(d) Health being a State subject, it is primarily the responsibility of the State governments to provide health care for the patients. However, the Central Government supplements the efforts of the State Government.

Government of India has launched National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) which is implemented for interventions up to District level under the National Health Mission. NPCDCS has a focus on awareness generation for behaviour and life-style changes, screening and early diagnosis of persons with high level of risk factors and their referral to higher facilities for appropriate management.

Government has taken measures to control environmental pollution, tightening of vehicular and industrial norms, promotion of cleaner technologies, strengthening of network of air quality monitoring stations, promoting the public awareness etc.

Under the Integrated Disease Surveillance Programme, the districts and States have been strengthened by providing additional manpower, training of identified Rapid Response Team (RRT) members for outbreak investigations, strengthening of laboratories for detection of epidemic prone diseases including acute respiratory infections.

Ministry of Health and Family Welfare, Government of India has also taken essential steps as a part of preparedness for acute respiratory infections due to viruses like influenza/H1N1.

Curbing violence against medical fraternity

1059. SHRI RAVI PRAKASH VERMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Indian Medical Association (IMA) has been concerned with five community oriented demands, which include reducing violence against the medical fraternity;

(b) if so, whether IMA has submitted a demands letter to Government;

(c) if so, whether Government has decided to set up a special time bound working committee to evaluate demands put forth by the Indian Medical Association (IMA) about the increased cases of violence against doctors and hostile work environment, if so, the details thereof; and

(d) the time by which the aforesaid committee will submit its report?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Yes. IMA has submitted community oriented demands.

(c) and (d) Government of India has constituted a Committee to examine the issues raised by IMA. The first meeting of the Committee is scheduled for 08.12.2015.

Starting of new course in health care study

1060. SHRI HARIVANSH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government wants to start three year Bachelor of Science in Community Health course in State Universities;

(b) whether before formulating this scheme, consultations with experts and related institutions have been done;

(c) whether adequate number of teachers capable to teach this course are available in universities of States;

(d) whether Government propose to raise the number of medical colleges to meet the shortage of doctors in the country; and

(e) the steps Government is taking to provide modern medical services to people in rural areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Central Government has approved for introduction of a course namely, Bachelor of Science (Community Health).

(b) The curriculum of the course has been prepared by National Board of Examinations and vetted by Medical Council of India (MCI).

(c) The Ministry has requested the States to implement the course.

(d) Medical colleges can be set up by a State Government/UT, any University, autonomous body promoted by Central/State Government, a society registered under the Societies Registration Act, public religious or charitable trust and Companies (not for profit) registered under Company Act. There has been consistent increase in the intake capacity of doctors in the country.

A Centrally Sponsored Scheme of establishment of New Medical Colleges by upgrading district/referral hospitals has also been introduced with focus on underserved