

[9 March, 2007]

RAJYA SABHA

(d) An amount of Rs. 266.00 crore has been provided during the 10th five year plan for National Cancer Control Programme.

(e) Cancer Awareness is integral part of District Cancer Control Programme under which a district is entitled for Rs. 90.00 lakhs during five year period. During the year 2005-06 four districts have been funded under the scheme.

### **24-Hour Health Service**

1257. DR. VIJAY MALLYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) how Government would implement 24-hour health service in remote areas that has been promised under the National Rural Health Mission;

(b) whether the release of Central Budget of the NRHM scheme be dependent on how well the scheme is implemented; and

(c) whether Government have any plans for skilled manpower for effective implementation of the scheme?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) The National Rural Health Mission (NRHM) envisages accessible, affordable, accountable, effective and reliable primary health care facilities, especially, to the poor and vulnerable sections of the population on 24x7 basis. For this purpose overall improvements in infrastructure is being undertaken. This includes construction of new health facilities as well as refurbishing existing facilities. The Integrated District Health Action Plan envisages mapping of facilities so as to ensure at least one functional health facility on 24x7 basis for a population of one lakh. The optimization of manpower through multiskilling, block pooling, training to Nurses, ANMs, ASHAs and paramedics ensures that critical manpower is available at all times to render the guaranteed services at various levels of health facilities. States have also developed comprehensive manpower augmentation strategy including rationalisation of service conditions & manpower policies, enhancing the retirement age of critical cadres, contractual recruitment etc. Skills like accounting, management and MIS have also been incorporated at various levels to improve the efficiency in the health system.

The release of funds under NRHM to States is on basis of State Programme Implementation Plans (PIPs) and is a function of satisfactory progress of agreed Performance Indicators. The PIPs are prepared on basis of availability of overall funds and annual prioritization of the Perspective plan of the State for the Mission Period. Each State has also entered into a Memorandum of Understanding (MoU) with the good and performance incentives are available to the States upon attainment of predecided performance criteria.

### **Malpractice in Government Hospitals**

1258. SHRI TARIQ ANWAR:  
SHRI KAMALAKHTAR:

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

(a) whether it is a fact that food and other materials provided in Government hospitals are not reaching to the patients in Delhi rather they are being misused by the Staff working there;

(b) if so, how many departmental enquiries have been initiated against the culprits; and

(c) the steps Government are taking to minimize this kind of malpractices?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) In the three Central Government Hospitals in Delhi namely, Dr. Ram Manohar Lohia Hospital, Safdarjung Hospital and Lady Harding Medical College & Associated Hospital, there is a well laid down procedure for distribution of food items to the patients and the food items meant for patient does reach them and is not misused by the Staff. Similarly, medicines and other materials meant for the patients are supplied to the patients. All complaints received in this regard are looked into.

### **Global Healthcare Conference**

1259. DR. VIJAY MALLYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that recently a conference on "Global Healthcare-Promoting Partnership" was held sponsored by FICCI, a number of