However, the CCIM has recently reviewed the draft regulation and has proposed the same as Sanskrit, English/Hindi. As per provision of Section 22 (2) the amended provision has been sent to all State Governments for comments. Under Section 36 of IMCC Act, a final view is required to be taken by the Central Government after getting the views of the State Governments along with the recommendations of the CCIM.

Closure of public sector vaccine producing units

1710. SHRI NANDI YELLAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the detailed reasons for suspending India's oldest vaccine manufacturing units namely BCG Vaccine Laboratory (Chennai), Pasteur Institute of India (Coonoor) and the Central Research Institute (Kasauli); producing 80-90 per cent in one year and reducing the production to 15 per cent in the next year;

(b) whether Government has investigated into nexus between these public sector units and private sector units;

(c) if so, the details thereof; and

(d) what is the shortest period involved in reviving these public sector units in commencing the production of vaccines to meet the needs of population at an affordable price?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) The manufacturing licenses of the three Vaccine Manufacturing Units namely, the Central Research Institute, Kasauli, the Pasteur Institute of India, Coonoor and the BCG Vaccine Laboratory , Chennai were suspended by the Drugs Controller General of India [DCG(I)] in January, 2008 since they were not found to be compliant with the Good Manufacturing Practices (GMP) as provided under Schedule M of Drugs and Cosmetic Rules, 1945.

(b) No.

(c) Does not arise.

(d) Order for revocation of suspension of licenses of these Institutes have been issued to enable them to resume production and to ensure that the production line is made fully compliant with

GMP standards within three years. The three vaccine producing units have initiated vaccine manufacturing process.

Proposed reforms in the health care sector

1711. SHRI SAMAN PATHAK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is seriously considering to bring reforms in the health sector particularly in medical education;

(b) whether Government is aware that there is a huge cadre of para-medical and allied health professionals including the medical laboratory staff working in various scientific and clinical laboratories at various levels of health facilities and is demanding a comprehensive legislation or a regulatory body to bring about uniformity in educational, employment and quality of medical laboratory services in the country; and

(c) if so, the steps Government proposes to take in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) Yes.

(b) Yes.

(c) The Ministry is considering setting up of an overarching regulatory body *viz*. National Council of Human Resources for Health (NCHRH) with a dual purpose of reforming the current regulatory framework and enhancing the supply of skilled manpower in the health sector. Apart from regulating medical, dental and nursing education and professions, the proposed Council would also regulate para-medical and allied health education and profession.

PHCs in Rajasthan

1712. DR. GYAN PRAKASH PILANIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether all the blocks of Rajasthan have Primary Health Centres (PHCs) and the required staff;

(b) whether these PHCs at block level have buildings, physical infrastructure and medical personnel, as on date;