

**MINISTRY OF HEALTH AND FAMILY WELFARE**

**Review of Progress of all AIIMS**

[Action taken by the Government on the observations/recommendations contained in the 12<sup>th</sup> Report (Seventeenth Lok Sabha) of the Committee on Estimates]

**COMMITTEE ON ESTIMATES  
(2022-23)**

**TWENTY FOURTH REPORT**

---

**(SEVENTEENTH LOK SABHA)**



**LOK SABHA SECRETARIAT  
NEW DELHI**

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**(2022-23)**  
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(Presented to Lok Sabha on 21 March, 2023)



**LOK SABHA SECRETARIAT**  
**NEW DELHI**

**March, 2023 / Phalguna, 1944 (Saka)**

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## **COMPOSITION OF THE COMMITTEE ON ESTIMATES (2022-2023)**

**Shri Girish Bhalchandra Bapat – Chairperson**

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3. Shri Kalyan Banerjee
4. Shri Sudarshan Bhagat
5. Shri Harish Dwivedi
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23. Shri Francisco Cosme Sardinha
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29. Shri Shyam Singh Yadav
30. Shri Parvesh Sahib Singh Verma

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- |                          |                      |
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| 2 Shri Muraleedharan. P  | Director             |
| 3 Shri Balram Sahu       | Deputy Director      |

## **INTRODUCTION**

I, the Chairperson of the Committee on Estimates (2022-23) having been authorized by the Committee to present the Report on their behalf, do present this Twenty-Fourth Report on action taken by the Government on the recommendations contained in the 12<sup>th</sup> Report of the Committee (2021-2022) on the subject 'Review of Progress of all AIIMS' pertaining to the Ministry of Health and Family Welfare.

2. The 12<sup>th</sup> Report of the Committee on Estimates (2021-2022) was presented to Lok Sabha on 21 December, 2021. The Government furnished their replies indicating action taken on the recommendations contained in the 12<sup>th</sup> Report on 4th August, 2022. The draft Report was considered and approved on 16 March, 2023, by the Committee.

3. An analysis of action taken by the Government on the recommendations contained in the 12<sup>th</sup> Report of the Committee on Estimates is given in Appendix-II.

**NEW DELHI**  
**16 March, 2023**  
**25 Phalgun, 1944 (Saka)**

**GIRISH BHALCHANDRA BAPAT**  
**CHAIRPERSON**  
**COMMITTEE ON ESTIMATES**

## CHAPTER - I

### REPORT

This Report deals with the action taken by the Government on the Observations/Recommendations of the Committee contained in their Twelfth Report (Seventeenth Lok Sabha) on the subject "Review of Progress of all AIIMS" pertaining to the Ministry of Health and Family Welfare.

2. The Twelfth Report was presented to Lok Sabha on 21 December, 2021. It contained 18 Observations/Recommendations. Action Taken Replies of the Government in respect to all the Observations/Recommendations have been received from the Ministry of Health and Family Welfare.

3. Replies to the Observations/Recommendations contained in the Report have broadly been categorized as under:-

(i) Observations/Recommendations which have been accepted by the Government:

Recommendation. Para No. 1,4,5,6,7,9,13,14,16,17,18

**Total -11  
(Chapter-II)**

(ii) Observations/Recommendations which the Committee do not desire to pursue in view of Government's reply:

Recommendation. Para No. 10

**Total -1  
(Chapter-III)**

(iii) Observations/Recommendations in respect of which Government's replies have not been accepted by the Committee:

Recommendation. Para No. 2,3

**Total -2  
(Chapter-IV)**

(vi) Observations/Recommendations in respect of which final replies of Government are still awaited:

Recommendation. Para No. 8,11,12,15

**Total -4  
(Chapter-V)**

4. The Committee desire that Action Taken Notes in respect of the Observations/Recommendations contained in Chapter-I and final Action Taken Reply in respect of the recommendations contained in Chapter –V, for which interim replies have been given by the Government, may be furnished to them within six months of the presentation of this Report to the House.

5. The Committee will now deal with the Observations/Recommendations which require reiteration or merit further comments.

### **Observations/Recommendations (Para No. 2)**

6. In their recommendation contained in the original 12<sup>th</sup> Report, the Committee had stated as under:

#### **Need for bringing parity in the status of all new AIIMS**

“On the issue of differences between the status of AIIMS, New Delhi and other six new AIIMS, the Committee are informed that for years of their operation, these AIIMS remained outside the ambit of AIIMS Act and were governed by a Central Apex Society, therefore, some of the features of these AIIMS are different from AIIMS, New Delhi. For example, in AIIMS, New Delhi, some departments have been delegated greater financial and administrative powers in different centers and have their own administrative and procurement officers like Rajendra Prasad Centre for Ophthalmology, Cardio & Neuro Centre and National Cancer Institute. This is not the case with other AIIMS. In AIIMS, New Delhi there is a Director and Medical Superintendent, and a centralized structure is there while in other AIIMS there are Executive Director and Head of Departments. In AIIMS, New Delhi, over the years, there are now 31 Specialties and 20 Super Specialties. Here teaching, learning of MD, MS, DM, MCH and patient care services are done. However, in the new upcoming AIIMS, there are 17 Super Specialties and 18 Specialties. AIIMS, New Delhi conducts Bachelors Programme (UG course) for five Para Medical Sciences and nine M.Sc. courses which is not the case with most other AIIMS. AIIMS, New Delhi also runs 33 one-year Fellowship Courses in various Specialities which is not the case with other AIIMS. AIIMS, New Delhi usually follows a time period of a month for applications to be received in respect of advertisements for vacant faculty positions whereas in other AIIMS, there is a system of rolling or running advertisements with one-year validity. The Committee strongly feel that when all the new AIIMS are being governed by the AIIMS Act 1956 as amended in the year 2012, there should not be any differences in terms of



delegated financial and administrative powers for procurement of equipment and in terms of having specialties and super specialties teaching in AIIMS, New Delhi and other AIIMS. If the differences will be continuing, people will continue to rush to AIIMS New Delhi instead of going to other AIIMS. As a result, the objective of PMSSY Scheme for correcting regional imbalances in the availability of affordable/reliable territory healthcare services will remain a distant dream. Therefore, the Committee strongly recommend that the Ministry of Health and Family Welfare should take necessary measures to treat all the AIIMS at par with AIIMS, New Delhi.”

**7. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“Financial and Administrative powers of different functionaries are defined in the AIIMS, Regulations, 2019, which are uniformly applicable to all the AIIMS. Financial powers of Directors of AIIMS have been delegated with the approval of Governing Body / Institute Body of respective AIIMS. Keeping in view a much bigger scale of operations of AIIMS, New Delhi as compared to new AIIMS under PMSSY, the delegated financial power of Director, AIIMS, New Delhi is higher. As regards new AIIMS having lesser number of Specialty and Super-specialty Departments than AIIMS, New Delhi, it is stated that AIIMS at New Delhi has been functioning for more than six decades and has established itself as a premier Institute in the country and internationally. The number of super-specialty and super-specialty Departments in the Institute has grown over the years with advancements in medical sciences, availability of super-specialists and with the approval of the competent bodies of the Institute. As far as new AIIMS are concerned, there is provision for 18 specialty and 17 super-specialty Departments as part of setting up of the Institute. However, as the Institutes grow and depending upon the availability of super-specialists, these Institutes can also set up more Departments with the approval of their competent bodies.”

**8. The Committee in their original report, had recommended that there should not be differences between AIIMS, New Delhi and other AIIMS in terms of delegated financial and administrative powers for procurement of equipment and in terms of having Specialties and Super Specialties teaching. The Ministry has informed in their reply now that AIIMS, New Delhi has so grown because it has been functioning for more than six decades and established itself as a premier Institute in the country and internationally. It has been further stated that as the other AIIMS grow, those can also set up more departments. The Committee are of the view that when all AIIMS are governed through the same enactment namely**

**amended AIIMS Act, there should be similarity in terms of delegated financial and administrative powers for procurement of equipment and in terms of having Specialties and Super Specialties in all AIIMS so that new AIIMS could also bring themselves at par with AIIMS, New Delhi. Since 6 AIIMS are now nearly 11 years old, the Committee desire to be apprised of the Specialties added later for each of those, so as to know their actual growth in terms of patient services, as well as in the financial powers of their heads, if any.**

### **Observations/Recommendations(Para No. 3)**

#### **Need for parity in the post of Director across all AIIMS**

9. In their recommendation contained in the original 12<sup>th</sup> Report, the Committee had stated as under:

“The Committee are surprised to note that except for AIIMS, New Delhi which is headed by Director (with the age limit of 65) while other new 16 AIIMS are being headed by Executive Director (with the age limit of 70) who is in-charge of the institution as a whole. The Committee are informed by the representatives of the Ministry of Health and Family Welfare during oral deposition as well as in their written replies that Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), was announced on 15th August, 2003 to establish six new hospitals with modern facilities like those available at AIIMS, New Delhi. In pursuance of this announcement, a proposal was taken to the Expenditure Finance Committee(EFC) in November 2004. The EFC approved the setting up of six AIIMS-like apex healthcare institutes in the States of Bihar at Patna, Chhattisgarh at Raipur, Madhya Pradesh at Bhopal, Odisha at Bhubaneswar, Rajasthan at Jodhpur, and Uttarakhand at Rishikesh. The EFC also approved formation of a Central Apex Society under societies Registration Act, with the responsibility for establishing and running these six AIIMS-like institutions. After obtaining the approval of the EFC, a proposal was taken to the Cabinet Committee on Economic Affairs in March 2006 and CCEA approved six AIIMS-like institutions as well as formation of a Central Apex Society, for establishing and running these institutions. While approving the Revised Cost Estimates(RCE), because of cost escalation, a proposal was taken again to the Cabinet in February 2010. While approving the RCE, the Cabinet also underline the role of the Central Apex Society in establishing and running these six AIIMS-like institutions. Therefore, from 2006 to September 2012, these AIIMS-like institutions were not part of the AIIMS Act and existed outside it, governed by a Central Apex Society. In September 2012, there was an amendment in the AIIMS Act, which was notified. This amendment incorporated these new AIIMS-like institutions in Section 27 (a) of the Act and provided

that all provisions of the Act shall apply to these institutions also. Once a decision was taken in September 2012 to make these six AIIMS as part of the amended AIIMS Act, the Central Apex Society ceased to exist. The Committee note that Article 11 of AIIMS Act provides that there shall be a Chief Executive Officer (CEO) of the Institute who shall be designated as the Director of the Institute. Section 31 of AIIMS Regulations, 2019 further provides in this regard that the Director shall have a term of five years from the date of assumption of charge of the post or till he attains the age of sixty five years, whichever is earlier.

In the meanwhile, with the aim of expeditious operationalization and to attract reputed faculty from AIIMS, New Delhi and other Institutes of National Importance (INIs), as well as other premier Institutions, to head new and upcoming AIIMS, it was a policy decision, decided in November 2018 with the approval of Department of Expenditure and Hon'ble Minister for Health & Family Welfare to have a post of Executive Director (ED) to operate on either / or basis with the post of Director, who will act as CEO of the Institute. CIB [Central Institute Body (Empowered Committee) of the new AIIMS] had approved two designations for new AIIMS. One is Director where the provision of 65 years remains as stipulated in the Act and the other nomenclature is 'Executive Director' with the provision of 70 years.

On being asked to clarify whether there is an enabling provision in the Act to empower the Government to take such decision, the Committee are informed that Section 11(4) of the Act says, "Subject to such rules as may be made by Central Government in this behalf, the Institute may appoint such number of other officers and employees as may be necessary for the exercise of its powers and discharge of its functions and may determine the designation and grades of such officers and employees." The Committee strongly feel that other officers and employees cannot be above the Director. The Secretary Ministry of Health in his candid submission before the Committee has stated that the Act does not make a reference to Executive Director.

The Committee note that the Act does not make a reference to Executive Director and the decision has been taken after taking the consent of CIB as well as the consent of Hon'ble Minister for Health & Family Welfare and the Ministry of Finance and Department of Expenditure with the aim of expeditious operationalization of the new AIIMS and to attract reputed faculty from AIIMS, New Delhi and other Institutes of National Importance (INIs), as well as other premier Institutions, to head new and upcoming AIIMS. The Committee acknowledge the urgency of the decision taken at the highest level at the time of setting up of new AIIMS but at the same time wish to emphasize that since 17 years has been completed after the approval of EFC for setting

up of new AIIMS and the Ministry have enough experience, now they must strictly follow the provision of the Act for appointment of Director in each new AIIMS instead of appointment of Executive Director to head the new AIIMS. Further, when in any Institute of national importance in India including AIIMS Delhi, there is no provision of appointing any person for heading administrative posts above 65 years of age, the Committee wish to reemphasize that the provision of the Act of parliament should be maintained across all AIIMS and there should not be any scope of difference among them. The Committee would like to see AIIMS as an epitome of medical excellence which shall only be possible with experienced talents coupled with physical viability; which does not seem viable with an age limit of 70 years.

The Committee strongly feel that the Ministry should not overlook the fresh talent and the career opportunities of the existing professors for the appointment to the post of Director in new AIIMS. Henceforth, the Committee strongly recommend that the Ministry of Health and Family welfare to take all measures not to make any compromises in the qualities of new AIIMS and to ensure the objective of the PMSSY i.e to augment quality medical education in the country and strictly adhered to the provision of the AIIMS Act.”

**10. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“Presently, AIIMS at Jodhpur, Raipur, Nagpur and Mangalagiri are headed by Directors as the Chief Executive Officers (CEO). As has been informed to the Committee earlier, with a view to attract reputed faculty from AIIMS, New Delhi and other Institutes of National Importance (INIs), as well as other premier Institutions, to head new and upcoming AIIMS, it was decided with the approval of Department of Expenditure and Hon’ble Minister for Health & Family Welfare to have a post of Executive Director (ED) to operate on either / or basis with the post of Director, who will act as CEO of the Institute. In the case of ED, the appointment can be upto maximum age of 70 years, with the upper age limit for eligibility for consideration being 67 years. The manner of selection of ED however would be the same as stipulated for the post of Director. Also, the eligibility criteria in respect of qualification and experience for consideration for appointment as ED will be the same as the post of Director.

Recommendation of the Committee has however been noted. Further, as stated above, post of Director / Executive Director is to operate on either / or basis, giving the Ministry to flexibility to appoint a Director as Chief Executive Officer of the Institute.”

11. While holding the view that the Ministry should not overlook fresh talent and the career opportunities of the existing Professors for the appointment to the post of Director in the new AIIMS as well as physical viability of candidates of a comparatively younger age, the Committee had noted that except for AIIMS, New Delhi, which is headed by a Director (with an age limit of 65 years), the other 16 new AIIMS are being headed by an Executive Director (with an age limit of 70 years) as in-charge of the institution. The Action Taken reply of the Ministry stated that they have already informed the Committee regarding a policy decision taken with the approval of the Department of Expenditure and the Hon'ble Minister for Health & Family Welfare regarding the post of Executive Director. The Ministry have also justified it by stating that it is meant to attract reputed faculty from other premium institutions. As many AIIMS have become functional over the time, the Committee desire to be apprised of faculty/EDs, AIIMS-wise, above the age of 60 years with their respective fields of expertise alongwith experience and decorations, if any, who have joined those AIIMS, as a result to the reported policy decision about CEOs/Directors/EDs of these institutions.

#### **Observations/Recommendations (Para No. 5)**

##### **12. Proposal to set up more AIIMS-like institutions in the country**

“The Committee observe that the Ministry has plans to set up AIIMS in each State in a phased manner. The Ministry has received requests from Karnataka, Kerala, Goa, Tripura, Sikkim, Mizoram and Manipur for setting up AIIMS-like institutes in their States. During the course of examination, the Committee are informed that keeping in view the cost benefit analysis, presently, apart from AIIMS Guwahati, the Ministry is not actively considering any other AIIMS in the North East. The Committee note that the State Government of Kerala has identified four places viz. Thiruvananthapuram, Nettukaltheri, which is very near to the airport; the land in industrial estate in Calicut, the northern part of Kerala; Kottayam near Medical College; and HMT land, Kalamassery, but the request for setting up of AIIMS is still pending. During cross examination, the Ministry informed the Committee that it has requested the Ministry of Finance to convey 'in-principle' approval for setting up of AIIMS in Kerala. The Committee hope that the Ministry of Health and Family Welfare and Ministry of Finance, Department of expenditure will take proactive steps for setting up of AIIMS like institution in each State in the next phase of PMSSY and include it in the 15<sup>th</sup> Finance Commission Report. The Committee would like the Ministry to reconsider the requests from other States and take necessary steps to set up an AIIMS like institute in each State in a time bound manner.”

**13. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“Recommendation of the Committee has been noted and matter will be pursued with the Ministry of Finance.”

**14. The Committee had observed that the Ministry has plans to set up AIIMS in each State in a phased manner and that they have received requests from Karnataka, Kerala, Goa, Tripura, Sikkim, Mizoram and Manipur. In the case of the North Eastern region, the Ministry is statedly not actively considering any other AIIMS apart from Guwahati keeping in view of the cost-benefit analysis. The Committee would desire to know whether the Ministry has plans to upgrade RIMS or any other medical institutions in the NE region in view of the fact that only one AIIMS in Guwahati cannot be accessible/sufficient to all NE States’ residents for Specialty/ Super Specialty treatments. In the case of Kerala, the Committee are happy that the Ministry has requested the Ministry of Finance to convey ‘in-principle’ approval for setting up AIIMS and have also stated that the matter will be pursued with the Ministry of Finance. As the matter is still pending, the Committee further reiterate that an AIIMS in Kerala needs to be set up early since State Government has already offered land near airport for the same. AIIMS in other States should also be considered on priority basis and the details of steps taken by the Ministry in setting up of AIIMS like institutes or upgradation of existing institutes in States, whose applications are pending, should be furnished to the Committee within six months of the presentation of this Report.**

#### **Observations/Recommendations (Para No. 6)**

##### **Need for fixing up of timelines for each step in the guidelines for setting up of new AIIMS**

15. In their recommendation contained in the original 12<sup>th</sup> Report, the Committee had stated as under:

“The process of setting up of a new AIIMS at any place in India initiates with its announcement by the Finance Minister followed by offer of land site by the concerned State Government where the AIIMS is proposed to set.

The Committee note that initially the Ministry had not formulated any guideline for the implementation of the PMSSY and was guided by instructions issued from time to time and decisions taken by the Central Project Monitoring Committee (PMC) on case to

case basis. This resulted in various ad-hoc decisions taken with respect to fund management, selection of consultants, assignments of project task, award of management of contracts. In the year 2018, a two-member Committee was constituted to draw up scheme guidelines for PMSSY with the experience and learning from prior cases.

The Committee are informed that the Ministry had circulated the draft “Guidelines for implementation of PMSSY” to all stake holders i.e. State Governments for their input on the same. Report from some of the States has been received. Reminder has been issued to all the State Governments by the Secretary, MoHFW to expedite comments in this regard. However, based on the learning from implementation of the Scheme, the process of conceptualisation, executing and functionalization of project have been streamlined.

The Committee note that now there is a well-defined check list/standard documentation for process of streamlining on setting up of AIIMS. However, the Committee are pained to note that even after 18 years of announcement of PMSSY, the inputs from some of the State Governments on the draft guidelines for implementation of PMSSY are still awaited and no time line has been fixed for each step mentioned in the check list for establishment of new AIIMS as detailed in Chapter III. The Committee strongly feel that without prescribing the time lines in each action point in the guidelines, the Ministry would not be in a position to monitor the progress effectively. Therefore, they desire the Ministry to fix prescribed timelines for each action plan and take concerted steps to adhere the prescribed timelines. They may be apprised of the steps taken in this regard.”

**16. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“Draft Guidelines for Implementation of Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) seeking comments/inputs of all Stakeholders were circulated vide letter dated 17th January, 2020 requesting to provide their valuable comments/feedback on the proposed Guidelines. The comments from four states namely Bihar, Madhya Pradesh, Odisha and Sikkim have been received. However, the comments from majority of the stakeholders have not been received so far.

Though it was followed up with reminders, the responses have been received from very few States. One possible reason for this could be the COVID Pandemic, management of which has been the main focus of Health Departments at the Union as well as State levels. Meanwhile, a reminder dated 6th April,2022 has been issued to the all the States

/Union Territories (except Bihar, Odisha, M.P. and Sikkim as their comments received) and new AIIMS to send their comments by 30th April,2022 so that the Ministry could finalize the Guidelines for PMSSY.

It is, however, worth mentioning that broad contours of the projects undertaken under PMSSY are well defined, which are as under: -

**Setting up of new AIIMS inter alia involves:**

1. 750 or 960 bedded hospital
2. 18/1-7 Specialty/Super-Specialty departments
3. 100 MBBS/ 60 Nursing seats
4. Focus on PG Education

**Upgradation of GMCs involves:**

1. Creation of Super-specialty departments - ranging from 8 to 10
2. Additional 150-200 beds
3. Around 15 new PG seats
4. Average cost: Rs. 200 crore - shared 60:40 between Centre and States
5. HR and running cost to be provided by the State Govt.

In the MoHFW the following indicative timelines for various stages for setting up of a new AIIMS have been envisaged, subject to project specific variations:

S.No.	Action	Indicative Timeline
1	<b>Announcement of new AIIMS for a particular State</b>	<b>D</b>
2	Letter sent from MoHFW to concerned State Government for offering three or four alternate sites with encumbrance free land measuring about 200 acres. While offering sites, the State Government to furnish commitment for four lane connectivity, water and electricity connection to cater for the requirement of proposed establishment ,water drainage system etc.	D+1 Week
3	<b>Details of site and commitment of State Govt. received</b>	<b>E</b>
4	Evaluation of site as per Challenge Method after receiving details of site from State Government (including site inspection, constitution of Committees as per Challenge Method) and submission of report to Hon'ble HFM	E+ 5 Weeks



5	<b>Approval of site for establishment of AIIMS by Hon'ble HFM</b>	<b>F</b>
6	Appointment of Agency for Pre-Investment Work	F+ 1 week
7	Preparation of Project Report by Agency, preparation of EFC Note in the Ministry, Submission of Note to Ministry of Finance for its concurrence	F + 4 Weeks
8	<b>Concurrence of EFC</b>	<b>G</b>
9	Preparation of Cabinet Note in the Ministry and circulation to all stakeholders	G+1 week
10	<b>Approval of the Cabinet</b>	<b>H</b>
11	Selection of Executing Agency to carry out the main work	H+8 Weeks
12	Award of work to EPC Contractor by Executing Agency [Issuance of RFP for appointment of Architectural Consultant for preparation of Master Plan & Concept Design for proposed AIIMS Selection and award of consultancy assignment to Architectural Consultant, Master Plan and Layout finalization, Detailed drawing, technical sanction and floating of tenders for construction, Award of work]	H+40 Weeks
13	Construction Activities	H+150 Weeks

17. In their original report, the Committee had noticed that no timelines had been fixed for each step mentioned on the check-list for establishment of new AIIMS. They had, therefore, recommended prescribing timelines for each action plan in the guidelines to monitor the progress effectively. In their reply, the Ministry have informed that the projects undertaken under PMSSY are well-defined and indicative timelines are mentioned subject to project-specific variations, which are furnished with their reply. From it, the Committee observe that approximately 4 year time, excluding time involved in the other administrative processes, has been indicated for setting up of a new AIIMS. The Committee, however, see that some of the new 16 AIIMS established between 2015-2022, are yet to be fully functional. Hence, they expect that timelines fixed would be adhered to and further steps be taken to reduce delays with regular real time monitoring and on-time approvals. The Committee also expect all efforts to be made to finalize the “Guidelines for implementation of PMSSY”.

### **Observations/Recommendations (Para No. 7)**

18. In their original recommendation, the Committee had stated as under:

“The Committee note that SARAL, a module based online platform, has been developed by AIIMS, New Delhi which allows faculty to upload educational content related to their lectures for students to access. But the Committee is astonished to note that SARAL is just specific to AIIMS, New Delhi. No other AIIMS have got any well defined module (as SARAL) of their own to impart medical education. The other AIIMS conduct training programme for its own staff including nurses and faculty as well as participants from other medical colleges for up gradation of their skills. The Ministry admitted that the suggestion of the Committee for the extensive use of e-learning has been noted for its implementation. The Committee are of the firm opinion that the issue of medical education has to be given a thorough thought well before hand and recommend extensive use of e-learning as the need of the hour and also for the future. The Committee would like to urge the Ministry of Health and Family Welfare to issue instructions/guidelines to all AIIMS to draft and put in place a comprehensive module for online medical education for benefitting all categories of staff. The Committee are of the view that AIIMS, New Delhi should take a lead and help other AIIMS to develop a module of their own with the inbuilt feature of integration with different modules of other AIIMS as well.”

19. **In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“Steps have been taken by other AIIMS also in the direction of online medical education. AIIMS, Raipur is adopting the SARAL, the module based online platform, developed by AIIMS, New Delhi. AIIMS, Bhubaneswar is in the process of developing online learning modules for practical and clinical classes for UG students naming the project as “Medsim 2”. This project is in collaboration with C-DAC, Trivandrum and Amrita Vishwa Vidyapeetham. AIIMS, Jodhpur is also using LMS (Learning Management System) for Executive program in Public Health Policy, Leadership and Management by School of Public Health both for UG and PG Courses. AIIMS, Rishikesh has been using Microsoft Teams application for online medical education, and the educational content related to lectures/classes are being shared through the Institute website. AIIMS, Patna is also planning to start SARAL module for faculty Members, teaching staffs and Students. Learning Management System is in the process of being implemented in AIIMS at Bathinda and Raebareli on pilot basis.”

20. The Committee had noted that SARAL, a module based online platform, is being used for medical education at AIIMS, New Delhi. The new AIIMS conduct training programmes for their staff/faculty at other medical colleges for upgradation of their skills. Hence, the Committee had urged the Ministry to issue instructions/guidelines to all AIIMS to draft and put in place a comprehensive module for online medical education for the benefit of all categories of staff and suggested that AIIMS, New Delhi should take a lead in developing modules in collaboration with other AIIMS. Accepting the recommendation of the Committee, the Ministry, in their reply, have informed that AIIMS, Raipur is adopting SARAL and similar other modules are being adopted by other AIIMS at Bhubaneswar, Rishikesh and Patna. The Committee are glad to note that AIIMS, Raipur has adopted the SARAL developed by AIIMS, New Delhi. The Committee strongly feel that all AIIMS should be encouraged to adopt the SARAL to maximize the usage of educational content provided by AIIMS, New Delhi. The Committee hope that the module developed by an AIIMS (other than New Delhi) has an inbuilt feature of integration with the modules being adopted by any other AIIMS.

#### **Observations/Recommendations (Para No. 8)**

##### **Need for handing over encumbrance free land for new AIIMS**

21. In their original recommendation, the Committee had stated as under:

“The Committee observe that the land for setting up of AIIMS is required to be provided by the concerned State Government. Requirement of land for setting up of new AIIMS is about 200 acres. The Committee are informed that the site offered by the State Government for AIIMS at Darbhanga is low lying and the site already has some construction like water tank, power station, post office, BSNL yard & office and Police Stations. Further, the site of AIIMS, Darbhanga was finalized subject to certain conditions to be fulfilled by the State Government. The Committee are informed that the setting up of AIIMS in Manethi, Haryana was approved by Union Cabinet on 28.02.2019 at a cost of Rs 1299 Crore. However, forest clearance for construction of AIIMS at the identified site could not be obtained by the State Govt. In the matter of AIIMS, Manethi, the Committee observe that an alternate land parcel measuring approx 175.85 acre in a village adjoining Manethi has been identified and the process for consent purchase of this land has been initiated. On the issue of monitoring the clearance of land for construction of AIIMS, the Committee are informed that there are two mechanisms for monitoring. One is at the level of the Ministry which is headed by the Additional Secretary and Financial Advisor in the Ministry of Health and Family Welfare and it has

the Joint Secretary of the concerned State Government as well as the executing agency to whom the work has been awarded. The other mechanism is at the level of the Prime Minister's Office. These mechanisms review the position of not only the transfer of land but also the progress of construction. After such regular monitoring there has been progress in some cases. Keeping in view the delay in completion of new AIIMS which ranges from 2 to 12 years, the Committee wish that the existing two mechanisms to review the progress of new AIIMS will function in a pro-active manner in expediting the handover of encumbrance free land to the Ministry. The Committee desire that in case of any further delay in getting the clearance of land or any other issue, the Ministry should bring it to the notice of concerned Member of Parliament for taking up of the matter with their respective State Government. The Committee should be apprised of the progress made in this regard. As pointed out at Manethi, the problem of environmental clearance should be taken up with Ministry of Environment, Forests and Climate Change on urgent basis so that the revised deadline for completion of setting up of AIIMS is achieved in time."

**22. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

"On the matter of handing over of encumbrance free land for establishment of new AIIMS, it is stated that this Ministry is regularly taking up the matter with the concerned State Governments, i.e. Govt. of Bihar and Govt. of Haryana. Hon'ble M.P., Darbhanga is actively engaged in pursuing pending matters with the State Govt., including early handing over of encumbrance free land. In respect of AIIMS in Haryana, State Government has informed that the land purchase process has been finalized for land measuring 210 acres 3 Kanal 5 marla at Village Majra Mustil Bhalki in District Rewari. The matter has again been taken up at the level of Hon'ble Minister for Health & Family Welfare with the Hon'ble Chief Minister of Haryana vide letter dated 28.07.2022 for expediting acquisition of the identified land and its handing over to MoHFW."

**23. The Committee had observed that encumbrance-free land for setting up AIIMS in Bihar and Haryana is required to be provided by the concerned State Governments. However, considering the delay in handing over of encumbrance free land for setting up of new AIIMS, the Committee had urged the Ministry to regularly monitor and coordinate with other Central Ministries and State Governments and report the progress made in this regard. The Committee are now happy to note from the Ministry's reply that they are regularly taking up the matter with the concerned State Governments i.e. Govt. of Bihar and Govt. of Haryana. Availability of an alternate land in Rewari in Haryana is also noted. The Ministry has not yet reported the final outcome of various steps, therefore, the**

**Committee desire to be furnished with the progress achieved in the case of not only the two States, but also each of such newly sanctioned AIIMS, which are lagging behind due to non-availability of encumbrance free land.**

**Observations/Recommendations (Para No.11)**

**Physical progress of All AIIMS**

24. In their original recommendation, the Committee had stated as under:

“The Committee note that AIIMS in Raibareli was initially approved by Cabinet on 05.02.2009. And the revised cost of expenditure was approved by EFC on 22.06.2017. The Cabinet approved date of completion was April, 2020. The revised date for completion has been shifted to November, 2021. Therefore, there is a delay of 1 year and 7 months. In this AIIMS OPD Block, hospital and academic campus and residential complex have been completed. MBBS classes and OPD facilities have been started. AIIMS Mangalgiri in Andhra Pradesh was approved on 07.10.2015. The Cabinet approved date of completion was October, 2020 and the expected date for completion is December 2021. Therefore, there is a delay of 1 year. In phase I OPD block and residential complex have been substantially completed. In phase II, 84% of hospital and academic campus have been completed; MBBS classes and OPD facilities have been started. IPD for COVID 19 treatment with COVID lab facilities has been made functional. The date of Cabinet approval for AIIMS Kalyani in West Bengal was 07.10.2015. The Cabinet approved date of completion was October, 2020 and the expected date for completion is November 2021. Therefore, there is a delay of 1 year. In this AIIMS, OPD block and residential complex have been substantially completed in phase I. In phase II, hospital and academic campus have been substantially completed. MBBS classes and OPD facilities have been started. The Committee during their study visit to this AIIMS in the month of September 2021 had observed that syllabus for the MBBS classes were yet to be approved by the academic committee and there was no lab facilities for the MBBS students. AIIMS Gorakhpur in Uttar Pradesh was approved by the Cabinet on 20.07.2016. The Cabinet approved date of completion was April 2020 and the expected date for completion is November 2021. There is 88.50% progress in construction in EPC mode. MBBS classes and OPD facilities have been started. AIIMS Bhatinda in Punjab was approved by the Cabinet on 27.07.2016. The Cabinet approved date of completion was June 2020 and the expected date for completion is November 2021. There is 88.70% progress in the construction in EPC mode. MBBS classes and OPD facilities have been started. AIIMS Guwahati in Assam was approved by the Cabinet on 24.05.2017. The Cabinet approved date of completion was April 2021 and the expected date for completion is September 2022.

There is 57.50% progress in the construction in EPC mode. Only MBBS classes have been started in this AIIMS. AIIMS Bilaspur in Himachal Pradesh was approved by the Cabinet on 03.01.2018. The cabinet approved date of completion is December 2021 and the expected date for completion is June 2022. There is 72% progress in the construction through EPC mode. Only MBBS classes have been started in this AIIMS. OPD facility is likely to start from December 2021. AIIMS Madurai in Tamil Nadu was approved by the Cabinet on 17.12.2018. The Cabinet approved date of completion is September 2022 and now this has been extended to October 2026. The extended period is almost four years. For this AIIMS site has been finalised, pre-investment work is in progress, preparatory survey by JICA Mission commenced in February 2020 and appointment of Project Management Consultant is in progress. Consultation with State Government and AIIMS Madurai is in progress to start MBBS classes from the current academic session from the temporary campus. AIIMS Dharbanga in Bihar was approved by the Cabinet on 15.09.2020. The Cabinet approved date of completion is September 2024 and it is expected to complete by this due date. However, the Committee note that till date site at Dharbanga has been finalised but the State Government is yet to handover the encumbrance free land. AIIMS Samba in Jammu was approved by the Cabinet on 10.01.2019. The Cabinet approved date of completion is January 2023 and it is expected to complete by this due date. However, the Committee note that there is only 32% progress in the construction through EPC mode. AIIMS Avantipura in Kashmir was approved by the Cabinet on 10.01.2019. The Cabinet approved date of completion is January 2025 and it is expected to complete by this due date. However, the Committee are concerned to note that there is only 6% progress in the construction through EPC mode. AIIMS Deoghar in Jharkhand was approved by the Cabinet on 16.05.2018. The Cabinet approved date of completion is February 2022 and the expected date for completion is June 2022. The Committee note that there is 58% progress in construction through EPC mode. MBBS classes and OPD facilities have been started. AIIMS Rajkot in Gujarat was approved by the Cabinet on 10.01.2019. The Cabinet approved date of completion is October 2022 and it is expected to complete by this due date. However, the Committee note that there is only 12% progress in the construction through EPC mode. Only MBBS classes have been started in this AIIMS. AIIMS Bibi Nagar in Telangana was approved by the Cabinet on 17.12.2018. The Cabinet approved date of completion is September 2022 and now it is expected to complete by November 2023. MBBS classes and OPD facilities have been started in this AIIMS. AIIMS Manethi in Haryana was approved by the Cabinet on 28.02.2019. The Cabinet approved date of completion is February 2023. However, the Committee note that till date the encumbrance free land is yet to be handed over by the State Government.

From the above mentioned facts the Committee observe that out of 16 AIIMS MBBS classes and OPD facilities have been started in 08 AIIMS. Only MBBS classes have been started in 04 AIIMS. The Committee further observe that all the 18 specialities are functional in all 06 AIIMS, namely, Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur and Rishikesh. Out of 17 super speciality, the functionality status in Bhopal, Jodhpur and Patna is 14 respectively and in Bhubneshwar and Rishikesh it is 17 respectively. The dedicated COVID facilities have been operational in all AIIMS.

The Committee are aghast to note that in the six new AIIMS, viz Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur and Rishikesh, many super specialty wards are still non-functional. This pinpoint at a greater laxity towards improper achievement of the targets set over time. Regarding the way forward to ensure completion of construction of all AIIMS in time and to make them fully functional the Committee are informed that regular review meetings of Ministry of Health and Family Welfare are being held with executive agencies and State Governments. The progress is also being monitored at the level of Prime Minister's Office.

The Committee recommend that the Ministry should constitute a Project Review Panel for each AIIMS which would evaluate both physical targets of construction of buildings as well as medical facilities every quarter and report laxities, if any to the Ministry which can look into the difficulties and solve them in time. The Committee are happy to note that the "use of drone" in evaluating the progress is one of the agenda of the Ministry. The Committee would urge the Ministry to initiate such review at the earliest in order to ensure timely completion of all AIIMS without further extension of time and make them fully functional at the earliest under intimation to them."

**25. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

"This Ministry has already Constituted a Project Review Committee (in accordance with Rule 141 of GFR, 2017) to review the new AIIMS projects. A web-enabled dashboard has also been deployed to facilitate project management and monitoring. At State Level also, there is provision for Review Committees to monitor progress of new AIIMS projects in the concerned States.

In respect of new AIIMS, it is to inform that construction work of AIIMS Raebareli, Nagpur, Kalyani and Bathinda has been completed. Further, construction work of AIIMS Mangalagiri, Gorakhpur and Bilaspur is in final stages of completion. This Ministry is making all efforts to complete other remaining AIIMS projects in a time bound manner."

26. The Committee had observed that the physical progress of most of the new AIIMS far exceeded their completion dates as stipulated and Specialties/Super Specialties remained non-functional. The physical progress, at the time of examination of the subject, was as low as 6% of construction at AIIMS, Avantipura in Kashmir with a similar status to AIIMS, Rajkot, AIIMS, Samba in Jammu, and AIIMS, Guwahati. AIIMS, Madurai was expected to be constructed in September 2022 but was extended by 4 years. In the case of AIIMS, Manethi, Haryana, and AIIMS, Darbhanga, Bihar, the encumbrance-free land is still pending pending to be handed over for construction. The Ministry in their Action Taken Reply has stated that there is a Project Review Committee to review the progress of new AIIMS projects and also a web-enabled dashboard to facilitate project management and monitoring. The Committee strongly feel that the periodicity of meetings of Project Review Committee in the case of each AIIMS needs to be increased and the physical progress achieved thereof should be furnished to the Committee within six months of presentation of this Report.

#### **Observations/Recommendations (Para No.12)**

##### **Dedicated Research Activities**

27. In their original recommendation, the Committee had stated as under:

“The field of medicine is predominantly dependent on continuous research for its efficacy and development. Research and Development is an inherent feature of medical field. On being asked whether in all AIIMS, lab facilities are functional with respect to both research and for patients, the Committee are informed that Lab facilities are in place in all the six functional AIIMS which are used for both patient services and research activities. Depending up on the functionalities of speciality and super specialty departments and availability of faculty, Institutes under take both extra mural and intra mural research. There is however, no separate allocation by the Ministry for research. The Committee are of the strong view that the Ministry of Health and Family welfare should take up this matter with the Ministry of Finance, Department of expenditure to have a separate allocation for research activities and fill up the required post of specialties and super specialties as it is linked with availability of lab facilities.

The Committee note that the extramural research funding by Department of Science and Technology, D/o of Bio Technology, Indian Council of Medical Research etc. have been taken up at AIIMS, New Delhi. However, the Committee are pained to note that institutions like AIIMS, New Delhi which is considered to be the epitome of health services does not fully spend funds under its research head. The Committee observe that for the years 2018-19, 2019-20 & 2020-21, the institution’s total receipts (for



research) were Rs. 1,162,738,574.28 lakh, Rs. 1647870753.89 lakh &Rs. 1643432507 lakh respectively. The total expenditure (on research) during the year 2018-19 isRs. 1107715966 lakh, during the year 2019-20 is Rs. 1448611449 lakh and during the year 2020-21 is Rs. 1218124390 lakh. The Committee would like the Ministry to urge all the AIIMS to concentrate on research activities in full spirit, only then the full fledged development in the arena of medicine would be possible. The Committee are of the firm view that in a country like India where affordable medical aid is one of the essential need for majority of the population, well founded research has to be given full focus by pioneering medical institutions like AIIMS.

On being asked whether research team from AIIMS has conducted any studies on chemical contaminated water canals of Punjab and Haryana which is the major cause of cancer in those areas, the Committee are informed that “no such study has been conducted”. Keeping in view the gravity of the situation the Committee desire the Ministry to undertake proper research on this aspect and suggest remedial measures for the same.”

**28. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“In all the AIIMS lab facilities are being used for both patient care and research. Regarding the unspent funds, this is related to extramural funds, which the Institute receives for research projects sponsored by other agencies. Institutes will be advised to improve utilisation of their research funds. Recommendation of the Committee for research on impact of chemical contaminated water canals of Punjab and Haryana on cancer cases in those areas will be pursued.”

**29. The Committee in their original report had noted that substantial amount of funds have remained unutilised for extramural research by AIIMS, New Delhi for the years 2018-19, 2019-20 & 2020-21. The Committee had also raised the vital issue of chemical contamination in the water canals of Punjab and Haryana, which is the major cause of cancer in those areas. The Ministry in their reply has apprised the Committee that the institute would be advised to improve utilisation of extramural funds and the recommendation of the Committee for research on the chemical contamination of water canals of Punjab and Haryana causing cancer would be pursued. The growing air pollution in Delhi-NCR as well other such cities and respiratory/heart/liver/kidney diseases resulting from it, the overuse of antibiotics leading to their inefficacy in treatments etc. are other grave health challenges. The Committee feel that it is high time that the medical fraternity engages in research to find out possible solutions for these challenges.**

**In view of this, the Committee would desire to be apprised of the action taken for full utilization of funds earmarked for medical research and also the result of the research/study on contamination of water canals of Punjab and Haryana causing cancer, as well as further active proposals on research by all AIIMS.**

**Observations/Recommendations (Para No.15)**

**Authorized and existing specialist and super specialist in AIIMS, New Delhi**

30. In their original recommendation, the Committee had stated as under:

“The Committee observe that the total sanctioned strength of faculty in AIIMS, New Delhi is 1115. Against this the total in-position faculty is 746 in Regular posts and 55 in Contractual. The total vacancy is 314. Out of total vacancy position of 314; 157 vacancies are in upcoming Centres / Block / Facilities. The Committee are informed that efforts are being made to fill the vacancies. These vacancies would have been advertised in 2020 on regular basis with existing Reservation Roster, but were withheld due to Government instruction received from the Ministry of Health & Family Welfare vide letter dated 23.02.2021 to re-draw the Reservation Rosters for recruitment of faculty in AIIMS. The Institute is in the process of re-drawing the Reservation Roster as per Reservation in Teachers Cadre Act, 2019. A Committee has been constituted for the purpose and the Reservation Roster is being finalized and onwards vacant post will be advertised soon. The Committee hope that the Ministry would take appropriate action for filling up of the vacant posts without further loss of time and apprise them about the final action taken in this regard.”

**31. In their Action Taken Reply, the Ministry of Health and Family Welfare submitted as under:**

“Implementation of Central Educational Institutions (Reservation in Teachers’ Cadre) Act, 2029 required redrawing of reservation rosters and necessary instruction in this regard was issued by MoHFW. Accordingly, Reservation Roster of Assistant Professor has been finalized. Reservation Rosters for Faculty of Nursing, Medical Superintendent and Professors have been approved by Roster Committee and approval of Competent Authority is being obtained and these rosters are being finalized. Further, 252 posts of Assistant Professor were advertised in November, 2021 for filling of the vacant posts except for 46 posts for which Recruitment Rules / Nomenclature was under revision. Recruitment process for these posts will be finalized after finalization of Recruitment Rule /Nomenclature. 03 Vacant post of Associate Professor of College of Nursing and

01 vacant post of Medical Superintendent are going to be advertised soon. 96 vacancies of Professor under Direct Recruitment for which selection process is not being held due to administrative reason.”

**32. The Committee had observed that 314 faculty positions were vacant out of total sanctioned strength of 1115 in AIIMS, New Delhi. The Ministry in its reply has informed that 252 posts of Assistant Professors were advertised in November 2021 and 46 posts are vacant due to non-finalization of Recruitment Rules/ Nomenclature. The Ministry has also stated that for 96 vacancies of Professors which are under Direct Recruitment, selection process is not being held due to administrative reasons. The Committee hope that the senior faculty positions and other posts would be fulfilled. The Committee further note that any delay in finalization of Recruitment Rules/Nomenclature causes delay in filling up vacancies. Hence, they feel that the Ministry should resolve the bottlenecks and report the progress made in filling up all vacant posts.**

## CHAPTER - II

### **Observations/Recommendations which have been accepted by the Government**

#### **Observations/Recommendations (Para No. 1)**

Introductory to the Recommendations/Observations made by the Committee in the Report.

Being introductory part, no action is required.

#### **Observations/Recommendations (Para No. 4)**

##### **Need for ensuring adequate Beds.**

The Committee note that at each six new functional AIIMS viz. Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur and Rishikesh, the envisaged bed capacity was 960 beds respectively. The total sanctioned bed strength of functional AIIMS comes to 5760. Against this till date only 5602 beds were found to be operational in all AIIMS. The remaining 158 beds will be available after the availability of Specialist and Super Specialists. Further, the Committee observe that AIIMS Bhubaneswar had sent three proposals to open one Cardio Centre, Neuro Centre and Cancer Centre. At present there are only 20 beds in this Centre. The minimum requirements for each centre 100 to 150 beds. At present there is no action on these proposals. As people in the eastern part of India chew betel leaves, the cases oral cancer/dental patients are rising. Therefore, there is an urgent need to open a dental centre in AIIMS Bhubaneswar. The Committee observe that from the year 2018-19 to 2020-21 there is less expenditure against the effective release by the Ministry of Health and Family Welfare. During the year 2018-19 against the release of Rs. 300.98 crore the expenditure was Rs. 288.29 crore. During the year 2019-20 the expenditure was Rs. 401.84 crore against the release of Rs. 416.69 crore. During the year 2020-21 the expenditure was Rs. 450.88 crore against the release of Rs. 477.85 crore. During the year 2021-22 the expenditure is Rs. 75.57 crore against the release of Rs. 181.98 crore. The Committee deplore the underutilization of scarce budgetary resources, slow progress of opening up of many centres in AIIMS Bhubaneswar, availability of required beds and required specialists and super specialists. The Committee strongly desire that the Ministry should make concerted efforts to achieve the physical as well as financial targets and ensure the availability of sanctioned bed, specialties and super specialties. The Committee further desire that the Ministry should apprise the Committee about the progress made in this regard.

## **Reply of the Government**

The total beds capacity of 6 AIIMS is at present 5748 as against sanctioned bed capacity of 5760. As per inputs available in this Ministry, Super-speciality departments in Cardiology, Neurology and Medical Oncology are functional in AIIMS, Bhubaneswar. As regards opening a Dental Centre in AIIMS Bhubaneswar, it is submitted that Dental Department in AIIMS, Bhubaneswar is functional.

Indicative budgetary allocations under three Grants-in-Aid Heads of the Institute are discussed and decided in the meetings of Standing Finance Committees (SFC) of various Institutes. Actual release and utilisation of Grants-in-Aid is also monitored by the SFC in order to ensure effective utilisation of funds released. In order to have a more regular monitoring of utilisation of Grants-in-Aid and discuss other matters having financial implications, the Institutes have been advised to hold more regular meetings of SFS, i.e. 3 to 4 times in a year.

### **Observations/Recommendations (Para No. 5)**

#### **Proposal to set up more AIIMS-like institutions in the country**

The Committee observe that the Ministry has plans to set up AIIMS in each State in a phased manner. The Ministry has received requests from Karnataka, Kerala, Goa, Tripura, Sikkim, Mizoram and Manipur for setting up AIIMS-like institutes in their States. During the course of examination, the Committee are informed that keeping in view the cost benefit analysis, presently, apart from AIIMS Guwahati, the Ministry is not actively considering any other AIIMS in the North East. The Committee note that the State Government of Kerala has identified four places viz. Thiruvananthapuram, Nettukaltheri, which is very near to the airport; the land in industrial estate in Calicut, the northern part of Kerala; Kottayam near Medical College; and HMT land, Kalamassery, but the request for setting up of AIIMS is still pending. During cross examination, the Ministry informed the Committee that it has requested the Ministry of Finance to convey 'in-principle' approval for setting up of AIIMS in Kerala. The Committee hope that the Ministry of Health and Family Welfare and Ministry of Finance, Department of expenditure will take proactive steps for setting up of AIIMS like institution in each State in the next phase of PMSSY and include it in the 15<sup>th</sup> Finance Commission Report. The Committee would like the Ministry to reconsider the requests from other States and take necessary steps to set up an AIIMS like institute in each State in a time bound manner.

## **Reply of the Government**

Recommendation of the Committee has been noted and matter will be pursued with the Ministry of Finance.

### **Observations/Recommendations (Para No. 6)**

#### **Need for fixing up of timelines for each step in the guidelines for setting up of new AIIMS**

The process of setting up of a new AIIMS at any place in India initiates with its announcement by the Finance Minister followed by offer of land site by the concerned State Government where the AIIMS is proposed to set up.

The Committee note that initially the Ministry had not formulated any guideline for the implementation of the PMSSY and was guided by instructions issued from time to time and decisions taken by the Central Project Monitoring Committee (PMC) on case to case basis. This resulted in various ad-hoc decisions taken with respect to fund management, selection of consultants, assignments of project task, award of management of contracts. In the year 2018, a two-member Committee was constituted to draw up scheme guidelines for PMSSY with the experience and learning from prior cases.

The Committee are informed that the Ministry had circulated the draft "Guidelines for implementation of PMSSY" to all stake holders i.e. State Governments for their input on the same. Report from some of the States has been received. Reminder has been issued to all the State Governments by the Secretary, MoHFW to expedite comments in this regard. However, based on the learning from implementation of the Scheme, the process of conceptualisation, executing and functionalization of project have been streamlined.

The Committee note that now there is a well-defined check list/standard documentation for process of streamlining on setting up of AIIMS. However, the Committee are pained to note that even after 18 years of announcement of PMSSY, the inputs from some of the State Governments on the draft guidelines for implementation of PMSSY are still awaited and no time line has been fixed for each step mentioned in the check list for establishment of new AIIMS as detailed in Chapter III. The Committee strongly feel that

without prescribing the time lines in each action point in the guidelines, the Ministry would not be in a position to monitor the progress effectively. Therefore, they desire the Ministry to fix prescribed timelines for each action plan and take concerted steps to adhere the prescribed timelines. They may be apprised of the steps taken in this regard.

### **Reply of the Government**

Draft Guidelines for Implementation of Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) seeking comments/inputs of all Stakeholders were circulated vide letter dated 17th January, 2020 requesting to provide their valuable comments/feedback on the proposed Guidelines. The comments from four states namely Bihar, Madhya Pradesh, Odisha and Sikkim have been received. However, the comments from majority of the stakeholders have not been received so far.

Though it was followed up with reminders, the responses have been received from very few States. One possible reason for this could be the COVID Pandemic, management of which has been the main focus of Health Departments at the Union as well as State levels. Meanwhile, a reminder dated 6th April, 2022 has been issued to the all the States /Union Territories (except Bihar, Odisha, M.P. and Sikkim as their comments received) and new AIIMS to send their comments by 30th April, 2022 so that the Ministry could finalize the Guidelines for PMSSY.

It is, however, worth mentioning that broad contours of the projects undertaken under PMSSY are well defined, which are as under: -

#### **Setting up of new AIIMS inter alia involves:**

5. 750 or 960 bedded hospital
6. 18/1-7 Specialty/Super-Specialty departments
7. 100 MBBS/ 60 Nursing seats
8. Focus on PG Education

#### **Upgradation of GMCs involves:**

6. Creation of Super-specialty departments - ranging from 8 to 10
7. Additional 150-200 beds
8. Around 15 new PG seats
9. Average cost: Rs. 200 crore - shared 60:40 between Centre and States
10. HR and running cost to be provided by the State Govt.

In the MoHFW the following indicative timelines for various stages for setting up of a new AIIMS have been envisaged, subject to project specific variations:

S.No.	Action	Indicative Timeline
1	<b>Announcement of new AIIMS for a particular State</b>	<b>D</b>
2	Letter sent from MoHFW to concerned State Government for offering three or four alternate sites with encumbrance free land measuring about 200 acres. While offering sites, the State Government to furnish commitment for four lane connectivity, water and electricity connection to cater for the requirement of proposed establishment, water drainage system etc.	D+1 Week
3	<b>Details of site and commitment of State Govt. received</b>	<b>E</b>
4	Evaluation of site as per Challenge Method after receiving details of site from State Government (including site inspection, constitution of Committees as per Challenge Method) and submission of report to Hon'ble HFM	E+ 5 Weeks
5	<b>Approval of site for establishment of AIIMS by Hon'ble HFM</b>	<b>F</b>
6	Appointment of Agency for Pre-Investment Work	F+ 1 week
7	Preparation of Project Report by Agency, preparation of EFC Note in the Ministry, Submission of Note to Ministry of Finance for its concurrence	F + 4 Weeks
8	<b>Concurrence of EFC</b>	<b>G</b>
9	Preparation of Cabinet Note in the Ministry and circulation to all stakeholders	G+1 week
10	<b>Approval of the Cabinet</b>	<b>H</b>
11	Selection of Executing Agency to carry out the main work	H+8 Weeks
12	Award of work to EPC Contractor by Executing Agency [Issuance of RFP for appointment of Architectural Consultant for preparation of Master Plan & Concept Design for proposed AIIMS Selection and award of consultancy assignment to Architectural Consultant, Master Plan and Layout finalization, Detailed drawing, technical sanction and floating of tenders for construction, Award of work]	H+40 Weeks
13	Construction Activities	H+150 Weeks



## **Observations/Recommendations (Para No. 7)**

### **Need for robust online Medical Education**

The Committee note that SARAL, a module based online platform, has been developed by AIIMS, New Delhi which allows faculty to upload educational content related to their lectures for students to access. But the Committee is astonished to note that SARAL is just specific to AIIMS, New Delhi. No other AIIMS have got any well defined module (as SARAL) of their own to impart medical education. The other AIIMS conduct training programme for its own staff including nurses and faculty as well as participants from other medical colleges for up gradation of their skills. The Ministry admitted that the suggestion of the Committee for the extensive use of e-learning has been noted for its implementation. The Committee are of the firm opinion that the issue of medical education has to be given a thorough thought well before hand and recommend extensive use of e-learning as the need of the hour and also for the future. The Committee would like to urge the Ministry of Health and Family Welfare to issue instructions/guidelines to all AIIMS to draft and put in place a comprehensive module for online medical education for benefitting all categories of staff. The Committee are of the view that AIIMS, New Delhi should take a lead and help other AIIMS to develop a module of their own with the inbuilt feature of integration with different modules of other AIIMS as well.

### **Reply of the Government**

Steps have been taken by other AIIMS also in the direction of online medical education. AIIMS, Raipur is adopting the SARAL, the module based online platform, developed by AIIMS New Delhi. AIIMS, Bhubaneswar is in the process of developing online learning modules for practical and clinical classes for UG students naming the project as "Medsim 2". This project is in collaboration with C-DAC Trivandrum and Amrita Vishwa Vidyapeetham. AIIMS, Jodhpur is also using LMS (Learning Management System) for Executive program in Public Health Policy, Leadership and Management by School of Public Health both for UG and PG Courses. AIIMS, Rishikesh has been using Microsoft Teams application for online medical education, and the educational content related to lectures/classes are being shared through the Institute website. AIIMS, Patna is also planning to start SARAL module for faculty Members, teaching staffs and Students. Learning Management System is in the process of being implemented in AIIMS at Bathinda and Raebareli on pilot basis.

## **Observations/Recommendations (Para No. 9)**

### **Need for well structured Recruitment Process**

The vision of balanced medical services across the geographical boundaries of the country has been one of the guiding forces for setting up of new AIIMS. But mere infrastructure would fail to serve the objective in the absence of well trained and qualified human resources. The requirement of posts for the New AIIMS has been worked out as per norms of Academic Council of AIIMS, New Delhi. Based on the recommendations on the expert committee various posts were finalized as required for each of the new AIIMS. A total of 4089 posts consisting of 8 project Cell posts, 305 Faculty posts and 3776 Non Faculty posts have been sanctioned for each of the six functional AIIMS viz. Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur and Rishikesh. The Committee note that at many AIIMS, there exist huge gaps between posts sanctioned and post filled up thereon, thereby affecting the strength of teaching faculty at different AIIMS. The Committee also note that various posts of specialists and super specialists remain vacant owing to lack of availability of requisite candidates. The Committee note that at none of the six new AIIMS viz. Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur and Rishikesh, 305 number of faculty posts created has been filled up. Against the 305 number of posts, the posts filled up in each AIIMS is only 209, 189, 219, 134, 160 & 225 faculty respectively. This is indicative of the fact that at these AIIMS, only 68.5%, 62.1%, 71.8%, 43.9%, 57.5% and 73.8% vacancies have been filled up respectively. Similarly is the case of non-faculty post at above mentioned six AIIMS. The number of non-faculty posts filled up are 1584, 1663, 2106, 1394, 2423 & 2974 respectively. The Committee note that the Ministry should take urgent steps to fill up the vacancies in time so that medical education and services do not suffer owing to shortage of faculty posts. Even the task of redrafting of reservation roster in light of EWS quota should be sped up so that faculty positions (both regular and contractual) are filled up regularly. The Committee would also recommend the Ministry to explore the possibility of enlarging the ambit of 'visiting faculty' at each new AIIMS so as to enrich the medical education and guidance till the time regular posts are filled up.

The Committee note that in all the six AIIMS, the number of filled faculty posts and non-faculty posts are both regular and contractual. There is no bifurcation in the regular and contractual posts. The recruitment for contractual appointment is made against the vacancy of regular sanctioned posts when the process of regular appointment is delayed due to various administrative reasons such as non-finalization of Recruitment Rules. Contractual appointments are resorted against similar other sanctioned posts to meet the essential services when these posts are not available under regular

sanctioned posts and to meet urgent requirement of patient care services and other essential requirement. As per the information received from AIIMS, no contractual appointment of faculty and non-faculty has been made as a replacement for the contractual manpower.

The Committee are of the view that the absence of such bifurcation (between the regular and contractual appointment) will lead to corruption and malpractice and this may lead to compromise in the quality of education and services. Therefore, the Committee strongly recommend the Ministry to evolve a policy decision to have clear cut bifurcation of appointment in various posts on regular and contractual basis. The Committee wish to urge the Ministry to keep the contractual appointment to bare minimum so that the quality manpower is available for the Medical Education Service.

### **Reply of the Government**

In AIIMS, recruitment to various positions is done on need basis keeping in view the range of additional services and facilities added. The status of vacant posts at various AIIMS is monitored at various levels by the Government and vacancies are advertised based on requirement. However, as high standards have to be maintained in selection, keeping in view the stature of these Institutes of National Importance, all the advertised positions could not be filled up.

As informed to the Committee earlier, several facilitating provisions have been made to improve faculty strength in new AIIMS, which as enumerate as under :

- i. Constitution of Standing Selection Committee (SSC) in each new AIIMS to facilitate expeditious filling up of vacancies.
- ii. The upper age limit for direct recruitment against the posts of Professor and Additional Professor has been raised from 50 years to 58 years.
- iii. Filling up of vacant faculty posts in the new AIIMS by taking serving faculty from Government Medical Colleges/Institutes on deputation basis has been allowed.
- iv. Contractual engagement of retired faculty of Government Medical Colleges/Institutes up to 70 years of age has also been allowed. Walk-in-

interview for engagement of faculty on contract basis has also been allowed as a stop gap arrangement.

v. Overseas Citizen of India (OCI) card holders have been allowed to be appointed on faculty positions.

vi. Visiting faculty scheme in new AIIMS has been formulated to allow national and international faculty to work in new AIIMS for teaching and academic purposes

vii. Down-grading of the posts of Additional/Associate Professor to the level of Assistant Professor has been allowed for a fixed period by the AIIMS with the approval of their respective Institute Body.

viii. Temporary diversion has been allowed on loan basis for faculty from one Department to another, which may be filled up on contractual appointment.

ix. Relaxation to Scheduled Castes and Scheduled Tribes candidates as per Rules/ Guidelines issued by DoP&T.

x. Rolling advertisement with one-year validity have been allowed to expedite the recruitment of faculty after which fresh running or normal advertisement can be issued again depending upon faculty strength.

xi. Constitution of a sub-committee of the Governing Body of new AIIMS to consider and approve recommendations of the respective Standing Selection Committee.

xii. Centralized recruitment for nursing cadres has been introduced.

It is expected that the sanctioned posts of faculty are filled on regular basis. Contractual employment is only a short term measure to meet the urgent requirements of the Institute. Therefore it may not be desirable to prescribe any formal bifurcation between regular and contractual appointment. As recommended by the Committee, the Ministry regularly advises all the AIIMS to fill up sanctioned posts on regular basis.

### **Observations/Recommendations (Para No. 13)**

#### **Need for separate budget allocation for each AIIMS**

The Committee note that Section 15 of the AIIMS ACT 1956 as amended in the year 2012 has stated that :

"The Central Government may, under appropriation made by Parliament by law in this behalf, pay to 1[every Institute] in each financial year such sums of money and in such manner as may be considered necessary by that Government for the exercise of its powers and discharge of its functions under this Act."

The Committee are informed by the Ministry that the allocation is made for all the projects under PMSSY Division which include setting up of All India Institute of Medical Sciences (AIIMS) as well as up gradation of Government Medical Sciences (GMCs).

This allocation is a combined allocation and not institute-wise. Allocation under the Capital Head is used for Major Works and procurement of equipment form part of setting up of the project, whereas allocation under Revenue Head is provided to institutes, which are functional / partially functional to meet their requirements on salary and other administrative expenditure, including maintenance or purchase / replacement of medical equipment.

The Committee are dismayed to note that, when there is a provision in the Act to provide allocation to every institute in each financial year, the Government of India has not been making budgetary provision AIIMS wise. The Committee, during the sitting held on 8 April 2021, were informed by the representatives of the Ministry that there are 16 AIIMS projects which are going on for which they require fund allocation under capital head to complete the civil works as well as procurement of machinery and equipment. They will require about Rs.49,800 crore in the next five years, whereas the availability of funds that has been indicated to the Ministry for the next five years is about Rs. 39,000 crore.

The Committee strongly feel that without earmarking an assured fund to each AIIMS the institute cannot plan their future requirements viz construction of building, additional machineries as a result that will lead to ad-hoc planning and they can not undertake the implementation work as per the plan. The Committee note that releases are made on the basis of progress of work, requirements projected by Executing Agencies(EAs). This

in a way has a cascading effect on the specific AIIMS which are on a slow pace and would further get neglected. Therefore, the Committee wish to strongly recommend that the Ministry of Health and Family Welfare, must take up the matter with the Department of Expenditure, Ministry of Finance to earmark an assured fund allocation to each AIIMS in the Demands for Grants in each Financial year as per the provision of the AIIMS Act.

### **Reply of the Government**

Other than the 6 AIIMS approved in Phase I of PMSSY, other 16 AIIMS are at various stages of completion. The consolidated allocation under Capital Head of PMSSY is released to the Executing Agencies and Procurement Support Agency for completion of ongoing projects. Since funds for the services rendered by the EA and PSA are released directly by the Ministry to respective agencies on the basis of physical progress of individual projects, AIIMS-wise earmarking of funds is not required. As regards allocation under Revenue Head of PMSSY, out of which Grants-in-Aid is released to functional and partially functional AIIMS, it is stated that budget of each AIIMS for a financial year is discussed and decided by the Standing Finance Committee of respective Institutes. Institutes are therefore aware of their indicative allocation under three Heads of Grants-in-Aid, i.e. Salary, General and Creation of Capital Assets. However, the recommendation of the Committee to earmark fund allocation to each AIIMS in the Demands for Grants in each financial year is agreed in respect of Revenue Head and necessary steps will be taken in this direction in consultation with the Ministry of Finance, starting with 6 functional AIIMS of Phase I of PMSSY.

### **Observations/Recommendations (Para No. 14)**

#### **Need for adequate budgetary allocation for all AIIMS**

The Committee observe that under PMSSY, since years 2016-17 to 2021-22, there is a gap between projected requirements and allocations at BE stage. Except the years 2018-19 and 2019-20, there is a lesser allocation at RE stage in comparison to allocation at BE stage. During the year 2021-22 against the proposed allocation of Rs. 8965.14 crore the allocation at BE stage is Rs.7000 crore. The expenditure is Rs.3903.41 crore till 22 October 2021. The Committee also observe that the expenditure is less than the effective release for various AIIMS except few aberration. The Committee observe that from the years 2018-19 to 2021-22 AIIMS Bhopal could incur expenditure of Rs. 980.83 crore against the effective release of Rs. 1357.07

crore. The percentage of expenditure is 72.27%. AIIMS Bhubneshwar could incur expenditure of Rs. 1216.58 crore against the effective release of Rs. 1377.50 crore. The percentage of expenditure is 88.31%. AIIMS Jodhpur could incur expenditure of Rs. 1694.11 crore against the effective release of Rs. 1822.10 crore. The percentage of expenditure is 92.97%. AIIMS Patna could incur expenditure of Rs. 1020.20 crore against the effective release of Rs. 1314.06 crore. The percentage of expenditure is 77.63%. AIIMS Mangalgiri could incur expenditure of Rs. 117.99 crore against the effective release of Rs. 196.87 crore. The percentage of expenditure is 59.93%. AIIMS Kalyani could incur expenditure of Rs. 24.60 crore against the effective release of Rs. 75.89 crore. The percentage of expenditure is 32.41%. AIIMS Guwahati could incur expenditure of Rs. 5.53 crore against the effective release of Rs. 19.9 crore. The percentage of expenditure is 27.78%. AIIMS Bibi Nagar could incur expenditure of Rs. 38.41 crore against the effective release of Rs. 98.22 crore. The percentage of expenditure is 39.10%. AIIMS Gorakhpur could incur expenditure of Rs. 79.78 crore against the effective release of Rs. 122.82 crore. The percentage of expenditure is 64.95%. AIIMS Bhatinda could incur expenditure of Rs. 44.26 crore against the effective release of Rs. 75.46 crore. The percentage of expenditure is 58.65%. AIIMS Deoghar could incur expenditure of Rs. 14.58 crore against the effective release of Rs. 62.25 crore. The percentage of expenditure is 23.42%. AIIMS Bilaspur could incur expenditure of Rs. 6.96 crore against the effective release of Rs. 17.53 crore. The percentage of expenditure is 39.7%. AIIMS Raipur could incur expenditure of Rs. 1105.65 crore against the effective release of Rs. 1416.58 crore. The percentage of expenditure is 78.05%. AIIMS Rishikesh could incur expenditure of Rs. 1882.34 crore against the effective release of Rs. 2274.51 crore. The percentage of expenditure is 82.75%. AIIMS Raibareli could incur expenditure of Rs. 49.95 crore against the effective release of Rs. 181.15 crore. The percentage of expenditure is 27.57%. AIIMS Nagpur could incur expenditure of Rs. 129.10 crore against the effective release of Rs. 222.54 crore. The percentage of expenditure is 58.01%. AIIMS Vijaypur in Jammu has nil expenditure against the effective release of Rs. 1 crore. AIIMS Awantipur in J&K has nil expenditure against the effective release of Rs. 1.50 crore. AIIMS Rajkot could incur expenditure of Rs. 9.10 crore against the effective release of Rs. 18.46 crore. The percentage of expenditure is 49.29%.

The representatives of the Ministry of Health and Family welfare have submitted the fact that they need additional allocations for the running expenditure. Right now, they need it only for six AIIMS or some more where MBBS and OPD has been started. But once IPD start all the AIIMS will require running expenditure for operating expenses, like providing services and salary or any additional capital investment for additional civil construction, procurement of additional machinery or replacement of the existing

machinery. They will require about Rs. 49,800 crore in the next five years, whereas the availability of funds that has been indicated to the Ministry for the next five years is about Rs. 39,000 crore.

Therefore the Committee strongly recommend the Ministry to take up the matter with the Ministry of Finance at the highest level for providing additional allocations as per the requirement of each AIIMS. At the same time the Committee wish to emphasize the Ministry to ensure the full utilization of allocation. The Committee may be apprised of the action taken in this regard.

The Committee observe that funding through Higher Education Financing Agency (HEFA) was made available as an Extra Budgetary Resource to supplement the budgetary support for PMSSY. HEFA funding was however discontinued vide O.M. No. 13(04)PFC-II/2016 dated 7-9-2020. However no specific reason was assigned for the discontinuation. It was further stated in the above mentioned O.M. that as regards the projects already approved under HEFA, further funding will be provided from the Budget, as needed. No further borrowing shall be undertaken by HEFA in respect of these projects.

As HEFA has been discontinued, the Committee desire the Ministry to ensure adequate budgetary provision for all AIIMS so that no projects of any AIIMS remain fund starved.

### **Reply of the Government**

Adequate budgetary provision is made available for execution of projects under PMSSY. In case of any additional requirement, the same is taken up at RE stage with the Ministry of Finance. Progress of ongoing projects is not allowed to suffer for want of funds.

### **Observations/Recommendations (Para No. 16)**

#### **Irregularities in AIIMS Patna**

The Governing body of Patna AIIMS in its meeting held in the year 2012 had found some irregularities in appointment in various faculty posts. Updating the status of the enquiry and action taken against the appointee, the Committee were informed that the report of the High Level Committee was placed before the IB, GB of AIIMS Patna. The GB in its 3'd meeting dated 18.02.2021 vide agenda no. 3/11 decided the following:



- (a) GB accepted the recommendations of the High Level Committee and the recommendations of committee constituted by the President of the Institute.
- (b) After accepting the recommendations of both committees, it was transpired that there was no irregularity in appointment of Faculty except for three cases viz. Dr.A.K .Saxena, Dr.Sushmita Das and Dr.AlokRanjan.
- (c) GB directed AIIMS Patna to initiate process of termination of services of these three Faculty members.

Accordingly, a charge sheet dated 26.05.2021 has been issued to the three faculty members whose appointment was found irregular by the Governing Body. Reply from them has been received. IO/PO is being appointed for further necessary action.

The Committee are distressed to note that even after lapse of long nine years, the position remains the same. The Committee deplore the callous attitude of the Ministry to such irregularities. Therefore, the Committee urge the Ministry to complete the action as desired by the Governing body at the earliest without any further loss of time and apprise them about the final action taken in this regard.

The Committee also observe that for the post of Hostel Warden some of the AIIMS has advertised for the post of Junior Warden and not the Senior Warden. The qualification for the post of Junior Warden is 10<sup>th</sup> Pass. The Committee are perturbed to note that for the reputed institutions like AIIMS downgrading the qualifications to such low will definitely have an adverse impact on the quality of Services. Therefore, the Committee urge the Ministry to examine this matter with utmost sincerity and appoint quality persons to various posts with proper qualifications and apprise them the action taken in this regard.

### **Reply of the Government**

The Governing Body of AIIMS, Patna in its meeting held on 18.02.2021 decided to initiate disciplinary proceeding under CCS (CCA) Rules 1965 against three Faculty Members viz. Dr. A. K. Saxena, Dr.Sushmita Das and Dr.AlokRanjan. Accordingly, charge Sheets have been issued to them and Inquiry Officer and Presenting Officer have been appointed. Preliminary Hearing has been conducted for these three cases on 20<sup>th</sup> December 2021 at 11:00 Hrs. Next Date of Hearing has been scheduled in August, 2022.

As per CIB decisions, AIIMS Patna is following Recruitment Rules of AIIMS Delhi and as per Recruitment Rule only post of Junior Warden (House Keeper) could be advertised. As per AIIMS Delhi Recruitment Rules, the qualifications for the post of

Junior Warden (House Keeper), for which Advertisement has been issued is 'Matriculation from recognised Board/University, Experience in store keeping /Public Relation or Estate Management for not less than 1 Year or A certificate or formal training in Store Keeping/ Material management/ Public Relations/ Housekeeping'. Further, there is no post of Senior Warden at AIIMS Patna. However, the post of Warden (Hostel Warden) exists.

At AIIMS Nagpur, the recruitment for Wardens was carried out in the year 2018-2019 by its mentor institute, i.e. AIIMS Raipur. One male warden and one female warden have joined the institute and both of them possess minimum qualification of graduation.

At AIIMS BBSR, out of 05 posts of Hostel (wardens), 03 posts have been filled up in 2017 as per Recruitment Rules. 02 posts remained vacant due to non-availability of suitable candidates. Essential qualification as per the Recruitment Rules is graduation. The post of Warden as sanctioned has neither been downgraded to Junior Warden nor the qualification as prescribed in the applicable rule has been altered. 10 Junior Warden (House Keeper) has also been sanctioned which is classified as Group- C post and it has never been advertised by this institute.

At AIIMS Rishikesh, 05 posts of hostel warden and 10 posts of Junior Warden (House-keepers) have been sanctioned and all the sanctioned posts are utilized on ad-hoc appointment to fulfil functional need of the institute. However, all the posts of Hostel wardens have been advertised by the institute and efforts are being made to fill these posts by the end of this year. Also, as per the recruitment rules, no such provision of downgrading of qualification is observed for these posts.

### **Observations/Recommendations (Para No.17)**

#### **Proficiency of New AIIMS**

18. "About the steps being taken at all the new proposed AIIMS to make them proficient enough to provide same level of medical facilities and medical education as being provided in AIIMS, New Delhi, the Committee are informed that AIIMS have adequate facilities to cater the needs of patient care. However, with the increasing patient load, innovations and advances in medical field, new facilities are incorporated/ advanced subject to availability of Specialists and Super Specialists. There is a high standard of selection of faculty in new AIIMS. The educational qualification, research or teaching experience required for selection at new AIIMS are same as those for AIIMS, New Delhi. To keep the skill level or knowledge base of faculty, updated, they are sent

for training / attending the conferences from time to time. New AIIMS have student centered, problem based, integrated and community oriented teaching consisting of foundation course, medical ethics, evidence based medicine, clinical teaching.

The Committee note that there is large scale vacancies in many teaching and non-teaching posts in various AIIMS. Various posts are of contractual in nature and there is delay in filling up of various posts. At present there is no provision of rotation/transfer of Faculties from one AIIMS to another AIIMS. Till date there is no specialties/Super specialties' in AIIMS Raipur in the field of gastroenterology, surgical gastroenterology, neurology, medical oncology and nuclear medicine. In AIIMS Patna, there is no specialties'/super specialties in the field of Nephrology, Neurology, Endocrinology and Metabolic diseases. In AIIMS Bhopal there are no specialties/super specialties in the field of gastroenterology, medical oncology and clinical haematology. In AIIMS Jodhpur, there are no specialties/super specialties in the field of medical oncology and clinical haematology.

In view of the above backdrop the Committee are of the strong view that the Ministry should take necessary measures to fill up the above mentioned posts in various AIIMS so that patients services can be provided in all the AIIMS. The Committee also wish to recommend that the Ministry should explore the feasibility to have provision of rotation/transfer of Faculties from one AIIMS to another AIIMS, so that the quality of education as well as services in all the new AIIMS will be at par with AIIMS New Delhi.”

### **Reply of the Government**

“On AIIMS specific observations of the Committee, following is submitted:

- i. AIIMS Bhopal is in process of advertising 94 Faculty posts pertaining to different streams including gastroenterology, medical oncology, clinical haematology very shortly. Upon completion of the proposed advertisement, the vacancies are expected to be reduced drastically. In regard to Non-Faculty posts, in the special GB meeting of the institute, it has been decided to hand over the recruitment exercise of Group B & C posts to 3<sup>rd</sup> party, including PSUs or their empanelled agencies. AIIMS Bhopal has already advertised Non-faculty group-A posts on deputation basis.
- ii. In AIIMS Jodhpur, department of Medical Oncology/Haematology is functional and one faculty member is working in the department.
- iii. In AIIMS Raipur, all sanctioned specialities departments i.e. 18 are functional. The super-speciality department of Clinical Haematology and Medical Oncology is functional. However, the Department of Neurology,

Surgical Gastroenterology and Gastroenterology are not functional. The Department of Surgical Oncology is also not functional. However, various Onco-surgical cases are being performed by the respective surgical departments of the Institute. All vacant posts of faculty members have been advertised to fill up on regular/deputation/contractual basis and the recruitment process is going on.

- iv. At AIIMS Patna, 4 Super-Specialty departments i.e. Neurology, Nephrology, Endocrinology & Metabolism and Medical Oncology & Haematology are not functional due to non-availability of suitable faculty members. A fresh advertisement after down-gradation of posts has been advertised. Recruitment processes for advertisement dated 18.10.2021 for 158 faculty posts and advertisement dated 18.02.2022 for 11 faculty posts are ongoing. Date of interview for both the advertisements will be declared soon. Further, the Recruitment Rules for Non-Faculty posts is under consideration and once RRs are finalized; remaining Non-Faculty posts will be advertised accordingly.

At present, there is no policy for mutual transfer of faculty from one AIIMS to another.”

#### **Observations/Recommendations (Para No. 18)**

**Need for uniform syllabus for the MBBS courses in all AIIMS, rules and regulations for completing the course, conducting examination and a robust evaluation process.**

With respect to the syllabus of MBBS Courses for each new AIIMS, the Committee observe that the AIIMS in Bhopal, Bhubaneshwar, Jodhpur, Patna, Raipur and Rishikesh have MBBS course and the Academic curriculum have been approved by the Standing Academic Committee of the respective institute. During the study visit of the Committee to AIIMS Kalyani, the Committee learnt that proper course structure has not been finalised by the Standing Academic Committee of that Institute. The Committee are apprehensive of the fact whether all the 16 new AIIMS are having the syllabus for their MBBS course or not. Therefore, the Committee desire the Ministry to apprise about the status of the syllabus in all the new AIIMS. The Committee are also of the view that all the AIIMS should have uniform syllabus for the MBBS courses in all AIIMS and they should follow proper rules and regulations for completing the course, conducting examination and a robust evaluation process. Therefore, the Committee wish to recommend the Ministry of Health and Family Welfare to evolve mechanism to ensure to have uniform syllabus for the MBBS courses in all AIIMS, uniform rules and regulations for completing the course, conducting examination and a robust evaluation process. They may be apprised of the steps taken in this regard.

## **Reply of the Government**

The Post Graduate and Under Graduate courses in AIIMS, New Delhi are being conducted as per approval of Standing Academic Committee and Governing Body.

As in the case of AIIMS, New Delhi, all the new AIIMS are independent autonomous bodies under MoHFW and are implementing MBBS Curriculum as approved by their Standing Academic Committee and Governing Body. AIIMS Deoghar, Mangalagiri, Nagpur, Bathinda, Bibinagar and Jammu follow the MBBS curriculum, rules & regulations, examinations and evaluation process as per AIIMS Delhi. AIIMS Guwahati and AIIMS Gorakhpur are following the MBBS curriculum, rules & regulations, examinations and evaluation process as per their respective mentor institutes i.e. AIIMS Bhubaneswar and AIIMS Jodhpur. At AIIMS Kalyani syllabus & curriculum of AIIMS Bhubaneswar is being followed. At Bilaspur, the course structure of MBBS curriculum has been designed in accordance with NMC guidelines and the course curriculum involves various learning, examination and evaluation methods. Similarly, at AIIMS Raebareli, the course structure of MBBS curriculum has been designed in consultation with faculties of major disciplines of UG course. The syllabus is covered in accordance with NMC guidelines. AIIMS Patna has drafted and implemented MBBS curriculum based on the AETCOM module on NMC. It has incorporated all modules with minimal changes. This curriculum has already been implemented from MBBS 2020 batch onwards after approval from the standing Academic Committee of AIIMS Patna.

Recommendation of the Committee to evolve mechanism to ensure to have uniform syllabus for the MBBS courses in all AIIMS, uniform rules and regulations for completing the course, conducting examination and a robust evaluation process has been noted for consideration in the appropriate forum.

## CHAPTER - III

### **Observations/Recommendations which the Committee do not desire to pursue in view of Government's replies**

#### **Observations/Recommendations (Para No. 10)**

##### **Need for well defined connectivity to AIIMS**

The Committee note that one of the conditions underlying the land site for AIIMS is four-lane connectivity from Institute to the national highways shall be provided by the State Governments. The Committee observe that most of the AIIMS are located in the outskirts area of the main cities. During the Study Visit of the Committee to AIIMS Kalyani, the Committee observed that the distance between main city of Kolkata to AIIMS Kalyani is approximately 70 kms. There is no proper fastest communication from the main city to the AIIMS. The Committee feel that the issue of road connectivity should be taken up more stringently in all AIIMS and the Ministry should actively monitor road conditions so that four-lane connectivity is essentially met at each AIIMS project.

##### **Reply of the Government**

Proper connectivity to the site proposed by the State Government for setting up of an AIIMS is one of the main considerations while finalising the site. In case any strengthening is required in the road connectivity to the site, it is specifically brought to the notice of the State Government with the understanding that the same will be taken up by the State Government for necessary improvement. This is also reflected as one of the responsibilities of the State Govt. in the MoU signed with the State Government.

## CHAPTER - IV

### **Observations/Recommendations in respect of which Government's replies have not been accepted by the Committee**

#### **Observations/Recommendations (Para No. 2)**

##### **Need for bringing parity in the status of all new AIIMS**

On the issue of differences between the status of AIIMS, New Delhi and other six new AIIMS, the Committee are informed that for years of their operation, these AIIMS remained outside the ambit of AIIMS Act and were governed by a Central Apex Society, therefore, some of the features of these AIIMS are different from AIIMS, New Delhi. For example, AIIMS, New Delhi, some departments have been delegated greater financial and administrative powers in different centers and have their own administrative and procurement officers like Rajendra Prasad Centre for Ophthalmology, Cardio & Neuro Centre, National Cancer Institute. This is not the case with other AIIMS. In AIIMS, New Delhi there is a Director and Medical Superintendent, and a centralized structure is there while in other AIIMS there are Executive Director and Head of Departments. In AIIMS, New Delhi, over the years, there are now 31 Specialties and 20 Super Specialties. Here teaching, learning of MD, MS, DM, MCH and patient care services are done. However, in the new upcoming AIIMS, there are 17 Super Specialties and 18 Specialties. AIIMS, New Delhi conducts Bachelors Programme (UG course) for five Para Medical Sciences and nine M.Sc. courses which is not the case with most other AIIMS. AIIMS, New Delhi also runs 33 one-year Fellowship Courses in various Specialities which is not the case with other AIIMS. AIIMS, New Delhi usually follows a time period of a month for applications to be received in respect of advertisements for vacant faculty positions whereas in other AIIMS, there is a system of rolling or running advertisements with one-year validity.

The Committee strongly feel that when all the new AIIMS are being governed by the AIIMS Act 1956 as amended in the year 2012, there should not be any differences in terms of delegated financial and administrative powers for procurement of equipment and in terms of having specialties and super specialties teaching in AIIMS, New Delhi and other AIIMS. If the differences will be continuing, people will continue to rush to AIIMS New Delhi instead of going to other AIIMS. As a result, the objective of PMSSY Scheme for correcting regional imbalances in the availability of affordable/reliable territory healthcare services will remain a distant dream. Therefore, the Committee

strongly recommend that the Ministry of Health and Family Welfare should take necessary measures to treat all the AIIMS at par with AIIMS, New Delhi.

### **Reply of the Government**

Financial and Administrative powers of different functionaries are defined in the AIIMS, Regulations, 2019, which are uniformly applicable to all the AIIMS. Financial powers of Directors of AIIMS have been delegated with the approval of Governing Body / Institute Body of respective AIIMS. Keeping in view a much bigger scale of operations of AIIMS, New Delhi as compared to new AIIMS under PMSSY, the delegated financial power of Director, AIIMS, New Delhi is higher. As regards new AIIMS having lesser number of Specialty and Super-specialty Departments than AIIMS, New Delhi, it is stated that AIIMS at New Delhi has been functioning for more than six decades and has established itself a premier Institute in the country and internationally. The number of super-specialty and super-specialty Departments in the Institute has grown over the years with advancements in medical sciences, availability of super-specialists and with the approval of the competent bodies of the Institute. As far as new AIIMS are concerned, there is provision for 18 specialty and 17 super-specialty Departments as part of setting up of the Institute. However, as the Institutes grow and depending upon the availability of super-specialists, these Institutes can also set up more Departments with the approval of their competent bodies.

#### Comments of the Committee

(Please see Para No. 8 of Chapter – I)

### **Observations/Recommendations (Para No. 3)**

#### **Need for parity in the post of Director across all AIIMS**

In their recommendation contained in the Original 12<sup>th</sup> Report, the Committee had stated as under:

“The Committee are surprised to note that except for AIIMS, New Delhi which is headed by Director (with the age limit of 65) while other new 16 AIIMS are being headed by Executive Director (with the age limit of 70) who is in-charge of the institution as a whole. The Committee are informed by the representatives of the Ministry of Health and Family Welfare during oral deposition as well as in their written replies that PradhanMantrySwasthya Suraksha Yojana (PMSSY), was announced on 15th August, 2003 to establish six new hospitals with modern facilities like those available at



AIIMS, New Delhi. In pursuance of this announcement, a proposal was taken to the Expenditure Finance Committee(EFC) in November 2004. The EFC approved the setting up of six AIIMS-like apex healthcare institutes in the States of Bihar at Patna, Chhattisgarh at Raipur, Madhya Pradesh at Bhopal, Odisha at Bhubaneswar, Rajasthan at Jodhpur, and Uttarakhand at Rishikesh. The EFC also approved formation of a Central Apex Society under societies Registration Act, with the responsibility for establishing and running these six AIIMS-like institutions. After obtaining the approval of the EFC, a proposal was taken to the Cabinet Committee on Economic Affairs in March 2006 and CCEA approved six AIIMS-like institutions as well as formation of a Central Apex Society, for establishing and running these institutions. While approving the Revised Cost Estimates(RCE), because of cost escalation, a proposal was taken again to the Cabinet in February 2010. While approving the RCE, the Cabinet also underline the role of the Central Apex Society in establishing and running these six AIIMS-like institutions. Therefore, from 2006 to September 2012, these AIIMS-like institutions were not part of the AIIMS Act and existed outside it, governed by a Central Apex Society. In September 2012, there was an amendment in the AIIMS Act, which was notified. This amendment incorporated these new AIIMS-like institutions in Section 27 (a) of the Act and provided that all provisions of the Act shall apply to these institutions also. Once a decision was taken in September 2012 to make these six AIIMS as part of the amended AIIMS Act, the Central Apex Society ceased to exist. The Committee note that Article 11 of AIIMS Act provides that there shall be a Chief Executive Officer (CEO) of the Institute who shall be designated as the Director of the Institute. Section 31 of AIIMS Regulations, 2019 further provides in this regard that the Director shall have a term of five years from the date of assumption of charge of the post or till he attains the age of sixty five years, whichever is earlier.

In the meanwhile, with the aim of expeditious operationalization and to attract reputed faculty from AIIMS, New Delhi and other Institutes of National Importance (INIs), as well as other premier Institutions, to head new and upcoming AIIMS, it was a policy decision, decided in November 2018 with the approval of Department of Expenditure and Hon'ble Minister for Health & Family Welfare to have a post of Executive Director (ED) to operate on either / or basis with the post of Director, who will act as CEO of the Institute. CIB had approved two designations for new AIIMS. One is Director where the provision of 65 years remains as stipulated in the Act and the other nomenclature is 'Executive Director' where the provision of 70 years.

On being asked to clarify whether there is an enabling provision in the Act to empower the Government to take such decision, the Committee are informed that Section 11(4) of the Act says, "Subject to such rules as may be made by Central Government in this

behalf, the Institute may appoint such number of other officers and employees as may be necessary for the exercise of its powers and discharge of its functions and may determine the designation and grades of such officers and employees."The Committee strongly feel that other officers and employees cannot be above the Director. The Secretary Ministry of Health in his candid submission before the Committee has stated that the Act does not make a reference to Executive Director.

The Committee note that the Act does not make a reference to Executive Director and the decision has been taken after taking the consent of CIB as well as the consent of Hon'ble Minister for Health & Family Welfare and the Ministry of Finance and Department of Expenditure with the aim of expeditious operationalization of the new AIIMS and to attract reputed faculty from AIIMS, New Delhi and other Institutes of National Importance (INIs),as well as other premier Institutions, to head new and upcoming AIIMS. The Committee acknowledge the urgency of the decision taken at the highest level at the time of setting up of new AIIMS but at the same time wish to emphasize that since 17 years has been completed after the approval of EFC for setting up of new AIIMS and the Ministry have enough experience, now they must strictly follow the provision of the Act for appointment of Director in each new AIIMS instead of appointment of Executive Director to head the new AIIMS. Further, when in any Institute of national importance in India including AIIMS Delhi, there is no provision of appointing any person for heading administrative posts above 65 years of age, the Committee wish to reemphasize that the provision of the Act of parliament should be maintained across all AIIMS and there should not be any scope of difference among them. The Committee would like to see AIIMS as an epitome of medical excellence which shall only be possible with experienced talents coupled with physical viability; which does not seem viable with an age limit of 70 years.

The Committee strongly feel that the Ministry should not overlook the fresh talent and the career opportunities of the existing professors for the appointment to the post of Director in new AIIMS. Henceforth, the Committee strongly recommend that the Ministry of Health and Family welfare to take all measures not to make any compromises in the qualities of new AIIMS and to ensure the objective of the PMSSY i.e to augment quality medical education in the country and strictly adhered to the provision of the AIIMS Act."

### **Reply of the Government**

Presently, AIIMS at Jodhpur, Raipur, Nagpur and Mangalagiri are headed by Directors as the Chief Executive Officers (CEO). As has been informed to the Committee earlier, with a view to attract reputed faculty from AIIMS, New Delhi and other Institutes of National Importance (INIs), as well as other premier Institutions, to head new and

upcoming AIIMS, it was decided with the approval of Department of Expenditure and Hon'ble Minister for Health & Family Welfare to have a post of Executive Director (ED) to operate on either / or basis with the post of Director, who will act as CEO of the Institute. In the case of ED, the appointment can be upto maximum age of 70 years, with the upper age limit for eligibility for consideration being 67 years. The manner of selection of ED however would be the same as stipulated for the post of Director. Also, the eligibility criteria in respect of qualification and experience for consideration for appointment as ED will be the same as the post of Director.

Recommendation of the Committee has however been noted. Further, as stated above, post of Director / Executive Director is to operate on either / or basis, giving the Ministry to flexibility to appoint a Director as Chief Executive Officer of the Institute.

#### Comments of the Committee

(Please see Para No. 11 of Chapter – I)

## CHAPTER - V

### **Observations/Recommendations in respect of which final replies of Government are still awaited**

#### **Observations/Recommendations (Para No. 8)**

##### **Need for handing over encumbrance free land for new AIIMS**

The Committee observe that the land for setting up of AIIMS is required to be provided by the concerned State Government. Requirement of land for setting up of new AIIMS is about 200 acres. The Committee are informed that the site offered by the State Government for AIIMS at Darbhanga is low lying and the site already has some construction like water tank, power station, post office, BSNL yard & office and Police Stations. Further, the site of AIIMS, Darbhanga was finalized subject to certain conditions to be fulfilled by the State Government. The Committee are informed that the setting up of AIIMS in Manethi, Haryana was approved by Union Cabinet on 28.02.2019 at a cost of Rs 1299 Crore. However forest clearance for construction of AIIMS at the identified site could not be obtained by the State Govt. In the matter of AIIMS, Manethi, the Committee observe that an alternate land parcel measuring approx 175.85 acre in a village adjoining Manethi has been identified and the process for consent purchase of this land has been initiated. On the issue of monitoring the clearance of land for construction of AIIMS, the Committee are informed that there are two mechanisms for monitoring. One is at the level of the Ministry which is headed by the Additional Secretary and Financial Advisor in the Ministry of Health and Family Welfare and it has the Joint Secretary of the concerned State Government as well as the executing agency to whom the work has been awarded. The other mechanism is at the level of the Prime Minister's Office. These mechanisms review the position of not only the transfer of land but also the progress of construction. After such regular monitoring there has been progress in some cases. Keeping in view the delay in completion of new AIIMS which ranges from 2 to 12 years, the Committee wish that the existing two mechanisms to review the progress of new AIIMS will function in a pro-active manner in expediting the handover of encumbrance free land to the Ministry. The Committee desire that in case of any further delay in getting the clearance of land or any other issue, the Ministry should bring it to the notice of concerned Member of Parliament for taking up of the matter with their respective State Government. The Committee should be apprised of the progress made in this regard.

As pointed out at Manethi, the problem of environmental clearance should be taken up with Ministry of Environment, Forests and Climate Change on urgent basis so that the revised deadline for completion of setting up of AIIMS is achieved in time.

### **Reply of the Government**

On the matter of handing over of encumbrance free land for establishment of new AIIMS, it is stated that this Ministry is regularly taking up the matter with the concerned State Governments, i.e. Govt. of Bihar and Govt. of Haryana. Hon'ble M.P., Darbhanga is actively engaged in pursuing pending matters with the State Govt., including early handing over of encumbrance free land. In respect of AIIMS in Haryana, State Government has informed that the land purchase process has been finalized for land measuring 210 acres 3 Kanal 5 marla at Village Majra Mustil Bhalki in District Rewari. The matter has again been taken up at the level of Hon'ble Minister for Health & Family Welfare with the Hon'ble Chief Minister of Haryana vide letter dated 28.07.2022 for expediting acquisition of the identified land and its handing over to MoHFW.

Comments of the Committee

(Please see Para No. 23 of Chapter – I)

### **Observations/Recommendations (Para No.11)**

#### **Physical progress of All AIIMS**

The Committee note that AIIMS in Raibareli was initially approved by Cabinet on 05.02.2009. And the revised cost of expenditure was approved by EFC on 22.06.2017. The Cabinet approved date of completion was April, 2020. The revised date for completion has been shifted to November, 2021. Therefore, there is a delay of 1 year and 7 months. In this AIIMS OPD Block, hospital and academic campus and residential complex have been completed. MBBS classes and OPD facilities have been started. AIIMS Mangalgiri in Andhra Pradesh was approved on 07.10.2015. The Cabinet approved date of completion was October, 2020 and the expected date for completion is December 2021. Therefore, there is a delay of 1 year. In phase I OPD block and residential complex have been substantially completed. In phase II, 84% of hospital and academic campus have been completed; MBBS classes and OPD facilities have been started. IPD for COVID 19 treatment with COVID lab facilities has been made functional. The date of Cabinet approval for AIIMS Kalyani in West Bengal was 07.10.2015. The Cabinet approved date of completion was October, 2020 and the expected date for completion is November 2021. Therefore, there is a delay of 1 year. In this AIIMS, OPD block and residential complex have been substantially completed in

phase I. In phase II, hospital and academic campus have been substantially completed. MBBS classes and OPD facilities have been started. The Committee during their study visit to this AIIMS in the month of September 2021 had observed that syllabus for the MBBS classes were yet to be approved by the academic committee and there was no lab facilities for the MBBS students. AIIMS Gorakhpur in Uttar Pradesh was approved by the Cabinet on 20.07.2016. The Cabinet approved date of completion was April 2020 and the expected date for completion is November 2021. There is 88.50% progress in construction in EPC mode. MBBS classes and OPD facilities have been started. AIIMS Bhatinda in Punjab was approved by the Cabinet on 27.07.2016. The Cabinet approved date of completion was June 2020 and the expected date for completion is November 2021. There is 88.70% progress in the construction in EPC mode. MBBS classes and OPD facilities have been started. AIIMS Guwahati in Assam was approved by the Cabinet on 24.05.2017. The Cabinet approved date of completion was April 2021 and the expected date for completion is September 2022. There is 57.50% progress in the construction in EPC mode. Only MBBS classes have been started in this AIIMS. AIIMS Bilaspur in Himachal Pradesh was approved by the Cabinet on 03.01.2018. The cabinet approved date of completion is December 2021 and the expected date for completion is June 2022. There is 72% progress in the construction through EPC mode. Only MBBS classes have been started in this AIIMS. OPD facility is likely to start from December 2021. AIIMS Madurai in Tamil Nadu was approved by the Cabinet on 17.12.2018. The Cabinet approved date of completion is September 2022 and now this has been extended to October 2026. The extended period is almost four years. For this AIIMS site has been finalised, pre-investment work is in progress, preparatory survey by JICA Mission commenced in February 2020 and appointment of Project Management Consultant is in progress. Consultation with State Government and AIIMS Madurai is in progress to start MBBS classes from the current academic session from the temporary campus. AIIMS Dharbanga in Bihar was approved by the Cabinet on 15.09.2020. The Cabinet approved date of completion is September 2024 and it is expected to complete by this due date. However, the Committee note that till date site at Dharbanga has been finalised but the State Government is yet to handover the encumbrance free land. AIIMS Samba in Jammu was approved by the Cabinet on 10.01.2019. The Cabinet approved date of completion is January 2023 and it is expected to complete by this due date. However, the Committee note that there is only 32% progress in the construction through EPC mode. AIIMS Avantipura in Kashmir was approved by the Cabinet on 10.01.2019. The Cabinet approved date of completion is January 2025 and it is expected to complete by this due date. However, the Committee are concerned to note that there is only 6% progress in the construction through EPC mode. AIIMS Deoghar in Jharkhand was approved by the Cabinet on 16.05.2018. The Cabinet approved date of completion is February 2022

and the expected date for completion is June 2022. The Committee note that there is 58% progress in construction through EPC mode. MBBS classes and OPD facilities have been started. AIIMS Rajkot in Gujarat was approved by the Cabinet on 10.01.2019. The Cabinet approved date of completion is October 2022 and it is expected to complete by this due date. However, the Committee note that there is only 12% progress in the construction through EPC mode. Only MBBS classes have been started in this AIIMS. AIIMS Bibi Nagar in Telangana was approved by the Cabinet on 17.12.2018. The Cabinet approved date of completion is September 2022 and now it is expected to complete by November 2023. MBBS classes and OPD facilities have been started in this AIIMS. AIIMS Manethi in Haryana was approved by the Cabinet on 28.02.2019. The Cabinet approved date of completion is February 2023. However, the Committee note that till date the encumbrance free land is yet to be handed over by the State Government.

From the above mentioned facts the Committee observe that out of 16 AIIMS MBBS classes and OPD facilities have been started in 08 AIIMS. Only MBBS classes have been started in 04 AIIMS. The Committee further observe that all the 18 specialities are functional in all 06 AIIMS, namely, Bhopal, Bhubneshwar, Jodhpur, Patna, Raipur and Rishikesh. Out of 17 super speciality, the functionality status in Bhopal, Jodhpur and Patna is 14 respectively and in Bhubneshwar and Rishikesh it is 17 respectively. The dedicated COVID facilities have been operational in all AIIMS.

The Committee are aghast to note that in the six new AIIMS, viz Bhopal, Bhubaneswar, Jodhpur, Patna, Raipur and Rishikesh, many super specialty wards are still non-functional. This pinpoint at a greater laxity towards improper achievement of the targets set over time. Regarding the way forward to ensure completion of construction of all AIIMS in time and to make them fully functional the Committee are informed that regular review meetings of Ministry of Health and Family Welfare are being held with executive agencies and State Governments. The progress is also being monitored at the level of Prime Minister's Office.

The Committee recommend that the Ministry should constitute a Project Review Panel for each AIIMS which would evaluate both physical targets of construction of buildings as well as medical facilities every quarter and report laxities, if any to the Ministry which can look into the difficulties and solve them in time. The Committee are happy to note that the "use of drone" in evaluating the progress is one of the agenda of the Ministry. The Committee would urge the Ministry to initiate such review at the earliest in order to ensure timely completion of all AIIMS without further extension of time and make them fully functional at the earliest under intimation to them.

## Comments of the Committee

(Please see Para No. 26 of Chapter – I)

### **Observations/Recommendations (Para No. 12)**

#### **Dedicated Research Activities**

The field of medicine is predominantly dependent on continuous research for its efficacy and development. Research and Development is an inherent feature of medical field. On being asked whether in all AIIMS, lab facilities are functional with respect to both research and for patients, the Committee are informed that Lab facilities are in place in all the six functional AIIMS which are used for both patient services and research activities. Depending up on the functionalities of speciality and super specialty departments and availability of faculty, Institutes under take both extra mural and intra mural research. There is however, no separate allocation by the Ministry for research. The Committee are of the strong view that the Ministry of Health and Family welfare should take up this matter with the Ministry of Finance, Department of expenditure to have a separate allocation for research activities and fill up the required post of specialties and super specialties as it is linked with availability of lab facilities.

The Committee note that the extramural research funding by Department of Science and Technology, D/o of Bio Technology, Indian Council of Medical Research etc. have been taken up at AIIMS, New Delhi. However, the Committee are pained to note that institutions like AIIMS, New Delhi which is considered to be the epitome of health services does not fully spend funds under its research head. The Committee observe that for the years 2018-19, 2019-20 & 2020-21, the institution's total receipts (for research) were Rs. 1,162,738,574.28 lakh, Rs. 1647870753.89 lakh & Rs. 1643432507 lakh respectively. The total expenditure (on research) during the year 2018-19 is Rs. 1107715966 lakh, during the year 2019-20 is Rs. 1448611449 lakh and during the year 2020-21 is Rs. 1218124390 lakh. The Committee would like the Ministry to urge all the AIIMS to concentrate on research activities in full spirit, only then the full fledged development in the arena of medicine would be possible. The Committee are of the firm view that in a country like India where affordable medical aid is one of the essential need for majority of the population, well founded research has to be given full focus by pioneering medical institutions like AIIMS.

On being asked whether research team from AIIMS has conducted any studies on chemical contaminated water canals of Punjab and Haryana which is the major cause of cancer in those areas, the Committee are informed that “no such study has been conducted”.



Keeping in view the gravity of the situation the Committee desire the Ministry to undertake proper research on this aspect and suggest remedial measures for the same.

### **Reply of the Government**

In all the AIIMS lab facilities are being used for both patient care and research. Regarding the unspent funds, this is related to extramural funds, which the Institute receives for research projects sponsored by other agencies. Institutes will be advised to improve utilisation of their research funds. Recommendation of the Committee for research on impact of chemical contaminated water canals of Punjab and Haryana on cancer cases in those areas will be pursued.

Comments of the Committee

(Please see Para No. 29 of Chapter – I)

### **Observations/Recommendations (Para No.15)**

#### **Authorized and existing specialist and super specialist in AIIMS, New Delhi**

The Committee observe that the total sanctioned strength of faculty in AIIMS, New Delhi is 1115. Against this the total in-position faculty is 746 in Regular posts and 55 in Contractual. The total vacancy is 314. Out of total vacancy position of 314; 157 vacancies are in upcoming Centres / Block / Facilities. The Committee are informed that efforts are being made to fill the vacancies. These vacancies would have been advertised in 2020 on regular basis with existing Reservation Roster, but were withheld due to Government instruction received from the Ministry of Health & Family Welfare vide letter dated 23.02.2021 to re-draw the Reservation Rosters for recruitment of faculty in AIIMS. The Institute is in the process of re-drawing the Reservation Roster as per Reservation in Teachers Cadre Act, 2019. A Committee has been constituted for the purpose and the Reservation Roster is being finalized and onwards vacant post will be advertised soon. The Committee hope that the Ministry would take appropriate action for filling up of the vacant posts without further loss of time and apprise them about the final action taken in this regard.

### **Reply of the Government**

Implementation of Central Educational Institutions (Reservation in Teachers' Cadre) Act, 2029 required redrawing of reservation rosters and necessary instruction in this

regard was issued by MoHFW. Accordingly, Reservation Roster of Assistant Professor has been finalized. Reservation Rosters for Faculty of Nursing, Medical Superintendent and Professors have been approved by Roster Committee and approval of Competent Authority is being obtained and these rosters are being finalized. Further, 252 posts of Assistant Professor were advertised in November, 2021 for filling of the vacant posts except for 46 posts for which Recruitment Rules / Nomenclature was under revision. Recruitment process for these posts will be finalized after finalization of Recruitment Rule /Nomenclature. 03 Vacant post of Associate Professor of College of Nursing and 01 vacant post of Medical Superintendent are going to be advertised soon. 96 vacancies of Professor under Direct Recruitment for which selection process is not being held due to administrative reason.

Comments of the Committee

(Please see Para No. 32 of Chapter – I)

**NEW DELHI**  
**16 March 2023**  
**25 Phalguna 1944 (Saka)**

**GIRISH BHALCHANDRA BAPAT**  
**CHAIRPERSON**  
**COMMITTEE ON ESTIMATES**

**MINUTES OF THE SIXTEENTH SITTING OF THE COMMITTEE ON  
ESTIMATES (2022-2023)**

The 16<sup>th</sup> Sitting of the Committee was held on Thursday, the 16<sup>th</sup> March, 2023 from 1500 hrs. to 1530 hrs. in Room No. '52-B', First Floor, Parliament House, New Delhi.

**PRESENT**

**Shri Nihal Chand Chauhan – Convener**

**Members**

2. Kunwar Danish Ali
3. Shri Kalyan Banerjee
4. Shri P.P. Chaudhary
5. Dr. Sanjay Jaiswal
6. Shri Dharmendra Kumar Kashyap
7. Shri Mohanbhai Kalyanji Kundariya
8. Dr. K.C. Patel
9. Shri Vinayak Bhaurao Raut
10. Shri Ashok Kumar Rawat
11. Shri Magunta Srinivasulu Reddy
12. Shri Rajiv Pratap Rudy
13. Shri Dilip Saikia
14. Shri Francisco Cosme Sardinha
15. Shri Jugal Kishore Sharma
16. Shri Prathap Simha
17. Smt. Sangeeta Kumari Singh Deo
18. Shri Shyam Singh Yadav

## **SECRETARIAT**

1. Smt. Anita Bhatt Panda - Additional Secretary
2. Shri Muraleedharan. P - Director
3. Shri R.C. Sharma - Additional Director

2. At the outset, the Chairperson welcomed the Members to the sitting of the Committee and briefed them about the agenda of the sitting viz. consideration and adoption of three draft Report(s).

3. The Committee then took up for consideration and adoption of the following draft Reports:

(i) Xxx xxx

(ii) Action Taken by the Government on the Observations/Recommendations of the Committee contained in their 12<sup>th</sup> Report (17<sup>th</sup> Lok Sabha) on the subject 'Review of Progress of all AIIMS; and

(iii) Xxx xxx

4. The Committee after due deliberations adopted the draft Action Taken Reports without any modifications and authorised the Convener to present the same to Lok Sabha.

5. xxx xxx

***The Committee, thereafter, adjourned.***

## APPENDIX-II

### ANALYSIS of Action taken by the Government on the recommendations contained in the 12<sup>th</sup> Report of the Committee on Estimates (Seventeenth Lok Sabha)

(i)	Total number of recommendations/observations	18
(ii)	Recommendations/Observations which have been accepted by the Government: (Sl. No. 1,4,5,6,7, 9,13,14,16,17,18) Percentage of total recommendations	11  61.11%
(iii)	Recommendations/Observations in respect of which Government's replies have not been accepted by the Committee: (Sl. No. 2, 3) Percentage of total recommendations	2  11.11%
(iv)	Recommendations/Observations which the Committee do not desire to pursue in view of Government's reply: (Sl. No. 10) Percentage of total recommendations	1  5.56%
(v)	Recommendations/Observations in respect of which final reply of Government is still awaited: (Sl. No. 8,11,12,15) Percentage of total recommendations	4  22.22%