

by the hon. member and we will see how to coordinate all this knowledge.

**Under utilisation of M.D., M.S.
Doctors**

* 399. DR. PRABHAT KUMAR MISHRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the specialized skills of some highly qualified doctors with post-graduate qualifications like M.D., M.S. etc. employed under Delhi Administration are not being utilised in hospitals with indoor facilities but are posted in dispensaries or primary health centres;

(b) if so, the number of such specialists with post-graduate qualifications posted in small dispensaries and primary health centres; and

(c) whether Government propose to review the position so that the specialists services are utilised fully and adequately?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c). As per information given by Delhi Administration, the skills of all the doctors including those possessing post-graduate diplomas or degrees are properly utilised in all subcadres of the Central Health Service. There are 19 doctors of GDMOs sub-cadre, who possess Post-Graduate degrees like M.D., or M.S. and are posted outside the hospitals. For posting of doctors of GDMO's sub-cadre, who may at times possess Post-Graduate diplomas/degrees, a policy has been formulated by Delhi Administration to deploy them in such manner as to ensure balanced medical care to the community. Delhi Administration, has recently framed a policy according to which all GDMOs having Post-Graduate qualifications will be posted in hospitals by rotation.

DR. PRABHAT KUMAR MISHRA: I may kindly be explained about the words 'GDMO' and the 'balanced medical care to the community'. These are the technical words. What is the balanced medical care taken in the hospitals of Delhi Administration?

KUMARI SAROJ KHAPARDE: GDMO means General Duty Medical Officer. As regards balanced medical care...

(Interruptions)

Sir, I am not from the medical profession, but still I can answer him. Don't worry. Please have some patience.

PROF. MADHU DANDAVATE: Even the patients must have patience.

KUMARI SAROJ KHAPARDE: Sir, the Delhi Administration has formulated certain transfer policies.

1. All General Duty Medical Officers on joining duty before Secretary (Medical) may be posted in DHS. No representation for being posted in the hospitals may be entertained before such joining.

2. Such General Duty Medical Officers after joining may be allowed to represent for the posting in the hospitals along with their bio-data. A list of all such representations may be maintained by the Medical Department. The total number of vacancies in GDMO may be distributed among the various Medical Institutions in proportion to the number of posts in the institutions.

Sir, this is a long statement. If you say, I can submit to the House.

DR. PRABHAT KUMAR MISHRA: We welcome the posting of Post-Graduate doctors like M.S. or M.D. in the small dispensaries and out-door clinics. But are they sup-

plied with full equipment to provide better service to the common people? Unless and until they are supplied with the equipment and other instruments, they can not assess and give better service to the best of their knowledge to the people:

Are they been supplied with those instruments in the out-door clinic or the small dispensary?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT AND MINISTER OF HEALTH AND FAMILY WELFARE (SHRI P.V. NARASIMHA RAO): The thrust of the question seems to be that there are very many over qualified doctors whose talents are being wasted in the outlying hospitals and clinics. My answer to that is, I do not see any reason why a very highly qualified doctor should not go to the outlying clinic. The thrust of the question itself is not acceptable to me. I would say, 'balanced service to the community' in the sense that there has to be a balance between medical care on the one hand and the health needs and health care of the people on the other. So, it is a good thing for all doctors by rotation to be sent to all the places.

The other question is, if we have more Post-Graduate doctors and they have opted out for the post for which only MBBS doctors are needed, then how can they insist that they should always be posted in hospitals only? This is not possible. It is not just possible. Because there are certain posts meant for only MBBS. Doctors but if an MS or an MD takes that job, he has to do that job. I cannot have an operation theatre erected at that place because an MD doctor or an MS Doctor happens to be posted there. It is a temporary matter. He would be posted back to a hospital where his talents may be more needed or more appropriately utilised. But this cannot be insisted upon. It depends on the availability of Doctors compared to the posts available. If there is a Doctor who is more qualified than the place requires where

he is at the moment working, the administration will look into it and see how to make the best use of his talents in due course.

SHRI AMAL DATTA: About the answer given by the Minister of State regarding the Delhi Administration rules, I would not have expected such an answer to come from a Minister that the Delhi Administration has framed such rules and therefore we are bound by the rules". One has to examine whether the rules are really intelligent rules and rational rules. Just because they have framed the rule which requires people to be first posted in outlying dispensaries and this rule has to be complied with. This to my mind appears to be that the Minister is abrogating his or her duty and leaving it to the bureaucrats to frame the rules. What should be done is to see that the specialisation which a person has obtained should be utilised. It is no answer to say that the Delhi Administration has framed certain rules which require them to be first posted in outlying places and not in hospitals. So to start with, you screen the applications in such a way as to see that the person who has spent 3 or 4 years and spent money and undergone sacrifice should be properly posted and the community should get the benefit of his skill and service. I would like to ask you whether this is being done?

The Cabinet Minister also when he replied avoided that aspect. Nodoubt the community must have the benefit. And not only the community at large but also those who are going to hospitals must have the benefit of the skilled medical practioner. That skill will be of no avail unless proper equipments and instruments are being made available not only for operation but even for diagnosis. These must be made available. At present these are not even made available. What are you doing about this thing?

SHRI P.V. NARASIMHA RAO: There

are three different aspects being mixed into one. First is the aspect of qualification of Doctors. If for the post of a primary health centre in a village, for instance, is an MBBS doctor, that is enough for us. The equipments, the medicines and all the available facilities at that hospital are tailored to that kind of qualification. But if an over-qualified man goes there, we cannot over-night change all the facilities there and upgrade them because after a year he may go back to some other hospital and another MBBS might be posted there.

SHRI AMAL DATTA: Why don't you specialise the dispensaries?

SHRI P.V. NARASIMHA RAO: Please wait. that is one aspect. So, the mis-match is between the over-qualified Doctors may be the Post-Graduate Doctors, and the available posts meant for an MBBS Doctor, That is the mis-match there.

If there is a mis-match, what the administration can do is to see that there is a rotation so that only some people will not always be posted to outlying dispensaries while other are always working in city hospitals.

What the Minister of State just read out as the answer was that the Delhi Administration has prepared a kind of rotation.

That rotation may sometimes fail. But then the point is, this is all that can be done.

So far as upgarding of the hospitals, giving equipments, etc. to the hospitals is concerned, that is a separate question altogether. That comes under the plan. They are upgraded according to plan provisions and not because some MS is working there. That is just not possible. These are three different matters. There has to be a kind of balance between a well-equipped hospital and an outlying dispensary. If we do not have the

facility for a very good doctor also to go and have some experience of the conditions there, then he will remain more or less an isolated person. So, the kind of rotation that is being done by the Delhi Administration, on the face of it, appears to be reasonable. If there is anything wrong, or in its actual working if there is anything wrong, we can certainly go into it.

WRITTEN ANSWERS TO QUESTIONS

[English]

Committee to Look after the Working of Family Welfare Schemes

*397. SHRI H.B. PATIL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government propose to constitute an Assessment-cum-Implementation Committee comprising of experts and Members of Parliament to look after the functioning of Family Welfare Schemes funded by Union Government and/or by the international agencies?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): There is no such proposal under the consideration of the Government.

Proposals to Absorb Unemployed Doctors

*400 SHRI R.M. BHOYE:
SHRI YASHWANTRAO
GADAKH PATIL:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of qualified unemployed doctors in various States as on 30 Septem-