

Vol. 236

No. 1



Tuesday

21 July, 2015

30 Ashadha, 1937 (Saka)

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[P.T.O.]

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Shri P. R. Sundaram  
Shri Ajay Tamta  
Shrimati P. K. Sreemathi Teacher

**Committee on Industry**

Shri K. C. Tyagi – *Chairman*

**RAJYA SABHA**

Shri Ramdas Athawale  
Shri Vivek Gupta  
Shri Bhupender Yadav  
Shri T. K. Rangarajan  
Shri Narendra Budania  
Shri Ashk Ali Tak  
Shri Pramod Tiwari  
Shri Shamsher Singh Manhas  
Dr. Chandrapal Singh Yadav

**LOK SABHA**

Shri Deepak Adhikari (Dev)  
Shri E. T. Mohammed Basheer  
Shri Birendra Kumar Chaudhary  
Shri Mohammad Asrarul Haque

Shrimati Darshana Vikram Jardosh  
Shri Rabindra Kumar Jena  
Shrimati Poonamben Maadam  
Shri Bidyut Baran Mahato  
Shri S. P. Muddahanumegowda  
Dr. Prasanna Kumar Patasani  
Shri M. Srinivasa Rao  
Shri Ramsinh Rathwa  
Shri Konda Veshweshwar Reddy  
Shri Y. V. Subba Reddy  
Shri Rajkumar Saini  
Shri B. Senguttuvan  
Shri Rajveer Singh (Raju Bhaiya)  
Shri Rameshwar Teli  
Shrimati Savitri Thakur  
Shrimati Dev Varma (Moon Moon Sen)  
Shri Rajan Vichare

**Committee on Personnel, Public Grievances, Law and Justice**

Dr. E. M. Sudarsana Natchiappan – *Chairman*

**RAJYA SABHA**

Ms. Anu Aga  
Shri Majeed Memon  
Shri Parimal Nathwani  
Shrimati Rajani Patil  
Shri Sukhendu Sekhar Roy  
Shri Ramchandra Prasad Singh  
Dr. Abhishek Manu Singhvi  
Shri K. T. S. Tulsi  
Shri Bhupender Yadav

**LOK SABHA**

Shri Suvendu Adhikari



Shri Subrata Bakshi  
Adv. Sharad Bansode  
Shri P. P. Chaudhary  
Shri Abu Hasem Khan Chowdhury  
Choudhary Mehboob Ali Kaiser  
Shri Shanta Kumar  
Shri Santosh Kumar  
Shri S. Bhagwant Mann  
Shri Anoop Mishra  
Shri B. V. Naik  
Shri Vincent H. Pala  
Shri V. Panneerselvam  
Shri Vithalbhai Hansrajibhai Radadiya  
Dr. A. Sampath  
Shri Bharat Singh  
Shri Udhayakumar M.  
Shri Varaprasad Rao Velagapalli  
Dr. Anshul Verma  
Shri Tariq Anwar  
Adv. Joice George

**Committee on Science and Technology, Environment and Forests**

Shri Ashwani Kumar – *Chairman*

**RAJYA SABHA**

Shri Anil Madhav Dave  
Shri Prem Chand Gupta  
Shri C. P. Narayanan  
Shri Paul Manoj Pandian  
Dr. T. Subbarami Reddy  
Shri Arvind Kumar Singh  
Shri Bhupinder Singh  
Shrimati Bimla Kashyap Sood

Shri Ronald Sapa Tlau

**LOK SABHA**

Shri Badruddin Ajmal

Shri Muzaffar Hussain Beig

Shrimati Bijoya Chakravarty

Shri Pankaj Chaudhary

Shri Prabhatsinh Pratapsinh Chauhan

Kum. Sushmita Dev

Shri Ninong Ering

Shri Laxman Giluwa

Dr. K. Gopal

Shri Daddan Mishra

Shri Shivaji Adhalrao Patil

Shri Nana Patole

Shri Nagendra Kumar Pradhan

Shri Harinarayan Rajbhar

Shrimati Sandhya Roy

Shri Kirti Vardhan Singh

Shri Nagendra Singh

Shrimati Renuka Sinha

Shri Vikram Usendi

Shrimati Vasanthi M.

Shri Chirag Paswan

**Committee on Transport, Tourism and Culture**

Dr. Kanwar Deep Singh — *Chairman*

**RAJYA SABHA**

Dr. K. Chiranjeevi

Shri Kalpataru Das

Shri Rajeev Shukla

Shri Narendra Kumar Kashyap

Shri Avinash Rai Khanna

Dr. Prabhakar Kore

Shri Kiranmay Nanda

Kumari Selja

Shri Ritabrata Banerjee

**LOK SABHA**

Yogi Adityanath

Shri Vinod Lakhamashi Chavda

Shri Rajeshbhai Naranbhai Chudsama

Mohammed Faizal

Kumari Arpita Ghosh

Shri Rahul Kaswan

Shri Nimmala Kristappa

Shri P. Kumar

Shri Ram Kumar Sharma

Shri Rajesh Pandey

Shri Srinivasa Reddy Ponguleti

Shri Rajesh Ranjan *alias* Pappu Yadav

Shri Prathap Simha

Shri Rakesh Singh

Shri Dushyant Singh

Shri Kunwar Haribansh Singh

Shri Shatrughan Sinha

Shri Dasrath Tirkey

Shri Manoj Tiwari

Shri K. C. Venugopal

Shri Ram Charitra Nishad

**GOVERNMENT OF INDIA****CABINET MINISTERS**

Shri Narendra Modi	The Prime Minister and also in-charge of: The Ministry of Personnel, Public Grievances and Pensions; The Department of Atomic Energy; The Department of Space; and All important policy issues and all other portfolios not allocated to any Minister.
Shri Raj Nath Singh	The Minister of Home Affairs.
Shrimati Sushma Swaraj	The Minister of External Affairs; and The Minister of Overseas Indian Affairs.
Shri Arun Jaitley	The Minister of Finance; The Minister of Corporate Affairs; and The Minister of Information and Broadcasting.
Shri M. Venkaiah Naidu	The Minister of Urban Development; The Minister of Housing and Urban Poverty Alleviation; and The Minister of Parliamentary Affairs.
Shri Nitin Jairam Gadkari	The Minister of Road Transport and Highways; and The Minister of Shipping.
Shri Manohar Parrikar	The Minister of Defence.
Shri Suresh Prabhu	The Minister of Railways.
Shri D.V. Sadananda Gowda	The Minister of Law and Justice.
Sushri Uma Bharati	The Minister of Water Resources, River Development and Ganga Rejuvenation.
Dr. Najma A. Heptulla	The Minister of Minority Affairs.
Shri Ramvilas Paswan	The Minister of Consumer Affairs, Food and Public Distribution.
Shri Kalraj Mishra	The Minister of Micro, Small and Medium Enterprises.

Shrimati Maneka Sanjay Gandhi	The Minister of Women and Child Development.
Shri Ananthkumar	The Minister of Chemicals and Fertilizers.
Shri Ravi Shankar Prasad	The Minister of Communications and Information Technology.
Shri Jagat Prakash Nadda	The Minister of Health and Family Welfare.
Shri Ashok Gajapathi Raju Pusapati	The Minister of Civil Aviation.
Shri Anant Geete	The Minister of Heavy Industries and Public Enterprises.
Shrimati Harsimrat Kaur Badal	The Minister of Food Processing Industries.
Shri Narendra Singh Tomar	The Minister of Mines; and The Minister of Steel.
Shri Chaudhary Birender Singh	The Minister of Rural Development; The Minister of Panchayati Raj; and The Minister of Drinking Water and Sanitation.
Shri Jual Oram	The Minister of Tribal Affairs.
Shri Radha Mohan Singh	The Minister of Agriculture.
Shri Thaawar Chand Gehlot	The Minister of Social Justice and Empowerment.
Shrimati Smriti Zubin Irani	The Minister of Human Resource Development.
Dr. Harsh Vardhan	The Minister of Science and Technology; and The Minister of Earth Sciences.

#### **THE MINISTERS OF STATE (INDEPENDENT CHARGE)**

General (Retd.) V. K. Singh	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.
Rao Inderjit Singh	The Minister of State of the Ministry of Planning; and The Minister of State in the Ministry of Defence.

Shri Santosh Kumar Gangwar	The Minister of State of the Ministry of Textiles.
Shri Bandaru Dattatreya	The Minister of State of the Ministry of Labour and Employment.
Shri Rajiv Pratap Ruddy	The Minister of State of the Ministry of Skill Development and Entrepreneurship; and The Minister of State in the Ministry of Parliamentary Affairs.
Shri Shripad Yesso Naik	The Minister of State of the Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH); and The Minister of State in the Ministry of Health and Family Welfare.
Shri Dharmendra Pradhan	The Minister of State of the Ministry of Petroleum and Natural Gas.
Shri Sarbananda Sonowal	The Minister of State of the Ministry of Youth Affairs and Sports.
Shri Prakash Javadekar	The Minister of State of the Ministry of Environment, Forest and Climate Change.
Shri Piyush Goyal	The Minister of State of the Ministry of Power; The Minister of State of the Ministry of Coal; and The Minister of State of the Ministry of New and Renewable Energy.
Dr. Jitendra Singh	The Minister of State of the Ministry of Development of North Eastern Region; The Minister of State in the Prime Minister's Office; The Minister of State in the Ministry of Personnel, Public Grievances and Pensions; The Minister of State in the Department of Atomic Energy; and The Minister of State in the Department of Space.
Shrimati Nirmala Sitharaman	The Minister of State of the Ministry of Commerce and Industry.
Dr. Mahesh Sharma	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.

**THE MINISTERS OF STATE**

Shri Mukhtar Abbas Naqvi	The Minister of State in the Ministry of Minority Affairs; and The Minister of State in the Ministry of Parliamentary Affairs.
Shri Ram Kripal Yadav	The Minister of State in the Ministry of Drinking Water and Sanitation.
Shri Haribhai Parthibhai Chaudhary	The Minister of State in the Ministry of Home Affairs.
Shri Sanwar Lal Jat	The Minister of State in the Ministry of Water Resources, River Development and Ganga Rejuvenation.
Shri Mohanbhai Kalyanjibhai Kundariya	The Minister of State in the Ministry of Agriculture.
Shri Giriraj Singh	The Minister of State in the Ministry of Micro, Small and Medium Enterprises.
Shri Hansraj Gangaram Ahir	The Minister of State in the Ministry of Chemicals and Fertilizers.
Shri G. M. Siddeshwara	The Minister of State in the Ministry of Heavy Industries and Public Enterprises.
Shri Manoj Sinha	The Minister of State in the Ministry of Railways.
Shri Nihalchand	The Minister of State in the Ministry of Panchayati Raj.
Shri Upendra Kushwaha	The Minister of State in the Ministry of Human Resource Development.
Shri Radhakrishnan P.	The Minister of State in the Ministry of Road Transport and Highways; and The Minister of State in the Ministry of Shipping.
Shri Kiren Rijiju	The Minister of State in the Ministry of Home Affairs.
Shri Krishan Pal	The Minister of State in the Ministry of Social Justice and Empowerment.

Dr. Sanjeev Kumar Balyan	The Minister of State in the Ministry of Agriculture.
Shri Mansukhbhai Dhanjibhai Vasava	The Minister of State in the Ministry of Tribal Affairs.
Shri Vishnu Deo Sai	The Minister of State in the Ministry of Mines; and The Minister of State in the Ministry of Steel.
Shri Sudarshan Bhagat	The Minister of State in the Ministry of Rural Development.
Prof. (Dr.) Ram Shankar Katheria	The Minister of State in the Ministry of Human Resource Development.
Shri Y. S. Chowdary	The Minister of State in the Ministry of Science and Technology; and The Minister of State in the Ministry of Earth Sciences.
Shri Jayant Sinha	The Minister of State in the Ministry of Finance.
Col. Rajyavardhan Singh Rathore	The Minister of State in the Ministry of Information and Broadcasting.
Shri Babul Suprio	The Minister of State in the Ministry of Urban Development; and The Minister of State in the Ministry of Housing and Urban Poverty Alleviation.
Sadhvi Niranjana Jyoti	The Minister of State in the Ministry of Food Processing Industries.
Shri Vijay Sampla	The Minister of State in the Ministry of Social Justice and Empowerment.



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**PARLIAMENTARY DEBATES**

**OFFICIAL REPORT**

**Two Hundred and Thirty Sixth Session of the Rajya Sabha**

*Commencing on the 21st July, 2015/30th Ashadha, 1937 (Saka)*

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# RAJYA SABHA

*Tuesday, The 21st July, 2015/30th Ashadha, 1937 (Saka)*

*The House met at eleven of the clock,*

MR. CHAIRMAN *in the Chair.*

(The National Anthem, "*Jana Gana Mana*", was played.)

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## MEMBER SWORN

Shri M. J. Akbar (Jharkhand)

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## OBITUARY REFERENCES

MR. CHAIRMAN: I refer with profound sorrow to the passing away of Shri Govindrao Adik, Shri Ghulam Mohammad Mir and Shri Surendra Kumar Singh, former Members of this House.

Shri Govindrao Adik passed away on the 6th of June, 2015, at the age of 76 years.

Born in June, 1939, at Ahmednagar district in Maharashtra, Shri Govindrao Adik was educated at M.E.S. College (now Garware College) and Law College, Pune.

An Advocate by profession, Shri Adik practised law in Shirampur, Maharashtra from 1966 to 1971. He was the Chairman of the Belapur Sugar and Allied Industries Ltd. and Founder of the Consumers' Co-operative, Shirampur, Maharashtra. He served as the President of the Rashtriya State Transport Kamgar Congress, the Government of India Press Employees Union, Delhi and the Indian National Trade Union Congress, Maharashtra. He was also the Director of the Environmental and Consumer Protection Foundation, Delhi.

As a social worker, Shri Adik was actively involved with the workers' movement, rural growth and economic development of backward areas. He was instrumental in establishing the Foundation for Rural Integration, Education, Nutrition and Development Services (FRIENDS) devoted for the development and uplift of the rural masses. Shri Adik was also the Founder and Executive President of the Nav Bharat Abhiyan, Founder Chairman of the Maharashtra Krishak Samaj and the Founder and Chief Editor of the 'Weekly Shirampur Times'. He also served as the Chairman of the Maharashtra State Road Transport Corporation from 1990 to 1992.

Shri Govindrao Adik started his legislative career as a Member of the Maharashtra Legislative Assembly in 1972 and was a Member of that Assembly for three consecutive terms, that is, from 1972 to 1978, from 1978 to 1980 and from 1980 to 1985. He was also a Member of the Maharashtra Legislative Council for two consecutive terms, from July, 2000 to June, 2006 and again from June, 2006 to March, 2009. He served as a Cabinet Minister in the Government of Maharashtra and held the portfolios of Irrigation and Command Area Development Authority, Law and Judiciary, Information and Publicity Departments from 1979 to 1980 and of Agriculture and Law and Judiciary from January, 2003 to October, 2005.

Shri Govindrao Adik represented the State of Maharashtra in this House for three terms, from August, 1993 to April, 1994, from April, 1994 to April, 2000 and again from August, 2009 to April, 2012.

In the passing away of Shri Govindrao Adik, the country has lost an able administrator, a distinguished parliamentarian and a dedicated social worker.

Shri Ghulam Mohammad Mir passed away on the 12th of June, 2015, at the age of 83 years.

Born in April, 1932 in Poonch district of Jammu and Kashmir, Shri Ghulam Mohammad Mir was educated at the Tyndale Biscoe Memorial College, Srinagar, and the St. Stephen's College and the Faculty of Law, Delhi University.

An advocate by profession, Shri Mir served as the President of the Municipal Council, Poonch in 1958. He was an active Member in several Committees of the State Legislature and other Organisations and contributed significantly towards the upliftment of the weaker and the downtrodden sections of the society.

Shri Ghulam Mohammad Mir started his legislative career as a Member of the Jammu and Kashmir Legislative Council in 1962. He was also a Member of Jammu and Kashmir Legislative Assembly twice, in 1967 and 1972. He served as the Minister of State for Irrigation and Power, Parliamentary Affairs and Labour and Social Welfare in the Government of Jammu and Kashmir.

Shri Ghulam Mohammad Mir represented the State of Jammu and Kashmir in this House from April, 1964 to March, 1967.

In the passing away of Shri Ghulam Mohammad Mir, the country has lost a distinguished parliamentarian and an able administrator.

Shri Surendra Kumar Singh passed away on the 13th of June, 2015, at the age of 82 years.

Born in September, 1932, at Raigarh district in Chhattisgarh, Shri Surendra Kumar Singh was educated at the Rajkumar College, Raipur; Mayo College, Ajmer and St. Xavier's College, Mumbai.

An agriculturist, Shri Singh served as the President of the Chhattisgarh Sangarsh Morcha, Raigarh. He worked tirelessly for the upliftment of the tribals and the downtrodden sections of the society. He contributed significantly to the revival of the cultural heritage of Raigarh, especially the works of Sangeet Samrat Raja Chakradhar Singh, founder of the Raigarh Gharana of Kathak dance, and also the tribal folk dances of Raigarh.

Shri Surendra Kumar Singh started his legislative career as a Member of the Madhya Pradesh Legislative Assembly in 1962 and was a Member of that Assembly from 1962 to 1967 and also from 1972 to 1990.

Shri Surendra Kumar Singh represented the State of Madhya Pradesh in this House from April, 1996 to October, 2000 and the State of Chhattisgarh from November, 2000 to April, 2002.

In the passing away of Shri Surendra Kumar Singh, the country has lost a distinguished parliamentarian and a dedicated social worker.

We deeply mourn the passing away of Shri Govindrao Adik, Shri Ghulam Mohammad Mir and Shri Surendra Kumar Singh.

I request Members to rise in their places and observe silence as a mark of respect to the departed.

*(Hon. Members then stood in silence for one minute)*

MR. CHAIRMAN: Secretary-General will convey to the members of the bereaved families our deep sense of sorrow and sympathy.

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**FELICITATIONS TO SCIENTISTS AND ENGINEERS OF ISRO ON  
SUCCESSFUL LAUNCH OF PSLV C-28  
AND  
INDIAN TENNIS PLAYERS, SANIA MIRZA, LEANDER PAES AND  
SUMIT NAGAL ON WINNING TITLES AT WIMBLEDON  
LAWN TENNIS CHAMPIONSHIP**

MR. CHAIRMAN: Hon. Members, Indian Space Research Organisation (ISRO) successfully launched PSLV C-28, the heaviest commercial launch since its inception, from the Satish Dhawan Space Centre at Sriharikota, on the 10th of July, 2015.

The successful launch adds yet another significant milestone in the Indian space technology. The credit for this landmark achievement, undoubtedly, goes to our scientific community, particularly those working with the ISRO.

On behalf of the House and on my own behalf, I congratulate the scientists and engineers who were associated with this project and I do hope that they will continue to scale greater heights and make the country proud of their achievements.

Hon. Members, it is with a sense of great pride to mention that three Indian tennis players won titles at the prestigious Wimbledon Lawn Tennis Championship held in London in July, this year. Ms. Sania Mirza became the first Indian to win the Women's Doubles, Shri Leander Paes won the Mixed Doubles and Shri Sumit Nagal won the Boy's Doubles title.

Their achievements would be a great source of inspiration for our younger generations and particularly sportspersons throughout the country.

On behalf of the House and on my own behalf, I congratulate Ms. Sania Mirza, Shri Leander Paes, and Shri Sumit Nagal and wish them the very best in all their future endeavours.

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### **PAPERS LAID ON THE TABLE**

SECRETARY-GENERAL: Sir, I lay on the Table, a statement (in English and Hindi) showing the following Bills passed by the Houses of Parliament during the Two Hundred and Thirty Fifth Session of the Rajya Sabha and assented to by the President :

- (1) The Appropriation (Railways) No. 2 Bill, 2015.
- (2) The Regional Rural Banks (Amendment) Bill, 2015.
- (3) The Appropriation (No.2) Bill, 2015.
- (4) The Warehousing Corporations (Amendment) Bill, 2015.
- (5) The Repealing and Amending Bill, 2015.
- (6) The Payment and Settlement Systems (Amendment) Bill, 2015.
- (7) The Repealing and Amending (Second) Bill, 2015.
- (8) The Finance Bill, 2015.
- (9) The Companies (Amendment) Bill, 2015.

- (10) The Black Money (Undisclosed Foreign Income and Assets) and Imposition of Tax Bill, 2015.
- (11) The Constitution (One Hundredth Amendment) Bill, 2015.

[Placed in Library. See No. L.T. 3158/16/15]

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### MESSAGE FROM LOK SABHA

#### The Whistle Blowers Protection (Amendment) Bill, 2015

SECRETARY-GENERAL: Sir, I have to report to the House the following message received from the Lok Sabha, signed by the Secretary-General of the Lok Sabha:—

“In accordance with provisions of rule 96 of the Rules of Procedure and Conduct of Business in Lok Sabha, I am directed to enclose the Whistle Blowers Protection (Amendment) Bill, 2015, as passed by Lok Sabha at its sitting held on the 13th May, 2015.”

Sir, I lay a copy of the Bill on the Table.

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### PAPERS LAID ON THE TABLE — *Contd.*

#### Ordinances promulgated by the President

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, under sub-clause (a) of clause (2) of article 123 of the Constitution, a copy each (in English and Hindi) of the following Ordinances:—

- I. The Right to Fair Compensation and Transparency in Land Acquisition, Rehabilitation and Resettlement (Amendment) Second Ordinance, 2015 (Ordinance No.5 of 2015), promulgated by the President on the 30th of May, 2015.  
[Placed in Library. See No. L.T. 2719/16/15]
- II. The Negotiable Instruments (Amendment) Ordinance, 2015 (Ordinance No.6 of 2015), promulgated by the President on the 15th of June, 2015.  
[Placed in Library. See No. L.T. 2720/16/15]

#### Draft Notification of the Ministry of Finance

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): Sir, I lay on the Table, under sub-section (38) of Section 3 of the Securitisation and Reconstruction of Financial Assets and Enforcement of

Security Interest Act, 2002, a copy (in English and Hindi) of the Ministry of Finance (Department of Financial Services) Draft Notification No. S.O. Nil (E), (*vide* File No. 6/1/2014-Recovery), dated Nil regarding notifying non-banking financial companies, which are covered under clause (f) of section 45-I of the Reserve Bank of India Act, 1934 (2 of 1934) and registered with Reserve Bank of India, having asset of five hundred crore rupees and above as per their last audited balance sheet, as "financial institutions". [Placed in Library. *See* No. L.T. 2742/16/15]

### **Notifications of the Ministry of Information and Broadcasting**

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): Sir, I lay on the Table, under Section 34 of the Prasar Bharati (Broadcasting Corporation of India) Act, 1990, a copy each (in English and Hindi) of the following Notifications of the Ministry of Information and Broadcasting:—

- I. No. N-10/19/(A)/2013-PPC, dated the 30th March, 2015, publishing the Prasar Bharati (Broadcasting Corporation of India) Senior Financial Officer and Financial Officer to Chief Engineer [(Civil) in Civil Constructing Wing] Recruitment Regulations, 2015, along with delay Statement.
- II. G.S.R. 461 (E), dated the 5th June, 2015, publishing the Prasar Bharati (Broadcasting Corporation of India) Salaries, Allowances and other Conditions of Service of Chairman, Whole-time Members and Part-time Members (Amendment) Rules, 2015. [Placed in Library. *See* No. L.T. 2748/16/15]

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### **STATEMENT REGARDING ORDINANCE**

#### **Promulgation of the Negotiable Instruments (Amendment) Ordinance, 2015**

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, a statement (in English and Hindi) explaining the circumstances which had necessitated immediate legislation by promulgation of the Negotiable Instruments (Amendment) Ordinance, 2015.

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### **REPORTS OF THE DEPARTMENT-RELATED PARLIAMENTARY STANDING COMMITTEE ON SCIENCE AND TECHNOLOGY, ENVIRONMENT AND FORESTS**

SHRI ASHWANI KUMAR (Punjab): Sir, I present the following Reports (in English and Hindi) of the Department-related Parliamentary Standing Committee on



Science and Technology, Environment and Forests:—

- (i) Two Hundred Sixty-first Report on 'Pollution in Tier-II cities of Punjab-Ludhiana and Amritsar';
- (ii) Two Hundred Sixty-second Report on 'Effects of Pollution on Taj';
- (iii) Two Hundred Sixty-third Report on 'High Level Committee Report to Review various Acts Administered by Ministry of Environment, Forest and Climate Change'; and
- (iv) Two Hundred Sixty-fourth Report on 'Environmental issues in Mumbai and Visakhapatnam'.

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**EVIDENCE TENDERED BEFORE DEPARTMENT-RELATED  
PARLIAMENTARY STANDING COMMITTEE ON SCIENCE  
AND TECHNOLOGY, ENVIRONMENT AND FORESTS**

SHRI ASHWANI KUMAR (Punjab): Sir, I also lay on the table, a copy of the Evidence tendered before the Department-related Parliamentary Standing Committee on Science and Technology, Environment and Forests in relation to its Two Hundred Sixty-third Report on the 'High Level Committee Report to Review various Acts Administered by Ministry of Environment, Forest and Climate Change'.

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**RE. NOTICE UNDER RULE 267**

MR. DEPUTY CHAIRMAN: Now, matters to be raised with permission. ...*(Interruptions)*...

श्री नरेश अग्रवाल (उत्तर प्रदेश): श्रीमन्, हम लोगों ने नोटिस दिया है। ...*(व्यवधान)*... हमने रूल 267 में नोटिस दिया है। ...*(व्यवधान)*...

SHRI ANAND SHARMA (Rajasthan): Sir, under Rule 267 ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: No, please don't display such posters ...*(Interruptions)*... Please don't display the posters. ...*(Interruptions)*... Please don't do that. ...*(Interruptions)*... Please ...*(Interruptions)*... Please don't display the posters. ...*(Interruptions)*... Shri Seelam, please don't do that. ...*(Interruptions)*...

SHRI JESUDASU SEELAM (Andhra Pradesh): Sir, we need an answer.

MR. DEPUTY CHAIRMAN: Mr. Rao, please ...*(Interruptions)*... Please, don't do that. ...*(Interruptions)*... No, no. Please don't do that. ...*(Interruptions)*... Mr. Hanumantha Rao, please don't do that. ...*(Interruptions)*... Okay, all right.

SHRI ANAND SHARMA: Sir, ...(Interruptions)... Sir ...(Interruptions)...

MR. DEPUTY CHAIRMAN: I will come to you. Yes, there is notice. I will give you a chance. There is notice under Rule 267 for suspension of rules, etc. The notices are from Shri Anand Sharma, Shri Pramod Tiwari, Shri Naresh Agrawal, Shri T. K. Rangarajan, Shri K. N. Balagopal. But some of the notices are not in order also. I have to decide whether the motion is to be allowed or not. So, for the first notice, I will allow you. In two or three minutes, you explain. Don't take more than three minutes. Three minutes only.

**श्री आनन्द शर्मा** (राजस्थान): डिप्टी चेयरमैन सर, जो ज्वलंत विषय सामने आया है, मैं उसको आपके माध्यम से सदन के अंदर तथा देश के सामने रखना चाहता हूं। पिछले सत्र और इस सत्र के अंतराल में कुछ बातें सामने आई हैं, जिनसे बुनियादी सवाल खड़ा हुआ कि पिछले चुनाव के बाद भारत के प्रधान मंत्री माननीय श्री नरेंद्र मोदी जी ने देश की जनता को जो आश्वासन दिया था कि उनके शासन में पारदर्शिता होगी, ईमानदारी होगी, भ्रष्टाचार के खिलाफ कार्यवाही होगी और जवाबदेही तय होगी, तो अब जो घटनाक्रम हुआ है, उससे ये चारों बातें गलत हो रही हैं। माननीय नेता सदन, जो वित्त मंत्री हैं, आपने दिसम्बर महीने में इस देश को और इस सदन को सूचना दी तथा मार्च महीने में आपके माननीय राज्य मंत्री, श्री जयंत सिन्हा जी, आपने सूचना दी कि Enforcement Directorate की ललित मोदी नाम के खिलाफ 14 मुकदमों में FIA दर्ज है। आपने मार्च महीने में देश को सूचना दी कि भारत ने Interpol के माध्यम से इस व्यक्ति के खिलाफ blue corner notice जारी किया है। सरकार बदलती है, कानून नहीं बदलता।

माननीय उपसभापति महोदय, Enforcement Directorate ने प्रयास किया कि व्यक्ति आए और जांच के लिए पेश हो और उसके बाद उस पर कार्यवाही हो। वे जांच में शामिल नहीं हुए और देश छोड़कर चले गए। भारत सरकार ने England की सरकार से बार-बार आग्रह किया कि इनकी तलाश कानून को है, इसलिए इस व्यक्ति को England छोड़ने न दिया जाए और इसको भारत वापस भेजा जाए। माननीय उपसभापति महोदय, पिछले अगस्त महीने में एक घटना घटी, जिसकी जानकारी सदन को, देश को या किसी व्यक्ति को नहीं थी। इस सरकार के सत्ता में आने के ढाई महीने के अन्दर ही, मैं बड़े दुख के साथ इस बात को कहता हूँ, मैं भारत की विदेश मंत्री का सम्मान करता हूँ, उन्होंने ब्रिटेन की सरकार से यह कहा कि इस व्यक्ति को वहां के ट्रैवल डॉक्युमेंट्स दे दिए जाएँ। कहा यह गया कि कोई मानवता की बात थी, कोई पत्नी के इलाज की बात थी। मैं मान सकता हूँ कि उनको यह विश्वास दिलाया गया हो, लेकिन बाद की जो जानकारी आई है, वह भी बिल्कुल गलत थी। वह व्यक्ति पर्यटन के लिए, मौज-मस्ती के लिए ब्रिटेन से ट्रैवल डॉक्युमेंट्स लेकर पूरी दुनिया में घूम रहा है। वह कभी हवाना में है, कभी मांटेनेग्रो में है, कभी वेनिस में है, तो यह मानवता कहां-कहां बिखर रही है, वह मानवता का दर्द कहां-कहां है, यह प्रश्न है। माननीय उपसभापति महोदय, अगर मान भी लिया जाए कि सरकार और विदेश मंत्री इस बात से संतुष्ट थे, तो वह भारत का नागरिक है, उसका आग्रह भारत की सरकार से होना चाहिए था और अगर पर्यटन की यात्रा के कागज हैं, तो वे भारत को देने चाहिए थे। **...(समय की घंटी)...** सर, पहले मुझे अपनी बात खत्म करने दी जाए। यह बात तब सामने आई, जब इंग्लैंड के अन्दर जांच शुरू हुई। भारत को दस महीने के बाद लंदन से पता लगा। दूसरी बात, इसी व्यक्ति के... **...(व्यवधान)...** residence के पक्ष में **...(व्यवधान)...**

MR. DEPUTY CHAIRMAN: I have not permitted the motion.

SHRI ANAND SHARMA: Sir, I seek your indulgence. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: I have not decided... ...(Interruptions)...

SHRI ANAND SHARMA: Sir, I seek your indulgence, not interruption by the Treasury Benches. ...(Interruptions)... Sir, please. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Now, you have to conclude. ...(Interruptions)...

SHRI ANAND SHARMA: Sir, the matter is not over. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: You have to conclude. I have not permitted the motion. ...(Interruptions)...

SHRI ANAND SHARMA: Then to support the application of British residence of this very person who is wanted by law, a senior leader, a serving Chief Minister gave an affidavit, and said that... ...(Interruptions)... ...by the Indian Government. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Don't go into the merit. ...(Interruptions)...

SHRI ANAND SHARMA: The Chief Minister of Rajasthan... ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Don't go into the merit. ...(Interruptions)...

SHRI ANAND SHARMA: No, Sir; this is an issue... ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Don't go into the merit. ...(Interruptions)...

SHRI ANAND SHARMA: When it comes to probity... ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Don't go into the merit.

SHRI ANAND SHARMA: Sir, I am not going into the merit; I am stating the fact. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: I have to decide; that is all. ...(Interruptions)...

SHRI ANAND SHARMA: I will produce before this House that affidavit. सर, मुझे यह कहना है कि आपने जो कहा था, आपने मर्यादा तोड़ी है, आपने गरिमा तोड़ी है, इन कार्यों से।

MR. DEPUTY CHAIRMAN: All this you can say at the time of discussion, not now.

**श्री आनन्द शर्मा :** यह सदन जवाबदेही तय करेगा। ...(समय की घंटी)... भ्रष्टाचार को संरक्षण दिया गया है, पद का दुरुपयोग किया गया है।

MR. DEPUTY CHAIRMAN: All this you can say, if we take it up for discussion. ...*(Interruptions)*...

SHRI ANAND SHARMA: It is gross impropriety. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Now, the question is only... ...*(Interruptions)*...

SHRI ANAND SHARMA: This House must enforce accountability on this Government. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Mr. Anand Sharma, please. ...*(Interruptions)*... Mr. Anand Sharma, you cannot discuss it now. ...*(Interruptions)*... Don't discuss it now. ...*(Interruptions)*...

SHRI ANAND SHARMA: The Prime Minister has to answer. ...*(Interruptions)*... The Prime Minister cannot escape... ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: That is enough. Mr. Anand Sharma, please take your seat. ...*(Interruptions)*... Please take your seat. ...*(Interruptions)*... Now, Shri Arun Jaitley. ...*(Interruptions)*...

SHRI SITARAM YECHURY (West Bengal): Sir, I have only one request. ...*(Interruptions)*...

सभा के नेता (श्री अरुण जेटली) : आप पहले सुन लीजिए, उसके बाद ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: Shri Arun Jaitley. ...*(Interruptions)*... Listen to him. ...*(Interruptions)*... Shri Arun Jaitley. ...*(Interruptions)*...

SHRI SITARAM YECHURY: Sir, you hear all of us, and then let him reply. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: The Leader of the House wants to speak. I have to allow him. ...*(Interruptions)*... The Leader of the House wants to speak. ...*(Interruptions)*... You sit down. ...*(Interruptions)*... Yes, I will call you. I will allow you. ...*(Interruptions)*... The Leader of the House wants to speak; I have to allow him. ...*(Interruptions)*... The Leader of the House wants to speak; that is why I am allowing. ...*(Interruptions)*... No, that is up to him. ...*(Interruptions)*... He wants to speak... ...*(Interruptions)*...

श्री आनन्द शर्मा: पहले त्यागपत्र होगा ...*(व्यवधान)*... नए नियम नहीं हो सकते। ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: Let me listen to what he says. ...*(Interruptions)*...

SHRI SITARAM YECHURY: Let the Leader of the House respond after we speak. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Yechuryji, let me listen to what he says. ...*(Interruptions)*... I will call you also. I will allow you also. ...*(Interruptions)*...

अल्पसंख्यक कार्य मंत्रालय में राज्य मंत्री; तथा संसदीय कार्य मंत्रालय में राज्य मंत्री (श्री मुख्तार अब्बास नकवी): सर, अगर ये नेता सदन को बोलने नहीं देंगे ...*(व्यवधान)*... यह बात उचित नहीं है। ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: When the Leader of the House wants to speak, I have to allow him. ...*(Interruptions)*... I will allow you also. ...*(Interruptions)*...

SHRI SITARAM YECHURY: Let the Leader of the House respond after we speak. ...*(Interruptions)*... Sir, I wish to say let all the leaders be allowed to speak first and, then, the Leader of the House can respond. ...*(Interruptions)*...

श्री अरुण जेटली : माननीय उपसभापति जी ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: The Leader of the House wants to speak. I will have to allow him. ...*(Interruptions)*... He listened to you silently. So, you please listen to him. ...*(Interruptions)*...

श्री अरुण जेटली : माननीय उपसभापति जी, श्री आनन्द शर्मा जी ने ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: I have permitted him. ...*(Interruptions)*... I have permitted him. ...*(Interruptions)*... Mr. Anand Sharma, please listen to him. ...*(Interruptions)*...

श्री नरेश अग्रवाल (उत्तर प्रदेश): सर, पहले हमें बोलने दिया जाए।...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: You please listen to him. ...*(Interruptions)*... I will allow you also. ...*(Interruptions)*...

श्री सीताराम येचुरी : सर, पहले हम लोगों को सुन लीजिए, उसके बाद नेता सदन जवाब दें। ...*(व्यवधान)*...

श्री अरुण जेटली : माननीय उपसभापति जी, पहले आप सब मेरी बात सुन तो लीजिए। ...*(व्यवधान)*...

श्री मुख्तार अब्बास नकवी: अगर आप नेता सदन को बोलने नहीं देंगे, तो हमें भी ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: Please sit down. ...*(Interruptions)*... I will not allow this. ...*(Interruptions)*... Please do not display posters. ...*(Interruptions)*... Please do not do that. ...*(Interruptions)*...

श्री अरुण जेटली : माननीय उपसभापति जी, ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: Mr. Hanumantha Rao, please do not display posters. ...*(Interruptions)*... Please do not do that. ...*(Interruptions)*... Mr. Hanumantha Rao, please do not do that. ...*(Interruptions)*... No; no. You cannot do that. ...*(Interruptions)*...

संचार और सूचना प्रौद्योगिकी मंत्री (श्री रवि शंकर प्रसाद) : सर, यह क्या तरीका है? ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: You cannot do that. ...**(Interruptions)**... You cannot do that. ...**(Interruptions)**... You know, it will always be noticed. ...**(Interruptions)**... Do not do that. ...**(Interruptions)**...

श्री अरुण जेटली: माननीय उपसभापति जी, मैं सारा विवाद समाप्त कर देता हूं। ...**(व्यवधान)**... श्री आनन्द शर्मा जी का यह कहना है कि नियम 267 के तहत, हाउस सस्पेंड करके, इस विषय पर चर्चा होनी चाहिए। ...**(व्यवधान)**... आप चर्चा को तुरन्त आरम्भ कीजिए। विदेश मंत्री, श्रीमती सुषमा स्वराज जी यहां आकर इसका तुरन्त जवाब देंगी। ...**(व्यवधान)**... You start discussion right now. ...**(Interruptions)**...

MR. DEPUTY CHAIRMAN: What is the problem now? He has agreed for a discussion. ...**(Interruptions)**... What is your problem now? ...**(Interruptions)**... He has agreed for a discussion. ...**(Interruptions)**...

श्री मुख्तार अब्बास नकवी : आप उपसभापति जी के आदेश को तो सुन लीजिए।

MR. DEPUTY CHAIRMAN: What is your problem now? ...**(Interruptions)**... He has agreed for a discussion. ...**(Interruptions)**...

SHRI SITARAM YECHURY: Sir, you just give a minute to each of the leaders first and then he can reply. ...**(Interruptions)**...

MR. DEPUTY CHAIRMAN: Mr. Yechury, the Leader of the House has agreed for a discussion. ...**(Interruptions)**... What is the problem now? ...**(Interruptions)**... All of you please go back to your seats. We can start the discussion. ...**(Interruptions)**...

SHRI SITARAM YECHURY: Allow the others to speak first and, then, allow him. ...**(Interruptions)**... पहले हमें बोलने के लिए एलाउ किया जाए। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: I have understood your point. But the Leader of the House wanted to speak; so, I had allowed him. ...**(Interruptions)**... The House is adjourned till 12 o' clock.

*The House then adjourned at twenty-nine minutes past eleven of the clock.*

*The House reassembled at twelve of the clock,*

MR. CHAIRMAN *in the Chair.*

श्री नरेश अग्रवाल (उत्तर प्रदेश): माननीय सभापति जी, ...**(व्यवधान)**...

MR. CHAIRMAN: Question No. 1. ...**(Interruptions)**.. No posters, please. ...**(Interruptions)**..

श्री नरेश अग्रवाल: माननीय सभापति जी, हमने एक नोटिस दिया है। ...**(व्यवधान)**...

MR. CHAIRMAN: Nareshji, this is Question Hour. ...(Interruptions)... Please allow the Question Hour. ...(Interruptions)..

SHRI ANAND SHARMA: Sir, it must be given precedence. It is a matter of national concern. ...(Interruptions)..

SHRI ARUN JAITLEY: We are ready for discussion. ...(Interruptions)... We are conceding to a discussion; please start. ...(Interruptions)... Why are you running away from a discussion? ...(Interruptions)... We are conceding to a discussion. ...(Interruptions)...

श्री सभापति: आप ऐसा मत कीजिए। ...(व्यवधान)... आप बैठ जाइए। ...(व्यवधान)... आप भी बैठ जाइए। ...(व्यवधान)... प्लीज़ ...(व्यवधान)...

श्री रवि शंकर प्रसाद: आप चर्चा शुरू कीजिए, हम भी तैयार हैं। ...(व्यवधान)...

MR. CHAIRMAN: This is Question Hour. ...(Interruptions).. Only questions will be taken up. ...(Interruptions)... Nareshji, please sit down.

श्री नरेश अग्रवाल: सर, हमें बोलने का मौका दीजिए। ...(व्यवधान)...

श्री सभापति: आप यह क्या कर रहे हैं? ...(व्यवधान)... ऐसा मत कीजिए। ...(व्यवधान)... नहीं, नहीं। प्लीज़ ...(व्यवधान)... आप मेरी बात सुनिए। ...(व्यवधान)... This is Question Hour. ...(Interruptions)... क्वेश्चन ऑवर में यह नहीं सुना जायेगा। ...(व्यवधान)...

श्री अरुण जेटली: आप चर्चा शुरू कीजिए।...(व्यवधान)...

श्री सभापति: नहीं, नहीं। प्लीज़ ...(व्यवधान)...

SHRI ARUN JAITLEY: You don't want a discussion, Mr. Chaturvedi. ...(Interruptions)...

MR. CHAIRMAN: See, this is Question Hour. ...(Interruptions)... Please, please, आप लोग बैठ जाइए। ...(व्यवधान)...

श्री आनन्द शर्मा: सर, ...(व्यवधान)... मैं बड़े सम्मान से कह रहा हूँ कि ...(व्यवधान)...

श्री सभापति: नरेश जी, बैठ जाइए। ...(व्यवधान)... This is Question Hour, please. ...(Interruptions)...

श्री रवि शंकर प्रसाद: सर, ...(व्यवधान)... आप चर्चा शुरू करिए। ...(व्यवधान)... हम तैयार हैं। ...(व्यवधान)... आप अभी चर्चा शुरू करिए। ...(व्यवधान)... हम तैयार बैठे हुए हैं। ...(व्यवधान)...

श्री मुख्तार अब्बास नकवी : सर, ...(व्यवधान)... हम चर्चा के लिए तैयार हैं, लेकिन ये चर्चा से भाग रहे हैं। ...(व्यवधान)... इस पर अभी तुरन्त चर्चा शुरू करिए। हम तैयार हैं। ...(व्यवधान)... अभी दूध का दूध और पानी का पानी हो जायेगा। ...(व्यवधान)...

SHRI ARUN JAITLEY: If you are not ready, come at 2.00 p.m. *...(Interruptions)...* and start the discussion. *...(Interruptions)...*

MR. CHAIRMAN: Please, please. *...(Interruptions)...* Please, please. *...(Interruptions)...* The House is adjourned till 12.30 p.m.

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

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

MR. CHAIRMAN *in the Chair.*

MR. CHAIRMAN: Question No. 1. *...(Interruptions)...* Question No. 1. *...(Interruptions)...* Please. Question No. 1 *...(Interruptions)...*

श्री नरेश अग्रवाल : माननीय सभापति जी, जब हमारा नोटिस स्वीकार कर लिया, नोटिस पर बहस शुरू हो गई, बहस शुरू होने के समय जान-बूझकर सत्ता पक्ष ने *...(व्यवधान)...*

MR. CHAIRMAN: No; no. Nareshji, we are not discussing that. This is Question Hour. *...(Interruptions)...* We are dealing with only Questions. *...(Interruptions)...*

SHRI SITARAM YECHURY: Sir, we all have given notices. The hon. Deputy Leader of the Congress Party was allowed to speak, and after that, the hon. Leader of the House. *...(Interruptions)...*

MR. CHAIRMAN: No, no. Please. *...(Interruptions)...*

SHRI ARUN JAITLEY: Please start the discussion. *...(Interruptions)...*

SHRI SITARAM YECHURY: All that we are saying is that a discussion cannot replace an investigation. We are not an investigating agency. *...(Interruptions)...* We are saying, hear us. *...(Interruptions)...* All that we are saying is hear us. *...(Interruptions)...*

SHRI ARUN JAITLEY: No, no. Please start the discussion. *...(Interruptions)...*

SHRI SITARAM YECHURY: Whatever they say, let them say. But we are saying, hear us. *...(Interruptions)...*

MR. CHAIRMAN: Sitaramji, please. *...(Interruptions)...*

श्री रवि शंकर प्रसाद: सीताराम जी, आप अभी शुरू कर दें, हम तैयार बैठे हैं। *...(व्यवधान)...* गोवा में क्या हो रहा है, वहां क्या हो रहा है? *...(व्यवधान)...*

SHRI ARUN JAITLEY: You don't have to press your case for a discussion; start the discussion right now. *...(Interruptions)...*

श्री आनन्द शर्मा : पैमाने बदल जाते हैं। जब यहां बैठे थे तब कुछ और, तथा वहां चले गए तो कुछ और! *...(व्यवधान)...*



SHRI ARUN JAITLEY: You don't want a discussion. ...(Interruptions)...

MR. CHAIRMAN: What is this? ...(Interruptions)... Please. ...(Interruptions).... Please sit down. ...(Interruptions)... Please sit down. ...(Interruptions)...

SHRI SITARAM YECHURY: Sir, notices have been given.

MR. CHAIRMAN: No, no. Please listen to me. One minute. ...(Interruptions)... Please. ...(Interruptions)... Please. ...(Interruptions)... No, that's not the issue. ...(Interruptions)... Please. ...(Interruptions)...

SHRI ARUN JAITLEY: You don't have to press your case for a discussion. ...(Interruptions)... We will reply right now. ...(Interruptions)...

विपक्ष के नेता (श्री गुलाम नबी आज़ाद): इस विषय पर पहले सुना जाए। ...(व्यवधान)...

† قائد حزب اختلاف (جناب غلام نبی آزاد) : اس وشئے پر پہلے سنا جائے ... (مداخلت) ...

MR. CHAIRMAN: Nobody is being heard. ...(Interruptions)...

SHRI ARUN JAITLEY: Sir, I am making an offer ...(Interruptions)...

MR. CHAIRMAN: No. No. Please. ...(Interruptions)... I would suggest that let the ...(Interruptions)... Please, this is Question Hour. I will not allow anything else. ...(Interruptions)...

SHRI SITARAM YECHURY: Sir, I want to make ...(Interruptions)...

MR. CHAIRMAN: No, no. It is Question Hour. ...(Interruptions)... Do you have a question? ...(Interruptions)...

SHRI ARUN JAITLEY: Sir, if they want to start the discussion, they can start it. ...(Interruptions)... If they want the External Affairs Minister to make a statement, we are ready for that. ...(Interruptions)...

MR. CHAIRMAN: I am sorry. In the Question Hour, only questions and nothing else. ...(Interruptions)...

SHRI ARUN JAITLEY: You are scared of a discussion. ...(Interruptions)... Mrs. Sushma Swaraj will make a statement within five minutes. ...(Interruptions)...

MR. CHAIRMAN: Please. ...(Interruptions)... No, No. Not in the Question Hour. ...(Interruptions)... Not in the Question Hour. ...(Interruptions)... The House is adjourned till 2 p.m.

**WRITTEN ANSWERS TO STARRED QUESTIONS****Treating ailments through Yoga and Naturopathy**

†\*1. SHRI RAM NATH THAKUR: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether it is a fact that Government would provide treatment to the ailing people through Yoga and Naturopathy, if so, the details thereof; and

(b) whether Government has taken any decision to promote treatment through Yoga in all the States, districts and Panchayats of the country, if so, the details thereof ?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) and (b) Yes, Government of India promotes treatment through Yoga and Naturopathy in all the States/Union Territories through Centrally Sponsored Scheme of National AYUSH Mission as per the details given in Statement-I (See below).

Besides, Government of India is providing treatment to the ailing people through Yoga and Naturopathy under autonomous organizations of Ministry of AYUSH namely Morarji Desai National Institute of Yoga, New Delhi, National Institute of Naturopathy, Pune and Central Council of Research in Yoga and Naturopathy. The details are given in Statement-II.

***Statement-I******National AYUSH Mission (NAM)***

The Government of India has approved and notified National AYUSH Mission (NAM) on 29.09.2014 which envisages better access to AYUSH services including Yoga and Naturopathy, strengthening of AYUSH educational institutions, facilitate the enforcement of quality control of Ayurveda, Siddha and Unani and Homoeopathy (ASU and H) drugs and sustainable availability of ASU and H raw-materials in the States/UTs during 12th Plan.

The Mission *inter-alia* makes provision for the following :—

- (i) Co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and Districts Hospitals (DHs) including Yoga and Naturopathy.

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† Original notice of the question was received in Hindi.

- (ii) Upgradation of exclusive State Government AYUSH Hospitals and Dispensaries including Yoga and Naturopathy.
- (iii) Setting up of up to 50 bedded integrated AYUSH Hospital including Yoga and Naturopathy.
- (iv) Upgradation of State Government Under-Graduate and Post-Graduate Educational Institutions including Yoga and Naturopathy.
- (v) Setting up of new State Government AYUSH Educational Institutions including Yoga and Naturopathy in the State where it is not available.
- (vi) Under the flexible components, provision has been kept for Grant-in-aid to the Yoga Wellness centres and Naturopathy hospitals.

The Ministry of AYUSH provides Grant in Aid to the State/UT Governments for the approved State Annual Action Plans (SAAPs) under National AYUSH Mission (NAM) which include the components of Yoga and Naturopathy.

#### ***Statement-II***

*The details of centres in the country where Yoga and Naturopathy treatments have been established by the Government*

Sl. No.	Name of the Yoga and Naturopathy Centre/Institute	Activities
1.	Morarji Desai National Institute of Yoga (MDNIY), New Delhi	Focal institute for Yoga Teaching and Therapy.
2.	National Institute of Naturopathy, Pune	The institute provides treatment facility through Naturopathy and Yoga and conducts training courses and Information, Education and Communication (IEC) activities.
3.	Central Council of Research in Yoga and Naturopathy	Conducting Scientific Research in the field of Yoga and Naturopathy and also engaged in Information, Education and Communication (IEC) activities.

*List of out patient departments of Yoga and Naturopathy under  
Central Council for research in Yoga and Naturopathy*

Sl. No.	State/UT	Name of the OPD with address
1.	Delhi	OPD (Yoga and Naturopathy), Central Council for Research in Yoga and Naturopathy, No. 61-65, Institutional Area, Janakpuri, New Delhi-110058
2.	Delhi	OPD (Yoga and Naturopathy), Room No.20, Psychiatry Wing, Dr. R. M. L. Hospital, New Delhi-110001
3.	Delhi	OPD (Yoga and Naturopathy), D/o Physiology, Lady Harding Medical College, New Delhi-110001
4.	Delhi	OPD (Yoga and Naturopathy), Room. No. 340 and 341, New OPD Block, Safdarjung Hospital and V.M.M.C., New Delhi-110029
5.	Delhi	OPD (Yoga and Naturopathy), D/o Physiology, University College of Medical Sciences, Dilshad Garden, Delhi-110095
6.	Delhi	OPD (Yoga and Naturopathy), Ch. Brahm Prakash Ayurvedic Charak Sansthan, Khera Dabar, Najafgarh, Delhi-110073
7.	Delhi	OPD (Yoga and Naturopathy), Central Research Institute (CRIYN), Rohini, Delhi-110085
8.	Haryana	OPD (Yoga and Naturopathy) Pt. B. D. Sharma University of Health Sciences, Rohtak, Haryana

*The list of Yoga Treatment centres established by Morarji Desai  
National Institute of Yoga (MDNIY)*

Sl. No.	Names of the Dispensaries
1.	CGHS Dispensary, R-55, Sector-11, Noida
2.	CGHS Dispensary, Kingsway Camp, Delhi

Sl. No.	Names of the Dispensaries
3.	CGHS Dispensary, MB Road, Pushp Vihar, New Delhi
4.	CGHS Dispensary, Sadiq Nagar, Siri Fort Road, New Delhi
5.	CGHS Dispensary, C Block, Janakpuri, New Delhi
6.	CGHS Dispensary, Harinagar Ghanta Ghar, New Delhi
7.	CGHS Dispensary, Nangalraya, D Block, Janakpuri, New Delhi
8.	CGHS Dispensary, Sadar Bazar, Delhi Cantt., New Delhi
9.	CGHS Dispensary, Ghaziabad
10.	CGHS Dispensary, Shahdara
11.	CGHS Dispensary, Chanakyapuri
12.	CGHS Dispensary, Laxmi Bai Nagar
13.	CGHS Dispensary, Lajpat Nagar
14.	CGHS Dispensary, Inderpuri
15.	CGHS Dispensary, Sector-6, R. K. Puram
16.	CGHS Dispensary, Sector-4, Pushp Vihar
17.	CGHS Dispensary, Karol Bagh
18.	CGHS Dispensary, Palam, Manglapuri
19.	CGHS Dispensary, Laxmi Nagar

Sl. No.	Name of the Hospital
1.	National Institute of Tuberculosis and Allied Sciences, Sri Aurobindo Marg, New Delhi
2.	Vallabhbhai Patel Chest Institute, University of Delhi, Delhi.
3.	Rajan Babu Institute of Pulmonary Medicine and Tuberculosis, Kingsway Camp, Delhi-09
4.	Institute of Human Behavior and Allied Sciences, Dilshad Garden, Jhilmil, Shahdra, Delhi.

*State-wise number of Hospitals and Dispensaries having Yoga and Naturopathy treatment centres as on 1.4.2014*

Sl. No.	State/UT	Yoga treatment centres		Naturopathy treatment centres	
		Hospitals	Dispensaries	Hospitals	Dispensaries
1	2	3	4	5	6
1.	Andhra Pradesh	0	0	0	0

1	2	3	4	5	6
2.	Arunachal Pradesh	0	0	0	0
3.	Assam	0	0	0	0
4.	Bihar	0	0	0	0
5.	Chhattisgarh	1	0	0	0
6.	Delhi	0	0	0	0
7.	Goa	0	0	0	0
8.	Gujarat	0	16	6	14
9.	Haryana	0	0	0	0
10.	Himachal Pradesh	0	0	1	0
11.	Jammu and Kashmir	0	0	0	0
12.	Jharkhand	0	0	0	0
13.	Karnataka	3	0	9	5
14.	Kerala	0	5	2	0
15.	Madhya Pradesh	0	0	0	0
16.	Maharashtra	0	0	0	0
17.	Manipur	0	17	13	13
18.	Meghalaya	0	0	0	0
19.	Mizoram	0	0	0	0
20.	Nagaland	0	0	0	1
21.	Odisha	0	35	0	30
22.	Punjab	0	0	0	0
23.	Rajasthan	1	0	2	3
24.	Sikkim	0	0	0	0
25.	Tamil Nadu	1	54	0	0
26.	Tripura	0	0	0	0
27.	Uttar Pradesh	0	0	0	0
28.	Uttarakhand	0	0	0	0
29.	West Bengal	0	0	0	0
30.	A and N Islands	1	3	1	0
31.	Chandigarh	0	0	0	0
32.	D and N Haveli	0	0	0	0
33.	Daman and Diu	0	0	0	0

1	2	3	4	5	6
34.	Lakshadweep	0	0	0	0
35.	Puducherry	0	4	0	0
36.	Telangana*	0	0	0	47
TOTAL		7	134	34	113

\* The figures of Telangana State is provisional. The figures of Andhra Pradesh is based on information supplied by State as on 01.07.2014 separately for Andhra Pradesh. Hence for the Telangana State, it is calculated based on last year data of Andhra Pradesh minus current year data of Andhra Pradesh.

Source: State Governments and concerned agencies.

### Free treatment for serious ailments in Uttar Pradesh

†\*2. SHRI JUGUL KISHORE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has chalked out any plan for providing free treatment for serious ailments in the backward districts of Uttar Pradesh; and

(b) if not, the reasons therefor and by when such a scheme would be ready for implementation?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Financial and technical support is extended to States/UTs under National Health Mission (NHM) to strengthen their healthcare system, including support for provision of free drugs and diagnostics services and free healthcare services in public health facilities based on the proposals submitted by the States/UTs in their Programme Implementation Plans. However, Public Health being a State subject, the primary responsibility to provide healthcare services to the citizens lies with State/UT Governments.

Further, based on composite health index, bottom 25% of the districts in every State are treated as High Priority Districts (HPDs) and the States have been advised to allocate higher per capita funding under NHM to address health challenges in the HPDs.

Government of India also provides financial assistance to patients living below poverty line suffering from select life threatening diseases undergoing treatment in Government hospitals, under the schemes of Health Minister's Discretionary Grant, Health Minister's Cancer Patient Fund and Rashtriya Arogya Nidhi.

Under Rashtriya Swasthya Bima Yojana, GoI provides supports to the States/UTs

to offer health insurance cover upto ₹ 30,000/- for secondary care hospitalisation to Below Poverty Line and 11 other categories of unorganised worker families.

The National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Disease and Stroke is under implementation in all States to set up NCD clinics for providing early diagnosis, treatment and follow up.

### **Revision of Double Taxation Treaty with Mauritius**

\*3. SHRI MANI SHANKAR AIYAR: Will the Minister of FINANCE be pleased to refer to Unstarred Question 398 answered on 5 August, 2014 in the Rajya Sabha and state:

(a) whether there is any veracity to the report that Mauritius has agreed to revising its Double Taxation Treaty with India to end round-tripping and other malpractices;

(b) if so, the steps that are proposed to be taken in this regard; and

(c) whether the Prime Minister raised this issue during his visit to Mauritius, if so, the outcome thereof?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) to (c) Negotiations are going on between India and Mauritius for the revision of the Double Taxation Avoidance Convention (DTAC) to check the possibility of treaty abuse, round tripping etc. A Joint Working Group (JWG) has been set up for this purpose. Ten JWG meetings had been held until last year.

During his visit to Mauritius from 11th March to 12th March, 2015, Hon'ble Honorable Prime Minister of India proposed that negotiations may be resumed within the framework of Joint Working Group to discuss all outstanding issues between India and Mauritius under the DTAC. Pursuant to the same, the Eleventh JWG meeting was held from 29th June to 1st July, 2015 in New Delhi between both countries in which all outstanding issues were discussed. The negotiations are at an advanced stage.

### **Complaints against re-sale price arrangements**

\*4. DR. CHANDAN MITRA: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) whether the Competition Commission of India (CCI) has received certain complaints on the existence of re-sale price arrangements between manufacturers and distributors/retailers;

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



(c) the steps taken by Government to protect the interests of the consumers in the matter?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) and (b) Information on four cases under section 19(1)(a) of the Competition Act, 2002 on alleged contravention of the provisions of the Act relating to anti-competitive re-sale price agreements has been received by the Competition Commission of India (CCI) as under:—

- (i) Case No. 68/2013 (by Ghanshyam Das Vij against M/s Bajaj Corp. Ltd. and Ors.) – The Director General, CCI (DG, CCI) has submitted the investigation report in the matter, which is under consideration of the Commission.
- (ii) Case No. 36/2014 (by M/s Fx Enterprise Solutions India Pvt. Ltd. against M/s Hyundai Motor India Ltd.) – The matter is under investigation by DG, CCI.
- (iii) Case No. 61/2014 [by M/s Jasper Infotech Pvt. Ltd. (Snapdeal) against M/s Kaff Appliances (India) Pvt. Ltd.] – The matter is under investigation by DG, CCI.
- (iv) Case No. 09/2015 (by M/s Shubham Sanitarywares against M/s HSIL Ltd.) – The matter is under consideration of the Commission for a *prima facie* view.

(c) CCI has been established under the Competition Act, 2002 to prevent practices having adverse effect on competition.

The Government in the Ministry of Consumer Affairs, Food and Public Distribution, Department of Consumer Affairs has enacted the Consumer Protection Act, 1986 to provide for protection of the interests of consumers and for the purpose, a three tier quasi-judicial machinery has been set up at District, State and Central levels to provide simple and speedy redressal of consumer disputes. These quasi-judicial bodies have been empowered to give relief of a specific nature and award, wherever appropriate, compensation to consumers.

#### **Increasing access to safe abortion**

\*5. SHRI T. RATHINAVEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government is considering allowing AYUSH doctors to conduct non-invasive abortions, taking a cue from a study conducted by the Population Council;

(b) whether it is also a fact that this is aimed at increasing access to safe abortion by expanding the number of healthcare providers; and

(c) whether it is also a fact that Government is considering to increase abortion period to 24 weeks, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Government of India has formulated a draft Bill on amendments to the Medical Termination of Pregnancy Act, 1971. This draft Bill has a provision for including AYUSH doctors, (excluding Yoga and Naturopathy) and paramedical staff in the public sector to administer medicines for abortion (non surgical) only upto nine weeks of gestation for women seeking safe abortion services. However, this draft Bill was put in the public domain and large number of comments were received. The draft Bill is being examined in the light of comments received.

(b) It is observed that despite abortion being legal in the country since 1971, about 2/3rd of abortions performed in the country are under unsafe conditions. Eight per cent of all maternal deaths, *i.e.* 3520 of the approximately 44,000 estimated maternal deaths each year, are attributed to complications of unsafe abortions. It is the third most significant cause of maternal mortality in the country. In order to reduce the Maternal Mortality Ratio (MMR) and to further expand access to safe abortion services for women, particularly in rural areas where there is shortage of Registered Medical Practitioners (RMP), the Ministry has drafted a proposal to introduce amendments to the MTP Act.

(c) The National Commission for Women (NCW) had proposed for enhancement of gestation limit for conducting MTP for certain categories of women with vulnerabilities. These categories are expected to include survivors of rape, victim of incest, single women (unmarried/divorced/widowed) and women with disabilities and severe foetal abnormalities detected after the existing gestation limit of 20 weeks. Accordingly, there is a proposal to enhance the upper gestation limit from 20 weeks to 24 weeks for the special categories of women in the draft proposal, which is under consideration.

### **Imposing of ban on sale of loose cigarettes**

\*6. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government proposes to impose ban on the sale of loose cigarettes in the country on the lines of Maharashtra; 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) A Committee of Experts constituted by Ministry of Health and Family Welfare has made several recommendations regarding the Cigarettes and other Tobacco Products (Prohibition of Advertisement and Regulations of Trade and Commerce Production, Supply and Distribution) Act, 2003 (COTPA), including a provision for imposing a ban on sale of cigarettes or any other tobacco products loose or in single sticks.

The Ministry has accepted the recommendations of the Committee and these have been included in the proposed Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) (Amendment) Bill, 2015, to amend the provisions of COTPA, 2003. The said Amendment Bill along with a draft Note for Cabinet was circulated for Inter-Ministerial Consultations. As per the advice of Ministry of Law, the Amendment Bill has been placed in public domain, as part of pre-legislative consultations, to elicit the comments/views of the stakeholders including the general public.

### **Outsourcing of banking activities by PSBs**

\*7. SHRI S. THANGAVELU: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that the Public Sector Banks (PSBs) are considering to outsourcing of work to ease the work load;

(b) whether it is also a fact that the Reserve Bank of India (RBI) has instructed banks not to engage in outsourcing of banking activities that would result in their internal control, business conduct or reputation being compromised or weakened, if so, the details thereof; and

(c) whether the RBI has received any response from the banks in this regard?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) Banks outsource a permissible activity related to financial services keeping in view all relevant factors, commercial aspects and risk associated with it under existing RBI guidelines.

(b) Banks are not permitted to outsource core management functions including Internal Audit, Compliance function and decision making functions like determining compliance with KYC norms for opening deposit accounts, according sanction for loans (including retail loans) and management of investment portfolio. RBI has advised the banks that they should not engage in outsourcing that would result in their internal control, business conducted or reputation being compromised or weakened.

(c) RBI receives references from the banks regarding clarifications on the instructions issued by RBI in connection with its guidelines on Managing Risk and Code of Conduct in outsourcing of Financial Services by Banks. Based on the supervisory inputs as well as representations, RBI has reiterated the guidelines while clarifying that they are applicable *mutatis mutandi* to subcontracted activities as well as advising banks to strengthen reconciliation process.

#### **Ultrasound machines in the country**

\*8. SHRI BHUPINDER SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) how many ultrasound machines are there in India the State-wise details thereof as on 30 June, 2015;

(b) how many of them have been registered officially and how many of them renewed regularly, State-wise; and

(c) whether the Ministry plans to provide ultrasound machines to all Taluk Hospitals in the country, if so, by when, if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Government of India is implementing the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 for prohibition of sex selection before or after conception and for prevention of misuse of pre-conception and pre-natal diagnostic techniques for sex determination. The Act regulates the pre-natal diagnostic techniques for the purpose of detecting genetic abnormalities or metabolic disorders or chromosomal abnormalities or certain congenital malformations or sex-linked disorders.

As per Quarterly Progress Reports (QPRs) submitted by States/UTs, 51018 diagnostic facilities including Genetic Counselling Centre, Genetic Laboratory, Genetic Clinic, Ultrasound Clinic and Imaging Centre have been registered under the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994. So far, a total number of 24758 registrations have been renewed under the Act. The State/UT-wise details are given in the Statement (*See below*).

(c) Public Health being a State subject, the Union Government does not directly provide equipments for Taluk Hospitals. However under the National Health Mission (NHM), the Union Government extends financial support to States, to *inter-alia*, procure healthcare equipments including Ultrasound machines, based on the proposal submitted by the State.

*State-wise status of registered bodies and registration renewed under the  
PC and PNDT Act, 1994*

*(As per the information received in QPRs till 31st March, 2015)*

Sl.No.	States/UTs	No. of registered bodies	No. of registration renewed
1	2	3	4
1.	Andhra Pradesh and Telangana	5003	2656
2.	Arunachal Pradesh	35	15
3.	Assam	750	342
4.	Bihar	1418	184
5.	Chhattisgarh	691	274
6.	Goa	154	242
7.	Gujarat	4504	2428
8.	Haryana	1656	1402
9.	Himachal Pradesh	261	17
10.	Jammu and Kashmir	345	63
11.	Jharkhand	698	217
12.	Karnataka	2878	256
13.	Kerala	1548	303
14.	Madhya Pradesh	1484	448
15.	Maharashtra	9078	4872
16.	Manipur	87	25
17.	Meghalaya	26	8
18.	Mizoram	47	21
19.	Nagaland	45	-
20.	Odisha	766	224
21.	Punjab	1422	79
22.	Rajasthan	2382	1187
23.	Sikkim	24	5
24.	Tamil Nadu	5453	4173
25.	Tripura	63	18
26.	Uttarakhand	552	378

1	2	3	4
27.	Uttar Pradesh	5321	3751
28.	West Bengal	2286	824
29.	A and N Islands	11	8
30.	Chandigarh	110	87
31.	D and N Haveli	13	9
32.	Daman and Diu	12	-
33.	Delhi	1794	193
34.	Lakshadweep	18	9
35.	Puducherry	83	40
TOTAL		51018	24758

#### **Misuse of NRHM funds**

\*9. SHRI PARVEZ HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the funds allocated/released/utilized for various programmes running under the National Rural Health Mission (NRHM) in the country during the last three years, year-wise and State-wise; and

(b) whether certain cases of misuse of funds have come to the notice of Government, if so, the details thereof along with the action taken by Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The details of the funds allocated/released/utilized for various programmes under the National Rural Health Mission (NRHM), now National Health Mission (NHM), during each of the last three years, year-wise and State-wise are given in Statement-I and Statement-II (*See below*) respectively.

(b) Certain instances of misuse of NRHM funds like mis-appropriation of funds, diversion of funds from one pool to another without authorization, excessive and infructuous purchases etc. have come to light through Audit in States like Uttar Pradesh, Assam, Bihar, Jammu and Kashmir, Odisha and Rajasthan. The observations were duly communicated to the concerned States for taking necessary remedial action and compliance of the financial irregularities. So far as Uttar Pradesh is concerned, on filing of a PIL in Allahabad High Court, on the irregularities noticed in the

implementation of NRHM in UP, Lucknow Bench of Allahabad High Court directed CBI to enquire in the matter and submit its report. The matter is *sub-judice*.

Public health being a State subject, primary responsibility of implementation and monitoring of schemes under NHM rests with the State Governments. However, the Central Government has been doing financial monitoring of the schemes under NHM through following mechanisms:

- I. Annual audit by the CAG is being undertaken on the request of the Ministry.
- II. Annual Statutory Audits.
- III. Concurrent Audits.
- IV. Examination of quarterly Financial Monitoring Reports by the States.
- V. Visits by the teams of the Financial Management Group of the Department to States for periodical review.
- VI. Annual visits to States by Common Review Mission, which *inter-alia*, looks at financial systems and mechanisms.
- VII. Financial review by Institute of Public Auditors of India (IPAI) in several States.
- VIII. Implementation of Public Financial Management System (PFMS) developed by the office of the CGA of Ministry of Finance for monitoring and management of funds on just in time basis.
- IX. Integrated monitoring visits by senior officials of the Ministry and National Health System Resource Centre.

Statement-I  
Details showing Programme-wise Allocation, Release and Utilization under National Health Mission

Sl. No.	Programme	2012-13				2013-14				2014-15			
		Allocation	Release	Utilization	Allocation	Release	Utilization	Allocation	Release	Utilization	Allocation	Release	Utilization
1	2	3	4	5	6	7	8	9	10	11			
A. NRHM Flexible Pool													
1.	1. RCH Flexible Pool	4710.51	3805.11	5757.76	5281.82	4463.26	6812.25	5450.00	4624.23	7374.19			
2.	2. Mission Flexible Pool	5854.00	4550.75	5817.44	5955.04	5006.62	6411.75	5892.11	4572.17	7660.88			
3.	3. Routine Immunization	225.00	221.70	363.42	250.00	188.91	441.94	250.00	189.19	430.05			
4.	4. Pulse Polio Immunization	410.69	261.43	479.11	410.77	353.92	394.20	330.00	258.63	355.04			
5.	5. National I.D.D. Control Prog.	9.70	16.41	1.41	50.00	31.84	0.34	49.00	12.76	3.00			
6.	6. Infrastructure Maintenance	4290.91	5154.40	6400.95	4928.00	4700.36	6290.50	4404.00	4479.50	5756.99			
7.	7. Communicable Disease Control Programmes	1267.25	794.67	571.01	1396.15	915.69	538.46	1396.14	1182.06	719.12			
	a. National Vector Borne Diseases Control Programme	536.68	273.44	169.41	572.00	336.79	189.56	572.00	452.41	183.48			
	b. Revised National Tuberculosis Control Prog.	630.65	466.15	341.18	710.15	499.79	282.48	710.15	635.44	435.77			
	c. National Leprosy Eradication Prog.	51.92	28.05	25.34	51.00	45.61	26.26	51.00	42.36	42.01			



d.	Integrated Disease Surveillance Project	48.00	27.02	35.08	63.00	33.50	40.17	63.00	51.84	57.87
8.	Non Communicable Disease Programmes	273.93	197.98	215.75	850.00	260.88	238.70	648.56	495.95	301.71
a.	National Prog. for Prevention and Control of Cancer, Diabetes, Crdiovascular Diseases and Stroke (NPCDCS)	0.00	0.00	0.00	300.00	75.67	66.86	292.55	217.80	90.99
b.	National Prog. for Control of Blindness	273.93	197.98	215.75	230.00	88.56	144.58	177.77	160.99	179.39
c.	National Mental Health Prog.	0.00	0.00	0.00	200.00	65.48	8.26	68.22	61.57	8.50
d.	National Programme for the Healthcare of the Elderly	0.00	0.00	0.00	50.00	1.16	17.33	50.83	23.83	16.05
e.	National Prog. for Prvention and Control of Deafness	0.00	0.00	0.00	45.00	19.22	1.39	11.69	11.09	4.87
f.	National Tobacco Control Prog.	0.00	0.00	0.00	20.00	7.34	0.28	40.68	18.96	1.87
g.	Other New Initiative under Non-Communicable Disease Injuries and Trauma	0.00	0.00	0.00	5.00	3.45	0.00	4.17	0.00	0.00

1	2	3	4	5	6	7	8	9	10	11
h.	National Oral Health	0.00	0.00	0.00	0.00	0.00	0.00	2.66	1.72	0.04
SUB TOTAL (1+2+3+4+5+6+7+8)		17041.99	15002.45	19606.85	19121.78	15921.48	21128.15	18419.81	15814.50	22600.99
B.	National Urban Health Mission-Flexible Pool	0.00	0.00	0.00	1000.00	662.23	10.12	1924.43	1345.82	475.96
GRAND TOTAL		17041.99	15002.45	19606.85	20121.78	16583.70	21138.27	20344.24	17160.31	23076.94

Note: 1. Allocation is as per Original outlay/B.E.  
2. Release is only Central Grants and do not include State share  
3. Utilization includes Central Release, State release and unspent balances at the beginning of the year, and is as per FMR reporting as on 31.03.2015 (Provisional).

Statement-II

Details showing State-wise Allocation, Release and Utilization under National Health Mission

(₹ in crore)

Sl. No.	States	2012-13			2013-14			2014-15		
		Allocation	Release	Utilization	Allocation	Release	Utilization	Allocation	Release	Utilization
1	2	3	4	5	6	7	8	9	10	11
1.	Andaman and Nicobar Islands	22.60	7.97	27.52	23.83	29.06	29.12	28.22	23.36	24.33
2.	Andhra Pradesh	1088.44	837.66	1066.65	1184.24	878.73	1044.81	707.15	519.73	902.91
3.	Arunachal Pradesh	74.01	55.06	73.68	86.31	78.60	92.03	185.65	139.41	69.50
4.	Assam	1054.14	887.86	1253.73	1214.83	1077.81	956.89	1095.38	877.13	915.88

5. Bihar	1421.32	1104.42	1333.54	1487.65	1110.32	1480.68	1292.13	1148.32	1427.40
6. Chandigarh	14.59	6.67	12.65	18.53	11.46	14.42	19.40	12.15	15.26
7. Chhattisgarh	473.71	369.36	512.34	500.72	355.98	805.50	555.66	500.41	716.04
8. Dadra and Nagar Haveli	7.54	5.81	7.43	8.73	9.23	9.83	13.99	8.40	8.56
9. Daman and Diu	5.97	1.85	6.85	6.48	6.50	8.40	9.69	6.91	7.67
10. Delhi	169.95	54.21	109.30	211.46	129.78	132.59	192.59	154.04	222.64
11. Goa	23.96	25.11	29.63	27.12	19.35	30.58	27.63	26.03	29.50
12. Gujarat	715.69	669.33	821.11	833.94	833.72	977.48	858.47	832.86	873.66
13. Haryana	289.15	298.27	369.63	313.57	315.94	423.79	317.42	273.60	438.18
14. Himachal Pradesh	141.97	115.40	276.69	225.95	205.29	158.60	232.00	185.84	306.92
15. Jammu and Kashmir	209.75	198.85	293.78	433.87	395.10	391.10	435.17	335.51	393.29
16. Jharkhand	555.83	356.60	423.93	582.97	396.38	521.49	563.92	359.62	372.01
17. Karnataka	721.48	653.83	807.10	814.17	611.11	812.56	834.09	697.24	858.18
18. Kerala	379.23	490.55	628.24	424.15	360.98	673.07	373.58	521.99	509.83
19. Lakshadweep	3.52	2.48	4.44	3.61	3.20	2.28	5.89	5.08	1.36
20. Madhya Pradesh	1032.41	946.08	1223.50	1141.03	865.94	1583.60	1250.17	1162.50	1738.02
21. Maharashtra	1270.27	1418.14	1840.14	1520.71	1218.51	1806.86	1536.58	1431.76	1834.40
22. Manipur	114.66	25.79	68.48	127.75	88.93	74.57	144.97	128.81	86.91
23. Meghalaya	125.45	108.33	104.75	139.24	125.51	71.53	160.21	104.13	70.72

1	2	3	4	5	6	7	8	9	10	11
24.	Mizoram	75.84	68.41	87.69	86.20	77.43	91.89	116.53	103.28	93.29
25.	Nagaland	95.78	95.05	105.35	114.42	99.73	90.40	131.26	114.92	63.04
26.	Odisha	653.52	534.49	780.73	678.99	604.20	901.65	730.09	667.16	944.10
27.	Puducherry	15.89	14.74	20.53	21.29	18.10	25.43	25.46	22.56	23.35
28.	Punjab	318.91	321.69	423.47	362.38	333.47	437.57	351.89	379.35	460.59
29.	Rajasthan	980.98	847.12	1181.47	1091.20	922.93	1457.06	1238.11	1115.96	1722.69
30.	Sikkim	54.12	34.79	37.30	42.32	45.91	44.82	51.42	51.60	41.36
31.	Tamil Nadu	867.98	948.14	900.73	1020.75	906.24	1430.28	968.18	952.75	2248.06
32.	Tripura	133.44	69.54	118.96	165.43	140.15	101.93	161.75	123.11	130.15
33.	Uttar Pradesh	2685.50	2247.20	3263.04	3584.98	3024.60	2924.38	2650.25	2431.06	3671.26
34.	Uttarakhand	206.67	176.89	246.97	310.55	245.25	255.28	308.10	270.55	324.42
35.	West Bengal	1026.41	937.53	1104.09	1179.64	948.51	1271.71	1053.27	1058.62	1196.78
36.	Telangana	0.00	0.00	0.00	0.00	0.00	0.00	506.45	378.72	334.68
SUB TOTAL		17030.69	14935.22	19565.44	19989.01	16493.93	21134.19	19132.72	17124.48	23076.94
OTHERS		11.30	67.23	41.41	132.77	89.77	4.08	1211.52	35.83	0.00
TOTAL		17041.99	15002.45	19606.85	20121.78	16583.70	21138.27	20344.24	17160.31	23076.94

Note: 1. Allocation is as per Original outlay/B.E.

2. Release is only Central Grants and do not include State share.

3. Utilization includes Central Release, State release and unspent balances at the beginning of the year, and is as per FMR reporting as on 31.03.2015 (Provisional).

**Non-implementation of OROP Scheme**

\*10. SHRI D. RAJA: Will the Minister of DEFENCE be pleased to state:

(a) whether it is a fact that the proposal for One Rank One Pension (OROP) scheme for ex-servicemen has not been implemented as yet; and

(b) if so, the details thereof and the reasons for delay in its implementation?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) The principle of One Rank One Pension for the Armed Forces has been accepted by the Government. 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.

**E-governance in DRTs**

\*11. SHRI A. W. RABI BERNARD: Will the Minister of FINANCE be pleased to state:

(a) whether Government has finalized an ambitious project to introduce e-governance in Debts Recovery Tribunals (DRTs) which could help State-run banks recover a sizeable part of the ₹ 3.7 lakh crore worth of bad loans in 59,000 cases pending before various Debts Recovery Tribunals, if so, the details thereof; and

(b) whether the new project will help State-run banks and financial institutions generate reports and help recovering officials enforce proceeding orders, if so, the details thereof?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) and (b) E-Governance project in Debts Recovery Tribunal (DRTs) and Debts Recovery Appellate Tribunal (DRATs) has been envisaged with the following features :—

(i) Data entry by Debts Recovery Tribunal/Debts Recovery Appellate Tribunal officials of all the cases including the recovery proceedings.

(ii) Automated generation of cause-lists for each Debts Recovery Tribunal/Debts Recovery Appellate Tribunal and recovery proceedings.

(iii) Check the status of the case (taken on board, hearing date, reserved for order, order pronounced stay given etc.)

(iv) Availability of scanned copies of judgments/orders to the public on the website.

(v) Facility to the litigants to order and pay for the certified copies of order.

The project is designed for all the Debts Recovery Tribunals/Debts Recovery Appellate Tribunals.

Through this, the Banks/Financial Institutions will be able to generate reports and help recovery officials enforce proceeding orders, especially by tracking the dates of hearings, number of adjournments, whether stay granted and since when etc. knowing the date of final order, and being able to print orders directly from the website.

**National Institute status for Cancer Institute, Adyar, Chennai**

\*12. DR. V. MAITREYAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has received any requests from the State Government of Tamil Nadu to accord National Institute status for the Cancer Institute (WIA) at Adyar, Chennai;

(b) if so, the details thereof and the action taken in this regard;

(c) whether Government has allocated funds for cancer treatment and care and also for the Research and Development; and

(d) if so, the details thereof and funds earmarked and disbursed so far during the 12th Plan?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Yes. A request from Government of Tamil Nadu was received in March, 2013, regarding upgradation of the Cancer Institute (WIA), Adyar, as a Centre of Excellence – an Autonomous National Cancer Research Institute. Government of India is not implementing any scheme for declaring an Institution as an Autonomous Cancer Research Institute or for declaring a Cancer Institute as Centre of Excellence. However, Adyar Cancer Institute was earlier supported as Regional Cancer Centre (RCC) and currently under the 12th Five Year Plan, it is being assisted as State Cancer Institute under Tertiary Care for Cancer scheme. Under the said scheme, a proposal of Cancer Institute, Adyar for financial assistance of ₹ 120 crore was recommended by the State Government and, after due examination, was approved by Government of India. An amount of ₹ 67.38 crore has been already released to the State Government in 2014-15 as first instalment of GoI share.

(c) and (d) 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 (TCCCs) 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 Central and State share is in the ratio 75:25, and for North East and Hill States, this ratio is 90:10. SCIs and TCCCs shall mentor all cancer related activities including Research and Development in their respective States and areas.

Under Twelfth Five Year Plan, there is an allocation of ₹ 3200 crore for Tertiary Care for Cancer scheme. After the approval of Competent Authority, the scheme guidelines were issued to State Governments in January, 2014. During 2014-15, proposals of 5 SCIs and 2 TCCCs for assistance of ₹ 630.50 crore (inclusive of State share) have been approved. An amount of ₹ 351.90 crore has been released as 1st instalment of Government of India share for these Institutes.

### **International Yoga Day**

†\*13. SHRI NARAYAN LAL PANCHARIYA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the number of people who participated in the International Yoga Day celebrated on 21 June, 2015 throughout the country organized by the Ministry;

(b) the details of the number of people from all the States including Rajasthan who participated in the programme and the number of places where this programme was held; and

(c) whether Government is formulating any scheme to ensure that the benefits of Yoga should reach the common man, if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) and (b) The Ministry of AYUSH organized a mass Yoga demonstration at Rajpath, New Delhi, on 21st June, 2015, on the occasion of International Day of Yoga wherein 35,985 participants performed Yoga. The Ministry of AYUSH also organized a two days, International Conference on Yoga for Holistic Health on 21st and 22nd June, 2015 at Vigyan Bhawan, New Delhi, wherein about 1300 delegates participated. In addition, Central Council for Research in Yoga and Naturopathy (CCRYN) extended financial assistance to Government Organizations/NGOs in all the Districts to conduct one month Yoga Camp and also for celebration of International Day of Yoga on 21st June, 2015. All the States/UTs including Rajasthan were also advised to celebrate the International Day of Yoga and organize mass yoga demonstration at the State, District, Block and Panchayat levels.

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† Original notice of the question was received in Hindi.

Record of the number of places and participants therein in States and Districts was not maintained centrally.

(c) The Government of India have approved the National AYUSH Mission which, *inter alia*, envisages better access to AYUSH (i) services including Yoga and strengthening of AYUSH educational institutions. The Mission provides for Co-location of AYUSH facilities at Health Centres/Hospitals including Yoga facilities (ii) Upgradation of exclusive State AYUSH hospitals and dispensaries including hospitals with Yoga centres (iii) Upgradation of State Government teaching institutions including those of Yoga (iv) Any AYUSH related activity as per guidelines as deemed appropriate by the States under the flexible component. Further, Yoga education has been made compulsory for Teacher Education Programmes including B.Ed. courses as well as those of Diploma in Physical Education, B.P.Ed. and M.P.Ed. etc.

### **Budgetary Outlay for the Defence Sector**

†\*14. SHRI LAL SINH VADODIA: Will the Minister of DEFENCE be pleased to state:

(a) the outlay of defence budget of the country for the financial years 2013-14, 2014-15 and 2015-16;

(b) the quantum of expenditure incurred against the budgetary allocation for the financial years 2013-14 and 2014-15; and

(c) the year-wise percentage of the defence budget of the country for these three financial years when compared to the total budget?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (c) The outlay of defence budget for the financial years 2013-14, 2014-15, and 2015-16, expenditure incurred against the budgetary allocation for the financial years 2013-14 and 2014-15 and the percentage of the defence budget-(Budget Estimates) compared to total Union Budget (Budget Estimates) is as follows:—

(₹ in crores)

Year	Defence Budget		Expenditure	Defence Budget as % age of Total Union Budget
	BE	RE		
2013-14	2,03,672.12	2,03,672.12	2,03,499.35	12.23%
2014-15	2,29,00.00	2,22,370.00	2,18,705.31	12.76%
2015-16	2,46,727.00	—	—	13.88%

† Original notice of the question was received in Hindi.



**Promotion of Yoga and Naturopathy**

†\*15. SHRI MEGHRAJ JAIN: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether any plan has been formulated to promote Yoga and Naturopathy treatments under the Ministry, if so, the details thereof; and

(b) the follow-up action taken or proposed to be taken by Government on it?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) Yes, Government of India promotes Yoga and Naturopathy treatments in all the States/Union Territories through Centrally Sponsored Scheme of National AYUSH Mission as per the details given in Statement (*See below*).

(b) The Ministry of AYUSH provides Grant in Aid to the State/UT Governments for the approved State Annual Action Plans (SAAPs) under National AYUSH Mission (NAM) which include the components of Yoga and Naturopathy.

***Statement******National AYUSH Mission (NAM)***

The Government of India has approved and notified National AYUSH Mission (NAM) on 29.09.2014 which envisages better access to AYUSH services including Yoga and Naturopathy, strengthening of AYUSH educational institutions, facilitate the enforcement of quality control of Ayurveda, Siddha and Unani & Homoeopathy (ASU&H) drugs and sustainable availability of ASU & H raw-materials in the States/UTs during 12th Plan.

The Mission *inter-alia* makes provision for the following:—

- (i) Co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and Districts Hospitals (DHs) including Yoga and Naturopathy.
- (ii) Upgradation of exclusive State Government AYUSH Hospitals and Dispensaries including Yoga and Naturopathy.
- (iii) Setting up of upto 50 bedded integrated AYUSH Hospital including Yoga and Naturopathy.
- (iv) Upgradation of State Government Under-Graduate and Post-Graduate Educational Institutions including Yoga and Naturopathy.

- (v) Setting up of new State Government AYUSH Educational Institutions including Yoga and Naturopathy in the State where it is not available.
  - (vi) Under the flexible components, provision has been kept for Grant-in-aid to the Yoga Wellness centres and Naturopathy hospitals.
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## WRITTEN ANSWERS TO UNSTARRED QUESTIONS

### Initiatives under NAM in A.P. and Telangana

1. DR. K.V.P. RAMACHANDRA RAO: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the new initiatives taken up under the National Ayush Mission (NAM) particularly in Andhra Pradesh and Telangana; and

(b) whether there is any Tribal Sub-Plan component thereunder; if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) Government of India has approved and notified National AYUSH Mission (NAM) on 29.09.2014 which envisages better access to AYUSH services; strengthening of AYUSH educational institutions, facilitate the enforcement of quality control of Ayurveda, Siddha and Unani and Homoeopathy (ASU and H) drugs and sustainable availability of ASU and H raw-materials in the States/UTs including Andhra Pradesh and Telangana during Twelfth Plan.

Under National AYUSH Mission (NAM), provision has been made for following new initiatives of the States/UTs including Andhra Pradesh and Telangana:—

- (i) Public Health outreach activity to focus on increasing awareness about AYUSH strength in managing community health problems resulting from nutritional problems, vector borne diseases etc.
- (ii) Adoption of villages for propagating AYUSH way of life and interventions of healthcare through AYUSH Gram.
- (iii) School Health Programme through AYUSH by way of addressing the health needs of school going children through AYUSH.
- (iv) Early prevention of non-communicable diseases and promotion of health-care by way of Behaviour Change Communication (BCC) integrated with the principles and practices of AYUSH systems.

Flexible activities include:

1. AYUSH wellness centres including Yoga and Naturopathy
2. Telemedicine
3. Sports medicine through AYUSH
4. Innovations in AYUSH including Public Private Partnership
5. Interest subsidy component for private AYUSH Educational Institutions
6. Research and Development in areas related to Medicinal Plants
7. Voluntary certification scheme
8. Market Promotion
9. Market Intelligence and buy back interventions for Medicinal Plants
10. Reimbursement of testing charges
11. Crop Insurance.

(b) Yes, under National AYUSH Mission (NAM), there is a provision for separate budget head for Tribal Sub Plan for the States/Union Territories. ₹ 6.36 crore has been earmarked for this purpose during 2015-16.

**Uniform rules for licences and testing facilities for AAYUSH Medicines**

2. SHRI DARSHAN SINGH YADAV: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government proposes to formulate uniform rules with regard to grant of licenses for manufacturing Ayurveda, Siddha, Unani and Homoeopathic drugs and to ensure their safety, quality and standards across the country, if so, the details thereof; and

(b) the details of the existing drug testing institutions/laboratories along with the steps being taken for their upgradation and also for setting up new testing facilities to ensure safety and quality of these drugs indicating the funds earmarked and allocated for the purpose, State/Union Territory-wise?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) Regulatory provisions and Rules for Ayurveda, Siddha, Unani and Homoeopathic drugs are already in place under the Drugs and Cosmetics Act, 1940, which is a Central Act applicable throughout the country. Rules 85-A to 85-I and Rules 151 to 159 of the Drugs and Cosmetics Rules, 1945

respectively provide the regulatory provisions for grant of licenses to manufacture Homoeopathic and Ayurveda, Siddha and Unani drugs respectively and promote their safety and quality by implementing Good Manufacturing Practices. The standards of Homoeopathic medicines to be complied with are prescribed in Schedule II of the Drugs and Cosmetics Act, 1940 and of Ayurveda, Siddha and Unani drugs in Rule 168 of the Drugs and Cosmetics Rules, 1945. In this regard, financial support has also been provided for improving infrastructural and functional capacity of State Pharmacies, Drug Testing Laboratories and enforcement mechanism and a component of funding quality control activities for Ayurvedic, Siddha, Unani and Homoeopathic drugs is provided in the scheme of National AYUSH Mission notified in September, 2014.

(b) The list of Central and State Drugs Testing Laboratories and the laboratories licensed under Drugs and Cosmetics Rules, 1945 for testing of AYUSH drugs is given in the Statement-I (*See below*). Under National AYUSH Mission implemented since September, 2014, grant-in-aid proposals of the States for the quality control of Ayurvedic, Siddha, Unani and Homoeopathic drugs including setting up of new laboratories, strengthening of existing laboratories and testing of drug samples are considered. State/Union Territory-wise tentative allocation and approved release of funds for quality control activities in 2014-15 and 2015-16 is given in the Statement-II.

### ***Statement-I***

*The list of Central and State Drugs Testing Laboratories and the laboratories licensed under Drugs and Cosmetics Rules, 1945 for testing of AYUSH drugs*

#### ***A. Central Government Laboratories***

- Pharmacopoeial Laboratory of Indian Medicine (PLIM), Opp. M-Block, Sector-23, Kamla Nehru Nagar, Ghaziabad-201002
- Homoeopathic Pharmacopoeia Laboratory (HPL), Opp. M-Block, Sector-23, Kamla Nehru Nagar, Ghaziabad-201002

#### ***B. Drug Testing Laboratories in the Public Sector of States for ASU and H Drugs***

Sl.No.	Name of the State	Name of the Drug Testing Laboratory
1.	Andhra Pradesh	Drug Testing Laboratory, Government Indian Medicine Pharmacy (Ayu.), Kattedan, Hyderabad
2.	Karnataka	Government Drug Testing Laboratory, Government Central Pharmacy, Jayanagar, I-Block near Ashoka pillar, Bangalore, Karnataka

Sl.No.	Name of the State	Name of the Drug Testing Laboratory
3.	Maharashtra	Drug Testing Laboratory, Government Ayurvedic and Unani Pharmacy Campus, Vazirabad, Nanded, Maharashtra
4.	Gujarat	Food and Drug Laboratory near polytechnic, Vadodara, Gujarat
5.	Rajasthan	Ayurveda Drug Testing Laboratory, Government Ayurvedic Pharmacy, Pushkar Road, Ajmer, Rajasthan
6.	Uttar Pradesh	Government Analyst Laboratory, Ayurvedic and Unani Medicine, 32-Sarojini Naidu Marg, Lucknow, Uttar Pradesh
7.	Himachal Pradesh	Government Drug Testing Laboratory, Joginder Nagar, Distt. Mandi, Himachal Pradesh
8.	Uttarakhand	Government Drug Testing Laboratory, Rishikul State Ayurvedic College, Haridwar, Uttarakhand
9.	Kerala	Ayurvedic Research Institute, Drug Standardization Unit, Poojappura, Thiruvananthapuram, Kerala
10.	Odisha	State Drug Testing and Research Laboratory (ISM) Government Ayurvedic Hospital Campus, Nagarwartangi, P.O. BJB Nagar, Bhubaneswar, Odisha
11.	West Bengal	State Pharmacopoeial Laboratory and Pharmacy for Indian Medicine, Kalyani, Nadia, West Bengal
12.	Madhya Pradesh	Drug Testing Laboratory, Government Ayurvedic Pharmacy Compound, Amkho Lashkar, Gwalior Madhya Pradesh
13.	Chhattisgarh	Drug Testing Laboratory, Government Ayurvedic Pharmacy, GE Road, Raipur, Chhattisgarh
14.	J and K	Combined Food and Drug Laboratory, Patoli, Mangotrian, Jammu and Kashmir
15.	Assam	State Government Drug Testing Laboratory for ISM Drugs, Government Ayurvedic College, Guwahati, Assam
16.	Tripura	State Government Drug Testing Laboratory (ISM), Aushadh Niyantaran Bhawan, Pt. Nehru Office Complex, Agartala, Tripura

Sl.No.	Name of the State	Name of the Drug Testing Laboratory
17.	Mizoram	Government Drug Testing Laboratory, Central Medical Store, Zamabawk, Aizawl, Mizoram
18.	Meghalaya	Government Drug Testing Laboratory (ISM), Food and Drug Laboratory, Pesteur Institute, Shillong, Meghalaya
19.	Arunachal Pradesh	Government Drug Testing Laboratory (ISM), Neheralagrum, Itanagar, Arunachal Pradesh
20.	Nagaland	Government Drug Testing Laboratory for AYUSH, Kohima, Nagaland
21.	Punjab	Government Drug Testing Laboratory, Government Central Pharmacy and Store Campus, Old Press Road, Patiala, Punjab
22.	Haryana	Government Drug Testing Laboratory, (ISM) Sri Krishna Government Ayurveda College and Hospital, Kurukshetra, Haryana
23.	Jharkhand	Government Drug Testing Laboratory, Ranchi, Jharkhand
24.	Bihar	Government Drug Testing Laboratory, Ayurveda and Unani Pharmacy compound, Patna, Bihar
25.	Sikkim	State Government Drug Testing Laboratory for ASU and H drugs, Chander, Sikkim.
26.	Tamil Nadu	Government Drug Testing Laboratory for A and S drugs, SASTRA, Thanjavur, Tamil Nadu.
27.	Tamil Nadu	Government Drug Testing Laboratory for ISM, Arignar Anna Government Hospital of Indian Medicine Complex, Arumbakkam, Chennai, Tamil Nadu

*C. List of Approved Ayurveda, Siddha and Unani Drug Testing Laboratories Under Rule—160 A to J of the Drugs and Cosmetics Rule, 1945*

Name of the State	Name of the Laboratory
Gujarat	M/s Shree Dhanvantary Pharmaceutical Analysis and Res. Centre, Near Railway Station, Kim (E), Kudsad Road, Taluka Olpad, Surat-394110, Gujarat  M/s Oasis Test House, 24, A-B. Sardar Patel Industrial Estate, Narol, Ahmedabad-382405

Name of the State	Name of the Laboratory
Himachal Pradesh	<p>M/s Charak Pharmaceuticals (P) Ltd. Village Katha, P.O Baddi, Tehsil-Nalagarh, Solan-173205, H.P.</p> <p>M/s Ayurved Ltd. Village Katha, P.O Baddi-173205, Tehsil Nalagarh, Solan-173205</p> <p>M/s Baijnath Research and Development Laboratory, Paprola, Tehsil Baijnath, Dist. Kangra-176115 (HP)</p>
Karnataka	<p>M/s KLE Society's Shri B.M. Kankanvari Ayurvedic Mahavidyalaya, Shahpura, Belgaum-03</p> <p>M/s. Karnataka Antibiotics and Pharmaceuticals Ltd. 14, 2nd Phase, Peenya Industrial Area, Bangalore-560058</p> <p>FRLHT, 74/2 Jarakabande Kaval, Post Attur via Yelahanka, Bangalore-560 064</p> <p>M/s. Shiva Analytical (I) Ltd. Plot 24D (P) and 34 (D), KIADB Industrial Area, Haus Kote, Bangalore</p> <p>M/s Natural Remedies Pvt. Ltd. 5-B, Veersandra Industrial area, 19th K.M. Stone, Hosur Road, Electronic City post, Bangalore-560100</p>
Kerala	<p>M/s Nagarjuna Herbal Concentrates Ltd. Kalayanthani, Thodupuzha, Idukki, Kerala-685588</p> <p>M/s Sreedhareeyam Ayurvedic Medicines (P) Ltd. Door No. KGP V/485F, V/485 G, Nellikkattumana, Koothattukulam, Ernakulam-686662 (Kerala).</p> <p>The Pharmaceutical Corporation (IM) Kerala Ltd. (Oushadhi) Kuttanellur P.O. Thrissur</p>
Odisha	<p>M/s Bio Lab. C/o Bio Sourcing. Com Pvt. Ltd. A 41, Ashok Nagar, Janpath, Bhubaneswar-751009</p>
Punjab	<p>M/s Herbal Health Research Consortium Pvt. Ltd. Village Khayala Khurd, Ram Tirth Road, Amritsar</p>
Rajasthan	<p>M/s Ayushraj Enterprises Pvt. Ltd., Village Mansinghpura, Dahmi Begas Road, Ajmer Road, Jaipur</p>

Name of the State	Name of the Laboratory
Tamil Nadu	<p>M/s Cholayil Pvt. Ltd. 31-A/24 SIDCO Industrial Estate, Ambatture, Chennai-600098</p> <p>M/s Sargam Laboratory Pvt Ltd. No. 2, Ramavaram Road, Manapakkam, Chennai-600089</p> <p>M/s Department of Chemistry, Regional Research Institute of Unani Medicine 1, West Mada Church Road, Royapuram, Chennai-600013</p> <p>M/s Captain Srinivasa Murti Drug Research Institute for Ayurveda AA Government Hospital of Indian Medicine, Arumbakkam, Chennai-600106</p> <p>M/s Centre for Advance Research in Indian System of Medicine, Unit of Shanmuga Arts, Science, Technology and Research Academy (SASTRA) University, Thanjavur</p>
Uttar Pradesh	<p>M/s Amar Pharmaceuticals and Labs (India) Pvt Ltd. 107-B-2, Industrial Cooperative Estate, Dada Nagar, Kanpur, U.P.</p> <p>Dabur India Limited Sahibabad, Ghaziabad</p>
Uttarakhand	<p>M/s Devansh Testing and Research Laboratory 94, Shiv Ganga Industrial Estate, Lakeshari, Roorkee, Haridwar, Uttarakhand</p> <p>M/s Multani Pharmaceuticals Ltd. Khasra No.37 Village Makkanpur Mahmood Alam, Bhagwanpur, Roorkee, Uttarakhand</p> <p>AYUSH Drug Testing Laboratory IMPCL, Mohan Nagar, Almora</p>
Delhi	<p>M/s ARBRO Pharmaceuticls Ltd. Analytical Division, 4/9, Kirti Nagar Ind. Area, New Delhi-15</p> <p>M/s Standard Analytical Laboratory Pvt. Ltd. 69, Functional Ind. Estate, Parparganj, Delhi-92</p>



Name of the State	Name of the Laboratory
	<p>M/s ITL Labs Pvt. Ltd. B-283-284, Mangolpuri Ind. Area, Phase-I, Delhi-83</p> <p>M/s Delhi Test House A-62/3, G.T. Karnal Road Ind. Area, Opp. Hans Cinema, Azadpur, Delhi-33</p> <p>M/s Sophisticated Industrial Materials Analytic Labs. Pvt. Ltd. C-95, Okhla Ind. Area, Phase-I, New Delhi-20</p> <p>M/s Shree Krishna Analytical Services A-5/4, Mayapuri Industrial Area, Phase-2, New Delhi-110064</p> <p>M/s Shriram Institute for Industrial Research 19, University Road, Delhi-110007</p>
Madhya Pradesh	<p>M/s Choksi Laboratories 6/3, Manoramaganj, Indore-452001, Tel.: (0731) 4243888 (30 lines), Fax: 2490593, Email: <a href="mailto:info@choksilab.com">info@choksilab.com</a>, <a href="mailto:indore@choksilab.com">indore@choksilab.com</a></p> <p>M/s JRD Tata Foundation for Research in Ayurveda and Yoga Science, (Deendayal Research Institute) Chitrakoot, Satna-485331 Tel. : (0760) 265632, 265353; Fax : 265477, 265623,</p> <p>M/s Anusandhan Analytical and Biochemical Research Laboratory Pvt. Ltd. 68-Industrial Area, Rangwasa, Rau, Distt. Indore, Tel. : (0731) 2534167</p> <p>M/s Quality Control Laboratory A-35, Vidhya Nagar, B.U. Gate No. 3, Hoshangabad Road, Bhopal; Tel. : (0755) 2410009, 4222448, Mobile : 9826052193.</p> <p>M/s Shilpachem Laboratory 47-D, Laxmi Bai Nagar, Industrial Estate, Indore-452006 Tel: (0731) 2418522, 9425065578, 8889880011 Email: <a href="mailto:shilpachem@gmail.com">shilpachem@gmail.com</a>; Website: <a href="http://www.shilpachem.com">www.shilpachem.com</a>.</p>
Telangana	<p>M/s Varun Herbals D. No. 5-8-293/A, Mahesh Nagar, Chirag Ali Lane, Hyderabad-500001, Tel. : (040) 23202731 Fax: 23202731</p>

**Statement-II**

*Statement containing the details of the funds allocated/released under National AYUSH Mission (NAM) including Drugs Quality Control during 2014-15 and 2015-16*

(₹ in lakhs)

Sl. No.	States/UTs	Funds allocated (2014-15)	Funds released during 2014-15	Funds allocated (2015-16)	Funds released during 2015-16 (Till June, 2015)
1.	Andhra Pradesh	859.86	309.93	900.69	549.93
2.	Arunachal Pradesh	171.25	101.14	199.98	70.11
3.	Assam	1068.36	668.98	1270.05	399.38
4.	Chhattisgarh	830.67	281.41	1027.01	549.26
5.	Delhi	399.31	132.71	355.51	266.60
6.	Gujarat	909.89	332.39	1130.82	577.49
7.	Haryana	612.81	213.59	713.77	399.22
8.	Jammu and Kashmir	618.46	226.27	474.05	392.19
9.	Karnataka	1041.59	359.12	923.20	682.48
10.	Kerala	712.55	254.67	851.18	457.88
11.	Madhya Pradesh	1948.92	644.94	2064.52	1303.98
12.	Maharashtra	1480.60	534.67	1385.25	945.93
13.	Manipur	373.22	226.81	486.51	146.41
14.	Meghalaya	228.05	134.65	309.64	93.40
15.	Mizoram	190.13	116.27	349.97	73.86
16.	Nagaland	191.73	115.61	483.36	76.12
17.	Odisha	1322.57	471.72	1262.53	850.85
18.	Puducherry	72.53	60.00	135.01	12.53
19.	Punjab	585.29	316.00	602.76	269.29
20.	Rajasthan	1768.79	638.07	1778.29	1130.72
21.	Sikkim	110.12	66.43	245.99	43.69
22.	Telangana	690.98	330.00	748.88	360.98
23.	Tripura	381.49	238.12	294.51	143.37
24.	Uttarakhand	437.46	284.00	487.25	153.46
25.	West Bengal	1371.69	471.23	1216.03	900.46
TOTAL		18378.27	7528.71	19696.73	10849.57

### Money earmarked for promotion of Yoga

3. SHRI VIJAY JAWAHARLAL DARDA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government is aware that 2 International Yoga Day was celebrated throughout the country on 21 June, 2015, in many cities;

(b) if so, how much money has been earmarked for promotion of Yoga in the country and abroad and how much was spent on various events on that day by the Ministry; and

(c) whether Government intends to make Yoga compulsory in schools and recruit the Yoga instructors in a big way, and if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) Yes.

(b) The funds earmarked/spent by Ministry of AYUSH and Ministry of External Affairs are as follows :—

(₹ in lakhs)

Sl.No.	Activity	Sanction/Expenditure
1.	Ministry of AYUSH	828.43
	(i) Publicity through DAVP, DD and AIR	
	(ii) Arrangements for the Mass Yoga Demonstration at Rajpath on 21/6/2015	758.53
	(iii) International Conference on Yoga on 21st and 22nd June, 2015 at Vigyan Bhawan	182.8
2.	Ministry of External Affairs	800.00

In addition, Central Council for Research in Yoga and Naturopathy (CCRYN) and Morarji Desai National Institute of Yoga (MDNIY), the autonomous organizations under the Ministry, incurred the following expenditure :—

- (i) Financial Assistance to Government Institutions / Non Government Organization for organising of Yoga Camps and celebration of International Day of Yoga in each district of the Country @ upto ₹ 1.00 Lakh each by CCRYN ₹ 670.00 lakh
- (ii) Expenditure on production of Film and Booklet on Common Yoga Protocol by MDNIY ₹ 34.80 lakh

(c) The Ministry of Human Resource Development (HRD) has informed that the National Curriculum Framework (NCF), 2005 which is a policy document for the country, recommended Yoga as an integral part of Health and Physical Education. Health and Physical Education is compulsory subject from Class 1 to Class X and optional from Classes XI to XII.

The Ministry of Human Resource Development has further informed that there are 15,962 schools affiliated to the Central Board of Secondary Education (CBSE), who have already been advised to provide compulsory 40-45 minutes of Physical Activities or games to the students of classes I- X every day and that students of classes XI- XII should participate in physical activity/games/mass physical training/ yoga for at least 2 periods per week (90-120 minutes/week). The Board offers Physical and Health Education for classes XI and XII and Yoga is compulsory part of its curriculum.

Yoga Education has been made compulsory part of study and practice by National Council for Teacher Education (NCTE), a statutory body under Ministry of Human Resource Development, for its 15 Teacher Education Programmes, viz., Pre-School Education to Elementary Education; Secondary; Senior Secondary; Physical Education; Distance Learning etc..

NCTE has already developed modules on Yoga Education for Diploma in Elementary Education and master of Education. These will be used by more than 18000 Teacher Education Institutions and above 14 Lakh student-teachers and teacher educators who are studying and /or teaching in these institutions.

#### **Educational institutions teaching Yoga therapy**

4. SHRI P. BHATTACHARYA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the number of educational institutes where the course on Yoga therapy is being taught in the country along with the number of students likely to be graduated therefrom in the current year, State-wise; and

(b) whether Government has finalised any standard curriculum to teach Yoga therapy in the country, if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) On the basis of information made available by the University Grants Commission (UGC), a State/UT-wise number of educational

institutes conducting courses on Yoga (including Yoga therapy) at various levels in the country during 2012-13 is given in the Statement (*See below*). Education being a State subject, this Ministry does not maintain data of students graduating in any year.

(b) At present, there is no Central legislation for regulation of education and practice in Yoga. Universities, being autonomous bodies draw curricula of various subjects including Yoga therapy with the approval of various internal apex bodies/councils.

### ***Statement***

*State/UT-wise number of educational institutes conducting courses on Yoga (including Yoga therapy) at various levels in the country*

Sl.No.	State	No. of Universities	No. of Colleges
1.	Andhra Pradesh	3	3
2.	Chhattisgarh	3	3
3.	Delhi	1	1
4.	Gujarat	6	1
5.	Haryana	2	0
6.	Himachal Pradesh	2	1
7.	Karnataka	5	4
8.	Madhya Pradesh	10	1
9.	Maharashtra	2	35
10.	Odisha	1	1
11.	Puducherry	1	0
12.	Rajasthan	4	0
13.	Tamil Nadu	5	4
14.	Uttar Pradesh	1	0
15.	Uttarakhand	6	0
16.	West Bengal	2	54
TOTAL		54	108

**Creating awareness to make Yoga a part of daily routine**

†5. SHRI AMAR SHANKAR SABLE: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government has formulated any plan to create public awareness to make Yoga a part of the daily routine in view of the fact that the International Day of Yoga was recently observed worldwide; and

(b) if so, the State-wise details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) and (b) The Ministry of AYUSH promotes Yoga by carrying out campaigns through print and electronic media. AROGYA fairs at National and State level are organized to make public aware of the benefits of AYUSH systems of medicine including Yoga. The Ministry under its Central Sector Schemes of Information Education and Communication (IEC) and International Co-operation extends financial assistance to State Governments and other reputed Government/ Non-Governmental Organizations/Universities for conducting National/ International seminars/workshops/symposiums to promote AYUSH systems including Yoga.

The Ministry of AYUSH has recently initiated a Scheme for Voluntary Certification of Yoga Professionals. First phase of the Scheme to certify Yoga teachers was launched on June 22, 2015. The Scheme is being operated by the Quality Council of India (QCI), an apex quality facilitation and accreditation body, under the Ministry of Commerce and Industry.

The Government of India has approved the National AYUSH Mission which, *inter-alia*, envisages better access to AYUSH services including Yoga strengthening of AYUSH educational institutions. The Mission provides for (a) co-location of AYUSH facilities at Health Centers/Hospitals including Yoga facilities (b) upgradation of exclusive State AYUSH Hospitals and dispensaries including hospitals with Yoga centers (c) upgradation of State Government teaching institutions including those of Yoga (d) Yoga and Naturopathy Wellness Centres as per guidelines as deemed appropriate by the States under the flexible component. The proposals are sanctioned under the National AYUSH Mission (NAM) on receipt of the same from the State/ UT Governments. The status of proposals received from States/UTs and the funds approved under NAM is given in Statement (*See below*).

To give further impetus to research, the Government encourages research on Yoga by providing grants under Extra Mural Research scheme to research organizations.

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† Original notice of the question was received in Hindi.

**Statement**

*Status of proposals received from States/UTs and funds approved under National AYUSH Mission (NAM) including YOGA and Naturopathy*

Sl. No.	Name of State/UT	Resource pool indicated to State/UT (Central Share + State Share)	Proposal Received (Central Share + State Share)	Amount Approved by Mission Directorate		Total amount Approved by Mission Directorate + (Central Share + State Share)	1st Installment of Grant released during 2014-15	Final Payment Grant released during 2015-16
				Approved Central Share	Approved State Share			
1	2	3	4	5	6	7	8	9
1.	Andaman and Nicobar Islands	553.03	275.82	151.94	50.65	202.587	—	—
2.	Andhra Pradesh	1146.474	1,146.47	859.856	286.618	1,146.474	309.93	549.931
3.	Arunachal Pradesh	190.732	190.83	171.248	19.027	190.275	101.14	70.113
4.	Assam	1187.711	1,187.71	1068.357	118.706	1187.063	668.98	399.378
5.	Bihar	3673.869	-	-	-	Not submitted	-	-
6.	Chandigarh	88.67	-	-	-	Not submitted	-	-
7.	Chhattisgarh	1163.795	1,163.73	830.67	276.89	1107.56	281.41	549.257
8.	D & N Haveli	219.807	-	-	-	Not submitted	-	-
9.	Daman and Diu	279.196	-	-	-	Not submitted	-	-

(₹ in lakhs)

1	2	3	4	5	6	7	8	9
10.	Delhi	532.406	682.92	399.305	133.101	532.406	132.71	266.598
11.	Goa	508.906	-	-	-	Not submitted	-	-
12.	Gujarat	1275.555	1,275.55	909.886	303.296	1,213.181	332.39	577.493
13.	Haryana	854.08	836.56	612.807	204.268	817.075	213.59	399.218
14.	Himachal Pradesh	304.315	-	-	-	SAAP not as per NAM guidelines	-	-
15.	Jammu and Kashmir	740.941	740.94	618.460	68.718	687.178	226.27	392.192
16.	Jharkhand	1308.549	-	-	-	SAAP not as per NAM guidelines	-	-
17.	Karnataka	1391.438	1,391.44	1041.592	347.197	1388.789	359.12	682.476
18.	Kerala	954.914	955.40	712.548	237.516	950.064	254.67	457.878
19.	Lakshadweep	255.481	255.48	189.398	63.133	252.531	-	-
20.	Madhya Pradesh	2761.014	2,770.40	1,948.918	649.639	2,598.557	644.94	1303.980
21.	Maharashtra	2074.369	2,670.17	1480.604	493.535	1974.139	534.67	945.934
22.	Manipur	473.401	527.40	373.218	41.469	414.687	226.81	146.405
23.	Meghalaya	274.591	628.06	228.047	25.338	253.385	134.65	93.400



24.	Mizoram	253.623	228.26	190.125	21.125	211.250	116.27	73.855
25.	Nagaland	432.165	234.48	191.728	21.303	213.031	115.61	76.115
26.	Odisha	1763.427	2,111.65	1,322.570	440.856	1,763.427	471.71	850.847
27.	Puducherry	159.394	97.54	72.525	24.175	96.700	60.00	12.525
28.	Punjab	805.413	941.28	585.389	195.095	780.38	316.00	269.289
29.	Rajasthan	2483.065	2,556.55	1,768.789	589.596	2,358.385	638.07	1130.724
30.	Sikkim	169.26	199.76	110.120	12.236	122.356	66.43	43.692
31.	Tamil Nadu	1384.43	-	-	-	SAAP not as per NAM guidelines	—	-
32.	Telangana	921.306	1,163.00	690.979	230.326	921.306	330.00	360.979
33.	Tripura	434.395	494.54	381.486	42.387	423.873	238.12	143.371
34.	Uttar Pradesh	6781.09	-	-	-	Not submitted	-	-
35.	Uttarakhand	524.093	532.75	437.457	48.607	486.064	284.00	153.457
36.	West Bengal	1918.074	1,964.94	1,371.688	457.229	1,828.917	471.23	900.458
TOTAL		40242.9	27320.121	18719.61	5402.036	24121.638	7528.707	10849.565

**Success of Yoga-day in foreign countries**

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

(a) the details of programmes organised under the universal programme on the occasion of International Yoga-day, State-wise, and the information regarding success of this programme organised in other countries; and

(b) the plans and programme to make Yoga and Naturopathy programme popular and acceptable to all?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) The first International Day of Yoga was celebrated all over the country and abroad on 21/6/2015. The main event was organized by the Ministry at Rajpath, New Delhi by organizing a mass Yoga demonstration wherein 35,985 participants performed Yoga. A two days International Conference on Yoga for Holistic Health was also organized on 21st and 22nd June, 2015 at Vigyan Bhawan, New Delhi. All the States/UTs were advised to hold mass yoga demonstration at State, District, Block and Panchayat levels for celebrating International Day of Yoga on a grand scale involving all Schools/Colleges/Universities, General Public, Yoga Institutions, Police Personnel, NCC Cadets, NSS, NYKS, etc. The Ministry of External Affairs celebrated the International Day of Yoga in more than 190 countries by organising activities which included conferences on Yoga, Meetings of Yoga clubs, Yoga concerts, Yogathons, Yoga walks, documentary film screening on Yoga, Photo exhibition on yoga etc. The events were well received across the world.

(b) The Government of India have approved the National AYUSH Mission which, *inter-alia*, envisages better access to AYUSH services including Yoga strengthening of AYUSH educational institutions. The Mission provides for: (i) Co-location of AYUSH facilities at Health Centers/Hospitals including Yoga facilities: (ii) Upgradation of exclusive State AYUSH Hospitals and dispensaries including hospitals with Yoga centers: (iii) Upgradation of State Government teaching institutions including those of Yoga: (iv) AYUSH wellness Centres including Yoga, as per guidelines as deemed appropriate by the States under the flexible component. The State/ UTs Government are required to project their proposals under State Annual Action Plan (SAAP) as per the guidelines of National AYUSH Mission (NAM).

Further, the Ministry under its Central Sector Schemes of Information Education and Communication (IEC) and International Co-operation (IC) extends financial

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† Original notice of the question was received in Hindi.

assistance to State Governments and other reputed Government/ Non-Governmental Organizations/ Universities for conducting National/ International seminars/workshops/ symposiums to promote Yoga. In addition, the Ministry carries out mass media campaigns through electronic and print media and Arogya fairs for creating awareness amongst the people.

The Ministry of AYUSH has recently initiated a Scheme for Voluntary Certification of Yoga Professionals. First phase of the Scheme to certify Yoga teachers was launched on 22nd June, 2015. The Scheme is being operated by the Quality Council of India (QCI), an apex quality facilitation and accreditation body, under Ministry of Commerce and Industry.

### **Conservation of endangered medicinal plants**

7. SHRIMATI GUNDU SUDHARANI: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

- (a) the details of medicinal plants that India have;
- (b) whether National Medicinal Plant Board is conserving, cultivating, processing and storing all the available medicinal and aromatic plants;
- (c) if so, the details of plants that are conserved, cultivated, processed and stored, plant-wise; and
- (d) whether it is a fact that many medicinal plants are becoming endangered, if so, the details of endangered medicinal and aromatic plants and efforts being made to conserve them?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) Botanical Survey of India (BSI), an organization under Ministry of Environment, Forest and Climate Change has been carrying out survey and documentation of all plant resources of the country including medicinal/ aromatic plants and herbs. As per BSI estimate more than 8,000 species of medicinal herbs and plants are found in the country.

(b) The Government of India have set up the National Medicinal Plants Board (NMPB) 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 following Schemes are being implemented *w.e.f.* 2008-09:

- (i) Central Sector Scheme for “Conservation, Development and Sustainable Management of Medicinal Plants” which primarily aims at providing support

for Survey, Inventorization, *in-situ/ex-situ* conservation, herbal gardens, Research and Development, linkage with peoples collectives like Self Help Groups (SHGs), Joint Forests Management Committees (JFMCs) etc.

- (ii) Centrally Sponsored Scheme of “National Mission on Medicinal Plants” which primarily aims at providing support for cultivation of medicinal plants on private land with backwards linkages, for establishment of nurseries for supply of quality planting material etc. and forward linkages for post-harvest management, marketing infrastructure, certification etc. Currently this Scheme is being implemented as a component (Medicinal Plants) of the National AYUSH Mission (NAM) Scheme of the Ministry of AYUSH.

(c) Medicinal plants species found in different regions of the country are being conserved by *in-situ* conservation through Medicinal Plants Conservation Areas (MPCAs) and *ex-situ* conservation through Herbal Gardens.

The cultivation of 140 prioritized Medicinal Plants species is being supported by NMPB, Ministry of AYUSH.

For Processing and storage of medicinal plants, support is also being provided under the Schemes of NMPB.

The State/UT-wise details of the funds released under both the Schemes during the last three years are given in Statement-I and Statement-II (*See below*) respectively.

(d) Yes, there are several medicinal plants species that are becoming endangered in their natural habitat due to several factors. According to the Botanical Survey of India (BSI), the threatened medicinal and aromatic plants are as follows:

*Aconitum balfourii*, *Aconitum chasmanthum*, *Aconitum deinorrhizum*, *Aconitum falconeri* var. *latilobum*, *Aconitum ferox*, *Aconitum heterophyllum*, *Acorus gramineus*, *Allium stracheyi*, *Amyris balsamifera*, *Angelica glauca*, *Anogeissus sericea* var. *numularia*, *Aquillaria mallaccensis*, *Aquilaria khasiana*, *Aristolochia bracteolata*, *Aristolochia indica*, *Arnebia benthamii*, *Atropa acuminata*, *Berberis affinis*, *Berberis apiculata*, *Berberis aristata*, *Bergenia stracheyi*, *Boronia megastigma*, *Capparis pachyphylla*, *Carum villosum*, *Cedrus deodara*, *Colchicum luteum*, *Coptis teeta*, *Coscinium fenestratum*, *Dactylorhiza hatagirea*, *Dioscorea deltoidea*, *Elaeocarpus prunifolius*, *Ephedra gerardiana*, *Ferrula gummosa*, *Gaultheria fragrantissima*, *Gentiana kurooa*, *Gloriosa superba*, *Hedychium coronarium*, *Hedychium spicatum*, *Hyoscyamus niger*, *Hydnocarpus macrocarpa*, *Inula racemosa*, *Iphigenia indica*, *Iphigenia pallida*, *Iphigenia stellata*, *Jurinea dolomiacea*, *Kolanchoe roseus*, *Madhuca insignis*, *Myristica fragrans*, *Myroxylon balsamum* var. *pereirae*, *Nardostachys grandiflora*, *Origanum vulgare*, *Panax pseudoginseng*, *Picrorhiza kurrooa*, *Podophyllum hexandrum*, *Pogostemon*

cablin, Pterocarpus santalinus, Rauvolfia serpentina, Rheum emodi, Santalum album, Satureja horensis, Saussurea bracteata, Saussurea costus, Saussurea gnaphalodes, Swertia chirayita, Taxus wallichiana, Taxocarpus kurzii, Urginea indica, Urginea maritima and Vitex peduncularis.

All the endangered medicinal plants are being conserved by *in-situ* conservation through MPCAs and by *ex-situ* conservation through herbal gardens. In addition, cultivation of endangered medicinal plants species is also being done in a mission mode.

### Statement-I

*State/UT-wise and year-wise fund released w.e.f 2012-13 to 2014-15 under Central Sector Scheme for "Conservation, Development and Sustainable Management of Medicinal Plants"*

(₹ in lakhs)

Sl.No.	State/UT	2012-13	2013-14	2014-15	Total
1.	Andhra Pradesh	44.58	194.10	761.93	1000.61
2.	Arunachal Pradesh	0.00	4.95	0.00	4.95
3.	Assam	4.33	29.00	0.00	33.33
4.	Chhattisgarh	178.60	374.07	222.36	775.03
5.	Delhi	38.80	87.86	114.12	240.78
6.	Gujarat	609.91	133.15	238.22	981.28
7.	Haryana	0.00	10.87	4.69	15.56
8.	Himachal Pradesh	11.24	40.44	272.74	324.42
9.	Jammu and Kashmir	33.38	175.09	31.19	239.66
10.	Jharkhand	138.96	0.00	618.00	756.96
11.	Karnataka	191.87	281.21	917.39	1390.47
12.	Kerala	50.54	161.88	159.72	372.14
13.	Madhya Pradesh	222.30	1338.91	11.24	1572.45
14.	Maharashtra	890.95	661.59	351.72	1904.26
15.	Manipur	16.00	13.00	17.20	46.20
16.	Mizoram	265.35	174.90	11.00	451.25
17.	Nagaland	74.22	99.35	87.77	261.34
18.	Odisha	2.79	97.10	31.00	130.89
19.	Punjab	0.00	39.01	0.00	39.01

Sl.No.	State/UT	2012-13	2013-14	2014-15	Total
20.	Rajasthan	597.94	684.37	320.53	1602.84
21.	Sikkim	177.01	547.38	611.82	1336.21
22.	Tamil Nadu	16.90	190.28	8.40	215.58
23.	Tripura	89.56	0.00	216.43	305.99
24.	Telangana	0.00	0.00	12.00	12.00
25.	Uttarakhand	20.64	133.15	150.63	304.42
26.	Uttar Pradesh	4.29	188.53	58.93	251.75
27.	West Bengal	75.48	109.00	573.08	757.56
28.	Andaman and Nicobar	0.00	41.27	0.00	41.27
29.	Chandigarh	17.12	5.00	6.46	28.58
30.	Lakshadweep	0.00	0.00	2.69	2.69
31.	Puducherry	0.00	1.80	0.00	1.80
TOTAL		3772.76	5817.26	5811.26	15401.28

***Statement-II***

*State/UT-wise and year-wise fund released w.e.f 2012-13 to 2014-15 under Centrally Sponsored Scheme of "National Mission on Medicinal Plants"*

(₹ in lakhs)

Sl.No.	State/UT	2012-13	2013-14	2014-15	Total
1.	Andhra Pradesh	834.32	963.63	1200.61	2998.56
2.	Arunachal Pradesh	0.00	118.65	0.00	118.65
3.	Assam	162.81	0.00	0.00	162.81
4.	Gujarat	0.00	0.00	172.25	172.25
5.	Haryana	0.00	171.14	87.50	258.64
6.	Himachal Pradesh	0.00	98.00	0.00	97.54
7.	Karnataka	0.00	216.71	110.82	327.53
8.	Kerala	210.41	264.27	0.00	474.68
9.	Madhya Pradesh	474.59	526.43	507.30	1508.32
10.	Maharashtra	0.00	682.44	589.88	1272.32
11.	Manipur	57.6	105.96	73.06	236.62
12.	Meghalaya	0.00	0.00	172.62	172.62

Sl.No.	State/UT	2012-13	2013-14	2014-15	TOTAL
13.	Mizoram	8.91	18.28	57.72	84.91
14.	Nagaland	188.47	175.88	102.06	466.41
15.	Odisha	111.00	150.66	191.53	453.19
16.	Rajasthan	0.00	28.87	42.51	71.38
17.	Sikkim	161.94	137.59	77.24	376.77
18.	Tamil Nadu	741.5	1022.67	926.57	2690.74
19.	Tripura	0.00	0.00	53.23	53.23
20.	Uttar Pradesh	834.53	424.36	0.00	1258.89
21.	Uttarakhand	0.00	278.86	202.03	480.89
TOTAL		3786.08	5383.94	4566.93	13736.95

#### Funds to States for organising Yoga Programmes

†8. SHRI MAHENDRA SINGH MAHRA: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the number of people who participated in the Yoga programme organized at Rajpath situated in the capital of the country on 21 June, 2015;

(b) the details of total amount spent on this sponsored/organised Yoga programme in Delhi and other States;

(c) whether such Yoga programme will be organised every year; and

(d) if so, whether the States would be provided funds for organising the Yoga programme?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) A total number of 35,985 people participated in the Yoga demonstration organized by the Ministry at Rajpath, New Delhi on the occasion of International Day of Yoga on 21 June, 2015.

(b) The Ministry spent the ₹ 1586.96 Lakhs on this programme. The details of the expenditure is as under:—

Sl.No.	Activity	Sanction/Expenditure (₹ in lakhs)
1.	Publicity through DAVP, DD and AIR	828.43
2.	Arrangements for the Mass Yoga Demonstration at Rajpath on 21/6/2015	758.53
TOTAL		1586.96

In addition, Central Council for Research in Yoga and Naturopathy (CCRYN) and Morarji Desai National Institute of Yoga (MDNIY), the autonomous organizations under the Ministry, incurred the following expenditure :-

- (i) Financial Assistance to Government Institutions / Non- Government Organization for organising of Yoga Camps and celebration of International Day of Yoga in each district of the Country @ ₹ 1.00 lakh each by CCRYN ₹ 670.00 lakhs
- (ii) Expenditure on production of Film and Booklet on Common Yoga Protocol by MDNIY ₹ 34.80 lakh

No separate funds were released to the States/UTs for International Day of Yoga.

(c) and (d) No plan has been formulated as yet for organizing such Yoga programmes every year by the Government of India.

#### **Task force on AYUSH System of Medicines**

9. SHRIMATI RENUKA CHOWDHURY: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government has formed a Task Force comprising experts of different systems of treatment including Ayurveda, Yoga, Unani, Siddha and Homoeopathy to study infrastructure and manpower availability in various streams in the country;

(b) if so, the composition of the Task Force along with the time by which it is likely to submit its report; and

(c) the steps taken by Government to chalk out a road map to cater to the need of Primary Health Centres, Community Health Centres and district hospitals across the country and act accordingly?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH)



(SHRI SHRIPAD YESSO NAIK): (a) Yes. The Government of India, Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) on 4th March, 2015, 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.

(b) The Committee Task Force consists of 20 expert members from different systems. The detail of the Members of Task Force and the timelines to submit its report are given in Statement (*See* below).

(c) Public Health being a State subject, the primary responsibility to provide Health services to the citizens 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 for recruitment of specialist on contractual basis based on the requirement proposed by the States/UT's in their Programme Implementation Plans.

Financial support is also being provided to States, *inter-alia* for giving hard area allowances and performance based initiatives etc. to specialists for serving in Community Health Centre/District Hospital in remote areas and for their residential quarters so that they 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 specialists rationally.

Multi-skilling of MBBS doctors by training them on emergency of Obstetric Care and life saving Anesthetic Skills is supported to overcome the shortage of specialists such as Gynecologists and Anesthetics.

Under National AYUSH Mission (NAM), there is provision of co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospitals (DHs). The engagement of AYUSH Doctors/paramedics and their training is supported by the Department of Health and Family Welfare, while the support for AYUSH infrastructure, equipment/furniture and medicines are provided by Ministry of AYUSH under shared responsibilities.

(TO BE PULISHED IN THE EXTRAORDINARY GAZETTE OF INDIA,  
PART I, SECTION 1)

Government of India  
Ministry of AYUSH  
New Delhi

Dated: 4th March, 2015

## NOTIFICATION

No. L.-28015/12412014-P and C. It has been decided by the Government to constitute a Task Force to deliberate on various important issues concerning the Ministry of AYUSH. The composition of the Task Force is as follows:

**Non-official Members:**

1. Dr. H.R. Nagendra Chairman  
Chancellor, S-VYASA Yoga University, Bengaluru
2. Dr. Rajesh Kotecha Member  
Vice-Chancellor, Gujarat Ayurved University, Jamnagar.
3. Dr. Ramaswamy Member  
Director, Siddha Central Research Institute,  
Anna Arch Road, Arumbakkam Chennai,  
Tamil Nadu - 6000
4. Shri Darshan Shankar Member  
Vice-Chancellor,  
Institute of Trans-Disciplinary Health Sciences and Technology,  
No. 74/2. Jarakbande Koval, Bengaluru - 560064.
5. Dr. Khalid Siddiqui Member  
Former Director General,  
Central Council for Research in Unani Medicine, New Delhi.
6. Dr. Issac Mathai Member  
Medical Director,  
SOUKYA - Dr. Mathai's International Holistic Health Centre,  
Bengaluru.
7. Dr. Bhushan Patwardhan Member  
Professor and Director,  
Inter-disciplinary School of Health Sciences,  
University of Pune, Pune.
8. Dr. Prashant Shetray Member  
Principal and Chief Medical Officer,  
SDM College of Naturopathy and Yogic Sciences,  
Ujire, Karnataka.
9. Shri Jayakumar A. Member  
Secretary General, Vijnana Bharati,  
A-357, Defence Colony, New Delhi-110024.

- |   |                  |
|---|------------------|
| 10. Shri O.P. Tiwari<br>Kaiwalyadham, Lonavala, Maharashtra.  | Member           |
| 11. Shri Pradeep Multani<br>Chairman, Multani Pharmaceuticals Ltd.<br>H-36, Connaught Place, New Delhi - 110001                                   | Member           |
| 12. Shri Keshav Desiraju<br>Ex-Secretary, Ministry of Health and Family Welfare.<br>New Delhi.  | Member           |
| 13. Shri Anil Jauhri<br>Quality Council of India,<br>2nd Floor, Institution of Engineers Building,<br>2-Bahadurshah Zafar Marg, New Delhi-110002. | Member           |
| 14. Shri Jitendra Sharma<br>Joint Secretary, Ministry of AYUSH,<br>New Delhi.   | Member Secretary |
2. Terms of Reference of the Task Force are as follows:
- (i) To recommend specific areas for strategic, high impact research that have the potential to transform global healthcare. The recommendations should be in the form of short-term (1-3 years) and long-term (3-5 years) action plans for research and also recommend a structure for promoting coordinated research and pooling of resources, so as to encourage the high impact research in priority areas.
  - (ii) To recommend operational systems based on systems already used by DST, DBT, DRDO and 'best-global governance, and management practices' for appraisal, approval, monitoring and evaluation of AYUSH schemes.
  - (iii) To recommend strategies for creating a small number of world class AYUSH knowledge institutions, on the lines of Indian Institutes of Technology and Indian Institutes of Science by building upon existing institutions, which already have creditable track records.
  - (iv) To recommend reforms in structure and functioning of CCIM, in order to promote both transparency and innovation in the AYUSH education system.

- (v) To look into all matters pertaining to compliance of quality standards in ASU and H drugs, GMP standards and their compliance, requirement *vis-a-vis* availability of raw materials and its source and related matters.
  - (vi) To recommend road-map and strategy for international promotion of AYUSH.
  - (vii) To recommend inter-departmental strategies for promoting AYUSH schemes in conjunction with related Departments of Government of India.
  - (viii) To suggest road-map for lateral integration of AYUSH systems at various levels of education starting from school level.
  - (ix) To recommend on developing job/business opportunities in AYUSH sector.
3. The Task Force is required to submit its Report by 30th September, 2015.
4. The Chairman of the Task Force would have the authority to invite any other expert/s, as deemed appropriate by him.
5. Ministry of AYUSH will provide all the necessary logistic support for the Task Force.
6. The non-official Members of the Task Force will be entitled to TA/DA as per extant norms of Government of India.
7. This issues with the approval of Minister of State (Independent Charge), Ministry of AYUSH.

Sd/-

(Anil Ganeriwala)

Joint Secretary to Government of India

Tel. No. 011-24651954

Email: [jsakg-ayush@nic.in](mailto:jsakg-ayush@nic.in)

To,  
The Manager,  
Government of India Press,  
Ring Road, Maya Puri,  
New Delhi - 110063.

No. Z.28015/124/2014-P and C

New Delhi, 4th March 2015

Copy to:

1. All Members of the Task Force
2. PS to MoS (I/C), Ministry of AYUSH, New Delhi.
3. PPS to Secretary (AYUSH)
4. PA to JS(JS)/PPS to JS(AKG)/PS to JS(AS)/PA to CEO (I/C),NMPB
5. Dir. (R)/Dir. (RK)/Dir. (FLK)/
6. DS (RM)/DS(RL)/OS (AS)
7. Jt. Advisers<sup>1</sup> Deputy Advisers/Assistant Advisers<sup>1</sup> DO (PandE)
8. All Research Councils/National Institutes/IMPCL/HPL/PLIM

THE GAZETTE OF INDIA: EXTRAORDINARY

[PART I-SEC. 1]

MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY,  
UNANI, SIDDHA AND HOMOEOPATHY

ADDENDUM

New Delhi, the 9th June, 2015

No.Z.28015/124/2014-P and C : In partial modification to the Notification of even number, dated 4th March, 2015 constituting a Task Force to deliberate on various important issues concerning the Ministry of AYUSH, the following additional members are included in the Task Force:

1. Dr. Nagaraja D. N., former Director, NIMHANS, Bengaluru,
2. Prof. Gangadhar, Department of Psychiatry, NIMHANS. Bengaluru.
3. Dr. Ralljit Roy Choudhary, Kolkata.
4. Dr. I. Basavaraddi, Director MDNIY, New Delhi.
5. Dr. M. A. Siddique, Director. National Institute of Unani, Bengaluru.
6. Dr. Acharya Dev Vrat, Principal, Gurukul, Kurukshetra, Haryana.

ANURAG SRIVASTAVA, Jt. Secy,

(TO BE PUBLISHED IN THE EXTRAORDINARY GAZETTE OF INDIA,  
PART-I, SECTION-I)

Government of India  
Ministry of AYUSH

AYUSH BHAVAN  
'B' Block, GPO Complex,  
INA, New Delhi-110023.  
Dated, 24th March, 2015

## CORRIGENDUM

No.Z.28015/124/2014-P and C: In partial modification to the Notification of even number, dated 4th March, 2015 constituting Task force to deliberate on various important issues concerning the Ministry of AYUSH, the name of the Member-Secretary may be read asr Shri Anurag Srivastava' instead of 'Shri Jitendra Sharma'.

Sd/-

(Anil Ganeriwala)

Joint Secretary to the Govt. of India

Tele No: 011-24651955

E-mail: [jsakg-ayush@nic.in](mailto:jsakg-ayush@nic.in)

To

The Manager,

Government of India Press, (along with Hindi Version)

Ring Road, Maya Puri, New Deihi.

No.Z. 280 15/124/2014-P and C

New Delhi, 24th March, 2015

Copy to:

1. All Members of the Task Force
2. Adv.(U)/Adv.(H)/Adv.(MN)/Adv.(DCK)
3. PS to MoS (I/C), Ministry of AYUSH, New Delhi.
4. Dir.(R)/Dir.(RK )/Dir.(FLK)
5. DS(AS)/DS(RM)/DS(RL)
6. Jt. Advisers/Dy. Advisers/Assistant Advisers/DD(PandE)
7. All Research Councils/National Institutes/IMPCL/HPL/PLIM

Copy also to:

1. PPS to Secretary (AYUSH)
2. PS to JS (JS)/PPS to JS (AKG)/PA to JS(AS)/PA to CEO (1/C), NMPB

(TO BE PUBLISHED IN THE EXTRAORDINARY  
GAZETTE OF INDIA, PART I, SECTION I)

Government of India  
Ministry of AYUSH

AYUSH BHAVAN  
'B' Block, GPO Complex,  
INA, New Delhi -110023  
Dated, 06th April, 2015

ADDENDUM

No.Z.28015/124/2014-P and C In partial modification to the Notification of even number dated 04th March, 2015 constituting a Task Force to deliberate on various important issues concerning the Ministry of AYUSH, the following item No.(x) in the Terms of Reference of the Task Force may be added after item No.(ix) under para 2 or the said Notification:

"To deliberate and recommend the preferred option for promotion, development and regulation of YOGA Naturopathy for education and practice."

Sd/-

(Anil Ganeriwala)

Joint Secretary to the Govt. of India

Tele No: 011-24651955

E-mail: [jsakg-ayush@nic.in](mailto:jsakg-ayush@nic.in)

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The Manager,  
Government of India Press,  
Ring Road, Maya Puri, New Delhi.

No.Z.28015/124/2014-Pand C

New Delhi. 06th April, 2015

Copy to:

1. All Members of the Committee
2. Adv.(U)/Adv.(H)/CEO(I/C), NMPB/ Adv.(MN)/Adv.(DCK)
3. PS to MoS (I/C), AYUSH Bhawan, New Delhi.
4. Dir.(R)/Dir. (RK)/Dir.(FLK)
5. DS(RM)/DS(RL)/DS(AS)
6. Jt. Advisers/Dy. Advisers/Assistant Advisers/DD(PandE)
7. All Research Councils/National Institutes/IMPCL/HPL/PLI M

Copy also to:

1. PPS to MoS (I/C), Ministry of AYUSH
2. PPS to Secretary AYUSH
3. PS to JS(JS)/PPS to JS (AKG)/PA to JS(AS)

**Action plan for Yoga promotion**

10. SHRI SANJAY RAUT: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government has prepared any ambitious action plan on the promotion of Yoga for tapping the ancient form of exercise in various parts of the country, if so, the details thereof;

(b) the details of fund allocated for the promotion of Yoga programmes in the country during the last one year; and

(c) the details of Government programmes and schemes currently in operation for the promotion of Yoga in the country?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) The Ministry under its Central Sector Schemes of Information Education and Communication (IEC) and International Co-operation (IC) extends financial assistance to State Governments and other reputed Government/ Non Governmental Organizations/Universities for conducting National/ International seminars/workshops/symposiums to promote Yoga.

The Government also carries out print and electronic media campaigns for development, promotion and creation of awareness among the people about health promotive, disease preventive and curative potentials of Yoga in the country. AROGYA fairs at National and State level are organized to make public aware of the benefits of AYUSH systems including Yoga.

The Ministry of AYUSH has recently initiated a Scheme for Voluntary Certification of Yoga Professionals. First phase of the Scheme to certify Yoga teachers was launched on 22nd June, 2015. The Scheme is being operated by the Quality Council of India (QCI), India's apex quality facilitation and accreditation body, under Ministry of Commerce and Industry.

(b) During 2014-15, under the Central Sector Scheme of Information, Education and Communication (IEC) and International Cooperation (IC) of the Ministry of AYUSH, funds to the tune of ₹ 17.50 crore and ₹ 8 crore were allocated respectively for promotion of AYUSH systems including Yoga.

In addition, Central Council for Research in YOGA Naturopathy (CCRYN) and Morarji Desai National Institute of Yoga (MDNIY) were allocated ₹ 13.70 crore and ₹ 9 crore under Plan and ₹ 2.24 crore and ₹ 4.20 crore under Non-Plan respectively.



(c) Details of programmes and schemes currently in operation for the promotion of Yoga in the country are as follows :—

- (i) Under the Central Sector Schemes of Information Education and Communication (IEC) and International Co-operation (IC) as mentioned in the reply of part (a) of the question, the Ministry of AYUSH has been undertaking many activities to promote Yoga.
- (ii) The Ministry of AYUSH has recently initiated a Scheme for Voluntary Certification of Yoga Professionals. (Details mentioned in reply of part (a) of the question).
- (iii) A scheme titled “Yoga Training for Police Personnel” has been formulated by the Ministry. Financial assistance in the form of recurring grant of ₹ 7.00 lakh and non-recurring grant of ₹ 1.00 lakh (one time) will be provided to each district of the State/UT.
- (iv) MDNIY has started B.Sc. (Yoga Science), a regular course of three years duration, Diploma in Yogic Science of One year duration and Certificate courses in Yogic Science for specified Target groups like Delhi Police.
- (v) NIN, Pune provides treatment facility to the patients. It also conducts two years Nursing Diploma in Naturopathy and Yoga Therapy Course. It has set up a state of the art new pathology lab in its premises with fully equipped automated analyzers for all the routine tests and special tests like CD4 counter for AIDS, Tridot, Spirometry etc.
- (vi) CCRYN has established a Central Research Institute (CRI) in Rohini, Delhi. First phase construction work of two more CRIs in Nagmangala, Karnataka and Jhajjar, Haryana is almost complete. The Council is running 8 YOGA Naturopathy OPDs in Government Hospitals of Delhi and Haryana.
- (vii) The Government of India has approved the National AYUSH Mission which, *inter-alia*, envisages better access to AYUSH services including Yoga and strengthening of AYUSH educational institutions. The Mission provides for (a) Co-location of AYUSH facilities at Health Centers/ Hospitals including Yoga facilities (b) Upgradation of exclusive State AYUSH Hospitals and dispensaries including hospitals with Yoga centers (c) Upgradation of State Government teaching institutions including those of Yoga (d) Yoga and Naturopathy Wellness Centres as per guidelines as deemed appropriate by the States under the flexible component. The proposals are sanctioned under the AYUSH Mission on receipt of the same from the State/UT Governments.

**Opening of dedicated Yoga learning centres**

11. SHRI MD. NADIMUL HAQUE: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether it is a fact that Government was the major sponsor of International Day of Yoga across the world;

(b) if so, the details thereof along with total amount spent on this occasion;

(c) whether it is a fact that Government had provided funds to specific organizations for organising Yoga session on the occasion of International Yoga Day in the country;

(d) if so, the details of all such organisations along with total money sanctioned to them, organisation-wise;

(e) whether Government is providing special grant for opening of dedicated Yoga learning centres, across the country; and

(f) if so, the State-wise details of such planned centres and total amount sanctioned for this?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) and (b) Yes, Sir. The Government of India organised a mass Yoga demonstration at Rajpath, New Delhi on 21.6.2015 and an International Conference on Yoga on 21st and 22nd June, 2015 at Vigyan Bhawan, New Delhi. A total amount of ₹ 17.70 crore has been spent on the two events. The Ministry of External Affairs celebrated the International Day of Yoga in more than 190 countries by organising activities which included conferences on Yoga, Meetings of Yoga clubs, Yoga concerts, Yogathons, Yoga walks, documentary film screening on Yoga, Photo exhibition on yoga etc. incurring an expenditure of ₹ 8.00 crore. The events were well received across the world.

(c) and (d) Central council for Research in YOGA Naturopathy (An autonomous organization under the Ministry) had sanctioned ₹ 6.70 crore as financial assistance to Government organizations/NGOs upto ₹ 1.00 Lakh in each districts to conduct Yoga Camps and to celebrate International Day of Yoga on 21st June, 2015. A list of organizations approved for financial assistance is given in Statement-I (*See below*). Funds would be released to the approved organizations on receipt of reports, utilization certificate, audit certificate and other documents.

(e) and (f) The Government of India have approved the National AYUSH Mission

which, *inter-alia*, envisages better access to AYUSH services including YOGA and strengthening of AYUSH educational institutions. The Mission provides for: (i) Co-location of AYUSH facilities at Health Centers/Hospitals including Yoga facilities; (ii) Upgradation of exclusive State AYUSH Hospitals and dispensaries including hospitals with Yoga centers; (iii) Upgradation of State Government teaching institutions including those of Yoga; (iv) AYUSH wellness centres including Yoga, as per guidelines as deemed appropriate by the States under the flexible component. The State/UTs Government are required to project their proposals under State Annual Action Plan (SAAP) as per the guidelines of National AYUSH Mission (NAM). The Status of proposals received from States/UTs and funds approved under National AYUSH Mission (NAM) is given in Statement-II.

**Statement-I**

*Details of Organisations considered for financial assistance under  
International Day of Yoga Celebration*

(₹ in lakhs)

Sl. No.	Institutions	Districts allotted	Amount
1	2	3	4
1.	Sri Patanjali Maharshi Naturopathy and Yoga Medical College and Attached Hospital, 20/184-18, Hanumesh Nagar, Guntakal-515801	1	1.00
2.	Chittoor District Yoga Association, 75 G, Upstairs S.D. Road, Tirupati, Chittoor (District)-517507	1	1.00
3.	Yoga Consciousness Trust, 6-21-3, East Point Colony, Visakhapatnam, Andhra Pradesh-530017	4	4.00
4.	Amrutha Yogasykshakula Seva Trust, D 5-60-2, 38/1, 4/5, Ashok Nagar, Guntur, Andhra Pradesh-522002	1	1.00
5.	Mitra Holistic Health Society, Door No.4/516-12, Y.S. Nagar, Kadapa-516002	1	1.00
6.	Vasavya Mahila Mandali, D No.40-9/1-16, Vasavya Nagar, Benz Circle, Vijayawada, Krishna District, Andhra Pradesh-520 010	1	1.00
7.	Chaitanya Yuvajana Sangham Door No. 81/5A-5, Raghavendra Nagar, Near Raghunath Complex, Kurnool-518002 (A.P.)	1	1.00

1	2	3	4
8.	Venkateswara Health and Educational Society, Santhanutalapadu, Prakasam District-523225	1	1.00
9.	Training Reconstruction Educational Environmental Society, Narasareddy Colony, Podalakur (Village), Podalakur (Mandal) SPSR Nellore District, Andhra Pradesh-524345	1	1.00
10.	Vyakti Vikas Kendra, No. 19, 39th A Cross, 11th Main, IV T Block, Jayanagar, Bangalore-560041	68	68.00
11.	Zonal Director, Nehru Yuva Kendra Sangathan, Kolkata Zone, West Bengal	3	1.50
12.	Directorate of Health Services, AYUSH Branch, Naharlagun, Papumpare District, Arunachal Pradesh-791110	16	16.00
13.	Nani Sala Foundation, Arunachal Front Building, Near Takar Complex, Naharlagun, Papumpare Dist.-791110, Arunachal Pradesh	01	01.00
14.	Bigyanananda Yogashram Sangha, Vill.-Mangaldoi, P.O. and P.S. Mangaldoi, Dist. Darrang, Assam-784125	02	2.00
15.	Wens Link, Alhaj Commercial Complex, Ground Floor, Near HDFC ATM, NH-15, P.O. Bechimari, District Darrang-784514,	02	2.00
16.	North Eastern Development Society, Vill+P.O. Baushkata, P.S. South Salimara, Dist. Dhubri-783127	02	2.00
17.	Yoga Siksha and Yoga Chikitsa Kendra, Burha, Vill-Burha, Dist. Darrang, Assam, 784148	02	2.00
18.	Indian Yoga Culture and Yoga Therapy Centre, Central Gotanagar, Maligaon, Guwahati-781011	03	3.00
19.	Socio-Economic and cultural organization, Vill- Deurigaon, PO Howajan, Sub Division and PS Gohpur, District Sonitpur, Assam-784169	01	1.00
20.	Barnibari Yubak Sangha, P.O. Barnibari, Dist. Nalbari-781304	01	1.00

1	2	3	4
21.	Patanjali Yog Peeth, Haridwar Delhi National Highway, Post Bahadarabad-249402, Haridwar,	184	184.00
22.	Madan Krishna Social Welfare and Educational Trust Vidyapatti Nagar Colony Near D.N.Y. College, Madhubani-847211	01	1.00
23.	Mithila Institute of Post Graduate Studies and Research in Sanskrit Learning, Darbhanga	01	1.00
24.	Satyananda YOGA Ayurveda Research Institute Mothihari, Choutani Colony, Motihari, East Champaran-845401	01	1.00
25.	Foundation for Integral Human Advancement, CC-74, P.C. Colony, Kankerbagh, Patna-800020	01	1.00
26.	Bal Mahila Kalyan, Officer Colony Mirchaibari, Katihar, Bihar-854105	01	1.00
27.	United Mission for Integrated Development, Kashish Learning Institute, Rahmanganj Chowk, Po/Ps, Bhadurganj, Distt. Kishanganj (Bihar)-855101	01	1.00
28.	Bihar Sewa Samiti, Kutchery Road, Madhubani-847211	01	1.00
29.	Muzaffarpur Janhit Pratisthan, Ahiyapur (New Zeromile), Muzaffarpur, (Bihar)-842001	01	1.00
30.	Society for Preservation and Development of Human Potentiality, Room No.23, Shiv Apartment, Kankarbagh, Patna-800020	01	1.00
31.	Society for Awareness and Growth Assistance, 4188/2, NDF Katra, Nizamul, Mulk, Jama Masjid, Delhi-110006	01	1.00
32.	Prakritik Chikitsha Yog Sansthan, Unit of:-Prakriti Paryavaran Suraksha Manav Sarvangan Vikash Sansthan Barhetta Road, Laheriasarai, Darbhanga, Barhetta Road, Laheriasarai-846001	02	2.00
33.	Gramin Pragati, Vill-Ghohadiya, Post-Sohdhi, Distt.-Shekhpura Bihar-811304	01	1.00
34.	Progressive Foundation for Peoples, Premchand Path, Anand Nagar, Siwan	01	1.00
35.	Gram Vikas Parishad, Babu Saheb Dyodhi, P.O. and Distt. Madhubani (Bihar),	01	1.00

1	2	3	4
36.	Manoj Foundation, Rambhadra Ward No-13, Near Nalanda Academy School, Hajipur, Dist-Vaishali-844101, Bihar	01	1.00
37.	Directorate of Sports, Gymnasium Bldg., Punjab University, Directorate of Sports Gymnasium Bldg., P.U., Chandigarh-160014	01	1.00
38.	Isha Foundation 15, Govindasamy Naidu Layout, Singanallur, Coimbatore-641005	11	11.00
39.	Youth Coordinator District Nehru Yuva Kendra, Gandhi Nagar, Gujarat	01	0.50
40.	District Youth Coordinator Nehru Yuva Kendra, Gandhi Nagar, Gujarat	02	1.00
41.	Vivekanand Pratisthan Parishad Nehru Yuva Kendra, Gandhi Nagar, Gujarat	01	1.00
42.	Bharatiya Vidya Bhavan Bharatiya Vidya Bhavan, Kasturba Gandhi Marg, New Delhi-110001,	01	1.00
43.	Harijan Sevak Sangh Gandhi Ashram, Kingwasy Camp, Delhi-110009	01	1.00
44.	Pranav Urja D-132, Krishna Apartment, Shakarpur, Delhi-110092	01	1.00
45.	Delhi Yoga Sabha (Regd.) Yoga Divya Mandir, Bhama Shah Marg, Delhi-110009.	01	1.00
46.	Sri Aurbindo Society Adchini, Saheed Jeet Singh Marg, New Delhi-110017	01	1.00
47.	Nature Cure and Yoga Trust Bapu Nature Cure Hospital and Yogashram, Patparganj, Delhi	02	02.00
48.	Vishwa Jagriti Mission (Regd.) Anand Dham Ashram, Bakkarwala Marg, Nangloi Najafgarh Road, New Delhi-110041	05	05.00

1	2	3	4
49.	Bharateeya Sanskriti Prabodhini's Gomantak Ayurveda Mahavidyalaya and Research Centre Bharateeya Sanskriti Prabodhini Vazem Shiroda, Goa-403103	01	1.00
50.	Ambika Yoga Kutir Gomantak Damodar E-3, 3rd Floor, Near Polie Station Comba, Margao, Goa, Pin-403601	03	3.00
51.	Vasant Nature Cure Hospital and Pratibha Maternity Hospital Trust Thaltej Tekra, Thaltej, Ahmedabad, Gujarat-380054	01	1.00
52.	Jeevandeep Health Education and Charitable Trust Kodinar, At-Kodinar, Block No.2/12, Rajnagar Society, Chorvadi Mandir Road, Nr. By Pass, Kodinar, Distt-Gir Somanath, Gujarat-362725	02	2.00
53.	Nisargopchar Yog Manav Utthan Charitable Trust Jalamsang No Khancho, Vadva Nera, Bhavnagar-364001	04	4.00
54.	Takshashila Charitable Trust Plot No. C-4114-18-19, Near K.P.E.S. College, Kaliyabid, Sidsar Road, Bhavnagar-346002	01	1.00
55.	Maharshi Patanjali Institute of Yoga Naturopathy Education and Research, Shrimati Prabhaben Kantilal Sanghavi Yoga Building, Near Dhanvantari Ground, Ayurved University campus, Jamnagar-361008	01	1.00
56.	Gir Pachhat Jati Vikas Seva Samiti, At. Post-Madhupur, Ta: Talala, Distt.-Junagadh	01	1.00
57.	Saurashtra Medical and Educational Charitable Trust Rajkot, "Jayshree Traders" Ajay Mansion, Malaviya Road, Opp. Saurashtra Cold, 360 002	01	1.00
58.	Shubham Foundation Opp. Railway Station, AT Po. Ta. Khedbrahma, Distt. Sabarmati-383255	01	1.00
59.	Morarji Desai Institutue of Naturopathy and Yogic Sciences, Opp. R.R. Park, Water Tank Road, Karelibaug, Vadodara, Gujarat-390022	01	1.00

1	2	3	4
60.	Mahatma Gandhi Prakritik Chikitsa Samiti Gandhi Bhawan, Khokha, Tehsil and District Hisar-125033 Corr. Address: 4243 Defence colony, Jind-126102	02	2.00
61.	Career Point Educational Organization 231, New D.C. Colony, Opp. ESI Hospital, Hansi Road, Bhiwani- 127021, Haryana	01	1.00
62.	Sharad Foundation 557, Sec.-21B, Faridabad (Haryana)-121001	01	1.00
63.	Jan Kalyan Parishad Shiv Colony Mandi Adampur-125052, Hisar, Haryana	01	1.00
64.	Nehru Yuva Club Vill. Nara, Teh. Narnound, Distt, Hisar, Haryana-125039	01	1.00
65.	Maharishi Dayanand Nature Cure and Yoga Prashikshan Kendra Maharishi Dayanand Ashram, Ambala Road Kaithal-136027	01	1.00
66.	B.R.M. YOGA Naturopathy Institution Gharaunda (Karnal), # 587/2, Bajaj Colony, New Grain Market Road, Gharaunda, Distt.-Karnal (Haryana)-132114	02	2.00
67.	Sukhanand Foundation (Regd.) Parvati Kunj, Moti Nagar, Narnaul, Distt.-Mohindergarh, Haryana-123001	02	2.00
68.	International Brahmishi Mission Sector-19-A, Chandigarh-160019	01	1.00
69.	Shree Rama Krishna Charitable Trust 280/B, Shanti Nagar, Near Bal Vikas School, Panipat, Haryana	01	1.00
70.	Shah Satnamji Research and Develop Foundation Shah Satnamji Dham, Vill. Najia Khera Sirsa, Haryana-125055	01	1.00
71.	Surya Foundation B-3/330, Paschim Vihar, New Delhi-110063	01	1.00
72.	Swami Vivekanand Yog Sewa Sansthan Vill. and Post Mahangi, Block Gangoh, Distt. Saharanpur-247450	01	1.00



1	2	3	4
73.	Association for Rural and Technical Education Centre (ARTEC), Vill. and Post Malan, Tehsil and Dist. Kangra, H.P. Corr. Address: Vill. Mehendru, P.O. Katora, Tehsil Dehra, Dist. Kangra, H.P.	01	1.00
74.	Department of Yoga Studies Himachal Pradesh University, Summer Hill, Shimla-171005, H.P.	01	1.00
75.	Kashmir Institute of Naturopathy and Yoga Science Trust Zero Bridge, Raj Bagh, Sri Nagar, Kashmir-190008	03	3.00
76.	Nehru Adarsh Youth Club Village and Post Office Salehar, Tehsil R. S. Pura, District Jammu-181111	02	2.00
77.	Mahabodhi International Meditation Centre LEH Devachan, Saboo-Dho, P.O. Box # 22, Leh, Ladakh-194101	01	1.00
78.	National Development Organization 222-A, Poonch, Talab Tilloo, Jammu-180001, J and K	02	2.00
79.	Yoga Mitra Mandal, Belair Apartment E-Block, Flat-3B, Near Mahabir Tower, Main Road, Ranchi-834001, Jharkhand	01	1.00
80.	Shree Yogeshwar Vividodhesha Sounesthe At./PO. Holealur, Taluqa. Ron, Dist. Gadag – 582203	01	1.00
81.	Mahishi Trust, Dharwad-1 Banashankari Prakruti Dham, Yoga and Naturopathy Hospital, Daddikamalapur, Banashankari Kala Mantapa, Kelgeri Road, Dharwad-580001	01	1.00
82.	Priyadarshini Mahila Mandali No. 186, Rajarajeswari Temple Street, Devasandra Main Road, K.R. Puram, Bangalore-560036	01	1.00
83.	ArogyaMandira Trust ® No.148, 1st 'R' Block, Near ISKCON, Rajajinagar, Bangalore-560010	01	1.00
84.	SDM College of Naturopathy and Yogic Sciences Ujire-574240, Dakshin Kannada.	07	7.00

1	2	3	4
85.	Government Naturopathy Hospital #312, 3rd Cross, Devraj Aras Badvane, 'A' Block, Davangere – 577001	01	1.00
86.	Akruti Gruha Kaigarika and Gramina Abhivruddhi Sansthe ® Gadag TQ. and Dist. Gadag-582101	01	1.00
87.	Sarvodaya Seva Shikshan Samiti ® Savadi Karnataka Societies Registration Gadag, Dist. Gadag-582209	01	1.00
88.	Nisarga Trust ® Sirsi North Canara-581401	01	1.00
89.	Rajayoga Education and Research Foundation Brahma Kumaris Tapovan, Yellapur-581359, Distt. Karwar, Karnataka	03	3.00
90.	Janahitha, #8-11-336, Neelkanteswar Nagar NGO Colony, Raichur-584103	01	1.00
91.	JSS Institute of Naturopathy and Yogic Sciences Palakkad Highway, Navakkarai, Coimbatore-641105	03	3.00
92.	Swami Vivekananda Holistic Health Care and Research Centre, Mantralaya Road, Raichur-584102	01	1.00
93.	Prakruthi Trust IOK 108-A, Ganesha Colony, Bhadravati, Shimoga-577301 Karnataka	01	1.00
94.	Divine Park Trust (Regd.) Krishna Kuteera, Saligrama, Udupi District, Karnataka-576225	01	1.00
95.	Dr. K.S. Sharma Institute of Naturopathy and Yogic Sciences, Gokul Road, Basaveswar Nagar, Hubli-580030	01	1.00
96.	Amrita Vishwa Vidyapeetham, Amrita School of Ayurveda, Vallickavu, Clappana, P.O. Kollam-690525	02	2.00
97.	Rashtra Dharma Parishad, Madhava Nivas, Perandoor Road, Elamakkara, Cochin-682026	02	2.00

1	2	3	4
98.	Mahathma Nature Cure Centre, Court Road, Taliparamba PO-670141	01	1.00
99.	Kavilbhavan Yoga and Naturopathy Charitable Trust Puthariyadukkam. P.O. Palyani, Nileshtar, Kasargod Distt.-671314	01	1.00
100.	Pruthvi Charitable Trust (R) Burudekar Compound, Kumta	01	1.00
101.	Vaidyaratnam Ayurveda College Ollur-Thakikkattussery, Thrissur District, Kerala-680306	01	1.00
102.	Centre for Innovation in Science and Social Action (CISSA) Deepthi, West of Temple, Parassala, Thiruvananthapuram, Kerala	01	1.00
103.	Swami Vivekananda Medical Mission Kerala, Vivekananda Nagar, Muttill P.O., Kalpetta, North, Wayanad Distt. Kerala-673122	01	1.00
104.	Coordinator, Nehru Yuva Kendra Sangathan Lakshadweep	01	0.50
105.	Shri Somnath Gurukul Sanstha, H. No. 1/24, Panchsheel Nagar, Near T.T. Nagar, Bhopal-462003	01	1.00
106.	S. P. Memorial Shiksha Niketan Samiti C/o Sh. S. K. Shukla,, 86, Vinoba Ward-Shihora, Distt. Jabalpur-483225, M.P.	01	1.00
107.	Shree Sanskaar Sewa Samitee Ward No.10, Gandhi Chowk, Radha Krishnan Marg, Waraseoni, Dist. Balaghat-431881, M.P.	01	1.00
108.	Sanjivani Mahila Sangh House No. 4, Patel Nagar, Raisen Road, Bhopal-462022,	01	1.00
109.	Agrasar Shiksha Avam Samaj Kalayan Samiti E-68, Raj Homs Minal Residency, J.K. Road, Bhopal-462003	01	1.00
110.	Shri Krashn Prakaratik Yog Samiti A-25, Khanduja Dharmshala, Behind Sagar Hospital, Basant Vihar Gwalior-474001	01	1.00

1	2	3	4
111.	Department of Yoga, Barkatullah University Hosangabad Road, Bhopal-462026	01	1.00
112.	Atal Bihari Vajpayi Hindi Vishwavidhalaya Bhoj, Mukta Vishwavidhalaya Parisar, Kolar Road, Bhopal-462016	01	1.00
113.	Peoples General Association HD-27, Abhiruchi Parisar Old Subash Nagar, Bhopal-462023	01	1.00
114.	Mithilesh Jan Shiksha Sanstha 348/9A, Saket Nagar, Bhopal-462024	01	1.00
115.	Medical Counselling Centre 13-14, Panchsheel Nagar, Near Ravindra College Road, Bhopal-462003, M.P.	01	1.00
116.	Asra Samajik Lok Kalyan Samiti 21/3, Moti Bungla Colony Dewas, M.P.-455001	01	1.00
117.	Sunderbai Phoolchandji Adarsh Shiksha Sansthan 61, Bairathi Colony No.2, Indore (M.P.)-452014	01	1.00
118.	Indian Sant Namdeo Educational and Social Welfare Society, B/H of Post Office, House of Rajendra Kumar Majhgawan, Block Sihora, Jabalpur-483334	01	1.00
119.	Srajan Kamna Samaj Kalyan Education and Welfare Society, 56 Mukdaras Nagar, Near Amaan Mariage Hall, Pul Bagda, Bhopal	01	1.00
120.	M. P. Prakritik Chikitsalaya Tatha Mahavidyalay Samiti Gwalior, Tansen Road, Padav, Gwalior-474002	01	1.00
121.	Gyan Sarovar Shiksha Evam Jan Kalyan Samiti Near Gas Agency S.A.T.I Road Vidisha-464001	01	1.00
122.	Shree Nikhileswar Sewa Samiti 233, Dhar Road, Labhriya Bheru, Near Ramkrishana Bag, Opp. Sanskar College, Indore-452002 (MP)	01	1.00
123.	Vasundhara Vikas Sewa Samiti 333, Jai Nagar, Jabalpur-482002	01	1.00

1	2	3	4
124.	Ujjain Yoga Life Society, B-1, Vikram University Campus, Ujjain-456010	05	5.00
125.	Jai Bharti Shiksha Kendra 1326, Near Post Office Majhagawan, Tehsil Sihora, Jabalpur-483334, M.P	01	1.00
126.	Peoples General Association HD-27, Abhiruchi Parisar Old Subash Nagar, Bhopal-462023	01	1.00
127.	Avtar Smriti Shiksha Evam Kalyan, 153, Vivekanand Colony Ganeshpura, Morena-467001	01	1.00
128.	Divya Drishti Shiksha Samiti Jyoti Shopping Center, Zone-1, M.P. Nagar, Bhopal-462011	01	1.00
129.	Dronacharya Vidhya Peeth Shiksha Samiti Pragati Bal Vidya Mandir, Rajendra Nagar, Ganj Basoda-464221	01	1.00
130.	Chandroday Mahila Vikas Samiti C/o J.N. Rajpur, Village Gunga, Tehsil Berasia, Bhopal, Dist. Bhopal-462301, MP	01	1.00
131.	Doctor Hari Singh Gour University Sagar-470003	01	1.00
132.	Aashadeep Kalyan Samiti C/o Sh. S. K. Shukla, 86, Vinoba Ward-Shihora, (Near Govt. Girls Primary School, Shihora), Dist. Jabalpur-483225, M.P.	01	1.00
133.	Swastik Health and Education Society 24, Nagar Nigam Colony, Bhopal-462001	01	1.00
134.	Rose Servjan Utthan Samiti Near Shatabdi Complex, Shinde Ki Goth, Hujrat Pul, Lashkar, Gwalior-474001 (M.P.)	01	1.00
135.	Mangalam Shivpuri, In front of Polo Ground, Court Road, Shivpuri-473551,	01	1.00

1	2	3	4
136.	Amar Mahila evam Bal Utthan Shiksha Samiti C/o Sh. S. K. Shukla,, 86, Vinoba Ward- Shihora, Dist. Jabalpur-483225, MP	01	1.00
137.	Patanjali Yoga Vart Vidisha Maharishi Patanjali Path, Bhopal Road, Vidisha (M.P.)	01	1.00
138.	Ashvin Rural Ayurved College and Hospital Manchi Hill, Ashwi BK, Taluka Sangamner, Dist. Ahmednagar-413714	02	2.00
139.	Bruhan Maharashtra Yoga Parishad (BMYP) Amravati (M.S.)-444605	06	6.00
140.	Shree Hanuman Vyayam Prasarak Mandal Hanuman Vyayam Nagar, Amravati-444605	01	1.00
141.	Jai Durga Bahu-Uddeshiya Shikshan Sanstha 23, Naik Nagar, Manewada Ring Road, Nagpur-440027	01	1.00
142.	Mahatma Gandhi Ayurved College and Research Centre Salod (H), Wardha-442001	01	1.00
143.	Vidya Prasarak Mandal Goregaon, Distt. Hingoli At. Post-Goregaon, Tq. Sengaon, Distt.-Hingoli-431513	01	1.00
144.	Khandesh College Education Society M.J. College Campus, Jalgaon-425002	01	1.00
145.	Yog Vidya Dham, Gadhinglaj “Omkar” Gandhi Nagar, Gadhinglaj, Dist. Kolhapur-416502	01	1.00
146.	National Institute for Research in Reproductive Health (ICMR), J.M. Street, Parel, Mumbai – 400012	01	1.00
147.	The Yoga Institute Shri Yogendra Marg, Prabhat Colony, Santacruz East Mumbai-400055	00	00
148.	K. J. Somaiya Bharatiya Sanskriti Peetham, Somaiya Vidyavihar, Somaiya Bhavan, Mahatma Gandhi Road, Mumbai-400001	00	00

1	2	3	4
149.	Yog Vidya Dham, Dombivli IMA Office, 2nd Floor, Deepshikha 50 C, Opp. C.K.P. Hall, Dombivli (East)-421201	02	2.00
150.	Sahyadri Foundation, Sambhaji Salve Lahuji Nagar, Loha, Distt. Nanded-431708	01	1.00
151.	Kratin Education Society 21, Harihar Nagar, Besa, P.O. Pipla, Nagpur-440037	01	1.00
152.	Yoga Vidya Gurukul “Yoga Bhawan” Kaivalya Nagari, College Road, Kalpana Nagar, Nashik-422005	01	1.00
153.	Dr. D.Y. Patil College of Ayurved and Research Centre Sant Tukaram Nagar, Pimpri, Pune, Maharashtra-411018	01	1.00
154.	Nisargopchar Gramsudhar Trust’s Nisargopchar Ashram, Uruli Kanchan, Distt. Pune-412202, Maharashtra	01	1.00
155.	Arogya Seva Samiti, C/o S.D. Phadke, Shraddha Society Block No.8, Near Saraswati Mandir School Road, Tal.: Panvel, Distt. Raigad (Maharashtra)-410206	01	1.00
156.	Solapur Zilha Yog Parishad 22, Yashodhan Apartment, 81, Railway Lines, Duffrin Chowk, Solapur Maharashtra	01	1.00
157.	Arogyadham, Mahatma Gandhi Institute of Medical Science (MGIMS) Campus Kasturba Health Society, Sevagram, Arogyadham, Kasturba Nisargopchar Kendra, MGIMS, Sevagram, Wardha Distt.-442102	01	1.00
158.	Manipur State Yoga Association Haobam Marak, Keisham Leikai, Imphal-795001	01	1.00
159.	Volunteers Union For Rural Forward and Integrity (VURFI), Wangjing S.K. Leikai, Near River View Park, P.O. Wangjing, P.S. Thoubal, Thoubal District, Manipur-795148	01	1.00
160.	Revival Foundation Wangjing S.K. Leikai, P.O. Wangjing, P.S. Thoubal, Thoubal District, Manipur-795148	01	1.00

1	2	3	4
161.	Nature Cure and Yoga Hospital Kongba Kshetri Leikai, Imphal East-795008, Manipur	01	1.00
162.	Resource Centre for Social Welfare and Community Development (RCSWACD), Langol Ningthou Leikai, Imphal West District, P.O. Lamphelpat-795004	01	1.00
163.	Gold Mohoar Yoga and Naturopathy Research Academy Warock Meitei Langol, P.O. Lamphel, Imphal West-795004	02	2.00
164.	Integrated Rural Development and Educational Organization (IRDEO), Wangbal P.O. Thoubal distt. P.S. Thoubal, Manipur State-793138	01	1.00
165.	Organisation for Social Health Services Kongpal Naoibam Leikai, Imphal East District, Manipur-795005	01	1.00
166.	Ramakrishna Mission Ashrama Society Cherrapunjee (Shora), P.O. Cherrabazar, Distt. East Khasi Hills, Meghalaya-793111	09	9.00
167.	Centre for Community Development Through Network, Education, Research, Training Resource Mobilization and Capacity Building, COD Nerc Head Office, 2nd Floor, Dr. C. Lalthanga Building, Zodin Square, Near Mahatma Gandhi State, Aizawal Mizoram-796001	03	3.00
168.	Managing Director Naga Hospital Authority, Kohima, Govt. of Nagaland, Kohima	11	5.50
169.	Pallibandhu At. Dhenkena, P.O. Malisahi, P.S./Dist. Nayagarh (Odisha)-752070	01	1.00
170.	Sahayoga India Charampa, Bhadrak, Odisha	01	1.00
171.	Odisha Multi Medicusand Alternative Assocaition (OMMAA) LP-504, Prasantivihar, PO-KIIT, Bhubaneswar-751024	01	1.00



1	2	3	4
172.	Spandan At./Post Kumaripari, Via Sumandal, Distt. Ganjam, Odisha-761035	01	1.00
173.	Soputra Society At PO-Anlo, Via-Bairoi, Distt. Cuttack-754010, Odisha	01	1.00
174.	Gangotree Social Organisation Plot No. 228, Sahid Nagar, PO Sahidnagar, Distt. Khurdha, Bhubaneswar-751001	01	1.00
175.	National Integrated Human and Industrial Development Agency, Nihida, Odisha, Amaranga, P.O. Salanga, P.S. Nimapada, Distt. Puri, Odisha-752106	01	1.00
176.	Council for YOGA Social Transformation (CYST) At: Haripur, P.O. Langudi, Via Arnopal, Distt. Bhadrak-756116, Odisha	01	1.00
177.	Society for Human Advancement and Rural Education At.-Sandhyataralane, Kathagada, Anandnagar, P.O. Distt. Dhenkanal-759001, Odisha	01	1.00
178.	Janajagaran Kendra At/PO-Belapada, Via-Gadashila, Distt.-Dhenkanal-759025	01	1.00
179.	Indian Management and Technical Society (IMTS) Plot No. G.A.-215, Niladri Vihar, Opp. Budha Park, P.O. Sailashree Vihar, Bhubaneswar-751021, Odisha	01	1.00
180.	Bharat Yoga Kendra, Baliapanda Near Seabeach, Puri, Odisha-752001	01	1.00
181.	Jawaharlal Institute of Post Graduate Medical Education and Research (JIPMER) Dhanvantri Nagar, Puducherry-605006	01	1.00
182.	Swami Vivekananda Medical Mission 12, Makan, Krishan Nagar, Islamabad, Amritsar-143002	01	1.00
183.	Aasra Foundations P.G. School of Ayurveda and Research Amloh Road, Mandi Gobindgarh, Punjab-147203	01	1.00

1	2	3	4
184.	Param Vaibhav, C/o Dr. Kamaljyoti Memorial Hospital Thikriwal Road, Qadian-143516 M. : 09501701116, Email : promillakamal@gmail.com	01	1.00
185.	The International Council of Ayurveda, Sharma Hospital and Nursing Home Tehsil Road, Jagraon, Dt-Ludhiana-142026	01	1.00
186.	Maharishi Patanjali Institute of Naturopathy and Yoga Opp.: Gurudwara Singh Sabha, Shahpurkandi T/Ship, Distt. Pathankot-145029	01	1.00
187.	Lok Kalyan Samiti New Ranjit Pura-3, Chheharata, Amritsar-143105, Punjab	01	1.00
188.	Yog Sadhna Ashram University Marg, Bapu Nagar, Jaipur-302015	01	1.00
189.	Gandhi Swasthya Sadan Samiti Nehru Bal Vihar, Opp. Company Garden, Old Information Centre, Alwar-301001	01	1.00
190.	Devendra Yog Sansthan Nokha Road, Bhinasar, Bikaner-334403 (Rajasthan)	01	1.00
191.	National Institute of Technology Management B-8 Bhagwati Nagar, Near City Hospital, Kartarpura, Jaipur (Rajasthan)- 302015	01	1.00
192.	Kanchan Seva Sansthan Udaipur, 6-B, 16, Housing Board (VIP Colony), Hira magar, Sector-9, Udaipur, Rajasthan	01	1.00
193.	Radha Govind Shikshan and Vikas Sansthan Near Sandeepni Academy, Sangam Vihar Colony, Dausa-303303	01	1.00
194.	Shri Nath Acupressure Sodh Sansthan, Acupressure and Yoga Centre, 3-C-7, New Housing Board Corner, Sastriganj, Bhilwada-311001	02	2.00
195.	Human Educational Cultural Art and Rural Development Society, Add- G-18, Ist Floor, Bapuji Marg, Behind IOC Petrol Pump, Sehakar Marg, Jaipur (Raj.)-302001	01	1.00
196.	Arogya health Care research Sansthan Add- Shastri Nagar, Rani, Sati Road, Ward No. 27, Sikar (Raj)-332001,	01	1.00

1	2	3	4
197.	Gandhi Institute of Naturopathy Yogic and Ayurvedic Sciences, Arogya Niketan, Nature Cure Hospital, Hanumangarh Town-335513	01	1.00
198.	L. N. Birla Institute of Naturopathy and Yoga run by Shree Sita Ram Bhandar, Near Bust Stand Pilani, Distt.- Jhunjhunu (Rajasthan)-333031	01	1.00
199.	University College of Ayurved Add: Dr. S.R. Rajasthan Ayurved University, Jodhpur, Rajasthan-342037.	01	1.00
200.	Puranmal Phoola Devi Memorial Trust Swasthya Kalyan Yog, Naturopathy and Physiotherapy Centre, Lal Kothi, Jaipur Add- Sawasthya Kalyan bhawan, Narayan Singh road, Near Trimurti Circle, Jaipur-302004	01	1.00
201.	Dhanwantari Health Society 5-A-9, Talwandi, Kota-324005	01	1.00
202.	Jain Vishva Bharati Institute Ladnun, Distt. Nagaur (Rajasthan)-341306	01	1.00
203.	Smt. Foosi Devi Yoga and Naturopathy Sansthan C-07, IInd Floor, Laxmi Plaza, G.S. Road, Bikaner-334001	01	1.00
204.	Vivekanand Children Academy Sansthan Vivekanand Yoga and Naturopathy College, NH 11, Bajor, Sikar-332403	03	3.00
205.	Arogya Vihar Sansthan, H. No. 3034, Bhindon Karasta, Indra Bazar, Jaipur-302 001	01	1.00
206.	India Vision 2020 Sansthan Tank House, Bhati Circle Ratanada-342001	01	1.00
207.	Zonal Director Nehru Yuva Kendra Sangathan, Gangtok, Sikkim Zone	04	2.00
208.	Mahatma Gandhi Elaignar Narpani Mandram (MGENM) 1 B Munian Street, Rasipuram, Namakkal, Tamil Nadu-637408	02	2.00
209.	RS Health Trust 45 B, 66 Feet Road, Bharathipuram, Dharmapuri, Tamil Nadu-636705	01	1.00

1	2	3	4
210.	Feswa Social Health and Educational Trust Feswa Yoga and Nature Cure Hospital, 4/597, Murugabhavanam, Palani Road, Dindigul-624001	01	1.00
211.	Paradise Trust For Health and Education Jeba Cottage, Kottoor, Cheruppalloor, P.O., K.K. Distt.-629161, Tamil Nadu	01	1.00
212.	C. S. Health Trust 75/1, Trichy main Road, Gandhigramam, Karuru (Dt), Tamil Nadu	01	1.00
213.	Pillar Foundation 115/2, Neelakandan Koil Street, Pasumpon Nagar, Palanganatham, Madurai-625003	01	1.00
214.	Mother Teresa Women and Children (Female) Welfare Organization, No. 42/6, Pillaiyar Koil Stree, SSm Nagar, Kadambadi – Nagapattinam	01	1.00
215.	Women's Organisation for Rural Development (Word) D.No. 240/86, Santhi Nagar, Thiruvalluvar Salai, Pothanur Post, P. Velur Taluk, Namakkal District, Tamil Nadu-638181	01	1.00
216.	Community Action for Rural Development Samathuvapuram, Pulivalam – 622507, Pudukkottai District, Tamil Nadu	01	1.00
217.	N. S. Yoga and Nature Cures Hospital 222/134, 2nd Agraharam, Salem-636001 (T.N.)	01	1.00
218.	Roof Foundation, K.S.P.S. Illam, 4th Street, Madurai Road, Subramanியaraja Nagar, Sivagangai	01	1.00
219.	Traditional Artisans Welfare Society, 107/68, Nanthanar Street, Gandhipuram, Bhavani-638301, Erode District, Tamil Nadu	01	1.00
220.	Sri Sankara College of Yoga and Naturopathy Sannasipatti, Poolankulathupatti Post, Trichy-620009	01	1.00
221.	Sead Trust, Selliyaeeepalayam Oduvankurichi P.O., Rasipuram T.K., Namakkal D.T.-637406	01	1.00

1	2	3	4
222.	S.K.T. Nature Cure and Yoga Research Institute, 10/676, SeetalakshmiIllam, Surandai Road, Pavoorchatram, Tirunelvel-627808	01	1.00
223.	Sri Hari Yoga Vidhyalayam, 154/4A6, INTUC Nagar, Rajapalayam, Virudhunagar, Distt. 626117 Tamil Nadu	01	1.00
224.	Mythri YOGA Nature Cure Centre, Sri Krupa, 8-33, Mancherial Road, Chennor, Distt. Adilabad, Andhra Pradesh-504201	01	1.00
225.	Telangana State Yogadhyayana Parishad, D.No.7-1-66, 94 Dharam Karam Road, Begumpet, Hyderabad-500016	01	1.00
226.	Institute of Natural Healing, H-No.10-67, Laxminagar, Bommakal, Karimnagar-505001	01	1.00
227.	Addlife, Basavatarakam Indo-American Cancer Hospital and Research Institute 1st Avenue, Road No.14, Banjara Hills, Hyderabad-500034	04	4.00
228.	Sanjeevini Wellness Institute of Naturopathy and Yoga Sy No.15, Nazeeb Nagar Village, Amdapur, Panchayath Moinabad Mandal, Ranga Reddy District, Telangana	02	2.00
229.	Sri Sankara Education and Charitable Trust No. 2, Murugavel Nagar, LIC Colony, Trichy-620021	01	1.00
230.	Dhyanjyoti YOGA Natural Therapy Society Vill. Rajabagh, P.O. Radhakrishorpur, Udaipur, Gomati-799120	01	1.00
231.	Tripura Charitable Health Society ITI Road, Indranagar, Agartala-799006, Tripura (West)	01	1.00
232.	Akhanda Nimbar Bus Stop, P.O. Siddhi Ashram, Agartala, West Tripura-799003	01	1.00
233.	Shri Satya Sai Shiksha Evam Gramya Vikas Sansthan, B-48, Moti Kunj Extension, Mathura, Uttar Pradesh-281001	01	1.00
234.	Sardar Vallabh Bhai Patel Khadi Gramodyog Vikas Ashram, Vill Adhini, PO Dhanupur, Distt. Allahabad-221503 (U.P.)	01	1.00

1	2	3	4
235.	District Youth Coordinator, Nehru Yuva Kendra, Teen Moorti Bhawan, Near Balak Das Mandir, Antu Road, Amethi, U.P., 227405	01	1.00
236.	Peoples Action for Health and Livelihood Activities, Moukh Rampur, Maguradila, Akbarpur, Ambedkar Nagar, U.P.-224227	01	1.00
237.	Maa Janki Yog Evam Prakritik Chikitsa Sansthan, Vill. Mouhari, Post Phoolpur, Distt. Auraiya, U.P.-206128	01	1.00
238.	Shiv Yog Pranayam Prashikshan Avm Anusandhan Sansthan, Post Jafarpur, Distt. Azamgarh (U.P.) 276001.	01	1.00
239.	Sinjan Yog Trust, J-42A, Chanakya Place, Part-1, Street No.31, New Delhi-110059	03	3.00
240.	Adarsh Sewa Sansthan, Vill. Deeh (Ashok Pur Chachu Saray), Post Sirauli Kala, Distt. Barabanki (U.P.)-225202	01	1.00
241.	Math Yogendra Giri Society Village Post Balia, Distt. Balia-277201 (U.P.)	01	1.00
242.	Mohd. Sayeed Memorial Welfare Society C-1435/8, Indira Nagar, Lucknow-226016 (U.P.)	01	1.00
243.	U.P. Naturopathy and Yoga Teachers and Physician Association, SSI/252, Sitapur Road Scheme, Sector 'A', Lucknow-226021, U.P	01	1.00
244.	Ravindra Nath Tagore Grammotthan Shikshan, Prasar Sansthan, Plot no. 1, Hanumant Nagar, Triveni Nagar-3, Near Newton Public Shool, Sitapur Road, Lucknow-226020	01	1.00
245.	Janta Sewa Samiti, Nyay Marg Katra, Gandhi Nagar, Distt. Basti-272001 (U.P.)	01	1.00
246.	Society for Institute of Psychological Research and Health, 247/3, Mohammadi Sarai, Amroha-244221 (U.P.)	01	1.00
247.	Gayatri Parivar Trust Badayun, A-241, Awas Vikas, Badayun-243601	01	1.00

1	2	3	4
248.	Shree Maa Sharda Rashtriya Sewa Samiti, F-40 A-F, Block 2nd Floor, Street No.7, Mangal Bazar, Laxmi Nagar, New Delhi-110092	01	1.00
249.	Patanjali Chikitsa Sansthan, Sri Gandharbh Singh, Samaj Sevi Shiksha Samiti, Ashok Nagar, Etawah, U.P.-206001	01	1.00
250.	Dr. Bhimrao Ambedkar Shodh Sansthan, 3/364, Vineet Khand, Gomti Nagar, Lucknow, U.P.-226010	01	1.00
251.	Narmada Jan Kalyan Vikas Samiti, Plot No. 96, Sec.-A, J.B. Garden Para Road, Rajajipuram, Lucknow-226017	01	1.00
252.	Apra-Pra Yoga Research Centre, C-14/160-17-20A-1, Jawaharnagar Sonia-221001	01	1.00
253.	Kisan Kalia Samiti, Village and Post Semrawan, Tehsil Haidergarh, District Barabanki-2254013	01	1.00
254.	Prakritik Chikitsa Premi Sansthan, Arogya Mandir, Medical College Road, P.O. Arogya Mandir, Gorakhpur-273003 (U.P.)	01	1.00
255.	Divya Prakash Gyan Sansthan 267/23, Aishbagh Water Works Road, Lucknow-226004	01	1.00
256.	Sarvjan Sewa Sansthan, Mursan Kila, P.O. Mursan, Distt. Hathras (U.P.)-204213	01	1.00
257.	Anuragini, 273, Patel Nagar, Near Jal Nigam Office, Orai Distt. Jalaun, U.P.-285001	01	1.00
258.	Maa Shanti Shiksha Prasar Samiti, Vill. and P.O. Jagammanpur, District Jalaun-285124 UP	01	1.00
259.	King George's Medical University Uttar Pradesh, Lucknow, Shah Mina Road, Chowk, Lucknow-226003 U.P.	02	2.00
260.	Shri Nath Sewa Sansthan, Bhagwat Das Ghat Road, Kanpur-208001	01	1.00

1	2	3	4
261.	Indian Institute of Technology, Kanpur, Kalyanpur, Kanpur-208016	01	1.00
262.	Gurukul Shiksha Evam Gramin Vikas Sansthan, 459/786, Mahtap Bagh, Opp. Shish Mahal Talab, Durga Devi Marg, Chowk, Lucknow (U.P.)	02	2.00
263.	Vivekanand Yoga Sansthan, Verma Complex, Sadar Bazar, Teh. Sadar Dist. Shahjahanpur-242001	02	2.00
264.	Gorakhpur Bhartiya Shiksha Parishad, Dharmshala Bazar, Gorakhpur-273001	01	1.00
265.	Shri Sankat Mochan Yoga Research Institute, Shyam Kuti Nagar Mor Kuti, Parikrama Marg, Vrindavan, (U.P.)	01	1.00
266.	Trinetra Gramin Mahila Vikash Avam Prashikshan Sansthan, Vill Bilaspur, Post Aeilakh, Distt. Mau, U.P.-221706	01	1.00
267.	Nishant Arogya Evam Manav Sewa Kalyan Sansthan, Gupta Colony, Main Road, J.P. Nager Thane ke Piche, Bhagpat Road-25002	01	1.00
268.	Shri Manasaram Gupt Yog Samiti, Bazar Ganj, Kasarhatti Ahraura, Post Ahraura Distt. Mirzapur-231301	02	2.00
269.	Baldev Agarwal Naturopathy Centre, Ward No.9, Rajaldesar Churu	01	1.00
270.	Mokshayatan Yog Sansthan, Beri Bagh, Saharanpur-247001	03	3.00
271.	Maa Purna Jan Kalyan Sewa Sansthan, Add-New Civil Line, Near Pihani Chungi, Hardoi-241001	01	1.00
272.	Jagadguru Kripalu Chikitsalaya, Jagadguru Kripalu Parishad-Bhakti Dham, Vill. and Post: Mangarh, Tehsil: Kunda, Dist. Pratapgarh-230204	01	1.00
273.	Omkar Sewa Sansthan, Vill and Post-Katari, Distt. Amethi-227801, U.P.	01	1.00



1	2	3	4
274.	Ayurjeevanam Sewa Samiti, New Khandelwal Book Depot, Shaukat Ali Road, Civil Line-244901, Rampur (U.P.)	01	1.00
275.	Anand Gramodyog, Villag Fe-Baiyili, Post Mokarimpur, via-Balaghat, Gorakhpur-273404 (U.P.)	01	1.00
276.	Smt. Krishna Prakritik Chikitisa Yog and Ayurved Sansthan Vill. Chhonhi, P.O. Sarnath, Varanasi-221007	01	1.00
277.	District Your Coordinator, Nehru Yuva Kendra, Amethi	01	1.00
278.	Pratap Samajik Sewa Sansthan, 5/185, Ruchi Khand-1, Sharda Nagar, Lucknow-226002	01	1.00
279.	Ram Pyari Devi Memorial Prakritik Chikitsalaya Evam Shodh Samiti, 271-A, Indrapuri, Manas Nagar, Lucknow, U.P.-226023	01	1.00
280.	Dr. Ambedkar Swasthya Vikas Sewa Samiti, Govind Nagar, Hans Khera Road, Near Para Police Station Manak Nagar, Lucknow-226011	01	1.00
281.	Archana Yogayatan, B-101 B, Vasant Kunj Enclave, New Delhi-110070	01	1.00
282.	Samajik Vikas Avam Prabandh Samiti, Golna Karariya Damudhara, Lamgara Road, Almora, Post-Almora (Uttarakhand)-263601	01	1.00
283.	Dev Sanskriti Vishwavidyalaya, Gayatrikunj Shantikunj, Haridwar-249411	04	4.00
284.	Janv YOGA Homeo Shodh Kendra, (Suryodaya Seva Samiti), Village Dahriya, Near I.T.I., Manpur Paschim, Haldwani, Nainital	01	1.00
285.	Department of Yoga, Gurukul Kangri Vishwavidyalaya, Jwalapur, Haridwar	02	2.00
286.	Dev Rishi Educational Society (D.R.E.S.) 32/22 Circular Road, Dalanwala, Dehradun-248001	01	1.00

1	2	3	4
287.	Divya Prem Sewa Mission Nyas (Reg.) Sewa Kunj Campus Near Chandi Ghat Bridge, Haridwar, Uttarakhand	01	1.00
288.	Himandari Gramiya Vikas, Near old Tehsil Tehri Road, Ghansali, P.O. Ghansali-249155	01	1.00
289.	Aditya Naturopathy Yoga Hospital and Research Institute, Narayani Niwas, SantVihar, Phase-2, Kankhal Haridwar-249408	01	1.00
290.	Patanjali Yoga Evam Prakritik Chikitsa Shiksha Sodha Sansthan, Village and PO Geonla Brahmkhal, District Uttarkashi-249152	01	1.00
291.	Indian Research Institute for Integrated Medicine (IRIIM), IRIIM Bhawan, Mourigram Station Para, P.O. Unsani (Andul-Mouri), District Howra, West Bengal-711302	03	3.00
292.	Indian Institute for Science and Medical Technology Trust, At Lalbazar, P.O-Bankura, Distt. Bankura-722101	01	1.00
293.	Greenwoods Centre for Healthcare and Rehabilitation, Behind Holy Cross Social Centre, Pradhan Nagar, Siliguri-734003 Darjeeling (West Bengal)	02	2.00
294.	Ekterpur Football Association, P.S. Bhagwanpur, Distt. Purbamedinipur-721633	01	1.00
295	Institute of Training and Development Dhobapara, Post Raghunathpur, Distt. Purulia, West Bengal-723133	01	1.00

**Statement-II**

*Status of proposals received from States/UTs and funds approved under National AYUSH Mission (NAM) including Yoga and Naturopathy*

Sl. No.	Name of State/UT	Resource pool indicated to State/UT (Central Share + State Share)	Proposal Received (Central Share + State Share)	Amount Approved by Mission Directorate		Total amount Approved by Mission Directorate (Central Share + State Share)	1st Installment of Grant released during 2014-15	Final Payment Grant released during 2015-16
				Approved Central Share	Approved State Share			
1	2	3	4	5	6	7	8	9
1.	Andaman and Nicobar Islands	553.03	275.82	151.94	50.65	202.587	—	—
2.	Andhra Pradesh	1146.474	1,146.47	859.856	286.618	1,146.474	309.93	549.931
3.	Arunachal Pradesh	190.732	190.83	171.248	19.027	190.275	101.14	70.113
4.	Assam	1187.711	1,187.71	1068.357	118.706	1187.063	668.98	399.378
5.	Bihar	3673.869	-	-	-	Not submitted	-	-
6.	Chandigarh	88.67	-	-	-	Not submitted	-	-
7.	Chhattisgarh	1163.795	1,163.73	830.67	276.89	1107.56	281.41	549.257
8.	D and N Haveli	219.807	-	-	-	Not submitted	-	-
9.	Daman and Diu	279.196	-	-	-	Not submitted	-	-

(₹ in lakhs)

1	2	3	4	5	6	7	8	9
10.	Delhi	532.406	682.92	399.305	133.101	532.406	132.71	266.598
11.	Goa	508.906	-	-	-	Not submitted	-	-
12.	Gujarat	1275.555	1,275.55	909.886	303.296	1,213.181	332.39	577.493
13.	Haryana	854.08	836.56	612.807	204.268	817.075	213.59	399.218
14.	Himachal Pradesh	304.315	-	-	-	SAAP not as per NAM guidelines	-	-
15.	Jammu and Kashmir	740.941	740.94	618.460	68.718	687.178	226.27	392.192
16.	Jharkhand	1308.549	-	-	-	SAAP not as per NAM guidelines	-	-
17.	Karnataka	1391.438	1,391.44	1041.592	347.197	1388.789	359.12	682.476
18.	Kerala	954.914	955.40	712.548	237.516	950.064	254.67	457.878
19.	Lakshadweep	255.481	255.48	189.398	63.133	252.531	-	-
20.	Madhya Pradesh	2761.014	2,770.40	1,948.918	649.639	2,598.557	644.94	1303.980
21.	Maharashtra	2074.369	2,670.17	1480.604	493.535	1974.139	534.67	945.934
22.	Manipur	473.401	527.40	373.218	41.469	414.687	226.81	146.405
23.	Meghalaya	274.591	628.06	228.047	25.338	253.385	134.65	93.400

24.	Mizoram	253.623	228.26	190.125	21.125	211.250	116.27	73.855
25.	Nagaland	432.165	234.48	191.728	21.303	213.031	115.61	76.115
26.	Odisha	1763.427	2,111.65	1,322.570	440.856	1,763.427	471.71	850.847
27.	Puducherry	159.394	97.54	72.525	24.175	96.700	60.00	12.525
28.	Punjab	805.413	941.28	585.389	195.095	780.38	316.00	269.289
29.	Rajasthan	2483.065	2,556.55	1,768.789	589.596	2,358.385	638.07	1130.724
30.	Sikkim	169.26	199.76	110.120	12.236	122.356	66.43	43.692
31.	Tamil Nadu	1384.43	-	-	-	SAAP not as per NAM guidelines	—	-
32.	Telangana	921.306	1,163.00	690.979	230.326	921.306	330.00	360.979
33.	Tripura	434.395	494.54	381.486	42.387	423.873	238.12	143.371
34.	Uttar Pradesh	6781.09	-	-	-	Not submitted	-	-
35.	Uttarakhand	524.093	532.75	437.457	48.607	486.064	284.00	153.457
36.	West Bengal	1918.074	1,964.94	1,371.688	457.229	1,828.917	471.23	900.458
TOTAL		40242.9	27320.121	18719.61	5402.036	24121.638	7528.707	10849.565

**Yoga in school curriculum**

12. SHRI HUSAIN DALWAI: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

- (a) Government's policy regarding Yoga;
- (b) whether Government proposes to make Yoga compulsory in schools, if so, the details thereof; and
- (c) whether Government has sufficient Yoga teachers to teach Yoga in schools?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) Government has already laid down the National policy on Indian Systems of Medicine and Homoeopathy-2002 which *inter-alia* envisages overall growth and development of Yoga. The Government of India has formulated the programmes and operational measures for promotion of Yoga through Centrally Sponsored Scheme of National AYUSH Mission (NAM) and various Central Sector Schemes.

Further, a Task Force has been constituted by the Ministry to deliberate and make recommendations on various important issues concerning the Ministry of AYUSH, including the preferred option for promotion, development and regulation of Yoga and Naturopathy for education and practice.

(b) The Ministry of Human Resource Development (HRD) has informed that the National Curriculum Framework (NCF) 2005 which is a policy document for the country, recommended Yoga as an integral part of Health and Physical Education. Health and Physical Education is compulsory subject from Class I to Class X and optional from Classes XI to XII.

The Ministry of Human Resource Development has further informed that there are 15,962 schools affiliated to the Central Board of Secondary Education (CBSE), who have already been advised to provide compulsory 40-45 minutes of Physical Activities or games to the students of classes I- X every day and that students of classes XI- XII should participate in physical activity/games/mass physical training/yoga for at least 2 periods per week (90-120 minutes/week). The Board offers Physical and Health Education for classes XI and XII and Yoga is compulsory part of its curriculum.

(c) Yoga Education has been made a compulsory part of study and practice by National Council for Teacher Education (NCTE), a statutory body under Ministry

of Human Resource Development, through its 15 Teacher Education Programmes, viz., Pre-School Education to Elementary Education; Secondary; Senior Secondary; Physical Education; Distance Learning etc..

NCTE has already developed modules on Yoga Education for Diploma in Elementary Education and master of Education. These will be used by more than 18000 Teacher Education Institutions and also 14 lakh student-teachers and teacher educators who are studying and /or teaching in these institutions.

### **Future celebrations of International Yoga Day**

13. SHRI AMBETH RAJAN: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) the details of the expenditure incurred by Government in celebrating the first International Yoga Day across the country;

(b) whether Government had issued any instructions to the State Governments regarding celebration of Yoga Day by State Governments; and

(c) the details of the course of action formulated and adopted by Government for future celebrations of International Yoga Day?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) The Ministry of AYUSH have incurred an expenditure of ₹ 1769.76 lakhs for celebrating the first International Day of Yoga for organizing mass Yoga lesson at Rajpath, New Delhi and a Yoga conference on 21st and 22nd June, 2015 at New Delhi. The details of the expenditure are as under:

Sl.No.	Activity	Sanction/Expenditure (₹ in lakhs)
1.	Publicity through DAVP, DD and AIR	828.43
2.	Arrangements for the Mass Yoga Demonstration at Rajpath on 21/6/2015	758.53
3.	International Conference at Vigyan Bhawan on 21st and 22nd June, 2015	182.8
TOTAL		1769.76

In addition, Central Council for Research in Yoga and Naturopathy (CCRYN) and Morarji Desai National Institute of Yoga (MDNIY), the autonomous organizations under the Ministry, incurred the following expenditure :—

- (i) Financial Assistance to Government Institutions/  
Non Government Organization for organising of  
Yoga Camps and celebration of International Day  
of Yoga in each districts of the Country  
@ ₹ 1.00 lakh each by CCRYN ₹ 670.00 lakhs
- (ii) Expenditure on production of Film and Booklet on  
Common Yoga Protocol by MDNIY ₹ 34.80 lakh

(b) This Ministry had advised the States/UTs to hold mass yoga demonstration at State, District, Block and Panchayat levels for celebrating International Day of Yoga on a grand scale involving all Schools/Colleges/Universities, General Public, Yoga Institutions, Police Personnel, NCC Cadets, NSS, NYKS, etc. No separate funds were released to the States/UTs for International Day of Yoga.

(c) No plan has been formulated as yet for future celebration of International Day of Yoga.

#### **Periodical training programme for AYUSH practitioners**

14. SHRI K. C. TYAGI: Will the Minister of AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY be pleased to state:

(a) whether Government has taken or proposes to take any step for periodical training and updation of medical knowledge of practitioners under the Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) systems of medicine; and

(b) if so, the details thereof along with the steps taken or proposed to be taken by Government to address various concerns in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF AYURVEDA, YOGA AND NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY (AYUSH) (SHRI SHRIPAD YESSO NAIK): (a) and (b) Yes. To update the professional knowledge and to provide need-based training to AYUSH personnel, including doctors, teachers, paramedicals and others, the scheme of Continuing Medical Education (CME) is operational under this Ministry. The details are given in Statement (*See below*).

#### ***Statement***

##### *The details of scheme of Continuing Medical Education*

#### **SCHEME COMPONENTS:**

##### **I. Continuing Medical Education (CME) Programmes:**

- a. 6-days subject/specialty-specific CME programme for AYUSH teachers.
- b. 6-days Orientation Training programme (OTP) of AYUSH systems for non-AYUSH doctors/scientists.



- c. Days specialized training for AYUSH Paramedics/ Health workers/ Instructors/ Therapists.
- d. 3-days/5-day training in Management/IT to AYUSH administrators/ heads of departments/institutions.
- e. Theme-specific 6-days CME programme for AYUSH medical officers/ practitioners or those deployed in stand-alone and co-located AYUSH facilities.
- f. 6-day Training of Trainers programme (ToT) in AYUSH for eligible resource persons of CMEs.
- g. 6-days OTP programme Yoga/Naturopathy training for AYUSH/allopathy doctors.
- h. 6-days CME for Yoga/Naturopathy Teachers of university departments, institutes of repute at national level and degree colleges conducting courses in Yoga/Naturopathy.
- i. 6-days training programme in current trends in RandD, modern scientific advances and technology for scientific understanding and promotion of AYUSH systems for AYUSH doctors/scientists.

## **II. Web-based (on-line) educational programmes:**

- a. Development of web-based training programmes in various AYUSH specialties.
- b. Preparation, launch and running of web-based Peer Reviewed journals for up-to-date education and research developments in AYUSH sector for up-gradation of professional knowledge.

## **III. Making available the lectures of CMEs in CDs/DVDs in AYUSH sector:**

- a. Preparation/Compilation of CDs/DVDs on lectures delivered at various CME programmes to facilitate distance learning of AYUSH for wider dissemination, and up-gradation of professional knowledge.

## **IV. Support to organizations having domain knowledge:**

Organizations having domain knowledge like the National Institutes viz., Rashtriya Ayurveda Vidyapeeth and others and universities/deemed universities and reputed organizations will be supported for the benefit of AYUSH fraternity for the following:

- a. To develop training material, courses, modules, CDs and structured programmes;

- b. To design and develop innovative CME courses for AYUSH practitioners;
- c. To develop IT interface (software) for use of AYUSH systems in teaching/practice;
- d. To establish a special cell/chair in reputed universities for promotion of AYUSH systems and developing inter-disciplinary linkages.
- e. To conduct innovative short term training programme for teachers at reputed AYUSH institutions on subjects as under :—
  - (i) Integrated protocols for clinical documentation and diagnosis,
  - (ii) Statistical design for clinical trials based on holistic management,

**V. Two-days National Level Workshops/ Conferences for CME:**

National level workshops/ conferences of any AYUSH systems can be organized by reputed organizations/Centres of Excellence identified by Department of AYUSH. Each such workshop/ conference shall focus on a particular specialty for imparting knowledge/ skills/ best practices to AYUSH/ Allopathic practitioners. The concerned host institution shall make training/ boarding/ lodging arrangements for the participants and besides the above, payment of TA and honorarium to 8-10 resource persons.

VI. Financial assistance to reputed organizations/associations/forums working for the promotion of AYUSH systems of medicine for holding 2-day subject/specialty CME for 50 private practitioners.

**New airport at Dwarka in Gujarat**

15. SHRI CHUNIBHAI KANJIBHAI GOHEL: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government has announced to build a new airport at Dwarka in Gujarat; and

(b) whether the construction work has already started, if not, by when it will be started?

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

(b) Does not arise.

**Upgradation of passenger facilities at airports**

16. SHRI KIRANMAY NANDA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the present status of major passenger facilities upgradation works recently started by Airports Authority of India (AAI) at various airports in the country; and

(b) the total expenditure incurred thereon and the details of facilities upgraded, so far?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) The Airports Authority of India (AAI) has under taken the following work for upgradation of major passenger facilities at various AAI airports: Construction of spacious Terminal Buildings with glass and steel structure for increased PAX handling capacity, central heating ventilation and air conditioning system, 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 firefighting equipment, 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, Passenger Boarding Bridge, Lift, Escalators etc.State/Airport-wise status of upgradation of passenger facilities and expenditure incurred thereon till June, 2015 are given in Statement.

**Statement***Upgradation of major passenger facilities at airports*

Sl. No.	Name of Airport	Name of work	Status as on 30.06.2015	Expenditure upto June, 2015 (₹ in crores)
1	2	3	4	5
	Andaman and Nicobar			
1.	Port Blair	Construction of New Integrated Terminal Building at VSI Airport at Portblair.	Work commenced	17.82
	Arunachal Pradesh			
2.	Tezu	Development of Tezu Airport	48% work completed	38.98
	Andhra Pradesh			
3.	Tirupati	Construction of New Terminal Building including apron, etc.	94% work completed	104.48
	Assam			
4.	Guwahati	Construction of 3 nos. of Hangar at LGBI airport, Guwahati	Work Completed in Nov, 2014	27.48
	Chhattisgarh			
5.	Raipur	Construction of new expandable modular Integrated Terminal Building	Work Completed in May, 2013	133.95

Chandigarh			
6. Chandigarh (Mohall Side)	Development of New International Terminal Building	Work Completed in May, 2015	449.63
Gujarat			
7. Vadodara	Construction of New Integrated Terminal Building.	43% work completed	33.36
Jharkhand			
8. Ranchi	Construction of New Integrated Terminal Building	Work Completed in June, 2013	130.01
Jammu and Kashmir			
9. Jammu	Expansion and Modification of Terminal Building at Jammu Airport	30% work completed	12.80
Karnataka			
10. Hubli	Pavement work Le, Runway, apron and taxi at Hubli Airport	58% work completed	31.65
11.	C/o Terminal Building at Hubli Airport	Work commenced	0.02
12. Mangalore	C/o Part parallel taxi track for new runway 06/24 at both sides Provision of RESA of 240m x 90m for 06 Runway	50% work completed	12.67
13. Belgaum	Pavement work <i>i.e.</i> Runway, apron etc. at Belgaum Airport	55% work completed	
14.	C/o Terminal Building at Belgaum Airport	Work commenced	
Madhya Pradesh			
15. Khajuraho	Construction of New Terminal Building Complex at Khajuraho Airport.	Work completed	79.50
Maharashtra			
16. Jalgaon	Development of Jalgaon Airport	Completed in Feb. 2012	61.00

1	2	3	4	5
	Rajasthan			
17.	Jaipur	Extension of Runway and Strengthening of existing runway and associated works and recarpeting of runway for improvement of geometries and drainage.	90% work completed	80.00
18.	Kishangarh	Development at Airport (Pavement work)	71% work completed	20.58
19.	Ajmer	Construction of Terminal Building.	work awarded	—
20.	Jaisalmer	Construction of New Civil Enclave including terminal building	Commissioned in 2014	81
	Tamil Nadu			
21.	Chennai	Development of Kamraj Domestic Terminal Phase-II expansion of Anna International and face lifting of existing terminal.	Commissioned in 2013	2007.9
	Uttar Pradesh			
22.	Lucknow	Construction of New Terminal Building	Work Completed in May, 2012	99.56
	West Bengal			
23.	Kolkata	Extension of New International Terminal Building and extension of secondary runway.	Commissioned in 2013	2567.22
	Passenger Boarding Bridges			
24.	Ranchi, Raipur, Bhopal, Bhubaneswar, Indore, Vizag Madurai, Chandigarh, Tirupati and Surat	Passenger Boarding Bridges	For enhancing the passengers comfort at boarding and disembarking the aircraft, Passenger Boarding Bridges has been commissioned	57.68 including custom duty.

**Development of airports in Uttar Pradesh**

†17. SHRIMATI KANAK LATA SINGH:  
SHRI VISHAMBHAR PRASAD NISHAD:

Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that the Ministry has taken a decision in the last month of June for the development of Jewar Airport in NOIDA; if so the details thereof;

(b) the number of proposed airports in the country including Uttar Pradesh, whose development is a serious concern for the Ministry, and action taken so far in this direction; and

(c) the progress made in the construction work of the proposed airport at Kushinagar and by when the international flights are aimed to be operated from this airport?

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

(b) Government of India (GoI) has granted 'in-principle' approval to 13 projects: Mopa in Goa, Navi Mumbai, Sindhudurg and Shirdi in Maharashtra, Bijapur, Gulbarga, Hassan and Shimoga in Kamataka, Kannur in Kerala, Dabra in Gwalior, Pakyong in Sikkim, Kushinagar in Uttar Pradesh and Karaikal in Puducherry.

(c) The construction work of the proposed airport at Kushinagar has not started as the development of the airport through Public Private Partnership (PPP) could not be realized by the Government of Uttar Pradesh (GoUP).

**Credit points for airlines to fly abroad**

18. SHRIMATI GUNDU SUDHARANI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Ministry's mandated credit points for airlines to fly abroad has been implemented;

(b) if so, the details of credit points accrued by each of the airlines since implementation of the scheme, airline-wise;

(c) how many airlines have become eligible to fly abroad; and

(d) the details of unserved areas connected to get credit points and the flights that have flown to such destinations since inception of this system, airline-wise?

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† Original notice of the question was received in Hindi.

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

(b) to (d) Do not arise.

**Allocation of profitable and non-profitable routes to airlines**

19. SHRI ANUBHAV MOHANTY: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the number of sectors in which flights are being operated by all the aviation companies in the country;

(b) the details of the profitable and non-profitable routes on an annual basis; and

(c) the system of allocation of the profitable and non-profitable routes amongst national carrier and the private carriers?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) At present, scheduled domestic services are available to /from 78 airports in the country. State-wise air connectivity as per approved summer 2015 scheduled is given in Statement-I (*See below*).

(b) and (c) There is no analysis carried out by Ministry with regard to profitable and non-profitable routes. Scheduled domestic airlines (Private and national carriers) are free to operate anywhere within country subject to compliance of route dispersal guidelines issued by Government (Statement-II).

***Statement-I***

*State-wise Air Connectivity – Summer Schedule 2015*

Sl. No.	State UT	Names of Cities Air linked	No of Airports
1	2	3	4
1.	Andhara Pradesh	Rajamundry, Tirupati, Vijayawada, Vizag, Kadapa	5
2.	Arunachal Pradesh	-	
3.	Assam	Dibrugarh, Guwahati, Jorhat, Lilabari, Silchar, Tezpur	6
4.	Bihar	Gaya, Patna	2
5.	Chhattisgarh	Raipur	1
6.	Delhi	Delhi	1



1	2	3	4
7.	Goa	Goa	1
8.	Gujarat	Ahmedabad, Bhavnagar, Bhuj, Jamnagar, Porbandar, Rajkot, Surat, Vadodara	8
9.	Haryana	-	
10.	Himachal Pradesh	Dharamshala, Kullu	2
11.	Jammu and Kashmir	Jammu, Leh, Srinagar, Thoise	4
12.	Jharkhand	Ranchi	1
13.	Karnataka	Bangalore, Belgaum, Mangalore, Hubli	4
14.	Kerala	Calicut, Cochin, Trivandrum	3
15.	Madhya Pradesh	Bhopal, Gwalior, Indore, Jabalpur, Khajuraho	5
16.	Maharashtra	Aurangabad, Mumbai, Nagpur, Pune	4
17.	Manipur	Imphal	1
18.	Meghalaya	Shillong	1
19.	Mizoram	Aizwal	1
20.	Nagaland	Dimapur	1
21.	Odisha	Bhubaneswar	1
22.	Punjab	Amritsar	1
23.	Rajasthan	Jaipur, Jodhpur, Udaipur	3
24.	Sikkim	-	
25.	Tamil Nadu	Chennai, Coimbatore, Madurai, Trichy, Tuticorin	5
26.	Telangana	Hyderabad	1
27.	Tripura	Agartala	1
28.	Uttar Pradesh	Agra, Allahabad, Gorakhpur, Lucknow, Varanasi	5
29.	Uttarakhand	Dehradun, Pant Nagar	2
30.	West Bengal	Bagdogra, Kolkata, Duroapore	3
<b>Union Territories</b>			
1.	Andaman and Nicobar Islands	Port Blair, Car Nicobar	2

1	2	3	4
2.	Lakshadweep Islands	Agatti	1
3.	Chandigarh	Chandigarh	1
4.	Dadra and Nagar Haveli	-	
5.	Daman and Diu	Diu	1
6.	Puducherry	-	

Number of cities connected by scheduled domestic carriers — 78

### ***Statement-II***

*Provision of services of different categories of routes*

#### **Category-I**

##### **Routes connecting directly**

Bombay – Bangalore

Kolkata – Delhi

Bombay – Kolkata

Kolkata – Bangalore

Bombay – Delhi

Kolkata – Madras

Bombay – Hyderabad

Delhi – Bangalore

Bombay – Madras

Delhi – Hyderabad

Bombay – Trivandrum

Delhi – Madras

#### **Category-II**

Routes connecting stations in North-Eastern region, Jammu and Kashmir, Andaman and Nicobar and Lakshadweep.

#### **Category-III**

Routes other than those in Category - I and Category - II.

Anyone who operates scheduled air transport service on one or more of the routes under Category- I, shall be required to provide such service in categories-II and III as indicated below:-

The operator will deploy on routes in Category-II at least 10% of the capacity he deploys on routes in category-I and of the capacity thus required to be deployed

on Category-II routes, at least 10% would be deployed on services or segments thereof operated exclusively within the North-Eastern region, Jammu and Kashmir, Andaman and Nicobar and Lakshadweep.

The operator will deploy on routes in Category - III, at least 50% of the capacity he deploys on routes in Category-I.

Note 1: A service operated on a Category-I route as a part of international air service will not be reckoned for the above purpose.

Note 2: Capacity deployed will be reckoned in Available Seat Kilometres (ASKM).

Note 3: On multiple sector routes like Delhi-Calcutta-Guwahati-Imphal, the capacity provided on - Delhi-Kolkata sector will count towards Category - I, that provided on Kolkata-Guwahati sector will count towards Category - II and the capacity on Guwahati-Imphal sector will count towards service exclusively within Category - II.

No. AV. 11012/2/94-A

Telegram : "AVMIN"

भारत सरकार  
नागर विमानन और पर्यटन मंत्रालय  
(नागर विमानन विभाग)

GOVERNMENT OF INDIA  
MINISTRY OF CIVIL AVIATION AND TOURISM  
(DEPARTMENT OF CIVIL AVIATION)

"बी" ब्लॉक, राजीव गांधी भवन  
सफदरजंग हवाई अड्डा, अरविन्द मार्ग

"B" BLOCK, RAJIV GANDHI BHAWAN,  
SAFDARJUNG AIRPORT, ARBINDO MARG

नई दिल्ली-110003, दिनांक 1.3.94  
New Delhi-110003, Dated 1.3.94

### Order

..... In exercise of the powers conferred by sub-rule (1A) of rule 134 of the Aircraft Rules, 1937; the Central Government, with a view to achieving better regulation of air transport services and taking into account the need for air transport services of different regions in the country, hereby direct that every operator operating any scheduled air transport service within the country on any route specified in annex hereto, under category - I, shall be required to provide a minimum of scheduled air transport service on routes indicated in category II and III in the Annex .. For rendering the prescribed minimum service on routes in Category II and III, an

operator may at his option provide the service either by aircraft in his fleet or with aircraft in any other operator's fleet on mutually agreed terms. In the latter case, the arrangements shall have prior approval of the Director General of Civil Aviation.

Sd/-

(P.K. Banerji)

Joint Secretary to the Government of India

Tele:-4610369

**Proposal for a second airport in the National Capital**

20. SHRI VIJAY GOEL: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government has cleared a proposal for setting up a second airport in the National Capital; if so, the details thereof;

(b) whether it is a fact that, as per the existing rules, a new airport cannot be built within 150 km. radius of the existing one; and

(c) if so, whether Government plans to amend the existing rules?

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

(b) As per the guidelines and policy for setting up of Greenfield Airports, 2008, a greenfield airport would not be allowed within an aerial distance of 150 Km of an existing civilian airport. However, in case there is a need to set up a greenfield airport within an aerial distance of 150 Km of an existing civilian airport, such cases shall be placed before the Union Cabinet for consideration with the recommendation of Ministry of Civil Aviation.

(c) No, Sir.

**Flights to Leh and Ladakh**

21. SHRI SANJAY RAUT: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that Flights to Leh-Ladakh almost never meet all the safety requirements, as set by Directorate General of Civil aviation (DGCA) and this is one of the worst kept secrets of Indian aviation;

(b) if so, the details thereof and Government's response thereto;

(c) whether the Indian Commercial Pilots' Association (ICPA) has raised questions to fly towards Leh-Ladakh airport; and

(d) if so, the Government's reaction thereto?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) No, Sir. Flights to Leh-Ladakh meet all the safety requirements, as set by the Directorate General of Civil Aviation (DGCA). However, in the recent DGCA inspection certain deficiencies were observed. The same has been communicated to all the airlines operating to Leh-Ladakh.

(c) and (d) ICPA has recently sought certain clarifications on performance and technical issues regarding day to day Leh operations. The matter was discussed with ICPA and it stands addressed.

### **Opening of more Uran Akademies**

22. SHRI HUSAIN DALWAI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the task assigned to Indira Gandhi Rashtriya Uran Akademi (IGRUA);

(b) whether the Akademi's infrastructure matches contemporary international standards, if so, the details thereof; and

(c) whether Government intends to open more such training academies in the country, if so, the details thereof, and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Indira Gandhi Rashtriya Uran Akademi has been assigned to organize and hold training for Commercial Pilot License Courses, flying instructors and other persons involved or interested in civil aviation including training in twin-engine endorsement/ instrument rating.

(b) Yes Sir, details of the infrastructure of the Akademi are as under :-

#### **Aircraft**

- Thirteen DA40 aircraft equipped with glass cockpit.
- Five Trinidad TB-20 aircraft. TB-20 aircraft is a piston single engine aircraft with variable pitch propeller, retractable undercarriage and is equipped with modern Nav Aids.
- Four Zlin Z242L aircraft. It is a piston single engine aircraft with fixed under carriage and is equipped with modern Navigational Aids.
- Two DA 42 aircraft. The final stage of training is carried out on this aircraft. This is a twin-engine aircraft. The aircraft is equipped with modern and sophisticated radio and navigational aids. Particular attention is paid to Line

Oriented Flying Training. The students graduate with multi-engine endorsement and instrument rating on their Commercial Pilot License.

**Simulator**

- Single engine training is carried out on two Diamond DA40 flight simulators with CAE visual system having 180 degree field of view. The Akademi also has two single engine TB-20 flight simulator with visual system for initial flying training and instrument rating exercises.
- For multiengine training a Diamond DA42 flight simulator with CAE visual system having 180 degree field of view is available.

The operational area has a 6080 feet runway with a parallel taxi track, dispersal area and three hangars. The complete area is equipped with night flying facilities including a Precision Approach Path Indicator (PAPI). IGRUA airfield has its own nav and landing aids in terms of Very High Frequency Omini directional Range/Distance Measuring Equipment (VOR/DME) and Instrument Landing System (ILS).

The Akademi is also equipped with most modern and sophisticated up-to-date audio visual training aids and other facilities for effective ground training

(c) No Sir.

**Streamlining of Air India**

23. SHRI GULAM RASOOL BALYAWI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that there is inefficiency, mismanagement, mal-administration and corruption in Air India;

(b) if so, the complaints received in this regard during the last two years and the current year so far;

(c) the details of action taken in this regard;

(d) whether Air India is not in a position to compete with private Airlines and that the losses are attributable to the above mentioned factors; and

(e) the steps being taken to streamline Air India?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) Air India has a well established Vigilance and Internal Audit set-up which plays a major role for checks and balances of the various activities/processes performed by the employees in the company. Exemplary punishment which includes termination of services is imposed upon the erring employees as a deterrent. 90 cases of misconduct were reported during the last 2 years and the current year. Disciplinary action has been taken against delinquent employees.

(d) No, Sir.

(e) In the case of Air India, Post merger of erstwhile Air India and Indian Airlines, the merged entity, Air India Limited suffered huge losses for the years 2007-08 to 2010-11. Government took cognizance of the deteriorating financial position of Air India and directed it to come up with a Turn Around Plan (TAP) with the aim of improving the operational and financial performance of the company. Air India came up with a proposal for equity induction by the Government and a Financial Restructuring Plan (FRP) in consultation with SBI caps. The TAP/FRP was examined by the Group of Minister (GoM) and Group of Officer (GoO), and subsequently approved by the Cabinet committee on Economic Affairs (CCEA) in its meeting held on 12th April, 2012. The TAP/FRP envisages the following:-

1. Induction of equity into Air India for the following purposes, and period:

- (i) Upfront equity of ₹ 6750 crore in FY 2011-12.
- (ii) Equity for Cash deficit support of ₹ 4,552 crore till FY 2017-18.
- (iii) Equity for guaranteed aircraft loan till FY 2021 of ₹ 18, 929 crores.
- (iv) For GOI guaranteed Non-Convertible Debentures (NCDs), an amount of ₹ 11,951 cores towards interest and ₹ 7400 cores towards principal.

2. The TAP/TRP also provides that equity would be infused subject to achievement of certain laid down milestones. Some of the milestones laid down under TAP/FRP relate to improvement in On Time Performance (OTP), Passenger Load Factor (PLF), Yield (RSIPKM), Fleet Utilization, abolition of Productivity Linked Incentive, monetization of assets, hiving off of the Ground handling activity, Maintenance/repair activity of Air India into two independent subsidiary companies.

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 main areas in which the company has registered improvements in FY 2014-15 in comparison to FY 2011-12 when the TAP was initiated are as follows:

**A. Improvement in Operational Performance**

- (i) The company has shown considerable improvement in the On Time Performance (OTP). The overall Network OTP achieved during 2014-15 is 72.7%.
- (ii) The Passenger Load Factor has improved to 73.1% in 2014-15 from the Seat Factor of 67.9% in 2011-12.
- (iii) The Network Yield achieved is ₹ 4.35/RPKM in 2014-15 as against ₹ 3.74/RPKM in 2011-12.

- (iv) The number of Revenue Pax has increased from 13.40 Million in 2011-12 to 16.90 Million in 2014-15.

**B. Improvements in Financial Performance**

- (i) The Operating Loss has consistently reduced since merger and in 2014-15 the same stands at ₹ 2171.40 crores as compared to ₹ 5138.69 crores in 2011-12.
- (ii) The Net Loss during 2014-15 is ₹ 5547.40 crores as against loss of ₹ 7559.74 crores in 2011-12.
- (iii) The Company has turned EBIDTA positive by ₹ 541.60 cores as against the negative EBIDTA of ₹ 2236.95 cores in 2010-11.
- (iv) Total Revenue increased by ₹ 4026.31 crore *i.e.* 33.25% as compared to levels of 2011-12. The Total Revenue during 2014-15 is ₹ 19718 crore as against ₹ 14713.81 crore in 2011-12.

**Preferential treatment to VVIPs and their staff members by AI**

24. SHRI SALIM ANSARI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that several incidents have been brought to the notice of Government for de-boarding of passengers from Air India to accommodate VVIPs during the last one year;

(b) if so, the details thereof and the action taken against the erring officials for de-boarding of passengers;

(c) whether it is also a fact that several Air India flights are delayed due to late arrival of VVIPs or their staff members; and

(d) if so, the details of such incidents during the last one year and action taken against officers obliging VVIPs and their staff members for preferential treatment to VVIPs and their personal staff?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) Only one incident of offloading had occurred at Leh Airport in the last one year. A Notice to Airmen (NOTAM) had been issued by Air Force, Leh, on 22nd June, 2015. Accordingly, the Delhi bound flight for 23rd June, 2015, was preponed and rescheduled to depart at 1020 hrs. All passengers whose contact numbers were available were informed. The check-in process was completed by 0935 hours. The boarding cards, however, continued to show the boarding time as per the pre revised departure time.



As per records, one passenger who was also scheduled to travel with his family in the same flight, did not get the message of preponement of flight and had reported late as per the revised departure time and had been made to standby, as a message had been received at 0940 hrs that Shri Kiren Rijiju, MoS, Ministry of Home Affairs and his PA were to travel to Delhi on this flight. The confusion among passengers occurred due to the preponement of the flight on account of NOTAM, and as some of the passengers could not be contacted due to non-availability of their contact numbers.

(c) No, Sir.

(d) Does not arise.

### **Action against defaulter pilots and airlines**

25. PROF M.V. RAJEEV GOWDA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the details of the results of the DGCA's audit of training facilities for 2014; and

(b) whether the Ministry is taking enforcement actions against the defaulter pilots and airlines, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Details of audit of training facilities conducted by Directorate General of Civil Aviation (DGCA) during 2014 are as follow :—

- Audits of 15 Flying Training Organisations, training facility of M/s Jet Airways and 5 Type Rating Training Organisation (TRTO) were conducted during the period. Details of organisations audited during the period and the salient audit observation observed during the audit of training facility of M/s Jet Airways are given in Statement-I and Statement-II (*See below*) respectively.
- During Audits of Flying training organisations 143 level II findings were observed, which do not affect the safety standard seriously.

(b) Yes Sir. DGCA takes enforcement actions against defaulter pilots and airlines as per DGCA Enforcement Policy and Procedure Manual. The details of action taken by DGCA are as under :—

- Based on findings observed, warning letters issued to 8 pilots of M/s Jet Airways who had flown with lapsed Pilot Proficiency Check and Chief of Training was removed from the post for non monitoring as per Civil Aviation Requirements.

- DGCA has taken total number of 132 Enforcement Actions against defaulter pilots based on the surveillance/ audit/ surprise checks in 2014. The details are given in Statement-III.

***Statement-I***

*Details of Audit of Training Organisation in 2014*

SI. No.	Name of FTO/TRTO/Airlines
1.	The Gujarat Flying Club, Vadodara
2.	Ahemadabad Aviation and Aeronautics Ltd.
3.	Chimes Aviation, Sagar, MP
4.	Garg Aviation Ltd., Kanpur
5.	Amber Aviation Pvt. Ltd., Pantnagar
6.	HICA Hisar
7.	HICA Karnal
8.	Rajiv Gandhi Academy for Aviation Tech., Trivandrum
9.	Asia Pacific Flight Training Academy
10.	Telangana State Aviation Academy, Hyderabad
11.	Fly tech Aviation Academy, Secundrabad
12.	Alchemist Avlation Pvt. Ltd., Jamshedpur
13.	Bihar Flying Institute, Patna
14.	Govt. Aviation Training Institute, Bhubaneshwar
15.	Indira Gandhi Rashtriya Udan Academy, Bareilly
16.	Jet Airways (Airline)
17.	CAE Bangalore (TRTO)
18.	FSTC Gurgaon (TRTO)
19.	Jet Airways (TRTO)
20.	Air India (TRTO)
21.	Hats off (TRTO)

***Statement-II***

*Details of Salient Audit Observations*

The training facility audit of M/s Jet Airways was carried out by DGCA team from 20.08.2014 to 22.08.2014 and observed deficiencies are as follow:

Salient Audit Observations

- 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 for all types of fleet except A330.
- The policy defined by the company in the Operators 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 correct training and bring back crew for utilization is not in line with the procedure prescribed in Ops manual Part D.
- The training Division is not monitoring the reports and numerous deficiencies are not addressed such as in many cases signature of trainee and trainers were missing, certification, certification by trainers in PPC/IR and Route Check forms of currency not appropriately filled.
- CAR Section 08 Series F Part II on PPC is not being strictly complied as few of the pilots have been detected to be flying even after expiry of the validity of pilot proficiency Check.
- The operator is giving crosswind training upto maximum of 25Kts 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 training for overweight landing is not being included in any Full Flight Simulator training exercises for B777.

### ***Statement-III***

*Details of enforcement actions taken against the defaulter Pilots by DGCA in 2014*

Sl.No.	Type of Enforcement Action	No. of Enforcement Actions
1.	FATA Cancelled	1
2.	Off Rostered	3
3.	Debarred	1
4.	Withdrawal of Approval as an Examiner	2
5.	Grounded	1
6.	Suspended	40
7.	Warned	84
TOTAL		132

**Mechanism for capping of economy and business class airfares**

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

(a) whether Government is considering the formulation of a mechanism for the capping of economy and business class airfares, to curb the predatory pricing of passenger tickets by airlines; and

(b) if so, the details thereof, and if not, the reasons therefor?

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

(b) Air fares are not regulated by the Government. Airlines are free to fix tariff under the provision of Sub-rule (1) of Rule 135, Aircraft Rules 1937 having regard to relevant factors, including the cost of operation, characteristic of services, reasonable profit and the generally prevailing tariff.

**VRS scheme for Air India employees**

27. SHRIMATI SASIKALA PUSHPA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Air India proposes to introduce VRS for its employees, if so, the details thereof; and

(b) whether financial crunch of Air India comes in the way of implementing this scheme, if so, the details thereof and the steps taken by Government in this regard?

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

(b) Does not arise in view of (a) above.

**International flights from Biju Patnaik Airport**

28. SHRI DILIP KUMAR TIRKEY: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government is aware of the fact that the announcement pertaining to starting international flights from Biju Patnaik International Airport, Bhubaneswar has still not been implemented;

(b) whether it is also a fact that the State Government and the Chief Minister of Odisha has written and continuously pursued the matter with the Ministry; and

(c) if so, the steps being taken in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) Bhubaneswar is available as point of call to the designated airlines of ASEAN (except Philippines, Laos)/SAARC (except Pakistan and Afghanistan) countries for unlimited operations. The Indian carriers are free to mount services from any point in India including Bhubaneswar to international destinations available under bilaterals against the traffic rights allocated to them. However, operation of any airlines is guided by the commercial judgement of airlines and the Government does not interfere in the commercial judgement of the airlines for operations on any route allocated to the designated carriers.

### **Transparency in regulating airfare**

29. SHRI AAYANUR MANJUNATHA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government has taken note of various malpractices being indulged into including arbitrariness in fixing airfares by private operators and if so, the details thereof;

(b) whether the Directorate General of Civil Aviation (DGCA) has taken action in this regard against such erring private airlines;

(c) if so, the details thereof and if not, the reasons therefor; and

(d) the steps taken or being taken by DGCA to bring in transparency in regulating airfares of airlines including private airlines?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) Air fares are not regulated by the Government. Under the provision of Sub Rule (1) of Rule 135, Aircraft Rules 1937, airlines are free to fix reasonable tariff having regard to all relevant factors, including the cost of operation, characteristics of service, reasonable profit and the generally prevailing tariff.

Air fare so established by the airlines is published on their respective website under the provision of Sub Rule (2) of Rule 135, Aircraft Rules 1937.

The domestic airline pricing runs in multiple levels (bucket or RBD) which are in line with the practice followed globally. Usually, the lower levels of the fare in the fare bucket are assigned to advance purchase (popularly known as Appex Fares) bookings (e.g. up to 90, 60, 30, 14 and 7 days before departure). As time lapses and date of journey approaches closer (from 7 days to date of departure), the fare in higher side of fare bucket are available for purchase.

Airline remains compliant to the regulatory provisions of Rule -135 as long as the fare charged by them does not exceed the fare established and displayed on their website.

(d) In order to prevent excessive charging and sudden surges in airfares and to promote transparency by scheduled domestic airlines, DGCA has issued Air Transport Circular 02 of 2010 wherein airlines are required to display on their respective websites the tariff sheet route wise across their network in various fare categories and the manner it is offered in the market. The intention behind the above directions is to keep the passengers informed of pricing pattern of airlines.

DGCA has also set up a Tariff Monitoring Unit in 2010 that monitors airfares on certain routes on monthly basis to ensure that the airlines do not charge airfares outside the range declared by them. The analysis has shown that the airfares remained well within the fare bucket uploaded by the airlines on the respective websites.

#### **Air services run by private companies from Darbhanga in Bihar**

†30. SHRI RAM NATH THAKUR: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that air services are being run by private companies from Darbhanga in Bihar to Patna, Purnea and Kolkata;

(b) if so, the details thereof; and

(c) by when it will be decided to run flights of Air India in view of the tremendous increase in passenger traffic as Darbhanga is located in between all the districts including Muzaffarpur, Samastipur, Sitamarhi, Darbhanga, Supaul, Saharsa, Madhepura, Araria and Katihar and the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) As per approved Summer Schedule 2015, no scheduled domestic carrier is operating to/from Darbhanga in Bihar. However, Government has laid down Route Dispersal Guidelines with a view to achieve better regulation of air transport services of different regions of the country. It is, however, up to the airlines including Air India to provide air services to specific places depending upon the traffic demand and commercial viability. As such, Scheduled airlines are free to operate anywhere in the country subject to compliance of Route Dispersal Guidelines issued by Government. Presently Air India/Alliance Air has no plan to mount new services on these routes.

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† Original notice of the question was received in Hindi.

**Zero baggage fare**

31. SHRIMATI WANSUK SYIEM: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether in a sort of cartelisation attempt, the no-frills carriers have sought introduction of 'zero' baggage fare to reward those choosing to travel light; and

(b) if so, whether the Directorate General of Civil Aviation (DGCA) is considering a proposal to allow airlines to charge for cabin baggage and also check-in baggage even within the erstwhile free-limit of 15 kgs, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Under the provision of existing regulations, airlines are free to fix reasonable charges/fees for the services being offered by them which include charges for check in baggage above 15 kgs.

(b) In order to make the basic fare more affordable and to provide the customer an option of paying for the services which he/she wishes to avail, it has been decided by the Government to allow check-in baggage charges above 15 kgs of free check-in baggage allowance, to be unbundled and to be charged separately on opt-in basis of the passenger. Charges for the unbundled services shall be a fixed amount and shall not vary with the base fare for particular sector/flight. Scheduled airlines shall display the unbundled services and charges thereto on their respective website in a transparent and conspicuous manner. DGCA has issued Air Transport Circular 02 of 2015 in this regard.

**New airport at Arunachal Pradesh**

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

(a) whether Government has planned to build a new airport at Arunachal Pradesh; and

(b) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) Yes, Sir. For development of a Greenfield airport in Arunachal Pradesh, a site has been identified at Holongi in Itanagar. The Airports Authority of India has also prepared a Master Plan for operation of A-320 type of aircraft in Phase-I.

**Privatisation of major airports in the country**

33. DR. V. MAITREYAN: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government has any proposal and plans to privatize some of the major airports in the country including Chennai, Kolkata, Bengaluru, Ahmedabad etc., if so, the details thereof;

(b) whether Government has unveiled any new plans to increase revenue generation from the Communication, Navigation, Surveillance (CNS) and Air Traffic Services (ATS) in the domestic and international airports in the country; and

(c) if so, the details thereof and the total revenue generated from these airports in the last three years, year-wise, airport-wise?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) No, Sir. However, Government of India (GoI) intends to undertake the Operation, Management and Development of Chennai, Kolkata, Ahmedabad and Jaipur airports through Public Private Partnership (PPP). Airports Authority of India (AAI) has issued Request for Qualification documents on 30.12.2014.

(b) and (c) No, Sir. However, the revenue generated during the last three years from Chennai, Kolkata, Ahmedabad and Jaipur are given below.

(₹ in crores)

Airports	2012-13	2013-14	2014-15
Chennai	690.05	908.32	1022.80
Kolkata	357.05	630.62	668.93
Ahmedabad	196.23	217.93	229.72
Jaipur	78.59	87.20	92.56

**Status of crews and ground staffs of Kingfisher airlines**

34. SHRI T.K. RANGARAJAN: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether the fleet of Kingfisher Airlines has been grounded for good; and

(b) if so, the number of crews and ground staffs who have lost their jobs?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Kingfisher Airlines stopped their scheduled operation



from 1.10.2012. Their Air Operator's Permit (AOP) has also lapsed with effect from 31.12.2012.

(b) Ministry does not maintain such details.

**Cap on air fare during festive seasons**

35. SHRI SALIM ANSARI: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that after reducing check-in luggage from 20 kg to 15 kg the domestic airlines are in the process of adopting new techniques of charging check-in luggage;

(b) if so, the complete details of proposal of the air carriers and reaction of Government thereto;

(c) whether it is also a fact that domestic airlines charge exorbitant rates during festival seasons; and

(d) if so, the details of steps Government proposes to take to cap the air fares during festival seasons?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Under the provision of existing regulations, airlines are free to fix reasonable charges/fees for the services being offered by them which include charges for check-in baggage above 15 kgs.

(b) In order to make the basic fare more affordable and to provide the customer an option of paying for the services which he/she wishes to avail, it has been decided by the Government to allow check-in baggage charges above 15 kgs. of free check-in baggage allowance, to be unbundled and to be charged separately on opt - in basis of the passenger. The charges for such services is required to be fixed amount and displayed on the respective website of the airlines.

(c) The domestic airline pricing runs in multiple levels (bucket or Reservation Band Designator) which are in line with the practice being followed globally. The lower fare bucket offered by airlines is available for advance booking. These fares are highly discounted fares and that would entail travelling even during peak/festive season on low fares. As time lapses and date of journey approaches closer, the fare in higher side of fare bucket is made available as per the respective airline policy. Air fares are not regulated by the Government as they are determined by the interplay of market forces. Airline remains compliant to the regulatory provisions of Aircraft

Rule 1937 as long as the fare charged by them does not exceed the fare established and displayed on their respective websites.

(d) Under the provision of sub rule (1) of Rule 135, Aircraft Rules 1937, airlines are free to fix reasonable tariff having regard to all relevant factors, including the cost of operation, characteristics of service, reasonable profit and the generally prevailing tariff. Air fare so established by the airlines is published on their respective website under the provision of Sub Rule (2) of Rule 135, Aircraft Rules 1937.

### **Corporatising of Airports Authority of India**

36. SHRI D. RAJA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government is considering a proposal for corporatising and listing the Airports Authority of India on the bourses; and

(b) if so, the details thereof, and at what stage is the proposal?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) Yes, Sir. In order to improve efficiency and transparency, the Government is actively considering the draft Civil Aviation Policy which provides for institutional reforms including corporatising and listing of the Airports Authority of India in the stock exchange.

### **Audit of Indian Airlines sector by US Federal Aviation Administration**

37. PROF M.V. RAJEEV GOWDA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the details of the audit report of the Indian airlines sector by US Federal Aviation Administration;

(b) whether the Ministry is taking the requisite steps to hire more flight operation inspectors and carry out rectification of all scheduled airlines, non-scheduled operators and flying training organisations; and

(c) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) to (c) Federal Aviation Administration conducted an audit of DGCA in December, 2014 to assess DGCA's safety oversight capability and its ability to adhere to standards and recommended practices of International Civil Aviation Organisation. FAA at the end of the audit raised 12 findings which primarily relate to:

(i) Certification of flying training organisations.

- (ii) Completion of hiring of full cadre of 75 flight operations inspectors (FOIs) in DGCA.
- (iii) Training of FOIs on type of aircraft operated by scheduled airlines.
- (iv) Inspection and surveillance of foreign aircraft maintenance organizations.

In order to address the findings of the FAA Audit, DGCA had taken following actions:

- (i) Hiring of full cadre of 75 flight operations inspectors (FOIs) in DGCA.
- (ii) Recertification of all scheduled airlines.
- (iii) Recertification of Flying Training Organisations.
- (iv) Inspection and surveillance of foreign aircraft maintenance organisations.

Based on the action taken by DGCA, FAA has made the determination that India meets the requirements under international oversight standards of the Chicago Convention and the Annexes thereto and India's category has been upgraded to Category 1.

### **Regulatory authority to review airfare**

†38. SHRI NARESH AGRAWAL: Will the Minister of CIVIL AVIATION be pleased to state:

- (a) the process for determining the airfare for Y Category seats;
- (b) whether it is a fact that private airlines increase the airfare by 400 percent during the tourist seasons; and
- (c) if so, whether Government proposes to rein in the arbitrary tendencies of such airlines by constituting a regulatory authority?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Under the provision of Sub Rule (1) of Rule 135, Aircraft Rules 1937, airlines are required to establish reasonable tariff having regard to all relevant factors, including the cost of operation, characteristics of service, reasonable profit and the generally prevailing tariff.

As per the prevailing regulation, it is the prerogative of individual airlines to establish their process of determination of airfare. As such Government does not interfere in the commercial aspects of airlines.

(b) and (c) The domestic airline pricing runs in multiple levels (bucket or RBDs) which are in line with the practice being followed globally. The lower fare

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† Original notice of the question was received in Hindi.

in the fare bucket offered by airlines is available for advance booking. These fares are highly discounted fares and that would entail travelling even during peak/ festive season on low fares. As time lapses and date of journey approaches closer, the fare in higher side of fare bucket is made available as per the respective airline policy.

Air fare so established by the airlines is published on their respective website under the provision of Sub Rule (2) of Rule 135, Aircraft Rules 1937.

Airline remains compliant to the regulatory provisions of Rule-135 as long as the fare charged by them does not exceed the established fare and displayed on their website.

### **The balance sheet of aviation companies**

†39. SHRI P.L. PUNIA: Will the Minister of CIVIL AVIATION be pleased to state:

- (a) whether it is a fact that Government aviation companies are running in loss;
- (b) if so, the details of their earning, expenditure and assets for the last three years; and
- (c) the expenditure incurred on advertisement, publicity, passengers facilities, and infrastructure during the said period, company-wise?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) Yes, Sir. Air India is running into losses.

(b) The detail of earnings, expenditure, net assets and losses for the last three years:

	(₹ in crore)		
	2011-12	2012-13	2013-14
Total Revenue	15901.79	18213.79	20140.59
Total Expenses	23459.48	23703.95	26420.19
Net Profit/(Loss) before Tax	(7557.69)	(5490.16)	(6279.60)
Prov. for tax	(2.05)	0.00	0.00
Net Profit/(Loss) after Tax	(7559.74)	(5490.16)	(6279.60)
Net Block of Fixed Assets as at 31st March, 2015 (excluding Capital Work in Progress and Intangible Assets under development)	31288.13	34589.83	34589.83

† Original notice of the question was received in Hindi.

(c) Amount spent on the following

(₹ in crore)

	2011-12	2012-13	2013-14
(i) Advertisement and Publicity	39.77	59.31	42.99
(ii) Passenger Amenities	470.83	485.50	605.25
(iii) Infrastructure	279.83	4096.00	4543.26

#### **Operation of flights to Tier-II cities**

40. SHRI VIVEK GUPTA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether Government has or had any schemes which require for domestic airlines to operate more flights to Tier-II cities;

(b) whether Government has plans to formulate any schemes for development of airports in Tier-II cities; and

(c) if so, the details thereof and the reasons therefor along with its likely impact on the airlines especially the new airlines?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) The airlines are free to operate anywhere in the country subject to compliance with Route Dispersal Guidelines issued by Government.

(b) and (c) In order to promote the Regional and Remote Area Air Connectivity, Ministry of Civil Aviation, Government of India has decided to develop 'No frills' airports in tier II and tier III cities across the country, keeping the criteria of population, distance and the potential for tourism and industry. The work in 5 locations viz., namely Hubli and Belgaum in Karnataka, Kishangarh in Rajasthan, Jharsuguda in Odisha and Tezu in Arunachal Pradesh has already been commenced.

#### **Study on problems faced by Civil Aviation sector**

41. SHRI BHUPINDER SINGH: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether any study has been conducted regarding various financial and administrative problems faced by the Civil Aviation sector in the country in general and Air India in particular in last three years; and

(b) the details of measures taken/proposed to be taken by Government to address the problems in Civil Aviation sector especially, Air India?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (DR. MAHESH SHARMA): (a) and (b) A Working Group was constituted under the Chairmanship of Secretary, Civil Aviation with Finance Secretary, Financial Services Secretary, Petroleum and Natural Gas Secretary, Director General, Directorate General Foreign Trade and Joint Secretary, Civil Aviation as Members, to address factors causing stress in the Civil Aviation Sector and suggest solutions to the same.

Based on the recommendations of the Working Group, the Government increased: FDI by foreign airlines to 49%, permitted airlines to import ATF on user basis, External Commercial Borrowings upto \$1 billion was permitted for the aviation sector. To reduce the cost of ATF, which constitutes 40-50% of the operating cost of Airlines, the Civil Aviation Ministry has written to Chief Ministers of all states to reduce VAT on ATF.

Post merger of erstwhile Air India and Indian Airlines, the merged entity, Air India Limited suffered huge losses for the years 2007-08 to 2010-11. Government took cognizance of the deteriorating financial position of Air India and formulated a Turn Around Plan (TAP)/Financial Restructuring Plan (FRP) with the aim of improving the operational and financial performance of the company which was approved by the Cabinet Committee on Economic Affairs (CCEA) in its meeting held on 12th April, 2012. The TAP/FRP envisages the following :—

- (i) Up front equity of ₹ 6750 crore in FY 2011-12.
- (ii) Equity for Cash deficit support of ₹ 4,552 crore till FY 2017-18.
- (iii) Equity for guaranteed aircraft loan till FY 2021 of ₹ 18,929 crores.
- (iv) For GoI guaranteed Non-Convertible Debentures (NCDs) an amount of ₹ 11,951 crores towards interest and ₹ 7400 crores towards principal.

The TAP/TRP also provides that equity would be infused subject to achievement of certain laid down milestones. The Company has achieved the Targets set out in the TAP milestones, and has made progress in both Operational as well as Financial Areas. The main areas in which the company has registered improvements in FY 2014-15 in comparison to FY 2011-12 when the TAP was initiated are as follows:

1. Improvement in Operational Performance
  - (i) The company has shown considerable improvement in the On Time Performance (OTP). The overall Network OTP achieved during 2014-15 is 72.7%.
  - (ii) The Passenger Load Factor has improved to 73.1% in 2014-15 from the Seat Factor of 67.9% in 2011-12.

- (iii) The Network Yield achieved is ₹ 4.35/RPKM in 2014-15 as against ₹ 3.74/RPKM in 2011-12.
- (iv) The number of Revenue Pax has increased from 13.40 Million in 2011-12 to 16.90 Million in 2014-15.

2. Improvements in Financial Performance

- (i) The Operating Loss has consistently reduced since merger and in 2014-15 the same stands at ₹ 2171.40 crores as compared to ₹ 5138.69 crores in 2011-12.
- (ii) The Net Loss during 2014-15 is ₹ 5547.40 crores as against loss of ₹ 7559.74 crores in 2011-12.
- (iii) The Company has turned EBIDT A positive by ₹ 541.60 crores as against the negative EBIDT A of ₹ 2236.95 crores in 2010-11.
- (iv) Total Revenue increased by ₹ 4026.31 crores *i.e.* 33.25% as compared to levels of 2011-12. The Total Revenue during 2014-15 is ₹ 19718 crores as against ₹ 14713.81 crores in 2011-12.

**CSR activities undertaken by PSUs**

42. SHRI B. K. HARIPRASAD: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) whether the Public Sector Undertakings (PSUs) have allocated funds under Corporate Social Responsibility (CSR) head;

(b) if so, the details of funds allocated and utilised by such companies during the last three years; and

(c) the nature of projects being undertaken in this regard and their present status?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) to (c) The year 2014-15 was the first year of implementation of Corporate Social Responsibility (CSR) by companies under provisions of the Companies Act, 2013. Details regarding allocation of funds under CSR head by companies including Public Sector Undertakings (PSUs), utilisation thereof, and nature of projects undertaken etc., are expected to be available only after the mandatory disclosures of CSR expenditures are made by companies towards the end of the year 2015.

**Easy Exit Scheme for defunct companies**

43. SHRI D.P. TRIPATHI: Will the Minister of CORPORATE AFFAIRS be pleased to state:

(a) whether the number of defunct/inactive companies in the country, including Maharashtra, have risen over the years;

(b) if so, the details thereof during the last two years;

(c) whether Government has announced the 'Easy Exit Scheme' for defunct companies to get their names struck off by the Registrar of Companies (ROC);

(d) if so, the details thereof and the response of the companies thereto; and

(e) the other steps taken/being taken by Government in this regard?

THE MINISTER OF CORPORATE AFFAIRS (SHRI ARUN JAITLEY): (a) and (b) A company which is struck off from the register of companies under section 560(5) of the Companies Act, 1956 is marked as a defunct company in the MCA21 database. Further, companies which have not filed their statutory returns for the last three consecutive years have been marked as dormant in the MCA21 database. Details of such companies for the Country, including for Maharashtra is as follows :—

Year	No. of Defunct Companies	No. of Dormant Companies
As on 31.03.2014	45,603	1,20,956
As on 16.07.2015	61,449	1,39,127

In the State of Maharashtra 10,038 and 33,440 companies have been marked as defunct and dormant respectively as on 31.03.2014, while 12,146 and 33,850 companies have been marked as defunct and dormant as on 16.07.2015.

(c) to (e) The Ministry of Corporate Affairs had implemented an Easy Exit Scheme in the years 2010 and 2011. The scheme provided an opportunity to defunct companies for getting their names struck off from the register of companies. 35,174 number of companies availed of the said scheme which was closed on 30.04.2011. Further, under the "Fast Track Exit Mode" scheme that was launched on 03.07.2011 and is continuing, 7761 and 14912 companies have filed applications for striking off their names during the financial year 2013-14 and 2014-15 respectively.

**Progress on Rafale fighter aircraft deal**

44. DR. R. LAKSHMANAN: Will the Minister of DEFENCE be pleased to state:

(a) the details of the progress made in 'Rafale fighter' deal between India and France; and



(b) the tentative date by which Rafale fighter aircraft will be inducted in the Indian Air Force?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) As per the India-France Joint Statement issued by the two countries during the Prime Minister's visit to France, Government of India conveyed to the Government of France that in view of the critical operational necessity for Multirole Combat Aircraft for Indian Air Force (IAF), Government of India would like to acquire (36) Rafale jets in fly-away condition as quickly as possible. The two leaders agreed to conclude an Inter-Governmental Agreement for supply of the aircraft on terms that would be better than conveyed by Dassault Aviation as part of a separate process underway, the delivery would be in time-frame that would be compatible with the operational requirement of IAF; and that the aircraft and associated systems and weapons would be delivered on the same configuration as had been tested and approved by Indian Air Force, and with a longer maintenance responsibility by France.

A Negotiating Team has been constituted to negotiate the terms and conditions of the procurement of 36 Rafale jets and recommend the draft agreement. The meetings of the Indian Negotiating team with the French side have commenced.

#### **Procurement of bullet proof jackets**

45. SHRI NEERAJ SHEKHAR:

SHRI ARVIND KUMAR SINGH:

Will the Minister of DEFENCE be pleased to state:

(a) whether Government had announced last year to procure fifty thousand new bullet proof jackets for the army; if so, the details thereof;

(b) the reasons for emergency procurement of fifty thousand bullet proof jackets not being materialized, so far;

(c) whether as on date the army lacks 1.86 lakh bullet proof jackets; and if so, the details thereof; and

(d) by when actual procurement is likely to be made?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (d) Bullet proof jackets (BPJs) are scaled item. They are procured and provided to the armed forces as per laid down policy. The procurement case of 1,86,138 BPJs is at Trial stage and the case of 50,000 is at Technical Evaluation Committee stage.

**Making SSC more attractive**

46. SHRI AHMED PATEL: Will the Minister of DEFENCE be pleased to state:

(a) whether the Ministry has received any proposal from the Army Chief to make Short Service Commission (SSC) more attractive;

(b) if so, the details thereof and the response of the Ministry, thereto; and

(c) the number of SSC officers recruited and officers left during the last five years and in the current year, year-wise and gender-wise?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) Government has taken several measures to make Short Service Commission (SSC) attractive. These include extending time based promotion to the substantive rank of Captain, Major and Lieutenant Colonel after 2, 6 and 13 years of reckonable service respectively to SSC Officers, increase in tenure of SSC officers from 10 years to 14 years, and implementation of the VI Central Pay Commission with substantial improvement in the pay structure and other allowances of Armed Forces. Additional proposals for making SSC more attractive have been taken up for inter-departmental consultations.

(c) Details of SSC Officers commissioned and left during last five years and the current year are as under:

Year	Army (as on 7th July, 2015)				Navy (as on 17th July, 2015)				Air Force (as on 17th July, 2015)			
	Number of SSC officers commissioned		Number of SSC officers left		Number of SSC officers commissioned		Number of SSC officers left		Number of SSC officers commissioned		Number of SSC officers left	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
2010	249	93	121	78	199	40	12	08	144	157	20	11
2011	392	166	104	60	234	82	21	01	176	142	10	11
2012	482	157	75	55	263	33	71	09	198	138	18	24
2013	477	127	66	35	278	50	85	16	154	156	17	27
2014	378	104	24	12	234	82	65	07	140	163	21	31
2015	140	39	09	07	233	36	42	03	99	103	18	68

**Overhauling of DRDO and defence PSUs**

47. SHRI RAJEEV CHANDRASEKHAR: Will the Minister of DEFENCE be pleased to state:

(a) whether the Ministry acknowledges the need to overhaul the functioning of the DRDO and the DPSUs in order to realise Make in India programme targets for the Defence sector; and

(b) if so, the detailed plan and roadmap for the same?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) The functioning of Defence Research and Development Organisation (DRDO) was reviewed by a Committee headed by Prof. P. Rama Rao. DRDO has accepted several recommendations which *inter-alia* include creation of Seven Technology Domain based Clusters headed by Director's General; Restructuring of DRDO HQrs; Creation of Directorate of Quality, Reliability and Safety (QR&S); increase in budget for Extramural Research; creation of empowered Defence Technology Commission (DTC); creation of a Commercial Arm of DRDO; creation of 5 Senior Administrative Grade (SAG) posts along with 162 other posts for full scale implementation of Integrated Financial Advisor (IFA) Scheme etc.

Recently, a review of all DRDO Projects along with the three Services, OFB and Defence Public Sector Undertakings (DPSUs) has been carried out so as to realign the focus towards the "Make in India" Programme. Also, more than 1000 small, medium and large Indian industries have been involved in the development and productionisation of products for the delivery to the Services.

With the objective of achieving self-reliance in defence production, the DPSUs have been continuously modernizing and upgrading their capabilities and widening their product range. Some of the DPSUs have also collaborated with DRDO and other R&D institutions in this regard. There is also increasing emphasis on partnerships of DPSUs with the private sector for sourcing various components so that DPSUs can play the role of system integrators and become more competitive.

**Shortage of essential kit items with Army**

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

(a) the details of the essential kit items provided free of cost to the Army Jawans and Officers in the Indian Army;

(b) the details of the essential kit items that have not been supplied due to shortage during the years 2012-13, 2013-14 and 2014-15 with reasons therefor; and

(c) the time by when Government proposes to clear the backlog of the short supplied kit items of the previous years?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (c) Essential clothing items on life cycle concept are provided free of cost to the soldiers (JCOs and other ranks) only. These include uniforms, shoes, improved combat kit (ICK), mosquito nets, etc. However, items of extreme cold climate and equipment (ECC&E) and Special Clothing and Mountaineering Equipment (SCME) are issued to all ranks including officers when posted to areas with extreme cold climate conditions.

Procurement of these items and supply to the troops is ongoing process. Government has taken the following steps to ensure availability of essential clothing items:

- (i) ECC&E and SCME items are procured through an Empowered Committee in Army headquarters with complete delegated powers. Requirements of three years are sourced in one procurement cycle.
- (ii) In case of SCME items, special dispensation for placing 100% repeat Orders has also been given to the Empowered Committees.
- (iii) Roll on indent for 05 years requirement is placed on Ordnance Factories.
- (iv) To facilitate Ordnance Factories to source raw material in advance, provision cycle of clothing items have been advanced by six months from current financial year.

#### **Delay in acquisition of bulletproof jackets**

†49. SHRI MOTILAL VORA:

SHRI RITABRATA BANERJEE:

Will the Minister of DEFENCE be pleased to state:

(a) whether it is a fact that in 2009, it had been decided to purchase 1.86 lakh bulletproof jackets for soldiers;

(b) whether it is also a fact that the Request for Proposal (RFP) had been issued to 39 bulletproof jacket manufacturing companies and out of them 6 such companies have submitted their sales proposal; and

(c) if so, the reasons for delay in acquisition of bulletproof jackets for soldiers, till date?

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† Original notice of the question was received in Hindi.

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (c) Request for Proposal (RFP) for capital procurement of bulletproof jackets is issued and is at trial stage. The capital procurement of Defence equipment is done as per the provisions of Defence Procurement Procedure which contains timelines for various stages of procurement.

**Status of implementation of OROP**

50. SHRI NEERAJ SHEKHAR:

SHRI AVINASH RAI KHANNA:

SHRI ARVIND KUMAR SINGH:

Will the Minister of DEFENCE be pleased to state:

(a) whether delay in the implementation of One Rank One Pension (OROP) to all the Ex-servicemen has been protested by army veterans recently in various parts of the country;

(b) if so, the present status of the implementation of One Rank One Pension to all the Ex-servicemen in the country; and

(c) the time by which a final decision in this regard is likely to be announced and implemented?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) Yes, Sir.

(b) and (c) The principle of One Rank One Pension for the Armed Forces has been accepted by the Government. 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.

**Compensation to the families of deceased Army Jawans**

51. SHRI RAJKUMAR DHOOT: Will the Minister of DEFENCE be pleased to state:

(a) whether it is a fact that many Army Jawans were killed recently by militants in an ambush in Manipur, if so, the details thereof;

(b) compensation and other relief provided by Government to the families of the late Jawans; and

(c) what action Government has taken against the militants who ambushed the Army Jawans?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) An Army vehicle convoy was ambushed by well-armed terrorists in general area Parlon in Chandel District / Manipur on 4th June, 2015. The incident resulted in 18 fatal and 15 non-fatal Army casualties. Two terrorists were killed in retaliatory fire and one AK-47 Rifle was recovered.

(b) As per extent rules / guidelines under mentioned benefits are provided to Next of Kins of martyrs :—

Benefits	Amount
Ex-Gratia	₹ 10,00,000/- (Rupees Ten Lakh Only)
Army Group Insurance (Death Insurance Benefit)	₹ 25,00,000/- (Rupees Twenty Five Lakh Only)
Army Central Welfare Fund (ACWF)	₹ 30,000/- (Rupees Thirty Thousand Only)
Army Wives Welfare Association (AWWA)	₹ 15,000/- (Rupees Fifteen Thousand Only)
Death-Cum-Retirement Gratuity (DCRG)	Based on total qualifying service subject to maximum of ₹ 10,00,000/- (Rupees Ten Lakh Only)
AGI (Maturity Benefit)	Total subscription made by the individual and bonus accrued thereon.
Final Settlement of Account (FSA)	Pay and Allowance emoluments held in the credit balance of the individual.
Leave Encashment	Total leave accumulated by individual.
Armed Forces Personnel Provident (AFPP) Fund and Death Linked Insurance Scheme (DLIS)	As per monthly subscription made by the individual concerned plus bonus accrued.
Family Pension	Liberalised Family Pension equal to reckonable monthly emoluments last drawn for life.

(c) The Army has lodged a FIR in the case at Police Station Tengnoupal. NIA is also investigating the matter.

**Suggestions on OROP scheme**

†52. SHRI VISHAMBHAR PRASAD NISHAD:  
SHRIMATI KANAK LATA SINGH:

Will the Minister of DEFENCE be pleased to state:

(a) whether any proposal regarding the One Rank One Pension (OROP) scheme for the military pension-holders is under the consideration of the Ministry, if so, the details thereof;

(b) whether suggestions have been invited from different organizations / individuals regarding One Rank One Pension, if so the details thereof; and

(c) the time by when the retired military pension-holders are likely to get their due pension, which these pension-holders have been demanding?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) Yes, Sir.

(b) and (c) The principle of One Rank One Pension for the Armed Forces has been accepted by the Government. 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.

**Phasing out of MIG aircrafts**

53. SHRI RITABRATA BANERJEE:  
SHRI ANIL DESAI:

Will the Minister of DEFENCE be pleased to state:

(a) whether three squadrons of the ageing MIG-21 and MIG-27 fighter jets are being phased out, if so, the details thereof;

(b) the manner in which the IAF plans to impart training to its officers in the absence of MIGs; and

(c) the alternate fighter aircraft in IAF hangars?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) Few squadrons equipped with MIG-21 and MIG-27 aircraft are to be phased out over the next few years on completion of their Total Technical Life.

(b) The training of officers which was earlier being conducted on MIG aircraft is now being conducted on Hawk aircraft.

(c) IAF also has Jaguar, Mirage, SU-30 and other fighter aircraft.

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† Original notice of the question was received in Hindi.



**US-India Defence Framework Agreement, 2015**

54. SHRI NAZIR AHMED LAWAY:

SHRI RANJIB BISWAL:

Will the Minister of DEFENCE be pleased to state:

(a) whether India and the US, during the visit of the US Secretary of Defence, signed the 2015 US-India Defence Framework Agreement to deepen bilateral defence cooperation in several security related areas, if so, the details thereof;

(b) whether some pathfinder projects have also been identified for joint development and production, if so, the details thereof;

(c) the benefits likely to accrue to the country as a result thereof; and

(d) the time by which all the decisions agreed upon by the two nations would be implemented?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) Yes, Sir. A Framework for India-US Defence Relationship was signed on 3rd June, 2015, which builds upon the previous Framework to guide the bilateral defence and strategic partnership for the next ten years. The new Framework provides avenues for high level strategic discussions, continued exchanges between armed forces of both countries and strengthening of defence capabilities.

(b) to (d) Both sides have identified proposals for joint development of Mobile Electric Hybrid Power Sources and Next Generation Protective Ensembles. The proposed cooperation envisages enhancement of India's defence technological and manufacturing capabilities.

No time frame for the implementation of the identified projects has been indicated as these relate to research and development.

**Relaxation of offset clause for Defence procurement**

55. SHRI ANAND SHARMA: Will the Minister of DEFENCE be pleased to state:

(a) the policy on Offset Clause for the acquisition of Defence equipment from foreign manufacturers;

(b) whether the stated objectives of the Offset Clause is to promote the domestic manufacturing, if so, the details thereof; and

(c) whether it is a fact that Government is considering the relaxation of the Offset Clause requirement in defence equipment procurement and the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) The offset clauses shall apply to all Capital Acquisitions categorized as “Buy (Global)” or “Buy and Make with Transfer of Technology” where the estimated cost of acquisition is INR 300 crore or more. 30% of estimated cost of the acquisition in ‘Buy (Global)’ category acquisitions and 30% of the foreign exchange component in ‘Buy and Make with ToT’ category acquisitions will be the required value of the offset obligations. However, the Defence Acquisition Council (DAC) may, prescribe varying offset obligations above 30% or waive the offset obligations in special cases.

(b) The key objective of the Defence Offset Policy is to leverage capital acquisitions to develop Indian defence industry by (i) fostering development of internationally competitive enterprises, (ii) augmenting capacity for Research, Design and Development related to defence products and services and (iii) encouraging development of synergistic sector like civil aerospace and internal security.

(c) The necessary changes in the offset guidelines are made time to time based on the requirements and difficulties faced in the implementation of the policy.

### **Bulletproof jackets for the Army**

†56. SHRI MAHENDRA SINGH MAHRA: Will the Minister of DEFENCE be pleased to state:

(a) whether Government feels the necessity for bulletproof jackets for the Indian Army;

(b) if so, whether the Army also has requested to provide bulletproof jackets to soldiers;

(c) if so, the date when this request was made;

(d) whether the Army especially the Army personnel deployed at the borders have been provided bulletproof jackets; and

(e) if not, the reasons therefor and by when bulletproof jackets will be made available to the Army?

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† Original notice of the question was received in Hindi.

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (e) Bulletproof jackets are scaled item. All Army personnel deployed in Counter Terrorism and Counter Insurgency Areas are provided with Bullet Proof Jackets as per policy.

**Increasing the number of NCC units in the country**

57. SHRIMATI RENUKA CHOWDHURY: Will the Minister of DEFENCE be pleased to state:

- (a) the present number of units of National Cadet Corps (NCC) in the country;
- (b) whether Government proposes to increase the number of NCC units in the country, if so, the details thereof; and
- (c) the fresh steps taken by Government to expand the Corps' presence in naxal affected areas as well as coastal and border areas and simultaneously encourage youth of such areas to join the mainstream as NCC cadets?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) Presently, there are 800 National Cadet Corps Units in the country.

(b) National Cadet Corps is currently in the process of raising 5 Group Headquarters and 61 NCC units in five phases. Under the 1st and 2nd phases of implementation, 2 Group Headquarters and 24 NCC units have already been raised.

(c) The following are priority areas for raising of new units in the 3rd, 4th and 5th phases of the NCC expansion plan:

- (i) Coastal areas in the west.
- (ii) Areas affected by Left Wing extremism and insurgency.
- (iii) Areas bordering Pakistan and China.

This would help in extending NCC coverage in the above mentioned areas and encourage youth of such areas to join the mainstream as NCC cadets.

**Chinese submarine along Indian Coastline**

†58. MIR MOHAMMAD FAYAZ: Will the Minister of DEFENCE be pleased to state:

(a) whether China had sent a submarine to Pakistan through Indian coastline in June, 2015;

(b) if so, the reaction of Government thereto and the main reason therefor; and

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† Original notice of the question was received in Hindi.

(c) the steps taken by Government to stop such misadventure in future?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) The submarine which went to Pakistan has been deployed by China in the Gulf of Aden since April 2015. The units undertook replenishment at Karachi in May and July 2015, by transit through International Waters.

(b) and (c) Government keeps a constant watch on all developments concerning our national security and commercial interests and takes all necessary measures to safeguard them in accordance with the prevailing security and strategic considerations.

**SC/ST persons employed in defence PSUs**

59. SHRI AMBETH RAJAN: Will the Minister of DEFENCE be pleased to state:

- (a) the details of the PSUs under the administrative control of the Ministry;
- (b) the details of SC/ST persons employed in various groups in these PSUs;
- (c) the details of SC/ST Employees' Welfare Associations formed by SCs/STs working in these PSUs;
- (d) the details of the facilities extended/provided by Government/DPSUs for the SCs/STs Welfare Association viz. Office Accommodation, etc.; and
- (e) the ways and means in which DPSUs/Government involves SC/ST Welfare Association in the administrative activities/developmental activities/management of these PSUs?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) The Defence Public Sector Undertakings under the control of Ministry of Defence are as follows :—

1. Hindustan Aeronautics Ltd. (HAL)
2. Bharat Electronics Ltd. (BEL)
3. BEML Ltd.
4. Bharat Dynamics Ltd. (BDL)
5. Goa Shipyard Ltd. (GSL)
6. Garden Reach Shipbuilders and Engineers Ltd. (GRSE)
7. Hindustan Shipyard Ltd. (HSL)
8. Mazagon Dock Shipbuilders Limited. (MDL)
9. Mishra Dhatu Nigam Ltd. (MIDHANI)

(b) The SC/ST persons employed in various groups in these PSUs are as under:—

DPSU	Gr. A		Gr. B		Gr. C		Gr. D	
	SC	ST	SC	ST	SC	ST	SC	ST
HAL	1638	541	60	22	3710	1532	05	00
BEL	922	301	28	01	762	141	53	22
BEML	271	53	167	72	1525	324	15	05
BDL	120	74	28	09	356	107	82	21
MDL	184	63	00	00	36	10	960	485
GSL	24	15	02	01	62	51	34	10
GRSE	87	24	1	0	384	83	151	25
HSL	25	12	46	20	163	59	53	14
MIDHANI	36	09	13	04	64	30	32	12

(c) The details of SC/ST Employees Welfare Associations formed by SC/ST working in the Defence Public Sector Undertakings are as under:—

HAL	1.	HAL SC/ST's Employees and Officers Association, Bangalore
	2.	SC/ST Employees and Officers Welfare Association Nasik
	3.	HAL SC/ST Employees and Officers Association Koraput
	4.	SC/ST Employees/Officers Welfare Association Lucknow
	5.	SC/ST Employees Officers Welfare Committee Kanpur
	6.	HAL SC Welfare Association Hyderabad
	7.	HAL ST Welfare Association Hyderabad
	8.	Anusuchit Jati/Anusuchit Janjati Adhikari/Karmachari Kalyani Samiti, Korwa
BEL		BEL SC/ST Welfare Association and Ambedkar Credit Co-operative Society
BEML	1.	BEML SC/ST Welfare Association (R), Bangalore Complex.
	2.	BEML SC/ST Welfare Association (R), KGF Complex.
	3.	BEML SC/ST Employees Welfare Association(R), Mysore Complex.
	4.	SC/ST Employees Association, Corporate Office and Marketing Divisions.

BDL	1. Bharat Dynamics SC Employees Welfare Association
	2. Bharat Dynamics ST Employees Welfare Association
MDL	1. Mazagon Dock SC/ST Officers Welfare Association
	2. Mazagon Dock SC/ST Employees Welfare Association
	3. Mazagon Dock SC/ST Employees Utkarash Welfare Association
	4. Mazagon Dock SC/ST Karmachari Kalyankari Sangh.
GSL	Goa Shipyard SC/ST Employees Association
GRSE	Garden Reach Shipbuilders and Engineers Ltd. SC/ST Employees Depressed Classes League.
HSL	The Hindustan Shipyard Scheduled Castes and Scheduled Tribes Employees Welfare Association.
MIDHANI	1. Midhani Scheduled Caste Employees Welfare Association.
	2. Midhani Scheduled Tribes Employees Welfare Association.
	3. Midhani Scheduled Caste Madiga Employees Welfare Association.

(d) The DPSUs have provided accommodation and infrastructure like computers, furniture and fixtures, telephones to the SC/ST Associations.

(e) Regular meetings are conducted with the representatives of SC/ST welfare Associations to discuss issues relating to welfare of SC/ST employees. SC/ST representatives are included in all Recruitments/Selection Committees of the DPSU.

### **Replacement of ageing aircrafts with the IAF**

60. SHRI K. C. TYAGI: Will the Minister of DEFENCE be pleased to state:

(a) whether a large number of fighter aircrafts with the Indian Air Force (IAF) are nearing the end of their operational life, if so, the details thereof;

(b) the measures taken to replace these ageing aircrafts of the Indian Air Force; and

(c) the number of ageing aircrafts of the Indian Air Force involved in accidents due to technical defects during each of the last three years?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) Depending upon the defined Total Technical Life (TTL)/Total Calendar Life (TCL), few squadrons equipped with MIG-21 and MIG-27 aircraft are nearing the end of their operational life.

(b) The TTL/TCL expired aircraft are replaced through new acquisitions as per the assessed requirement.

(c) Number of accidents due to technical defects in respect of aircraft indicated in part (a) above during each of the last three years is given below:

Year	Number of aircraft
2012-13	2
2013-14	1
2014-15	3

**Implementation of OROP scheme for paramilitary forces**

†61. SHRI HARIVANSH: Will the Minister of DEFENCE be pleased to state:

(a) the difficulties being faced by Government in implementing One Rank One Pension (OROP) scheme and by when it will be implemented;

(b) the quantum of financial burden on the budget of the Ministry of Defence after the implementation of this scheme;

(c) the legal hurdles being faced by the Ministry in implementing this scheme; and

(d) whether Government is formulating any policy for implementing this scheme for the paramilitary forces also?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) to (c) The principle of One Rank One Pension (OROP) for the Armed Forces has been accepted by the Government. 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.

(d) No, Sir.

**Funding of defence R&D**

62. SHRI AHMED PATEL: Will the Minister of DEFENCE be pleased to state:

(a) the details of the expenditure made under the Technology Development Fund announced in the Budget 2014-15 to support R&D in defence systems;

(b) the achievements made by this Fund, so far;

(c) whether the expenditure on R&D in defence systems as a percentage of

total defence expenditure is decreasing, if so, the details thereof and the reasons therefor; and

(d) the details of all fully indigenous built defence equipments, aircrafts, ships, tanks or other machines commissioned in the service in the past one year?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) and (b) The draft scheme of Technology Development Fund announced in Union Budget, 2014 to support R&D in defence systems has been circulated to concerned ministries/departments for examination and their views, before finalization.

(c) The details of expenditure on Defence R&D *vis-a-vis* Defence Services Estimates (DSE), Ministry of Defence during the last three years are as under :—

*Defence Expenditure Vs Defence R and d Expenditure*

(₹ in crore)

Year	Defence Expenditure	Defence R&D Expenditure	Defence R&D as % of Defence Expenditure
2012-13	181776.00	9794.80	5.39
2013-14	203499.00	10868.88	5.34
2014-15 (RE)	222370.00	13447.19	6.05

(d) Some of the major indigenously built defence equipment/platforms commissioned in the Services during the past one year are: Akash Weapon Systems, INS Kolkata, INS Kamorta, INS Sumitra, 7 Ton Heavy Drop System, Electro-Optical Fire Control System for Naval Ships (EON-51), Light Combat Aircraft (LCA) Tejas, Upgraded Troposcatter Communication System, Fast Patrol Vessels (FPV), Interceptor Boats, etc.

**Curbing indirect import reliance by DPSUs/OFs**

63. SHRI RAJEEV CHANDRASEKHAR: Will the Minister of DEFENCE be pleased to state:

(a) whether reports published by the Institute of Defence Studies and Analyses that Defence PSUs and Ordnance Factories (OFs) rely on imports for the manufacturing of indigenous products are correct;

(b) if so, the details of the percentage of indirect import reliance of all DPSUs and OFs for the last three years;



(c) the impact of high indirect import reliance of DPSUs and OFs on Make in India targets for the Defence sector; and

(d) the steps being taken by Government in order to ensure that indirect import reliance is curbed?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (d) The information is being collected and will be laid on the Table of the House.

### **New aircrafts for the IAF**

†64. SHRI MOTILAL VORA: Will the Minister of DEFENCE be pleased to state:

(a) whether Government is aware that the Pakistani airforce has added 4 squadrons of aircrafts in their defence fleet;

(b) if so, whether the Indian Air Force (IAF) has demanded an increase of three squadrons in its fleet in view of the rising strength of the Pakistani airforce;

(c) if so, Government's reaction thereto; and

(d) by when Government would take steps to acquire new fighter aircrafts?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (d) Capacity build-up of Indian Air Force as well as acquisition of new fighter aircraft depends upon the national security/threat perception, strategic objectives and operational requirements of the defence forces and is reviewed by the Government from time to time. This is a continuous process.

### **Defence agreements with foreign countries**

†65. MIR MOHAMMAD FAYAZ: Will the Minister of DEFENCE be pleased to state:

(a) whether any defence agreement valid for ten years has been signed between India and America in June, 2015;

(b) if so, the details thereof; and

(c) whether it is proposed to enter into a defence agreement with any other country in the near future?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) and (b) Yes, Sir. A Framework for India-US Defence Relationship was signed on 3rd June,

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† Original notice of the question was received in Hindi.

2015, which builds upon the previous Framework to guide the bilateral defence and strategic partnership for the next ten years. The new Framework provides avenues for high level strategic discussions, continued exchanges between armed forces of both countries and strengthening of defence capabilities.

(c) Decision to enter into defence cooperation agreements with foreign countries is considered on case-to-case basis as and when mutually required.

### **Attack on Army Convoy in Manipur**

66. SHRI RAVI PRAKASH VERMA: Will the Minister of DEFENCE be pleased to state:

(a) whether 17 soldiers were killed and 16 wounded as militants attacked an army convoy with IEDs, rocket-propelled grenades and heavy gunfire in Manipur's Chandel district;

(b) if so, whether the incident points to an intelligence failure; and

(c) if so, the steps taken by Government to ensure that such type of intelligence failure may not take place in future?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) An Army vehicle convoy was ambushed by well-armed terrorists in general area Parlon in Chandel District/Manipur on 4th June, 2015. The incident resulted in 18 fatal and 15 non-fatal Army casualties. Two terrorists were killed in retaliatory fire and one AK 47 Rifle was recovered.

(b) and (c) The Indo-Myanmar border is rugged and densely forested. The rugged terrain and prevailing trans-border Free Movement Regime are being exploited by the terrorists due to which monitoring of their cross border movement and activities is extremely challenging.

Army is fully alive to the prevailing complex challenges and accordingly surgical intelligence based Counter Terrorism operations are being conducted to neutralize the terrorists.

The intelligence grid has been revitalised. Efforts have been made for seamless interface amongst all intelligence agencies and units conducting Counter Terrorism operations so as to collate, analyse and disseminate intelligence in a timely manner.

**Expansion of ordnance factory, Eddumailaram, Telangana**

67. SHRI MOHD. ALI KHAN: Will the Minister of DEFENCE be pleased to state:

(a) whether Government has any proposal to expand the ordnance factory in Eddumailaram, Medak District, Telangana to provide more employment to the local; and

(b) if so, the details thereof and the present status thereof?

THE MINISTER OF STATE IN THE MINISTRY OF DEFENCE (RAO INDERJIT SINGH): (a) At present, there is no proposal to expand the Ordnance Factory in Eddumailaram, Medak District, Telangana with specific objective to provide more employment to the local population.

(b) Does not arise.

**Strategic importance of Vizhinjam Terminal**

68. SHRI K. N. BALAGOPAL: Will the Minister of DEFENCE be pleased to state:

(a) whether Indian Navy considers the proposed Vizhinjam International Container Transshipment Terminal very essential in terms of their strategic positioning in the Indian Ocean region, coastal security and international diplomacy, if so, the details thereof;

(b) whether the Navy and the Coast Guards sought berth space in the Port; and

(c) if so, the details thereof and the reasons therefor?

THE MINISTER OF DEFENCE (SHRI MANOHAR PARRIKAR): (a) to (c) The proposed Vizhinjam International Deepwater Multipurpose Seaport is strategically important for coastal security, support to Lakshadweep and Minicoy Islands as well as Humanitarian Assistance and Disaster Relief operations to Indian Ocean Region littorals. Indian Navy and Indian Coast Guard have proposed seeking berthing space in this upcoming project.

**Corporate loans of PSBs**

69. SHRI ANAND SHARMA: Will the Minister of FINANCE be pleased to state:

(a) The total amount of outstanding corporate loans of the Public Sector Banks (PSBs);

(b) The number of corporate loans exceeding ₹ 5000 crore, bank-wise details thereof; and

(c) The steps taken by the Reserve Bank of India (RBI) and PSBs to recover these debts?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) A sum of ₹ 23,52,246.86 crore is outstanding corporate loan of the Public Sector Banks (PSBs) as on 31.03.2015.

(b) PSBs-wise data on number of borrowers with outstanding loans above ₹ 5,000 crore as at end March, 2015 is as under :—

Name of Bank	No. of borrowers with outstanding of ₹ 5000 crore and above	Amount outstanding – ₹ crore
Bank of Baroda	1	5,642
Bank of India	1	10,034
Canara Bank	2	22,604
State Bank of India	39	4,42,267
Union Bank of India	1	6,975
GRAND TOTAL	44	4,87,522

Source: RBI

(c) Major steps taken by the Government and RBI for Containment of NPAs in Banks:—

- (i) The Government has decided to establish six new Debt Recovery Tribunals (DRT) (at Chandigarh, Bengaluru, Ernakulum, Dehradun, Siliguri, Hyderabad) to speed up the recovery of bad loans of the banking sector.
- (ii) RBI has released guidelines dated 30 January, 2014 for “Early Recognition of Financial Distress, Prompt Steps for Resolution and Fair Recovery for Lenders: Framework for Revitalizing Distressed Assets in the Economy” suggesting various steps for quicker recognition and resolution of stressed assets:
  - Creation of a Central Repository of Information on Large Credits (CRILC) by RBI to collect, store, and disseminate credit data to banks on credit exposures of ₹ 5 crore and above;

- The Framework for formation of Joint Lenders Forum (JLF), Corrective Action Plan (CAP), and sale of assets outlines formation of JLF and corrective action plan that will incentivise early identification of problem cases, timely restructuring of accounts which are considered to be viable, and taking prompt steps by banks for recovery or sale of unviable accounts.
- (iii) RBI has issued guidelines on July 15, 2014 and December 15, 2014 on Flexible Structuring of Loan Term Project Loans to Infrastructure and Core Industries. Long term financing for infrastructure has been a major constraint in encouraging larger private sector participation in this sector. On the asset side, banks will be encouraged to extend long term loans to infrastructure sector with flexible structuring to absorb potential adverse contingencies, (also known as the 5/25 structure).
- (iv) RBI now has come out with new category of borrower called Non-Cooperative borrower. A non cooperative borrower is a borrower who does not provide information on its finances to the banks. Banks will have to do higher provisioning if they give fresh loan to such a borrower.
- (v) Taking further steps in the area of Asset Reconstruction Companies, RBI has tightened the norms for Asset Reconstruction Companies (ARCs), *vide* guidelines dated August 5, 2014, where the minimum investment in Security Receipts should be 15% which was earlier 5%.
- (vi) Stalled Projects: On 28.04.2015 a meeting at Mumbai to resolve the stalled project's issue was convened.

### **Outstanding agricultural loans**

70. SHRI PARIMAL NATHWANI: Will the Minister of FINANCE be pleased to state:

(a) the details of the average loans outstanding against the farmers in the country during the last three years and the current year, bank and State/Union Territory-wise including Jharkharid and Gujarat;

(b) whether Government proposes to waive off loans of farmers amounting to rupees one lakh or more, especially in Jharkhand and Gujarat; and

(c) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) As per the information received from National Bank for Agriculture

and Rural Development (NABARD), the State/UT-wise and Agency-wise details of average agriculture loan outstanding, based on the number of accounts, as on 31.03.2013, 31.03.2014 and 31.03.2015, are given in Statement-I, Statement-II and Statement-III (*See below*) respectively. NABARD has informed that the State-wise details of loan outstanding in respect of scheduled commercial banks as on 31.3.2013 and 31.03.2014 are not available.

(b) and (c) No, Sir, there is no such proposal under Government's consideration.

**Statement-I**  
*Loan/Advances outstanding - Position as at the end of month March, 2013 - Cooperative Banks and RRBs only*

Sl. No.	State	Cooperative Banks		Average loan out-standing (₹ '000)	Regional Rural Banks		Average loan out-standing (₹ '000)	Total		Average loan out-standing (₹ '000)
		No. of A/c.	Amount (₹ Crore)		No. of A/c.	Amount (₹ crore)		No. of A/c.	Amount (₹ crore)	
1	2	3	4	5	6	7	8	9	10	11
1.	Chandigarh UT									
2.	New Delhi	323	3.22	99.69				323	3.22	99.69
3.	Haryana	4504179	11532.63	25.60	320257	3850.32	120.23	4824436	15382.95	31.89
4.	Himachal Pradesh	98399	1010.3	102.67	60154	295.44	49.11	158553	1305.74	82.35
5.	Jammu and Kashmir#		28.93			705.31			734.24	
6.	Punjab	1324043	10123.48	76.46	133566	2370.69	177.49	1457609	12494.17	85.72
7.	Rajasthan	1282430	9584.17	74.73	665084	7432.54	111.75	1947514	17016.71	87.38
8.	Arunachal Pradesh	265	1.81	68.30	3526	8.88	25.18	3791	10.69	28.20
9.	Assam	51230	69.34	13.54	315027	1148.07	36.44	366257	1217.41	33.24
10.	Manipur#		62.47		6364	15.49	24.34	6364	77.96	
11.	Meghalaya	41034	59.61	14.53	11812	43.34	36.69	52846	102.95	19.48
12.	Mizoram#		17.04		14315	82.56	57.67	14315	99.6	
13.	Nagaland	188	0.21	11.17	958	3.28	34.24	1146	3.49	30.45

1	2	3	4	5	6	7	8	9	10	11
14.	Sikkim	6314	10.62	16.82				6314	10.62	16.82
15.	Tripura	43960	96.79	22.02	138426	248.25	17.93	182386	345.04	18.92
16.	A and N Islands	1097	7.27	66.27				1097	7.27	66.27
17.	Bihar#		1220.65		1442553	5640.88	39.10	1442553	6861.53	
18.	Jharkhand				417691	652.3	15.62	417691	652.3	15.62
19.	Odisha#		5438.02		739645	2871.22	38.82	739645	8309.24	
20.	West Bengal	1219268	2195.25	18.00	648924	2395.5	36.91	1868192	4590.75	24.57
21.	Chhattisgarh	961030	1936.27	20.15	299671	889.45	29.68	1260701	2825.72	22.41
22.	Madhya Pradesh	4701458	9582.03	20.38	595341	5059.71	84.99	5296799	14641.74	27.64
23.	Uttarakhand	2626230	10974.54	41.79	610234	3604.17	59.06	3236464	14578.71	45.05
24.	Uttar Pradesh	5107202	7960.96	15.59	2956328	13622.39	46.08	8063530	21583.35	26.77
25.	D and N Haveli UT									
26.	Daman and Diu UT									
27.	Goa	4987	47.2	94.65				4987	47.2	94.65
28.	Gujarat	1330440	7717.46	58.01	307422	2054.38	66.83	1637862	9771.84	59.66
29.	Maharashtra	2413192	16214.6	67.19	294609	1862.72	63.23	2707801	18077.32	66.76
30.	Andhra Pradesh	2305538	8009.41	34.74	2256074	11964.57	53.03	4561612	19973.98	43.79



31.	Karnataka	2278134	7911.72	34.73	856812	6363.94	74.27	3134946	14275.66	45.54
32.	Kerala	895933	3265.5	36.45	689878	3507.27	50.84	1585811	6772.77	42.71
33.	Lakshadweep UT									
34.	Puducherry	6338	16.38	25.84	24736	138.03	55.80	31074	154.41	49.69
35.	Tamil Nadu	1066400	4677.58	43.86	464893	2668.84	57.41	1531293	7346.42	47.98
	TOTAL	32269612	119775.46	37.12	14274300	79499.54	55.69	46543912	199275.00	42.81

# No. of accounts are not available.  
Note: NABARD has mentioned that State-wise data in r/o Commercial Banks are not available Average loan outstanding worked out on the basis of number of accounts  
Source: NABARD

Statement-II

Loan/Advances outstanding - Position as at the end of month March 2014 - Cooperative Banks and RRBs only

Sl. No.	State	Cooperative Banks		Average loan out-standing (₹ '000)	Regional Rural Banks		Average loan out-standing (₹ '000)	Total		Average loan out-standing (₹ '000)
		No. of A/c.	Amount (₹ crore)		No. of A/c.	Amount (₹ crore)		No. of A/c.	Amount (₹ crore)	
1	2	3	4	5	6	7	8	9	10	11
1.	Chandigarh UT									
2.	Delhi	387	5.06	130.75				387	5.06	130.75
3.	Haryana	1593981	8899.30	55.83	303596	4185.25	137.86	1897577	13084.55	68.95
4.	Himachal Pradesh	106159	1194.24	112.50	62234	350.73	56.36	168393	1544.97	91.75

1	2	3	4	5	6	7	8	9	10	11
5.	Jammu and Kashmir#		37.25		90652	368.29	40.63		405.54	
6.	Punjab	1354065	10939.07	80.79	157355	2799.83	177.93	1511420	13738.9	90.90
7.	Rajasthan	1413689	12715.15	89.94	676351	8114.58	119.98	2090040	20829.73	99.66
8.	Arunachal Pradesh#		4.04		3573	14.07	39.38	3573	18.11	
9.	Assam	55845	71.95	12.88	393621	1443.22	36.67	449466	1515.17	33.71
10.	Manipur#				8343	19.53	23.41	8343	19.53	23.41
11.	Meghalaya	23677	54.78	23.14	16746	73.57	43.93	40423	128.35	31.75
12.	Mizoram#		41.83		13723	96.14	70.06	13723	137.97	
13.	Nagaland				1334	4.32	32.38	1334	4.32	32.38
14.	Sikkim	7255	12.07	16.64				7255	12.07	16.64
15.	Tripura	55937	294.80	52.70	179675	343.46	19.12	235612	638.26	27.09
16.	A and N Islands	12852	99.02	77.05				12852	99.02	77.05
17.	Bihar#		1055.16		1692080	7145.83	42.23	1692080	8200.99	
18.	Jharkhand	10555	18.48	17.51	457732	775.11	16.93	468287	793.59	16.95
19.	Odisha	1208540	6304.53	52.17	765252	2966.01	38.76	1973792	9270.54	46.97
20.	West Bengal	1311681	2498.07	19.04	697261	2782.65	39.91	2008942	5280.72	26.29
21.	Chhattisgarh	857564	1961.36	22.87	305685	1024.62	33.52	1163249	2985.98	25.67

22.	Madhya Pradesh	4733949	11805.67	24.94	368314	4241.99	115.17	5102263	16047.66	31.45
23.	Uttarakhand	2425260	10052.29	41.45	822199	4348.54	52.89	3247459	14400.83	44.34
24.	Uttar Pradesh	4410496	8421.38	19.09	3596184	18863.77	52.45	8006680	27285.15	34.08
25.	D and N Haveli UT									
26.	Daman and Diu UT	29	0.68							
27.	Goa	12840	81.72	63.64				12840	81.72	63.64
28.	Gujarat	737994	9149.43	123.98	312055	2347.14	75.22	1050049	11496.57	109.49
29.	Maharashtra	2149025	20730.11	96.46	252539	1924.03	76.19	2401564	22654.14	94.33
30.	Andhra Pradesh	2817982	9825.96	34.87	2298544	14391.42	62.61	5116526	24217.38	47.33
31.	Karnataka	2345304	9162.00	39.07	1318084	11455.27	86.91	3663388	20617.27	56.28
32.	Kerala	975397	4443.39	45.55	857611	4783.58	55.78	1833008	9226.97	50.34
33.	Lakshadweep UT									
34.	Puducherry	6445	14.82	22.99	34175	199.90	58.49	40620	214.72	52.86
35.	Tamil Nadu	1111220	5351.50	48.16	476117	3143.87	66.03	1587337	8495.37	53.52
TOTAL		29738128	135245.11	45.48	16161035	98206.72	60.77	45808482	233451.15	50.96

# No. of accounts are not available.

Note: NABARD has mentioned that State-wise data in r/o Commercial Banks are not available Average loan outstanding worked out on the basis of number of accounts

Source: NABARD

**Statement-III**

*Loan/Advances outstanding - Position as at the end of month March, 2015 - Cooperative Banks, RRBs and Commercial Banks (provisional)*

Sl. No.	State	Cooperative Banks		Regional Rural Banks		Average loan out-standing (₹ '000)		Commercial Banks		Average loan out-standing (₹ '000)		Total		Average loan out-standing (₹ '000)
		No. of A/c.	Amount (₹ crore)	No. of A/c.	Amount (₹ crore)			No. of A/c.	Amount (₹ crore)			No. of A/c.	Amount (₹ crore)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	
1.	Chandigarh UT							8850	1676.66	1894.53	8850	1676.66	1894.53	
2.	New Delhi	327	5.29	161.71				25015	13811.14	5521.14	25342	13816.42	5451.99	
3.	Haryana	1581522	9393.44	59.39	312683	2754.29	88.09	987546	33165.96	335.84	2881751	45313.69	157.24	
4.	Himachal Pradesh	110764	1340.00	120.98	63103	413.24	65.49	305015	5089.42	166.86	478882	6842.66	142.89	
5.	Jammu and Kashmir#		50.66		80615	566.59	70.28	47932	644.02	134.36		1261.27		
6.	Punjab	1272897	11652.74	91.55	174207	2977.61	170.92	1329060	54819.40	412.47	2776164	69449.75	250.16	
7.	Rajasthan	1953844	14857.33	76.04	668418	9118.31	136.42	2754819	48720.93	176.86	5377081	72696.57	135.20	
8.	Arunachal Pradesh#		4.40		3784	30.90	81.65	14718	126.40	85.88	18502	161.70		
9.	Assam	58344	69.04	11.83	411302	1617.46	39.33	676326	4677.63	69.16	1145972	6364.13	55.53	
10.	Manipur	51	0.14	27.61	9829	24.03	24.44	28835	235.50	81.67	38715	259.67	67.07	

11.	Meghalaya	34761	97.64	28.09	19249	93.59	48.62	67613	376.72	55.72	121623	567.95	46.70
12.	Mizoram#		114.62		20933	102.12	48.79	17535	119.83	68.34	38468	336.57	
13.	Nagaland	9375	44.53	47.50	1014	3.06	30.21	41949	234.64	55.93	52338	282.24	53.93
14.	Sikkim	8201	12.55	15.31				8616	104.53	121.32	16817	117.08	69.62
15.	Tripura	99426	508.33	51.13	182943	364.77	19.94	64950	397.28	61.17	347319	1270.39	36.58
16.	A and N Islands	5222	36.15	69.23				7421	93.77	126.35	12643	129.92	102.76
17.	Bihar	1366049	13452.02	98.47	1854553	7011.14	37.81	2479030	21020.35	84.79	5699632	41483.51	72.78
18.	Jharkhand	15387	43.00	27.95	410198	953.62	23.25	952853	4961.16	52.07	1378438	5957.77	43.22
19.	Odisha#		7070.96		725747	3195.74	44.03	1472916	10131.54	68.79	2198663	20398.24	
20.	West Bengal	1876558	4071.43	21.70	707387	3106.40	43.91	1742104	24125.37	138.48	4326049	31303.20	72.36
21.	Chhattisgarh	1008436	2869.60	28.46	327080	1115.42	34.10	358139	6371.70	177.91	1693655	10356.72	61.15
22.	Madhya Pradesh	5160553	12040.75	23.33	571080	6537.53	114.48	2477094	44838.11	181.01	8208727	63416.38	77.25
23.	Uttarakhand	202833	926.33	45.67	71462	440.50	61.64	363458	6337.59	174.37	637753	7704.42	120.81
24.	Uttar Pradesh	4230399	9667.22	22.85	3734574	25001.17	66.95	6311627	82186.09	130.21	14276600	116854.48	81.85
25.	D and N Haveli UT							3166	52.18	164.82	3166	52.18	164.82
26.	Daman and Diu UT							2238	33.91	151.52	2238	33.91	151.52

1	2	3	4	5	6	7	8	9	10	11	12	13	14
27.	Goa	6386	88.91	139.23				57393	892.88	155.57	63779	981.79	153.94
28.	Gujarat	1299527	11373.20	87.52	312950	2722.80	87.00	1974614	38896.93	196.98	3587091	52992.92	147.73
29.	Maharashtra	2445074	23091.07	94.44	477188	3461.32	72.54	4630038	162564.97	351.11	7552300	189117.36	250.41
30.	Andhra Pradesh	1046802	6065.72	57.95	1445370	11200.62	77.49	7296533	80069.44	109.74	9788705	97335.78	99.44
31.	Telangana	535064	3189.11	59.60	922509	5648.07		2899843	32766.23	112.99	4357416	41603.41	95.48
32.	Karnataka	2341450	11336.29	48.42	1430198	13486.46	94.30	4059809	67521.98	166.32	7831457	92344.73	117.92
33.	Kerala	1295231	4745.26	36.64	1050387	6102.41	58.10	4770837	53024.34	111.14	7116455	63872.02	89.75
34.	Lakshadweep UT							72106	1727.12	239.53	72106	1727.12	239.53
35.	Puducherry	6485	14.07	21.70	47822	264.85	55.38	170133	1425.38	83.78	224440	1704.31	75.94
36.	Tamilnadu	2187364	6054.80	27.68	744260	4289.55	57.64	12396667	115694.43	93.33	15328291	126038.78	82.23
TOTAL		30158332	154286.62	51.16	16780845	112603.56	67.10	60876798	918935.52	150.95	107687428	1185825.69	110.12

# No. of accounts are not available.  
Average loan outstanding worked out on the basis of number of accounts  
Source: NABARD

**Performance of newly launched insurance and pension schemes**

71. SHRI RANJIB BISWAL: Will the Minister of FINANCE be pleased to state:

(a) whether the Prime Minister has launched two insurance schemes and one pension scheme particularly for the poor; if so, the details thereof;

(b) whether it is a fact that these schemes have not attracted the people/ workers so far as was expected; if so, the reasons therefor; and

(c) if not, the details of the targets fixed in this regard for the current financial year and the targets achieved so far?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) Government through the Budget Speech, 2015 announced three Social Security Schemes pertaining to the Insurance and Pension Sectors, namely Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY), Pradhan Mantri Suraksha Bima Yojana (PMSBY) and the Atal Pension Yojana (APY) to move towards creating a universal social security system, targeted especially for the poor and the underprivileged. Hon'ble Prime Minister launched PMJJBY, PMSBY and APY schemes nationally in Kolkata on 9th May, 2015. The schemes provide essential and affordable social protection to all citizens in a convenient manner linked to auto-debit facility from bank accounts. These schemes are expected to address the issue of low coverage of life or accident insurance and old age income security in the country.

PMJJBY offers a renewable one year life cover of ₹ 2 lakh to subscribing bank account holders in the age group of 18-50 years, covering death due to any reason, for a premium of ₹ 330 per annum per subscriber. The scheme is offered / administered through LIC and other Life Insurance companies willing to offer the product on similar terms, at the choice of the Bank /RRB/ Cooperative Bank concerned.

PMSBY, on the other hand offers a renewable one year personal accidental death-cum-disability cover to subscribing bank account holders in the age group of 18-70 years for a premium of ₹ 12 per annum per subscriber. The scheme is offered/administered through Public Sector General Insurance Companies (PSGICs) and other General Insurance companies willing to offer the product on similar terms, at the choice of the Bank / RRB / Cooperative Bank concerned. In this scheme ₹ 2 Lakh is payable on death or permanent total disability and ₹ 1 Lakh on permanent partial disability.

Atal Pension Yojana: Under the APY, the subscribers would receive the fixed minimum pension of ₹ 1000 per month, ₹ 2000 per months, ₹ 3000 per month, ₹ 4000 per month, ₹ 5000 per month, at the age of 60 years, depending on their

contributions, which itself would be based on the age of joining the APY. Therefore, the benefit of minimum pension would be guaranteed by the Government. APY is open to all account holders in the age group of 18 to 40 years. The central Government would also co-contribute 50% of the total contribution or Rs. 1000 per annum, whichever is lower, to each eligible subscriber, for a period of 5 years, *i.e.*, from financial Year 2015-16 to 2019-20, who join the APY before 31st December, 2015, and who are not members of any statutory social security scheme and who are not income tax payers. Therefore, APY will be focused on all citizens in the unorganised sector.

The public response to these schemes has been tremendous so far and cumulative Gross enrolment under these schemes as reported by Banks as on date 16.07.2015 is 10.66 crore.

*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 16.07.2015

PMJJBY	PMSBY	APY	Total
26780553	79298049	523617	106602219

To spread the information and to make people more aware an exclusive website [www.jansuraksha.gov.in](http://www.jansuraksha.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.

### **Discontinuation of zero per cent interest scheme on credit cards**

72. SHRI AAYANUR MANJUNATHA: Will the Minister of FINANCE be pleased to state:

(a) whether the Reserve Bank of India (RBI) has barred Zero per cent interest schemes offered by the banks to credit card holders in the recent past;

(b) if so, the details thereof and the reasons therefor along with the reaction of Government thereto; and

(c) whether any retailers have conveyed their dissent to the RBI in this regard, if so, the details thereof along with the reaction of the RBI thereto?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Reserve Bank of India (RBI) circular dated September 17, 2013 on "Pernicious practices of select banks deterring customer protection and



account integrity” prohibited zero percent equated monthly instalment (EMI) schemes, which is reiteration of certain guidelines issued earlier on the subject. The reiteration was essentially done on the basis of certain studies which showed that the banks which offered zero percent EMI schemes on credit card outstandings were found not disclosing the actual interest rate charged to the borrower transparently, as the banks were found to pass the same on to the borrowers as processing fee and service charges and further banks were also found to be receiving certain benefits from dealers/ manufacturers of certain products (automobiles, equipments etc.) under sale promotion schemes for the purpose of passing it on to the borrowers of banks who availed the loans from banks to purchase such products. These benefits were not passed on to the customers in a transparent manner, though banks claim that they did so by lowering the rate of interest.

(c) Yes. The Retailers Association of India, Mumbai had written a letter dated September 30, 2013 to RBI to give a window for 2 months, instead of applying immediate ban and also that RBI, instead of banning, could have laid down guidelines for disclosure/structuring of scheme by banks which could lead to greater transparency to the customer. While appreciating the concerns of the retail industry RBI replied to the Retailers Association of India, stating that RBI instructions dated 17th September, 2013 are only a reiteration of the extant instructions in clearer terms with focus on compliance.

#### **Financial allocation made for short term credit structure**

†73. SHRI DIGVIJAYA SINGH: Will the Minister of FINANCE be pleased to state:

(a) the amount which was to be provided by the Central Government to Madhya Pradesh for short term credit structure under the recommendations of Vaidyanathan Committee, the amount which has been provided out of it and by when the remaining amount will be provided; and

(b) the last date for the amount to be provided by the Central Government to Madhya Pradesh for short term credit structure under the recommendations of Vaidyanathan Committee?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Based on the report of the Vaidyanathan Committee, the Revival Package for Short Term Cooperative Credit Structure (STCCS) was announced in 2006. The financial component of the Revival

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† Original notice of the question was received in Hindi.

Package on all India basis was estimated at ₹ 13,596 crore with the share of the Central Government at ₹ 9,245.28 crore. The entire Central Government's share originally assessed under the Package was fully released by the Central Government. However, based on the special audit, the size of the Package on all India basis was later revised to ₹ 21,739 crore, with Central Government's share at ₹ 15,902 crore. As regards the State of Madhya Pradesh, the revised share of Central Government for the State was assessed at ₹ 1657 crore based on the Special Audit.

The Revival Package was to be implemented over a period of three years from the date of signing of the Memorandum of Understanding (MoU) by the concerned State Government with Government of India (GoI) and NABARD. Release of funds under the package was contingent upon completion of benchmark activities stipulated in MoU. Based on the status of these benchmark activities, the Central Government released ₹ 985 crore to Madhya Pradesh under the Package.

The National Implementation and Monitoring Committee (NIMC) of the Revival Package had extended the implementation period of the Package up to 30th June, 2011 for all States to facilitate completion of identified benchmark activities. With this extended period, the package was closed on 30.06.2011.

Since the State of Madhya Pradesh could not complete all the benchmark activities by 30th June, 2011, it was not eligible for any further support under the Package.

The matter of extending the package beyond 30.6.2011 was considered by the Government, however, it was decided not to extend the deadline for implementation of STCCS package or to make it an on-going scheme.

#### **Difficulty in auction of seized assets by banks**

74. SHRIMATI WANSUK SYIEM: Will the Minister of FINANCE be pleased to state:

(a) whether weighed down by bad loans which has now reached the ₹ 3 lakh crore mark, the Public Sector Banks (PSBs) are finding it tough to recover through auction of seized properties because of slowdown in economy, legal hurdles and problems related to acquisition of land;

(b) whether prospective buyers stay away despite price cut by 10 per cent in each subsequent auctions; and

(c) whether restructured assets of banks are now close to ₹ 4 lakh crores and whether credit rating agency Fitch has predicted that the proportion of impaired assets will rise to 13 per cent of the total advances by 2016?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) As per data received from RBI, the Gross NPAs of Public Sector Banks were ₹ 2,67,045 crore as at the end March, 2015 and ₹ 3,09,554 crore for all banks at the end of March, 2015. The primary reasons for increase in Stressed Assets in recent times are various macro economical and global factors, economic slowdown, delays in statutory and other approvals, especially for projects under implementation, aggressive lending practices during upturn, as evidenced from high corporate leverage, risk concentration, especially to large Greenfield projects, Lax risk management systems and delays in resolution of NPAs through legal proceedings.

(b) Yes, Sir. The prospective buyers are not coming forward despite price cut in many cases.

(c) The restructured advances of all banks was ₹ 4,31,065 crore as at the end March, 2015.

India Ratings, a Fitch Group Company expects impaired assets to reach 13% of loans by March, 2016. However, the opinion is based on their own research.

### **Regulation of Ponzi schemes**

75. SHRI DEVENDER GOUD T.: Will the Minister of FINANCE be pleased to state:

(a) Whether Government agrees with the Reserve Bank of India (RBI) that in the absence of regulatory framework and lack of co-ordination between watchdogs and investigative agencies, there are growing number of incidents of ponzi schemes defrauding millions of citizens;

(b) whether it is a fact that ₹ 80,000 crores is locked up in ponzi schemes being investigated by CBI;

(c) whether such schemes are being run mainly in Tier II and III cities of the country; and

(d) if so, how Government is planning first to have regulatory framework, quicken the investigation and concentrate more on Tier II and III cities;

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The Reserve Bank of India (RBI) has reported that Ponzi schemes are not under the regulatory purview of RBI. Also, 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 words '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 / running money circulation schemes, etc. However, these complaints are generally against Non-NBFCs and unincorporated bodies and as these do not fall under the purview of RBI, the complaints are forwarded to the Economic Offenses Wing (EOW) of the State Police for investigation and further necessary action.

(b) and (c) CBI has registered a total of 72 cases [(71 Regular Cases (RCs) and 1 Preliminary Enquiry (PE)] related to Ponzi Schemes during the last three years. Number of cases relating to Ponzi scheme registered by CBI during the last three years, *i.e.*, 2012, 2013, 2014 and current year 2015 (upto 30.06.2015) are as under:-

2012	Nil
2013	7
2014	62
2015 (upto 30.06.2015)	3
TOTAL	72

The other details cannot be furnished till the investigations are complete.

(d) 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 analyzing 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 gullible public.

### **Circulation of dirty/torn currency notes**

†76. SHRI MEGHRAJ JAIN: Will the Minister of FINANCE be pleased to state:

(a) whether a large number of dirty/torn/deformed notes are in circulation in the country;

(b) if so, the details thereof and the manner in which the Reserve Bank of India (RBI) proposes to tackle the circulation of such notes in the country; and

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† Original notice of the question was received in Hindi.

(c) whether the RBI has launched/proposed to launch any awareness drive in this regard; if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Reserve Bank of India (RBI) has informed that after new notes are put into circulation, number of notes become soiled/ dirty over a period of time due to frequent manual handling, climatic conditions and such other factors. But the number of torn and deformed notes in circulation are much less. To tackle the issue, RBI has advised all the banks to exchange dirty/torn/deformed notes at all their bank branches.

Exchange facility is also available at its Regional Offices. RBI also regularly withdraws soiled/dirty/torn notes from circulation through banks and replaces the same with fresh/reissuable banknotes.

(c) RBI has taken the following steps to create awareness among public about Clean Note Policy :—

- RBI has issued a Press Release No. 2007/2008/473 dated October, 05, 2007 advising all members of public, institutions and others not to write/inscribe anything on the banknotes.
- As regards misuse of banknotes, RBI has issued a Press Release No. 2007/2008/1186 on March, 12, 2008 and No. 2013-2014/533 on September, 11, 2013, appealing the members of public not to use banknotes for making garlands, decorating pandals and places of worship or for showering on personalities in social events etc. as such actions deface the banknotes and shorten their life.
- RBI issues a Master Circular "Facility for Exchange of Notes and Coins" every year to banks, wherein banks are advised to exchange dirty/torn banknotes at all their branches. This Master Circular has been placed on their website '[www.rbi.org.in](http://www.rbi.org.in)' for the information and benefit of the public.

### **Increase in financial allocation to States**

†77. SHRI PRABHAT JHA: Will the Minister of FINANCE be pleased to state:

(a) whether there is substantial increase in the gross financial transfer to the States by Government in the current financial year in comparison to the last year; if so, the details thereof; and

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† Original notice of the question was received in Hindi.

(b) whether Central Government has provided the highest amount to Uttar Pradesh and Bihar in the current year, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Yes sir, as per the recommendation of 14th Finance Commission (FFC), Union Government has decided to devolve a much higher share of 42% of Union's net tax receipts to the States as compared to 32% during the award period of the 13th Finance Commission. In the current year, as per 2015-16 [Budget estimates (BE)], net resources of ₹ 8,39,317 crore including States share of taxes, grant and loan under non-plan grant, Central Assistance for States Plan and assistance for Central and Centrally Sponsored Schemes has been estimated to be transferred to the States as against net resource transfers of ₹ 7,74,799 crore in 2014-15 (BE) and ₹ 6,80,459 crore 2014-15 [Revised Estimates (RE)].

(b) Yes sir, devolution of central taxes to Uttar Pradesh and Bihar are the highest amongst all states. As per 2015-16 (BE), the State of Uttar Pradesh and Bihar are estimated to receive ₹ 94,313 crore and ₹ 50,748 respectively as share of net proceeds of Union taxes and duties. As compared to 2014-15 (RE) there is an increase of ₹ 27,691 crore for Uttar Pradesh, and ₹ 13,785 crore in case of Bihar.

**Amendment in procedure for appointment of  
non-official Directors of PSBs**

78. SHRI PAUL MANOJ PANDIAN: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that Government has amended the procedure for appointment of non-official Directors on the Boards of Public Sector Banks (PSBs), financial institutions and insurance firms; if so, the details thereof; and

(b) whether it is also a fact that Government has set up a portal where those interested in the positions could apply; if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Yes, Sir. The Government has amended the procedure for appointment of Non-official Directors on the Boards of Public Sector Banks/Reserve Bank of India/Financial Institutions/Public Sector Insurance Companies in order to implement reforms in banking. As per provisions of the amended procedure, Government has set up a web-portal i.e. <http://financialservices.gov.in/nod>, where interested persons can apply online. The data base so generated will be shared with the Search Committee constituted for shortlisting the candidates.

The details of new norms/criteria are as follows:

### **I. Criteria of experience**

The following categories of persons will be considered for appointment of Part-Time Non-Official Directors on the Boards of Public Sector Banks/Reserve Bank of India/Financial Institutions/Public Sector Insurance Companies:

- a. Persons of eminence with special academic training or practical experience in the fields of agriculture, rural economy banking, cooperation, economics, business management, human resources, finance, corporate law, Risk Management, industry and IT will ordinarily be considered. 20 years of industry experience at a senior position, established expertise in respective areas (successfully led a reputed organization, brought turnaround in a failing organization) would be preferred.
- b. Retired senior Government officials with total experience of 20 years and minimum 10 years of experience at Joint Secretary and above level. Retired CMDs/EDs of Public Sector Banks after one year of retirement. The ex-CMDs/EDs will not be considered for appointment as NoD on the Board of the PSB from which they have retired. Serving CMDs/EDs of a PSB will not be considered for appointment as NoD on the Board of any other PSB.
- c. Academicians Directors of premier Management Banking Institutes and Professors having more than 20 years experience.
- d. Chartered Accountants with 20 years experience (excluding audit experience) would also be preferred.
- e. However, the experience criteria may be relaxed with the approval of the Finance Minister in exceptional cases based on merits of the case.
- f. Wherever possible representation may also be given to women and the persons belonging to SC/ST/OBC community.

### **II. Criteria of Educational Qualification**

An NoD should at least be a graduate in any stream preferably with specialization in Business Management, Risk Management, Finance, Human Resources and IT.

### **III. Criteria of age**

The age of the Director, on the date of recommendation by Search Committee should not be more than 67 years.



**IV. Criteria of Work Experience**

Professionals/academicians should ordinarily have 20 years of work experience in their particular field.

**V. Criteria of Disqualification :**

- (i) A Director already on a Bank/Financial Institution (FIs)/RBI/Insurance Company, under any category, may not be considered for nomination as NoD in any other Bank/FI/RBI/Insurance Company.
- (ii) Persons connected with hire purchase, financing investment, leasing and other para-banking activities, MPs, MLAs, MLCs and Stock Brokers will not be appointed as non-official directors on the boards of Banks/FIs/RBI/Insurance Companies. Investors in a hire purchase, financing investment, leasing and other para banking activities would not be disqualified for appointment as NOD, if they are not having any managerial control in such companies.
- (iii) No person may be re-nominated as an NOD on the Board of a Bank/FI/RBI/Insurance Company on which he/she has served as Director in the past under any category for two terms or six years whichever is longer.

**VI. Criteria of Tenure**

An NoD would not be considered for nomination as a Director on the Board of a Bank/FI/RBI/Insurance Company if such Director has already been a NoD/ Shareholder Director on the board of any other Bank/FI/RBI/Insurance company for six years, whether continuously or intermittently.

**Printing of currency notes on indigenous paper**

†79. SHRI LAL SINH VADODIA: Will the Minister of FINANCE be pleased to state:

- (a) whether it is a fact that Government is seriously contemplating to print one thousand rupee currency note only on indigenous paper;
- (b) if so, whether Government has taken any steps in this regard so far; and
- (c) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) Security Printing and Minting Corporation of India Limited (SPMCIL) has informed that a new Cylinder Mould Vat Made Watermarked Bank Note (CWBN) Paper Line has started commercial production of < ₹ 1000 banknote paper at Security Paper Mill, Hoshangabad on 30.05.2015. It will also produce paper

for other denominations of banknotes. Further, Bank Note Paper Mill India Limited (BNPMIL), a Joint Venture of SPMCIL and Bhartiya Reserve Bank Note Mudran Private Limited (BRBNMPL), is setting up two Paper Lines for production of bank note paper for < ₹ 1000 and other denominations of bank notes.

**Fall in deposits made by indians in Swiss banks**

80. SHRI C.M. RAMESH: Will the Minister of FINANCE be pleased to state:

(a) the reaction of Government to the reported fall of over 10 per cent in deposits by Indians in Swiss banks at a time when foreign funds in Swiss banks have swelled to 1.5 trillion in 2014 as compared to 2013;

(b) whether this is the impact of black money law passed by Government recently; and

(c) the further steps taken by Government to tighten the screws on black money generated within the country?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The reported fall in deposits by Indians in Swiss banks could be due to several reasons including steps taken by Government to unearth black money stashed abroad.

(b) The Black Money Act was passed in May, 2015 while the figures relate to 2013 and 2014.

(c) The Government has taken effective steps to tackle the issue of black money in the country. These steps include putting in place robust legislative and administrative frameworks, systems and processes with due focus on capacity building and integration of information and its mining through increasing use of information technology. In recent months, several purposeful measures have been taken by the Government to combat black money, both by way of policy-level initiatives as well as through more effective enforcement action on the ground. Major initiatives taken by the Government in this regard include the following:—

- (i) In order to fulfill the commitment made by the Government to the people of India through the Parliament, a comprehensive new law titled 'The Black Money (Undisclosed Foreign Income and Assets) and Imposition of Tax Act, 2015' has been enacted which, *inter-alia*, provides for separate taxation of undisclosed income in relation to foreign income and assets. Among other things, the Act seeks to enhance the punishment for willful attempt to evade tax, etc. in relation to foreign assets/income up-to 10 years of rigorous imprisonment

and fine. The avenues of compounding of offences and Income-tax Settlement Commission are not available under the new law. The Act also provides to include the offence of willful attempt to evade tax, etc. in relation to foreign income/assets as a scheduled offence under the Prevention of Money Laundering Act (PMLA), 2002.

- (ii) The Finance Act, 2015 has amended relevant provisions of the Income-tax Act, 1961 to prohibit acceptance or payment of any amount as advance or otherwise of ₹ 20,000 or more in cash in relation to purchase of immovable property. Necessary legislation to effectively tackle the menace of Benami Transactions was introduced in the Budget session of the Parliament.
- (iii) A Special Investigation Team (SIT) on Black Money, under chairmanship and vice-chairmanship of two retired judges of Hon'ble Supreme Court, was constituted by the Government in May, 2014. Investigations into cases involving substantial unaccounted income, particularly black money stashed abroad, are being extensively monitored by the SIT and directions issued by the SIT are being carried out. The SIT has already submitted 3 reports to Hon'ble Supreme Court.
- (iv) Investigation into cases involving undisclosed foreign assets/income has been accorded the highest priority and Special Units have been constituted under each Director General of Income Tax (Investigation) to undertake expeditious and focused investigation in undisclosed foreign assets/income cases.
- (v) India is now a leading force in the efforts to forge a multi-lateral regime for proactive sharing of financial information known as Automatic Exchange of Information (AEOI) which will greatly assist the global efforts to combat tax evasion. A decision has also been taken to enter into information-sharing arrangements with the USA under the Foreign Account Tax Compliance Act (FATCA) of USA. The AEOI and FATCA will enable India to get information about financial transactions done by Indian persons in other countries.
- (vi) While focusing upon non-intrusive measures, due emphasis has been given on enforcement measures in high impact cases with a view to prosecute the offenders at the earliest possible for credible deterrence against tax evasion;
- (vii) Renegotiation of Double Taxation Avoidance Agreements (DTAAs) with other countries to bring the Article on Exchange of Information "to

International Standards and expanding India's treaty network by signing new DTAA's and Tax Information Exchange Agreements (TIEAs) with many jurisdictions to facilitate the exchange of information and to bring transparency; and

- (viii) Proactively engaging with foreign governments for exchange of information under DT AA's/TI EA's/Multilateral Convention.

**Appointment of gold appraisers for Gold Monetisation Scheme**

81. SHRI K.R. ARJUNAN: Will the Minister of FINANCE be pleased to state:

(a) whether Government has any proposal to appoint gold appraisers at nationalised banks to carry forward Gold Monetisation Scheme; and

(b) if not, the details of plan of Government to appoint personnel who can check the quality of gold deposited under Gold Monetisation Scheme?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Government has no proposal to appoint gold appraisers at Public Sector Banks (PSBs) to carry forward Gold Monetization Scheme (GMS) and it is upto the PSBs to appoint personnel/agency to check the quality of the gold deposit under GMS.

**Erosion in Central Government's holding in PSBs**

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

(a) whether there has been any erosion in Central Government's holding in Public Sector Banks (PSBs) during last three years; if so, the reasons therefor;

(b) whether some PSBs are trading at 0.3-0.5 times their book value instead of 1.3-1.5 times in previous years;

(c) how much these PSBs and Government have lost notionally or in real terms in this way; and

(d) whether Government intends to prevent this erosion, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) During last 3 years, the percentage of Government share holding has slightly declined in respect of 6 Public Sector Banks (PSBs) due to raising of capital by these banks from market. However, Government shareholding has increased in 15 PSBs and remained unchanged for 6 PSBs.

(b) It is fact that 12 PSBs are trading at 0.3-0.5 times their book value.

(c) Government has not offloaded its stock in any PSBs during last 3 years. Hence, question of any loss to the Government does not arise. However, the market price is highly dynamic as it is in correlation with the outlook of industry in addition to the performance of individual banks. The variations in market price will not instantly cause losses to the Government or Banks in real term but results in notional loss in terms of market capitalization.

(d) 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 and further revamping of the entire target setting.

### **NPA's of nationalised banks**

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

(a) whether it is a fact that the Non Performing Assets (NPAs) of banks are increasing continuously, if so, the details of NPAs of nationalized banks;

(b) the details of percentage of NPAs to the total amount of loans disbursed by the banks and the percentage of loans for which time has been given for restructuring; and

(c) the details of percentage of NPAs and restructured loan amount out of the total loan disbursed during last two years?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) NPAs of banks for the system as a whole is increasing continuously. The details of NPAs of Public Sector Banks for the last two years is as under:

(₹ in crore)

Period	Mar-14	Mar-15
Gross NPAs	2,16,739	2,67,065
Gross NPA Ratio	4.72%	5.43%
Restructured Standard Advances	7.17%	8.05%

Source: RBI

Data reporting system of RBI does not collate data on percentage of loans for which time has been given for restructuring.

† Original notice of the question was received in Hindi.

**Extension of time period to open PMJDY Bank Accounts**

84. SHRIMATI SAROJINI HEMBRAM: Will the Minister of FINANCE be pleased to state:

(a) whether Government is planning to extend the period of opening of bank accounts by the people under the Pradhan Mantri Jan Dhan Yojana (PMJDY), if so, the details thereof; and

(b) if not, whether Government is proposing to introduce another phase of the scheme for the common people of our country to open bank accounts under the scheme?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) The first phase of Pradhan Mantri Jan-Dhan Yojana (PMJDY) was completed on 26th January 2015 and by 31.01.2015 12.54 crore accounts were opened. Account opening is still continuing and as on 13.07.2015, 16.75 crore accounts have been opened.

**Beneficiaries of newly launched insurance and pension schemes**

†85. SHRI NARAYAN LAL PANCHARIYA: Will the Minister of FINANCE be pleased to state:

(a) the number of people who have enrolled themselves under the three schemes launched recently *viz.* Pradhan Mantri Suraksha Bima Yojana, Pradhan Mantri Jeevan Jyoti Bima Yojana and Atal Pension Yojana respectively and are availing the benefits thereunder;

(b) the number of the people who have adopted all the three schemes in the country, State-wise details thereof; and

(c) whether any person has received benefits under these three schemes. in the country till date; if so, the detail of the beneficiaries?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) The bank-wise data regarding gross number of persons enrolled subject to verification of eligibility criteria etc. in three schemes *viz.* Pradhan Mantri Suraksha Bima Yojana (PMSBY), Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY) and Atal Pension Yojana (APY) are given in Statement-I (*See* below). The State-wise data pertaining to claims reported/settled so far under the schemes PMSBY and

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† Original notice of the question was received in Hindi.

PMJJBY is given in Statement-II (See below). The benefits of minimum guaranteed pension under Atal Pension Yojna (APY) will commence once the subscribers attain the age of 60 years.

**Statement-I**

*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. Bank-wise-Scheme-wise 16.07.2015*

Name of Bank	PMJJBY	PMSBY	APY	Total
Allahabad Bank	895876	2771291	17497	3,684,664
Andhra Bank	584296	2560336	27364	3,171,996
Axis Bank Ltd.	121400	405566	1144	528,110
Bank of Baroda	1732164	4867080	37164	6,636,408
Bank of India	1308452	3860171	23621	5,192,244
Bank of Maharashtra	908698	1400025	11823	2,320,546
Bhartiya Mahila Bank	19198	50269	836	70,303
Canara Bank	1791587	4281400	54259	6,127,246
Central Bank of India	1875882	3142411	14005	5,032,298
City Union Bank Ltd.	38352	53260	0	91,612
Corporation Bank	478675	1016651	4875	1,500,201
Dena Bank	512717	2262509	13124	2,788,350
Federal Bank Ltd.	59290	134863	1526	195,679
HDFC Bank Ltd.	698756	1159874	26551	1,885,181
ICICI Bank Ltd.	295765	1063335	333	1,359,433
IDBI Bank Ltd.	488535	904005	8846	1,401,386
Indian Bank	757680	1688145	51449	2,497,274
Indian Overseas Bank	1040983	3039048	7723	4,087,754
IndusInd Bank Ltd.	2984	102115	35	105,134
Jammu and Kashmir Bank Ltd.	182315	247840	2522	432,677
Karur Vysya Bank Ltd.	86462	125278	1227	212,967
Kotak Mahindra Bank Ltd.	117104	174891	0	291,995
Lakshmi Vilas Bank Ltd.	17546	34366	191	52,103

Name of Bank	PMJJBY	PMSBY	APY	Total
Oriental Bank of Commerce	591431	3055971	8050	3,655,452
Punjab and Sind Bank	143841	795276	1827	940,944
Punjab National Bank	2022935	5896404	6301	7,925,640
Ratnakar Bank Ltd.	658	1086	0	1744
Rural Cooperative Banks	538825	1265435	443	1,804,703
South Indian Bank Ltd.	53848	16314	2731	219,725
State Bank of Bikaner and Jaipur	215241	1043247	6553	1,265,041
State Bank of Hyderabad	597394	1178164	5543	1,781,101
State Bank of India	3626727	16326412	121772	20,074,911
State Bank of Mysore	291927	549494	3757	845,178
State Bank of Patiala	108404	962743	1674	1,072,821
State Bank of Travancore	101696	515500	3614	620,810
Syndicate Bank	1264230	3659058	16947	4,940,235
Tamilnad Mercantile Bank Ltd.	43688	67315	1159	112,162
UCO Bank	732504	1475452	10195	2,218,151
Union Bank of India	1106222	2531619	16447	3,654,288
United Bank of India	859216	2910058	4326	3,773,600
Vijaya Bank	459360	1547517	6056	2,012,933
Yes Bank Ltd.	7689	9423	107	17,219
GRAND TOTAL	26,780,553	79,298,049	523,617	106,602,219

***Statement-II****State-wise claims under PMJJBY and PMSBY as on 16.07.2015*

State	PMJJBY				PMSBY			
	Total	Paid	Under Process	Re-jected	Total	Paid	Under Process	Re-jected
1	2	3	4	5	6	7	8	9
Andhra Pradesh	40	18	21	1	3	2	1	0
Andaman and Nicobar	0	0	0	0	0	0	0	0



1	2	3	4	5	6	7	8	9
Arunachal Pradesh	0	0	0	0	0	0	0	0
Assam	0	0	0	0	1	1	0	0
Bihar	1	0	1	0	2	1	1	0
Chandigarh	0	0		0	0	0	0	0
Chhattisgarh	9	4	5	0	0	0	0	0
Dadra and Nagar Haveli	0	0	0	0	0	0	0	0
Daman and Diu	0	0	0	0	0	0	0	0
Delhi NCT	0	0	0	0	0	0	0	0
Goa	1	1	0	0	1	0	1	0
Gujarat	35	24	11	0	9	5	4	0
Haryana	2	1	1	0	1	0	1	0
Himachal Pradesh	2	2	0	0	0	0	0	0
Jammu and Kashmir	0	0	0	0	0	0	0	0
Jharkhand	1	1	0	0	0	0	0	0
Karnataka	12	4	8	0	2	2	0	0
Kerala	5	0	5	0	0	0	0	0
Lakshadweep	0	0	0	0	0	0	0	0
Madhya Pradesh	4	3	1	0	2	1	1	0
Maharashtra	14	9	4	1	4	2	2	0
Manipur	0	0	0	0	0	0	0	0
Meghalaya	0	0	0	0	0	0	0	0
Mizoram	0	0	0	0	0	0	0	0
Nagaland	0	0	0	0	0	0	0	0
Odisha	0	0	0	0	0	0	0	0
Puducherry	0	0	0	0	0	0	0	0
Punjab	2	0	2	0	0	0	0	0

1	2	3	4	5	6	7	8	9
Rajasthan	13	9	4	0	3	1	2	0
Sikkim	0	0	0	0	0	0	0	0
Tamil Nadu	10	2	8	0	2	1	1	0
Telangana	15	8	7	0	1	0	1	0
Tripura	3	1	2	0	0	0	0	0
Uttar Pradesh	26	16	10	0	5	3	2	0
Uttarakhand	3	0	3	0	1	0	1	0
West Bengal	3	2	1	0	1	0	1	0
TOTAL	201	105	94	2	38	19	19	0

#### **Recovery of amounts from willful defaulters**

86. DR. V. MAITREYAN: Will the Minister of FINANCE be pleased to state:

(a) whether Government is keen enough and willing to impose strict deadline for the recovery of amounts from the Non-Performing Asset (NPA) accounts and wilful defaulters;

(b) the concrete measures and action taken by Government to recover the ₹ 2.5 lakh crores loaned to various customers, declared NPA by Public Sector Banks (PSBs); and

(c) the strict recovery procedures adopted and followed by the PSBs to recover the loans from the NPA accounts and willful defaulters and the action taken in the last three years along with its results in terms of recovery of loans?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The Government, Reserve Bank of India (RBI) and the Public Sector Banks (PSBs) are all concerned with the timely recovery of NPAs as it affects their profitability and capital adequacy.

(b) The recovery mechanism in the form of Debt Recovery Tribunals (DRTs), Board for Industrial and Financial Reconstruction (BIFR), Central Registry of Securitization Asset Reconstruction and Security Interest of India (CERSAI) and Central Repository of Information on Large Credits (CRILC) are already in existence. RBI further released guidelines dated 30th January, 2014 for “Early Recognition of Financial Distress, Prompt Steps for Resolution” suggesting various steps with specific timelines for implementation of corrective action.

(c) RBI has also introduced flexible structuring of long terms project loans to infrastructure and core industries which takes into account the lifecycle of the project for the purpose of repayment. RBI has also introduced the concept of non-cooperative borrowers where stricter provisioning norms will be applicable for fresh loan to such borrowers. The norms related to Asset Reconstruction Companies for payment in cash to banks for assets purchased has been increased from 5% to 15%.

The recovery during the last three years in respect of PSBs is as under:

(₹ in crore)

Period	Actual Recoveries	Recoveries due to upgradation	Compromise/ Write-offs	Total NPA Reduction.
2013	19,832	25,261	27,231	72,324
2014	33,698	32,936	34,409	1,01,043
2015	41,236	32,894	52,542	1,26,672

Source: RBI – global operations

### Improvement in fiscal position of country

†87. SHRI RAMDAS ATHAWALE: Will the Minister of FINANCE be pleased to state:

- (a) whether there is any improvement in the fiscal position of the country; and
- (b) if so, the details thereof as on date?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Yes Sir.

Details of fiscal deficit during last three financial years are given below:

Financial Year	Fiscal Deficit	
	(₹ crore)	(% of GDP)
2012-13	4,90,190	4.8
2013-14	5,02,863	4.4
2014-15 (Provisional)	5,01,880	4.0

† Original notice of the question was received in Hindi.

**Co-ordination between ARCs and PSBs**

88. SHRI AVINASH RAI KHANNA: Will the Minister of FINANCE be pleased to state:

(a) whether Government has recently called a meeting of Asset Reconstruction Companies (ARCs) and the Public Sector Banks (PSBs) to address the issues arising from Non-Performing Assets (NPAs) and whether the NPAs of banks have increased in the last one year;

(b) if so, the reasons therefor;

(c) whether lack of co-ordination between ARCs and banks have increased the NPAs; and

(d) the new strategies to be adopted by Government to bring down NPAs of the PSBs?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) Yes, Sir. Government of India had called a meeting of Asset Reconstruction Companies (ARCs) and major Public Sector Banks (PSBs) to discuss the issues arising from Non-performing Assets (NPAs) on June 17, 2015.

The Gross NPAs of PSBs (domestic operations) have increased from ₹ 2,40,986 crore as at end March, 2014 to ₹ 2,67,065 crore as at end March, 2015.

Lack of coordination between ARCs and Banks is not one of the reasons for increase in NPAs. The primary reasons for increase in Stressed Assets in recent times are various macro economical and global factors, economic slowdown, delays in statutory and other approvals, especially for projects under implementation, aggressive lending practices during upturn, as evidenced from high corporate leverage, risk concentration, especially to large Greenfield projects, Lax risk management systems and delays in resolution of NPAs through legal proceedings.

(d) Government and Reserve Bank of India (RBI) have taken various steps for recovery of loan from such companies:—

- The Government has decided to establish six new Debt Recovery Tribunals (DRT) (at Chandigarh, Bengaluru, Ernakulum, Dehradun, Siliguri, Hyderabad) to speed up the recovery of bad loans of the banking sector.
- RBI has released guidelines dated 30 January, 2014 for “Early Recognition of Financial Distress, Prompt Steps for Resolution and Fair Recovery for Lenders-Framework for Revitalizing Distressed Assets

in the Economy” suggesting various steps for quicker recognition and resolution of stressed assets:

- (i) Creation of a Central Repository of Information on Large Credits (CRILC) by RBI to collect, store, and disseminate credit data to banks on credit exposures of ₹ 5 crore and above.
  - (ii) Formation of Joint Lenders Forum (JLF) - The Framework outlines formation of JLF and corrective action plan that will incentivise early identification of problem cases, timely restructuring of accounts which are considered to be viable, and taking prompt steps by banks for recovery or sale of unviable accounts.
- Flexible Structuring of Loan Term Project Loans to Infrastructure and Core Industries - RBI issued guidelines on July 15, 2014 and December 15, 2014. Long term financing for infrastructure has been a major constraint in encouraging larger private sector participation in this sector. On the asset side, banks will be encouraged to extend long term loans to infrastructure sector with flexible structuring to absorb potential adverse contingencies, (also known as the 5/25 structure).
  - RBI now has come out with new category of borrower called Non-Cooperative borrower. A non-cooperative borrower is a borrower who does not provide information on its finances to the banks.
  - Asset Reconstruction Companies - Taking further steps in the area, RBI has tightened the norms for Asset Reconstruction Companies (ARCs), *vide* guidelines dated August 5, 2014, where the minimum investment in Security Receipts should be 15% which was earlier 5%.

### **Profitability of PSBs**

89. SHRI RAJKUMAR DHOOT: Will the Minister of FINANCE be pleased to state:

- (a) whether it is a fact that Private Banks operating in the country are earning more profits in comparison to Public Sector Banks (PSBs) of the country;
- (b) if so, the details thereof; and
- (c) what steps Government, RBI and Public Sector Banks propose to take to increase the profitability of PSBs?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE  
(SHRI JAYANT SINHA): (a) and (b) Total net profit for Private Sector Banks was

₹ 38,976 crore for the year 2014-15 whereas for Public Sector Banks, the figure is ₹ 37,823.39 crore.

(c) 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 and further revamping of the entire target setting.

### **Impact of Greece crisis on Indian economy**

† 90. SHRI PRABHAT JHA: Will the Minister of FINANCE be pleased to state:

(a) whether the economic crisis in Greece may affect the Indian economy, if so, the details thereof; and

(b) whether Government is taking steps to save the Indian economy from the effects of the economic crisis of Greece and whether Government is also contemplating to provide economic assistance to Greece; if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) The economic crisis in Greece, is not likely to impact Indian economy.

(b) Macro fundamentals of the Indian economy are in a strong position with adequate foreign exchange reserves to manage the volatility of exchange rate. Presently, there is no proposal to provide economic assistance to Greece by Government of India.

### **Fund allocation to Assam**

91. SHRI PANKAJ BORA: Will the Minister of FINANCE be pleased to state:

(a) whether Government is aware that Centres' decision to cut fund allocation will severely affect development process of Assam;

(b) whether it will not be possible to roll out new development projects in Assam without adequate Central fund; and

(c) whether Government is aware that Assam is dependent on Centre for 60 per cent of its total funds for development works?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (c) No, Sir. This does not arise. During financial year 2015-16, an amount of ₹ 17400.88 crore is proposed to be released as States share devolution in Central Taxes and Duties to Assam as compared to ₹ 12283.71 crore released

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† Original notice of the question was received in Hindi.

during financial year 2014-15. This will be 41.66% higher than the share of Central Taxes and Duties received by Assam in financial year 2014-15. In addition, Assam will be receiving Post-Devolution Revenue Deficit Grant of ₹ 2191.00 crore during financial year 2014-15.

Consequent upon accepting the recommendations of 14th Finance Commission raising devolution of Central Taxes and Duties from 32% to 42%, Government has decided to discontinue its support to eight programmes.

However, keeping in mind that some of the schemes represents national priorities, especially with regard to schemes meant for the poor and some of the schemes are legal obligations, Government has decided to continue its full support to 30 schemes and support 24 schemes with changed sharing pattern.

### **Paternity leave for bank employees**

†92. SHRI LAL SINH VADODIA: Will the Minister of FINANCE be pleased to state:

- (a) whether it is a fact that Government is considering to grant paternity leave to the bank employees;
- (b) if so, whether Government has taken any step in this regard, so far; and
- (c) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) and (b) Yes Sir, paternity leave to bank employees has been accepted under the 10th Wage Negotiation Settlement signed between Indian Banks' Association (IBA) and the Unions/Associations of employees.

(c) Male employees with less than two surviving children shall be eligible for 15 days paternity leave during his wife's confinement and may be availed upto 15 days before or upto 6 months from the date of delivery of the child.

### **Revised norms of IT Returns**

93. Dr. K. P. RAMALINGAM: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that Government is considering various measures to reassure taxpayers regarding compliance norms, including doing away with mandatory submission of hard copies of returns as early as this year, if so, the details thereof; and

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† Original notice of the question was received in Hindi.

(b) whether it is a fact that IT department is also planning to introduce provisions such as electronic signature and mentioning of Aadhaar number for e-filing of returns; if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) As per rule 12 of the Income-tax Rules, in case of individuals and certain other specified taxpayers, returns may be filed electronically followed by submission of signed paper copy of ITk-Verification form (ITR-V). However to provide end-to-end e-enabled services to the taxpayers, a facility has been introduced for electronic verification of the Income-tax Returns for A.Y. 2015-16 in these cases.

Under this, a taxpayer may verify his return through Internet Banking or through Aadhaar based authentication process. For the convenience of small taxpayers having total income of ₹ 5 lakhs or below and without any claim of refund, facility for generating Electronic Verification Code (EVC) has also been provided on the E-filing website of the Income-tax department. In such cases EVC will be sent to the registered email ID and mobile number of the taxpayer.

Persons using this facility will not be required to submit a signed paper copy of ITR-V to the Income-tax department.

(b) Taxpayers are already permitted to use Digital Signature Certificate (DSC) to verify their e-filed Income-tax return. The electronic signature is a type of DSC and can be used to verify e-filed Income-tax return.

As mentioned in (a) above, taxpayers can use their Aadhaar number for e-filing of returns as per the Aadhaar based authentication process.

### **Granting of loans by Union Bank of India**

94. SHRI ARVIND KUMAR SINGH: Will the Minister of FINANCE be pleased to refer to answers to Unstarred Questions 518 and 3634 given on 28th April, 2015 and 12th August, 2014 respectively in the Rajya Sabha and state:

(a) whether there is any guideline of the Reserve Bank of India (RBI) and Union Bank of India which permits Union Bank to grant loans after obtaining Non Encumbrance Certificate to gangs of habitual fraudsters against whom multiple cases of banking frauds in multiple banks have been registered;

(b) if so, the details of specific guidelines by the RBI and Union Bank in this regard, separately;

(c) if not, the reasons for allowing habitual fraudsters to secure loans and how Government would recover the loans sanctioned to fraudsters by Union Bank, Chitbaragaon branch; and



(d) the details of other actions Government would take in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) No, Sir.

(b) Does not arise.

(c) Union Bank of India has reported that Kisan Credit Card Loan is sanctioned to borrowers as per bank's guidelines and required formalities are also completed. Further, Non-Encumbrance Certificate (NEC) is obtained from Bank's empanelled advocate, wherever applicable, to avoid multiple financing. Union Bank of India has also informed that the bank recovers the dues from borrowers as per norms when the loan becomes due for repayment.

(d) Reserve Bank of India (RBI) has issued Master Circular on "Frauds-Classification and Reporting" containing all the details/aspects relating to frauds, which is also available on the website of RBI. RBI has also informed that on receipt of fraud reports from banks, various aspects related to the frauds are examined and concerned banks are advised to report the case to CBI/Police/Serious Fraud Investigation Office (SFIO), examine staff accountability, take steps to recover the amount involved in the fraud, claim insurance wherever applicable and streamline the system as also procedures so that frauds do not recur. The framework put in place to deal with loan frauds, *inter-alia*, prohibits banks from extending bank finance to borrowers, who have defaulted and also committed a fraud, for five years from the date of full payment of the defrauded amount.

### **Insurance for houses**

95. SHRI C.M. RAMESH: Will the Minister of FINANCE be pleased to state:

(a) whether Government is aware that more than 70 per cent of houses in the country do not have insurance cover;

(b) whether it is a fact that in the absence of awareness about insuring homes, many Indians give little importance to home insurance;

(c) the efforts being made by the Ministry to bring awareness among the people about the benefits of taking insurance cover for their homes; and

(d) whether Government would provide some subsidy or incentive to encourage home insurance in the country?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) to (d) Subscription to house insurance is low in India. Lack of awareness would be one of the factors behind it. In India, generally banks/financial institutions

stipulate insurance for houses financed by them. Insurance education may help consumers to understand their needs, risks, and the benefits of purchasing insurance for managing their risks. Insurance Regulatory and Development Authority of India (IRDAI), as insurance sector regulator, has been playing pro-active role in promoting insurance education. IRDAI has taken a number of consumer education initiatives under *Bima Bemisaal*, so as to promote insurance awareness and increase insurance penetration in the country. The Public Sector General Insurance Companies (PSGICs) are also tying up with various scheduled banks, Co-operative Banks, Regional Rural Banks (RRBs), MFIs, SHGs, Village panchayats etc. to spread the reach of insurance to every corner of the country. Mobile Vans are also being sent and Camps are being organized at regular intervals at various locations. PSGICs are opening Micro Offices/business centres in Tier III and IV cities. There is no proposal under consideration to provide for subsidy for home insurance.

### **Interest rates on bank loans**

†96. SHRI NARAYAN LAL PANCHARIYA: Will the Minister of FINANCE be pleased to state:

(a) whether Government has given any direction to reduce the rate of interest on bank loans in the country;

(b) if so, the names of the banks, which have reduced the rate of interest on the loans; and

(c) whether any action is being taken against those banks, which have not reduced their rate of interest?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) With the introduction of Base Rate system since July 1, 2010, all rupee lending rates (including advances up to ₹ 2 lakh) have been deregulated. Accordingly, the interest rates on rupee advances are determined by banks with the approval of their respective Boards. In a deregulated environment, banks have complete freedom in deciding their spread, risk premia term premia and other customer specific charges as considered appropriate on the loans and advances based on their commercial judgement.

(b) and (c) Following the reduction in the RBI's policy rate by 75 basis points in three equal steps on January, 15, March, 4, and June, 2, 2015, out of a total 89 scheduled commercial banks (excluding RRBs), 58 banks (27 PSBs, 14 private sector bank and 17 foreign banks) reduced their base rates (lending rate) in the range of 10-75 basis points so far (up to July 7, 2015). Detail is given in Statement.

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† Original notice of the question was received in Hindi.

**Statement***Reduction in Base Rates of Scheduled Commercial Banks (SCBs)  
(Excl. RRBs) - After January 15, 2015 Policy*

Sl. No.	Scheduled Commercial Banks	January 15, 2015 (%)	July 7, 2015 (%)	Variation (Percentage Points) %
1	2	3	4	5
<b>Public Sector Banks</b>				
1.	Allahabad Bank	10.25	9.95	-0.30
2.	Andhra Bank	10.25	10.00	-0.25
3.	Bank of Baroda	10.25	10.00	-0.25
4.	Bank of India	10.20	9.95	-0.25
5.	Bank of Maharashtra	10.25	10.00	-0.25
6.	Bhartiya Mahila Bank	10.25	10.00	-0.25
7.	Canara Bank	10.20	10.00	-0.20
8.	Central Bank of India	10.25	9.95	-0.30
9.	Corporation Bank	10.25	10.00	-0.25
10.	Dena Bank	10.25	10.00	-0.25
11.	IDBI Bank Ltd.	10.25	10.00	-0.25
12.	Indian Bank	10.25	9.95	-0.30
13.	Indian Overseas Bank	10.25	10.05	-0.20
14.	Oriental Bank of Commerce	10.25	10.00	-0.25
15.	Punjab and Sind Bank	10.25	10.00	-0.25
16.	Punjab National Bank	10.25	10.00	-0.25
17.	State Bank of Bikaner and Jaipur	10.25	9.95	-0.30
18.	State Bank of Hyderabad	10.20	10.05	-0.15
19.	State Bank of India	10.00	9.70	-0.30
20.	State Bank of Mysore	10.25	10.00	-0.25
21.	State Bank of Patiala	10.25	9.95	-0.30
22.	State Bank of Travancore	10.25	10.15	-0.10
23.	Syndicate Bank	10.25	10.00	-0.25
24.	UCO Bank	10.20	9.95	-0.25
25.	Union Bank of India	10.25	10.00	-0.25

1	2	3	4	5
26.	United Bank of India	10.25	9.90	-0.35
27.	Vijaya Bank	10.25	10.00	-0.25
<b>Private Sector Banks</b>				
28.	Axis Bank	10.15	9.85	-0.30
29.	Federal Bank	10.20	9.95	-0.25
30.	HDFC Bank	10.00	9.70	-0.30
31.	ICICI Bank	10.00	9.70	-0.30
32.	IndusInd Bank	11.00	10.85	-0.15
33.	Jammu and Kashmir Bank	10.25	9.85	-0.40
34.	Karnataka Bank	10.75	10.50	-0.25
35.	Karur Vysya Bank	11.00	10.75	-0.25
36.	Kotak Mahindra Bank	10.00	9.75	-0.25
37.	Lakshmi Vilas Bank	11.25	10.95	-0.30
38.	Ratnakar Bank	11.00	10.85	-0.15
39.	South Indian Bank	10.50	10.20	-0.30
40.	Tamilnad Mercantile Bank	10.75	10.60	-0.15
41.	Yes Bank	10.75	10.50	-0.25
<b>Foreign Banks</b>				
42.	Bank of America	9.50	9.00	-0.50
43.	Bank of Nova Scotia	9.50	9.00	-0.50
44.	Bank of Tokyo-Mitsubishi, UFJ	8.25	8.10	-0.15
45.	BNP Paribas	9.50	9.20	-0.30
46.	China trust Commercial Bank	9.75	9.40	-0.35
47.	Citibank	9.50	9.35	-0.15
48.	Credit Agricole Bank	9.35	9.15	-0.20
49.	DBS Bank	9.75	9.40	-0.35
50.	Deutsche Bank	9.95	9.65	-0.30
51.	FirstRand Bank	10.40	10.00	-0.40
52.	HSBC	9.70	9.45	-0.25
53.	J. P. Morgan Chase Bank	9.40	8.90	-0.50
54.	Mizuho Corporate Bank	9.50	8.75	-0.75

1	2	3	4	5
55.	Royal Bank of Scotland	9.70	9.50	-0.20
56.	Societe Generale	9.70	9.15	-0.55
57.	National Australia Bank Ltd	10.00	9.50	-0.50
58.	Sumitomo Mitsui Banking Corp.	8.50	7.95	-0.55

Source: RBI

### Settlement of outstanding CST claim

97. SHRI MANSUKH L. MANDAVIYA : Will the Minister of FINANCE be pleased to state:

(a) whether the Central Government has made any provision in the budget for the year 2014-15 towards the Central Sales Tax (CST) compensation;

(b) if so, whether Government has released any compensation to any States during the year 2014-15;

(c) if not, the reasons therefor; and

(d) by when the outstanding CST claims of the States are likely to be settled?

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE (SHRI JAYANT SINHA): (a) Yes, Sir.

(b) and (c) Government has released ₹ 10724.08 crore to the States/UTs towards balance of CST compensation for 2010-11.

(d) Outstanding CST claim of the States for 2011-12 and 2012-13 are likely to be released in Financial Year 2015-16 and 2016-17 respectively.

### Prescribing of affordable drugs

98. SHRI T. RATHINAVEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Indian Medical Association (IMA) has asked the doctors to prescribe cheapest version of drugs;

(b) whether it is a fact that it will have the direct benefit of making drugs more accessible and affordable; and

(c) whether it is also a fact that the IMA has asked its members to prescribe drugs with chemical or generic name in capital letters and the name of the pharmaceutical company or the brand in brackets, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) Indian Medical association (IMA) is not a Government Body. However, Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002 provide that every physician should, as far as possible, prescribe drugs with generic names and he/she shall ensure that there is a rational prescription and use of drugs.

**Status of Ebola disease in the country**

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

(a) the source and status of Ebola disease in the country alongwith the number of cases that have since been registered for treatment;

(b) how far it has been controlled; and

(c) whether the people of the country have since been advised about precautionary measures and action plan to control this menace, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) No case of Ebola Virus Disease has been reported in India.

(c) Pursuant to the declaration of Ebola Virus Disease (EVD) as Public Health Emergency of International Concern by World Health Organization, Government of India commenced screening of passengers arriving from or transiting through EVD affected countries at identified Airports and Ports. These passengers are provided information on precautionary measures.

The Integrated Disease Surveillance Programme is tracking the passengers who arrive in India from EVD affected countries and who have history of contact with a suspect or confirmed EVD case. Such passengers are being tracked for 30 days. They are advised on precautionary measures and their health status is monitored.

Two laboratories namely National Institute of Virology (NIV), Pune and National Centre for Disease Control (NCDC), Delhi are testing clinical samples of high risk passengers. 10 more existing laboratories with required Bio Safety Level (BSL) standards have been identified to collect, test and store samples.

The States have been provided guidelines on screening, risk categorization of patients, clinical case management and infection control practices.

**Travel advisory on MERS**

100. SHRI ANIL DESAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Ministry has issued a travel advisory for passengers arriving from or travelling to countries including the Gulf region as well as Thailand affected by Middle East Respiratory Syndrome (MERS);

(b) if so, the names of the countries; and

(c) whether there will be passive screening at airports apart from the advisory asking passengers travelling abroad to declare if they have been to these countries and whether they have had any symptoms of the disease?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Yes. Ministry of Health has issued advisory for passengers arriving from or travelling to countries, including the Gulf region as well as Thailand affected by Middle East Respiratory Syndrome (MERS).

(b) The names of affected countries are given in Statement (*See below*).

(c) Passive screening through self-reporting by symptomatic international travellers arriving at various airports is being done in coordination with immigration officials.

Health Alerts have been displayed at or near to Immigration counters in the pre-immigration area.

***Statement***

*List of countries that reported cases of MERS CoV to  
World Health Organization (as on 7th July, 2015)*

Middle East (9)	Europe (8)	Africa (3)	Asia (5)	Americas (1)
Iran	Austria	Algeria	China	The United States of America
Jordan	France	Tunisia	Malaysia	
Kuwait	Germany	Egypt	Republic of Korea	
Lebanon	Greece		Thailand	
Oman	Italy		Philippines	
Qatar	Netherlands			
Saudi Arabia	Turkey			
United Arab Emirates	United Kingdom (UK)			
Yemen				

**Daily drug therapy for TB patients**

101. SHRI S. THANGAVELU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government has decided to start daily drug therapy for TB patients in 100 select district in the next few months, if so, the details thereof; and

(b) whether it is also a fact that this new treatment protocol which involves shifting from the current thrice a week dosage is being opted for, after experts have found the current system ineffective and also a possible cause for MDR-TB?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Under the Revised National Tuberculosis Control Programme (RNTCP), it has been decided to provide first-line therapy for Tuberculosis by providing drugs on a daily regimen in 104 districts of the country, on a pilot basis.

(b) RNTCP has adopted the intermittent treatment regimen since inception of the programme, which has been effective in consistently maintaining the desired programme objective of 85 percent cure rate among new smear positive TB cases. However, the position has been recently reviewed by an expert committee set up under Director General, ICMR, which, after consideration of currently available evidence, recommended to undertake the pilot of daily regimen for first line anti-TB treatment under RNTCP.

**Central assistance for eradication of blindness and leprosy**

†102. SHRI RAMDAS ATHAWALE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the Central grant-in-aid made available to various States including Maharashtra for the eradication of blindness and leprosy during the current year;

(b) the amount released for this task so far during this year, State-wise; and

(c) whether Government has issued any guidelines on the utilisation of the Central assistance or grants?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The details of Central grant-in-aid allocated to various States including Maharashtra for the National Programme of Control of Blindness and Leprosy Programme are given below:

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†Original notice of the question was received in Hindi.



(₹ in crore)

National Programme of Control of Blindness (NPCB)	Leprosy Programme
161.00	35.50

(b) The details of amount released to the States under the NCD Flexi Pool including NPCB and Leprosy Programme so far are given below:

(₹ in lakh)

Name of State	NCD Flexi Pool including NPCB	Leprosy rogramme
Madhya Pradesh	2681	87.50
Rajasthan	2704	36.00
Daman and Diu	35	11.34
Haryana	-	26.50
Punjab	-	56.25
Delhi	-	51.51
Puducherry	-	4.74

(c) Government has issued Programme Implementation Plan (PIP) guidelines for use of the Central grant-in-aid for implementing various programmes including these programmes.

### Check on adulterated food items

103. SHRI ARVIND KUMAR SINGH:

SHRI NEERAJ SHEKHAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Food Safety and Standards Authority of India has found more than permissible level of lead and monosodium glutamate (MSG) content in Nestle's Maggi noodles and presence of detergent in Mother Dairy's milk samples, if so, the details thereof;

(b) the details of action taken by Government in this regard;

(c) the details of other food items which have been found unsafe for human health; and

(d) the details of stern measures Government would take to check adulterated food articles in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per reports 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. However, no report has been received by the Food Safety and Standards Authority of India (FSSAI) indicating the presence of detergent in Mother Dairy's milk samples.

(b) The FSSAI has issued an order dated 5th June 2015 directing M/s Nestle India Limited to withdraw and recall their products from the market. Further, a show cause notice has been issued to the company giving 15 days' time as to why Product Approvals granted in respect of 9 variants of Maggi Noodles should not be withdrawn.

(c) The Food Safety and Standards Authority of India 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 MNCs 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. Besides, safety standards of food items have been notified in respect of around 365 categories of food products. These standards are enforced by the Food Safety Departments of the States/UTs; however, details in this regard are not maintained centrally.

(d) The implementation and enforcement of Food Safety and Standards Act, 2006 primarily rests with the State/UT Governments. Samples of food items will continue to be drawn by the State Food Safety Officers and sent to the laboratories authorized by the FSSAI for analysis. In cases, where samples are found to be not conforming to the provisions of the Act, the Rules and Regulations made thereunder, action as per the Food Safety and Standards Act, 2006 and regulations 2011, will be taken.

#### **Action plan for distribution of free medicines**

104. SHRIMATI RAJANI PATIL:

SHRI KIRANMAY NANDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the action plan drawn by Government to distribute free life-saving and generic drugs to boost healthcare services in the country indicating the financial and operational modalities worked out for the purpose;

(b) whether Government proposes to provide all the drugs/drug formulations included in the National List of Essential Medicines (NLEM) under the scheme, if so, the details thereof, and if not, the reasons therefor indicating the drugs selected to be provided under the plan; and

(c) the measures being taken by Government to ensure the quality, safety and standards of the drugs?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Public Health being a state subject, it is primarily for the States/UTs to draw up such action plans as per their need. However, under the National Health Mission (NHM), financial and technical support is being provided to the States/UTs for strengthening their healthcare delivery system including support for provision of free drugs to those who access public health facilities based on the requirement posed by the States/UTs in their Programme Implementation Plans. An incentive of up to 5% additional funding (over and above the normal allocation of the State) under the NHM is provided to those States that introduce free medicines scheme. Under the NHM-Free Drug Service Initiative substantial funding is available to States for provision of free drugs subject to States/UTs meeting certain specified conditions. Detailed Operational Guidelines for NHM-Free Drugs Service Initiative have also been released to the States on 2nd July, 2015.

The number of free drugs provided by the States varies from State to State and most States have their own list of essential medicines to be provided free in public facilities. As such, support is available to the States/UTs if they decide to provide free Essential medicines as per the National List.

(c) The steps taken by the Government to check spurious/sub-standard drugs in the country include:

- Under Drugs and Cosmetics Act, 1940 and Rules made thereunder, the regulatory control over the drugs imported in to the country is exercised by the Central Government through the Central Drugs Standard Control Organization (CDSCO).
- The manufacture, sale and distribution of drugs is regulated under the said Act and Rules by the State Drugs Control Authorities appointed by the State Governments.
- The regulatory control over the manufacture and sale of the drugs is exercised through a system of licensing and inspection.
- The manufacturer is required to comply with the requirements of Good Manufacturing Practices specified under Schedule M of the Drugs and Cosmetics Rules and conditions of the licence so as to ensure that the drugs manufacturers in the country conform to the standards prescribed for them.

Further, the Government has taken following steps to check the menace of spurious/sub-standard drugs:

1. The Drugs and Cosmetics Act, 1940 was amended under Drugs and Cosmetics (Amendment) Act, 2008. Stringent penalties for manufacture of spurious and adulterated drugs have been provided. Certain offences have also been made cognizable and non-bailable.
2. The States/UTs have been requested to set up special Courts for trial of offences under the Drugs and Cosmetics Act for speedy disposal. 25 States have already set up designated special Courts for trial of cases related to spurious and sub-standard drugs.
3. A Whistle Blower Scheme has been announced by the Government of India to encourage vigilant public participation in the detection of movement of spurious drugs in the country. The scheme provides for suitably rewarding the informers for providing concrete information to the regulatory authorities in respect of movement of spurious drugs. The details of policy are available at the website of CDSCO ([www.cdsc.nic.in](http://www.cdsc.nic.in)).
4. Guidelines for taking action on samples of drugs declared spurious or not of standard quality in the light of enhanced penalties under the Drugs and Cosmetics (Amendment) Act, 2008 were forwarded to the State Drugs, Controllers for uniform implementation.
5. The Government has decided to strengthen both the Central and States' drug regulatory system during the Twelfth Five Year Plan enabling them to keep more effective watch on these unscrupulous elements indulging in unlawful activities.
6. The number of sanctioned posts in Central Drugs Standard Control Organisation (CDSCO) has been increased from 111(as on April, 2008) to 474 (as on Feb., 2015).
7. Provision of quality assurance for the drugs provided in public health facilities under the NHM.

#### **Creation of awareness on immunization**

105. SHRI T. RATHINAVEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has unveiled a major campaign to create awareness on immunization, if so, the details thereof;

(b) whether it is a fact that every child in the country is not immunized or is partially immunized; and

(c) whether it is also a fact that Government is considering taking up around 201 high focus districts for implementation of immunization programme, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Yes. The Ministry of Health and Family Welfare launched Mission Indradhanush in 201 high priority districts (in the first phase) to cover all partially vaccinated and un-vaccinated children in the country. The first round started from 7th April, 2015.

The Ministry launched the media campaign for Mission Indradhanush on 23rd March, 2015 where media creatives were released. These included a short movie, posters and banners in English and Hindi; these have been distributed to all 201 districts to create wide awareness about the benefits of Immunization. Social media platforms of the Ministry, ITSU and UNICEF (including Twitter and YouTube) have launched media campaigns to create awareness about immunization and Mission Indradhanush. Recently, the Directorate of Field Publicity under M/o I and B, Government of India has launched a special inter-personal awareness campaign in high priority districts to create enhanced awareness about the importance and benefits of immunisation.

(b) No, it is not a fact that every child in the country is not immunized or is partially immunized.

(c) The Ministry of Health and Family Welfare has launched Mission Indradhanush to cover all partially vaccinated and un-vaccinated children in the country. 201 high priority districts which account for nearly 50% of such children in the country have been selected in the first phase.

Under Mission Indradhanush, immunization is being provided against seven life-threatening diseases (diphtheria, whooping cough, tetanus, polio, tuberculosis, measles and hepatitis B). In addition, vaccination against Japanese Encephalitis and Haemophilus influenza type-B will be provided in select districts/States of the country. Vaccination against tetanus is also being provided to the pregnant women.

### **State-wise plans for NHM and NRHM**

106. DR. K.V.P. RAMACHANDRA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government had prepared detailed plans for the National Health Mission (NHM) and National Rural Health Mission (NRHM), State-wise;

(b) if so, the details thereof particularly in respect of Andhra Pradesh and Telangana and the thrust of the plans for the two States; and

(c) the progress achieved under these plans?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Under NHM, Government of India does not prepare State-wise plan. Instead, it is the States/UTs who prepare their Programme Implementation Plans (PIPs) to strengthen their health care systems based on the felt needs of the State. Government of India appraises these plans and accords appropriate approvals.

The key programmatic areas for which approvals have been accorded are the Health System Strengthening in both rural and urban areas, Reproductive-Maternal-Neonatal-Child and Adolescent Health (RMNCH+A) interventions, and control of Communicable and Non-Communicable Diseases.

The approvals issued in respect of States of Andhra Pradesh and Telangana in 2014-15 are available in public domain on NHM's website *i.e.* [www.nhm.gov.in](http://www.nhm.gov.in).

(c) NRHM was launched in 2005. The key achievements of National Rural Health Mission (NRHM) since the launch of NRHM for Andhra Pradesh (including Telangana) and country as a whole are as follows:

Health indicator	2005		2013	
	India	A.P	India	A.P
IMR	58	57	40	39
TFR	2.9	2	2.3	1.8
Health indicator	2004-2006		2011-2013	
	India	A.P	India	A.P
MMR	254	154	167	92

#### **Assessment of healthcare facilities in rural areas**

107. SHRI PRAMOD TIWARI:

SHRI DARSHAN SINGH YADAV:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has assessed the availability of healthcare facilities in the rural areas *vis-a-vis* the urban areas of the country;

(b) if so, the details and the outcome thereof; and

(c) the programmes/schemes being implemented/proposed to be implemented by Government to reduce rural-urban gap in access to quality healthcare and advanced treatment and diagnostic facilities in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Public Health being a state subject, the detailed information regarding the availability of health care facilities in the rural areas *viz-a-viz* the urban areas is not maintained at the level of GoI. However, the State/UT-wise details of number of required, in-position and shortfall of Sub Centres (SCs), Primary Health Centres (PHCs) and Community Health Centres (CHCs) and number of Sub-Divisional Hospitals (SDHs) and District Hospitals (DHs) functioning in the country as per Rural Health Statistics (RHS) Bulletin as on 31st March, 2014 are given in the Statement-I (*See* below). State/UT-wise details regarding number of Government Hospital beds and Beds in Rural areas and Urban Areas (Including CHCs) in India as per National Health Profile 2013 is given in the Statement-II (*See* below). Estimates from studies indicate that there are about four times as many doctors per 10000 population in urban areas as compared to the rural areas.

(c) Public Health is a State subject. National Rural Health Mission (NRHM) was launched in April, 2005 to provide accessible, affordable and quality health care particularly to the rural population. Under the Mission financial and technical support is provided to States/UTs to strengthen their healthcare system based on the demands posed by the States in their Programme Implementation Plans (PIPs). One of the key strategies identified for the same has been improving the availability of critical manpower to provide services in public health facilities. In order to encourage the doctors to work in remote and difficult areas, the Medical Council of India with the previous approval of Central Government has amended the Post Graduate Medical Education Regulations, 2000 to provide:

- (i) 50% reservation in Post Graduate Diploma Courses for Medical Officers in the Government service who have served for at least three years in remote and difficult areas; and
- (ii) Incentive at the rate of 10% of the marks obtained for each year in service in remote or difficult areas up to the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses. Government has also approved setting up of ANM/GNM Schools in different States besides setting up of Institutes of Paramedical Sciences at National and regional levels.

Further, under the National Health Mission (NHM), financial support is 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 join public health facilities in such areas. States have also been advised to have transparent policies of posting and transfer, and deploy doctors rationally.

The Support is also provided for the following:

- (i) Support is provided to States/UTs under NRHM, to strengthen the health system including establishment/up-gradation/renovation of health infrastructure.
- (ii) States/UTs are also supported to provide free essential medicines in all public health facilities.
- (iii) Under NHM, the High Focus States that generally have higher proportion of rural population, receive higher per capita funding. Also, States/UTs are being provided support for focused attention and greater resources per capita to High Priority Districts which have relatively poor composite health index.
- (iv) Financial assistance is provided to States/UTs for selection and training of Accredited Social Health Activists (ASHA), who act as a link between community and healthcare facilities. States/UTs are supported with Mobile Medical Units for improved service delivery especially in hard to reach areas and Emergency Referral Transport services to ensure un-interrupted referral services.
- (v) States/UTs are supported with Mobile Medical Units for improved service delivery especially in hard to reach areas and Emergency Referral Transport Services to ensure un-interrupted referral services.
- (vi) Initiatives such as Janani Shishu Suraksha Karyakram (JSSK), Rashtriya Bal Swashtya Karyakram (RBSK), Rashtriya Kishore Swashtya Karyakram (RKSK), etc., have been introduced to improve access to quality healthcare.
- (vii) States are also being supported to provide free essential drugs and free essential diagnostics in public health facilities. Operational guidelines for the same have also been released to the States.
- (viii) National Quality Assurance Framework has been rolled out to improve quality of care in public health facilities.



**Statement-I**  
(A) Shortfall in Health Infrastructure as per 2011 population (provisional) in India (as on March, 2014)

Sl. No.	State/UT	Sub Centres				PHCs				CHCs			
		R	P	S	% Shortfall	R	P	S	% Shortfall	R	P	S	% Shortfall
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1.	Andhra Pradesh	11969	12522	*	*	1965	1709	256	13	491	292	199	41
2.	Arunachal Pradesh	318	286	32	10	48	117	*	*	12	52	*	*
3.	Assam	5850	4621	1229	21	954	1014	*	*	238	151	87	37
4.	Bihar	18637	9729	8908	48	3099	1883	1216	39	774	70	704	91
5.	Chhattisgarh	4885	5161	*	*	774	783	*	*	193	157	36	19
6.	Goa	122	207	*	*	19	21	*	*	4	4	0	0
7.	Gujarat	8008	7274	734	9	1290	1158	132	10	322	300	22	7
8.	Haryana	3301	2542	759	23	550	454	96	17	137	109	28	20
9.	Himachal Pradesh	1285	2068	*	*	212	489	*	*	53	78	*	*
10.	Jammu and Kashmir	2009	2265	*	*	327	637	*	*	81	84	*	*
11.	Jharkhand	6060	3958	2102	35	966	330	636	66	241	188	53	22
12.	Karnataka	7951	9264	*	*	1306	2233	*	*	326	193	133	41
13.	Kerala	3551	4575	*	*	589	829	*	*	147	224	*	*

1	2	3	4	5	6	7	8	9	10	11	12	13	14
14.	Madhya Pradesh	12415	8764	3651	29	1989	1157	832	42	497	334	163	33
15.	Maharashtra	13512	10580	2932	22	2201	1811	390	18	550	360	190	35
16.	Manipur	509	421	88	17	80	85	*	*	20	17	3	15
17.	Meghalaya	759	422	337	44	114	108	6	5	28	27	1	4
18.	Mizoram	172	370	*	*	25	57	*	*	6	9	*	*
19.	Nagaland	455	396	59	13	68	126	*	*	17	21	*	*
20.	Odisha	8193	6688	1505	18	1315	1305	10	1	328	377	*	*
21.	Punjab	3468	2951	517	15	578	427	151	26	144	150	*	*
22.	Rajasthan	11459	14407	*	*	1861	2082	*	*	465	567	*	*
23.	Sikkim	113	147	*	*	18	24	*	*	4	2	2	50
24.	Tamil Nadu	7533	8706	*	*	1251	1369	*	*	312	385	*	*
25.	Tripura	691	972	*	*	109	84	25	23	27	18	9	33
26.	Uttarakhand	1442	1847	*	*	238	257	*	*	59	59	0	0
27.	Uttar Pradesh	31200	20521	10679	34	5194	3497	1697	33	1298	773	525	40
28.	West Bengal	13083	10356	2727	21	2153	909	1244	58	538	347	191	36
29.	Andaman and Nicobar Islands	50	119	*	*	8	22	*	*	2	4	*	*

30. Chandigarh	5	16	*	*	0	0	0	0	0	2	*	*
31. Dadra and Nagar Haveli	56	51	5	9	8	7	1	13	2	1	1	50
32. Daman and Diu	13	26	*	*	2	3	*	*	0	2	*	*
33. Delhi	83	27	56	67	13	5	8	62	3	0	3	100
34. Lakshadweep	4	14	*	*	0	4	*	*	0	3	*	*
35. Puducherry	79	53	26	33	13	24	*	*	3	3	0	0
INDIA	179240	152326	36346	20	29337	25020	6700	23	7322	5363	2350	32

Notes : The requirement is calculated using the prescribed norms on the basis of rural population from Census, 2011. All India shortfall is derived by adding State-wise figures of shortfall ignoring the existing surplus in some of the States.

R: Required; P: In Position; S: Shortfall; \*: Surplus

*(B) Number of Sub-Divisional Hospitals (SDHs) and District Hospitals (DHs) functioning in the country as per Rural Health Statistics Bulletin (RHS) 2014*

Sl. No.	State/UT	Sub-Divisional Hospitals (SDHs)	District Hospitals (DHs)
1	2	3	4
1.	Andhra Pradesh	61	17
2.	Arunachal Pradesh	0	14
3.	Assam	13	25
4.	Bihar	45	36
5.	Chhattisgarh	14	27
6.	Goa	1	2
7.	Gujarat	31	24
8.	Haryana	20	20
9.	Himachal Pradesh	45	12
10.	Jammu and Kashmir	0	22
11.	Jharkhand	10	24
12.	Karnataka	146	32
13.	Kerala	79	16
14.	Madhya Pradesh	63	51
15.	Maharashtra	86	23
16.	Manipur	1	7
17.	Meghalaya	1	11
18.	Mizoram	2	8
19.	Nagaland	0	11
20.	Odisha	27	32
21.	Punjab	41	22
22.	Rajasthan	19	34
23.	Sikkim	0	4

1	2	3	4
24.	Tamil Nadu	236	31
25.	Tripura	13	3
26.	Uttarakhand	17	19
27.	Uttar Pradesh	0	160
28.	West Bengal	38	21
29.	Andaman and Nicobar Islands	0	3
30.	Chandigarh	0	1
31.	Dadra and Nagar Haveli	0	1
32.	Daman and Diu	0	2
33.	Delhi	13	34
34.	Lakshadweep	2	1
35.	Puducherry	0	5
ALL INDIA		1024	755

Statement-II  
State/UT-wise number of Government Hospitals and Beds in Rural and Urban Areas (including CHCs) in India (Provisional)

Sl. No.	State/UT/Division	Rural Hospitals		Urban Hospitals		Total Hospitals		Provisional/Projected Population as on reference period in (000)	Average Population Served Per Govt. Hospital		Reference Period
		No.	Beds	No.	Beds	No.	Beds		Served Per Govt. Hospital	Served Per Govt. Hospital	
1	2	3	4	5	6	7	8	9	10	11	12
	INDIA	15398	196182	4419	432526	19817	628708	1223581	61744	1946	
1.	Andhra Pradesh	308	10370	144	26584	452	36954	86229	190772	2333	01.01.2014
2.	Arunachal Pradesh	52	1300	15	375	67	1675	1270	18950	758	01.01.2014
3.	Assam	1088	7504	49	5877	1137	13381	31319	27545	2341	01.01.2014
4.	Bihar	1325	5250	111	6302	1436	11552	100289	69839	8681	01.01.2014
5.	Chhattisgarh	416	1522	221	10490	637	12012	24909	39104	2074	01.01.2014
6.	Goa	17	1597	16	1711	33	3308	1868	56612	565	01.01.2014
7.	Gujarat	300	9925	88	17983	388	27908	60569	156106	2170	01.01.2014
8.	Haryana	80	2454	79	5210	159	7664	26266	165198	3427	01.01.2014
9.	Himachal Pradesh	98	2911	53	5574	151	8485	6918	45815	815	01.01.2013
10.	Jammu and Kashmir	1402	3428	567	3890	1969	7318	12010	6100	1641	01.01.2008

11.	Jharkhand	545	4879	4	535	549	5414	32334	58896	5972	01.01.2012
12.	Karnataka	388	8944	210	41820	598	50764	60624	101377	1194	01.01.2014
13.	Kerala	1135	17595	144	20021	1279	37616	35034	27392	931	01.01.2014
14.	Madhya Pradesh	334	10020	94	16289	428	36309	74482	174022	2831	01.01.2014
15.	Maharashtra	440	11302	613	41866	1053	53168	115697	109874	2176	01.01.2014
16.	Manipur	23	730	7	697	30	1427	2506	83533	1756	01.01.2014
17.	Meghalaya	28	840	12	2187	40	3027	2682	67045	886	01.01.2014
18.	Mizoram	29	1420	7	210	36	6030	1028	28544	630	01.01.2014
19.	Nagaland	21	630	32	1797	53	2427	2301	43420	948	01.01.2013
20.	Odisha	1659	7099	91	9584	1750	16683	41453	23688	2485	01.01.2014
21.	Punjab	94	2900	146	8904	240	11804	28279	117828	2396	01.01.2014
22.	Rajasthan	2649	32948	489	13631	3138	46579	69940	22288	1502	01.01.2014
23.	Sikkim	24	260	9	1300	33	1560	626	18981	402	01.01.2014
24.	Tamil Nadu	407	9150	381	55093	788	64243	68265	86630	1063	01.01.2014
25.	Tripura	21	1260	21	2315	42	3575	3700	88091	1035	01.01.2014
26.	Uttar Pradesh	515	15450	346	40934	861	56384	10224	11874	181	01.01.2011
27.	Uttarakhand	666	3746	29	4219	695	7965	207739	298905	26082	01.01.2009
28.	West Bengal	1272	19679	294	58509	1566	78188	91122	58188	1165	01.01.2014

1	2	3	4	5	6	7	8	9	10	11	12
29.	Andaman and Nicobar Islands	31	625	1	450	32	1075	520	16263	484	01.01.2012
30.	Chandigarh	0	0	5	1750	5	1750	1580	315998	903	01.01.2013
31.	Dadra and Nagar Haveli	1	50	2	261	3	311	387	128867	1243	01.01.2014
32.	Daman and Diu	0	0	4	200	4	200	293	73202	1464	01.01.2014
33.	Delhi	0	0	109	22961	109	22961	19529	179163	851	01.01.2013
34.	Lakshadweep	3	120	—	—	3	120	77	25826	646	01.01.2012
35.	Puducherry	27	274	26	2997	53	3271	1513	28544	463	01.01.2014

*Note:* 1. Government hospitals includes Central Government, state Government and local Government bodies

2. Figure – May not be comparable with that of the last year as some of the State/UTs have included the PHCs in calculation.

*Source:* Directorate General of State Health Services.



**Assessment on availability of Medical Colleges**

108. SHRI D.P. TRIPATHI:

SHRI B.K. HARIPRASAD:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has undertaken any study to assess the availability/shortage of Medical Colleges in the country and doctors per citizen ratio;

(b) if so, the details and the outcome thereof;

(c) the steps taken or proposed by Government to scale up the availability of medical colleges to maintain doctor and citizen ratio;

(d) whether Government has received any proposals relating to setting up of medical colleges from various States/UTs including Maharashtra; and

(e) if so, the details thereof and the action taken/proposed by Government thereon, State/UT-wise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) No such study has been conducted. However, 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, which is better than the WHO norms.

(c) The Government has undertaken the following Centrally Sponsored Schemes for medical colleges:

(i) Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats.

(ii) Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country.

(iii) Strengthening/ upgradation of existing State Government/Central Government Medical Colleges to increase MBBS seats.

(d) and (e) A total number of 91 proposals for establishment of new medical colleges were received by the Government for the academic year 2015-16. Details are given in Statement.

***Statement******Proposals for establishment of new Medical Colleges***

Sl. No.	State	Total Applicants	Approved
1.	Andaman and Nicobar Islands	1	1
2.	Andhra Pradesh	6	1
3.	Bihar	5	0
4.	Chhattisgarh	2	0
5.	Delhi	2	0
6.	Gujarat	3	2
7.	Haryana	3	0
8.	Himachal Pradesh	1	0
9.	Jharkhand	1	0
10.	Karnataka	14	3
11.	Kerala	6	0
12.	Madhya Pradesh	4	0
13.	Maharashtra	10	2
14.	Mizoram	1	0
15.	Nagaland	1	0
16.	Rajasthan	2	1
17.	Tamil Nadu	5	1
18.	Telangana	2	0
19.	Uttar Pradesh	18	3
20.	Uttarakhand	4	0
TOTAL		91	14

*Note:* One College in Maharashtra State has been approved conditionally on 16.07.2015

**Boosting family welfare programme**

†109. SHRI NAZIR AHMED LAWAY:  
MIR MOHAMMAD FAYAZ:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government accepts that its family welfare programme has suffered a huge setback this year;

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†Original notice of the question was received in Hindi.

- (b) if so, the details thereof and the main reasons therefor; and
- (c) the future plan of Government to give a fillip to its family welfare programme again?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) No.

- (b) Does not arise.
- (c) As per Statement.

***Statement***

*Schemes of Government to give a fillip to its family welfare programme*

**Interventions under family planning programme:**

1. Scheme for Home delivery of contraceptives by ASHAs at doorstep of beneficiaries : The Government has launched a scheme to utilize the services of ASHA to deliver contraceptives at the doorstep of beneficiaries. 8.85 lakhs ASHAs are now distributing contraceptives at the door step.
2. Scheme for ASHAs to ensure spacing in births : The scheme is operational from 16th May, 2012. Under this scheme, services of ASHAs are being utilised for counselling of newly married couples to ensure delay of 2 years in birth after marriage and couples with 1 child to have spacing of 3 years after the birth of 1st child.
3. Pregnancy testing kits have been made an integral part of ASHA kit and are being used to diagnose pregnancy early, so as to ensure early registration of pregnancy/safe abortion services.
4. A new family planning method, *i.e.* post-partum IUCD (PPIUCD) has been introduced in the programme. PPIUCD services are being provided by trained health providers in Government hospitals, within 48 hours after the delivery.
5. Basket of choice has been expanded with introduction of a new IUCD-375 of 5 years effectivity, in addition to the already existing IUCD-380A of 10 years effectivity.
6. Dedicated counselors (RMNCH counsellors) are placed at high case load facilities for providing family planning counseling to clients.
7. Celebration of World Population Day 11th July and Fortnight: The event is observed over a month long period, split into fortnight of mobilization/sensitization followed by a fortnight of assured family planning service

delivery and has been made a mandatory activity from 2012-13 and starts from 27th June each year.

8. Other On-going interventions:

- Assured delivery of family planning services for both IUCD and sterilisation.
- National Family Planning Indemnity Scheme (NFPIS) under which clients are insured in the eventualities of deaths, complications and failures following sterilization and the providers/ accredited institutions are indemnified against litigations in those eventualities.
- Compensation scheme for sterilization acceptors - under the scheme MoHFW provides compensation for loss of wages to the beneficiary and also to the service provider (and team) for conducting sterilisations.
- More emphasis on Spacing methods like IUCD.
- Availability of Fixed Day Static Services at all facilities.
- Quality care in Family Planning services by establishing Quality Assurance Committees at State and district levels.
- Contraceptives supply management up to peripheral facilities.
- Demand generation activities in the form of display of posters, billboards and other audio and video materials in the various facilities.

Following strategies have been taken up by Jansankhya Sthirata Kosh/National Population Stabilization Fund as population control measures :—

**Advocacy and IEC activities :** JSK as a part of its awareness and advocacy efforts on population stabilization, has established networks and partnerships with other ministries, development partners, private sectors, corporate and professional bodies for spreading its activities at the National, State, district and block level.

**Prerna Strategy :** JSK has launched this strategy for helping to push up the age of marriage of girls and delay in first child and spacing in second child the birth of children in the interest of health of young mothers and infants. The couple who adopt this strategy awarded suitably. This helps to change the mindsets of the community.

**Santushti Strategy :** Under this strategy, Jansankhya Sthirata Kosh, invites private sector gynaecologists and vasectomy surgeons to conduct sterilization operations in Public Private Partnership mode. The private hospitals/nursing home who achieved target to 10 or more are suitably awarded as per strategy.

### **Regulating of e-drug stores**

110. SHRI ANIL DESAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Snapdeal, an e-commerce website, is selling drugs, including antipotency pills and emergency contraceptive pills, online without a prescription;

(b) whether there is a whole bunch of dedicated e-drug stores in the market supplying everything from diapers to diazepam at the click of a button; and

(c) if so, the details of action the Ministry is taking to regulate e-drug stores in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The Government has received reports about the sale of drugs including prescription drugs to the consumers through online orders.

(c) Sale of drugs in the country is regulated by the State Licensing Authorities under the Drugs and Cosmetics Act, 1940 and Rules made thereunder and the State Licensing Authorities take action against those violating the provisions of the aforesaid Act and Rules.

### **India as healthcare hub**

111. SHRI PARIMAL NATHWANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether India is emerging as a healthcare hub in Asia due to the growing number of multi and single super-speciality care hospitals in the country, if so, the details thereof;

(b) whether certain overseas organizations have shown interest in setting up of hospitals in the country, if so, the details thereof; and

(c) the steps taken or being taken by Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per study undertaken by KPMG and FICCI in 2014, there has been a steady growth in the number of persons visiting India for medical purposes.

(b) As per data available in the Secretariat Industrial Assistance (SIA) newsletter of April 2015, the total Foreign Direct Investment (FDI) inflow in the hospital sector during 2013 and 2014 was above ₹ 6000 crore.

(c) The Ministry of Tourism provides financial support under the Marketing Development Assistance (MDA) Scheme to approved Medical Tourism Service Providers subject to adherence to scheme guidelines and availability of funds. Further, the Department of Commerce also offers incentives to the hospitals providing medical treatment to foreigners.

**Appointment of Organ Donation Counsellors in PHCs**

112. DR. R. LAKSHMANAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has any proposal to appoint Organ Donation Counsellors in all the Primary Health Centres (PHCs) across the country to encourage and motivate people to come forward for organ donation, if so, the details thereof; and

(b) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) No.

(b) Health is a State subject and therefore, the primary responsibility to promote organ donation including cadaver donation is that of the State Governments. Notwithstanding this, the Government of India has enacted the Transplantation of Human Organs Act, 1994 which has been further amended in 2011 to promote cadaver organ retrieval/donation and making organs available to the persons in need of such organs. Further, a National Organ Transplant Programme (NOTP) has also been approved to promote organ donation from deceased donors and a website [www.notto.nic.in](http://www.notto.nic.in) has been made operational to provide information related to organ donation and organ pledging. However, at present, there is no such provision in NOTP to appoint Organ Donation Counsellors in Primary Health Centres (PHCs).

**National centres for the elderly**

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

(a) whether Government proposes to open national centres for the elderly at the All India Institute of Medical Sciences in the country;

(b) if so, the details thereof with status of the project;

(c) the details of treatment/medical help that is proposed to be provided at such centres; and

(d) whether it would be free of any charges, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Two National Centres of Ageing are proposed to be set-up during the remaining period of Twelfth Five year Plan, within the existing All India Institute of Medical Sciences (AIIMS), New Delhi and Madras medical College Chennai.

(b) Administrative approval has been issued to All India Institute of Medical Sciences (AIIMS), New Delhi and Madras Medical College (MMC) Chennai, for setting up of National Centres of Ageing.

(c) National Centres of Ageing will be established as apex level state-of-art multi-disciplinary institutions in the field of Geriatric Medicine. They will provide following clinical service:

- (i) Daily outpatient services in various clinical disciplines and Special clinics.
- (ii) Day care center for investigation, rehabilitation, respite care, dementia care, continence care.
- (iii) 200 bedded in-patient care for intensive care, acute rehabilitation, diagnostic and therapeutic service and long term rehabilitation service.
- (iv) Services from complementary and alternative medicine in collaboration with the Department of AYUSH to provide a holistic approach of health care.

Besides clinical service, these centres will also undertake activities related to training, education and research.

(d) The charges for patient care will be at par with the rates applicable to other patients treated at the institutes.

#### **Adoption of global standards on drug inspection and manufacturing**

114. SHRI RANJIB BISWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government plans to become part of a multi-national regulatory regime, Pharmaceutical Inspection Cooperation Scheme (PICS), under which India will adopt global standards on drug inspection and manufacturing;

(b) if so, the details thereof and the reasons therefor;

(c) whether Government had consulted all stakeholders particularly drug manufacturers in this regard, if so, the details of views expressed by them; and

(d) the details of benefits likely to accrue by adopting international standards?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) The Department of Commerce has conducted a study

on Pharmaceuticals Inspection Cooperation Scheme (PICS). However, no decision has been taken by the Government to join PICS.

### **Spurious drugs in rural areas**

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

(a) whether Government is aware that there is a nexus between spurious drug manufacturers and chemists to sell their products in the rural areas across the country;

(b) if so, whether most of the rural people without knowing the content of the drug, purchased them from the chemist shops which directly affect their health; and

(c) if so, whether there is any monitoring mechanism by Central Drugs Controller of India to ensure that rural areas in the country gets safe medicines/drugs from chemists, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The Government has not received any such report about the nexus between spurious drug manufacturers and the chemists.

(c) The Government has, with a view to check the marketing and manufacture of spurious, sub-standard and expired drugs in the country, initiated a series of measures. These include stringent penalties including making certain offences cognizable and non-bailable; establishment of special designated Courts for trial of offences under the Drugs and Cosmetics Act for the speedy disposal of cases; announcement of a Whistle Blower Scheme to encourage vigilant public participation for detection of movement of spurious drugs in the country; issuance of guidelines to the State Drugs Controllers for taking action on samples of drugs declared spurious or not of standard quality; and instructions to the concerned staff to keep a vigil and draw samples of drugs for test and analysis for monitoring the quality of drugs moving in the country.

### **Containment of vector-borne diseases**

116. DR. T. SUBBARAMI REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has taken steps to contain the vector borne diseases and other viral fevers including dengue, malaria etc. in the country;

(b) if so, the details thereof, State-wise along with the funds sanctioned and spent for each agency area, State-wise, for the last three years;



(c) the number of deaths from these diseases reported, State-wise;

(d) whether it is also a fact that a number of doctors posted in agency areas are very less compared to the number of patients and does not match doctor-patient ratio; and

(e) if so, the details thereof and steps being taken to overcome such situation in future?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) For control of vector borne diseases including Malaria and Dengue, a Nation wide- National Vector Borne Disease Control Programme (NVBDCP) is being implemented with the following strategies:

**(i) Disease Management:**

- Early case detection and completed treatment.
- Strengthening of referral services.
- Epidemic preparedness and rapid response.

**(ii) Integrated Vector Management for reducing mosquitoes density:**

- Indoor Residual Spraying in selected high risk areas.
- Use of Insecticide treated bed nets and Long Lasting Insecticidal Nets (LLINs).
- Use of Larvivorous fishes.
- Anti larval measures in urban areas including biolarvicides.
- Minor environmental engineering

**(iii) Other Interventions:**

- Vaccination to prevent Japanese Encephalitis.
- Annual Mass Drug Administration (MDA).
- Behaviour Change Communication.
- Public Private Partnership and Inter-sectoral convergence.
- Human Resource Development through Capacity building.
- Operational research including studies on drug resistance and insecticide susceptibility, quality assurance of diagnostics and drugs

The State-wise release of funds for the last three years is given in Statement-I (See below).

(c) The State-wise number of deaths due to Vector Borne Diseases is given in Statement-II (*See below*).

(d) and (e) Public health being a State subject, the primary responsibility to provide health services to the citizens 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 for recruitment of doctors, paramedics etc. on contractual basis based on the requirement proposed by the States/UTs in their Programme Implementation Plans.

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.

In order to encourage the doctors to work in remote and difficult areas, the Medical Council of India with the previous approval of Central Government has amended the Post Graduate Medical Education Regulations, 2000 to provide 50% reservation in Post Graduate Diploma Courses for Medical Officers in the Government service who have served for at least three years in remote and difficult areas and incentive at the rate of 10% of the marks obtained for each year in service in remote or difficult areas up to maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses.

#### ***Statement-I***

*State-wise allocation and release of funds for the last three years*

(₹ in lakhs)				
Sl. No.	States/UTs	2012-13 Releases	2013-14 Releases	2014-15 Releases
1	2	3	4	5
1.	Andhra Pradesh	735.40	650.01	767.24
2.	Arunachal Pradesh	835.43	1016.31	1166.76
3.	Assam	1701.76	3813.45	2673.04
4.	Bihar	5931.06	4633.44	11474.32
5.	Chhattisgarh	2592.03	1150.42	1343.50
6.	Goa	100.00	55.87	90.75

1	2	3	4	5
7.	Gujarat	812.54	736.94	1198.20
8.	Haryana	276.90	87.49	247.50
9.	Himachal Pradesh	60.21	54.01	99.75
10.	Jammu and Kashmir	43.88	76.11	89.86
11.	Jharkhand	1404.27	1161.29	3162.25
12.	Karnataka	811.39	796.39	1810.28
13.	Kerala	500.11	642.94	720.75
14.	Madhya Pradesh	927.93	877.79	1796.91
15.	Maharashtra	1055.51	817.05	648.41
16.	Manipur	228.35	211.63	907.06
17.	Meghalaya	770.21	445.54	935.43
18.	Mizoram	737.62	614.19	1199.04
19.	Nagaland	930.15	439.32	1108.92
20.	Odisha	2041.05	2483.66	2086.05
21.	Punjab	289.26	53.94	409.31
22.	Rajasthan	1337.13	578.36	1404.50
23.	Sikkim	33.30	27.36	51.93
24.	Tamil Nadu	150.00	1971.75	1561.50
25.	Telangana			429.00
26.	Tripura	905.64	735.34	1353.85
27.	Uttar Pradesh	1019.89	2694.72	3808.50
28.	Uttarakhand	162.51	0.71	127.32
29.	West Bengal	1216.35	3057.17	1709.53
30.	Delhi	4.65	232.12	444.00
31.	Puducherry	78.36	7.73	39.81
32.	A and N Islands	525.78	556.32	187.08
33.	Chandigarh	64.77	63.19	56.25
34.	D and N Haveli	108.69	50.74	90.50
35.	Daman and Diu	38.91	23.56	62.50
36.	Lakshadweep	29.55	6.93	0.95
	TOTAL	28460.59	30823.79	45262.55





**AIIMS-like institutes in Karnataka**

117. SHRI B. K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the reasons for the delay in setting up of new hospitals on the lines of All India Institute of Medical Sciences (AIIMS) and upgrading the existing hospitals in various States;

(b) the time by which these AIIMS-like hospitals are likely to be set up or upgraded;

(c) whether Government has also received proposals from Karnataka Government for setting up of AIIMS like institutes in the State; and

(d) if so, the present status of these proposals and the time by which these proposals are likely to be cleared, State/UT-wise?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) As per the Seventh Schedule of the Constitution of India, Health is a State subject and thereby the State concerned is primarily responsible for providing health care to the people.

The Central Government supplements the efforts of the State Governments by way of providing financial assistance to States/UTs. The Central Government has also been supplementing the efforts in the domain of tertiary health care by way of setting up tertiary care health institutions *i.e.* AIIMS and up-gradation of existing medical facilities in the medical colleges under the State Government under the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY). Under this scheme the Central Government plans to establish AIIMS like institutes in every State and up-grade the existing State Government Medical Colleges in a phased manner.

Every effort is being made to avoid the possible delay in taking up the establishment of AIIMS like institutions and the upgradation of existing medical facilities. However, the delay, if any, is attributable to various factors such as statutory/mandatory requirement, fulfilment of codal formalities, consultation with the State Governments and due approvals/clearances.

(c) Yes. In response to the request of Ministry of Health and Family Welfare, State Government of Karnataka has identified the following locations for setting up of AIIMS like Institute in the State:—

- (i) Harohalli in Ramanagar District near Bangalore.
- (ii) Itagatti in Dharwad District.
- (iii) District Hospital Campus, Bijapur

(d) Setting up of AIIMS is being taken up in a phased manner having regard to the resources, the timely identification of site(s), fulfilment of the mandatory requirements/criteria and receipt of various due approvals.

**Non-utilization of funds by CGHS**

118. SHRI RAM KUMAR KASHYAP: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether during 2012 to 2015, CGHS could not utilized funds efficiently and miserably failed in expansion of facilities under CGHS and the precious funds allocated for the purpose were surrendered, if so, the details thereof;

(b) the reasons for not utilizing the funds and measures taken to ensure utilization of funds efficiently by CGHS;

(c) the reasons for not issuing medicines prescribed by the doctors of CGHS empanelled private hospitals to the CGHS beneficiary by CGHS dispensaries; and

(d) the steps taken to ensure that medicines prescribed by the doctors of CGHS empanelled private hospitals are issued to CGHS beneficiaries by CGHS dispensaries?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) During 2012-13 and 2013-14 the allocations under Non-Plan Budget were fully utilized. In 2014-15 approximately ₹ 32 crores could not be utilized under Salary Head.

Under Plan Head budget ₹ 19.89 crores in 2012-13, ₹ 46.47 crores in 2013-14 and ₹ 41.18 crores in 2014-15 could not be utilized mainly under Capital Head and Supplies and Materials.

(b) The funds in the Non-Plan Budget were not fully utilized during the FY 2014-15 due to non-filling of vacant posts of GDMOs by UPSC.

In the Plan budget funds could not be utilized due to under-utilisation largely under Capital Head due to delay in requisite approvals and failure on the part of CPWD to execute the work.

Efforts have been made to rationalize the sanctions under Capital works.

(c) OPD consultation and issue of medicines prescribed by doctors of the private empanelled hospitals is not permitted except in post-operative follow-up cases of Neurosurgery, Cardiac surgery (including Coronary Angioplasty and implants), Cancer treatment, Kidney transplantation, Hip/Knee Joint Replacement and Accidents where prior permission has been obtained for follow-up treatment.

In addition OPD consultation is also permitted in satellite cities of NCR, viz., Faridabad, Noida, Gurgaon and Ghaziabad.

(d) Medicines prescribed by doctors of CGHS empanelled hospitals in above cases are issued by the concerned wellness centres as per the available Generic or Brand name.

### **Cut in expenditure for NHM**

119. SHRI A. K. SELVARAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the States will have to take up more responsibility for adequately resourcing and effective delivery of health services, if so, the details thereof; and

(b) whether it is also a fact that the expenditure on National Health Mission (NHM) which supports a network of accredited doctors and health activists providing basic services is down by 20 percent, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) In view of the acceptance of the recommendation of the Fourteenth Finance Commission, it has been decided by Government to devolve significantly higher share of the net tax receipts to the States. Since health is State subject, the State Governments would now be in a much better position to provide the requisite outlay from their part. At the same time, adequate budgetary resources have been provided by the Centre for the schemes to ensure that there is no problem in delivery of health care services.

(b) The Budget Estimates of ₹ 18295.00 crore for financial year 2015-16 in respect of National Health Mission (NHM) are more or less equal to the actual expenditure of 2014-15 (The actual expenditure in respect of NHM during the financial year 2014-15 was ₹ 18039.35 crore).

### **Social impact of expensive healthcare costs**

120. SHRIMATI JHARNA DAS BAIDYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that 40 per cent Indians have to either sell their property or borrow money for meeting their hospital expenses for treating illness and 25 per cent people admitted to hospitals slide to below poverty line due to expenses involved in health care; and

(b) if so, the steps taken by Government in this regard till now and the achievement thereof?



THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per the publication titled “Key Indicators of Social Consumption in India Health-NSS 71st Round (January-June 2014)” brought out by the National Sample Survey Organization (NSSO), Ministry of Statistics and Programme Implementation, 25.7% of rural households and 18.6 % of urban households reported borrowings and sale of physical assets as source of finance for hospitalization expenditure. The impact of hospital expenses for health care, on poverty at National level, is not available from official sources.

(b) The Government has taken several steps to provide accessible, affordable and accountable health care facilities to all sections of the people that *inter-alia* include:

- Initiatives under the National Health Mission (NHM) with a view to provide accessible affordable, accountable, effective and quality healthcare services especially to the poor and vulnerable sections of the population. Primary health care in India is provided free of cost in the public health facilities through a nationwide network of Community Health Centres (CHCs), Primary Health Centres (PHCs) and Sub Centres (SCs).
- Free care is provided for family welfare services.
- Janani Shishu Suraksha Karyakaram (JSSK) envisages free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home, for all pregnant women delivering in public health institutions.
- National Urban Health Mission (NUHM) with focus on primary health care needs of urban population particularly slum dwellers and other marginalized groups.
- Providing free medicines under the various national health programmes like Anti-Malaria and Anti-TB Programmes.
- Mainstreaming of Indian System of Medicine and Homeopathy.
- Making available tertiary health care services in the public sector through strengthening of hospitals, establishment of AIIMS institutions in the States and up-gradation of existing Government medical colleges across the country.
- Making available quality generic medicines at affordable prices to all, under ‘Jan Aushadhi Scheme’, in collaboration with the State Governments.

- Rashtriya Swasthya Bima Yojana (RSBY) which provides for smart card based cashless health insurance including maternity benefit on family floater basis to Below Poverty Line (BPL) families (a unit of five) in the unorganized sector.

The Government have also taken several steps in the direction of preventive health care, which *inter-alia* include Universal Immunization of children against 7 diseases; Pulse Polio Immunization; Family Planning services; Maternal and Reproductive Health Services; Child Health services that include both home based and facility based New born Care; Adolescent Reproductive and Sexual Health (ARSH) services; Investigation/screening and treatment for Malaria; Kala-azar, Filariasis, Dengue; Japanese Encephalitis and Chikungunya; Detection and treatment for Tuberculosis including MDR-TB; Detection and treatment for Leprosy; Detection, treatment and counselling for HIV/AIDs; Cataract surgery for Blindness control.

Further, under Rashtriya Bal Swasthya Karyakram (RBSK) support is being provided to States/UTs for child health screening and early intervention services through early detection and early management of common health conditions classified into 4 Ds *i.e.* Defects at birth, Diseases, Deficiencies, Development delays including disability. A comprehensive National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke (NPCDCS) for activities including health promotion, early detection and treatment of Cancer, Diabetes, Cardiovascular diseases and Stroke, has also been initiated.

#### **Violation of regulatory and manufacturing standards by MNCs**

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

(a) whether it is a fact that Multi-National Companies (MNCs) have violated the regulatory and manufacturing standards recently;

(b) if so, whether the Food Safety and Standards Authority of India (FSSAI) has audited the factories of the MNCs in order to ensure that these MNCs comply with regulatory and manufacturing standards;

(c) if so, the details thereof, company-wise and the findings thereof;

(d) the action taken by Government against those MNCs who violated the regulatory and manufacturing standards; and

(e) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The State food safety authorities and the Food Safety Standards Authority of India has taken note of the violations of the provisions of Food Safety and Standards Act and Regulations thereunder.

(b) The FSSAI has not audited or conducted inspection of premises of any multi national companies as implementation and enforcement of the Food Safety and Standards (FSS) Act, 2006 rests with the State/UT Governments.

(c) Does not arise.

(d) and (e) Food Safety and Standards Authority of India has ordered recall of the food products, and/or withdrawn provisional “No Objection Certificates” (NOCs) issued in respect of various food products manufactured by MNCs who violated the provisions of the FSS Act or Regulations thereunder.

#### **Reforms in food safety apparatus**

122. SHRI D. RAJA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Chairman of the Scientific Panel of the Food Safety and Standards Authority of India (FSSAI) has called for a sweeping reforms of the country's Food Safety apparatus; and

(b) if so, the details thereof and Government's reaction thereto?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) While no such recommendation has been received by the Food Safety and Standards Authority of India (FSSAI) from any of the Scientific Panels, the Government has taken note of the reports appearing in the media on the subject.

#### **Infrastructure for treatment of rape victims**

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

(a) whether it is a fact that hospitals in India lack in infrastructure to treat rape victims due to which one of them had to be flown to Singapore but in vain; and

(b) if so, whether Government is taking any steps to improve infrastructure so that such cases can be handled in India with promptness and expert medical personnel?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Health is a State subject and it is the responsibility of the State Government to create necessary infrastructure in this regard. As far as All India Institute of Medical Sciences (AIIMS), New Delhi, Jawaharlal Institute of Postgraduate Medical Education and Research (JIPMER), Puducherry and Central Government Hospitals in Delhi *viz.* Safdarjung Hospital, Dr. RML Hospital and Smt. Sucheta Kriplani Hospital are concerned, necessary infrastructure is available in these Hospitals/Institutes to treat such victims.

Central Government also supplements the efforts of the State Government to provide better health care facilities including creation of infrastructure, by way of providing assistance, under various schemes.

**Trauma centres along Delhi-Chandigarh/Amritsar Highways**

124. SHRI PARVEZ HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of trauma centres opened in 2014-15 on National Highways connecting Delhi-Chandigarh and Delhi- Amritsar; and

(b) the total number of new Trauma Centres proposed on these Highways in the year 2015-16?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) A scheme named 'Capacity Building for developing trauma care facilities in Government hospitals on National Highways' is being implemented since Eleventh Plan. Under this scheme two trauma centres each *viz* Ambala and Panipat in Haryana and Jalandhar and Khanna in Punjab were identified on National Highways *i.e.* Delhi-Chandigarh and Delhi-Amritsar and funds were released. However, no trauma centre was opened during 2014-15 under this Scheme in the above stated National Highways. Proposals for setting up of trauma centres at Ludhiana and Phagwara in Punjab and Sonapat in Haryana on the above said Highways have been received.

**Mismanagement of fund disbursal in AIDS prevention programmes**

125. DR. K.P. RAMALINGAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether work on India AIDS prevention programmes has suffered due to mismanagement of fund disbursal, if so, the details thereof;

(b) whether it is a fact that thousands of health workers were not paid for months and construction of clinics was delayed; and

(c) whether it is also a fact that several States have voiced concern about the delays and discussions are going on to resolve the situation, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) Activities of AIDS Control Programme has been prioritized as per availability of funds; and prevention programmes have not been allowed to suffer.

(b) Payment to employees is the first charge on available funds. According to information available, most State AIDS Control Societies (SACS) have made payments to their employees upto the month of June, 2015. There are only 3 Societies which have paid salaries upto March, 2015.

However, there have been reports that staff employed by NGOs in Target Intervention Programmes face delay in payment of their remunerations.

There are no construction of clinics under the Programme.

(c) The National AIDS Control Programme is a 100% Centrally Sponsored Scheme. During the current year a total of ₹ 269 crore has so far been released to the States as grants-in-aid. These funds are routed through the State Treasuries and there have been reports of delay from some State treasuries to State AIDS Control Societies.

### **Measures to check population growth**

†126. SHRI NARESH AGRAWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the steps taken by Government to check the increasing population of India; and

(b) whether Government is contemplating imposing restriction on having more than two children per family, if so, by when, and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per Statement (*See* below).

(b) Government has no such proposal at present to impose restriction on having more than two children in family.

The Family Welfare Programme in India is voluntary in nature, which enables a couple to adopt the family planning methods, best suited to them, according to their choice, without any compulsion.

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†Original notice of the question was received in Hindi.

***Statement******Strategies for attaining population stabilization***

Interventions under family planning programme:

1. Scheme for Home delivery of contraceptives by ASHAs at doorstep of beneficiaries: The Government has launched a scheme to utilize the services of ASHA to deliver contraceptives at the doorstep of beneficiaries. 8.85 lakh ASHAs are now distributing contraceptives at the door step.
2. Scheme for ASHAs to ensure spacing in births: The scheme is operational from 16th May, 2012. Under this scheme, services of ASHAs are being utilised for counselling of newly married couples to ensure delay of 2 years in birth after marriage and couples with 1 child to have spacing of 3 years after the birth of 1st child.
3. Pregnancy testing kits have been made an integral part of ASHA kit and are being used to diagnose pregnancy early, so as to ensure early registration of pregnancy/safe abortion services.
4. A new family planning method, *i.e.* *post-partum* IUCD (PPIUCD) has been introduced in the program. PPIUCD services are being provided by trained health providers in Government hospitals, within 48 hours after the delivery.
5. Basket of choice has been expanded with introduction of a new IUCD-375 of 5 years effectivity, in addition to the already existing IUCD-380A of 10 years effectivity.
6. Dedicated counsellors (RMNCH counsellors) are placed at high case load facilities for providing family planning counselling to clients.
7. Celebration of World Population Day 11th July and Fortnight: The event is observed over a month long period, split into fortnight of mobilization/ sensitization followed by a fortnight of assured family planning service delivery and has been made a mandatory activity from 2012-13 and starts from 27th June each year.
8. Other On-going interventions:
  - Assured delivery of family planning services for both IUCD and sterilisation.
  - National Family Planning Indemnity Scheme' (NFPIS) under which clients are insured in the eventualities of deaths, complications and failures following sterilization and the providers/ accredited institutions are indemnified against litigations in those eventualities.
  - Compensation scheme for sterilization acceptors - under the scheme

MoHFW provides compensation for loss of wages to the beneficiary and also to the service provider (and team) for conducting sterilisations.

- More emphasis on Spacing methods like IUCD.
- Availability of Fixed Day Static Services at all facilities.
- Quality care in Family Planning services by establishing Quality Assurance Committees at state and district levels.
- Contraceptives supply management up to peripheral facilities.
- Demand generation activities in the form of display of posters, billboards and other audio and video materials in the various facilities.

Following strategies have been taken up by Jansankhya Sthirata Kosh/National population stabilization fund as population control measures:

**Advocacy and IEC activities:-** JSK as a part of its awareness and advocacy efforts on population stabilization, has established networks and partnerships with other Ministries, development partners, private sectors, corporate and professional bodies for spreading its activities at the national, state, district and block level.

**Perna Strategy:-** JSK has launched this strategy for helping to push up the age of marriage of girls and delay in first child and spacing in second child the birth of children in the interest of health of young mothers and infants. The couple who adopt this strategy awarded suitably. This helps to change the mindsets of the community.

**Santushti Strategy:-** Under this strategy, Jansankhya Sthirata Kosh, invites private sector gynecologists and vasectomy surgeons to conduct sterilization operations in Public Private Partnership mode. The private hospitals/nursing home who achieved target to 10 or more are suitably awarded as per strategy.

### **Patients suffering from water-borne diseases**

127. SHRI MOHD. ALI KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that 50 per cent of patients across the globe suffer from water-borne diseases;

(b) if so, the details thereof and the reasons therefor;

(c) the funds spent for the purpose in the Eleventh and Twelfth Plans period, State-wise; and

(d) the corrective steps being taken so far?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) As per World Health Organization Report 2008, it is estimated that 39% of the population globally is affected by water borne diseases. Factors such as availability of clean drinking water, sanitation, hygiene etc. play an important role in causing these diseases. Consumption of contaminated drinking water can cause diseases such as Acute Diarrhoeal Diseases, Enteric Fever (Typhoid), Cholera, Viral Hepatitis and Acute Encephalitis Syndrome etc.

(c) and (d) Provision of safe drinking water is the main strategy to control diseases caused by drinking of contaminated water. Rural water supply is a State subject. Government of India supplements the efforts of the States by providing technical and financial assistance under the centrally sponsored National Rural Drinking Water supply Programme (NRDWP) for providing safe and adequate drinking water supply facilities in rural areas of the country. Further, 5% of NRDWP Funds are earmarked and allocated to those States facing problems of chemical contamination in drinking water. Up to 67% of the NRDWP fund allocated to States can be utilized for tackling water quality problems in rural areas. In addition, Government of India provides 3% NRDWP funds on 100% Central assistance basis to States for water quality monitoring and surveillance , which *inter-alia* include taking up works relating to setting up of new or up gradation of district/sub-district water quality testing laboratories, providing chemicals and consumables to laboratories, providing field test kits/refills to Gram Panchayats etc.

In addition, Government of India started the National Programme for Prevention and Control of Fluorosis (NPPCF) in the Eleventh Five Year Plan. So far, 111 districts have been covered under the programme. The important components of the programme are surveillance of fluorosis in the community, capacity building in the form of training and manpower support, establishment of diagnostic facilities, management of fluorosis cases including treatment, surgery, rehabilitation, and health education.

Further, National Centre for Disease Control (NCDC), Delhi, provides technical assistance to State/UT Governments on prevention and control of water borne diseases in carrying out investigation of outbreaks of such diseases under Integrated Disease Surveillance Program (IDSP). At the National level, NCDC also coordinates laboratory support for outbreak investigations, besides conducting regular training courses for development of trained manpower. Details of funds released from the year 2004 till the current financial year State/UT-wise are given in Statement-I (*See below*).

Year-wise and State-wise details of funds released and utilized under National Programme for Prevention and Control of Fluorosis (NPPCF) are given in Statement-II (*See below*).

Funds released under NRDWP for the year 2014-15 to Fluoride and Arsenic affected States are given in Statement-III.



**Statement-I**  
*Funds Released to States/UTs under Integrated Disease Surveillance Programme*

Sl. No.	States/UTs	GIA Released to States (in lakhs)												
		2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	
1.	Andhra Pradesh	270.60	121.64	70.00	157.71	51.18	201.71	169.82	112.88	104.29	198.31	122.48		
2.	Gujarat	27.60	387.30	0.00	7.71	41.26	90.16	169.25	201.06	205.40	270.00	400.00	243.75	
3.	Karnataka	311.42	110.00	0.00	107.71	25.24	89.95	218.19	103.48	214.22	124.00	270.50	180.00	
4.	Maharashtra	425.88	145.00	0.00	17.71	112.48	138.49	292.85	118.57	100.00	183.50	280.00		
5.	Punjab	0.00	0.00	164.00	0.00	30.00	97.63	147.60	103.79	198.96	120.20	168.75	115.00	
6.	Rajasthan	0.00	482.20	0.00	25.00	118.05	177.66	227.53	136.28	231.77	195.32	325.00	225.00	
7.	Tamil Nadu	409.80	130.00	0.00	80.00	7.71	87.54	193.62	60.95	60.00	98.26	325.00	213.75	
8.	Uttarakhand	99.71	50.00	129.33	25.00	0.00	78.10	131.74	64.50	90.87	60.93	45.00		
9.	West Bengal	0.00	241.70	0.00	7.71	0.00	111.08	99.40	35.85	151.67	120.11	250.00	100.00	
10.	Andaman and Nic. Islands	0.00	0.00	0.00	28.00	5.58	0.00	0.00	15.61		19.87	9.00		
11.	Bihar	0.00	0.00	0.00	125.00	0.00	10.00	121.17	103.89	147.35	164.69	200.00		
12.	Chandigarh	0.00	24.30	0.00	15.00	32.77	29.10	8.00	13.74	7.03	19.92	40.00	23.25	
13.	Chhattisgarh	0.00	246.60	0.00	170.00	0.00	46.42	110.13	48.59	96.74	29.67	60.00	100.00	
14.	Dadra and N. Haveli	0.00	0.00	14.00	0.00	0.23	17.51	15.00	5.27		22.36	21.00		

1	2	3	4	5	6	7	8	9	10	11	12	13	14
15.	Daman and Diu	0.00	0.00	26.00	0.00	0.00	19.01	15.00	8.71		31.32	6.01	22.50
16.	Delhi	0.00	0.00	0.00	104.90	7.71	0.00	0.00	0.00		34.90	56.25	63.75
17.	Goa	4.60	32.50	33.30	31.11	15.00	33.83	16.64	26.82	18.02	28.23	45.00	
18.	Haryana	23.00	194.80	0.00	90.00	73.52	98.44	75.83	139.28	220.35	71.32	150.00	135.00
19.	Himachal Pradesh	119.02	64.02	0.00	14.48	76.81	79.87	30.00	0.00	28.34	73.06	70.00	
20.	J and K	0.00	13.80	0.00	61.20	0.00	66.03	100.00	0.00	50.00	82.22	127.50	
21.	Jharkhand	0.00	0.00	0.00	100.00	0.00	81.78	65.00	0.00		119.25	112.50	
22.	Kerala	156.40	65.00	60.00	200.00	0.00	0.00	144.34	0.00	23.84	106.21	101.25	
23.	Lakshadweep	0.00	0.00	0.00	15.00	0.00	20.19	0.00	0.00				
24.	Madhya Pradesh	397.90	150.00	0.00	200.00	0.00	201.16	197.82	88.35	120.65	246.51	350.00	225.00
25.	Odisha	18.20	351.40	0.00	0.00	0.00	27.13	100.00	39.06	118.30	92.72	350.00	150.00
26.	Puducherry	0.00	44.30	0.00	10.00	15.00	24.97	35.00	33.14	30.00	43.60	70.00	48.75
27.	Uttar Pradesh	0.00	23.00	0.00	250.00	0.00	275.30	0.00	243.75		203.88	300.00	225.00
28.	Telangana									0.00	0.00	87.53	



***Statement-II****Release and Expenditure under National Programme for Prevention and Control of Fluorosis (NPPCF)*

(In lakhs)

Sl. No.	State	District	Released	Total Expenditure
1	2	3	4	5
1.	Andhra Pradesh	1. Nellore	31.66 (2008-09) 16.30 (2014-15) 47.96 (Total)	27.96
		2. Guntur	42.10 (2011-12)	6.07
		3. Prakasam	42.10 (2010-11)	28.97
2.	Telangana	1. Mehboobnagar	42.10 (2011-12)	8.26
		2. Nalgonda	25.00 (2009-10) 22.92 (2011-12) 14.80 (2014-15) 62.72	42.82
		3. Karimnagar	42.10 (2010-11)	25.08
3.	Assam	1. Nagaon	25.00 (2009-10) 9.97 (2013-14) 18.78 (2014-15) 53.75	33.75
		2. Kamrup	42.10 (2010-11)	42.02
		3. KarbiAnglong	42.10 (2010-11)	43.80
4.	Bihar	1. Nawada	25.00 (2009-10)	-
		2. Banka	42.10 (2010-11)	-
		3. Aurangabad	42.10 (2010-11)	-
		4. Bhagalpur	42.10 (2010-11)	-
		5. Gaya	42.10 (2010-11)	-
		6. Jammui	42.10 (2010-11)	-
		7. Nalanda	42.10 (2010-11)	-
		8. Shekhpura	42.10 (2010-11)	-
		9. Kaimur	42.10 (2011-12)	-

1	2	3	4	5
		10. Munger	42.10 (2011-12)	
5.	Chhattisgarh	1. Durg	25.00 (2009-10) 7.00 (2013-14) 32.00	17.65
		2. Kanker	22.50 (2013-14)	-
6.	Gujarat	1. Jamnagar	31.66 (2008-09) 14.80 (2013-14) 46.46	31.46
		2. Sabarkantha	42.10 (2010-11)	1.82
		3. Vadodara	22.50 (2013-14)	-
		4. Banaskantha	15.00 (2014-15)	-
7.	Haryana	1. Mehendragarh	42.10 (2010-11)	12.28
		2. Mewat	42.10 (2010-11)	8.51
8.	Jharkhand	1. Palamu	25.00 (2009-10)	19.53
		2. Garhwa	42.10 (2010-11)	15.69
		3. Chatra	42.10 (2010-11)	
		4. Hazaribagh	42.10 (2011-12)	
9.	Karnataka	1. Ballary	25.00 (2009-10) 2.05 (2013-14) 16.72 (2014-15) 43.77	24.64
		2. Mysore	25.00 (2009-10) 1.78 (2013-14) 15.52 (2014-15) 42.30	23.34
		3. Chikballalpur	42.10 (2010-11)	2.27
		4. Koppal	42.10 (2010-11)	12.48
		5. Davangere	42.10 (2011-12)	10.02
		6. Tumkur	42.10 (2010-11)	6.83
		7. Bagalkote	42.10 (2011-12)	7.41
		8. Bangalore(U)	42.10 (2011-12)	4.95
		9. Bijapur	42.10 (2011-12)	6.71

1	2	3	4	5
		10. Raichur	42.10	15.22
		11. Chitradurga	42.10 (2011-12)	10.71
		12. Gadag	42.10 (2011-12)	8.46
		13. Gulbarga	42.10 (2011-12)	7.86
		14. Hassan	42.10 (2011-12)	11.27
		15. Kolar	42.10 (2011-12)	10.77
		16. Mandia	42.10 (2011-12)	10.75
		17. Ramanagara	42.10 (2011-12)	8.08
		18. Shimoga	42.10 (2011-12)	9.08
10. Kerala		1. Palakkad	25.00 (2009-10) 1.26 (2013-14) 14.57 (2014-15) 40.83	26.21
		2. Alapuzha	42.10 (2011-12)	10.68
11. Madhya Pradesh		1. Ujjain	31.66 (2008-09) 25.88 (2011-12) 57.54	43.03
		2. Chindwadra	42.10 (2010-11)	9.87
		3. Mandla	42.10 (2010-11)	8.93
		4. Dhar	42.10 (2010-11)	5.26
		5. Seoni	42.10 (2010-11)	7.15
		6. Betul	42.10 (2012-13)	-
		7. Jhabua	42.10 (2012-13)	0.87
		8. Raigarh	42.10 (2012-13)	-
		9. Sehore	42.10 (2012-13)	-
		10. Alirajpur	42.10 (2012-13)	-
		11. Dindori	42.10 (2012-13)	-
		12. Khargaoan	42.10 (2012-13)	-
		13. Raisen	42.10 (2012-13)	6.33
		14. Shajapur	42.10 (2012-13)	

1	2	3	4	5
12.	Maharashtra	1. Nanded	25.00 (2009-10) 20.00 (2014-15) 45.00	25.00
		2. Chandrapur	25.00 (09-10) 12.86 (2014-15) 37.86	25.00
		3. Latur	42.10 (2010-11)	7.90
		4. Washim	42.10 (2010-11)	2.83
		5. Yavatmal	42.10 (2010-11)	7.07
		6. Beed	42.10 (2010-11)	3.60
13.	Rajasthan	1. Nagaur	31.66 (2008-09) 15.40 (2013-14) 47.06	46.84
		2. Ajmer	42.10 (2010-11)	38.23
		3. Bhilwara	42.10 (2010-11)	30.42
		4. Churu (Ratangarh)	42.10 (2011-12)	33.33
		5. Dausa	42.10 (2011-12)	29.59
		6. Dungarpur	42.10 (2011-12)	31.44
		7. Rajsamand	42.10 (2010-11)	47.23
		8. Tonk	42.10 (2010-11)	31.39
		9. Bikaner	42.10 (2011-12)	32.16
		10. Jalore	42.10 (2011-12)	26.30
		11. Jaisalmer	42.10 (2011-12)	26.84
		12. Jodhpur	42.10 (2011-12)	34.70
		13. Jaipur	42.10 (2011-12)	31.56
		14. Pali	42.10 (2011-12)	36.44
		15. Sikar	42.10 (2011-12)	21.30
		16. Udaipur	42.10 (2011-12)	36.17
		17. Swaimadhopur	22.50 (2013-14)	5.40
		18. Banswara	22.50 (2013-14)	13.72
		19. Karauli	15.00 (2014-15)	-

1	2	3	4	5
		20. Chittaurgarh	15.00 (2014-15)	
		21. Ganganagar	15.00 (2014-15)	-
		22. Jhalawar	15.00 (2014-15)	-
		23. Jhunjhunu	15.00 (2014-15)	
14.	Odisha	1. Nayagarh	31.66 (2008-09)	13.60
		2. Angul	42.10 (2010-11)	3.77
		3. Nuapada	42.10 (2010-11)	9.76
15.	Punjab	1. Sangrur	25.00 (2009-10)	9.61
		2. Firozepur	42.10 (2010-11)	26.91
16.	Tamil Nadu	Dharmapuri	31.66 (2008-09)	45.07
			9.30 (2011-12)	
			17.93 (2013-14)	
			58.89	
17.	Uttar Pradesh	1. Unnao	25.00 (2009-10)	21.54
		2. Rae Bareli	25.00 (2009-10)	23.81
			18.81 (2014-15)	
			43.81	
		3. Pratapgarh	42.10 (2010-11)	22.19
		4. Firozabad	42.10 (2010-11)	22.19
		5. Mathura	42.10 (2011-12)	
18.	West Bengal	1. Bankura	25.00 (2009-10)	47.54
			28.00 (2012-13)	
			53.00	
		2. Purlia	42.10 (2010-11)	20.19
		3. Birbhum	42.10 (2010-11)	11.58
		4. D. Dinajpur	42.10 (2010-11)	42.19
		5. Maldha	42.10 (2010-11)	13.87
19.	Jammu and Kashmir	Doda	22.50 (2013-14)	-
TOTAL DISTRICTS		111		



**Statement-III**

*Funds released under NRDWP for Fluoride and Arsenic affected States as reported on online IMIS of the Ministry of Drinking Water and Sanitation*

Sl. No.	States	Funds released under NRDWP during 2014-15 (₹ in crores)
1.	Andhra Pradesh (Data under Reconciliation)	305.46
2.	Bihar*	311.23
3.	Chhattisgarh	150.74
4.	Gujarat (Data Reconciled on 14.08.2014)	277.93
5.	Haryana	230.77
6.	Jammu and Kashmir	447.04
7.	Jharkhand	161.3
8.	Karnataka*	536.28
9.	Kerala	115.12
10.	Madhya Pradesh	400.63
11.	Maharashtra	532.51
12.	Odisha	208.93
13.	Punjab*	89.81
14.	Rajasthan	1236.89
15.	Tamil Nadu	352.44
16.	Telangana (Data under Reconciliation)	190.38
17.	Uttar Pradesh* (Data under Reconciliation)	917.95
18.	Uttarakhand	73.44
19.	West Bengal*	391.03
20.	Assam*	509.85
TOTAL		7439.73

\* These States are also Arsenic affected States.

**Setting up of Virology Institute at Gujarat**

128. SHRI MANSUKH L. MANDAVIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that whenever some new or unidentified virus is encountered, the samples are required to be sent to National Institute of Virology, Pune;

(b) whether this problem can be solved if Government decides to set up Virology Institute in Gujarat; and

(c) if so, whether Government proposes to set up Virology Institute in Gujarat?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) National Institute of Virology, Pune is an apex laboratory in the country and is mandated for identification of any new and unidentified viruses. The facility for identification of new virus or unidentified virus is also available at the National Centre for Disease Control, New Delhi. The samples of new or unidentified viruses are referred to NIV, Pune for their final inputs in any outbreak investigations in the country.

The Department of Health Research (DHR) has rolled out a scheme “Establishment of a network of laboratories for managing epidemics and natural calamities”. Under the Scheme three tier laboratories, *viz.* Regional Laboratories, State Level Laboratories and Medical College Level Laboratories are set up. Besides the above two apex laboratories *viz.* NIV, Pune and NCDC, Delhi, the Regional Laboratories with Bio-Safety Level III facilities also have a mandate to work for identification/isolation of any new and unidentified viruses.

(b) and (c) Under the scheme “Establishment of a network of laboratories for managing epidemics and natural calamities” of DHR, a State Level and Medical College Level Viral Research and Diagnostic Laboratories respectively at B.J. Medical College, Ahmedabad and M.P. Shah Medical College, Jamnagar have been sanctioned.

**Pan-India Trauma Care Network**

129. DR. CHANDAN MITRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government had decided to develop a pan-India trauma care network along the Golden Quadrilateral Corridor;

(b) if so, the details thereof along with the present status of the progress made in this regard;

(c) the reasons for very slow pace of implementation of the decision; and

(d) the fresh steps taken by Government to ensure availability of a designated trauma centre at every 100 kms. on the National Highways across the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) 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 objectives 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. of 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 PMSSY. Remaining 2 identified hospital/Medical College were to be developed from their own funding. Out of 118 hospitals/Medical Colleges identified under the above stated scheme, construction has been completed in respect of 95 identified hospitals/Medical Colleges. Construction in respect of 10 identified hospitals/Medical Colleges has been taken up and not yet started in respect of 11 hospitals/Medical Colleges. Further, 2 Hospitals/Medical Colleges could not be taken up and fund was not released. Out of these 118 identified hospitals/Medical Colleges, 39 centres have become functional.

There are various reasons for slow pace of implementation of the Scheme, which include:

- (i) Delay in construction work by the respective hospitals/State Government.
- (ii) Long process taken for procurement of equipment.
- (iii) Delay in signing of Memorandum of Understanding by the hospital/Institutions.
- (iv) Delay in submission of audited Utilization Certificate (UC) and Statement of Expenditure (SOE) by the respective State Government/UTs.
- (v) Non-availability of Technical manpower specialist, Neurosurgeon, General Surgeon, Anesthesia and Orthopedic Surgeon for district trauma centres.

In order to ensure availability of a designated trauma centre at every 100 kms. establishment of 85 more trauma care facilities have been approved during Twelfth Plan. Till date 30 hospitals/Medical Colleges have been approved for developing trauma care facilities.

**Inquiry into corruption in NRHM in U.P.**

130. SHRI DILIPBHAI PANDYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the amount received by Uttar Pradesh (U.P.) from the Central Government during last three years under the National Rural Health Mission (NRHM);

(b) whether the State Government of Uttar Pradesh has provided year-wise details of the expenditure of the grant provided to it by the Centre, if so, the details thereof;

(c) whether three Chief Medical Officers (CMOs) have been murdered due to corruption in the expenditure of the grant in Uttar Pradesh, if so, whether Government has conducted inquiry into the entire issue; and

(d) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Details showing release of grant by Central Government to Uttar Pradesh and expenditure reported by the State Government during the last three years under the National Rural Health Mission (NRHM) are given in Statement (*See below*).

(c) and (d) The matters have been investigated by the CBI and in two cases Charge sheet was filed and in one case further investigation is going on the direction of the Court of the Special Judicial Magistrate, Lucknow.

**Statement**  
*Details showing the Release and Expenditure of Uttar Pradesh from 2012-13 to 2014-15*

Sl. No.	Programme	2012-13		2013-14		2014-15		(₹ in crore)
		GoI Release*	Exp**	GoI Release*	Exp**	GoI Release*	Exp**	
1	2	3	4	5	6	7	8	
<b>A. NRHM Flexible Pool</b>								
1.	RCH Flexible Pool	452.79	674.71	644.45	956.34	583.97	1011.02	
2.	Mission Flexible Pool	738.92	498.96	565.32	430.03	595.85	935.24	
3.	Routine Immunization	60.40	78.82	0.00	112.85	28.92	93.16	
4.	Pulse Polio Immunisation	84.44	127.64	98.02	125.09	64.35	94.18	
5.	National I.D.D. Control Prog.	0.00	0.00	0.00	0.00	1.77	0.01	
6.	Infrastructure Maintenance	874.46	1847.82	1555.67	1269.27	846.21	1352.91	
7.	Communicable Disease Control Programmes	27.46	18.75	81.54	30.81	123.76	104.30	
(i)	National Vector Borne Diseases Control Programme	10.20	0.52	26.95	4.16	38.09	5.83	
(ii)	Revised National Tuberculosis Control Prog.)	17.26	17.83	49.83	25.52	78.57	87.72	
(iii)	National Leprosy Eradication Prog.	0.00	0.05	2.72	0.26	4.11	5.99	
(iv)	Integrated Disease Surveillance Project	0.00	0.36	2.04	0.87	3.00	4.76	

1	2	3	4	5	6	7	8
8.	Non Communicable Disease Programmes	8.73	16.34	24.88	0.00	34.23	46.08
	(i) National Prog. for prevention and Control of Cancer, Diabetes, Cardiovascular diseases and stroke (NPCDCS)	0.00	0.00	13.98	0.00	20.27	25.19
	(ii) National Prog. for Control of Blindness	8.73	16.34	10.90	0.00	3.87	19.66
	(iii) National Mental Health Prog.	0.00	0.00	0.00	0.00	6.66	0.24
	(iv) National Programme for the Healthcare of the Elderly	0.00	0.00	0.00	0.00	0.00	0.50
	(v) National Prog. for prevention and Control of Deafness	0.00	0.00	0.00	0.00	0.76	0.26
	(vi) National Tobacco Control Prog.	0.00	0.00	0.00	0.00	2.67	0.23
	(vii) Other New Initiative under Non-Communicable Disease Injuries and Trauma	0.00	0.00	0.00	0.00	0.00	0.00
	(viii) National Oral Health Programme	0.00	0.00	0.00	0.00	0.00	0.00
	<b>SUB TOTAL (1+2+3+4+5+6+7+8)</b>	<b>2247.20</b>	<b>3263.04</b>	<b>2969.88</b>	<b>2924.38</b>	<b>2279.05</b>	<b>3636.90</b>
<b>B.</b>	<b>National Urban Health Mission-Flexible Pool</b>	<b>0.00</b>	<b>0.00</b>	<b>54.72</b>	<b>0.00</b>	<b>152.01</b>	<b>34.36</b>
	<b>GRAND TOTAL</b>	<b>2247.20</b>	<b>3263.04</b>	<b>3024.60</b>	<b>2924.38</b>	<b>2431.06</b>	<b>3671.26</b>

\* The above Releases relate to Central Govt. Grants only and do not include state share contribution.

\*\* Expenditure includes expenditure against central Release, state release and unspent balances at the beginning of the year. Expenditure for the F.Y. 2014-15 (upto 31.03.2015) are provisional.

The above figure excludes Kind Grants under Immunisation.

**Scaling down of medical seats in Telangana**

131. SHRI PALVAI GOVARDHAN REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Medical Council of India (MCI) has cut 350 medical seats in various medical colleges in Telangana;

(b) if so, the details thereof and the reasons therefor; and

(c) the efforts the Ministry is making to convince MCI not to cut seats as the decision will adversely impact students?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) Yes; only 3 Medical Colleges out of 20 in Telangana have been denied renewal permission for MBBS for 2015-16. MCI is a body constituted under the provisions of the Indian Medical Council Act, 1956 and has been given the responsibility of discharging the duty of maintenance of the highest standards of medical education throughout the country. Renewal permission is granted only after the MCI carries out an inspection to verify the infrastructure, faculty and other facilities available at the college concerned for running MBBS course. In the instant case permissions were denied as the 3 colleges concerned did not meet the requisite standards.

**Pan-India survey on drugs quality**

132. SHRI S. THANGAVELU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government is conducting a pan-India survey to check the quality of medicines being sold in the market as it prepares to crack down on spurious drugs, if so, the details thereof;

(b) whether it is also a fact that, as part of the survey, Central drug inspectors will collect over 47,000 samples of medicines from at least fifteen different categories including antibiotics, cardiovascular drugs, antihistamines and steroids; and

(c) if so, the steps taken in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) The Government of India has as part of the survey to determine the extent of spurious and not of standard quality drugs in India, collected above 43,000 samples of drugs from retail outlets, civil dispensaries and hospitals of 36 States/Unions Territories (UTs).

**Evaluation of awareness programmes on ill-effects of  
tobacco consumption**

133. SHRI DARSHAN SINGH YADAV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has evaluated the performance and impact of the schemes and awareness programmes aimed at reducing tobacco consumption;

(b) whether Government has stake in a number of cigarette manufacturing companies in the country, if so, the details thereof along with the rationale behind the same; and

(c) the steps taken/proposed to be taken by Government to frame a national policy to tackle the issue with due consideration to balance public health?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Government of India got an external evaluation done of the National Tobacco Control Programme through Public Health Foundation of India (PHFI). The Schemes and awareness programmes aimed at reducing tobacco consumption are a part of National Tobacco Control Programme.

(b) Information is being collated and will be laid on the Table of the House.

(c) The Government of India constituted an Inter-Ministerial Committee of Secretaries, under the Chairmanship of Cabinet Secretary, to review and develop a comprehensive policy on tobacco and tobacco related issues in December, 2014.

**Universal access number for medical emergencies**

134. SHRI KIRANMAY NANDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government proposes to set up a universal access number for medical emergencies in the country; and

(b) if so, the details thereof including the model of functioning and the infrastructure likely to be put in place for the purpose?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Under National Health Mission, universal numbers of 108 and 102 (104 in Rajasthan) are used for calling an ambulance in a medical emergency. 108 service is predominantly an emergency response system, primarily designed to attend to patients of critical care, trauma and accident victims etc. and 102 (104 in Rajasthan) services essentially consist of basic patient transport aimed



to cater the needs of pregnant women and children though other categories are also taking benefit and are not excluded.

Implementation of National Ambulance Service (NAS) guidelines has been made mandatory for all the ambulances supported under NHM.

### **Adulteration of packaged food items and milk products**

135. SHRI VIJAY JAWAHARLAL DARDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Food Safety and Standards Authority of India (FSSAI) has asked all States to keep strict watch on milk, packaged milk, packaged drinking water, packaged sweets and edible oil being sold in the market;

(b) whether any kind of contamination or adulteration has come to the notice of the authority about the products so far;

(c) if so, during the last one year how many samples of such products have been collected and samples tested; and

(d) the number of cases on which action were taken and products banned?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) From time to time, the Food Safety and Standards Authority of India (FSSAI) takes up the matters relating to safety and standards of all food items with the State authorities concerned including through written communications. Further, the pertinent issues are highlighted during interactions in the meetings of the Central Advisory Committee (CAC) of the FSSAI in which amongst others, the Commissioners of Food Safety of all States and UTs are also included.

(b) to (d) As per information received from the States/UTs by the Food Safety and Standards Authority of India till 09.07.2015, the relevant data for 2014-15 is summarised below:

1.	Total number of samples taken	68197
2.	Number of samples analysed	60548
3.	Number of samples found adulterated and misbranded	12077
4.	No. of cases launched	
	Criminal	1989
	Civil	7241
5.	Number of convictions/penalties	
	Convictions	1355
	Penalties/amount raised	2682
	in rupees	₹10,64,03,414/-

**Improving services in health sector**

136. SHRI P. BHATTACHARYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the status of health facilities/services available in the country;
- (b) whether certain areas of the health sector are reportedly lagging behind in terms of health services, if so, the details thereof; and
- (c) the steps taken or proposed to be taken by Government to improve the overall services in the health sector in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Public Health being a State subject, detailed information on Status of health facilities/services available is not maintained at the level of GOI. However, the State/ UT-wise details regarding the number of required, in-position and shortfall of Sub Centres (SCs), Primary Health Centres (PHCs) and Community Health Centres (CHCs) and number of Sub-Divisional Hospitals (SDHs) and District Hospitals (DHs) functioning in the country as per Rural Health Statistics (RHS) Bulletin, 2014 as on 31st March, 2014 are given in Statement-I [refer to the Statement-I appended to the answer to US Q No. 107 (part (a) and (b))]

(b) Yes. There are wide disparities in terms of health outcomes such as Maternal Mortality Ratio (MMR), Infant Mortality Rate (IMR), Total Fertility Rate (TFR) etc. reflecting wide variation in terms of availability of health services. The comparative details are given in Statement-II (*See below*). There are wide variations among States in terms of availability of human resources of health, hospital beds, healthcare facilities etc.

(c) As stated above, Public Health is a State subject. However, under National Health Mission (NHM) financial and technical support is provided to States/UTs to strengthen their healthcare system including for the following:

- (i) Support is provided to States/UTs under NHM, to strengthen the health system including establishment/upgradation/renovation of health infrastructure, engagement of Nurse, doctors and specialists on contractual basis based on the appraisal of requirements proposed by the States in their Programme Implementation Plans (PIPs).
- (ii) Support under NHM is also provided by way of additional incentives to serve in remote underserved areas, so that health professionals find it attractive to join public health facilities in such areas. In order to encourage the States to fill up existing vacancies in remote rural

areas, the States are being incentivized to ensure rational deployment of health human resource. Manpower deployment is also to be put on the web in public domain.

- (iii) To increase the availability of doctors, several initiatives have been taken to rationalize the norms in medical education, such as relaxation in land requirements, bed strength, increase in ceiling for maximum intake for undergraduates, enhancement of teacher-student ratio in Post Graduate Courses, etc. which has resulted in substantial increase in number of under graduate and post graduate seats. Government has also approved setting up of ANM/GNM Schools in different States besides setting up of Institutes of Paramedical Sciences at National and regional levels.
- iv. States/UTs are being impressed upon from time to time to make available improved health facilities including free essential medicines in all public health facilities. Accordingly, financial support is being provided for ensuring uninterrupted supply of free essential medicines in public health facilities based on the requirement proposed by the States in their PIPs.
- v. Under NHM, the High Focus States receive higher per capita funding. Also, support for focused attention and greater resources per capita to High Priority Districts with relatively poor composite health index is being provided under NHM.
- vi. Financial assistance is provided to States/UTs for selection and training of Accredited Social Health Activists (ASHA), who act as a link between community and healthcare facilities.
- vii. States/UTs are supported with Mobile Medical Units for improved service delivery especially in hard to reach areas and Emergency Referral Transport services to ensure un-interrupted referral services.
- viii. States/UTs are assisted to constitute Village Health Sanitation and Nutrition Committees so as to ensure community participation and village level planning and monitoring of health activities.
- ix. Initiatives such as Janani Shishu Suraksha Karyakram (JSSK), Rashtriya Bal Swashtya Karyakram (RBSK), Rashtriya Kishore Swashtya Karyakram (RKSK), 'National Health Mission Free Drugs Service Initiative' and National Health Mission Free Diagnostics Service Initiative etc, have also been introduced to improve the overall services in the health sector in the country.

***Statement-II****Infant Mortality Rate*

Sl. No	India/State	Infant Mortality Rate by residence, India and bigger States, 2013 (IMR)-Source SRS 2013
	ALL INDIA	40
1.	Andhra Pradesh	39
2.	Assam	54
3.	Bihar	42
4.	Chhattisgarh	46
5.	Delhi	24
6.	Gujarat	36
7.	Haryana	41
8.	Himachal Pradesh	35
9.	Jammu and Kashmir	37
10.	Jharkhand	37
11.	Karnataka	31
12.	Kerala	12
13.	Madhya Pradesh	54
14.	Maharashtra	24
15.	Odisha	51
16.	Punjab	26
17.	Rajasthan	47
18.	Tamil Nadu	21
19.	Uttar Pradesh	50
20.	West Bengal	31

*Source:* Registrar General of India, Ministry of Home Affairs (SRS Estimates)

*Maternal Mortality Ratio (per 1,00,000 live births)*

Sl.No	India/States	2011-13
	INDIA	167
1.	Andhra Pradesh	39
2.	Assam	54

Sl.No	India/States	2011-13
3.	Bihar/Jharkhand	42
4.	Gujarat	46
5.	Haryana	24
6.	Karnataka	36
7.	Kerala	41
8.	Madhya Pradesh/Chhattisgarh	35
9.	Maharashtra	37
10.	Odisha	37
11.	Punjab	31
12.	Rajasthan	12
13.	Tamil Nadu	54
14.	Uttar Pradesh/Uttarakhand	24
15.	West Bengal	51

Source: Registrar General of India, Ministry of Home Affairs (SRS Estimates)

Sl.No.	India/Major States	Total Fertility Rate
		2013
1	2	3
	India	2.3
1.	Andhra Pradesh	1.8
2.	Assam	2.3
3.	Bihar	3.4
4.	Chhattisgarh	2.6
5.	Delhi	1.7
6.	Gujarat	2.3
7.	Haryana	2.2
8.	Himachal Pradesh	1.7
9.	Jammu and Kashmir	1.9
10.	Jharkhand	2.7

1	2	3
11.	Karnataka	1.9
12.	Kerala	1.8
13.	Madhya Pradesh	2.9
14.	Maharashtra	1.8
15.	Odisha	2.1
16.	Punjab	1.7
17.	Rajasthan	2.8
18.	Tamil Nadu	1.7
19.	Uttar Pradesh	3.1
20.	West Bengal	1.6

### **Health Scheme for Rural Children**

137. DR. T. SUBBARAMI REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has started any health scheme in the States for rural children who are considered to be the most vulnerable from point of view of health care; and

(b) if so, the details thereof and funds spent for this purpose in the last three years, State-wise, and if not, by when such scheme will be implemented for rural children?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Under National Health Mission (NHM) the provision of health care to children particularly in rural areas is given priority attention. The details of the various interventions being implemented to improve the health of children are as below :-

1. Janani Shishu Suraksha Karyakaram (JSSK): entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including caesarean section. The initiative stipulates free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements have been put in place for all sick infants accessing public health institutions for treatment till one year of age.

2. Facility Based Newborn Care (FBNC) at different levels to reduce newborn morbidity and mortality by setting up of facilities for care of sick and small newborn such as Special Care Newborn Units (SCNUs), Newborn Stabilization Units (NBSUs) and Newborn Care Corners (NBCCs) at different levels is a thrust area under NHM.
3. Home Based New Born Care (HBNC) through ASHAs has been initiated to improve newborn practices at the community level and early detection and referral of sick newborn babies.
4. India Newborn Action Plan (INAP) has been launched with an aim to reduce neonatal mortality and stillbirths.
5. Newer interventions to reduce newborn mortality- Vitamin K injection at birth, Antenatal corticosteroids for preterm labour, Kangaroo Mother Care and injection Gentamicin to young infants in cases of suspected sepsis have been rolled out.
6. Integrated Action Plan for Pneumonia and Diarrhoea (IAPPD) launched in four States with highest child mortality (UP, MP, Bihar and Rajasthan).
7. Management of severe acute malnutrition in children is being done at Nutritional Rehabilitation Centres (NRCs) which have been established across the country.
8. Appropriate Infant and Young Child Feeding practices are being promoted in convergence with Ministry of Woman and Child Development.
9. Village Health and Nutrition Days (VHNDs) are organized for imparting nutritional counselling to mothers and to improve child care practices.
10. Mother and Child Tracking System (MCTS) a name based Mother and Child Tracking System has been put in place which is web based to ensure registration and tracking of all pregnant women and newborn babies so that provision of regular and complete services to them can be ensured.
11. Rashtriya Bal Swasthya Karyakram (RBSK) for health screening and early intervention services has been launched to provide comprehensive care to all the children in the age group of 0-18 years in the community. The purpose of these services is to improve the overall quality of life of children through early detection of birth defects, diseases, deficiencies, development delays including disability.
12. Under National Iron Plus Initiative (NIPI), through life cycle approach, age and dose specific Iron and Folic Acid (IFA) supplementation programme is being implemented for the prevention of anaemia among the vulnerable age

groups like under-5 children, children of 6–10 years of age group, adolescents, pregnant and lactating women and women in reproductive age along with treatment of anaemic children and pregnant mothers at health facilities.

13. Capacity building of health care providers through various training is being conducted under NHM to train doctors, nurses and ANMs for essential newborn care, early diagnosis and case management of common ailments of children. These trainings are on Navjaat Shishu Suraksha Karyakram (NSSK), Integrated Management of Neonatal and Childhood Illnesses (IMNCI), Facility Based Newborn Care (FBNC), Infant and Young Child Feeding practices (IYCF), etc.
14. Universal Immunization Programme (UIP) covers about 13.5 crore children for vaccination against seven vaccine preventable diseases, through 90 lakh immunization sessions each year.
15. Mission Indradhanush, launched on 25th December, 2014, seeks to drive toward 90% full immunization coverage of India by year 2020. The objective of Mission Indradhanush is to ensure high coverage of children with all vaccines in the entire country with a high focus on the 201 identified districts. It is proposed to conduct four special vaccination campaigns between March and June 2015 with intensive planning and monitoring of these campaigns covering all children up to two years of age and pregnant women for tetanus toxoid vaccine.
16. To sharpen the focus on vulnerable and marginalized populations in underserved areas, 184 High Priority Districts have been identified across the country for accelerating implementation of Reproductive Maternal Newborn Child Health+ Adolescent (RMNCH+A) interventions for achieving improved maternal and child health outcomes.
17. The State-wise details of funds allocation, release and expenditure for reproductive and child health programme under NHM for last three years are given in Statement.



**Statement***Allocation, Release and Expenditure under RCH Flexible (Excluding RI) Pool for Twelfth Plan*

(₹ in crore)

Sl. No.	States	2012-13			2013-14			2014-15		
		Allocation	Release	Exp.	Allocation	Release	Exp.	Allocation	Release	Exp.
1	2	3	4	5	6	7	8	9	10	11
1.	Andaman and Nicobar Islands	1.16	0.87	6.80	1.26	3.65	8.57	3.91	2.94	8.14
2.	Andhra Pradesh	258.76	258.76	325.51	280.40	224.32	319.42	189.11	172.92	259.86
3.	Arunachal Pradesh	17.30	12.98	16.47	18.53	20.78	25.26	64.55	48.41	21.00
4.	Assam	390.06	310.46	446.70	417.68	367.55	436.39	367.06	298.24	461.07
5.	Bihar	412.43	309.32	614.78	446.91	335.18	729.30	390.04	338.54	706.31
6.	Chandigarh	3.22	2.42	4.79	3.49	2.62	8.52	2.73	2.05	9.95
7.	Chhattisgarh	117.09	87.82	167.00	126.88	104.67	175.47	160.50	132.19	185.19
8.	Dadra and Nagar Haveli	1.05	1.92	3.08	1.14	2.81	4.71	3.53	2.65	4.95
9.	Daman and Diu	0.74	0.56	2.86	0.80	2.25	4.18	2.50	1.88	3.71
10.	Delhi	51.20	37.39	56.31	55.48	43.55	63.22	43.31	40.20	49.63
11.	Goa	4.46	4.46	4.79	4.83	4.20	5.85	5.01	3.77	6.73
12.	Gujarat	184.55	184.55	221.49	199.98	176.98	212.61	230.48	212.31	236.38
13	Haryana	77.49	77.49	116.19	83.96	86.48	154.74	82.13	61.78	162.13

1	2	3	4	5	6	7	8	9	10	11
14.	Himachal Pradesh	31.43	23.55	38.27	71.68	70.65	63.78	70.07	58.60	60.92
15.	Jammu and Kashmir	57.53	57.53	112.89	161.34	156.71	151.89	157.71	118.64	147.27
16.	Jharkhand	151.13	108.57	166.32	163.77	122.83	215.52	163.41	122.92	230.90
17.	Karnataka	186.83	186.83	205.41	202.45	161.96	218.81	230.76	188.63	229.23
18.	Kerala	102.04	102.04	160.43	110.57	110.57	150.71	99.91	83.30	130.34
19.	Lakshadweep	0.23	1.23	2.36	0.21	0.60	0.53	0.66	0.50	0.72
20.	Madhya Pradesh	288.44	216.33	466.07	312.56	268.80	600.37	382.77	347.85	675.61
21.	Maharashtra	343.44	341.87	384.10	372.16	279.10	485.92	407.37	374.24	477.44
22.	Manipur	34.06	0.00	15.01	36.47	27.35	24.57	41.32	41.32	25.45
23.	Meghalaya	37.09	33.84	20.50	39.72	37.04	14.94	43.82	35.06	26.55
24.	Mizoram	13.65	13.65	22.37	14.62	16.40	24.44	23.54	23.54	17.17
25.	Nagaland	24.79	24.79	33.54	26.54	28.27	33.89	30.24	30.24	24.13
26.	Odisha	166.66	166.66	260.03	180.60	186.92	283.88	211.33	199.33	296.42
27.	Puducherry	3.80	2.85	6.42	4.12	4.12	8.52	3.34	3.35	8.50
28.	Punjab	84.67	84.67	93.21	91.75	76.61	100.78	90.28	80.33	124.85
29.	Rajasthan	272.64	204.48	441.66	295.44	254.07	460.25	385.98	354.01	524.52
30.	Sikkim	7.61	3.12	9.04	8.14	9.13	11.46	10.51	11.25	12.12
31.	Tamil Nadu	220.48	220.48	228.56	238.91	247.27	365.83	231.86	210.91	467.92

32. Tripura	45.94	15.07	21.23	49.19	46.89	23.49	43.96	35.17	26.66
33. Uttar Pradesh	792.97	452.79	674.71	859.27	644.45	956.34	776.30	583.97	1011.02
34. Uttarakhand	46.38	46.38	71.20	98.45	80.63	84.07	96.23	72.39	101.95
35. West Bengal	279.19	209.39	337.70	302.53	257.15	384.03	268.62	228.04	494.75
36. Telangana							135.15	102.76	144.70
	GRAND TOTAL	4710.51	3805.11	5757.76	5281.82	4462.57	6812.25	5450.00	4624.23
38. Others			0.00			0.69			
TOTAL		4710.51	3805.11	5757.76	5281.82	4463.26	6812.25	5450.00	4624.23

Note :— Expenditure includes expenditure against Central Release, State release and unspent balances at the beginning of the year.

Expenditure for the F.Y. 2014-15 (upto 31.03.2015) are provisional.

Release for the F.Y. 2015-16 are updated upto 31.03.2015.

The above Releases relate to Central Government Grants and do not include State share contribution.

The above figure is excluded of routine immunization.

**Provision for spectacles, dentures and hearing aids under NRHM**

138. SHRI RAM KUMAR KASHYAP: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is no provision in the National Rural Health Mission (NRHM) to provide spectacles, dentures and hearing aids etc. particularly to senior citizens in the rural areas; and

(b) if so, whether there is any proposal to provide spectacles, dentures and hearing aids etc. free of cost to the senior citizens in the rural areas under NRHM 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, the primary responsibility to provide healthcare services is that of the respective State/UT Governments. However, under the National Health Mission (NHM), Government of India provides financial and technical support to States/UTs for strengthening of healthcare systems based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs). The financial support could also be provided for spectacles, hearing aids etc. if the States so propose in their PIPs.

**Failure of TB control programme in tribal areas**

139. SHRI DEVENDER GOUD T.: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the reaction of the Ministry to ICMR's study which indicated that TB Control Programme has failed in most of the tribal areas of the country;

(b) the details of other findings of the study; and

(c) the manner in which the Ministry is planning to revisit the Revised National TB Control Programme in tribal areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) The study by National Institute for Research in Tribal Health, Jabalpur, undertaken through analysis of Revised National Tuberculosis Control Programme (RNTCP) data for 2010 to 2012 has stated that the overall RNTCP performance in tribal areas of the country was not optimal.

However, the study results itself indicate that the proportion of districts that had low smear positive case detection rate was almost similar in all categories (backward, tribal and others) during year 2010 and 2012; the cure rates observed

in tribal districts were better as compared with backward districts; the performance in terms of success rate was almost similar in all districts.

The overall treatment success rate among new smear positive cases registered under the Revised National Tuberculosis Control Programme (RNTCP) in tribal districts of India is almost similar to the National Average for years 2010, 2011 and 2012.

Districts implementing RNTCP in various States of India can be graded from low performing to high performing based on several indicators which are applicable for both tribal and non-tribal districts. Nevertheless, there are peculiar problems in tribal districts due to issues related to accessibility and socio-economic conditions.

Services under the Revised National Tuberculosis Control Programme (RNTCP) are available free of cost in all Districts. The Revised National Tuberculosis Control Programme already has enhanced norms for tribal areas in that there is relaxation in population norm for setting up Designated Microscopy Centres and Tuberculosis Units as compared to the non-tribal areas. In addition, RNTCP has formulated a Tribal Action Plan to be implemented by the States through their National Health Mission Project Implementation Plan approval mechanism.

#### **Shelving of free drugs and diagnostic schemes**

140. SHRI A. K. SELVARAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has taken a decision to shelve the free drugs and diagnostic scheme under the National Health Assurance Mission;

(b) whether it is a fact that Government has made major cuts in major social sector programmes; and

(c) whether it is also a fact that Government's healthcare outlay is stagnant at around ₹ 33,000 crore and has not gone up from 1.2 per cent of GDP to 2-2.25 per cent of GDP as suggested in the draft National Health Policy, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) No Public Health being a State subject, the primary responsibility for providing good quality health services and infrastructure to the population lie with the State Governments. However, under the National Health Mission (NHM) financial support is provided to States to strengthen their health care system including for free essential drugs and free essential diagnostics, based on requirements posed by the States in their Programme Implementation Plans (PIPs). The Government has also released on 2nd July, 2015 detailed Operational Guidelines for

NHM - Free Drugs Service Initiative and NHM Free - Diagnostic Service Initiative.

(b) and (c) The Central Government's budgetary allocation for the Health Sector for the year 2015-16 is ₹ 33282.17 crores as against ₹ 31965.00 crores in 2014-15 (RE). Additionally, as per the recommendations of the 14th Finance Commission for the award period 2015-20, the tax devolution to States, of 42% of Union's net tax receipts, will allow States greater autonomy in financing and designing of schemes as per their needs.

The draft National Health Policy 2015 proposes a target of raising public health expenditure to 2.5 per cent of GDP over a minimum of five year period, keeping in view the financial capacity of the country and the institutional capacity to utilize the increased funding in an effective manner.

### **AIIMS in North-Eastern Region**

141. SHRIMATI JHARNA DAS BAIDYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has any plan to establish AIIMS in the North-Eastern Region, specially in Tripura; and

(b) if so, the details thereof and the time by which the same are likely to be set up and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) The setting up of new AIIMS in Tripura has not yet been announced.

However, the Hon'ble Finance Minister, in his budget speech 2015-2016, has announced to set up AIIMS in Assam in North-Eastern Region.

Timeline for setting up of such tertiary level health care facilities depends upon the receipt of various due approvals.

### **Survey of AIIMS, Bhopal**

†142. SHRI MEGHRAJ JAIN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has conducted any survey to find out the present functioning condition of All India Institute of Medical Science, Bhopal, Madhya Pradesh and other hospital/affiliated hospitals under the control of Central Government;

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† Original notice of the question was received in Hindi.

(b) if so, the details thereof and the outcome thereof and if not, the reasons therefor; and

(c) the steps taken/being taken by Government to improve the functioning of these hospitals?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) The All India Institute of Medical Sciences are autonomous institutes whose functioning are monitored by the Governing Body/Institute Body of the respective AIIMS. Government does not conduct surveys to assess the functioning of these institutes. However, the Institute Bodies and the Governing Bodies in their meetings assess the functioning of their respective institutes and take decisions to improve their functioning. The performance of other hospitals/affiliated hospitals under the control of Central Government is monitored either through/by their Governing Bodies or by Director General of Health Services.

#### **Beneficiaries under RSBY**

143. SHRI AVINASH PANDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of beneficiaries presently being covered under the Rashtriya Swasthya Bima Yojana (RSBY), State-wise break-up thereof; and

(b) the names of districts where RSBY has not yet been implemented and the reasons for its non-implementation?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Rashtriya Swasthya Bima Yojana (RSBY) is, at present, being implemented in 19 States in the country. The State-wise break-up of the number of beneficiaries presently being covered under RSBY is given in Statement-I (*See below*).

(b) RSBY is a centrally sponsored scheme and is implemented through the State Governments. In these 19 States, where RSBY is operational, it has yet not been implemented in 14 out of the total 455 Districts. The names of these Districts are given in Statement-II (*See below*). In the States of Assam and Manipur, the concerned Districts could not be covered as the scheme was being implemented by the States in a phased manner. In the State of Gujarat, the scheme has not been implemented in 7 Districts as these have been newly created.

***Statement-I***

*The total number of beneficiaries presently being covered under the Rashtriya Swasthya Bima Yojana (RSBY) with State-wise break up  
Currently active enrolment of families by States*

Sl.No.	States	No of District	Enrolment
1.	Manipur	5	59989
2.	Meghalaya	11	108221
3.	Mizoram	8	109744
4.	Tripura	4	217651
5.	Punjab	22	234169
6.	Uttarakhand	13	285435
7.	Himachal Pradesh	12	422625
8.	Haryana	21	437850
9.	Assam	23	1421104
10.	Jharkhand	24	1589805
11.	Gujarat	26	1948726
12.	Kerala	14	2021572
13.	Chhattisgarh	27	2149626
14.	Uttar Pradesh	31	2359706
15.	Rajasthan	33	2692626
16.	Bihar	34	3645764
17.	Odisha	30	4307538
18.	West Bengal	20	6132394
19.	Karnataka	30	6430255
GRAND TOTAL		388	36574800

***Statement-II***

*The List of Districts where RSBY has not yet been implemented*

State	District
Assam	Baksa
	Chirang
	Kamrup Metropolitan



State Name	District Name
Gujarat	Udalguri
	Aravalli
	Botad
	Chhota Udaipur
	Devbhoomi Dwarka
	Gir Somnath
	Mahisagar
Manipur	Morbi
	Chandel
	Senapati
	Imphal West

#### **Proposed sites for new AIIMS in Uttar Pradesh**

†144. SHRIMATI KANAK LATA SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of new AIIMS proposed to be set up in Uttar Pradesh and the locations selected for the construction of new AIIMS along with the action taken so far with regard to the construction;
- (b) by when the proposed new AIIMS would start functioning in the State; and
- (c) whether steps are being taken in the direction of providing human resource and other equipments to new AIIMS?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The Central Government has approved to set up of new AIIMS-like Institutes in Uttar Pradesh (UP) at Rae Bareilly under Phase-II of the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY). Construction of residential blocks at the site in Rae Bareilly has started.

Another AIIMS in UP has been announced to be set up in Poorvanchal Region. Location for the same is yet to be finalised.

(b) AIIMS at Rae Bareilly and AIIMS proposed to be set up at Poorvanchal Region in Uttar Pradesh would be made functional once the infrastructure is in place.

† Original notice of the question was received in Hindi.

(c) Yes. Steps towards creation of various posts, providing of human resources and other equipment will be taken in due course. 135 posts for AIIMS Rae Bareilly have been created and will be filled up on functional need basis.

### **Impact of payment delays on healthcare schemes**

145. SHRI PAUL MANOJ PANDIAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that payment delays dent India's flagship health schemes, if so, the details thereof; and

(b) whether it is also a fact that the progress in National Health Mission has slowed down considerably in most of the States, if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) There have been some delays in transfer of funds from Consolidated Fund of the States to State Health Societies during 2014-15. From the reports received from the State/UT Governments, it is not factually borne out that the NHM has slowed down considerably in most of the States.

### **Recovery of excess payment to AIIMS employees**

†146. SHRI VISHAMBHAR PRASAD NISHAD:

SHRIMATI KANAK LATA SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the case of employees of the All India Institute of Medical Sciences (AIIMS) having been given a higher amount of house rent allowance has been mentioned by the Comptroller and Auditor General (CAG) in its report and it has also been reported that these employees have been given a higher amount than their prescribed annual increment;

(b) if so, since when it has been happening and the resultant loss to the exchequer;

(c) whether the process of recovery is being initiated after giving such huge amount of money; and

(d) whether any punitive action has been taken in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (d) All India Institute of Medical Sciences (AIIMS), New

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† Original notice of the question was received in Hindi.

Delhi has not received any such report/Audit para/audit observation from Comptroller and Auditor General (CAG) in the recent past.

**Urban entries started in Delhi under NUHM**

147. SHRI PARVEZ HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the number of urban entries have increase in Delhi under National Urban Health Mission (NUHM) Scheme after 1 May, 2013;

(b) if so, the total number of urban entries started in Delhi and details of facilities available; and

(c) the areas of new entries in Delhi?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) As per information provided by the Government of National Capital Territory of Delhi, 12 new facilities have been started in Delhi since 1st May, 2013. The facilities started under the NUHM are :—

(1) Seed Primary Urban Health Centre (SPUHC), Sudarshan Park

(2) Seed PUHC, Nilothi

(3) Seed PUHC, Shalapur Khera

(4) Seed PUHC, Jasola

(5) Seed PUHC, Lal Quan

(6) Seed PUHC, Meethapur

Besides these, new facilities have also been started by Government of National Capital Territory of Delhi and the local bodies in the following areas :—

(1) Delhi Government Dispensary (DGD), Basant Gaon

(2) DGD, Shiv Vihar Tiraha

(3) DGD, Jhilmil

(4) Deep Chand Bandhu Hospital

(5) Maternity Home, Mundka

(6) Mother and Child Welfare Centre, Karala

A total of 551 Primary Health Care Facilities, 36 Maternity Homes and 60 Hospitals are functional in the National Capital Territory of Delhi.

**Impact of climate change in incidence of diseases**

148. SHRI C. P. NARAYANAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether unprecedented changes in environment and climate have led to widespread incidence of contagious diseases in different parts of the country, if so, the steps envisaged to rein in their influence;

(b) whether morbidity is generally on the increase in the country, or is it so only in the case of certain types of diseases; and

(c) the details of steps taken by Government to eliminate or reduce the incidence of life style diseases?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) No increase in incidence of contagious diseases due to unprecedented changes in environment and climate has been documented by National Centre for Disease Control (NCDC), Delhi. There is increasing concern, globally as well as in India, over the effects of climate change on human Health. As per World Health Organisation (WHO), Climate Change affects the social and environmental determinants of Health. Climate Change can lead to extreme weather events such as storms, floods, cyclones etc. which could enhance the spread of diseases like vector borne diseases, food and water borne diseases, heat stroke etc.

The Prime Minister's Council on Climate Change has included a new Mission on Climate Change and Health. A National Expert Group on Climate Change and Health has been subsequently constituted by Ministry of Health and Family Welfare to address the issues related to adverse effect of Climate Change on human Health through appropriate mitigation and adaptation measures.

(b) The morbidity due to life-style related non-communicable diseases such as hypertension, cancer, diabetes etc. is increasing in the country.

(c) Central Government supplements the activities and efforts of the States towards creation of awareness, health education and health promotion in order to reduce the incidence, morbidity and mortality of all diseases including lifestyle diseases.

A National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) is under implementation since July, 2010. The programme focuses on prevention through awareness generation, behavior and life-style changes, early diagnosis and treatment of persons with high levels of risk factors and their referral to higher facilities for appropriate management. From the year 2013-14, support to State Governments under the programme is through

National Health Mission. Funding is provided for human resources, infrastructure, early screening, treatment as well as for Information, Education and Communication (IEC) activities.

In addition, Government of India has approved a scheme for enhancing tertiary care cancer facilities in the country. Under this scheme (tertiary component of NPCDCS), Government of India has initiated the process of assisting 20 State Cancer Institutes (SCI) and 50 Tertiary Care Cancer Centres (TCCC) in different parts of the country.

Several awareness initiatives have been undertaken including observance of World Diabetes Day, organizing of screening and major awareness events at occasions such as the India International Trade Fair (IITF) 2014, Delhi.

### **Low GDP outlay for healthcare sector**

149. SHRIMATI SASIKALA PUSHPA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the health care outlay in our country as a percentage of GDP is low compared to other developing and developed countries, if so, the details thereof;

(b) whether it is a fact that it is declining over the last few years, if so, the details thereof;

(c) whether Government proposes to increase the expenditure on healthcare in this country, if so, the details thereof; and

(d) the steps taken by Government to ensure proper utilization of funds and to provide proper healthcare facilities to all the citizens of this country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Details showing total expenditure on health as percentage of GDP in India *vis-à-vis* select developed/developing countries for 2012 are given in Statement (See below).

(b) As per World Health Statistics 2015 published by World Health Organization, total expenditure on health consisting general Government expenditure and private expenditure stood at 3.8% of GDP in 2012 compared to 4.3% of GDP in 2000. The decline is attributed to decline in private expenditure on health which declined from 3.14% of GDP in 2000 to 2.64% of GDP in 2012, while general Government expenditure on health stood at 1.16% of GDP.

(c) The public expenditure on healthcare provisioning has increased from ₹ 88054 crore in 2009-10 to ₹ 146211 crore in 2013-14 (RE) as per Economic Survey 2014-15. The Twelfth Five Year Plan has targeted to increase the public

spending on core health for Centre and States together, to 1.87 per cent of GDP by the end of the Twelfth Plan.

(d) To ensure proper utilization of funds and to provide health care facilities to all the citizens of the country, the Government has taken several steps including, *inter-alia* organizing periodical review meetings/Joint Monitoring Missions, conducting external surveys, undertaking Common Review Missions (CRM) on annual basis, Conducting monthly concurrent audit and annual audit of the State/District Health Societies, Performance Audit by CAG, Mid-Term Appraisal by Planning Commission (Now NITI Aayog), etc.

***Statement***

*Details showing total expenditure on health as percentage of Gross Domestic Product (GDP) in respect of some select developing/developed countries*

Sl.No.	Name of Country	Total expenditure on health as percentage of GDP-2012
1.	Bangladesh	3.5
2.	China	5.4
3.	India	3.8
4.	Indonesia	3.0
5.	Kuwait	2.6
6.	Malaysia	4.0
7.	Oman	2.7
8.	Pakistan	2.8
9.	Peru	5.2
10.	Sri Lanka	3.1
11.	Thailand	4.5
12.	United Kingdom	9.3
13.	United States of America	17.0
14.	Russian Federation	6.5
15.	Spain	9.3

*Source:* World Health Statistics 2015 published by World Health Organization

**Monitoring Committee for AIIMS like Institutes**

150. SHRIMATI SAROJINI HEMBRAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of AIIMS and AIIMS like Institutions Government has proposed to establish in different States of the country and the time by which these will be functional; and

(b) whether Government has established any Monitoring Committee to review the functioning of the existing AIIMS in different States and if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) Under the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), the Government plans to establish AIIMS like Institutions in every State in a phased manner. The details of AIIMS established and to be established are given in Statement (*See below*).

Six new AIIMS at Patna (Bihar), Raipur (Chhattisgarh), Bhopal (Madhya Pradesh), Bhubaneswar (Odisha), Jodhpur (Rajasthan) and Rishikesh (Uttarakhand) are functional.

Construction of residential blocks at the site of AIIMS in Rae Bareilly has started.

Timeline for AIIMS to be set up in various States, as per Budget Announcements, depends upon the receipt of various due approvals and will be made functional as soon as infrastructure is in place.

(b) No Monitoring Committee has been established by the Government, as All India Institutes of Medical Sciences (AIIMS) are statutory bodies established under Section 3 of the All-India Institutes of Medical Sciences Act, 1956 as amended in 2012. The Institute is a body corporate and the Institute Body regulates the functions of the Institute as per the provisions of the Act. Governing Body, Academic Committee, Standing Finance Committee and Standing Selection Committee have been set up by the Institute Body in terms of Section 10(1), 10(5) and 10(6) of the All-India Institutes of Medical Sciences Act, 1956 as amended in 2012, to assist the Institute in discharging of its functions.

***Statement***

*List of States, wherein new AIIMS are set up and to be set up under PMSSY*

**A. Phase-I of PMSSY**

- |      |              |   |                 |
|------|--------------|---|-----------------|
| (i)  | Bihar        | : | AIIMS at Patna  |
| (ii) | Chhattisgarh | : | AIIMS at Raipur |

- (iii) Madhya Pradesh : AIIMS at Bhopal
- (iv) Odisha : AIIMS at Bhubaneswar
- (v) Rajasthan : AIIMS at Jodhpur
- (vi) Uttaranchal : AIIMS at Rishikesh

**B. Phase-II of PMSSY**

- (i) Uttar Pradesh : AIIMS at Rae Bareilly
- (ii) West Bengal : AIIMS (Could not be taken up due to non-providing of suitable land/site)

**C. Fresh Announcements**

During Budget Speech for the year 2014-15

- (i) Andhra Pradesh
- (ii) West Bengal
- (iii) Vidharbha in Maharashtra
- (iv) Poorvanchal in U.P.

During Budget Speech for the year 2015-16

- (i) Assam
- (ii) Himachal Pradesh
- (iii) Jammu and Kashmir
- (iv) Punjab
- (v) Tamil Nadu
- (vi) Another AIIMS in Bihar

**Regularisation of contractual staff in Doordarshan**

151. SHRIMATI SAROJINI HEMBRAM: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether Government has any plan to recruit a large number of staff on contractual basis in Doordarshan and All India Radio;

(b) if so, the details thereof;

(c) whether Government has any plan to regularise the contractual staff working in the Public Broadcasters like Doordarshan and All India Radio; and



(d) 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): (a) and (b) Prasar Bharati has informed that engagement of contractual staff in All India Radio and Doordarshan is a continuous process on requirement basis. At present no such large requirement is envisaged.

(c) and (d) No Sir. The Prasar Bharati has informed that the services of these personnel have been hired on contractual basis only, and not for regular postings.

### **Betterment of Prasar Bharati**

†152. SHRI HARIVANSH: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether Prasar Bharati's assistance was not sought for running the DD Kisan Channel, if not, the reasons therefor;

(b) whether Government is considering auditing the salaries of 30,000 employees of Prasar Bharati, if so, the reasons therefor;

(c) whether the DD News Chief reports to the Ministry instead of the CEO of Prasar Bharati; and

(d) details of Government's plan to make Prasar Bharati better?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) Kisan Channel is run by Doordarshan which comes under Prasar Bharati.

(b) A Test Audit/Check of non Plan expenditure under Salary and Salary-related expenses of some of the major Kendras of Prasar Bharati was instituted by the Ministry in April, 2015 on request of Prasar Bharati, to ensure that the provisions of General Financial Rules are complied with.

(c) The Director General of Doordarshan News reports to Prasar Bharati for all operational purposes.

(d) The functioning of Prasar Bharati is governed by the Prasar Bharati Act, 1990. The Government ensures that the provision of the Prasar Bharati Act, 1990 are complied with in letter and spirit.

**Legislation to regulate participation in media sector**

153. DR. T.N. SEEMA: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) whether Telecom Regulatory Authority of India (TRAI) has suggested the barring of political parties, religious bodies and Government funded entities and affiliates to gain ownership of the media and even surrogate of such entities for entering the broadcasting and television channel distribution sectors;

(b) if so, the details thereof and the reaction of Government thereto;

(c) whether demands have been made by various NGOs and TRAI for any legislation to regulate the participation of such entities in media sector; and

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

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): (a) to (d) The Telecom Regulatory Authority of India (TRAI) in its recommendations on 12.11.2008 'Issues relating to entry of certain entities into broadcasting and distribution activities' had, *inter-alia*, recommended that State Governments and urban and local bodies, Panchayati Raj bodies, political and religious bodies should not be allowed to enter into broadcasting activities, including distribution of TV channels. It further recommended that the aspirations of the State Governments, as regards broadcasting, can be adequately met by Prasar Bharati through its existing regional framework. In continuation of these recommendations, TRAI again on 20.12.2012 recommended that Central/State Ministries and Departments, Central/State Government owned companies, Central/State Government undertakings, Joint Ventures of State/Central Government and Central/State Governments funded entities should not be allowed to enter into the business of broadcasting and or distribution of TV channels. Detailed recommendations are available on the website of TRAI at [www.traai.gov.in](http://www.traai.gov.in).

Policy making is a dynamic process which may be reviewed from time to time.

**Status of Kisan Channel**

154. SHRI K.R. ARJUNAN: Will the Minister of INFORMATION AND BROADCASTING be pleased to refer to answer to Unstarred Question 2230 given on 17 March, 2015 in the Rajya Sabha and state the present status of the Kisan Channel as announced in the Union Budget 2014-15?

THE MINISTER OF STATE IN THE MINISTRY OF INFORMATION AND BROADCASTING (COL. RAJYAVARDHAN SINGH RATHORE): As announced in the Union Budget 2014-15, Doordarshan's Kisan Channel has been launched on 26.05.2015.

**Curb on sham marriages**

155. SHRI PALVAI GOVARDHAN REDDY: Will the Minister of MINORITY AFFAIRS be pleased to state:

- (a) whether it has come to the notice of the Ministry about the rampant sham marriages in the old city of Hyderabad during the last few years;
- (b) if so, the details of such marriages in the country, particularly Hyderabad;
- (c) whether, it is a fact that sham marriages increases in Ramzan season since laws during this time are stricter in Gulf countries; and
- (d) the manner in which the Ministry is planning to curb such marriages?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) to (d) As per the Allocation of Business Rules, 1961, the subject of sham marriages comes under the purview of the Ministry of Home Affairs and not the Ministry of Minority Affairs. The Ministry of Home Affairs has informed that they have no data on the subject since such data is not maintained by National Crime Records Bureau (NCRB).

**UGC fellowship to minority community**

156. SHRI MD. NADIMUL HAQUE: Will the Minister of MINORITY AFFAIRS be pleased to state:

- (a) whether it is a fact that there is deliberate delay in the disbursal of fellowship to minority community student by Government's funding agency like UGC;
- (b) if so, the details thereof and the reasons therefor;
- (c) what is the minimum time period UGC undertakes for the verification of documents under Maulana Azad National Fellowship for Minority (MANFM);
- (d) whether it is a fact that fellowship disbursal complaint redressal mechanism is dysfunctional in UGC;
- (e) if so, details thereof along with total number of complaints received from minority students under MANFM in last three years; and

(f) the details of MANFM awarded in last three years, year-wise and State-wise?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS  
(SHRI MUKHTAR ABBAS NAQVI): (a) No, Sir.

(b) Does not arise in view of (a) above.

(c) Under the scheme of Maulana Azad National Fellowship, the fellowship is disbursed to selected minority students directly by UGC as payment of grant through Canara Bank on uploading the requisite documents by students on portal of the bank. The UGC has instructed the Canara Bank to make payment of grant to selected students timely on 7th of each month and subsequent payment of grant is also made based on submission of continuation certificate after every 3 months. The bank is liable to make payment of grant to selected students by fulfilling formalities as per norms laid down by the UGC.

(d) and (e) The UGC redresses complaints in terms of award of fellowship and timely disbursement of amount of fellowship and the UGC also strives to remove constraints/shortcomings faced by the awardees in availing of facilities under the said scheme. As reported by UGC, there is no complaint received from minority students during last three years under the scheme.

(f) Details of MANF awarded in last three years, year-wise and State-wise are given in Statement.

### ***Statement***

*Details showing State-wise and year-wise number of selected candidates  
during the last three years under the scheme of  
Maulana Azad National Fellowship  
for Minority Students*

Sl.No.	States	Selection Year		
		2012-13	2013-14	2014-15
1	2	3	4	5
1.	Andhra Pradesh	34	31	15*
2.	Arunachal Pradesh	2	4	4
3.	Assam	35	33	33
4.	Bihar	55	50	50

1	2	3	4	5
5.	Chhattisgarh	4	4	4
6.	Goa	2	4	4
7.	Gujarat	20	21	23
8.	Haryana	12	12	10
9.	Himachal Pradesh	2	4	4
10.	Jammu and Kashmir	30	36	28
11.	Jharkhand	23	21	19
12.	Karnataka	32	32	33
13.	Kerala	52	51	50
14.	Madhya Pradesh	15	15	24
15.	Maharashtra	69	67	66
16.	Manipur	3	4	4
17.	Meghalaya	6	6	6
18.	Mizoram	1	4	4
19.	Nagattand	7	6	6
20.	Odisha	6	6	10
21.	Punjab	59	59	54
22.	Rajasthan	23	21	25
23.	Sikkim	2	4	4
24.	Tamil Nadu	33	32	29
25.	Tripura	2	4	4
26.	Uttar Pradesh	127	120	114
27.	Uttarakhand	2	4	4
28.	West Bengal	80	81	84
29.	Andaman and Nicobar	3	1	1
30.	Chandigarh	0	4	4

1	2	3	4	5
31.	Dadra and Nagar Haveli	1	1	0
32.	Daman and Diu	0	0	0
33.	Delhi	11	8	13
34.	Lakshadweep	0	2	4
35.	Puducherry	1	4	4
36.	Telanagana	0	0	15
GRAND TOTAL		754	756	756

\* 50% slots from Andhra Pradesh to Teangana State

### **Scholarship to minority students**

157. SHRI VIVEK GUPTA: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether Government has schemes under which scholarships are awarded to minority students for education overseas;

(b) the details of students who have been awarded scholarships for education overseas; and

(c) the details of the total funds allocated and categorized according to these schemes?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) No, Sir.

(b) and (c) Do not arise in view of (a) above.

### **Minority status to Jain Community**

†158. SHRI CHUNIBHAI KANJIBHAI GOHEL: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether Government has included the Jain Community into minority community;

(b) the benefits accrued to Jain Community thereby; and

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† Original notice of the question was received in Hindi.

(c) whether this community has been granted certificate of minority community, if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) and (b) This Ministry *vide* Notification No. S.O. 267(E) dated 27.01.2014 has declared Jains as a Minority Community under Section 2(c) of the National Commission for Minorities (NCM) Act, 1992. The schemes/programmes implemented by this Ministry are for the welfare for all Minorities including Jains.

(c) This Ministry has requested all State Governments/UT Administrations *vide* letter No.4-3/2015-NCM dated 18th May, 2015 to issue minority certificate as and when any candidate applies for the same after following their own procedure. A copy of the letter is available on the web-site of this Ministry at [www.minorityaffairs.gov.in](http://www.minorityaffairs.gov.in)

#### **Criticism of working of the minority welfare organizations**

159. SHRI GULAM RASOOL BALYAWI: Will the Minister of MINORITY AFFAIRS be pleased to state:

(a) whether it is a fact that some organizations have criticized the working of National Commission for Minorities (NCM), National Minorities Development and Finance Corporation (NMDFC) and Maulana Azad Education Foundation (MAEF);

(b) if so, the details in this regard; and

(c) the action being taken to improve the working of these bodies?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) to (c) This Ministry has not received any communication criticizing the working of NCM and NMDFC. In order to improve the functioning of NMDFC, the Cabinet in its meeting held on 10.2.2015 approved to increase the Authorised Share Capital of NMDFC from ₹ 1500 crore to 3000 crore and also restructuring of its business model. Accordingly the following action has already been taken:

(i) Authorised share capital has been increased from ₹ 1500 crore to ₹ 3000 crore.

(ii) To increase coverage of loan schemes of NMDFC, new annual household income eligibility criteria of upto ₹ 6.00 lacs has been introduced.

(iii) Quantum of loan available under financing schemes has been increased

to ensure that adequate fund is available with the beneficiary, to take up economically viable ventures. Under Term Loan scheme, the quantum of loan has been increased from ₹ 10.00 lacs to ₹ 30.00 lacs; under Micro-Finance scheme from ₹ 50,000 to ₹ 1.50 lacs for each member of Self Help Group; under Education Loan from ₹ 5.00 lacs to ₹ 20.00 lacs for domestic courses and from ₹ 10.00 lacs to ₹ 30.00 lacs for courses abroad.

Since this Ministry has received representations showing concerns about the functioning of MAEF, action has been taken for restructuring of MAEF to improve its functional efficiency.

### **Functioning of Waqf Boards in various States**

160. SHRI ABDUL WAHAB: Will the Minister of MINORITY AFFAIRS be pleased to state:

- (a) the number of Waqf Boards functioning at present in various States;
- (b) the details of Waqf properties under the control of such Boards;
- (c) the estimated cost of properties under each Board; and
- (d) the nature of control of the Central Government on the Waqf Boards?

THE MINISTER OF STATE IN THE MINISTRY OF MINORITY AFFAIRS (SHRI MUKHTAR ABBAS NAQVI): (a) There are 30 State/UT Waqf Boards functioning at present in various States.

(b) and (c) According to Section 32(1) of the Waqf Act, 1995, the general superintendence of all auqaf in a State shall vest in the Board established by the State/UT Government and it shall be the duty of the Board so to exercise its power under this Act as to ensure the auqaf under its superintendence are properly maintained, controlled and administered and the income thereof is duly applied to the objects and for the purposes for which such auqaf were created and intended. Accordingly, no such details of waqf properties and estimated cost of properties are maintained by the Central Government.

(d) As per Section 13(1) of the Waqf Act, 1995, State Waqf Boards are established by the State Government by notification in the Official Gazette. Thus, State Waqf Boards are not directly controlled by the Central Government. However, Central Waqf Council which is an Advisory Body of the Central Government suggests/advises the State Waqf Boards as and when require/deemed necessary.



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

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*The House re-assembled at two of the clock,  
MR. DEPUTY CHAIRMAN in the Chair.*

**RE. NOTICE UNDER RULE 267 — Contd.**

SHRI PRAMOD TIWARI (Uttar Pradesh): Sir, I am on a point of order.  
...(Interruptions)...

श्री नरेश अग्रवाल (उत्तर प्रदेश): माननीय उपसभापति महोदय, हम लोगों ने सुबह नोटिस दिया और उस नोटिस को चेयर ने accept किया। उस पर आनन्द शर्मा जी ने बोला, उस नोटिस में प्रमोद तिवारी जी का नाम है, मेरा नाम है, प्रो. राम गोपाल यादव जी का नाम है ...**(व्यवधान)**... माननीय उपसभापति महोदय, हम लोगों ने आज सुबह नियम 267 के तहत एक नोटिस दिया, उस नोटिस को चेयर ने accept किया। जब accept किया, चूंकि नियम 267 में दो नियम हैं, पहले उसको चेयर accept कर ले, फिर उस पर मोशन मूव हो। चेयर ने नोटिस को accept किया, आनन्द शर्मा जी ने उस पर बोलना शुरू किया। उसी बीच में डिस्टर्बेंस हुई और हाउस एडजर्न हो गया। श्रीमन्, उसके बाद उस पर कोई hearing नहीं हुई। हमारा कहना यह है कि चूंकि आनन्द शर्मा जी बोल चुके हैं, इसलिए उसके बाद और जिन-जिन सदस्यों ने अपने नाम दिए हैं या विभिन्न दलों के नेता इस पर बोलना चाहते हैं, तो उनकी बात पहले सुन ली जाए। चूंकि चेयर ने उस नोटिस को accept कर लिया है, इसलिए अब उस पर hearing के बाद मोशन मूव करना है।...**(व्यवधान)**...

SHRI SITARAM YECHURY (West Bengal): Sir, I want to say something.  
...(Interruptions)...

MR. DEPUTY CHAIRMAN: Let me make things clear. ...**(Interruptions)**... I will allow you. ...**(Interruptions)**...

SHRI SITARAM YECHURY: Sir, let me make the point. ...**(Interruptions)**... You assured me. ...**(Interruptions)**...

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

SHRI SITARAM YECHURY: Sir, after that there would be no opportunity. Allow me now. ...**(Interruptions)**...

MR. DEPUTY CHAIRMAN: Let me correct him. ...**(Interruptions)**... Let me correct Nareshji. ...**(Interruptions)**... Yechuryji, I am allowing you, but listen to me first. Let me correct him. I will allow you. ...**(Interruptions)**... Sit down; sit down. ...**(Interruptions)**...

श्री प्रमोद तिवारी: सर, पहले मेरा प्वाइंट ऑफ ऑर्डर तो सुन लीजिए। ...**(व्यवधान)**...

MR. DEPUTY CHAIRMAN: Now, please. *...(Interruptions)...* I will call you; sit down. *...(Interruptions)...* I will call you; sit down. *...(Interruptions)...* Sit down; sit down. *...(Interruptions)...* येचुरी जी, कृपया आप बैठिए। *...(व्यवधान)...* Look, I am not going to stop anybody from participating in the discussion, but I have to correct Mr. Naresh Agrawal. I have not allowed the motion to be moved. I just wanted to take a decision whether the motion should be allowed or not. For that, to help me take a decision, I heard Shri Anand Sharma. If you want, I would hear Mr. Yechury and hear you too, Mr. Agrawal; I have no problem.

SHRI NARESH AGRAWAL: Sir, my notice is there.

MR. DEPUTY CHAIRMAN: Yes; that is what I have said. I will allow you. *...(Interruptions)...* I agree. Even if notice is there... *...(Interruptions)...*

**श्री नरेश अग्रवाल:** श्रीमन्, यहां पर 'if you want' कहना सही नहीं है, क्योंकि यह हमारा नोटिस है। चूंकि हमारा नोटिस है, इसलिए उस पर बोलना हमारा राइट है। 'If you want' का क्या मतलब है? *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: That I accept. Even if notice is there, if you do not want, I cannot force you to speak. *...(Interruptions)...*

SHRI NARESH AGRAWAL: I want to speak.

MR. DEPUTY CHAIRMAN: Then I would allow you. Why create a problem?

**श्री नरेश अग्रवाल:** श्रीमन्, हम तो कोई problem create नहीं कर रहे हैं। *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: There is no issue between us. I will give you a chance. After Mr. Yechury, I would call you. But take it, I have not allowed the discussion.

SHRI SITARAM YECHURY: Okay, Sir.

MR. DEPUTY CHAIRMAN: I have not allowed the Motion. *...(Interruptions)...* I want to take a decision as to whether the Motion is to be allowed or not. *...(Interruptions)...*

SHRI V.P. SINGH BADNORE (Rajasthan): We have already conceded it. *...(Interruptions)...* Their demand has been conceded by us. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: That means that you have to be brief. Take less than three minutes. *...(Interruptions)...*

SHRI V.P. SINGH BADNORE: We have conceded their demand. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Take three minutes only. *...(Interruptions)...*

SHRI SITARAM YECHURY: Okay, Sir; I would abide by your ruling. I would take less than three minutes. ...(Interruptions)...

THE LEADER OF THE OPPOSITION (SHRI GHULAM NABI AZAD): Sir, there is a particular Motion on which Mr. Anand Sharma spoke. So, there are three hon. Members, or more than three; whosoever has given their names, you may please allow them to speak.

MR. DEPUTY CHAIRMAN: I am allowing them. I said I would allow them. But I have said, they would speak only for three minutes. ...(Interruptions)...

THE LEADER OF THE HOUSE (SHRI ARUN JAITLEY): Sir, I have a point of order. What are we discussing? ...(Interruptions)... We are discussing whether we should admit the motion or not! I am saying, kindly allow the motion and start the discussion. ...(Interruptions)... Why are we having the farcical discussion on whether a discussion should be allowed or not when the Government is supporting Mr. Anand Sharma's motion for discussion? ...(Interruptions)...

SHRI ANAND SHARMA (Rajasthan): That is very kind of you, but I am only ...(Interruptions)... आपने जो परिपाटी बनाई है, वही मैं कर रहा हूँ। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: So, you have a discussion. ...(Interruptions)...

SHRI ARUN JAITLEY: Sir, are we now going in for a discussion or are we giving Mr. Sitaram Yechury a television opportunity? ...(Interruptions)...

SHRI SITARAM YECHURY: Sir, ...(Interruptions)...

MR. DEPUTY CHAIRMAN: Mr. Yechury, clear that to him. ...(Interruptions)... I would like to hear your reaction to him. He is ready for a discussion. ...(Interruptions)...

SHRI SITARAM YECHURY: Sir, I would answer him. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: I would allow you too. ...(Interruptions)... नरेश जी, मैं आपको बुलाऊंगा। ...(व्यवधान)...

SHRI SITARAM YECHURY: Sir, what are we saying here? I would be very brief. I would not be making a speech but just making a point. ...(Interruptions)...

श्री अविनाश राय खन्ना (पंजाब) : सर, कृपया आप इस पर चर्चा शुरू कीजिए। ...(व्यवधान)...

SHRI SITARAM YECHURY: Sir, the Government says that they want a discussion. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: They are agreeable. ...(Interruptions)...

SHRI SITARAM YECHURY: Listen, Sir. ...(Interruptions)...

MR. DEPUTY CHAIRMAN: You all sit down. *...(Interruptions)...* I have allowed Mr. Yechury to speak. *...(Interruptions)...* Please sit down. *...(Interruptions)...* Sit down. *...(Interruptions)...* Treasury Benches, please don't create problem. *...(Interruptions)...* If you want the business of the House to run, why are you creating problem? *...(Interruptions)...*

श्री अविनाश राय खन्ना: सर, आप चर्चा शुरू कीजिए।...*(व्यवधान)*...

SHRI SITARAM YECHURY: Sir, my submission is following *...(Interruptions)...*

अल्पसंख्यक कार्य मंत्रालय में राज्य मंत्री, तथा संसदीय कार्य मंत्रालय में राज्य मंत्री (श्री मुख्तार अब्बास नकवी): जब लीडर ऑफ दि हाउस ने यह कह दिया कि हम चर्चा के लिए तैयार हैं *...(व्यवधान)*... हम चर्चा के लिए तैयार हैं, आप तैयार नहीं हैं। *...(व्यवधान)*... We are ready for discussion. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Only what Yechuryji is saying will go on record. *...(Interruptions)...*

SHRI MUKHTAR ABBAS NAQVI: Sir, we are ready for discussion. *...(Interruptions)...*

श्री आनन्द शर्मा: \*

MR. DEPUTY CHAIRMAN: Mr. Naqvi, simply because the Government is ready for discussion, it is not necessary that the Chair should allow the discussion. The Chair wants to hear the views of other Members also. *...(Interruptions)...* Sit down. *...(Interruptions)...* After hearing the views of other Members also, the Chair will take a decision. *...(Interruptions)...* Sit down. *...(Interruptions)...*

SHRI SITARAM YECHURY: Sir, let me speak. *...(Interruptions)...* You have given me a chance. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Mr. Yechury is having the floor. *...(Interruptions)...*

SHRI SITARAM YECHURY: You have given me the floor. *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Mr. Yechury is having the floor, nobody else. *...(Interruptions)...*

SHRI SITARAM YECHURY: Why is the Minister disrupting? *...(Interruptions)...*

MR. DEPUTY CHAIRMAN: Mr. Yechury is having the floor. *...(Interruptions)...*

SHRI SITARAM YECHURY: Why is the Minister disrupting? *...(Interruptions)...* Sir, in the intervening period, serious allegations of corruption have come. They

have come against the Minister for External Affairs here, come against some Chief Ministers of the States and these are serious allegations that have come. We are asking the Government of the day, let there be a high-level enquiry constituted to enquire into these serious allegations. And, on that basis, till that enquiry is over, let these people demit office or they are to be removed from office. Sir, that was the yardstick. Sir, when they were sitting there as the Opposition and when the Leader of the House today was the Leader of the Opposition and when the Leader of the Opposition today was the Minister in the then Government, from this very place, Sir, I supported the then Leader of the Opposition when he said that a discussion in the House is not a substitute for investigation. We are not investigators; investigation has to be done by the investigating agency and in order to ensure the impartiality of the investigation, the people against whom allegations are there should not remain in office and they have to resign. ...(Interruptions)... and then, a discussion is possible. ...(Interruptions)... for that, we kept this Parliament not functioning for one whole Winter Session in December, 2010. ...(Interruptions)...

**श्री मुख्तार अब्बास नक़वी:** सर, ये बिना बात का डिस्कशन कर रहे हैं। ...(व्यवधान)... ये खुद कन्फ्यूज्ड हैं। ...(व्यवधान)... अगर आप डिस्कशन चाहते हैं, तो डिस्कशन कीजिए। ...(व्यवधान)...

SHRI SITARAM YECHURY: Therefore, Sir, applying the same yardstick, order an investigation and till that investigation is completed, the Minister for External Affairs, the Chief Minister of Rajasthan and the Chief Minister of Madhya Pradesh should not remain in office.

**श्री मुख्तार अब्बास नक़वी:** उपसभापति जी, अगर चर्चा के लिए चर्चा हो रही है तो फिर सत्ता पक्ष से भी इस बारे में कोई बात करेगा। ...(व्यवधान)... उपसभापति जी, चर्चा होनी चाहिए या नहीं होनी चाहिए ...(व्यवधान)...

SHRI SITARAM YECHURY: They should be removed. Only then can we have a meaningful discussion. ...(Interruptions)... Discussion is no substitute for investigation. ...(Interruptions)...

**श्री मुख्तार अब्बास नक़वी:** उपसभापति जी, हम चर्चा के लिए तैयार हैं, इसके बावजूद ये चर्चा करने के लिए तैयार नहीं हैं। ...(व्यवधान)... इनकी नीयत चर्चा करने की नहीं है, सिर्फ यहाँ पर हंगामा करने की है। ...(व्यवधान)... आपकी नीयत चर्चा की नहीं है, आपकी नीयत हंगामा करने की है। आप केवल हंगामा करना चाहते हैं, आप डिस्कशन नहीं चाहते, डिस्टर्बेंस चाहते हैं। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Shri Naresh Agrawal ...(Interruptions)...

SHRI SITARAM YECHURY: My last point is that these are all matters of grave importance. ...(Interruptions)... Sir, these are matters of grave importance.

[Shri Sitaram Yechury]

...(Interruptions)... Mr. Deputy Chairman, Sir, by not extending the same yardstick that they demanded when they were in the Opposition ...*(Interruptions)*... By not accepting that, they are preventing a proper discussion in the House. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Okay, you have made your point. ...*(Interruptions)*...  
Mr. Naresh Agrawal ...*(Interruptions)*...

SHRI SITARAM YECHURY: A proper discussion in the House is today being prevented by the obduracy of the ruling Party. ...*(Interruptions)*...

**श्री मुख्तार अब्बास नक़वी:** सर, चर्चा शुरू कराइए। ...*(व्यवधान)*... हम अभी तैयार हैं।  
...*(व्यवधान)*...

SHRI SITARAM YECHURY: By preventing the discussion, they are disrupting the House. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Yechuryji, take your seat. ...*(Interruptions)*... Please take your seat. ...*(Interruptions)*...

**श्री मुख्तार अब्बास नक़वी:** यह पहला मौका है जब सरकार कह रही है कि चर्चा कीजिए और विपक्ष कह रहा है कि चर्चा नहीं होने देंगे। ...*(व्यवधान)*...

SHRI SITARAM YECHURY: They can accept a high-level enquiry and removal of them from their positions. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Now, Shri Naresh Agrawal. ...*(Interruptions)*...  
Yechuryji, take your seat.

SHRI SITARAM YECHURY: They should accept this. ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: Now, Shri Naresh Agrawal.

**श्री नरेश अग्रवाल :** माननीय उपसभापति जी, इस पीठ से हम लोग यही उम्मीद करते हैं कि जो रूलिंग पहले पीठ ने दी, वही रूलिंग अब भी पीठ देगी। श्रीमन्, जब नेता सदन, नेता प्रतिपक्ष थे, मुझे याद है कि उस समय यूपीए सरकार के मंत्रियों के ऊपर कुछ चार्जज लगे थे। उस समय इस सदन को नहीं चलने दिया गया था और हम सब ने यह मांग रखी थी कि जिनके ऊपर चार्जज हैं, जब तक वे इस्तीफा नहीं दे देते, तब तक सदन नहीं चलेगा। उस समय पूरा सत्र नहीं चला। आज वही रूलिंग अगर चेयर से न रही, वही व्यवस्था न रही, तो दो व्यवस्थाएं हो जाएंगी। इस समय नियम 267 के अंतर्गत हमारा नोटिस है और 267 में यह कहीं नहीं लिखा है कि लीडर ऑफ द हाउस की consent चाहिए। इसमें तो चेयर की consent चाहिए। श्रीमन्, हम लोगों ने जो नोटिस दिया है, वह इसलिए क्योंकि इस सरकार को साल भर हुआ, मथुरा में प्रधान मंत्री जी ने बोलते हुए गर्व से कहा कि, एक साल हो गया और हमारी सरकार के किसी मंत्री या अधिकारी के ऊपर कोई भ्रष्टाचार का आरोप नहीं लगा है। ...*(व्यवधान)*...

**श्री मेघराज जैन** (मध्य प्रदेश): नहीं लगा है।

**डा. चंदन मित्रा** (मध्य प्रदेश): नहीं है।

**श्री नरेश अग्रवाल** : अब जिस तरीके के आरोप उन पर लगे हैं, उस में कई केंद्रीय मंत्रियों पर आरोप लगे हैं। इसलिए अगर बिना इस्तीफा हुए सदन चलने दिया गया, तो यह उचित नहीं होगा। ..(व्यवधान).. वे पहले इस्तीफा दें, तब सदन चलेगा।

**श्री मेघराज जैन** : सर, यह कोई भ्रष्टाचार का आरोप नहीं है। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Yes, Mr. Tiwari, what is your point?

**श्री प्रमोद तिवारी** : माननीय उपसभापति जी, मैं एक बात कहना चाहता हूं कि सदन नियमों से व परंपराओं से चलता है और परंपराएं ही नियम बनाती हैं। मेरा सिर्फ यही कहना है कि ..(व्यवधान)..

SHRI ARUN JAITLEY: Sir, how many people are there from the Congress Party? ...*(Interruptions)*... Can you allow somebody from this side also? ...*(Interruptions)*...

MR. DEPUTY CHAIRMAN: I will do that. ...*(Interruptions)*... He has given notice. ...*(Interruptions)*...

**श्री प्रमोद तिवारी** : मैं सिर्फ एक बात कहना चाहता हूं कि कोड ऑफ कंडक्ट में रूल्स फ्रेमड हैं कि अगर किसी मंत्री को कार्य करना है, तो कैसे करेगा। हमारी विदेश मंत्री जी, एक भगोड़े को लंदन में ...(व्यवधान)...

**श्री मनसुख एल. मांडविया** (गुजरात): उसे भगाया किसने?

**श्री. वी. हनुमंत राव** (तेलंगाना): आप भ्रष्टाचार भी करते हो और शोर भी करते हो ...*(व्यवधान)*...

MR. DEPUTY CHAIRMAN: Mr. Hanumantha Rao, please sit down. ...*(Interruptions)*... Mr. Hanumantha Rao, don't do that. ...*(Interruptions)*...

**श्री प्रमोद तिवारी** : सर, मैं विनम्रतापूर्वक और दृढ़तापूर्वक कह रहा हूं कि विदेश मंत्री जी एक भगोड़े को, जिसका नाम मोदी है, मोदी को लंदन में रहने के लिए वहां से ट्राजिट वीजा देती हैं ...*(व्यवधान)*... वह ट्राजिट वीजा लेकर 15 ऐसे देशों में जाता है, जो कि काले धन के लिए विख्यात हैं। उन्होंने स्वीकार किया कि हां, मैंने दिया। उन्होंने स्वीकार किया कि मेरी बेटी वकील है, उन्होंने स्वीकार किया कि मेरा पति उनका वकील रहा है, उसे डाइरेक्टरशिप ऑफर हुई। यह सब स्वीकार हो गया, अब इस्तीफा देने में शर्म क्यों कर रहे हो? उनका इस्तीफा क्यों नहीं लेते? अब दूसरे केस पर आइए। मॉरीशस से 10 रुपए में शेयर खरीदकर 96,000 रुपए में फिर से खरीदा जाता है। यही नहीं एक प्रॉपर्टी में, एक नेता जोकि भारतीय जनता पार्टी की मुख्य मंत्री हैं, उनका भी शेयर लगा है और उस भगोड़े मोदी का भी लगा है। ...*(व्यवधान)*... उसके बाद भी शर्म नहीं है कि उनका इस्तीफा नहीं मांगा जा रहा है। मैं कहना चाहता हूं कि आज की शताब्दी का सब से भयंकर घोटाला करने के बाद भी आप लोग सत्ता में बैठे हुए हो।

THE MINISTER OF STATE OF THE MINISTRY OF POWER; THE MINISTER OF STATE OF THE MINISTRY OF COAL; AND THE MINISTER OF STATE OF THE MINISTRY OF NEW AND RENEWABLE ENERGY (SHRI PIYUSH GOYAL): Sir, what are they asking for? *...(Interruptions)...* What about the Bill? *...(Interruptions)...*

**श्री प्रमोद तिवारी :** ब्यापम घोटाले में सिर्फ अरबों रुपए नहीं लिए गए, उसमें 48 जानें लेने के दोषी भी आप हो। आप लोगों ने 48 लोगों की हत्याएं कराई हैं।

SHRI PIYUSH GOYAL: Sir, is this a political speech? *...(Interruptions)...* Is this a political speech, or, is he speaking on the motion? *...(Interruptions)...*

**श्री प्रमोद तिवारी :** मैं सिर्फ यह कहना चाहता हूं कि जब सब कुछ साबित हो गया है तो आप क्या चाहते हो? क्या सुषमा स्वराज जी का इस्तीफा इसलिए न लिया जाए, वसुंधरा जी का इस्तीफा इसलिए न लिया जाए क्योंकि आप जांच को प्रभावित करना चाहते हो? मेरी एक ही मांग है कि आज दूध का दूध और पानी का पानी हो जाए। जब तक सुषमा स्वराज जी इस्तीफा नहीं देतीं, जब तक शिवराज जी इस्तीफा नहीं देते, जब तक वसुंधरा जी इस्तीफा नहीं देतीं, तब तक चर्चा करने का कोई औचित्य नहीं है। *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: Mr. Tiwari, your time is over. *...(Interruptions)...*

**श्री प्रमोद तिवारी :** हम चर्चा के लिए तैयार हैं, लेकिन पहले ये तीनों इस्तीफा दें। *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: Please listen. *...(Interruptions)...* Let me take... *(Interruptions)...* What are you saying? *...(Interruptions)...* Go to your seat. *...(Interruptions)...* I am going to allow the motion. *...(Interruptions)...* See, I got three notices under Rule 267 in the morning. These notices are from Shri Anand Sharma, Shri Pramod Tiwari and Shri Naresh Agrawal. I heard all of them. *...(Interruptions)...* Do you want to speak from this side? *...(Interruptions)...* I am going to allow the motion. *...(Interruptions)...* Do you want to say something? *...(Interruptions)...* Yes, please. I am going to allow it. Please go back to your seats. *...(Interruptions)...* No, no. I am going to allow the motion. *...(Interruptions)...* You go back to your seats. *...(Interruptions)...* Please don't do this. *...(Interruptions)...*

**श्री अरुण जेटली:** उपसभापति जी, यह स्पष्ट है कि कांग्रेस पार्टी के सदस्य चर्चा नहीं करना चाहते, बल्कि वे केवल सदन को disturb करना चाहते हैं। हमारी पार्टी discussion के लिए सुबह भी तैयार थी, अब भी तैयार है और यह खेद का विषय है कि कांग्रेस discussion नहीं चाहती। *...(व्यवधान)...* इसलिए मेरा निवेदन है कि आप इस पर discussion कराइए और श्री आनन्द शर्मा जी को call कीजिए कि वे इस पर discussion को आगे बढ़ाएं। *...(व्यवधान)...*

MR. DEPUTY CHAIRMAN: See, from both the sides, there is demand for discussion. I am going to allow the motion. Shri Anand Sharma can move the motion. *...(Interruptions)...* Shri Anand Sharma can move the motion. *...(Interruptions)...* I



am calling Shri Anand Sharma to move the motion. ...(*Interruptions*)... Mr. Anand Sharma can move the motion. ...(*Interruptions*)... If Mr. Anand Sharma is not moving the motion, Mr. Pramod Tiwari can move the motion. ...(*Interruptions*)... What is this? You want a discussion; I am allowing the discussion. ...(*Interruptions*)... I am allowing the discussion. The Government has agreed to have a discussion. Why don't you go back to your seats? ...(*Interruptions*)... I am allowing the discussion. ...(*Interruptions*)... Why do you stay here? ...(*Interruptions*)... Mr. Naresh Agrawal, do you want to move? ...(*Interruptions*)... I am allowing the motion. ...(*Interruptions*)...

**श्री नरेश अग्रवाल:** उपसभापति महोदय, मैं प्रस्ताव करता हूँ कि जो मंत्रीगण भ्रष्टाचार में संलिप्त हैं, पहले वे इस्तीफा दे दें, उसके बाद चर्चा कराई जाए। ...(*व्यवधान*)...

MR. DEPUTY CHAIRMAN: The House is adjourned till 3.00 p.m.

*The House then adjourned at eighteen minutes past two of the clock.*

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*The House reassembled at three of the clock,*

MR. DEPUTY CHAIRMAN *in the Chair.*

### **ALLOCATION OF TIME FOR DISPOSAL OF GOVERNMENT LEGISLATIVE AND OTHER BUSINESS**

MR. DEPUTY CHAIRMAN: Announcement by the Chair. ...(*Interruptions*)...

**श्री नरेश अग्रवाल** (उत्तर प्रदेश): माननीय उपसभापति जी ...(*व्यवधान*)...

**श्री सत्यव्रत चतुर्वेदी** (मध्य प्रदेश): पहले इस्तीफा दो, उसके बाद बात करो। ...(*व्यवधान*)...

MR. DEPUTY CHAIRMAN: I have to inform Members that the Business Advisory Committee in its meeting held on the 21st of July, 2015, has allotted time for Government Legislative Business as follows:

#### **BUSINESS**

#### **TIME ALLOTTED**

Consideration and passing of the following Bills, as passed by Lok Sabha:—

The Juvenile Justice (Care and Protection of Children) Bill, 2015. Four hours

The Whistle Blowers Protection (Amendment) Bill, 2015. Three hours

Consideration and passing of the Negotiable Instruments  
(Amendment) Bill, 2015, after it is passed by Lok Sabha. Two hours

**MOTION FOR WITHDRAWAL****The Negotiable Instruments (Amendment) Bill, 2015**

MR. DEPUTY CHAIRMAN: Now, Shri Arun Jaitley to move the following Motion. ...(Interruptions)...

THE MINISTER OF FINANCE; THE MINISTER OF CORPORATE AFFAIRS; AND THE MINISTER OF INFORMATION AND BROADCASTING (SHRI ARUN JAITLEY): Sir, I beg to move:

That this House recommends to the Lok Sabha that the Lok Sabha do agree to leave being granted by the Rajya Sabha to withdraw the Bill further to amend the Negotiable Instruments Act, 1881, which was passed by the Lok Sabha on the 13th May, 2015 and laid on the Table of the Rajya Sabha on the same day.

*The question was put and the motion was adopted.*

...(Interruptions)...

SHRI JESUDASU SEELAM (Andhra Pradesh): Sir, what is this? ...(Interruptions)...

We do not want it. ...(Interruptions)...

अल्पसंख्यक कार्य मंत्रालय में राज्य मंत्री, तथा संसदीय कार्य मंत्रालय में राज्य मंत्री (श्री मुख्तार अब्बास नकवी): कोई इस्तीफा देने वाला नहीं है। ...(व्यवधान)... कोई इस्तीफा नहीं देगा। ...(व्यवधान)... आप इसकी चिंता मत करिए। हम देश के प्रति समर्पित भाव से काम करेंगे। आप अगर डिस्टर्बेन्स करना चाहते हैं, तो डिस्टर्बेन्स करते रहिए। हम डिस्कशन चाहते हैं। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: Mr. Hanumantha Rao, please don't do it. ...(Interruptions)... Mr. Hariprasad, please don't do it. ...(Interruptions)... Don't do it. ...(Interruptions)...

श्री मुख्तार अब्बास नकवी: कोई इस्तीफा नहीं। ...(व्यवधान)... आप चिंता मत करिए। कोई इस्तीफा नहीं है। जो चर्चा करनी चाहिए, वह चर्चा करिए। अगर चर्चा नहीं करनी है, चिक-चिक करनी है, तो आप चिक-चिक करते रहिए। ...(व्यवधान)...

MR. DEPUTY CHAIRMAN: The House stands adjourned till 11.00 a.m. on Wednesday, the 22nd of July, 2015. ...(Interruptions)... Adjourned upto tomorrow at 11.00 a.m.

*The House then adjourned at five minutes past  
three of the clock till eleven of the clock on  
Wednesday, the 22nd July, 2015.*



