

that (i) the pharmacists registered under Sections 31(a), 31(b), 31(c) and 32 of the Pharmacy Act, 1948 be reconsigned as technical hands and the applicable scale of pay of Rs. 425-700 be granted, (ii) the selection grade posts be raised to 30 per cent and (iii) separate higher scale be given for Pharmacists/Store-keepers; and

(b) if so, the reaction of Government thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI JAGDAMBI PRASAD YADAV): (a) and (b). The recommendations of the Pharmacy Council of India and various other organisations of the pharmacists for the upgradation of their scale of pay of Rs. 330-560, as recommended by the Third Pay Commission, and to bring it at par with Diploma holders of Civil/Electrical Engineering in the scale of Rs. 425-700, the raising of the selection grade posts of pharmacists to 30% and the provision of a separate higher scale for Pharmacists/Store-keepers, were carefully considered, but it was not found possible to agree to the same for the reason that such steep increase in the emoluments of Pharmacists is likely to have repercussion on the other para-medical categories as well as other scientific/technical categories in Class III (now Group 'C') like Laboratory Technicians, Junior Research Assistants, Draftsmen etc. under various Ministries. As regards the increase in the percentage of selection grade posts of Pharmacists, it was decided that it would be more appropriate to take a decision in this regard on the basis of the result of the discussion with the staff side of the National Council (JCM) on the Pay Commission's general recommendations relating to the percentage of posts in Class III (now Group 'C') services to be placed in the selection grade and criteria thereof.

Labourers killed/injured in private and public sector industrial units

4791. SHRI G. Y. KRISHNAN: Will the Minister of PARLIAMEN-TARY AFFAIRS AND LABOUR be pleased to state:

(a) the number of labourers injured/killed in various industrial units in the private and public sectors so far during the current year; and

(b) what remedial steps are being taken by Government to prevent the recurrence of such incidents?

THE MINISTER OF PARLIAMEN-TARY AFFAIRS AND LABOUR (SHRI RAVINDRA VARMA): (a) As per provisional figures available with the Director General, Factory Advice Service and Labour Institutes, there were 1,49,214 cases of injuries including 329 fatalities (excluding Himachal Pradesh, Uttar Pradesh, Manipur, Madhya Pradesh, Bihar, Gujarat, Maharashtra, Orissa, Tamil Nadu, Rajasthan, Meghalaya and Andaman & Nicobar Islands) for the first three quarters.

(b) The Factories Act, 1948 (which is implemented by the State Governments and Union Territory Administrations) has been amended recently to strengthen safety provisions therein.

Representations received from R.M.S. Union

4792. SHRI A.K. ROY: Will the Minister of COMMUNICATIONS be pleased to state:

(a) whether there has been a repeated representation on behalf of the R.M.S. Union, Class III, Dhanbad, to Government to attach the proposed R.M.S. Sorting Section in Maurva Express train (27 Up/18 Down) at Dhanbad; and

(b) if so, the action taken thereon?

THE MINISTER OF STATE IN THE MINISTRY OF COMMUNICATIONS (SHRI NARHARI PRASAD SUKHDEO SAI):(a) Yes, Sir. Some representations have been received for attaching the proposed Section to Dhanbad Sub Record Office instead of Muzaffarpur.

(b) It has been decided that it would be attached to Muzaffarpur in view of administrative reasons.

Reduction in Telephone Rates in rural areas

4793. SHRI VIJAY KUMAR PATIL: Will the Minister of COMMUNICATIONS be pleased to state:

(a) whether in view of the growing number of industries in rural areas, Government are proposing to reduce the telephone rates for connections in rural area Urban Exchanges (i.e. long distance connection); and

(b) whether Government are thinking of giving priority to such connections?

THE MINISTER OF STATE IN THE MINISTRY OF COMMUNICATIONS, (SHRI NARHARI PRASAD SUKHDEO SAI):(a) There is no proposal to reduce the

telephone rates for long distance connections in rural areas from urban exchanges.

(b) No, sir. Connections are being provided in turn subject to technical feasibility and availability of stores.

Ayurvedic dispensary in West Delhi

4794. SHRI BALAK RAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether his attention has been drawn towards the news item entitled 'Ayurvedic System gets a back seat' appearing in the Hindustan Times dated the 13th August, 1977;]

(b) whether there are only six Ayurvedic Dispensaries and none of them is situated in West Delhi, whereas there are 100 allopathic dispensaries in West Delhi, if so, the reasons for the same;

(c) whether Government propose to take necessary steps for the promotion of Ayurvedic system of Medicines in view of its various pronouncements for doing so; and

(d) the details of such plans or steps taken and the time by which those will be achieved?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI JAGDAMBI PRASAD YADAV): (a) Yes.

(b) At present 5 C.G.H.S. Ayurvedic Dispensaries and 1 Ayurvedic Unit are functioning under the C.G.H.S. at the following places:—

1. North Avenue
2. Kidwai Nagar
3. R.K.Puram
4. Gole Market
5. Dev Nagar
6. Delhi Cantt. (Unit).

There is a proposal under consideration to set up more Ayurvedic unit under CGHS Allopathic Dispensaries functioning in Delhi.

(c) Yes.

(d) The following new schemes are under consideration with a view to promote research and training in development and expansion of Ayurvedic System of Medicine:—

1. Setting up of a 300 bedded Ayurvedic Hospital at Hari Nagar, New Delhi (already approved).

2. Setting up of an Ayurveda, Unani and Homoeopathic Hospital (100 bedded each) at Chandiwala estate, Kalkaji, New Delhi.

3. Publication of books.

4. Training of village vaidyas.

5. Establishment of Regional Institutes for Indian Systems of Medicine (3 in Ayurveda and one in Unani). These Institutes would comprise of an under-graduate college and 4 post-graduate departments.

6. Development of medical and health care programme through Indian Systems of Medicine—provision of treatment through ISM in PHCs. This scheme envisages the provision of a practitioner of ISM in each PHC.†

7. Establishment of Dispensaries in ISM in the States at sub-centre level. This envisages the setting up of ISM wings at sub-centres.

8. Development of under-graduate education in ISM. This scheme envisages the provision of more funds to the under-graduate colleges of ISM to facilitate these colleges to implement the syllabus recommended by the Central Council of Indian Medicine.

9. Training of under-graduate teachers.

10. Post-graduate training in Yoga and Nature Cure.

With a view to ensure better and more methodical attention to research in selected important areas, it has been decided to review results of the researches made so far and to split up the existing Central Council for Research in Indian Medicine and Homoeopathy into four Central Research Councils, one each for (i) Ayurveda and Sidha (ii) Unani (iii) Homoeopathy and (iv) Yoga and Naturopathy.

The above mentioned schemes will be implemented depending upon the availability of funds. Efforts would also be made to lay down targets for the schemes and the period for the achievements of the targets, wherever possible.