REPORT ON THE VISIT OF DR. JUSTICE A.S. ANAND, CHAIRPERSON, NATIONAL HUMAN RIGHTS COMMISSION TO THE RANCHI INSTITUTE OF NEURO-PSYCHIATRY AND ALLIED SCIENCES (RINPAS),

RANCHI ON 19 MARCH, 2005.

1

Dr. Justice A.S. Anand, Chairperson, NHRC visited Ranchi Institute of Neuro-Pychiatry and Allied Sciences (RINPAS) on 19 March, 2005. He was accompanied by Shri Chaman Lal, Special Smt. Sheila Kishku Rajap, Divisional Rapporteur, NHRC. Commissioner, Ranchi and Chairman, Management Committee, RINPAS and Dr. (Brig.) Prof. P.K. Chakraborty, Director, RINPAS received the Chairperson. Dr. Chakraborty made a brief presentation about the infrastructure of the Institution pointing out the progress achieved in various areas of its activities as a result of the involvement of the NHRC in the affairs of the Institute following the Supreme Court's mandate dated 11.11.7. Chairperson went around the campus, which included visit to OPD, one Male ward, Diagnostic center (Pathology, Haematology, Biochemistry, EEG, X-ray and ECG), Clinical Psychology Laboratory (Psychometry, Behavior Therapy and counselling sections). Occupational Therapy Unit, Mechanised Laundry, Mineral Water plant and Incinerator room. The Chairperson also visited one general ward, paying ward and OT Section in the female complex.

The Special Rapporteur has been visiting the Institute periodically since 2000 and reviewing the progress of implementation of the orders issued by the Supreme Court in September, 1994 in writ petition (Civil) No. 339 of 1986 and the directions issued by the NHRC from time to time under the

Supreme Court's mandate. The last such review was carried out on 26 March, 2004 and its report was considered by the Commission on 30.4.2004 and sent demi-officially to the Chief Secretary, Govt. of Jharkhand by the Joint Secretary, NHRC on 18.5.04. The presentation by Dr. Chakraborty covered the status of compliance of the Commission's directions.

Observations made and directions given by the Chairperson in his visit are recorded below:

### ADMISSION AND DISCHARGE

## **Out patients**

Admission and Discharge procedure has been streamlined and brought in conformity with the previous of the Mental Health Act, 1987. A total of 23741 patients attended the OPD in 2003-04 against 19353 in 2002-03. This shows an increase in daily average from 61.82 to 75.84. OPD runs from 9 AM to 4.30 PM on all working days and from 10 AM to 1 PM on holidays and Sundays. The OPD attendance for the year 2004-05 (upto 28 Feb. 2005) is 23859 which gives a daily average of 82.55. The OPD is being manned by 2 consultants and one Senior Resident in Psychiatry, one Physician, one Opthalmologist and one physiotherapist. The services of Psychiatrists, Physician, Clinical Psychologist and family counselling by Psychiatric Social Workers are available in Free drug supply to all patients is being carefully the OPD. ensured. Dr. Chakraborty informed the Chairperson that a dental surgeon has recently been appointed and the OPD complex will soon have a Dental Surgeon. While appreciating the layout, separate seating arrangements for male and female patients and the

availability of T.V. and water cooler facilities, the Chairperson pointed out the need for increasing the seating capacity (50) in the waiting hall.



### **Indoor Patients**

The maximum 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 and 480.88 in 2003-04. For the year 2004-05 (upto 28 Feb. 2005), the average strength of indoor patients comes to 474.91.

On the day of the Chairperson's visit, RINPAS was holding 455 indoor patients – 334 male and 121 female. 13 patients – 12 male and 1 female – were paying patients. As many as 205 patients – 154 male and 151 female belong to Bihar. It can be safely assumed that the admissions and discharge are going on smoothly in accordance with the provisions of the Mental Health Act and the problem of Long Stay Patients is being tackled effectively. This would be clear from the following statement:

Year	Admitted	Discharge
2001-02	1297	1349
2002-03	1394	1367
2003-04	1359	1353
1.1.04 to		
28.2.2005	1275	1312

## **Voluntary Admissions**

The percentage of voluntary admissions at RINPAS has been consistently above 90 % since the first review made by the special Rapporteur in June, 2000. It was 91.36 % in 2001-02, 94.98 % in

2002-03 and 94.92 % in 2003-04. In the year 2004-05 (upto 28 Feb.05), only 7 patients – 2 male and 5 female, were admitted under reception orders. In the previous year i.e. 2003-04, 11 patients – 1 male and 10 female – were admitted on the court's orders.

A detailed examination by the Special Rapporteur revealed that the provisions of Sec. 19 of the Mental Health Act which provides for admission of mentally ill persons under special circumstances on application made by a relative or a friend are not being comprehended and followed properly. While the Act makes this provision for admission of patients on request from their family members or friends, a ceiling of 90 days is prescribed for their hospitalization, which can be extended only by obtaining a proper reception order from the competent magistrate. It is sadly observed that as many as 66 patients - 55 male and 11 female, belonging to Sec. 19 category have completed more than 90 days. 59 of them were admitted in the calendar year 2004. Director, RINPAS was asked to review the position of all the indoor patients who are being treated as voluntary Boarders and take immediate steps for regularisation of their continued hospitalisation necessitated by (a) their need for further treatment and (b) failure/reluctance of the family to collect them.

## PRIVATE/PAYING WARD

The paying ward opened in Feb. 2002 under the Commission's advice is functioning efficiently and gaining popularity. The number of patients admitted in private paying ward increased from 29 in 2002-03 (June, 2002 to March 2003) to 96 in 2003-04 and 102 in 2004-05 (upto 28.2.05).

#### AVERAGE LENGTH OF STAY

The Chairperson noted with satisfaction that the average length of stay of the indoor patients has come down from 100.93 days in 2001-02 to 91.69 days in 2002-03. It showed a slight increase to 95.03 days in 2003-04. However, the figure related to the period of current review (from 1.4.04 to 28.2.05) is 89.66 days. The Chairperson remarked that ALS could be reduced further by persuading the patients' families to keep at least one of their family members with the patient as has been convincingly proved by Gwalior Mansik Arogyashala.

#### LONG STAY PATIENTS

The number of long stay patients (over 2 years) on the day of the visit was found to be 101-47 male and 54 female. 73 of them have completed 10 years with 53 of these having spent over 15 years. The number of LSPs was 135 in March, 2003 and 128 at the time of the last review (26 March 2004). It is worth noting that as many as 80 of the LSPs – 37 male and 43 female, are fit to be discharged. Families of 63 of them – 30 male and 33 female – are untraceable. 22 patients – 11 male and 11 female are destitutes and can be considered for rehabilitation and semi-independent living in a protected environment. Following cases are cited by way of example:

Dhrub Kumar Samajpati has no family members alive other than a blind father who is a beggar. He has shown remarkable recovery and is currently working as a ward worker. Ramesh Sahu hails from Sundargarh, Orissa. Successful efforts were made to restore him to his family by providing an escort. He had to be brought back because his parents have died and there are no other relatives.

Female patients Urmila, Madhuri, Sarla Mehta, Hoor Banu, Chander Kiran and Sarita Khankar's families could be contacted but have refused to take them back.

The Commission is considering the formulation of a rehabilitation plan for such patients with the help of the Ministry of Social Justice and Empowerment.

It is intriguing that there are as many as 28 cases of long stay patients admitted under court's orders where correct home addresses are not available and the addresses mentioned in the reception orders are not helping in arranging their repatriation after treatment. Another sad and significant fact observed by the Chairperson was that as many as 18 long stay patients – 10 male and 8 female - are not willing to return to their families. The Chairperson spoke to two female patients of this category – Agniesia admitted on 11.5.73 and Kamla admitted on 3.8.78 who expressed their willingness to stay in the mental hospital instead of returning to their unsympathetic families.

It is heartening to note that 36 - 25 male and 11 female - long stay patients were discharged and returned to their families during the period of review by providing escorts from RINPAS itself as suggested by the Commission. The case of Nutan Sinha deserves specific mention. Nutan Sinha admitted on 14.5.2004 was discharged on 21.5.04 through the efforts of Action Aid volunteers. Hospital escort accompanied by Psychiatric Social Worker students and Action Aid volunteers took her to her family.

The initial reluctance of her mother to take her back was overcome .by the PSW by involving the local community. Patient's younger brother apologised for his mother's behaviour and took her back. He brought her back to the hospital the following day to collect details about her treatment. The patient was found cheerful and happy. Follow-up is being done regularly by the Psychiatric Social Workers.

#### **HOSPITAL SERVICES**

The Hospital services of RINPAS have registering great improvement over past five years. All routine investigation, Psycho-diagnostics radiological investigations, drug level estimations are done for treating Outpatients and Inpatients. The following comparative statements show substantial increase in the output of various departments during the period of review:

## **Department of Clinical Psychology**

	No. of Patients	
	2003-04	2004-05 (upto 28/2/05)
Psychological and Psychosocial Management session (including Individual, couple, family and group sessions)	790	1688
Psycho-diagnositics (Including IQ)	314	513

## Department of Psychiatric Social Work

Home visit Counselling (Admission, Discharge, Foll	50 1266	78 1012
Social Case Work Group Therapy	63	79
Family Therapy	10 18	14 16
Social History	25	53

## **Department of Pathology**

Hematology Biochemistry Others (serology, urine, stool, Pregnancy ABO grouping)	12,009 2,251 2,748	9096 2750 2782
ABO grouping)		

Absent of modified ECT facility remains a major deficiency although the Director does not feel that it is making any appreciable difference in the treatment of patients. Non-availability of an Anesthetist cited as the main reason for this. This deficiency must be made up.

## Department of EEG

	No. of Patients	
	2003-04	2004-05 (upto 28/2/05)
OPD Pts Indoor Pts	56 16	98 23
Total	72	121

## AUXLARY SERVICES

Mechanical laundry of 200 kg capacity installed in 2003 is functioning efficiently. The mineral water plant having a capacity of 1000 litres per hour is efficiently serving the Institution. The staff deployed on these jobs (Dineshwar Baitha and Abhay) are continuing as contract workers with a fixed salary of Rs. 2500/- per month. Since regular posts are available, they should now be considered for regular employment after following the prescribed procedure.

RINPAS is one of the few medical Institutions which has an Oil fired Incinerator 30 of KG per hour capacity. To ensure its economic utilisation the Department of Health, Govt. of Jharkhand has extended its use for disposal of Bio Medical Waste from the Govt. hospitals and Nursing Homes Ranchi city. A contract has been given to EnVision Enviro Engineers Pvt. Ltd. Surat for this purpose. The installation of the facility has been completed but it could not be commissioned for want of sufficient voltage to The normal voltage is reported to be 290 to 300 operate the plant. volts against the requirement of 415 volts. While the Institution is paying for supply of 11000 volts, the voltage at the entry point is found to be 9000 only. The firm has promised the Ranchi Medical Association and Jharkhand State Pollution Control Board that it would start this facility by April 1, 2005 provided the voltage requirements are met.

#### **DEATH IN JAIL**

The last review had shown a remarkable improvement in the mortality rate bringing down the number of death of indoor

patients from 10 in 2002-03 to 5 in 2003-04. The welcome trend continues with only 3 deaths reported during the period 1.4.04 to 28.2.05.

The Special Rapporteur examined these cases in detail and gathered the following information:

- (i) An unknown woman Hema admitted on 25.7.01 and diagnosed as a case of schizophrenia undifferentiated died at RINPAS on 1.6.04. Post-mortem examination mentioned asphyxia as a result of food material in respiratory trachea as the cause of death. This patient was sometime found eating her own faeces.
- (ii) Mis Gopa Sen Gupta admitted on 4.12.89 (age shown as 54 years) was being treated as a case of chronic schizaphrenia. She was discharged on 10.11.90 and re-admitted on 14.11.90 with relapse and also abandoned by her family. On 24.7.04 (A.N), she started getting attacks of giddiness, her pulse became feeble and BP not recordable. Every effort was made to save her life with life saving measures including oxygen, inhale from external cardiac massage. She died due to cardio respiratory failure at 4.30 P.M. Post-mortem examination confirmed this.
  - years) was being treated as a case of Bipolar Effective Disorder Manic type. He became fit for discharge after two months but the family did not respond. On 22.12.04 he did not turn up for breakfast. On examination, the pulse was found not palpable, B.P. was not recordable and no heart sound heard. He was

declared dead at 9.30 AM. It was a case of sudden death due to cardiac arrest. The body was sent for post-mortem examination through Officer incharge police station, Kanke. PM examination report is awaited from RIMS. The exact cause of death is yet to be confirmed. Dr. Chakraborty was requested to collect the Post Mortem Examination so that the exact cause of death is known.

#### **ESCAPE OF PATIENTS**

The last review had revealed a very alarming picture of escape of patients. 11 patients escaped in 2003-04 as against 6 in 2002-03. The trend seems to have been controlled. While the presentation made by the Director showed that only one patient had escaped during the period 1.4.04 to 28.2.05, examination of the relevant records by the Special Rapporteur revealed that there have been 2 escapes during this period. One of the escapes was later traced by the Police and restored to his family.

#### JAIL WARD

The Jail ward was found holding 28 patients on the day of the visit. 15 of them – 1 convict and 14 UTPs are considered fit enough to defend themselves. The Special Rapporteur saw all of them and also examined their files. 6 of them have completed more than one year in the mental hospital. 4 to 6 letters have been written to the jail concerned in each of these cases without getting any favourable response. The Director informed that the Chief Secretary, Jharkhand has asked for the list with full particulars of

these prisoners so that directions could be issued to the I.G. (Prisons) from his end.

## OCCUPATIONAL THERAPY

Occupational therapy unit continues to be one of the USPs of RINPAS. RINPAS has a full-fledged occupational therapy and rehabilitation unit offering comprehensive vocational training to the patients as a therapeutic facility as well as a rehabilitatory measure. The Chairperson visited the carpentry, bookbinding, tailoring, yard spinning, weaving, blacksmith and printing and stationery shops in the male section. He also saw the bakery unit, which is meeting full requirements of the Institution. In the female section, patients are being trained in stitching, embroidery, basket making, knitting, shawl making and mushroom culture. The Chairperson saw all the female patients attending O.T. assembled in the main O.T. Hall.

On the day of the visit, a total of 114 patients were seen assigned jobs in the OT section with 21 graded as a skilled, 33 semi-skilled and 56 unskilled. The number of male patients attending O.T. has increased from 92 - 100 at the time of last review to 110 - 130 during the period of review. In the female section, the number was 65 to 75. It has been ranging from 47 to 61 during the period of the review. The drop is explained by a large number of releases effected during this period.

The Chairperson remarked that the incentive offered to these patients at the rate of Rs. 10/ for skilled, Rs. 5 for semi-skilled and Rs. 2 for unskilled is rather low and needs to be enhanced He specifically instructed the Divisional

g5

Commissioner/Chairman, Management Committee Mrs. Rajap to do the needful.

RINPAS has also developed separate Agriculture and Horticulture sections covering an area of 105 acres approximately of land of which about 90 acres has been fenced with a stonewall. The requirement of vegetables for the Institute is being met to the extent of 60%.

Another significant improvement made during the period of review is the introduction of Poultry and Dairy farming. A poultry unit was started on 7.7.04. It is making a monthly profit of Rs. 5000 to Rs. 6000 while spending Rs. 4500 as wages for 2 casual workers. Additional space is being provided to extend this activity in order to make it economically more productive. A dairy farm has been started with 11 cows of Jersey and Fizin breed. 3 casual workers have been employed. A daily yield of 160 litres has made it productive with monthly profit of Rs. 35,000.

The Director is very enthusiastic to expand the Agricultural facilities by using expertise from an NGO called Kendrya Gram Vikas Kendra, which has offered assistance. It was however observed that these activities are being run largely to make profit for the Institution rather than providing rehabilitatory measures for the patients. No patient was found engaged in these jobs. The need to offer opportunities of gainful work to relatively better patients in Agriculture and Horticulture sections was pointed out by the Special Rapporteur in his last visit but no worthwhile action has been taken by the Director in this regard. Among the inmates, a number of patients with rural background can be identified who would be interested in agricultural work. This can also act as a therapeutic device.

#### **STAFF**

There has been substantial improvement in the staff position since the last review. Besides filling up some of the key vacancies, the staffing pattern has been improved by creation of following additional posts by the Management Committee:

- (1) Department of Psychiatry: One Associate Professor, one Assistant Professor, four Research Officers and four Senior Residents (10 posts).
- (2) Clinical Psychology: One Associate Professor, One Assistant Professor, four Research Officers and One Lecturer (Yoga-cum-Philosophy) (7 posts).
- (3) Psychiatric Social Work: Two Associate Professors, Two Assistant Professors and four Research officers (8 posts).

In the Department of Psychiatry, one ex-army Lt. Col. Dr. S. Chaudhary has been appointed as a Professor and is expected to join shortly. One Assistant Professor Dr. Nand Kumar has joined as fresh appointee and one more Assistant Professor will be joining shortly. The department of Clinical Psychology is now holding one Professor, one Associate Professor, two Assistant Professors and One Lecturer (Philosophy-cum-Yoga). Besides, two Clinical Psychologists are also held. In the Department of Psychiatric Social Work, one Associate Professor has joined after the last review. Besides, selections have been made for filling 11 posts out of a total of 14 posts of Psychiatric Social Workers. It is significant that RINPAS is having as many as 22 Psychiatric Nurses. Moreover, most of the general nurses have been put through Psychiatric Nurses Orientation Training. One Pathologist

Dr. Sorab Banerjee joined during the period of review. One Ophthalmic Assistant has been attached to RINPAS in October, 2002 by the Health Department.

### LIBRARY

The Institution is maintaining a well-equipped medical library for the students and staff besides providing a separate library with reading room facility in male and female sections. With an addition of 725 books procured during the period of review, the medical Library is now holding 8684 books on Psychiatry, Neurology, Clinical Psychology, Psychiatric Social Work, Psychiatric Nursing, Medicines and related subjects. The Library is subscribing 27 foreign and 6 Indian journals. Besides holding 2092 medical journals, the Library is having 169 publications of WHO.

# TEACHING AND ACADEMIC ACTIVITY

RINPAS is a recognized teaching centre for MBBS students who are posted here from various medical colleges of Jharkhand and Bihar for Psychiatric training. It is running regular M.Phil and Ph.D. courses in Clinical Psychology and Psychiatric Social Work with affiliation to Ranchi University. The Institution is presently holding 23 students doing the following courses:

Holding 25 stadents to 116	Sessions	
	2003-05	2004-06
1. Ph.D. in Clinical Psychiatry	2	2
2. Ph.D. in Clinical Social Work	1	2
3. M.Phil in Medical and Social Psychological	ogy 6	6
4. M.Phil in Psychiatric Social Work	2	2
Total	11	12

The Institute has 3 lecture halls each accommodating more than 50 students and with provisions of audio video facilities in addition to one AC and one non-AC conference hall with capacity of 140 and 200 persons, respectively. The Teaching aid facilities include overhead projector, slide projector and multi-media projector. The Chairperson interacted with the students who seemed satisfied with the Library facilities but agreed with the Chairperson's remark that it is high time the Institute developed computer facilities with access to Internet for the use of the students.

The much needed objective of starting the M.D (Psychiatry) and DPM remains unfulfilled. The Director is hopeful that M.D. Psychiatry classes can be started after the newly appointed Professor (Dr. S. Chaudhary) joins shortly.

#### RESEARCH ACTIVITIES

The performance of the RINPAS under this head continues to be commendable as before. 16 research projects were completed in 2004-05. This includes 10 out of a total of 11 shown in progress at the time of last review. 21 research projects are currently in progress. As many as 20 research papers contributed by the Faculty and the students of the Institute have been published in national journals. It is a matter of pride for the Institute that Professor Amool R. Singh of the Department of Clinical Psychology is currently the editor of the Indian Journal of Clinical Psychology.

#### WORKSHOP AND SHORT COURSES

The following activities were organised at RINPAS during the period of review:-

- A National Seminar on Human Rights and Mental Illness was held on 4 September, 2004. More than 135 delegates participated.
- A Workshop on Orientation in Psychiatric Social Work was held from 4 – 6 October, 2004.25 P.G. students from different universities attended.
- 3) A Workshop on Mental Health and Advocacy for People Working in NGOS was held on 30.12.04. 54 participants attended.
- 4) Psychiatric Nursing Orientation training of one week duration was conducted in 3 batches in the month of August. 27 nurses underwent this training.
- 5) 2 Sensitisation Orientation Workshop for Nursing Staff were conducted with the help of Action Aid India on 7-8 June, 2004 and 7-8 October, 2004. A total of 42 nurses attended.
- 6) Two staff nurses underwent training at RIMS, Ranchi from 10.8.04 to 9.9.04. 2 staff nurses got training at CIP Ranchi in Management and Development Programme.
- 7) A two-week orientation course was conducted for nursing students (numbering 10) in February 2005 from Mohal Pahari Nursing School, Dhumka.

#### COMPUTERISATION

This is one area where the progress remains poor and slow. However, the Director informed the Chairperson that firm order has now been placed for procurement of 2 Server, 26 computers, 17 printers and LAN for the Institute and delivery is expected by March end. He also showed the preparation being made for the installation of computers and informed that the tenders have been floated for the software packages.

### MANAGEMENT COMMITTEE

The proposed induction of Vice-Chancellor, Jharkhand University and Vice Chancellor, Birsa Agricultural University as members of the Management Committee mentioned in the review report has been approved by the Commission. It is sadly pointed out that the Management Committee has not complied with the Supreme Court's directions regarding mandatory quarterly meetings. The Committee has met only twice on 19.10.04 and 8.1.05 during this period. The mandatory requirement of holding the quarterly meeting was emphasised by the Chairperson personally to the Divisional Commissioner, Mrs. Rajap who is the current head of the Management Committee.

#### COMMUNITY OUT-REACHING PROGRAMME

Performance in this vital area of work directed by the Supreme Court has been consistently good. The Institute was earlier running only one satellite clinic at Jonha. In the last review expansion of this programme to Khunti (40 km from Ranchi) and Hazaribagh (120 kms) was mentioned. A medical team comprising a Psychiatrist, Social Worker, Para-medical staff and students is conducting a monthly OPD at these places. The team is also making a fortnightly visits to Birsa Central Jail, Ranchi and Cheshria Home. A Monthly visit to Central Jail, Hazaribagh has

also been started. A Mental Health camp was held at Tamar on 30.11.2004 and the next such camp was scheduled to be held at Daltonganj on 29 March, 2005. 2 NGOs Nav Bharat Jagriti Kendra and Sanjeevini Trust are helping RINPAS in these activities.

RINPAS has been selected as nodal point for District Mental Health Programme at Dhumka. One Psychiatrist, one Clinical Psychologist, 2 Psychiatrist Social Workers and 3 Psychiatrist Nurses have been appointed. The programme will be commissioned shortly after the Budget is released by the Govt. of India.

#### WORKS

The progress of works entrusted to the PWD and Drinking Water and Sanitation Department is found to be satisfactory. PWD Building Division has completed 9 works during the period of review, which include renovation of Director's office, construction of boundary wall surrounding the warder line. 5 works are currently in progress. Only one work out of 15 proposed for 2004-05 could not been started. This relates to construction of compound wall of agricultural land near Sukurhuttu village where some resistance is being encountered from villages. Water and Sanitation Department was given 11 works for 2004-05. 10 of these have been completed and one is progressing satisfactorily. Electricity Works Department has completed all the 4 works entrusted to it for the current year.

### **HALF WAY HOMES**

Although HWHs are functioning in both Male and Female Sections and holding 16 and 12 inmates respectively this has to be treated as an ad hoc and temporary arrangement which simply serves the purpose of segregation of patients who are getting ready for discharge. The target of establishing a proper HWH, a little away from the Hospital and run by an NGO is yet to be achieved. A suitable NGO – Sanjiwini Gram Trust – has been identified for setting up a HWH for 25 female patients. The proposal formulated under a scheme of the Union Ministry of Social Justice and Empowerment is being pursued by the Commission.

## **OUT-STANDING DUES FROM OTHER STATES**

Patients from Bihar continue to constitute more than 50% of the total Indoor admissions. The outstanding dues from Bihar computed as Rs. 26,65,40,560 at the time of the last review have since escalated to Rs. 31,00,17,099 as of 31.10.04. The Commission's directions to the Chief Secretary, Bihar have not produced any worthwhile results. The Chairperson remarked that the matter may have to be brought to the notice of the Supreme Court. Besides Bihar, Govt. of Manipur and Arunachal Pradesh also owe Rs. 74,65,437 and Rs. 7,67,938 respectively to RINPAS on account of hospitalization of their patients.

## **CONCLUSION**

The Review made by the Chairperson presents an encouraging picture of the performance of RINPAS in 2004-05. RINPAS is making steady strides towards full realisation of the objectives set by the Supreme Court while granting it an autonomous status. The Institute would soon be able to compete with the top mental hospitals in the country in terms of diagnostic and therapeutic facilities. It has set notable standards in developing and operating facilities of occupational therapy. The scope and reach of the community services has registered further expansion in the period of review. The staffing pattern has been strengthened and rationalised to make this Institution a great hospital capable of serving as a center of excellence in the field of training and research in mental health. Development of facilities for the Training of Medical and Para-Medical Personnel has, however, been slow. The Management Committee should unhesitatingly use its autonomous character and improve the range and quality of teaching facilities.

> (Chaman Lal) Special Rapporteur