- (b) the kind of relief Government intends to provide to patients in emergency cases wherein prescribed medicines are put on "INDENT" and are supplied after 3 days or the supplier is located 10-15 km away from dispensary/home of the patients; and
- (c) what action has been taken to prevent the supply of duplicate/inferior medicines?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) and (b) Streamlining the functioning of CGHS dispensaries is a continuous process. In case of emergency, CGHS beneficiaries have an option to go directly to any Government hospital/private hospital, whether empanelled or not.

Medicines during emergency may be collected from any CGHS Wellness Centre. In case some medicine is not available, the beneficiaries have an option either to get it indented and collect from the Wellness Centre or to purchase medicines for upto 3 days and claim reimbursement. There is also an option to collect medicines from an Authorised Local Chemist directly on the basis of any Authority Slip issued by the CMO In charge .

(c) Medicines are procured after extensive quality control and testing. Besides, CGHS also tests samples randomly to check the quality of the medicines received by it.

FSSAI's proposal for interconnecting ports

3665. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Food Safety and Standards Authority of India (FSSAI) proposes to interconnect certain ports in the country with a view to facilitate fast movement of imported food;
- (b) the existing hurdles that had been coming in the way of speedy availability of imported food in the country;
- (c) the action plan to check contamination of such eatables, before distribution for human consumption; and
- (d) how far this action plan will ensure fast delivery of food material to the deserving sections of society in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) The Food Safety and Standards Authority of India (FSSAI) has, with a view to accord faster import clearance, started Food Import Clearance System (FICS) with effect from August-September, 2010. The FICS has been operationalised in a phased manner at Chennai (Seaport and Airport), Kolkata (Seaport and Airport), Haldia Seaport, Mumbai (Seaport and Airport), JNPT Seaport, New Delhi (ICD's and Airport) and Cochin (Seaport and Airport).

- (b) No hurdles are encountered for importing food to the country.
- (c) and (d) The current process followed to check contamination of eatables, before distribution for human consumption is summarised below:
 - (i) Documents Submission and Appointment: Customs House Agents (CHAs) seek appointment for sampling from FSSAI's Authorized Officer (AO) after examination orders are generated by customs by the bill of entry and by furnishing required documents along with fee for testing.
 - (ii) Inspection and Sampling: As per the appointment schedule, AO visually inspects', verifies documents and label and draws the sample randomly from the consignment at the Container Freight Stations (CFS) or the Vessel.
 - (iii) **Samples handed over to Labs:** The collected samples are sealed, coded and sent to the approved labs on the same or next day morning for analysis.
 - (iv) Test Reports from Labs: Depending on the tests required as per Food Safety and Standards Regulations, 2011, lab analyzes the samples and furnishes the report. The Food Analyst of notified laboratory is required to send the report within a period of five days to the Authorised Officer;
 - (v) No Objection Certificate (NOC) for clearance: NOC/(Non Conformance Certificate (NCC) based on analysis report from lab is issued by the AO to CHA/Importer and customs on the same or next day.

Introduction of bachelor in rural health care course

3666. SHRI A.U. SINGH DEO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government has decided to introduce bachelor in rural health care course in the country;
 - (b) if so, the current status of the course;
- (c) the details of objectives of the course and infrastructure required to be built for its implementation; and
 - (d) the list of States which have agreed to introduce the course?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN): (a) to (c) Yes. The Central Government has approved for introduction of a course namely, Bachelor of Science (Community Health). The main objective of the proposed course is to create mid-level health professionals who would possess the necessary public health and ambulatory care competencies to serve the rural population and will primarily be deployed at Sub Centres. The curriculum of the course has been prepared after taking into consideration the views of various stakeholders. The proposal for B. Sc. (CH)