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Title: Further discussion on the motion for consideration of the Indian Medical Council (Amendment) Bill, 2012 moved by Shri Ghulam Nabi Azad on 4th May, 2012.

MR. CHAIRMAN : Item No. 12. Dr. P. Venugopal to continue.

DR. P. VENUGOPAL (TIRUVALLUR): Mr. Chairman, Sir, the decisions of Medical Council of India are quite surprising at times. We have news about approval being given to private medical colleges very quickly but when it comes to Government medical colleges, a lot of hurdles are put and sometimes a year is wasted.

The Tamil Nadu Government has provided all the required infrastructure for opening a new medical college in Sivaganga. But it is yet to get the approval of the MCI. I would appeal to the hon. Minister that the MCI may be instructed not to treat Government medical colleges like private colleges. That is because all the seats in the Government medical colleges go to deserving and meritorious students of the society. Such students who receive medical education without paying capitation fees, exorbitant and tuition fees pass out and become outstanding doctors with the commitment to serve the society that gave them quality education.

I am not saying that there should be a compromise on the requirements of infrastructure but I am only driving home the point that the Government medical colleges should be given priority as State Governments are capable of making up small deficiencies quickly.

Hon. Chairman, Sir, I want to share my views with hon. Members regarding the MCI Act. Medical Council Rules were framed in 1956. As per the 1956 Act, a minimum of three members represented each State – one State nominee in consultation with the Central Government, one from each university, and one elected among the doctors in the State. The present MCI has seven members. Only one of them is from South India. It is noteworthy that 75 per cent of medical colleges are situated in South India. How can seven unelected members who do not represent the States and who are from elite hospitals, guide and conduct the medical education sector for the entire country.

The members are competent but their competence is in their respective field and they are super specialists. How will the members be able to spread knowledge and ensure rural medical care? We should have instead taken the Act of 1956 and modified it to enable democratic functioning with proper representation to the States rather than entrust it to the undemocratic, centrally-sponsored MCI.

Now, let us turn our attention to the National Commission for Human Resources for Health. This Health Commission will have one Chairman who need not be a medical doctor. It also consists of four full-time members, out of which only one will be a medical doctor and other three could be non-doctors. Out of eight part-time members, only one would be a medical doctor and the rest seven could be non-doctors.

All these members would be selected by the Centre and the States have no role to play. The composition of the Council is such that only two or three out of the total 13 persons would be doctors and all others will compulsorily be non-doctors. How could they guide the medical education in the entire country? How will the other countries recognize the degrees awarded and approved by this body? For example, will the British Medical Council recognize the degrees approved by this body? This will create a situation wherein people who have never been exposed to medical education would be deciding on medical issues. This Bill is totally flawed and should be scrapped in toto.

Instead, the revised version of the original 1956 Indian Medical Council Bill giving suitable representation to each State should be brought in. It is obvious that three out of seven MCI members are cardiologists and five out of seven from the private hospitals. They are currently working as specialists in their own hospitals. How can these unelected, private hospital-oriented super specialists who have no connection with any of the State Government hospitals where majority of Indians go, decide on medical education?

Hence, this Bill is trying to thrust these Central Government nominees into the MCI Board once more and this should be rejected.

With these words, I conclude.

SHRIMATI MANEKA GANDHI (AONLA): Sir, it is really important that this House understands the importance of the MCI. The current Minister's predecessor had made it his ultimate goal to take over the MCI because he realized that it had turned into a cash cow.

We opposed him in the Standing Committee of which Shri A.K. Antony was a Minister for five years. There was a unanimous resolution by every Member in the Standing Committee of every Party, that the MCI should not be taken over by the Government. As soon as this Government came and this Minister came, they took over the MCI, under the excuse that it would only be there for six months and then, they would give it back to an elected body, but it is now entering its third year.

The Minister said that he was taking it over on the grounds that there was an allegation of Rs.2 crore malfeasance. He promised that there would be total transparency. My remarks today would point out what transparency that has taken place in the last two years.

Permissions for under-graduate and post-graduate courses have been given by the Board of Governors of MCI in spite of many deficiencies observed in the assessment reports in assessments carried out by the assessors appointed by the BOG itself. This shows utter disregard for regulatory function with which it was entrusted.

In the cases of colleges which were found to have employed teachers with fake and forged certificates, regulations prescribe that such colleges should not be considered for granting permission for two academic years or for permitting post-graduate courses. However, contrary to the specific punitive measures provided under the regulations, permissions have been granted for MBBS courses and in some cases, even post-graduate courses have been permitted. Rather than using this power judiciously, the BOG has granted permission to many institutes even when the assessment reports of the assessment team appointed by the BOG itself had reported several deficiencies in their assessment reports, totally negating the basic function of the MCI to maintain the quality of medical education or produce good doctors.

Sir, the CBI had also conducted inspections of its own in several institutes for which it had received complaints. In their inspections, they had found many cases of irregularities in respect of teaching faculty and clinical material. It had found teaching faculty who had submitted fake and forged certificates or who were present only on the day of inspection. It had found fudging of data pertaining to clinical material by the management of these institutes. It had also observed inadequacy of clinical material. In some institutes deficiency of infrastructure was also found. It had meticulously gathered evidence in respect of as many as ten institutes and submitted the same to the MCI. These are the institutes:

1. Index Medical College, Indore
2. KPC Medical College, Kolkata
3. Rohilkhand Medical College, Bareilly
4. Sri Ram Murti Smarak Institute, Bareilly
5. Muzaffarnagar Medical College, Muzaffarnagar
6. Teerthankar Medical College, Muradabad
7. Guru Ram Rai Medical College , Dehradun
8. Kalinga Institute of Medical Sciences, Bhubaneswar
9. Bhaskar Medical College, Hyderabad
10. Adhiparashakti Medical College, Melmaruvarthur
11. Mamta Medical College, Khammam
12. Ulhas Patil Medical College, Jalgaon
13. New Medical College at Walyar, Kerala
14. New Medical College at Kalapa
15. Sri Venkateswar Medical College, Puducherry

16. Geetanjali Medical College, Udaypur

17. Azeeza Medical College, Kollam

As these institutes were found to have employed teachers with fake and forged certificates with evidence provided by the CBI, the provision of Section 8(3)(1)(d) of Establishment of Medical College Regulations debaring them for a period of two years is clearly attracted. In one case the CVC had also recommended action. No action has been taken against these colleges. In total disregard, they have been given permission to admit a fresh batch of students. This matter of granting permission to those colleges against whom the CBI had filed FIRs and had found gross deficiencies during the inspections conducted by them, which should have been debarred, requires thorough investigation. I would request this House to unanimously ask for a CBI investigation into the Board of Governors and the Ministry. The previous Minister had been charge-sheeted for corruption, doing the same thing with these medical colleges. This is simply an extension, in fact an increase of corruption.

Sir, let me now evaluate the performance of the Board of Governors who have been vested with the powers of the Central Government in the matter of permissions of the medical colleges and various undergraduates and postgraduate courses. Let me inform this House that the Board of Governors due to its incompetence and inefficiency has only managed to destroy a system created and nurtured over a period of so many decades and which was working fairly well.

A lot of procedural irregularities have been committed in evaluating applications for undergraduate and postgraduate courses. In some cases, the decisions which are conveyed to the institutes are contrary to those taken by the BOG, still no action to rectify the errors is taken. Evaluation of assessment of the institute for MBBS courses, which is a must for applicants of postgraduate courses as is prescribed in the Regulations, has not been carried out.

To the best of my knowledge 2000 applications for various PG courses for the academic year 2012-13 were received by the MCI till May, 2011. In this regard the hon. Supreme Court has issued a direction in Mridul Dhar case that the prescribed time schedules have to be strictly adhered to by all authorities and if any authority fails to do so, he would be personally liable. But so thick skinned is this BOG that it does not even care about this direction of the hon. Supreme Court.

Knowing fully well about the time schedule and the volume of work, the BOG should have planned to execute the task of deciding upon the applications of PG courses in such a manner so that the deadline prescribed by the Regulations - that is 31st of January for recommendation by MCI and 28th February for final decision by the BOG - should be met. However, it slept over it for five months. The assessment process only began in the month of December, 2011 knowing that the last date was the 31st of January, 2012. When BOG realised that due to their inefficiency, ineffective handling the deadline could not be met, it requested the Central Government to extend the deadline. The Central Government, of course, obliged - after all it is their own hand-picked MCI for reasons best known to the entire House - and obligingly extended the last date to 31st March without taking any permission from the Supreme Court. It also made a stipulation that MCI would give wide publicity of this extension of deadline. Instead of doing that the Board of Governors simply confined the decision to itself. It is only when the hon. High Court passed strictures on the current MCI for not following the Government direction, that publicity was given.

While all this drama was going on, the process of deciding upon the applications for postgraduate courses moved at a snail's pace and the momentum of process was not expedited at all. However, it is well known adage that time and tide wait for none. The BOG did not take any decision in practically all cases till last week of March, 2012. When they observed that time is slipping out of their hands, instead of taking any remedial measures, only put a general circular on MCI's website that those institutes whose applications have been rejected should remain present in the office of MCI on 26th and 27th March, 2012 for representation. Even at this point, most institutes had not received any communication at all and they were in total darkness about the fate of their applications. Under these circumstances, some institutes were asked to submit their presentations as late as 28th & 29th March, 2012 just to give a sham hearing - my hon. colleagues, a sham hearing - so that they could be rejected or accepted for reasons that have nothing to do with producing good doctors. No effective opportunity was given to these institutes for compliance verification. All this sequence just demonstrated how mockery has been made of an entire system by the present BOG.

Sir, I have also learnt that BOG had rejected more than 100 applications on the last date, that is, 31st March; not only that, when it was realized that BOG had forgotten to decide upon a number of applications, a special meeting was called on 3rd April, 2012 after the last date was over on 31st March, 2012 in total violation of Regulations and directions of the Supreme Court. And, these decisions have been communicated to the institutes with a date of decision and despatch, backdated

illegally as 31st March, 2012. This is a clear case of cheating which was not expected from Government regulatory body.

I have also been informed that even after doing all this jugglery, in about 30 to 40 cases, no assessment has been carried out at all because BOG has forgotten about these applications. This has enabled these institutes to approach hon. courts and get "deemed permissions" as per provisions of Indian Medical Council Act.

Sir, let me bring to the attention of the Members that the situation is equally dismal for the undergraduate courses as well, and the same story of inefficiency and callousness would be repeated. As per the prescribed Regulations, the first assessment has to be completed by 15th December and the institutes are required to submit request for permission by 15th February. The last date for making recommendations of MCI is 15th May and last date for taking final decision is 15th June. These are the directions of the Supreme Court.

MR. CHAIRMAN: Please conclude now.

SHRIMATI MANEKA GANDHI: However, I have learnt that about 200 assessments are still pending. No decision in respect of even one college has been taken by BOG. No decision has been communicated to the institutes where assessment has been completed before four months even.

As a matter of fact, as my narration has shown it is a continuing saga of taking decisions contrary to Regulations, violating the orders of the highest court of the land, and breaching blatantly the trust and faith posed by the Government of India in nominating them to the august offices at the cost of super-session of a representative body. This reflects upon the incompetence and inefficiency of the present BOG that the Minister is planning to extend. Has he done a good deed? We all know and I will say this clearly that medical colleges are asked for between*. This is the reason that why acceptances and rejections are given. ...(*Interruptions*)

SHRI GHULAM NABI AZAD: You cannot say this unless you have to substantiate it. You cannot make wild allegations. As a Minister, I can say that not even one person in the country will say that he has been permitted to enter into my house with a gift or just to wish me. Nobody has been permitted in the last three years. I am the first Minister in the Government of India, who has said on the website that if any person on behalf of the Minister or on behalf of the Ministry or on behalf of the BOG comes...(*Interruptions*)

MR. CHAIRMAN: Nothing else will go on record.

(*Interruptions*)*

SHRI GHULAM NABI AZAD: This is not done. You cannot do whatever you think. You cannot criticize...(*Interruptions*). It is because those who did not get permission, they approached you and made all types of allegations.

MR. CHAIRMAN: Please wind up. It should not go on record.

(*Interruptions*)*

SHRI GHULAM NABI AZAD: Earlier, they used to pay money; now no money is taken. Their applications are rejected. They just rush to them and get the *pairivi*.

MR. CHAIRMAN: The allegation will not go on record. Nothing else will go on record.

(*Interruptions*)*

SHRI GHULAM NABI AZAD: You go to our website. It is written there that if anybody approaches MCI, they should immediately telephone at such and such number. You open the website and see...(*Interruptions*)

SHRIMATI MANEKA GANDHI: Sir, I have been interrupted. The BoG has broken every rule going and yet, you are asking for an extension. What does that mean?

SHRI GHULAM NABI AZAD: It is because they have opened ...(*Interruptions*)

SHRIMATI MANEKA GANDHI: But it is your BoG ...(*Interruptions*)

MR. CHAIRMAN: Please wind up now. You have made your point. Please cooperate with the Chair. Nothing will go on record.

(*Interruptions*)*

SHRIMATI MANEKA GANDHI: How is it that the CBI inspected colleges that were supposed to be closed down? They have been given extension and have been allowed to do whatever they want? Obviously, there is money involved. You have made an allegation of Rs.2 crore against the previous MCI. I am saying that this will be 2G again. So, I would demand a CBI investigation into the working of the BoG...*(Interruptions)*

MR. CHAIRMAN: No allegation without proof should go on record. This will not go on record.

*(Interruptions) â€¦**

MR. CHAIRMAN: Hon. Members, no cross talks please. I would request the hon. Minister not to react.

Nothing will go on record.

*(Interruptions)**

SHRI ADHIR CHOWDHURY (BAHARAMPUR): Sir, I rise to support the amendment Bill under the nomenclature – Indian Medical Council (Amendment) Bill, 2012, moved by the hon. Minister, Shri Ghulam Nabi Azad, who has been striving hard during his tenure to make a significant change. Right now, we are also experiencing that in the total health sector of our country. He must be appreciated lavishly by all the Members of this House.

Sir, it is evident from the Bill itself that it is not so significant a Bill which calls for or merits so much furore in this House. We should not make a mountain out of a mole hill only to score political brownie points here and there. Who was the former incumbent of MCI? It needs to be acknowledged. Who was promoted and who was supported by whom? The former incumbent was a corrupt-person and it has been established. Thereafter, the former MCI was dissolved lock, stock and barrel by an order of the President. Everybody knows it. I do not know why some of our colleagues are shedding tears for that corrupt person who happened to be the former incumbent of MCI and he was removed. It is established who were hand-in-glove with the former Chairman of MCI and that has been further established by their vague arguments made here in this House.

Again I would like to draw the attention of this House and ask who is that legal luminary of this country giving legal support to the most corrupt-person in the health sector.

13.00 hrs

Who is that person? That person is a legal luminary and is known by the name...*(Interruptions)*

MR. CHAIRMAN: The name may be deleted.

SHRI ADHIR CHOWDHURY: He has been giving legal support to a person who has been indicted so severelyâ€¦*(Interruptions)*

MR. CHAIRMAN: Hon. Members, I have already instructed to delete the name from the proceedings.

...(Interruptions)

MR. CHAIRMAN: Hon. Member, you please take your seat. Please do not disturb the proceedings. I have already instructed to delete the name.

Nothing, except the speech of Shri Adhir Chowdhury, will go on record.

*(Interruptions)**

SHRI ADHIR CHOWDHURY : Sir, charity should begin at home and we are not ready to listen to the scriptures of, so called pseudo, religious persons.

13.02 hrs (Dr. M. Thambidurai *in the Chair*)

Sir, in this Bill, it has been distinctly stated that the objective of the Bill is to only extend the tenure of Board of Governors from two years to three years...*(Interruptions)* This is the simple objective of this Bill...*(Interruptions)* It is because the amendment that had been brought forward earlier has been superceded by this amendment...*(Interruptions)*

MR. CHAIRMAN: Please maintain order in the House. Nothing, except the speech of Shri Adhir Chowdhury, will go on record.

*(Interruptions)**

MR. CHAIRMAN: Hon. Members, please do not interrupt.

SHRI ADHIR CHOWDHURY: The reason behind it ...*(Interruptions)* Dr. Ram Chandra Dome became...*(Interruptions)*

MR. CHAIRMAN: Please do not make comments about personal things. This will not go on record.

*(Interruptions)**

MR. CHAIRMAN: Shri Chowdhury, please address the Chair.

SHRI ADHIR CHOWDHURY: Sir, in the amendment itself it has been stated that as the entire process for enacting the proposed legislation to set up a National Commission for Human Resources for Health will take some more time and the term of the Board of Governors constituted under the Indian Medical Council Act, 1956 as amended by the Indian Medical Council (Amendment) Act, 2011 is coming to an end on 14th May, 2012, immediate action is required to be taken.

The argument is self-explanatory and the objective of the Government is made amply clear. MCI was an elected body and it should be kept in the same status. But due to administrative expediency some sort of measures are being initiated. Everybody knows that MCI was constituted in the year 1933 and MCI itself has been undergoing various modifications in the subsequent years. In the subsequent years, a number of modifications have been done to consolidate the MCI as an institution. Therefore, it does not hear any merit that the Government is trying to hide something, or the Government is going against the democratic process of MCI. Already, the Bill has been introduced in the Rajya Sabha with a view to trifurcating the regulatory functions amongst the separate bodies, such as National Board for Health Education, National Evaluation and Assessment Committee and the National Council with a mandate to prescribe minimum standards for health education, developing and maintaining a system of accreditation of health education institutes and *inter-alia* ensure ethical standards amongst medical professionals respectively.

Then, what is the content of the Bill? The Bill clearly indicates that the Government is going to have a comprehensive and holistic approach towards the health sector to prevent further corruption taking place. Not only that, through this Bill, the Government is trying to restore the credibility of MCI as it is proposed that the Medical Council of India, Dental Council of India, Nurse Council of India, Pharma Council of India, etc. will all be subsumed under this overarching regulatory body.

Sir, out of the debate, I am taking advantage to draw the attention of the hon. Minister that in West Bengal, there is a district called Murshidabad which is recognized as a backward district in the country. It is not only a backward district but also the highest Muslim concentration in India remains in Murshidabad. Till date, out of 640 districts, you are having medical colleges only in 197 districts in the country. But so far as Murshidabad is concerned, the headquarter Berhampore was given an opportunity for setting up a medical college. It was approved by the Government. It got a nod from the Ministry of Health but in the later stage, after having done the spade work, everything got stuck up. The entire population of my district and the neighbouring district is waiting to be benefited through this medical college in Berhampore.

Therefore, I would urge upon you to take necessary action to set up a medical college as early as possible because in my neighbouring district, Malda, in spite of not having adequate infrastructure, a medical college has been awarded. I have no reservation for a medical college being set up in my neighbouring district. But insofar as Murshidabad is concerned, in spite of having all kinds of infrastructural facilities, including the requisite staff and doctors, it is still lacking the required letter of permission from the Ministry.

The Minister of State for Health, Shri Sudip Bandyopadhyay happens to be a native from the city of Berhampore. So, I would urge upon you to please expedite the setting up of a medical college in my district, Murshidabad.

With these words, I support the Bill and I thank you.

MR. CHAIRMAN: There shall be no lunch hour of the House. We may continue with the debate now.

ओडॉ. किरीट प्रेमजीभाई सोलंकी (अहमदाबाद पश्चिम): पिछले कई सालों से इस देश में भ्रष्टाचार छाया हुआ है और इसका व्याप तेजी से बढ़ रहा है।

पिछले सालों में, खासकर यूपीए-दो के कार्यकाल में भ्रष्टाचार ने अब तक की सभी ऊंचाइयों को छू लिया। 2जी स्केम, सीडब्ल्यूजी, आदर्श, एनएचआरएम एवं नरेगा में भ्रष्टाचार के अहम मुद्दे उजागर हुए हैं।

इस भ्रष्टाचार को कड़े-से-कड़े कदम उठाकर नाबूढ़ करना चाहिए। मगर एमसीआई की बात में भ्रष्टाचार को लेकर, पूरी की पूरी एमसीआई को सस्पेंड करना कुछ अजीब सा कदम है। यूपीए-दो के कार्यकाल में अन्य भ्रष्टाचार के मामलों में ये ही मानदंड स्वीकार नहीं किए गए हैं। सरकार ने एमसीए को सस्पेंड किया। वह कार्य शंका उपजाता है। सरकार की मंशा पर सवाल खड़े करते हैं।

एमसीआई, 1956 से अस्तित्व में आया है। उनका मूलभूत स्ट्रक्चर लोकतांत्रिक एवं स्वायत्त (आटोनोंमस) था। उनकी रचना में सभी राज्यों से, देश की सभी यूनिवर्सिटीयों से आते हैं और इसमें चुने हुए सभ्यों की बहुमती रहती थी और एमसीआई देश के सभी डाक्टर्स एवं प्रजा के लिए पवित्रता एवं श्रद्धा का केन्द्र रहा है।

जबकि इस सरकार ने भ्रष्टाचार के नाम पर पूरे-के-पूरे एमसीआई को बर्खास्त करके राष्ट्रपति जी के अध्यादेश के जरिए एमसीआई में छः व्यक्तियों का बोर्ड ऑफ गवर्नेस और उनके चेयरमैन की नियुक्ति की है। शुरुआत में इसका कार्यकाल एक साल का था मगर मेरी आपत्ति है कि सरकार ने न सिर्फ दूसरे साल पर इस विधेयक के जरिए आज तीसरे साल भी इसका कार्यकाल बढ़ा रही है। वया सरकार इसी तरह एमसीआई का संचालन करना चाहती है।

मेरी मांग है कि एमसीआई के मूल स्वरूप को बनाए रखना चाहिए और भविष्य में भ्रष्टाचार न हो पाए इसका विधेयक में संशोधन करके प्रवधान करना चाहिए।

*Speech was laid on the Table

इस सरकार ने नेशनल कमिशन फॉर ह्युमन रिसोर्स इन हेल्थ नाम की उनके ओवर आर्चिंग बोडी का रथ है। सभापति जी, आपके माध्यम से सरकार को चेतावनी देना चाहता हूँ कि लबीबी संस्थाएं जैसे एमसीआई, डीसीआई, आईएनसी, पीएचसी। और अन्य काउंसिल को एनसीएचआरआईएच के माध्यम से सभी संस्थाओं को सेंद्रलाईस करने की बात सभी के लिए घातक एवं नुकसानदायक है।

अतः मेरा निवेदन है कि एनसीएचआरएम विधेयक को वापस लिया जाए और एमसीआई के मूल स्वरूप को फिर से प्रस्तावित किया जाए।

SHRI NAMA NAGESWARA RAO (KHAMMAM): Sir, I thank you for giving me this opportunity to speak.

When the hon. Minister made an amendment on this issue, he had clearly stated that this will be only for one year. The Ordinance dated 15th May, 2001 was suspended and the Medical Council of India was replaced with a hand-picked nominated Board of Governors initially during that one year. It is an *ad-hoc* body. When the Ordinance came before the Parliament by way of an amendment regarding the Indian Medical Council, the hon. Minister had given an assurance in this House that the nominated Board of Governors will be for only one year. That one year is already over and the second year is also over. Now the Minister is trying for an extension of one more year.

I want to know from the hon. Minister as to why he is not constituting the MCI even after two years even though he assured that it will be done after one year, the MCI represents entire India. But this nominated body, which has seven

members, is not representative of the whole of India. So, knowing this fact, why is the Minister going on seeking extensions from time to time? The Minister has to answer this question very clearly. He has to tell this House very clearly as to why this is happening.

The second point is after this body came into existence, a lot of scams have come to our notice, in the last one or two years. Mr. Chairman, through you I want to hand over this book to the Minister. This is very important. Minister also might have received this book because almost all the Members have received this book. ...(*Interruptions*)

The Minister has to tell why all these things are happening. When all these things are happening, what is the Government doing? A Member who spoke from that side said that the former Chairman of the MCI was corrupt. The person was corrupt. That happened when your Government was in power, in UPA I and UPA II. These things happened during those years. So, this is the failure of this Government. When a person is corrupt, why do you want to scrap the entire system? You are scrapping the entire system. As you have scrapped this system, there is no representation for the entire country. Through the Chairman, we demand that the MCI should be constituted immediately. It is because this system has failed. A lot of allegations have been made. In the medical colleges also a lot of problems are going on. Knowing well that the MCI is not there, people are taking advantage.

This Governing Body is creating a lot of problems. This should be sorted out. I want to raise one more point. हमारे खम्भाम डिस्ट्रीक्ट में ट्राइबल को पैसा दे कर मेडिकल मेडिसीन का टेरिस्टिंग उनके ऊपर कर रहा है। उन बेचारों को कुछ भी नहीं मालूम है उनके ऊपर मेडिकल का टेरिस्टिंग हो रहा है। खम्भाम एवं वारंगल डिस्ट्रीक्ट्स में ट्राइबल पीपुल्स के ऊपर यह हो रहा है, it is very dangerous, उन लोगों के लाइफ के साथ खिलवाड़ हो रहा है। यह इश्यू मिनिस्टर साहब को मालूम है उसके बारे में क्या ऐक्शन लिया है। इसके बारे में थोड़ा एड्रेस करें, when he is speaking.

With these words, I am opposing this Bill. The MCI should be constituted immediately. This is anti-democratic.

डॉ. रघुवंश प्रसाद सिंह (वैशाली): सभापति महोदय, आजादी की लड़ाई से पहले, मेडिकल काउंसिल ऑफ इंडिया, सन् 1933 में कानून बना। आजादी मिलने के बाद सन् 1956 में मेडिकल काउंसिल ऑफ इंडिया एक्ट कानून बना और उसी से वर्ष 1956 से ले कर अभी तक मेडिकल कॉलेज खोलना, सीट बढ़ाना और सीट घटाना चला। जब उसका चेयरमैन दो करोड़ रुपये घूस लेते पकड़ा गया तब इन लोगों को बुझाया, इसके पहले सब लोग महात्मा थे। जब तक कोई सन्मुख पकड़ाता नहीं है तब तक इन लोगों का खर-पत्ता हिलता नहीं है। क्या मामला है? ...(*व्यवधान*) अब यह हुआ कि एमसीआई को भंग किया जाए। हम लोगों ने कहा कि ठीक है जल्दी करिए। इसको भंग कर कुछ नया बनाइए। कुछ नया नहीं बना, इसको एक साल के लिए बढ़ाया गया, फिर एक साल के लिए बढ़ाया गया, फिर एक साल के लिए बढ़ाया गया, तीन साल हो गया और तीसरा साल सरकार फिर चाह रही है कि हमको समय मिले। राष्ट्रीय मानव स्वास्थ्य संसाधन आयोग बनाएंगे। जब एमसीआई था तो उसमें दो करोड़ घूस लेते हुए पकड़ा गया। अगर आयोग बनेगा तो इस तरह का काम नहीं होगा, इस बारे में आपने क्या इंतजाम किया है। मैं ऐसा सवाल क्यों उठा रहा हूँ? इसलिए कि बीच में शासी बोर्ड का गठन हुआ, नामा नागेश्वर जी, उसमें सात मैम्बर थे। पहले के मैम्बर जितना खर्चा करते थे, सात मैम्बरों ने उससे दस, बीस गुना ज्यादा खर्चा कर दिया यानी भ्रष्टाचार बढ़ गया। पहले भंग हुआ, फिर एडहॉक शासी बोर्ड का गठन हुआ। वह भी भ्रष्टाचार में डूबा हुआ साबित हो गया। आपसे नया कुछ नहीं बन पा रहा है। जो कानून बना रहे हैं, वह लंबित पड़ा हुआ है। आप बताइए कि क्या एक साल के बाद आप फिर से इस हाउस में यह कहने के लिए नहीं आएं कि हम और समय नहीं बढ़ाएंगे? मुझे लगता है कि आपको फिर से आना पड़ेगा। मेडिकल का काफी महत्वपूर्ण काम है। हिन्दुस्तान में कितने लोगों पर एक डाक्टर है और प्रदेश में कितने लोगों पर एक डाक्टर है? रीजनल डिस्पेंसरी, डाक्टर ही नहीं रहेंगे तो इलाज क्या होगा। डाक्टर नहीं है, अस्पताल नहीं है, बैड नहीं है, पढ़ाई नहीं है, दवाई नहीं है तो बीमार आदमी कैसे बचेगा। वह भगवान भरोसे है। चिकित्सा का इंतजाम कहाँ है। एम्स प्रैसिडिजियस इंस्टीट्यूशन है। वहाँ 600 डाक्टर्स की पोस्ट है जिसमें से 200 डाक्टर्स की पोस्ट खाली पड़ी हुई है। वहाँ क्या इलाज होगा? हमारे वहाँ से जो गरीब आदमी मरणासन्न हालत में यहाँ आता है, उसे कहा जाता है कि जाइए, वर्ष 2013 में आइए, 2014 में आइए, अभी भर्ती करने के लिए जगह नहीं है। जाव में उसके प्राण खींच लिए जाते हैं। 700 लोगों की ओपीडी में 10 हजार लोग आते हैं। 800 बैड हैं। लोगों को कहा जाता है कि दूसरे अस्पताल में जाइए। वे कहते हैं कि पटना से यहाँ आए हैं, दूसरे किस अस्पताल में जाएं। वे हमारे यहाँ आकर कहते हैं कि उन्होंने कहा है कि वर्ष 2013 में आइए, लेकिन हमें लगता है कि आदमी इस बीमारी से दो-चार दिन में मर जाएगा। एम्स का यह हाल है। आप डाक्टर्स की कमी की पूर्ति कैसे करेंगे? अस्पतालों में बैड्स की कमी है।

हमारे मुजफ्फरपुर में एक श्रीकृष्ण मेडिकल कॉलेज है। वहाँ बरामदे में जमीन पर बैड लगा दिया जाता है। मशहूर पटना मेडिकल कॉलेज में जमीन पर बैड लगा दिया जाता है। क्या डाक्टर घुटनों के बल बैठकर उसका इलाज करेंगे? इस तरह क्या इलाज होगा? देश में चिकित्सा का जो हाल है, उस बारे में इनके पास क्या योजना है। इनसे एमसीआई ही नहीं संभल रहा है जो पढ़ाई-लिखाई का इंतजाम ठीक करेंगे। डाक्टर्स की कमी, अस्पतालों की कमी, बैड की कमी, पढ़ाई की कमी, दवाई की कमी, इलाज की कमी, कैसे हल होगा, हम जानना चाहते हैं। हेल्थ मिशन सुनते हैं, लेकिन उसका क्या हाल है। एम्स में डाक्टर्स की कमी है, वह कैसे दुरुस्त होगा। बिहार में सबसे ज्यादा बुरा हाल है। वहाँ बारून ब्लाक में एक लाख की आबादी के लिए एक डाक्टर है। तीन लाख की आबादी है। जब एक लाख की आबादी के लिए एक डाक्टर होगा तो क्या इंतजाम होगा। कितने लोगों के लिए एक डाक्टर होना चाहिए। आप इसकी पूर्ति कैसे करेंगे। देश में और जगह 314 मेडिकल कॉलेज के लिए नाम लिखे जा रहे हैं। पुराने जमाने के अस्पताल बढ़ नहीं रहे हैं। जिस इलाके में मेडिकल कॉलेज की जरूरत है, वहाँ मेडिकल कॉलेज का इंतजाम क्यों नहीं हुआ?...(*व्यवधान*)

MR. CHAIRMAN: Dr. Singh, please wind up.

डॉ. रघुवंश प्रसाद सिंह: संविधान में रिजर्वेशन का प्रावधान किया गया है कि हम सोशली, एजुकेशनली बैकवर्ड लोगों को विशेष सहुलियत देंगे। जिस इलाके में डाक्टर, मेडिकल कॉलेज या अस्पताल नहीं है, वहाँ के लिए सरकार ने कौन सी पॉलिसी इस्तिहार की है, हम यह जानना चाहते हैं...(*व्यवधान*) उत्तराखंड में 85

लाख की आबादी है, एक एम्स, झारखंड में 2 करोड़ की आबादी है, एक एम्स, छत्तीसगढ़ में 2 करोड़ की आबादी है, एक एम्स। बिहार की आबादी 10 करोड़ है और वहां एक एम्स है। इसके मायने यह है कि 10 करोड़ की आबादी के लिए एक एम्स, 85 लाख की आबादी के लिए भी एक एम्स और 2 करोड़ की आबादी के लिए भी एक एम्स है। आप कौन सी पालिसी चला रहे हैं? बिहार में कम से कम पांच एम्स क्यों नहीं होने चाहिए? ...(व्यवधान)

MR. CHAIRMAN: Next, Shri Nripendra Nath Roy.

डॉ. रघुवंश प्रसाद सिंह: सब सदस्य यह सवाल उठा रहे थे। ...(व्यवधान) मैं अपनी बात समाप्त कर रहा हूँ। ...(व्यवधान)

MR. CHAIRMAN: He will reply to this issue in his answer.

वेद! (व्यवधान)

डॉ. रघुवंश प्रसाद सिंह: मैं पांच एम्स की बात कर रहा हूँ। ...(व्यवधान) मुजफ्फरपुर मेडिकल कालेज अस्पताल, दरभंगा मेडिकल कालेज अस्पताल, भागलपुर मेडिकल कालेज अस्पताल, गया मेडिकल कालेज अस्पताल, आईजीआईएमएस पटना आदि सभी अस्पतालों को केन्द्र सरकार अपग्रेड करके एम्स जैसा क्यों नहीं बनाना चाहती, हम यह सवाल करना चाहते हैं। ...(व्यवधान) हमें वहां क्यों नहीं पांच एम्स चाहिए? ...(व्यवधान) वहां 30 नये मेडिकल कालेज क्यों नहीं होने चाहिए? ...(व्यवधान) वहां 30 मेडिकल कालेज खुलें। राज्य सरकार का हाल ...(व्यवधान) मैं अपनी बात समाप्त कर रहा हूँ। ...(व्यवधान)

MR. CHAIRMAN: Next, Shri Nripendra Nath Roy – not present.

...(Interruptions)

डॉ. रघुवंश प्रसाद सिंह : सभापति महोदय, मैंने एक प्रश्न का उत्तर पूछा था। ...(व्यवधान)

"Rs. 80 lakh was released to S.K. Medical College and Hospital, Muzaffarpur during 2009-10 towards construction component. Due to non-utilisation of funds, further grants could not be released."

मतलब 80 लाख रुपये ट्रामा सेंटर के लिए वर्ष 2009-10 में दिये गये, लेकिन खर्चा नहीं हुआ। ...(व्यवधान)

डॉ. रघुवंश प्रसाद सिंह: यह क्या मजाक बना रखा है। ...(व्यवधान) आपने उन्हें बीच में बोलने के लिए खड़ा कर दिया है। ...(व्यवधान) क्या हाउस ऐसे चलता है? मैं अपनी बात कनकलूड कर रहा हूँ। ...(व्यवधान) मैं संक्षेप में केवल प्वाइंट कह रहा हूँ। ...(व्यवधान)

MR. CHAIRMAN: Shri Prasanta Kumar Majumdar. Dr. Raghuvansh Prasad Singh, please conclude.

...(Interruptions)

डॉ. रघुवंश प्रसाद सिंह: मैं कनकलूड कर रहा हूँ। महोदय, बिहार में पांच एम्स, 30 मेडिकल कालेज खुले। ट्रामा सेंटर जो मुजफ्फरपुर में पीछे रह गया है, वह खुले। ...(व्यवधान)

MR. CHAIRMAN: Please wind up now.

...(Interruptions)

डॉ. रघुवंश प्रसाद सिंह: अंत में, मैं आशा वर्कर्स के बारे में कहना चाहता हूँ। जब हमने हाउस में इस बारे में सवाल उठाया था तब माननीय मंत्री जी सदन में नहीं थे। इसमें मुझे दो सवाल पूछने हैं। देश में आठ लाख आशा कर्मी हैं। यूपीए सरकार ...(व्यवधान) आंगनवाड़ी सेविका को तीन हजार रुपये पर मासिक मिलता है और सहायिका को 1500 रुपये पर मासिक मिलता है, जबकि आशा कर्मी को एक पैसा भी नहीं मिलता। एक सरकार में दो रकम का उपाय क्यों है? आंगनवाड़ी सेविका और सहायिका 3000 और 1500 रुपये मिलते हैं और आशा कर्मी को कोई मासिक भत्ता नहीं मिलता। नैशनल रूरल हेल्थ मिशन के संचालन समिति ने ...(व्यवधान)

MR. CHAIRMAN: We are discussing about the Indian Medical Council. Why are you talking of Anganwadi workers? You are now bringing in the issue of Anganwadi workers, etc. There is no relevance to this. We have to pass this Bill now.

डॉ. रघुवंश प्रसाद सिंह: मैं अंतिम बात कह रहा हूँ। ...(व्यवधान) आप बात साफ होने दीजिए। ...(व्यवधान) आप भी आशा के खिलाफ हैं। ...(व्यवधान) नैशनल रूरल हेल्थ मिशन के संचालन समिति ने पारित किया कि कम से कम आशा कर्मी को 500 रुपये भत्ता दिया जाना चाहिए, लेकिन इन्होंने उसे भी लागू नहीं किया। ...(व्यवधान) एक सरकार में दोहरा मापदंड क्यों है? हेल्थ विभाग सबसे कमजोर है। आंगनवाड़ी सेविका और सहायिका को 3000 और 1500 पर मासिक भत्ता मिलता है लेकिन आशा कर्मी को कुछ नहीं मासिक भत्ता मिलता। इसीलिए इसे देखने की जरूरत है। नैशनल रूरल हेल्थ मिशन की संचालन समिति ने पारित किया, वित्त विभाग ने हेराफेरी कर दी ...(व्यवधान) देश में आशा कर्मी आठ लाख हैं। उनको आप नौकरी देकर मासिक भत्ता दीजिए।

इन्हीं बातों के साथ मैं अपनी बात समाप्त करता हूँ।

...(Interruptions)

MR. CHAIRMAN: Now, nothing will go on record. Shri Majumdar to speak now.

*(Interruptions)**

*SHRI PRASANTA KUMAR MAJUMDAR (BALURGHAT) : Respected Chairman Sir, the Indian Medical Council has a glorious past in the field of modern medical education and its proper regulation in India. Scores of doctors and research scholars who have been educated in India are successfully working in various parts of the world like England, USA, Germany etc. They all have made a mark in the medical arena.

The Medical Council which used to work as a statutory body after being elected by the Indian doctors is now proposed to be dissolved. It was to come to an end within one year and the governing body was to be set up. But actually 3 years have passed, and this has not been done as yet. Thus we must know what the motive of the Government is behind this delay. I suspect that this is being deliberately done to expedite the process of privatization. The reason is that if the private medical colleges are to follow the norms of MCI then these will not run profitably. If this is the real intention of the Government, it is very unfortunate and condemnable. In India, in the rural areas, medical facilities are next to nil. There are no doctors, no para-medics. The poor people do not receive proper treatment and the medicines are also very expensive. Only the wealthy persons can avail medical treatments in the cities. Thus if more and more privatization takes place and the rules and regulations are continuously flouted then the medical system in the country will become weaker and might soon collapse.

Therefore the Indian Medical Council needs to regain its old glory and should function as an autonomous body. The Government should not promote privatization as the private players will not be interested in opening new medical colleges for the benefit of the medical students but will only be busy in maximizing their profits by violating rules. This will adversely affect the

healthcare facilities of the country as a whole. Flexible measures have been proposed for setting up of medical colleges and these might only encourage rampant privatization which cannot be supported at all.

Thus I strongly oppose this Indian Medical Council (Amendment) Bill 2012 and conclude my speech.

DR. TARUN MANDAL (JAYNAGAR): Sir, I rise to oppose this Bill with the strongest voice because our hon. Minister promised to this House that MCI would be restored to its democratic form within one year period but he miserably failed to do that – and there is no improvement of standardisation of medical education, keeping up of medical ethics, medical practice, training and research under the Board of Governors (BoG) created as an *ad hoc* measure.

It is not a simple and insignificant matter; it is a matter of encroachment of the autonomy, the administrative freedom and democracy of running an autonomous institution which was created by the Act of this Parliament. It was the plan and dreams, contemplations of our nation builders and freedom fighters. This Board of Governors was built up, as many speakers stated, most discriminately, very secretly keeping entire medical profession and the concerned people of the nation in dark.

The first term Board of Governors which was created in the same process but they did a thing and that they did not allow the brainchild or the wish of the Ministry to create a three and a half years short medical course for the rural population. They also did not allow for sub-standard medical colleges permissions. For that reason, probably, they could not last for more than one year. But the second Board of Governors with the experience of its predecessors are submitting to the wishes and whims of the Government and already they have reduced the teachers student ratio, etc. substandardising the undergraduate and post-graduate medical education. There are a lot of examples in the States of West Bengal - KPC medical college – in Kerala, in Uttar Pradesh, in Madhya Pradesh, in Sikkim. For sanctioning the medical colleges and keeping up their standards, they have violated the norms. This three and a half years course should be immediately scrapped.

Sir, one more point he mentioned in the objectives. Our Constitution and country cannot give two types of treatment for two kinds of people – one for village and one for urban people. The intention of creating the National Commission for Human Resources for Health is not for the purpose of improvement of medical education, research, medical practice, standard, etc. It would create simply a single window for the benefit of the business community who wants to open medical colleges or nursing colleges or dental colleges or pharmacy colleges.

Sir, medical subject is a very complex and critical subject which our hon. Minister knows. For the super specialty and multi-discipline management further the MCI needs rather divisions to maintain its autonomy and in this era of decentralization, the Central Government is also decentralizing everything. However, the Minister is bringing the all these complicated things under one umbrella, under the name of the overarching body; it is not understandable why?

It is not in people's interest. It should be scrapped immediately and the autonomy and democracy of the Medical Council, which was created by this Parliament, must be restored within six months. The Minister must promise that, only then the Parliament can pass this Bill.

DR. RATNA DE (HOOGHLY): Mr. Chairman, Sir, at the outset, I would like to state that the Indian Medical Council (Amendment) Bill, 2012 is brought primarily to extend the term of Board of Governors of the Medical Council of India for one more year.

The statutory purpose of the existence of the Medical Council of India by having elected medical members from each State is to protect, promote and maintain the health and safety of the public by ensuring proper standards in the practice of medicine. Now, the Government is making efforts to dissolve the Medical Council of India. This is nothing but an arbitrary act.

The National Commission for Human Resources for Health Bill, 2011 aims at decentralization. This act of the Ministry is aimed at centralization of power as this would take away the autonomy of the Medical Council of India in an undemocratic way. With such a sorry state of affairs, we feel it unwarranted the move of the Ministry to carry out this amendment to the Indian Medical Council Act. This would snatch away the autonomous nature of the Medical Council of India.

The glory of the Medical Council of India should be restored. The hon. Minister and the Government should make extraordinary efforts to ensure that this happens sooner rather than later and certainly by not extending the term of Board of Governors, which is precisely the aim of this Amendment Bill.

Sir, I am of the firm opinion that the hon. Minister should take special interests in setting the MCI house in order and provide efficient service to the country, which expects a lot from the MCI. I would strongly urge the Minister not to seek extension of the term of Board of Governors of the MCI and the Minister should withdraw the Bill.

श्री सुरेन्द्र सिंह नागर (गौतम बुद्ध नगर): सभापति जी, मेडिकल काउंसिल ऑफ इंडिया (संशोधन), विधेयक 2012 पर बोलने की आपने अनुमति दी, उसके लिए मैं आपका आभार व्यक्त करता हूँ। जब एमसीआई को भंग किया गया था और बोर्ड का गठन किया गया था तो उसका उद्देश्य था कि जो भ्रष्टाचार की शिकायतें एमसीआई में आ रही थीं, उन्हें कम किया जा सके और मेडिकल एजुकेशन का स्तर सुधारने के लिए ही इस बोर्ड का गठन हुआ था। लेकिन उसके साथ-साथ सरकार ने वादा भी किया था कि एक वर्ष के अंदर राष्ट्रीय मानव स्वास्थ्य संसाधन आयोग बनाया जाएगा। एक वर्ष निकला, दो वर्ष निकले, कुछ नहीं हुआ और सरकार ने एक वर्ष और बढ़ाकर इस बोर्ड को बनाए रखने के लिए संशोधन बिल संसद में पेश किया है।

जहां तक मंत्री जी की नीयत और कार्य क्षमता का सवाल है, उसमें कोई शक नहीं है, लेकिन मेरा मंत्री जी से अनुरोध है कि अब की बार जो आप एक वर्ष का और कार्यकाल बढ़ाने का प्रस्ताव लाए हैं, जो वादा आपने किया था इस बोर्ड को बनाते हुए राष्ट्रीय मानव स्वास्थ्य संसाधन आयोग बनाने का, उसे इस समय में पूरा करें।

जहां तक बोर्ड की कार्य प्रणाली का सवाल है, आज सबसे बड़ी परेशानी किसी भी मेडिकल कालेज की इंस्पेक्शन के समय होती है। उसमें दस दिन का समय दिया जाता है। उन दिनों के अंदर उस मेडिकल कालेज द्वारा हालात ऐसे बना दिए जाते हैं, जैसे फर्जी मरीजों को वहां लाया जाता है, बैड्स लगा दिए जाते हैं और जब इंस्पेक्शन होती है तो वह केवल औपचारिकता मात्र ही रह जाती है। आपने इस बोर्ड में जो सदस्य रखे हैं, ग्रामीण स्वास्थ्य सेवाएं कैसे बेहतर हों, इस पर जो सुझाव आए, उन पर बोर्ड ने कोई कदम नहीं उठाया है। हालात इससे भी ज्यादा खराब हैं, चाहे ट्रेवलिंग अलाउंस की बात हो, नौकरियों की बात हो, बिना अनुभव के एम्स और पीजीआई में नौकरी देने का काम बोर्ड ने किया है। इसके अलावा किसी मुद्दे पर बोर्ड अंतिम समय में निर्णय लेता है, उसकी इस आदत का परिणाम यह है कि आज कोर्ट में कितने ही केस पेंडिंग हैं, कई केसेज़ को तो चार-चार साल तक हो गए हैं। इसके अलावा उसकी फीस देने का काम भी बोर्ड करता है। मैं सरकार से अनुरोध करना चाहूंगा कि जो वादा किया है राष्ट्रीय मानव स्वास्थ्य संसाधन आयोग बनाने का, उसे जरूर पूरा किया जाए।

अंत में मैं मंत्री जी से विषय से हटकर एक बात का निवेदन करना चाहूंगा। उत्तर प्रदेश इस देश का बड़ा राज्य है। वहां स्वास्थ्य सेवाओं की भारी कमी है। उत्तर प्रदेश जोकि सबसे बड़ा राज्य है वहां बार-बार मांग होती है कि एम्स जैसे संस्थान वहां लाये जाने चाहिए। मुझे उम्मीद है कि माननीय मंत्री जी उत्तर प्रदेश में नये एम्स संस्थान खोलने का भी काम करेंगे।

पु. रंजन प्रसाद यादव (पाटलिपुत्र): माननीय सभापति महोदय, इंडियन मेडिकल काउंसिल का उद्देश्य देश में मेडिकल शिक्षा की गुणवत्ता को बनाए रखना था। मेडिकल काउंसिल ऑफ इंडिया को 15 मई 2010 को भंग कर दिया गया और परिषद् के कार्यकाल को देखने के लिए एक वर्ष के लिए 6 संसदीय बोर्ड ऑफ गवर्नर्स का गठन किया गया। लेकिन 1 वर्ष तक बनाने की बात तो छोड़ दीजिए कोई प्रयास भी नहीं किया गया और पुनः एक साल समाप्त होने पर 14 मई 2011 को पुनः आर्डिनेंस लाया गया। 16 अगस्त 2011 में बिल लाकर आपने एक वर्ष की अवधि बढ़ा दी और फिर आपने आश्वासन दिया कि एक वर्ष के अंदर सेक्शन-3 के तहत चुनाव करवाकर एमसीआई की बॉडी बना दी जाएगी। लेकिन इसके बावजूद भी सरकार ने कोई प्रयास नहीं किया, जिसका परिणाम यह हुआ कि 14 मई 2012 को यह ऑल इंडिया काउंसिल बिल समाप्त हो गया और आज फिर संसद में चर्चा के लिए लाया गया है।

अपने भाषण में इन दो वर्षों में एमसीआई के बोर्ड ऑफ गवर्नर्स के कार्यकाल में अभूतपूर्व पारदर्शिता लाने की बात कही लेकिन बड़े दुर्भाग्य की बात है कि जिन लोगों को बोर्ड ऑफ गवर्नर्स में नॉमिनेट किया गया है उनमें से ज्यादातर मैम्बर्स पर घोटाले के आरोप हैं। इस संबंध में मेरे मित्र संजय जायसवाल जी ने 125 पन्नों में "स्केम्स ऑफ मेडिकल काउंसिल ऑफ इंडिया" की ओर ध्यान दिलाया गया है।

सभापति महोदय, मैं आपके माध्यम से माननीय मंत्री महोदय से आग्रह करता हूँ कि वे इस विषय पर सीबीआई द्वारा तुरंत इसकी जांच कराएं और एक वर्ष के कार्यकाल की जगह 6 महीने लोकातांरिक तरीके से चुनी गयी एमसीआई के अस्तित्व को लाएं।

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): Hon. Chairperson, Sir, at the outset, I would like to thank the hon. Members from all the sides having participated in this debate and for giving valuable suggestions to improve the functioning of the Medical Council of India.

Ultimately, as you may know, different people have different perceptions. In a democracy you cannot stop anybody to conceive different ideas and speak to their likings. Nobody can stop them in this democracy and so can not I.

What has happened actually? Everybody knows. I have no complaints against the then Chairperson of the Medical Council of India and I would like to make it clear that whatever action was taken at that point of time, it was neither initiated by my Ministry nor by me. As a matter of fact, I came to know like many of you came to know that the CBI has arrested the then Chairperson and as I have said it was not sponsored or we had not made any complaint also from our Ministry... (Interruptions)

MR. CHAIRMAN: No comments, please. Hon. Minister, please address the Chair.

SHRI GHULAM NABI AZAD: During his period, I have had a series of meetings with him as to how to improve the functioning, particularly, how to increase the capacity and increase the number of medical colleges and the human resource across the country. But at that point of time, I would like to say, by chance I had a question in the other House, though the whole House, right, left and centre wanted some action to be taken. So, in the wisdom of the Government, at that point of time, there was no other option but to dissolve, go to the Cabinet and go for the Ordinance.

From here, two things started parallelly which, unfortunately, no Member of Parliament asked, and at least if Ruling Party Members would have asked me, I would have told them what to speak about that. While this has happened, whether that Chairman would have continued or not, whether that elected Medical Council would have continued or not, the parallel thing was already going on. It is because, in June, when we came to power, the new UPA-II, in the President's Address which, everybody knows, is cleared by the Cabinet, the National Council of Human Resources in Health (NCHRH) and a similar Council was going to be constituted for education as an overall umbrella. In this overall umbrella, all these, be that Medical Council of India, be that Dental Council, they will be subsumed in that. So, this was the decision of the Government which was reflected in Rashtrapati's *bhashan* much before when this unfortunate thing happened. So, I would like to say that even if that would not have happened, the overarching body, the ball had started rolling. How the ball had started rolling?

On 4th of June, 2009, in her Address to the Joint Session of the Parliament, Rashtrapati *ji* announced that the Government will set up two separate overarching regulatory bodies in higher education and health sector respectively. These are NCHER and NCHRH. Just one month after *Rashtrapati's Bhashan*, on 22nd of June, 2009, a task force of the Members was constituted by the Health Ministry to facilitate the formation of the proposed Commission comprising of Shri Naresh Dayal, the then Secretary, Dr. M.K. Bhan, Secretary, Department of Bio-Technology, B.K. Srivastava, Director General of Health Services, Dr. Ranjit Roy, the then former Director, Dr. Shetty, Dr. Reddy, Shri Vaidyanatha Aiyer, former Secretary, Department of Women and Child Development, Dr. Raghbir Singh, Former Secretary, Legislative Department, and Secretary for Higher Education. So, this was the committee which was parallelly constituted. On 31st of July, the Task Force submitted its report. Just within two months, the Task Force submitted its report. This also answers why we are seeking extensions after extensions.

On 7th August, 2009, the State Governments and other stakeholders were requested for their comments and suggestions. In October, 2009 the report of the Task Force, along with the Draft Bill, was placed on the official website of the Ministry of Health. On 29th March, 2010, comments were received from 14 States and UTs. This will also give you an answer when hon. Members are saying that this overarching body should not be there. Which were the States? They were Andhra Pradesh, Gujarat, West Bengal, UP, Rajasthan, Assam, Kerala, Tamil Nadu, Pondicherry, Delhi, Andaman & Nicobar Islands, Sikkim, Dadra and Nagar Haveli, and other stakeholders. Out of all these States, only Kerala Government did not support the proposal. From 17th to 19th June, 2010, regional consultations were held at Delhi for the North India, at Mumbai for the Western India, at Bangalore for the Southern India, at Kolkata for Eastern India, and at Chennai for another part of the Southern India attended by Vice-Chancellors, Principals of Medical Colleges, medical practitioners, academicians, representatives of regional IMA besides representatives of 17 State Governments. While a wide range of opinion was expressed, the overwhelming consensus was in favour of urgent reform in medical education.

On 30th August, 2010, a Conference of Central Council of Health and Family Welfare – which consists of all the Health Ministers of the country and the Health Minister of India is the Chairman – was held. This body also consists of the Principal Secretaries and the Secretaries of Health of the entire country.

So, the Health Ministers, Health Secretaries of the entire country presided over by the Minister of Health, Government of India and the officers, are the members of this apex advisory body. In the presence of 24 State Health Ministers, the proposal was unanimously accepted with some suggestions to be incorporated and which were subsequently incorporated.

Following the Conference, the Ministry revised the draft and the suggestions were incorporated. Then, on March, 2011, the Cabinet Secretariat directed the Ministry to hold inter-Ministerial consultation and resubmit the Report. So, having gone into the consultation, we were supposed to consult the various Ministries, particularly, the HRD Ministry, and it took us fairly a long time. That is why, we had to come before the Parliament second time to get its permission.

On 17th September, 2011, the Secretary (Legislative) convened second meeting of the officials of the Ministry of

Health and HRD to resolve the issues. Then, on 14th October, 2011, a revised Bill was submitted to the Ministry of Law and Justice for concurrence. On 15th November, 2011, a revised Cabinet Note and NCHRH Bill duly concurred by the Ministry of Law and Justice was received. On 8th December, 2011, the revised Cabinet Note was submitted to the Cabinet Secretary. On 13th December, 2011, the Cabinet approved the proposal and on 22nd December, 2011, the Bill was introduced in the Rajya Sabha and subsequently in December, 2011 itself the hon. Chairman of Rajya Sabha forwarded that to the Select Committee. Since December, 2011, this Bill is before the hon. Standing Committee.

I have said the parallel things. While I said that it will be initially for one year, the purpose at that point of time was that within one year we will be able to constitute this overarching body but as I have given, blow by blow, how difficult it was; the more we went into it, the more we thought that it is most important. After 1956 Bill, we are going to make some change and this change could not have been done by the Ministry which is sitting with some officials. We wanted a wide ranging consultation; we wanted the academicians to be a part of it; we wanted all the State Governments to be on board; we wanted principals of the medical colleges to be a part of it; and we wanted Vice-Chancellors of the entire country, who are dealing with the medical education, to be on Board. Why were we taking them on Board because some suggestions were coming and those suggestions were simultaneously incorporated in it? Whenever we used to have a Meeting again, those suggestions were either passed or some more suggestions were given. So, that necessitated us to come into the Parliament once, twice and thrice.

Having realised that the hon. Chairman of Rajya Sabha has forwarded this to the hon. Standing Committee, I was expecting that by February, March or latest by April, the Standing Committee will clear this. Thereafter, I can come before this august House not only for the third extension but also for the overarching body, which is the policy decision of the Government. It is not an individual decision but it is a policy decision of the Government. All of you were witness to the first Speech of Rashtrapatiji. Since, it could not come from the Standing Committee, I had no other option. The date of the second extension, which the Parliament has granted, is going to be over on 14th. During the Session, I cannot go in for an Ordinance. Therefore, now, the only available form for me was to bring a small Amendment in the existing MCI Bill, where we had sought from one year to two years. Here, I am just seeking permission from two years to three years. It is not necessary that we may have to wait for full three years. The moment we get the recommendations from the Standing Committee -- if I get it tomorrow - I can come before the House in the Monsoon Session itself. But I cannot say here that I would do it within three to four months. Suppose, for three to four months, the Standing Committee does not send me the recommendations, tomorrow you would haul me up that I had said that I would do it within three to four months...*(Interruptions)*

MR. CHAIRMAN : Dr. Ram Chandra Dome, please take your seat. He is not yielding.

...*(Interruptions)*

SHRI GHULAM NABI AZAD: This is what I am saying...*(Interruptions)*

Well, I would request through you because the Members of the hon. Standing Committee must be all sitting here or there.

DR. RAM CHANDRA DOME : That Standing Committee may not favour it.

MR. CHAIRMAN: That is a different issue.

SHRI GHULAM NABI AZAD: The Standing Committee may favour or may not favour it, it is beside the point...*(Interruptions)*

MR. CHAIRMAN: Hon. Members, no interference, please.

...*(Interruptions)*

MR. CHAIRMAN: Nothing will go on record except the reply of the hon. Minister,

*(Interruptions)**

SHRI GHULAM NAZBI AZAD: So, whatever recommendation would be there, that is beside the point. But I cannot move forward having a Bill referred to the Standing Committee. In the absence of any Report, I cannot move forward. So, I can only expect that the Report comes as soon as possible so that we can go ahead with the overarching body. That is my answer to that.

Sir, there are two more points. I would not take more than five minutes in explaining them. My friend, Dr. Sanjay Jaiswal has said that whatever has been done in three years, I had nothing to do with that as the Health Minister. All these

notifications, as many as 22, have been done during this Government under the Health Minister, Ghulam Nabi Azad! Each notification, in original, is with me. I can lay them; I can distribute them among all the Members of this august House. And whether this was during the period of erstwhile MCI Chairman, I have had a series of meetings. You can check up with him. First day, the moment I took the charge – as a matter of fact, when I was the Chief Minister of Jammu and Kashmir just before taking over as the Union Health Minister, I was the Health Minister of the State also. As a Health Minister I had identified some grey areas. There was an acute shortage of human resource. There was an immediate need for setting up more medical colleges. The first thing I did was to have it discussed in the Union Health Ministry. I think, within a week after taking over as the Health Minister, I discussed with Mr. Ketan Desai that these are the grey areas, which I have identified as the Chief Minister-cum-Health Minister of Jammu and Kashmir.

For the first time, I become a Junior Minister was about 31 years back under Shrimati Indira Gandhi. I think, at that time you might be studying. Since then I have not asked any Prime Minister to allot me a particular portfolio. I have had an opportunity to work with all the congress Prime Ministers. I have never requested any Prime Minister as to what portfolio I would like to have. But this time, I requested the hon. Prime Minister. I told him: "You know my keen interest when I was the Chief Minister. Every time, I would come to you, only for having more hospitals." But then I realised that mere hospitals are not going to do wonders because there are no doctors; and there are no nurses. The first thing that was unfolded to me was that if we increase the colleges, there is no human resource; and there is no faculty. So, then these are the discussions I had. I think, I had as many as one dozen meetings with Mr. Ketan Desai. So, you are saying whether it is old DCI or MCI or new MCI. Whether this was old or new, all were in my Ministry and I had discussion with all of them. This is what I want to end. This was subsequent to my decision. I cannot say that I told him to do this. I posed him the problems of Medical Council. It is for them to give the solution and the solution was given to me and the Notification was issued with the permission under my signature. I am very sorry you tried to mislead the House that the Minister had nothing to do with all these notifications and decisions. I am very sorry. I would like to impress this. I think you, being a new Member, can take the liberty.

डॉ. संजय जायसवाल (पश्चिम चम्पारण): इस पार्लियामेंट में आपका स्टेटमेंट था कि साठ साल से ज्यादा समय तक मेडिकल काउंसिल ...*(व्यवधान)*

श्री गुलाम नबी आज़ाद: आपने पीरियड की बात की थी...*(व्यवधान)*

डॉ. संजय जायसवाल: आपका स्टेटमेंट था यह प्रोज़ेज़ल, साठ से ज्यादा समय तक ...*(व्यवधान)* सर, मैंने अपनी तरफ से स्टेटमेंट नहीं दिया था, मैंने आपका भाषण पढ़ा था। लास्ट डयर आपने जो बोला था वही चीज़ मैंने कही है। यह आपकी लाइन है कि डेमोक्रेटिक में कुछ नहीं होता है। ...*(व्यवधान)*

श्री गुलाम नबी आज़ाद: संजय जी, उस वक्त अलग बात थी। ...*(व्यवधान)* मैंने अपने दौरान हर मिनिस्ट्री, हर मिनिस्टर चाहे वह एजुकेशन हो, होम हो, वह कहता है कि हमारे डिपार्टमेंट ने तीन साल क्या किया? ...*(व्यवधान)*

MR. CHAIRMAN: Please address the Chair. You address the Chair.

...*(Interruptions)*

MR. CHAIRMAN: No commentary please.

...*(Interruptions)*

MR. CHAIRMAN: Nothing will go on record except the Minister's reply.

*(Interruptions)**

श्री गुलाम नबी आज़ाद: अभी आपने इतनी कहानी सुनी तब भी आप वही कहेंगे? मैं तो यह कह रहा हूँ कि सरकार ने सन् 2009 में 4 जून को राष्ट्रपति जी के भाषण में डाला है कि ओवर आर्चिंग बॉडी आएगी और उसमें मेडिकल काउंसिल, डेंटल काउंसिल और नर्सिंग काउंसिल उसका हिस्सा होंगे। उनके इलेक्टिव प्रेज़िडेंट उसके मेंबर होंगे। हम मेडिकल काउंसिल को भंग नहीं कर रहे हैं। हम डेंटल काउंसिल को भंग नहीं कर रहे हैं। हम नर्सिंग काउंसिल को भंग नहीं कर रहे हैं। इनके ऊपर सिर्फ एक ओवर आर्चिंग बॉडी बनेगी जिसके ये भी सदस्य होंगे और वे इलेक्टिव होंगे। ...*(व्यवधान)*

MR. CHAIRMAN: Nothing will go on record.

*(Interruptions)**

SHRI GHULAM NABI AZAD: Sir, I would only submit that at this point of time let us not discuss the overarching body because the moment it comes from the Standing Committee regarding the overarching body and when I come before the Parliament with a Bill, at that point of time we have to discuss the overarching body. Why did I mention about overarching body? I mentioned that because even the erstwhile President, Medical Council would have continued even otherwise that had to be subsumed in this overarching body because we had already initiated

that had to be subsumed in this overarching body because we had already initiated the process of setting up an overarching body. So, in this background I have said that.

Now insofar as transparency is concerned, I think within one week after my taking over as Health Minister, in the first Press Conference I have had as Health Minister, I said there are complaints that there is corruption in Medical Council and there is corruption in the Health Ministry. In the Press Conference I said I do not keep mobile phone.

14.00 hrs.

But, I have this e-mail at my residence, not even at my office. This is my e-mail and these are my private telephone numbers. If anybody on behalf of the Minister, on behalf of the Ministry, on behalf of the Board of Governors, on behalf of erstwhile Medical Council members, then the erstwhile Medical Council was there, approaches to any medical college, dental college, nursing college for asking the money, you should send an e-mail and telephone me to inform me about it. The next day, I wrote a letter to all the principals and the chairmen, those who are owning the medical colleges and dental colleges across the country. Since then it is on website and in 2011, I repeated the same letter that they should write to me. Now, if somebody is doing anything, I am not to be held responsible. ...(*Interruptions*)

MR. CHAIRMAN: Please sit down, Madam. Let him complete his reply.

...(*Interruptions*)

MR. CHAIRMAN: Mr. Minister, you please address the Chair.

...(*Interruptions*)

SHRI GHULAM NABI AZAD: Madam, you had your say....(*Interruptions*)

That is why, the Health Minister has only one power under 10 (a) that if a Medical Council of India rejects any medical college, the Health Minister or the Health Ministry can send an independent enquiry committee to conduct the enquiry whether MCI has done good or bad, and then he can give the permission.

When the first opportunity came and this was dissolved, I dispensed with that power of the Ministry and gave it to the Medical Council as I did not want to get into this. All powers are vested with the Medical Council. Nothing comes to me for any action; the only power that we have kept with us is to give the written directions, the policy decisions. The policy decision is whether we have to increase the human resource, whether we have to increase the number of colleges, and whether we have to change the regulation. Except that policy, as Health Ministry or Health Minister, we do not go into all other things. So, keeping all these things in mind, it has been done. I have had to speak lot many things, but since we have already taken a lot of time, I would request hon. Members and seek their cooperation that this extension from two years to three years may be granted.

MR. CHAIRMAN: Now, the question is:

"That the Bill further to amend the Indian Medical Council Act, 1956, be taken into consideration."

The motion was adopted.

MR. CHAIRMAN: The House will now take up clause-by-clause consideration of the Bill.

Clause 2 Amendment of Section 3 A of Act 102 of 1956

MR. CHAIRMAN: The question is:

"That clause 2 stand part of the Bill.

The motion was adopted.

Clause 2 was added to the Bill.

Clause 1, the Enacting Formula and the long Title were added to the Bill.

SHRI GHULAM NABI AZAD: Sir, I beg to move:

"That the Bill be passed."

MR. CHAIRMAN: The question is:

"That the Bill be passed."

SHRI BASU DEB ACHARIA (BANKURA): Sir, we want division.

MR. CHAIRMAN: Okay. Let the Lobbies be cleared.

Now, the Lobbies have been cleared. Hon. Members, please take your seats.

...(Interruptions)

MR. CHAIRMAN: Please have order in the House.

...(Interruptions)

MR. CHAIRMAN: I would request the Secretary-General to read out the instructions for the convenience of the Members.

Please have order in the House.

...(Interruptions)

MR. CHAIRMAN: Silence please.

...(Interruptions)

MR. CHAIRMAN: Please have order in the House.

...(Interruptions)

MR. CHAIRMAN: Now, Secretary-General may please read out the instructions.

SECRETARY-GENERAL: Kind attention of the hon. Members is invited to the following points in the operation of the Automatic Vote Recording System:-

1. Before a Division starts, every hon. Member should occupy his or her own seat and operate the system from that seat only.
2. As may kindly be seen, the red bulbs above display boards on either side of hon. Speaker's Chair are already glowing. This means the voting system has been activated.
3. For voting, please press the following two buttons simultaneously immediately after sounding of first gong, namely, one "Red" button in front of the hon. Member on the head phone plate and also any one of the following buttons fixed on the top of the desk or seats:

Ayes - Green Colour

Noes - Red Colour

Abstain- Yellow Colour

4. It is essential to keep both the buttons pressed till the second gong sound is heard and the red bulbs are "off".
5. **Important:** The Hon. Members may please note that the vote will not be registered if both buttons are not kept pressed simultaneously till the sounding of the second gong.
6. Please do not press the amber button (P) during Division.
7. Hon. Members can actually "see" their vote on display boards and on their desk unit.

8. In case vote is not registered, they may call for voting through slips.

MR. CHAIRMAN: The question is:

"That the Bill be passed.

The Lok Sabha divided:

AYES 14.09 hrs

Agarwal, Shri Jai Prakash

Amlabe, Shri Narayan Singh

Azharuddin, Mohammed

Baalu, Shri T.R.

Bairwa, Shri Khiladi Lal

Baite, Shri Thangso

Bajwa, Shri Pratap Singh

Bansal, Shri Pawan Kumar

Beg, Dr. Mirza Mehboob

Bhadana, Shri Avtar Singh

Chang, Shri C.M.

Chauhan, Shrimati Rajkumari

Chidambaram, Shri P.

Choudhary, Shri Harish

Choudhry, Shrimati Shruti

Chowdhary, Shrimati Santosh

Chowdhury, Shri Adhir

'Commando', Shri Kamal Kishor

Dasmunsi, Shrimati Deepa

Dikshit, Shri Sandeep

Elangovan, Shri T.K.S.

Engti, Shri Biren Singh

Gadhvi, Shri Mukesh Bhairavdanji

Gandhiselvan, Shri S.

Gavit, Shri Manikrao Hodlya

Ghatowar, Shri Paban Singh

Hari, Shri Sabbam

*Hegde, Shri K. Jayaprakash

Hussain, Shri Ismail
Jahan, Shrimati Kaisar
Jakhar, Shri Badri Ram
Jena, Shri Srikant
Jhansi Lakshmi, Shrimati Botcha
Joshi, Shri Mahesh
Kalmadi, Shri Suresh
Kataria, Shri Lalchand
Kaypee, Shri Mohinder Singh
Khan, Shri Hassan
Khandela, Shri Mahadeo Singh
Kharge, Shri Mallikarjun
Khatri, Dr. Nirmal
Khursheed, Shri Salman
Kowase, Shri Marotrao Sainuji
Kumar, Shri Ramesh
Kumari, Shrimati Chandresh
Kurup, Shri N. Peethambara
Lakshmi, Shrimati Panabaka
Lal, Shri Pakauri
Mahant, Dr. Charan Das
Maharaj, Shri Satpal
Maken, Shri Ajay
Meena, Shri Namoo Narain
Meghe, Shri Datta
Meghwal, Shri Bharat Ram
Meinya, Dr. Thokchom
Mirdha, Dr. Jyoti
Mishra, Shri Mahabal
Mukherjee, Shri Pranab
Narah, Shrimati Raneer
Narayanasamy, Shri V.
Natrajan, Kumari Meenakshi
Nirupam, Shri Sanjay

Pala, Shri Vincent H.
Palanimanickam, Shri S.S.
Pandey, Dr. Vinay Kumar
Pandey, Shri Gorakhnath
Patel, Shri Bal Kumar
Patel, Shri Kishanbhai V.
Pradhan, Shri Amarnath
Purandeswari, Shrimati D.
Raghavan, Shri M.K.
Ramachandran, Shri Mullappally
Ramasubbu, Shri S.S.
Rane, Shri Nilesh Narayan
Rao, Dr. K.S.
Rao, Shri Rayapati Sambasiva
Sahay, Shri Subodh Kant
Sai Prathap, Shri A.
Sardinha, Shri Francisco Cosme
Shekhawat, Shri Gopal Singh
Shinde, Shri Sushilkumar
Sibal, Shri Kapil
Singh, Chaudhary Lal
[*Singh, Dr. Sanjay](#)
Singh, Rao Inderjit
Singh, Shri Ijyaraj
Singh, Shri Ravneet
Singh, Shri Vijay Bahadur
Singh, Shri Virbhadra
Suklabaidya, Shri Lalit Mohan
Suresh, Shri Kodikkunnil
Tagore, Shri Manicka
Tamta, Shri Pradeep
Tandon, Shrimati Annu
Tanwar, Shri Ashok
Taviad, Dr. Prabha Kishor

Thomas, Prof. K.V.

Tirath, Shrimati Krishna

Vardhan, Shri Harsh

Viswanathan, Shri P.

Vundavalli, Shri Aruna Kumar

Yadav, Shri Arun

NOES

Acharia, Shri Basu Deb

Advani, Shri L.K.

*Ajnala, Dr. Rattan Singh

Argal, Shri Ashok

Azad, Shri Kirti

Bais, Shri Ramesh

Banerjee, Shri Kalyan

Baske, Shri Pulin Bihari

Besra, Shri Devidhan

Biju, Shri P.K.

Chauhan, Shri Prabhatsinh P.

Choudhary, Shri Bhudeo

Chowdhury, Shri Bansa Gopal

Dastidar, Dr. Kakoli Ghosh

De, Dr. Ratna

Deka, Shri Ramen

Devi, Shrimati Ashwamedh

Devi, Shrimati Rama

Dome, Dr. Ram Chandra

Dubey, Shri Nishikant

Gandhi, Shri Dilipkumar Mansukhlal

Gandhi, Shrimati Maneka

Haque, Sk. Saidul

Hassan, Dr. Monazir

Hussain, Shri Syed Shahnawaz

Jaiswal, Dr. Sanjay

Judev, Shri Dilip Singh
Karunakaran, Shri P.
Kumar, Shri Kaushalendra
Kumari, Shrimati Putul
Lingam, Shri P.
Mahtab, Shri Bhartruhari
Majumdar, Shri Prasanta Kumar
Malik, Shri Sakti Mohan
Mandal, Dr. Tarun
Manian, Shri O.S.
Manjhi, Shri Hari
Meghwal, Shri Arjun Ram
Mishra, Shri Govind Prasad
Naik, Shri Shripad Yesso
Naskar, Shri Gobinda Chandra
Patel, Shri Devji M.
Pathak, Shri Harin
Potai, Shri Sohan
Rathwa, Shri Ramsinh
Roy, Shri Mahendra Kumar
Roy, Shrimati Shatabdi
Saha, Dr. Anup Kumar
Satpathy, Shri Tathagata
Singh, Shri Jaswant
Singh, Shri Pashupati Nath
Singh, Shri Rakesh
Sinha, Shri Yashwant
Sugumar, Shri K.
Venugopal, Dr. P.
Vishwanath Katti, Shri Ramesh
Yadav, Prof. Ranjan Prasad
Yadav, Shri Hukmadeo Narayan

MR. CHAIRMAN: Subject to correction*, the result of the Division is :

Ayes : 100

Noes : 57

The motion was adopted.

...(Interruptions)

SHRI BASU DEB ACHARIA: Sir, I am walking out in protest.

...(Interruptions)

14.12 hrs

*At this stage, Shri Basu Deb Acharia and some other
hon. Members left the House.*
