

**CALLING ATTENTION TO A MATTER
OF URGENT (PUBLIC IM-
PORTANCE.**

**Non-implementation, of the regulations of
the medical council of India by certain
medical colleges in the country.**

DR. M. M. S. SIDDHU (Uuar Pradesh): Mr. Deputy Chairman, I beg to call the attention of the Minister of Health and Family Welfare to the non-implementation of the regulations of the Medical Council of India by certain medical colleges in the country and the action taken by Government in this regard.

THE MINISTER OF HEALTH- AND FAMILY WELFARE (SHRI B. SHAN-KARANAND): Sir, the Medical Council of India was established under the provisions of the Indian Council of Medical Act, 1933 and was reconstituted in 1956. The Council is entrusted, *inter-alia*, with the maintenance of minimum standard of medical education, both at the Under-graduate and Post-graduate levels. For this purpose, it carries out inspections of and visitations to the Medical Colleges/Institutions in order to satisfy itself that the requirements under the various regulations are fulfilled. The Medical qualifications granted by the Universities in respect of Medical Institutions and Colleges are recognised only when they conform to the educational standards and related facilities prescribed by the Medical Council of India.

2. Government is aware of the fact that the following Medical Colleges have not fulfilled the requirements set out under the regulations of the Medical Council of India:—

1. S. K. Medical College, Muzaffar-pur.
2. Nalanda Medical College, Patna.
3. Magadh Medical College, Jaya.
4. Patliputra Medical College, Dhanbad.
5. Government Medical College, Bhagalpur.

6. Burdwan Medical College (Burd-wan University).

7. North Bengal Medical College, Silliguri.

8. Guru Govind Singh Medical College, Faridkot.

9!. University College of Medical Sciences, New Delhi.

The Council has addressed the concerned Universities and State Governments in this regard.

3. I would like to take this opportunity to assure the House that Government is very keen to maintain a high standard of Medical Education in the country. In pursuance of this broad objective, Government has constituted a Medical Education Review Committee. The report of the Committee is expected soon.

DR. M. M. S. SIDDHU: This reply vague, and not only vague, it conceals many things.

First and foremost, the Medical Council of India, of course, is entrusted with the maintenance of the standards of medical education in the country. Section 11 empowers it to recommend to the Government to have the * degrees accepted and notified in the official gazette. The Medical Council of India is a deliberative body, it is a policy making body, it is a recommending body. But as for the recognition of the degrees, certainly it is done by the Ministry of Health and after the notification the Medical Council of India enters them in the Schedule of the Medical Register. This can be very well borne out by the fact stated by Dr. B. N. Singh. I may be permitted to quote what Dr. B. N. Singh, President of the Medical Council of India, said on March 5, 1982. I quote:

The Medical Council of India is only a deliberative and policy-making body, but the execution of the various policies and the recommendations framed by the Medical Council of India remains with the medical institutions and other organisations. Most of the medical institutions are

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run by State Governments and it has been my experience that there have been violations in the regulations of the Medical Council of India.

He further goes on to say and I quote again:

The Medical Council of India have laid down standards of medical education and it is only by following these checks that we can really be sure that the health of the nation is entrusted to competent hands who are properly trained and talented.

Now, section 19 deals with the withdrawal of recognition and the power for this rests with the Government. *Section 19-A* deals with the minimum requirements for medical education and inspection and the Medical Council of India has prescribed minimum qualifications and standard requirements for medical colleges for admissions and it has been notified by the Government of India on November 3, 1977. It deals with requirements of the teaching staff, laboratories, beds, strength, and other matters including lectures, theatres, seminars, etc. it is correct, as the hon. Minister has stated that year to year recognition has been given to ten medical colleges. The one which is omitted is Imphal under the Gauhati University. But these are being given from year to year with the stipulation that the deficiencies must be made good. These are very old medical colleges. The North Bengal Medical College was started in the year 1968 and was taken over by the Government in 1978. Burdwan was started in 1968 and taken over by the Government in 1976. Then, Sir, Bhagalpur was started in 1971; Dhanbad in 1970; Darbhanga in 1946; Maghad in 1969; Muzaffarpur in 1970; Nalanda in 1970; the Regional College in Imphal was started in 1972; and the University College of Medical Sciences was started in 1971. And, Sir, I am unable to understand what deficiencies there can be after such a long time, that from the year 1969 onwards up to 1972. It may not be good for

me to read out the name of each and every medical college here. But I would like to place the matter before you, Sir, and before the House and I would like to ask certain questions. What steps has the Government taken with regard to the professorships that are there in the Burdwan Medical College in the following departments? There are posts and they are not filled. The departments are: Physiology, bio-chemistry forensic medicine, radiology, psychiatry, tuberculosis, and chest diseases, venereal diseases, dermatology, ENT, surgery, etc. Then, in the North Bengal Medical College, there are 13 professorships and there are no heads for the surgery, obstetrics and gynaecology, ophthalmology, ENT, radiology, social and preventive medicine, forensic medicine, urology, chest diseases, dermatology, venereology, and surgery. Then, in Bhagalpur; Nine professorships are there and there are no heads in the various departments which include surgery, obstetrics and gynaecology. In the case of Dhanbad, there are 12. Sir, I will not take the time of the House. Then, in the case of Darbhanga and Gaya, 15 posts are there. In Nalanda, it is ten. Sir, I would like to mention here that if there is no professor in the medicine department, if there is no professor in the gynaecology and obstetrics department, if there is no professor in the surgery department, the whole unit cannot work and the degree cannot be awarded according to the requirements laid down by the Ministry of Health. Therefore, it is not a question of selecting one or two units only. There are many units and there are many vacancies like 18, 19, 20, and so on in number.

Then, Sir, I come to the University College of Medical Sciences which is in Delhi. In the year 1981, the Medical Council was forced, was constrained, to come to this conclusion: No admission to be made to the MBBS courses in the UCMS from 1981 onwards. They should provide the other necessary facilities first. Necessary teachers with appropriate teaching de-

signations should be appointed. Further, there should be at least one full-time unit in each clinical department. Subject to the above conditions, the Executive Committee recommended the continuation of the recognition of the MBBS degrees awarded to the students of the UCMS for all existing batches admitted up to 1980. Sir, we had to tell the University College of Medical Sciences that they should stop admissions pending the designations of the teachers to be given. But, Sir, from the year 1971 till today, admissions have been made. But still they have to fructify. Last time, of course, I was a Member of that Committee when the Delhi University forwarded the list of the teachers and, according to the Medical Council of India Regulations, we said: "These persons are eligible for such and such posts; But the MCI does not appoint." And, Sir, so far as my information goes, no appointment letter has gone to them so far. Well, Sir, this is the state of affairs. Then, Sir, what about the Shahdara Hospital coming up? It is a very big complex. In the ASIAD, they could have made use of it and at least it would have given greater medical facilities to the persons who are visiting it. And it is still in progress, slow progress. Sir, the Medical Council of India was constrained to pass this Resolution:

"The Council do not agree to the continuation of admissions of the Medical Colleges _____"

The list has been read out by the hon. Minister. We have still given the opportunity to those of the medical colleges to fill in the posts, to create more facilities. Still I may say that I am constrained to bring it to the notice of the House, which I have never done though those things were known to me for the last 20 years or so. The Annual Report of the Medical Council of India does not come before the House, otherwise these matters would have been there.

Sir, I ask a pertinent question about the medical colleges taken over by the

State of Bihar, taken over by the State of West Bengal and also imphal Government and the UCMS, which is under the University. The Director of Health has been assisting them. It is in the Government Hospital at Saf-darjang that they are receiving the training. So I would like to know categorically how and when the Union Government receive the reports and ask these State Governments to fulfill the minimum requirements so that the degree of medicine and MBBS is not taken as a light one, otherwise it would bring a bad name to the medical education in the country.

The next one is the capitation fee. And it is surprising, Sir, that private medical colleges are springing up _____ (Time Bell rings).

Sir, I have to make a few more points. If you were to see, it is the first time I am bringing it before the House and they must know what the position is.

In Karnataka, according to the norms laid down, they are required to have seven medical colleges. How many do they have? They have nine medical colleges. There is a surplus of two. And most of them started as private medical colleges with capitation fee. Unfortunately, what has been going on⁹ These medical colleges have been admitting students without the approval of the Medical Council of India. In Devanagiri, the number at one time was 145 or so. The Medical Council later on told them that unless they reduce it to 75 their degree will not be recognized. Then they recognized it. After that, when they had more facilities they allowed them to have 100. But what is the position today? The Government of Karnataka gave a directive, to the private medical colleges not to their own medical colleges—to unilaterally increase the number*—in Devanagiri the number went up from 100 to 135, in Belgaum 100 to 110, Gulbarga 100 to 110 and

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Kasturba 100 to 107. What for? To create more capitation fee, to share more money. I will not like to go into what has been said about the Government in other places. This

matter has been raised here also. Well, I would like to say that the Executive

Council of the Medical Council of India said that the capitation fee should be stopped and colleges taken over by the Government. If it is not possible for the Government to take over the colleges, then such sums of money as would be necessary to run the institution should be given as grant in lieu of the capitation fee. And what is the result, Sir? Four new medical colleges have been started, and one in Andhra Pradesh. And I am also constrained to say that our hon. Minister presided over the functions of one of these medical colleges which has been started now. That was the report. I would like to know why they are allowing it against the advice of the Prime Minister and against the policy of the Government. She is opposed to capitation fee. How is it that State after State are indulging in creating private medical colleges or teaching shops. The increase in seats should have the prior approval of the Medical Council. Here the Chief Minister takes it into his head and orders that so many seats will be increased so that easy money may be made available. You may say what a capitation fee? Only from Rs. 2 lakhs to Rs. 5 lakhs per seat.

«Here is another irregularity and this irregularity is about the delay in examinations. You will be surprised to know that in Patna Medical College, the students appeared in the final examination after a period of 7 years. Usually it takes four and a half years for one student to appear in the final examination. No examinations were held for such a long time.

Then there is the question of reservation. There are certain minimum standard* to be observed. As far as

the Medical Council is concerned, those are stipulated in its regulations and it is stated that the Scheduled Castes and Scheduled Tribes candidates should be given due weightage and their proportion should always be kept. But they reduced the minimum marks from 50 per cent to 40 per cent and even they went to the extent of

lowering it to 35 per cent. There are States which have admitted students at a very low percentage of 10 per cent marks. What will happen to these students!? They get frustrated year after year. The Medical Council of India had requested the Government that special coaching sections should be there for these students so that they can do better.

I read in the papers and the Hon. Minister may correct me if the news is wrong that the Punjab Government has reserved 25 per cent of the seats in Medical Colleges for sportsmen. 25 per cent for sportsmen have to be there in medicine. I can think of weightage of 5 per cent or 10 per cent or 3 per cent being given. As it is, here it is the question of 25 per cent of the seats which would be cornered by the so-called sportsmen. It will be very difficult to say what the criterion will be. It is very unfortunate that the four medical colleges in Karnataka are being created.

I will now put a few questions. What steps is the Government going to take to ensure that the regulations promulgated by the Union Government are implemented? What action has been taken by the Government on these matters? These matters have been there for years. It is not the first time. For the last 5 to 6 years, these institutions have been given time to fulfil the requirements.

MR. DEPUTY CHAIRMAN: Please conclude now.

DR. M. M. S. SIDDHU: Secondly, Sir, in case of failure of these medical authorities or the medical institutions, will the Ministry invoke Section 19 of the Act? Thank you Sir.

SHRI PILOO MODY (Gujarat): Waiting for Mr. Gundu Rao's permission.

SHRI B. SHANKARANAND: Sir, the hon. Member who has raised the issues before the House is a Member of the Medical Council itself and perhaps he knows the facts in greater detail and he has revealed certain facts to the House.

DR. M. M. S. SIDDHU: I can place all of them before you.

SHRI B. SHANKARANAND: The House is entitled to know all the facts.

DR. M. M. S. SIDDHU: If you like, I will place all the papers which I have collected on the Table of the House. If the House so desires....

SHRI B. SHANKARANAND: I do not dispute what you have said as far as the facts are concerned. The question is that the hon. Member has raised certain issues not at all directly connected with the implementation of the regulations and they are, to that extent, quite extraneous to the issue before the House. Even then, I will deal with them after I have dealt with the main issue regarding the implementation of the regulation.

Sir, for the implementation of the regulations, we have to go to the provisions of the Act itself. He has asked as to what the Government is going to do. And he quoted the President of the MCI, Dr. Sinha saying that MCI is the policy-making body and the Government is the executive authority. However, I do not want to comment on the speech made by the President, MCI, in his regard because he has been entrusted with a job and functions and duties and responsibilities duly enshrined in the provisions of the Act and the regulations. If you go through the various provisions of the Act—the relevant provisions are Sections 17, 13, 19 and 19(a) of the Act—regarding the recognition of medical qualification of various institutions which are affiliated to various institutions, universities, and withdrawal of such recognition, that is what the Act envisages under these provisions—

Sections 17, 18, 19 and 19(a). I need not take the time of the House to read them but if you go through these provisions, the House will be fully convinced that the Government acts only when the Medical Council of India represents to the Government to take certain action. And he has quoted because he happens to be the member of the Council itself. So far we have not received any representation under the Act from the MCI to take any action regarding withdrawal or derecognition of any medical qualification or anything in that regard. The implementation of the regulations is left to the Medical institutions and Universities and the State Governments concerned, and to that I have already said that the Medical Council of India has already addressed letters to the concerned State Governments, Universities and institutions and they are pursuing it to rectify the mistakes, to fulfil the conditions for the continuous recognition of the degree and qualifications issued by these nine Medical colleges.

Sir, I need not go into the deficiencies of various medical colleges because the hon. Member himself has read out, and I do agree with him, and that is the reason why the Medical Council of India is pursuing and they are persisting to see that these deficiencies are rectified and the conditions that are laid down for the maintenance of minimum standards of medical education in the country as laid down by the various regulations are maintained.

Sir, the hon. Member has raised various other issues. It is true that it is not the function of the Medical Council of India either to recognise the qualification or to withdraw the recognition of medical qualification but it only recommends or represents to the Central Government in respect of recognition or derecognition of any medical qualification of any Institution or college which is affiliated to certain University. And only on receipt of such representation, recommendation by the Medical Council of India the Central Government comes into the picture. And I can say that till today

[Shri B. Shankaranand] the Government and the Health Ministry have not received a single representation or recommendation from the Medical Council of India to withdraw any medical qualification given by any medical institution or University.

So, the question of the Government of India taking any action in this regard does not arise at all. Sir, by this I do not say that I am going to disown the responsibility of keeping high standards of medical education in this country. We have to do whatever is possible to see that medical education in this country is kept up at a very high Standard. But it is also true that medical education in this country now should be no more just a carbon copy of the western medical education system, that is existing in the developed countries. We have to see that our doctors are socially motivated along with a high standard of medical education and our medical education should be relevant to the realities of the rural population of this country. The doctors shall have to be socially motivated. The changed necessities require a change in the medical curriculum itself. That is why I have set up a Medical education Review Committee, along with doing various other things. This has been appointed on the 8th September, 1981, and I am expecting the Report of the Review Committee very soon, Sir. The terms of reference of the Review Committee, for the benefit of the House, I may read again, because I have already given them to the House. The terms of reference shall be as under:

—to review the current admission procedures including entrance tests and domiciliary restrictions for admissions to under-graduate and postgraduate courses and to make suitable recommendations separately in regard thereto;

—to suggest measures aimed at bringing about overall improvement in the under-graduate and postgraduate medical education paying

due attention to—

(a) institutional growth,

(b) content, relevance and quality of teaching, training and learning, etc. and

(c) the evaluation systems and standards;

—to recommend the optimum duration of under-graduate and postgraduate courses of studies separately;

—to examine the existing internship programme and to recommend its future pattern;

—to review the working of the residential scheme along with the housemanship programme and to make recommendations regarding a uniform pattern of post-graduate training;

—to examine the current requirement of thesis or dissertation as an essential part of post-graduate medical education and to make suitable recommendations in this regard; and lastly;

—to examine the feasibility of a period of service in the rural areas for medical graduates and post-graduates.

The Committee will also evolve realistic projections of medical manpower requirements, M.B.B.S. doctors, general specialists, super specialists during the Sixth Five Year Plan and beyond taking into consideration.

(a) the needs of Government-based health care programmes;

(b) the requirement of doctors in the private sector;

(c) the needs arising from bilateral agreements, international commitments and technical co-operations among developing countries;

(d) necessity to redress regional imbalances in the distribution of medical manpower.

Sir, I am expecting the Report of this Committee very shortly because

the extended time that was given to them is coming to an end.

Now the hon. Member has said one thing regarding the establishment of medical colleges without the permission of the Medical Council of India. May I, Sir, through you, inform the hon. Member and the Members of the House.....

DRI. M. M. S. SIDDHU: I know it. I know it.

SHRI B. SHANKARANAND:.., that there is no provision, that there is no legal provision to stop the establishment of medical colleges and the M.C.I. has no power at all to give recognition to the institutions or approved medical institutions? The various medical colleges that are established are established with the permission of the State Governments concerned and the universities in whose jurisdiction these colleges are established take into consideration whether such a college should be affiliated or not. It is their domain because the universities are also autonomous bodies having come into existence with an Act of their State Legislature.

So, neither the Central Government nor the Medical Council of India can, under the existing provisions of law, interfere with the establishment of medical colleges in the country. The Medical Council Act and the regulations thereunder do not make any distinction between a Government medical college and a private medical college, and under the provisions of the Act, the Medical Council of India has no authority on financial management of the medical institution. So, the question of either stopping the capitation fee or recognizing or derecognizing a medical institution does not arise. I am sorry, at the moment, we have no authority on the question of capitation fee, because this is all done by the State Government. Sir, he referred to certain medical college which I presided over and I take pride in presiding over such an institution which is the only medical college in the country

which has been organised by the Scheduled Castes, by the Scheduled Tribes and weaker sections of the country and I feel proud of having presided over it. But I have never said that this college is exempt on the question of maintenance of medical standard laid down under the Medical Council of India Act or the regulations. I never said that the university concerned should take steps to affiliate or de-affiliate. If that college is to exist, it has to exist on its own merit without discrimination or distinction only because it has been established by weaker sections of society. It is the duty of the MCI and the Government to see that minimum standards of medical education are maintained, whether the college is run by the Scheduled Castes or any body else or it is a private college or a Government college, and that is the reason MCI have stopped a Government medical college and they have issued notice to a Government medical college.

Lastly, Sir.....

MR. DEPUTY CHAIRMAN: You have already covered all the points.

SHRI B. SHANKARANAND: The question of capitation fee has been discussed on more than one occasion.

MR. DEPUTY CHAIRMAN: That has been discussed.

SHRI B. SHANKARANAND: Prime Minister and myself have said that we are opposed to it and we have said it on the floor of this House and also in the Lok Sabha on more than one occasion.

MR. DEPUTY CHAIRMAN: That has been discussed threadbare.

DR. M. M. S. SIDDHU: One or two clarifications.

MR. DEPUTY CHAIRMAN: No Dr. Siddhu. Please cooperate. No time is left.

DR. M. M. S. SIDDHU: Just one clarifications.

MR. DEPUTY CHAIRMAN: No time left now, you have already taken 15 minutes. There are other speaker? also.

श्री नेपालदेव भट्टाचार्य : (पश्चिम बंगाल) : मुश्किल यह होती है कि लम्बा भाषण जब चलता है। . . .

श्री उपसभापति : क्या कहें, दूसरों को सफर करना पड़ेगा। जरूर करना पड़ेगा. . . .

श्री नेपालदेव भट्टाचार्य : सफर हम लोगों को करना पड़ेगा, बायें वाजू वालों को करना पड़ेगा, दाहिने वालों को कुछ नहीं है. . . ।

श्री उपसभापति : समय नहीं है, प्लीज पुट दे क्वेश्चन।

श्री नेपालदेव भट्टाचार्य : चेयर का राइट को डिक्लियरेशन हो रहा है। चेयर को, आपको तो चीज बीच में रहना चाहिए। ज्यादा वक्त उधर है और कम इधर. . . (व्यवधान)

मेरा जो मैसेज है वह यह है कि आपके स्टेटमेंट में लिस्ट में जिन मेडिकल कालेजों के नाम हैं उनमें सारी प्रान्सल्स को आप इस नजर से देख रहे हैं कि सारी समस्याएं जैसे उन मेडिकल कालेजों में एक ही हैं। मेरा कहना यह है कि एक नहीं है। मैं तीन कैटेगरी बताना चाहता हूं। एक ऐसे कालेज हैं आपको शायद जरूर मालूम होगा कि जहां नेपोटिज्म के कारण से जो स्टैंडर्ड रहना चाहिए, जिसकी भी आप बात कह रहे हैं, गुड विशेषज्ञ एक्सप्रेस किए हैं, वह नहीं है। एक मेडिकल कालेज में बताना चाहता हूं, इन्दौर मेडिकल कालेज जहां पिछले कुछ वर्षों से हैड आफ डिपार्टमेंट का लड़का या लड़की को ही गोल्ड मेडल मिलता है। यह आटोमैटिकली हो जाता है। यह कोई सरप्राइजिंग नहीं

है क्योंकि हिन्दुस्तान में यह आदत बन गयी है कि लीडर का लड़का लीडर, डाक्टर का लड़का डाक्टर और गोल्ड मेडलिस्ट। यह पालिटिक्स में भी है, लीडर आफ नेशन का लड़का ही लीडर आफ नेशन आटोमैटिकली बन जाता है, डिपार्टमेंट के हैड. . . (व्यवधान)

श्री उपसभापति : जो सवाल उठते हैं वे पूछिये।

श्री नेपालदेव भट्टाचार्य : मैं पूछता हूं कि एटिड्यूड क्या है सरकार का. . . (व्यवधान)

वर्दवान यूनिवर्सिटी है, जहां शार्टेज है, प्राबलम है, जहां नेपोटिज्म चल रहा है, जिसकी वजह से स्टैंडर्ड घटता जा रहा है।

श्री उपसभापति : आप नाम बताइये कि कहां है?

श्री नेपालदेव भट्टाचार्य : सरकार का कहना क्या है?

श्री उपसभापति : कालेज का नाम बताइये, तब कहना। . . (व्यवधान)

श्री नेपालदेव भट्टाचार्य : दूसरे कैपिटेशन फीस, कमशियल जहां बिजनेस चल रहा है, तो यह वैन क्यों नहीं हो रहा है? आप कह रहे हैं कि यह स्टेट गवर्नमेंट के हाथ में है, पर आप वहां जा कर खुद प्रेजाइड कर रहे

"You are proud that the medical college was started by the scheduled caste people

फीस है कि नहीं, जहां पर आप ने प्रेजाइड किया है?

तो मेरे ख्याल से तीन कैटेगरीज हैं—एक जहां नेपोटिज्म के कारण से स्टैंडर्ड घट रहा है। दूसरे जहां कमशियल एटिड्यूड है और तीसरे वह

हैं जहाँ जेनुइन प्रादलम्स हैं, जहाँ स्टाफ नहीं मिल रहा है। तो आपके सामने एक ही दवा है कि डिस्क्रिगनिसन का आप चाहते हैं—डा० सिद्धू से अभी आपने बताया कि अगर मेडिकल काउंसिल बताए, तो मैं डिस्क्रिगनिसन कर सकता हूँ। तो डिस्क्रिगनिसन ही सलूशन नहीं है। प्रावलम के अंदर आप जाना नहीं चाहते हैं। मैं कहता हूँ कि अगर सर दर्द है तो सर को ही काट दो, यह नहीं, सर दर्द की दवा दूसरी कुछ है। मैं पूछना चाहता हूँ कि आप उसके बारे में क्या सोच रहे हैं। यह जो तीन कैटेगरीज हैं, उसके बारे में आप क्या बतायेंगे ?

SHRI B. SHANKARANAND: Sir, I am only say and I am reminded of a proverb that little knowledge is dangerous. The hon. Member does not know the facts and he has gone astray from the main issue which has been raised in this House, and I do not think I need to reply to any of them.

MR. DEPUTY CHAIRMAN: Dr. Bhai Mahavir. He is not a doctor. Do not worry. (Interruptions)

SHRI B. SHANKARANAND: Sir, I must say, why I said this. (Interruptions). I will tell you that. The main Calling Attention notice is in regard to implementation of regulations and the regulations do not have a place for any restriction or banning of capitation fees or derecognition of such colleges. (Interruptions) Regarding the Ambedkar College, for the opening of which I went, the Medical Council of India has not even inspected this college. When this is the position, where is the question of derecognition? That is why, I told the hon. Member that little knowledge is always dangerous.

SHRI NEPALDBV BHATTACHAR-
JtoE; If you answer questions in this way, this will be another dangerous trend. If you think that little knowledge is dangerous, then tne way of

answering questions is also dangerous for this House. This is more dangerous, the way you are replying. I asked specific questions. What is your attitude? You say that there is no scope for the Central Government to derecognise any institution. But how are you going to solve this problem? What are you thinking of doing to solve this problem? (Interruptions)

SHRI B. SHANKARANAND: Sir, the hon. Member does not know that I have made statements against capitation fees on various occasions in this House.

MR. DEPUTY CHAIRMAN: That point has already been clarified. Now, Dr. Bhai Mahavir please.

DR. BHAI MAHAVIR (Madhya Pradesh): Sir, I am inclined to sympathise with my friend in his difficulty because the hon. Minister should not get away with an answer limiting himself to the legal position. If there is a law which does not permit him to take action, well, it is for him to come and say, 'more legal power is required by the Government to deal with this problem'. In a question like that of capitation fees. I find that he himself stands in a position of utter helplessness. It appears, the Government is unable to do anything in the matter. My good friend, Dr. Siddhu, read out a long list of colleges and pointed to the inadequacy of staff. Is it not because of lack of funds which are provided to these colleges that they are unable to appoint the required number of teachers or professors or other staff to man these colleges? If these resources are not provided to them, what else is the way open to them except to charge from the students who are applying? It may be morally good, it may be morally bad. But the position is. there are students and there are people who wish and who are able to spend.

There are institutions which are prepared to accept money and admit them on such payment for such a training. The colleges that art tiros are rw»f-

(Dr. Bhai Mahavir] nised and are running with the approval of the Government. In this situa-ⁿ tion does the Government undertake to supply them, furnish them with the required facilities, with the required funds, or have you just to permit the system to carry ^{on} as it has been carrying on? In this list there is the Faridkot College. When I was in this House in m_v last turn, this Faridkot College problem used to come then also. Students were on strike. They sat ^{on} a dharna ^at Boat Club for days and weeks together and the problem still remains as it is. It is not enough merely to say that this is the problem and after the Committee gave its report the Government will take action or that the Medical Council can recommend and once it recommended, the Government will move. I do not think the matter ends there or even if it ends according to what the Minister has stated, I do not think it ends in a satisfactory manner.

There are five colleges in Bihar and I do not think any of them is better than the rest, but most of them seem to be in an equally bad shape and they are continuing. In Bihar we are told the examinations keep on getting postponed year after year and perhaps the examinations due to be held three years back ar_e going to be held this year. In this situation what are the private Members or the Members of tl[^] opposition supposed to do? The hon. Minister was a little unkind in the comment which he made. May be that we have little knowledge or maybe, we have no....

SHRI B. SHANKARANAND: i have not made this remark to you.

DR. BHAI MAHAVIR: Not to me. I am saying, 'one Member'. May be, (hat one Member is not fully equipped with the information as you are, but you have to deal with the situation. So, Sir, I am surprised also that a college run by the University in Delhi should have this problem and we should not be able to handle it and

they should have to put a bar on admission of students to the MBBS course.

There are one or two small points which I wish to submit to the hon. Minister for his comments. Does the Council have sufficient power to check what is known as quakary? There are newspaper reports that there are people who call themselves to be registered medical practitioners, who perform operations or give injections....

MR. DEPUTY CHAIRMAN: That would be a different matter. That would not arise out of the Calling At tention.

DR. BHAI MAHAVIR: If the Council is the authority in this matter of keeping medical standards, L_s there any check on the people who are engaging themselves in medical practice? Does the check lie with the Medical Council? there are suggestions and I wteh to have his reaction on them also that our emphasis on theoretical and academic medical education Js a little too much. The country does not need all that emphasis on academic research and theoretical knowledge for the purpose of taking the medicine and treatment to the grass roots. For grass roots service we need more competent people who can handle common type of illnesses right ^at the level where they arise an< j only those cases which they are incapable of handling should b_e referred to the district or civil hospitals. This is something which is not being done because the graduates who are turned out by our medical colleges are accustomed to working only with the help of the sophisticated equipment and that equipment is not available ^at the village or taluka level. Therefore, a different type of education which is practical oriented in a greater degree is required and if that is not done, all the money that is being spent will not bring medical ^aid t_o the lowest level. It has also to be seen whether primary health centres need to be strengthened.

1 P.M.

They do not have the required facilities. One last point is, I have been

meeting people who come from overseas, representing overseas Indians. They are there and they want to send their children for medical education to this country. They are well off and they are prepared to spend, even pay capitation fee or spend a crore of rupees or more if some college should provide some reserved seats for children of Indians settled abroad. Will the hon. Minister look into this whether it is possible, because if that is done, we would get some means with which we can establish institutions and they would get the education which their children need?

SHRI B. SHANKARANAND: Sir, the hon. Member has raised an issue regarding capitation fee when he started his remarks and said, how is it that the Government is so helpless that it cannot do anything? Sir, I never pleaded my helplessness. What I said was that under the existing provisions of law, neither the Medical Council of India....

DR. BHAI MAHAVIR: That means you cannot do anything.

SHRI B. SHANKARANAND: That ^tloes not mean that we cannot do anything. I have not said that. Don't put words in my mouth which I have not said. I have only said that under ' the existing provisions of the Medical Council of India Act and the regulations framed thereunder, neither the Medical Council of India nor the Government of India have powers regarding the financial management of any medical college or medical institution. That is what I have said.

I have said it on various occasions that we are opposed to capitation fee and Government of India is very seriously thinking about the issue of donations or capitation fee. It is not only in medical colleges. This system is also existing in public schools, in engineering institutions etc. So the medical institutions cannot be just pinpointed and isolated from the rest of the educational system in this country.

He tried to mix up capitation fee with private colleges. What I said was that the nine medical colleges which I have mentioned are not private medical colleges. They are not raising any capitation fee. But still the Medical Council of India is after them to meet the conditions and provide the facilities that are required for maintaining the minimum standards of medical education. Regarding the question of private medical colleges in Karnataka, the MCI has yet to inspect these institutions. Neither the MCI nor the Government of India has any inspection report before it to come to the conclusion that they are not fulfilling any conditions laid down in the Act or the regulations because the Act and the regulations do not make any distinction between private medical colleges and Government medical colleges.

DR. BHAI MAHAVIR: Is this Guru Gobind Singh Medical College at Faridkot a Government college? Has it been taken over?

SHRI B. SHANKARANAND: Previously it was a private college. Now it has been taken over by the Government.

Then he raised the question about checking quackery. The hon. Member knows that the MCI Act does have provision for preventing quackery. Quackery is practised by those people who have not seen the portals of any medical college and the question of maintaining standards does not arise. They have to be dealt with in a different way and we have addressed the State Governments and the Union Territories administrations to take stringent action against all these quacks.

I do agree with the hon. Member that it will be a futile exercise to discuss about the academic aspect of the medical education if the medical education is not relevant to the realities of the country. And that is exactly the reason of my appointing the Review Committee for that purpose.

(Shri B. Shankaranand]

Regarding some provision for overseas students of Indian origin, admissions are also not regulated by the MCI or the Government of India. But we have certain things.

We do give certain nominations to the foreign students under the self-financing scheme and the cultural exchange programmes.

DR. BHAJI MAHAVIR: That is for students nominated by other Governments. "Foreign students" means those who are sent by other Governments, other countries.

SHRI B. SHANKARANAND: That is under the cultural exchange programmes.

MR. DEPUTY CHAIRMAN: He is talking about Indians settled abroad.

SHRI B. SHANKARANAND: We do not make any distinction between foreign students of Indian origin and foreign students of any other origin.

**REFERENCE TO THE REPORTED
GRAVE THREAT TO THE LIFE OF
RAM NARAIN KUMAR, AN UNDER-
TRIAL PRISONER IN THE TIHAR
JAIL, DELHI**

SHRI P. N. SUKUL (Uttar Pradesh): Sir, I wish to draw the attention of the Government, especially of the Home Minister, to a very important matter of public importance. One Shri Ram Narayan Kumar, an undertrial prisoner in the Tihar Jail, Delhi, connected with the MP's hostage case, was allowed the use of a typewriter by a New Delhi court in the Patiala House for writing the life of Dr. Ram Manohar Lohia as also, perhaps, his own petitions. When Shri Kumar was brought to the court in the Patiala House on 26th July, with the court's permission, representatives of the probe magazine talked to him and requested him to contribute an article for their magazine on the living conditions in the Tihar jail and Shri Kumar consented to do so. An advance payment of Rs. 200 was made to his advocates by the re-

presentatives of the Probe magazine and the advocates told the Probe that the article would be given to the magazine on the 3rd August. On the 1st August when the younger brother of Shri Ram Narayan Kumar went to meet him in the jail, Mr. Kumar gave him the promised article for the Probe. The jail authorities, however, took away the article forcibly and the advocates of Shri Kumar gave addressed a letter to the Chief Justice of the Supreme Court for the return of the article. Also, advocate Shri P. N. Lekhi of Legal Aid Committee is moving the Supreme Court in the matter. Shri Kumar has, since informed his lawyers that because the names of those responsible for the recent grenade episode in the Tihar jail as well as for the various unlawful activities that are being committed in the jail, at the instance of the jail authorities with whose collusion the said unlawful activities are being carried out were given in the article, the concerned convicts have threatened him with liquidation. There is, therefore, a grave threat to the life of Shri Kumar which has to be saved in the best interests of the law, the society and the nation. In view of the fact that deaths of 15 under-trials and Ave convicts had already occurred in the Tihar jail between January 1981 and March 1982 vide the article published in India Today dated 18th July last and also because in his reply to a Calling-Attention motion on the floor of this very House the Home Minister has also admitted that 15 such deaths had occurred in the jail, no one needs to be surprised if Shri Ram Narayan Kumar is also found dead today or tomorrow. The representatives of the Probe magazine met me and they have given me these details. I, therefore, take this opportunity to request the Home Minister and the Government of India to take all possible measures to ensure that Shri Ram Narayan Kumar is neither physically liquidated nor even beaten up in the jail for naming the culprits aforesaid. Also the Government should try to root out the unlawful activities at present being carried out