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20 Sravana, 1937 (Saka)

PARLIAMENTARY DEBATES
RAJYA SABHA
OFFICIAL REPORT

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[P.T.O.]

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RAJYA SABHA

Tuesday, the 11th August, 2015/20 Shrawana, 1937 (Saka)

*The House met at eleven of the clock,
MR. DEPUTY CHAIRMAN in the Chair.*

RE. ACCIDENT IN DEOGARH, JHARKHAND

श्री नीरज शेखर (उत्तर प्रदेश): सर, देवघर में कल 11 लोगों का ...(व्यवधान)...

श्री संजीव कुमार (झारखंड): सर, मैंने देवघर की घटना पर ज़ीरो ऑवर का नोटिस दिया हुआ है। ...(व्यवधान)...

PAPERS LAID ON THE TABLE

I. Notifications of the Ministry of Corporate Affairs

II. Medium-term Expenditure Framework Statement (2015-2016)

THE MINISTER OF FINANCE; THE MINISTER OF CORPORATE AFFAIRS AND THE MINISTER OF INFORMATION AND BROADCASTING (SHRI ARUN JAITLEY): Sir, I lay on the Table:—

I. (i) A copy each (in English and Hindi) of the following Notifications of the Ministry of Corporate Affairs, under sub-section (4) of Section 469 of the Companies Act, 2013:—

- (1) G.S.R. 438 (E), dated the 30th May, 2015, publishing the Companies (Registration Offices and Fees) Second Amendment Rules, 2015.
- (2) G.S.R. 440 (E), dated the 30th May, 2015, publishing the Companies (Registration of Charges) Amendment Rules, 2015.
- (3) G.S.R. 441 (E), dated the 30th May, 2015, publishing the Companies (Declaration and Payment of Dividend) Second Amendment Rules, 2015.
- (4) G.S.R. 439 (E), dated the 30th May, 2015, publishing the Companies (Share Capital and Debentures) Second Amendment Rules, 2015

[Placed in Library. For (1) to (4) See No. L.T. 3061/16/15]

(ii) A copy each (in English and Hindi) of the following Notifications of the Ministry of Corporate Affairs, under sub-section (4) of Section 462 of the Companies Act, 2013:—

- (1) G.S.R. 463 (E), dated the 5th June, 2015 notifying that certain provisions of the Companies Act, 2013 shall not apply or shall apply with exceptions, modification and adaptations to a Government company as specified in the table thereunder.
- (2) G.S.R. 464 (E), dated the 5th June, 2015 notifying that certain provisions of the Companies Act, 2013, shall not apply or shall apply with exceptions, modification and adaptations to a private company as specified in the table thereunder.
- (3) G.S.R. 465 (E), dated the 5th June, 2015, notifying that certain provisions of the Companies Act, 2013, shall not apply or shall apply with exceptions, modification and adaptations to *Nidhis* as specified in the table thereunder.
- (4) G.S.R. 466 (E), dated the 5th June, 2015, notifying that certain provisions of the Companies Act, 2013, shall not apply or shall apply with exceptions, modification and adaptations to a body to which a license is granted under the provisions of Section 8 of the Act, as specified in the table thereunder.

[Placed in Library. For (1) to (4) See No. L.T. 3062/16/15]

- (iii) A copy (in English and Hindi) of the Ministry of Corporate Affairs Notification No. G.S.R. 333 (E), dated the 29th April, 2015, directing that the provisions of section 458 of the Companies Act, 2013 shall apply to a limited liability partnership from the date of publication of the Notification in the Official Gazette, under sub-section (2) of Section 458 of the Companies Act, 2013.

[Placed in Library. See No. L.T. 3063/16/15]

- (iv) A copy (in English and Hindi) of the Ministry of Corporate Affairs Notification No. G.S.R. 458 (E), dated the 5th June, 2015, publishing the Competition Commission of India (salary, allowances, other terms and conditions of service of the Secretary and officers and other employees of the Commission and the number of such officers and other employees) Amendment Rules, 2015, under sub-section (3) of Section 63 of the Competition Act, 2002.

[Placed in Library. See No. L.T. 2983/16/15]

- II. A copy (in English and Hindi) of the Medium-term Expenditure Framework Statement, for the financial year 2015-16, under sub-section (1) of Section 3 of the Fiscal Responsibility and Budget Management (FRBM) Act, 2003.

[Placed in Library. See No. L.T. 3031/16/15]

Notification of the Ministry of Health and Family Welfare

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): Sir, I lay on the Table, under sub-section (4) of Section 20 of the Dentists Act, 1948, a copy (in English and Hindi) of the Ministry of Health and Family Welfare Notification No. DE-87(1)-2015, dated the May 23-May 29, 2015, (Weekly Gazette), publishing the Revised BDS Course (7th Amendment) Regulations, 2015. [Placed in Library. See No. L.T. 2986/16/15]

Report (2014-15) of ICAR, New Delhi and related papers

कृषि मंत्रालय में राज्य मंत्री (डा. संजीव कुमार बालियान): महोदय, मैं निम्नलिखित पत्रों की एक-एक प्रति (अंग्रेजी तथा हिन्दी) में सभा पटल पर रखता हूँ :—

- (a) Annual Report of the Indian Council of Agricultural Research (ICAR), New Delhi, for the year 2014-15.
- (b) Review by Government on the working of the above Council.
- (c) Statement giving reasons for the delay in laying the papers mentioned at (a) above. [Placed in Library. See No. L.T.3034/16/15]

I. Reports and Accounts (2013-14) of AAI and AIL, New Delhi and related papers

II. MoU between the Government of India and AIL

THE MINISTER OF STATE OF THE MINISTRY OF CULTURE; THE MINISTER OF STATE OF THE MINISTRY OF TOURISM AND THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): Sir, I lay on the Table:—

- I. (i) (1) A copy each (in English and Hindi) of the following papers, under sub-section (4) of Section 28 of the Airports Authority of India Act, 1994:—
 - (a) Nineteenth Annual Report and Accounts of the Airports Authority of India (AAI), New Delhi, for the year 2013-14, together with the Auditor's Report on the Accounts.
 - (b) Statement by Government accepting the above Report.
- (2) Statement (in English and Hindi) giving reasons for the delay in laying the papers mentioned at (1) above. [Placed in Library. See No. L.T. 3024/16/15]
- (ii) (1) A copy each (in English and Hindi) of the following papers, under sub-section (1) (b) of Section 394 of the Companies Act, 2013:—

(a) Annual Report and Accounts of the Air India Limited, New Delhi, and its subsidiary companies for the year 2013-14, together with the Auditor's Report on the Accounts and the comments of the Comptroller and Auditor General of India thereon.

(b) Review by Government on the working of the above Company.

(2) Statement (in English and Hindi) giving reasons for the delay in laying the papers mentioned at (1) above.

[Placed in Library. See No. L.T. 3023/16/15]

II. A copy (in English and Hindi) of the Memorandum of Understanding between the Government of India (Ministry of Civil Aviation) and the Air India Limited (AIL), for the year 2015-16.

[Placed in Library. See No. L.T. 2861/16/15]

MoU between the Government of India and NMDFC

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS AND THE MINISTER OF STATE IN THE MINISTRY OF PARLIAMENTARY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): Sir, I lay on the Table, a copy (in English and Hindi) of the Memorandum of Understanding between the Government of India (Ministry of Minority Affairs) and the National Minorities Development and Finance Corporation (NMDFC), for the year 2015-16.

[Placed in Library. See No. L.T. 2937/16/15]

I. Notifications of the Ministry of Finance

II. Report on voluntary winding up of IIBI, Kolkata and related papers

III. Reports and Accounts (2014-15) of NABARD and EXIM BANK and related papers

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): Sir, I lay on the Table:—

I. (i) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Economic Affairs), under Section 31 of the Securities and Exchange Board of India Act, 1992; sub-section (3) of Section 30 of the Securities Contracts (Regulation) Act, 1956; and Section 27 of the Depositories Act, 1996:—

(1) S.O. 1060 (E), dated the 21st April, 2015, designating 39th Sessions Court, City Civil Court, Greater Mumbai as the Special Court under aforesaid Acts.

- (2) S.O. 1132 (E), dated the 29th April, 2015, designating 5th Special Court, Calcutta as the Special Court under the aforesaid Acts.
[Placed in Library. *For* (1) and (2) *See* No. L.T. 3148/16/15]
- (3) S.O. 1618 (E), dated the 17th June, 2015, designating Court number 22, City Civil Court and Sessions Court, Mumbai, as the designated court for the purposes mentioned in Section 11C of the Securities and Exchange Board of India Act, 1992 and as the Special Court under aforesaid Acts. [Placed in Library. *See* No. L.T. 3147/16/15]
- (4) G.S.R. 1784 (E), dated the 1st July, 2015, designating Principal District and Sessions Court, Chennai as the Special Court under the aforesaid Acts. [Placed in Library. *See* No. L.T. 3148/16/15]
- (ii) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Economic Affairs), under Section 31 of the Securities and Exchange Board of India Act, 1992:-
 - (1) S.O. 678 (E), dated the 5th March, 2015, designating Court number 39, City Civil Court Mumbai, as the designated court for the purposes mentioned in Section 8 of Section 11-C of SEBI Act, 1992. [Placed in Library. *See* No. L.T. 3150/16/15]
 - (2) G.S.R. 430 (E), dated the 28th May, 2015, publishing the Securities and Exchange Board of India (Procedure for Holding Inquiry and imposing penalties by adjudicating officer) Amendment Rules, 2015. [Placed in Library. *See* No. L.T. 3149/16/15]
- (iii) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Economic Affairs), under sub-section (3) of Section 30 of the Securities Contracts (Regulation) Act, 1956:—
 - (1) G.S.R. 611 (E), dated the 22nd August, 2014, publishing the Securities Contracts (Regulation) (Second Amendment) Rules, 2014.
 - (2) G.S.R. 819 (E), dated the 19th November, 2014, publishing the Securities Contracts (Regulation) Third Amendment Rules, 2014.
[Placed in Library. *For* (1) and (2) *See* No. L.T. 3146/16/15]
- (iv) A copy (in English and Hindi) of the Ministry of Finance (Department of Economic Affairs) Notification No. S.O. 2287 (E), dated the 8th September, 2014, appointing the 8th day of September, 2014, as the date on which the provisions of Section 6 to Section 15, Section 25 to Section 32 and Section 41 to Section 47 of the Securities Laws

(Amendment) Act, 2014 shall come into force, framed under Section 1 of the Securities Laws (Amendment) Act, 2014.

[Placed in Library. See No. L.T.3151/16/15]

- (v) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Financial Services), under sub-section (4) of Section 19 of the Banking Companies (Acquisition and Transfer of Undertakings) Act, 1970:—

- (1) S.O. 42 (E), dated the 6th January, 2015, publishing the Nationalised Banks (Management and Miscellaneous Provisions) Amendment Scheme, 2014.
- (2) S.O. 348 (E), dated the 4th February, 2015, publishing the Nationalised Banks (Management and Miscellaneous Provisions) Amendment Scheme, 2015.
- (3) S.O. 1836 (E), dated the 8th July, 2015, publishing the Nationalised Banks (Management and Miscellaneous Provisions) Amendment Scheme, 2015.

[Placed in Library. *For* (1) to (3) *See* No. L.T. 3003/16/15]

- (vi) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Financial Services), under sub-section (4) of Section 19 of the Banking Companies (Acquisition and Transfer of Undertakings) Act, 1980:—

- (1) S.O. 43 (E), dated the 6th January, 2015, publishing the Nationalised Banks (Management and Miscellaneous Provisions) Amendment Scheme, 2014.
- (2) S.O. 349 (E), dated the 4th February, 2015, publishing the Nationalised Banks (Management and Miscellaneous Provisions) Amendment Scheme, 2015.
- (3) S.O. 1837 (E), dated the 8th July, 2015, publishing the Nationalised Banks (Management and Miscellaneous Provisions) Amendment Scheme, 2015.

[Placed in Library. *For* (1) to (3) *See* No. L.T. 3003/16/15]

- (vii) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Financial Services), under Section 27 of the Insurance Regulatory and Development Authority Act, 1999, along with delay statement:—

- (1) G.S.R. 269 (E), dated the 4th April, 2014, publishing the

Insurance Regulatory and Development Authority (Salary and Allowance payable to and other Terms and Conditions of Service of Chairperson and other Members) Amendment Rules, 2014.

- (2) G.S.R. 274 (E), dated the 7th April, 2014, publishing the Insurance Regulatory and Development Authority (Salary and Allowance payable to and other Terms and Conditions of Service of Chairperson and other Members) Amendment Rules, 2014.

[Placed in Library. *For* (1) and (2) *See* No. L.T. 3010/16/15]

- (viii) A copy (in Hindi only) of the Ministry of Finance (Department of Financial Services) Notification No. G.S.R. 580 (E), dated the 24th July, 2015, publishing Corrigendum to Notification No. G.S.R. 274 (E), dated the 7th April, 2014.

[Placed in Library. *See* No. L.T. 3010/16/15]

- (ix) A copy (in English and Hindi) of the Ministry of Finance (Department of Financial Services) Notification No. DGBA/Accts/BA AS No. 18/62-01.022/2015-16, dated the 6th July, 2015, publishing the Reserve Bank of India General (Amendment) Regulations, 2015, under sub-section (4) of Section 58 of the Reserve Bank of India Act, 1934.

[Placed in Library. *See* No. L.T. 3145/16/15]

- (x) A copy (in Hindi only) of the Ministry of Finance (Department of Financial Services) Notification No. DGBA/Accts (BA AS) No. 129/62.01.022/2015-16, dated the 15th July, 2015, publishing Corrigendum to Notification No. S.O. 236, dated the 6th July, 2015.

[Placed in Library. *See* No. L.T. 3145/16/15]

- (xi) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Revenue), under sub-section (7) of Section 9A of the Customs Tariff Act, 1975, along with Explanatory Memoranda:—

- (1) G.S.R. 549 (E), dated the 9th July, 2015, seeking to levy definitive anti-dumping duty on imports of ‘Measuring Tapes’ and their parts and components originating in, or exported from the People’s Republic of China for a further period of five years from the date of publication of this Notification.
- (2) G.S.R. 552 (E), dated the 10th July, 2015, seeking to levy definitive anti-dumping duty on imports of ‘Phenol’ originating in, or exported from South Africa for a further period of five years from the date of publication of this notification.

- (3) G.S.R. 554 (E), dated the 13th July, 2015, amending Notification No. G.S.R. 188 (E), dated the 4th March, 2011, to add certain entries in the original Notification.

[Placed in Library. *For* (1) to (3) *See* No. L.T. 3005/16/15]

- (xii) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Revenue), under sub-section (4) of Section 85 of the Black Money (Undisclosed Foreign Income and Assets) and Imposition of Tax Act, 2015, along with Explanatory Memoranda:—

- (1) S.O. 1790 (E), dated the 1st July, 2015, publishing the Black Money (Undisclosed Foreign Income and Assets) and Imposition of Tax Act (Removal of Difficulties) order, 2015.

[Placed in Library. *See* No. L.T. 3142/16/15]

- (2) S.O. 1791 (E), dated the 1st July, 2015, notifying the date on or before which a person can make a declaration in respect of the undisclosed asset located outside India; and the date on or before which a person can pay the tax and penalty in respect of the undisclosed asset located outside India so declared, under the Black Money (Undisclosed Foreign Income and Assets) and Imposition of Tax Act, 2015.

[Placed in Library. *See* No. L.T. 3143/16/15]

- (3) G.S.R. 529 (E), dated the 2nd July, 2015, publishing the Black Money (Undisclosed Foreign Income and Assets) and Imposition of Tax Rules, 2015. [Placed in Library. *See* No. L.T. 3144/16/15]

- (xiii) A copy each (in English and Hindi) of the following Notifications of the Ministry of Finance (Department of Revenue), under Section 159 of the Customs Act, 1962, along with Explanatory Memoranda:—

- (1) S.O. 756 (E), dated the 13th March, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.

- (2) S.O. 794 (E), dated the 18th March, 2015, amending Notification No. S.O. 566 (E), dated the 5th March, 2015, to substitute certain entries in the original Notification.

- (3) S.O. 802 (E), dated the 19th March, 2015, regarding revision of Exchange Rate for conversion of certain foreign currency into Indian currency or *vice-versa* for imported and export goods.

- (4) S.O. 832 (E), dated the 25th March, 2015, amending Notification No. S.O. 802 (E), dated the 19th March, 2015, to substitute certain entries in the original Notification.
- (5) S.O. 889 (E), dated the 31st March, 2015, amending Notification No. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.
- (6) S.O. 916 (E), dated the 1st April, 2015, regarding revision of Exchange Rate for conversion of certain foreign currency into Indian currency or *vice-versa* for imported and export goods.
- (7) S.O. 1016 (E), dated the 15th April, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.
- (8) S.O. 1028 (E), dated the 16th April, 2015, regarding revision of Exchange Rate for conversion of certain foreign currency into Indian currency or *vice-versa* for imported and export goods.
- (9) S.O. 1144 (E), dated the 30th April, 2015, amending Notification No. S.O. 1028 (E), dated the 16th April, 2015, to substitute certain entries in the original Notification.
- (10) S.O. 1145 (E), dated the 30th April, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.
- (11) S.O. 1182 (E), dated the 5th May, 2015, amending Notification No. S.O. 1028 (E), dated the 16th April, 2015, to substitute certain entries in the original Notification.
- (12) S.O. 1222 (E), dated the 7th May, 2015, regarding revision of Exchange Rate for conversion of certain foreign currency into Indian currency or *vice-versa* for imported and export goods.
- (13) S.O. 1303 (E), dated the 15th May, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.
- (14) S.O. 1366 (E), dated the 21st May, 2015, regarding revision of Exchange Rate for conversion of certain foreign currency into Indian currency or *vice-versa* for imported and export goods.
- (15) S.O. 1437 (E), dated the 29th May, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.

- (16) S.O. 1470 (E), dated the 4th June, 2015, rescinding Notification No. S.O. 1365 (E), dated the 21st May, 2015.
- (17) S.O. 1570 (E), dated the 15th June, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.
- (18) S.O. 1781 (E), dated the 30th June, 2015, amending Notification No. S.O. 748 (E), dated the 3rd August, 2001, to substitute certain entries in the original Notification.

[Placed in Library. *For* (1) to (18) *See* No. L.T. 3006/16/15]

II. A copy each (in English and Hindi) of the following papers, under sub-section (1) (b) of Section 394 of the Companies Act, 2013:—

- (a) Thirty-first Liquidator's Report on the Voluntary Winding Up of the Industrial Investment Bank of India Limited (IIBI), Kolkata, for the period from 1st January, 2015 to 31st March 2015, together with the Auditor's Report on the Accounts and the comments of the Comptroller and Auditor General of India thereon.
- (b) Review by Government of the voluntary winding up process of the above Bank, for the period from 1st January, 2015 to 31st March 2015.

[Placed in Library. *For* (a) and (b) *See* No. L.T. 3140/16/15]

III. (i) A copy each (in English and Hindi) of the following papers, under sub-section (5) of Section 48 of the National Bank for Agriculture and Rural Development (NABARD) Act, 1981:—

- (a) Annual Report and Accounts of the National Bank for Agriculture and Rural Development (NABARD), Mumbai, for the year 2014-15, together with the Auditor's Report on the Accounts.
- (b) Review by Government on the working of the above Bank.

[Placed in Library. *See* No. L.T. 2992/16/15]

(ii) A copy each (in English and Hindi) of the following papers, under sub-section (5) of Section 19 and sub-section (5) of Section 24 of the Export-Import Bank of India Act, 1981:—

- (a) Annual Report and Accounts of the Export-Import Bank of India, Mumbai, for the year 2014-15, together with the Auditor's Report on the Accounts.
- (b) Report on the Performance of the Export-Import Bank of India, for the year 2014-15.

[Placed in Library. *See* No. L.T. 3009/16/15]

Report of CAG for the year ended March 2015

SHRI JAYANT SINHA: Sir, I lay on the Table, under clause (1) of article 151 of the Constitution, a copy (in English and Hindi) of the Report of the Comptroller and Auditor General of India for the year ended March 2015-Performance Audit on Functioning of Internal Audit in Income Tax Department-Union Government-Department of Revenue-Direct Taxes-(Report No. 25 of 2015).

[Placed in Library. See No. L.T. 3057/16/15]

REPORT OF THE DEPARTMENT-RELATED PARLIAMENTARY STANDING COMMITTEE ON HEALTH AND FAMILY WELFARE

SHRI SATISH CHANDRA MISRA (Uttar Pradesh): Sir, I present the Eighty Seventh Report (in English and Hindi) of the Department-related Parliamentary Standing Committee on Health and Family Welfare on the Functioning of All India Institute of Medical Sciences (AIIMS).

REPORTS OF THE DEPARTMENT-RELATED PARLIAMENTARY STANDING COMMITTEE ON AGRICULTURE

SHRI MOHD. ALI KHAN (Andhra Pradesh): Sir, I lay on the Table, a copy each (in English and Hindi) of the following Reports of the Department-related Parliamentary Standing Committee on Agriculture (2014-15):—

- (i) Thirteenth Report on action taken by the Government on the recommendations contained in the Third Report of the Committee on 'Demands for Grants (2014-15)' of the Ministry of Agriculture (Department of Agriculture and Cooperation);
- (ii) Fourteenth Report on action taken by the Government on the recommendations contained in the Fifth Report of the Committee on 'Demands for Grants (2014-15)' of the Ministry of Agriculture (Department of Animal Husbandry, Dairying and Fisheries);
- (iii) Fifteenth Report on action taken by the Government on the recommendations contained in the Second Report of the Committee on 'Demands for Grants (2014-15)' of the Ministry of Agriculture (Department of Agricultural Research and Education); and
- (iv) Sixteenth Report on the subject 'Mega Food Parks' pertaining to the Ministry of Food Processing Industries.

**REPORT OF THE DEPARTMENT-RELATED PARLIAMENTARY STANDING
COMMITTEE ON ENERGY**

SHRI PYARIMOHAN MOHAPATRA (Odisha): Sir, I lay on the Table, a copy (in English and Hindi) of the Seventh Report of the Department-related Parliamentary Standing Committee on Energy (2014-15) on the subject 'Energy Conservation' pertaining to the Ministry of Power.

**REPORT OF THE DEPARTMENT-RELATED PARLIAMENTARY STANDING
COMMITTEE ON PETROLEUM AND NATURAL GAS**

SHRIMATI GUNDU SUDHARANI (Telangana): Sir, I lay on the Table, a copy (in English and Hindi) of the Sixth Report of the Department-related Parliamentary Standing Committee on Petroleum and Natural Gas (2014-15) on Action Taken by the Government on the recommendations contained in their First Report (Sixteenth Lok Sabha) on 'Demands for Grants (2014-15)' of the Ministry of Petroleum and Natural Gas.

**STATEMENTS OF THE DEPARTMENT-RELATED PARLIAMENTARY
STANDING COMMITTEE ON PETROLEUM AND NATURAL GAS**

SHRIMATI GUNDU SUDHARANI (Telangana): Sir, I lay on the Table, a copy each (in English and Hindi) of the following Statements of the Department-related Parliamentary Standing Committee on Petroleum and Natural Gas (2014-15):—

- (i) Statement showing further action taken by the Government on the recommendations/observations contained in Chapter-I & V of the Fifteenth Report of the Committee (Fifteenth Lok Sabha) on action taken by the Government on the recommendations/observations contained in the Eleventh Report of the Committee (Fifteenth Lok Sabha) on 'Demands for Grants (2012-13)' of the Ministry of Petroleum and Natural Gas;
- (ii) Statement showing further action taken by the Government on the recommendations/observations contained in Chapter-I & V of the Seventeenth Report of the Committee (Fifteenth Lok Sabha) on action taken by the Government on the recommendations/observations contained in the Twelfth Report of the Committee (Fifteenth Lok Sabha) on 'Safety of Oil Installations';
- (iii) Statement showing further action taken by the Government on the recommendations/observations contained in Chapter-I & V of the Twenty-first Report of the Committee (Fifteenth Lok Sabha) on action taken by the

Government on the recommendations/observations contained in the Sixteenth Report of the Committee (Fifteenth Lok Sabha) on 'Demands for Grants (2013-14)' of the Ministry of Petroleum and Natural Gas;

- (iv) Statement showing further action taken by the Government on the recommendations/observations contained in Chapter-I & V of the Twenty-second Report of the Committee (Fifteenth Lok Sabha) on action taken by the Government on the recommendations/observations contained in the Eighteenth Report of the Committee (Fifteenth Lok Sabha) on 'Long Term Purchase Policy and Strategic Storage of Crude Oil'; and
- (v) Statement showing further action taken by the Government on the recommendations/observations contained in Chapter-I & V of the Second Report of the Committee (Sixteenth Lok Sabha) on action taken by the Government on the recommendations/observations contained in the Twenty-third Report of the Committee (Fifteenth Lok Sabha) on 'Functioning of Oil Industry Development Board'.

REPORT OF THE DEPARTMENT-RELATED PARLIAMENTARY STANDING COMMITTEE ON RAILWAYS

SHRI MOTILAL VORA (Chhattisgarh): Sir, I lay on the Table, a copy (in English and Hindi) of the Seventh Report of the Department-related Parliamentary Standing Committee on Railways (2014-15) on Action Taken by Government on the recommendations of the Committee (Sixteenth Lok Sabha) contained in their Third Report on 'Demands for Grants (2014-15)' of the Ministry of Railways.

...(Interruptions)...

MR. DEPUTY CHAIRMAN: Now, statement by Ministers. Dr. Najma Heptulla.
...(Interruptions)...

RE. ACCIDENT IN DEOGARH, JHARKHAND — Contd.

श्री संजीव कुमार : सर, मैंने जीरो ऑवर का नोटिस दिया है। ...(व्यवधान)...

श्री नीरज शेखर : सर, उसमें बलिया के तीन लोग मारे गए हैं। ...(व्यवधान)...

श्री संजीव कुमार : सर, देवघर में बहुत बड़ी घटना हुई है। ...(व्यवधान)...

STATEMENTS BY MINISTERS**Status of implementation of recommendations contained in the Forty-sixth Report of the Department-related Parliamentary Standing Committee on Social Justice and Empowerment**

THE MINISTER OF MINORITY AFFAIRS (DR. NAJMA A. HEPTULLA): Sir, I make a statement regarding Status of implementation of recommendations contained in the Forty-sixth Report of the Department-related Parliamentary Standing Committee on Social Justice and Empowerment on the subject "Implementation of Prime Minister's New 15-Point Programme" pertaining to the Ministry of Minority Affairs.

...(Interruptions)...

RE. ACCIDENT IN DEOGARH, JHARKHAND — Contd.

श्री संजीव कुमार : सर, देवघर की घटना के संबंध में मुझे बोलने का मौका दिया जाए।
...(व्यवधान)...

श्री के.सी. त्यागी (बिहार): सर, देवघर की घटना बहुत गंभीर है। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: I will allow you. ...(Interruptions)... I will allow you. ...(Interruptions)...

श्री संजीव कुमार: सर, मैंने जीरो ऑवर का नोटिस दे रखा है। ...(व्यवधान)...

श्री नीरज शेखर: उपसभापति जी ...(व्यवधान)... यह बहुत गंभीर घटना है। ...(व्यवधान)...

श्री राम नाथ ठाकुर (बिहार): सर, देवघर की घटना में 11 लोग मारे गए हैं। ...(व्यवधान)...

श्री संजीव कुमार: सर, मैंने जीरो ऑवर का नोटिस दे रखा है। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: I will allow you, Mr. Sanjiv Kumar. ...(Interruptions)... Mr. Sanjiv Kumar, I will allow you. You sit down. ...(Interruptions)... I will allow you. ...(Interruptions)... Mr. Ragesh, what is it that you are doing? ...(Interruptions)...

SHRI K. K. RAGESH (Kerala): Sir, you had permitted me to make my Zero Hour submission. But I did not get any opportunity, Sir. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Is it my fault? Why are you blaming me? ... (Interruptions)... No, no. You go back to your seat. ... (Interruptions)... Yes, yes. ... (Interruptions)... Not only you, but many other Members have given notice for Zero Hour; and you know what is happening. Go back to your seat. ... (Interruptions)... No, no; please. ... (Interruptions)... Please go back to your seat. ... (Interruptions)... Gen. (Retd.) V. K. Singh. ... (Interruptions)...

STATEMENTS BY MINISTERS — Contd.**Status of implementation of recommendations contained in the
Sixth Report of the Department-related Parliamentary
Standing Committee on Finance**

THE MINISTER OF STATE OF THE MINISTRY OF STATISTICS AND PROGRAMME IMPLEMENTATION; THE MINISTER OF STATE IN THE MINISTRY OF EXTERNAL AFFAIRS; AND THE MINISTER OF STATE IN THE MINISTRY OF OVERSEAS INDIAN AFFAIRS [GENERAL (RETD.) V.K. SINGH]: Sir, I make a statement regarding Status of implementation of recommendations contained in the Sixth Report of the Department-related Parliamentary Standing Committee on Finance on Demands for Grants (2014-15), pertaining to the Ministry of Statistics and Programme Implementation ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Don't display placards. ...(Interruptions)... Mr. Ragesh, go back to your seat. Don't display it. ...(Interruptions)... Go back to your seat. ...(Interruptions)... Please go back to your seat. ...(Interruptions)... You are not the only Member. So many other Members have complained. ...(Interruptions)... I know it is an important issue. There are other important issues also. ...(Interruptions)... They are not being taken up. What are you doing for that? ...(Interruptions)... No, no; please. ...(Interruptions)... Col. Rajyavardhan Singh Rathore. ...(Interruptions)...

**Status of implementation of recommendations contained in the
Forty-seventh Report of the Department-related
Parliamentary Standing Committee
on Information Technology**

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): Sir, I make a statement regarding Status of implementation of recommendations contained in the Forty-seventh Report of the Department-related Parliamentary Standing Committee on Information Technology (2012-13) on 'Issues related to Paid News', pertaining to the Ministry of Information and Broadcasting.

**Status of implementation of recommendations contained in the Two Hundred
and Fifteenth Report of the Department-related Parliamentary Standing
Committee on Transport, Tourism and Culture**

THE MINISTER OF STATE OF THE MINISTRY OF CULTURE; THE MINISTER OF STATE OF THE MINISTRY OF TOURISM; AND THE MINISTER OF STATE

IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): Sir, I make a statement regarding Status of implementation of recommendations contained in the Two Hundred and Fifteenth Report of the Department-related Parliamentary Standing Committee on Transport, Tourism and Culture on the action taken by the Government on the recommendations/observations contained in the Two Hundred and Third Report of the Committee on "Privatization of Services at Airports". ...(*Interruptions*)...

RE. ACCIDENT IN DEOGARH, JHARKHAND — *Contd.*

SHRI ANUBHAV MOHANTY (Odisha): Sir, I have a point of order. ...(*Interruptions*)...

श्री नरेश अग्रवाल (उत्तर प्रदेश): सर, एक प्वाइंट ऑफ आर्डर हमारा भी है। ...(*व्यवधान*)...

MR. DEPUTY CHAIRMAN: He said first. ...(*Interruptions*)... What is your point of order? ...(*Interruptions*)...

श्री संजीव कुमार: सर, मैंने जीरो ऑवर का नोटिस दे रखा है। ...(*व्यवधान*)... देवघर की घटना के संबंध में मुझे बोलने दिया जाए। ...(*व्यवधान*)... सर, मैंने जीरो ऑवर का नोटिस दे रखा है। ...(*व्यवधान*)...

SHRI ANUBHAV MOHANTY: Sir, my rights as a parliamentarian are being denied to me. I want to speak on that. ...(*Interruptions*)...

MR. DEPUTY CHAIRMAN: Who is ignoring? Am I ignoring? What are you saying? ...(*Interruptions*)...

SHRI ANUBHAV MOHANTY: Sir, you allow me to speak and I would explain. ...(*Interruptions*)...

MR. DEPUTY CHAIRMAN: Yes, yes. Tell me what your point of order is. You are a nice Member; I don't want to deny you.

SHRI ANUBHAV MOHANTY: Sir, before saying anything, with full respect to each and every hon. Member here in this House, I want to say that अगर गलती से मुझसे कुछ गलत कहा जाए, तो मुझे माफ कर दीजिएगा। ...(*व्यवधान*)...

MR. DEPUTY CHAIRMAN: What is your point of order?

SHRI ANUBHAV MOHANTY: I am just one year old in the Parliament, Sir. I come in every Session with a lot of preparations on how and what I should speak in the House. ...(*Interruptions*)... Please. Let me speak. ...(*Interruptions*)... प्लीज, मुझे बोलने दीजिए। I am not supporting this side and I am not supporting that side also. Please. Let me speak. ...(*Interruptions*)... Let me speak. Please. ...(*Interruptions*)...

MR. DEPUTY CHAIRMAN: Let me listen to him. *...(Interruptions)...* Let me listen to him. *...(Interruptions)...* Let me listen to his point of order. *...(Interruptions)...* I will call you. Sit down. *...(Interruptions)...* I will call you. *...(Interruptions)...* I will call you. Shri Sanjiv Kumar, I will call you. *...(Interruptions)...*

श्री अनुभव मोहंती : मुझे इस हाउस में आए हुए एक साल हुआ है। लेकिन मुझे पार्लियामेंट को देखते हुए बहुत साल हो गए हैं। I have been watching Parliament on TV since many years...*...(Interruptions)...* ...*...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: I request the hon. Members *...(Interruptions)...* Mr. Mohanty is a new Member. Let him have his say. *...(Interruptions)...*

SHRI ANUBHAV MOHANTY: Sir, I have a right to speak. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Let him have his say. *...(Interruptions)...*

SHRI ANUBHAV MOHANTY: Sir, I have a right to speak. *...(Interruptions)...* मुझे बोलने दीजिए। *...(व्यवधान)...* I have a right to speak. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Mr. Seelam, stop this unruly behaviour. *...(Interruptions)...* He has a right to speak. Please sit down. *...(Interruptions)...* I have allowed him. *...(Interruptions)...*

श्री अनुभव मोहंती : कुछ साल पहले जब यह पार्टी उधर थी *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: Hon. Members *...(Interruptions)...* Mr. Seelam, it is unruly behaviour. Please sit down. *...(Interruptions)...* Don't show it. Sit down. *...(Interruptions)...* I will have to name you. *...(Interruptions)...* Please sit down. I will have to name you. *...(Interruptions)...* Please sit down. Don't do this. *...(Interruptions)...* I have allowed the hon. Member to speak. He has a right to speak. Why do you object? *...(Interruptions)...* I can't allow this. *...(Interruptions)...*

श्री अनुभव मोहंती : कुछ साल पहले जब यह पार्टी उधर थी और उस पार्टी की सरकार इधर थी *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: Mr. Mohanty is speaking with my permission. *...(Interruptions)...* Please sit down. *...(Interruptions)...*

श्री अनुभव मोहंती : जिस तरीके से हो रहा है *...(व्यवधान)...* वह रास्ता सरासर गलत है।

We have so many issues. We have so many issues to be debated; we have so many issues to be discussed. I am from the State of Odisha. मेरे राज्य में बहुत कुछ ऐसा हो रहा है *...(व्यवधान)...* जिसके बारे में मैं यहां पर बोलना चाहता हूं *...(व्यवधान)...* और सारी दुनिया को सुनाना चाहता हूं। *...(व्यवधान)...* पर वो हो नहीं रहा। Sir, I am not against anyone in this House. I strongly feel that corruption must be addressed at any cost. *...(Interruptions)...* But the business of the House must go on.

MR. DEPUTY CHAIRMAN: Shri Sanjiv Kumar. ...(Interruptions)... Mr. Mohanty, take your seat. ...(Interruptions)... Please take your seat. You have made your point. ...(Interruptions)... Mr. Mohanty, you have made your point. Please take your seat. ...(Interruptions)...

श्री अनुभव मोहंती : जब आप यह देखने आते हैं ...(व्यवधान)... देश की उन्नति के लिए चिंता करते हैं ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Mr. Mohanty, you have made your point. ...(Interruptions)... Shri Sanjiv Kumar. ...(Interruptions)... Hon. Members, I am allowing Shri Sanjiv Kumar. ...(Interruptions)...

MATTERS RAISED WITH PERMISSION

Enhancement of compensation to victims of stampede in Deogarh, Jharkhand

श्री संजीव कुमार (झारखंड) : सर, कल झारखंड के देवघर में एक बहुत दुखद दुर्घटना घटी और उसमें 11 लोग मर गए । ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Mr. Mohanty, sit down. I am allowing Shri Sanjiv Kumar because in a stampede in Jharkhand nearly a dozen people have died. He want to make a mention about that. That is a matter which concerns all of us. We are all sorry for that. Please allow him to speak. Shri Sanjiv Kumar, you say what you have to say.

श्री संजीव कुमार : 50 से ज्यादा लोग घायल हैं। कुछ की स्थिति बहुत खराब है। कुछ लोग उत्तर प्रदेश से हैं, कुछ लोग बिहार से हैं और कुछ लोग नेपाल से हैं। सर, मैंने कल चेयरमैन साहब से रिक्वेस्ट की थी। ...(व्यवधान)...

श्री उपसभापति : इसीलिए मैंने आपको allow कर दिया है।

श्री संजीव कुमार : सर, मैं सदन के संज्ञान में यह लाना चाहता हूं कि जो लोग मरे हैं, उनके लिए झारखंड गवर्नमेंट ने दो लाख रुपए के compensation की घोषणा की है। यह राशि बहुत कम है। जिन लोगों का देहांत हुआ है, वे सभी यंग लोग हैं इसलिए मैं आपके माध्यम से पूरे सदन से यह रिक्वेस्ट करता हूं कि दो लाख रुपए बहुत कम हैं। मरने वालों के परिवारों को कम से कम दस लाख रुपए का मुआवजा मिलना चाहिए। ...(व्यवधान)... सर, बार-बार वहां पर इस तरह की घटना घटती है। ...(व्यवधान)... सर, ये लोग दूर-दूर से देवघर गए थे। कुछ लोग उत्तर प्रदेश के गाजीपुर से गए थे, कुछ लोग बलिया से गए थे और कुछ लोग बिहार से गए थे। जितने लोग उस घटना में मरे हैं, वे सभी यंग लोग थे। ...(व्यवधान)... सर, मैं पूरे सदन का ध्यान इस ओर आकर्षित करना चाहता हूं कि सावन के महीने में वहां पर लाखों लोग आते हैं और प्रत्येक साल कोई न कोई घटना घटती है। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Okay, you have made your point.

श्री संजीव कुमार : सर, मैं आपके माध्यम से सभी सांसदों का ध्यान ...(व्यवधान)... इस ओर आकर्षित करना चाहता हूँ। ...(व्यवधान)... इसमें दोषियों को बड़ी से बड़ी सज़ा होनी चाहिए।

MR. DEPUTY CHAIRMAN: Please allow the Minister to react. ...(Interruptions)... Please allow the Minister to react. ...(Interruptions)...

संचार और सूचना प्रौद्योगिकी मंत्री (श्री रवि शंकर प्रसाद) : यह जो देवघर में घटना घटी है, यह बहुत दुर्भाग्यपूर्ण है। जो लोग इस दुर्घटना में मरे हैं, हमारी सभी लोगों के प्रति संवेदना है। सरकार की ओर से कोशिश हुई थी और सरकार अब उसकी जांच भी कर रही है। होम सेक्रेटरी की अध्यक्षता में एक कमेटी बन गई है। माननीय गृह मंत्री जी ने केंद्रीय गृह सचिव को निर्देश भी दिया है कि अगर वहां कुछ बलों की आवश्यकता है, maintenance के लिए, तो उस पर विचार करना चाहिए। ...(व्यवधान)... जहां तक आपने बात कही थी कि मुआवजे के अमाउंट को बढ़ाया जाए, उन्होंने यह बात कही है, हम इसके बारे में झारखंड की सरकार का ध्यान आकर्षित करेंगे, लेकिन संवेदना में हम सभी लोग साथ-साथ हैं। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: No, please. ...(Interruptions)...

श्री नरेश अग्रवाल (उत्तर प्रदेश) : सर, उत्तर प्रदेश के जो लोग मरे हैं, उनके बारे में उत्तर प्रदेश की सरकार ने 2-2 लाख रुपए के मुआवजे की घोषणा की है। झारखंड सरकार को अलग से मुआवजा देना चाहिए। अगर यह केंद्र सरकार खुद दे दे, तो क्या दिक्कत है? ...(व्यवधान)... यह कहां लिखा हुआ है कि केंद्र सरकार मुआवजा नहीं दे सकती? ...(व्यवधान)... आपने यह बताया कि हम वहां की सरकार से कह देंगे। आप खड़े हो कर कह दीजिए कि हम भी विचार कर लेंगे। ...(व्यवधान)... इस पर केंद्र सरकार विचार कर ले। ...(व्यवधान)... इसमें क्या दिक्कत है? ...(व्यवधान)... उत्तर प्रदेश के जो लोग वहां मरे हैं, उनके लिए उत्तर प्रदेश की सरकार ने मुआवजा दिया है। ऐसे सात लोग हैं, उनके लिए उत्तर प्रदेश गवर्नमेंट ने 2-2 लाख रुपए देने की एनाउंसमेंट की है। अभी झारखंड सरकार ने उत्तर प्रदेश वालों को मुआवजा नहीं दिया है, तो कम-से-कम दिल्ली वाले दे दें। भारत सरकार को कौन सा कोष की कमी है? ...(व्यवधान)... आप 200 करोड़ रुपए एडवर्टाइजमेंट पर खर्च कर सकते हैं, तो क्या जो लोग मर गए हैं, उनके लिए खर्च नहीं कर सकते? ...(व्यवधान)... भारत सरकार ने 200-200, 250-250 करोड़ रुपए सिर्फ एडवर्टाइजमेंट पर खर्च कर दिए ...(व्यवधान)... और जो लोग मरे हैं, उनके लिए वह खर्च नहीं कर सकती? ...(व्यवधान)... अगर इतनी संवेदनशीलता नहीं है, तो ...(व्यवधान)... यह बहुत गम्भीर बात है। ...(व्यवधान)... इस पर सारा सदन एक साथ है और उसके बाद भी सरकार ऐसा नहीं कर सकती, तो सरकार यह उम्मीद करे कि ...(व्यवधान)... यह कैसे सम्भव है? ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: The Minister is reacting. The Government is examining it. That has already been said. ...(Interruptions)... What the Government has to say, they have already said. ...(Interruptions)... Tyagiji, I will allow you. ...(Interruptions)...

श्री नरेश अग्रवाल : सर, मेरा एक प्वाइंट ऑफ ऑर्डर है। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Under what rule?

श्री नरेश अग्रवाल : यह माननीय सदस्यों से जुड़ा हुआ है। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: You don't try to monopolise the House.

श्री नरेश अग्रवाल : यह माननीय सदस्यों से ...**(व्यवधान)**... यह सदन से जुड़ा हुआ है। ...**(व्यवधान)**... यह माननीय सदस्यों से जुड़ा हुआ है और इस सदन से जुड़ा हुआ है। ...**(व्यवधान)**... श्रीमन्, इधर हम लोग निरंतर देख रहे हैं ...**(व्यवधान)**... एक मिनट ...**(व्यवधान)**... श्रीमन्, इधर हम लोग निरंतर देख रहे हैं ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: What is the rule?

श्री नरेश अग्रवाल : यह सवाल माननीय सदस्यों से सीधे रूप से जुड़ा हुआ है, माननीय सदन से जुड़ा हुआ है, इसलिए मैंने इसे प्वाइंट ऑफ ऑर्डर के रूप में उठाया है। श्रीमन्, इधर मैं निरंतर देख रहा हूँ कि इस सदन पर और सदन के सदस्यों पर निरंतर ऐसे आरोप लगाए जा रहे हैं, जिनसे जनता में हम लोगों की छवि खराब हो रही है। एक साध्वी ने एक बयान दे दिया कि सदन में आतंकवादी बैठे हुए हैं। श्रीमन्, कभी सदन के लिए कुछ कह दिया जाता है ...**(व्यवधान)**... अभी दिल्ली हाई कोर्ट ने एक आदेश कर दिया कि जिस एमपी, एमएलए पर बकाया है ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: You give notice for this. ...**(Interruptions)**...

श्री नरेश अग्रवाल : सर, एक तरीके से जनता के बीच हमारी छवि खराब हो रही है। मीडिया ने कह दिया कि हम सब्सिडी का खाना खा रहे हैं। जनता के बीच एक इमेज गई, जैसे हम ही सब्सिडी का खाना खा रहे हैं। मीडिया वाले भी यहां खाना खाते हैं, इसमें सभी हैं। हाई कोर्ट ने एक आदेश कर दिया कि तीन महीने का जिस एमपी के ऊपर बकाया हो...

MR. DEPUTY CHAIRMAN: Nareshji, without notice, you cannot discuss it. ...**(Interruptions)**... You give notice if you want. ...**(Interruptions)**...

श्री नरेश अग्रवाल : उनके घर का कनेक्शन काट दिया जाए। केवल एमपीज़ का कनेक्शन क्यों काटा जाए? क्यों नहीं अधिकारियों का, मीडिया का और जो सब लोग जुड़े हुए हैं, उनका भी काटा जाए?

MR. DEPUTY CHAIRMAN: Okay, Nareshji. ...**(Interruptions)**...

श्री नरेश अग्रवाल : इसके पहले हो गया कि नेताओं पर जो मुकदमे कायम हों, उनको स्पेशल कोर्ट सुनेगा। आतंकवादियों के मुकदमे क्यों नहीं सुनेंगे? केवल नेताओं के क्यों सुनेंगे? श्रीमन्, सुनियोजित तरीके से एक प्रचार किया जा रहा है, जान-बूझ कर हम लोगों की छवि खराब की जा रही है। जनता के बीच एक इमेज जा रही है जैसे सारे अपराधी इन सदनों में बैठे हैं, इस देश के चुने हुए प्रतिनिधि इस देश की प्रतिष्ठा को डाउन कर रहे हैं। यह बड़ी गम्भीर चीज है ...**(व्यवधान)**... इसलिए मैंने इसे उठाया है। ...**(व्यवधान)**... इस पर चर्चा होनी चाहिए। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: Okay, that is all. ...(Interruptions)... Tyagiji, I will allow you. Before that, ...(Interruptions)...

श्री नरेश अग्रवाल : अगर ऐसा होता रहा, तो सदन की गरिमा घटेगी ...(व्यवधान)... और यह ठीक नहीं होगा। ...(व्यवधान)...

श्री उपसभापति : नरेश जी, आप बैठिए। ...(व्यवधान)... नरेश जी, आप बैठिए। ...(व्यवधान)... नरेश जी, अभी आप बैठिए। ...(व्यवधान)...

श्री नरेश अग्रवाल : मैं इसलिए इसे उठा रहा हूँ। ...(व्यवधान)... हम सदस्यों का भी अधिकार है कुछ कहने का! ...(व्यवधान)...

श्री उपसभापति : ठीक है, सुन लिया। ...(व्यवधान)... आप बैठिए। ...(व्यवधान)... Tyagiji, I will call you. ...(Interruptions)... त्यागी जी, आप जरा बैठिए। I will call you. ...(Interruptions)... I want to say something. ...(Interruptions)...

श्री के.सी. त्यागी (बिहार) : सर, हमने साध्वी प्राची के खिलाफ नोटिस दिया है। उस पर आपकी क्या व्यवस्था है? ...(व्यवधान)... हम आपसे व्यवस्था चाहते हैं कि क्या हम * हैं?

श्री उपसभापति : के.सी. त्यागी जी, आप बैठिए। ...(व्यवधान)... आप बैठिए। Please, Tyagiji, I will allow you. ...(Interruptions)... Now you sit down. I will call you. ...(Interruptions)... I will allow you; त्यागी जी, आप कृपया बैठिए। ...(व्यवधान)... Please sit down. I want to say something. ...(Interruptions)...

श्री नरेश अग्रवाल : सर, यह ऐसा मामला है, जो हम लोगों से जुड़ा हुआ है। ...(व्यवधान)...

श्री उपसभापति : नरेश अग्रवाल जी, आप नोटिस दीजिए। ...(व्यवधान)...

श्री नरेश अग्रवाल : सर, आप हम लोगों को ऐसे ही बैठा देंगे, तो क्या यह ऐसे ही चलता रहेगा? ...(व्यवधान)...

श्री उपसभापति : नरेश अग्रवाल जी, आपका नोटिस नहीं है। ...(व्यवधान)... Nareshji, let me clarify it. Please allow me to clarify something. ...(Interruptions)...

SHRI TAPAN KUMAR SEN (West Bengal): Sir, we had moved a privilege motion. We requested for time in writing. ...(Interruptions)... Last week, we had given it, and it is on record.

MR. DEPUTY CHAIRMAN: Let me go through the notices. The notices are with me. ...(Interruptions)... Please sit down.

विपक्ष के नेता (श्री गुलाम नबी आज़ाद) : सर, मेरा एक निवेदन है। ...(व्यवधान)...

---(مداخلت)--- میرا ایک نویدن ہے : سر، جناب غلام نبی آزاد)†

* Expunged as ordered by the Chair.

† Transliteration in Urdu Script.

MR. DEPUTY CHAIRMAN: I have to say something and then I will call you.
..(Interruptions).. If there is order in the House, I can call everybody. Please listen.

श्री नरेश अग्रवाल: सर, मेरा प्वाइंट ऑफ ऑर्डर है। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: I have to say something. As Nareshji has already said, some hon. Members have an apprehension or doubt on how the Chair is conducting the business, that the Chair is calling some Members and not calling some others. They have approached me and said, “You have not called us; you call ‘X’, you call ‘Y’ and ‘Z’.” I would like to make it clear that the Chair goes by a procedure. When I come here, I have notices in my hand. ...(Interruptions)... It is my duty to dispose of the notices. The first notice that is taken up is under Rule 267 for suspension of the Business. In that regard, to see whether to allow a motion to be moved or not, the Chair has to take a decision. For taking a decision, the Chair has to listen to the Member who has given the notice. So, it is my duty to call those Members. But, before I do that, I dispose of all the formal business in spite of din and pandemonium. Some Ministers too have a doubt whether they would be allowed or not. ...(Interruptions)... No; if a Minister has given a notice, I will certainly consider it and that Minister will be allowed to make his statement. We have precedents on that. When the notice is given in advance, that will be included in the List of Business. Therefore, the Chair is trying its best to be impartial and the Chair is not at all partisan. Please understand the procedure. Today, my problem is, I have got two notices under Rule 267 from Shri K.C. Tyagi and Shri Rangarajan. But, before taking up Shri K.C. Tyagi’s notice, I would like to say that his first notice was regarding the appointment of Governor of Bihar which he raised yesterday. I disposed it of yesterday. So, you can’t raise that. Your second notice is on alleged statement given by the VHP leader Sadhvi Prachi regarding ‘terrorists in Parliament’. You have already given a privilege notice on that. That privilege notice is under consideration of the hon. Chairman. So, you can’t raise that also. ...(Interruptions)... Shri K.C. Tyagi, please listen to me. If I am not rational, you can question me and I will have no problem. You have already given a privilege notice and that is under consideration of the Chairman. Therefore, you can’t raise that issue in any other form. So, you are not permitted.

The next notice to be taken up is of Shri T.K. Rangarajan. He is not here. It is again the same issue which has been discussed here, on which I allowed the Members to move a motion and the Members did not move the motion. So, taking up that also is out of question. So, I am disposing of all these three motions. I am not allowing.

श्री नरेश अग्रवाल: सर, मेरा प्वाइंट ऑफ ऑर्डर है।

MR. DEPUTY CHAIRMAN: On point of order, whenever a Member is raising it, it is the duty of the Chair to listen to it and find out if there is any point in that point of order. Unfortunately, many a time ...*(Interruptions)*... Now, let me complete. ...*(Interruptions)*... I will allow you. Unfortunately, many a time, I find that Members raise point of order which has no point at all. What do I do? That is the point. But what is your point of order? ...*(Interruptions)*...

Some Media Reports bringing down image of Members of Parliament

श्री नरेश अग्रवाल (उत्तर प्रदेश) : सर, मैं चेयर पर कभी प्रश्न चिन्ह नहीं उठाना चाहता, लेकिन अगर चेयर यह कहेगी तो प्रश्न चिन्ह उठाने के लिए मजबूर होना पड़ेगा। मेरा प्वाइंट ऑफ ऑर्डर सदस्यों से जुड़ा हुआ है। मैंने यह कहा था कि लगातार इस देश में एक सुनियोजित तरीके से इस पार्लियामेंट पर अटैक हो रहा है और पार्लियामेंट के मेंबर्स पर अटैक हो रहा है, उनकी प्रतिष्ठा पर अटैक हो रहा है। यह एक तरीके से नहीं है, यह एक बार का सवाल नहीं है। चलिए, साध्वी प्राची वाला आपने कह दिया कि रूल 187 के अंतर्गत प्रिविलेज में चला गया। आज सुप्रीम कोर्ट के एक रिटायर्ड जज ने ..*(व्यवधान)*... मैं नाम नहीं लेना चाहता हूँ, जिस तरह से एमपीज़ को * लिखा है, क्या यह बहुत अच्छी चीज़ है? हाई कोर्ट का एक जजमेंट आया है, जिस तरीके से सिर्फ एमपीज़ और एमएलएज़ के लिए आया है, क्या यह बहुत अच्छा है? क्या यह कह दिया जाए कि न्यायालय स्पेशली इसीलिए बनेंगे और सिर्फ नेताओं के केस सुनेंगे? देश के आतंकवादियों के लिए अलग से कोई अदालतें नहीं बनायी जाएंगी? 22 साल आतंकवादी का मुकदमा चलेगा और नेता का मुकदमा एक साल में खत्म हो जाएगा। यह सब क्या है? यह सब पब्लिक में क्या इमेज दे रहा है? ऐसा लग रहा है कि जैसे हम सब्सिडी का पैसा खा रहे हैं, देश का, सब्सिडी का, हज़ारों-करोड़ रुपया एमपीज़ खा रहे हैं। कितने दिन हाउस चलता है? कितना परसेंट एमपीज़ खा रहे हैं? ...*(व्यवधान)*... जो कैटीन है, अगर इस कैटीन का खाना खा लें तो आधे बीमार पड़ जाएंगे। मैं स्पीकर पर प्रश्न नहीं उठाता हूँ लेकिन जिन स्पीकर ने निर्णय लिया, क्या बहुत अच्छा निर्णय लिया? सुबह चार बजे का बना हुआ खाना हम लोगों को दिन भर खिलाया जाए, हम बीमार हों और यह कह दिया जाए कि हम लोग सब्सिडी का खाना खा रहे हैं! क्या यह बहुत अच्छी चीज़ है? अगर ये सब चीज़ें हम लोगों के ऊपर उठ रही हैं तो हमारा अधिकार है, इसको उठाना और इस चेयर का अधिकार है, इस सदन की गरिमा को बचाना और हम लोगों की गरिमा को बचाना। यह चेयर का अधिकार है और उसका कर्तव्य भी है। मैं चाहूंगा कि नेता सदन और नेता प्रतिपक्ष भी इस पर कुछ बोलें, अपने विचार रखें। यह केवल मेरा प्रश्न नहीं है। मेरे ऊपर आज तक एक मुकदमा भी नहीं है। यह सवाल सभी लोगों का है, दोनों सदनों के सदस्यों का है। दोनों सदनों की पीठ के ऊपर है, दोनों सदनों का है, इसीलिए मैंने इसे उठाया है। मैं चाहूंगा कि चेयर इस पर गंभीरता से कोई रूलिंग दे जिससे भविष्य के लिए यह रुके।

विपक्ष के नेता (श्री गुलाम नबी आज़ाद) : माननीय उपसभापति महोदय, यह सवाल विपक्ष का और सत्ताधारी पार्टी का नहीं है। क्या भारत में सरकार चलाने का कोई दूसरा सिस्टम भी है? एक ही सिस्टम है—लोकतंत्र, डेमोक्रेसी — और इस डेमोक्रेसी में हम चाहे आपस में दस

دفا لڑے-رولنگ پارٹی اور ویپک-لےکین سسٹم تو ایک ہی ہے۔ چاہے کرسیاں دس دفا بدلے، لےکین لکوتنتر مے جو چنے हुए प्रतिनिधि हैं, चाहे पार्लियामेंट के हों या विधान सभाओं के हों, इस देश में सड़क देनी हो, बिजली देनी हो, नौकरी देनी हो, शिक्षा प्राप्त करनी हो, इन सब कामों के लिए कोई, अन्य किसी के पास नहीं जाएगा, न ही मीडिया हाउस के पास कोई अर्जी लेकर जाएगा। सड़क के लिए, बिजली के लिए, पानी के लिए, टेलीफोन के लिए वे इन्हीं प्रतिनिधियों के पास जाएंगे, वे चाहे सरकारी प्रतिनिधि हों या विपक्ष के प्रतिनिधि हों। वे किसी बिज़नेसमैन के पास नहीं जाएंगे, वे अखबार वाले के पास नहीं जाएंगे। कोई जितनी भी टिप्पणियां करे, मैं उनका नाम नहीं लेता, वे बड़े-बड़े पदों पर हैं, कई ऐसे पदों पर हैं, कई ऐसे इंस्टीट्यूशंस हैं, जिनके बारे में ज़ुबान पर ताला लगा दिया गया है कि न तो सदन में और न सदन के बाहर हम उनके बारे में बोल सकते हैं। जो भी इस देश में टिप्पणी करता है, वह legislature के खिलाफ टिप्पणी करता है, चाहे वे एमपीज़ हों, एमएलएज़ हों या मिनिस्टर्स ही क्यों न हों, चाहे उस तरफ के हों या इस तरफ के हों। हमारे पास एक ही माध्यम है, जो लोगों को राहत पहुंचाता है और वह है, legislature, चाहे फिर वे किसी भी पार्टी के हों, उनकी छवि को अगर हम खत्म कर देंगे, उसको नष्ट करेंगे, उसको बरबाद करेंगे तो इस देश की जनता को क्या विश्वास रहेगा, उन एमपीज़ पर, अपने प्रतिनिधियों पर, अपने एमएलएज़ पर, चाहे वे लोक सभा के हों या राज्य सभा के हों? मेरे ख्याल में कभी न कभी इस पर विचार करने की जरूरत है। पूरे सदन की तरफ से इस पर कहीं न कहीं कार्रवाई होनी चाहिए। आप टेलीविजन चालू कीजिए, रेडियो चालू कीजिए या अखबार पढ़िए, कहीं न कहीं किसी एमपी, मिनिस्टर या पूरे इंस्टीट्यूशन के खिलाफ टिप्पणी आ जाती है। यह कहीं तो बन्द होना चाहिए। यही मैं अर्ज करना चाहता हूँ और मेरे ख्याल में इसमें कोई पार्टी डिवाइडेड नहीं है और सब लोग ऐसा चाहते हैं।

† قائد حزب اختلاف (جناب غلام نبی آزاد) : ماٹے اپ سبھا پتی مہودے، یہ سوال وپکش اور سّدھاری پارٹی کا نہیں ہے۔ کیا بھارت میں سرکار چلانے کا کوئی دوسرا سسٹم بھی ہے؟ ایک بی سسٹم ہے - لوک تنتر، ڈیموکریسی اور اس ڈیموکریسی میں ہم چاہے آپس میں دس دفعہ لڑیں - رولنگ پارٹی اور وپکش - لیکن سسٹم تو ایک ہی ہے۔ چاہے کرسیاں دس دفعہ بدلیں، لیکن لوک تنتر میں جو چنے ہوئے پرتی-ندھی ہیں، چاہے پارلیمنٹ کے ہوں یا ودھان سبھاؤں کے ہوں، اس دیش میں سڑک دینی ہو، بجلی دینی ہو، نوکری دینی ہو، شکشا حاصل کرنی ہو، ان سب کاموں کے لئے کوئی، دیگر کسی کے پاس نہیں جائے گا، نہ ہی میڈیا ہاؤس کے اس کوئی عرضی لے کر جائے گا۔ سڑک کے لئے، بجلی کے لئے، پانی کے لئے، ٹیلی فون کے لئے وہ انہیں پرتی-ندھیوں کے پاس جائیں گے، وہ چاہے سرکاری پرتی-ندھی ہوں یا وپکش کے پرتی-ندھی ہوں۔ وہ کسی بزنس مین کے پاس نہیں جائیں گے، وہ اخبار والے کے پاس نہیں جائیں گے۔ کوئی جتنی بھی ٹپنیاں کرے، میں ان کا نام نہیں لیتا، وہ بڑے بڑے عہدوں پر ہیں، کئی ایسے عہدوں پر ہیں، کئی ایسے انسٹی ٹیوشنس ہیں، جن کے بارے میں زبان پر تالا لگا دیا گیا ہے کہ نہ تو سدن میں اور نہ سدن کے باہر ہم ان کے بارے میں بول سکتے ہیں۔ جو بھی اس دیش میں ٹپنی کرتا ہے، وہ لیجسلیچر کے خلاف ٹپنی کرتا ہے، چاہے وہ ایم-پیز ہوں، ایم-ایل-ایز ہوں یا منسٹرس ہی کیوں نہ ہوں، چاہے اس طرف کے ہوں یا اس طرف کے ہوں۔ ہمارے پاس ایک ہی مادھیم ہے، جو لوگوں کو راحت پہنچاتا ہے اور وہ ہے - لیجسلیچر، چاہے پھر وہ کسی بھی پارٹی کے ہوں، ان کی شبیہ کو

اگر ہم ختم کر دیں گے، اس کو نشٹ کریں گے، اس کو برباد کریں گے تو اس دیش کی جنتا کو کیا وشواس ہوگا، ان ایم-پیز پر، اپنے پرتی-ندھیوں پر، اپنے ایم-ایل-ایز پر چاہے وہ لوک سبھا کے ہوں یا راجیہ سبھا کے ہوں؟ میرے خیال میں کبھی نہ کبھی اس پر وچار کرنے کی ضرورت ہے۔ پورے سدن کی طرف سے اس پر کہیں نہ کہیں کارروائی ہونی چاہئیے۔ آپ ٹیلی ویژن چالو کیجئے، ریڈیو چالو کیجئے یا اخبار پڑھیئے، کہیں نہ کہیں کسی ایم پی، منسٹر یا پورے اسٹی ٹیوشن کے خلاف ٹپنی آجاتی ہے۔ یہ کہیں تو بند ہونا چاہئیے۔ یہی میں عرض کرنا چاہتا ہوں اور میرے خیال میں اس میں کوئی پارٹی ڈیوائڈڈ نہیں ہے اور سب لوگ ایسا چاہتے ہیں۔

श्री के.सी. त्यागी (बिहार): सर ...**(व्यवधान)**... एक मिनट ...**(व्यवधान)**...

SHRI JESUDASU SEELAM (Andhra Pradesh): Mr. Deputy Chairman, Sir, through you, I would like to draw the attention of the House to the suicide by one young man named Koti, yesterday, in Tirupati, agitating for Special Category Status, as promised by the Government. ...**(Interruptions)**...

THE MINISTER OF COMMUNICATIONS AND INFORMATION TECHNOLOGY (SHRI RAVI SHANKAR PRASAD): Sir, let this issue be over first. ...**(Interruptions)**...

SHRI JESUDASU SEELAM: I would, therefore, request the Government...
...**(Interruptions)**... Sir, we pray for his soul. He poured kerosene and self-immolated himself. He was cremated yesterday. The entire Andhra Pradesh is agitated because the Government of the day is not implementing the promises made. ...**(Interruptions)**...

MR. DEPUTY CHAIRMAN: You approach the State Government.

SHRI V. HANUMANTHA RAO (Telangana): The NDA Government...
...**(Interruptions)**...

SHRI JESUDASU SEELAM: Sir, I am talking about this Government.
...**(Interruptions)**... It categorically said... ...**(Interruptions)**... Sir, different Ministers are giving contradictory statements. ...**(Interruptions)**...

Sir, we want the contents of the Reorganisation Bill and the contents of the proceedings of the House be implemented. Sir, we want a categorical statement from the hon. Prime Minister and the hon. Finance Minister. ...**(Interruptions)**...

MR. DEPUTY CHAIRMAN: Do you want to say something? ...**(Interruptions)**...

SHRI JESUDASU SEELAM: Sir, we don't want any loss to anybody. Special Category Status is the right of the people of Andhra Pradesh. ...**(Interruptions)**... Sir, we want the hon. Minister to react to this issue. ...**(Interruptions)**...

MR. DEPUTY CHAIRMAN: You cannot speak on the notice. ...**(Interruptions)**...

श्री के.सी. त्यागी : सर, देश के पूँजीपतियों पर 7 लाख करोड़ रुपये बकाया हैं। ...**(व्यवधान)**...

क्या कभी कोर्ट उनको नोटिस देता है? क्या कभी वित्त मंत्रालय उनको नोटिस देता है? ...**(व्यवधान)**... सिर्फ़ एमपीज़ के लिए, एमएलएज़ के लिए और किसानों के लिए रोज़ इस तरह के नोटिसेज़ आते हैं। ...**(व्यवधान)**... उन पर फाइनेंशियल इंस्टीट्यूशंस के और बैंकों के 7 लाख करोड़ रुपये बकाया हैं। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: Let me take up the Zero Hour Submissions. ...**(Interruptions)**...

श्री के.सी. त्यागी: कभी भी अदालतों की तरफ से इन लोगों को नोटिसेज़ नहीं जाते। ...**(व्यवधान)**...

SHRI JESUDASU SEELAM: Sir, the Parliamentary Affairs Minister should categorically say whether they are bound by the Parliamentary system and whether they are bound by the promises made by the Cabinet. ...**(Interruptions)**...

श्री अनिल माधव दवे (मध्य प्रदेश): सर ...**(व्यवधान)**... मैं कुछ बोलना चाहता हूँ। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: Yes, I allowed you, and you speak. ...**(Interruptions)**... You sit down. ...**(Interruptions)**... दवे जी, आप बोलिए।

श्री अनिल माधव दवे: उपसभापति जी, मैं आपसे इतना निवेदन कर रहा हूँ कि आपने जो विषय रखा है, उसके ऊपर विचार करने की जरूरत है, लेकिन हमें यह भी सोचना चाहिए कि ये जो बड़े-बड़े anchors हैं, ये जो सारे उद्योगपति हैं, जिन्होंने आरोप लगाये, जो न्याय व्यवस्था के व्यक्ति हैं, उनके सम्बन्ध में भी विचार करने की जरूरत है कि इस प्रकार ...**(व्यवधान)**... आप मेरी बात सुनिए। ...**(व्यवधान)**... वे इस प्रकार के स्टेटमेंट देते हैं और उसके बाद सदन उनके लिए क्या बात कह रहा है? सर, इस समय हम लोगों को यह भी विचार करना चाहिए कि यहां गैलरी में बैठे हुए छात्र और छात्रायें अगर हमारे सम्बन्ध में कुछ सोचते हैं, तो वे क्यों सोच रहे हैं? वे जो सोच रहे हैं, वह ठीक से सोचना चाहिए। ...**(व्यवधान)**...

श्री उपसभापति: वह तो ठीक है। ...**(व्यवधान)**... That is right.

श्री अनिल माधव दवे: सर, अगर आप तटस्थ होकर सोचना चाहते हैं, तो मेरा आपसे निवेदन है कि क्या कारण है कि एक anchor के पास तीन सौ करोड़ रुपये का मकान है और ऐसा 10 साल के अन्दर कैसे हो सकता है? यह क्यों हो सकता है? इन सब बातों पर विचार करने की जरूरत है। जो आरोप वे हम पर लगा रहे हैं, उनके आरोपों के ऊपर भी विचार होना चाहिए और सज़ा होनी चाहिए, ...**(व्यवधान)**... निर्णय होना चाहिए, धन्यवाद।

श्री उपसभापति: आपने जो बोला, वह ठीक है, धन्यवाद। Now I am going to Zero Hour Submissions. ...**(Interruptions)**... Shri Vivek Gupta. ...**(Interruptions)**...

SHRI VIVEK GUPTA (West Bengal): Sir, I would like to draw... ...**(Interruptions)**...

श्री नरेश अग्रवाल: सर, हमें चेयर से रूलिंग चाहिए। ...**(व्यवधान)**... प्वाइंट ऑफ ऑर्डर पर चेयर से रूलिंग चाहिए। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: Point of order under what rule? ...*(Interruptions)*...

श्री नरेश अग्रवाल: सर, आप रूलिंग तो दीजिए। ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: Point of order can be raised if there is a violation of rule or procedure. ...*(Interruptions)*... Which rule has been violated? ...*(Interruptions)*...

श्री नरेश अग्रवाल: सर, प्वाइंट ऑफ ऑर्डर ...*(व्यवधान)*... अगर इस हाउस में ...*(व्यवधान)*... तो यह दिया जा सकता है। ...*(व्यवधान)*...

श्री उपसभापति: नरेश जी, आप इतने सीनियर मेम्बर हैं। ...*(व्यवधान)*... नरेश जी, आप मेरी बात सुनिए। ...*(व्यवधान)*... Point of order can be raised if there is a breach of the order or rules or procedure. ...*(Interruptions)*... ऐसा कुछ नहीं हुआ है। ...*(व्यवधान)*... For the issue, which you have raised, you can give a separate notice. ...*(Interruptions)*... Nareshji, you can give a separate notice for the issue you have raised. ...*(Interruptions)*... Now, let us take up the Zero Hour. Shri Vivek Gupta. ...*(Interruptions)*...

Damage caused due to cyclone 'Komen'

SHRI VIVEK GUPTA (West Bengal): Sir, I would like to draw the attention of the Central Government towards the devastation caused due to cyclone Komen in the State of West Bengal. ...*(Interruptions)*... The cyclone has caused a great havoc in the State. ...*(Interruptions)*... Of course, the Indian Army has done a herculean task. ...*(Interruptions)*... There are two BJP MPs from West Bengal. ...*(Interruptions)*... But they have not raised this issue. ...*(Interruptions)*... Nor has any Minister bothered to visit the affected areas in order to take stock of the situation. ...*(Interruptions)*... Over 37 lakh people, in twelve districts have badly been affected by this cyclone. ...*(Interruptions)*... There is a huge loss of life and property. ...*(Interruptions)*... A loss of about 30,000 crores of rupees is being estimated. ...*(Interruptions)*... But, unfortunately, there has been no response from the Central Government till now. ...*(Interruptions)*... I would like to request the Central Government to immediately announce the relief package. ...*(Interruptions)*... The hon. Chief Minister of West Bengal, Mamata *didi*, has announced a compensation of rupees four lakh to the kins of the dead and some compensation to the injured victims also. ...*(Interruptions)*... I would like to know whether the Central Government would also announce some relief package. ...*(Interruptions)*...

SHRI SUKHENDU SEKHAR ROY (West Bengal): Sir, I associate myself with what the hon. Member, Shri Vivek Gupta, has said.

SHRI DEREK O'BRIEN (West Bengal): Sir, I also associate myself with what the hon. Member, Shri Vivek Gupta, has said.

MR. DEPUTY CHAIRMAN: Now, Shri B.K. Hariprasad. *...(Interruptions)...*
Shri B. K. Hariprasad. *...(Interruptions)...* Shri B.K. Hariprasad. *...(Interruptions)...*
Shri K. K. Ragesh. *...(Interruptions)...*

Unprecedented fall in the prices of coconut

SHRI K. K. RAGESH (Kerala): Sir, I rise to raise a very important issue that affects the coconut sector in our country. *...(Interruptions)...* It is going to affect not only the State of Kerala, but also the entire country. *...(Interruptions)...* Recently, the price of coconut has fallen steeply. *...(Interruptions)...* Three years back, the prices of coconut were fifteen to twenty rupees per nut. Now, the prices have fallen down steeply to eight rupees per nut. *...(Interruptions)...* And, the main reason for this steep fall in the price of coconut is the unprecedented import of coconut oil. *...(Interruptions)...* The official data shows that the FMCG major MARICO alone had imported 11,000 tonnes of coconut oil during last December. *...(Interruptions)...*
...(Interruptions)... Again, the State-owned STC had also imported 2,000 tonnes of coconut oil. *...(Interruptions)...* In fact, it is the unprecedented import of coconut oil that has resulted in the demand crunch in the domestic market which, ultimately, led to the steep fall in prices. *...(Interruptions)...* The data of the Coconut Development Board shows that the coconut production, in our country, has been increasing year after year since 2011. *...(Interruptions)...* When our coconut production is adequately meeting our domestic requirement, why is the Government allowing imports? *...(Interruptions)...* It is adversely affecting all the Southern States. *...(Interruptions)...* The coconut oil is mainly used by the cosmetic industry. *...(Interruptions)...* Why is the industry not purchasing coconut oil from the domestic market? *...(Interruptions)...* Because industry is depending on imports *...(Interruptions)...* It is quite amazing that on the one hand the prices of coconut are dropping drastically; on the other, there is no fall in the prices of cosmetic products. *...(Interruptions)...* It is quite obvious that the multi-national giants, like the Hindustan Liver, are fishing in troubled waters and are earning huge profits. *...(Interruptions)...* This is not serving the interests of the farmers. *...(Interruptions)...* Such an approach is going to affect the State of Kerala in a big way. *...(Interruptions)...* coconut is being cultivated on around eight lakh hectares of land in Kerala alone. *...(Interruptions)...* Approximately 30 lakh farmers are dependent on coconut cultivation. *...(Interruptions)...* The rubber plantation has also met the same fate. *...(Interruptions)...* I would like to urge upon the Government to impose a ban on the import of coconut oil and help the distressed farmers. *...(Interruptions)...* The State Trading Corporation should be directed to put an end TO the import of coconut oil and procure it from the domestic market. *...(Interruptions)...*

SHRIMATI JAYA BACHCHAN (Uttar Pradesh): Sir, I associate myself with what the hon. Member, Shri K. K. Ragesh has said. *...(Interruptions)...*

SHRI NEERAJ SHEKHAR (Uttar Pradesh): Sir, I also associate myself with what the hon. Member, Shri K. K. Ragesh has said. ...(*Interruptions*)...

MR. DEPUTY CHAIRMAN: Shri Jesudasu Seelam. ...(*Interruptions*)...

Suicide by a young man in Tirupathi demanding special category status to Andhra Pradesh

SHRI JESUDASU SEELAM (Andhra Pradesh): Sir, I would like to raise the issue of granting 'special category' status to the State of Andhra Pradesh. ...(*Interruptions*)... A young man recently committed suicide demanding special category status for Andhra Pradesh. ...(*Interruptions*)... I would like to know when the Government would fulfill the commitments made in this House regarding 'special category' status to the State of Andhra Pradesh. ...(*Interruptions*)... What happened to the promises made by the then Prime Minister? ...(*Interruptions*)... I would like to know whether the decisions taken by the entire House are binding on the Government or not. ...(*Interruptions*)... The Prime Minister should clarify why ...(*Interruptions*)...

MR. DEPUTY CHAIRMAN: Mr. Sanjiv Kumar has already raised his matter. ...(*Interruptions*)... There are no more Zero Hour notices. ...(*Interruptions*)... So, I am adjourning the House. ...(*Interruptions*)... The House is adjourned till 12:00 hours.

The House then adjourned at thirty-eight minutes past eleven of the clock.

The House reassembled at twelve of the clock,

MR. CHAIRMAN *in the Chair.*

ORAL ANSWER TO QUESTION

Deemed university status to cancer institute (WIA), Adyar, Chennai

*226. DR. V. MAITREYAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has any plans to start new oncology courses for the development of oncological experts in the field of cancer treatment and care and also for the Research and Development;

(b) if so, the details thereof and the total number of Oncologists and Surgical Oncologists available in the country, as on date;

(c) whether Government has received any requests to accord Deemed University status for the Cancer Institute (WIA) at Adyar, Chennai for conducting specialised cancer research courses and to produce more oncological experts; and

(d) if so, the details thereof and the action taken in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) A Statement is laid on the Table of the House.

Statement

(a) and (b) At present, there are 114 seats to be filled up every year in various Oncology superspecialities. In addition, there are 200 seats in MD Radiotherapy who are also largely involved in cancer treatment. Starting new superspeciality courses is an ongoing exercise. Further, doctors who specialize in other discipline like Medicine and Surgery are also involved in cancer care and treatment.

(c) and (d) No. As informed by Cancer Institute (WIA) Adyar, Chennai, the institute has not sent any request to accord Deemed University status.

MR. CHAIRMAN: I congratulate the hon. Members for partial return to normalcy. I request you to continue this during the Question Hour. ...(Interruptions).. Question No. 226. ...(Interruptions)... Dr. Maitreyan. ...(Interruptions)... देखिए, मैयन साहब का सवाल सुन लीजिए। ...(व्यवधान)... ...(Interruptions)... Please. ...(Interruptions)... Please don't do this. Dr. Maitreyan. ...(Interruptions)...

DR. V. MAITREYAN: Sir, basically, the incidence of cancer is increasing year by year. ...(Interruptions)... As on today, the Government has a tough battle. ...(Interruptions)... If it needs to reach the optimum of one Cancer Specialist per hundred thousand population, ...(Interruptions)...

MR. CHAIRMAN: No posters please. ...(Interruptions)...

DR. V. MAITREYAN: ..we will need 12,500 Oncologists, ...(Interruptions).. whereas we have hardly 1,600 ...(Interruptions)... For this, we need to do a lot ...(Interruptions)... Actually, there are only 27 cancer hospitals in the country. ...(Interruptions)... And, additional 300 general and Multi-speciality ones for providing cancer care ...(Interruptions)...

MR. CHAIRMAN: Please go back to your places. ...(Interruptions)... What is this?

DR. V. MAITREYAN: I want to know what steps the Government is taking to increase ...(Interruptions)... the number of qualified Cancer Specialists, both medical and surgical. ...(Interruptions)...

श्री मुख्तार अब्बास नकवी: सर, इनसे कहिए कि ये उधर ही रहें। जब ये इधर आ जाते हैं तो ऐसा लगता है कि ...(व्यवधान)...

MR. CHAIRMAN: The House is adjourned till 12.30 p.m.

The House then adjourned at three minutes past twelve of the clock.

The House reassembled at thirty minutes past twelve of the clock,

MR. CHAIRMAN *in the Chair.*

MR. CHAIRMAN: Let us continue with supplementaries for Question No. 226. ...*(Interruptions)*... Dr. Maitreya. ...*(Interruptions)*...

DR. V. MAITREYA: Sir, he has to answer. ...*(Interruptions)*...

MR. CHAIRMAN: Yes.

SHRI JAGAT PRAKASH NADDA: Sir, as far as supplementary to the Question No. 226 is concerned, the hon. Member has rightly mentioned that the prevalence of cancer is on the increase. ...*(Interruptions)*... At any given time, there are 25 lakh cancer patients every year ...*(Interruptions)*... and there are 11 lakh cancer patients which are reported every year. ...*(Interruptions)*.. Five lakh patients die because of cancer every year. ...*(Interruptions)*...

MR. CHAIRMAN: Please sit down. ...*(Interruptions)*... Please sit down. ...*(Interruptions)*...

SHRI JAGAT PRAKASH NADDA: So, cancer is on the increase. ...*(Interruptions)*... Sir, we have got two-fold strategy to address this problem. One is the preventive side and the other is the curative side. ...*(Interruptions)*...

MR. CHAIRMAN: Please sit down. ...*(Interruptions)*...

SHRI JAGAT PRAKASH NADDA: As far as preventive part is concerned, we are trying to develop an environment where people are made aware; and by IEC – Information, Education and Communication – we are trying to bring lifestyle changes. ...*(Interruptions)*...

MR. CHAIRMAN: Please sit down. ...*(Interruptions)*... Please sit down. ...*(Interruptions)*... Please sit down. ...*(Interruptions)*...

SHRI JAGAT PRAKASH NADDA: We are seeing to it that the life-style changes, and the cancer is also happening because of the life-style problems, we are trying to see to it that the preventive part is also being taken into consideration. ...*(Interruptions)*... AYUSH is also being implemented. ...*(Interruptions)*...

MR. CHAIRMAN: Thank you.

SHRI JAGAT PRAKASH NADDA: Sir, as far as the curative part is concerned, Sir, we have got 27 Regional Cancer Centres. ...*(Interruptions)*...

MR. CHAIRMAN: Please go back to your places. ...*(Interruptions)*...

SHRI JAGAT PRAKASH NADDA: And we have planned 20 State Cancer Institutes and, at the same time, 50 tertiary cancer units. ...(*Interruptions*)... So, we are working at all-India level to see to it that the cancer is made preventable. ...(*Interruptions*)... Early detection is also one of the strategies which we have adopted, and for early screening and detection, we are working. ...(*Interruptions*)...

MR. CHAIRMAN: Please go back to your places. ...(*Interruptions*)...

The House is adjourned till 2.00 p.m.

The House then adjourned at thirty-three minutes past twelve of the clock.

The House re-assembled at two of the clock,

MR. DEPUTY CHAIRMAN *in the Chair.*

WRITTEN ANSWERS TO STARRED QUESTIONS

Design and dimensions of currency notes

*227. SHRI C.P. NARAYANAN: Will the Minister of FINANCE be pleased to state:

(a) whether it is necessary that a bank note of the same design and same denomination has to be identical in every respect, except series and number;

(b) whether it is also necessary to maintain the dimensional accuracy of all bank notes of the same design and same denomination; and

(c) if so, the details of competent legal authority that prescribes the design and dimensions and maintain them along with all the material inputs such as paper, ink, security features, etc. in such bank notes?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) and (b) Reserve Bank of India (RBI) has informed that design and dimensions of bank notes of the same denomination, in any particular series of notes including 2005 series that is currently in circulation, are uniform within the tolerance limits specified for the process of printing banknotes.

(c) Under the provisions of the Reserve Bank of India Act, 1934, the design, form and material of bank notes is approved by the Central Government after consideration of recommendations of the Central Board of RBI. After approval, banknotes of different denominations are printed by Presses of Security Printing and Minting Corporation of India Limited (SPMCIL) and Bhartiya Reserve Bank Note Mudran (P) Limited (BRBNMPL) as per specifications/security features.

Impact of delays and cancellations on AI

*228. DR. K. V. P. RAMACHANDRA RAO: Will the Minister of CIVIL AVIATION be pleased to state :

(a) whether the delays and cancellations weigh down Air India (AI), if so, the details thereof; and

(b) how does the Ministry plan to address the issue?

THE MINISTER OF CIVIL AVIATION (SHRI ASHOK GAJAPATHI RAJU PUSAPATI): (a) and (b) Air India endeavours to minimize the delays and cancellations of flights to avoid inconvenience to the passengers. Air India has shown improvement in the On Time Performance (OTP). The overall Network OTP achieved during the current financial year upto June 2015, is 79% as compared to 68.2% in 2011-12. The OTP of Air India being a network carrier compares favorably with other Star Alliance members.

To improve the OTP, regular OTP Review Meetings are being held at Senior Management Level of Air India since February 2015. Each Regional Executive Director has been made accountable for improvement in OTP in his respective region.

Air India is recruiting additional Cabin and Cockpit Crew to create buffer for additional availability of flying Crew. Air India has already recruited 75 Pilots and 534 candidates have been selected for appointment as Cabin Crew as part of this exercise. Government has sanctioned External Commercial Borrowings of \$300 million to ensure better maintenance and improved availability of aircraft which will improve OTP.

Delay in setting up of INDU

*229. SHRI A. W. RABI BERNARD: Will the Minister of DEFENCE be pleased to state:

(a) whether the Indian National Defence University (INDU) still remains a dream after it was first mooted almost 50 years back, if so, the details thereof; and

(b) whether it is a fact that the INDU Project has not moved after its foundation stone was laid in May, 2013 and the Ministry of Finance is yet to approve the initial cost of ₹ 395 crore, if so, the details thereof?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) In 2010, Government accorded in principle approval for setting up of Indian National Defence University (INDU) at Binola, Gurgaon, Haryana at a cost of ₹ 395 crore. In 2012, Land has been acquired by the Government of Haryana and handed over to Ministry of Defence for this purpose. The Foundation Stone of INDU was laid on

23rd May 2013 by the then Hon'ble Prime Minister. Based on the Detailed Project Report for setting up of INDU and consultation with Services, the scope and cost of the Project has increased. Cabinet Notes for the requisite legislation as well as revision of the cost of the INDU Project are under consideration.

Reservation of seats in medical colleges

*230. SHRI PRAVEEN RASHTRAPAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) how many medical colleges are there in the States of Gujarat, Rajasthan and Madhya Pradesh;

(b) the total number of medical seats available in each of these States;

(c) whether there is any reservation of seats for Non Resident Indians (NRIs), under Management Quota in self finance colleges in the States; and

(d) whether there is any reservation policy for SCs, STs, OBCs and BPL families being followed in these States, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) A list of number of Medical Colleges and seats in Gujarat, Rajasthan and Madhya Pradesh is given below :

State	Government		Private		Total	
	No. of Colleges	Seats	No. of Colleges	Seats	No. of Colleges	Seats
Gujarat	11	1830	13	1400	24	3230
Madhya Pradesh	6	800	7	1050	13	1850
Rajasthan	8	1400	5	750	13	2150
TOTAL	25	4030	25	3200	50	7230

(c) Medical Colleges can allocate upto a maximum of 15% of their seats for NRI students. States of Gujarat and Rajasthan have 9 Medical Colleges in Self Finance mode, where 15% of the seats are earmarked for NRI students.

(d) In respect to Central Government Institutions, the Central Educational Institutions (Reservation in Admission) Act, 2006 provides for 15%, 7.5% and 27% reservation in admission to the students belonging to SC, ST and OBC categories respectively. State Universities including their affiliated/constituent colleges and other institutes are required to follow the norms of percentage of reservation of SC/ST/OBC as prescribed by the respective State Governments.

Eradication of sickle cell anaemia

†*231. SHRI P.L. PUNIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a large section of population of the country is suffering from Sickle Cell Anaemia, if so, the details thereof;

(b) whether it is also a fact that the Central Government is formulating a scheme to eradicate Sickle Cell Anaemia (SCA), if so, the names of States included therein; and

(c) the details of efforts being carried out by the States to eradicate SCA at their own level and the assistance being provided by the Centre to them?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) As per information from Indian Council of Medical Research (ICMR), Sickle Cell Disease has been reported over the years from Maharashtra, Gujarat, Madhya Pradesh, Chattisgarh, Odisha, Jharkhand, Tribes in Nilgiri Hill Areas, Kerala, West Bengal, and Tea Garden Workers from North East and West Bengal.

The financial and technical support is provided to States/UTs under National Health Mission (NHM) to strengthen their healthcare system, including support for addressing the problems of blood disorders (Thalassemia, Haemophilia, Sickle Cell Anaemia etc.) based on the proposals submitted by the State/UT Governments in their Programme Implementation Plans. Sickle Cell Anaemia has been included as an optional condition among the 30 selected health conditions under the Rashtriya Bal Swasthya karyakram (RBSK) Programme. Based on the prevalence of diseases like sickle cell anaemia and availability of testing and specialized support facilities, States and UTs may incorporate them as part of this initiative. It may, however, be added here that public health being a State subject, the primary responsibility to provide health care services to the citizens lies with State/UT Governments.

Revamping of food testing laboratories

*232. SHRI PANKAJ BORA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that State-run food testing laboratories need major revamp for ensuring food safety and standards;

(b) if so, the present condition of the implementation of the Fourteenth Finance Commission's recommendation(s) thereon; and

† Original notice of the question was received in Hindi.

(c) the details of the proposals received and Government plans thereon, Statewise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Food Safety and Standards Authority of India (FSSAI) has informed that the State food laboratories, with the exception of a few, need upgradation.

(b) and (c) No grant for food testing laboratories has been recommended by the Fourteenth Finance Commission.

Delay in opening of Sainik Schools in the States

*233. DR. CHANDAN MITRA: Will the Minister of DEFENCE be pleased to state:

(a) whether in 1961, Government had decided to open Sainik Schools in all the States of the country;

(b) if so, the reasons for delay in implementation of the decision along with the number of Sainik Schools functioning at present in the States;

(c) the number of proposals from various States for setting up of such schools pending at present, the details thereof, State-wise; and

(d) the steps taken by Government to remove regional imbalance in the officer cadre of Defence Services by bringing public schools/education within the reach of common man?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (d) As per the Memorandum of Association of the Sainik School Society, 1961 the objects of the society include establishment of Sainik Schools in various parts of India to provide special school education of a high standard with the aim of preparing boys academically and physically for entry into the National Defence Academy and other walks of life. Sainik Schools are established on receipt of a specific request from the State Government. The State Government is also required to provide infrastructure in the form of land, educational and residential buildings, games fields and other equipments. Once a proposal to the effect is received from the State Government, in-principle approval is accorded after assessing the suitability of the proposal. Thereafter a Memorandum of Agreement is signed between the Ministry of Defence and the State Government before Sainik Schools are established.

Presently, there are 25 Sainik Schools in the Country covering 21 States, the details of which are given in Statement-I (*See below*). Most of the States have one Sainik School except Andhra Pradesh, Bihar, Haryana and Karnataka which have 2

Sainik Schools. Further, in principle approval has been accorded/Memorandum of Agreement signed for setting up of 10 more Sainik Schools which will cover three more States besides some of the existing States having Sainik Schools and its details are given in Statement-II (*See below*). The remaining 5 States *viz* Goa, Meghalaya, Sikkim, Telengana and Tripura have been requested to submit proposals for setting up of a Sainik School. Status of the proposals received from the State/UTs for setting up of Sainik Schools is given in Statement-III (*See below*).

To bring public schools/education within the reach of common man and to remove regional imbalance in the officer cadre of defence services the above measures have been taken.

Statement-I

State-wise list of Sainik Schools in the country

Sl.No.	Name of School	State
1.	Sainik School Korukonda	Andhra Pradesh
2.	Sainik School Kalikiri	Andhra Pradesh
3.	Sainik School Goalpara	Assam
4.	Sainik School Nalanda	Bihar
5.	Sainik School Gopalganj	Bihar
6.	Sainik School Ambikapur	Chhattisgarh
7.	Sainik School Balachadi	Gujarat
8.	Sainik School Kunjpura	Haryana
9.	Sainik School Rewari	Haryana
10.	Sainik School SujanpurTira	Himachal Pradesh
11.	Sainik School Nagrota	Jammu and Kashmir
12.	Sainik School Tilaiya	Jharkhand
13.	Sainik School Bijapur	Karnataka
14.	Sainik School Kodagu	Karnataka
15.	Sainik School Kazhakootam	Kerala
16.	Sainik School Rewa	Madhya Pradesh
17.	Sainik School Satara	Maharashtra
18.	Sainik School Imphal	Manipur
19.	Sainik School Punglwa	Nagaland

Sl.No.	Name of School	State
20.	Sainik School Bhubaneswar	Odisha
21.	Sainik School Kapurthala	Punjab
22.	Sainik School Chittorgarh	Rajasthan
23.	Sainik School Amaravathi Nagar	Tamil Nadu
24.	Sainik School Ghorakhal	Uttarakhand
25.	Sainik School Purulia	West Bengal

Statement-II

*Details of New Sainik Schools for which in-principle approval
accorded/memorandum of agreement signed*

Sl.No.	State	District	Remarks
1.	Arunachal Pradesh	Niglok Village, District East Siang	“In-Principle” approval accorded.
2.	Mizoram	Chhingchhip	Memorandum of Agreement signed.
3.	Odisha	Sambalpur	“In-Principle” approval accorded.
4.	Rajasthan	Alwar	Memorandum of Agreement signed.
5.	Rajasthan	Jhunjhunu	Memorandum of Agreement signed.
6.	Uttar Pradesh	Jhansi	Memorandum of Agreement signed.
7.	Uttar Pradesh	Amethi	Memorandum of Agreement signed.
8.	Uttar Pradesh	Mainpuri	Memorandum of Agreement signed.
9.	Uttarakhand	Rudraprayag	“In-Principle” approval accorded.
10.	West Bengal	Tiffindara, Darjeeling	“In-Principle” approval accorded.

Statement-III

*Details of proposals received from various state Governments/union territory
administration for opening of new Sainik Schools and Status thereon*

Sl.No	State	Status
1.	Assam	State Government to intimate for site survey for Sainik School at Sivasagar or Golaghat District.
2.	Jharkhand	State Government has requested for opening of a second Sainik School. They have not yet intimated any site for the School.

Sl.No	State	Status
3.	Madhya Pradesh	Site survey completed for Sainik School at Sagar.
4.	Maharashtra	State Government to intimate the date of site survey for Sainik School at Chandrapur in Vidharbha Region of Maharashtra.
5.	Meghalaya	The State Government has shown their interest to open a Sainik School. Further details are awaited.
6.	Punjab	A proposal for opening of a second Sainik School is under consideration by the State Government. No formal proposal has been received from the State Government.
7.	Sikkim	Site survey carried out and the site not found suitable. State Government to indicate another site.
8.	Telangana	The State Government to intimate specific details of land earmarked for the proposed Sainik School in Warangal District of Telangana.
9.	Andaman and Nicobar Islands	The Andaman and Nicobar (A&N) Administration have shown their interest to open a Sainik School. Formal proposal is awaited.

Non-accredited food testing laboratories

*234. SHRI AHMED PATEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of functional food testing laboratories along with the number of employed staff against the sanctioned strength, in each of the last two years and in the current year, State/Union Territory-wise;

(b) whether a large number of these food testing laboratories are not accredited with National Accreditation Board for Testing and Calibration Laboratories (NABL);

(c) if so, the details thereof and the reasons therefor, State-wise; and

(d) whether Government proposes to set up more food testing laboratories in the current year, if so, the details thereof, State-wise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The number of food laboratories in the country are as below:

(i)	Referral Laboratories	12
(ii)	State/Public Food Laboratories	72
(iii)	NABL Accredited Private Laboratories	82
TOTAL		166

State-wise details of these labs are given in the Statement (*See below*).

(b) and (c) The Referral Laboratories are, currently, not required to be accredited by NABL. All 82 private laboratories authorized by the FSSAI are NABL accredited.

(d) In order to strengthen Food regulatory system including food testing laboratories, a scheme has been formulated by the Department of Health and Family Welfare.

Statement

State-wise list of Food Testing Laboratories

Sl. No.	State/UT	Number of State/ Public Food Laboratories	Number of Referral Food Labs*	Number of NABL Accredited Private Labs notified by FSSAI
1	2	3	4	5
1.	Andaman and Nicobar Islands	1	-	-
2.	Andhra Pradesh	1	1	-
3.	Assam	1	-	-
4.	Bihar	1	-	-
5.	Chhattisgarh	1	-	-
6.	Daman and Diu	-	-	1
7.	GNCT of Delhi	1	-	11
8.	Goa	1	-	-
9.	Gujarat	6	1	3
10.	Haryana	2	-	8
11.	Himachal Pradesh	1	-	-
12.	Jammu and Kashmir	2	-	-
13.	Jharkhand	1	-	-
14.	Karnataka	4	2	7

1	2	3	4	5
15.	Kerala	3	1	5
16.	Madhya Pradesh	3	-	3
17.	Maharashtra	11	2	18
18.	Meghalaya	1	-	-
19.	Nagaland	1	-	-
20.	Odisha	1	-	-
21.	Puducherry	1	-	-
22.	Punjab	3	-	2
23.	Rajasthan	8	-	3
24.	Tamil Nadu	7	1	7
25.	Telangana	1	1	5
26.	Tripura	1	-	-
27.	Uttar Pradesh	3	2	3
28.	Uttarakhand	-	-	1
29.	West Bengal	5	1	5
TOTAL		72	12	82

The Referral Food Laboratories work as appellate laboratories for the purpose of analysis of appeal samples of food lifted by the Food Safety Officers of the State/UTs and local bodies and the imported food samples. Two Referrals labs viz. Central Food Laboratory, Kolkata and Food Research and Standardization Laboratory, Ghaziabad are under the Ministry of Health and Family Welfare. Their current manpower strength is 25 and 55 and sanctioned strength is 48 and 81, respectively. The details about the strength of laboratories under other Departments, State Governments and authorized NABL private laboratories is not maintained centrally.

Differential charges by private hospitals

*235. SHRI AVINASH RAI KHANNA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government received complaints against private sector hospitals for charging higher fees from patients who pay cash than those who pay through cashless health insurance schemes for the same procedure, if so, the details thereof and the reasons therefor, hospital-wise along with action taken by Government thereon, so far;

(b) whether Government has conducted or proposes to conduct any enquiry in this regard as 80 to 85 per cent population of the country do not have any health insurance cover, if so, the details thereof and if not, the reasons therefor; and

(c) other corrective steps taken by Government in this direction?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) No such complaint has been received in the Ministry of Health and Family Welfare and hence, no enquiry has been conducted.

(c) Government of India has enacted the Clinical Establishments (Registration and Regulation) Act, 2010 and has also notified Rules thereunder in 2012 for registration and effective regulation of clinical establishments. The Act is applicable in 9 States (Sikkim, Mizoram, Arunachal Pradesh, Himachal Pradesh, Uttar Pradesh, Uttarakhand, Rajasthan, Bihar and Jharkhand) and all Union Territories except Delhi. Any other States/UT can adopt the said act by passing a resolution in the State Assembly. Rule 9(i) and Rule 9(ii) of the Clinical Establishments (Central Government) Rules, 2012 require that :—

- (i) Every clinical Establishment shall display the rates charged for each type of service provided and facilities available, for the benefit of the patients at a conspicuous place in the local as well as in English language;
- (ii) The clinical establishments shall charge the rates for each type of procedures and services within the range of rates determined and issued by the Central Government from time to time, in consultation with the State Governments.

National Council for Clinical Establishments has constituted a-sub-committee for determining the range of rates of Procedures and Services. The work is in process.

Since Health is a State subject, the enforcement of the Act and Rules is within the remit of the State Governments/UTs.

About 3.65 crore BPL and unorganised workers and their family members are covered under the centrally sponsored health insurance scheme, Rastriya Swasthya Bima Yojana (RSBY). Some states have also launched cashless health insurance schemes.

One time surprise surveillance of airlines

*236. SHRI S. THANGAVELU: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that the Directorate General of Civil Aviation (DGCA) is planning one time surprise surveillance of airlines to see if the airlines are following flight safety norms, if so, the details thereof; and

(b) whether it is also a fact that the move comes after an Air India flight from Bengaluru to Hyderabad had a bad landing on June 28, 2015 and the Regulator found that the airline could not retrieve the flight data, if so, the details thereof?

THE MINISTER OF CIVIL AVIATION (SHRI ASHOK GAJAPATHI RAJU PUSAPATI): (a) and (b) DGCA carries out audit/surveillance including heightened surveillance of all operators as per the Annual Surveillance Programme drawn by DGCA to ensure flight safety. The audit/surveillance covers the compliance of all the regulatory requirements.

M/s Air India flight AI 513 operated from Bengaluru to Hyderabad was involved in an incident on 28 June, 2015. During the investigation, it was observed that Digital Flight Data Recorder (DFDR) data was not available. Subsequent to this rare incident, inspection of all scheduled airlines has been undertaken to ensure compliance of Civil Aviation Requirements (CAR) Section-5, Series-F, Part-II dealing with monitoring of parameters recorded on DFDR by the airlines.

Capital infusion in state-owned banks

*237. SHRI ANIL DESAI: Will the Minister of FINANCE be pleased to state:

(a) whether State-owned banks have made a strong case for higher capital infusion by Government;

(b) if so, the names of banks that have made this demand; and

(c) how Government is planning to fund capital infusion?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) to (c) All Public Sector Banks (PSBs) had made presentations regarding their capital requirement under BASEL-III norms for the next 4 years. At present PSBs are adequately capitalized and meeting all the Basel III and RBI norms. However, to adequately capitalize all the banks to keep a safe buffer over and above the minimum norms of Basel III, Government has estimated as to how much capital will be required by PSBs this year and in the next three years till FY 2019. If the internal profit generation is excluded, which is going to be available to PSBs (based on the estimate of average profit of the last three years), the capital requirement of extra capital for the next four years up to FY 2019 is likely to be about ₹ 1,80,000 crore. This estimate is based on credit growth rate of 12% for the current year and 12 to 15% for the next three years depending on the size of the bank and their growth ability. Out of the total requirement, the Government of India proposes to make available ₹ 70,000 crore out of budgetary allocations during FY 2016 to FY 2019.

It is estimated that PSB's market valuations will improve significantly due to (i) far-reaching governance reforms; (ii) tight NPA management and risk controls; (iii) significant operating improvements; and (iv) capital allocation from the government. Improved valuations coupled with value unlocking from non-core assets as well as improvements in capital productivity, will enable PSBs to raise the remaining ₹ 110,000 crore from the market. However, the government is committed for making budgetary provisions in FY 18 and FY 19, to ensure that PSBs remain adequately capitalized to support economic growth.

The Government proposes to allocate ₹ 25000 crore in 2015-16, out of which 40% of the amount will be given to those banks which require support, to maintain their common equity at 7.5%. 40% capital will be allocated to the top six big banks viz. State Bank of India, Bank of Baroda, Bank of India, Punjab National Bank, Canara Bank and IDBI Bank in order to strengthen them to play a vital role in the economy. The remaining portion of 20% will be allocated to the banks based on their performance during the three quarters in the current year judged on the basis of certain parameters.

National and international awards for students of FTII

*238. SHRI RITABRATA BANERJEE: Will the Minister of Information and Broadcasting be pleased to state whether it is a fact that the Film and Television Institute of India (FTII) students have won a number of national and international awards in the last three years; and if so, the details thereof?

THE MINISTER OF INFORMATION AND BROADCASTING (SHRI ARUN JAITLEY): Yes Sir. A list of national and international awards in the last three years won by the Film and Television Institute of India (FTII) students is given in the Statement-I and II.

Statement-I

National awards won by FTII students in the last three years

Sl.No	Year	Title and Student Name	Award Name
1.	2012	1, 2 - Gautam Nair	'Best Audiography' with Rajat Kamal for 59th National Awards
2.	2012	Airawat - Renu Savant	'Special Mention' Certificate only for 59th National Awards
3.	2013	Kaatal - Vikrant Pawar	'Best Short Fiction' with Rajat Kamal - 60th National Film Awards

Sl.No	Year	Title and Student Name	Award Name
4.	2013	Kaatal - Vikrant Pawar	'Best Direction' with Swarna Kamal - 60th National Film Awards
5.	2013	Kaatal - Abhimanyu Dange	'Best Cinematography' with Rajat Kamal
6.	2013	After Glow - Kaushal Oza	'Best Film On Family Values' award with Rajat Kamal – 60th National Film Awards
7.	2013	Allah is Great -Andrea Iannetta	'Special Mention' – 60th National Film Awards
8.	2014	Chidiya Udh – Pranjali Dua	'Best Direction' award with Swarna Kamal – 61st National Film Awards
9.	2014	Chidiya Udh - Gautam Nair	'Best Audiography' with Rajat Kamal – 61st National Film Awards
10.	2014	Mandrake! Mandrake! – Ruchir Arun	'Best Short Fiction' with Rajat Kamal to the Director – 61st National Film Awards
11.	2014	Mandrake! Mandrake! – Kavin Jagtiani	

Statement-II

International awards won by FTII students in the last three years

Sl.No	Year	Title and Student Name	Award Name
1.	2012	Chumbak - Gaurav Shimpi	'Special Jury Award' in the Kyoto International Student Film and Video Festival
2.	2013	Kaun Kamleshwar - Anurag Goswami	Satyajit Ray Foundation's short film award, held in conjunction with London Indian Film Festival, 2013.
3.	2013	Allah is Great - Andrea Iannetta	'2nd Best Film' in Dubai International Film Festival (Shorts Section).
4.	2013	Kaatal - Vikrant Pawar	'Best Student Film' Award in International Film Festival of Fiji 2013.

Sl.No	Year	Title and Student Name	Award Name
5.	2013	Dwand - Sahil Bhardwaj, Cinematographer	'Best Cinematography Award' in 13th International Student Film Festival Pisek 2013, Czech Republic.
6.	2014	Mukhabir – Manoj Nitharwal	'Best Student Film' Award in International Film Festival of Fiji

Grace period to defaulters under Atal Pension Yojana

*239. PROF. M. V. RAJEEV GOWDA: Will the Minister of FINANCE be pleased to state:

(a) The taxes imposed by banks on Atal Pension Yojana (APY) scheme;

(b) The incentives provided to the unorganised sector employees to register under this scheme; and

(c) Whether the Ministry is considering to provide a grace period to defaulters who are unable to pay required monthly deposits under the APY scheme due to unstable job and irregular monthly wages, if so, the details thereof, and if not, the reasons therefor?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) There is no tax imposed by banks on APY Scheme.

(b) In order to provide old age income security to citizens, especially the unorganised sector workers, the Government has launched Atal Pension Yojana (APY) which provides a Government guaranteed minimum pension of ₹ 1000 or ₹ 2000 or ₹ 3000 or ₹ 4000 or ₹ 5000 to the subscribers who contribute specified amounts to APY, depending on their age of entry into APY. The benefit of minimum pension under APY would be guaranteed by the Government in the sense that if the actual returns on the pension contributions are less than the assumed returns, for minimum guaranteed pension, over the period of contribution, such shortfall shall be funded by the Government. On the other hand, if the actual returns on the pension contributions are higher than the assumed returns for minimum guaranteed pension, over the period of contribution, such excess shall be credited to the subscriber's account, resulting in enhanced scheme benefits to the subscriber.

With a view to encourage enrolment of the unorganised sector workers in APY, the Central Government would co-contribute 50% of the total contribution or ₹ 1000 per annum, whichever is lower, to eligible subscriber account, for a period of 5 years, *i.e.*, from 2015-16 to 2019-20, who join APY before 31st December, 2015.

The Government co-contribution under APY shall be given to those subscribers, who are not members of any statutory social security scheme and who are not income tax payers.

(c) The APY scheme provides for monthly contributions by subscribers based on the amount of pension selected and the age of entry of the subscribers. It is proposed to provide flexibility of contributions by way of enabling quarterly and half-yearly contributions also. This may help those subscribers who have irregular or intermittent incomes. Further, it is proposed to provide that the subscribers, who are not regular contributors, can continue to keep the account alive by paying overdue interest on the delayed contributions. The overdue interest would remain as part of the pension corpus of the subscriber. Further, in case of irregular contributions, once the account balance in the subscriber's account becomes zero due to reduction of account maintenance charges and fees, account would be closed and the Government contribution, if any, would be given back to the Government. However, the account would remain active till the account balance with self-contributions is non-zero.

Abolition of Central share in plan schemes

*240. SHRI PYARIMOHAN MOHAPATRA: Will the Minister of FINANCE be pleased to state:

(a) whether Government has made a study of the reduction and abolition of Central share in plan schemes effected by it in the wake of improved allocation by the last Finance Commission to the States, if so, the net impact, State-wise; and

(b) whether Government would consider compensating the States adversely affected in the process, if not, the reasons therefor?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) The Government has not made such a study. The net impact of the acceptance of the recommendations of Fourteenth Finance Commission is given in Statement-I (*See* below) with respect to Finance Commission Tax devolution and Finance Commission Grants for 2014-15 and 2015-16. Total Finance Commission transfers in 2015-16 as compared to 2014-15 are ₹ 186150 crore, ₹ 23592 crore and ₹ 209742 crore respectively. The Plan transfer in 2014-15 was ₹ 260928 crore. The total Plan transfer in 2015-16 due to the impact of Fourteenth Finance Commission is ₹ 196743 crore. Thus the reduction in Plan transfer of ₹ 64185 crore is less than the increase in Finance Commission transfer which amount to ₹ 209742 crore resulting in net increase of ₹ 145557 crore during 2015-16. For the year 2015-16, the Government also took a decision to classify the Centrally Sponsored Schemes into groups, keeping in mind that some of the schemes represent national priorities, especially schemes aimed at

providing assistance to the poor. Accordingly, the Centrally Sponsored Schemes have been broadly divided into three categories i.e. (i) Schemes to be fully supported by Union Government which are of national priorities, carrying legal obligations and especially meant for the poor, (ii) Scheme to be run with the changed sharing pattern having partial funding by the Union and State Governments and (iii) Schemes de-linked from the support from the Centre. The details of schemes under each classification are given in Statement-II (*See* below).

(b) Does not arise.

Statement-I

Comparative details of States' share of Central Taxes/Duties & Grants as per Finance Commission Recommendation

Sl. No.	State	14th FC (2015-16)			13th FC (2014-15)			Difference in 2015-16 over 2014-15		
		Tax Devolution	Grants	Total	Tax Devolution	Grants	Total	Tax Devolution	Tax	Total
1	2	3	4	5	6	7	8	9	9	10
1.	Andhra Pradesh	22638	8288	30926	13692	4096	17788	8946		13138
2.	Arunachal Pradesh	7232	159	7391	1110	921	2031	6122		5360
3.	Assam	17401	3283	20684	12284	1130	13414	5117		7270
4.	Bihar	50748	2948	53696	36963	3192	40155	13785		13541
5.	Chhattisgarh	16213	935	17148	8363	1335	9698	7850		7450
6.	Goa	1981	39	2020	901	261	1162	1081		858
7.	Gujarat	16236	2181	18417	10296	2499	12795	5940		5622

1	2	3	4	5	6	7	8	9	10
8.	Haryana	5686	896	6582	3548	1084	4632	2138	1950
9.	Himachal Pradesh	3744	8435	12179	2644	1174	3818	1100	8361
10.	Jammu and Kashmir	8088	10620	18708	4477	2795	7272	3611	11436
11.	Jharkhand	16499	1164	17662	9487	1624	11111	7012	6551
12.	Karnataka	24790	1814	26604	14654	3465	18119	10136	8434
13.	Kerala	13122	5591	18713	7926	1694	9620	5195	9093
14.	Madhya Pradesh	39705	2750	42456	24107	2525	26632	15598	15824
15.	Maharashtra	29062	4150	33212	17603	6984	24587	11459	8625
16.	Manipur	3238	2122	5360	1527	1827	3354	1711	2006
17.	Meghalaya	3371	643	4014	1382	784	2166	1989	1848
18.	Mizoram	2414	2166	4579	911	1055	1966	1503	2614
19.	Nagaland	2614	3224	5838	1063	2022	3085	1551	2753
20.	Odisha	24412	1799	26210	16181	1699	17880	8230	8330

21.	Punjab	8273	1028	9301	4703	1863	6566	3570	2735
22.	Rajasthan	28925	2898	31823	19817	3934	23751	9108	8072
23.	Sikkim	1925	49	1974	809	515	1324	1115	649
24.	Tamil Nadu	21150	2349	23499	16824	3757	20581	4326	2918
25.	Telangana	12823	1153	13976	9795	2129	11924	3028	2051
26.	Tripura	3369	1175	4544	1730	1002	2732	1639	1812
27.	Uttar Pradesh	94313	5453	99767	66623	6482	73105	27691	26662
28.	Uttarakhand	5526	471	5997	3792	899	4691	1734	1305
29.	West Bengal	38462	11083	49545	24595	2525	27120	13867	22425
TOTAL		523958	88864	612822	337808	65272	403080	186150	209742

Statement-II

(i) Schemes to be fully supported by Union Government:

1. Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGA)
2. Multi Sectoral Development Programme for Minorities (MSDP)
3. Pre-Matric Scholarship for children of those engaged in unclean occupation
4. Scholarship schemes (Post and Pre Matric) for SC, ST and OBCs
5. Support for Machinery for implementation of Protection of Civil Rights Act, 1955 and Prevention of Atrocities Act, 1989
6. National Programme for persons with Disabilities
7. Scheme for providing Education to Minorities
8. Umbrella scheme for education of ST Children
9. Indira Gandhi Matritva Sahyog Yojna (IGMSY)
10. Integrated Child Protection Scheme (ICPS)
11. Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG)-SABLA
12. National Nutrition Mission (NNM)
13. Scheme for protection and development of women
14. Assistance for schemes under proviso (i) to Article 275(1) of the Constitution
15. Special Central Assistance to Tribal Sub-Plan
16. Sarva Shiksha Abhiyaan (Financed from Education Cess)
17. Mid Day Meal
18. Schemes of North Eastern Council
19. Special Package for Bodoland Territorial Council
20. National Social Assistance Programme (NSAP) including Annapurna
21. Grants from Central Pool of Resources for North Eastern Region and Sikkim
22. Social Security for Unorganized Workers Scheme
23. Support to Educational Development including Teacher Training and Adult Education
24. Border Area Development Programme

25. Member of Parliament Local Area Development Scheme (MPLADS)
26. Cess backed allocation for Pradhan Mantri Gram Sadak Yojna (PMGSY)
27. Roads and Bridges financed from Central Road Fund
28. Project Tiger
29. Project Elephant
30. Additional Central Assistance for Externally Aided Projects (Loan Portion)
31. Additional Central Assistance for Externally Aided Projects (Grant Portion)

(ii) Scheme to be run with the Changed Sharing Pattern:

1. Cattle Development
2. Mission for Integrated Development of Horticulture
3. Rashtriya Krishi Vikas Yojana
4. National Livestock Mission
5. National Mission on Sustainable Agriculture
6. Dairy Vikas Abhiyaan
7. Veterinary Services and Animal Health
8. National Rural Drinking Water Programme
9. Swachh Bharat Abhiyaan (Rural and Urban)
10. National Afforestation Programme
11. National Plan for Conservation of Aquatic Eco-Systems (NPCA)
12. National AIDS and STD Control Programme
13. National Health Mission
14. National Urban Livelihoods Mission (NULM)
15. Rashtriya Madhyamik Shiksha Abhiyaan (RMSA)
16. Strategic Assistance for State Higher Education - Rashtriya Uchcha Shiksha Abhiyan (RUSA)
17. For Development of Infrastructure Facilities for Judiciary
18. National Land Records Modernisation Programme
19. National Rural Livelihood Mission (NRLM)
20. Rural Housing-Housing for All
21. Integrated Child Development Service

22. Rajiv Gandhi Khel Abhiyan (RGKA) (erstwhile Panchayat Yuva Krida aur Khel Abhiyan (PYKKA)
23. Pradhan Mantri Krishi Sinchai Yojana
(including Watershed programme and Micro irrigation)
24. Impact Assessment Studies of AIBFMP

(iii) Schemes delinked from support from the Centre:

1. National e-Governance Plan
2. Backward Regions Grant Funds
3. Modernization of Police Forces
4. Rajiv Gandhi Panchayat Sashaktikaran Abhiyaan (RGPSA)
5. Scheme for Central Assistance to the States for developing export infrastructure
6. Scheme for setting up of 6000 Model Schools
7. National Mission on Food Processing
8. Tourist Infrastructure

WRITTEN ANSWERS TO UNSTARRED QUESTIONS

Separate standard for AYUSH systems of medicine

2401. SHRI K.N. BALAGOPAL: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government has a scheme of deciding about the quality of hospitals, like Indian Public Health Standard (IPHS), if so, the details thereof;

(b) whether this is applicable to AYUSH systems of medicine; and

(c) if not, whether Government is planning for introducing a separate standard for AYUSH systems of medicine, if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) and (b) Public Health is State subject. However, under the National Rural Health Mission, (NRHM), support is provided to States/UTs for strengthening their healthcare systems including for mainstreaming of AYUSH based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs).

Government has released Indian Public Health Standards (IPHS), 2012 for different facilities under Department of Health and Family Welfare (DoHFW) like Sub Health Centres (SHCs), Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospitals (DHs). As per the IPHS, there is a provision of collocation of AYUSH medical officers and pharmacists in CHCs and District Hospitals.

(c) In view (a) and (b) the question does not arise.

Checking exploitation by foreigners of the country's medicinal plants

2402. DR. T. N. SEEMA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government has taken any measure to check exploitation by foreigners who are visiting India in the name of research study and importing medicinal plants at a huge cost in the name of foreign origin, if so, the details thereof;

(b) whether several constraints like inadequate investments in research and development, lack of quality and standardisation norms and lack of adequate marketing and trade information has led to the low share of India's presence in the global trade of medicinal plants; and

(c) if so, the needful initiatives taken by Government for the promotion of herbal and medicinal plants?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) The Biological Diversity Act, 2002 makes the provision to check the exploitation by the foreigners of biological resources occurring in India which also includes medicinal plants. As per Section-3 of the Biological Diversity Act, 2002 any foreign individual or entity has to obtain prior approval of the National Biodiversity Authority for undertaking research on the Indian biological resources and/or associated knowledge. There are also quarantine measures to check on any biological material imported by foreigners which also covers medicinal plants.

(b) and (c) The Government of India has set up the National Medicinal Plants Board (NMPB) in November, 2000 to look after the matters related to development of medicinal plants sector in the country and it has been implementing different Schemes/Programmes for overall development of the sector in the country.

The NMPB since its inception in 2000 onwards has been supporting Research and Development projects on various aspect of medicinal plants like Survey and documentation of medicinal plants and traditional knowledge on medicinal plants, standardization of Good Agricultural and Collection Practices (GACPs) and development

of Agro-techniques, development of phytochemical reference standards, monographs laying down standards of quality, safety and efficacy, quality assurance.

The other departments/organizations of Government of India *viz.* Botanical Survey of India (BSI), Indian Council of Forestry Research and Education (ICFRE), Department of Science and Technology (DST), Council for Scientific and Industrial Research (CSIR), Indian Council for Agricultural Research (ICAR), also supports Research and Development activities on various aspects of Medicinal Plants. However, the reason for low share of India's presence in global trade of medicinal plants is due to huge domestic/national consumption of medicinal plants.

NMPB supported a study on assessment of demand and supply of medicinal plants in year 2008 and has also assigned a similar study in 2014-15 to Indian Council of Forestry Research and Education (ICFRE), Dehradun, to conduct a detailed study-cum-survey to assess the demand and supply of medicinal plants in India in the national perspective, as well as in respect of the international Market.

In addition, NMPB is also supporting cultivation of medicinal plants under "Centrally Sponsored Scheme of National AYUSH Mission (NAM)" to promote their global trade.

Discovery of new drugs under AYUSH systems of medicine

†2403. SHRI PRABHAT JHA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether policy measures and necessary measures to provide resources are being taken by the Central Government to promote the discovery of new drugs under AYUSH systems of medicine, if so, the details thereof; and

(b) whether the Central Government proposes to establish Ayurvedic Hospitals on the lines of All India Institute of Medical Sciences (AIIMS), if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) Research and Development in AYUSH is undertaken in accordance with the objectives and strategies outlined in the 'National Policy for Indian Systems of Medicine and Homoeopathy-2002'. Central Government has set up Research Councils and implemented a Central Scheme of Extramural Research to undertake and support research and development activities including development of drugs in Ayurveda, Siddha, Unani and Homoeopathy. 80 units of the four Research Councils are functioning in the country. Adequate resources are provided to these initiatives

†Original notice of the question was received in Hindi.

inter-alia to facilitate development and discovery of such drugs, which are different from the classical formulations mentioned in the authoritative books. Drugs and Cosmetics Act, 1940 has a provision for patent or proprietary medicines in relation to Ayurvedic, Siddha and Unani systems of medicine. Many such medicines are licensed and available in the market. Rule 158-B of the Drugs and Cosmetics Rules, 1945 provides *inter-alia* the regulatory guidelines for the evidence of safety and effectiveness requirements for licensing of new formulations and Ayurvedic, Siddha and Unani drugs with new indications. Government has also published Good Clinical Practice guidelines for imparting technical assistance in the area of research and development of AYUSH drugs for the conduct of clinical trials.

(b) Yes. The Government has approved for establishment of All India Institute of Ayurveda at Sarita Vihar, New Delhi. The Institute has been conceived as an Apex Institute of Ayurveda with 200 bedded referral hospital for imparting education in the field of Ayurveda at M.D. and Ph.D level. The construction activities and procurement of medical equipment and furniture are at an advanced stage of completion.

Promoting farming of herbal products

2404. SHRI AHMED PATEL: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the measures taken by the Ministry to promote farming of herbal products in the last one year;

(b) the achievements of the Ministry in the area of herbal farming in the last one year; and

(c) the details of the funds allocated and utilised for the purpose of herbal farming during each of the last three years and in the current year, State/UT-wise?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) National Medicinal Plants Board (NMPB) is providing financial assistance to the States for cultivation of medicinal plants under “Centrally Sponsored Scheme of National AYUSH Mission (NAM) of Ministry of AYUSH.

(b) In the last one year *i.e.* 2014-15, NMPB has released financial assistance of ₹ 3131.49672 lakh for the cultivation of medicinal plants to different States. State-wise details of fund released and the area brought under cultivation of medicinal plants are given in Statement-I and II respectively (*See below*).

(c) The State/UT-wise details of fund allocated and utilised for the purpose of herbal farming during each of the last three years and the current year are given in Statement-III.

Statement-I

*Fund released during the financial year 2014-15 for herbal farming under
“Centrally Sponsored Scheme of National Mission on Medicinal Plants”
(presently merged under “Centrally Sponsored Scheme of
National AYUSH Mission”)*

(₹ in lakhs)

Sl.No	Name of State	Fund released (2014-15)
1.	Andhra Pradesh	715.31275
2.	Gujarat	5.20625
3.	Haryana	68.51
4.	Karnataka	80.04806
5.	Madhya Pradesh	391.65
6.	Maharashtra	270.90762
7.	Manipur	55.58062
8.	Meghalaya	37.405
9.	Mizoram	54.972
10.	Nagaland	82.06031
11.	Odisha	100.96875
12.	Rajasthan	14.495
13.	Sikkim	89.00250
14.	Tamil Nadu	871.845
15.	Telangana	246.4185
16.	Tripura	8.70125
17.	Uttar Pradesh	An amount of ₹ 310.40 lakh was approved and State Mission was allowed to utilise from the unspent balance of previous year available with the State
18.	Uttarakhand	38.41311
TOTAL		3131.49672

Statement-II

Area supported during the last one year (2014-15) for cultivation of medicinal plants/herbal farming under “Centrally Sponsored Scheme of National Mission on Medicinal Plants” (presently merged under “Centrally Sponsored Scheme of National AYUSH Mission”)

Sl.No	Name of State	Area (in hectare)
1.	Andhra Pradesh	8717.00
2.	Gujarat	64.00
3.	Haryana	559.00
4.	Karnataka	1671.80
5.	Madhya Pradesh	7535.00
6.	Manipur	199.00
7.	Mizoram	330.00
8.	Maharashtra	1183.53
9.	Meghalaya	254.00
10.	Nagaland	940.00
11.	Odisha	1200.00
12.	Rajasthan	147.00
13.	Sikkim	446.00
14.	Tamil Nadu	3682.00
15.	Tripura	90.00
16.	Telangana	2553.00
17.	U.P.	3245.00
18.	Uttarakhand	235.70
TOTAL		33052.03

Statement-III

State/UT-wise details of fund allocated and utilised from 2012-13 to 2015-16 for cultivation of medicinal plants/herbal farming under Centrally Sponsored Scheme of "National Mission on Medicinal Plants" (presently merged under "Centrally Sponsored Scheme of National AYUSH Mission")

Sl.No.	Name of State	2012-13		2013-14		2014-15		2015-16	
		Fund allocated	Fund utilized	Fund allocated	Fund utilized	Fund allocated	Fund utilized	Fund allocated	Fund utilized
1	2	3	4	5	6	7	8	9	
1.	Andhra Pradesh	530.59500	393.19271	615.95750	Under utilization	715.31275	132.767		
2.	Arunachal Pradesh	254.03 (State Mission was allowed to utilize from unspent balance of 2011-12 financial year)	254.03000	91.32187	74.1164 (as per provisional UC)	98.53312 (fund could not be released due to pending UCs)	—	This Scheme has been merged into NAM	
3.	Assam	140.06000	132.55000	259.02575 (fund could not be released due to pending UCs)	Nil	Annual Action Plan was not received.	—		
4.	Bihar	77.1077 (State Mission was allowed to utilise	16.82700	88.83125 (fund could not be	4.81210 (utilized from the unspent	Action Plan was not received from	—		

5.	Chhattisgarh	from unspent balance of previous year 2008-09, 2009-10)	Annual Action Plan not received	0.41 (State Mission utilized from the unspent balance of 2011-12 for the approved activities of 2011-12)	Annual Action Plan not received	8.12 (State Mission utilized from the unspent balance of 2011-12 for the approved activities of 2011-12)	balance of 2008-09 & 2009-10)	State Mission	—
6.	Gujarat	72.29875 (Fund could not be released due to pending UCs.	Annual Action Plan (utilized from the unspent balance of 2011-12 for the approved activities of 2011-12)	9.30	Annual Action Plan deferred due to incomplete Annual Action Plan	—	5.20625	Under utilization	
7.	Haryana	33.67425 (allowed to utilize from the available fund of 2011-12)	Annual Action Plan	12.42241	147.12787	Under utilisation	68.51	Under utilization	

1	2	3	4	5	6	7	8	9
8.	Himachal Pradesh	19.81683 (fund could not be released due to pending UCs)	NIL	12.90 (revaluated for 2014-15)	NIL	12.90 (Revaluated for completing the activities of 2013-14)	Under utilization	
9.	Jammu and Kashmir	Annual Action Plan deferred due to non-availability of information as per guidelines	7.13 (utilized from unspent balance of 2009-10 for the approved activity of 2009-10)	Annual Action Plan was not received	7.39 (utilized from unspent balance of 2009-10 for the approved activity of 2009-10)	Annual Action Plan was not received.	—	
10.	Jharkhand	321.01320 (fund could not be released due to pending UCs)	—	215.6875 (fund could not be released due to pending UCs)	—	233.9375 (fund could not be released due to pending UCs)	—	
11.	Karnataka	Annual Action Plan deferred due to non-availability of information as per guidelines	—	108.39275	50.7468 (provisional UC)	80.04806	Under utilisation	

12.	Kerala	130.69031	130.69031	168.96834	Under utilisation	225.29125 (fund could not be released due to pending UC)	—
13.	Madhya Pradesh	491.27525	434.66897	513.35000	Under utilisation	391.65000	Under utilisation
14.	Maharashtra	251.455 (fund could not be released due to pending UC. However, ₹ 219.64 lakh was released in 2013-14 as per actual activities made by State Mission)	219.64	265.7675	256.29 (provisional UC)	270.90762	Under utilisation
15.	Manipur	30.86375	30.86300	32.92149	32.92149	55.58062	55.58062
16.	Meghalaya	24.375 (fund could not be released due to pending UCs)	NIL	24.375	—	37.40500	Under utilisation
17.	Mizoram	8.49000	8.49375	17.41500	13.06125 (as per provisional UC)	54.97200	Under utilisation
18.	Nagaland	201.35	159.50000	133.70500	133.705 (provisional UC)	82.06031	Under utilisation

1	2	3	4	5	6	7	8	9
19.	Odisha	138.91250	115.28000	68.44000	61.9926	100.96875	Under utilisation	
20.	Rajasthan	82.5450 (fund could not be released due to pending UCs)	—	3.50000	2.45	14.49500	Under utilisation	
21.	Sikkim	109.04375	109.04375	70.04312	46.77120	89.00250	Under utilisation	
22.	Tamil Nadu	725.62209	551.91000	1022.94000	1022.9393	871.845	664.6069	
23.	Telangana					246.4185	11.0455	
24.	Uttar Pradesh	735.252375	124.731	349.46000	Nil	310.40 lakh	Under utilisation	
						was approved and State Mission was allowed to utilise from the unspent balance of previous year available with the State		
25.	Uttarakhand	67.7875 (fund could not be released due to pending UCs)	Nil	Component of cultivation was not proposed	—	38.41311	21.59088	

26.	West Bengal	53.45125 (approved to utilize from unspent balance from previous year)	8.99916 (utilized on the activities approved during 2009-10 and 2010-11)	35.24875 (fund could not be released due to non-availability of SLSC approval)	136.67 (utilized on the activities approved during 2009-10 and 2010-11)	Annual Action Plan was not received.	—
27.	Tripura	Annual Action Plan was deferred due to non-availability of information (as per guidelines)	—	88.7012 (fund could not be released due to pending UCs)	—	8.70125	Under utilisation

Note : (i) The fund released during the year 2013-14 and 2014-15 is under utilisation.

(ii) From Financial Year 2015-16 the funds are being released under the “Centrally Sponsored Scheme of National AYUSH Mission (NAM)” of Ministry of AYUSH.

(iii) The grants for the year 2015-16 shall be released after approval of National AYUSH Mission (NAM) Directorate.

Propagation of Yoga

2405. SHRI BASAWARAJ PATIL: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

- (a) the action plan of Government to propagate Yoga all over the world;
- (b) how it will fulfil the needs and duration of time; and
- (c) what is the financial support for this ?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) and (b) The Ministry of External Affairs (MEA) has intimated that they have taken several measures to propagate Yoga abroad starting with celebration of the first International Day of Yoga (IDY) on 21st June, 2015. The grand success of the event celebrated in 192 countries by millions of people has provided the impetus for continuing activities and for celebration of IDY every year on June 21st. The MEA has further contended that popularisation of Yoga is an important aspect of India's cultural diplomacy for the promotion of Yoga as civilizational heritage.

(c) There is provision in the schemes of both the Ministry of External Affairs and the Ministry of AYUSH for supporting activities to promote Yoga. The financial support will be commensurate with the requirements.

Inclusion of Yoga in graduate and post-graduate curriculum

2406. SHRI VIVEK GUPTA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

- (a) whether Government has constituted/proposes to constitute any expert panel/committee for the standardisation of Yoga education, if so, the details thereof;
- (b) the time by when the said Panel/Committee is likely to submit its report;
- (c) whether the University Grants Commission (UGC) has recognised Yoga in the form of a full fledged curriculum at graduate and post-graduate level, if so, the details thereof and if not, the reasons therefor; and
- (d) the details of full-time or part-time courses being run for preparing Yoga instructors for universities/colleges?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) The Government of India, Ministry of Ayurveda, Yoga and Naturopathy,

Unani, Siddha and Homoeopathy (AYUSH) *vide* notification no. Z.28015/124/2014-P&C dated 4th March, 2015, has constituted a Task Force under the Chairmanship of Dr. H.R. Nagendra, Chancellor, S. Vyasa Yoga University, Bengaluru to deliberate on various important issues concerning the Ministry of AYUSH. One of the Terms of Reference of Task Force is to deliberate and recommend the preferred option for promotion, development and regulation of Yoga and Naturopathy for education and practice.

(b) The Task Force is required to submit its report by 30th September 2015.

(c) and (d) University Grants Commission has included component of Yoga in the modules on the health, nutrition, fitness and general wellbeing in all courses at UG & PG level while framing the revised XII Plan guidelines on the scheme of development of sports infrastructure and equipment in Universities and Colleges. Many U.G. and P.G. Courses in Yoga are being conducted by several University in the country. Morarji Desai National Institute of Yoga, New Delhi an autonomous organization under Ministry of AYUSH is conducting the following full time courses for preparing Yoga Instructors:-

1. B.Sc. (Yoga Sciences) of 3 years duration after 10+2.
2. Diploma in Yoga Science for graduates one year duration.

Plan for acceptance of AYUSH systems of medicine

†2407. DR. SATYANARAYAN JATIYA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the policy, implementation and future plan of action of Central Government to make each of indigenous Ayurveda systems of medicine under AYUSH more acceptable and extended in terms of teachings, training and treatment; and

(b) the details of AIIMS-like prestigious centres of Ayurveda under Ayush systems, of medicine including special treatment services provided by each of them?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) The policy, implementation and future plan of action of Central Government to make each of indigenous Ayurveda systems of medicine under AYUSH more acceptable and extended in terms of teachings, training and treatment through National AYUSH Mission (NAM) and some of the Central Sector Schemes.

(i) National AYUSH Mission (NAM)

Government of India has approved and notified National AYUSH Mission (NAM) on 29.09.2014 with the components of AYUSH services, AYUSH Educational Institutions, Quality Control of Ayurveda, Siddha and Unani and Homoeopathy (ASU&H) drugs and medicinal plants in the States/UTs during 12th Plan. State/UT-wise resource pool has been allocated for implementing various activities under NAM. State/UT Governments are eligible to submit the proposals through State Annual Action Plan (SAAP) as per the guidelines of NAM.

In order to make each of indigenous Ayurveda systems of medicine under AYUSH more acceptable in terms of quality safety and efficacy of AYUSH drugs the current proposal is to have a vertical structure for AYUSH in the Central Drugs Standard Control Organisation (CDSCO). Government has initiated procedural steps required for setting up the vertical structure of AYUSH in the CDSCO.

(ii) Other relevant Central Sector Schemes

1. Under the Central Sector Scheme for Information, Education and Communication (IEC), AYUSH Systems including Ayurveda for treatment of common ailments are propagated and promoted through various media channels and other publicity activities like organizing Arogya fairs, providing financial support for fairs, conferences, seminars etc.

2. National Institute of Ayurveda (NIA) is imparting Graduate, Post-Graduate and Ph.D. level courses in Ayurveda. Apart from this, the Institute also imparts a Diploma Course of AYUSH Nursing and Pharmacy. There is also a Panchakarma Attendant Course. The Institute also provides patient care services which include various investigations in the laboratory, free dispensing of medicines in OPD and IPD. The Institute has a Pharmacy and also scheme under SCP/TSP for providing free medical care to around a dozen SC and ST inhabited Districts of Rajasthan where regular Mobile Camps are organized for free consultation, treatment and dispensing of medicines to the population.

3. The Rashtriya Ayurveda Vidyapeeth (RAV) runs two types of courses under traditional 'Guru Shishya Parampara' method. These courses are MRAY for those who possess post graduation in Ayurveda and CRAY for Ayurvedic Graduates. The basic idea of these courses is to provide in-depth knowledge and prepare young scholars, proficient in practice and texts of Ayurveda, to become good practitioners and teachers of Ayurveda.

(b) Presently there are two AIIMS like prestigious centres of Ayurveda under AYUSH systems of medicine as detailed below:-

1. The National Institute of Ayurveda (NIA), has one College and one Hospital. The Institute is committed to provide high quality medical care to all sections of the society and also manages a number of Specialty Clinics like well-equipped Panchakarma Unit, Clinics for Diabetes, Geriatric, Vitiligo, Child Mental Health, Kshara-Sutra and various Para-Surgical Procedures, etc. Medicines in IPD and OPD are dispensed free of cost to the patients.
2. All India Institute of Ayurveda (AIIA), New Delhi is an apex Institute of Ayurveda with 200 bedded referral hospital and to impart education in the field of Ayurveda M.D. and Ph.D level. The institute is in advance stage of construction.

AYUSH cure for cerebral palsy

2408. SHRIMATI VIJILA SATHYANANTH: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government is aware of substantial cure of cerebral palsy children through Siddha treatment at Government Siddha Medical College and Hospital, Tirunelveli, Tamil Nadu;

(b) whether podithimirthal (dry powder massage) special therapeutic deep tissue massage using herbal powders is useful in Motor Neuron disorders, Cerebral Palsy, Muscular Dystrophy, Multiple Sclerosis, Hemiplegia, Juvenile Rheumatoid Arthritis and obesity;

(c) whether Ministry is aware that Dry Powder (Herbal) massage softens and exfoliates dead skin cells, toning the skin, improves mobility of joints, strengthens and tones up the muscles, rejuvenates the body cells, improves circulation and opens up body channels; and

(d) whether Ministry would take steps to improve efficiency in this therapy and support?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (SHRI SHRIPAD YESSO NAIK): (a) The Government Siddha Medical College and Hospital, Tirunelveli, Tamil Nadu has not reported to the Ministry of AYUSH, Government of India regarding treatment of cerebral palsy through Siddha.

(b) No direct evidence regarding podithimirthal (dry powder massage) curing diseases like, Motor Neuron disorders; Cerebral Palsy; Muscular Dystrophy; Multiple Sclerosis; Hemiplegia; Juvenile Rheumatoid Arthritis and obesity is found in classical Siddha texts.

(c) Yes. The dry powder (Herbal) massage normally rejuvenates the skin, joints and body cells.

(d) Yes. The steps to improve efficiency and support would be commensurate with the leads in this therapy through further research.

Second airport in NCR

2409. PROF. M.V. RAJEEV GOWDA:

SHRI RAJEEV SHUKLA:

Will the Minister of CIVIL AVIATION be pleased to refer to to Unstarred Question 20 given in the Rajya Sabha on 21 July, 2015 and state:

- (a) whether the second airport in NCR will be set up;
- (b) the reasons behind change of decision suddenly;
- (c) whether the site for the second airport has been finalised;
- (d) the details of the finances involved in setting up another airport;
- (e) the timeline to make the second airport operational; and
- (f) the details of the air traffic that will be diverted to the second airport in the initial phase?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes Sir.

(b) and (c) The Steering Committee on Greenfield Airports has recommended to the Ministry of Civil Aviation the proposal of Delhi Mumbai Industrial Corridor Development Corporation Ltd. (DMICDC) for setting up of a Greenfield airport at Kotkasim Tehsil in Alwar District, Rajasthan.

(d) and (e) Necessary details regarding project cost, financing, schedule of the project implementation etc. are worked out by the airport promoter and submitted at 'in-principle' approval stage. The proposal has not reached that stage.

(f) The stage for assessing the air traffic potential has not been reached yet.

Development of airports in various States

2410. SHRI KIRANMAY NANDA:

DR. KANWAR DEEP SINGH:

SHRIMATI RAJANI PATIL:

Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government has sanctioned any projects for construction of new airports in different States particularly in Maharashtra, Uttar Pradesh and West Bengal, if so, the details and present status thereof; and

(b) whether Government plans to develop existing airports in various States of the country?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes, Sir. Government of India (GoI) has granted 'in-principle' approval to 14 projects: Mopa in Goa, Navi Mumbai, Sindhudurg and Shirdi in Maharashtra, Bijapur, Gulbarga, Hassan and Shimoga in Karnataka, Kannur in Kerala, Dabra in Gwalior, Pakyong in Sikkim, Kushinagar in Uttar Pradesh, Karaikal in Pudducherry and Durgapur in West Bengal. Durgapur Airport has commenced commercial operations on 18th May, 2015.

(b) The development of an airport is a continuous process and depends upon commercial viability, technical feasibility, availability of land etc.

Announcement of new aviation policy

2411. SHRI MAJEED MEMON: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government is going to announce its new aviation policy, if so, by when;

(b) whether the new policy is going to focus on improving connectivity within the country and making flying affordable; and

(c) if so, the detailed report thereon?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) The Draft Civil Aviation Policy was initially unveiled on 10th November, 2014 to address various issues related to the sector. The Ministry invited comments/suggestions of the public/stakeholders/State Governments on the draft policy. The responses have provided valuable inputs, on the basis of which certain modifications have been considered after extensive consultations.

(b) and (c) The Draft Civil Aviation Policy provides for improving air connectivity to all regions and to remote areas, while also addressing issues related to affordability of air travel.

Mental fitness of pilots

2412. SHRI T. RATHINAVEL: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that it has been found that airlines were not providing training to their crew to manage crises;

(b) whether it is also a fact that the quality of our pilots is not up to the mark;

(c) whether it is also a fact that our pilots fly well, but lack in ability to handle a situation under stress; and

(d) whether it is also a fact that a few incidents in the past including the disappearance of Malaysian Airlines flights and the deliberate crash of a Germanwings plane, have made airlines and regulatory authorities to look at mental fitness of pilots to improve air safety?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) Airlines are providing training to aircrew as prescribed in their Operations Manual which is approved by Directorate General of Civil Aviation (DGCA).

(c) In order to ensure continued proficiency, pilots are trained and checked periodically for handling normal and abnormal situation as per training syllabus approved by DGCA.

(d) After the accident of Germanwings Flight 9525 on 24.3.2015, DGCA has constituted a working group to carry out study and recommend "Policy on Psychometric Test for Flight Crew". The working group has submitted its report in July, 2015, which is presently placed on DGCA website for inviting public comments. Similarly, European Aviation Safety Agency (EASA) had constituted a task force to study "Measures following the Accident of Germanwings Flight 9525" and has published the report on EASA website.

Request from States to commence air services

†2413. SHRI MAHENDRA SINGH MAHRA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether his Ministry has received requests from the States to start air services from the airports, which are ready for operation of flights;

†Original notice of the question was received in Hindi.

(b) if so, the locations in the States for which requests have been received for starting the operation of the air services together with the dates of requests made for; and

(c) by when air services will commence from those airports alongwith the reasons for not according permission so far?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) In recent past air services have started in the States of Andhra Pradesh and West Bengal. Air Pegasus have started operation on Bengaluru-Kadapa-Bengaluru route effective 7.6.2015 with a frequency of 03 flights/week and Alliance Air has started on Kolkata-Durgapur-Kolkata route effective 18.5.2015 with a frequency of 06 flights/week. Further, Government has laid down Route Dispersal Guidelines (RDGs) with a view to achieve better air transport services of different regions of the country. It is, up to the airlines to provide air services to specific places depending upon the traffic demand and commercial viability. As such, the airlines are free to operate anywhere in the country subject to compliance with RDGs.

Transfer of technicians of Alliance Air

2414. SHRI RITABRATA BANERJEE: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that a number of technicians of Alliance Air have been transferred from Kolkata to Hyderabad within 24 hours notice, if so, the details and the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes, Sir. 05 Technicians of Alliance Air were transferred to Hyderabad from Kolkata for operational requirements. The transfer order was issued on 30th June, 2015 and they were released on 8th July, 2015 to join duties at Hyderabad in view of the newly commenced ATR-72 aircraft operations from Hyderabad.

Promotion to air connectivity in Andhra Pradesh and Telangana

2415. DR. T. SUBBARAMI REDDY: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the progress of upgradation of airports to international standard at Tirupati and Visakhapatnam;

(b) the progress of setting up of airports at Kadapa, Vijayawada and Warangal in Telangana and Andhra Pradesh to promote air connectivity;

(c) by what time, these airports would be operational in all respects; and

(d) what is the amount spent so far, for each airport in the last two years and what is the further amount required for completion of these airports?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Development/upgradation of airports is a continuous process and is undertaken by Airports Authority of India (AAI) from time to time depending on the availability of land, commercial viability, socio-economic considerations, traffic demand/willingness of airlines to operate to/from such airports etc. Tirupati Airport belongs to AAI and construction of a new integrated terminal building has been undertaken by AAI for upgradation of the airport. Visakhapatnam Airport is a Defence Airport under control of Indian Navy, where AAI maintains a civil enclave. The existing integrated terminal building is suitable to handle 700 peak hour passengers at a time.

(b) and (c) The Airports at Kadapa and Vijaywada in Andhra Pradesh are operational, while the airport at Warangal in Telangana is non-operational. Operationalisation of the Warangal Airport is subject to availability and handing over of land by the State Government of Telangana, compliance with the guidelines of the Greenfield Airport Policy of GoI etc. and hence no time-frame for operationalisation of this airport can be set at this stage.

(d) The expenditure incurred on construction of terminal building of Tirupati Airport is ₹ 40.35 crore in 2013-14 and ₹ 49.03 crore in 2014-15. AAI has projected further expenditure of ₹ 20.00 crore for completion of terminal building and ₹ 26.80 crore for construction of apron at Tirupati Airport. Expenditure of ₹ 1.25 crore in 2013-14 and ₹ 1.4 crore in 2014-15 has been incurred on the construction of terminal building of Kadapa Airport. AAI has also projected an expenditure of ₹ 59.83 crore for construction of apron at Visakhapatnam Airport, ₹ 103.22 crore for construction of terminal building of Vijayawada Airport and ₹ 6.66 crore for construction of boundary wall of Warangal Airport.

Appointment of Chief of BCAS and Chairman of Air India

2416. SHRI S. THANGAVELU: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that the post of Chief of Bureau for Civil Aviation Security (BCAS) had been lying vacant for almost three years now;

(b) whether any decision has been taken to fill up this post; and

(c) whether it is also a fact that Government is yet to take a decision on the appointment of Chairman of Air India as the incumbent is on extension since August, 2014, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes, Sir. Bureau of Civil Aviation Security (BCAS) is headed by a Commissioner of Security (Civil Aviation). The previous incumbent of this post retired on superannuation on 31.10.2012.

(b) Yes, Sir. Ministry of Home Affairs (MHA) has been requested to provide a panel of eligible officers for the post of Commissioner of Security (Civil Aviation) in BCAS.

(c) The Search-cum-Selection Committee for selection of the new incumbent has already been constituted by the Government.

Expansion of air services in Tamil Nadu

2417. SHRI K. R. ARJUNAN: Will the Minister of CIVIL AVIATION be pleased to state: whether Government proposes to expand air services in Tamil Nadu in view of the unprecedented rise in the number of air travellers in Tamil Nadu during the last few years?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): As per approved Summer 2015 Schedule, scheduled air services are available to/from 05 cities in the State of Tamil Nadu (Chennai, Coimbatore, Madurai, Trichy, Tuticorin). Government has laid down Route Dispersal Guidelines (RDGs) with a view to achieve better regulation of air transport services of different regions of the country. It is, however, up to the airlines to provide air services to specific places depending upon the traffic demand and commercial viability. As such, the scheduled airlines are free to operate anywhere in the country subject to compliance with Route Dispersal Guidelines.

Upgradation of airports under PPP Model

2418. SHRI D. P. TRIPATHI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the number of non-metro airports in the country and the number of them operational;

(b) whether Government has undertaken/proposes to undertake expansion/modernisation of metro and non-metro airports under Public-Private-Partnership (PPP)

model including airports in Karnataka, if so, the details thereof, State/UT-wise;

(c) whether Government has received any requests from the States for modernisation of the airports and helipads, if so, the details thereof, State/UT-wise and airport-wise; and

(d) whether Government has directed the airport regulator to put in place an effective monitoring mechanism to avoid delays in upgradation/modernisation plans of airports?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) There are 119 non-metro airports owned by Airports Authority of India (AAI), out of which 89 of them are operational.

(b) Airports at Delhi and Mumbai were modernized by the Government of India under Public-Private-Partnership (PPP) model. Further, three Greenfield Airports namely, Hyderabad, Bengaluru and Kochi were constructed under PPP model. As per the existing Greenfield Policy of Ministry of Civil Aviation, State Governments/private operators are also encouraged to construct airports including airports in Karnataka.

(c) Requests for upgradation/modernisation of the following airports were received in the last three years:

Tirupati in Andhra Pradesh, Raigarh in Chhattisgarh, Hissar and Karnal in Haryana, Kullu and Shimla in Himachal Pradesh, Jammu and Leh Airports in Jammu and Kashmir, Deoghar in Jharkhand, Belgaum and Hubli in Karnataka, Jharsuguda in Odisha, Ludhiana in Punjab, Kishangarh and Jodhpur (CE) in Rajasthan, Coimbatore and Tuticorin Airport in Tamil Nadu, Agartala, Kailashahar and Kamalpur in Tripura, Gorakhpur (CE), Kanpur (Chakeri) (CE), Agra (CE), Allahabad (CE) and Bareilly (CE) in Uttar Pradesh, Agatti in the Union territory of Lakshadweep and Puducherry in the Union Territory of Puducherry respectively.

(d) The Project Monitoring and Quality Assurance Department in AAI collects and compiles the progress of various projects on monthly basis for periodical monitoring of the projects of upgradation/modernization of Airports. The Steering Committee on Greenfield Airports monitors the progress of the Greenfield Airport Projects and the OMDA (Operation, Management and Development Agreement) Implementation Oversight Committee (OIOC) monitors the progress of the joint venture airports at Delhi and Mumbai. Moreover, in order to ensure timely completion of projects, the progress of Airport projects is closely monitored by AAI and the Government.

Monetising of assets by Air India to reduce loss

†2419. SHRI HARIVANSH: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the plan being made by Government to reduce the operational cost of Air India and to what extent the operational cost of Air India is higher than private airlines;

(b) whether by only selling the assets of Air India, it is possible to take it out of loss;

(c) whether the alternative option of reducing the loss by commercially using their assets has also been contemplated, if so, the details thereof; and

(d) the steps being taken by Government to bring Air India out of loss?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (d) The Cabinet Committee on Economic Affairs (CCEA) in its meeting held on 12.04.2012, approved a Turn Around Plan (TAP)/ Financial Restructuring Plan (FRP) for operational and financial turnaround of Air India (AI) subject to achievement of certain laid down milestones by AI. In compliance with TAP/FRP, an Oversight Committee has been set up under the Chairmanship of Secretary, Ministry of Civil Aviation with Expenditure Secretary, Additional Secretary and Financial Adviser, Ministry of Civil Aviation, Joint Secretary of Ministry of Civil Aviation and SBI Caps as members, to monitor the Operational and Financial Performance of Air India *vis-a-vis* the milestones set under TAP/ FRP. So far, eleven meetings of Oversight Committee have been held.

The Company has achieved the Targets set out in the TAP milestones, and has made substantial progress in both Operational as well as Financial Areas. The Operating Loss has consistently reduced and in 2014-15 it is ₹ 2171.40 crore (provisional) as compared to ₹ 5138.69 crore in 2011-12. The Net Loss is expected to be ₹ 5547.40 crore in 2014-15 as against the loss of ₹ 7559.74 crore in 2011-12.

As part of the TAP/FRP, AI has initiated, *inter-alia*, the following steps in order to cut costs:

- (i) Rationalization of certain loss making routes,
- (ii) Induction of brand new aircraft on several domestic and international routes to increase passenger appeal,
- (iii) Phasing out and grounding of old fleet,

- (iv) Establishment of Integrated Operations Control Center and Hub Control Center in Delhi,
- (v) Freezing of employment in non-operational areas,
- (vi) Operationalization of subsidiary companies such as Air India Air Transport Services Limited and Air India Engineering Services Limited and transfer of manpower and equipment and treating them as Independent Profit Centers and
- (vii) Induction of the B787 aircraft on medium capacity long haul routes.

The comparative statement of the operational cost of Air India *viz-a-viz* the private sector airlines is not maintained in the Ministry.

(b) and (c) As per Turn Around Plan/Financial Restructuring Plan approved by the Cabinet Committee on Economic Affairs (CCEA), Air India is required to monetize its assets and generate ₹ 5000 crore over a period of 10 years by way of sale, leasing or developing an asset as a joint venture. Specific approval of the cabinet is necessary for each case of sale or long term lease of land belonging to Government or Government controlled statutory authorities as per the instructions laid by Ministry of Finance.

Air India is in possession of some properties which are lying vacant and unused for a long time because of shifting of its offices to Airport Terminal Building, City location and also as a result of stopping of its operation from such locations etc. Monetizing such properties by way of sale/rent or to develop as a joint venture, to raise Non-operating revenue, would help the company to retire its huge debts. Government has received proposals for monetisation of following properties from Air India:

1. Residential plot measuring 0.99 acres approx. at Pankaja Mill, Road, Coimbatore.
2. Residential cum commercial plot of land measuring 1.33 acres approx. at Mount Road, Teynampet, Chennai.
3. 04 no. flats measuring 2033 sq. ft. approx at Sterling Apartment, Mumbai.

The Government has drafted these proposals for the approval of the cabinet. Air India has approached Government/Public Sector Undertakings such as Income Tax Deptt., Service Tax Deptt., State Bank of India etc. for leasing space in its office building at Nariman Point, Mumbai. The details of earnings of Air India from monetisation of assets are as under:

Year	Earning
2014-15	₹ 35.97 crore
2015-16	₹ 90.24 crore (Prov. Estimates)

The revenue generated from monetisation will be utilized by Air India to reduce its debts, and improve its fiscal health.

Modernisation and upgradation of airports and passenger facilities

2420. SHRI AJAY SANCHETI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the details of measures taken by Government to increase aircraft and airport capacities, modernise and upgrade airports and passenger facilities during the Twelfth Five Year Plan; and

(b) what has been the performance in each sphere so far?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Modernisation/upgradation of aircraft and airports is a continuous process and is undertaken by Air India (AI) and Airports Authority of India (AAI) respectively from time to time depending on various factors like commercial viability, traffic demand etc. Air India has inducted brand new aircraft on several domestic and international routes and introduced several Dreamliner aircraft, which are fuel efficient, less noisy and with lower carbon emission and provide more customer comforts.

AAI has taken up several initiatives to increase airport capacities and passenger facilities during the Twelfth Five Year Plan. This includes extension of runway, apron and associated facilities at several airports for operation of wide bodied aircraft, construction of new/integrated/spacious terminal buildings with state-of-art-modern facilities and capacity to handle more passengers, central heating ventilation and air conditioning system, passenger boarding bridge, lifts, escalators and conveyor belts, check in counters with Common User Terminal Equipment (CUTE), baggage handling system compatible with in-line X-ray machine, intelligence addressable fire alarm system with fire fighting, inclined arrival baggage claim carousals, public address and flight information display system, CCTV for surveillance, VIP lounge, child care room, restaurant, ATM, Wi-Fi, ample car parking space, etc.

(b) Performance of each of these systems and state-of-art-facilities has led to enhancement in aircraft as well as airport capacity, efficient operations, better surveillance and safety, better passenger conveniences and facilities which resulted into better airport service quality rating.

Attacks on minorities

2421. SHRIMATI JHARNA DAS BAIDYA: Will the Minister of MINORITY AFFAIRS be pleased to state how many attacks have taken place on minorities throughout the country in the last one year and if so, the details thereof, State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): Under Prime Minister's New 15 Point Programme for the welfare of minorities, the Government has issued the Guidelines on Communal Harmony. Being the Nodal Ministry, Ministry of Home Affairs maintains the data on incidents of communal violence. As per the information available with this Ministry, the number of incidents have declined from last two years, the details of the incidents of communal violence occurred during 2014 are given in the Statement.

Statement

Details showing no. of communal incidents, no. of persons killed/injured therein during the year 2014

Sl. No.	States/UTs	2014		
		Incidents	Killed	Injured
1.	Andhra Pradesh	5	0	5
2.	Arunachal Pradesh	0	0	0
3.	Assam	1	0	23
4.	Bihar	61	5	294
5.	Chhattisgarh	0	0	0
6.	Gujarat	74	7	215
7.	Haryana	4	1	12
8.	Himachal Pradesh	0	0	0
9.	Jammu and Kashmir	0	0	0
10.	Jharkhand	10	1	102
11.	Karnataka	73	6	177
12.	Kerala	4	1	20
13.	Madhya Pradesh	56	12	167
14.	Maharashtra	97	12	198
15.	Manipur	0	0	0
16.	Meghalaya	0	0	0
17.	Mizoram	0	0	0

Sl.No.	States/UTs	Incidents	Killed	Injured
18.	Nagaland	0	0	0
19.	Odisha	3	1	3
20.	Punjab	0	0	0
21.	Rajasthan	72	14	139
22.	Sikkim	0	0	0
23.	Tamil Nadu	15	1	44
24.	Tripura	0	0	0
25.	Uttar Pradesh	133	26	374
26.	Uttarakhand	8	1	9
27.	West Bengal	16	6	32
28.	Telangana	5	0	3
29.	Goa	0	0	0
30.	Delhi	7	1	104
31.	Andaman and Nicobar	0	0	0
32.	Chandigarh	0	0	0
33.	Dadra and Nagar Haveli	0	0	0
34.	Daman and Diu	0	0	0
35.	Puducherry	0	0	0
36.	Lakshadweep	0	0	0
TOTAL		644	95	1921

Fuel surcharges for transport of Cargo

2422. SHRI MAJEED MEMON: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that five carriers have been found acting as a cartel in introducing fuel surcharge for transport of cargo;

(b) if so, whether any investigation has been ordered by the Competition Commission of India (CCI) for violation of competition norms;

(c) whether investigation has been completed; and

(d) by when final report in the matter is likely to come?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (d) Competition Commission of India (CCI) *vide* its order dated 2nd September, 2013 under Section 26(1) of the Competition Act, 2002 directed the Director General of Civil Aviation to cause investigation in Case No. 30/2013 wherein allegations were made against airlines for forming cartel to introduce 'fuel surcharges'. The Director General has submitted the investigation report to CCI.

Action against airlines which failed safety audit

2423. SHRI SHADI LAL BATRA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether the Directorate General of Civil Aviation (DGCA) conducted a safety audit of airlines, if so, the details thereof;

(b) whether certain airlines have failed to clear safety audit on various parameters; and

(c) if so, the details thereof and the details of action taken by DGCA against those airlines?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) DGCA conducts Regulatory Audit every year as per Annual Surveillance Programme. During the last three years and current year, DGCA has conducted 21 Regulatory Audits on scheduled airlines. Year-wise audit details are as follows:

2012	-	6
2013	-	3
2014	-	5
2015	-	7

(till 3-8-2015)

The salient observations are given in Statement-I (*See* below).

(c) The observation/deficiencies observed during the audit were forwarded to the concerned operator for the compliance of deficiencies. The action taken reports were reviewed by DGCA and the observations were only closed after being satisfied on the compliance. The details of action taken by DGCA for the discrepancies are given in Statement-II.

Statement-I

Salient observations :

- Operations manual certified under CAP8100 was not updated.
- Strength of trainers was found to be substantially less than the recommended strength in the DGCA Operations Circular as well as operator's training manual.
- The policy defined by the Company in the Operator's Manual, Part D (Training); addressing failure and below standard reports of flight crew during checks was found to be inadequate. The procedure to immediately give corrective training and bring back crew for utilization is not in line with the procedure prescribed in Ops manual Part D.
- CAR Section 08 Series F Part II on PPC was not being strictly complied as few of the pilots were detected been flying even after the expiry of validity of pilot proficiency check.
- The operator is giving crosswind training up to maximum of 25 Kts in the training profiles of B-777 whereas in the limitation of crosswind the operator has given 38 knots of crosswind as operating limit.
- The officials nominated by the Organization for a particular post does not meet the experience requirements for that post.
- Procedure for approval of maintenance facility and maintenance procedures to be followed for wet lease operation has not been included in MOE.
- Procedure for selection of major defects/occurrences for investigation by Permanent Investigation Board (PIB) or Technical Evaluation Board (TEB) has not been established.
- The Maintenance Organization Exposition (MOE)/I Continuous Airworthiness Maintenance Exposition (CAME) does not identify the standard observed in the performance of work.

Statement-II

Details of action taken by DGCA:

- 08 warning letters issued to pilots who were detected have flown even after the expiry of validity of pilot proficiency check.
- 01 warning letter issued to Training Pilot.
- 01 warning letter issued to Director (Operations).
- 01 Chief of Training was removed from the post.

Splitting of AI

2424. DR. K. V. P. RAMACHANDRA RAO: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government considers Air India financially and commercially viable; and

(b) if so, whether Government considers splitting Air India into two or three viable entities with clearly focus on thrust areas like South, North and Eastern India and thus contribute to more air connectivity?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes, Sir. The Cabinet Committee on Economic Affairs (CCEA) in its meeting held on 12.04.2012, approved a Turnaround Plan (TAP)/ Financial Restructuring Plan (FRP) for operational and financial turnaround of Air India (AI) subject to achievement of certain laid down milestones by AI. In compliance with TAP/ FRP, an Oversight Committee has been set up under the Chairmanship of Secretary, Ministry of Civil Aviation with Expenditure Secretary, Additional Secretary and Financial Adviser, Ministry of Civil Aviation, Joint Secretary of Ministry of Civil Aviation and SBI Caps as members, to monitor the Operational and Financial Performance of Air India *vis-a-vis* the milestones set under TAP/ FRP. Meetings of the Oversight Committee are held every three months. So far, eleven meetings of Oversight Committee have been held.

The Company has achieved the Targets set out in the TAP milestones, and has made substantial progress in both Operational as well as Financial Areas. The Operating Loss has consistently reduced and in 2014-15 it is ₹ 2171.40 crores as compared to ₹ 5138.69 crores in 2011-12. The Net Loss is expected to be ₹ 5547.40 crores in 2014-15 as against the loss of ₹ 7559.74 crores in 2011-12.

(b) No such proposal is under consideration of the Government.

Return of leased Aircrafts by Alliance Air

2425. SHRI RITABRATA BANERJEE: Will the Minister of CIVIL AVIATION be pleased to state whether it is a fact that Alliance Air management have decided to return the leased ATR 42-320 aircrafts, if so, the details and the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): Alliance Air had seven ATR 42 aircraft on lease, of which three aircraft have already been returned to lessor as the leased aircraft are required to be returned to lessor on completion of lease term. Out of the remaining four aircraft, two aircraft have been grounded for return, as their lease term has expired. The remaining two ATR 42, are presently part of the operating fleet of Alliance Air.

GPS aided geo augmented navigation system

2426. SHRI S. THANGAVELU: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that Government has launched the GPS Aided Geo Augmented Navigation (GAGAN) system which would make airlines operations more efficient and cut down costs as it reduces separation between aircrafts, increases air safety and fuel efficiency, if so, the details thereof; and

(b) whether it is also a fact that Government would encourage States and other departments to avail the GAGAN system as its use is just not confined to aviation, both civil and military purposes, but in other areas such as surface transport and agriculture, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes, Sir. GPS- Aided Geo Augmented Navigation (GAGAN) system has been fully operationalized from May 2015 and is capable of providing Navigation Services to Departure, en-route and landing operation to suitable equipped aircraft. The GAGAN System provides very accurate and high level of integrity satellite signals for precision air navigation over the entire Indian airspace. The GAGAN system enables aircraft to fly direct routes facilitating reduction of fuel and increase in efficiency.

(b) Yes, Sir. Government has constituted an Inter-Ministerial Group with a vision to use GAGAN system in Non-Aviation Sector such as Railways, Road Transport, Shipping, Defence, Science and Technology, Mining, Agriculture etc.

Making AI the most preferred Airline among flyers

2427. DR. K.P. RAMALINGAM: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that Air India cancelled their flights on an average of 2 per cent between June, 2014 and May, 2015;

(b) whether it is also a fact that Air India's flights were on time only 71.7 per cent of the total time, the lowest out of all the major airlines;

(c) whether it is also a fact that there is a perception among passengers that Air India is still better than all other airlines in the private sector considering many flexibilities being offered by it to the travellers such as food on board, courtesy, accommodating even at the last moment of flight departure, etc.; and

(d) what are the other steps being taken by Government to make Air India the most preferred airline among the flyers?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) During the period June 2014 to May, 2015, Air India's cancelled on an average 1.6% of its flights

(b) The On Time Performance (OTP) of Air India flights for the period June, 2014 to May, 2015 is 72.3%.

(c) Air India has won many awards for its service and performance. For the year 2014, it has won the Economics Times Best Brand award for airline category, Readers Digest Trusted Brand Gold Award and the International Quality Crown Award - by the Selection Committee of Business Initiative Directions, Spain.

(d) Air India has taken following initiatives in the last one year to enhance customer appeal and satisfaction. It has replaced its old aging fleet with new aircraft. Air India has inducted state of the art B-787 Dreamliner aircraft on many international and some domestic routes. In July, 2014, Air India has joined the prestigious Star Alliance. Now it is able to offer more itinerary choices to its passengers covering 1,269 destinations in 193 countries around the world. Further, the On Time Performance of the company has improved over the time.

International Airport in Chhattisgarh

†2428. DR. BHUSHAN LAL JANGDE: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the problem in place to declare the only airport situated in Chhattisgarh State as International Airport, and when a declaration in this regard will be made;

(b) whether it is being considered upon to increase the frequency of Air India flights from New Delhi to Raipur which is only one at present; and

(c) whether the runway available at Jagdalpur, Ambikapur and Bilaspur in Chhattisgarh State will be upgraded into airports so that regular domestic flights are operated from there?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Declaration of an airport as International Airport depends upon the traffic potential and the demand from airlines for operation of international flights as well as the availability of the facilities like Runway length of about 9000 feet to cater to medium capacity long-range aircraft or equivalent type of aircraft, scope for extending the runway length further as per future requirements like for Airbus A330, availability of Ground Lighting Facilities and Instrument Landing System for operation of aircraft at night and availability of Customs, Immigration,

†Original notice of the question was received in Hindi.

Health and Animal and Plant Quarantine services. The draft Civil Aviation Policy formulated by the Government also envisages promotion of the six metro airports at Delhi, Mumbai, Chennai, Kolkata, Bangalore and Hyderabad as international hubs to serve as the main access points for international travel to and from India, as this is essential for developing domestic civil aviation.

(b) Flight operations in domestic sector have been deregulated and the airlines are free to operate anywhere in the country subject to Route Dispersal Guidelines (RDG) issued by the Government. However, it is upto the airline operators to provide air services to specific places depending upon the traffic demand and commercial viability.

(c) Development/upgradation of airports is a continuous process and is undertaken by Airports Authority of India (AAI) from time to time depending on the availability of land, commercial viability, socio-economic considerations, traffic demand / willingness of airlines to operate to/from such airports, etc. Ambikapur and Jagdalpur airstrips belong to the State Government of Chhattisgarh and AAI does not intend to develop these airstrips due to unviability of operations. Bilaspur airstrip belongs to AAI and Ministry of Defence (MoD) has desired for transfer of the Bilaspur airstrip to Army for joint user development, which is subject to signing of MoU between Indian Army (MoD) and AAI (Ministry of Civil Aviation).

Development of Airports at proposed Smart Cities

2429. SHRI K. R. ARJUNAN: Will the Minister of CIVIL AVIATION be pleased to state whether Government has any plan to develop airports at the cities selected for Smart cities programme of the Government, if so the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): No, Sir.

Complaints against Airlines

2430. SHRI BALWINDER SINGH BHUNDER: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether there has been a massive increase in number of complaints against airlines during the last four months;

(b) if so, the number of complaints received during that period pertaining to staff behaviour, lost/damaged baggage, refund cases, poor catering, fare structure, misbehaviour with passengers, and delay of flights etc.; airlines-wise;

(c) whether complaints received from passengers are not resolved to their satisfaction and are closed; and

(d) if so, the action plans of DGCA on such complaints being resolved to the satisfaction of passengers?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) No such trend has been observed from the data of complaints received during last four months

(b) Does not arise.

(c) and (d) Under the provision of the existing regulation, aggrieved passenger is required to lodge his/her complaint with the airline for redressal. If the passenger chooses to forward his/her complaint with the Directorate General of Civil Aviation, same is forwarded to the concerned airlines for immediate redressal directly with the complainant. Scheduled domestic airlines are required to appoint and display the contact details of their Nodal Officer and Appellate Authority on their website for redressal of the passenger grievance within stipulated time period. If the airlines fail to fulfill their obligations, passenger may complaint to the statutory bodies set up under applicable laws. The details of complaints received and redressed during the last four months is given in the Statement.

Statement

Details of complaints received and redressed during the last four months

Airline	Total Complaint	Redressal Status	
		Closed	Open
1	2	3	4
March 2015			
Air Costa	3	3	—
Air Asia	12	12	—
Vistara	2	2	—
Go Air	325	325	—
IndiGo	198	197	1
Spicejet	207	207	—
Jet Airways + JetLite	225	225	—
Air India (Dom)	222	136	86
TOTAL	1194	1107	87
April 2015			
Air Costa	7	7	—
Air Asia	10	10	—

1	2	3	4
Vistara	1	1	—
Go Air	148	148	—
IndiGo	212	212	—
Spicejet	198	197	1
Jet Airways + JetLite	210	208	2
Air India (Dom)	149	98	51
TOTAL	935	881	54

May 2015

Air Costa	5	6	—
Air Asia	14	14	—
Vistara	1	1	—
Go Air	68	68	—
IndiGo	191	191	—
Spicejet	187	187	—
Jet Airways + JetLite	211	211	—
Air India (Dom)	173	108	65
Air Pegasus	9	9	—
TOTAL	658	793	65

June 2015

Air Costa	4	4	—
Air Asia	14	14	—
Vistara	1	1	—
Go Air	67	67	—
IndiGo	180	180	—
Spicejet	160	160	—
Jet Airways + JetLite	194	194	—
Air India (Dom)	173	110	63
Air Pegasus	26	26	—
TOTAL	319	756	83

Emergency landings at various airports

2431. SHRI AVINASH PANDE: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether some incidents of emergency landings have been reported at various airports of the country during the last three years and the current year;

(b) if so, the details of such incidents reported during the said period, airport-wise along with the reasons therefor;

(c) whether Directorate General of Civil Aviation (DGCA) has received any complaints regarding emergency landings due to engine failure during the said period;

(d) if so, the details thereof along with the action taken by the DGCA thereon; and

(e) the corrective measures taken or being taken by the DGCA in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) During the last three years and the current year, a total of 141 incidents of emergency landings due to medical emergency and technical reasons have been reported to DGCA. The details of incidents are given in the Statement (See below).

(c) and (d) No Sir, no complaints have been received. All the cases of emergency landings due to engine failure are reported by concerned airlines to DGCA.

(e) All incidents except emergency landing due to medical issues are investigated by DGCA/AAIB and also by the PIB (Permanent Investigation Board) of the concerned airlines in association with officers of regional air safety offices depending upon the severity of case. Safety recommendations emanating from the investigation reports are followed up for implementation with the concerned agencies so as to prevent recurrence of similar incidents in future.

Moreover, the accident/incident data is regularly analyzed and based on the analysis, Air Safety Circulars are issued to bring important observations/findings to the notice of the operators to avoid recurrence of such mishaps.

DGCA also carries out the audit of operators as per Annual Surveillance Programme. Recommendations emanating from such reports are followed up with the operator for implementation.

Statement*Details of emergency landing for year 2012*

Sl.No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
1.	03.02.2012	Brussels	Jet Airways	Aircraft landed back at Brussels due medical emergency.	Medical Emergency
2.	19.02.2012	Cochin	AICL	Aircraft diverted to Cochin due medical emergency.	Medical Emergency
3.	05.03.2012	Delhi	Jet Airways	Engine No. 1 vibration followed by increase in Engine No. 1 EGT rise. Bird hit was suspected by the crew.	Emergency Landing The incident occurred due to engine damage.
4.	15.03.2012	Mumbai-Kolkata	Jet Airways	Aircraft diverted to Nagpur due medical emergency on board.	Medical Emergency
5.	03.04.2012	Bangalore	Jet Airways	During cruise, No. 1 engine oil quantity indicated zero and oil pressure was fluctuating and went to red.	Emergency Landing The incident occurred due to broken Engine No. 1 starter clamp.
6.	03.07.2012	Rajkot-Bombay	Jet Lite	Emergency Landing at Bambay due both VHF communication transmission failure due lightening strike.	Emergency Landing The incident was caused as due to lightening strike, Remote Electronic Unit used in the communication circuit was damaged leading to the loss of communication.

Sl.No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
7.	09.07.2012	Nawabshah, Pakistan	Air India Limited	Aircraft was Involved in an incident due overheat warning of all the three hydraulic systems. The snag was encountered at FL350. Aircraft diverted and landed at Nawabshah in Pakistan.	Emergency Landing The cause of incident is attributed to malfunction of a computer called SDAC.
8.	26.08.2012	Mumbai	Air India	Aircraft diverted to Mumbai due medical emergency.	Medical Emergency
9.	11.09.2012	Nagpur	Spice Jet	Flight diverted to Nagpur owing to Medical emergency.	Medical Emergency
10.	05.10.2012	Bombay	Spice Jet	Flight diverted to Bombay owing to medical emergency on board.	Medical Emergency
11.	01.11.2012	Abu Dhabi	Spice Jet	Aircraft diverted to Abu Dhabi owing to death on board.	Medical Emergency
12.	13.11.2012	Bagdogra-Delhi	Spice Jet	One Passenger had sudden arrest and later she was declared dead by the doctor.	Medical Emergency
13.	19.11.2012	Hyderabad	Indigo	Aircraft diverted to Hyderabad due to medical emergency.	Medical Emergency
14.	24.11.2012	Muscat	Jet Airways	Flight was diverted to Muscat due to medical emergency & emergency landing was made.	Medical Emergency

15.	28.11.2012	Ahmedabad	Spice Jet	Flight diverted to Ahmedabad owing to medical emergency on board.	Medical Emergency
16.	29.11.2012	Lucknow	Indigo	Aircraft diverted to Lucknow on priority due sick person on board having heart problem.	Medical Emergency
17.	15.1.2012	Lucknow	Indigo	Aircraft Diverted due to medical emergency	Medical Emergency
18.	18.12.2012	Ahmedabad	Spice Jet	Flight diverted to Ahmedabad owing to medical emergency on board.	Medical Emergency
19.	25.12.2012	Cochin	Spice Jet	Aircraft made a priority landing due sick person on board.	Medical Emergency

Details of emergency landing for year 2013

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
1.	12.01.2013	Hyderabad	Spice Jet	Aircraft Diverted to Hyderabad due to Medical Emergency.	Medical Emergency
2.	16.01.2013	Mumbai	Spice Jet	Priority landing at Mumbai due to Medical Emergency.	Medical Emergency
3.	26.01.2013	Kolkata	Jet Airways	Air turn back and emergency landing was made due medical emergency.	Medical Emergency
4.	02.02.2013	Kolkata	Air India	Priority landing due to medical emergency.	Medical Emergency

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
5.	06.02.2013	Mangalore	AICL	An overweight landing was carried out due to medical emergency at Mangalore.	Medical Emergency
6.	13.02.2013	Dubai	Jet Airways	Aircraft demanded priority landing and had an Air Turn Back due to medical emergency.	Medical Emergency
7.	15.02.2013	Hyderabad	Jet Airways	Scheduled flight from Shamshabad to Chennai. Returned to Shamshabad due sick infant on board.	Medical Emergency
8.	21.02.2013	Bangalore	Spice Jet	Priority landing at BLR owing to medical emergency on board.	Medical Emergency
9.	22.02.2013	Cochin	Jet Airways	Reported medical emergency for runway 09 and carried out missed app at 0514 IST while carrying out VOR/DME ARC APP, due high altitude	Medical Emergency
10.	23.02.2013	Kolkata	Indigo	At ETA 0236 UTC ATC was requested for priority landing due to sick person on board.	Medical Emergency
11.	04.03.2013	Nagpur	Indigo	The pilot reported that during cruise at FL360 about 60-70 NM from Nagpur lead cabin attendant informed that an infant on board had a medical emergency. A doctor on board attended	Medical Emergency

				the infant and advised that the infant needs an immediate medical assistance. The flight diverted to Nagpur and landed safely.
12.	10.03.2013	Hyderabad	Air India	During climb while passing FL110, Engine 2 EGT over limit followed by Engine-2 fail. Emergency Landing The incident occurred due to damaged retaining nut of PMA drive gear.
13.	16.03.2013	Lucknow	Spice Jet	Diverted to Lucknow due medical emergency. Medical Emergency
14.	21.03.2013	Lucknow	Air India	Aircraft declared medical emergency. Medical Emergency
15.	31.03.2013	Delhi	Spice Jet	Priority landing at DEL owing to medical emergency on board. Medical Emergency
16.	18.04.2013	Kolkata	Jet Airways	Aircraft made a medical emergency landing due to sick person on board. Medical Emergency
17.	20.04.2013	Hyderabad	Indigo	Aircraft made priority landing on runway 09R due medical emergency. Medical Emergency
18.	18.12.2013	Shamshabad	Air India	Aircraft reported returning to Shamshabad due one engine failure. Aircraft requested priority landing and was approved. The incident was caused due to malfunction of engine computer. Aircraft reported PAN PAN. Aircraft landed safely

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
19.	25.12.2012	Guwahati	Indigo	Aircraft diverted to Guwahati due bad weather at Agartala and while in the sequence to land at Guwahati requested for priority landing due sick person on board. Aircraft landed at 1713 IST. Diversion due Medical Emergency.	Medical Emergency
20.	13.05.2013	Lucknow	Indigo	Death on board incident was reported. During Push back at Lucknow Lead Cabin Attendant informed that a lady passenger seated on Seat No. 30C was not feeling well. The Lady passenger was attended by an on-board doctor and declared dead by the Doctor. The aircraft return back to bay.	Medical Emergency
21.	13.05.2013	Bhopal	Air India	The flight was diverted to Bhopal as cockpit door got jammed and did not open. Over weight landing was carried out.	Emergency Landing The door got jammed due to a screw trapped between the cockpit door lower edge and the floor.
22.	21.05.2013	Delhi	Indigo	Aircraft was involved in a Precautionary Landing at Delhi due to Medical Emergency on board. The sick Passenger was attended by an on board Doctor. Post landing the sick passenger was offloaded at Delhi	Medical Emergency

23.	04.06.2013	Pune-Delhi	Indigo	One passenger seated on Seat No. 26F was not feeling well. The sick passenger was attended by an doctor on-board and provided with medical aid. ATC Vadodara was informed, the aircraft diverted to Vadodara and landed safely. The sick passenger expired on board.	Medical Emergency
24.	17.06.2013	Kolkata	Spice Jet	Air turn back owing to medical emergency onboard	Medical Emergency
25.	17.06.2013	Kolkata	Spice Jet	Returned midway to Kolkata due sick person on board while returning reported sick person is no more.	Medical Emergency
26.	27.06.2013	Delhi	Alliance Air	Aircraft was involved in emergency landing due pilot reported Total Loss of controls, controls jammed, wrong indication of icing and trimming.	Engineering emergency The incident was caused due to flight control malfunction. However exact cause could not be ascertained.
27.	01.07.2013	Kolkata	Jet Airways	Aircraft carried out priority landing due sick person on board (heart problem).	Medical Emergency
28.	20.07.2013	Hyderabad	Jet lite	Flight diverted to Hyderabad because guest seated on 24E suffered Heart Attack.	Medical Emergency

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
29.	21.07.2013	Mumbai	Indigo	An incident of death on board happened during flight and its diverted back to BOM, landed at 1145 hrs and The flight operated after off loading the medical case along with fellow passengers and change of aircraft.	Medical Emergency
30.	21.07.2013	Mumbai to Chennai	Indigo	As per the commander's report, at cruise altitude approximately 37000 ft the lead Cabin attendant informed that an infant was not responding to his parents. The pilot decided to land back at Mumbai declaring medical emergency on board. On arrival at Mumbai, the sick infant was attended by an Airport Doctor and declared dead.	Medical Emergency
31.	18.08.2013	Delhi	Air India	Aircraft had an emergency landing at DEL due yellow hydraulic system loss. Aircraft was towed from runway to bay No: R 09. The following snags were reported: - 1: Hyd Yellow ENG 2 Pump LO PR, 2. After 12 min HYD yellow reservoir LO level. Due HYD Y LO level nose wheel steering inoperative.	Emergency landing The incident was caused due to the leakage of yellow hydraulic system.

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| 32. | 03.09.2013 | Delhi | Jet Airways | Report "smoke warning lights on" but physically checked no smoke in Cockpit and requested Runway 11. Mixed mode operation Runway 28/29 was in progress, Aircraft accommodated on Runway 11. Full emergency was declared Aircraft landed safely on Runway 11 at 0030UTC. At 0032UTC, Aircraft reported all operations normal.. | Emergency landing
The incident was caused due to Spurious smoke warning. |
| 33. | 24.09.2013 | Ranchi | Indigo | Aircraft returned to Ranchi FM 74 NM RRC due sick person on board, Aircraft landed safely at time 0505 UTC. | Medical Emergency |
| 34. | 24.09.2013 | Lucknow | Jet Airways | Aircraft made priority landing due sick person on board | Medical Emergency |
| 35. | 29.09.2013 | Varanasi | Spicejet | Mr. Mohammad Akhtar occupying seat no. 23D was not well and fell unconscious during flight. Immediately oxygen was administered and paging for onboard doctor was carried out. As no doctor was onboard AED and CPR was administered by the Cabin. Pilot in Command was appraised about the situation. In view of the above Pilot in Command requested for ambulance on | Medical Emergency |
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Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
36.	04.10.2013	Hyderabad	Indigo	arrival at VNS station. After landing at VNS, the Passenger was examined by airport authority doctor. The doctor declared him brought dead. The body was taken for the postmortem.	Medical Emergency
37.	12.10.2013	Delhi-Hyderabad	Spicejet	Flight from Shamshabad to Kolkata returned from 197NM east of Hyderabad due medical emergency. During flight, passenger complained of restlessness. He was sweating and panting. Cabin crew immediately paged for a doctor. As the passenger's condition was not improving, an on-board doctor advised PIC to land at the nearest airport. The flight was diverted to Bhopal.	Medical Emergency
38.	29.10.2013	Cochin	AICL	Aircraft made a priority landing on Rwy 09 due to a sick person on board.	Medical Emergency
39.	29.10.2013	Lucknow	Indigo	Flight diverted to Lucknow due to medical emergency on board.	Medical Emergency
40.	07.11.2013	Hyderabad	Indigo	Aircraft diverted to Shamshabad due medical emergency.	Medical Emergency

41.	07.11.2013	Chennai-Delhi	Indigo	Flight was diverted to Hyderabad due to medical emergency on board.	Medical Emergency
42.	07.11.2013	Bangalore	Indigo	Flight was diverted to due to medical emergency on board.	Medical Emergency
43.	08.11.2013	Nagpur	Indigo	Flight was diverted to due to medical emergency on board.	Medical Emergency
44.	09.11.2013	Kolkata	Jetlite	Made priority landing due sick person on board.	Medical Emergency
45.	09.11.2013	Tashkent	Air India	Aircraft was diverted to Tashkent due to medical emergency. After landing no-5,6,9 tire pr zero & no: 10 wheel rivets (as reported by captain) sheared. Brake temp went to 5.7 thereby in high energy stop caution range. Aircraft declared AOG at Tashkent.	Medical Emergency
46.	12.11.2013	Mumbai	Indigo	During Cruise the lead cabin attendant informed to Commander that a lady passenger seated on row 24E was not feeling well. Cabin attendant paged for Doctor but there was no Doctor on board available. The sick passenger was monitored by cabin attendant throughout the flight. During Descent the sick passenger was feeling dizzy. ATC was	Medical Emergency

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
				informed and requested for priority and medical assistance on arrival at Mumbai. The flight landed safely at Mumbai.	
47.	14.11.2013	Agartla	Air India	Aircraft returned to bay after lining up due medically unfit passenger on board.	Medical Emergency
48.	10.12.2013	Delhi	Air India	Flight was planned for FL320, but were restricted to FL280 by ATC, they burned excess fuel. Finding no holding fuel, on suggestion of ATC they declared fuel emergency.	Emergency Landing The incident was caused due to fuel emergency.
49.	16.12.2013	Delhi	Air India	Aircraft made an emergency landing at Jaipur due pressurization failure and subsequent deployment of oxygen masks.	Emergency Landing The incident was caused due to leakage in duct joint connecting ACM compressor of MHE in Pack 1.
50.	20.12.2013	Hyderabad	Spice jet	During cruise cabin crew informed captain that passenger seated on 8E Mr. Bolle Devaiah had epileptic fit. Cabin crew immediately paged for a doctor. The passenger was attended by Doctor onboard. The Pilot in Command requested priority landing at HYD.	Medical Emergency

51	22.12.2013	Kolkata	Spice Jet	After reaching top of climb cabin crew informed captain, regarding a sick child onboard whose pupils were dilated. Pilot in Command declared medical emergency and returned back to Kolkata.	Medical Emergency
52.	28.12.2013	Bangalore	Indigo	Aircraft made a priority landing due to a sick person on board.	Medical Emergency

Details of emergency landings for year 2014

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
1.	2.01.2014	Abu Dhabi	AICL	Over weight landing due to medical emergency.	Medical Emergency
2.	5.01.2014	Jaipur	Air India	Aircraft made an emergency landing at Jaipur at 1540 hrs. Aircraft had considerably veered off the runway while landing and went into kachha field and was finally stopped on the runway. All PAX were safe and were evacuated.	Emergency landing The occurrence has been classified as "Serious incident" by MoCA/AAIB and is under investigation by a committee of inquiry appointed by MoCA/AAIB.
3.	5.01.2014	New Delhi	Spice Jet	Aircraft diverted to Jaipur due to visibility below minima at Delhi. Aircraft landed below minima at Delhi due to low fuel.	Emergency landing The occurrence has been classified as "Serious incident" by MoCA/AAIB and is under investigation by a committee of inquiry appointed by MoCA/AAIB.

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
4.	6.01.2014	New Delhi	Indigo	Aircraft landed back at Delhi due to medical emergency on board.	Medical Emergency
5.	11.01.2014	Madurai	Spice Jet	During flight a lady passenger rushed to AFT lavatory and informed cabin crew that she will be in the Lav throughout the flight and not to disturb her. When cabin crew asked the reason, she informed that she is in her third month of pregnancy and she is bleeding. Cabin crew paged for a doctor, but no doctor was available onboard. The passenger was administered oxygen and was given necessary assistance onboard.	Medical Emergency
6.	16.01.2014	Port Blair	Spice Jet	During approach cabin crew reported unwell. A priority landing was carried.	Medical Emergency
7.	16.01.2014	Kolkata	Air India	Aircraft requested for priority landing at 1500 UTC due technical.	Emergency Landing The incident was caused due to bird strike.
8.	20.01.2014	Jaipur	Indigo	Aircraft diverted to Jaipur due to medical emergency on board.	Medical Emergency
9.	21.01.2014	Madurai-Dubai	Spice Jet	During cruise, one lady pax seated on 25A was having difficulty in breathing.	Medical Emergency

Cabin crew immediately paged for doctor. The passenger was attended by the doctor available onboard and oxygen was administered. After examining the passenger, doctor informed cabin crew that the pulse is normal however the pulse volume is irregular. Doctor told cabin crew that there may be a chance of cardiac problem.

10.	22.01.2014	Mumbai	Spice Jet	Aircraft was diverted to Bombay owing to medical emergency onboard.	Medical Emergency
11.	13.02.2014	Lucknow	Spice Jet	Flight diverted to Lucknow owing to medical emergency on board.	Medical Emergency
12.	18.02.2014	Raipur	Indigo	Aircraft diverted to Raipur due medical emergency.	Medical Emergency
13.	5.3.2014	Mumbai	Indigo	Aircraft landed back to Mumbai due to medical emergency on board.	Medical Emergency
14.	15.03.2014	Delhi	Spice Jet	Aircraft declared medical emergency returned to Delhi and landed safely.	Medical Emergency
15.	17.03.2014	Keflavik, Iceland	Air India	Aircraft diverted to Keflavik, Iceland due to Passenger Medical emergency.	Medical Emergency

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
16.	27.03.2014	Visakhapatnam	Indigo	Aircraft diverted to Visakhapatnam due to medical emergency on board.	Medical Emergency
17.	27.03.2014	Bhubaneswar	Indigo	Aircraft diverted to Bhubaneswar from enroute due medical emergency.	Medical Emergency
18.	3.04.2014	Mumbai	Spice Jet	Priority landing was requested at Mumbai owing to medical emergency onboard.	Medical Emergency
19.	12.04.2014	Muscat	AICL	At FL 270, wheel well fire warning came. Emergency was declared and diverted to Muscat.	Emergency Landing The cause of the incident was faulty detector.
20.	17.04.2014	Hyderabad	Jet Airways	Aircraft made diversion to Hyderabad airport due to medical emergency.	Medical Emergency
21.	22.04.2014	Chennai	Spice Jet	During flight, passenger seated on 31 D had a mild cardiac attack. As such, an air turn back was carried out. The passenger was deplaned at Chennai.	Medical Emergency
22.	27.04.2014	Delhi	Spice Jet	During descent, one cabin crew experienced stomach ache. PIC was informed and priority landing was carried out at Delhi.	Medical Emergency

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| 23. | 22.05.2014 | Delhi | Spice Jet | Air Turn Back owing to medical emergency on board. | Medical Emergency |
| 24. | 23.06.2014 | Chandigarh | Go Air | Aircraft return back to Chandigarh Airport due to medical. | Medical Emergency |
| 25. | 25.07.2014 | Kolkata | Jet Airways | Aircraft returned to Kolkata made priority landing, due medical emergency. | Medical Emergency |
| 26. | 30.07.2014 | Agartala | Spice Jet | Aircraft returned to Agartala due medical emergency. | Medical Emergency |
| 27. | 30.07.2014 | Hyderabad | Indigo | Aircraft requested diversion and priority landing at Hyderabad due to medical emergency. | Medical Emergency |
| 28. | 15.08.2014 | Bangalore | Spice Jet | Air turn back owing to medical emergency onboard. | Medical Emergency |
| 29. | 16.08.2014 | Mumbai | Indigo | A passenger opened the overhead compartment and a laptop bag fell on the head of another passenger. The passenger started bleeding and was being attended to by doctors who were on flight. After about 10 minutes the passenger was feeling dizzy and was shivering. A priority landing was made. | Medical Emergency |
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Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
30.	20.08.2014	Kolkata	Jet Airways	Aircraft Landed at Kolkata due medical emergency	Medical Emergency
31.	21.08.2014	Cochin	Air India	Engine No. 2 fire warning came after take-off. Emergency was declared. Engine No. 2 EGT over limit with loud bang noise was heard. Uneventful landing carried out at Cochin.	Emergency Landing The occurrence has been classified as "Serious incident" by MoCA/AAIB and is under investigation by a committee of inquiry appointed by MoCA/AAIB.
32.	01.09.2014	Kolkata	Air India	Aircraft diverted to Kolkata due to medical emergency.	Medical Emergency
33.	06.09.2014	Toronto	Air India	Number 2 engine in-flight shut down due to low oil quantity and low oil pressure.	Emergency Landing The cause of inflight Shut Down was incorrect installation of Engine Driven Pump drive shaft on the Accessory Gear Box.
34.	16.09.2014	Delhi	Spice Jet	The aircraft was involved in an air turn back due to in flight shut down of Engine No. 1.	Emergency Landing The incident occurred due to Fuel leak from the flange of HMU outlet to fuel flow meter.
35.	01.12.2014	Ahmedabad	Indigo	Passenger suffered Epileptic Attack during flight. Flight diverted to Ahmedabad.	Medical Emergency

36.	04.12.2014	Kolkata	Indigo	Pregnant passenger unable to breathe properly. Return back to Kolkata.	Medical Emergency
37.	01.12.2014	Delhi	Go Air	On approach one passenger fell unconscious. On board Doctor attended. Emergency declared for landing to provide immediate medical attention.	Medical Emergency
38.	04.12.2014	Delhi	Air India	Passenger declared dead by a doctor on board. Aircraft proceed to Delhi. Accordingly was flight continued to VIDP.	Medical Emergency
39.	27.12.2014	Delhi	Air India	While descending into Delhi, the cabin crew informed that a passenger suddenly started screaming with unbearable pain in her head. A medical emergency was declared and a priority landing was carried out at Delhi.	Medical Emergency

Details of emergency landings for year 2015

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
1.	04.01.2015	Mumbai	IndiGo	Passenger had respiratory problem. Flight diverted to Mumbai.	Medical Emergency

Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
2.	31.01.2015	Bhubaneswar	IndiGo	Passenger needed medical assistance. Flight diverted to Bhubaneswar.	Medical Emergency
3.	10.02.2015	Bhubaneswar	IndiGo	Passenger had fits on-board. Flight diverted to Bhubaneswar.	Medical Emergency
4.	20.02.2015	Bangalore	IndiGo	Landed back at Bangalore due passenger sickness on-board.	Medical Emergency
5.	13.01.2015	Goa	Spice Jet	Passenger seated on 23B complained about short breath and mild chest pain. The passenger was attended by a doctor onboard and oxygen was administered by the cabin crew. However there was no improvement in her condition. On the advice of the doctor on board, the PIC decided to return to GOI. Medical emergency was declared and requested for ambulance on arrival.	Medical Emergency
6.	20.02.2015	Heathrow	Jet Airways	Medical emergency landing due passenger complaining of chest pain, not subsiding after medication.	Medical Emergency
7.	26.02.2015	Hong Kong	Jet Airways	Priority landing due medical emergency. Passenger found unconscious and not recovering.	Medical Emergency

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| 8. | 10.02.2015 | Helsinki | Air India | Aircraft diverted to Helsinki due to Medical Emergency. | Medical Emergency |
| 9. | 05.03.2015 | Tashkent | Air India | Aircraft diverted to Tashkent due to Medical Emergency. | Medical Emergency |
| 10. | 14.02.2015 | Mumbai | Air India | A passenger was feeling unwell and a nurse on board examined him and according to her his pulse was dropping and he has been given Sorbitrate and he needed medical assistance. He already had a heart condition according to his family. Crew declared medical emergency to Bombay. | Medical Emergency |
| 11. | 26.05.2015 | Muscat | AICL | In cruise, the cabin crew informed that a passenger was vomiting blood. Doctor was paged and he volunteered to help. The pax continued to vomit blood and collapsed after which the cabin crew gave him CPR to revive him. As advised by doctor, aircraft was diverted to Muscat for immediate medical attention. All diversion SOP was followed and a safe landing was performed in Muscat where immediate medical assistance was provided as soon as aircraft parked. | Medical Emergency |
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Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
12.	27.05.2015	Mangalore	AICL	During the flight CIC reported that one of the passengers is vomiting Blood and in severe pain. Cabin crew paged for a Doctor however there was no Doctor. Due to a bad condition of passenger aircraft divert to IXE.	Medical Emergency
13.	12.03.2015	Bengaluru	IndiGo	landed back to Bengaluru due to medical emergency on board. On arrival sick passenger was offloaded and provided with medical assistance	Medical Emergency
14.	14.03.2015	Guwahati	IndiGo	Passenger seated with infant on 26C informed that infant was not well. AN onboard Doctor checked the infant and diagnosed that he was not responding to the stimulus. The sick infant was provided with CPR and oxygen. After landing at Guwahati, sick infant was handed over for treatment.	Medical Emergency
15.	29.03.2015	Bhubaneswar	IndiGo	Flight diverted to Bhubaneswar due to medical emergency on board. Approx. crossing Bhubaneswar lead Cabin Attendant	Medical Emergency

- informed that there was a patient suffering from Cardiac problem. The sick passenger was provided with CPR and Oxygen.
16. 23.04.2015 Bengaluru IndiGo Flight landed back to Bengaluru due to medical emergency onboard. Medical Emergency
17. 05.05.2015 Chennai IndiGo Chennai Approach was requested for a priority landing due to a medical emergency. Passenger on board who was having an Epileptic fit and was traveling alone. The Passenger was semi-conscious to un-conscious at the time and there was no doctor on board. Medical Emergency
18. 15.06.2015 Ahmedabad IndiGo Flight diverted to Ahmedabad due to medical emergency onboard. Medical Emergency
19. 11.03.2015 Delhi Spice Jet During flight passenger Mr. Manoj Kumar seated on 19A complained about acidity and heaviness in the chest, Doctor on board attended the passenger. On doctor's advice a priority landing was carried out at Delhi. On arrival at DEL, the passenger was transferred to Airport Hospital in ambulance. Medical Emergency
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Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
20.	12.03.2015	Delhi	Spice Jet	During flight passenger Mr. Anil Jain traveling with his wife was coughing and having difficulty in breathing. Cabin crew immediately paged for doctor onboard but no doctor was available. Oxygen was administered. During descend passenger suddenly became unconscious, CPR was given by the cabin crew and AED was also used. Priority landing was carried out at DEL. On arrival at DEL the passenger was by airport medical team. The passenger was declared dead at 04:50 hrs.	Medical Emergency
21.	9.06.2015	Mumbai	Spice Jet	During descent, passenger Mr. Protik Batabyl seated on 11D reported serious chest pain. The cabin crew immediately attended the passenger, administered oxygen. Onboard doctor was not available. The PIC was informed about the situation. On PIC discretion priority landing was carried out at BOM I. After landing at BOM the passenger was handed over to airport medical team.	Medical Emergency

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| 22. | 11.06.2015 | Madurai | Spice Jet | <p>During cruise the passenger seated on 18B Mr. Velayudham was seating profusely and his body was cold. The passenger was attended by Dr. Ishmath Ali available on board and advised cabin crew to give Lemon and sugar to the passenger. On PIC and doctor discretion the flight was diverted to the nearest airport Madurai. After landing at Madurai the passenger was deplaned and given first aid in the ambulance and further transferred to hospital.</p> | Medical Emergency |
| 23. | 14.06.2015 | Pune | Jet Airways | <p>Pax was crying, shouting and complained og stomach pain. There was no doctor on board. The condition of the passenger further deteriorated as she started to complain of chest pain which she was not able to bear and said would die if we don't land back immediately. Cockpit crew decided to divert to Mumbai.</p> | Medical Emergency |
| 24. | 13.07.2015 | Delhi | Jet Airways | <p>Pax was not feeling well. Priority landing executed at DEL.</p> | Medical Emergency |
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Sl. No.	Date	Place	Operator	Brief Description	Type of Emergency/Cause
25.	23.03.2015	Delhi	Air India	During descent, CIC informed to Capt. that passenger on 24D not well. Doctor was paged for and was available on board. Doctor felt that the passenger had a mild attack. Medical emergency was declared. Flight aircraft landed uneventfully at DEL. After landing, doctor checked the passenger. As per doctor, patient seemed to have stabilised. Deboarded from aircraft for further check-up.	Medical Emergency
26.	31.05.2015	London	Air India	Due to pax medical emergency aircraft turned back to London.	Medical Emergency
27.	18.03.2015	Chennai	Air India	Priority landing at Chennai due medical emergency.	Medical Emergency
28.	14.03.2015	Lucknow	Air India	Diverted to Lucknow due medical emergency.	Medical Emergency
29.	11.03.2015	Indore	IndiGo	FWD Cargo smoke warning followed by AFT cargo smoke warning.	Emergency Landing Firing Agent 1 in the forward compartment despite the warning being in the AFT cargo compartment was the probable cause of further smoke warning in the FWD Compartment.

30.	13.06.2015	Delhi	IndiGo	Due to prolong holding overhead delhi, crew declared fuel emergency (May Day) and landed safely at Delhi as Lucknow had no parking space and Jaipur had dust storm.	Emergency Landing The incident occurred due to fuel emergency.
31.	07.05.2015	Delhi	Jet Airways	During cruise, Capt was incapacitated. First along with a A 330 Capt, who was travelling ACM, landed the aircraft safely at DEL.	Emergency Landing The incident occurred due to pilot incapacitation.

Issues of AEPs to non-entitled persons

2432. SHRI P. BHATTACHARYA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the number and details of Airport Entry Passes (AEPs) issued by the Civil Aviation (Security) during the year 2015, so far, Ministry-wise/Department-wise;

(b) the number of Airport Entry Passes (AEPs) with endorsement of Security Hold Area/Beyond Security Check Points, Ministry-wise/Department-wise; and

(c) whether it is also a fact that some Airport Entry Passes (AEPs) are issued to the Staff of Government departments and staff of some MPs, upto the Security Hold Area/Beyond Security Check Points, who are not entitled for the same, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) The information is being compiled and will be laid on the Table of the House.

Monitoring of CSR activities

†2433. SHRI PRABHAT JHA: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) whether it is mandatory for the profit-making companies, under the present Company Law, to spend two per cent of their three years' net profit on the activities relating to Corporate Social Responsibility (CSR) in every financial year, if so, the details thereof; and

(b) whether these profit-making companies are making contribution in CSR fund by following this law in letter and spirit and whether it is being regularly monitored, if so, the details thereof?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) and (b) Under Section 135 of the Companies Act, 2013, profit making companies above a certain threshold are required to spend at least 2 percent of their average net profit made during the three preceding financial years, on CSR activities or specify reasons for failure to spend. The year 2014-15 being the first year of implementation of CSR under the legislation, it is premature to assess the level of compliance under the provision of the Act.

†Original notice of the question was received in Hindi.

Action taken by CCI on steep hikes in airfares

2434. SHRI RAJ BABBAR: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) whether it is a fact that the Competition Commission of India (CCI) is looking into the issues of steep hike in fares during festival seasons and summer vacations by airlines, if so, the details thereof; and

(b) whether Government proposes to impose penalty on airlines found to be involved in air fare cartelisation during the ensuing Diwali season, if not, the reasons therefor?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) and (b) Competition Commission of India (CCI), *suomoto*, instituted a case on allegations that airlines had raised fares together around Diwali season of 2010. The case was closed in January, 2012 due to lack of evidence of anti-competitive practices. However, in a *suomoto* case (number 03/2015) regarding cartelisation in passenger fares by airlines, CCI has directed an investigation by the Director General, CCI. This case, though, does not pertain to festive season hike.

Regulatory authority for mutual benefit funds

2435. SHRI MAHENDRA SINGH MAHRA: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) who is Regulatory and Registering Authority for Mutual Benefit Funds in India;

(b) whether Ex-servicemen Mutual Benefit Fund, 152, Shivnath Shastri Road, P.O. Harinavi, South 24 Parganas, Kolkata-700148 is a duly registered body;

(c) if so, the details of profile of the said Mutual Fund; and

(d) if not, what action Government is going to take to protect the interests of the stakeholders and beneficiaries of the Fund and what actions are being initiated against the promoters of the fund?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) 'Nidhi Companies' which are also known as Mutual Benefit Societies/Funds are regulated under Section 406 of the Companies Act, 2013 read with NIDHI Rules, 2014. These companies are registered with the Registrar of Companies within whose jurisdiction their registered office is situated.

(b) No company is registered under the Companies Act, 1956/2013, by the name Ex-servicemen Mutual Benefit Fund in Kolkata nor is an LLP registered under the Limited Liability Partnership Act, 2008, by this name.

(c) and (d) Does not arise in view of (b) above.

Location of foreign firms in the country

2436. SHRI C. M. RAMESH: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) the number of foreign firms functioning in the country;

(b) whether Ministry has ever observed that 91 per cent of all foreign firms in India are located in just five States;

(c) whether it is also a fact that undivided Andhra Pradesh has one of the poorly located foreign firms;

(d) whether it is also a fact that after bifurcation, the residency State of Andhra Pradesh is almost at the bottom of the table as far as having foreign firms are concerned; and

(e) if so, how the Ministry would help Andhra Pradesh in getting foreign firms as it has geographical, manpower and other advantages?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY):

(a) to (d) As on 6th August, 2015, there were 3,309 foreign companies functioning in the country. About 91 per cent of all these foreign companies have their registered addresses in states of Delhi, Maharashtra, Karnataka, Haryana and Tamil Nadu. In undivided Andhra Pradesh, 73 foreign companies were active. Of these, 9 foreign companies have registered addresses in the State of Andhra Pradesh.

(e) The Ministry of Corporate Affairs does not deal with decisions relating to location of companies.

Investigation in complaint against DDCA

2437. SHRI HUSAIN DALWAI: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) whether the Serious Fraud Investigating Office (SFIO) has received any complaint regarding Delhi District Cricket Association (DDCA); and

(b) if so, the details thereof, and the action taken by SFIO in this regard?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) and (b) SFIO had forwarded a complaint made by Shri N.C Bakshi, regarding irregularities and

mismanagement in the affairs of The Delhi and District Cricket Association (DDCA) to the Ministry of Corporate Affairs. The Ministry ordered inspection under section 209A of the Companies Act, 1956, into the affairs of DDCA on 28-09-2012. The inspection of DDCA was carried out by a team led by Regional Director (Northern Region) wherein one officer from SFIO was associated. Based on the findings of this inspection, Regional Director (RD)/ Registrar of Companies (RoC) was instructed to take action on violations of sections 36, 150, 166/210, 209(1), 209(3)(b), 211 read with Schedule VI, 217(3), 285, 299, 303, 309, 314 and 211(3A)/(3C) of the Companies Act, 1956 read with Accounting Standards- 5, 15, 18, 19, 22 and 29.

CSR funds of ONGC

2438. SHRI PRAVEEN RASHTRAPAL: Will the Minister of CORPORATE AFFAIRS be pleased to state the details of Corporate Sector Responsibility (CSR) funds made available by ONGC Gujarat and name of the trust or NGO who were granted the above fund during Financial Years 2013-14 and 2014-15?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): The Ministry of Petroleum and Natural Gas has provided the details of funds committed under Corporate Social Responsibility (CSR) initiative of ONGC for the Gujarat State for the financial years 2013-14 and 2014-15 as under:

Financial Year	Amount committed for CSR projects for Gujarat (₹ in crores)
2013-14	34.23
2014-15	26.55
TOTAL	60.78

Grant was committed by ONGC to over 320 NGOs/Trusts for the State of Gujarat for the financial years 2013-14 and 2014-15. The names of the top ten NGOs/ Trusts, in terms of grant sanctioned, are given in the Statement.

Statement

Names of top ten NGOs/Trusts in terms of grant sanctioned

Names of Top Ten NGOs/Trusts granted fund by ONGC during financial years 2013-14 and 2014-15 for CSR in Gujarat

1.	Kendriya Vidyalayas	237971751
2.	SVP Rotary Gen Hospital Ankaleshwar	130000000
3.	Sardar Vallabhbhai Patel Rotary General Hospital	9312000

4.	Traffic Education Trust	8500000
5.	Ahmedabad Janmarg Ltd.	5000000
6.	Government Primary School in Village Mater in Amod Taluka (Distt. Bharuch) in Ankleshwar	4587000
7.	Ahmedabad Municipal Corporation	4466722
8.	Mehsana General Hospital	4250000
9.	Central electronics Limited	3987487
10.	SBI ONGC BR	2041550

Fratricidal incidents in the armed forces

2439. SHRI B.K. HARIPRASAD:

SHRI D.P. TRIPATHI:

Will the Minister of DEFENCE be pleased to state:

(a) whether incidents of fratricide have increased in the Armed Forces due to stress level specially in Army;

(b) if so, the details thereof along with the reasons therefor during each of the last three years and the current year, Service-wise;

(c) whether Government is taking steps to spread awareness among defence personnel and their families about various psycho-social issues that affect their mental health resulting in their violent behaviour;

(d) if so, the details thereof along with the funds allocated and released for the purpose during the said period; and

(e) the effective measures taken / being taken by Government to address the issue?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) Number of fratricide cases in Armed Forces during the last three years and the current year is as under:

Year	Army	Navy	Air Force
2012	1	Nil	Nil
2013	3	Nil	Nil
2014	7	Nil	1
2015 (upto 30.7.2015)			

The possible causative factors for committing fratricide are as under:

- (i) Stress
- (ii) Personal problems
- (iii) Financial problems.

(c) to (e) Government has taken several steps various measures to spread awareness about psycho-social issues and to prevent incidents of fratricide which include psychological counselling by psychological counsellors, conduct of workshops on mental health, conduct of yoga and meditation as part of unit routine, establishing a grievance redressal mechanism, improvement in living and working conditions through provision of better infrastructure and facilities, additional family accommodation, facilities for movement of troops from border areas and liberalized leave policy. These measures are taken within the existing resources and manpower of the armed forces.

Piling up of military cases in civil courts

2440. SHRI VIJAY GOEL: Will the Minister of DEFENCE be pleased to state:

- (a) whether the number of cases involving military matters have been piling up in civil courts, if so, the details thereof and the reasons therefor; and
- (b) whether Government has constituted any committee to look into these complaints, if so, the details thereof?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) Cases are filed in various Civil Courts including Armed Forces Tribunal from time to time on service matters including promotions, pension etc. However, the information regarding number of such cases is not maintained centrally.

(b) A Committee headed by a retired Lieutenant General has been constituted to examine the cases relating to service matters, including pension, pending in various Courts and Tribunals and suggest institutional mechanism for redressal of such grievances.

Killing of BSF jawan by Pakistani troops

2441. SHRI T. RATHINAVEL: Will the Minister of DEFENCE be pleased to state:

- (a) whether it is a fact that Pakistani troops fired at a forward border post in North Kashmir on 9 July, 2015 killing a BSF jawan;
- (b) whether it is also a fact that this is the second killing by Pakistani troops involving BSF jawans; and

(c) whether it is also a fact that the BSF personnel retaliated in which some casualties were reported on the other side of the Line of Control, if so, the details thereof?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) In July, 2015, in two separate incidents of ceasefire violation by Pakistan in Naugam sector in Jammu and Kashmir, two BSF soldiers have been martyred.

(c) Appropriate retaliation to the ceasefire violations, as required, has been carried out by Indian Army/BSF. Casualties on the opposite side of Line of Control could not be ascertained.

Injury of Indian soldiers during military exercise in the UK

2442. SHRI ANIL DESAI: Will the Minister of DEFENCE be pleased to state:

(a) whether Indian soldiers were injured in the Salisbury Plains in South-West England, while returning from a joint Indo-UK counter-terrorism exercise, if so, the details thereof and the reasons therefor; and

(b) what lessons the Ministry has drawn from such accident and what future steps Government is taking to avoid it?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) Yes, Sir.

Exercise Ajeya Warrior, a bilateral biennial Army Exercise between Indian Army and British Army was conducted in Salisbury Plains, UK from 8-28th June, 2015. At 1800 hours on 17th June, 2015, there was a road accident (collision between the vehicles) in the Salisbury Plains Training Area which resulted in injuries to 21 Indian and 02 British soldiers. All soldiers were in British Army vehicles and preliminary inquiries have revealed that the accident was caused due to sudden braking by one of the vehicles in the convoy. While 19 Indian soldiers were discharged after first aid, 02 soldiers (01 Captain and 01 Havildar) were injured severely. The injured soldiers were treated in Salisbury hospital and are recovering well. They have been shifted to the British Army Rehabilitation Centre at Hedley Court. The Medical experts have estimated a time period of approximately three months for the injured soldiers to be shifted back to India. Preventive measures against accidents are being emphasized to all Indian Army contingents participating in Exercise in India and abroad.

Signing of defence deals

2443. SHRI SHANTARAM NAIK: Will the Minister of DEFENCE be pleased to state:

(a) the total number of defence deals signed, agreed upon and executed in the last one year;

- (b) the dates on which these deals were signed and/or agreed upon;
- (c) the types of equipments involved in these deals;
- (d) the countries with whom these deals have been signed or agreed upon;
- (e) the deals which were signed in the presence of the Defence Minister;
- (f) whether Government has re-introduced middleman in defence procurements and other deals; and
- (g) the policy in place on middleman?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (g) Capital procurement of defence equipment is made from various indigenous as well as foreign sources and contracts are signed after obtaining approval of Competent Financial Authority in accordance with the provisions of Defence Procurement Procedure-2013.

During 2014-15, 18 contracts have been signed between May 2014 and February 2015 with foreign vendors including those from USA, Russia, Israel, Germany, France and UK for procurement of items such as Missiles, Rockets and Simulators. Contracts are executed as per terms and conditions incorporated therein. The 18 contracts were signed by designated officers as per provisions of DPP 2013 which do not require the presence of Defence Minister at the signing.

Defence Procurement Procedure (DPP) provides for direct dealing with the Original Equipment Manufacturers (OEMs) or Authorised Vendors or Government Sponsored Export Agencies (applicable in case of countries where domestic laws do not permit direct export by OEM). It also provides that vendor is required to give full details of any agents/technical consultants/authorised vendors that may have been appointed by them for marketing of this equipment in India. These details should include the scope of work and responsibilities that have been entrusted with the said party in India.

Recruitment in the army from LWE districts

2444. SHRI BHUPINDER SINGH: Will the Minister of DEFENCE be pleased to state:

- (a) the total number of Army personnel in all the different wings of the Indian Army, State-wise details thereof; and
- (b) whether the Ministry has any plan to recruit tribal boys and girls, particularly from the Left Wing Extremism (LWE) affected districts of the country, if so, by when and if not, the reasons therefor?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) The total number of Army personnel (excluding Army Medical Corps, Army Dental Corps and Military Nursing Service) in different wings of Army, is as under:

Officers	Other Ranks
40,095	11,47,549
(as on 1.1.2015)	(as on 1.4.2015)

State/UT wise details of the number of Army personnel are not maintained.

(b) In Army, officers are recruited on all India basis through open competitive examination. Recruitment in Other Ranks in Army is made through Open Rally System. Women are inducted only as Short Service Commissioned Officers in specified Branches in Indian Army.

Recruitment of youth including from tribal areas is an ongoing process. Army has initiated several steps with a view to increase intake in the Other Ranks from the Left Wing Extremism (LWE) affected states which include:

- (i) Requesting the State Governments to encourage, train and motivate candidates to join Army;
- (ii) Making efforts to ensure maximum participation of candidates from LWE affected areas in Army Recruitment Rallies; and
- (iii) Giving motivational lectures by Army personnel to join Army in remote areas of LWE affected States etc.

Disparity in applicability of army act on MNS

2445. SHRI ANUBHAV MOHANTY: Will the Minister of DEFENCE be pleased to state:

(a) whether the Military Nursing Service (MNS), a part of the uniformed Defence Services is governed by the same Army Act;

(b) if not, whether any part of the Army Act is not applicable to them along with the reasons therefor;

(c) whether the Army Act is fully applicable on the Women Commissioned Officers of other corps;

(d) if so, why there is disparity in applicability of Army Act between women commissioned officers of MNS and other commissioned officers; and

(e) whether the Minister is aware of such disparities, if so, the action taken to remove the disparities in order to restore tranquillity in the MNS?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) Military Nursing Service is a part of Armed Forces Medical Services as an auxiliary service which is governed by Military Nursing Service Rules, 1944 framed under (The Indian) Military Nursing Service Ordinance, 1943. Therefore, all the provisions of the Army Act are not applicable to MNS.

(c) Yes, Sir.

(d) and (e) There is disparity in applicability of the Army Act between the officers of MNS and those of regular Army as these are two separate cadres. The disparity in applicability of the Army Act between officers of the above mentioned two different cadres stems from the difference in legal provisions governing them. However, it is ensured that all rules and regulations applicable to MNS are adhered to at all times.

Implementing of OROP scheme

2446. DR. SANJAY SINH: Will the Minister of DEFENCE be pleased to state:

(a) whether Government has any reservations about the contributions and the sacrifices made by our defence personnel, if so, what are those reservations;

(b) if not, why the One Rank One Pension (OROP) scheme has not been implemented by Government, despite its concurrent assurances and promises during the last General Elections; and

(c) by when the OROP scheme will be implemented?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) No, Sir.

(b) and (c) The policy of 'One Rank One Pension' (OROP), for the Armed Forces has been adopted by the Government to address the pension disparities. The modalities for implementation were discussed with various stakeholders and are presently under consideration of the Government. It will be implemented once the modalities are approved by the Government.

Production of aircraft by TATA-Airbus consortium

2447. SHRI SALIM ANSARI: Will the Minister of DEFENCE be pleased to state:

(a) whether it is a fact that Government has favoured single vendor by clearing TATA-Airbus consortium of ₹ 11,930 crore for production of transport aircraft, if so, the details thereof and the reasons therefor; and

(b) whether the guidelines of Central Vigilance Commission (CVC) in procuring material with proper tendering system have been ignored to favour TATA-Airbus Industries if so, the reasons therefor?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) No, Sir. A proposal to procure 56 transport aircraft as replacement for the ageing fleet of Avro aircraft through 'Buy & Make' route was accorded Acceptance of Necessity (AoN) by the Defence Acquisition Council (DAC). Out of these, 40 aircraft will be manufactured in India by the Indian Production Agency (IPA) chosen by the Original Equipment Manufacturer (OEM) from the private sector. The Request for Proposal (RFP) was issued to eight global transport aircraft manufacturers on 8th May, 2013. Only a single bid was received in response to the RFP. The DAC constituted an Independent Committee of Experts to look into various issues related to single vendor situation. The report of the Committee was placed before the DAC. After consideration of the report of the Committee and related aspects, DAC, the competent authority under Defence Procurement Procedure, accorded approval proceed with the case with the single bid received from M/s Airbus Defence and Space S.A.

Integration of Indian Systems of medicine in Armed Forces

2448. DR. CHANDAN MITRA: Will the Minister of DEFENCE be pleased to state:

(a) whether the Army's base hospitals at Delhi, Pune and Jamnagar have Ayurveda Kendras and satellite Ayurveda clinics are functioning at units of Army and Navy at Valsura, Gujarat;

(b) if so, the details thereof along with the reasons for misleading statement by DGAFMS that Ayurvedic treatment is not approved within the services in an NSG commando case for reimbursement of Ayurvedic treatment expenses; and

(c) the fresh steps taken by Government to integrate Ayurvedic and other Indian Systems of medicine in the Armed Forces?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) The Army's Base Hospitals at Delhi, Pune and Jamnagar have no Ayurveda Kendras. However, an Ayurvedic practitioner from the Ayurveda University of Jamnagar visits naval hospital at Valsura, Gujarat once a week for one hour. Patients who wish to take consultation on voluntary basis meet the practitioner. There is no Army Hospital at Valsura.

Ayurveda treatment is not approved as a mode of treatment for service personnel. However, the reimbursement of the expenditure incurred by an NSG Commando on

his Ayurvedic treatment from a civil hospital had been allowed by the Government as a special case.

(c) Integration of entire complement of Indian Systems of Medicine with Armed Forces Medical Services (AFMS) is not feasible, considering the role of AFMS in combat settings for the following reasons :-

- (i) The AFMS are responsible for providing preventive, promotive, curative and rehabilitative medical care to its clientele. The system is based on the allopathic system of medicine.
- (ii) Combat medical and surgical requirement are the pivot on which structure of AFMS revolves.
- (iii) There are specific requirements to handle the emergencies in modern medicare such as myocardial infarction, arrhythmias, cardiac arrest, intestinal obstruction, head injuries, polytrauma, renal failure etc. which can best be taken care by allopathic physicians and surgeons.

Collaboration with USA for building aircraft carriers

2449. SHRI K. C. TYAGI:

SHRI P. BHATTACHARYA:

Will the Minister of DEFENCE be pleased to state:

(a) whether it is a fact that Government has a proposal to collaborate with the United States of America (USA) for building Light Aircraft Carriers in the country, if so, the details thereof; and

(b) the manner in which such technological collaboration will help Indian Air Force to compete with military preparedness of other countries?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) No, Sir. However, a Joint Working Group has been formed under the auspices of US-India Defence Trade and Technology Initiative framework for possible co-operation in the field of aircraft carrier technologies in the future.

(b) Aircraft Carriers are for Navy. The above mentioned technological collaboration will not aid the Indian Air Force.

Amendment in Benami Act

2450. SHRI NARESH GUJRAL: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that there is a proposal to amend the Benami Act; and

(b) what would be the status of Power of Attorney sales once the proposed amendments to the Act are passed and will such transactions be considered benami thereby inviting stringent provisions of this act?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Yes Sir. The *Benami Transactions (Prohibition) Amendment Bill, 2015* was introduced in the Lok Sabha on 13th May, 2015 to amend the *Benami Transactions (Prohibition) Act, 1988*.

(b) Any transaction falling within the definition of 'benami transaction' shall attract consequential action under the *Benami Transactions (Prohibition) Act, 1988* after the enactment of the *Benami Transactions (Prohibition) Amendment Bill, 2015*. Clause 4 of the *Benami Transactions (Prohibition) Amendment Bill, 2015* defines a "benami transaction" to mean,—

I. a transaction or an arrangement :—

- (i) where a property is transferred to, or is held by, a person, and the consideration for such property has been provided, or paid by, another person; and
- (ii) the property is held for the immediate or future benefit, direct or indirect, of the person who has provided the consideration, except when the property is held by:—
 - (1) a Karta, or a member of a Hindu undivided family, as the case may be, and the property is held for his benefit or benefit of other members in the family and the consideration for such property has been provided or paid out of the known sources of income of the Hindu undivided family;
 - (2) a person standing in a fiduciary capacity for the benefit of another person towards whom he stands in such capacity and includes a trustee, executor, partner, director of a company, a depository or a participant as an agent of a depository under the Depositories Act, 1996 and any other person as may be notified by the Central Government for this purpose;
 - (3) any person being an individual in the name of his spouse or in the name of any child of such individual and the consideration for such property has been provided or paid out of the known sources of income of the individual;
 - (4) any person in the name of his brother or sister or lineal

ascendant or descendant, where the names of brother or sister or lineal ascendant or descendent and the individual appear as joint-owners in any document, and the consideration for such property has been provided or paid out of the known sources of income of the individual; or

- II. a transaction or an arrangement in respect of a property carried out or made in a fictitious name; or
- III. a transaction or an arrangement in respect of a property where the owner of the property is not aware of, or, denies knowledge of, such ownership;
- IV. a transaction or an arrangement in respect of a property where the person providing the consideration is not traceable or is fictitious.

Grants to Jammu and Kashmir

2451. SHRI SHAMSHER SINGH MANHAS: Will the Minister of FINANCE be pleased to state:

(a) Various grants provided to Jammu and Kashmir (J&K) during the past three years and in the current year so far;

(b) The reasons for mounting financial problems of this State, specially the big increase of the liabilities of J&K, along with the steps being taken to overcome these difficulties; and

(c) The reasons for delay in releasing certain grants of J&K?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) As per the recommendations of 14th Finance Commission (FFC), for its award period (2015-20), the States' share in divisible pool of Union taxes has been enhanced from 32% to 42% which is highest ever vertical increase in tax devolution. Accordingly, FFC has recommended total transfers of ₹ 124481.57 crore (including tax devolution of ₹ 58779.00 crore) to the J&K for the period 2015-20 against ₹ 40489.90 crore (including tax devolution of ₹ 20182.70 crore) recommended by 13th Finance Commission for 2010-15, which shows an increase of 207.44% in aggregate. The higher transfer of resources to State will allow the State greater autonomy in designing and financing of schemes as per their contextual need and requirements. Besides, central assistance as grant-in-aid is provided to various States including Jammu and Kashmir (J&K) as Central Assistance to Centre and State Plans. As such, following releases have been made to J&K during the past three years (pertaining to 13th FC) and in the current year (current FFC) so far :

(₹ in crore)

Year	Plan*	Non Plan	Tax Devolution	Total
2012-13	12966.31	3705.25	3870.37	20541.93
2013-14	13331.11	3500.53	4142.10	20973.74
2014-15	13112.85	2794.78	4477.23	20384.86
1.4.2015 to 3.8.2015	1488.99	4423.13	2888.51	8800.63

*Source : PFMS

Releases are made as per FC recommendations and the conditions attached to each Scheme/Plan. There has been timely release of funds/grants as per the set practice.

As seen from the J&K Budget Document for 2015-16, the State has estimated its Debt/GSDP ratio at 43.99% which is within the target of 51.42% prescribed by FFC. State has also estimated Revenue Surplus of ₹ 2587 crore i.e., 2.26% during 2015-16 (BE). However, the State has estimated its Fiscal Deficit at 6.26% as against Target of 3% set by FFC.

Provision of crop loan

†2452. SHRI P. L. PUNIA: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that there is a provision to provide crop loan to the farmers in the country, if so, the names of the institutions/agencies through which the crop loan is provided by Government and the rate of interest at which such loan is provided;

(b) the details of crop loan disbursed in the last one year, State-wise;

(c) whether it is also a fact that loans of farmers are also waived off by Government under certain circumstances, if so, the details thereof ;

(d) the details of the loans waived off in the last one year, State-wise; and

(e) whether it is also a fact that large amount of agriculture loan is outstanding, if so, the amount thereof, State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Scheduled Commercial Banks, both in public and private sector, Regional Rural Banks and Cooperative Banks in the Short Term Cooperative Credit Structure provide crop loans to farmers. With a view to ensuring availability of agriculture

credit at a reasonable cost, the Government of India is implementing the Interest Subvention Scheme under which short term crop loan up to ₹ 3.00 lakh per farmer is extended by banks at the interest rate of 7% per annum. Besides, an additional 3% subvention is given to farmers on prompt repayment of short term crop loan upto ₹ 3.00 lakh, thus reducing the effective rate of interest for prompt payee farmers to 4%.

(b) The State-wise details of agricultural loan disbursed during 2014-15 (provisional data) are given in Statement-I (See below).

(c) and (d) The Agricultural Debt Waiver and Debt Relief Scheme, 2008 (ADWDRS, 2008) was announced in the Union Budget 2008-09 and detailed guidelines for ADWDRS, 2008 were issued on 28.5.2008. The Scheme covered 3.73 crore farmers to the extent of ₹ 52,259.86 crore. The debt waiver portion of the ADWDRS, 2008 was closed by its due date *i.e.* 30.6.2008, while the debt relief portion of the Scheme was extended till 31.12.2009 and further upto 30.6.2010. After the ADWDRS, 2008, the Government of India has not issued any instructions to banks for waiver of interest or loans availed by farmers.

(e) The State-wise details of outstanding agricultural loans as on 31.03.2015 (provisional data) are given in Statement-II.

Statement-I

Ground Level Credit Flow to Agriculture-State-wise-all agencies (Commercial Banks, Cooperatives and RRBs) for year ended 2014-15 (Provisional)

Sl.No.	States/UTs	Agriculture Credit Flow during 2014-15
1.	Delhi	15,264.00
2.	Haryana	40,438.48
3.	Himachal Pradesh	4,964.13
4.	Jammu and Kashmir	766.01
5.	Punjab	72,962.97
6.	Rajasthan	65,743.36
7.	Chandigarh UT	2,339.93
8.	Arunachal Pradesh	49.90
9.	Assam	2,751.04
10.	Manipur	152.55
11.	Meghalaya	195.95

Sl.No.	State/UTs	Agriculture Credit Flow during 2014-15
12.	Mizoram	70.21
13.	Nagaland	134.91
14.	Sikkim	75.49
15.	Tripura	1,022.70
16.	A & N Island	66.48
17.	Bihar	22,863.87
18.	Jharkhand	2,518.36
19.	Odisha	17,270.57
20.	West Bengal	37,293.73
21.	Chhattisgarh	7,872.02
22.	Madhya Pradesh	47,048.57
23.	Uttarakhand	5,586.47
24.	Uttar Pradesh	72,611.35
25.	Goa	777.30
26.	Gujarat	39,326.72
27.	Maharashtra	66,821.29
28.	D & N Haveli UT	29.84
29.	Daman and Diu UT	26.05
30.	Andhra Pradesh	53,936.21
31.	Telangana	30,516.66
32.	Karnataka	60,233.00
33.	Kerala	57,209.01
34.	Puducherry	15,930.12
35.	Tamilnadu	1,00,225.77
36.	Lakshadweep UT	233.21
TOTAL		8,45,328.23

Source: NABARD

Statement-II

Loans/Advances outstanding as on 31 March, 2015 (Provisional)-State-wise and Agency-wise

Sl.No.	State/UT	Cooperative Bank		Regional Rural Bank		Commercial Bank		Total Loan Outstanding		(₹ in lakh)
		No. of A/C	Amt.	No. of A/C	Amt.	No. of A/C	Amt.	No. of A/C	Amt.	
1	2	3	4	5	6	7	8	9	10	
1.	Delhi	327	528.80	0	0.00	25015	1381113.51	25342	1381642.31	
2.	Haryana	1581522	939343.57	312683	275429.00	987546	3316596.06	2881751	4531368.63	
3.	Himachal Pradesh	110764	134000.40	63103	41324.13	305015	508941.92	478882	684266.45	
4.	Jammu and Kashmir	2306	5066.11	80615	56658.50	47932	64402.05	130853	126126.66	
5.	Punjab	1272897	1165274.11	174207	297761.27	1329060	5481939.70	2776164	6944975.08	
6.	Rajasthan	1953844	1485733.01	668418	911831.24	2754819	4872092.59	5377081	7269656.84	
7.	Chandigarh UT	0	0.00	0	0.00	8850	167665.62	8850	167665.62	
NORTHERN REGION TOTAL		4921660	3729946.00	1299026	1583004.14	5458237	15792751.45	11678923	21105701.59	
8.	Arunachal Pradesh	216	439.87	3784	3089.55	14718	12640.15	18718	16169.57	
9.	Assam	58344	6904.02	411302	161745.84	676326	467762.77	1145972	636412.63	
10.	Manipur	51	14.08	9829	2402.57	28835	23550.30	38715	25966.95	
11.	Meghalaya	34761	9763.61	19249	9359.13	67613	37672.43	121623	56795.17	
12.	Mizoram	3008	11461.84	20933	10212.26	17535	11983.37	41476	33657.47	

1	2	3	4	5	6	7	8	9	10
13.	Nagaland	9375	4453.32	1014	306.38	41949	23464.15	52338	28223.85
14.	Sikkim	8201	1255.43	0	0.00	8616	10452.59	16817	11708.02
15.	Tripura	99426	50833.44	182943	36477.00	64950	39728.23	347319	127038.67
NORTH EASTERN REGION TOTAL		213382	85125.61	649054	223592.73	920542	627254.00	1782978	935972.34
16.	A & N Island	5222	3615.14	0	0.00	7421	9376.57	12643	12991.71
17.	Bihar	1366049	1345202.00	1854553	701114.09	2479030	2102034.91	5699632	4148351.00
18.	Jharkhand	15387	4299.92	410198	95362.02	952853	496115.51	1378438	595777.45
19.	Odisha	3061148	707096.28	725747	319573.94	1472916	1013153.52	5259811	2039823.74
20.	West Bengal	1876558	407143.20	707387	310639.79	1742104	2412536.88	4326049	3130319.87
EASTERN REGION TOTAL		6324364	2467356.54	3697885	1426689.84	6654324	6033217.38	16676573	9927263.76
21.	Chhattisgarh	1008436	286960.27	327080	111541.97	358139	637169.73	1693655	1035671.97
22.	Madhya Pradesh	5160553	1204074.65	571080	653752.83	2477094	4483810.64	8208727	6341638.12
23.	Uttarakhand	202833	92632.86	71462	44050.20	363458	633759.27	637753	770442.33
24.	Uttar Pradesh	4230399	966722.10	3734574	2500116.63	6311627	8218609.00	14276600	11685447.73
CENTRAL REGION TOTAL		10602221	2550389.88	4704196	3309461.63	9510318	13973348.64	24816735	19833200.15
25.	Goa	6386	8891.43	0	0.00	57393	89287.96	63779	98179.39
26.	Gujarat	1299527	1137320.00	312950	272279.51	1974614	3889692.68	3587091	5299292.19

27.	Maharashtra	2445074	2309106.77	477188	346131.95	4630038	16256497.11	7552300	18911735.83
28.	D & N Haveli UT	0	0.00	0	0.00	3166	5218.22	3166	5218.22
29.	Daman and Diu UT	0	0.00	0	0.00	2238	3391.04	2238	3391.04
WESTERN REGION TOTAL		3750987	3455318.20	790138	618411.46	6667449	20244087.01	11208574	24317816.67
30.	Andhra Pradesh	1046802	606572.46	1445370	1120061.53	7296533	8006943.80	9788705	9733577.79
31.	Telangana	535064	318910.83	922509	564806.98	2899843	3276622.96	4357416	4160340.77
32.	Karnataka	2341450	1133629.11	1430198	1348645.56	4059809	6752197.99	7831457	9234472.66
33.	Kerala	1295231	474526.09	1050387	610241.00	4770837	5302434.50	7116455	6387201.59
34.	Puducherry	6485	1407.06	47822	26485.38	170133	142538.39	224440	170430.83
35.	Tamilnadu	2187364	605480.27	744260	428954.85	12396667	11569443.26	15328291	12603878.38
36.	Lakshadweep UT	0	0.00	0	0.00	72106	172712.41	72106	172712.41
SOUTHERN REGION TOTAL		7412396	3140525.82	5640546	4099195.30	31665928	35222893.30	44718870	42462614.42
GRAND TOTAL		33225010	15428662.05	16780845	11260355.10	60876798	91893551.78	110882653	118582568.93

Source : NABARD

Tax refund to export import traders

2453. DR. PRADEEP KUMAR BALMUCHU: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that Government is initiating all steps that the exporters get their tax refunds in timely manner, if so, the details thereof;

(b) the details of the representation made by the Association of Indian Exporters and Importers in this regard; and

(c) the incentives and other reliefs being offered to exporters and importers?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Yes, Sir. Timely issue of refunds has always been a matter of priority and concern for the Government. Field formations have been directed to ensure prompt and timely disbursal of drawback, rebate claims on exports and other incentives on exports, as may be available under the relevant scheme.

(b) Certain representations have been received from different exporters associations, which have been taken note of.

(c) Details of incentives and other relief, inter-alia, being offered to exporters and importers are as under:

- (i) Duty Drawback to exporters to neutralize Customs, Central Excise duty & Service tax suffered on inputs/inputs services used in manufacture of export goods.
- (ii) Benefit of rebate of Central Excise duty paid on exported goods is allowed under rule 18 of the Central Excise Rules, 2002. Goods are also allowed clearance for export under bond for the same purpose under rule 19 of the Central Excise Rules, 2002.
- (iii) Refund of CENVAT credit of inputs or input services to a manufacturer who clears a final product or an intermediate product for export without payment of duty under bond or letter of undertaking or a service provider who provides an output service which is exported without payment of Service Tax, under rule 5 of Cenvat Credit Rules, 2004.
- (iv) In order to boost exports in garment sector, Government has provided various support measures. One such measure is duty free entitlement for import based on export performance, wherein manufacturers of textile and leather garments registered with their respective Export Promotion Council are allowed to import certain specified items duty free of

value upto 5 per cent of the FOB value of the textile garments or 3 per cent of the FOB value of the leather garments, exported during the preceding Financial Year for use in the manufacture of garments for export by such manufacturer. Similarly, the incentives are also provided to the exporters of handicrafts, leather products including footwear; handlooms, cotton and man-made textile made-ups etc.

- (v) Duty exemption schemes (Advance Authorization/Duty Free Import Authorizations and Export Promotion Capital Goods (EPCG) as well as the incentive schemes (Merchandise Export from India Scheme and Service/Export from India Schemes) extended to exporters administered by Director General of Foreign Trade (DGFT), Department of Commerce.
- (vi) Rebate of whole of the duty paid on excisable inputs or whole of the Service Tax and cess paid on all input services used in providing service exported in terms of Rule 6A of Service Tax rules, 1994.
- (vii) Granting rebate of Service tax paid on taxable services which are received by an exporter of goods and used for export of goods.
- (viii) Allowing the holder of Vishesh Krishi and Gram Udyog Yojana (VKGUY), Focus Product Scheme (FPS) and Focus Market Scheme (FMS) scrip to pay Service Tax leviable on taxable services received by them by debiting in scrip.
- (ix) Section 10AA of Chapter VI-A of the Income-tax Act, 1961 allows 100% deduction on profits and gains derived from export of certain articles or things subject to fulfillment of conditions prescribed therein. Further, exporters and importers are also eligible for claiming deductions in respect of profits and gains derived from such business as per provisions contained in Part D of Chapter IV (Profits and gains of business or profession) and Chapter VIA (Deductions to be made in computing total income).

Reining of chit fund companies

†2454. SHRI SHADI LAL BATRA: Will the Minister of FINANCE be pleased to state:

(a) whether Government intends to rein in illegal business of the ponzi schemes and the chit fund companies, if so, the details thereof;

(b) the action taken so far with regard to the ponzi scam related to chit fund business and the number of investors whose money have been returned, Statewise; and

(c) the efforts being made by Government to establish co-ordination among investigating agencies and to authorise States for monitoring them at State level, as far as the chit fund cases are concerned?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Chit Fund Companies and Ponzi Schemes are outside the regulatory purview of Reserve Bank of India (RBI). Chit Funds are registered, regulated, supervised and governed by Chit Fund Act, 1982, which is administered by the respective State Governments. RBI has not come across any Ponzi schemes floated by Non-Banking Financial Company (NBFC) registered with RBI under the RBI Act, 1934. Further, the word 'Ponzi Schemes' are not defined in law in India. However, the regulators have been receiving complaints about entities collecting money from public allegedly in violation of law. RBI has informed that sometimes complaints are received alleging cheating/fraud by entities by way of falsely promising high returns of the running money circulation schemes etc., these complaints are forwarded to the Economic Offences Wing (EOW) of the State Police for investigation and further necessary action.

(b) The Directorate of Enforcement has registered 57 cases under the Prevention of Money Laundering Act, 2002 (PMLA) for offences arising out of scheduled offences registered by Law Enforcing Agencies (LEAs) relating to Collective Investment Scheme, Chit Funds, etc. in these cases, assets worth ₹ 1133.25 crores have been provisionally attached and 3 prosecution complaints have been filed under PMLA in these cases.

Central Bureau of Investigation (CBI) has also registered a total of 72 cases (71 Regular Cases (RCs) and 1 Preliminary Enquiry (PE)) related to Ponzi Schemes during the last three years, that is, 2012, 2013, 2014 and current year 2015 (upto 30.06.2015). The year wise break-up of these cases is as under

2012	Nil
2013	7
2014	62
2015	3
(upto 30.06.2015)	
TOTAL	72

(c) The Ministry of Corporate Affairs has assigned 139 cases pertaining to so called "chit fund" companies to Serious Fraud Investigation Office (SFIO) for

investigation. Investigations reveal that these companies were operating mostly in the Eastern and North-Eastern States of the country and had intensive network of branches spread across these States. For the purpose to quicken the investigation process, Computer Forensic Lab has been set up in SFIO for analysing the database of the companies under investigation.

In so far as the strengthening of the existing legal framework for unauthorised money collection is concerned, under the recently amended Securities and Exchange Board of India Act, 1992 (SEBI Act), the existing definition of the Collective Investment Scheme (CIS) under section 11AA (2) has been amended and it has been provided that any pooling of funds under any scheme of arrangement, which is not registered with SEBI or is not covered under sub-section (3) of section 11AA of the SEBI Act, involving a corpus of One Hundred Crore Rupees or more, would be deemed to be CIS. Further, any scheme conforming to the conditions of SEBI regulations would also be covered under the definition of CIS. Therefore, SEBI has been empowered to regulate all major money collection schemes, which are also covered under the definition of CIS. SEBI has wide powers of investigation and prosecution under the SEBI Act, 1992.

Further, a high level Inter-Ministerial Group (IMG) has been constituted for identifying gaps in the existing regulatory framework for deposit taking activities and to suggest administrative/legislative measures including formulation of a new law to cover all relevant aspects of “Deposit taking”.

To enable better identification of companies involved in financial activities, Rule 8(2)(b) (iii) of Companies (Incorporation) Rules, 2014 framed under the Companies Act, 2013 provides that if the company’s main business is financing, leasing, chit fund, investments, securities or combination thereof, its incorporation shall not be allowed unless its name is indicative of such financial activities, viz., Chit Fund or Investment or Loan, etc.”

The coordinating mechanism by the name ‘State Level Coordination Committee’ (SLCC) has been set-up with a view to having greater coordination between RBI and other regulatory and enforcement agencies. This mechanism is used by the regulators and enforcement agencies to share information among themselves about various unscrupulous entities carrying on questionable / unauthorised activities including mobilisation of money / deposit. SLCC has been reconstituted in May, 2014 to ensure regular participation of senior functionaries and to facilitate cohesive and effective information sharing amongst the participants. The SLCC meetings are now chaired by the Chief Secretaries of the State Governments and Administrators of the Union Territories. The frequency of the meetings has also been increased, which are now

being conducted on quarterly intervals as against half-yearly earlier. These measures are intended to have a far reaching impact in ensuring effective information sharing amongst the participants at regular intervals to quickly identify and take effective action against entities indulging in unauthorised and suspect business involving fund mobilisation from public.

Preparation of debt readiness index

2455. SHRI A.K. SELVARAJ: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that Government plans to soon rank States and Union Territories (UTs) on the readiness to roll out Direct Benefit Transfer (DBT) scheme for all subsidies;

(b) whether it is also a fact that this move to come up with a ranking is aimed at generating awareness among States and UTs to help them plug the gap in the delivery system and spurring competition among them to vie for the top slot; and

(c) whether it is also a fact that the DBT Mission has entrusted the task of preparing a DBT readiness index to the National Council of Applied Economic Research (NCAER), if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) No, Sir.

(b) Central Government is organising workshops at State/Regional level for streamlining delivery system through DBT.

(c) Does not arise.

IT litigations

2456. SHRI A. W. RABI BERNARD: Will the Minister of FINANCE be pleased to state :

(a) whether it is a fact that there are about 7000 direct tax related disputes pending in various High Courts involving an amount of ₹ 18,000 crore as per official data, if so, the details thereof;

(b) whether the IT Department has given Chief Commissioner of Income Tax (CCIT) the power to decide whether or not to appeal against a tribunal decision in the High Court without having to consult their peers or superiors, if so, the details thereof; and

(c) whether the move is expected to cut delays in decision making and other officers to promptly comply with Tribunal ruling, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The number of cases pending in various High Courts and the amount involved therein is as below:

High Court of Cases pending*	34,281
Amount involved * (in ₹ crore)	37,683.98

*31st March, 2015

(b) Income-tax Act empowers a Principal Chief Commissioner/ Chief Commissioner/ Principal Commissioner/ Commissioner of Income tax, who is aggrieved by any order passed by the Income Tax Appellate Tribunal (ITAT), to file an appeal to the High Court. Recently, CBDT has issued guidelines that in stations having more than one Chief Commissioner of Income-tax (CCIT), if the jurisdictional CCIT decides to file an appeal before the High Court, he is required to refer the matter to another CCIT.

(c) The above measure is a positive step to ensure that the decision to file appeal in High Court is based on thorough analysis and merits of each case. CBDT has issued instruction which lays down timelines for filing of appeal before High Court. The timelines are in conformity with the statutory provision. Standard Operating Procedure prescribed by CBDT also lays down timelines in which appeal effect has to be given in each case consequent upon ITAT's ruling.

Response of recently launched pension and insurance scheme

2457. SHRI C. M. RAMESH: Will the Minister of FINANCE be pleased to state:

(a) whether Government has implemented Atal Pension Yojana, Prime Minister Suraksha Bima Yojana and Prime Minister Jeevan Jyoti Bima Yojana as announced in the Budget;

(b) if so, the response such as number of people taken policies, age-group, premium collected, insurance companies involved in issuing such policies, etc. on each scheme, scheme-wise and State-wise;

(c) whether it is a fact that Government has set a target of 12 crore policies by March, 2016, if so, the details thereof;

(d) whether it is also not a fact that there have been demands to relax the age for pension scheme; and

(e) if so, whether Government is thinking in that direction?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Yes, Sir. The Atal Pension Yojana (APY), Pradhan Mantri Jeevan Jyoti

Bima Yojana (PMJJBY) and Pradhan Mantri Surksha Bima Yojana (PMSBY) have been launched on 9th May, 2015. APY has been implemented with effect from 1st June, 2015.

(b) and (c) The public response to these schemes has been tremendous so far and cumulative Gross enrolment subject to verification of Eligibility of Applicants as per Rules, and availability of Funds for Auto Debit of Premium etc. under the following schemes as reported by Banks as on date 05.08.2015 is 10.84 Crore as per the details given below:

Gross Enrolment Reported by Banks, subject to verification of Eligibility of Applicants as per Rules, and Availability of Funds for Auto Debit of Premium etc.

(As on 5.8.2015)

PMJJBY	PMSBY	APY	Total
27253579	80572153	607702	108433434

As on 5.08.2015 under PMJJBY and PMSBY, a premium of ₹ 718.85 crore and ₹ 81.25 crore have been debited, respectively from the bank accounts of subscribers. The names of insurance companies participating in PMJJBY and PMSBY are given in the Statement (*See below*).

To spread the information and to make people more aware an exclusive website www.jansurkasha.gov.in has also been created by Department of Financial Services, Ministry of Finance which hosts all relevant material/information, including forms, rules etc. related to these schemes.

(d) and (e) Yes, Sir. There have been few requests that the upper age limit for registration under APY may be raised so as to cover some older people under the scheme. The Government may consider a scheme for the people who are above 40 years of age in future.

Statement

Names of insurance companies participating in PMJJBY and PMSBY

Sl. No.	Names of Insurance companies participating in PMSBY	Names of Insurance companies participating in PMJJBY
1	2	3
1.	United India Insurance Company Ltd..	Life Insurance Corporation of India

1	2	3
2.	National Insurance Company Ltd.	SBI Life Insurance Company Ltd.
3.	Oriental Insurance Company Ltd.	Star Union Dai-ichi Life Insurance Company Ltd.
4.	ICICI Lombard General Insurance Company Ltd.	India First Life Insurance Company Limited
5.	Reliance General Insurance Company Ltd.	ICICI Prudential Life Insurance Company Ltd.
6.	Tata AIG General Insurance Company Limited	Max Life Insurance Company Ltd.
7.	Cholamandalam MS	Shriram Life Insurance Company Ltd.
8.	Universal Sompo General Insurance Company Ltd.	HDFC Life Insurance Company Ltd.
9.	New India Assurance Company Ltd.	Tata AIA Life Insurance Company Ltd.
10.	Bajaj Allianz General Insurance Company Ltd.	Birla Sun Life Insurance Company Ltd.

Implementation of DBT scheme

2458. SHRI DEVENDER GOUD T.: Will the Minister of FINANCE be pleased to state:

- (a) what success Government could get since implementation of DBT scheme;
- (b) the details of pitfalls that it is facing with the scheme and how it is planning to address such pitfalls;
- (c) whether it is not a fact that identification of BPL has become a challenge; and
- (d) to what extent Jan Dhan Yojana, Aadhaar and Mobile (JAM) helps to implement DBT scheme more effectively?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Government is able to accurately target its beneficiaries in various DBT schemes. Achieve greater transparency, accountability and efficiency thereby controlling expenditure.

(b) The objective of 100% digitisation of the beneficiaries' data and Aadhaar seeding in beneficiaries' data could not be achieved as a result of various litigation on Aadhaar. Last mile cash out facilities in rural and far flung area is a challenge. Government is pursuing to achieve the objectives and encouraging the beneficiaries

to see Aadhaar in the data base. Banking Correspondent mode has been adopted to address last mile cash out facilities.

(c) For identifying BPL, the BPL census was conducted in 1992 and 97 for 8th and 9th Plan. For 10th Five Year Plan, BPL census was conducted in 2002 using the methodology of Score based ranking of rural household for which 13 socio-economic parameters were used and households were arranged in ascending order to get the BPL list. In 2011, Socio-Economic and Caste census (SECC-2011) for identifying deprivation and automatic inclusion of households as poor in the rural development programmes aimed at alleviating poverty was conducted.

(d) Aadhaar helps in direct biometric identification of citizens and Jan Dhan bank accounts and mobile phones allowing direct transfers of funds into their accounts, making it possible to cut out all the intermediaries.

Overdraft facility under PMJDY

2459. SHRI JESUDASU SEELAM : Will the Minister of FINANCE be pleased to state:

(a) what are the criteria laid by Government to avail overdraft facility under the Pradhan Mantri Jan Dhan Yojana (PMJDY);

(b) how many account holders were eligible to avail and how many have availed the overdraft facility till 30 June, 2015 under PMJDY;

(c) what percentage of NABARD's ₹ 1000 crore guaranteed fund has been utilized for provisioning the overdraft facility;

(d) whether that fund will be sufficient to accommodate overdraft requirements for the next five years or need to add to the existing fund to provide the overdraft facility to the account holders; and

(e) if so, the details thereof and what will be the source for such funding?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The Overdraft (OD) facility of upto ₹ 5000/- under Pradhan Mantri Jan-Dhan Yojana (PMJDY) is based on a scheme formulated by Indian Banks' Association (IBA). The scheme is applicable in Basic Savings Bank Deposit (BSBD) accounts which are satisfactorily operated for at least 6 months with the following stipulations:

(i) OD to be granted to the earning member of family, preferably woman of the house.

- (ii) There should be regular credits under Direct Benefit Transfer (DBT)/ Direct Benefit Transfer for LPG Consumers (DBTL) scheme/other verifiable sources.
 - (iii) Account should be seeded with Aadhaar for avoiding duplicate benefit.
 - (iv) BSBD account holder should not be maintaining any other SB account with any Bank/branch to ensure compliance with RBI directives.
 - (v) Age of applicant is between 18 years to 60 years.
- (b) As on 3.7.2015, 47.73 lakh accounts were eligible for overdraft and 0.70 lakh accounts have availed this facility of overdraft for aggregate amount of 1435.72 lakh.
- (c) to (e) A Credit Guarantee Fund of ₹ 3000 crore has been proposed for Micro Units Development and Refinance Agency (MUDRA) which will also provide credit guarantee to the OD facility under PMJDY.

Overloading of SBI

2460. SHRI AAYANUR MANJUNATHA: Will the Minister of FINANCE be pleased to state:

(a) whether the State Bank of India (SBI) is reported to have become overloaded on account of most of Government funds being released through it, if so, the reaction of Government thereto; and

(b) whether Government / Reserve Bank of India (RBI) has any proposal to release Government funds through other nationalised banks, if so, the details thereof, and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) In terms of sections 20 and 21 of the Reserve Bank of India Act, (RBI Act, 1934) it is the obligation and right of RBI to undertake general banking business of the Government of India. Under section 21A of the RBI Act, 1934, RBI acts as the banker to the State Governments by agreement. Section 45 of the RBI Act, 1934 enables RBI to appoint public sector banks including State Bank of India (SBI) as its agents.

SBI runs on the largest computer network connecting more than 16000 branches. It has a robust technology platform capable of handling 16000 transactions per second and provides banking facilities to more than 84000 villages through its various touch points. SBI is actively participating in implementation of various Financial Inclusion and Social Security and Small Saving Schemes, such as, Jan Dhan Yojana, Pradhan Mantri Jeevan Jyoti Beema Yojana, Pradhan Mantri, Atal Pension Yojana, Sukanya

Samridhi Accounts etc. Given the current volume of Government funds released, SBI cannot be considered to be overloaded in handling Government Funds. The present volumes are, in fact, a very small fraction of SBI's Information Technology (IT) infrastructure capability.

(b) Other nationalised banks have been involved since 1976. All the statutory nationalised banks are operating as agency banks.

Parameters for splitting of GST revenue between Centre and States

2461. PROF. M. V. RAJEEV GOWDA: Will the Minister of FINANCE be pleased to state:

(a) whether the parameters on the basis of which Goods and Service Tax (GST) revenue will be split between the Centre and various States, have been finalized, if so, the details thereof;

(b) whether the GST shall be charged at the manufacturing stage or at the sales stage; and

(c) the overall GST charged in comparison to combined excise, customs, sales and VAT?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Under the proposed GST regime, both Centre and States will simultaneously levy GST across the value chain. Tax will be levied on supply of goods and services. Centre would levy and collect Central Goods and Services Tax (CGST), and States would levy and collect the States Goods and Service Tax (SGST) on all transactions within a State. The Centre would levy and collect the Integrated Goods and Services Tax (IGST) on all inter-State supply of goods and services. The proceeds of IGST will be apportioned between the States and the Centre, under the proposed Article 269A, as provided by Parliament by law on the recommendations of the GST Council. Further, the CGST collected by the Central Government as well as the Union's share of IGST collected will be devolved to the States as per the provisions of Article 270.

(c) The rates of GST will be recommended by the GST Council after it is Constituted after the amendment of the Constitution.

Signing of Foreign Account Tax Compliance Act with U.S.

2462. DR. K. P. RAMALINGAM: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that India has signed the Foreign Account Tax Compliance Act with the United States, if so, the details thereof;

(b) whether it is also a fact that under the said Act, the U. S. will have to provide information about Indian Account Holders to the U.S. Government's Internal Revenue Services, which will forward the information to the Indian Government; and

(c) whether it is also a fact that Indian Government will provide similar information to the U.S, if so, the details thereof ?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Yes Sir. India and the U.S.A. have signed an Inter Governmental Agreement (IGA) on 9th July, 2015 to implement the Foreign Account Tax Compliance Act (FATCA) with a view to promote transparency between the two nations on tax matters.

(b) As per the IGA, the U.S. Government will provide certain information to the Indian Government, including the following:

- (i) The name, address and Permanent Account Number of any person that is resident of India and is an account holder of any financial account in USA;
- (ii) Account number;
- (iii) Gross amount of interest, US source dividends or other income paid or credited, depending on the nature of the financial account.

(c) As per the IGA, Financial Institutions in India will be required to report tax related information relating to U.S. account holders directly to the Indian Government which will, in turn, relay that information to the U.S.A. This information includes the following:

- (i) Name, address and US TIN (Taxpayer Identification Number) of each specified US person that is an account holder of any financial account in India.
- (ii) In case of entities holding financial account in India, if after application of due diligence procedure, the controlling person of the entity is identified as a specified US person, the name, address and US TIN (if any) of the entity and of each such US specified person;
- (iii) Account number;
- (iv) Account balance or value as of the end of the relevant calendar year or if the account is closed during the year, immediately before closure;
- (v) Gross amount of interest, dividend or other income paid or credited and the gross proceeds from the sale or redemption of property, depending on the nature of the financial account.

Customs duty collected from ports

2463. SHRI TAPAN KUMAR SEN: Will the Minister of FINANCE be pleased to state:

(a) the amount of Custom Duty collected from major ports in relation to export and import and storage, etc. of cargos through major ports, port-wise for the year 2012-13 and 2013-14; and

(b) what is the amount of Custom Duty collected from private operated ports and State Government owned ports in relation to export and import and storage, etc. of cargos through them port-wise for the year 2012-13 and 2013-14?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The details are given in Statement-I (*See below*).

(b) The details are given in Statement-II.

Statement-I

*Details of custom duty collected from major ports;
port-wise for the year 2012-13 and 2013-14*

Name of the port	Year 2012-13	Year 2013-14
	Customs Duty Collected (₹ in crore)	Customs Duty Collected (₹ in crore)
Paradip	1806.19	2413.08
Kandla	5005.63	4463.54
Chennai	23947.89	23047.00
Ennore	138.50	437.82
Visakhapatnam	4147.85	4194.93
Kolkata	4750.68	5226.69
JNPT	37138.95	40224.75
Mumbai	7950.39	6341.59
Cochin	1693.68	1732.165
New Mangalore	551.12	957.24
Marmagoa	2033.10	1000.73
Tuticorin	2817.37	2491.09

Statement-II

Details of custom duty collected from private and State Government owned ports; port-wise for the year 2012-13 and 2013-14

Name of the port	Year 2012-13	Year 2013-14
	Customs Duty Collected (₹ in crore)	Customs Duty Collected (₹ in crore)
1	2	3
Karaikal port	236.23	255.23
Nagapattinam	46.40	44.27
Cuddalore	223.75	272.50
Puducherry	0.75	1.02
Gangavaram	935.54	819.23
Krishnapatnam	688.54	969.65
Kakinada	614.33	1032.55
Kakinada Anchorage Port	1.41	6.46
Sikka	275.70	329.61
Bedi	153.79	167.26
Navalakhi	91.64	72.74
Okha	31.06	42.63
Pipavav	315.79	334.86
Bhavnagar	11.27	38.00
SBY -Alang Bhavnagar	1651.61	1416.77
Porbandar	70.92	86.37
Muldwarka	17.24	2.33
Old Mundra	2.23	1.83
Adani Hazira Port	0	0
Dahej	3516.22	4331.34
Magdalla	1130.59	905.55
Jhakau port	4.74	6.77
Dharamtar	380.17	274.42
PNP Port	30.49	41.64

1	2	3
Revdanda (Including Sanegaon)	82.78	42.67
Sriwardhan/Dighi	21.48	104.05
Dahanu	10.14	35.97
Dhamra	417.82	692.26
Gopalpur	0	8.07
Kattupalli	0	250.35
Kelsi	1.56	4.48
RGPPPL	37.37	125.74
JSW	148.76	112.54
Finolex	206.86	228.92
Angre	3.28	0
Reddi	160.05	237.99
Bharati Shipyard Limited	0.15	0
Adani Port (Mundra)	3144.76	3106.38

Capital infusion in weak PSBs

2464. SHRI D. KUPENDRA REDDY: Will the Minister of FINANCE be pleased to state:

(a) whether there is any proposal to infuse about ₹ 20,000 crore into Public Sector Banks which show weak performance; and

(b) if so, the details thereof and the steps taken for improving the performance of the Public Sector Banks (PSBs) of the country?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) At present Public Sector Banks (PSBs) are adequately capitalized and meeting all the three Basel Norms and RBI Norms. However, to adequately capitalize all the Banks to keep us a buffer over and above the minimum norms of Basel III, Government proposes to allocate ₹ 25,000 crore in FY 2015-16. Government of India also proposes to make available ₹ 70,000 crore out of budgetary allocation from FY 2016 to FY 2019. As the majority shareholder, Government of India is committed to keep all PSBs adequately capitalized.

The Government proposes to allocate ₹ 25,000 crore in 2015-16, out of which 40% of the amount will be given to those banks which require support and maintain PSBs to remain at the level of at least 7.5% Tier-I capital by Financial Year 2016.

40% capital will be allocated to the top six big banks viz. State Bank of India, Bank of Baroda, Bank of India, Punjab National Bank, Canara Bank and IDBI Bank in order to strengthen them to play a vital role in the economy. The remaining portion of 20% will be allocated to the banks based on their performance during the three quarters in the current year judged on the basis of certain parameters. This will incentivize them to improve their performance in the current year.

(b) The Government is taking various steps to increase the efficiency of operations in Public Sector Banks which *inter-alia* include new governance structure at the Board level, modification in guidelines to introduce professionalism at the Board level, better NPA management and risk controls and further revamping of key performance indicators.

Encouraging small saving investment

2465. SHRI DARSHAN SINGH YADAV:

SHRI KIRANMAY NANDA:

Will the Minister of FINANCE be pleased to state:

(a) whether there are proposals under consideration/approved by Government to encourage small savings and increase the rate of interest on their savings for the poor and needy people of the country including the senior citizens; and

(b) if so, the details thereof and the details of the various schemes formulated by Government recently in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Yes Sir, there are schemes approved by the Government to encourage small savings. The details of the scheme and the applicable interest rates in 2014-15 and 2015-16 are given in the Statement (*See* below).

The Government has launched a new scheme "Sukanya Samriddhi Account (SSA)" and relaunched Kisan Vikas Patras (KVPs). Sukanya Samriddhi Account Scheme:

The natural or legal guardian may open Sukanya Samriddhi Account in the name of girl child from the birth of girl child till she attains the age of ten years and in the name of girl child, who had attained the age of ten years, one year prior to the commencement of these rules dated 2.12.2014. The account may be opened with an initial amount of one thousand rupees (₹ 1000). Deposit upto one lakh and fifty thousand rupees (₹ 1,50,000) can be made in a financial year. The account may be transferred anywhere in India. Withdrawals from the account can be made for the purposes of higher education and marriage. Amount deposited under this scheme is exempted from Income Tax.

Kisan Vikas Patras Scheme:

Amount invested in Kisan Vikas Patra doubles in 100 months at the present rate. The certificates can be purchased by an adult for himself or on behalf of a minor or by a minor. It can also be purchased jointly by two adults. The certificate may be prematurely encashed any time after two and a half years from the date of purchase, in the event of death of holder or any of the holder(s), on order of court of Law and forfeiture by a pledge.

Statement

Details of 'encouraging small savings' scheme and the applicable interest rates in 2014-15 and 2015-16

SI. No.	Name of Schemes	Interest Rates (%) For 2014-15	Interest Rates (%) For 2015-16
1.	Savings Deposit Scheme	4.0	4.0
2.	1 Year Time Deposit Scheme	8.4	8.4
3.	2 Year Time Deposit Scheme	8.4	8.4
4.	3 Year Time Deposit Scheme	8.4	8.4
5.	5 Year Time Deposit Scheme	8.5	8.5
6.	5 Year Recurring Deposit Scheme	8.4	8.4
7.	5 Year Senior Citizens Savings Schemes	9.2	9.3
8.	5 Year Monthly Income Account Scheme	8.4	8.4
9.	5 Year National Savings Certificate	8.5	8.5
10.	10 Year National Savings Certificate	8.8	8.8
11.	15 Year Public Provident Fund Scheme	8.7	8.7
12.	Kisan Vikas Patras	8.7	8.7
13.	Sukanya Samriddhi Account Scheme	9.1	9.2

Disposal of non-core assets by PSBs

2466. SHRI ANAND SHARMA: Will the Minister of FINANCE be pleased to state:

(a) whether the Finance Minister and the RBI has asked the Public Sector Banks (PSBs) for disposal of non-core assets to raise liquidity and to support loan growth, if so, the details thereof; and

(b) whether Government and RBI proposes to improve the financial health of

banks by recapitalisation of the PSBs to improve the liquidity of the banks, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Government has advised Public Sector Banks (PSBs) to review their investment in different non-core banking activities and take suitable necessary decision with regard to investment/disinvestment in existing as well as proposed non-core banking activities. These decisions should be made by the Boards of the PSBs as per corporate governance guidelines laid out in the Companies Act.

(b) At present Public Sector Banks (PSBs) are adequately capitalized and meeting all the three Basel Norms and RBI Norms. However, to adequately capitalize all the Banks to keep us a buffer over and above the minimum norms of Basel III, Government proposes to allocate ₹ 25000 crore in FY 2015-16. Government of India also proposes to make available ₹ 70000 crore out of budgetary allocation from FY 2016 to FY 2019. As the majority shareholder, Government of India is committed to keep all PSBs adequately capitalized.

The Government proposes to allocate ₹ 25000 crore in 2015-16, out of which 40% of the amount will be given to those banks which require support, and maintain PSBs to remain at the level of at least 7.5% Tier-I capital by Financial Year 2016. 40% capital will be allocated to the top six big banks viz. State Bank of India, Bank of Baroda, Bank of India, Punjab National Bank, Canara Bank and IDBI Bank in order to strengthen them to play a vital role in the economy. The remaining portion of 20% will be allocated to the banks based on their performance during the three quarters in the current year judged on the basis of certain parameters. This will incentivize them to improve their performance in the current year.

Fall in value of rupee against dollar

2467. SHRI RAMDAS ATHWALE:

SHRI DEVENDER GOUD T.:

Will the Minister of FINANCE be pleased to state:

(a) the value of rupee against dollar in the last three years and the current year, month-wise;

(b) the reasons for sharp fall in rupee against dollar and the steps taken to arrest the downfall of rupee;

(c) what impact the 'slipped rupee' will have on imports, current account deficit, economy and also on various projects going on in the country; and

(d) the steps taken/proposed to be taken to arrest the free fall of rupee?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The month-wise average exchange rate of the rupee *vis-a-vis* US dollar since 2012-13 is given in the following table:

Exchange Rate of the Rupee against the US dollar

(₹ per US dollar)

Months	2012-13	2013-14	2014-15	2015-16
April	51.81	54.38	60.36	62.75
May	54.47	55.01	59.31	63.80
June	56.03	58.40	59.73	63.86
July	55.49	59.78	60.06	63.63
August	55.56	63.21	60.90	
September	54.61	63.75	60.86	
October	53.02	61.62	61.34	
November	54.78	62.63	61.70	
December	54.65	61.91	62.75	
January	54.32	62.08	62.23	
February	53.77	62.25	62.04	
March	54.40	61.01	62.45	
Average	54.41	60.50	61.14	63.51

Source: Reserve Bank of India

(b) The rupee depreciated in 2012-13 and 2013-14 due to elevated levels of current account deficit (CAD) in India and relatively inadequate capital or financial flows of the stable variety to finance it owing to global uncertainties and associated volatilities. During 2015-16, the exchange rate of the Indian rupee against the US dollar has remained in the range of ₹ 62.7- 63.9 per US dollar. The variation in the value of rupee against the US dollar in the recent months has been due to supply-demand imbalance in the foreign exchange market and the general appreciation of the US dollar globally.

(c) A fall in the value of domestic currency can help correct trade imbalances as exports become cheaper and imports become dearer. The impact of exchange rate depreciation on different sectors of Indian economy depends on a number of factors like elasticity of exports and imports, relative prices of domestic and global products,

etc. The softening of international commodity prices, particularly crude oil prices, notwithstanding the modest depreciation, will have favourable impact on the value of imports, trade and current account balances as well as macro-economic stability.

(d) The exchange rate of the rupee is by and large market determined. The Government and the RBI are closely monitoring the emerging external position including exchange rate of the rupee and on an on-going basis calibrating policies or regulations to support robust macro-economic outcome.

Waiver of loans of drought affected people in Maharashtra

2468. SHRIMATI RAJANI PATIL: Will the Minister of FINANCE be pleased to state:

(a) whether any study has been done on borrowers who are unable to repay and those who have defaulted in payments in the wake of successive droughts in different parts of the country, particularly in Maharashtra;

(b) if so, the details thereof including the number of borrowers and total amount of loan in the above category, State-wise, category-wise, as on date; and

(c) whether above loans will be waived as a relief measures to the farmers, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) The Reserve Bank of India (RBI) and National Bank for Agriculture & Rural Development (NABARD) have informed that they have not conducted any specific study about the borrowers who are unable to repay and those who have defaulted in payments in the wake of successive droughts in different parts of the country.

RBI has issued standing guidelines for relief measures to be provided by respective lending institutions in areas affected by natural calamities which, *inter alia*, include identification of beneficiaries, extending fresh loans and restructuring of existing loans, relaxed security and margin norms, moratorium, etc. The moment calamity is declared by the concerned District Authorities, these Guidelines have been so designed that they are automatically set in motion without any intervention and this saves precious time.

Further, under the Interest Subvention Scheme of Government of India, in order to provide relief to the farmers on occurrence of natural calamities, the interest subvention of 2% shall continue to be available to banks for the first year on the restructured amount and such restructured loans may attract normal rate of interest from the second year onwards as per the policy laid down by RBI.

Credit to agriculture sector

2469. DR. BHALCHANDRA MUNGEKAR: Will the Minister of FINANCE be pleased to state:

(a) how much total credit was given to agriculture from all sources during the financial year 2014-15, source-wise amount; and

(b) how much of this credit was given to the marginal farmers, source-wise?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) The details of agency-wise disbursement of agriculture credit during 2014-15, along with the amount disbursed to small and marginal farmers (SF/MF), are as under:

(Amount in ₹ crore)		
Agency	Agriculture credit disbursed during 2014-15*	Amount disbursed to SF/MF during 2014-15*
Commercial Banks	6,04,375.82	1,97,540.38
Cooperative Banks	1,38,469.50	78,735.66
Regional Rural Banks	1,02,482.91	70,390.26
TOTAL	8,45,328.23	3,46,666.30

*Provisional Data Source: RBI

Employment of sportspersons in Deptt. of Custom and Excise

2470. SHRI VIJAY JAWAHARLAL DARDA: Will the Minister of FINANCE be pleased to state:

(a) whether Ministry have sports policy to recruit the eminent sports persons who have won medals in various international events;

(b) if so, how many such players are employed in the Deptt. of Custom and Excise;

(c) whether Ministry follows promotion policy framed by DoPT in promoting sports persons and also granting out-of-turn promotion to sportspersons who have won Gold and Silver medals in various international events during the course of employment in the Department; and

(d) if so, how many such sportspersons promoted and how many have been left out along with their names and reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Central Board of Excise and Customs (CBEC) follows Department of Personnel and Training (DoP&T) guidelines for recruitment of sportspersons to various Group 'C' posts.

(b) As per available information, 230 sportspersons are presently employed in different grades in the field formations under CBEC.

(c) CBEC follows DOP&T's policy/guidelines dated 26.7.2012 regarding promotion of eligible sportspersons.

(d) No sportsperson has so far been given out of turn promotion under the Scheme.

**Participation of insurance companies in recently launched
insurance and pension schemes**

2471. SHRI SANJAY RAUT: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that Life Insurance Corporation of India (LIC) has no participation in recently launched Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY), Pradhan Mantri Suraksha Bima Yojana (PMSBY) and Atal Pension Yojana (APY) in the country, if so, the reasons therefor;

(b) which insurance companies have participated in these schemes, company-wise enrolments so far; and

(c) whether Government is considering to give first priority to LIC or any other Government's insurance companies like The New India Insurance, GIC, etc., if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) The Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY) is a one year life insurance scheme, renewable from year to year, offering life insurance cover of ₹ two lakhs for death due to any reason to all individual bank account holders in the age group of 18 to 50 years (life cover up to age 55) who give their consent to join the scheme and enable auto-debit for a premium of ₹ 330/- per annum per member. The scheme is administered through Life Insurance Corporation of India (LIC) and other Life Insurance companies who have entered into MoUs with Banks to offer the product on similar terms with necessary approvals for this purpose. Participating banks are free to engage any such life insurance company for implementing the scheme for their subscribers. As on date LIC's share under PMJJBY is 58% while the rest 42% is through Private Life Insurance Companies.

The Pradhan Mantri Suraksha Bima Yojana (PMSBY) is a one year personal accident insurance scheme, renewable from year to year, offering coverage for death/disability due to an accident and is available to people in the age group of 18 to 70 years having a bank account who give their consent to join and enable auto-debit for a premium of ₹ 12/- per annum per member through banks who have entered into MoUs with Public Sector General Insurance Companies or other General Insurance Companies who offer the product on similar terms with necessary approvals for this purpose.

The Atal Pension Yojana (APY) is a pension scheme which is being administered by National Pension System Trust (NPS Trust) and Pension Fund Regulatory and Development Authority (PFRDA). The registration of subscribers under Atal Pension Yojana (APY) is through Banks. The APY was launched for all citizens of India in the age group of 18-40 years having bank accounts, operationalized through auto debit facility. Banks which are under Core Banking Solution platform are enabled to enroll subscribers under APY.

The detail of insurance companies which are participating in PMJJBY and PMSBY schemes is given in Statement-I (*See below*) while the bank-wise/company-wise gross enrolment data under PMJJBY and PMSBY schemes as on 08.08.2015 subject to verification of eligibility of applicants as per rules, and availability of funds for auto debit of premium etc. are given in Statment-II and III respectively.

Statement-I

*Details of insurance companies which are participating in
PMJJBY and PMSBY schemes*

Sl. No.	Names of Insurance companies participating in PMSBY	Names of Insurance companies participating in PMJJBY
1	2	3
1.	United India Insurance Co. Ltd.	Life Insurance Corporation of India
2.	National Insurance Co. Ltd.	SBI Life Insurance Co. Ltd.
3.	Oriental Insurance Co. Ltd.	Star Union Daichi Life Insurance Co. Ltd.
4.	ICICI Lombard General Insurance Co. Ltd.	India First Life Insurance Company Limited
5.	Reliance General Insurance Co. Ltd.	ICICI Prudential Life Insurance Co. Ltd.
6.	Tata AIG General Insurance Company Limited	Max Life Insurance company Ltd.

1	2	3
7.	Cholamandalam MS	Shriram Life Insurance Co. Ltd.
8.	Universal Sompo General Insurance Co. Ltd.	HDFC Life Insurance Company Ltd.
9.	New India Assurance company Ltd.	Tata AIA Life Insurance Co. Ltd.
10.	Bajaj Allianz General Insurance Co. Ltd.	Birla Sun Life Insurance Co. Ltd.

Statement-II

Details of PMJJBY Enrolment as on 8-8-2015

Gross Enrolment (as on 08-08-2015) reported by Banks, subject to verification of eligibility of applicants as per Rules and availability of funds for auto debit of premium etc.

Sl.No	Bank Name	Name of Insurance Partner	Total
1.	Allahabad Bank	Life Insurance Corpn. of India	906149
2.	Andhra Bank	India First Life Insurance Co. Ltd.	607141
3.	Axis Bank Ltd.	Max Life Insurance	165651
4.	Bank of Baroda	India First Life Insurance Co. Ltd.	1732164
5.	Bank of India	Star Union Diachi Life	1357967
6.	Bank of Maharashtra	Life Insurance Corpn. of India	913844
7.	Bhartiya Mahila Bank	Life Insurance Corpn. of India	19198
8.	Canara Bank	Life Insurance Corpn. of India	1827005
9.	Central Bank of India	Life Insurance Corpn. of India	1875882
10.	City Union Bank Ltd.	Life Insurance Corpn. of India	38352
11.	Corporation Bank	Life Insurance Corpn. of India	503186
12.	Dena Bank	Life Insurance Corpn. of India	537012
13.	Federal Bank Ltd.	Life Insurance Corpn. of India	64772
14.	HDFC Bank Ltd.	HDFC Life	756410
15.	ICICI Bank Ltd.	ICICI Prudential Life Insurance	319822
16.	IDBI Bank Ltd.	Life Insurance Corpn. of India	503285
17.	Indian Bank	Life Insurance Corpn. of India	788938
18.	Indian Overseas Bank	Life Insurance Corpn. of India	1052093
19.	IndusInd Bank Ltd.	Life Insurance Corpn. of India	3305

Sl.No	Bank Name	Name of Insurance Partner	Total
20.	Jammu and Kashmir Bank Ltd.	Life Insurance Corpn. of India	183473
21.	Karur Vysya Bank Ltd	Life Insurance Corpn. of India	90137
22.	Kotak Mahindra Bank Ltd.	Life Insurance Corpn. of India	121155
23.	Lakshmi Vilas Bank Ltd.	SBI Life Insurance Co.	18669
24.	Oriental Bank of Commerce	Life Insurance Corpn. of India	591431
25.	Punjab and Sind Bank	Life Insurance Corpn. of India	147260
26.	Punjab National Bank	Life Insurance Corpn. of India	2022935
27.	Ratnakar Bank Ltd.	HDFC Life	773
28.	Rural Cooperative Bank	Life Insurance Corpn. of India	578473
29.	South Indian Bank Ltd.	Life Insurance Corpn. of India	55822
30.	State Bank of Bikaner & Jaipur	SBI Life Insurance Co.	222031
31.	State Bank of Hyderabad	SBI Life Insurance Co.	606775
32.	State Bank of India	SBI Life Insurance Co.	3675466
33.	State Bank of Mysore	SBI Life Insurance Co.	302711
34.	State Bank of Patiala	SBI Life Insurance Co.	110921
35.	State Bank of Travancore	SBI Life Insurance Co.	107596
36.	Syndicate Bank	Life Insurance Corpn. of India	1294950
37.	Tamilnad Mercantile Bank Ltd.	Life Insurance Corpn. of India	47544
38.	UCO Bank	Life Insurance Corpn. of India	732504
39.	Union Bank of India	Star Union Diachi Life	1118639
40.	United Bank of India	Life Insurance Corpn. of India	859216
41.	Vijaya Bank	SBI Life Insurance Co.	463017
42.	Yes Bank Ltd.	Life Insurance Corpn. of India	7967
GRAND TOTAL			27331641

Statement-III*Details of PMSBY Enrolment as on 8-8-2015*

Gross Enrolment (as on 08-08-2015) reported by Banks, subject to verification of eligibility of applicants as per Rules and availability of funds for auto debit of premium etc.

Sl.No	Bank Name	Name of Insurance Partner	Total
1.	Allahabad Bank	New India Assurance Co. Ltd.	616161
		Universal Sompo General Insurance	2179358
2.	Andhra Bank	United India Ins. Co. Ltd.	2596483
3.	Axis Bank Ltd.	TATA AIG General Insurance	487002
4.	Bank of Baroda	National Insurance Co. Ltd.	4867080
5.	Bank of India	New India Assurance Co. Ltd.	3927670
6.	Bank of Maharashtra	United India Ins. Co. Ltd.	1426044
7.	Bhartiya Mahila Bank	New India Assurance Co. Ltd.	50269
8.	Canara Bank	United India Ins. Co. Ltd.	4288794
9.	Central Bank of India	New India Assurance Co. Ltd.	3251701
10.	City Union Bank Ltd.	New India Assurance Co. Ltd.	53260
11.	Corporation Bank	New India Assurance Co. Ltd.	1080782
12.	Dena Bank	United India Ins. Co. Ltd.	2322166
13.	Federal Bank Ltd.	New India Assurance Co. Ltd.	147845
14.	HDFC Bank Ltd.	United India Ins. Co. Ltd.	1256904
15.	ICICI Bank Ltd.	ICICI Lombard General Insurance	1107792
16.	IDBI Bank Ltd.	Bajaj Allianz General Insurance	929383
17.	Indian Bank	United India Ins. Co. Ltd.	1753750
18.	Indian Overseas Bank	Universal Sompo General Insurance	3071065
19.	IndusInd Bank Ltd.	Cholamandalam General Ins.	104602
20.	Jammu and Kashmir Bank Ltd.	New India Assurance Co. Ltd.	250542
21.	Karur Vysya Bank Ltd.	Bajaj Allianz General Insurance	130629
22.	Kotak Mahindra Bank Ltd.	ICICI Lombard General Insurance	181958

Sl.No	Bank Name	Name of Insurance Partner	Total
23.	Lakshmi Vilas Bank Ltd.	United India Ins. Co. Ltd.	36382
24.	Oriental Bank of Commerce	Oriental Insurance Company Ltd.	3075350
25.	Punjab and Sind Bank	New India Assurance Co. Ltd.	805677
26.	Punjab National Bank	Oriental Insurance Company Ltd.	6076260
27.	Ratnakar Bank Ltd.	Bajaj Allianz General Insurance	2105
28.	Rural Cooperative Bank	National Insurance Co. Ltd.	1446699
29.	South Indian Bank Ltd.	New India Assurance Co. Ltd.	167358
30.	State Bank of Bikaner and Jaipur	National Insurance Co. Ltd.	1050508
31.	State Bank of Hyderabad	National Insurance Co. Ltd.	1186187
32.	State Bank of India	National Insurance Co. Ltd.	16419867
33.	State Bank of Mysore	National Insurance Co. Ltd.	567595
34.	State Bank of Patiala	National Insurance Co. Ltd.	962743
35.	State Bank of Travancore	National Insurance Co. Ltd.	515500
36.	Syndicate Bank	United India Ins. Co. Ltd.	3733298
37.	Tamilnad Mercantile Bank Ltd.	United India Ins. Co. Ltd.	74217
38.	UCO Bank	Reliance General Insurance	912366
		United India Ins. Co. Ltd.	563086
39.	Union Bank of India	New India Assurance Co. Ltd.	2369496
		United India Ins. Co. Ltd.	220594
40.	United Bank of India	National Insurance Co. Ltd.	2910058
41.	Vijaya Bank	United India Ins. Co. Ltd.	1552639
42.	Yes Bank Ltd.	New India Assurance Co. Ltd.	9816
GRAND TOTAL			80739041

Total gold available in the country

2472. DR. V. MAITREYAN: Will the Minister of FINANCE be pleased to state:

(a) whether the Reserve Bank of India (RBI) has account of the total quantity and value of gold in Government's possession and in markets for domestic consumption as well as in public possession as on date;

(b) if so. the details thereof viz. the total quantity and value of gold in Government's possession in markets for domestic consumption and in public possession as on date and the comparison with developed countries in possession of gold;

(c) the total quantity and value (in INR) of gold imported and exported in the last three years. year-wise; and

(d) the various measures taken by Government to control and steady the gold in Government's possession in markets for domestic consumption and in public possession as on date?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) The Reserve Bank of India RBI does not maintain account of the total quantity and value of gold in Government possession, in markets for domestic consumption as well as in public possession. The forex reserves maintained by RBI includes 557.75 tonnes of gold valued at ₹ 1216.1 billion (USD 19.074.3 million) as on July, 24.2015.

(c) The total quantity and value (in INR) of gold imported and exported in the last three years. year-wise is as below :

Year	Import of Gold		Export of Gold	
	Qty (Kg)	Value (₹ in Crore)	Qty (Kg)	Value (₹ in Crore)
2012-13	1013717	292152.83	93032	26398.99
2013-14	661713	166242.62	72006	18677.30
2014-15	916134	210658.10	70819	17447.83

Note : Figures for 2014-15 is provisional.

(d) To moderate the demand of gold in the markets and for domestic consumption. the following measures were taken by the Government:

- (i) The 20: 80 rule for import of gold was made applicable under which 20% of every imported lot of gold had to be exported. *Vide* RBI/2014-15/329 A.P. (DIR'Series) Circular No.42 November 28. 2014 instructions on withdrawal of 20 :80 scheme were issued. *Vide*

RBII2014-IS/474 A.P. (DIR Series) Circular No.7<) February 18.2015 the issue was further clarified and Star and Premium Trading Houses were allowed to import gold on Document against Payment basis without any end use restrictions.

- (ii) The Gold Deposit Scheme was announced in the year 1999 to mobilize the idle gold in the country and to reduce the country's reliance on import of gold.
- (iii) In Union Budget 2015-16, Honble Finance Minister announced the introduction of the Gold Monetization Scheme and Sovereign Gold Bonds scheme to reduce the country's reliance on gold imports.

Shortage of staff in PSBs due to retirement

2473. SHRI RAJKUMAR DHOOT: Will the Minister of FINANCE be pleased to state :

(a) whether it is a fact that nearly two lakh employees and officers of the Public Sector Banks (PSBs) will retire by the end of the next year which will create serious shortage of staff in these Banks if so, the details thereof; and

(b) what action Government proposes to take in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) No Sir, Public Sector Banks (PSBs) undertake recruitment of staff to fill vacancies on ongoing basis as per their requirements depending upon business volume, business growth, employee strength and retirements etc. As per available data, the number of employees retiring in PSBs during two years is as follows:

Cadre	2015-16	2016-17
Officers	19065	18506
Clerks	14669	14458
Sub-Staff	6022	6080
TOTAL	39756	39044

(b) Does not arise.

Increase in allocation for deep sea fishing

2474. SHRIMATI VIJILA SATHYANANTH: Will the Minister of FINANCE be pleased to state: “would the Ministry increase allocation of ₹ 20000 crores for schemes approved by Niti Aayog to consider funding specific projects to encourage

deep sea fishing including replacing trawlers with tuna long-liners, desalination projects for supplying uninterrupted water supply to Chennai City and viability gap funding for Chennai Monorail Project?”

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): Government has allocated ₹ 20000 crores for schemes approved by the National Institutions for Transforming India (NITI) Aayog for specific interventions. As regards project relating to deep sea fishing including replacing trawlers with tuna long-liners, Department of Animal Husbandry, Dairying and Fisheries is examining the proposal in consultation with the Government of Tamil Nadu. As regards, desalination projects for supplying uninterrupted water supply to Chennai City, no proposal is received. Further, in respect of viability gap funding for Chennai Monorail Project, Government of Tamil Nadu has not submitted Detailed Project Report to the Ministry of Urban Development.

Encouraging electronic transactions

2475. SHRI RANJIB BISWAL: Will the Minister of FINANCE be pleased to state:

(a) whether Government has any proposal to encourage electronic transactions including income tax benefits for payments made through debit or credit cards, if so, the details thereof;

(b) whether Government also proposes to make it mandatory for all transactions above rupees one lakh to only be conducted electronically, if so, the details thereof and the reasons therefor; and

(c) whether Government has sought comments from the general public and other stakeholders in this regard, if so, the details of the views expressed by the public and the action taken/likely to be taken by Government thereon?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) Based on the announcement in the Budget Speech for the Financial Year 2015-16 to introduce several measures to incentivise credit or debit card transactions and disincentivise cash transactions, the Government has prepared Draft Proposals for Facilitating Electronic Transactions, which include proposals for tax incentives to consumers and merchants and settling of high value transactions, only by electronic means. The Draft Proposals were placed on My Gov platform (www.mygov.in) for public comments. The feedback from the members of the public shows overwhelming support for the proposals. A copy of the Draft Proposals is given in the Statement (*See below*).

The Draft Proposals will be finalised after discussions! consultations with the concerned Departments! Organisations and other stake holders.

Statement***Draft Proposals For Facilitating Electronic Transactions*****1. Objectives**

- Improve the ease of conducting transactions for an individual
- Build a transactions history to enable improved credit access and financial inclusion.
- Reduce the risks and costs of carrying cash at the individual level.
- Reduce costs of managing cash in the economy.
- Reduce tax avoidance
- Reduce the impact of counterfeit money.

2. Scope

- Provide access to financial services to every citizen along with ability to conduct non cash transactions
- Electronification of Government Collections by equipping each collection desk with a method to accept non cash receipts
- Migrate payment transactions from cash dominated to non-cash through incentivization of electronic and disincentivization of cash based transactions
- Enhance acceptance infrastructure in the country to promote electronification of transactions
- Encourage Government, Corporates, institutions and merchant establishments to facilitate non cash payments

3. Definition

E-transactions are defined as transactions in which the customer authorizes the transfer of money through electronic means, and the funds flow directly from one account to another. These accounts could be held in banks, or with prepaid instrument providers. These transfers could be done through means of cards (debit/credit), mobile wallets, mobile apps, net banking, Electronic Clearing Service (ECS), National Electronic Fund Transfer (NEFT), Immediate Payment Service (IMPS), or other similar means.

4. Goal

The goal of the proposed policy is to provide the necessary incentives to use E-transactions to replace the use of cash - either in Government transactions, or in regular commerce over a period of time through policy intervention.

5. Way Forward

The draft proposals detailed in this section, have been prepared after due deliberations and consultations with various stakeholders which includes RBI, NPCI, NIBM, public and private sector banks, card service providers, mobile service providers, research institutions, organizations working in this area and various Government departments.

5.1 Enabling policy for E-transactions in Government Collections

- At present, Government Departments/Central Public Sector Undertakings/Organizations levy a convenience fee/service charge/surcharge for making E-transactions (card payments) to essential commodities, utility service providers, petrol pumps, gas agencies, railway ticket counter/IRCTC etc. The feasibility of removing the charges will be examined.
- Utility service providers could be advised to give a discount to users for small ticket payments through E-payments, on the lines of BSNL, which provides an incentive of 1 per cent of the billed amount if the payment is done through electronic mode.
- Government Departments to introduce appropriate acceptance infrastructure or adopt national E-payment gateway 'Pay Gov India' for collection of revenue, fee, penalties etc.

5.2 Measures to promote wider adoption of E-transactions

- At present, there is a Merchant Discount Rate (MDR) of 0.75% on Debit Card transactions upto ₹ 2000 and 1 % on all transactions above ₹ 2000. The possibility of reduction in the MDR and the rationalization of the distribution of the MDR across different stakeholders will be examined.
- The existing inter-change fee on Debit/Credit Card transactions are not uniform and need to be standardized/rationalized to encourage both issuing. and acquiring banks to establish and utilize acceptance infrastructure.
- Tax benefits could be provided to merchants for accepting electronic payments, *e.g.* an appropriate tax rebate can be extended to a merchant if at least say 50% value of the transactions is through electronic means. Alternatively, 1-2% reduction in value added tax could be considered on all electronic transactions by the merchants.
- Tax benefits in terms of income tax rebates to be considered to consumers for paying a certain proportion of their expenditure through electronic means.

- The authentication requirements for different classes of transactions could be re-examined based on the risk profile and safety requirements.
- Consider a levy of a nominal cash handling charge on transactions greater than a specified level.
- Mandating settling of high value transactions of, say, more than ₹ 1 lakh, only by electronic means.
- At present, banks have to report the aggregate of all the payments made by a credit cardholder as one transaction, if such an amount is ₹ 2 lakhs in a year. To facilitate high value transactions, the ceiling of ₹ 2 lakhs could be increased to say ₹ 5 lakhs or more.

5.3 Creating enabling environment/acceptance infrastructure

- It has been observed that acceptance infrastructure, particularly Point of Sale (PoS)/Mobile PoS terminals as a percentage of the total number of Debit/Credit Cards is very low. Therefore, mandating banks issuing cards to deploy POS terminals in a prescribed ratio could be considered.
- Like in ATMs, non-banks could be authorized to install white label POS terminals.
- Improve broad band connectivity to enable mobile based payments on a wider scale.

5.4 Encouraging mobile banking/payments channels

- Currently, the telecom companies are levying an Unstructured Supplementary Service Data (USSD) charge of ₹ 1.50 per transaction for mobile banking/payments. To enhance adoption of mobile banking/payment, the USSD charges could be examined and rationalized.
- Appropriate changes in the regulatory structure, if required, to promote mobile based payment systems.

5.5 Awareness and grievance redressal

- Assurance mechanisms for fraudulent transactions to be created wherein, in case of a fraudulent transaction, the money will be credited back to customer's account and blocked and subsequently released after the investigation is complete/limited to say a maximum of 3 months.

6. Other Issues

While the Payments and Settlement Systems (PSS) Act, 2007 governs this area, changes in the regulatory mechanisms-could be examined to ensure that innovations in the payments ecosystem continue to happen. The linkages with Aadhaar based identification for authentication could also be strengthened.

Educational loans

2476. SHRI K.C. TYAGI: Will the Minister of FINANCE be pleased to state:

(a) the total number and amount of educational loans given in the last two years particularly to the poor students of the country and the total amount outstanding;

(b) the total number of applications received and the number of applications for loans rejected; and

(c) the steps taken by Government to ensure that all eligible applicants avail the loan?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) As per data furnished by RBI, the position of number of accounts and outstanding education loan (priority sector) for the last two years is given hereunder:

Year	No. of Accounts	Amount Outstanding (₹ in Crore)
March, 14	2681360	57164.17
March, 15	2674069	59406.92

(b) As informed by Public Sector Banks, during 2014-15, 254420 loan applications related to education loans were received, out of which 247453 were disposed off.

(c) Hon'ble Finance Minister in the budget announcement for 2015-16 has proposed to set up a fully IT based Student Financial Aid Authority to administer and monitor Scholarship as well as Educational Loan Schemes, through the Pradhan Mantri Vidya Lakshmi Karyakram.

The banks have also been advised to keep in view primarily the larger public/societal interest involved while giving education loan. Also, while providing education loans, banks should primarily keep in mind the standing and stature of the institution.

List of all 'A' rated universities, colleges and technical institutions has been forwarded to IBA for onwards circulation to all Banks so that students getting admissions in these institutions could get educational loans with minimal formalities.

Banking facilities in rural area of Madhya Pradesh and West Bengal

2477. DR. CHANDAN MITRA : Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that nearly one third of gram panchayat areas in Madhya Pradesh and West Bengal are outside the purview of formal banking operations, if so, the details thereof along with the reasons therefor; and

(b) the steps taken, by Government to set up banks in all the rural areas which are not catered by the banks across the country, especially in West Bengal and Madhya Pradesh?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Banking facilities in both the States of Madhya Pradesh and West Bengal are being provided by banks through bank branches and Bank Mitras.

State Level Bankers' Committee (SLBC), Madhya Pradesh has informed that out of 22879 Gram Panchayats 2851 Gram Panchayats are covered by bank branches and 20028 Gram Panchayats are covered by Bank Mitras.

State Level Bankers' Committee (SLBC), West Bengal has informed that out of 3354 Gram Panchayats, 2638 Gram Panchayats are covered by bank branches and 716 Gram Panchayats are covered by Bank Mitras.

(b) To promote the objective of financial inclusion and to extend the banking network in unbanked areas, Reserve Bank of India has granted general permission to domestic Scheduled Commercial Banks (other than Regional Rural Banks) to open branches (i) in Tier 2 to Tier 6 centres (with population upto 99,999) and (ii) in rural, semi-urban and urban centres of the North-Eastern States and Sikkim subject to reporting. RBI has advised banks that while preparing their Annual Branch Expansion Plan (ABEP), the banks should allocate at least 25 per cent of the total number of branches proposed to be opened during a year in unbanked rural (Tier 5 and Tier 6) centres.

Violation of guidelines for reservation of SC & ST by CBEC

2478. SHRI PRAVEEN RASHTRAPAL : Will the Minister of FINANCE be pleased to state:

(a) whether Ministry is aware that the Central Board of Excise and Customs (CBEC) has violated the directions of DOPT on reservation for SC & ST;

(b) whether the DOPT circular no. 36012/4/2005-ESTT (res) dated 7 January, 2014 for reservation of SC & ST would be implemented; and

(c) whether Ministry would inquire why CBEC has resorted to *ad hoc* promotions for Group A posts since 1997 onwards without approval from UPSC?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) DOPT instructions regarding reservation of SC&ST candidates are implemented in the Central Board of Excise and Customs on the basis of Government policy and Court/Central Administrative Tribunal Orders.

(c) Promotion to various Group 'A' posts of Indian Revenue Service (Customs and Central Excise) beyond vacancy year 1997 was done on *ad-hoc* basis due to the prolonged, litigations on seniority matters relating to feeder grades for promotion to Group 'A', which were pending in various Tribunals/Courts. Necessary approval of DoPT for continuance of *ad-hoc* promotions in different posts of Indian Revenue Service (Customs and Central Excise) Group 'A' Service is taken from time to time. As per the advice of DoPT dated 19.10.2011, UPSC was consulted regarding extension of *ad-hoc* promotions in IRS (C&CE) Group A posts. Consequently, UPSC had conducted DPCs for *ad-hoc* promotion to the posts of Assistant Commissioner, Joint Commissioner and Commissioner of Customs and Central Excise for different vacancy years. UPSC *vide* their letter dated 14.10.2014 has, however, advised CBEC to approach the Commission only for holding regular DPCs.

Policy to reduce cash usage

2479. SHRIMATI RENUKA CHOWDHURY: Will the Minister of FINANCE be pleased to state:

(a) whether Government has chalked out any policy to reduce cash usages in the system and incentivise cashless transactions if so, the details thereof, and if not, the reasons therefor; and

(b) the steps taken by Government for ensuring safety and security in usage of electronic methods of transactions as well as rationalization of charges for debit/credit card transactions?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Based on the announcement in the Budget Speech for the Financial Year 2015-16 to introduce several measures to incentivise credit or debit card transactions and disincentivise cash transactions, the Government has prepared Draft Proposals for Facilitating Electronic Transactions. A copy of the Draft Proposals is given in Statement.[Refer to the Statement appended to the answer to USQ No. 2475, part(a) to(c)] The Draft Proposals will be finalised after discussions/consultations with the concerned Departments/Organisations and other stake holders.

(b) Reserve Bank of India (RBI) has issued several instructions on Credit/Debit card transactions-Security and Risk mitigation measures to enhance the security of card transactions (includes card based online transactions) and electronic payment transactions (includes e-banking transactions) and also rationalized the Merchant Discount Rate *vide* circular DPPS.CO.PD.No.2361!02.14.003!2011-2012 dated June 28, 2012. The details are given in Statement.

Statement***Reserve Bank of India (RBI) instructions on Credit/Debit Card Transactions*****Security and Risk Mitigation measures**

1. Banks have been advised to provide online alerts for all card transactions (card present and card not present), *vide*, RBI circular dated February 18, 2009 and March 29, 2011.
2. Banks have been advised, *vide*, RBI circular February 18, 2009 and December 31, 2010 (copy enclosed) to put in place a system of providing additional factor of authentication/validation (2FA) for all card not present transactions using the information which is not available on the card.
3. Reserve Bank of India also issued circulars dated February 28, 2013 and June 24, 2013 for securing electronic (online and e-banking) transactions advising banks to introduce additional security measures, as under:
 - (A) (i) All new debit and credit cards to be issued only for domestic usage unless international use is specifically sought by the customers. Such cards enabling international usage will have to essentially EMV Chip and PIN enabled.
 - (ii) Issuing banks should convert all existing MagStripe cards to EMV Chip card for all customers who have used their card internationally at least once (for/throughe-commerce/ATM/POS).
 - (iii) All the active MagStripe International cards used by banks should have threshold limit for international usage which is to be determined by the bank based on the risk profile of the customer and accepted by the customer. Till such time this process is completed an omnibus threshold limit (say, not exceeding USD 500) as determined by each bank may be put in place for all debit cards and all credit cards that have not been used for international transactions in the past.
- (B) For securing electronic payment transactions
 - (i) Customer induced options may be provided for fixing a cap on the value / mode of transactions/beneficiaries. In the event of customer wanting to exceed the cap, an additional authorization may be insisted upon.
 - (ii) Limit on the number of beneficiaries that may be added in a day per account could be considered.
 - (iii) A system of alert may be introduced when a beneficiary is added.

- (iv) The banks may put in place mechanism for velocity check on the number of transactions effected per day/ per beneficiary and any suspicious operations should be subjected to alert within the bank and to the customer.
 - (v) Introduction of additional factor of authentication (preferably dynamic in nature) for such payment transactions should be considered.
 - (vi) The banks may consider implementation of digital signature for large value payments for all customers, to start with for RTGS transactions.
 - (vii) Capturing of Internet Protocol (IP) address as an additional validation check should be considered.
4. To prevent fraudulent withdrawals at ATMs, RBI had mandated requirement of PIN entry for each and every transaction, including balance enquiry transactions. As an additional safety measure, banks have also been advised that time out sessions should be enabled for all screens/stages of ATM transaction keeping in view the time required for such functions in normal course.
5. Reserve Bank of India also issued circular DPSS(CO) PD No. 2112/02.14.003/2014-15 dated May 07, 2015 (copy enclosed) by which banks and Authorized card Payment networks have been advised that with effect from September 01, 2015 all new cards issued-debit and credit, domestic and international - by banks shall be EMV Chip and PIN based cards. Regarding the migration plan for existing magnetic stripe only cards will be framed in consultation with stakeholders and time line will be advised in due course.
6. Guidelines have also been issued for issuance of Contactless cards using Near Field Communication (NFC) technology for small value transaction (maximum ₹ 2,000) without Additional Factor Authentication(AFA) to foster innovative payment products as also to enhance the convenience factor in certain types of card uses.
7. Guidelines have also been issued on introduction of Prepaid Instruments - MTS a separate category of semi-closed prepaid payment instruments for mass transit systems. The PPI-MTS is expected to enhance commuter convenience and will also facilitate the migration to electronic payments in line with the country's vision of moving to a less-cash society.
8. RBI has issued circular DPSS.CO.PD.No.2361/02.14.003/2011-2012 dated June 28, 2012 by which MDR (Merchant Discount Rate) has been rationalized and capped for transactions undertaken with Debit cards *w.e.f.* Sept. 01, 2012;

(a) not exceeding 0.75 % of the transaction amount for value upto ₹ 2000/-.

(b) not exceeding 1 % for transaction amount for value above ₹ 2000/-.

MDR is the fee payable by merchants to acquiring banks for making them available the acquiring infrastructure (POS machines).

Foreign exchange reserves of the country

2480. SHRI A.K. SELVARAJ: Will the Minister of FINANCE be pleased to state:

(a) whether country's foreign exchange reserves are at a reasonable level;

(b) whether it is a fact that in the first week of July the reserves declined substantially;

(c) whether it is also a fact that it touched a high of US\$355.46 billion in the fortnight ending on 19 June, 2015; and

(d) whether it is also a fact that during last fiscal, Government added US\$ 61.4 billion to the reserves against US \$15.5 billion in the previous fiscal, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) India's foreign exchange reserves (FERs) were placed at US\$ 341.6 billion at end March, 2015 and reached a record level of US\$ 356.0 billion at end June, 2015. India's foreign exchange reserves are at relatively comfortable level in terms of traditional reserve adequacy indicators such as import cover of FERs, FERs to short term debt and FERs to external debt.

(b) and (c) Data on FERs are given in the table below:

Table : India's Foreign Exchange Reserves (US\$ billion)

As at	Foreign Exchange Reserves	Variation over Previous Year/Month/Week
1	2	3
End March 2014	304.2	12.2
End March 2015	341.6	37.4
Monthly		
End April 2015	351.9	10.2
End May 2015	352.5	0.6
End June 2015	356.0	3.5

1	2	3
Weekly		
5 June-2015	352.7	0.2
12 June-2015	354.3	1.6
19 June-2015	355.5	1.2
26 June-2015	355.2	-0.2
30 June-2015	356.0	0.8
3 Jul-2015	354.5	-1.5
10 July-2015	354.4	-0.2
17 July-2015	353.3	-1.0
24 July-2015	353.6	0.3

Source: Reserve Bank of India

(d) The change in the stock of FERs is mainly the outcome of the absorption or injection by the Reserve Bank of India (RBI) of the excess/ deficiency of capital account inflows over the external financing requirement as indicated by the level of current account deficit (CAD) on balance of payments (BoP) basis.

The valuation gain/loss in the stock of foreign currency assets arising largely on account of the depreciation or appreciation of the US dollar against major currencies and the rise or fall of the price of gold and other stock of assets in the FERs are the other significant reasons for the change in the levels of FERs. There was an accretion to reserves of US\$ 15.5 billion and US\$ 61.4 billion in 2013-14 and 2014-15 respectively on BoP basis. However, the stock of FERs increased by US\$ 12.2 billion in 2013-14 and US\$ 37.4 billion in 2014-15 on account of valuation loss.

Notification of amendments to FEMA

2481. SHRI D. RAJA: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that Government has not yet notified the amendments to the Foreign Exchange Management Act (FEMA) that were incorporated into the legislation after the President's assent in May, if so, the details and the reasons therefor; and

(b) whether it is also a fact that a number of FEMA cases are pending including that involved the former IPL chief Lalit Modi due to delay in the notification, if so, the details thereof and Government's reaction thereto?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT

SINHA): (a) Amendment to the Foreign Exchange Management Act, 1999 has been notified *vide* Finance Act, 2015 (No. 20 of 2015) dated 14.05.2015. Further necessary action has been initiated to give effect to the provisions contained in Part V of the Finance Act, 2015.

(b) No, FEMA case including those involving former IPL chief Lalit Modi is pending due to delay in notification.

Penalty for late filing of VAT returns

2482. SHRI MOHD. ALI KHAN: Will the Minister of FINANCE be pleased to state:

(a) whether Government has any proposal to reduce penalty for late filing of VAT returns; and

(b) if so, the details thereof and the present status thereof, State/UT-wise?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) In this regard it is submitted that Sales Tax/VAT being a tax on purchase or sales of Goods within a State, is purely State matter by virtue of Entry 54 in List-II (State List), Seventh Schedule of Constitution, wherein State Government have sovereign power to make tax laws. Information in this regard is not maintained by the Central Government.

Duplication of bank account under PMJDY

2483. SHRI JESUDASU SEELAM : Will the Minister of FINANCE be pleased to state:

(a) how many unique new accounts have been opened by account holders who did not have a bank account previously under the Pradhan Mantri Jan-Dhan Yojana (PMJDY) scheme till June 30, 2015;

(b) how many accounts have zero balance till 30 June, 2015;

(c) whether there has been any incidence of duplication of bank accounts that have come to the notice of Government, if so, what action does Government plan to take on duplicate accounts; and

(d) whether Government has a mechanism in place to ensure that there is no duplication of accounts in future, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) As on 01.07.2015, 16.57 crore accounts have been opened under Pradhan Mantri Jan-Dhan Yojana (PMJDY) with aggregate deposit of ₹ 19580.69

crore. Out of 16.57 crore accounts, 8.53 crore accounts were Zero Balance accounts. All accounts under the Yojana are opened by banks as per Reserve Bank of India (RBI) guidelines.

(c) and (d) In April 2015, it was estimated by PSBs, RRBs and major Private Sector Banks that 3.62 lakh accounts were multiple accounts within the same bank. Due care is taken to ensure that the insurance claims (Life and Accident) and overdraft facility is provided only to genuine beneficiaries.

Rate of interest on loans to animal husbandry sector

2484. SHRI AAYANUR MANJUNATHA: Will the Minister of FINANCE be pleased to state:

(a) whether Government has taken note that the interest rates of bank loans being granted to meet requirements in animal husbandry sector are higher than other loans, if so, the details thereof; and

(b) whether Government is considering to standardise the rate of interest for granting loans to animal husbandry at a reasonable rate, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) The Reserve Bank of India (RBI) has deregulated interest rates on advances. Banks determine their actual lending rates on loans and advances with reference to the Base Rate. However, with a view to ensure availability of agricultural credit to farmers at a reasonable rate, the Government provides interest subvention for short term crop loans upto ₹ 3 lakhs at the interest rate of 7% per annum and in case of prompt repayment, the same gets reduced to 4%. Since this interest subvention is available only for short term crop loans, the same is not available for loans for animal husbandry.

Unspent funds on schemes

2485. SHRI ANAND SHARMA: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that funds allocated for many schemes in the Budget 2014-15 remained unspent, if so, the names of the schemes and the reason for money remaining unspent; and

(b) whether Government has decided not to continue with some of the schemes announced in 2014, if so, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Details of unspent balance in various schemes become available only

after Controller General of Accounts finalizes the Accounts for the year 2014-2015 and their audit.

(b) Yes, Sir. The details of the Schemes which were delinked from support from the Centre in 2015-16 are as under:

- (i) National e-Governance Action Plan (NeGAP)
- (ii) Backward Regions Grant Fund
- (iii) National Scheme for Modernization of Police and Other Forces
- (iv) Rajiv Gandhi Panchayat Sashaktikaran Abhiyan (RGPSA)
- (v) Scheme for setting up of 6000 Model Schools at Block Level as Bench Mark of Excellence
- (vi) Scheme for Central Assistance to the States for developing export infrastructure and other allied activities
- (vii) National Mission on Food Processing
- (viii) Tourist Infrastructure.

Probe into nexus between officers and brokers in LIC

2486. SHRIMATI WANSUK SYIEM: Will the Minister of FINANCE be pleased to state:

(a) whether Government is probing the Life Insurance Corporation (LIC) for an alleged nexus between its officials and brokers to make gains at the cost of institution;

(b) whether the assets under management of LIC stand at over 16 lakh crores and a system should be in place to eliminate operational risks;

(c) whether the allegations revolve around brokers making a killing when LIC bought shares at the higher end of price band, sharing spoils with LIC officials; and

(d) whether the Canadian funds follow a liberal compensation package for its officials and long term performance bonus as its policy for incentivising honesty unlike LIC?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) No, Sir.

(b) Life Insurance Corporation of India (LIC) has informed that assets under management (AUM) of LIC stand at over ₹ 18 lakh crore and Corporation has already put in place an Investment Risk Management Policy to cover risk arising out of investment of funds. Further, the Corporation also has an Anti Fraud Policy in place as part of Capital Fraud Monitoring Framework in accordance with the

Insurance Regulatory and Development Authority of India's circular ref. IRDA/SDD/MISC/CIR/009/01/2013 dated 21st January, 2013.

(c) In view of (a) above, question does not arise.

(d) IRDAI and LIC have informed that they have no information on the practices of Canadian funds.

Development of cancer drugs in the country

2487. DR. KANWAR DEEP SINGH:

SHRI K. C. TYAGI:

SHRIMATI RAJANI PATIL:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that India is still behind in the field of drug discovery for combating the menace of cancer which is spreading widely in the country;

(b) if so, the latest status of developing cancer therapies in the country;

(c) whether Government has any plan to collaborate with the foreign nations already doing research in this field; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) and (b) As in other parts of world, drug discovery for Cancer in India is an ongoing activity. During the last 5 years clinical trial permission has been granted for 5 anti-cancer Investigational New Drugs.

(c) and (d) On 25.6.2015 an MoU was signed among ICMR, AIIMS and National Cancer Institute of USA for collaboration in the field of cancer research in India.

Study on health impact of e-cigarettes

2488. SHRI RAJEEV SHUKLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has conducted any study on the health impact of e-cigarettes, if so, the details and findings thereof; and

(b) whether Government will bring any regulation for use and sale of e-cigarettes in India, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Government has not conducted any study on the health impacts of e-cigarettes.

(b) A proposal to prohibit import, manufacture, sale or distribution of Electronic Nicotine Delivery System (ENDS) or E-Cigarette is under consideration of this Ministry.

Lifting of samples of processed foods for check on compliance

2489. SHRIMATI WANSUK SYIEM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the recent upheaval exposing the health hazards of branded noodles was sparked off by the vigilant State food control laboratories even as Food Safety and Standards Authority of India (FSSAI) relegated as a moot and toothless watchdog;

(b) whether most developed countries prescribe and enforce safe levels of salt, sugar and fat in processed foods like noodles, pasta and macaroni; and

(c) whether Food Safety Commissioners in States are in the process of lifting samples of all 33 approved brands of noodles, pasta and macaroni for lab checkup on compliance of prescribed standards, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The enforcement of Food Safety and Standards (FSS) Act, 2006 and the Rules and regulations made thereunder primarily rests with the State/UT Governments. The FSSAI regularly follows up with the State authorities through written communications and interactions during the meetings of the Central Advisory Committee (CAC), which also comprise of the Commissioner of Food Safety of all States and UTs, for effective implementation of the Act and the rules and regulations thereunder. Samples of Nestlé's Maggi noodles were found to be containing more than the permissible limit of 2.5 ppm of lead and also violating the labelling requirements about presence of Monosodium Glutamate (MSG). The Food Safety and Standards Authority of India (FSSAI) *vide* its communication dated 25th May, 2015 advised all the States/UTs to draw samples of the said food product and get the same tested from authorised labs. M/s Nestle India Ltd. decided to withdraw all 9 variants of Maggi noodles on 05.06.2015. Based on the test results reported from different States, confirming presence of Lead beyond permissible limit, an order dated 05.06.2015 was issued by FSSAI directing M/s Nestle India Ltd. to recall its Maggi Noodles.

(b) Enforcement of Standards varies from country to country. The FSSAI and State authorities concerned follow the food standards as prescribed under the relevant regulations under the FSS Act, 2006.

(c) The FSSAI had advised the Commissioners of Food Safety of all the States/UTs *vide* its communication dated 8th June, 2015 to also draw and test the samples

of Noodles and allied products of other brands as well. As per the information made available by the various States/UTs, samples of noodles, pasta and macaroni have been lifted by the State Food Department officials and sent for analysis.

Amending Food Safety and Standards Act, 2006

2490. SHRI AVINASH PANDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government has proposed or is planning to introduce any amendments to the Food Safety and Standards Act, 2006 or the Rules framed thereunder, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): A Committee was constituted by the Government of India to undertake a comprehensive review of the Food Safety and Standards Act, 2006. The Committee finalised its report on 20.07.2015 and has suggested some changes in the Food Safety and Standards Act, 2006, rules and regulations thereunder.

Educating people on precautionary practices against vector borne diseases

2491. SHRIMATI KANIMOZHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of dengue, chikungunya and swine flu deaths reported in the State of Tamil Nadu for the last three years;

(b) the steps taken by Government to address the incidence of vector borne diseases across the country; and

(c) whether Government is planning to educate people on best precautionary practices against these diseases, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The total number of deaths reported by the State of Tamil Nadu during last three years and current year is as under:

Year	Number of Deaths		
	Dengue	Chikungunya	Swine Flu
2012	66	0	40
2013	0	0	6
2014	3	0	8
2015	5	0	20

(As on 31.7.2015)

(b) Government of India is implementing an integrated National Vector Borne Disease Control Programme (NVBDCP) under the overarching umbrella of National Health Mission (NHM), for prevention and control of six vector borne diseases (Malaria, Dengue, Chikungunya, Filariasis, Japanese Encephalitis and Kala-azar). The main strategy for prevention and control of vector-borne diseases focuses on control of vectors through integrated vector management, behaviour change communication, early case detection and complete treatment of cases.

The steps undertaken to address the incidence of vector borne disease prevention and control include source reduction activities for eliminating vector breeding, use of larvivorous fish, larvicides, indoor residual spray, bed nets, repellents and minor engineering methods. Rapid Diagnostic Tests (RDTs) for detection of Malaria and Kala-azar cases, use of Artemisinin based Combination Therapy (ACT) for treatment of Plasmodium falciparum malaria cases, use of Injection Liposomal Amphotericin and Miltefosine for treatment of Kala-azar cases, vaccination of eligible population for Japanese Encephalitis prevention in endemic districts, strengthening of sentinel surveillance hospitals for Dengue, Chikungunya and Japanese Encephalitis and Mass Drug Administration in Filariasis endemic districts.

(c) Integrated Information Education Communication (IEC) and Behavior Change Communication (BCC) campaign is an integral part of the programme. People are educated through various means including inter-personal communication, miking, hoardings, posters, pamphlets, newspaper advertisements and extensive education through television, radio, cinema slides and others means on best precautionary practices against these diseases.

Spreading of infections by white coats worn by doctors

2492. SHRI ANIL DESAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether long sleeved coats worn by doctors spread infection and lead to avoidable harm and cost to patients as per study published in the journal 'The BMJ', if so, the details thereof; and

(b) whether the Ministry is considering to ban doctors and medical students from wearing white coats to reduce the harm and cost that results from hospital acquired infections?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) No such study has been conducted by the Government.

(b) Ministry is not considering to ban doctors and medical students from wearing white coats.

Delay in supply of indented Unani medicines in CGHS

2493. SHRI GULAM RASOOL BALLYAWI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that undue delay is taking place in supply of indented/local purchase medicines by CGHS Unani Centres, if so, the reasons therefor; and

(b) the steps taken to remove the deficiencies and correct the system?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) It has been reported that at times there is some delay in procurement of indented/local purchase of Unani medicines due to following reasons:

(i) Indents are submitted manually through Unani Medical Store Depot in Delhi.

(ii) There is only one Authorized Local Chemist for supply of indented Unani Medicines in Delhi and NCR.

(iii) There are no Authorized Local Chemists for Supply of Unani medicines in Lucknow and Hyderabad. Additional Directors procure indented medicines locally.

(iv) Local Chemist at times face difficulty in procuring the indented medicines thereby delaying the whole process.

(b) Following steps have been taken to remove the deficiencies and correct the system:

(i) The process of recruitment of Unani pharmacists has already been initiated to enable the indents to be placed online to the Authorized Local Chemist in Delhi and NCR.

(iii) Changes have been made in the terms and conditions of the tender document for Authorized Local Chemists in order to attract more participants.

Aid for trauma patients at AIIMS, Delhi

2494. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether as per study conducted by the All India Institute of Medical Sciences

(AIIMS), Delhi, poverty kills 50 per cent of patients, admitted of head injuries at Trauma Centre after their release for lack of funds for continuing such a treatment in their places, if so, the details thereof; and

(b) whether it is proposed to develop some medical system, where such poor patient can get treatment to help recover from this illness, to ensure survival of breadwinners in the families, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) No such study has been conducted in Jai Prakash Narayan Apex Trauma Centre (JPNATC), AIIMS, New Delhi.

(b) A system for helping poor patients is in place at JPNATC, AIIMS, New Delhi which is in accordance with the various schemes of the Government like Rashtriya Arogya Nidhi, etc. Further, under the programme namely Capacity Building for Trauma Care Facilities in Government hospitals, the existing emergency care facilities are strengthened with a view to provide immediate care to trauma victims.

Violation of safety norms by Maggi noodles

2495. SHRIMATI THOTA SEETHARAMA LAKSHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Maggi noodles violated the safety norms;

(b) whether test showed presence of lead and high levels of monosodium glutamate;

(c) if so, the details of action taken in this regard;

(d) whether Government would bring other brands under its scanner in the interest of the health of the children and others in the country; and

(e) if so, by when, if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) As per reports received from the States/UTs, samples of Nestlé's Maggi noodles have been found to be containing more than the permissible limit of 2.5 ppm of lead. The samples have also been found to be violating the labelling requirements as far as presence of Monosodium Glutamate (MSG) is concerned. Based on the test results reported from different States, confirming presence of Lead beyond permissible limit, an order dated 05.06.2015 was issued by Food Safety and Standards Authority of India (FSSAI) directing M/s Nestle India Ltd. to recall its Maggi Noodles. FSSAI had also issued another advisory to all States/UTs to draw samples of noodles and other similar products manufactured and marketed by other companies.

(d) and (e) The FSSAI has ordered recall of the food products, and/or withdrawn the provisional “No Objection Certificates” (NOCs) issued in respect of various food products manufactured by companies who violated the provisions of the FSS Act or Regulations thereunder. Some of the food products are Maggi Instant Noodles, Monster Energy Drink, Cloud 9 Energy Drink, Tzinga Energy drink and Akoaroma Flavored Water.

Achievement of targets set under NHM for rural areas

2496. SHRI K.K. RAGESH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is any report on the performance of National Health Mission NHM (formerly National Rural Health Mission-NRHM) in the tribal areas;

(b) if so, whether there is any betterment in basic health indicators like Infant Mortality Rate (IMR), Maternal Mortality Rate (MMR), Total Fertility Rate (TFR), institutional delivery and immunisation in tribal areas as targeted in the NHM, if so, the State-wise details thereof; and

(c) if not, what are the steps taken by Government to achieve targets under NHM in the tribal areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The performance of NHM (formerly NRHM) including for tribal areas is reported regularly.

(b) There has been betterment in basic health indicators such as IMR, MMR, TFR, institutional delivery and immunization for country as a whole. IMR has been reduced from 58 in 2005 to 40 in 2013, TFR from 2.9 in 2005 to 2.3 in 2013 and MMR 254 in 2004-2006 to 167 in 2011-13. However, these achievements have been short of NRHM targets for country as a whole.

The information on IMR, MMR, TFR etc. is not available separately for tribal areas. However, district wise information is available as per AHS 2012-13 for 9 States/UTs at http://www.censusindia.gov.in/vital_statistics/AHSBulletins/AHS_Factsheets_2012_13.html and as per DLHS 4 for 21 States/UTs at <https://nrhm-mis.nic.in/SitePages/DLHS-4.aspx>.

(c) Under the National Health Mission (NHM), financial and technical support is provided to States to strengthen their health systems including for setting up/upgrading public health facilities and improving healthcare particularly in tribal areas based on requirements posed by the States in their Programme Implementation Plans.

All such tribal majority districts whose composite health index is below the State average have been identified as High Priority Districts (HPDs), and these districts are expected to receive more resources per capita under the NHM as compared to the rest of the districts in the State. These districts also receive focused attention and supportive supervision.

Norms for infrastructure, Human resource, MMUs etc. and incentives under disease control programme have been kept better for Tribal areas/population.

Action plan to handle cancer incidents

2497. DR. K. V. P. RAMACHANDRA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government's attention has been drawn to reports that there could be 500 per cent increase in cancer incidents by 2025, if so, how does Government plan to address the issue?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): Based upon estimations of National Centre for Disease Informatics and Research Centre of Indian Council of Medical Research, Incidences on cancer are estimated to increase to 1510396 by 2025 which are 35.2% higher as compared to estimated figure for 2014.

Central Government supplements the efforts of the State Government for improving healthcare including prevention, diagnosis and treatment of Cancer. At present, the objectives of National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) being implemented under National Health Mission (NHM) for interventions upto the district level include awareness generation for Cancer prevention, screening, early detection and referral to an appropriate level institution for treatment. The focus is on three areas namely breast, cervical and oral Cancer. Screening guidelines have been provided to State Governments for implementation. Suspected cases are to be referred for confirmatory diagnosis by various tests including histo-pathological biopsy.

Government of India has approved "Tertiary Care for Cancer" Scheme under National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) in the year 2013-14. Under the said scheme, Government of India will assist to establish/set up 20 State Cancer Institutes (SCI) and 50 Tertiary Care Cancer Centres (TCCC) in different parts of the country. The maximum assistance inclusive of State share for SCI is upto ₹ 120 crore and for TCCC is upto ₹ 45 crore subject to eligibility as per scheme guidelines and availability of funds.

The treatment for cancer in Government Hospitals is either free or subsidized. In

addition to Cancer diagnosis and treatment by the State Governments Health Institutes, the Central Government Institutions such as All India Institute of Medical Sciences, Safdurjung Hospital, Dr Ram Manohar Lohia Hospital, PGIMER Chandigarh, JIPMER Puducherry, Chittaranjan National Cancer Institute, Kolkata, etc. provide facilities for diagnosis and treatment of Cancer.

Oncology in its various aspects has focus in case of new AIIMS and many upgraded institutions under Pradhan Mantri Swasthya Suraksha Yojna (PMSSY). Setting up of National Cancer Institute at Jhajjar (Haryana) and 2nd campus of Chittranjan National Cancer Institute, Kolkata has also been approved.

Revising guidelines for clinical trials

2498. DR. PRADEEP KUMAR BALMUCHU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government is planning to revise the guidelines for clinical trials with a view to further tighten the standards, if so, the details thereof ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): Adequate provisions have been made in the Drugs and Cosmetics Rules, 1945 and schedules thereof to ensure the rights, safety and welfare of patients. These include the responsibilities of the Sponsor, Investigator and Ethics Committee, evaluation of the clinical trial proposals by the Subject Expert Committees/ Investigational New Drugs Committee, review of their recommendations by the Technical Committee and, thereafter, approval by the Apex Committee. Further, compensation is required to be paid in case of trial related injury or death within the prescribed timelines. The criteria for deciding the quantum of compensation in case of Serious Adverse Event (SAE) of death or injury (other than death) related to clinical trial have been notified.

National programme on epilepsy

2499. SHRI DEREK O'BRIEN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of people suffering from epilepsy in India over the past five years, and the number who received treatment;

(b) if there is a gap, the reasons therefor;

(c) whether it is a fact that many epilepsy patients face stigma in their workplaces due to their symptoms, if so, the measures taken by Government to tackle this problem; and

(d) whether a national programme on epilepsy is in place, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) It is estimated that there are about 8-10 million persons with epilepsy in India. While “Health” is a State subject, the Government of India supplements the efforts of State Governments to provide health services including treatment of epilepsy.

General facilities for “early diagnosis and management” of epilepsy are available in Government hospitals. Specialized treatment for epilepsy is available in institutions such as All India Institute of Medical Sciences, New Delhi, Post-graduate Institute of Medical Education and Research, Chandigarh and National Institute of Mental Health and Neuro Sciences, Bangalore. In addition, management of mental disorders including treatment for behavioral and psychological systems of epilepsy is also a part of District Mental Health Programme, being implemented in 241 districts of the country.

The treatment gap is attributable to stigma in the society towards epilepsy, inadequate knowledge among the public about availability of treatment, etc.

As informed by National Institute of Mental Health & Neuro Sciences, Bangalore, workplace stigma is mainly due to lack of awareness among the employees and employers. This is being tackled through various non-Government organizations, mainly Indian Epilepsy Association (IEA). There are 22 chapters of IEA in the country and they are conducting number of awareness campaigns in the forms of lectures, film shows, street shows and various IEC materials for common people.

Financial assistance to states for improving hospital services

†2500. SHRI RAMDAS ATHAWALE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of proposals received by the Central Government as on date from various State Governments including Maharashtra for financial assistance to improve services in hospitals during the last three years;

(b) the details of the action taken by Government thereon; and

(c) whether Government proposes to allocate more funds to State Governments for this purpose in the current Five Year Plan?

† Original notice of the question was received in Hindi.

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Under the National Health Mission (NHM), States/UTs submit their proposals in the form of Programme Implementation Plans (PIPs). PIPs submitted by States/UTs during last three years are available in public domain at <http://nhm.gov.in/nrhm-in-state/state-program-implementation-plans-pips.html>.

(b) The PIPs received from States/UTs are appraised by the National programme Coordination Committee (NPCC) and their approvals in the form of Records of Proceedings (RoPs) are issued. These RoPs are available in public domain at NHM's website www.nhm.gov.in.

(c) There is a plan provision of ₹ 2,68,551 crores for Department of Health and Family Welfare, which includes ₹ 1,93,405 crores for NHM, which goes to the States. This is considerably higher than the 11th Plan provision and allocation.

Making essential drugs available to all

2501. SHRI MOHD. ALI KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is making essential drugs available for all including poor persons and at hospitals also; and

(b) if so, the details thereof along with the funds sanctioned/spent for this purpose during each of the last three years, State/UT-wise and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Public Health being a State subject, primary responsibility of providing essential medicines for all is that of State/UT Governments. However, under National Health Mission, financial and technical support is being extended to States/UTs to provide free essential drugs in public health facilities based on the proposals submitted by the States/UTs in their Programme Implementation Plans (PIPs). Operational Guidelines on Free Drugs Service Initiative have been developed by the Government and shared with the States. The States are also being given an incentive to roll out such an initiative. The State/UT-wise details of the funds sanctioned for drugs and supplies under NHM during last three years are given in the Statement.

Statement

State/UT-wise details of the funds sanctioned for drugs and supplies under NHM during last three years

Support for Drugs and Supplies under NRHM for F.Y. 2012-13

(₹ in crore)

Sl. No.	States/UTs	Procurement of Drugs	JSSK Maternal health	JSSK Child Grant	Cash Grants ¹	Kind Grants ²	Total
1	2	3	4	5	6	7	8
A. High Focus States		1	2	3	4=1+2+3	5	6=4+5
1.	Bihar	91.12	0.00	0.00	91.12	189.56	280.67
2.	Chhattisgarh	2.62	5.30	0.31	8.23	38.09	46.32
3.	Himachal Pradesh	1.78	3.11	0.00	4.89	3.38	8.27
4.	Jammu and Kashmir	4.46	6.30	0.00	10.76	10.21	20.97
5.	Jharkhand	23.08	12.40	0.00	35.48	43.19	78.67
6.	Madhya Pradesh	53.24	26.51	1.52	81.27	65.08	146.35
7.	Odisha	25.84	27.95	1.12	54.91	41.88	96.80
8.	Rajasthan	16.86	31.80	2.01	50.67	98.60	149.27
9.	Uttar Pradesh	96.15	100.30	0.00	196.45	244.25	440.70
10.	Uttarakhand	3.69	8.33	0.00	12.02	9.53	21.55
SUB TOTAL		318.83	222.00	4.96	545.79	743.78	1289.57
B. NE States							
11.	Arunachal Pradesh	2.83	0.56	0.02	3.41	4.32	7.73
12.	Assam	140.05	18.93	0.84	159.83	29.44	189.27
13.	Manipur	3.02	0.87	0.05	3.94	2.40	6.34
14.	Meghalaya	6.77	1.46	0.14	8.37	6.07	14.44
15.	Mizoram	3.83	0.94	0.05	4.82	3.83	8.65
16.	Nagaland	8.85	0.73	0.05	9.64	5.51	15.15
17.	Sikkim	1.03	0.33	0.00	1.35	0.31	1.66
18.	Tripura	8.07	2.18	0.80	11.05	9.26	20.31
SUB TOTAL		174.45	26.00	1.96	202.40	61.14	263.54
C. Non-High Focus States							
19.	Andhra Pradesh	14.86	19.30	0.90	35.06	58.95	94.02
20.	Goa	1.27	0.76	0.02	2.05	0.96	3.01

1	2	3	4	5	6	7	8
21.	Gujarat	14.27	8.40	0.00	22.67	86.83	109.50
22.	Haryana	12.77	9.38	0.50	22.65	35.88	58.53
23.	Karnataka	35.77	21.50	1.20	58.47	57.12	115.60
24.	Kerala	7.78	7.81	0.00	15.59	29.59	45.18
25.	Maharashtra	47.36	36.08	0.00	83.43	55.80	139.23
26.	Punjab	34.30	10.12	0.72	45.14	16.12	61.26
27.	Tamil Nadu	21.02	48.38	1.80	71.19	68.32	139.51
28.	West Bengal	39.60	42.58	2.76	84.93	74.14	159.07
Sub Total		228.99	204.29	7.90	441.19	483.73	924.92

D. Small States/UTs

29.	Andaman and Nicobar Islands	1.31	0.28	0.00	1.59	0.81	2.41
30.	Chandigarh	0.04	1.00	0.05	1.09	0.85	1.94
31.	Dadra and Nagar Haveli	0.46	0.20	0.01	0.67	0.22	0.89
32.	Daman and Diu	0.11	0.11	0.00	0.22	0.13	0.34
33.	Delhi	8.82	8.06	0.45	17.33	17.95	35.28
34.	Lakshadweep	0.03	0.01	0.00	0.03	0.04	0.07
35.	Puducherry	0.72	1.80	0.00	2.52	1.13	3.64
SUB TOTAL		11.49	11.45	0.51	23.45	21.13	44.58
GRAND TOTAL		733.76	463.75	15.32	1212.83	1309.77	2522.60

Note: ¹ Cash grant is PIP Approval under procurement of drugs and supplies under RCH and Mission Flexible Pool

² Kind Grants is cost adjustment/release for vaccine and drugs under RI, PPI, NVBDCP and RNTCP

Support for Drugs and Supplies under NHM for F.Y. 2013-14

(₹ in crore)

Sl. No.	States/UTs	Procurement of Drugs	JSSK Maternal health	JSSK Child Grant	Cash Grants ¹	Kind Grants ²	Total
1	2	3	4	5	6	7	8
A. High Focus States		1	2	3	4=1+2+3	5	6=4+5
1.	Bihar	66.72	72.48	16.50	155.70	170.62	326.32
2.	Chhattisgarh	38.27	12.80	0.60	51.67	22.00	73.67

1	2	3	4	5	6	7	8
3.	Himachal Pradesh	8.00	3.10	0.11	11.22	7.24	18.46
4.	Jammu and Kashmir	6.35	9.43	2.23	18.01	12.14	30.15
5.	Jharkhand	24.40	13.50	1.61	39.51	23.05	62.56
6.	Madhya Pradesh	92.65	39.81	1.20	133.66	58.65	192.31
7.	Odisha	31.36	1.44	0.09	32.88	27.19	60.07
8.	Rajasthan	117.01	39.98	3.55	160.54	57.33	217.86
9.	Uttar Pradesh	130.96	111.25	0.00	242.21	205.02	447.23
10.	Uttarakhand	9.22	1.75	0.00	10.97	6.49	17.46
SUB TOTAL		524.94	305.53	25.89	856.36	589.72	1446.08

B. NE States

11.	Arunachal Pradesh	5.10	0.62	0.01	5.72	0.92	6.64
12.	Assam	101.12	27.45	3.53	132.10	28.35	160.45
13.	Manipur	1.58	1.20	0.06	2.83	1.04	3.87
14.	Meghalaya	4.49	1.02	0.06	5.57	1.61	7.18
15.	Mizoram	3.85	0.43	0.04	4.31	0.56	4.87
16.	Nagaland	1.57	0.81	0.07	2.44	1.74	4.18
17.	Sikkim	0.62	0.00	0.00	0.62	0.41	1.03
18.	Tripura	4.35	1.30	0.16	5.82	1.43	7.25
SUB TOTAL		122.68	32.83	3.92	159.43	36.04	195.48

C. Non-High Focus States

19.	Andhra Pradesh	21.04	37.10	1.12	59.26	72.62	131.88
20.	Goa	1.73	0.80	0.02	2.55	1.18	3.73
21.	Gujarat	66.83	9.50	1.30	77.63	110.24	187.87
22.	Haryana	27.90	12.44	0.44	40.78	38.35	79.12
23.	Karnataka	33.49	32.25	1.40	67.14	51.71	118.84
24.	Kerala	3.39	7.81	0.40	11.60	22.19	33.79
25.	Maharashtra	226.85	49.44	0.00	276.28	67.70	343.98
26.	Punjab	64.10	9.94	0.72	74.77	18.44	93.21
27.	Tamil Nadu	21.17	48.38	1.80	71.35	71.06	142.41
28.	West Bengal	78.50	56.30	1.95	136.75	51.95	188.70
Sub Total		545.00	263.95	9.15	818.10	505.43	1323.53

1	2	3	4	5	6	7	8
D. Small States/UTs							
29.	Andaman and Nicobar Islands	0.38	0.00	0.00	0.38	0.10	0.48
30.	Chandigarh	0.00	0.00	0.00	0.00	0.70	0.70
31.	Dadra and Nagar Haveli	0.27	0.09	0.01	0.37	0.14	0.51
32.	Daman and Diu	0.08	0.04	0.00	0.12	0.07	0.20
33.	Delhi	35.31	1.50	0.15	36.96	16.62	53.58
34.	Lakshadweep	0.27	0.02	0.00	0.29	0.02	0.30
35.	Puducherry	0.58	2.10	0.09	2.77	0.86	3.62
SUB TOTAL		36.89	3.75	0.25	40.89	18.51	59.40
GRAND TOTAL		1229.52	606.06	39.21	1874.78	1149.71	3024.49

Note: ¹ Cash grant is PIP Approval under procurement of drugs and supplies under RCH and Mission Flexible Pool.

² Kind Grants is cost adjustment / release for vaccine and drugs under RI, PPI, NVBDCP and RNTCP.

Support for Drugs and Supplies under NHM for F.Y. 2014-15

(₹ in crore)

Sl. No.	States/UTs	Procurement of Drugs	JSSK Maternal health	JSSK Child Grant	Cash Grants ¹	Kind Grants ²	Total
1	2	3	4	5	6	7	8
A. High Focus States		1	2	3	4=1+2+3	5	6=4+5
1.	Bihar	101.86	38.00	5.00	144.86	182.81	327.67
2.	Chhattisgarh	72.16	13.14	0.99	86.29	23.15	109.44
3.	Himachal Pradesh	23.04	5.88	0.70	29.62	4.23	33.85
4.	Jammu and Kashmir	13.21	10.90	0.68	24.79	12.31	37.10
5.	Jharkhand	18.52	18.29	1.59	38.40	55.52	93.92
6.	Madhya Pradesh	97.95	34.54	1.20	133.69	54.65	188.34
7.	Odisha	22.48	2.02	1.21	25.71	23.16	48.87
8.	Rajasthan	149.02	42.69	4.80	196.51	67.16	263.67
9.	Uttar Pradesh	152.96	101.10	2.28	256.34	239.20	495.54
10.	Uttarakhand	5.53	2.69	0.00	8.22	17.38	25.61
SUB TOTAL		656.73	269.23	18.45	944.41	679.59	1624.00

1	2	3	4	5	6	7	8
B. NE States							
11. Arunachal Pradesh		5.12	0.71	0.01	5.84	5.98	11.82
12. Assam		116.93	36.67	2.00	155.60	56.82	212.42
13. Manipur		5.57	2.38	0.08	8.03	2.20	10.23
14. Meghalaya		0.00	1.88	0.16	2.04	7.38	9.43
15. Mizoram		4.11	0.57	0.04	4.73	3.24	7.97
16. Nagaland		3.84	1.94	0.06	5.85	5.13	10.98
17. Sikkim		2.89	0.31	0.02	3.21	3.59	6.80
18. Tripura		9.95	2.75	0.14	12.83	4.77	17.60
SUB TOTAL		148.41	47.21	2.51	198.13	89.12	287.25
C. Non-High Focus States							
19. Andhra Pradesh		98.47	19.96	0.32	118.75	43.12	161.87
Telangana		47.86	20.01	0.00	67.87	19.62	87.49
20. Goa		2.32	0.81	0.06	3.18	1.58	4.76
21. Gujarat		39.62	12.75	1.92	54.29	55.62	109.91
22. Haryana		30.37	15.07	0.48	45.92	14.58	60.50
23. Karnataka		35.48	35.75	1.80	73.03	61.90	134.93
24. Kerala		4.60	10.02	0.47	15.10	22.57	37.66
25. Maharashtra		270.87	50.77	3.54	325.18	83.57	408.75
26. Punjab		40.73	12.42	0.85	53.99	20.15	74.14
27. Tamil Nadu		10.88	48.38	1.80	61.05	50.06	111.12
28. West Bengal		19.59	93.00	3.08	115.67	66.32	181.99
SUB TOTAL		600.80	318.92	14.32	934.04	439.09	1373.13
D. Small States/UTs							
29. Andaman and Nicobar Islands		0.28	0.00	0.00	0.28	0.29	0.57
30. Chandigarh		0.02	0.00	0.00	0.02	2.13	2.15
31. Dadra and Nagar Haveli		0.36	0.45	0.03	0.84	0.29	1.13
32. Daman and Diu		0.11	0.05	0.00	0.16	0.11	0.27
33. Delhi		1.41	1.80	0.15	3.36	17.26	20.62

1	2	3	4	5	6	7	8
34.	Lakshadweep	0.28	0.05	0.01	0.34	0.03	0.37
35.	Puducherry	1.60	1.49	0.10	3.19	0.86	4.06
SUB TOTAL		4.07	3.85	0.29	8.21	20.97	29.18
GRAND TOTAL		1410.01	639.21	35.57	2084.79	1228.76	3313.56

Note: ¹ Cash grant is PIP Approval under procurement of drugs and supplies under RCH and Mission Flexible Pool

² Kind Grants is cost adjustment/release for vaccine and drugs under RI, PPI, NVBDCP and RNTCP.

Penalty and prosecution on failed food samples by laboratories

2502. SHRI AHMED PATEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the number of samples tested and failed in the food testing laboratories functioning in the country in the last year and in the current year, State/UT-wise;

(b) the number of cases taken up for penalty and prosecution in the said laboratories in the last year and in the current year, head-wise and State/UT-wise; and

(c) the State-wise details of the ratio of Food Safety Officers to population in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) As per information made available by the State/UT Governments, the details of sample tested, found adulterated/misbranded and action taken during the year 2014-15 is given in Statement-I (*See below*).

(c) The details as given by the States/UTs are given in Statement-II.

Statement-I

Annual Public Laboratory Testing Report for the year 2014-2015

Sl. No.	Name of the State/U.T.	No. of Samples Analysed	No. of Samples found adulterated and/or misbranded	No. of Cases Launched		No. of Convictions/ Penalties	
				Criminal	Civil	Convictions	Penalties/ Amount raised in ₹
1	2	3	4	5	6	7	8
1.	A & N Islands	16	4	0	0	0	14/4,55,000
2.	Andhra Pradesh	2788	290	338	78	0	51,63,020
3.	Arunachal Pradesh	258	29	2	14		7

1	2	3	4	5	6	7	8
4.	Assam*	327	37	12		4	70,000
5.	Bihar	1320	7		16		5/38,000
6.	Chandigarh	102	5	5			1,50,000
7.	Chhattisgarh	133	27	14	41		16
8.	Dadra and N. H	2					
9.	Daman and Diu	65	3		3		3/30,000
10.	Delhi	1480	148				
11.	Goa	800	81	1	4	4	4,35,000
12.	Gujarat*	5471	522	41	47	26	20,93,500
13.	Haryana*	989	105	08	114	6	1,500
14.	Himachal Pradesh*	132	31	24	28	25	22,93,000
15.	Jammu and Kashmir*	1211	236	8	195	133	11,08,300
16.	Jharkhand*	232	51	22	3		
17.	Karnataka	2110	311	56			42
18.	Kerala	2735	464	41	161	0	280/72,39,700
19.	Lakshadweep						
20.	Madhya Pradesh	9131	1412	127	716	418	418/43,28,000
21.	Maharashtra	6985	1162	869	1426	75	1,65,41,499
22.	Manipur						
23.	Meghalaya	34	4	0	4	2	1/10,000
24.	Mizoram						
25.	Nagaland	83	11	0	0	0	0
26.	Odisha	544	112	0	1		1
27.	Puducherry*	972	30		1		
28.	Punjab*	3949	577	220		161	24
29.	Rajasthan*	3031	747	158	222	116	8,45,500
30.	Sikkim						
31.	Tamil Nadu	2873	1047	64	486	203	34,99,700
32.	Telangana	357	37		87		51/17,57,100

1	2	3	4	5	6	7	8
33. Tripura		933	2	0	0	0	0
34. Uttar Pradesh		9605	4119	161	3489	186	1738/ 5,98,08,106
35. Uttarakhand		1356	233	5	117	0	80/5,06,489
36. West Bengal		120	65	0	17	0	1/30,000
TOTAL		60548	12077	1989	7241	1355	2682/ 10,64,03,414

* Data upto 30.09.2014

Statement-II

State-wise details of the ratio of Food Safety Officers to population in the country

Sl.No.	Name of State/UT	No. of Food Safety Officers
1.	Andaman and Nicobar Island	18
2.	Andhra Pradesh	34
3.	Arunachal Pradesh	3
4.	Assam	40
5.	Bihar	14
6.	Chandigarh	2
7.	Chhattisgarh	10
8.	Dadara and Nagar Haveli	1
9.	Daman and Diu	3
10.	Delhi	12
11.	Goa	11
12.	Gujarat	210
13.	Haryana	12
14.	Himachal Pradesh	9
15.	Jammu and Kashmir	87
16.	Jharkhand	202
17.	Karnataka	68
18.	Kerala	66
19.	Lakshadweep	15
20.	Madhya Pradesh	179

Sl.No.	Name of State/UT	No. of Food Safety Officers
21.	Maharashtra	298
22.	Manipur	9
23.	Meghalaya	7
24.	Mizoram	12
25.	Nagaland	11
26.	Odisha	26
27.	Puducherry	2
28.	Punjab	45
29.	Rajasthan	87
30.	Sikkim	2
31.	Tamil Nadu	503
32.	Telangana	20
33.	Tripura	4
34.	Uttarakhand	30
35.	Uttar Pradesh	229
36.	West Bengal	43
TOTAL		2324

Regulating prices of medical devices

2503. SHRI PAUL MANOJ PANDIAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government will regulate the prices of medical devices to make it affordable;

(b) whether the price control is also being planned for expensive devices like stents implants; and

(c) whether it is a fact that Government is considering to make applicable the CGHS rates across India to bring down costs, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT

PRAKASH NADDA): (a) and (b) Fourteen categories of medical devices notified under the Drugs and Cosmetics Act, 1940 and Rules made thereunder are regulated as drugs. The National Pharmaceutical Pricing Authority (NPPA) under the Department of Pharmaceuticals regulates the pricing of medical devices. The Authority has informed that the pricing of two devices, namely, 'condom' and, 'Intrauterine Device (IUD)' containing copper is regulated under the provisions of the Drugs Price Control Order (DPCO), 2013. Remaining medical devices which are not included in the National List of Essential Medicines (NLEM), 2011, fall under non-scheduled category of DPCO, 2013 and as such, no ceiling price has been fixed for these devices. However, DPCO, 2013 provides for monitoring the prices of non-scheduled items also to ensure that no manufacturer/importer/distributor is allowed to increase the Maximum Retail Price (MRP) of a non-scheduled drug more than ten per cent of MRP during preceding twelve months. Recently, the National Pharmaceutical Pricing Authority has submitted a report to the Department of Pharmaceuticals on pricing of cardiac stents based on the available information and the study conducted by National Health System Resource Centre.

(c) There is no such proposal under consideration of the Government.

Steps for ensuring free distribution of essential drugs

2504. SHRI SUKHENDU SEKHAR ROY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government had initiated steps to ensure adequate free distribution of essential drugs at public health facilities during 2013-14 and 2014-15, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): Public Health being a State subject, primary responsibility of free distribution of essential drugs at public health facilities is that of State/UT Governments. However, under National Health Mission financial and technical support is being extended to States/UTs for free distribution of essential drugs to all those who access public health facilities based on the proposals submitted by the States/UTs in their Programme Implementation Plans (PIPs). Operational Guidelines on Free Drugs Service Initiative have been developed by the Government and shared with the States. The States are also being given an incentive to roll out such an initiative. The State/UT-wise details of approvals for drugs and supplies during 2013-14 and 2014-15 is given in the Statement.

Statement

*State/UT-wise details of approvals for drugs and supplies during
2013-14 and 2014-15*

(a) Support for drugs and supplies under NHM for F.Y. 2013-14

(₹ in crore)							
Sl. No.	States/UTs	Procurement of Drugs	JSSK Maternal health	JSSK Child Grant	Cash Grants ¹	Kind Grants ²	Total
1	2	3	4	5	6	7	8
A. High Focus States		1	2	3	4=1+2+3	5	6=4+5
1.	Bihar	66.72	72.48	16.50	155.70	170.62	326.32
2.	Chhattisgarh	38.27	12.80	0.60	51.67	22.00	73.67
3.	Himachal Pradesh	8.00	3.10	0.11	11.22	7.24	18.46
4.	Jammu and Kashmir	6.35	9.43	2.23	18.01	12.14	30.15
5.	Jharkhand	24.40	13.50	1.61	39.51	23.05	62.56
6.	Madhya Pradesh	92.65	39.81	1.20	133.66	58.65	192.31
7.	Odisha	31.36	1.44	0.09	32.88	27.19	60.07
8.	Rajasthan	117.01	39.98	3.55	160.54	57.33	217.86
9.	Uttar Pradesh	130.96	111.25	0.00	242.21	205.02	447.23
10.	Uttarakhand	9.22	1.75	0.00	10.97	6.49	17.46
SUB TOTAL		524.94	305.53	25.89	856.36	589.72	1446.08
B. NE States							
11.	Arunachal Pradesh	5.10	0.62	0.01	5.72	0.92	6.64
12.	Assam	101.12	27.45	3.53	132.10	28.35	160.45
13.	Manipur	1.58	1.20	0.06	2.83	1.04	3.87
14.	Meghalaya	4.49	1.02	0.06	5.57	1.61	7.18
15.	Mizoram	3.85	0.43	0.04	4.31	0.56	4.87
16.	Nagaland	1.57	0.81	0.07	2.44	1.74	4.18
17.	Sikkim	0.62	0.00	0.00	0.62	0.41	1.03
18.	Tripura	4.35	1.30	0.16	5.82	1.43	7.25
SUB TOTAL		122.68	32.83	3.92	159.43	36.04	195.48

1	2	3	4	5	6	7	8
C. Non-High Focus States							
19. Andhra Pradesh		21.04	37.10	1.12	59.26	72.62	131.88
20. Goa		1.73	0.80	0.02	2.55	1.18	3.73
21. Gujarat		66.83	9.50	1.30	77.63	110.24	187.87
22. Haryana		27.90	12.44	0.44	40.78	38.35	79.12
23. Karnataka		33.49	32.25	1.40	67.14	51.71	118.84
24. Kerala		3.39	7.81	0.40	11.60	22.19	33.79
25. Maharashtra		226.85	49.44	0.00	276.28	67.70	343.98
26. Punjab		64.10	9.94	0.72	74.77	18.44	93.21
27. Tamil Nadu		21.17	48.38	1.80	71.35	71.06	142.41
28. West Bengal		78.50	56.30	1.95	136.75	51.95	188.70
Sub Total		545.00	263.95	9.15	818.10	505.43	1323.53

D. Small States/UTs

29. Andaman and Nicobar Islands		0.38	0.00	0.00	0.38	0.10	0.48
30. Chandigarh		0.00	0.00	0.00	0.00	0.70	0.70
31. Dadra and Nagar Haveli		0.27	0.09	0.01	0.37	0.14	0.51
32. Daman and Diu		0.08	0.04	0.00	0.12	0.07	0.20
33. Delhi		35.31	1.50	0.15	36.96	16.62	53.58
34. Lakshadweep		0.27	0.02	0.00	0.29	0.02	0.30
35. Puducherry		0.58	2.10	0.09	2.77	0.86	3.62
SUB TOTAL		36.89	3.75	0.25	40.89	18.51	59.40
GRAND TOTAL		1229.52	606.06	39.21	1874.78	1149.71	3024.49

Note: ¹ Cash grant is PIP Approval under procurement of drugs and supplies under RCH and Mission Flexible Pool.

² Kind Grants is cost adjustment/release for vaccine and drugs under RI, PPI, NVBDCP and RNTCP.

(b) Support for Drugs and Supplies under NHM for F.Y. 2014-15

(₹ in crore)

Sl. No.	States/UTs	Procurement of Drugs	JSSK Maternal health	JSSK Child Grant	Cash Grants ¹	Kind Grants ²	Total
1	2	3	4	5	6	7	8
A. High Focus States		1	2	3	4=1+2+3	5	6=4+5
1.	Bihar	101.86	38.00	5.00	144.86	182.81	327.67

1	2	3	4	5	6	7	8
2.	Chattisgarh	72.16	13.14	0.99	86.29	23.15	109.44
3.	Himachal Pradesh	23.04	5.88	0.70	29.62	4.23	33.85
4.	Jammu and Kashmir	13.21	10.90	0.68	24.79	12.31	37.10
5.	Jharkhand	18.52	18.29	1.59	38.40	55.52	93.92
6.	Madhya Pradesh	97.95	34.54	1.20	133.69	54.65	188.34
7.	Odisha	22.48	2.02	1.21	25.71	23.16	48.87
8.	Rajasthan	149.02	42.69	4.80	196.51	67.16	263.67
9.	Uttar Pradesh	152.96	101.10	2.28	256.34	239.20	495.54
10.	Uttarakhand	5.53	2.69	0.00	8.22	17.38	25.61
SUB TOTAL		656.73	269.23	18.45	944.41	679.59	1624.00

B. NE States

11.	Arunachal Pradesh	5.12	0.71	0.01	5.84	5.98	11.82
12.	Assam	116.93	36.67	2.00	155.60	56.82	212.42
13.	Manipur	5.57	2.38	0.08	8.03	2.20	10.23
14.	Meghalaya	0.00	1.88	0.16	2.04	7.38	9.43
15.	Mizoram	4.11	0.57	0.04	4.73	3.24	7.97
16.	Nagaland	3.84	1.94	0.06	5.85	5.13	10.98
17.	Sikkim	2.89	0.31	0.02	3.21	3.59	6.80
18.	Tripura	9.95	2.75	0.14	12.83	4.77	17.60
SUB TOTAL		148.41	47.21	2.51	198.13	89.12	287.25

C. Non-High Focus States

19.	Andhra Pradesh	98.47	19.96	0.32	118.75	43.12	161.87
	Telangana	47.86	20.01	0.00	67.87	19.62	87.49
20.	Goa	2.32	0.81	0.06	3.18	1.58	4.76
21.	Gujarat	39.62	12.75	1.92	54.29	55.62	109.91
22.	Haryana	30.37	15.07	0.48	45.92	14.58	60.50
23.	Karnataka	35.48	35.75	1.80	73.03	61.90	134.93
24.	Kerala	4.60	10.02	0.47	15.10	22.57	37.66
25.	Maharashtra	270.87	50.77	3.54	325.18	83.57	408.75
26.	Punjab	40.73	12.42	0.85	53.99	20.15	74.14

1	2	3	4	5	6	7	8
27.	Tamil Nadu	10.88	48.38	1.80	61.05	50.06	111.12
28.	West Bengal	19.59	93.00	3.08	115.67	66.32	181.99
SUB TOTAL		600.80	318.92	14.32	934.04	439.09	1373.13

D. Small States/UTs

29.	Andaman and Nicobar Islands	0.28	0.00	0.00	0.28	0.29	0.57
30.	Chandigarh	0.02	0.00	0.00	0.02	2.13	2.15
31.	Dadra and Nagar Haveli	0.36	0.45	0.03	0.84	0.29	1.13
32.	Daman and Diu	0.11	0.05	0.00	0.16	0.11	0.27
33.	Delhi	1.41	1.80	0.15	3.36	17.26	20.62
34.	Lakshadweep	0.28	0.05	0.01	0.34	0.03	0.37
35.	Puducherry	1.60	1.49	0.10	3.19	0.86	4.06
SUB TOTAL		4.07	3.85	0.29	8.21	20.97	29.18
GRAND TOTAL		1410.01	639.21	35.57	2084.79	1228.76	3313.56

Note: ¹ Cash grant is PIP approval under procurement of drugs and supplies under RCH and Mission Flexible Pool

² Kind grants is cost adjustment/release for vaccine and drugs under RI, PPI, NVBDCP and RNTCP.

Increase in smoking habits despite disincentives

2505. DR. K. KESHA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the incidence of smoking had gone up in recent years, despite disincentives;

(b) whether the Ministry is aware that on increasing the tax on cigarettes, the lengths of the cigarettes have been reduced to check mate the tax hike;

(c) whether a WHO report on Global Tobacco Epidemic states that cigarettes have become 15 per cent cheaper in India between 2008 and 2014;

(d) if so, what steps the Ministry envisages to counter these; and

(e) whether the Ministry is aware of the 'plain packaging laws' of Australia which disincentivises smoking?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) There is no such data to indicate that the incidence of smoking has gone up in recent years.

(b) As per the information provided by Ministry of Finance, the production data of first 3 months of 2015-16 indicates that production of cigarettes of all lengths has declined over the corresponding period of 2014-15. However, decline in production of Cigarettes of shorter length (not exceeding 65mm) is less than the decline in overall production of cigarettes.

(c) As per the WHO report on Global Tobacco Epidemic, (2015) the cigarettes have become cheaper in India between 2008 and 2014.

(d) To counter this, in Budget, 2014-15, excise duty on cigarettes was increased by 17% to 72% for different lengths of cigarettes. In Budget, 2015-16, excise duty rate on cigarettes was further increased by 15% to 25% for various lengths of cigarettes.

(e) The Ministry is aware of the Plain Packaging laws of Australia.

AIIMS-like institute in Goa

2506. SHRI SHANTARAM NAIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether an institute on the lines of All India Institute of Medical Sciences is proposed to be built at Goa;

(b) whether the land for the purpose has been acquired or identified;

(c) the quantum of land proposed to be acquired or be made available for the project; and

(d) the total amount expected to be spent on civil, electrical, medical equipments and other selected items and the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Central Government plans to establish AIIMS like institutes in every State in a phased manner. Setting up of AIIMS in Goa is not yet approved. However, this may be considered in subsequent phases.

(b) and (c) The respective State Government is solely responsible to identify locations/sites by taking into account the relevant aspects and to provide land measuring approximately 200 acres free of cost for setting up of AIIMS Type super-specialty hospital cum teaching institution. The State Government has also to undertake to provide other infrastructure such as suitable road connection, sufficient water supply, electricity connection of required load and regulatory/statutory clearances.

(d) Expenditure to be incurred on various components/items depends upon the surveys, studies and formulation of Project Reports.

Rehabilitation of mentally challenged patients

2507. SHRI VIVEK GUPTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of mentally challenged medical patients in the country, State-wise;
- (b) the details of various Government and non-Government hospitals specialising in the care of mentally challenged patients in the country, State-wise;
- (c) the details of funds allocated for special care for mentally disadvantaged patients, State-wise; and
- (d) whether Government has any schemes running to rehabilitate mentally challenged patients back in society after the recovery?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The information regarding number of mentally challenged medical patients in the country is not maintained centrally. However, as per information received from the Department of Empowerment of Persons with Disabilities, the State/UT-wise number of persons with mental retardation is given in the Statement (*See below*).

(b) Data on various Government and non-Government hospitals specializing in the care of mentally challenged patients in the country, State-wise, is not maintained centrally. However, for the care and treatment of mentally ill patients, there are 3 Central Government Mental Health Institutes namely, National Institute of Mental Health and Neuro Sciences, Bangalore; Central Institute of Psychiatry, Ranchi; and Lokopriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur and 40 State run Mental Health Institutes.

(c) and (d) The National Trust, under the Ministry of Social Justice and Empowerment, runs several schemes like Samarth (Residential Centre), Niramaya (Health Insurance Scheme), Sahyogi (Caregivers Training Scheme), GHARAUNDA (Group Home Life Long Rehabilitation Centre) for the welfare of persons with disabilities, namely Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities. The funds under all the above schemes are provided by the Ministry of Social Justice and Empowerment.

Statement

Number of persons with mental retardation as per Census 2011

Sl.No.	State	Mental Retardation
1.	Andhra Pradesh	132380
2.	Arunachal Pradesh	1264

Sl.No.	State	Mental Retardation
3.	Assam	26374
4.	Bihar	89251
5.	Chhattisgarh	33171
6.	Delhi	16338
7.	Goa	1817
8.	Gujarat	66393
9.	Haryana	30070
10.	Himachal Pradesh	8986
11.	J&K	16724
12.	Jharkhand	37458
13.	Karnataka	93974
14.	Kerala	65709
15.	Madhya Pradesh	77803
16.	Maharashtra	160209
17.	Manipur	4506
18.	Mizoram	1585
19.	Meghalaya	2332
20.	Nagaland	1250
21.	Odisha	72399
22.	Punjab	45070
23.	Rajasthan	81389
24.	Sikkim	516
25.	Tamil Nadu	100847
26.	Tripura	4307
27.	Uttar Pradesh	181342
28.	Uttarakhand	11450
29.	West Bengal	136523
30.	A & N Islands	294
31.	Chandigarh	1090
32.	Daman and Diu	176

Sl.No.	State	Mental Retardation
33.	D & N Haveli	180
34.	Lakshadweep	122
35.	Puducherry	2335
TOTAL		1505634

Note: Separate data for the State of Telangana is not available.

Proposal of State Government of Karnataka on medical education

2508. DR. VIJAY MALLYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether four proposals on health and family welfare were submitted to the Ministry by the State Government of Karnataka regarding establishment of one AIIMS type super speciality hospital cum teaching institution, establishment of similar facility at Bellary and Hubli, Tertiary Care Cancer Centre and strengthening and upgradation of existing Government (State and Central) hospitals;

(b) if so, whether these proposals were examined by the Ministry; and

(c) by when the State Government will be advised in the matter?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) With regard to setting up of one AIIMS type super speciality hospital cum teaching institution in the State, Government of Karnataka has recommended the following locations :

(i) Harohalli in Ramanagar District near Bangalore.

(ii) Itagatti in Dharwad District.

(iii) District Hospital Campus, Bijapur

The proposal has been examined and it will be considered in a subsequent phase of Pradhan Mantri Swasthya Suraksha Yojana (PMSSY).

With regard to establishment of similar facility at Bellary and Hubli, it is stated that the Central Government has approved up gradation of 39 Government Medical Colleges/Institutes in Super Sepciality Blocks under Pradhan Mantri Swasthya Surksha Yojna (PMSSY), which include Vijayanagar Institute of Medical Sciences, Bellary and Karnataka Institute of Medical Sciences, Hubli in the State of Karnataka. On the basis of the Gap Analysis carried out on 21.10.2014, the Central Government has received the Detailed Project Reports (DPRs) in r/o the above Medical Colleges

through the State Government, which have been examined/evaluated by the Committee and also approved by the Central Government.

With regard to Tertiary Care Cancer Centre and strengthening, under the “Strengthening of Tertiary Care of Cancer” scheme of National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and strokes (NPCDCS), Government of India, has identified following Institutes for assistance as State Cancer Institute (SCI) and Tertiary Care Cancer Centre (TCCC) in the State of Karnataka :

- (i) Kidwai Memorial Institute of Oncology (RCC), Bengaluru, as SCI
- (ii) Government Medical College, Mandya as TCCC
- (iii) Government Medical College, Gulbarga as TCCC

An amount to ₹ 67.50 crore, as 1st Instalment as Government of India share, has been released to State Government of Karnataka for Kidwai Memorial Institute of Oncology during 2014-15.

Upgradation and strengthening of State Government Hospitals is taken up as per the approval of the State’s Programme Implementation Plan (PIP) under National Health Mission.

Increase in rabies cases

2509. SHRI ANUBHAV MOHANTY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether there is a steady increase in the cases of rabies due to stray dog bites in the country;
- (b) what step the Ministry has taken to treat the stray dogs affected by rabies; and
- (c) how many cases of deaths have occurred and reported due to rabies during the years 2012-13, 2013-14 and 2014-15?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The data collected by Central Bureau of Health Intelligence (CBHI) does not indicate increase in the cases of rabies in the country.

(b) As informed by Animal Welfare Board of India under Ministry of Environment, Forest and Climate Change, the Animal Birth Control (Dogs) Rules, 2001 have been notified by Government for sterilization to control the street dog population and immunization to prevent rabies, to be implemented by the Local Authorities with the help of Animal Welfare Organisations. Rule 9 of the ABC (Dogs) Rules, 2001,

provides for euthanasia of incurably ill and mortally wounded dogs as diagnosed by a qualified Veterinarian appointed by the monitoring committee constituted by the Local Authority.

Further, Government of India is implementing National Rabies Control Programme under Twelfth Five Year Plan, which has both human and animal health components. National Centre for Disease Control (NCDC) is the nodal agency to implement human health component. The strategy includes:

- Training of health professionals in appropriate animal bite management.
- Implementation of intra dermal route of inoculation of cell culture anti-rabies vaccines.
- IEC in general community.
- Strengthening laboratories for diagnosis of rabies.
- Strengthening surveillance.

Animal health component is being implemented by Animal Welfare Board of India (AWBI) initially in Haryana and Chennai to pilot test the strategy which includes:

- Mass vaccination of dogs.
- Dog population management, Strengthening surveillance and response.

(c) The details of the rabies cases reported during the last three years and the current year are given in the Statement.

Statement

State-wise Cases/Deaths due to Rabies in India 2012–2015

Sl. No.	State/UT	2012	2013 (Prov.)	2014 (Prov.)	2015 (Prov.)	
		Cases/ Deaths	Cases/ Deaths	Cases/ Deaths	Cases/ Deaths	Reference Period upto
1	2	3	4	5	6	7
1.	Andhra Pradesh	21	21	0	0	April, 15
2.	Arunachal Pradesh	0	0	0	0	May, 15
3.	Assam	0	0	0	0	May, 15 exc March
4.	Bihar	0	0	0	2	May, 15

1	2	3	4	5	6	7
5.	Chhattisgarh	2	2	2	1	May, 15
6.	Goa	0	1	0	0	March, 15
7.	Gujarat	7	3	0	0	May, 15
8.	Haryana	0	0	0	0	May, 15
9.	Himachal Pradesh	2	0	1	1	Apr., 15
10.	Jammu and Kashmir	0	0	0	0	May, 15
11.	Jharkhand	0	0	0	0	May, 15
12.	Karnataka	16	7	11	1	May, 15
13.	Kerala	7	9	5	1	May, 15
14.	Madhya Pradesh	3	9	2	2	Apr., 15
15.	Maharashtra	5	2	1	0	May, 15
16.	Manipur	0	0	0	0	May, 15
17.	Meghalaya	0	0	0	0	May, 15
18.	Mizoram	0	1	0	0	May, 15
19.	Nagaland	0	0	0	0	Apr., 15
20.	Odisha	29	8	3	1	May, 15
21.	Punjab	0	0	0	0	May, 15
22.	Rajasthan	3	2	0	0	May, 15
23.	Sikkim	0	0	0	0	May, 15
24.	Tamil Nadu	28	4	5	1	May, 15
25.	Tripura	1	0	1	0	May, 15
26.	Uttarakhand	1	2	6	0	April, 15
27.	Uttar Pradesh	1	0	1	0	May, 15
28.	West Bengal	80	57	52	19	May, 15
29.	A and N Islands	0	0	0	0	Apr, 15 exc Feb.
30.	Chandigarh	0	0	0	0	Feb., 15
31.	D and N Haveli	0	0	0	0	Apr., 15
32.	Daman and Diu	0	0	1	0	Feb., 15

1	2	3	4	5	6	7
33.	Delhi	3	10	13	7	May, 15
34.	Lakshadweep	0	0	0	0	May, 15
35.	Puducherry	3	0	0	0	May, 15
TOTAL		212	138	104	36	

Number of deaths are equal to number of cases.

Source: National Health Profile brought out by CBHI, DGHS

Note : 1. 2015 : Data for Arunachal Pradesh consist of 1 to 6 district only

2. 2014 : Andhra Pradesh Excludes data of 10 districts of Telangana from July, 2014 onwards.

3. 2014 : Data for Assam till September

4. 2014 : Data from Meghalaya does not contains for October

5. 2011 : Data for only a few districts in Bihar

Testing of fast foods of various brands

†2510. SHRI LAL SINH VADODIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government is contemplating to conduct tests on fast foods of various brands;

(b) if so, whether Government is considering to take any steps in this regard; and

(c) if so, the details thereof and by when those steps would be taken and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) Random sampling and testing of food products including fast foods is undertaken by the officials of the Food Safety Departments of the respective States/ UTs to ensure compliance with the standards laid down under Food Safety and Standards (FSS) Act, 2006, Rules and Regulations made thereunder. In cases, where food samples are found to be non-conforming to the prescribed standards/regulations, action is taken as per provisions of the FSS Act, 2006. The Food Safety and Standards Authority of India (FSSAI) *vide* its communication dated 25th May, 2015 advised all the States/UTs to draw samples of the Maggi Noodles (Nestle) and get the same tested from authorised labs. FSSAI also issued another advisory to all States/UTs to draw samples of noodles and other similar products manufactured and marketed by other companies.

† Original notice of the question was received in Hindi.

Release of funds for medical education and infrastructure in Chhattisgarh

†2511. DR. BHUSHAN LAL JANGDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the amount recommended by the Thirteenth Finance Commission for allocation to Chhattisgarh under the head, 'Strengthening of Health Infrastructure', for the years spanning from 2011 to 2015, have still not been provided, if so, by when it will be released; and

(b) by when the additional grant for establishment of Rajnandgaon Medical College and approval for opening superspeciality hospital at Jagdalpur will be provided and by when the amount would be made available?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Thirteenth Finance Commission (FC-XIII) had recommended Grants of ₹ 66.00 crore for Chhattisgarh under State Specific Needs for strengthening of Health Infrastructure, allocable between 2011-12 to 2014-15, in four equal installments or as per approved phasing proposed by the State Government. The eligibility for these funds were subject to fulfillment of conditionalities specified for release of State Specific Grants. Accordingly, the first installment of ₹ 16.50 crore of the Grant was released to Chhattisgarh during 2011-12. Subsequent installments of the Grants could not be released during the award period of FC-XIII *i.e.* 2010-15, due to non-fulfillment of conditionalities for release of State Specific Grants by the State Government.

The grants recommended by Thirteenth Finance Commission was for construction of 500 sub-health Centres, 25 Primary Health Centres (PHCs), 5 Community Health Centres (CHCs) and 100 AYUSH Dispensaries, with the proviso that priority would be given to remote tribal areas. No recommendation was made by FC-XIII in respect of grants for Rajnandgaon Medical College and for opening super-speciality hospital at Jagdalpur under 'State Specific Needs for upgradation of Health Infrastructure' for Chhattisgarh State.

Ensuring quality control of packaged food available in market

†2512. DR. SANJAY SINH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the person (s)/agency (ies) responsible for ensuring quality control of packaged food available in the market;

† Original notice of the question was received in Hindi.

(b) the reasons for not undertaking tests/investigations earlier for the poisonous substances contained in Nestle Maggi which continue to be sold out in the market for a long time;

(c) whether a consumer can get the test done to find out the ingredients present in any food item, if so, the places where such investigation can be undertaken in the country; and

(d) the details of steps being taken by Government to check the recurrences of such incidents in future and to punish the offenders?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The implementation and enforcement of Food Safety and Standards (FSS) Act, 2006, Rules and Regulations made thereunder primarily rests with the food safety Departments of the State/UT Governments.

(b) Random sampling and testing of food products are undertaken by the officials of Food Safety Departments of the respective States/UTs to ensure compliance with the standards laid down under Food Safety and Standards Act, 2006, Rules and Regulations made thereunder. In cases, where food samples are found to be non-conforming to the prescribed standards/regulations, action is taken as per provisions of the FSS Act, 2006. In this case also, nation-wide tests were conducted after test results of a random sample drawn in Uttar Pradesh showed presence of Lead beyond permissible limits.

(c) Any purchaser can have any article of food analysed by a food analyst on payment of such fees as may be prescribed.

(d) The food safety Departments of the States/UTs undertake surveillance, monitoring, inspection, random sampling and testing of food to ensure compliance of the FSS Act, Rules and Regulations made thereunder.

Action on products rejected by food safety commissioners

2513. SHRI HUSAIN DALWAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Food Safety and Standards Authority of India held its Central Scientific Advisory Committee meeting in Delhi in June, 2015, if so, the details of the deliberations held in the meeting; and

(b) whether the Food Regulator handed over a list of 500 products rejected by it to Food Safety Commissioners of States, if so, the action taken by the Commissioners in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Food Safety and Standards Authority of India does not have a Central Scientific Advisory Committee. However, the Central Advisory Committee (CAC) advises the Food Authority on matters enumerated in section 12 of the Food Safety and Standards Act, 2006. The 14th meeting of CAC was held on 4th June, 2015 in New Delhi.

(b) A list of rejected Product Approvals applications is uploaded on the Food Safety and Standards Authority of India (FSSAI) website on regular basis. The FSSAI has communicated to all Commissioners of Food Safety to check the FSSAI's website on regular basis for updates on products rejected by the FSSAI and to initiate action as per the provisions laid down under Food Safety and Standards Act, 2006, Rules and Regulations made thereunder.

Adequate technical and non-technical staff in PHCs

2514. SHRI KIRANMAY NANDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that technical staff in Primary Health Centres (PHCs) especially in rural areas are very less and even such staff are not posted; and

(b) if so, the details thereof along with the steps taken by Government to provide adequate technical and non-technical staff in Primary Health Centres in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The State/UTs-wise position as per RHS 2013-14 with respect to technical staff required, sanctioned, filled up and vacant, is given in Statement I-V (*See below*).

Public health being a State subject, the primary responsibility for providing adequate technical and non-technical staff at PHCs lies with the State/UT Governments. However, under the National Health Mission (NHM), financial support is provided to States/UTs to strengthen their health system, including support for recruitment of HR on contractual basis based on the requirement posed by the States/UTs in their Programme Implementation Plans.

The Government has approved support for 2.29 lakh technical posts under NHM in 2014-15 which includes posts being supported for PHCs.

Further, under NHM, financial support is also provided to States, *inter-alia* for giving hard area allowance to doctors for serving in rural and remote areas and for their residential quarters so that doctors find it attractive to serve in public health

facilities in such areas. States have also been advised to have transparent policies of posting and transfer, and deploy doctors rationally so as to improve motivation of doctors and reduce vacancies.

Statement-I

Health worker [female]/ANM at sub Centres and PHCs

Sl.No.	State/UT	(As on 31st March, 2014)				
		Re- quired ¹	Sanc- tioned	In Position	Vacant	Shortfall ¹
		[R]	[S]	[P]	[S-P]	[R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	14231	23322	20920	2402	*
2.	Arunachal Pradesh	403	NA	348	NA	55
3.	Assam###	5635	5962	9220	*	*
4.	Bihar	11612	NA	18630	NA	*
5.	Chhattisgarh	5944	5944	5666	278	278
6.	Goa	228	150	150	0	78
7.	Gujarat#	8432	7274	6938	336	1494
8.	Haryana	2996	4774	4540	234	*
9.	Himachal Pradesh	2557	2213	2002	211	555
10.	Jammu and Kashmir	2902	2649	4654	*	*
11.	Jharkhand	4288	4288	6678	*	*
12.	Karnataka	11497	16571	12144	4427	*
13.	Kerala	5404	7929	7950	*	*
14.	Madhya Pradesh	9921	10150	12580	*	*
15.	Maharashtra	12391	17106	18594	*	*
16.	Manipur	506	1065	966	99	*
17.	Meghalaya	530	1118	892	226	*
18.	Mizoram##	427	388	666	*	*
19.	Nagaland	522	598	928	*	*
20.	Odisha	7993	NA	8153	NA	*
21.	Punjab	3378	4622	4342	280	*
22.	Rajasthan	16489	20955	16258	4697	231

1	2	3	4	5	6	7
23.	Sikkim##	171	219	272	*	*
24.	Tamil Nadu	10075	9986	9096	890	979
25.	Tripura	1056	NA	661	NA	395
26.	Uttarakhand	2104	2418	1828	590	276
27.	Uttar Pradesh	24018	27334	23731	3603	287
28.	West Bengal	11265	20500	18301	2199	*
29.	A and N Islands	141	215	199	16	*
30.	Chandigarh	16	16	25	*	*
31.	D and N Haveli	58	36	88	*	*
32.	Daman and Diu	29	26	39	*	*
33.	Delhi	32	47	40	7	*
34.	Lakshadweep	18	48	48	0	*
35.	Puducherry	77	233	233	0	*
ALL INDIA		177346	198156	217780	20495	4628

1 : Requirement based on norm of one ANM per each existing Sub Centre and PHC

NA : Not Available

: Data for 2013 repeated

: Sanctioned data for 2013 used

: Sanctioned data for 2011 used

* : Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs

Statement-II

Doctors+at primary health centres

Sl.No.	State/UT	(As on 31st March, 2014)				
		Re- quired ¹	Sanc- tioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	1709	3588	3118	470	*
2.	Arunachal Pradesh	117	NA	92	NA	25
3.	Assam	1014	NA	1355	NA	*

1	2	3	4	5	6	7
4.	Bihar##	1883	2078	2521	*	*
5.	Chhattisgarh	783	752	383	369	400
6.	Goa	21	48	56	*	*
7.	Gujarat#	1158	1504	889	615	269
8.	Haryana	454	577	395	182	59
9.	Himachal Pradesh	489	582	571	11	*
10.	Jammu and Kashmir	637	1030	1224	*	*
11.	Jharkhand	330	330	372	*	*
12.	Karnataka	2233	2233	2155	78	78
13.	Kerala	829	1119	1168	*	*
14.	Madhya Pradesh	1157	1658	999	659	158
15.	Maharashtra	1811	3009	2506	503	*
16.	Manipur	85	238	199	39	*
17.	Meghalaya	108	128	114	14	*
18.	Mizoram	57	152	49	103	8
19.	Nagaland	126	101	126	*	0
20.	Odisha ²	1305	1312	973	339	332
21.	Punjab	427	490	441	49	*
22.	Rajasthan	2082	2562	2111	451	*
23.	Sikkim	24	NA	38	NA	*
24.	Tamil Nadu	1369	2612	2139	473	*
25.	Tripura	84	NA	160	NA	*
26.	Uttarakhand	257	325	160	165	97
27.	Uttar Pradesh	3497	4509	2209	2300	1288
28.	West Bengal	909	2600	711	1889	198
29.	A and N Islands	22	52	42	10	*
30.	Chandigarh	0	0	0	0	0
31.	D and N Haveli	7	6	7	*	0

1	2	3	4	5	6	7
32.	Daman and Diu	3	3	5	*	*
33.	Delhi	5	21	20	1	*
34.	Lakshadweep	4	9	9	0	*
35.	Puducherry	24	38	38	0	*
ALL INDIA ³		25020	33666	27355	8720	2912

1 : One per Primary Health Centre.

2 : The PHC data included Area Hospitals and Other Hospitals.

3 : For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded.

: Sanctioned data for 2011 used.

: Data for 2013 repeated.

NA : Not Available.

+ : Allopathic Doctors.

* : Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs

Statement-III

Pharmacists at PHCs and CHCs

Sl.No.	State/UT	(As on 31st March, 2014)				
		Re- quired ¹	Sanc- tioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	2001	2207	1642	565	359
2.	Arunachal Pradesh	169	NA	97	NA	72
3.	Assam##	1165	1284	1347	*	*
4.	Bihar+	1953	989	216	773	1737
5.	Chhattisgarh	940	1081	808	273	132
6.	Goa	25	17	16	1	9
7.	Gujarat#	1458	1550	879	671	579
8.	Haryana	563	484	489	*	74
9.	Himachal Pradesh	567	614	434	180	133
10.	Jammu and Kashmir	721	865	911	*	*
11.	Jharkhand	518	518	305	213	213

1	2	3	4	5	6	7
12.	Karnataka	2426	2538	2420	118	6
13.	Kerala	1053	1036	1102	*	*
14.	Madhya Pradesh	1491	1443	1023	420	468
15.	Maharashtra	2171	2355	2088	267	83
16.	Manipur	102	145	146	*	*
17.	Meghalaya	135	135	135	0	0
18.	Mizoram	66	NA	46	NA	20
19.	Nagaland	147	135	137	*	10
20.	Odisha	1682	1819	1468	351	214
21.	Punjab	577	841	806	35	*
22.	Rajasthan	2649	1178	510	668	2139
23.	Sikkim	26	NA	12	NA	14
24.	Tamil Nadu	1754	1657	1443	214	311
25.	Tripura	102	NA	178	NA	*
26.	Uttarakhand	316	312	100	212	216
27.	Uttar Pradesh	4270	2952	2883	69	1387
28.	West Bengal	1256	1116	896	220	360
29.	A and N Islands	26	62	60	2	*
30.	Chandigarh	2	16	20	*	*
31.	D and N Haveli	8	7	9	*	*
32.	Daman and Diu	5	5	5	0	0
33.	Delhi	5	6	6	0	*
34.	Lakshadweep	7	15	15	0	*
35.	Puducherry	27	42	37	5	*
ALL INDIA		30383	27424	22689	5257	8536

1 : One per each Primary Health Centre and Community Health Centre

+ : Sanctioned data for 2010 repeated

: Data for 2013 repeated

: Sanctioned data for 2013 used

* : Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

NA : Not Available.

Statement-IV*Laboratory technicians at PHCs and CHCs*

Sl.No.	State/UT	(As on 31st March, 2014)				
		Re- quired ¹	Sanc- tioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	2001	1818	1342	476	659
2.	Arunachal Pradesh	169	NA	92	NA	77
3.	Assam##	1165	860	1225	*	*
4.	Bihar+	1953	683	627	56	1326
5.	Chhattisgarh	940	1047	626	421	314
6.	Goa	25	15	14	1	11
7.	Gujarat#	1458	1556	1401	155	57
8.	Haryana	563	463	422	41	141
9.	Himachal Pradesh	567	352	252	100	315
10.	Jammu and Kashmir	721	550	810	*	*
11.	Jharkhand	518	518	303	215	215
12.	Karnataka	2426	1777	1203	574	1223
13.	Kerala	1053	324	365	*	688
14.	Madhya Pradesh	1491	1043	892	151	599
15.	Maharashtra	2171	1474	1322	152	849
16.	Manipur	102	102	96	6	6
17.	Meghalaya	135	118	117	1	18
18.	Mizoram	66	NA	61	NA	5
19.	Nagaland	147	68	65	3	82
20.	Odisha	1682	476	378	98	1304
21.	Punjab	577	578	482	96	95
22.	Rajasthan	2649	3034	1830	1204	819
23.	Sikkim	26	NA	38	NA	*
24.	Tamil Nadu	1754	1817	1025	792	729
25.	Tripura	102	NA	87	NA	15

1	2	3	4	5	6	7
26.	Uttarakhand	316	127	157	*	159
27.	Uttar Pradesh	4270	1331	963	368	3307
28.	West Bengal	1256	1185	375	810	881
29.	A and N Islands	26	29	27	2	*
30.	Chandigarh	2	8	16	*	*
31.	D and N Haveli	8	7	10	*	*
32.	Daman and Diu	5	4	4	0	1
33.	Delhi	5	5	3	2	2
34.	Lakshadweep	7	11	11	0	*
35.	Puducherry	27	10	38	*	*
ALL INDIA		30383	21390	16679	5724	13897

1 : One per each Primary Health Centre and Community Health Centre
+ : Sanctioned data for 2011 repeated
: Data for 2013 repeated
: Sanctioned data for 2013 used
* : Surplus.All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs
NA : Not Available.

Statement-V

Nursing staff at PHCs and CHCs

Sl.No.	States/UTs	(As on 31st March, 2014)				
		Re- quired ¹	Sanc- tioned	In Position	Vacant	Shortfall ¹
		[R]	[S]	[P]	[S-P]	[R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	3753	3966	3459	507	294
2.	Arunachal Pradesh	481	NA	314	NA	167
3.	Assam##	2071	2798	2771	27	*
4.	Bihar#	2373	1662	1736	*	637
5.	Chhattisgarh	1882	2265	1113	1152	769
6.	Goa	49	80	86	*	*
7.	Gujarat+	3258	4058	2705	1353	553
8.	Haryana	1217	1528	1566	*	*
9.	Himachal Pradesh	1035	546	434	112	601

1	2	3	4	5	6	7
10.	Jammu and Kashmir	1225	1250	902	348	323
11.	Jharkhand	1646	NA	1223	NA	423
12.	Karnataka	3584	3440	3798	*	*
13.	Kerala	2397	3608	3967	*	*
14.	Madhya Pradesh	3495	4189	3629	560	*
15.	Maharashtra	4331	3218	2540	678	1791
16.	Manipur	204	484	433	51	*
17.	Meghalaya	297	413	413	0	*
18.	Mizoram	120	NA	153	NA	*
19.	Nagaland	273	197	338	*	*
20.	Odisha	3944	903	1260	*	2684
21.	Punjab	1477	2189	1907	282	*
22.	Rajasthan	6051	12743	8686	4057	*
23.	Sikkim	38	NA	37	NA	1
24.	Tamil Nadu	4064	8177	6739	1438	*
25.	Tripura	210	NA	623	NA	*
26.	Uttarakhand	670	275	456	*	214
27.	Uttar Pradesh	8908	4497	4412	85	4496
28.	West Bengal	3338	8285	7603	682	*
29.	A and N Islands	50	191	185	6	*
30.	Chandigarh	14	47	106	*	*
31.	D and N Haveli	14	8	37	*	*
32.	Daman and Diu	17	14	14	0	3
33.	Delhi	5	5	8	*	*
34.	Lakshadweep	25	52	52	0	*
35.	Puducherry	45	233	233	0	*
ALL INDIA		62561	71321	63938	11338	12956

1 : One per Primary Health Centre and seven per Community Health Centre

+ : Data for 2013 repeated

: Data for 2011 repeated

: Sanctioned data for 2012 used

* : Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

NA : Not Available.

Stringent punishment for manufacturers and suppliers of spurious medicines

2515. SHRI MANSUKH L. MANDAVIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that spurious medicines are being sold in the market which are adversely impacting human health;

(b) if so, the number of cases of spurious, inferior quality and adulterated medicines, separately, coming to light during the last three years, State-wise, along with the action taken thereon; and

(c) whether in view of the gravity of the issue, Government contemplates amending relevant rules to include stringent punishment for manufacturers and suppliers of such medicines, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Some instances of 'Not of standard quality'/adulterated, spurious drugs have been noticed amongst the samples drawn and tested. The details provided by the State/Union Territory Drug Controllers are given in Statement-I to III (*See below*).

(c) With a view to checking the marketing and manufacture of adulterated/spurious and sub-standard drugs in the country, the Drugs and Cosmetics Act, 1940 was amended in 2008 providing stringent penalties including making certain offences cognizable and non-bailable.

Statement-I

*Number of samples tested and enforcement actions taken by
State Drugs Controller during 2012-13*

Sl. No.	States	No. of drugs samples tested	No. of drugs samples declared not of standard quality	No. of drugs samples declared spurious/adulterated	No. of prosecution launched for manufacturing, sale and distribution of spurious/adulterated drugs	No. of cases (as mentioned in the earlier column) decided	No. of persons arrested
1	2	3	4	5	6	7	8
1.	Andhra Pradesh	6127	78	10	2	4	-
2.	Arunachal Pradesh	103	6	Nil	Nil	Nil	Nil

1	2	3	4	5	6	7	8
3.	Assam	665	50	Nil	Nil	Nil	Nil
4.	Bihar			Data not reported.			
5.	Goa	637	36	Nil	Nil	Nil	Nil
6.	Gujarat	6907	551	4	1	1	Nil
7.	Haryana	3713	52	25	1	Nil	Nil
8.	Himachal Pradesh	1318	27	Nil	1	Nil	Nil
9.	Jammu and Kashmir	2410	86	3	3	-	-
10.	Karnataka	6336	229	2	2	Nil	3
11.	Kerala	4569	189	Nil	Nil	Nil	Nil
12.	Madhya Pradesh	2049	74	Nil	Nil	Nil	-
13.	Maharashtra	7538	360	3	Nil	Nil	26
14.	Manipur	Nil	Nil	Nil	Nil	Nil	Nil
15.	Meghalaya	1	4	Nil	Initiated	Nil	Nil
16.	Mizoram	64	Nil	Nil	Nil	Nil	Nil
17.	Nagaland	84	4	-	Nil	Nil	-
18.	Odisha	4005	37	1	Instructed to file prosecution in spurious drugs cases	Nil	Nil
19.	Punjab	3087	37	Nil	Nil	Nil	-
20.	Rajasthan	1625	81	15	36	Nil	2
21.	Sikkim	47	Nil	Nil	Nil	Nil	Nil
22.	Tamil Nadu	3906	210	4	9	1	Nil
23.	Tripura	236	Nil	Nil	Nil	Nil	Nil
24.	Uttar Pradesh	1016	161	3	156	Nil	76
25.	West Bengal	1186	35	Nil	2	Nil	3
26.	Puducherry	Nil	Nil	Nil	Nil	Nil	Nil
27.	Andaman and Nicobar Island	1	Nil	Nil	Nil	Nil	Nil
28.	Chandigarh	109	8	Nil	Nil	Nil	Nil
29.	Delhi	475	19	Nil	Nil	Nil	Nil

1	2	3	4	5	6	7	8
30.	Dadra and Nagar Haveli	Nil	Nil	Nil	Nil	Nil	Nil
31.	Daman and Diu	58	Nil	Nil	Nil	Nil	Nil
32.	Lakshadweep	Nil	Nil	Nil	Nil	Nil	Nil
33.	Chhattisgarh	15	4	Nil	Nil	Nil	Nil
34.	Jharkhand	38	11	Nil	Nil	Nil	Nil
35.	Uttarakhand	212	13	Nil	1	Nil	Nil
TOTAL		58537	2362	70	214	6	110

Statement-II

Number of samples tested and enforcement actions taken by State Drugs Controller during 2013-14

Sl. No.	States	No. of drugs samples tested	No. of drugs samples declared not of standard quality	No. of drugs samples declared spurious/ adulterated	No. of prosecution launched for manufacturing, sale and distribution of spurious/ adulterated drugs	No. of cases (as mentioned in the earlier column) decided	No. of persons arrested	Approx. value of drug seized	No. of Raids Conducted	Action taken w.r.t no. of raids conducted
1	2	3	4	5	6	7	8	9	10	11
1.	Andhra Pradesh	7343	61	12	12	Under trial	Not given	134.68 lakhs	1645 shops	SO issued-950 Cancellations-300 Warnings-112
2.	Arunachal Pradesh	183	6	Nil	NA	NA	NA	NA	NA	NA
3.	Assam	1097	39	Nil	Nil	Nil	Nil	Nil	Nil	Nil
4.	Bihar	1137	52	4	1	Nil	Nil	50,000	80	explanation on-69 suspended-27
5.	Goa	590	34	Nil	Nil	Nil	Nil	Nil	Nil	Nil
6.	Gujarat	9713	567	32	Nil	Nil	1	Nil	13	Under investigation

7	Haryana	2494	52	3	3	Nil	1	Approx 2 lakh	6839	Drug License suspended-378 Drug Lice. Cancelled-179 Court case launed-27 FIR got registered-9
8.	Himachal Pradesh	751	28	1	1 (seizure in 2011)	Nil	Nil	NA	Nil	NA
9.	Jammu and Kashmir	4550	153	6 (03-spurious, 03-Adulterated)	6 (03-spurious, sub-judice 03-Adulterated)	Nil	Nil	9969962	Nil	Nil
10.	Karnataka	9366	292	4	1	Nil	Nil	Nil	Nil	Nil
11.	Kerala	4557	152	Nil	Nil	Nil	Nil	Nil	Nil	NA
12.	Madhya Pradesh	1370	75	Nil	Nil	Nil	Nil	Nil	Nil	Nil
13.	Maharashtra	6097	466	19	11	Nil	5	37.85 lakhs	17	7
14.	Manipur	7	Nil	Nil	Nil	Nil	Nil	Nil	Nil	NA
15.	Meghalaya	31	1	Nil	Initiated	Nil	Nil	Nil	Nil	Nil
16.	Mizoram	115	Nil	Nil	Nil	Nil	6	12 lakhs	6	prosecuted the arrested persons and the seized drugs were destroyed

27.	Andaman and Nicobar Islands	3, results are awaited	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
28.	Chandigarh	100	3	None	None	None	None	None	4	Found Satisfactory
29.	Delhi	166	17	5	Nil	Nil	Nil	NA	NA	NA
30.	Dadra and Nagar Haveli	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
31.	Daman and Diu	33	Nil	Nil	Nil	NA	Nil	Nil	Nil	NA
32.	Lakshadweep	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
33.	Chattisgarh	520	11	Nil	Nil	Nil	Nil	Nil	Nil	Nil
34.	Jharkhand	402	59	Nil	63	Nil	1	Nil	4	2
35.	Uttarakhand	405	31	7	2	Nil	Nil	Not Yet calculated	7	License suspended 3 and canceled 1
TOTAL		72712	3028	118	237	44	86	424.67 lacs	14567	---

Statement-III*Number of samples tested and enforcement actions taken by State Drugs Controller during 2014-15*

Sl. No.	States	No. of drugs samples tested	No. of drugs samples declared not of standard quality	No. of drugs samples declared spurious/ adulterated	No. of prosecution launched for manufacturing, sale and distribution of spurious/ adulterated drugs	No. of cases (as mentioned in the earlier column) decided	No. of persons arrested	Approx. value of drug seized	No. of Raids Conducted	Action taken w.r.t no. of raids conducted
1	2	3	4	5	6	7	8	9	10	11
1.	Andhra Pradesh	1270	10	4	Nil	Nil	Nil	1010635	505	Warnings issued-6, Sops issued-697, SCNS issued-198
2.	Arunachal Pradesh	272	7	1 (Mis-branded)	Nil	Nil	Nil	Nil	Nil	Nil
3.	Assam	767	39	Nil	Nil	Nil	Nil	Nil	Nil	Nil
4.	Bihar*	682	11	Nil	Nil	Nil	Nil	Nil	398	158
5.	Goa	473	11	Nil	1	Nil	Nil	Nil	Nil	Nil
6.	Gujarat	11300	499	5	5	Nil	Nil	Nil	5	Under investigation

7.	Haryana	2150	25	2	2	Nil	Nil	Nil	8306	101-License Canceled 187-License Suspend 12-Court case launched 01- warning issued 118-un-der investigation where Show cause notice issued 01- FIRs Registered
8.	Himachal Pradesh	881	31	Nil	Nil	NA	NA	NA	Nil	NA
9.	Jammu and Kashmir	3478	42	1	Prosecution permission granted and the same about to file	Nil	Nil	1,865,950	Nil	Nil
10.	Karnataka	6818	302	—	3	—	—	527095	—	—
11.	Kerala	4496	103	Nil	Nil	Nil	Nil	Nil	Nil	Nil
12.	Madhya Pradesh	1761	27	1	Nil	Nil	Nil	Nil	Nil	Nil
13.	Maharashtra	4406	420	25	01 (2 samples, 1 prosecution order. 01 prosecution filed) (in all 15 cases 13	3	13	35006352	33	2 FIR launched 7 prosecution launched 19 under investigation, prosecution to be filed

1	2	3	4	5	6	7	8	9	10	11
					prosecution- order are issued) 11 sample, 11 prosecution order 2 sample, 1 prosecution order 2 sample, 1 prosecution order					
14. Manipur		26	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
15. Meghalaya		57	1	Nil	Nil	Nil	Nil	Nil	Nil	Nil
16. Mizoram		103	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
17. Nagaland		56	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
18. Odisha		3915	98	1	04 nos of seizure have been made during 2013-14 and 02 nos of seizure have been made during 2014-15	Nil	Nil	97,240	801(upto Feb 2015)	(i) S.C.N. under rule 66 (1) are being issued against the I/R submitted by the D.I. after conducting raid. (ii) Steps have been taken for

drug recall of
N.S.Q. drugs
under intimation
to concerned
D.C./F.D.A. for
further action at
their end and to
send their action
taken report
along with
investigation
report for
finalisation of
further action
against manufac-
turers with due
recommendation
of the
screening
committe of
the State so
constituted in
compliance to
guidelines of
Central
Government
(iii). No. of
seizure
made : 23

1	2	3	4	5	6	7	8	9	10	11
19.	Punjab	2628	61	8	Nil	Nil	Nil	2218274	2318	Action under process
20.	Rajasthan	2167	97	3	14	1	4	2929097	316	28 and (one case accused Convicted for 7 years and Penalty 7 lacs Rupees)
21.	Sikkim	87	1	Nil	Nil	Nil	Nil	Nil	Nil	Nil
22.	Tamil Nadu	9498	387	2	2	Nil	Nil	Nil	240 raids have been conducted during the said period against the sales premises	450 sanction orders have been issued for launching prosecutions before the concerned court
23.	Tripura	679	22	Nil	Nil	Nil	Nil	Nil	3	under process
24.	Uttar Pradesh	10440	1384	28	122	0	68	4833868	1089	64 FIR were lodged and 68 persons were arrested
25.	West Bengal	842	22	1	Nil	Nil	Nil	Nil	5	Nil
26.	Puducherry	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
27.	Andaman and Nicobar	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
28.	Chandigarh	153	3	None	None	None	None	183000	1	Prosecution to be launched

29. Delhi	29	1	1	Nil	Nil	19000	1	FIR Launched
30. Dadra and Nagar Haveli	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
31. Daman and Diu	60	Nil	Nil	Nil	Nil	Nil	Nil	Nil
32. Lakshadweep	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
33. Chhattisgarh	464	24	Nil	Nil	Nil	Nil	Nil	Nil
34. Jharkhand	343	29	Nil	2	6	140000	17	F.I.R.-04 Licence Cancelled-01 Licence Suspended-01
35. Uttarakhand	182	10	Nil	Nil	Nil	Nil	4	Manufacturing license of 06 mfg. units has been suspended for further order sure due found violatin of provisions of D & C Act and Rules there under.
36. Telangana	3716	35	Nil	Nil	Nil	94,20,600 (in the month of April	Nil	Nil
TOTAL	74199	3702	83	152	10	5825111	14042	—

Check on infants' deaths due to malnutrition

†2516. SHRI MOTILAL VORA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of infants taking birth in Delhi every year;
- (b) whether it is a fact that out of these new born children, 15 per cent die before reaching one year age, if so, the reasons therefor; and
- (c) the steps taken by Government to check the deaths caused due to malnutrition?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The number of live births reported in Delhi as per Civil Registration System (CRS) in 2013, is 366483.

(b) No. As per Office of Registrar General of India (RGI) Sample Registration System (SRS) report of 2013, the Infant Mortality Rate of Delhi is 24 per 1000 live birth.

(c) The following specific activities are being implemented under the National Health Mission of Ministry of Health and Family Welfare to reduce deaths due to child malnutrition:

- (i) Nutrition Rehabilitation Centres (NRCs) have been set up to treat Severe Acute Malnourished (SAM) children. Currently 11 NRCs have been established in Delhi.
- (ii) Promotion of early and exclusive breastfeeding offers protection against common childhood illnesses including diarrhoea and pneumonia. Infant and Young Child Feeding Practices are being promoted through the IYCF centres in government hospitals of Delhi with provision of budget under the national health programme.
- (iii) Vitamin A Supplementation programme covers children up to the age of 5 years and offers protection against diarrhoea and pneumonia by improving the immunity and is used as a preventive measure.
- (iv) Promoting use of Zinc and ORS is one of the priority activities for child survival. Oral Rehydration Salt (ORS) packets and zinc tablets are made available free of cost and mothers are taught how to use them.
- (v) The community health workers and facility based health service providers are trained in the management of diarrhoea and pneumonia

† Original notice of the question was received in Hindi.

including management of malnutrition through the IMNCI (Integrated Management of Neonatal and Childhood Illnesses) programme.

- (iv) The Universal Immunisation Programme includes vaccines such as DPT, Measles and BCG that protect children against life threatening diseases.

Provision for healthcare services in remote rural areas

†2517. DR. SATYANARAYAN JATIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the measures taken to provide healthcare facilities to the remote rural regions and the villages and colonies without any approach roads;

(b) the State-wise number of villages in the country without the facilities of healthcare services or without approach roads and the number of working healthcare mobile vans; and

(c) the measures taken to provide appropriate healthcare services to the poor in urban and rural areas in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Public Health being a State subject, primary responsibility of providing health care facilities including to remote rural regions is that of State/UT Governments. However, under National Health Mission (NHM) financial and technical support is being extended to States/UTs for strengthening of their health care systems including support for providing health care facilities to the remote rural regions. This includes doli/palki etc. to provide last mile connectivity in remote areas without approach roads. Support is based on the proposals submitted by the States/UTs in their Programme Implementation Plans (PIPs).

(b) The State-wise number of villages in the country without the facilities of healthcare services is not maintained centrally.

The State-wise number of working healthcare mobile vans/ Mobile Medical Units (MMUs) is given in the Statement (*See* below).

(c) As mentioned above, public health being a State subject, primary responsibility of providing health care services including to poor is that of State/UT Governments. However, under National Health Mission (NHM) the State/UT Governments are being supported to strengthen public health systems to provide accessible, affordable and quality healthcare, responsive to the needs of the population, particularly the poor.

† Original notice of the question was received in Hindi.

Under Rashtriya Swasthya Bima Yojana (RSBY), GoI provides supports to the States/UTs to offer health insurance cover upto ₹ 30,000/- per family for hospitalisation to Below Poverty Line and 11 other categories of unorganised worker families.

Statement

Number of MMUs operational in the States/UTs under NHM

Sl.No.	States	MMUs Operational (As on March'15)
1.	Bihar	7
2.	Chhatisgarh	0
3.	Himachal Pradesh	0
4.	Jammu and Kashmir	11
5.	Jharkhand	101
6.	Madhya Pradesh	84
7.	Odisha	0
8.	Rajasthan	202
9.	Uttar Pradesh	0
10.	Uttarakhand	0
11.	Arunachal Pradesh	16
12.	Assam	50
13.	Manipur	9
14.	Meghalaya	7
15.	Mizoram	9
16.	Nagaland	11
17.	Sikkim	4
18.	Tripura	4
19.	Andhra Pradesh	0
20.	Goa	0
21.	Gujarat	30
22.	Haryana	9
23.	Karnataka	0
24.	Kerala	25
25.	Maharashtra	40

Sl.No.	States	MMUs Operational (As on March'15)
26.	Punjab	33
27.	Tamil Nadu	407
28.	Telangana	200
29.	West Bengal	32
30.	A and N Islands	0
31.	Chandigarh	5
32.	D and N Haveli	1
33.	Daman and Diu	0
34.	Delhi	2
35.	Lakshadweep	0
36.	Puducherry	8
TOTAL		1307

Availment of benefits under RAN

†2518. SHRIMATI KANAK LATA SINGH:

SHRI VISHAMBHAR PRASAD NISHAD:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the quantum of amount granted from Rashtriya Arogya Nidhi (RAN) for the treatment of patients along with their number for the last three years;

(b) the number of patients, receiving aids from this fund, died in last few years due to lack of money for their further treatment;

(c) whether the Ministry would consider to take any initiative which could provide long term treatment to those patients suffering from serious diseases free of cost who are not able to bear the cost themselves; and

(d) the prescribed State-wise income criteria for availing grant from this fund for treatment and when it was changed, and the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The details of amount released under RAN during last three years is given below:

Year	Amount released (₹ in lakh)	Number of beneficiaries
2012-13	1012.33	294
2013-14	1263.65	335
2014-15	1902.08	429
2015-16 (upto 31.07.2015)	614.46	149

(b) No such information is maintained in this Ministry.

(c) Financial assistance under Rashtriya Arogya Nidhi (RAN) is available as a "One Time Grant" to poor patients living below poverty line, suffering from life threatening diseases, as per guidelines of the Scheme. Presently there is no proposal under consideration for providing financial assistance under RAN, repeatedly, for long term treatment.

(d) The existing State-wise poverty lines for rural and urban areas for availing financial assistance from RAN were notified on 26.08.2014 and the details are given in the Statement.

Statement

*Details showing State-wise Poverty Lines for Rural and Urban Areas
for 2011-12 (Poverty Line ₹ Per Capita per month)*

Sl.No.	Name of State/UT	Year 2011-12	
		Rural	Urban
1	2	3	4
1.	Andhra Pradesh	860	1009
2.	Arunachal Pradesh	930	1060
3.	Assam	828	1008
4.	Bihar	778	923
5.	Chhattisgarh	738	849
6.	Delhi	1145	1134
7.	Goa	1090	1134
8.	Gujarat	932	1152
9.	Haryana	1015	1169
10.	Himachal Pradesh	913	1064

1	2	3	4
11.	Jammu and Kashmir	891	988
12.	Jharkhand	748	974
13.	Karnataka	902	1089
14.	Kerala	1018	987
15.	Madhya Pradesh	771	897
16.	Maharashtra	967	1126
17.	Manipur	1118	1170
18.	Meghalaya	888	1154
19.	Mizoram	1066	1155
20.	Nagaland	1270	1302
21.	Odisha	695	861
22.	Puducherry	1301	1309
23.	Punjab	1054	1155
24.	Rajasthan	905	1002
25.	Sikkim	930	1226
26.	Tamil Nadu	880	937
27.	Tripura	798	920
28.	Uttar Pradesh	768	941
29.	Uttarakhand	880	1082
30.	West Bengal	783	981
ALL INDIA		816	1000

Shortage of human resources in healthcare sector

†2519. SHRI VISHAMBHAR PRASAD NISHAD:

SHRIMATI KANAK LATA SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of demand and shortage of human resources in the field of healthcare services in the country, State-wise; and

(b) the details of vacant posts of doctors along with technicians and other employees in the country at present under the Ministry and the steps taken by Government to fill them during the last one year?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) As per Rural Health Statistics (RHS), 2013-14 State/UT-wise vacancy position of doctors, specialist, paramedical staff etc. in Government health facilities upto CHCs is given in the Statement (*See below*).

Approval to support 2.29 lakh position of doctors (including specialist) and paramedical staff was accorded under the NHM in 2014-15 to strengthen public health systems of the States/UTs.

Health is a State subject and the responsibility to fill up vacant positions lies with the State/UT Governments.

Statement

State/UT-wise vacancy position of doctors, specialist, paramedical staff etc. in Government health facilities upto CHCs

(A) Health worker [Female]/ANM at sub centre

(as on 31st March, 2014)

Sl.No.	State/UT	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	12522	23322	20920	2402	*
2.	Arunachal Pradesh	286	NA	214	NA	72
3.	Assam	4621	NA	7778	NA	*
4.	Bihar	9729	NA	18066	NA	*
5.	Chhattisgarh	5161	5161	4988	173	173
6.	Goa	207	135	135	0	72
7.	Gujarat#	7274	7274	6938	336	336
8.	Haryana	2542	4416	4138	278	*
9.	Himachal Pradesh	2068	2213	2002	211	66
10.	Jammu and Kashmir	2265	2253	4076	*	*
11.	Jharkhand	3958	3958	6261	*	*
12.	Karnataka	9264	9264	8970	294	294
13.	Kerala	4575	4575	4590	*	*
14.	Madhya Pradesh	8764	8869	11225	*	*
15.	Maharashtra	10580	12413	14394	*	*

1	2	3	4	5	6	7
16.	Manipur	421	842	798	44	*
17.	Meghalaya	422	903	645	258	*
18.	Mizoram##	370	388	634	*	*
19.	Nagaland	396	407	777	*	*
20.	Odisha	6688	6688	7324	*	*
21.	Punjab	2951	4622	4262	360	*
22.	Rajasthan	14407	18693	14677	4016	*
23.	Sikkim##	147	147	196	*	*
24.	Tamil Nadu	8706	8768	8348	420	358
25.	Tripura	972	NA	544	NA	428
26.	Uttarakhand	1847	2255	1808	447	39
27.	Uttar Pradesh	20521	23580	20265	3315	256
28.	West Bengal	10356	20000	18079	1921	*
29.	A and N Islands	119	195	179	16	*
30.	Chandigarh	16	16	25	*	*
31.	D and N Haveli	51	36	88	*	*
32.	Daman and Diu	26	26	39	*	*
33.	Delhi	27	27	26	1	1
34.	Lakshadweep	14	28	28	0	*
35.	Puducherry	53	156	156	0	*
ALL INDIA		152326	171630	193593	14492	2095

¹ Requirement based on norm of one ANM per each existing Sub Centre.

Data for 2013 repeated.

Sanctioned data for 2011 used.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

NA Not Available.

(B) Health worker [Female]/ANM at sub centres and PHCs

(as on 31st March, 2014)

Sl.No.	State/UT	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall ¹ [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	14231	23322	20920	2402	*
2.	Arunachal Pradesh	403	NA	348	NA	55

1	2	3	4	5	6	7
3.	Assam###	5635	5962	9220	*	*
4.	Bihar	11612	NA	18630	NA	*
5.	Chhattisgarh	5944	5944	5666	278	278
6.	Goa	228	150	150	0	78
7.	Gujarat#	8432	7274	6938	336	1494
8.	Haryana	2996	4774	4540	234	*
9.	Himachal Pradesh	2557	2213	2002	211	555
10.	Jammu and Kashmir	2902	2649	4654	*	*
11.	Jharkhand	4288	4288	6678	*	*
12.	Karnataka	11497	16571	12144	4427	*
13.	Kerala	5404	7929	7950	*	*
14.	Madhya Pradesh	9921	10150	12580	*	*
15.	Maharashtra	12391	17106	18594	*	*
16.	Manipur	506	1065	966	99	*
17.	Meghalaya	530	1118	892	226	*
18.	Mizoram##	427	388	666	*	*
19.	Nagaland	522	598	928	*	*
20.	Odisha	7993	NA	8153	NA	*
21.	Punjab	3378	4622	4342	280	*
22.	Rajasthan	16489	20955	16258	4697	231
23.	Sikkim##	171	219	272	*	*
24.	Tamil Nadu	10075	9986	9096	890	979
25.	Tripura	1056	NA	661	NA	395
26.	Uttarakhand	2104	2418	1828	590	276
27.	Uttar Pradesh	24018	27334	23731	3603	287
28.	West Bengal	11265	20500	18301	2199	*
29.	A and N Islands	141	215	199	16	*
30.	Chandigarh	16	16	25	*	*
31.	D and N Haveli	58	36	88	*	*
32.	Daman and Diu	29	26	39	*	*
33.	Delhi	32	47	40	7	*

1	2	3	4	5	6	7
34.	Lakshadweep	18	48	48	0	*
35.	Puducherry	77	233	233	0	*
	ALL INDIA	177346	198156	217780	20495	4628

¹ Requirement based on norm of one ANM per each existing Sub-Centre and PHC.

NA Not Available.

Data for 2013 repeated.

Sanctioned data for 2011 used.

Sanctioned data for 2013 used.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

(c) Health assistants [Female]/LHV at PHCs

(As on 31st March, 2014)

Sl.No.	State/UT	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	1709	2643	2247	396	*
2.	Arunachal Pradesh	117	NA	4	NA	113
3.	Assam###	1014	379	379	0	635
4.	Bihar**	1883	850	358	492	1525
5.	Chhattisgarh	783	783	397	386	386
6.	Goa	21	11	9	2	12
7.	Gujarat#	1158	1084	546	538	612
8.	Haryana	454	323	253	70	201
9.	Himachal Pradesh	489	350	61	289	428
10.	Jammu and Kashmir	637	396	87	309	550
11.	Jharkhand	330	330	7	323	323
12.	Karnataka	2233	3824	1036	2788	1197
13.	Kerala	829	13	13	0	816
14.	Madhya Pradesh	1157	726	519	207	638
15.	Maharashtra	1811	2392	2331	61	*
16.	Manipur	85	75	64	11	21

1	2	3	4	5	6	7
17.	Meghalaya	108	67	65	2	43
18.	Mizoram	57	85	19	66	38
19.	Nagaland	126	13	27	*	99
20.	Odisha ²	1305	1162	708	454	597
21.	Punjab	427	489	408	81	19
22.	Rajasthan	2082	1851	1000	851	1082
23.	Sikkim##	24	24	20	4	4
24.	Tamil Nadu	1369	1160	857	303	512
25.	Tripura	84	NA	102	NA	*
26.	Uttarakhand	257	123	90	33	167
27.	Uttar Pradesh	3497	3781	1916	1865	1581
28.	West Bengal	909	142	89	53	820
29.	A and N Islands	22	11	11	0	11
30.	Chandigarh	0	0	0	0	0
31.	D and N Haveli	7	0	0	0	7
32.	Daman and Diu	3	0	0	0	3
33.	Delhi	5	12	7	5	*
34.	Lakshadweep	4	1	1	0	3
35.	Puducherry	24	13	12	1	12
ALL INDIA ³		25020	23113	13643	9590	12455

¹ One per Primary Health Centre.² The PHC data included Area Hospitals and Other Hospitals.³ For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded.

** Data for 2011 repeated.

Data for 2013 repeated.

Sanctioned data for 2011 used.

Sanctioned data for 2013 used.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs

NA Not Available.

(d) Health assistant [Male] at PHCs

(As on 31st March, 2014)

Sl. No.	State/UT	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	1709	0	0	0	1709
2.	Arunachal Pradesh	117	NA	72	NA	45
3.	Assam#	1014	0	0	0	1014
4.	Bihar##	1883	649	45	604	1838
5.	Chhattisgarh	783	783	261	522	522
6.	Goa	21	0	0	0	21
7.	Gujarat#	1158	1084	755	329	403
8.	Haryana	454	189	156	33	298
9.	Himachal Pradesh	489	413	22	391	467
10.	Jammu and Kashmir###	637	9	85	*	552
11.	Jharkhand	330	330	24	306	306
12.	Karnataka	2233	2310	1253	1057	980
13.	Kerala	829	2186	2197	*	*
14.	Madhya Pradesh	1157	477	288	189	869
15.	Maharashtra	1811	1722	1604	118	207
16.	Manipur	85	74	65	9	20
17.	Meghalaya	108	81	74	7	34
18.	Mizoram	57	86	22	64	35
19.	Nagaland	126	NA	53	NA	73
20.	Odisha ² #	1305	0	0	0	1305
21.	Punjab	427	407	282	125	145
22.	Rajasthan	2082	104	75	29	2007
23.	Sikkim	24	NA	12	NA	12
24.	Tamil Nadu	1369	2875	1707	1168	*
25.	Tripura	84	NA	100	NA	*
26.	Uttarakhand	257	65	78	*	179
27.	Uttar Pradesh	3497	5757	954	4803	2543

1	2	3	4	5	6	7
28.	West Bengal	909	286	151	135	758
29.	A and N Islands	22	0	0	0	22
30.	Chandigarh	0	0	0	0	0
31.	D and N Haveli	7	0	0	0	7
32.	Daman and Diu	3	2	2	0	1
33.	Delhi	5	0	0	0	5
34.	Lakshadweep	4	0	0	0	4
35.	Puducherry	24	21	21	0	3
ALL INDIA ³		25020	19910	10358	9889	16384

¹ One per Primary Health Centre.

² The PHC data included Area Hospitals and other Hospitals.

³ For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded.

Data for 2013 repeated

Sanctioned data for 2011 used.

Sanctioned data for 2013 used.

NA Not Available.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

(e) Doctors at primary health centres

(As on 31st March, 2014)

Sl. No.	State/UT	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	1709	3588	3118	470	*
2.	Arunachal Pradesh	117	NA	92	NA	25
3.	Assam	1014	NA	1355	NA	*
4.	Bihar##	1883	2078	2521	*	*
5.	Chhattisgarh	783	752	383	369	400
6.	Goa	21	48	56	*	*
7.	Gujarat#	1158	1504	889	615	269
8.	Haryana	454	577	395	182	59
9.	Himachal Pradesh	489	582	571	11	*
10.	Jammu and Kashmir	637	1030	1224	*	*

1	2	3	4	5	6	7
11.	Jharkhand	330	330	372	*	*
12.	Karnataka	2233	2233	2155	78	78
13.	Kerala	829	1119	1168	*	*
14.	Madhya Pradesh	1157	1658	999	659	158
15.	Maharashtra	1811	3009	2506	503	*
16.	Manipur	85	238	199	39	*
17.	Meghalaya	108	128	114	14	*
18.	Mizoram	57	152	49	103	8
19.	Nagaland	126	101	126	*	0
20.	Odisha ²	1305	1312	973	339	332
21.	Punjab	427	490	441	49	*
22.	Rajasthan	2082	2562	2111	451	*
23.	Sikkim	24	NA	38	NA	*
24.	Tamil Nadu	1369	2612	2139	473	*
25.	Tripura	84	NA	160	NA	*
26.	Uttarakhand	257	325	160	165	97
27.	Uttar Pradesh	3497	4509	2209	2300	1288
28.	West Bengal	909	2600	711	1889	198
29.	A and N Islands	22	52	42	10	*
30.	Chandigarh	0	0	0	0	0
31.	D and N Haveli	7	6	7	*	0
32.	Daman and Diu	3	3	5	*	*
33.	Delhi	5	21	20	1	*
34.	Lakshadweep	4	9	9	0	*
35.	Puducherry	24	38	38	0	*
ALL INDIA ³		25020	33666	27355	8720	2912

¹ One per Primary Health Centre.

² The PHC data included Area Hospitals and other Hospitals.

³ For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded.

Data for 2013 repeated.

Sanctioned data for 2011 used.

NA Not Available.

+ Allopathic Doctors.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

*(f) General Duty Medical Officers (GDMOs) - Allopathic at CHCs**(As on 31st March, 2014)*

Sl.No.	State/UT	Sanctioned	In Position
		[S]	[P]
1	2	3	4
1.	Andhra Pradesh	538	469
2.	Arunachal Pradesh	NA	105
3.	Assam	NA	384
4.	Bihar	NA	285
5.	Chhattisgarh	628	302
6.	Goa	12	10
7.	Gujarat#	1060	747
8.	Haryana	382	208
9.	Himachal Pradesh	282	194
10.	Jammu and Kashmir	539	465
11.	Jharkhand	564	757
12.	Karnataka	255	240
13.	Kerala	779	1017
14.	Madhya Pradesh	1109	864
15.	Maharashtra	512	478
16.	Manipur	97	94
17.	Meghalaya	91	74
18.	Mizoram	NA	11
19.	Nagaland	35	51
20.	Odisha	449	463
21.	Punjab	174	380
22.	Rajasthan	1405	1011
23.	Sikkim	NA	4
24.	Tamil Nadu	1919	1694
25.	Tripura	NA	68
26.	Uttarakhand	61	54

1	2	3	4
27.	Uttar Pradesh	0	0
28.	West Bengal	1800	902
29.	A and N Islands	13	13
30.	Chandigarh	6	17
31.	D and N Haveli	0	5
32.	Daman and Diu	4	4
33.	Delhi	0	0
34.	Lakshadweep	11	11
35.	Puducherry	18	18
TOTAL ¹		12743	11399

Data for 2013 repeated

NA Not Available

¹ For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded.*(g) Radiographers at CHCs*

(As on 31st March, 2014)

Sl. No.	States/UTs	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	292	167	65	102	227
2.	Arunachal Pradesh	52	NA	7	NA	45
3.	Assam##	151	145	65	80	86
4.	Bihar+	70	89	13	76	57
5.	Chhattisgarh	157	157	117	40	40
6.	Goa	4	4	4	0	0
7.	Gujarat#	300	330	175	155	125
8.	Haryana	109	77	55	22	54
9.	Himachal Pradesh	78	71	47	24	31
10.	Jammu and Kashmir	84	252	315	*	*
11.	Jharkhand	188	188	58	130	130
12.	Karnataka	193	193	174	19	19

1	2	3	4	5	6	7
13.	Kerala	224	16	18	*	206
14.	Madhya Pradesh	334	287	169	118	165
15.	Maharashtra	360	140	132	8	228
16.	Manipur	17	13	13	0	4
17.	Meghalaya	27	19	19	0	8
18.	Mizoram	9	NA	5	NA	4
19.	Nagaland	21	3	1	2	20
20.	Odisha	377	61	52	9	325
21.	Punjab	150	145	136	9	14
22.	Rajasthan	567	738	223	515	344
23.	Sikkim	2	NA	2	NA	0
24.	Tamil Nadu	385	294	141	153	244
25.	Tripura	18	NA	7	NA	11
26.	Uttarakhand	59	30	16	14	43
27.	Uttar Pradesh	773	230	82	148	691
28.	West Bengal	347	366	62	304	285
29.	A and N Islands	4	0	0	0	4
30.	Chandigarh	2	5	4	1	*
31.	D and N Haveli	1	0	1	*	0
32.	Daman and Diu	2	3	3	0	*
33.	Delhi	0	0	0	0	0
34.	Lakshadweep	3	5	5	0	*
35.	Puducherry	3	3	3	0	0
ALL INDIA		5363	4031	2189	1929	3410

¹ One per Community Health Centre.

Data for 2013 repeated.

+ Data for 2011 repeated.

Sanctioned data for 2013 used.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

NA Not Available.

(h) Pharmacists at PHCs and CHCs

(As on 31st March, 2014)

Sl. No.	States/UTs	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	2001	2207	1642	565	359
2.	Arunachal Pradesh	169	NA	97	NA	72
3.	Assam##	1165	1284	1347	*	*
4.	Bihar+	1953	989	216	773	1737
5.	Chhattisgarh	940	1081	808	273	132
6.	Goa	25	17	16	1	9
7.	Gujarat#	1458	1550	879	671	579
8.	Haryana	563	484	489	*	74
9.	Himachal Pradesh	567	614	434	180	133
10.	Jammu and Kashmir	721	865	911	*	*
11.	Jharkhand	518	518	305	213	213
12.	Karnataka	2426	2538	2420	118	6
13.	Kerala	1053	1036	1102	*	*
14.	Madhya Pradesh	1491	1443	1023	420	468
15.	Maharashtra	2171	2355	2088	267	83
16.	Manipur	102	145	146	*	*
17.	Meghalaya	135	135	135	0	0
18.	Mizoram	66	NA	46	NA	20
19.	Nagaland	147	135	137	*	10
20.	Odisha	1682	1819	1468	351	214
21.	Punjab	577	841	806	35	*
22.	Rajasthan	2649	1178	510	668	2139
23.	Sikkim	26	NA	12	NA	14
24.	Tamil Nadu	1754	1657	1443	214	311
25.	Tripura	102	NA	178	NA	*

1	2	3	4	5	6	7
26.	Uttarakhand	316	312	100	212	216
27.	Uttar Pradesh	4270	2952	2883	69	1387
28.	West Bengal	1256	1116	896	220	360
29.	A and N Islands	26	62	60	2	*
30.	Chandigarh	2	16	20	*	*
31.	D and N Haveli	8	7	9	*	*
32.	Daman and Diu	5	5	5	0	0
33.	Delhi	5	6	6	0	*
34.	Lakshadweep	7	15	15	0	*
35.	Puducherry	27	42	37	5	*
ALL INDIA		30383	27424	22689	5257	8536

¹ Sanctioned data for 2013 used One per each Primary Health Centre and Community Health Centre.

+ Sanctioned data for 2010 repeated.

Data for 2013 repeated.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs

NA Not Available.

(i) Laboratory Technicians at PHCs and CHCs

(As on 31st March, 2014)

Sl. No.	State/UT	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	2001	1818	1342	476	659
2.	Arunachal Pradesh	169	NA	92	NA	77
3.	Assam##	1165	860	1225	*	*
4.	Bihar+	1953	683	627	56	1326
5.	Chhattisgarh	940	1047	626	421	314
6.	Goa	25	15	14	1	11
7.	Gujarat#	1458	1556	1401	155	57
8.	Haryana	563	463	422	41	141
9.	Himachal Pradesh	567	352	252	100	315

1	2	3	4	5	6	7
10.	Jammu and Kashmir	721	550	810	*	*
11.	Jharkhand	518	518	303	215	215
12.	Karnataka	2426	1777	1203	574	1223
13.	Kerala	1053	324	365	*	688
14.	Madhya Pradesh	1491	1043	892	151	599
15.	Maharashtra	2171	1474	1322	152	849
16.	Manipur	102	102	96	6	6
17.	Meghalaya	135	118	117	1	18
18.	Mizoram	66	NA	61	NA	5
19.	Nagaland	147	68	65	3	82
20.	Odisha	1682	476	378	98	1304
21.	Punjab	577	578	482	96	95
22.	Rajasthan	2649	3034	1830	1204	819
23.	Sikkim	26	NA	38	NA	*
24.	Tamil Nadu	1754	1817	1025	792	729
25.	Tripura	102	NA	87	NA	15
26.	Uttarakhand	316	127	157	*	159
27.	Uttar Pradesh	4270	1331	963	368	3307
28.	West Bengal	1256	1185	375	810	881
29.	A and N Islands	26	29	27	2	*
30.	Chandigarh	2	8	16	*	*
31.	D and N Haveli	8	7	10	*	*
32.	Daman and Diu	5	4	4	0	1
33.	Delhi	5	5	3	2	2
34.	Lakshadweep	7	11	11	0	*
35.	Puducherry	27	10	38	*	
ALL INDIA		30383	21390	16679	5724	13897

¹ One per each Primary Health Centre and Community Health Centre Surplus.

+ Sanctioned data for 2011 repeated.

Data for 2013 repeated

Sanctioned data for 2013 used.

* All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

NA Not Available.

Table 32*(j) Nursing staff at PHCs and CHCs*

(As on 31st March, 2014)

Sl. No.	States/UTs	Required ¹ [R]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Shortfall ¹ [R-P]
1	2	3	4	5	6	7
1.	Andhra Pradesh	3753	3966	3459	507	294
2.	Arunachal Pradesh	481	NA	314	NA	167
3.	Assam##	2071	2798	2771	27	*
4.	Bihar#	2373	1662	1736	*	637
5.	Chhattisgarh	1882	2265	1113	1152	769
6.	Goa	49	80	86	*	*
7.	Gujarat+	3258	4058	2705	1353	553
8.	Haryana	1217	1528	1566	*	*
9.	Himachal Pradesh	1035	546	434	112	601
10.	Jammu and Kashmir	1225	1250	902	348	323
11.	Jharkhand	1646	NA	1223	NA	423
12.	Karnataka	3584	3440	3798	*	*
13.	Kerala	2397	3608	3967	*	*
14.	Madhya Pradesh	3495	4189	3629	560	*
15.	Maharashtra	4331	3218	2540	678	1791
16.	Manipur	204	484	433	51	*
17.	Meghalaya	297	413	413	0	*
18.	Mizoram	120	NA	153	NA	*
19.	Nagaland	273	197	338	*	*
20.	Odisha	3944	903	1260	*	2684
21.	Punjab	1477	2189	1907	282	*
22.	Rajasthan	6051	12743	8686	4057	*
23.	Sikkim	38	NA	37	NA	1
24.	Tamil Nadu	4064	8177	6739	1438	*
25.	Tripura	210	NA	623	NA	*
26.	Uttarakhand	670	275	456	*	214
27.	Uttar Pradesh	8908	4497	4412	85	4496

1	2	3	4	5	6	7
28.	West Bengal	3338	8285	7603	682	*
29.	A and N Islands	50	191	185	6	*
30.	Chandigarh	14	47	106	*	*
31.	D and N Haveli	14	8	37	*	*
32.	Daman and Diu	17	14	14	0	3
33.	Delhi	5	5	8	*	*
34.	Lakshadweep	25	52	52	0	*
35.	Puducherry	45	233	233	0	*
ALL INDIA		62561	71321	63938	11338	12956

¹ One per Primary Health Centre and seven per Community Health Centre.

+ Data for 2013 repeated.

Data for 2011 repeated.

Sanctioned data for 2012 used.

* Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States/UTs.

NA Not Available.

Institutional deliveries in the country

2520. SHRIMATI VANDANA CHAVAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the percentage of institutional deliveries in India, State-wise details thereof ;
- (b) the number and ratio of normal versus caesarean deliveries in the country, State-wise details thereof;
- (c) whether Government has taken note of unnecessary caesarean deliveries in private as well as Government hospitals in the country, if so, the details thereof;
- (d) how many Government hospitals have specialised neo-natal facilities, Statewise details thereof; and
- (e) the instances of deaths of the child and/or mother during delivery, State-wise details thereof and major reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The percentage of institutional deliveries in the country as per the UNICEF Coverage Evaluation Survey, 2009 (CES 2009) is 72.9%. State-wise data is given in Statement-I (*See* below).

- (b) The percentage of deliveries conducted by caesarean section between

2006-2012 was 8% for India as per the World Health Statistics Report 2014, State-wise details are not shared in the report.

State-wise percentage of deliveries conducted by caesarean section for the 21 States reported in District Level Household Survey 4 (2012-13), and for the 8 EAG States and Assam reported in the Annual Health Survey, 2012-13 are given in Statement-II (*See below*).

(c) The Government of India has enacted the Clinical Establishments (Registration and Regulation) Act, 2010 with the objective of registration and regulation of health care institutions including those in the private sector.

Under the National Health Mission (NHM), in order to maintain C-section rates within the acceptable standards, the Government of India has taken a number of steps to provide quality maternal care which are:

- Early identification and timely management of complications to prevent unnecessary caesarean section.
- Safe motherhood booklet being given during ANC to the mothers contains information on signs and symptoms of complications and place of referral so that the pregnant women are informed where to go in case of emergency.
- Under JSSK (Janani Shishu Suraksha Karyakram), every pregnant woman is entitled for free referral transport during complications of pregnancy and child birth so that services are accessed timely.
- Similarly, the service providers particularly Auxiliary Nurse Midwives (ANMs) and Staff Nurses (SNs) have been trained for maintaining Partographs which helps timely detection for delayed progress of labour.
- Medical Officers have been trained in Basic Emergency Obstetric Care (BEmOC) training where assisted vaginal delivery is also part of the training.
- The ANMs and SNs have also been empowered and oriented on identification and basic management of various types of complication during pregnancy and child birth.
- As a part of Ante-natal care, pregnant women and their families are educated and counselled through ANMs/ASHAs/other health functionaries on various aspects of safe motherhood, including early identification of danger signs and referral to appropriate health facilities.

All the above steps help in early identification and timely management of complications and avoiding unnecessary caesarean sections.

(d) 575 number of hospitals have Special New-born Care Units (SNCUs), 2020 facilities have Newborn Stabilization Units (NBSUs) while 14,441 have Newborn Care Corners (NBCCs) in place. State-wise details are given in Statement-III (*See below*).

(e) As per the Health Management Information System (HMIS) 2014-15, the data on still births State-wise is given in Statement-IV (*See below*). The five most common causes of still birth as per Lancet Series, 2011 are as under:

- (1) Child-birth complications.
- (2) Maternal infections in pregnancy (Malaria, Syphilis, HIV, Chorioamnionitis).
- (3) Maternal conditions, especially Hypertension, Diabetes, Pre-existing disorders like cardiac ailments, maternal under-nutrition, smoking, obesity, abnormal labor, uterine rupture etc.
- (4) Fetal growth restriction.
- (5) Congenital abnormalities in the fetus.

Survey data released does not capture data on deaths of the mother during delivery.

However, the Registrar General of India through its Sample Registration System (RGI-SRS) gives data on Maternal Mortality Ratio (MMR) of India which as per its latest data is 167 per 100,000 live births in the period 2011-13. State-wise details are given in Statement-V (*See below*). As per the Report of Registrar General of India titled “Maternal Mortality in India: 1997-2003 trends, causes and risk factors”, major medical causes of maternal deaths in the country are Haemorrhage (38%), Sepsis (11%), Hypertensive Disorders (5%), Abortion (8%), Obstructed Labour (5%) and Other Conditions (34%). Besides this, socio-economic determinants like low level of education, poverty, cultural misconceptions and lack of access to services also contribute to Maternal Mortality.

Statement-I

*Percentage of Institutional Delivery as per UNICEF
Coverage Evaluation Survey*

Sl.No.	States/UTs	CES (2009)
	ALL INDIA	72.9
1.	Andhra Pradesh	94.2
2.	Assam	64.4
3.	Bihar	48.3
4.	Chhattisgarh	44.9

Sl.No.	States/UTs	CES (2009)
5.	Gujarat	78.1
6.	Haryana	63.3
7.	Jharkhand	40.1
8.	Karnataka	86.4
9.	Kerala	99.9
10.	Madhya Pradesh	81.0
11.	Maharashtra	81.8
12.	Odisha	75.5
13.	Punjab	60.3
14.	Rajasthan	70.5
15.	Tamil Nadu	98.4
16.	Uttar Pradesh	62.1
17.	West Bengal	69.5
18.	Arunachal Pradesh	69.9
19.	Delhi	83.6
20.	Goa	99.8
21.	Himachal Pradesh	50.3
22.	Jammu and Kashmir	80.9
23.	Manipur	80.0
24.	Meghalaya	63.6
25.	Mizoram	83.0
26.	Nagaland	30.4
27.	Sikkim	68.9
28.	Tripura	82.6
29.	Uttarakhand	53.5
#	Union Territories combined	88.1

Statement-II

*Delivery by Caesarean section at Government and
Private Institutions-DLHS-IV/AHS 2012-13*

Sl.No.	States/UTs	Government Health Institutions Total	Private Health Institutions Total
1	2	3	4
	India	NA	NA
1.	Andhra Pradesh	8.4	24.6
2.	Assam#	10.6	46.8
3.	Bihar#	4.7	21.9
4.	Chhattisgarh#	9.0	37.6
5.	Gujarat	NA	NA
6.	Haryana	2.7	5.8
7.	Jharkhand#	7.7	30.5
8.	Karnataka	7.7	14.5
9.	Kerala	15.0	21.0
10.	Madhya Pradesh#	5.0	31.1
11.	Maharashtra	4.3	11.3
12.	Odisha#	8.7	47.0
13.	Punjab	5.8	12.3
14.	Rajasthan#	6.0	22.6
15.	Tamil Nadu	13.9	17.3
16.	Telangana	10.0	42.3
17.	Uttar Pradesh#	9.2	27.2
18.	West Bengal	9.0	13.0
19.	Arunachal Pradesh	2.7	2.6
20.	Delhi	NA	NA
21.	Goa	9.4	22.5
22.	Himachal Pradesh	7.0	4.1

1	2	3	4
23.	Jammu and Kashmir	NA	NA
24.	Manipur	5.4	6.3
25.	Meghalaya	2.3	2.3
26.	Mizoram	3.8	2.6
27.	Nagaland	1.8	1.7
28.	Sikkim	10.5	6.1
29.	Tripura	12.2	6.0
30.	Uttarakhand#	13.3	33.6
31.	A and N Islands	13.1	3.3
32.	Chandigarh	6.5	7.9
33.	D and N Haveli	NA	NA
34.	Daman and Diu	NA	NA
35.	Lakshadweep	NA	NA
36.	Puducherry	16.3	20.7

Source: DLHS-4 (2012-13) Factsheet.

AHS, Registrar General and Census Commissioner, India.

Statement-III

State-wise New-born Care Facilities as on July, 2015

Sl.No	State/UTs	No. of SNCUs	No. of NBSUs	No. of NBCCs
1.	Bihar	18	22	496
2.	Chhattisgarh	11	16	289
3.	Himachal Pradesh	13	34	116
4.	Jammu and Kashmir	18	76	279
5.	Jharkhand	2	23	203
6.	Madhya Pradesh	55	74	966
7.	Odisha	29	47	682
8.	Rajasthan	36	113	1003
9.	Uttar Pradesh	27	120	1473

Sl.No	State/UTs	No. of SNCUs	No. of NBSUs	No. of NBCCs
10.	Uttarakhand	3	17	140
11.	Arunachal Pradesh	3	4	88
12.	Assam	21	188	784
13.	Manipur	2	0	47
14.	Meghalaya	3	7	139
15.	Mizoram	2	6	66
16.	Nagaland	1	16	120
17.	Sikkim	2	3	29
18.	Tripura	2	3	97
19.	Andhra Pradesh	26	95	810
20.	Goa	3	1	10
21.	Gujarat	33	127	664
22.	Haryana	21	66	318
23.	Karnataka	37	166	1402
24.	Kerala	13	47	95
25.	Maharashtra	36	166	913
26.	Punjab	10	56	208
27.	Telangana	18	61	581
28.	Tamil Nadu	64	156	1764
29.	West Bengal	43	298	561
30.	A and N Islands	1	3	25
31.	Chandigarh	3	0	23
32.	Dadra and Nagar Haveli	1	1	7
33.	Daman and Diu	1	0	6
34.	Delhi	11	8	20
35.	Lakshadweep	1	0	9
36.	Puducherry	5	0	8
TOTAL		575	2020	14441

Statement-IV

*States/UTs-wise Still births rate, Health Management Information System
(HMIS) 2014-15*

Sl.No.	Indicators	Total Number of reported Still Births 2014-15
1	2	3
	All India	317,292
1.	A and N Islands	156
2.	Andhra Pradesh	9,799
3.	Arunachal Pradesh	260
4.	Assam	14,184
5.	Bihar	32,538
6.	Chandigarh	775
7.	Chhattisgarh	11,931
8.	Dadra and Nagar Haveli	66
9.	Daman and Diu	37
10.	Delhi	4,465
11.	Goa	337
12.	Gujarat	17,090
13.	Haryana	7,356
14.	Himachal Pradesh	1,404
15.	Jammu and Kashmir	4,154
16.	Jharkhand	9,580
17.	Karnataka	10,455
18.	Kerala	2,155
19.	Lakshadweep	13
20.	Madhya Pradesh	23,591
21.	Maharashtra	19,624
22.	Manipur	208
23.	Meghalaya	1,868
24.	Mizoram	219
25.	Nagaland	380

1	2	3
26.	Odisha	17,770
27.	Puducherry	751
28.	Punjab	6,254
29.	Rajasthan	26,718
30.	Sikkim	130
31.	Tamil Nadu	8,866
32.	Telangana	7,844
33.	Tripura	951
34.	Uttar Pradesh	49,854
35.	Uttarakhand	2,466
36.	West Bengal	23,015

Provisional Figures for the Period April to March.

Statement-V

Maternal Mortality Ratio: India and State-wise

Major State	MMR (SRS) (2011-13)
India Total*	167
Assam	300
Bihar	208
Jharkhand	208
MP	221
Chhattisgarh	221
Odisha	222
Rajasthan	244
Uttar Pradesh	285
Uttarakhand	285
Andhra Pradesh	92
Karnataka	133
Kerala	61
Tamil Nadu	79
Gujarat	112

Major State	MMR (SRS) (2011-13)
Haryana	127
Maharashtra	68
Punjab	141
West Bengal	113
*Others	126

Source: RGI SRS 2011-13.

*: Includes Others.

Note : Separate data for Telanagana is not given in the report.

Study on child health and under-five mortality rate

2521. SHRI PANKAJ BORA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether Government has received a proposal to conduct a study on child health and mortality rate below five years, if so, Government guidelines thereon, and how the study will help the paediatricians?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): No.

Special quality inspection team to check packaged food products

†2522. SHRI PREM CHAND GUPTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government has banned the sale of Maggi noodles in the country as such food product is not good from the health point of view;

(b) if so, whether Government has constituted/has proposed to constitute a Special Quality Inspection Team to check packaged food products regularly, if so, the details thereof; and

(c) whether Government has advised the States to ensure testing of the quality of food products at State level, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Samples of Nestle's Maggi noodles were found to be containing more than the permissible limit of 2.5 ppm of lead and also violating the labelling requirements about presence of Monosodium Glutamate (MSG). Based on the test results reported from different States, confirming presence of Lead beyond

† Original notice of the question was received in Hindi.

permissible limit, an order dated 05.06.2015 was issued by the Food Safety and Standards Authority of India (FSSAI) directing M/s Nestle India Ltd. to recall its Maggi Noodles.

(b) The implementation and enforcement of the Food Safety and Standards Act, 2006 primarily rests with the State/ UT Governments. Food Safety and Standards Authority of India regularly takes up the issue of enforcement of the provisions of the Act and the rules and regulations thereunder with the State/UT authorities through written communications and interactions during the meetings of the Central Advisory Committee, which also comprises the Commissioners of Food Safety of all States and UTs, for effective implementation of the Act and the rules and regulations thereunder.

Surveillance, monitoring, inspection, random sampling and testing of food products are undertaken by the officials of Food Safety Departments of the respective States/ UTs to ensure compliance with the standards laid down under Food Safety and Standards Act, 2006, Rules and Regulations made thereunder. In cases, where food samples are found to be non-conforming to the prescribed standards/regulations, action is taken as per provisions of the FSS Act, 2006.

(c) FSSAI *vide* its communication dated 25th May, 2015 advised all the States/ UTs to draw samples of the Maggi Noodles (Nestle) and get the same tested from authorised labs. The FSSAI had also advised the Commissioners of Food Safety of all the States/UTs *vide* its communication dated 8th June, 2015 to also draw and test the samples of Noodles and allied products of other brands as well.

Suitable healthcare arrangements for the ailing elderly

2523. SHRI RAM KUMAR KASHYAP: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether healthcare infrastructure for the elderlies is almost non-existent in our country and consequently, the elderlies are sharing healthcare facilities along with general public which is causing extreme hardship to them;

(b) whether elderlies are more prone to diseases and disabilities and by virtue of decline in physical ability and increasing susceptibility to diseases, they need dedicated healthcare facilities;

(c) if so, the steps taken to make suitable healthcare arrangement for the ailing elderlies; and

(d) whether there is any proposal to allow use of physiotherapy services at home to disabled CGHS beneficiaries, if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Keeping in view the recommendations made in the “National Policy on Older Persons” as well as the State’s obligation under the “Maintenance and Welfare of Parents and Senior Citizens Act 2007”, the Ministry of Health and Family Welfare had launched the “National Programme for the Health Care of Elderly” (NPHCE) during the year 2010-11 to address various health related problems of elderly people.

(b) As per 60th Round National Sample Survey (NSS) report, the proportion of ailing persons per 1000 aged person are 283 and 368 in rural and urban areas respectively. Survey report also say that proportion (per1000) of aged persons who can not move and are confined to bed or home is 77 and 84 in rural and urban areas respectively.

(c) The major objectives of the NPHCE are establishment of Department of Geriatric in identified Medical Institutions as Regional Geriatric Centres for different regions of the country and to provide dedicated health facilities in District Hospitals, CHCs, PHCs and Sub Centres levels through State Health Society.

Following facilities are being provided under the Programme:

- Geriatric OPD, 30 bedded Geriatric ward for in-patient care, etc. at Regional Geriatric Centres.
- Geriatric OPD and 10 bedded Geriatric Ward at District Hospitals.
- Bi-weekly Geriatric Clinic at Community Health Centres (CHCs)
- Weekly Geriatric Clinic at Primary Health Centre (PHCs).
- Provision of Aids and Appliances at Sub-centres.

As on now, a total of 104 districts of 24 States/UTs and 8 Regional Geriatric Centres (RGCs) have been covered under the Programme

(d) Under CGHS, there is a provision for domiciliary Physiotherapy in respect of CGHS beneficiaries under the following conditions:

1. **Orthopaedic disorders:** Post Joint Replacement surgery in acute phase upto two weeks post discharge.
2. **Neurological conditions:** for upto six weeks in the following conditions:
 - (i) Post-stroke.
 - (ii) Traumatic brain injury.
 - (iii) Gullian-Barre Syndrome.
 - (iv) Spinal Cord injury with significant disability/deformity.
 - (v) Motor neuron disease.

3. Locomotor disability with a disability of over 80% who are totally dependent on care-giver based on the advice of tow government specialist, by certified care giver (Care giver means Rehabilitation Council of India certified personnel + Physiotherapist and occupational therapist (duly qualified diploma/degree holder).

Opening of trauma centres on the highways

2524. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether to control deaths in road accidents in the country, it is proposed to speed up development of trauma care centres/hospitals on the highways, if so, the details thereof;

(b) whether it would be a Centrally funded project, if so, the details thereof; and

(c) how many persons have died in such road accidents during the last three years, State-wise details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The Ministry of Health and Family Welfare is implementing a scheme named “Capacity Building for developing Trauma Care Facilities in Government Hospitals on National Highways” since 11th Plan with the objective to bring down preventable deaths because of road accidents to 10 % by developing a pan-India trauma care network in which no trauma victims has to be transported for more than 50 kilometres and a designated Trauma Care Facility is available at every 100 km. on the National Highways.

In the Eleventh Five Year Plan 140 locations along the Golden Quadrilateral Corridor North-South and East-West Corridor were identified to develop trauma care facilities to provide immediate treatment for accident victims. Out of these centres, 118 hospitals/Medical Colleges were identified under scheme of Capacity Building for developing Trauma Care Facilities in Government Hospitals on National Highways and 20 hospitals/Medical Colleges under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY). Remaining 2 identified hospital/Medical College were to be developed from their own funding. Government has taken various steps to ensure proper functioning of the identified trauma centres, which include:

- (i) Adoption of 1033 as National Highways Distress Call Number by the Ministry of Road Transport and Highways (MORTH).
- (ii) Establishment of National Programme Management Unit at the Central level.
- (iii) Appointment of State Nodal Officer for the Scheme.

- (iv) Constitution of Core Committee between the Ministry of Health and Family Welfare and MORTH for better coordination and implementation of the Scheme.
- (v) Circulation of model MoU to State/UTs.
- (vi) Preparation and circulation of Operation guidelines.
- (vii) Constitution of Screening Committee to examine the proposal submitted by the States/UTs and to monitor physical and financial progress made under the Scheme.
- (viii) Development of schematic design diagram of trauma care facility in consultation with Central Design Bureau.
- (ix) Consulting of advance trauma life support and basic life support training for doctors and nurses.
- (x) Revision of requirement of human resource and equipment for trauma care facilities by Technical Resource Group.

Continuation of this scheme in the Twelfth Five Year Plan has been approved for establishing additional 85 trauma care facilities. Funding pattern is in the ratio of 70:30 for States other than NE and hilly States. Funding would be in the ratio of 90:10 in respect of North Eastern and Hilly States.

(c) The details of number of accidents, number of persons killed during 2010, 2011, 2012 and 2013 are given in the Statement.

Statement

State/UT-wise total number of road accidents, killed and injured during 2010 to 2013

Sl. No.	States/UTs	2010			2011			2012			2013		
		No. of accidents	No. of persons killed	No. of persons injured	No. of accidents	No. of persons killed	No. of persons injured	No. of accidents	No. of persons killed	No. of persons injured	No. of accidents	No. of persons killed	No. of persons injured
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1.	Andhra Pradesh	44599	15,684	53,928	44165	15,165	55,583	42524	14,964	51,552	43482	14,171	49,970
2.	Arunachal Pradesh	293	148	491	263	126	438	251	138	399	308	143	405
3.	Assam	5828	2,256	7,579	6569	2,342	6,505	6535	2,291	6,709	7211	2,441	6,609
4.	Bihar	11033	5,137	8,106	10673	5,090	7,083	10320	5,056	7,142	10200	5,061	7,086
5.	Chhattisgarh	13664	2,956	13,599	14108	2,983	13,929	13511	3,167	13,517	13657	3,477	12,503
6.	Goa	4572	327	2,709	4560	333	2,318	4312	292	2,086	4294	266	1,928
7.	Gujarat	30114	7,506	32,449	30205	8,008	29,744	27949	7,817	27,650	25391	7,613	24,836
8.	Haryana	11195	4,719	9,905	11128	4,762	9,727	10065	4,446	9,452	10482	4,517	9,143
9.	Himachal Pradesh	3069	1,102	5,325	3099	1,072	5,462	2899	1,109	5,248	2981	1,054	5,081
10.	Jammu and Kashmir	6134	1,045	8,726	6655	1,116	10,012	6709	1,165	9,755	6457	990	8,681
11.	Jharkhand	5521	2,540	4,872	5451	2,572	4,811	5711	2,818	4,974	5569	2,706	4,356
12.	Karnataka	46250	9,590	61,774	44731	8,971	59,591	44448	9,448	58,659	44020	10,046	56,781
13.	Kerala	35082	3,950	41,473	35216	4,145	41,379	36174	4,286	41,915	35215	4,258	40,346

1	2	3	4	5	6	7	8	9	10	11	12	13	14
14.	Madhya Pradesh	50023	8,085	56,897	49406	7,869	55,545	51210	8,175	55,994	51810	8,588	55,731
15.	Maharashtra	71289	12,340	46,985	68438	13,057	45,628	66316	13,333	43,847	63019	13,029	41,972
16.	Manipur	602	154	1,132	692	158	1,118	771	158	1,391	671	165	1,175
17.	Meghalaya	474	163	461	599	212	591	483	219	322	525	130	412
18.	Mizoram	125	82	252	97	81	215	110	77	172	114	97	264
19.	Nagaland	35	40	121	39	25	107	42	56	49	71	30	65
20.	Odisha	9413	3,837	11,399	9398	3,802	11,248	9285	3,701	10,715	9680	4,062	11,254
21.	Punjab	5507	3,542	4,071	6513	4,931	4,081	6341	4,820	3,997	6323	4,588	4,383
22.	Rajasthan	24302	9,163	31,033	23245	9,232	28,666	22969	9,528	28,135	23592	9,724	27,424
23.	Sikkim	186	71	399	406	106	321	158	55	336	244	68	409
24.	Tamil Nadu	64996	15,409	75,445	65873	15,422	74,245	67757	16,175	78,348	66238	15,563	75,681
25.	Tripura	901	231	1,269	834	245	1,030	888	272	1,237	818	226	1,277
26.	Uttarakhand	1493	931	1,656	1508	937	1,712	1472	844	1,577	1297	766	1,503
27.	Uttar Pradesh	28362	15,175	20,113	29285	21,512	15,513	29972	16,149	22,155	30615	16,004	23,024
28.	West Bengal	14888	5,680	15,760	14945	5,664	14,962	12290	5,397	13,773	12414	5,504	13,182
29.	Andaman and Nicobar Islands	285	27	373	234	17	298	236	25	288	200	40	233
30.	Chandigarh	456	138	415	437	136	370	419	136	347	410	117	335

31.	Dadra and Nagar Haveli	96	62	134	103	63	210	85	53	122	91	49	104
32.	Daman and Diu	48	31	43	50	33	37	50	29	39	59	31	75
33.	Delhi	7260	2,153	7,108	7281	2,065	7,226	6937	1,866	6,633	7566	1,820	7,098
34.	Lakshadweep	4	0	5	0	0	0	3	0	3	1	0	2
35.	Puducherry	1529	239	1,505	1480	233	1,689	1181	193	1,129	1451	228	1,565
TOTAL		499628	134,513	527,512	497686	142,485	511,394	490383	138,258	509,667	486476	137,572	494,893

Achievements under immunization programme

2525. SHRI VIJAY GOEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the details of the immunization programme initiated by Government;
- (b) whether any progress has been achieved by Government under the programme;
- (c) the number of children immunized under the programme; and
- (d) whether it has brought down the infant mortality rate and under-five mortality rate, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Universal Immunization Programme has been operational in India since 1985. However, the coverage has increased by only 4% in the last 4 years i.e. at the rate of 1% per year. Government of India launched Mission Indradhanush on 25 December 2014 as a special drive to expand full immunization coverage in India from 65% in 2014 to at least 90% children in the next five years.

(b) and (c) Under Mission Indradhanush, 75.5 lakh children were vaccinated and a total of 19.7 lakh children were fully vaccinated. In addition, a total of 20.8 lakh pregnant women were vaccinated for tetanus toxoid.

(d) Since, the launch of Universal Immunization Programme in 1985, infant mortality rate and under-five mortality rate due to vaccine preventable diseases has decreased considerably.

India's infant mortality rate has declined from 80 per 1,000 live births in 1990 to 40 per 1,000 live births in 2013 and under-five mortality rate from 126 per 1,000 live births in 1990 to 49 per 1,000 live births in 2013. This has been possible due to child health interventions including immunization.

Monitoring committees for ensuring food safety

2526. SHRI K. K. RAGESH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government noticed various hazardous objects such as chemicals, bacteria, viruses, etc. in food items and what are the steps taken to regulate toxic contaminants in various food items including the packaged commodities; and

(b) whether there is any effective mechanism such as monitoring committees at various levels to ensure food safety by implementing the regulations of the Food Safety and Standards Authority of India?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The standards for contaminants, toxins and residues in food products, have been prescribed under the Food Safety and Standards (Contaminants, Toxins and Residues) Regulations, 2011. Cases of violations of such standards are handled by the State authorities concerned and data of chemical, bacteria, virus, etc. noticed in food items is not maintained separately at the central level. The Food Safety and Standards Authority of India (FSSAI) regularly takes up the issue of enforcement of provisions of the Act and the Rules and regulations thereunder with the State/UT authorities through written communications and interactions during the meetings of the Central Advisory Committee (CAC) which also comprises the Commissioners of Food Safety of all States and UTs, for effective implementation of the Act and the rules and regulations thereunder. The enforcement of the Act primarily rests with State/UT Governments. Random sampling and testing of food products is undertaken by the officials of Food Safety Departments of the States/UTs to ensure compliance of the standards laid down under Food Safety and Standards (FSS) Act, 2006, Rules and Regulations made thereunder. In cases, where the food samples are found to be non-conforming to the prescribed standards/regulations, action is taken as per provisions of the FSS Act, 2006.

Regularisation of services of employees of IDVC project, Chennai

2527. SHRI A. V. SWAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has regularized the services of some employees belonging to the Integrated Disease Vector Control (IDVC) project at Chennai and nine other such Field Units on the basis of Court order;

(b) whether the similarly placed employees posted at IDVC Project, Rourkela Field Unit have requested for similar benefits of regularisation of their services with reference to Order passed by Hon'ble Supreme Court; and

(c) what is the time-frame within which the similarly placed IDVC employees at Rourkela, Odisha would be regularised to meet the ends of justice?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) Yes, services of some employees of IDVC Project at Chennai were regularized on the order of Hon'ble Court. For other units, instructions have been issued to ICMR to implement the court order.

(b) Yes, representation received from employees posted at IDVC Project Rourkela has been sent to ICMR.

(c) No, such proposal is under consideration in Department of Health Research.

Child immunisation in North eastern region

2528. SHRI DEREK O'BRIEN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the initiatives taken by Government to ensure that the North Eastern States come at par with the national average in achieving full child immunisation;

(b) whether Government has taken steps to increase the number of Primary Health Centres, Sub-Centres and Community Health Centres in the region, if so, the details thereof, State-wise; and

(c) whether Government has taken measures to improve facilities available in these centres?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The following initiatives have been taken by Government of India to ensure that the North Eastern States come at par with the national average on achieving full child immunisation:

Under NHM, mobility support is provided to strengthen supportive supervision, alternate vaccine delivery from the last cold chain point at PHC/CHC to session site and incentives are provided to ASHA for mobilizing beneficiaries to the session site. Also incentives are provided to ASHA for full immunization of a child.

Government of India has conducted four rounds of "Mission Indradhanush" in 33 high focus districts of North East States, targeting areas with partial immunization and no immunization. During these rounds, 5.6 lakh children and 0.53 lakh pregnant women were vaccinated in North East states.

(b) and (c) Government of India provides financial support to the States/UTs for strengthening/upgradation of healthcare infrastructure based on the proposals submitted by the states in their Programme Implementation Plans (PIP). The approvals for healthcare facilities are done in accordance with the population norms and case load in the health facilities. The population norms for setting up of public health facilities in the hilly/tribal and difficult areas are relaxed and are as under :

Health Facility	Plain Areas	Tribal/Hilly areas
Sub Centre	1 per 5000	1 per 3000
Primary Health Centre	1 per 30000	1 per 20,000
Community Health Centre	1 per 1,20,000	1 per 80,000

The status of new construction and up gradation works sanctioned under NRHM to the North Eastern States as on 31.3.2015 is given in the Statement (*See below*).

Further, the Forward Linkage Scheme supports strengthening and up-gradation of Secondary and Tertiary level health infrastructure in respect of North East states. The scheme was introduced in the 11th Plan (FY 2007-2012). It is funded from likely savings from other Health Schemes.

Statement

New construction of health centres sanctioned as on 31.3.2015

Sl.No.	States	CHC	PHC	Other than SHC	SHC
1.	Assam	116	0	215	2876
2.	Arunachal Pradesh	1	3	0	31
3.	Manipur	0	21	0	227
4.	Meghalaya	0	5	0	126
5	Mizoram	0	0	0	20
6.	Nagaland	9	19	0	148
7.	Sikkim	2	2	0	13
8.	Tripura	0	25	0	406

Renovation/Upgradation of health centres sanctioned as on 31.3.2015

Sl.No.	States	CHC	PHC	Other than SHC	SHC
1.	Assam	104	0	465	1471
2.	Arunachal Pradesh	10	3	0	4
3.	Manipur	8	68	0	234
4.	Meghalaya	84	220	0	271
5	Mizoram	5	0	0	120
6.	Nagaland	0	0	0	0
7.	Sikkim	0	37	0	111
8.	Tripura	9	77	0	111

CHC: Community Health Centre, PHC: Primary Health Centre, SHC: Sub-Health Centre

Increase in incidents of cancer in the country

2529. SHRI DEVENDER GOUD T.: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the reasons that incidents of cancer are going up as per the latest 2013 figures;

(b) whether it is a fact that 50 per cent of world cancer cases are reported from India;

(c) whether it is also a fact that death rate due to cancer is coming down, if so, the reasons therefor; and

(d) whether it is also a fact that women are the vulnerable group in cancer incidents in the country, if so, how the Ministry is planning to address this?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) The increase in the number of cancer cases in the country may be attributed to larger number of ageing population, unhealthy life styles, use of tobacco and tobacco products, unhealthy diet, better diagnostic facilities etc.

As reported by ICMR, in 2012 estimated number of cancer cases in the world by GLOBOCAN 2012, International Agency for Research on Cancer are 14067894 while for the same year estimated number of cancer cases in India by ICMR are 1057205 which works out to be 7.5% of the total cases in the world.

As per data provided by National Cancer Registry Programme of Indian Council of Medical Research (ICMR), the estimated mortality due to Cancer in the country for the last five years is as under:

	2011	2012	2013	2014	2015
Mortality	452541	465169	478185	491598	505428

Crude Mortality Rate per lakh population as per Mumbai Population Based Cancer Registry for males and females during 2001 to 2011 is as below:

Year	Crude Mortality Rate	
	Males	Females
2001-2003	34.4	37.1
2004-2005	36.4	40.1
2006-2008	38.3	43.2
2009-2011	33.1	38.0

(d) As informed by ICMR, based on National Cancer Registry Programme data, while 1 in 14 women in India (0-64 years of age) have a chance of developing cancer, the corresponding figure for men is 1 in 16.

Central Government supplements the efforts of the State Government for improving healthcare including prevention, diagnosis and treatment of Cancer. At present, the objectives of National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) being implemented under National Health Mission (NHM) for interventions upto the district level include awareness generation for Cancer prevention, screening, early detection and referral to an appropriate level institution for treatment. The focus is on three areas namely breast, cervical and oral Cancer. Breast and Cervical Cancer are women centric and are leading cancer types among women. Screening guidelines have been provided to State Governments for implementation. Suspected cases are to be referred for confirmatory diagnosis by various tests including histo-pathological biopsy.

Government of India has approved “Tertiary Care for Cancer” Scheme under National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) in the year 2013-14. Under the said scheme, Government of India will assist to establish/set up 20 State Cancer Institute’s (SCI) and 50 Tertiary Care Cancer Centres (TCCC) in different parts of the country. The maximum assistance inclusive of State share for SCI is upto ₹ 120 crore and for TCCC is upto ₹ 45 crore subject to eligibility as per scheme guidelines and availability of funds.

The treatment for cancer in Government Hospitals is either free or subsidized. In addition to Cancer diagnosis and treatment by the State Governments Health Institutes, the Central Government Institutions such as All India Institute of Medical Sciences, Safdurjung Hospital, Dr Ram Manohar Lohia Hospital, PGIMER Chandigarh, JIPMER Puducherry, Chittaranjan National Cancer Institute, Kolkata, etc. provide facilities for diagnosis and treatment of Cancer.

Oncology in its various aspects has focus in case of new AIIMS and many upgraded institutions under Pradhan Mantri Swasthya Suraksha Yojna (PMSSY). Setting up of National Cancer Institute at Jhajjar (Haryana) and 2nd campus of Chittranjan National Cancer Institute, Kolkata has also been approved.

Besides NPCDCS, support under NHM is being given under health system strengthening component to states to undertake screening of common cancers such of oral, breast and cervix. Sub-centres that are strengthened as Health and Wellness Centres are also required to undertake preventive screening of common cancers.

Destruction of banned instant noodles

2530. SHRI SUKHENDU SEKHAR ROY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Food Safety and Standards Authority of India recently directed Nestle to recall all nine variants of Maggi instant noodles from market, if so, the details thereof;

(b) if so, whether Nestle recalled all such Maggi packets and destroyed those and the details thereof;

(c) whether destruction of the banned Maggi packets has been carried out under direct supervision of Government, if so, the details thereof; and

(d) if not destroyed under Government supervision, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Consequent upon the presence of Lead and MSG being found in Maggi Noodles in Uttar Pradesh, the Food Safety and Standards Authority of India (FSSAI) advised all the States/UTs to draw samples of the said food product and get the same tested from authorized labs. Based on the test results reported from different states indicating presence of Lead beyond the permissible limits, an order was issued on 5th June, 2015 by FSSAI directing M/s Nestle India Ltd to recall its Maggi Noodles. A notice was also issued requiring the Company to show cause as to why the Product Approvals granted in respect of the 09 variants of Maggi Noodles be not withdrawn. M/s Nestle India Ltd decided to withdraw all the 09 variants of its Maggi Noodles from the market as announced by the Company in a Press Conference held on 5th June, 2015.

(b) As on 29th of July, 2015, the status of recall of Maggi Noodles, as submitted by M/s Nestle India Ltd., is as under:

Sl.No.	Category	Stocks in Tonnes
1.	Market to Distributors	13177
2.	Modern Trade (MT) +CSD to Distribution Centre	1972
3.	Distributor to Distribution Centres	20451
4.	High Temperature Thermal destruction in cement kilns (28.07.2015)	31861

The FSSAI had not directed the Company to destroy the recalled product.

(c) No.

(d) While informing the Commissioners of Food Safety of the States where the Company had planned destruction of the Maggi Noodles (05 sites in 5 States), the FSSAI had advised the Commissioners of Food Safety of these States/UTs to depute their representatives to oversee/supervise the process of destruction at their discretion so as to ascertain and validate the claims made by the Food Business Operator in this behalf.

Assistance to beneficiaries registered under JSY

2531. DR. T. SUBBARAMI REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of beneficiaries registered under Janani Suraksha Yojana (JSY) in the country;

(b) whether Government is providing assistance such as Direct Benefits Transfer and payment through core banking solution to the beneficiaries and the amount disbursed in the last three years in each category; and

(c) the details of financial and technical support given to States for implementation of JSY?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per the records, the total number of JSY beneficiaries since (inception) 2005 is 8,37,19,668 in the country.

(b) Yes. Under the Janani Suraksha Yojana (JSY) DBT mode of payment was rolled out in a phased manner *i.e.* in 43 districts with effect from 01.04.2013, in 78 more districts with effect from 01.07.2013 and extended to all the districts across the country with effect from 1.04.2015. DBT payment under JSY is made through Public Finance Management System (PFMS) directly into the Aadhaar linked bank account of the beneficiary or through core banking solution. Details of amount disbursed through DBT mode *i.e.* Aadhaar linked bank account or through core banking solutions as per PFMS generated report since the launch of the initiative *i.e.* on 1.4.2013 is as follows:

JSY payment through PFMS (in rupees)

Aadhaar based payments	Payment through Core Banking Solution	Total
5,53,35,874	171,84,65,628	177,38,01,502

(c) An amount of ₹ 5868.45 crore has been provided as financial support to the States/UTs during the last three years namely, 2012-13, 2013-14 and 2014-15 for implementation of JSY program throughout the country. The scheme provides

for financial incentive to the beneficiary for institutional delivery. However, it also provides incentive for home delivery only to BPL category mothers. The scheme also provides for financial incentive to ASHA (Accredited Social Health Activists) for motivating JSY beneficiary for institutional delivery. In view of this, there is no requirement of technical support for implementation of JSY scheme.

New guidelines for regulating drug quality

2532. SHRI PAUL MANOJ PANDIAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government is now set to draft a new set of guidelines to regulate drug quality in India, if so, the details thereof; and

(b) whether it is also a fact that the Health Ministry and the Central Drug Standards Control Organisation jointly plan to study the guidelines of global health regulators, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Ministry of Health and Family Welfare has carried out extensive consultations with stakeholders to generate suggestions for amending the Drugs and Cosmetics Act, 1940.

(b) While there is no such plan, guidelines of other global regulators are a good source of information for updating our regulatory framework.

Super speciality blocks in medical colleges in Rajasthan

†2533. SHRI NARAYAN LAL PANCHARIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether proposals have been sent to Government by the State Government of Rajasthan to set up super speciality blocks in the medical colleges situated at Jaipur, Jodhpur and Ajmer, if so, by when approvals will be accorded to the said proposals; and

(b) whether it is a fact that the second installment of funds in respect of the construction of the medical colleges at Bharatpur, Churu, Barmer, Pali, Bhilwara and Dungarpur in Rajasthan is to be issued by the Central Government, if so, by when the second instalment will be issued and the reasons for delay in issuance of second installment of funds?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Yes. The proposal of upgradation of Government Medical

† Original notice of the question was received in Hindi.

Colleges at Jaipur, Jodhpur and Ajmer has been received and the same may be considered in a subsequent Phase of PMSSY.

(b) Seven districts viz. Bharatpur, Dungarpur, Barmer, Alwar, Churu, Bhilwara and Pali are identified under the scheme for “Establishment of New Medical Colleges attached with district/referral hospital”. Proposal for Bharatpur, Dungarpur, Barmer, Churu, Bhilwara and Pali has been approved by the Empowered Committee and fund of ₹ 41.00 crore has been released to the State under the scheme on 31.3.2015. The subsequent instalments shall be released based on availability of funds in financial year 2015-16 and utilization of the previously allotted funds.

Restraining of rise in number of quacks

†2534. SHRI LAL SINH VADODIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the number of quacks in different parts of the country is continuously on the rise, if so, whether Government is contemplating to restrain it; and

(b) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) No data on quacks is maintained. The Indian Medical Council Act, 1956, prohibits a person other than a medical practitioner enrolled on a State Medical Register to practice medicine in the State. Punishment of imprisonment for a term which may extend to one year or with a fine which may extend to ₹ 1,000/- or both is also prescribed.

Strategy to meet demand of doctors by 2020

2535. SHRI DILIP KUMAR TIRKEY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that India faces an acute shortage of doctors and lags far behind from the WHO standards of availability of doctors;

(b) whether it is also a fact that the backward, tribal dominated and rural areas are the worst sufferers on account of shortage of doctors, if so, the details thereof, State-wise; and

(c) what is the long term strategy and planning of Government to meet the expected demand of about four lakh doctors by 2020?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) As per MCI records, there are 9.29 lakh doctors registered in the Indian Medical Register as on 31.03.2014. Assuming 80% availability, it is estimated that around 7.4 lakh doctors may be actually available for active service. It gives a doctor-population ratio of 1:1674 against the WHO norm of 1:1000. Besides, there are an estimated 6.77 lakh AUH doctors in the country. If the Allopathic and AUH streams are considered together, it gives a doctor availability ratio of 1:855.

(c) The Government has taken the following steps in order to enhance the availability of doctors in the country:

- I. The ratio of teachers to students has been revised from 1:1 to 1:2 for all MD/MS disciplines and 1:1 to 1:3 in subjects of Anaesthesiology, Forensic Medicine, Radiotherapy, Medical Oncology and Surgical Oncology.
- II. DNB qualification has been recognized for appointment as faculty to take care of shortage of faculty.
- III. Enhancement of maximum intake capacity at MBBS level from 150 to 250.
- IV. Enhancement of age limit for appointment/extension/re-employment against posts of teachers/dean/principal/director in medical colleges from 65-70 years.
- V. Relaxation in the norms for setting up of a medical college in terms of requirement for land, faculty, staff, bed/bed strength and other infrastructure.
- VI. Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats with fund sharing between the Central and State Government in the ratio of 75:25.
- VII. Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country with fund sharing between the Central Government and States in the ratio of 90:10 for NE/special category states and 75:25 for other states.
- VIII. Strengthening/ upgradation of existing State Government/Central Government Medical Colleges to increase MBBS seats with fund sharing between the Central Government and States in the ratio of 90:10 for NE/special category states and 70:30 for other states with the upper ceiling of the cost per MBBS pegged at ₹ 1.20 crore.

Instances of contravention of rules for approving new drugs

2536. SHRI PARIMAL NATHWANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the provisions/guidelines laid down by Government with regard to approval of new drugs and grant of licences for import, manufacture and sale of drugs in the country;

(b) the mechanism put in place by Government to ensure the compliance of these provisions/guidelines in the country;

(c) whether instances of approval to certain new drugs by the Central Drugs Standard Control Organisation/Drugs Controller General of India in contravention of the prescribed rules have been reported in the country; and

(d) if so, the corrective steps taken/ proposed to be taken by Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The Drugs and Cosmetics Act, 1940 and Rules made thereunder contain provisions for regulation of manufacture, sale, distribution and import of drugs in the country. The import of drugs into the country is regulated by the Central Drugs Standard Control Organization (CDSCO) at the central level while manufacture, sale and distribution of drugs is regulated by the State Licensing Authorities, in terms of the provisions of the said Rules. Rule 122A, 122B, 122D, 122E and Schedule Y of the aforesaid Act and Rules specifically contain provisions for regulation of manufacture/import of new drugs in the country. For issuing licenses for manufacture, sale and distribution of new drugs, State Licensing Authorities require prior permission from the CDSCO.

(c) No.

(d) Does not arise.

Shortage of doctors and equipments at AIIMS, Delhi

†2537. SHRI RAM NATH THAKUR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is shortage of doctors and test equipments in comparison to the number of patients in AIIMS, Delhi if so, the details thereof;

(b) whether the pressure of patients on AIIMS has come down after AIIMS in Bihar came into operation, if not, the reasons therefor; and

(c) by when the doctors as well as the test equipments are likely to be provided as per the ratio of number of patients in AIIMS, Delhi and the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) There is no shortage of faculty/doctors, diagnostic/therapeutic machines and equipments in All India Institute of Medical Sciences (AIIMS), New Delhi. Besides faculty members, resident doctors of the Institute are also engaged in patient care.

(b) After opening of AIIMS in Bihar, there is no perceptible change in the pressure of patients in AIIMS, New Delhi.

(c) Recruitment of faculty/doctors and purchase of equipment is a continuous and ongoing process.

Setting up of Research and Telemedicine Centre at Keylong, HP

2538. SHRIMATI VIPLOVE THAKUR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Indian Council of Medical Research (ICMR) proposes to set up its Research and Telemedicine Centre at Keylong in Lahaul-Spiti in Himachal Pradesh, if so, the aim and objectives of the Centre;

(b) the time by when the Research and Telemedicine Centre would be set up; and

(c) the funds allocated by Government for setting up the Research and Telemedicine Centre at Keylong?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) Yes, Indian Council of Medical Research (ICMR) proposes to establish a Field Station of National Institute for Research in Tribal Health (NIRTH), Jabalpur at Keylong in tribal dominated Lahaul and Spiti areas of Himachal Pradesh.

The aims and objectives of this centre are as follows:

1. To assess the burden of disease and identify the leading causes of morbidity, mortality and disability among the tribal population
2. To facilitate use of this information for planning and implementing district health services to promote access to proper medical care
3. To act as nodal centre for implementing telemedicine services under the Government of India project
4. To ascertain the major social, cultural and environmental determinants of health that drive ill-health and the seasonal variations in health problems

5. To establish linkage with a leading health facilities in the State to ensure access to guidance and advice in diagnosis and treatment especially relating to critical medical emergency cases
6. To document the experiences and findings emanating from the field station in Lahaul and Spiti, for possible use in other States/districts with similar geo-climatic conditions.

(b) There is no set time frame, however, efforts are underway to initiate the work as early as possible subject to availability of funds and resources.

(c) The tentative budget allocated by ICMR for first three year to set up this centre is around ₹ 3.92 crores.

Creation of Indian Medical Services

2539. SHRI MANSUKH L. MANDAVIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to Starred Question 116 given in the Rajya Sabha on 15 July, 2014 and state:

(a) the updated status of action taken by the Ministry on the two representations referred therein on the subject;

(b) whether the Ministry has sought comments of the State Governments and other stakeholders like MCI and IMA, etc. on the issue;

(c) if so, the details thereof and if not, the reasons therefor; and

(d) whether Government would take initiative and call upon State Governments to explore the possibility of creating a separate cadre—Indian Medical Services, so as to facilitate availability of quality medical personnel in the States, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) On the basis of the advice given by the Ministry of Law and Justice and Department of personnel and Training, this Ministry has referred the matter to a Committee constituted for Cadre Review of the Central Health Service (CHS) to examine, among others, the need for creation of All India Medical Service. Pending report of the Committee referred to above, State Governments and other stakeholders have not been consulted in the matter. The Consultation with the State Governments is a pre-requisite for consideration of the matter as 'Health' is a State subject.

Regulating of prices charged by hospitals on medical devices

2540. SHRI RAM KUMAR KASHYAP: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that medical devices like stents, pacemakers, valves, artificial joints and titanium plates for fractures etc. are not available in the open market and as such patients cannot check prices of these items;

(b) whether it is a fact that hospitals are looting patients by forcing them to buy these medical devices from hospitals and pay double or even triple the price for medical devices at hospitals; and

(c) if so, whether there is any proposal to constitute a regulatory authority to regulate and prescribe ceiling rates that hospitals can charge for medical procedures and devices?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Though devices such as stents, pacemakers, valves, artificial joints and titanium plates are generally not available in the open market, the Maximum Retail price (MRP) is required to be printed thereon.

(b) The Department of Pharmaceuticals has informed that the National Pharmaceutical Pricing Authority under the Department of Pharmaceuticals has, during a study conducted on pricing of stents in the country, observed that bulk of medical devices such as stents, catheters and arthopaedic implants, etc., consumed in the country, are imported and the difference between the landed cost and the MRP thereof is very high. These medical devices fall under non-scheduled category of Drugs Price Control Order (DPCO), 2013 and as such, no ceiling price has been fixed for these devices. However, DPCO, 2013 provides for monitoring the prices of these devices and also ensure that no manufacturer / importer / distributor is allowed to increase the MRP more than ten percent of MRP during preceding twelve months.

(c) There is no such proposal.

Fees charged by banks on issue of credit cards

2541. SHRI BALWINDER SINGH BHUNDER:

SHRI SALIM ANSARI:

Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that RBI have issued guidelines I circular from time to time to scheduled commercial banks stating therein that high fees being charged for issue of credit cards is not justifiable and permissible;

(b) if so, the details of guidelines issued to banks including private sector banks in this regard;

(c) whether it is also a fact that a Private Bank is charging ₹ 2 lakhs for their "Credit Cards" from customer without any benefits and by flouting RBI's norms; and

(d) if so, the details thereof and action taken by RBI against the Bank for charging exorbitant ₹ 2 lakh on false promises?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA) : (a) and (b) Reserve Bank of India (RBI) has issued guidelines *vide* its letter dated July 1, 2015 on Master Circular on Credit Card, Debit Card and Rupee Denominated Co-branded Pre-paid Card Operations of Banks and Credit Card issuing Non Banking Finance Companies (NBFCs) to all Scheduled Commercial Banks (Excluding Regional Rural Banks (RRBs) and Credit Card Issuing NBFCs.

As per the guidelines, each bank must have a well documented policy and a Fair Practices Code for credit card operations, which should incorporate the various guidelines issued by RBI from time to time. Banks which have adopted the "Code of Bank's Commitment to Customers" (Code) will also have to incorporate the principles enunciated therein, as amended from time to time. The Fair Practices Code should be available on the website of the Bank.

Further, banks are advised to be guided by the instructions on interest rate on advances issued by RBI and as amended from time to time. Banks should also prescribe' a ceiling rate of interest, including processing and other charges. In case banks charge interest rates which vary based on the payment I default history of the cardholder, the fact that higher interest rates are being charged to the cardholder should be made known to the cardholder. The banks should publicise through their website and other means, the interest rates charged to various categories of customers.

(c) and (d) RBI has informed that the bank was issuing Indulge Credit Card which is a high end credit card issued only by invitation to a very select few customers mostly of High Net-worth Individual (HNI) status.

The selection of the prospective invitee for the Indulge Credit Card is done on basis the overall relationship with the bank and existing spend on their credit cards and vintage that they have been with the bank as a customer. The card comes with higher credit limits and a host of lifestyle benefits suited to the segment of customers. The customer gets equivalent value of the fees in vouchers and these vouchers can be used for redemption towards merchandise I services from select brands which have been selected basis the lifestyle of the customer.

The card comes at 2 fee points : (1) A fee point of 1 lac with 10000 as annual fees every year. 2) The customer also has a choice of another fee point of 2 lacs which does not have annual fee component. Both these fee points come with equivalent amount of vouchers which are internationally reputed brands across the spectrum of travel and shopping.

RBI has informed that the fees are in line with the value propositions and vouchers provided as a part of the product and the bank ensures that all due processes as required and conforming to the RBI guidelines are followed in issuing of the Indulge Credit Card.

Implementation of NPCB in Maharashtra

2542. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is implementing National Programme for Control of Blindness (NPCB) in Maharashtra and rest of country, if so, the details thereof; and

(b) whether Government provides spectacles free of cost under NPCB to the poor patients who can not afford it, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) National Programme for Control of Blindness (NPCB) is under implemented in all States/UTs of the Country including Maharashtra with the goal of reducing the prevalence of blindness to 0.3% by the year 2020.

The Programme is being implemented in a decentralized manner through the State Health Societies and District Health Societies in the States/UTs. The major activities carried through the central assistance provided to States/UTs under the programme are as under:

- (i) Free cataract operations at District/Sub-District Hospitals and identified Non-Governmental Eye Hospitals.
- (ii) Management/treatment of other eye diseases (diabetic retinopathy, glaucoma, corneal transplantation, vitreoretinal surgery, childhood blindness etc.,)
- (iii) Distribution of free spectacles to school children suffering from refractive errors.
- (iv) Collection of donated eyes for keratoplasty.
- (v) Distribution of free spectacles for near work (presbyopia) to old persons.
- (vi) Training of ophthalmic manpower in States/UTs.

- (vii) Strengthening of infrastructure at District/Sub-District hospitals, PHCs (Vision Centres) Eye Banks and selected NGO eye hospitals etc.

As a general policy, preference is given to BPL category patients for distribution of free spectacles.

Registration numbers of print periodicals

2543. SHRI C. P. NARAYANAN: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether the Registrar of News papers for India (RNI) allots registration numbers to print periodicals;

(b) if so, the details such as title, periodicity of publication, name and address of publisher and printer, name and address of editor and cost of single copy of publications with Registration Numbers 4596/1957, 7090/1963, 7093/1963, 7092/1963, 59223/1994, 59222/1994, 23966/1972, 16312/1964, 63800/1996, 23885/1972, Deleng/2002/6718, 28743/1976, 4512/1957 and 59284/1994 publication-wise as on date; and

(c) whether above publishers have published form IV, annually, if so, the details thereof and if not, the action taken in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) and (b) Yes, the office of the Registrar of Newspapers for India (RNI) registers titles for newspapers and other periodicals under the provisions of Press and Registration of Books Act, 1867.

The details regarding title, periodicity of publication, name and address of publisher and printer, name and address of editor and cost of single copy of publications in respect of registration numbers specified in the question are given in the Statement (*See below*).

(c) Form IV is to be published in the first issue every year after the last day of February as per the Registration of Newspapers (Central) Rules, 1956. RNI neither maintains the information of Form IV nor preserves the copies of Form IV published in the publication.

Statement

Details regarding title, periodicity of publication, name and address of publisher and printer, name and address of editor and cost of publications in respect of registration numbers

Sl. No.	Name of Title	Registration no.	Periodicity	Name and address of publisher	Name and address of printer	Name and address of editor	Cost of publication
1	2	3	4	5	6	7	8
1.	Journal of Scientific and Industrial Research	4596/1957	Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Dr. P. D. Tyagi, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 225/-
2.	Indian Journal of Chemistry	7090/1963	Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Geeta Mahadevan, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 285/-
3.	Indian Journal of Experimental Biology	7093/1963	Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Rajiv Mathur, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 285/-
4	Indian Journal of Pure and Applied Physics	7092/1963	Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Poonam Bhatt, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 195/-

5.	Indian Journal of Chemical Techno- logy	59223/1994	Bi-Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Dr. K.K. Kakkar, Publication and Information Directorate, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 200/-
6.	Indian Journal of Engineering and Materials Sciences	59222/1994	Bi-Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	R.S. Beniwal, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 200/-
7.	Indian Journal of Marine Sciences	23966/1972	Bi-Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Dr. J.S. Pillai, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 340/-
8.	Indian Journal of Bio Chemistry and Biophysics	16312/1964	Quarterly	A. Krishnamurthi, Publication and Infomation Directorate Hill Side Road, New Delhi-110012	A. Krishnamurthi, Publication and Infomation Directorate Hill Side Road, New Delhi-110012	A. Krishnamurthi, Publication and Infomation Directorate Hill Side Road, New Delhi-110012	₹ 12/-
9.	Journal of Intellec Tual Property Rights	63800/1996	Bi-Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Madhu Sahani, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 380/-
1	2	3	4	5	6	7	8

10.	Indian Journal of Radio and Space Physics	23885/1972	Bi-Monthly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Kamlesh Arora, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 200/-
11.	Indian Journal of Biotechnology	Deleng/2002/06718	Quarterly	Deeksh Bist, NISCOM, Dr. K.S. Krishnan Marg, New Delhi	Deeksh Bist, NISCOM, Dr. K.S. Krishnan Marg, New Delhi	Dr. K.Y. Kavathekar, NISCOM, Dr. K.S. Krishnan Marg, New Delhi	₹ 240/-
12.	Indian Journal of Fibre and Textile Research	28743/1976	Quarterly	Y. R. Chadha, Publication and Information Directorate, C.S.I.R. Hill Side Road, New Delhi-110012	Y. R. Chadha, Publication and Information Directorate, C.S.I.R. Hill Side Road, New Delhi-110012	Y. R. Chadha, Publication and Information Directorate, C.S.I.R. Hill Side Road, New Delhi-110012	₹ 12/-
13.	CSIR News	4512/1957	Fortnightly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Dr. B.C. Kashyap, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 300/-
14.	Bhartiya Vaigyanik Evam Audyogik Anusandhan Patrika	59284/1994	Half Yearly	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Deeksha Bist, NISCAIR, Dr. K.S. Krishnan Marg, New Delhi-110012	Pradeep Sharma, Dr. K.S. Krishnan Marg, New Delhi-110012	₹ 200/-

Controlling agency for DTH services in the country

2544. SHRI BHUPINDER SINGH: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

- (a) how many agencies like Tata-Sky are there in the country;
- (b) whether the Ministry monitors such agencies;
- (c) if not, who controls and monitors their services and who determines the price charged by them; and
- (d) the number of existing Tata-Sky connections in the country, State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) to (c) The Ministry has granted license to six private companies, namely, (i) M/s Dish TV India Limited (ii) M/s Tata Sky Limited (iii) M/s Sun Direct TV Pvt. Limited (iv) M/s Reliance BIG TV Limited (v) M/s Bharati Telemedia Limited and (vi) M/s Videocon d2h Limited to provide Direct to Home (DTH) services in India under the DTH Guidelines issued on 15.3.2001, as amended from time to time. All private DTH operators are required to comply with the provisions of these guidelines. DTH operators are required to enter into an agreement with the Ministry for providing DTH services. In addition, Doordarshan as Public Broadcaster is also providing free to air DTH services in the country. Tariff and Pricing of TV channels are governed by tariff orders of Telecom Regulatory Authority of India (TRAI) issued from time to time.

(d) Government does not maintain data relating to number of connections of the DTH operators.

Non-operational private satellite TV channels

2545. SHRIMATI VIPLOVE THAKUR: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

- (a) the number of private satellite TV channels which have been granted permission in the country, so far;
- (b) the details of spectrum being used by each of these television channels to uplink or downlink their respective signals, channel-wise; and
- (c) whether it is a fact that a number of channels have not started broadcasting despite obtaining necessary permission, if so, the reasons therefor and the action taken by Government against them?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) As on date 822 private satellite TV Channels have been permitted by Ministry of Information and Broadcasting under the Uplinking / Downlinking Guidelines.

(b) As reported by Department of Telecommunications, the typical value of bandwidth/data rate required to transmit (uplink/downlink) TV Channels are as under:

Transmission	Mode	Data Rate
MPEG-2	Standard Definition	3 Mbps (Typical)
MPEG-2	High Definition	16 Mbps (Typical)
MPEG-4	Standard Definition	1.5 Mbps (Typical)
MPEG-4	High Definition	8 Mbps (Typical)

(c) In accordance with the provisions of Clause 2.4.2, 2.5.1 and 3.5.1 of the Uplinking Guidelines, the Permitted Satellite TV channels, after obtaining permission from Ministry of Information and Broadcasting, have to operationalize within one year. In order to ensure operationalization, a Performance Bank Guarantee of certain amount has to be deposited by the permission holding company, which is forfeited if the company fails to operationalise by the due date.

Contracts for endorsing DD Kisan Channel

†2546. MIR MOHAMMAD FAYAZ:

SHRI NAZIR AHMED LAWAY:

Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether Government has entered into any contracts with some artists/ persons for endorsing the DD Kisan Channel, if so, the details thereof, name-wise; and

(b) the details of the period of contract and the honorarium fixed therefor?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) and (b) Prasara Bharati has informed that Doordarshan's Kisan Channel has not entered into any contract with any artist(s)/ person(s) for celebrity endorsement of the channel.

† Original notice of the question was received in Hindi.

Launching of DD educational channel

2547. SHRIMATI SAROJINI HEMBRAM : Will the Minister of INFORMATION AND BROADCASTING be pleased to state whether Government is planning to launch any DD channel especially for the purpose of education for the children of the country like the Kisan Channel of DD, and if so, the details thereof, and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): No, Sir. There is no such proposal as of now. However, Doordarshan telecasts informative, educative and entertaining programmes for children on its National platform and Regional Kendras in respective regional channels regularly.

Honoring of eminent musicians by Prasar Bharati

2548. SHRI C.P. NARAYANAN: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether Government is aware that Prasar Bharati has prepared a list of eminent musicians to be conferred National Artist status based on complaints that an earlier list prepared by it did not include some eminent musicians;

(b) if so, whether Prasar Bharati has fixed the date on which persons in the new list are to be honoured; and

(c) if not, whether Ministry will intervene to expedite it so that more artists in the list do not expire before they are honoured with the award?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) Yes, Sir. Prasar Bharati has prepared a list to bestow the honour of 'National Artistes' to 52 eminent artistes in the field of music. Prasar Bharati has informed that no complaint has been received in this matter.

(b) No Sir.

(c) The Ministry of Information and Broadcasting has already taken steps to facilitate Prasar Bharati in organizing the event.

Security clearance for private TV channels

2549. SHRI D. KUPENDRA REDDY: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether it is a fact that a number of private TV channels in the country do not possess security clearance from the Ministry of Home Affairs; and

(b) if so, the details thereof and whether the Ministry of Information and Broadcasting is granting licence renewing licences of these TV channels despite Ministry of Home Affairs denial of security clearance to these TV channels, if so, the details thereof and the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) and (b) Security clearance is a pre-requisite for grant of permission to TV channels. Hence, no private satellite TV channel has been permitted by this Ministry without security clearance by Ministry of Home Affairs. In cases where security clearance is denied/withdrawn, action is taken towards cancellation of permission under the Guidelines.

Record of employees in Prasar Bharati who joined before 1996

2550. SHRI MOTILAL VORA: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether the records of Clerks and Stenographers working in Prasar Bharati who joined the Government service between 1978 and 1996 are available;

(b) if so, sequestered details of the employees recruited through Staff Selection Commission as well as the ones recruited through the other agencies, year-wise;

(c) if not, the reasons therefor, Department-wise;

(d) whether records of these employees recruited prior to 1996 in various Departments have been found missing, if so, the details thereof, Department-wise; and

(e) whether Government has received any grievances in this regard, if so, the details thereof and steps taken to resolve the problem?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) to (e) The information is being collected and will be laid on the Table of the House.

Films on development stories

2551. SHRI AJAY SANCHETI: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether films on news/development stories in video format are being produced on Flagship Programmes of Government, if so, the details thereof;

(b) how far these videos are used both by Government as well as private channels; and

(c) whether there exists any official guidelines on this issue, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) Yes, Sir. Films on Flagship Programmes of Government are produced by Different Ministries/ Departments of Government through Directorate of Audio Visual Publicity (DAVP), National Film Development Corporation (NFDC) and Films Division.

(b) and (c) The content produced are disseminated as per media policy approved by respective Ministry/Department. Telecast on Government as well as private channels are governed by Electronic Media Advertisement Policy of the Government.

SPV for delivering contents of various Ministries through DTH

2552. SHRIMATI RENUKA CHOWDHURY: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether Government proposes a Special Purpose Vehicle (SPV) under the aegis of Prasar Bharati for delivering the educational contents of various Ministries through DTH channels, if so, the details thereof; and

(b) the steps taken by Government to use SPV route to broadcast other social and public awareness material also?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) Prasar Bharati has signed an Memorandum of Understanding (MoU) with Ministry of Human Resource Development (MHRD) on 19.12.2013 regarding transmission of MHRD educational DTH channels. Formation of Special Purpose Vehicle (SPV) is part of this MoU to facilitate transmission of MHRD education channels under the aegis of Prasar Bharati.

(b) Policy making is a dynamic process that is reviewed from time to time.

Assistance to unemployed youth belonging to minority communities

2553. SHRIMATI JAYA BACHCHAN: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether Government has provided any direct assistance to the unemployed youths belonging to minority communities for their self-employment, if so, the details thereof; and

(b) the number of such beneficiaries during each of the last three years and the current year, State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) National Minorities Development and Finance Corporation (NMDFC), a Central Public Sector Enterprise under the Ministry of Minority Affairs extends loans at concessional interest rates through State Channelising Agencies (SCAs) nominated by respective State Governments/UT Administrations, for self-employment and income generating ventures to eligible beneficiaries including unemployed youth belonging to notified minority communities. Minorities having annual family income upto ₹ 6.00 lakh are eligible.

(b) The State-wise number of beneficiaries extended loans by NMDFC during last three years and current year is given in the Statement.

Statement

State-wise no. of beneficiaries extended loans for the last three years including current financial year

Sl.No.	State	2012-13	2013-14	2014-15	2015-16
1.	Chandigarh	7	-	21	-
2.	Chhattisgarh	210	-	825	-
3.	Delhi	9	-	-	-
4.	Gujarat	563	-	-	-
5.	Haryana	718	667	377	-
6.	Himachal Pradesh	160	368	580	-
7.	Jammu and Kashmir	947	1579	2106	1030
8.	Karnataka	-	1947	2105	-
9.	Kerala	23188	16162	22624	2000
10.	Maharashtra	1649	-	1053	-
11.	Mizoram	-	-	211	-
12.	Nagaland	2749	849	2083	-
13.	Odisha	211	-	-	-
14.	Puducherry	316	825	549	-
15.	Punjab	737	738	1159	-
16.	Rajasthan	1790	4,211	2275	666

Sl.No.	State	2012-13	2013-14	2014-15	2015-16
17.	Tamil Nadu	16456	6854	14737	0
18.	Tripura	570	948	1263	333
19.	Uttarakhand	79	-	-	-
20.	West Bengal	51943	40818	56784	21667
TOTAL		102,302	75,966	108,752	25,696

Revision in criteria to determine minority status

2554. SHRI PARIMAL NATHWANI: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether Government has revised the criteria to determine the minority status in each State;

(b) if so, the details thereof and the present status in this regard; and

(c) the demands of each State in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) to (c) Revision of criteria to determine the minority status in each State is a State Subject as each State Government takes its own decision. So far as the Central Government is concerned, six communities have been declared as minority communities *viz.* Muslims, Christians, Sikhs, Buddhists, Zoroastrians (Parsis) and Jains under section 2(c) of the National Commission for Minorities (NCM) Act, 1992.

Socio-Economic and Educational status of Muslims

†2555. SHRI NARESH AGRAWAL: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether Government considers that economic conditions of Muslims have improved after implementation of Sachar Committee's recommendations eight years ago, if so, the details thereof and if not, the reasons therefor; and

(b) the details of socio-economic and educational status of Muslims in the country, at present?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) and (b) A High Level Committee, constituted

† Original notice of the question was received in Hindi.

under the Chairmanship of Justice (Retired) Rajinder Sachar to gather data/information for preparation of a comprehensive report on the social, economic and educational status of the Muslim community of India, in its report has indicated that the Muslim community lags behind the mainstream in social, economic and educational sectors.

The recommendations of the Committee were examined by the Government and the following focus areas were identified for their implementation for the welfare of all the six minority communities:

- a. Education (15 decisions);
- b. Skill Development of Minorities (2 decisions);
- c. Access to credit (6 decisions);
- d. Special development initiatives (2 decisions such as Multi-sectoral Development Programme and Jawaharlal Nehru National Urban Renewal Mission);
- e. Measures for affirmative action (4 decisions such as Setting up of National Data Bank and Assessment and Monitoring Authority, etc);
- f. Protection and Management of Waqf Properties (4 decisions); and
- g. Miscellaneous (10 decisions such as Prevention of Communal Violence, Delimitation Act, Sensitization, Multi-Media campaign etc.).

Most of the decisions have already been implemented. The follow up action on remaining decisions is of on-going nature and are implemented by the Ministry of Minority Affairs as well as the other Ministries/Departments of the Government of India. Many new schemes are added every year for the welfare of minorities. While the Ministry of Minority Affairs implements various schemes, which are exclusively meant for minorities (Budget provision for the year 2015-16 being ₹ 3,738.11 crore), others implement their schemes from their own budget by either earmarking funds for minorities or for the minority concentration areas. Progress of all the schemes are monitored on regular basis by the Ministry of Minority Affairs.

Implementation of these schemes, oriented towards welfare of minorities, is definitely going to improve the socio-economic conditions of the minorities. However, the overall effect of the steps taken by the Government for improving the conditions of minorities would be known once the data of census 2011 becomes available.

Low budget allocation for Minority Welfare Schemes

2556. SHRIMATI JAYA BACHCHAN: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether the budget allocation and expenditure on schemes for upliftment of minorities in the country is very low;

(b) whether Government proposes to increase the budget allocation for minorities under various schemes and if so, the details thereof;

(c) whether any requests from State Governments regarding implementation of welfare schemes for minorities is pending with the Union Government; and

(d) if so, the details thereof and the action proposed to be taken thereon, State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) and (b) Government of India has increased the Gross Budgetary Resources of Ministry of Minority Affairs to ₹ 17,323 Crore for Twelfth Five year Plan (2012-17) as against ₹ 7000 Crore provided in the 11th Plan (2007-2012), for the welfare and development schemes/programmes of minorities. The year-wise allocation during the Twelfth Five year Plan shows continuous increase of annual budget for minorities. The year-wise details of Plan Budget and Expenditure incurred by the Ministry, during last three years and current year are as follows:

(₹ in crore)

Year	Budgetary Allocation		Expenditure
	Budget Estimates	Revised Estimates	
2012-13	3135.00	2200.00	2157.98
2013-14	3511.00	3111.00	3007.49
2014-15	3711.00	3140.00	3069.02
2015-16	3712.78	-	573.96
			(as on 31.7.2015)

(c) and (d) Ministry has received 10 Block Plans and 3 Town Plans from Rajasthan; 118 Block Plans and 3 Town Plans from Assam; 4 Block Plans from Kerala; and 15 Block Plans from Manipur, under the scheme of Multi-sectoral Development Programme (MsDP) for minority concentration blocks/towns. Ministry has taken action for processing these proposals as per laid down procedure under the scheme guidelines.

Separate budget for 15 point programme

2557. SHRI GULAM RASOOL BALYAWI: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether it is a fact that no separate budget is allocated for the implementation of the 15 Point Programme, if so, the reasons therefor;

(b) whether it is also a fact that 15 Point Programme is on paper only and no worthwhile work is done thereunder; and

(c) what is Government's plan in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) to (c) The Prime Minister's New 15 Point Programme for the welfare of minorities is an overarching programme, covering many schemes implemented by various Ministries/Departments including Ministry of Minority Affairs, throughout the country. This programme aims to monitor the implementation of 24 different schemes of Government of India (of 11 Ministries/Departments) and to see that equitable share of the schemes (except those schemes, which are implemented by the Ministry of Minority Affairs and exclusively meant for the welfare of minority communities) is spent for the welfare of minority communities.

Funds are allocated for different schemes by the respective Ministries/Departments. The target setting and their implementation for welfare of minorities is monitored by Ministry of Minority Affairs, being Nodal Ministry for implementation of 15 PP. Owing to the complexity of the programme and its wide reach, wherever possible, the concerned Ministries/Departments earmark 15% of the targets/outlays for minorities in areas with substantial minority population. These are (all funded through the budget of the concerned Ministries/Departments):

- Integrated Child Development Services (ICDS) Scheme providing services through Anganwadi Centres (Ministry of Women & Child Development);
- Sarva Shiksha Abhiyan (Ministry of Human Resources Development);
- Swarnjayanti Gram Swarojgar Yojana (renamed as Aajeevika) (Ministry of Rural Development);
- Swarn Jayanti Shahari Rojgar Yojana (SJSRY) (Ministry of Housing & Urban Poverty Alleviation);
- Industrial Training Institutes (ITIs) [M/o Skill Development & Entrepreneurship (erstwhile Ministry of Labour & Employment)];
- Bank credit under priority sector lending (Department of Financial Services); and
- Indira Awaas Yojana (IAY) (Ministry of Rural Development).

Besides above, various schemes being implemented for minorities by the Ministry of Minority Affairs are also included in the Programme, in which 100% of funds are utilised for the welfare of minority communities. These include:

- Pre-Matric Scholarship.
- Post-Matric Scholarship.
- Merit-cum-Means Scholarship for technical and professional courses.
- Maulana Azad National Fellowship for Minority Students.
- Equity to National Minority Development and Finance Corporation (NMDFC) for providing concessional loans.
- Schemes of Maulana Azad Education Foundation (MAEF) for promotion of education.
- Free Coaching and Allied scheme.

A total of ₹ 2,534.53 crore have been expended during 2014-15 against these schemes, exclusively for the minorities by the Ministry of Minority Affairs.

Further, there are some other schemes included in the programme for which flow of fund to minority concentration areas is quantified, which include (all funded through the budget of the concerned Ministries/Departments):

- Integrated Housing and Slum Development Programme (IHSDP) (Ministry of Housing and Urban Poverty Alleviation)
- Basic Services for Urban Poor (BSUP) (Ministry of Housing and Urban Poverty Alleviation)
- Urban Infrastructure Development Scheme for Small and Medium Towns (UIDSSMT) (Ministry of Urban Development)
- Urban Infrastructure and Governance (UIG) (Ministry of Urban Development)
- National Rural Drinking Water Programme (NRDWP) (Ministry of Drinking Water and Sanitation)

On implementation of these schemes, most of the people living in such minority concentration areas would be benefited although.

In addition to above, there are some special initiatives included in the Prime Minister's New 15 Point Programme for the Welfare of Minorities, which are as under (all funded through the budget of the concerned Ministries/Departments):

- Scheme for Providing Quality Education in Madarsa (SPQEM) (Department of School Education and Literacy);
- Scheme for Infrastructure Development of Minority Institutions (IDMI) (Department of School Education and Literacy);
- Greater Resources for Teaching Urdu – Scheme for Appointment of Language Teachers (Department of School Education and Literacy);

The Government has also issued instructions/guidelines regarding protection of minority interests. These are:

- Recruitment of minorities in Government Departments/Organisations (Department of Personnel and Training)
- Guidelines on Communal harmony (Ministry of Home Affairs) These are meant for the benefit of minority communities.

The details of the status of implementation of these schemes, along with physical and financial targets fixed and achieved, wherever applicable, are available on the website of the Ministry of Minority Affairs i.e. www.minorityaffairs.gov.in and on the websites of concerned Ministries/Departments implementing the schemes.

Religion-wise scholarships for minority community students

2558. SHRI PARVEZ HASHMI: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) the total number of scholarships given to minority students across the country under various schemes and the details thereof for the last three years; and

(b) the details of these scholarships, religion-wise and State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) and (b) In order to support the education of the eligible students belonging to the notified minority communities, three Scholarship Schemes namely Pre-matric Scholarship for classes I to X; Post-matric Scholarship from class XI to Ph.D. level; and Merit-cum-means based Scholarship for professional and technical courses at under-graduate and post-graduate levels, are implemented by the Ministry of Minority Affairs. The State-wise and Community-wise detail of students benefited under each of the above Schemes during the last three years are given in Statement-I, II and III.

Statement-I

State/UT-wise and community-wise details of students benefited under scheme of Pre-matric Scholarship for students belonging to the minority communities during last three years

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
2012-13							
1.	Andhra Pradesh	283700	17053	270	222	30	301275
2.	Telangana	0	0	0	0	0	0

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
3.	Arunachal Pradesh	0	0	0	0	0	0
4.	Assam	174000	6881	89	297	0	181267
5.	Bihar	80595	19	0	8	0	80622
6.	Chhattisgarh	13782	1974	2184	295	0	18235
7.	Goa	0	0	0	0	0	0
8.	Gujarat	0	0	0	0	0	0
9.	Haryana	32311	54	17940	3	0	50308
10.	Himachal Pradesh	2730	24	812	86	0	3652
11.	Jammu and Kashmir	220122	126	5290	108	0	225646
12.	Jharkhand	40468	5252	156	2	0	45878
13.	Karnataka	365442	48985	362	1405	49	416243
14.	Kerala	557003	387806	55	36	18	944918
15.	Madhya Pradesh	125671	1323	2184	474	20	129672
16.	Maharashtra	510809	22892	7268	246790	1214	788973
17.	Manipur	8845	23398	0	36	0	32279
18.	Meghalaya	276	19667	2	0	0	19945
19.	Mizoram	129	37701	0	2785	0	40615
20.	Nagaland	314	18365	0	0	0	18679
21.	Odisha	23235	11341	48	49	0	34673
22.	Punjab	10543	4636	250930	61	18	266188
23.	Rajasthan	174141	285	25428	31	0	199885
24.	Sikkim	0	1111	0	3004	0	4115
25.	Tamil Nadu	174559	166088	0	0	0	340647
26.	Tripura	3718	2	0	1	0	3721
27.	Uttar Pradesh	1082950	310	4074	2141	11	1089486
28.	Uttarakhand	11180	129	598	0	0	11907
29.	West Bengal	1130986	20180	2595	11625	0	1165386
30.	Andaman and Nicobar	163	111	3	0	0	277
31.	Chandigarh	0	0	0	0	0	0
32.	Dadra and Nagar Haveli	208	25	0	0	0	233
33.	Daman and Diu	485	15	0	0	0	500

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
34.	Delhi	20550	166	1031	12	0	21759
35.	Lakshadweep	0	0	0	0	0	0
36.	Puducherry	0	0	0	0	0	0
TOTAL		5048915	795919	321319	269471	1360	6436984

2013-14

1.	Andhra Pradesh	320238	14085	407	193	26	334949
2.	Telangana	0	0	0	0	0	0
3.	Arunachal Pradesh	0	0	0	0	0	0
4.	Assam	232335	9070	53	509	0	241967
5.	Bihar	65536	112	14	1	0	65663
6.	Chhattisgarh	15453	2005	2375	363	0	20196
7.	Goa	1742	6575	2	0	0	8319
8.	Gujarat	352647	2036	251	776	46	355756
9.	Haryana	9796	76	5908	0	0	15780
10.	Himachal Pradesh	2631	8	885	53	0	3577
11.	Jammu and Kashmir	104975	233	6875	1564	0	113647
12.	Jharkhand	22933	3671	90	0	0	26694
13.	Karnataka	354959	48360	403	748	41	404511
14.	Kerala	544865	339708	55	36	18	884682
15.	Madhya Pradesh	107814	535	1080	77	1	109507
16.	Maharashtra	525335	13341	5075	238875	2551	785177
17.	Manipur	3979	9253	0	0	0	13232
18.	Meghalaya	1107	22714	4	0	0	23825
19.	Mizoram	189	89501	0	5055	0	94745
20.	Nagaland	254	25538	0	0	0	25792
21.	Odisha	28267	10241	8	95	0	38611
22.	Punjab	19626	7441	326356	89	37	353549
23.	Rajasthan	243168	435	36450	46	1	280100
24.	Sikkim	0	1027	0	2758	0	3785
25.	Tamil Nadu	206036	200288	0	0	0	406324
26.	Tripura	7200	0	0	4	0	7204
27.	Uttar Pradesh	1254870	461	5599	1436	16	1262382

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
28.	Uttarakhand	0	0	0	0	0	0
29.	West Bengal	1836656	21740	1294	9471	0	1869161
30.	Andaman and Nicobar	168	68	0	0	0	236
31.	Chandigarh	3132	242	3345	2	0	6721
32.	Dadra and Nagar Haveli	152	15	0	0	0	167
33.	Daman and Diu	487	7	0	0	0	494
34.	Delhi	33732	377	1979	8	0	36096
35.	Lakshadweep	0	0	0	0	0	0
36.	Puducherry	902	439	0	0	0	1341
TOTAL		6301184	829602	398508	262159	2737	7794190

2014-15

1.	Andhra Pradesh	124338	6698	22	2	8	1	131069
2.	Telangana	170115	5570	233	227	15	18	176178
3.	Arunachal Pradesh	0	0	0	0	0	0	0
4.	Assam	127504	5342	56	77	2	0	132981
5.	Bihar	121687	1148	28	20	0	0	122883
6.	Chhattisgarh	15231	1786	2222	453	261	0	19953
7.	Goa	498	2852	0	0	0	0	3350
8.	Gujarat	343632	3121	779	523	5843	35	353933
9.	Haryana	0	0	0	0	0	0	0
10.	Himachal Pradesh	2439	28	704	24	0	1	3196
11.	Jammu and Kashmir	383042	131	5793	454	0	0	389420
12.	Jharkhand	24529	3812	121	0	2	1	28465
13.	Karnataka	392212	35728	339	645	6392	53	435369

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Jain	Parsi	Total
14.	Kerala	509881	335339	98	42	70	35	845465
15.	Madhya Pradesh	99872	874	706	86	3278	3	104819
16.	Maharashtra	471195	9818	3991	212426	19818	648	717896
17.	Manipur	5303	13986	0	75	0	0	19364
18.	Meghalaya	1712	20614	0	1	0	0	22327
19.	Mizoram	162	135574	0	5474	0	0	141210
20.	Nagaland	355	42464	13	4	0	0	42836
21.	Odisha	28830	10538	15	140	87	0	39610
22.	Punjab	18257	6959	391113	108	537	27	417001
23.	Rajasthan	214953	273	33550	17	4639	1	253433
24.	Sikkim	0	1061	0	3382	0	0	4443
25.	Tamil Nadu	231214	229819	5	7	331	0	461376
26.	Tripura	9178	6	0	9	0	0	9193
27.	Uttar Pradesh	850896	342	6685	1443	291	10	859667
28.	Uttarakhand	48151	362	5532	0	6	0	54051
29.	West Bengal	1661221	19072	1137	8589	14	6	1690039
30.	Andaman and Nicobar	487	353	5	0	0	0	845
31.	Chandigarh	1398	178	1735	4	4	0	3319
32.	Dadra and Nagar Haveli	205	16	0	0	4	0	225
33.	Daman and Diu	726	2	0	0	0	0	728
34.	Delhi	8708	133	449	11	0	0	9301
35.	Lakshadweep	0	0	0	0	0	0	0
36.	Puducherry	1766	878	4	0	0	0	2648
TOTAL		5869697	894877	455335	234243	41602	839	7496593

Note: Jains have been included under Minorities in January, 2014.

Statement-II

State/UT-wise and community-wise detail of students benefited under Scheme of Post-matric Scholarships for students belonging to the minority communities during the last three years

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
2012-13							
1.	Andhra Pradesh	25966	899	31	4	4	26904
2.	Telangana	0	0	0	0	0	0
3.	Arunachal Pradesh	0	0	0	0	0	0
4.	Assam	18464	763	23	24	2	19276
5.	Bihar	26810	9	10	81	1	26911
6.	Chhattisgarh	1929	205	433	48	0	2615
7.	Goa	52	158	0	1	0	211
8.	Gujarat	20028	546	32	6	0	20612
9.	Haryana	687	6	680	0	0	1373
10.	Himachal Pradesh	260	3	138	23	0	424
11.	Jammu and Kashmir	9136	9	1334	12	0	10491
12.	Jharkhand	9273	782	51	6	0	10112
13.	Karnataka	27871	5242	4	41	2	33160
14.	Kerala	52494	42845	3	32	5	95379
15.	Madhya Pradesh	11622	203	357	159	2	12343
16.	Maharashtra	39968	1140	294	1387	13	42802
17.	Manipur	787	2828	0	4	0	3619
18.	Meghalaya	14	209	0	0	0	223
19.	Mizoram	23	4092	0	214	0	4329
20.	Nagaland	17	72	0	1	0	90
21.	Odisha	1998	91	4	50	0	2143
22.	Punjab	1753	554	52027	50	19	54403
23.	Rajasthan	19062	144	3949	12	0	23167
24.	Sikkim	0	187	0	378	0	565
25.	Tamil Nadu	18577	24928	1	16	3	43525
26.	Tripura	440	4	0	1	0	445
27.	Uttar Pradesh	187014	564	3789	1896	98	193361

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
28.	Uttarakhand	393	30	117	0	0	540
29.	West Bengal	121986	1840	188	1880	15	125909
30.	Andaman and Nicobar	9	12	0	0	0	21
31.	Chandigarh	124	8	133	2	0	267
32.	Dadra and Nagar Haveli	22	11	0	0	0	33
33.	Daman and Diu	48	4	0	0	0	52
34.	Delhi	327	0	11	0	0	338
35.	Lakshadweep	0	0	0	0	0	0
36.	Puducherry	0	0	0	0	0	0
TOTAL		597154	88388	63609	6328	164	755643

2013-14

1.	Andhra Pradesh	18651	574	17	4	0	19246
2.	Telangana	0	0	0	0	0	0
3.	Arunachal Pradesh	0	0	0	0	0	0
4.	Assam	27618	264	29	20	1	27932
5.	Bihar	34368	33	25	56	3	34485
6.	Chhattisgarh	2087	200	465	59	0	2811
7.	Goa	36	88	0	0	0	124
8.	Gujarat	32268	660	37	11	3	32979
9.	Haryana	710	3	796	0	0	1509
10.	Himachal Pradesh	225	5	112	11	0	353
11.	Jammu and Kashmir	22828	36	2505	90	2	25461
12.	Jharkhand	10044	1487	32	18	0	11581
13.	Karnataka	45101	6594	3	71	2	51771
14.	Kerala	37147	32471	2	21	2	69643
15.	Madhya Pradesh	10437	118	276	31	1	10863
16.	Maharashtra	55845	1255	307	2818	4	60229
17.	Manipur	2822	5015	1	15	0	7853
18.	Meghalaya	59	111	0	0	0	170
19.	Mizoram	4	664	0	1	0	669

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
20.	Nagaland	19	211	0	0	0	230
21.	Odisha	3166	138	5	71	0	3380
22.	Punjab	2936	439	73176	25	1	76577
23.	Rajasthan	27616	96	5517	21	9	33259
24.	Sikkim	2	103	1	204	0	310
25.	Tamil Nadu	20658	34447	1	42	4	55152
26.	Tripura	661	2	0	2	0	665
27.	Uttar Pradesh	162671	398	2322	346	46	165783
28.	Uttarakhand	580	10	183	1	0	774
29.	West Bengal	191311	1966	193	1840	21	195331
30.	Andaman and Nicobar	2	3	0	0	0	5
31.	Chandigarh	159	5	125	1	0	290
32.	Dadra and Nagar Haveli	19	6	0	0	0	25
33.	Daman and Diu	25	1	0	0	0	26
34.	Delhi	646	1	33	0	0	680
35.	Lakshadweep	0	0	0	0	0	0
36.	Puducherry	156	145	0	0	0	301
TOTAL		710877	87549	86163	5779	99	890467

2014-15

1.	Andhra Pradesh	5061	111	0	0	2	2	5176
2.	Telangana	11294	268	11	2	4	1	11580
3.	Arunachal Pradesh	0	0	0	0	0	0	0
4.	Assam	29179	614	28	34	38	0	29893
5.	Bihar	42114	24	45	46	16	3	42248
6.	Chhattisgarh	1838	183	473	42	121	0	2657
7.	Goa	26	67	0	0	0	0	93
8.	Gujarat	37732	697	73	29	2038	5	40574
9.	Haryana	348	2	365	0	6	0	721
10.	Himachal Pradesh	213	7	112	5	0	0	337

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Jain	Parsi	Total
11.	Jammu and Kashmir	14849	13	1026	85	4	0	15977
12.	Jharkhand	10475	1769	28	4	5	0	12281
13.	Karnataka	74386	7446	22	51	3893	32	85830
14.	Kerala	51341	43068		20	28	3	94460
15.	Madhya Pradesh	7325	86	181	10	2407	0	10009
16.	Maharashtra	51160	1047	283	2994	1496	4	56984
17.	Manipur	6752	289	8	36	0	0	7085
18.	Meghalaya	305	8	0	0	0	0	313
19.	Mizoram	5	382	0	2	0	0	389
20.	Nagaland	14	183	0	1	0	0	198
21.	Odisha	3649	162	7	100	3	0	3921
22.	Punjab	2982	405	79665	49	265	49	83415
23.	Rajasthan	27554	85	6712	35	4712	0	39098
24.	Sikkim	0	53	0	131	0	0	184
25.	Tamil Nadu	32168	35099	1	21	96	0	67385
26.	Tripura	750	2	0	5	0	0	757
27.	Uttar Pradesh	98623	44	817	72	294	2	99852
28.	Uttarakhand	869	18	186	0	3	0	1076
29.	West Bengal	188587	1938	145	1562	33	2	192267
30.	Andaman and Nicobar Islands	0	0	0	0	0	0	0
31.	Chandigarh	123	7	91	0	1	0	222
32.	Dadra and Nagar Haveli	0	0	0	0	0	0	0
33.	Daman and Diu	0	0	0	0	0	0	0
34.	Delhi	458	0	63	0	1	0	522
35.	Lakshadweep	0	0	0	0	0	0	0
36.	Puducherry	68	47	0	0	1	0	116
TOTAL		700248	94124	90342	5336	15467	103	905620

Note: Jains have been included under Minorities in January, 2014.

Statement-III

State/UT-wise and community-wise detail of students benefited under Scheme of Merit-cum Means based scholarships for Students belonging to the minority communities during the last three years

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
2012-13							
1.	Andhra Pradesh	1595	64	5	0	0	1664
2.	Telangana	0	0	0	0	0	0
3.	Arunachal Pradesh	0	0	0	0	0	0
4.	Assam	2212	75	11	13	0	2311
5.	Bihar	4345	2	6	1	0	4354
6.	Chhattisgarh	129	48	21	3	0	201
7.	Goa	21	76	0	0	0	97
8.	Gujarat	1901	97	15	1	2	2016
9.	Haryana	475	6	289	0	0	770
10.	Himachal Pradesh	46	2	31	7	0	86
11.	Jammu and Kashmir	2828	0	101	7	0	2936
12.	Jharkhand	1196	59	23	1	0	1279
13.	Karnataka	3000	508	4	74	0	3586
14.	Kerala	4646	3981	0	0	0	8627
15.	Madhya Pradesh	1596	61	65	3	0	1725
16.	Maharashtra	4002	435	102	120	6	4665
17.	Manipur	116	214	0	0	0	330
18.	Meghalaya	26	386	0	0	0	412
19.	Mizoram	3	75	0	7	0	85
20.	Nagaland	6	683	0	0	0	689
21.	Odisha	346	72	4	5	0	427
22.	Punjab	97	44	4712	6	0	4859
23.	Rajasthan	2150	30	336	3	0	2519
24.	Sikkim	0	14	0	97	0	111
25.	Tamil Nadu	1646	1577	1	1	0	3225
26.	Tripura	108	3	0	2	0	113

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
27.	Uttar Pradesh	11322	49	241	35	0	11647
28.	Uttarakhand	275	3	55	0	0	333
29.	West Bengal	8201	81	55	103	0	8440
30.	Andaman and Nicobar Islands	4	3	0	0	0	7
31.	Chandigarh	5	0	16	0	0	21
32.	Dadra and Nagar Haveli	0	0	0	0	0	0
33.	Daman and Diu	3	0	0	0	0	3
34.	Delhi	371	6	148	0	0	525
35.	Lakshadweep	0	0	0	0	0	0
36.	Puducherry	18	15	0	0	0	33
TOTAL		52689	8669	6241	489	8	68096

2013-14

1.	Andhra Pradesh	1421	69	2	0	0	1492
2.	Telangana	0	0	0	0	0	0
3.	Arunachal Pradesh	0	1	0	0	0	1
4.	Assam	3544	134	17	15	0	3710
5.	Bihar	6391	6	9	11	0	6417
6.	Chhattisgarh	177	86	64	12	0	339
7.	Goa	22	86	0	0	0	108
8.	Gujarat	2448	136	15	3	5	2607
9.	Haryana	444	7	414	0	0	865
10.	Himachal Pradesh	63	3	74	13	0	153
11.	Jammu and Kashmir	2160	1	147	9	0	2317
12.	Jharkhand	1670	32	32	2	0	1736
13.	Karnataka	4516	926	9	75	0	5526
14.	Kerala	8336	7266	0	0	0	15602
15.	Madhya Pradesh	1201	61	79	6	0	1347
16.	Maharashtra	6191	629	131	160	2	7113
17.	Manipur	158	361	0	0	0	519
18.	Meghalaya	32	674	0	0	0	706

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Parsi	Total
19.	Mizoram	3	90	0	4	0	97
20.	Nagaland	5	1001	0	0	0	1006
21.	Odisha	493	82	9	22	0	606
22.	Punjab	186	99	10936	10	0	11231
23.	Rajasthan	2371	6	390	2	0	2769
24.	Sikkim	0	23	0	123	0	146
25.	Tamil Nadu	2894	2252	0	3	0	5149
26.	Tripura	131	5	0	2	0	138
27.	Uttar Pradesh	16494	67	348	28	5	16942
28.	Uttarakhand	483	8	81	0	0	572
29.	West Bengal	10159	125	64	158	0	10506
30.	Andaman and Nicobar Islands	6	3	0	0	0	9
31.	Chandigarh	12	1	19	0	0	32
32.	Dadra and Nagar Haveli	0	0	0	0	0	0
33.	Daman and Diu	7	0	0	0	0	7
34.	Delhi	417	7	188	1	0	613
35.	Lakshadweep	0	0	0	0	0	0
36.	Puducherry	31	16	0	0	0	47
TOTAL		72466	14263	13028	659	12	100428

2014-15

1.	Andhra Pradesh	475	48	0	0	3	0	526
2.	Telangana	1208	28	1	0	1	0	1238
3.	Arunachal Pradesh	0	0	0	0	0	0	0
4.	Assam	3726	119	21	12	8	0	3886
5.	Bihar	13348	16	13	9	7	0	13393
6.	Chhattisgarh	361	71	84	14	84	0	614
7.	Goa	61	102	0	0	0	0	163
8.	Gujarat	3763	166	18	4	868	2	4821
9.	Haryana	638	7	440	0	24	0	1109

Sl.No.	State/UT	Muslim	Christian	Sikh	Buddhist	Jain	Parsi	Total
10.	Himachal Pradesh	57	3	63	6	0	0	129
11.	Jammu and Kashmir	6303	0	204	10	2	0	6519
12.	Jharkhand	1433	27	24	1	13	0	1498
13.	Karnataka	16115	2071	3	32	1593	0	19814
14.	Kerala	12397	13442	0	0	4	1	25844
15.	Madhya Pradesh	1141	45	119	1	1648	0	2954
16.	Maharashtra	3986	414	100	101	628	1	5230
17.	Manipur	170	267	0	0	0	0	437
18.	Meghalaya	35	848	0	1	0	0	884
19.	Mizoram	0	0	0	0	0	0	0
20.	Nagaland	5	1155	0	0	0	0	1160
21.	Odisha	474	61	6	8	1	0	550
22.	Punjab	133	47	10119	7	57	4	10367
23.	Rajasthan	1325	3	306	1	1148	0	2783
24.	Sikkim	0	17	0	61	0	0	78
25.	Tamil Nadu	2900	2822	1	0	24	0	5747
26.	Tripura	112	2	0	1	0	0	115
27.	Uttar Pradesh	16325	27	190	21	298	0	16861
28.	Uttarakhand	455	4	106	0	12	0	577
29.	West Bengal	10281	139	66	166	43	1	10696
30.	Andaman and Nicobar Islands	0	0	0	0	0	0	0
31.	Chandigarh	11	2	26	0	1	0	40
32.	Dadra and Nagar Haveli	0	0	0	0	0	0	0
33.	Daman and Diu	4	0	0	0	0	0	4
34.	Delhi	464	5	207	0	17	0	693
35.	Lakshadweep	0	0	0	0	0	0	0
36.	Puducherry	23	17	0	0	0	0	40
TOTAL		97729	21975	12117	456	6484	9	138770

Note: Jains have been included under Minorities in January, 2014.

Miserable conditions of minorities

†2559. SHRIMATI KAHKASHAN PERWEEN: Will the Minister of MINORITY AFFAIRS be pleased to state whether it is a fact that the socio-economic and educational status of minorities is miserable, if so, the measures adopted by Government to improve the same?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): Six religious communities *viz.* Muslims, Christians, Buddhists, Sikhs, Zoroastrians (Parsis) and Jains have been notified as minority communities under Section 2(c) of the National Commission for Minorities Act, 1992.

The National Commission for Religious and Linguistic Minorities (NCRLM) constituted under the Chairmanship of Justice Ranganath Misra to recommend measures for the welfare of socially and economically backward sections among religious and linguistic minorities submitted its report in 2007 and the same was laid on the Table of both the Houses of Parliament on 18.12.2009. The findings of the NCRLM on the conditions of minorities are available in the report.

A High Level Committee, constituted under the Chairmanship of Justice (Retired) Rajinder Sachar to gather data/information for preparation of a comprehensive report on the social, economic and educational status of the Muslim community of India, in its report in 2006 had indicated that the Muslim community lags behind the mainstream in social, economic and educational sectors. The report had been laid on the Table of both the Houses of Parliament on 30.11.2006.

To improve the socio-economic and educational status of Minorities, following schemes are being implemented by this Ministry:

- (i) **Multi-sectoral Development Programme:** The Multi-sectoral Development Programme (MsDP) is an area development initiative to address the development deficits by creating socio-economic infrastructure and providing basic amenities. The Programme was implemented in 90 Minority Concentration Districts (MCDs) of the country during the Eleventh Five Year Plan and 2012-13. The Programme has been restructured in 2013-14 to make it more effective and more focused on the targeted minorities for its implementation during the Twelfth Five Year Plan period. In the restructured MsDP, the unit area of planning has been changed to blocks/towns/clusters of villages instead of district for sharper focus on the minority concentration areas.

† Original notice of the question was received in Hindi.

- (ii) **Pre-Matric Scholarship Scheme:** Under this Scheme, scholarships are awarded to minority students up to class X, who have secured not less than 50% marks in the previous final examination and the annual income of their parents / guardian from all sources does not exceed ₹ 1.00 Lakh. 30% of the scholarships are earmarked for girl students. This is a Central Sector Scheme with 100% central assistance.
- (iii) **Post-Matric Scholarship Scheme:** Under this Scheme, scholarships are awarded to minority students from class XI onwards who have secured not less than 50% marks or equivalent grade in the previous final examination and the annual income of whose parents/guardian from all sources does not exceed ₹ 2.00 lakh. 30% of the scholarships are earmarked for girl students. This is a Central Sector Scheme with 100% central assistance.
- (iv) **Merit-cum-Means Based Scholarship Scheme:** The Merit-cum-Means Based Scholarship Scheme provides financial assistance to the poor and meritorious minority students pursuing professional studies at graduate and post-graduate levels. 30% of the scholarships are earmarked for girl students. This is a Central Sector Scheme with 100% central assistance.
- (v) **Maulana Azad National Fellowship:** The Fellowship is provided to students from minority communities, as notified by the Central Government to pursue higher studies such as M.Phil and Ph.D. The Fellowship covers all Universities/Institutions recognized by the University Grants Commission (UGC). The Fellowship is on the pattern of UGC Fellowships awarded to research students pursuing regular and full time M.Phil and Ph.D. courses. 30% of the scholarships are earmarked for eligible girl students.
- (vi) **Free Coaching and Allied Scheme:** This scheme is to assist students belonging to the minority communities by way of special coaching for qualifying examinations for admission in technical/ professional courses such as engineering, medical and competitive examinations for recruitment to Group "A", "B" and "C" services and other equivalent posts under the Central and State Governments including public sector undertakings.
- (vii) **Padho Pardesh:** Interest Subsidy on Educational Loans-This scheme is to award interest subsidy to meritorious students belonging to economically weaker sections of notified minority communities so as to provide them better opportunities for higher education abroad at Masters and Ph.D levels and enhance their employability.
- (viii) **Support to minority candidates clearing Prelims conducted by UPSC/SSC, State Public Service Commission (PSC) etc. :** This Scheme is to provide financial support to the minority candidates clearing prelims conducted by

Union Public Service Commission, Staff Selection Commission and State Public Service Commissions to adequately equip them to compete for appointment to Civil Services in the Union and the State Governments and to increase the representation of the minorities in the Civil Services.

- (ix) **Seekho aur Kamao (Learn and Earn):** It is a placement linked skill development programme for minority youths, being implemented since the year 2013-14. This scheme aims at upgrading the skills of minority youths in various modern as well as traditional skills which can earn them suitable employment or make them suitably skilled to go for self-employment. The scheme ensures placements of minimum 75% trained youths, out of which at least 50% placement is in organized sector.
- (x) **Nai Roshni (Leadership Development of Minority Women):** This is a scheme for women empowerment through sensitization and leadership Development of Minority Women being implemented all over the country by this Ministry since 2012-13. The objective of the scheme is to empower and instill confidence in women, by providing knowledge, tools and techniques for interacting with Government systems, banks, and intermediaries at all levels.
- (xi) **“USTTAD (Upgrading the Skills and Training in Traditional Arts/Crafts for Development)”:** The scheme was launched on 14.5.2015 to preserve rich heritage of traditional arts/crafts of minorities, set standards of crafts practiced by minorities, build capacity of poor traditional artisans/craftsmen and link them with market.
- (xii) **National Minorities Development and Finance Corporation (NMDFC):** NMDFC is a Central Public Sector Enterprise (CPSE) under administrative control of this Ministry, provides concessional loans for self-employment and income generating activities to eligible minorities. The loans are extended to individuals or Self-Help Groups through State Channelizing Agencies (SCAs) nominated by the concerned State Governments/UT administrations.
- (xiii) **Maulana Azad National Academy for Skills (MANAS):** MANAS has been established on 11/11/2014, as Special Purpose Vehicle (SPV) for addressing all skill development needs of minority communities, to ensure provision of sustainable livelihoods to them, with emphasis on self-employment. Based on market demand, the Academy provides an All India level training framework for Entrepreneurship and Skill Development Programme (E&SDP) based on PPP model, for imparting training to minority population, with concessional credit linkages.

- (xiv) **Jiyo Parsi:** “For containing the population decline of the Parsi community, a Central Sector Scheme "Jiyo Parsi" was launched during 2013-14. The objective of this scheme is to reverse the declining trend of Parsi population by adopting a scientific protocol and structured interventions to stabilize their population and balance their population in India.
- (xv) **Nai Manzil:** An integrated education and livelihood initiative for the minority communities scheme has been launched on 08.08.2015 on pilot basis for formal education of school dropouts and Madarsa students to enhance their education and skills in various trade to enable them for gainful employment.

Aid to societies and NGOs by MDC

2560. SHRI PARVEZ HASHMI: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) the loans given to societies and NGOs for welfare of minorities across the country by Minority Development Corporation (MDC) in 2014-15;

(b) the details of the amount given to various societies and NGOs, religion-wise; and

(c) the total yearly expenses of MDC including salaries and other expenses of the staff?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) and (b) The lending schemes of National Minorities Development and Finance Corporation (NMDFC), a central public sector enterprise under this Ministry, are implemented for the socio-economic development of the minorities through the State Channelising Agencies (SCAs) nominated by the respective State Governments/UT Administration. The lending schemes include Term Loan, Micro-finance and Educational Loan. Under Micro-Finance scheme, SCAs may avail the services of any NGO. During the year 2014-15, NMDFC had disbursed total amount of ₹ 431.20 crore for 1,08,752 beneficiaries under its schemes through the SCAs only. No loan was disbursed through the societies and NGOs during the year 2014-15.

(c) The total yearly expenses of NMDFC including salaries and other expenses of the staff was ₹ 8.96 crore during 2014-15.

RE. OVERLOOKING RAJYA SABHA IN MONITORING COMMITTEES

श्री नरेश अग्रवाल (उत्तर प्रदेश) : सर, मेरा एक प्वाइंट ऑफ ऑर्डर है।

MR. DEPUTY CHAIRMAN: Tell me on which day you are not raising a point of order!

श्री नरेश अग्रवाल: सर, संविधान के आर्टिकल्स 80 और 81... श्रीमन्, मैंने आर्टिकल्स 80 और 81 से इसलिए इसकी शुरुआत की है कि भारत सरकार के तमाम मंत्रालयों ने तमाम जिलों में निगरानी समिति बना कर भेजी और उन्होंने यह लिख दिया कि निगरानी समिति का जो अध्यक्ष होगा, वह लोक सभा का एमपी होगा, चाहे वह जूनियर हो या सीनियर हो। श्रीमन्, आप आर्टिकल 80 को देख लीजिए। इसमें इस राज्य सभा की संरचना कैसे की जाएगी, उसके बारे में दिया गया है, आर्टिकल 81 में लोक सभा के बारे में दिया गया है, लेकिन आर्टिकल्स 80 या 81 से हम यह अर्थ नहीं लगा रहे हैं कि कौन सा हाउस सुपीरियर है और कौन सा हाउस इनफीरियर है, जबकि जो आर्टिकल्स 83 और 84 हैं, उनमें ड्यूरेशन और सदस्यों की अर्हता दी गई है। आर्टिकल 84 में यह भी दिया गया है कि जो राज्य सभा का सदस्य होगा, वह 30 वर्ष से कम उम्र का नहीं होगा, जबकि लोक सभा का सदस्य 25 साल की उम्र का भी हो जाएगा। श्रीमन्, मैंने इसलिए यह सवाल उठाया कि आज इनके जी.ओ. के बाद यह प्रश्न उठ गया कि क्या राज्य सभा उसी तरह उपेक्षित रहेगी, जैसी लोक सभा द्वारा की जाए? अगर यहां पर कोई दल जीत कर आया और वह लोक सभा में नहीं जीता है, तो आप उसको कमरा नहीं दे सकते। अगर वह दूर पर विदेश जा रहा है, तो यह लोक सभा तय करेगी, आप तय नहीं करेंगे कि इस सदन के सदस्यों को दूर पर विदेश जाना है या नहीं जाना है। श्रीमन्, मैंने इसलिए यह तीसरा प्वाइंट उठाया कि अगर शरद पवार जी के जिले में समिति बनेगी और अगर एक कम उम्र का जीता हुआ एमपी होगा, जो लोक सभा का सदस्य है, तो वह अध्यक्ष हो जाएगा और शरद जी को-अध्यक्ष हो जाएंगे। ये बैठे हुए हैं, इनको यहां पूरी जिन्दगी हो गई, लेकिन आज इस निगरानी समिति के बारे में यह जो जी.ओ. है, हम लोगों के पास इसकी कॉपी भी है, जिसे भारत सरकार के तमाम मंत्रालयों ने जारी किया है और हर जिले में भेजा है, इसमें इस सदन के सारे सदस्यों को इनफीरियर मान लिया गया और लोक सभा के सदस्यों को सुपीरियर मान लिया गया। अब वे अध्यक्ष बनेंगे, चाहे वे हमसे कितने भी जूनियर हों, चाहे उनको अनुभव हो या न हो। श्रीमन्, हमें तो उस कुर्सी की भी चिंता है कि कहीं उस कुर्सी के अधिकारों की कटौती न हो जाए। अगर प्रोटोकॉल देखें, तो इस सदन के चेयरमैन का प्रोटोकॉल लोक सभा के स्पीकर से ऊपर है, इस सदन के चेयरमैन का प्रोटोकॉल भारत के प्रधान मंत्री से भी ऊपर है, लेकिन क्या इस सदन के सदस्यों की इसी तरह उपेक्षा होती रहेगी? इससे तो इस सदन के जो सदस्य हैं, अगर वे मंत्रिमंडल में मंत्री भी बनेंगे, तो वे उन मंत्रियों से जूनियर होंगे, जो लोक सभा के चुने हुए एमपी मंत्री बने हैं। इसका तो मतलब यह हो गया। अरुण जी बताएँ, सुरेश प्रभु जी भी बैठे हुए हैं। मैंने एक गम्भीर मसला उठाया है।...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Yes, yes. ...(Interruptions)...

श्री नरेश अग्रवाल : श्रीमन्, यह कई बार उठा है।...(व्यवधान)... मुझे दुख है कि इस पीठ ने इस पर कभी निर्णय नहीं लिया। इस पीठ को निर्णय लेना है।...(व्यवधान)... इस पीठ को

कोई न कोई निर्णय लेना है।

MR. DEPUTY CHAIRMAN: I agree. *...(Interruptions)...* If all of you raise your hands, I cannot do it. *...(Interruptions)...* I am not allowing you. *...(Interruptions)...*

अल्पसंख्यक कार्य मंत्रालय में राज्य मंत्री, तथा संसदीय कार्य मंत्रालय में राज्य मंत्री (श्री मुख्तार अब्बास नक़वी) : सर, निगरानी कमेटीज़ की व्यवस्था हमारे समय की नहीं है। निगरानी कमेटीज़ की यह व्यवस्था पहले से चली आ रही है। माननीय सदस्य ने जो बात उठाई है, हम उनकी बात को स्वीकार करते हैं। जिलों में जो निगरानी कमेटीज़ बनती हैं, इस व्यवस्था में लोक सभा के सदस्य चेयरमैन होते हैं और राज्य सभा के सदस्य को-चेयरमैन होते हैं, लेकिन माननीय सदस्य ने जो भावना उठाई है, उस सम्बन्ध में हम लोग चर्चा करेंगे, लेकिन जहां तक इस व्यवस्था का सवाल है, यह हमारी व्यवस्था नहीं है। यह व्यवस्था पहले से बनी हुई है। *...(व्यवधान)...*

श्री नरेश अग्रवाल : इसका मतलब जो पाप इन्होंने किए हैं, वे आप भी करेंगे?

श्री मुख्तार अब्बास नक़वी : नहीं, नहीं, जरूरत नहीं है। उनके पाप का घड़ा भर चुका है, इसलिए हम पाप नहीं करेंगे।

MR. DEPUTY CHAIRMAN: Mr. Minister, why don't you make the senior of the two as the Chairman? Whether he is a Lok Sabha Member or Rajya Sabha Member, the senior should be the Chairman and the junior one will be the co-Chairman. *...(Interruptions)...* You please take up the matter with concerned Ministries. *...(Interruptions)...*

श्री के. सी. त्यागी (बिहार) : सर, सदन की सुरक्षा के लिए जो कमेटी बनी है, उसमें सभी मेम्बर्स लोक सभा के हैं, एक भी मेम्बर राज्य सभा का नहीं है। क्या राज्य सभा के सदस्यों की सुरक्षा का कोई मतलब नहीं है? *...(व्यवधान)...* मैं चाहूंगा कि लोक सभा की अध्यक्ष से आप इसके बारे में पूछें।

MR. DEPUTY CHAIRMAN: That is what I said. *...(Interruptions)...*

श्री के.सी. त्यागी : जो लोक सभा की कमेटी बनी है, उसमें राज्य सभा के एम.पी. भी होने चाहिए। *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: Okay. *...(Interruptions)...* The Minister has responded. *...(Interruptions)...* He will take it up. *...(Interruptions)...* That is accepted. All right. *...(Interruptions)...*

श्री मधुसूदन मिश्री (गुजरात) : सर, इस मुद्दे पर मेरा भी नोटिस है। I have given a privilege notice against the Leader of the House on this. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: I have not received the privilege notice.

...(Interruptions)...

SHRI MADHUSUDAN MISTRY: I gave it. ...(Interruptions)... In fact, the Leader of the House himself says that this House is inferior to that House. ...(Interruptions)... He said it publicly. ...(Interruptions)... I have given a privilege notice on this. ...(Interruptions)... To that, he has replied. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Have you given a privilege notice? ...(Interruptions)...

श्री नारायण लाल पंचारिया (राजस्थान): सर, पहले बिल पास हो जाए, बाद में इस पर चर्चा की जाए। ...(व्यवधान)...

श्री मधुसूदन मिश्री : सर, आप पहले सुन लीजिए। इस हाउस के मेम्बर, जो इसके लीडर ऑफ द हाउस हैं, अगर खुद वे यह बात कहते हैं ...(व्यवधान)... उन्होंने यह कहा है, पब्लिकली कहा है और यह इंडियन एक्सप्रेस में छपा है। ...(व्यवधान)... मेरा नोटिस है। ...(व्यवधान)... अगर इस हाउस के मेम्बर खुद यह बात कहते हैं, वहां पर यह ...(व्यवधान)... इस नोटिस को एडमिट किया जाए। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: If you have given notice, that will be examined. ...(Interruptions)... Sit down. ...(Interruptions)... If you have given notice, that will be examined. ...(Interruptions)... Sit down. ...(Interruptions)...

SHRI MADHUSUDAN MISTRY: I have given a notice. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: There is again a point of order. ...(Interruptions)...

SHRI ANAND SHARMA (Rajasthan): Sir, I am raising this point of order with your permission under Rules 33, 34 and 35 of the Rules of Procedure and Conduct of Business in the Council of States. Sir, Rule 33 is about the functions of the Business Advisory Committee and it says, "(1) It shall be the function of the Committee to recommend the time that should be allocated - (a) for the discussion of stage or stages of such Government Bills and other business as the Chairman in consultation with the Leader of the Council may direct for being referred to the Committee; and (b) for the discussion of stage or stages of Private Members' Bills and resolutions. (2) The Committee shall have the power to indicate in the proposed allocation of time the different hours at which the various stages of the Bill or other business shall be completed. (3) The Committee shall have such other functions as may be assigned to it by the Chairman". Rule 34 is about the Report of Allocation of time to the Council. It says, "The allocation of time in regard to the Bill or group of Bills or other business as recommended by the Committee, shall be reported by the Chairman or, in his absence, by the Deputy Chairman to the Council and notified in the Bulletin". Rule 35 is about the Allocation of time order. It says, "As soon as may be after the report has been made to the Council, a motion may be moved

[Shri Anand Sharma]

by the Deputy Chairman or in his absence, by any other Member of the Committee designated by the Chairman 'that this Council agrees with the allocation of time proposed by the Committee'..." Now, Sir, today's Revised List of Business has listed this Constitution (One Hundred and Twenty-second Amendment) Bill for which no time has been allocated. I have confirmed that it has not come in the Bulletin; it has not come before the House and no time was allocated in the Business Advisory Committee nor was this issue even discussed. So, I take very strong objection to that. This is violation of the Rule. In the last Session, Sir, this matter was raised when Government listed something which was not cleared by the Business Advisory Committee and you, as the Deputy Chairman, had assured the House that that shall not happen again. We have checked this morning the Bulletin; we have checked the minutes of the last Business Advisory Committee meeting meticulously and I say with all responsibility that no time has been allocated and the Government was referring to a time allocated in May that has lapsed once it is referred to the Select Committee. Now, it cannot be taken up under the Rules of this House. *...(Interruptions)...* Sir, this is my point of order. And, Sir, I request for a ruling so that the Government does not repeat this thing in future. Thank you.

MR. DEPUTY CHAIRMAN: When I come to that Bill, I will react to it. *...(Interruptions)...* Now, we shall take up further consideration of the Appropriation (Railways) No.3 Bill, 2015, moved by Shri Suresh Prabhu on 10th August, 2015.

GOVERNMENT BILLS

The Appropriation (Railways) No. 3 Bill, 2015 — *Contd.**

THE MINISTER OF RAILWAYS (SHRI SURESH PRABHU): Sir, I beg to move:

That the Bill to provide for the authorization of appropriation of moneys out of the Consolidated Fund of India to meet the amounts spent on certain services for the purposes of Railways during the financial year ended on the 31st day of March, 2013, in excess of the amounts granted for those services and for that year, as passed by Lok Sabha, be taken into consideration.

The question was put and the motion was adopted.

MR. DEPUTY CHAIRMAN: Now, we shall take up clause-by-clause consideration of the Bill.

* Further discussion from 10th August, 2015.

Clauses 2, 3 and the Schedule were added to the Bill.

Clause 1, the Enacting Formula and the Title were added to the Bill.

SHRI SURESH PRABHU: Sir, I beg to move:

That the Bill be returned.

The question was put and the motion was adopted.

THE MINISTER OF COMMUNICATIONS AND INFORMATION TECHNOLOGY (SHRI RAVI SHANKAR PRASAD): Sir, it was very pleasing to hear 'ayes' for the first time in this Session.

MR. DEPUTY CHAIRMAN: For me also. I also agree with you. Now, we shall take up the Appropriation (No.3) Bill, 2015.

The Appropriation (No. 3) Bill, 2015

THE MINISTER OF FINANCE; THE MINISTER OF CORPORATE AFFAIRS; AND THE MINISTER OF INFORMATION AND BROADCASTING (SHRI ARUN JAITLEY): Sir, I rise to move:

That the Bill to authorise payment and appropriation of certain further sums from and out of the Consolidated Fund of India for the services of the financial year 2015-16, as passed by Lok Sabha, be taken into consideration.

The question was put and the motion was adopted.

MR. DEPUTY CHAIRMAN: Now, we shall take up clause-by-clause consideration of the Bill.

Clauses 2, 3 and the Schedule were added to the Bill.

Clause 1, the Enacting Formula and the Title were added to the Bill.

SHRI ARUN JAITLEY: Sir, I beg to move:

That the Bill be returned.

The question was put and the motion was adopted.

MR. DEPUTY CHAIRMAN: Thanks for all co-operation and keeping silence. Thank you very much. Now, the Constitution (One Hundred and Twenty-Second Amendment) Bill, 2014...(Interruptions)... Shri Arun Jaitley to move...(Interruptions)...

श्री नरेश अग्रवाल (उत्तर प्रदेश): नहीं, सर ...(व्यवधान)...

SHRI ANAND SHARMA (Rajasthan): Sir, you have to give a ruling on my point of order. ...(Interruptions)... I had raised a point of order. ...(Interruptions)...

The Constitution (One Hundred and Twenty-second Amendment) Bill, 2014

THE MINISTER OF FINANCE; THE MINISTER OF CORPORATE AFFAIRS; AND THE MINISTER OF INFORMATION AND BROADCASTING (SHRI ARUN JAITLEY): Sir, I rise to move:

That the Bill further to amend the Constitution of India, as passed by Lok Sabha, and as reported by the Select Committee of Rajya Sabha, be taken into consideration.

Sir, this Bill came up for consideration of this hon. House. At that stage, the Business Advisory Committee had fixed a time of four hours for this particular Bill. ...(Interruptions)... At that stage, this Bill was to be referred to a Select Committee on a proposal made by the hon. Members. ...(Interruptions)...

The Select Committee, under Rule 93, has directly reported the Bill to this House, along with the amended Bill, and I propose that this Bill be taken into consideration and passed.

MR. DEPUTY CHAIRMAN: Motion moved. ...(Interruptions)...

What is this? ...(Interruptions)...

SHRI ARUN JAITLEY: Sir, let me respond to this. ...(Interruptions)...The real purpose is that they want to stall the economic progress of this country. ...(Interruptions)...The issue relating to the External Affairs Minister is merely a pretext. ...(Interruptions)... The real reason is that they do not want the Indian economy to grow, and, that is why, session after session, they have been looking for one pretext or the other to make sure that the GST legislation, which will give a boost to India's GDP and economy, is not passed. ...(Interruptions)... If the Congress Party wants the economy of this country to slow down -- when every political party is in support of it -- they must candidly say so. ...(Interruptions)... They don't need any pretext in order to say this. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Now, this being a. ..(Interruptions)... Please. This being a Constitutional (Amendment) Bill, I cannot proceed in pandemonium. Therefore, I am going to adjourn the House. ...(Interruptions)... The House stands adjourned till 11.00 a.m. on Wednesday, the 12th August, 2015.

*The House then adjourned at sixteen minutes past
two of the clock till eleven of the clock on
Wednesday, the 12th August, 2015.*

