

**Report of Shri Chaman Lal, Special Rapporteur NHRC on his visit to
the Ranchi Institute of Neuro Psychiatry and Allied Sciences (RINPAS)
ON 26 March 2004.**

As directed by the Commission, I have visited RINPAS on 26 March 2004 to review the progress of implementation of the orders issued by the Supreme Court in September 1994 in writ petition (Civil) No. 339 of 1986 followed by the directions issued by the NHRC from time to time after its involvement with the management of the Institution since 1997. The review covered the period from 1.4.2003 to 29.2.2004. The report on the last review carried out on 4.7.03 was considered by the Commission on 14 August 2003 and copies of the report were sent to the Chief Secretary, Government of Jharkhand and Director RINPAS by the Commission's JS on 22nd August 2003.

The Review started with the examination of compliance of the observations and directions of the Commission in a discussion with Dr. (Brig.) P.K. Chakraborty, Director, Dr. Ashok Kumar Nag M.S. and Dr. Amulya Ranjan Singh, Psychiatrist which was found to be satisfactory. Thereafter, I went around the campus and visited the OPD, and the Departments of Psychiatry, Clinical Psychology, Pathology, Psychiatric Social Work, Occupational Therapy and Rehabilitation. I also visited the Institute's agricultural area and was briefed about its utilisation and annual output. I saw General and Paid wards in both male and female sections and visited the ad hoc Half-way Homes established recently. The observations of the visit with suggestions for further improvement are recorded below:

Admission and Discharge

A total of 19353 patients had attended the OPD in 2002-03. The figure for the year 2003-04 (upto 29 February 2004) is 21,564. This shows an increase in daily average from 61.82 to 70.2.

The sanctioned capacity for the indoor patients was fixed by the Supreme Court as 500 in 1998. The average strength of indoor patients was 469.74 in 2002-03. It was 479.71 during the period under review. On the day of my visit i.e. 26 March, RINPAS was holding 489 patients-355 male and 134 female.

1229 patients were admitted during the period from 1.4.03 to 29.2.04 against 1394 admitted in 2002-03. The figures of discharge of patients-1208 and 1367 respectively during these periods clearly show a smooth flow of admission and discharge of patients.

Only 10 patients were admitted under the Court orders in 2003-04 (up to 29 February 2004). 52 inmates were received for treatment from jails. The percentage of voluntary admissions comes to 94.95%. It is worth noting that the proportion of voluntary admissions has been considerably above 90% since 2000-01 which shows a very satisfactory compliance with the provisions of the Mental Health Act, 1987.

A Paying Ward was open on 27.2.02. It had received 29 patients – 23 male and 6 female till 31.3.03. 74 male and 11 female patients were admitted in the Paying Ward during the period from 1.4.03 to 29.2.04.

Utilisation of created facilities is found to be inadequate. The new measure needs to be popularised.

Average Length of Stay

The average length of the stay of indoor patients had come down from 100.93 days in 2001-02 to 91.69 days in 2002-03. It is shown as 93.32 days for the period from 1.4.03 to 29.2.04. In the last review held in July 2003, it was mentioned as 52.27 days in the first quarter of 2003-04. Since the calculation includes discharge of some long stay patients through special efforts of the Institution, the figures do not reflect the correct position. If the long stay old patients are considered separately, the average length of their stay would be much less. The issue needs to be studied further in order to arrive at a credible data.

Long Stay Patients

The number of long stay patients (over 2 years) on the day of the visit was found to be 128 – 62 male and 66 female. The number of such patients was 157 in February 2002 and 135 in March 2003. A number of long stay patients who were fit for discharge, have been restored to their families through special efforts during this period. 3 male and 4 female patients were sent to their homes with escorts provided by the Institution itself. The following facts relating to the long stay patients currently lodged at RINPAS would be found very interesting:

1. 57 of a total of 128 long stay patients –33 male and 24 female are considered fit for discharge.

2. Addresses of 39 male and 29 female out of the above are either found to be false or the families are deliberately not responding to letters sent by RINPAS.
3. Most of the female long stay patients were admitted under reception orders with destitute status making no mention of their family and home address.
4. 12 male and 8 female patients have expressed their unwillingness to return to their families. I spoke to 3 of them –Ram Kailash Singh, Mahesh Kumar Singh and Bimla Devi and found them helplessly reconciled to their life in the hospital.

The following cases relating to the Long Stay patients are worthy of specific mention:

1. Pappu Jain – The patient was released on 17.9.2000. He had to be re-admitted on 25.1.01 because both his parents are dead and his wife committed suicide in March 2001. There is no one at home to look after him although he does not need to be kept in the mental hospital.
2. Dilip Sinha – He was discharged on 9.2.67 and re-admitted on 27.12.77. His father has refused to keep him and he has no one else to take care of him.
3. Ghulam Kabaria – This patient was discharged on 24.3.77 and re-admitted on 30.1.78 due to relapse. No family member has visited him since his re-admission.
4. Madhuri Kimari – She was sent with escort and restored to her family on 7.6.99. However, she was brought and dropped outside

- the hospital premises on 5.8.99 and had to be re-admitted. No one ever come to see her.
5. Chandra Kiran – She was sent with escort to her home on 24.8.97. As her brother refused to keep her. She had to be brought back.
 6. Nutan Sinha – She was discharged on 8.5.85 and re-admitted on 14.5.85 because her mother refused to accept her.
 7. Jyotsana Bose – She was sent home with escort on 25.5.88. Her family refused to accept her. She had to be brought back to the hospital and has been languishing in the hospital.
 8. Gandhari Devi – She was discharged on 24.8.99 and re-admitted on 10.1.04 due to relapse. She has only her old father at home who is not able to look after her. She is destined to spend her entire life in the hospital.
 9. The case of Shri Raj Kumar Sharan s/o Avadh Behari Sharan is particularly pathetic. He was admitted on 30 March 2001 on a Reception order issued by the 6th Additional Judicial Commissioner, Ranchi. His file shows that the Addl. Judicial Commissioner had written to the Supdt. RINPAS on 17.4.01 requesting him “to keep a vigilant watch on Shri Raj Kumar Sharan s/o Shri Avadh Behari Sharan, resident of Harmu Housing Colony Ranchi who is under your hospital/custody in connection with mental treatment.” It was followed by another letter dated 12.6.01 requesting the Supdt. RINPAS to submit a report to this court by 25.6.01 on the medical status of Raj Kumar Sharan “ The Medical Supdt. RINPAS replied on 21.6.01 confirming that the patient has made considerable improvement in his mental condition and “ is fit for discharge.” The Court was specifically

requested to confirm whether the patient could be discharged and handed over to his guardian. No reply was received from the court, nor was any reminder sent by the Medical Supdt. When I interviewed this patient on 26 March 2004 and found him quite normal but justifiably agitated over his continued detention in the hospital, Dr. Nag, Medical Superintendent told that as per his information, the court is not issuing order for his release since his wife has filed a petition praying for her appointment as Manager for the management of the patient's property under the provisions of the Mental Health Act.

Realising the implications of the 'property angle' in the matter, I requested the Director to approach the concerning court formally and ask for a reply to the previous letter dated 21.6.01. Dr. Charkraborty accordingly wrote on 29.3.04 to the 6th Addl. Judicial Commissioner mentioning the fact that the patient was interviewed by the Special Rapporteur NHRC. Shri S.P. Chakravarty, 6th Addl. Judl. Commissioner Ranchi promptly replied to RINPAS on 1.4.04 saying that "the petition filed by the patient's wife was disposed of on 14.5.03 in terms of compromise petition". There is overwriting on the date and it is sure whether the matter was disposed of on 14.5.03 or 14.5.02 (I have asked Director RINPAS to get it clarified from the court). This reply makes one thing very clear. In my opinion, there could be no justification for continued detention of the patient in mental hospital after disposal of her wife's petition which was the basis of his admission and clear cut opinion of the Institute about his mental fitness. I am sure the Commission will take due notice of the violations of patient's rights apparent in this case.

Death of Patients

An adverse observation was made on this count in the last review report which had revealed 10 deaths in 2002-03 against 5 in 2001-02 and 6 in 2000-01. The situation is found better now. There have been 5 deaths of inmates in the year 2003-04 (till the date of visit i.e. 26 March). All the five cases were examined and are briefly mentioned below:

1. Shri Sachidanand Sarkar, 70 years was a long stay patient admitted in July 1960. He died on 27.5.03. The post mortem report ascribed the death due to intra cerebra hemorrhage.
2. Ms. Laxmi Gautam, 30 years, was admitted on 15.5.03 as a patient of Schizophrenia with depression. She was received as abandoned in the campus of the Hospital by her guardian, she committed suicide which was confirmed by the post-mortem report. Inquiry was also conducted under the directions of the Commission. The Director confirmed that the inquiry did not reveal any lapse or negligence on the part of the staff. Still, a suicide of a patient should be taken as a reflection on the level of custodial care.
3. Shri Dilip Das, 30 years, was admitted on 31.7.03 in a generally poor condition and was diagnosed as a patient of Koch's abdomen (T.B.). He was referred to RIMS and expired there on 7.8.03 during the course of treatment.
4. Shri Akhilesh Kumar, 25 years, was admitted on 7.1.03 as a case of Schizophrenia. He had developed a tendency to fall backward and died of one such fall against the wall in his room itself on

1.9.03 at 6 PM and lost consciousness. In spite of all resuscitative measures and emergency drugs he expired at 6.25 PM. The post mortem report confirmed death due to Cerebral Infarction.

5. Smt. Renu Devi, 35 years, was admitted on 14.9.03. While taking breakfast on 2.10.03 a piece of bread got stuck in the respiratory tract resulting in choking and ultimate death in spite of all resuscitative measures. The Post Mortem report confirmed death due to Asphyxia as a result of choking.

Director RINPAS has been very regular in intimating every case of death of a patient to the NHRC and ensuring Post Mortem examination in each case.

Escape of Patients

The last review had revealed a disturbing rise in the number of escape of prisoner patients. As many as 10 prisoner patients had escaped in 2001-02 and only 5 of them were traced and brought back. In 2002-03 also 3 out of a total of 6 escapees were prisoners and only 2 of them were traced and brought back. In the current year (up to 29.2.04) 11 patients including 2 prisoner patients escaped from the Hospital. Nine of them were traced which included none of the criminal patients. Escape of criminal patients from the Jail ward of the hospital remains a matter for concern. It is worth noting that RINPAS has not been provided with any trained Guarding staff by the police for the security of prisoner patients. The Director was advised to place this matter before the Management Committee and ask for a

standing guard of at least one section strength for this purpose considering the average number of prisoner patients (50).

A total of 41 prisoner patients are held at RINPAS at present. 23 of them have been declared fit for discharge and the respective Jail authorities are being repeatedly requested to collect them. Information is also being sent to the Court concerned and the Home Departments of the Government of Bihar and Jharkhand. I visited the Prisoners Ward and satisfied myself about the fitness of the following as a sample check:

1. Dharmendra Jha who was admitted on 16.12.02 is involved in a case under the Dowry Act and was received from Banka Jail, Bhagalpur. He appears absolutely normal and is assisting the administration in routine work. A letter addressed to the Supdt. Jail Banka on 21.7.03 has been followed by seven reminders with no response.
2. Ashok Mandal is an Under-trial in a murder case and was received from Sub Jail Banka, Bhagalpur on 16.12.02. He is cured of mental illness and is helping in the management of the kitchen. He spoke confidently and furnished details of his trial going on since 1997. He mentioned that one witness has turned hostile in his case. He appears absolutely fit to defend himself and his incarceration at the cost of his trial is totally unjustified. The first letter written to the Supdt. Sub Jail Banka on 22.3.02 which has been followed by six reminders with no response.
3. Bimal Kumar, who is an Under-trial in a murder case, was received from the Supdt. Sub Jail Jahanabad on 6.3.03. He

gave coherent replies to my question and narrated full details of his under-trial period of about 3 years. A letter was written to the Supdt. Sub Jail Jahanabad on 25.4.03 to arrange his collection. It was followed by 5 reminders with no response.

4. Lakshmi Prasad Gupta is an under-trial in a case u/s 395 IPC and was received from the Supdt. Jail Purnia on 26.9.01. He was declared fit in February 2002 and 11 letters have been written to the Supdt. Jail Purnia for taking him back. He appears absolutely fit to face trial.
5. Bindi Passi is an UT in a murder case since 1995 and was received on 4.8.03 from the Supdt., Central Jail, Bhagalpur. He has been continuously in Jail/Hospital for about 9 years. He was declared fit for discharge and a letter was written to the Supdt. Central Jail, Bhagalpur on 12.9.03. No response has been received in spite of 3 reminders.
6. Mehman Munda is an UT in a murder case and was received from the Central Jail, Hazaribagh on 4.3.03. He has been in Jail/Hospital for over 7 years. He was declared fit for discharge and a letter was written to the Supdt. Central Jail, Hazaribagh on 28.6.03. He is still languishing here despite two reminders sent to the Jail authorities.
7. Kunwar Oraon is an UT in a murder case and was received from the Central Jail Hazaribagh on 4.3.03. He said that he has been in Jail/Hospital for about 8 years. He was declared fit and a letter was sent to the Supdt. Central Jail Hazaribagh on 28.6.03. This has been followed by three reminders with no response.

8. Jubeda Khatoon was received from the Supdt. Sub Jail Jamtara on 3.5.03. Although, she is cured of mental illness and can talk coherently, she could furnish no information about her case. Her file does not throw much light except mentioning her status as an UT u/s 498A since 29.10.01. The Psychiatric Social Worker was requested to collect full particulars of her case from the Jail authorities.

Hospital Services

The Director briefed me about the functioning of the Departments of Psychiatry, Clinical Psychology and Psychiatric Social Work. I also perused the statistics regarding psychological and psycho-social management sessions, family therapy, psycho-diagnostics (including I.Q.) and Workup relating to Department of Clinical Psychology and Home visit, individual family counselling therapy group therapy and social case work etc. relating to Deptts. of Psychiatric Social Work and found that these facilities are being administered in sufficient numbers. Similarly, a substantial increase in out put, the Deptt. of Pathology in terms of Hematology, Bio-chemistry and others (serology, urine, stool and pregnancy ABO grouping) was also noticed. The statistics relating to the use of ECT, EEG also reflected proper utilisation of available facilities. The installation of the new 500 ma X-ray machine should be expedited. The X-ray examination of indoor patients is presently being done at RIMS on payment, as the old X-ray machine has become non-functional.

The procurement of CAT scan machine is still pending. It was learnt from the Health Secretary Shri P.P. Sharma that the proposal, mentioned in the last review report, has been cleared and orders would be issued before 31st March 2004.

Occupational Therapy

Occupational Therapy facility has been one of the USPs of RINPAS ever since the Institute was re-organised under the directions of the Supreme Court. The visit to O.T. area in both male and female sections showed further development of these facilities. The number of patients attending O.T. is now 92-100 in the male and 65-75 in the female sections. On the day of the visit, 103 male patients were found engaged in tailoring, carpentry, Blacksmithy, weaving, Book-binding, Bakery and other units. Six new Looms have been added in the Weaving Section. Four machines additional have been procured for spiral-Binding, file making, envelop-cutting and Digital-printing. All this has been possible through the personal involvement of Shri P.P. Sharma, Health Secretary, Health Department. The Health Deptt. has shown keenness in purchasing the stationery items from RINPAS. Additional units for Phenyl and Soap-making are in the process of being installed.

In the Female Section, more and more patients are being engaged in stitching, embroidery, Basket-making, Paper-bags etc. Production of a new item - Paper-basket was started in April 2003. Thereafter jute-bags and jute-mats issue introduced in October-December 2003. Mushroom cultivation was started in December 2003 and is coming up very well.

Applic work was started in February 2004. A personal touch of the Director Brig. Chakraborty is visible in this commendable progress.

The farm activity of RINPAS is also showing a steady increase. About 70 acres of land is being utilised for agricultural purposes and paddy, wheat, pulses and vegetables are being grown. The requirement of vegetables for the Institution's inmates is being met to the extent of 60%. Patients have not been engaged in this work which is being done by the Class IV and daily wage staff. The Director was advised to explore the possibility of engaging some of the cured long stay patients who are either abandoned or unwilling to return to their families. This offers a good potential for rehabilitation of such patients. The agriculture and horticulture activities can be expanded further by retrieving 205 acre of land occupied by BAU and 19 acres by the Indian Institute of Coal Management. The Management Committee should assert its autonomous status and get this land back or work out an arrangement for its utilisation in the interest of the Institution.

Library

RINPAS has separate Libraries for patients in Male and Female Sections and a well-equipped medical Library for the students and staff. The Library is holding latest Books on Psychiatry, Neurology, Clinical Psychology, Psychiatric Social Work, Psychiatric Nursing, Medicines and related subjects. With an addition of 1939 Books in 2003-04, the Library is now holding 7859 Books. It is subscribing to 27 foreign and 6 Indian Journals at present. The Library is also holding 169 Publications of WHO.

At the time of my first visit to RINPAS in June 2000, the Institute was subscribing to 3 Indian and 18 foreign Journals.

Auxiliary Services

The Mechanical Laundry of 200 kg. capacity installed in 2003 is functioning efficiently. Patients linen and clothes are collected and delivered at the ward itself. The mineral water plant of the Institute is functioning efficiently with capacity of 1000 litre per hour. The mineral water is distributed to the wards in a sealed container. The Incinerator having a capacity of 30 kg. per hour is the only Incinerator functioning in the city of Ranchi. To ensure its economic utilisation, the Deptt. of Health, Government of Jharkhand has extended its use for disposal of Bio-medical waste from the Government and Private Hospitals and Nursing Homes of the city. A contract has been given to EnVision Enviro Engineers Pvt. Ltd. Surat for collection and disposal of Bio Medical Waste and the project is to be commissioned shortly.

Management Committee

The Management Committee has been meeting regularly. It has held 4 meetings in 2003-04 on April 5, 28 July, 21 November 2003 and 20 March 2004. The need for opting two more Members was felt. ^{to} To fill up the vacancies caused by exit of Health Secretaries, Government of West Bengal and Government of Orissa following a total withdrawal of their patients. The Management Committee has proposed the induction of Vice Chancellor, Ranchi University and Vice Chancellor, Birsa Agriculture University. The proposal is being sent to the NHRC for approval.

Staff Position

The staff position remains unsatisfactory as before. Only one vacancy of Asstt. Professor in Psychiatric Social Work has been filled through promotion since the last review. The following key posts are vacant:

Department	Prof.	Associate Prof.	Asstt. Prof.
Psychiatry	1	3	3
Clinical Psychology	-	2	2
Psychological Social Work	1	1	1
Psychiatric Nursing	1	1	1
Neurology	1	1	1

The Management Committee has now permitted the Director to advertise these posts after the Government of Jharkhand has delegated the matter relating to Roaster clearance to the Director, RINPAS. The completion of the Supreme Court tasks relating to teaching and academic activities, depends entirely on improvement of staffing position. RINPAS should not be found wanting in this regard when it has registered commendable progress in all other fields assigned by the Supreme Court. This concern was duly conveyed to Mrs. Shiela Kisku Rapaz, Divisional Commissioner and Chairperson, Management Committee.

Budget

Although the Government of Jharkhand is meeting the budgetary requirements of the Institute through Grants-in-aid, the delay in receipt of budget allotment mentioned in the last review report, has been noticed this year also. No budget allotment was received till 26 March 2004. I spoke to the Health Secretary and Chief Secretary, Government of Jharkhand and was informed that budget allotment for 2003-04 was being released in a day or two. The Chief Secretary felt surprised that this was pending till the last week of the financial year.

Teaching and Academic Activities

Four M.phil students have successfully completed their course after the last review. The Institute is holding 24 students doing the following courses:-

	<u>Session 2002-04</u>	<u>Session 2003-05</u>
Ph.D in Clinical Psychology	1	2
Ph.D in Psychiatric Social Work	2	1
M.Phil in Medical Social Psychology	6	6
M. Phil in Psychiatric Social Work	4	2
Total:	13	11

The much awaited MD(Psychiatry) and DPM (Diploma in Psychological Medicine) courses could not be started because of vacancies in the Deptt. of Psychiatry and Psychiatric Nursing. The Government of Jharkhand has now constituted the Staff Nursing Counsel. The Director

informed that Indian Nursing Council will be approached for permission to start the course in DPM after the faculty members are posted.

Research Activities

The performance of RINPAS under this head remains commendable as before. All the 14 research projects shown in progress at the time of last review in July 2003 were successfully completed. Besides six additional projects have been completed in the first three months of 2004. The following research projects are now in progress:

1. Global adjustment and life satisfaction among settled male & female depressive patient.
2. Applicability of Kaufman Assessment Battery of Children in India.
3. A personality profile on sixteen personality factor questionnaire (16 PF) of murderer.
4. Hindi-version of Adolescent psychopathology scale and initial try out on school going adolescents.
5. Children's personality profile of school going children in urban area of Ranchi District.
6. Attitude towards mental illness of the principal caregivers of the families of with and without psychiatric patients: A comparison.
7. A study of parenting stress in mentally retarded children.
8. Psychosocial development of depressed patient.
9. Personality profile of rape accuse.
10. Socio-demographic and diagnostic profile of indoor psychiatric services utilizers of Jharkhand state "A prospective study".

11. Adjustment profile & life satisfaction among spouses of alcohol dependent and non alcohol dependent cases _ A comparative study.

Workshop and Short Courses

The following activities have been organised at RINPAS during the period April 2003 to February 2004:

- ❖ 45 Under graduate Medical students of Rajendra Institute Medical Sciences, Ranchi attended psychiatric training programme from 23.5.2003 to 30.5.2003.
- ❖ 40 Under graduate Medical students of J.N. Medical College, Bhagalpur participated in psychiatric training programme from 2.6.2003 to 7.6.2003.
- ❖ A two week training programme in Psychiatric Orientation for Medical Officers was held from 01.9.2003 to 13.9.2003. 38 Doctors attended the programme.
- ❖ A one week training programme in HIV Counselling was organised in association with NACO and JACS for master trainers of Eastern States from 23.9.2003 to 27.9.2003 in which 35 participants took part.
- ❖ A Mental Health Refresher course for NGOs was conducted from 13.10.2003 to 18.10.2003 There were 21 participants.
- ❖ A one week Orientation programme in Clinical Psychology was conducted for P.G/Ph.D students of various universities of India from 1st December to 6th December 2003 which was attended by

nearly 60 students from B.H.U., UP, West Bengal, Bihar & Jharkhand.

- ❖ 49 Under graduate Medical students of Rajendra Institute Medical Sciences, Ranchi attended a psychiatric training programme from 23.2.2004 to 1.3.2004.

Psychiatric Orientation Training of half week duration was arranged in 8 batches during the period in 2003-04. A total of 228 nursing students belonging to RIMS Ranchi, M.G.M Hospital and Novjeevan Hospital, Sadar Hospital and Tumbgara Nursing school participated. Besides 34 ANM students from Sadar hospital Ranchi and 6 students from M.P.C.H. from Dumka also underwent Psychiatric Orientation Training Programme.

Computerisation

This is one area where RINPAS has made no progress. The Director informed that MECON have been engaged as Consultant and the scope of software development has been defined.

Works

The progress was reviewed in a meeting with representatives of the PWD (Building Division), Drinking Water and Sanitation Department (previously PHED) and Electrical Division. The progress of works entrusted to the PWD and Drinking Water & Sanitation Department was found to be satisfactory. 8 works have been completed by the PWD in 2003-04 and 3 are in progress. The Drinking Water & Sanitation Deptt. took up 17 works

and completed 10 of them. The following schedule was agreed for the works in progress:

PWD

1. Construction of new septic tanks, soak-pit and sewer-line in the Male ward No. 3 & 4 : to be completed by 15.4.04.
2. Construction of toilets and bathrooms in male ward No. 5,6&7: to be completed by 15.5.04.
3. Construction of toilets and bathrooms in Ward No. 2&3 of female section: to be completed by 30.4.04.
4. Construction of toilets and bathrooms in Male ward No. 8: to be completed by 30.6.04.

DWSD

5. Estimates for the repair of existing pumps and for installation of additional submersible pumps to be supplied by 31.5.04.

The work of the Electrical Division was found to be decidedly slow. The matter was therefore discussed in detail and the schedule was, therefore, fixed in the presence of Mrs. Rapaz, Development Commissioner.. Shri Balbir Singh, Asstt. Engineer, Incharge Electrical Division made the following commitment which the Divisional Commissioner assured to monitor:

- ❖ Providing of electric connection to newly constructed Nursing quarters numbering 72 by 30 April 2004.
- ❖ Electric connections in Warder line and Mawatoli by 30 June 2004.

Community Outreach Programme

The scope of the Community Outreach Programme taken up by the RINPAS has been further expanded. The Institute was earlier running only one satellite Clinic at Jonha, 40 km. away once a week. The Institute is now sending medical team comprising psychiatrist, paramedical staff and M.phil/Ph.D students to the following Community Outreach Centres:

Ist Tuesday of the month	- Jonha – 40 km.
2 nd Tuesday of the month	- Khuntia – 40 km.
3 rd Tuesday of the month	- Saraikela – 168 km.
4 th Tuesday of the month	- Hazarbagh – 120 km.
Birsa Munda Central Jail, Ranchi	- once a fortnight
Chesier Home, Ranchi	- once a fortnight

Two NGOs have been identified for collaboration in this effort - Nav Bharat Jagriti Kendra at Hazaribagh and Sanjeevni Gram Trust at Khunti. They are providing help in identification of patients and the follow up. The total number of patients served at community health centre was 1321 in 2001-02. It increased to 3735 in 2002-03. During the period from 1.4.03 to 29.2.04, a total of 5999 patients – 3493 male and 2506 female have benefited from the community health programme by RINPAS at its satellite Clinics.

RINPAS has been selected as nodal point for District Mental health Programme coming up at Dumka (Jharkhand) the project report for which

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has already been submitted to the Ministry of Health and Family Welfare, Government of India by the State Government.

Half-way Homes

Half-way Homes have been established in both the Male and Female Sections. The male Half-way Home is holding 26 and female Half-way Home 12 inmates. The arrangement is ad hoc and serves the elementary purpose of segregation of cured patients and providing them some relaxations and facilities of self-management. A proper Half-way Home is required to be established outside the Hospital campus and run by some NGO. Sanjeevni Gram Trust has been identified by the Director as a credible NGO in this connection. I visited their centre at Khunti. Miss Aarti Jaswal, General Secretary of the Trust briefed me about its activities in the field of disability including mental illness. This organisation has been carrying out surveys in 12 Blocks of District Ranchi to identify the disabled persons and arrange their physical, economic and psychological rehabilitation.

A new building is being constructed by the Trust for use as a Half-way Home – a proposal for which was sent to the Government of India, Ministry of Social Justice and Empowerment (MOSJE) in November 2000. A copy of this proposal was personally handed over to the Director MOSJE by Director RINPAS in November 2002 in a meeting of the NHRC Committee for rehabilitation of long stay mental patients. I have requested the JS to arrange my meeting with the Officers concerned in the Ministry for pursuing this matter. Establishment of Half-way Homes duly funded by the

MOSJE is an urgent need of all the three Mental Health Institutions which have been entrusted to the Commission by the Supreme Court for supervision.

Action Aid Volunteers

Action Aid India has been associated by the NHRC in the on-going campaign of restoring Long-Stay-Patients to their families after imparting them social skills and livelihood skills. Four volunteers of the organisation have been working at RINPAS since 13.11.2002. They have succeeded in tracing the families of 6 Long-Stay-Patients and facilitating their reintegration into society. However, the results of their efforts in imparting training in social skills and improving the motivational level of a few chronic schizophrenic patients identified by the Institution, as a preparatory measure for their occupational therapy, have not been very encouraging till now.

Outstanding Dues from Other States

The Institute is accepting patients from all the Districts of Bihar even after the creation of Jharkhand and stoppage of regular budget by the Government of Bihar. More than 50% of the patients at any time will be found to be belonging to Bihar. No grant has been received from the Government of Bihar after April 2000. The Government of Bihar owes a sum of Rs. 26,65,40,560 to RINPAS as of 30.1.2004 computed as per the directions of the Supreme Court. Following the intervention of the NHRC, the Chief Secretary of Bihar convened a meeting at Patna on 11 February

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2004 which was attended by Director RINPAS and an Officer from the Health Department of Government of Jharkhand in this connection. Although the Government of Bihar has agreed in principle to pay the arrears and asked for certain clarifications, the matter needs vigorous pursuing by the Health Secretary.

The Government of Orissa has cleared its dues mentioned in the last review report. However, Governments of Manipur and Arunachal Pradesh have not yet responded in regard to their dues amounting to:

Manipur - 69,40,751 as of 29.2.04

Arunachal Pradesh - 2,47,910 as of 29.2.04

Concluding Remarks

The RINPAS has been making steady progress in achieving the objectives set by the Supreme Court while granting it an autonomous status. The standards of diagnostic and therapeutic services, living conditions and patients' care have registered a distinct improvement. Promising steps have been taken for developing training facilities for medical and para-medical personnel. The scope and reach of the community outreach programme has been expanded. The credibility of RINPAS in Government and private circles is seen to have gone up. The Institution is capable of making a still greater progress and realize its potential of becoming an outstanding hospital and a centre of excellence in the field of training and research provided the Management Committee boldly exercises its autonomy and strengthens the hands of the Director Brig. Chakraborty who has been working with great

zeal and providing an inspiring leadership to a team of competent and dedicated workers.

Chaman Lal

21.4.04

(Chaman Lal)
Special Rapporteur