आज बीमारियां बढ़ रही हैं, जिस तरह से लोगों की आवश्यकताएं बढ़ गई हैं और खास तौर पर आजकल जिस तरह से लोगों को सरकारी संस्थाओं पर निर्भर करना पड़ रहा है, चूंकि प्राइवेट मैडिकल सेवा बहुत महंगी हो गई है, इसलिए मैं समझता हूँ कि ऐसे संस्थानों को बढ़ावा देना चाहिए। जैसे इन्होंने पुडुचेरी में करने का काम किया है, इसी तरह के संस्थान दिल्ली, चंडीगढ़ में भी हैं, अभी आप पुडुचेरी में खोलने जा रहे हैं, निश्चित तौर पर ये नाकाफी हैं, इनका और विस्तार करने की आवश्यकता है।

मैं आपके माध्यम से माननीय मंत्री जी का ध्यान एक बात की तरफ आकृष्ट करना चाहता हूँ कि पिछले दिनों सरकार ने निर्णय लिया था कि देश के विभिन्न राज्यों में एम्स के स्तर के छः इंस्टीट्यूट्स की स्थापना की जायेगी। इसके लिए राशि भी उपलब्ध कराई गई है। लेकिन जो राशि उपलब्ध कराई गई है, वह राशि बहुत कम है। मेरे संसदीय क्षेत्र में भी एक एम्स खोलने का प्रस्ताव है^[b60] वहां कुछ काम भी प्रारम्भ हो गया है। मगर वहां जिस गति से कार्य चल रहे हैं, उस गति से मैं समझता हूँ कि काफ़ी समय लग जाएगा। जब एनडीए की सरकार ने इसका शिलान्यास किया था तो उन्होंने आश्वासन दिया था कि सन् 2009 तक पूरे तौर पर यह मेडिकल होस्पिटल बन कर तैयार हो जाएगा। उस समय यह कहा गया था कि जिन पांच राज्यों में इस तरह के मेडिकल होस्पिटल खोले जा रहे हैं, उनकी परेशानी दूर होगी। आज बिहार से दिल्ली में बड़े पैमाने पर लोग इलाज कराने के लिए आते हैं। हम वहां के चुने हुए प्रतिनिधि हैं, यहां के सांसद हैं। हमारे यहां सबसे ज्यादा मरीजों की भीड़ रहती है, चूंकि बिहार में इस तरह के स्टैंडर्ड के इंस्टीट्यूट नहीं हैं। वहां इलाज के लिए ठीक से कोई व्यवस्था नहीं है, इसलिए उन्हें यहां अपना इलाज कराने के लिए आना पड़ता है। उनकी यहां लम्बी वयू लगी रहती है। मैडम, आप भी अपनी कांस्टीट्यूंसी के पेशेंट्स को अस्पताल में देखने के लिए जाती होंगी, मैं समझता हूँ कि वहां 60 परसेंट पेशेंट्स बिहार के ही होते हैं। मैं समझता हूँ कि मंत्री जी को इस पर गौर करना चाहिए, ध्यान देना चाहिए। आपने जो एम्स बनाने का निर्णय लिया है, इसके लिए पहले कोई राशि आवंटित नहीं की गई थी, लेकिन आपने राशि रैशनिंग कराई है, इसके लिए मैं आपको आभार व्यक्त करना चाहता हूँ कि यूपीए की सरकार ने और आपने उसमें खास तौर पर इंटरैक्ट लेकर राशि रैशनिंग कराई है तथा प्रोपर वे में कार्यवाही भी कर दी है। मगर राशि बहुत कम दी है, जो राशि दी है उसमें अभी तक केवल चार टीवारी ही बनी है, इसके अलावा कुछ भी नहीं हुआ है। आपकी मंशा अच्छी रही है कि हम राज्यों को भी सुविधा दें और जो दिल्ली में इलाज के लिए लोगों की भीड़ बढ़ रही है, वह भी कम हो तथा लोगों की परेशानी भी कम हो।

मैडम, बहुत से ऐसे लोग हैं, जिनके पास दिल्ली आने के लिए भाड़ा तक नहीं होता। इसलिए हमें बहुत से लोगों के लिए दिल्ली में आने के लिए भाड़ा उपलब्ध कराना पड़ता है और उनके रहने तथा इलाज की व्यवस्था भी करानी पड़ती है। मैडम, मैं समझता हूँ कि आपको भी अपने इलाके में इस तरह की परेशानियों का सामना करना पड़ता होगा और आपके राज्य में भी शायद एम्स प्रस्तावित है, जैसा मेरे जहन में आ रहा है, मगर अभी तक उस पर कोई कार्यवाही नहीं हो सकी है। मंत्री जी, मेरा आपसे आग्रह होगा कि इस पर ठोस कार्यवाही कीजिए। आपने बहुत सारे कदम उठाए हैं, आम लोगों तक विकिट्सा सुविधाएं पहुंचाने के लिए, राजीव गांधी हेल्थ मिशन के अंतर्गत कई अस्पतालों को भी पैसा दिया है, 24 ऑवर्स होस्पिटल, पीएचसीज़न करे, उसके लिए भी आपने व्यवस्था की है, डाक्टरों तक पहुंचाए हैं, उसके लिए भी व्यवस्था की है, दवाईयों की उपलब्धता की है, ये सब कुछ आप कर रहे हैं। मगर मैं समझता हूँ कि जब तक स्टैंडर्ड लेवल के होस्पिटल का निर्माण राज्यों में नहीं करेंगे, जैसा कि सभी माननीय सदस्यों ने कहा है, तब

तक आपकी भावना के अनुकूल काम नहीं हो सकेगा। अगर आप चाहते हैं कि लोगों को विकित्सा सुविधा उपलब्ध कराएं तो उसके लिए मैं समझता हूँ कि आप इस पर ध्यान दें, अब से कुछ वर्ष पूर्व लखनऊ और पटना में स्वर्गीय इंदिरा गांधी जी के नाम पर आईजीएमएस हॉस्पिटल खुला था। उसकी परिकल्पना यह थी कि वहां एम्स के स्टैंडर्ड का इलाज हो। मगर उसके हालात ठीक नहीं हैं, चूंकि राज्य सरकार के पास इतना पैसा नहीं है और केन्द्र सरकार से पर्याप्त मात्रा में अनुदान नहीं मिल रहा है। इसकी वजह से वह ठीक ढंग से काम नहीं कर रहा है।

मैंडम, मैं आपके माध्यम से मंत्री जी का ध्यान आईजीएमएस, पटना, शेखपुरा के अंतर्गत जो हॉस्पिटल का निर्माण कराया गया है, वह अप-टू-मार्क नहीं है। वह अप-टू-मार्क हो, इसके लिए मैंने आपसे निवेदन भी किया था कि उसके लिए आप राशि उपलब्ध कराएं... (व्यवधान) यह जनता से जुड़ा हुआ सवाल है। बिहार में बहुत परेशानी एवं दिक्कत है। मेरा मंत्री जी से निवेदन है कि वहां के लोगों की परेशानी को दूर करें। आप आईजीएमएस को अपग्रेड करने का काम करें। वहां पटना मेडीकल कॉलेज है और यह देश में ख्याति प्राप्त हॉस्पिटल था, लेकिन आज उसकी स्थिति बहुत खराब है। आपने पिछले दिनों वहां के लिए कुछ राशि दी है और उसका कुछ अपग्रेडेशन हुआ है। वहां इतना अधिक लोड है, चूंकि बिहार में उस स्टैंडर्ड का कोई हॉस्पिटल नहीं है, इसलिए बिहार से दूर-दूर से लोग आकर पटना मेडीकल कॉलेज या आईजीएमएस में इलाज कराते हैं। वहां उत्कृष्ट डाक्टर नहीं हैं, अच्छी व्यवस्था, साधन एवं उपकरण नहीं हैं। लोगों को एमआरआई कराने के लिए दूसरी जगह जाना पड़ता है, क्योंकि एमआरआई के लिए वहां कोई मशीन नहीं है। सरकारी अस्पताल में एमआरआई के लिए कोई मशीन उपलब्ध न हो, इससे आम लोगों को कितनी दिक्कत होती है, क्योंकि एमआरआई कराने के लिए चार-पांच हजार रुपए लगते हैं। [s61]

महोदया, बिलो पॉवर्टी लाइन वाला आदमी कहां से अपना इलाज करा पाएगा। उसके पास इतने पैसे ही नहीं होते हैं, इसलिए उसकी जान चली जाती है।

सभापति महोदया : अब आप अपना भाषण समाप्त कीजिए। इस बारे में आप मंत्री जी को अलग से पत्र लिख दीजिए। मंत्री महोदय देख लेंगे।

श्री राम कृपाल यादव : महोदया, हम पत्र तो लिखते ही रहते हैं। मैं इसलिए बोल रहा हूँ जिससे माननीय मंत्री जी का ध्यान इस ओर जाए। मैं अपनी बात समाप्त कर रहा हूँ।

सभापति महोदय : अब आप समाप्त कीजिए।

श्री राम कृपाल यादव : महोदया, मैं समाप्त ही कर रहा हूँ।

आप जवाहर लाल र्नातकोतर आधुनिक शिक्षा और अनुसंधान संस्थान, पुडुचेरी हेतु विधेयक लाए हैं, यह अच्छा किया है। इसके साथ ही साथ, मैं निवेदन करना चाहूंगा कि आई.जी.एम.एस. या पी.एम.सी.एच. और पटना मेडीकल कॉलेज को भी अगर आप, इसी प्रकार विधेयक लाकर, उनमें भी मेडीकल की उत्कृष्ट सेवाएं उपलब्ध करा दें, तो आपकी बड़ी कृपा होगी।

मेरा निवेदन है कि इस तरह की संस्थाएं वहां भी खोलिए। मैं आपका ध्यान पी.एम.सी.एच. की ओर आकृष्ट करना चाहता हूँ। वहां जिस लैवल के डॉक्टर पढ़ाने हेतु चाहिए, वे नहीं हैं। सभी डॉक्टर रिटायर हो गए हैं। अब संस्थान के पास पैसा नहीं है, इसलिए वहां ऊंचे लैवल के डॉक्टरों की नियुक्ति नहीं हो पा रही है, जो उच्च कोटि की डॉक्टरों की शिक्षा दे सकें। मैं समझता हूँ कि उस संस्थान में उच्च स्तर के डॉक्टर यदि भर्ती किए जा सकें, तो यह भारत सरकार की बिहार की जनता के ऊपर बहुत बड़ी कृपा होगी। संस्थान डिग्रेडेशन में आ रहा है। पी.एम.सी.एस. की एफिलिएशन खत्म हो रही है। उस पर योजना कंडीशन लगाई जा रही है। मैं आपके माध्यम से मंत्री जी का ध्यान आकृष्ट करूंगा कि वे इस तरह की व्यवस्था करें और वहां के एम्स को जल्दी चालू कराएं, ताकि लोगों को उच्च कोटि की विकित्सा सुविधाएं शीघ्र उपलब्ध हो सकें।

महोदया, जो बातें मैंने कही हैं, मैं समझता हूँ कि मंत्री महोदय उन पर गौर करेंगे और निश्चित रूप से बिहार जैसे पिछड़े और गरीब प्रदेश हेतु जो हमारी न्यायोचित मांग हैं, उन पर विचार कर के आर्थिक राशि मुहैया कराके उन दोनों कॉलेजों को उत्कृष्ट कराएंगे और वहां के एम्स को चालू करा के वहां के लोगों पर बहुत बड़ा उपकार करेंगे। मैं पुनः इस विधेयक का समर्थन करते हुए, आपको धन्यवाद ज्ञापित करते हुए, अपनी बात समाप्त करता हूँ।

SHRI BRAJA KISHORE TRIPATHY (PURI): Madam, we are discussing the Jawaharlal Institute of Post-Graduate Medical Education and Research Puducherry Bill, 2008. This Bill intends to make the institute a statutory body corporate and to declare it as an institution of national importance. This Bill also empowers the institute with academic autonomy.

Madam, I support this Bill to give autonomy to enable JIPMER to create an environment conducive to high standard of medical education. When we are discussing this Bill, India faces an acute shortage of manpower in health sector. According to the Planning Commission's report, India is short of six lakh doctors, ten lakh nurses and two lakh dental surgeons. Indian doctors who have migrated to developed countries form nearly five per cent of their medical work force. That means around 60,000 Physicians are estimated to be working in countries like the US, the UK, Canada and Australia alone. This is when India, on the other hand, has a dismal patient-doctor ratio.

According to this report of the Planning Commission, for every 10,000 Indians, there is only one doctor. In contrast, Australia has 249 doctors, Canada has 209 doctors, the UK has 166 doctors and the US has 548 doctors for every 10,000 people. India has also an acute shortage of dental surgeons. At present, the number of dental surgeons registered in India stands at just about 73,000 against the requirement of three lakhs. Similarly, the Health Ministry estimates that there needs to be one nurse for every 500 people. According to this India requires 21 lakh trained nurses in 2007, but only 11 lakh nurses are now available.

This has made the Planning Commission to suggest that medical sector should be opened up completely. I do not know what the Government is doing in this regard. The report says, the shortage of human resources is a distressing feature of India's health care services. This staff shortage is also there in other aspects of medical infrastructure in the categories of health care

professionals like radiologists, laboratory technicians, dental hygienists, physiotherapists and medical rehabilitation workers.[\[r62\]](#)

So, in all the spheres of the medical sector, we have shortage of manpower. When this is the state of affairs, when the NDA Government has decided to open six AIIMS-like institutes in the country including Orissa for the last four years, I do not know why this Government, for political reasons, is not doing anything to develop and establish the AIIMS-like institutes that has been decided by the earlier Government. So, I would rather request that the Government should come forward. The Health Minister is from the doctors fraternity. I hope, he must have better knowledge than we have. He should take care how to develop the infrastructure in medical sector. Only doctors, staff and work force are not enough. We have also shortage of all the medical instruments. Doctors are good. Those Indian doctors who are working abroad, they are not only highly educated but also they are quite appreciated. They have gone there from the Indian soil, from our own institutes; they are good doctors in all aspect. But we have lack of infrastructure here. We do not have the modern machinery that is required in the hospitals. We do not have other things. We do not have hospitals, buildings etc. We are lacking all these things. When you are just upgrading this Institute, it is a quite welcome step. We support it. The other thing is that in other States, in other sectors, in other areas, where there is also requirement, the Government should also come forward to help and do the needful. Thank you, Madam Chairman.

SHRI C.K. CHANDRAPPAN (TRICHUR) : Madam, I am very happy that the hon. Minister Dr. Ramadoss has initiated a Bill that is very good and I support it. I share the joy and happiness expressed by the other Ramadass who is a member from Puducherry. We are all happy. My point is that Pondicherry is a State with a difference. It is unlike any other Indian State. It is spread over in the country. There is Mahe, there is Yanam and there is Karaikal, far apart. How the people in those regions will get benefit? That also, we have to think about. Personally, I feel emotionally attached to Mahe because I was elected to this Parliament from Tellicherry just bordering Mahe. From Puducherry, we used to get a lot of representation on their various problems. So, Sir, if there is any possibility, my suggestion is that – I do not know; it is a post-graduate institute and all that; I understand the complications – if the university centres could be established in Yanam, Mahe and Karaikal, that would be really good because the whole State will get benefited by it. So, I would request you to give a serious look into this problem. I do not suggest anything because I am not a doctor to know how these kinds of institutions are working. Mostly doctors spoke about it. But I hope the Minister will look into it considering the peculiar character of Puducherry State. This is one thing. I support the Bill.

Secondly, Mr. Kharventhan has raised a serious issue. That is not related particularly to this Institute but it is a serious problem which the country is facing today. Just now, my friend has mentioned how seriously we are lacking in India the trained medical personnel, from doctor to nurses to medical workers. This is an area where special attention has to be provided so that we create enough people. Even if we are not coming to the level of European States or America, at least, we must have a respectable situation.[\[r63\]](#)

Now, Sir, the very fact is that we have a very big demand for these personnel, and it made this area as an area of big commercialisation. Medical Institutes, Medical Colleges, Nurses Institutes, and all these associated things which are coming up all over the country and especially the self-financing colleges are scandalous. I do not want to go into the details.

Legally, paying or accepting capitation fee is not permissible. Now, who can prove it? But the fact is well known. Just now he mentioned that there is a package published by one University in Tamil Nadu. You pay one crore of rupees. How do you pay that amount of Rs. One crore? It is a capitation fee. That package says: "You pay Rs. One crore, you can become a doctor and you can become a specialist." So, what I suggest here is – Shri Anbumani Ramadoss will be remembered through history if he is doing that – that a Central legislation regulating the creation of medical institutes is brought forward. Admission, appointments, and everything should be properly regulated. I am not against the private sector entering this field. They can. Probably the Government may not have money to shell out. But when the private sector comes and makes a joint venture or start a self-financing institution, it should be under the scrutiny of the State. Scrutiny of the State is not to create any problems for them but to safeguard the interests of the people. So, I would like to support Shri Kharventhan's point of view. My desire is that a Central legislation is the only remedy. I hope, the hon. Minister will consider that.

Madam, the last point that I would like to make is about setting up of AIIMS like Institute in Kerala, which everybody has been demanding. At the time of the NDA regime, this decision had been taken. When my friend, Shri Francis George raised this issue, the Minister intervened, and I am glad that he intervened and said: "Do not worry. In Trivandrum, the work has started." I do not know the details. But what I understood from the Press is that the amount allotted to create an Institute like AIIMS is not enough. Certain amount is allotted and certain work is taking place there. I am happy that it is happening. But the promise given was that these Institutes in different States would be like the All India Institute of Medical Sciences. It conveys a certain meaning. So, to that extent, I would like to know whether that Institute will be developed. I hope, the Minister, while replying to this debate, may

make that clear.

With these few words, I fully support the Bill, and I am very happy and fully join in the joy and rejoice of the people of Puducherry.

DR. K.S. MANOJ (ALLEPPEY): Madam Chairman, I rise to support the Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry Bill, 2008.

Madam, JIPMER, Puducherry is a prestigious institution, which is catering the need of medical education and research in the country. By an Act, this Institute has been given the status of an institute of national importance.

Madam, in the country, for medical education and research there are many research institutes and medical institutes. [H64]

Madam, only very less researches are taking place. But the sad thing is that whenever the medical teams, be it the medical inspection team of the Medical Council of India or be it the National Board of Examinations, visit various medical colleges and institutions in the country, they find that the number of research papers, doing research in various medical colleges is very, very less. Only the thesis paper which is mandatory in postgraduate medical courses, which is mostly there in most of the medical colleges.

Madam, in the JIPER, Pududherry, already various researches are taking place. While I was working as a medical college teacher in Kerala, there used to be research in the case of medical education. They have developed a particular course to train the medical teachers. That is there in JIPMER, Puducherry. My suggestion is that it should be developed a little bit more, and various teachers and faculty members in various medical colleges should be trained in JIPMER, Puducherry also.

Another important point, which I would like to make, is that there is a declining trend of medical ethics in the medical profession. But nowhere in the country are medical ethics being taught. Only in forensic medicine, which is deal with post-mortem and autopsies, medical ethics are taught. My suggestion would that in the JIPMER, Puducherry, medical ethics as well as communication skills should be taught to doctors. Communication skills for the doctors are very essential. All the quarrels with the patients that are taking place in the Casualty are just due to the lack of communication skills of doctors. My view is that the communication skills should be developed and evolved as a special subject. Similarly, medical ethics should be taught to the medical students.

Madam, nowhere in the Bill, there is a mention about the autonomous nature or deemed to be university nature of the Institution. But the Institution has got the capacity to give degrees including the postgraduate degrees, paramedical degrees and other certificates to the students.

MADAM CHAIRMAN : Now, please conclude.

DR. K.S. MANOJ : I am concluding, Madam.

My suggestion is that autonomy should be given to the Institute. In the Bill itself, this Act oversees the Indian Medical Council, the Nursing Council and other regulatory bodies in the country.

MADAM CHAIRMAN : Please conclude, now. Your Party has already taken so much time.

DR. K.S. MANOJ : I am making very important points. Just allow me to make two-three more points.

MADAM CHAIRMAN : You have to conclude within a minute.

DR. K.S. MANOJ : Madam, the age limit for the President of the Institute is not mentioned here whereas the same for the Director is mentioned. When in the case of AIIMS and other Bills, we are brining in some amendments. Here also, some age limit should be prescribed for the President of the Institute....(*Interruptions*)

Similarly, in the JIPMER, Puducherry, there is no mention of Post Doctoral Course, DM Courses and PhD Degrees to be awarded from the university. All these things should be taken care of.

MADAM CHAIRMAN : Please conclude now.

DR. K.S. MANOJ : Madam, I am on my last point.

MADAM CHAIRMAN : Your party has taken more than enough time.

DR. K.S. MANOJ : I am just concluding. My last point is about reservation. There is a mention about 20 per cent seats out of total 75 seats should be reserved for the local applicants. But I doubt whether it holds good before the Judiciary; whether this clause stands before the court of law, I doubt. It is because nowhere in the country that reservation is given. There are so many institutions in our country. I would be very happy if some reservation is given to the local applicant in an institution at my place.

[r65]

But we should see the thing in such a good manner in an institution of national level and national importance. I do not know whether it will stand good or not.

With these few suggestions, I conclude.

SHRI SURESH PRABHAKAR PRABHU (RAJAPUR): Madam, medical education, and generally for that matter, all the health care system in India needs a total revamp. Therefore, any institution that you try to create to address this problem is always a welcome measure.

The Minister has been running a campaign against lot of ills in the society. He is trying to run a campaign against tobacco and against stars appearing to support for it. Mr. Minister, I would request you to also run a campaign for improving medical education in India. That is something which we really need. Therefore, if you are trying to create an institution of national importance under Entry 64 of List I of the Seventh Schedule to the Constitution by declaring this Jawaharlal Institute of Post-Graduate Medical Education and Research in Puducherry, it is a welcome thing.

My request is that the number of trained doctors that we need in India is increasing rapidly. We need specialization in several fields because there are new types of diseases which are coming up, the diseases which were not known to us some years ago. We are developing new medicines to address that. It is because we are developing new formulations, in fact, more complex diseases are now getting manifested because the human genes are developing some sort of a resistance to those medicines and therefore, new diseases are coming up. So, what we really need is that we fresh research of various types to address this problem. We need research at the pharmaceutical companies level so that they can develop new molecules and new drug delivery system so that this problem can be addressed. But that is one hand of application of medicine.

On the other hand, we need people who can diagnose the problem, who can then treat a disease, and to do that, we need now huge number of medical practitioners, doctors and specialized doctors in the field. Unfortunately, the number of doctors that we need is far, far greater than the Education delivery system can produce those doctors. So, my request to the Minister is this. Why should we confine and bring a law in the Parliament to declare one institution as an institution of national importance? Why do you not create one for each State? I would say why not create 10 to 20 institutions like this, as many as possible, so that each State would have at least one but more, maybe one for each district? Just imagine there are 600 districts. I am sure you know it better because you are a medical doctor, and I am not. Probably, we have more than 600 diseases which need specialized attention. So, why do you not think about a model in which we create at least one specialized institution per district of a great importance?

Second point is that when we call it an institute of national importance, what does it really mean? It is because I remember some time ago about the Civil Aviation Minister declaring in the Parliament that now we will call this airport as international airport. So, it is like that there is Ram Bharose Hindu Restaurant in many places. Now, we call it as a Five Star Hotel from tomorrow. Does it really become Five Star Hotel just because we declare it? Just because we call an airport as an international airport, does it really become international?

Therefore, when we declare an institution of national importance, how do we define it? What is the criteria? How do we have benchmark? Look at the All-India Institute of Medical Sciences, one of the finest institutions. In fact, when we go there, now-a-days we see so many patients occupying every inch of space that is available there. That means, there is a need for it. But at the same time, because we call it as an institution of national importance, we spoil it to the level of an institution of national squatting. People are squatting all over. So, why not really try to create an institution which can be measured in terms of national standard.

My request to the Minister would be, do not call it as an institution of national importance alone. Why not benchmark it against the best international practices that are prevailing in the medical field? So, each of these specialized institutions will not only conform to national standard but also to international standard, and that would be the lasting contribution.

We have some other problems on medical health care system. One is, of course, the delivery system. The other one is the formulation system, and the third one is this. Actually speaking, how do you make sure, not the specialized institution in India, availability of people who are working at the lower level for which there is a huge shortage?

MADAM CHAIRMAN : One minute please.

Now, I think the Bill is also to be passed. If the House agrees, we will extend the time up to 6.30 p.m. or so.

SHRI SANTOSH GANGWAR (BAREILLY) : We can extend the time till we pass the Bill.

SHRI BRAJA KISHORE TRIPATHY : Let us extend the time till the passing of the Bill.

MADAM CHAIRMAN: So, the House is extended till the passing of this Bill.[\[m66\]](#)

18.00 hrs.

SHRI SURESH PRABHAKAR PRABHU : Madam, on the one hand, we certainly need the specialized institutions of this kind and I welcome this, as I said. On the other hand, we need specialized medical delivery system institutes. At the same time, we have also huge shortage of people working at the lower level of this medical delivery system. We need mid-wives and various other people. We also need people working as technicians who are not available. I think, that needs a huge attention.

Hon. Minister has launched a very ambitious project - Rural Health Delivery Programme. In fact, I am looking forward to it becoming a successful programme because this is a very ambitious type of programme which he has launched. But in that also, one of the key components is going to be the type of people that will be required to man these institutions. In fact, I am aware that he was trying to tell doctors that they should spend one more year in rural areas and the type of protest that came up. So, how do you find people who will be able to go to the villages, the people who could be trained in the villages? Can we think about not just institutions of national importance like the one we are creating but also institutions at lower level – village level and sub-district level – which can produce the type of people that we require on the lower level? That is also something which needs your attention. I would request him to think about it.

जवाहरलाल इंस्टीट्यूट ऑफ पोस्ट ग्रेजुएट मेडिकल एजुकेशन एंड रिसर्च, पुदुच्चेरी को हमारे स्वास्थ्य मंत्री जी ने इस सदन में इंट्रोड्यूस किया है और इस संस्थान के लिए 104 करोड़ रूपए मंजूर किए हैं। यह बहुत अच्छी बात है। वहां सुनामी से बहुत ज्यादा नुकसान हुआ था, इसलिए वहां पर ज्यादा से ज्यादा डाक्टरों को ट्रेनिंग देने की जरूरत है। इस इंस्टीट्यूट के नाम में केवल जवाहरलाल शब्द रखा गया है। मेरा सुझाव है कि इसमें जवाहरलाल के साथ नेहरू शब्द जोड़ दिया जाए। मेरा दूसरा सुझाव यह है कि जिस प्रकार प्राइवेट मेडिकल संस्थानों में 25 लाख, 50 लाख या एक करोड़ रूपए लेकर डाक्टर बनाए जाते हैं और फिर वे लोग मेरिट की बात करते हैं। यह इंस्टीट्यूट एक सरकारी संस्था है, इसलिए ज्यादा पैसे की बात नहीं होगी, फिर भी कम से कम पैसों में हमारे एससी-एसटी स्टूडेंट्स को इसमें एडमिशन दिए जाने की आवश्यकता है। इस बिल पर बोलने वाले रामदास जी पांडिचेरी के हैं, इसका जवाब देने वाले रामदास जी और मैं रामदास मुंबई का हूँ, हम सभी को मिलकर इस मेडिकल संस्थान को मजबूत करने का प्रयत्न करना चाहिए। मेरा यही सुझाव है कि जिसमें जितने स्टूडेंट्स को एडमिशन मिलने वाला है, जो डाक्टरों यहां से पोस्ट-ग्रेजुएट होकर डाक्टर बनने वाले हैं, उनको रूरल एरियाज में काम करने की ट्रेनिंग देने की आवश्यकता है। बहुत बार ऐसा होता है कि जो डाक्टर बनते हैं, वे सभी सिटी में ही रहना चाहते हैं, वे रूरल एरियाज में नहीं जाना चाहते हैं। मेरा निवेदन है कि डाक्टरों को रूरल एरियाज में भेजने की आवश्यकता है। आप गांवों में काम करते हैं। मैंने पुदुच्चेरी जाते हुए रास्ते में तीन-चार बार आपके गांव को देखा है। इन डाक्टरों में से ज्यादा से ज्यादा ऐसे लोगों को ट्रेनिंग मिलनी चाहिए जो गांवों में काम करना चाहते हैं।

मैं अपनी पार्टी की ओर से इस बिल का समर्थन करता हूँ। इस इंस्टीट्यूट को जल्दी से जल्दी शुरू करने की आवश्यकता है।

18.04 hrs (Mr. Deputy-Speaker *in the Chair*)

DR. ANBUMANI RAMADOSS: Sir, firstly I would like to thank all the hon. Members of Parliament in this august House for supporting this Bill and giving their valuable comments on Jawaharlal Institute of Post-Graduate Medical Education and Research, JIPMER, Puducherry.[\[SS67\]](#)

Sir, it was a long standing demand not only from the people of Pondicherry, but also from the people of Tamil Nadu, Andhra Pradesh, Kerala and Karnataka from where patients used to come to this institute. As I have already said in my initial statement that this institute was given its name in 1964, and this institute was there before that also. At that time, AIIMS and PGIMER, Chandigarh were started along with this institute. Hence, all the three institutes were started together in a space of a few years. The two institutes, namely, AIIMS and PGIMER, Chandigarh were started as institutes of excellence by a statute of Parliament, but unfortunately, JIPMER was not at that point of time. At that point of time itself there were so many Committee recommendations that JIPMER should be made a National institute and should be given a statute by the Parliament so that it can enact its own policies and priorities. Unfortunately, it was not to be for all these years. The hon. Member of Lok Sabha from Pondicherry, Prof. M. Ramadass, has rightly said that the institute did not progress to the extent it was supposed to because of the logistics and the distance from Delhi to Pondicherry. This is the only Central Government multi-speciality institute in South India, and it was started in Pondicherry.

I have been, as an individual, going into the history of that institute as well as the functioning of it for the last 25 years. I, as a medical doctor, have known this institute for the last 25 years, namely, about its progress; how it was going; and where it was going. Unfortunately, midway, it was not going as it was supposed to with regard to the research works. Further, there were so many vacancies available and infrastructure was not there. In fact, when I took over as the Minister nearly 4 years ago, CT Scan facility was not functioning; there was no Neurologist in the Neurology Department; and road accident victims were shifted to the Pondicherry Government Medical College, Government Hospital or were shifted to Chennai. This was supposed to be a Central Government institute, but this was its status.

I have taken a series of meetings since then. I have already said that a lot of patients not only from Pondicherry, but Tamil Nadu, Kerala, Karnataka and Andhra Pradesh used to come and rightly so, since they had faith in that institute. Since the last four years we had taken a number of steps to improve it by putting up more infrastructure for it. But the problem persists with regard to the faculty and manpower. The problem of recruitment, today, is that it is done through the UPSC. The problem that we are facing through UPSC is that they take nearly two years to call for advertisements, and when they call the doctors -- who are selected for JIPMER, Pondicherry -- they do not join or they join and then after one month or six months they leave it. Hence, there is huge vacancy, which we could not fill up at our level nor the institute could do justice to them. Therefore, we had to go through a lot of discussions to bring it to an institute of National importance, and give it a statute by an Act of Parliament so that it has its own autonomy in academic functioning. Further, it will have its own Academic Committees, Governing Body, Institute Body, its own Finance Bodies, etc., so that it could take care of itself and give its own degrees. It could do what it wants to do in the institute so that it could come out from all these slumbers that have been there for the last few years.

Coming to this Bill, it was passed in the Rajya Sabha. I would like to inform that we had to go through some steps, and some corrections were made in it. I had to take this Bill back to the Cabinet, so that a lot of concerns of the Members of Rajya Sabha were also taken into consideration. Now, we have a comprehensive Bill before us in the Lok Sabha to be decided today by the hon. Members.

The hon. Member of Pondicherry, Prof. M. Ramadass, has said about concerns of the employees, etc. In fact, during the course of the last two years, myself, at my level; at the Members of Parliament level; at the officers level; at the Secretary level; at the Joint Secretary level had taken a series of discussions with the employees, faculty, students, etc., so that the importance of the Bill was addressed and they had the knowledge about the Bill.[\[r68\]](#)

We have a comprehensive Bill today where concerns of the employees, students, the reservation policy, etc., have been taken into consideration so that we get a good institute.

Some of the Members asked why only Puducherry and why not others also? As I said, this is a longstanding demand. In fact, that is a very wonderful institute. I would like the hon. Members to visit that institute and see the importance and the bigness of that institute, and the research and the faculty. Alumni from there have been going all over the world.

Coming to the responses to individual questions, my good friend hon. Member Kiren Rijju talked about the budget. The budget will definitely be increased. Today people are comparing the budgets of AIIMS and the PGI with that of JIPMER and saying that Rs.56 crore to Rs.60 crore is nothing. However, even that has not been able to be spent by the JIPMER because of the logistics. For everything they have to come to Delhi, and then there were a lot of issues involved in that, unlike the AIIMS and the PGI. Once we give them this statute today, it will be easier for them to function and they could take care of their problems.

With regard to infrastructure, in the last two years we have put in about Rs.180 crore investment into JIPMER, Puducherry for

having speciality, super speciality block, nursing college, cancer block, etc. We have been trying to give more infrastructure. But then, again as I said, the problem is of the faculty and the manpower which we are trying to address today.

Hon. Member Rijju was enquiring about the *Aamchi* system of medicine. I think I am digressing a little bit from JIPMER Puducherry, but then the hon. Member was enquiring about this system called *Aamchi* which is followed in the Himalayan regions. It is a proud system. I was fortunate enough to visit Leh-Ladakh where they follow that system. I had visited that exhibition in that institute and I found to my surprise and amazement that it is a very rich system. I have asked my officers from the Department of Indian Systems of Medicine to take up that issue and see whether we could recognise the system or not. We are considering taking it up. After going through the various scientific fora, I have asked the Indian Council of Medical Research as well as the Department of Indian Systems of Medicine much earlier to take up that issue as well.

With regard to the point on homoeopathy institute, let me find out what is the issue and then take that up.

With regard to NEIGRIMS, in fact, we have a good institute for the North-East in Shillong called NEIGRIMS. The issue which the hon. Member raised is that it is as though we are outsourcing those. The problem is that in the North-East we do not get faculty. We have a beautiful institute. It is one of the best institutes in the country. We have spent nearly Rs.230 crore on that institute. But it has a long history starting from 1984. Finally now we are completing that and the hospital is functional. However, unfortunately, specialists are not there. Nobody wants to come and join there. They were not available. So, we were trying to have a series of recruitment drives but our efforts failed. Nobody wants to join and anybody joining also comes out. Then we had to turn to other institutes which are doing service-oriented work, institutes like Sankar Netralaya, institutes like CMC Vellore, institutes like Tata Memorial. I do not know why the hon. Member was saying that the Minister is focusing only on South India. There we have these big enlisted institutes doing social service rather than being some commercial entities.

SHRI KIREN RIJJU (ARUNACHAL WEST): I am not saying that South India is taking the benefit. South India has a rich tradition of medical institutions. Let us in the North-East benefit out of your rich expertise in that field.

DR. ANBUMANI RAMADOSS: That is precisely what we want to do. We want to empower that institute with all faculty and full equipment. The UPA Government's policy is that not one patient from the North-East should go out of the North-East for treatment. That is the policy of the UPA Government and that is precisely what we are trying to do. We are trying to have that infrastructure there. I am sure you will acknowledge what the Ministry of Health has done in the North-East in the last four years. All the Chief Ministers from the North-East have acknowledged that. There has been a series of upgradation plans of institutes, building new institutes and all that. I am visiting RIMS, Imphal in the middle of May with regard to its upgradation. A lot of things are happening in that. [\[KMR69\]](#)

SHRI DEVENDRA PRASAD YADAV (JHARJHARPUR) : Also maintain social justice.

DR. ANBUMANI RAMADOSS : My good friend, Shri Kharventhan mentioned about medical education. A lot of other Members also raised important issues. One is medical education and the other is health human resource which is about lack of faculty. Not many Members have raised about six AIIMS-like institutions, about which I would mention. On the office of profit, I would say that as a Member of Parliament, in this Institute of Puducherry, nobody would be coming under the office of profit issue.

Coming to the medical education broadly – I want a little time – even though this is about JIPMER, Puducherry, I digress little bit and go a little bit into medical education because I need a lot of time to tell as to what our Government is doing in medical education, as to how we are planning for the health human resources for the next 40 years, and as to how we intend to do. One example, I would give is the 11th Five Year Plan. In fact, in the 10th Five Year Plan, the budgetary allocation for the Health Ministry was about Rs.42,000 crore and in the 11th Five Year Plan, my Prime Minister has earmarked a sum of Rs.1,36,000 crore, out of which Rs.40,000 crore go for infrastructure.

Regarding infrastructure, Shri Suresh Prabhu was telling about as to why not start one in each district. I do not think we could start a centre of national importance in each district. But district-wise we are going to start nursing colleges, Auxiliary Nurse Mid-Wife colleges (ANM); GNM colleges and schools. For all this, fortunately we are providing a lot of support. Today, as I have already mentioned, we do not even have one BSc nursing college in a State like Bihar, which has a population of about 11 crore. This is the sorry state of affairs. In fact, most of the North Indian States have. Exactly for this purpose, we have started the National Rural Health Mission, under which all these things like infrastructure is being upgraded. We are trying to do all these things. We are also providing health human resources about which I could go on and explain but I need two or three hours.

Coming to the AIIMS-like institutions, my predecessor, Shrimati Sushma Swaraj, when she was the Minister, she had launched a scheme called *Pradhan Mantri Swasth Suraksha Yojana*, under which they wanted to build six new AIIMS-like institutions and upgrade seven existing institutions to a certain level. Then, after that, our Government took over. At that time,

since elections were there, they could not proceed further and the UPA Government took over. It is not like that with the change in Government, the policy would change. Shri Tripathy was mentioning about the political interference and all that, which I would definitely counter that. It is a continuity. Government comes and Government goes but it is a continuity. Definitely, we are following the programme. I would like to commend my predecessor, Shrimati Sushma Swaraj for bringing out that very innovative concept. I have already thanked and commended her for this. Definitely, we are going through this. Again, I would like to say that there has been a delay. I acknowledge the delay; I regret for the same. I could explain the delay, etc. In fact, the Standing Committee on Health has gone in depth into this and they were also upset. I am more upset than the Standing Committee. There has been some delay due to non-response to the tenders, etc. Work has started in Rajasthan; work would be starting in one or two months in Bhubaneswar, in Bhopal, in Patna, etc. This is how the work is distributed and it would take little more time for me.

Even though the previous Government had plans of building six new and improving seven institutions, we are now improving nearly 13 institutions – from seven we are improving 13. Kerala was not in the list of the last Government. After the UPA Government came into power, we included Trivandrum Medical College in Kerala for upgradation and allocated Rs.120 crore. Throughout the country, we have just one slab of Rs.120 crore – Rs.20 crore from the local Government and Rs.100 crore from the Central Government. We try to do that. I would like to assure my friend, Shri Tripathy and others that definitely we are trying to work out the modalities. We had split between the housing and the hospital, etc. to quicken the pace of work. Again, I would like to categorically assure the House that we are definitely into the projects, Sir. [r70]

SHRI KHARABELA SWAIN (BALASORE): Mr. Minister, are we to take it as an assurance from you that in Bhubaneswar, the work will start within the next two months?

DR. ANBUMANI RAMADOSS: Within the next three months, it will start in Bhubaneswar.

SHRI KHARABELA SWAIN : Okay, three months' time is all right.

DR. ANBUMANI RAMADOSS: In three months' time, the work will start in Bhubaneshwar.

SHRI KHARABELA SWAIN : Thank you.

श्री राम कृपाल यादव (पटना) : माननीय मंत्री जी ने कहा पटना में भी शुरू होने जा रहा है।

DR. ANBUMANI RAMADOSS: My priority is Bihar.

I definitely acknowledge the concern of the hon. Member. Bihar, Uttar Pradesh and Orissa are the three States which are in the lowest slab in the health indices. We are giving a lot of priorities and more than this, we will definitely be giving. Definitely we will do that.

SHRI RAM KRIPAL YADAV: Thank you very much.

DR. ANBUMANI RAMADOSS: Mr. Dome raised some issues about which I have already said.

Research is something which the hon. Members have raised. They said more focus should be given on research, rightly so. JIPMER, Puducherry will start that; it was supposed to start early, but mid-way, it has lost itself somewhere. But now, since it will become a national Institute, after the hon. Members pass this. So, a lot of priorities will be given on research; a lot of allocation will be given on research. Shri Suresh Prabhu was saying about it, from lab to the bed-side; it could be done on those lines. Mr. Francis was telling about nano-technology, stem cell research, molecular biology research, etc. Definitely we will be taking them about.

There were issues about reservation which I have already talked about. Members have talked about the student fees. There was a concern about the student fees. I would like to say that in JIPMER, the fee of the first year student is about Rs.250. We are highly subsidizing the fees. In AIIMS also, the fee is about Rs.250-300 for the first year, unlike the IITs and IIMs where you have Rs.4-5 lakh as fees. We are highly subsidizing the fees and this is for the benefit of the poor students. We are taking them into consideration.

About the poor patients, already a commitment had been given and they will be taken care of. I am not aware of the five medical colleges that Mr. Shailendra Kumar was mentioning. If he could bring it to my notice, I would do. What are the five medical colleges? The medical colleges are State issues; he could bring it to my knowledge.

श्री शैलेन्द्र कुमार : इटवा में है, आपको पत्र भी लिखा गया था।

DR. ANBUMANI RAMADOSS : I do not know. It goes through a process; if that goes through the proper process, then we

approve it; that is all we do. We do not anything else more than approving those colleges. You can bring to my notice.

श्री शैलेन्द्र कुमार (चायल) : पूस्ताव आया था।

MR. DEPUTY-SPEAKER: You can meet the hon. Minister later on.

DR. ANBUMANI RAMADOSS: That will be appropriate, Sir.

Mr. Gao said that the Indian system of medicine should be improved. It is a suggestion well taken. He has again raised a very pertinent issue about the human, social psychology and patient-friendly and patient-safety measures. It is a very good suggestion; definitely we will be taking them up.

Mr. Manoj said about medical ethics. All these issues will be taken into account; this is the heart of the Institute – whether the doctor or the nurse or a paramedic, or anybody involved in the hospital, should keep this on the forefront – the ethics and the patient-friendly attitude should be there. They should work with these. All the steps will be taken on these issues as well.

I can give suggestions to the Institute to take up research, etc. Training of teachers is an important one. Definitely we will be taking that into account.

With these words, I request my friends, the hon. Members, through you, Sir, to pass this Bill. Thank you. ...(*Interruptions*)

MR. DEPUTY-SPEAKER: A good reply has been given.

The question is:

"That the Bill to declare the Institution known as the Jawaharlal Institute of Post-Graduate Medical Education and Research, Puducherry, to be an institution of national importance and to provide for its incorporation and matters connected therewith, as passed by Rajya Sabha, be taken into consideration."

The motion was adopted. [MSOffice71]

MR. DEPUTY-SPEAKER: The House shall now take up clause-by-clause consideration of the Bill.

The question is:

"That clauses 2 to 32 stand part of the Bill. "

The motion was adopted.

Clauses 2 to 32 were added to the Bill.

Clause1, the Enacting Formula and the Long Title were added to the Bill.

MR. DEPUTY-SPEAKER : The Minister may now move that the Bill be passed.

DR. ANBUMANI RAMADOSS : Sir, I beg to move:

"That the Bill be passed."

MR. DEPUTY-SPEAKER: The question is:

"That the Bill be passed."

The motion was adopted.

उपाध्यक्ष महोदय : बिल पास होने तक हाउस का समय एक्सटेंड किया गया था। यदि जीरो ऑवर लेना है तो हर मੈम्बर को सिर्फ दो-दो मिनट का समय मिलेगा।

अनेक माननीय सदस्य : सहमति है।

श्री राम कृपाल यादव : सर, जीरो ऑवर लिस्टेड है।

MR. DEPUTY-SPEAKER: Only two minutes will be given to every hon. Member. Not more than two minutes will be given to the Members to speak.

So, the time of the House is extended till we complete the Special Mentions.