

## MINUTES OF THE 18<sup>TH</sup> MEETING OF THE CENTRAL SUPERVISORY BOARD

The 18<sup>th</sup> Meeting of the Central Supervisory Board (CSB), constituted under the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994, was held on 14.01.2012, at 3.00 pm in the Conference Hall, Sahyadri State Guest House, Mumbai under the Chairmanship of Hon'ble Union Minister of Health & Family Welfare.

List of participants is at Annexure A.

1. Welcoming the members, Secretary (H & FW) expressed satisfaction that the CSB meeting was being held as per stipulated schedule. Enumerating the steps taken by Government of India and State Governments to curb sex determination tests, he stated that the monitoring mechanism in States has been strengthened through regular State specific reviews in addition to inspections of ultrasound facilities .
2. HFM emphasized that effective enforcement of the PNDDT Act and requisite action against guilty clinics are required to prevent misuse of technology for sex determination. He informed that the drive against violators of the Act has been further intensified and action taken was also reviewed with State Health Ministers and Health Secretaries on 28th September, 2011
3. JS(RCH) stated that the decline in child sex ratio requires a long term vision and policy perspective which draws upon the substantial progress at the level of States in effective implementation of the Act. She informed that states have been exhorted to build capacity and intensify IEC activities and also take advantage of the funding available under NRHM for dedicated PNDDT activities
4. Dr. Prabhakishore Taviad, Member of Parliament (Lok Sabha), referred to the continuing decline in child sex ratio in Mehsana district of Gujarat and suggested that registration of pregnancies in 1<sup>st</sup> trimester pregnancy by ANMs should be made compulsory. She requested the medical fraternity to cooperate with the Central Government to curb misuse of diagnostic techniques for a more gender balanced society.
5. Highlighting the issue of declining child sex ratio across the country, Health Minister, Maharashtra informed the Board about the pro-active role played by the Judiciary in the state, with specific reference to the judgment of the Bombay High Court paving the way for clearing all pending PNDDT cases by December,2011 .He stated that sensitisation of Judiciary has been undertaken in a big way in the state and training of Appropriate Authorities at state, district and sub-district level was essential for proper interpretation of the law. He requested that medical professional organizations should extend their dedicated support to curb sex selection.

7. Dr.Sanjay A.Gupte, former President, FOGSI suggested that sensitization of judiciary and Appropriate Authorities was important to carry forward the campaign against sex selection including effective conduct of decoy/sting operations against erring doctors/ultrasound diagnostic facilities.
8. Responding to the need for capacity building of Judiciary, Addl.Chief Secretary (H& FW) Maharashtra, stated that the Judiciary has been trained upto district level in the State and a record 9 out of a total of 11 decoy operations were successful in the State including 14 convictions in the past two months, including imprisonment.
9. Dr.Girija Wagh opined that Appropriate Authorities(AAs) and Advisory Committees at the district level often face difficulty in interpreting the law and AAs sometimes resort to investigation of unrelated records. She also suggested that mapping of areas with skewed sex ratios was necessary.
10. Member-Secretary, NCW pointed out that Ministry of H & FW has brought out several publications in the form of Frequently Asked Questions (FAQs) for implementing agencies, medical professional bodies and the public to de-mystify the Act. She further emphasized that implementation of the PC & PNDT Act would have to be strengthened and implementing agencies have to ensure transparency in action against violators of the Act.
11. President- IRIA suggested that a graded system of punishment be put in place for minor technical omissions on the part of ultrasound service providers. He opined that suitable redressal mechanism for doctors to file representations needs to be considered, so that genuine service providers are not targeted as opposed to professionals apprehended for illegal sex determination.
12. In the context of advertisements related to sex determination published in Dainik Jagran, Dr.Neelam Singh, Vatsalya informed that in Uttarakhand, practitioners of alternative system of medicine are marketing brand names of sex determination drugs .She reiterated that non-maintenance of records is an offence under the PNDT Act and action taken by Appropriate Authorities on grounds of non-maintenance of records etc could not be termed incorrect. Further, Form-F is very carefully designed and a systematic analysis can lead to vital clues on illegal sex determination.
13. Dr.Rajeev Yeravdekar, informed that the MCI has finalized guidelines towards standardization and accreditation of institutions for training and valid registration under the PNDT Act, with the curriculum for the 6 month training, vetted by subject experts.
14. Dr.R.N.Tandon, representative of IMA opined that the use of ultrasound as a diagnostic tool cannot be disputed and a balanced approach to address the issue of

sex determination was warranted. Sensitization of doctors is required to systemize implementation of the law.

15. Dr. Gayatri Thakker voiced her concern on the lack of clarity on the part of Appropriate Authorities in interpretation of the PNDDT law with regard to violations perceived under the Act and suggested a suitable redressal forum for ultrasound service providers.

16. Dr. Ravinder Kaur, Professor-IIT observed that understanding of the provisions of the Act was a matter of comprehension and the perceived gaps in interpretation of the Act by Appropriate Authorities could be overcome by a code of conduct for medical fraternity that could be developed by the MCI.

17. Anuja Gulati, UNFPA informed that a compendium of case-laws on PNDDT has been put together by UNFPA in collaboration with Maharashtra Judicial Academy. It was mentioned that judgment of the Hon. Bombay High Court has been reinforced by the trial courts in the state.

18. Mr. Subhas Mendhapurkar, SUTRA highlighted the need to incorporate changes in the relevant provision to ban the sale and buy-back arrangement of second hand ultrasound machines. It was also suggested that the State Appropriate Authority should heighten surveillance including overseeing the status of disposal/re-assembly of such machines.

The Agenda items were then taken up for discussion as under:

**(i). Agenda Item No. I :- Confirmation of the Minutes of the 17<sup>th</sup> meeting of the Central Supervisory Board**

The minutes of the 16<sup>th</sup> meeting of the Central Supervisory Board were confirmed subject to substitution of observations made by Shri. Sanjay Anant Gupte as under:

Item 9: numbered (vii) to be read as follows-

Cases of registered radiologists providing services at multiple ultrasound clinics was a major factor for unlawful sex determination practices because if radiologist is providing services for only 1-2 hours in a day at one centre; then those machines are sometimes misused in his absence. Silent observer or such devices fitted in the machine which ensures evidence of recording every time the machine turned on; will also help in checking underreporting of ultrasound procedures. Also online data filling or proper use of software will help in accurate filling of "F" forms. However the information contained in the F-Forms needs to be rationalized.

**(ii). Agenda Item No. II: Action Taken Report on decisions taken in the 17<sup>th</sup> Meeting of Central Supervisory Board held on 04.06.2011**

Action Taken on various decisions/recommendations of the 17<sup>th</sup> meeting was noted.

**(iii). Agenda Item No. III: A review of the status of implementation of PC & PNDT Act in states and future strategies**

JS(RCH) apprised the Board about the status of implementation of the PC & PNDT Act as given below:

- MOHFW has intensified review with the states for effective implementation of PC& PNDT Act.
  - ✓ A Ministerial meeting was held under the Chairpersonship of Union Health Minister with State Health Ministers on 28th September, 2011 at New Delhi to strengthen effective implementation of the PC & PNDT Act.
  - ✓ The intensification of the drive against sex determination through effective implementation of the Act is being reviewed regularly in State meetings.
  - ✓ Status of Implementation of PC&PNDT Act was included in the TORs of the Joint Review Mission (JRM), Common Review Mission (CRM and Integrated Monitoring Visits for the current year so that teams can assess the situation on the ground.
- As per Quarterly Progress Reports (QPRs) submitted by States/ UTs, 43961 bodies have been registered under PC& PNDT Act, 869 machines have been sealed and seized for violations of the law. A total of 1040 court cases have been filed under the Act and 85 convictions have been secured under the PC&PNDT Act.
- QPRs are now reflecting an improved compliance of the provisions of the Act by States. All the states have now constituted State Supervisory Board, State Appropriate Authorities, State Advisory Committees, District Appropriate Authorities, and District Advisory Committees. Meetings of these statutory bodies are also taking place.
- Inspections by the National Inspection and Monitoring Committee (NIMC) have been intensified. Since the last CSB Meeting on 4th June 2011 inspections have been carried out in Chhattisgarh, Maharashtra, Delhi, Haryana Uttar Pradesh and Madhya Pradesh. A total of 67 clinics were inspected in 17 districts and 18 clinics sealed between Jan -Dec 2011. 3 cases have already been filed in court.
- Action against clinics/facilities violating the provisions of the PC& PNDT Act has also been scaled up. Since May 2011, a total of 173 cases have been filed, 460 machines have been sealed and 14 convictions have been secured. A total of 85 convictions have been secured against violators of the PC&PNDT Act so far and following conviction the medical licenses of 13 doctors have been suspended.
- Rule 11(2) under the Act has been amended on 31st May 2011. The amendment provides for confiscation of unregistered machines and further punishment upto 3 years of imprisonment and fine upto Rs 50,000/-. Earlier, only a penalty of five times of registration fee could be levied as punishment for non- registration under the Act. Registration fee being Rs 3000/- to Rs 4000/-. An unregistered clinic could go scot-free after paying Rs 15000 to 20,000/- only.
- The Central Government is rendering financial support to the states to strengthen structures for the implementation of the Act under NRHM and has in 2011-12 allocated a total amount of Rs. 22.45 crores for PNDT cells., IEC and other activities

(iv). **Agenda Item No. IV: Guidelines developed by MCI with regard to qualifications, experience of ultrasound service providers and accreditation of institutions for training**

A. The guidelines submitted by MCI were discussed at length and the amendment to Rule 3(1) (b) as proposed by Ministry was approved.

Amendment in Rule 3(1) (b) of the PC & PNDT Rules to read as under-

	<u>Existing Provisions in PC &amp; PNDT Act and Rules</u>	<u>Proposed Amendment</u>
1.	Rule 3 (1) (b) states that "Any person having adequate space and being or employing a sonologist, imaging specialist, radiologist or registered medical practitioner having post graduate degree or diploma or six months training or one year experience in sonography or image scanning."	"Any person having adequate space and being or employing a sonologist, imaging specialist, radiologist or registered medical practitioner having post graduate degree or diploma or six months training in the manner as may be prescribed."

CSB further decided that a committee consisting of JS(RCH), Dr. Rajeev Yeravadekar and two other members nominated by MCI would re-evaluate the proposed 300 hour syllabus with a view to make it more broad-based so as to impart comprehensive skills on ultrasonography rather than limit the skills to Obs./Gynae only. The Committee would also outline a uniform framework for accreditation of training institutes by States including competency based evaluation. It was also decided that Registered Medical Practitioners with Diploma/PG in Radiology and Obs./Gynae would not be required to undergo six months training.

CSB approved the recommendation as under:

The training centre should be duly recognized by the State Government recognized teaching institution. As such it should have the requisite infrastructural facilities, equipment / machinery & trained faculties. The recognition and monitoring of various teaching & training centres will be done by respective State Government and the list of such appropriate centres will be notified by respective State Government.

It will be mandatory for the existing training centres to apply to the state authority for recognition of their centres within four (4) months of these amendments in the PC-PNDT Act. It will be the responsibility of State Governments to display the list of all such training centres recognized for the purposes of training within Six months of these amendments in the PC-PNDT Act.

Given the shortage of doctors with post-graduate qualifications on the one hand and the growing need of ultrasound services on the other, it was decided that any MBBS graduate will be eligible for training at such Govt. recognized teaching centers. Such a trained MBBS graduate (without post-graduate qualification) will then be entitled to practice Sonography.

It was approved that the above changes would be implemented prospectively and doctors who have already been granted registration under the PC-PNDT Act on the basis of 6 months training or experience would require to take a competency based exam for continuation of their registration on a retrospective basis.

**(v). Agenda Item No. V: Draft Amendment with regard to regulation of portable Ultrasound equipment to curb their widespread misuse**

CSB was apprised of the amendment to ban mobile portable ultrasound equipment duly vetted by the Ministry of Law and Justice.

**(vi). Agenda Item No. VI: Multiple registrations of doctors at ultrasound facilities**

Amendment restricting the Registration of a radiologist / sonologist with ultrasound clinics to a maximum of 2 clinics/facilities within the district was approved, with working hours clearly specified in the registration itself. CSB decided that registration of doctors would be allowed maximum two centres that too within the district only. Number of hours which the Registered Medical Practitioner would be present in each clinic would be specified clearly.

**(vii). Agenda Item No. VII: Increase in Registration fee of facilities/clinics registered under the PNDT Act.**

The Board approved the enhancement in Registration fee for bodies under Rule 5 of the PNDT Rules 1996 as per details mentioned below, conditions for renewal remaining unchanged:

Every application for registration under rule 4 shall be accompanied by an application fee of:-

(a) Rs.25,000 for Genetic Counselling Centre, Genetic Laboratory, Genetic Clinic, Ultrasound Clinic or Imaging Centre.

(b) Rs.35,000 for an institute, hospital, nursing home, or any place providing jointly the service of a Genetic Counseling Centre, Genetic Laboratory and Genetic Clinic, Ultrasound Clinic or Imaging Centre or any combination thereof.

**(viii) Supplementary Agenda: Amendment to Rule 13 of the PNDT Rules**

Amendment to Rule 13 was approved and the CSB decided that Every Genetic Counselling Centre, Genetic Laboratory, Genetic Clinic, Ultrasound Clinic and Imaging Centre shall intimate every change of employee, place, address and equipment installed, to the Appropriate Authority 30 days in advance of the expected date of such change, and seek issuance of a new certificate with the changes duly incorporated.

**(ix) Any other Agenda:**

- CSB decided that a rule be incorporated to ensure monitoring of disposal/sale of second hand/re-assembled ultrasound machines.
- MCI would take steps to suspend/cancel registration of doctors convicted under the Act.
- Professional bodies would evolve a code of conduct for their members to ensure they don't indulge in illegal sex determination and sex selection and enforce it strictly. They should also convey information about violations to the Appropriate Authorities.

The meeting ended with vote of thanks by Addl.Chief Secretary, Maharashtra.

List of Participants

1. Dr. Ghulam Nabi Azad,  
Hon'ble Minister for Health & Family Welfare - In Chair
2. Shri.Suresh H.Shetty,  
Health Minister,Maharashtra
3. Dr.(Smt). Prabha Kishore Taviad,  
Member of Parliament (Lok Sabha)
4. Shri P. K. Pradhan,  
Secretary (H&FW)
5. Shri.Jayant .K.Banthia  
Additional Chief Secretary(H & FW),Maharashtra
6. Ms. Anuradha Gupta,  
Joint Secretary, MoHFW
7. Ms. Aditi S. Roy  
Sr. Advisor, Ministry of Women & Child Development
8. Ms. Anuradha Vemuri,  
Director, MoHFW
9. Shri Anshu Prakash,  
Principal Secretary (H&FW), Delhi.
10. Shri Satish Chandra,  
Principal Secretary (H&FW), Punjab
11. Shri.P.K.Taneja  
Secretary (PH), Gujarat
12. Shri.Vikas Kharge,  
Mission Director (NRHM), Maharashtra
13. Shri Yashpal Sharma  
Mission Director (NRHM), J& K
14. Dr. Prakash Vaghela,  
Asstt. Director (FW), Gujarat
15. Dr. Rajiv Yeravdekar,  
Director, Symbiosis Institute of Health Sciences, Pune
16. Mrs. Anita Agnihotri  
Member-Secretary, National Commission for Women, New Delhi

17. Dr. Gayatri Thaker,  
Gynaecologist & Obstetrician, Siddhivinayak Hospital, Jamnagar, Gujarat
18. Dr. Bhardwaj,  
President, Indian Radiological & Imaging Association
19. Dr. Jignesh Thaker,  
General Secretary, IRIA
20. Dr. Subhas Mendhapurkar,  
Director, SUTRA, Himachal Pradesh
21. Dr. Neelam Singh,  
Secretary, Vatsalya, Lucknow
22. Dr. R N Tandon,  
Indian Medical Association
23. Dr. Sanjay Anant Gupte,  
Former President, FOGSI, Mumbai
24. Dr. Girija Wagh,  
HOD(Gyno.), Vidya Peeth University Medical College, Pune
25. Dr. Ratna Jain,  
Mayor, Nagar Nigam, Kota
26. Ms. Dhanashri Brahme,  
Programme Officer, UNFPA
27. Ms. Anuja Gulati, UNFPA
28. Mr. R.K. Singh  
Director (PIB), Mumbai
29. Shri. Arun Chowdhury, US(PNDT)

