



Indian Medical Association

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To,
The honorable Prime Minister
Government of India

Dated.02.10.2017

Respected Sir,

Indian Medical Association representing **over three lakhs modern medicine doctors** spread across one thousand seven hundred local branches and thirty-one state and territorial branches, requests the Prime Minister to solve the problems of the health sector.

The Health Sector including health care delivery, health parameters and medical education is far behind other sectors like agriculture, Information technology, Space technology, and Economic sector due to a **faulty Health Policy over the years**.

Our health parameters have a long way to go to reach the status of even developing countries like Sri-lanka, Bangladesh, Thailand, leave alone developed countries. **Doctor - Population ratio, Health Care spending, Private health sector and Medical Education are the issues which are to be solved to make health care accessible and affordable.**

We lack evidence based, data based Health Care Policy. Health care is not addressed from a public health point of view and emphasis is given to curative medicine only. **The social determinants of health like safe water, sanitation, nutrition and environmental factors are not addressed.**

Where ever the health parameters have improved it is due to **better health worker - population ratio rather than Doctor - population ratio.**

The policy makers feel that by deploying more Doctors including AYUSH Doctors to prescribe modern medicine, will improve health of the public which on the **contrary will be counterproductive and will leave public health and preventive aspect of health care unaddressed.**

Government of India spending on health is hardly 1.1% of GDP, which is one of the lowest in the world. Instead of Government spending more on health care, the burden of free health care is forced on the private medical sector, Eg: The Clinical Establishment Act and even Supreme Court Judgement make it mandatory for private clinical establishments to stabilize Trauma victims. Similarly, in case of natural disasters, Sexual abuse and other man-made disasters like fire, cracker explosions, spurious liquor tragedy etc. Private health sector is forced to give free treatment. **At the same time road safety fund collected through Vehicle Tax and Road Cess remain underutilized.**

The small and medium level hospitals which cater to 40% of the population are facing closure due to financial non-viability and Government's lopsided Health Policy. Government should promote the segment of health care providers by a policy of **AIDED HOSPITALS**. These small institutions run by doctors are situated in the neighbourhood and are present in villages and remote areas. They are friendly and easily accessible 24 x 7 at an affordable cost. **The violence and plethora of laws are pushing them to extinction.** They are national assets providing primary and secondary care. They help to keep the healthcare cost down. They deserve a special status and promotion.

Only Doctor Friendly Acts and Rules and Judgements can be Patient friendly. A Doctor should work in an environment which is friendly, relaxed, confidence building



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and free of violence to deliver his best to the patient, which is ensured even in the theatre of war. Now incidence of violence against Doctors and clinical establishments is the order of the day and **in spite of IMA's demand for a Central Act against violence, it remains unaddressed by the Government.**

Another proof of Government's lopsided policy is the PCPNDT Act, Female feticide occurs because of social and economic reasons. To reduce female feticide not only sex determination and female feticide but even clerical errors attract criminal provisions as per PCPNDT Act. **Clerical errors and minor noncompliance should not attract criminal provisions of the PCPNDT Act.** IMA demands amendment of the Act to this extent. IMA even suggest that Sex of the foetus should be determined and tracked so that the real issues and persons behind female Feticide can be identified and appropriate action taken. IMA strongly feels that without solving the social and economic reasons behind female feticide/infanticide, the proper male - female ratio cannot be maintained. **PCPNDT Act is a medical solution for a socio-economic problem, which cannot solve the issue.**

Double standard in award of compensation on medical negligence /accidental death. There is capping of compensation for accidental death like flood, fire, road - rail and air accidents, the amount of compensation range from RS.2,00,000 to 10,00,000. There is also capping for drug trial related mortality and tubectomy failure or death. But in the case of medical negligence / treatment related mishaps the compensation awarded is alarmingly increasing to crores. **IMA demands that the double standard in award of compensation should be eliminated and compensation on medical negligence should also be capped.**

The government is debating the need to abolish the Medical Council of India and replace it with a 29-member National Medical Commission. If NMC is enacted, it will allow non MBBS doctors to practise modern medicine, a step which may be detrimental to the society. **Schedule-IV of NMC which allows lateral entry of other medical practitioners into the modern medical registry will be detrimental to the health of the people.**

Medical students are against being asked to appear for an exit exam after passing MBBS. **The Indian Medical Association is also not in favour of "NEXT". An Inter-Ministerial Committee was constituted by the Government to examine the issues raised by IMA on 13th November, 2015. The committee consisted of:**

1. Joint Secretary (subject expert), Ministry of health & Family Welfare;
2. Joint Secretary, Ministry of Law & Justice
3. Joint Secretary, Department of Consumer Affairs
4. Joint Secretary, Ministry of Home Affairs
5. A representative from MCI
6. Three representatives from IMA

The terms of reference of the Committee were as follows:

1. Frequent instances of assault on doctors and Clinical Establishments across the country and the need for a strong Central Legislation to prevent it.
2. Urgent amendments in the PC & PNDT Act to ensure that strict penalties are imposed only on actual acts of sex determination or female feticide and not for clerical errors in the maintenance of registers. The IMA is also of the view that registration should be of ultrasound machine and not of doctors not doing pelvic ultrasound.



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3. Single doctor establishments should be exempted from the purview of the Clinical Establishments Act. Establishments that already have entry level NABH accreditation should be exempted from the mandatory pre-registration inspection.

4. Suitable amendments should be made in the Consumer Protection Act for capping the compensation amount as the current compensation practice, apart from being very high at times, is also in favour of people falling under a higher income bracket.

5. Non-MBBS and non-BDS doctors should not be allowed to prescribe medicines under the modern system of medicine

6. Withdrawal of National Medical Council bill and EXIT proposal (NEXT).

The inter-ministerial committee had several sittings and arrived at mutually agreed formula. The health ministry also recommended and forwarded the committee's recommendations on the 5 issues mentioned above to concerned ministries for action.

We are thankful to Shri J P Nadda, Hon'ble Minister of Health & Family Welfare, Government of India, Shri C K Mishra, Secretary and Shri Sanjeeva Kumar, Additional Secretary for favourably listening to our demands and putting them in process.

IMA has been on **agitation path for implementation of the recommendations** of the inter-ministerial committee and other demands for the past one year. As an **outburst of anger and frustration more than 10,000 doctors** marched from Rajghat on 06.06.2017 and over 90,000 participated digitally in Dilli Chalo Protest.

We request you that our issues be resolved in a time bound manner. The increasing violence against doctors, criminal prosecution of doctors and uncapped compensation are serious issues and need your immediate intervention.

We ask your help to restore the nobility of the profession to serve the society better. We also request you to evolve an evidence based health policy to solve the issues mentioned above to protect the health of the public.


With warm regards

Yours sincerely,

Dr. K. K. Aggarwal
National President IMA

Dr. R. N. Tandon
Hony. Secretary General IMA


Dr. P.K. Gupta
President IMA Lucknow


Dr. J.D. Rawat
Hony. Secretary IMA Lucknow