

REPORT ON THE VISIT OF JUSTICE SMT. SUJATA V. MANOHAR, MEMBER, NHRC TO THE GWALIOR MANSIK AROGYASHALA (GMA) ON MARCH 24, 2003

Justice Sujata V. Manohar, Member, NHRC visited Gwalior Mansik Arogyashala (GMA) on March 24, 2003 to take a stock of the care and treatment of patients and review the progress of the implementation of the directions issued by the NHRC from time to time after it started supervising the functioning of the Institution in pursuance of the directions of the Supreme Court given on 11.11.1997. She was accompanied by Shri P.C. Sen, Secretary General and Shri Chaman Lal, Special Rapporteur of the Commission. She was received by Shri Bimal Julka, Divisional Commissioner Gwalior and the Chairman of the Management Committee GMA and Dr. S.R. Agarwal, Director, GMA.

In a brief meeting held in the Director's room, the Divisional Commissioner briefed the Member about the progress achieved by the Institution in different fields since the last visit of the NHRC Team on 12 August 2002. He also explained the difficulties being encountered by the Management Committee in complying with the directions of the NHRC regarding the improvement of staff position and development of occupational therapy and rehabilitatory arrangements.

The Member took a round of the campus which included visit to OPD, diagnostic section, open wards – male and female, close

wards – male and female, private wards, jail ward, kitchen complex, the site new OPD building under construction and the Halfway-Homes.

The visit and interactions of the Member with staff and patients in various sections of the GMA presents the following picture of the functioning of the GMA and its current problems:

Admission and discharge of patients

① / Admission and discharge of patients has been thoroughly streamlined and the provisions of the Mental Health Act 1987 are being strictly adhered to. Daily average of the OPD cases has registered a marginal increase from 44 in 2001 to 46.8 in 2002. OPD attendance is still not commensurate with the size of the catchment area of the Institution and the general rate of incidence of mental illness in the region. However, the Institution has started seeing outdoor patients daily in the local Medical College and once a week at the Civil Hospital, Murar (Gwalior). 680 patients were seen in the Medical College OPD and 153 patients at Murar OPD in the year 2002. The scope of these outreach facilities can be extended further.

The average bed occupancy was 177 in 2002 against the sanctioned capacity of 212 bed. Hospitalisation of a patient is restricted to severe cases which cannot be treated as OPD cases. What is heartening to note is that admissions in close wards has shown a marked decrease whereas the open ward admissions have gone up as would be seen from the following chart:

<u>Year</u>	<u>Close Ward admission</u>	<u>Open Ward</u>
1999	337	240
2000	188	1007
2001	146	1007
2002	123	1292
2003 (upto 15 March)	36	243

Another heartening feature observed by the NHRC Team was a steady fall in the proportion of involuntary admissions. In the 1999, 33.6 % of the total admissions were involuntary. The figure came down to 9.02 % in 2000 increased slightly to 10.61 % in 2002 and then dipped to 5.98 % in 2002.

The involvement of families in the care of the admitted patients by encouraging the families to stay in the hospital has produced the expected results. In open wards where the patient stays with his/her family members, the average length of the stay (ALS) is now found to be 9.31 % days as against 36.79 months for the close ward.

KITCHEN

The kitchen complex has been modernised and presents a good look of efficiency and cleanliness. The daily expenditure on food per patient which was increased from Rs.18 to Rs. 27 on NHRC's recommendations, has now been enhanced to Rs.30/- as fixed by the Supreme Court in its order for RINPAS.

DIAGNOSTIC AND THERAPEUTIC FACILITIES

(2) Utilisation of pathology Lab. and X-ray facility has shown steady increase. Dr. A.K. Gupta, MD (Medicines) is supervising the regular use of EEG machine and three staff members have been trained in its operation. A proposal has been mooted for the purchase of a semi-automatic bio-chemical analyzer. Modified ECT treatment is being administered efficiently under the supervision of a qualified Anaesthetist. It is noted with satisfaction that G.R. Medical College, Microbiology Department has extended all support for HIV and hepatitis testing. Still diagnostic and therapeutic facilities of this hospital are not upto the mark. Improvement is not possible until the vacant posts of clinical psychologists and psychiatric social workers are filled up, psychosocial inputs are provided in diagnosis and behavioral therapy techniques are introduced for treatment. The Institution should develop its own ICU facility as suggested earlier.

OCCUPATIONAL THERAPY

(2) No progress has been made in developing the facilities of occupational therapy. This glaring deficiency has been pointed by every visiting Team since the NHRC took up overseeing the work of the Institution. The sanctioned posts of Occupational Therapist and Occupational Instructors are lying vacant. Yet another assurance has been given by the Chairman, Management Committee that these posts

will be filled up in April 2003 and vocational training will be started with the help of Mrignayani (Handicraft Department). It was however noticed with satisfaction that a beginning has been made for rehabilitation work in the female close ward with the help of the volunteers of Action Aid, India.

STAFF

(9) / There has been hardly any improvement in the staff position. The posts of the Director and Deputy Director are still vacant together with the following key vacancies:

1. Assistant Professor (Psychiatry)	1
2. Assistant Professor (Clinical Psychology)	3
3. Assistant Professor (Psych-social worker)	3
4. Psychiatric Social worker	3
5. Clinical Psychiatrist	3
6. Staff Nurse	25
7. Matron	3
8. Nursing Superintendent	1

The post of the Director has been lying vacant since long. The existing arrangement of giving this responsibility as an additional charge to the Dean of the Local Medical College is not at all a satisfactory arrangement. The Commission has been insisting on the appointment of a regular Director since February 1999. The Chairperson, NHRC had also emphasized this point in his visit to the Institution in November, 1999. The matter was discussed in a special meeting held at the NHRC on 29 November 2002, which was also attended by the Secretary, Medical Education, Govt. of MP. The

NHRC was then given to understand that inadmissibility of private practice was responsible for the poor response to the advertisement for the post. It is now learnt that the private practice has been allowed to the GMA staff w.e.f. 21.12.2002. However, none of the 3 candidates who applied in response to the advertisement was found eligible and the post had to be re-advertised. The Management Committee has sent a proposal to the NHRC seeking permission for filling up Director's post by a suitable candidate from outside the discipline of psychiatry. The matter is pending decision at the NHRC. (The Chairman, Management Committee has informed the Special Rapporteur on 8 April 2003 that they have found a Psychiatrist in the Reader/Associate Professor grade with two years experience who can be considered for appointment as an Assistant Professor against the sanctioned post of Director/Professor. Necessary approval is being sought from the Govt. This appears to be a very practical solution to the problem. It does not involve any major deviation from the directions of the Supreme Court. It may not be difficult to obtain their concurrent).

It is noted with satisfaction that on NHRC's recommendations, 5 posts of Psychiatrists, 3 of Clinical Psychiatrist Social Workers have been converted into teaching posts and designated as Assistant Professor (Psychiatry), Assistant Professor (Clinical Psychology) and Assistant Professor (Psychiatric Social workers), respectively.

The Commission has been feeling concerned about the vacancies of Clinical Psychologist and Psychiatric Social Workers. A

good number of the sanctioned posts are found to be reserved for the SC/ ST candidates. In view of their inability to find suitable candidates from these categories despite repeated attempts, the Management Committee has requested the Govt. of MP to de- reserve these posts as a one-time measure only.

MANAGEMENT COMMITTEE

The Management Committee has been meeting regularly as directed by the Supreme Court. However, a proposal for appointment of two non-official members (Mrs. Sheela Jain and Dr. Dilip Sahu), forwarded by the Management Committee on 11.11.2002, is still pending with the Govt. of MP.

TRAINING OF STAFF

It is heartening to note that two doctors, namely, Dr. Subhash Upadhyay and Dr. Smt. Vidaya Sakpal, have been sent to NIMHANS, Bangalore for DPM training and Dr. Kamlesh Udenia, who had received this diploma from NIMHANS in 1998 and was posted out, has rejoined the GMA in response to the NHRC's observation. It is hoped that all the unqualified medical officers will be put through such training in a phased manner.

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DEVELOPMENT OF TRAINING FACILITIES

The objective of making this Institution a centre of training in the field of Psychiatry, Clinical Psychology, Psychiatric Social Work and Psychiatric Nursing has made no progress. These activities can be started only after a regular Director is posted and vacancies of Clinical Psychiatrist and Psychiatric Social Workers are filled. However, the GMA is providing Psychiatric training to students of 5 nursing colleges, under-graduate MBBS students and post-graduate students of Medicines. 9 Medical Officers of the districts of Gwalior Division attended a 2-week Psychiatry Re-orientation Course at GMA in February-March this year.

New OPD Building

The Member expressed satisfaction over the progress of the construction of the new OPD building. Justice J.S. Verma, former Chairperson had laid the foundation stone of this building on 2 November 2001. Executive Engineer PWD and Executive Engineer (E&M) explained the lay out and schedule of construction. The Divisional Commissioner Gwalior informed that the building would be ready for commissioning towards the end of May, 2003.

HALF-WAY HOMES

(6)

The Member visited the Half-Way Homes established within the GMA campus as an interim measure.

Male Half-way Home (Saket) has received a total of 109 patients and could arrange restoration of 79 of them to their families. 18 patients have to be sent back to the hospital. Presently, 12 patients are staying in this Halfway Home.

The Female Halfway-Home run by Smt. Meena, Dawar M.P. Organics is doing commendable work in imparting vocational training to the inmates in life-sustaining skills like stitching, candle making, paper-bags making, etc. It has received 54 patients so far and arranged restoration of 26 of them to their families. 13 patients had to be returned to the wards. 15 patients are now being kept in the Halfway Home.

COMPUTERISATION

Progress in computerization is found to be 'nil' as before. The Divisional Commissioner, Gwalior informed that a beginning is being made to computerize the OPD records and hospital admissions.

GENERAL

12 bonded labourers rescued from village Laxmanpura of District Datia were admitted to GMA on 7.1.2003. After being kept under observation for 10 days, 9 of them were diagnosed as cases of mental retardation and 3 having psychiatric disorder. As the home addresses of these persons are not mentioned in the records brought by the police and they are also not in a position to give any

information, they are being kept here even though their hospitalisation is not required. 5 of them have, on persistent questioning, given names of their village and district. This information has been passed on to the Collector, Datia who is trying to contract their families. It is reported that these unfortunate persons were found on road and taken away by the Thakurs of Laxmanpur village as farm labour. As most of them are mental retarded, they never tried to escape. Commission may like to ask for a report from the Collector Datia.

C Lal

3/4/03
(Chaman Lal)

Special Rapporteur

9.4.2003