

**URGENT**

**F.No.R-13040/10/2011 -HD (Tech)**

Government of India

Ministry of Health & Family Welfare

Deptt. of Ayurveda, Yoga and Naturopathy, Unani Siddha and Homoeopathy

Indian Red Cross Society Annexe Building,

1-Red Cross Road, New Delhi-110 001

Dated the June<sup>16</sup>, 2011.

To

The Principals/Dean/Directors  
of all Homoeopathy Medical Colleges

**Subject: Procedure for consideration of the cases of Homoeopathy medical colleges for permission under the provisions of the Homoeopathy Central Council Act, 1973 for the academic year 2011-12.**

Sir,

I am directed to invite your attention on the subject mentioned above and submission of any documents/data by the colleges after the CCH's visitation /inspection in the Department of AYUSH for consideration.

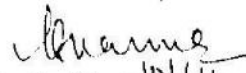
2. With a view to ensuring the quality of medical education and safeguarding the student's interest as envisaged under the Homoeopathy Central Council Act, 1973 and in view of the operational difficulties as experienced by the Central Government as set out in **ANNEXURE-1** which are negating the purpose for which the inspection/visitation are being carried out, the Central Government has decided as under:

That submissions, either oral or written, of a medical college during the hearing held in pursuance of First proviso to sub-section (4) of section 12A of HCC Act, 1973 or at any stage thereafter will be confined to, and will be only with reference to the position that prevailed as on the date of inspection/visitation by the CCH. In no circumstances the data beyond the specified period will be taken into consideration. Only such additional information or documents that are relevant to the claim, if any, of the college that the actual position that prevailed on the date of inspection/visitation was different from the position observed by the inspection team, will be considered for the purpose of decision of the Central Government.

Some of such examples of the data to be considered and not to be considered by the Central Government during hearing or at any stage thereafter are being enclosed at ANNEXURE-2 as illustration.

Encl. As above.

Yours faithfully,

  
(Sunita Sharma)<sup>10/6/11</sup>

Under Secretary to the Government of India

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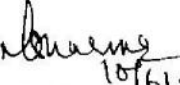
1. The Secretary, CCH, 61-65, Institutional Area, Opp. 'D' Block, Janak Puri,  
New Delhi - 110058, for information and necessary action at their level.

2. The Registrars of all Universities having affiliated Ayurveda, Siddha and Unani Colleges, for information and necessary action at their level.

3. All State Health/ ~~Ayurveda~~ <sup>Hemecology</sup> Secretaries and State Directors ~~(Ayurveda/Siddha/Unani)~~ <sup>Hemecology</sup>, for information and necessary action at their level.

**Copy also to following for information:**

1. PS to Hon'ble HFM.
2. PS to Hon'ble MOS.
3. PPS to Secretary, AYUSH
4. PS to JS (DDS)
5. DIR (VSG)/Jt. Adv. Ay.(MN)
6. Members of Hearing Committee/Officers of EP Section
7. To NIC for urgently uploading on Departmental website -  
[www.indianmedicine.nic.in](http://www.indianmedicine.nic.in).

  
10/6/11  
(Sunita Sharma)

Under Secretary to the Government of India

## **ANNEXURE- 1**

1. After enactment of the HCC (Amendment) Act, 2002 and in course of consideration of conditional permission being granted to the existing Medical Colleges, it has been observed that Medical Colleges, either during the hearing stage or even after denial of the permission, by way of various representations before various authorities keep on submitting their modified contentions by way of either recruitment of new teachers or by showing higher data regarding OPD/IPD figures of Hospital functioning. This, sort of repeated submissions by the Medical Colleges are creating serious operational difficulties in the matter of processing their applications for grant of permissions. Further, more, the repeated submissions are also making it extremely difficult in enforcing the quality of education and safeguarding interest of students as envisaged under the Act. Few of such difficulties are as follows:

- (i). The very claim itself of medical colleges of either recruitment of new teachers or of having a better functional hospital than what had been found by the CCH's visitation team, defeats the very basic purpose of inspection and visitation of the medical institutions as envisaged under Section 17 and 18 of the Act.
- (ii). The subsequent examination of such claims of such newly recruited teachers or better hospital functioning beyond the specified period of 1st January to 31st December of the relevant year has been found to be resulting in adoption of unfair and incorrect practices by the colleges as they submit fabricated data of higher number of teachers/hospital functioning. This makes it quite difficult for either Central Government or CCH to come to a assessment of actual and factual status.
- (iii). Subsequent submissions requires continuous re-verification leading to over stretching of existing resources of Government and CCH. Thus, a lot of time of the Department and CCH is being consumed in reviewing such cases repeatedly which causes undue delay in processing the cases and conveying the decision to the colleges.
- (iv). This is also against student's interest since the students are not getting admissions in time and this results in great confusion among the students and parents to take decision whether the college in which they have been selected by counselling is duly permitted or not under the law.
- (v). There have been instances where it has been found that large number of teachers are shown as recruited at the time of hearing or subsequent to examination before the Central Government and after the colleges have been given permission and in subsequent surprise inspection of such colleges many of such teachers have been found to be missing.
- (vi). The admissions session starts from July and ends by October of every year. The colleges undertake admission without having permission and then put up various representations on the basis of such data of status of teachers and hospital functioning beyond the specified period of 1st January to 31st December of relevant year claiming to be much higher than what was found during inspection/visitation by CCH.
- (vii). There have been instances where, it has been found that hospital is just not functional but fabricated registers were produced during examination at the Central Government level showing much higher number of patients being treated in OPD/IPD. Similar instances of fabricated data have been found in respect of teachers also.

(viii). It has been also observed that many teachers have been found to be working in two or more colleges and this sort of duplicity occurs because the dates of visitation by CCH and examination by Central Government have long gap and teachers are shown from one college to another college.

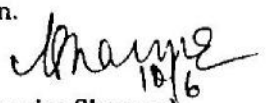
2. In this background, it is instructive to recapitulate briefly the policy and procedure the Central Government has been adopting-

i. The Homoeopathy Central Council Act, 1973 (as amended from time to time) in sections 17 and 18 empowers the Central Council of Homoeopathy (CCH) to undertake inspection of the Homoeopathy medical colleges. Further, Section 12A (3) provides for CCH to submit its recommendations to the Central Government.

ii. Further it is informed that before undertaking the actual inspection, the CCH sends a Proforma to the college concerned for furnishing the requisite information. The actual inspection or visitation normally takes place in the months of February, March of each calendar year. The crucial date for determination of the status of compliance of a particular medical college is the date of visitation/inspection by the CCH. The decision of the Central Government in respect of a medical college in the matter of permission for fresh admission of students in an academic session is taken, in most cases, on the basis of the report and recommendations of the CCH.

iii. In such cases where in course of consideration of the report and recommendations of the CCH and examination by the Department of AYUSH, a tentative view emerges that the college in question suffers from certain deficiencies and grant of permission may not be possible, the Central Government, in compliance with the First proviso to sub-section (4) of section 12A of the HCC Act, 1973, gives an opportunity of personal hearing to the college concerned with respect to the shortcomings and deficiencies observed. The decision of the Central Government is taken after consideration of all facts and circumstances including the report and recommendations of the CCH and the submission made by the college during the hearing held in the Department of AYUSH in pursuance of the aforesaid provision of the HCC Act, 1973.

3. Keeping in view, the above provisions (as listed at para 2 above) and the difficulties being observed by the Central Government (as given at para 1 above), the Central Government is of the considered view that the process of the inspection/visitation by the CCH or a Central Team, where considered appropriate, to verify the status of compliance of a particular medical college **cannot be a never ending process and there has to be reference date based on which the decision for particular academic year is required to be taken.** This is particularly relevant in the context of avoiding a set of teachers being counted /taken into consideration for more than one medical college. The prospects of teachers being found in the duplicity can be eliminated only if the strength and status of eligible teachers as on a particular date is taken into consideration for the purpose of decision for the relevant academic session.

  
(Sunita Sharma)

Under Secretary to the Government of India

## ANNEXURE-2

Some of the illustrative examples of the data to be considered and not to be considered by the Central Government during hearing and during subsequent examination.

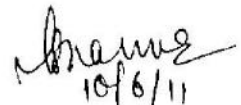
(i) If, a college requires 43 eligible teachers for UG course with 50 seats and the CCH recommends to the Central Government not to grant permission to that college due to non eligibility of 10 teachers out of required 43 eligible teachers, the Central Government during hearing and subsequent examination will consider the claim of the college only for those 10 non-eligible teachers and not for any new appointments made after the date of visitation/examination. For this, the college has to submit the relevant original/authenticated documents of requisite qualification, experience, appointment, joining, promotion, affidavit, bank statement, salary and attendance record etc. It is reiterated that the Central Government will not consider the claim of college for recruitment of some other teachers than those already listed 10 non-eligible teachers.

(ii) If a college requires minimum 25 bedded hospital for 50 intake capacity in UG and the CCH recommends to the Central Government not to grant permission to that college due to shortage of 5 beds, the Central Government will consider the claim of the college only for the 5 beds, for which the college has to submit the relevant records like purchase bills for beds and its accessories, IPD register, diet register, bedside case sheets etc.

(iii) If a college requires a functioning hospital and the CCH recommends to the Central Government not to grant permission to that college due to non functioning/ non-availability of sufficient clinical material, the Central Government will consider the claim of the college for the availability of clinical material and functioning of hospital for which the college has to submit the relevant original hospital records (IPD & OPD) and authenticated data for the previous calendar year (from 1st January, 2010 to 31st December, 2010) like Central and Department-wise OPD registers, Investigation register, Dispensary register, attendance and duty registers of hospital staff etc and the reasons for disagreement with conclusion of the visitation team about the assessment of OPD data. In no case the data beyond specified period shall be taken for assessment.

(iv) If, a college requires 50 hospital staff for a 50 bed hospital and the CCH recommends to the Central Government not to grant permission to that college due to non availability of 10 hospital staff out of required 50 hospital staff, the Central Government during hearing and subsequent examination will consider the claim of the college only for those 10 hospital staff and not for any new appointments made after the date of visitation/examination. For this, the college has to submit the relevant original/authenticated documents of requisite qualification, experience, appointment, joining, promotion, bank statement, salary and attendance record etc. It is reiterated that the Central Government will not consider the claim of college for recruitment of some other hospital staff than those already listed 10 as deficient.

(v) If, a college requires 466 Equipments in various Departments and the CCH recommends to the Central Government not to grant permission to that college due to non availability of 50 equipments out of required 466, the Central Government during hearing and subsequent examination will consider the claim of the college only for those 50 equipments and not for any new equipment made available after the date of visitation/examination. For this, the college has to submit the relevant original purchase bills for equipment etc. It is reiterated that the Central Government will not consider the claim of college for purchase of some new equipment.



(Sunita Sharma)

Under Secretary to the Government of India