WRITTEN	ANSWERS	TO STARF	RED QUES	TIONS

GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA STARRED QUESTION NO.142 TO BE ANSWERED ON THE 15TH MARCH, 2022

MECHANISM TO PREVENT VIOLENCE AGAINST DOCTORS

142 DR. KANIMOZHI NVN SOMU:

Will the Minister of Health and Family Welfare be pleased to state:

- (a) whether Government has the record of the number of instances of attacks on doctors during the last three years, and if so, the details thereof;
- (b) whether Government has put in place any mechanism to prevent violence against doctors, and if so, the details thereof;
- (c) the necessary steps taken by Government to enhance the penalty for violence against doctors; and
- (d) the details of helplines, if any, set up by Government to extend immediate help to the doctors who are harassed by patients and the number of complaints received and action taken thereon so far?

ANSWER THE MINISTER OF HEALTH AND FAMILY WELFARE (DR MANSUKH MANDAVIYA)

(a) to (d) A Statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO RAJYA SABHA STARRED QUESTION NO. 142* FOR 15TH MARCH, 2022

(a) to (d): As per Constitutional provisions, 'Health' and 'Law & Order' are State subjects. State Governments are expected to set up mechanisms to prevent violence against Doctors including imposition of penalties or setting up Helplines to extend immediate help to such Doctors who are victims of violence. Details of number of instances of attacks on doctors are not maintained centrally.

Further, violence against healthcare professionals is a criminal offence and needs to be dealt suitably by the State /UT Governments under provisions in Indian Penal Code (IPC)/ Code of Criminal Procedure(CrPC) so that doctors/clinical establishments discharge their professional pursuit without fear of violence.

In the wake of COVID-19 outbreak, Government of India has notified the Epidemic Diseases (Amendment) Act, 2000 on 28th September 2020. The Amended Act provides that acts of violence against healthcare personnel during any situation akin to current pandemic would be cognizable and non-bailable offences. Commission or abetment of such acts of violence shall be punished with imprisonment for a term of three months to five years, and with fine of Rs.50,000/- to Rs.2,00,000/-. In case of causing grievous hurt, imprisonment shall be for a term of six months to seven years and with fine of Rs.1,00,000/- to Rs.5,00,000/-. In addition, the offender shall also be liable to pay, compensation to the victim and twice the fair market value for damage of property.

The Union Ministry of Health & Family Welfare has, in order to prevent violence against doctors and for inculcating an effective sense of security among the doctors on duty, taken several measures including issuing advisories in this regard to all States/Union Territories (UTs) to consider the following:

- a) Security of sensitive hospitals to be managed by a designated and trained force.
- b) Installation of CCTV cameras and round the clock Quick Reaction Teams with effective communication / security gadgets particularly at Casualty, Emergency and areas having high footfalls,
- c) Well-equipped centralized control room for monitoring and quick response,
- d) Entry restriction for undesirable persons,
- e) Institutional FIR against assaulters,
- f) Display of legislation protecting doctors in every hospital and police station,
- g) Appointment of Nodal Officer to monitor medical negligence,
- h) Expeditious filling up of vacant posts of doctors and para-medical staff in hospitals / Primary Health Centres (PHCs) to avoid excessive burden / pressure on doctors and to maintain global doctor-patient ratio,

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i) Better infrastructural facilities and medical equipment and provision of extra monetary incentive for the doctors and para medical staff serving in hard/remote areas as compared to major and metro cities with better career prospects, etc.

The Ministry of Health & family Welfare has on multiple occasions, through formal communications as well as more recently through video conferences with States and UTs, highlighted the need to ensure safety and security of healthcare workers at their living/working premises.
