Allotment of land for hospitals

†2480. SHRI CHAUDHARY MUNAWER SALEEM: Will the Minister of URBAN DEVELOPMENT be pleased to state:

(a) whether it is a fact that DDA has allotted land to 50 private hospitals free of cost or at lesser rates;

(b) whether Government has put the condition for providing 25 per cent free treatment to the poor people and to what extent it is being followed and the details of the institutions and people who are asking for reports from the hospitals in this regard; and

(c) whether it is not a fact that the private hospitals have changed into five star hotels instead of service institutes, whether Government will take any action in public interest?

THE MINISTER OF STATE IN THE MINISTRY OF URBAN DEVELOPMENT (SHRIMATI DEEPA DASMUNSI): (a) Delhi Development Authority has allotted land to 56 private hospitals at zonal variant rate or at rates prescribed for charitable institutions. No hospital has been allotted land free of cost.

(b) The Delhi Development Authority had put the conditions of free treatment on the Demand-cum-Anotment letter/lease deed of some hospitals/societies. The monitoring of free medical treatment to poor and weaker section is looked after by the Directorate of Health Services, Government of National Capital of Delhi for which a Monitoring Committee has been constituted by it. Director of Health Services seeks reports regarding free treatment from the identified private hospitals.

(c) Yes, Directorate of Health Services, GNCTD has issued an advisory dated 05.02.2014 to all private/Government Hospitals in the National Capital Territory of Delhi in this regard.

Inclusion of cities under JNNURM

2481. DR. JANARDHAN WAGHMARE: Will the Minister of URBAN DEVELOPMENT be pleased to state:

(a) whether any survey has been conducted by Government for selection of more cities/ town under the JNNURM if so, the details thereof; and

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†Original notice of the question was received in Hindi.

(b)   whether Government propose to relax the criteria for inclusion of cities under JNNURM and extend the financial assistance to more cities/towns in the country, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF URBAN DEVELOPMENT (SHRIMATI DEEPA DASMUNSI): (a) and (b) No, Sir. The Mission has completed its normal tenure of 7 years on 31-3-2012. The Government has extended the period for two years i.e. upto 31-3-2014 for completion of ongoing projects and reforms only.

Drinking water and sanitation in Mumbai and other cities

2482. SHRI D.P. TRIPATHI: Will the Minister of URBAN DEVELOPMENT be pleased to state:

(a)   whether it is a fact that Government is not able to provide proper drinking water and sanitation in Mumbai and adjoining cities; if so, the details thereof;

(b)   the total amount of funds allocated under various schemes for drinking water and sanitation in Maharashtra; and

(c)   the steps Government is taking in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF URBAN DEVELOPMENT (SHRIMATI DEEPA DASMUNSI): (a) and (b) Urban water supply and sanitation is a State subject and it is the responsibility of the State Governments/Urban Local Bodies to plan, design, execute and operate the water supply and sanitation schemes in the urban areas of the Country. The Ministry of Urban Development (MoUD) facilitates in framing broad policies, programmes and guidelines on urban water supply and sanitation. Government of India also supplements the efforts of State Governments through its various schemes for drinking water and sanitation. Details of funds allocated under various schemes by MoUD for drinking water and sanitation in Maharashtra is given in Statement (*See* below).

(c)   The Ministry has formulated the "National Urban Sanitation Policy (NUSP)" in 2008 with a view to prioritizing the issue of sanitation. The vision of the policy is that 'All Indian cities and towns become totally sanitized, healthy and liveable and ensure and sustain good public health and environmental outcomes for all their citizens with a special focus on hygienic and affordable sanitation facilities for the urban poor and women'. The policy requires each State to formulate