LOKOPRIYA GOPINATH BORDOLOI REGIONAL INSTITUTE OF MENTAL HEALTH (LGBRIMH), TEZPUR, ASSAM

Introduction: I started my visit of the Institute on June 13, 2014 at 10.00 AM. I was accompanied by Dr. A. Sarmah and his team of officials. The Director, Dr. S.K. Deuri was on medical leave. The list of officials is at Annexure 'A'.

The Tezpur Lunatic Asylum was set up in 1876 by the British Government. In 1922, the name was changed to Tezpur Mental Hospital and by the year 1932, the accommodation in the hospital rose to 700 beds. Most of the existing buildings belong to that period. In 1949, Dr. N.C. Bordoloi, the Superintendent brought about a marked improvement in the administration and treatment services of the hospital. In 1987, a new Out-Patient Department (OPD) was built and in the following year, another two-storied building was constructed to accommodate the increased number of patients. It was only in 1989 that the hospital was re-christened as 'Lokopriya Gopinath Bordoloi Institute of Mental Health' (LGBIMH). In 1999, the North Eastern Council (NEC) took over the hospital and upgraded it to a regional institute to cater to the needs of the entire North-East region. Appropriately enough, the hospital was re-named, 'Lokopriya Gopinath Bordoloi Regional Institute of Mental Health' (LGBRIMH). On June 1, 2007, the Institute was taken over by the Ministry of Health and Family Welfare, Government of India.

2. Land & Building: The Institute is spread over 83 acres of land with a natural drainage system and lush greenery. I was informed that over 90 deers roam about peacefully in the campus. During my rounds, I did espy a few stags. It was a re-assuring sight. The entire institute has a 10 feet high wall surrounding it.

There are separate provisions for OPD, Indoor, Academic, Administrative, Rehabilitation and Accommodation for the staff. In the OPD block, there are 38 rooms with a comfortable Waiting Room and Canteen. There is a separate Clinic for child adolescent, geriatric, de-addiction, epilepsy, psychosomatic and forensic services.

There is a power backup with 1 set of 250 KV and 2 nos. of 125 KV DG sets. These equipments are crucial for some of the expensive and sophisticated machines that the Institute has acquired over the years. These power backups also provide electricity to the various wards of the patients in case of an electricity outage.

- 3. **Capacity:** The Institute has an Indoor capacity of 336 beds (M-246; F-90). In the Male Section, there are 8 separate dormitories of various capacities, while in the Female section, there are 3 separate dormitories. The two units are separated by a high wall.
- 4. **Outpatient, Admission & Discharge:** The Admission and Discharge procedure is strictly according to the Mental Health Act, 1987. The figures for the last 3 years are as follows:

CATEGORY	2011	2012	2013
OPD	72,833	78,322	91,793
ADMISSION	1,555	1,508	1,537
DISCHARGE	1,559	1,506	1,502

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A study of these figures reveals the effectiveness of this Institute and dedication of its Staff as well as the efficaciousness of modern-day medicine. The OPD figures have risen by 7% and 17% respectively, while the Admission figures have dwindled by -3% and -2% respectively.

The State-Wise figures also tell an interesting story. Patients flock to this Institute not only from the entire North-Eastern region but also from West Bengal, Bihar, UP, HP, Uttaranchal and even Maharashtra and Madhya Pradesh. Surprisingly, international patients also troop in from Bangladesh, Nepal and Bhutan. OPD and Admission figures for this are at Annexure 'B'. 2 'C.'.

5. **Strength of Hospital Staff**: As the Institute is meant for studies also, along with the regular staff, quite a few Teaching Staff are also available here. The figures are:

CATEGORY	SANCTIONED	ACTUAL	VACANCY
Administrative	47	45	2
Academic	109	53	56
Hospital	236	222	14
National Mental Health Programme	17	5.	12
DBT Project	. 7	5	2
Contractual		83	
	416	330 + 83	86

A vacancy position of 86 is quite huge, especially in a sector like the Teaching Staff. I am informed that these posts have been advertised but perhaps, owing to the absence of an attractive pay scale, these posts are still lying vacant. The Contractual Employees have been outsourced and consists mostly of Grade-IV staff.

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The Trainees undergoing training and studies here are as follows:

CATEGORY	No.
MD Psychiatry	5
DNB Psychiatry	6
M. Phil Clinical Psychology	8
M. Phil Psychiatric Social Work	8
MSc Psychiatry	. 22
DPN	7
TOTAL	56

6. **Deaths & Escapes:** A few cases of deaths and of escapes have also taken place here. While the cause of death has been natural, that of escapes is because of the abolition of Isolation Wards or Confinement Wards. The figures are as follows:

YEAR		DEATHS			ESCAPES	
	MALE	FEMALE	TOT.	MALE	FEMALE	TOT.
2011	4	1	5	2		2
2012	3	1	4	2		,2
2013	1		1	1		1
	8	2 .	10	5		5

- 7. **Medicines:** Medicines are given free of cost to the patients, both indoor as well as out-patients. Proper meals are served to the patients with non-vegetarian food being served twice a week. Other amenities include food supplements, wearing apparel, linen, beds, garments, toiletries and laundry facilities. The kitchen and laundry facilities are both well-equipped with food being cooked at a central location and distributed to the Female Section. The dining room facilities for males and females are located at two different places. The bed linen is changed daily.
- 8. **Recreational Activities:** All the wards have colour television sets for the entertainment of the patients. Carom board, Ludo, Chinese checkers are also played by the patients under the supervision of the wardens.

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9. Under Trial Prisoners (UTP) Wards: There is a fortified ward inside the institute for housing UTPs for treatment of mental illness. This is done on the basis of a report of the District Medical & Health Officer. Currently, there are 18 such patients in judicial custody (JC). Of them, 7 have been declared fit by the concerned doctors and need to be sent back to their respective jails. Also, a further number of 11 patients have been sent here on the basis of the Reception Orders (RO) of the Chief Judicial Magistrate. Besides these, another 18 patients have been admitted here from different district jails of Assam and 1 from Seppa Police Station of Arunachal Pradesh. All of them are being looked after well and are being treated for their illness. The figures for OPD attendance of Jail cases are listed below:

YEAR	MALE	FEMALE	тот.
2011	268	16	284
2012	407	28	435
2013	629	60	689
TOTAL	1,304	104	1,408

10. LONG-STAY PERSONS WITH MENTAL ILLNESS — INITIATIVE OF NHRC, NEW DELHI: Since 1998, the Deptt. Of Psychiatric Social Work (PSW) has undertaken the process of rehabilitation of long-stay persons of LGBRIMH. These are patients staying in this Institute for over 2 years. This follows the recommendations of the NHRC, New Delhi. This has been achieved with the active help and co-operation of NGOs, police and the general public. The figures are:

	<u>Phase I</u> (Feb, 2104)	<u>Phase II</u> (May, 2014)	<u>Phase III</u>	CJM's Order on different dates	TOTAL
NEVARD,	14	,		·	
Bongaigaon				•	
Help Aid, Guwahati	•	11	13		
North-East Regional Multipurpose School, Balipukhri, Sonitpur				7	
	14	11	13	7	45

Currently, there are no long-stay patients in the institute.

LOKOPRIYA GOPINATH BORDOLOI REGIONAL INSTITUTE OF MENTAL HEALTH (LGBRIMH), TEZPUR, ASSAM

11. **Board of Visitors:** The Government of India Notification constituting a Board of Visitors is dated April 27, 2009. If am informed that the Board Members hardly ever visited the Institute.

12. Recommendations:

- 1. The vacancy position of 86 staff members may be filled up early.
- 2. A Legal Counsellor may be appointed full-time to represent and follow up cases of the UTPs lodged here.
- 3. The efforts made by the PSW Department to cater to the needs of the long-stay patients, is laudable. This effort and initiative may be further augmented by exploring all possible avenues to trace the relatives of abandoned inmates, if any.
- 4. The cases of the 7 UTPs who have been declared fit by the Institute may be disposed off early. They need to be sent back to their respective jails to stand trial.
- 5. Design a mechanism system like a Search Committee to enable abandoned cases to integrate with the family and relatives.
- 6. The Board of Visitors may be provided with some incentives so that the members visit the Institute as laid down in the Notification.
- 7. A deep sense of disillusionment and resentment prevails over the staff members. This feeling stems from the sudden snatching away of pensioner benefits from them after the Institute was taken over by the Government of India. The last meeting on this subject was held at Nirman Bhawan, New Delhi on August 14, 2013 (Annexure Nothing has been heard since then. This impasse may be resolved at the earliest.

(Anil Pradhan) IPS Special Rapporteur (NE Zone) National Commission for Human Rights

Harriere 'A'

LIST OF PERSONS ATTENDING MEETING WITH SPECIAL RAPPORTEUR NHRC, NEW DELHI AT LGBRIMH, TEZPUR ON 13^{TH} JUNE, 2014

Sl.No	Names	Designation	Signature
1.	Dr. Anil Sarmah	M.S	Jums
. 2.	Mr. J. K. Sarma	CF & AO	ं रिप्यान्तिम् ५
3.	Mr. T. Mohanta	AO	MM 13/6/14
4.	Dr. K. N. Kalita	AMS/Asso. Prof. (Psy.)	E
5.	Dr. Sonia P. Deuri	HoD& Prof. (PSW)	Ohis
6.	Dr. P. K. Sarma	DMS I/c	(4/3/6/5cm)
7.	Dr. Sobhana. H.	Asst. Prof. (PSW)	0 713/6/14
8.	Dr. Arunjyoti Baruah	HoD & Asso. Prof. (Psy. Nsg.)	Arwith Bank

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AUSTRALIA				ļ ——							-							
TOTAL	3639	3046	6685	3628	2977	6605	3833	3310	7143	4228	3764	7992	4456	3829	8285	4073	3449	7522

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	4314	3666	7980	4044	3405	7449	4241	3714	7955	4301	3696	7997	4231	3765	7996	4312	3822	8134	49300	42443	91743

STATE WISE OPD 2012

STATE	-	JAN	-		FEB		<u> </u>	MARC	H .		APRIL			MAY			JUNE	
	М	F	Т	M	F	T	M	F	T	M	F	Т	М	F	T	M	F	Т
ARUNACHAL PRADESH	16	17	33	16	17	33	25	20	_ 45	33	10	43	27	13	40	26	15	41
NAGALAND	15	14	29	18	7	25	19	10	29	12	7	19	12	7	19	19	, 6	25
NIPUR	4	1	5	2	0	2	7	1	8	7	0	7	. 5	2	7	9	1	10
MEGHALAYA	5	1	6	4	1	5	3	3	6	4	0	4	3	1	4	5	1	6
MIZORAM							1_1_	1	2	1_	0	1	1	0	1			
TRIPURA	0	1	1			<u> </u>	2	0	2	1_	0	1	2	0	2	1	0	1
WEST BENGAL	18	6	24	22	7 /	29	25	5	30	18	9	27	22	3	25	31	9	40
BIHAR	2	2	4	6	1 - 1	7	5	1	6	_ 3	2	5	5	1	6	4	2	6
UTTAR PRADESH	2	1	3	3	1	4	1	0	11	1	2_	3	2	2	4	2	1	3
PUNJAB			ļ			<u> </u>				0	3	3		<u> </u>				<u> </u>
RAJASTHAN				0	2	2	1 1	0	1	 -						ļ	ļ	ļ
HIMACHAL PRADESH	2			1	0	1	1	0	1			4			<u> </u>	<u> </u>		
KERELA	2	0	2	1	0	1				1	0	1			 	<u> </u>		<u> </u>
UTTARKHAND UTTARANCHAL		<u> </u>	ļ <u>-</u>		 	<u> </u>									 	 -		'
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ANDHRA PRADESH					- -	<u> </u>									 -			
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ASSAM	3266	2836	6102	3369	2833	6202	3694	3044	6738	3448	2775	6223	3599	2914	6513	3638	2899	6537
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TOTAL	3335	2004	6246	2440	2072	6240	2705	2000	C074	2520	2000	COAA	2002	0044	2207	0746	0005	
LIOTAL	3335	2881	6216	3446	28/2	6318	3/85	3086	6871	3532	2809	6341	3683	2944	6627	3740	2936	6676

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STATE WISE OPD 2011

STATE		JAN			FEB	_		MARC	Н	T	APRIL			MAY		1	JUNE	
<u>-</u>	M	F	T	M	F	T	M	F	T	M	F	1 T	M	F	Т	M	F	T -
ARUNACHAL PRADESH	20	14	34	24	16	40	26	21	47	30	18	48	22	24	46	24	20	44
NAGALAND	15	11	26	18	6	24	13	15	28	13	10	23	26	16	42	20	7	27
MĄ TPUR	4	1.	5	3	2	5	4	6	.10	2	6	8	5	1	6	2	2	4
MEGHALAYA	_			2	0	2	4	1	5	3	3	6	7.	• 4	11	4	0	4
MIZORAM	0	1	1	2	0	2	1	0	1	1	0	1	2	0	2	1	Ō	1
TRIPURA	0	1	1_	0	1	1	2	0	2				1	4	5	3	0	3
WEST BENGAL	13	6	19	16	6	22	18	2;	_ 20	14	7	21	17	3	20	16	9	25
BIHAR	4	3	7	3	4	7	6	2	8	4	1	5	2	3	5	3	1	4
UTTAR PRADESH	4	1	5	1_1_	0	1	2	0	2	1	1	2_	1	2	3	0	1	1
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ASSAM	3130	2348	5478	3243	2558	5801	3508	2829	6337	3359	2777	6136	3545	2832	6377	3369	2596	5965
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OUT PATIENT DEPARTMENT

2011	CATEGORY	MALE	FEMALE	TOTAL
· · · · · ·	NEW	6022	5749	11771
	OLD	34523	26539	61062
	TOTAL	40545	32288	72833

2012	CATEGORY	MALE	FEMALE	TOTAL
,	NEW	6871	6747	13618
	OLD	36277	28427	64704
	TOTAL,	43148	35174	78322

2013	CATEGORY	MALE	FEMALE	TOTAL
	NEW	8150	8436	16586
	OLD	41150	34007	75157
	TOTAL	49300	42443	91793

ADMISSIONS

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2011	CATEGORY	MALE	FEMALE	TOTAL
	NEW	790	253	1043
	OLD	382	130	512
	TOTAL	1172	383	1555

2012	CATEGORY	MALE	FEMALE	TOTAL
	NEW	787	238	1025
	OLD	369	114	483
· · · · · · · ·	TOTAL	1156	352	1508

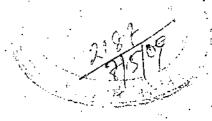
2013	CATEGORY	MALE	FEMALE	TOTAL
	NEW	768	246	1014
	OLD .	408	. 115	523
	TOTAL	1176	361	1537

DISCHARGES

2011	CATEGORY	MALE	FEMALE	TOTAL
	NEW	785	259	1044
	OLD	385	130	515
	TOTAL	1170	389	.1559

2012	CATEGORY	MALE	FEMALE	TOTAL
	NEW	789	228	1017
	OLD	373	116	489
-	TOTAL	1162	. 344	1506

2013	CATEGORY	MALE	FEMALE	TOTAL
	NEW	749	242	991
	OLD	399	112	511
	TOTAL	1148	354	1502



U.12025/46/2007-NE
Government of India
Ministry of Health & Family Welfare
(North East Division)

Dated 27th April 2009

NOTIFICATION

In exercise of the powers conferred by the provision to Section 37 of Chapter-V (Part 1) of the Mental Health Act, 1987 (No. 14 of 1987), the Secretary, Ministry of Health and family Welfare, Government of India, New Delhi, is pleased to constitute the Board of Visitors of Lokopriya Gopinath Bordoloi Regional Institute of Mental Health (LGBRIMH), Tezpur, with the following persons as Members:-

S. No.	Name	Designation/Adress
(1)	Prof. HIRANYA KUMAR GOSWAMI	Prof. & Head, Department of Psychiatry, Silchar Medical Colelge, Silchar, Gangapara, Dibrugarh, Assam
(2)	Prof. HEMENDRA RAM PHUKAN	Professor of Psychiatry, Gauhati Medical College, T.R. Phookan Road, House No.78, Bharalumukh, Guwahati
(3)	Major Gen. (Rtd.) Dr. PURNANADA DAS	Ex. Professor of Psychiatry (AFMC, Pune) House No. 47, Namghar Path, Rukmini Nagar, Guwahati, Assam
(4)	Prof. DIPESH BHAGABATI	Professor of Psychiatry, Gauhati Medical College & Secretary, State Mental Health Authority 26, Bye Lane-3, G.M. Road, New Guwahati, Noonmati, Guwahati
(5)	Representative of the Head of the Medical Services of the State of Assam	
(6)	Shri OM PRAKASH BAGARIA	Local Resident C/o K.B. Stores, Main Road, Tezpur
(7) 	Mrs. MEENAKSHI BHUYAN	social Worker K.P. Memorial School, Parua Tiniali, Tézpur
(8)	Sh. Md. NAZIM AHMED	Social Worker Ex-Police Line,

- 2. The Visitors shall be responsible for:
 - a. Review of admission and discharge of patients;
 - b. Inspectional the wards, outdoor patients department and kitchen;
 - c. Facilities to be provided; and
 - d. Functioning as Liaison Officer between the Government and the Hospital.
- 3. The other terms will be as defined under Section 38 of Mental Health Act, 1987 which is appended as annexure.
- 4. The Board of Visitors will start functioning with immediate effect.

(G.R. Khetarpal) Under Secretary to the Govt. of India # 011-23061203

Copy to: :

- 1. All appointed Visitors (SI. No. 1 to 8 above)
- 2. Dr. S.K. Deuri, Director, Lokopriya Gopinath Bordoloi Regional Institute of Mental Health (LGBRIMH), Post Box No. 15, Tezpur-784 001, Assam. He is requested to endorse a copy of the Notification to all the Executive member of LGBRIMH
- 3. Secretary to the Government of Assam, Health and Family Welfare, Department, Dispur.
- 4. Directorate of Assam Government. Medical Services of the State of Assam.
- 5. Spare copy.

(G.R. Khetarpal) Under Secretary to the Govt. of India #,011-23061203

U.12025/80/2008-NE/PH-I Government of India. Ministry of Health and Family Welfare Department of Health and Family Welfare

> Nirman Bhawan, New Delhi Dated: 14th August, 2013

OFFICE MEMORANDUM

Meeting held on 05.08.2013 to consider Post retirement benefits to the inherited employees of Lokopriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur, Assam-Minutes reg.

The undersigned is directed to refer to the subject cited above and circulate herewith minutes of the meeting held Chairpersonship of Ms. Sujaya Krishnan, Joint Secretary to consider the Post-retirement benefits of the inherited employees of Lokopriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur(Assam) on 5th August, 2013 at 12:00 Noon, Room No. 155-A, 1st Floor, Nirman Bhawan, New Delhi

> (S K Gupta) Under Secretary to the Govt of India

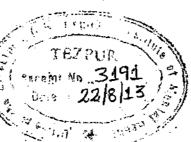
Tele: 23061342

To,

- The Joint Secretary (Pers), Department of Expenditure, Ministry of Ĩ. Finance, North Block, New Delhi - 110001 (Fax 011-23092652)
- Ms. Mamta Kundra, Joint Secretary(E), Deptt of Personnel and Training, North Block, New Delhi.
- Shri J A Vaidyanathan, Director, Deptt of Personnel and Training, North Block, New Delhi.
- Sh Inderjeet Singh, Dy Secrettary, Department of Pension and IV. Pensioner's Welfare, Lok Nayak Bhawan, New Delhi - 110003 (Fax 011-24624802)
- Director, LGBRIMH, Tezpur, Distt-Sonitpur, Assam. ν.
- Sh Sanjay Kumar, S O, Deptt of Expenditure, North Block, New VI. Delhi.

Copy to:

PPS to AS(H), PPS to JS(SK), PS to Director(NMHP)



Minutes of the Meeting held on 5.8.2013 in the 1st Floor Committee Room, Nirman Bhawan, New Delhi under the Chairpersonship of Ms. Sujay Krishnan, Joint Secretary, D/o H&FW to consider the post-retirement benefits to the inherited employees of the Lokopriya Gopinath Bordoloi Regional Institute of Mental Health (LGBRIMH), Tezpur, Assam.

A meeting was scheduled at 12.00 Noon on 05.08.2013 in Nirman Bhawan, New Delhi under the Chairpersonship of Ms. Sujaya Krishnan, Joint Secretary, Deptt. of H&FW to consider the post-retirement benefits to the 119 inherited employees of LGBRIMH, Tezpur. The following persons participated in the meeting:

- 1. Shri S.K.Deuri, Director, LGBRIMH, Tezpur, Assam
- 2. Shri J.A Vaidyanathan, Director, DoP&T
- 3. Shri Ashok Parmar, Director, MoHFW
- 4. Shri Harjit Singh, Deputy Secretary, Dept. of Pension & PW
- 5. Shri S.K.Gupta, Under Secretary, MoHFW
- 6. Shri Sanjay Kumar, Section Officer, Dept. of Expenditure
- 7. Ajaya Kumar K.P, Section Officer, Ministry of HFW
- 8. Dr. Aparajita Baruah, Faculty, LGBRIMH
- 9. Mrs.Mazzarella Barla, Staff Nurse, LGBRIMH.
- 2. Shri Ashok Parmar, Director, MoHFW made a brief presentation on the subject and explained the compulsions for conferring 'central government employee' status to the 119 inherited employees of LGBRIMH. He also told that the proposal is limited to the inherited 119 employees only for calculating their post-retirement benefits, GPF etc. Family Pension, GPF etc. are not part of post-retirement benefits of employees subsequently appointed in the Institute as per the LGBRIMH Recruitment Rules. As per the agreement signed at the time of take-over, service conditions of the inherited employees cannot be altered to their disadvantage and hence there is a need to grant them post-retirement benefits atleast at par with those of the state govt.
- 3. Shri S.K. Deuri, Director, LGBRIMH, explained that there were 194 employees in the institute at the time of takeover of which 10 were contract employees. As such there were only 184 eligible inherited employees and from this, 65 employees(Group C&D) have already retired and are getting Post retirement benefits from the Assam Government. Out of the remaining 119 employees, only 7 belong to Group A&B and others are Group C&D employees. Shri J.A Vaidyanathan, Director, DoP&T wanted to know why the state govt cannot pay post-retirement benefits to the remaining inherited employees. Dr. Deuri informed that the state govt cannot do so because it has already paid its share of pension contribution to LGBRIMH. He informed that LGBRIMH has to pay these 119 inherited employees post-retirement benefits not less than what is being paid by the state government.
- 4. Shri Harjit Singh, Deputy Secretary, Dept. of Pension & PW wanted to know whether those already retired inherited employees who are drawing post-retirement benefits from the state govt. would demand the same pension, if granted to these 119 inherited employees. To this Dr. Deuri informed that such a scenario will not arise as post-retirement benefits are almost the same for both the central and Assam govts.

- 5. Ms. Sujaya Krishnan, Joint Secretary explained in detail the reasons for conferring 'central govt, employee' status to the inherited employees of LGBRIMH. She said that the need of the hour is to grant them post-retirement benefits as applicable to other Central Autonomous Bodies like NIMHANS. She clarified that these 119 inherited employees need not be exactly given the status but they should be eligible for post-retirement benefits not less than what is given by the Assam Govt. She also reminded that the LGBRIMH Society was created after its takeover from the state govt. Ms. Sujaya Krishnan also said there may also be a need to create a pension fund for this purpose. The representatives of DoPT and Dept. of P&PW broadly agreed to this suggestion and said that their departments will consider the Chairperson's views, keeping in view the condition in the Agreement not to alter service conditions to the disadvantage of the employees.
- 6. Shri Harjit Singh said that Rule 37A Of CCS(P) Rules is not applicable in this case but an analogy can be drawn. He said that the inherited employees are entitled to get the benefit of combined service and post-retirement benefits as applicable to state government employees. He said that there may not be any need to create a separate GPF Fund and a corpus may be created by the institute for this purpose. He also said that Dept. of P&PW will reconsider the proposal and approval will be conveyed after seeking orders of the competent authority in the Department.
- 7. Shri J.A Vaidyanathan, Director, DoPT said that the inherited employees cannot be granted central govt. employee status but agreed that they should get post-retirement benefits not less than that of the Assam govt. employees, citing the Agreement. He also said that a reference may perhaps be made to the Ministry of Law also for the validity of the Agreement. He enquired from the Director, LGBRIMH whether pension of the state govt. is at par with that of the Centre. Dr. Deuri explained that in the case of Group C&D employees, it is almost the same and in the case of faculty, the pay scales in Assam govt. are more than what is offered to the Institute faculty. The Chairperson informed that UGC approved pay bands have been granted to the employees of LGBRIMH, after the same has been approved by the Cabinet.
- 8. The Chairperson explained the need for an expeditious settlement of the issue. She informed that the institute was taken over first and then registered as a Society on the intervention of the Hon'ble Supreme Court. She also said that if the aggrieved employees approach the court, it will be difficult to justify the undue delay in the matter. Shri Sanjay Kumar, Section Officer, Dept. of Expenditure said that he will place the issue before his Seniors and get back. He also said that approval of DoPT may be required before referring the issue to DoE again. To this, Shri Harjit Singh said that they can draw only an analogy to Rule 37A of CCS(P) Rules and the Agreement signed at the time of takeover needs to be upheld. Shri Sanjay Kumar wanted to know why the Assam Govt. cannot give pension to these employees like the 65 employees who have already retired. The Chairpersons said that since the Assam Govt. has already deposited the pro-rata pension contribution, the question of Assam govt. paying pension to the remaining inherited employees does not arise.
- 9. Shri Harjit Singh said that at present there is no Rule covering conversion of a state-run institution to a Central Autonomous Body. He said that non-existence of such rules should not be construed as a reason for not finding a solution to the problem. Dr. Deuri informed that 2 group B officers have recently retired and they have not been given any post-retirement benefits and it is likely that they will also approach the Court if the issue is not settled on priority. All the participants unanimously agreed that postretirement benefits like Pension and GPF should not

withheld for no fault of the retirees. The Chairperson said that employees of other similar autonomous bodies like NIMHANS are getting these benefits and central pay scales. Shri Vaidyanathan said that if other employees of other Central Autonomous Bodies are getting the benefit of pension, the employees of LGBRIMH should not be denied this benefit, as LGBRIMH is also a Central Autonomous Body. Mrs. Mazzarella Barla from LGBRIMH said that her counterparts have been promoted in the state government but she has not got this benefit in LGBRIMH. Dr. Aparajita Baruah explained that her name has already been deleted from the state govt. employees list.

10. The Director and two representatives of the LGBRIMH, Tezpur apprehended that non-granting of Central Govt. Status may result in alteration of service condition to their disadvantage.

11. At the end of the meeting, the following decisions were taken:

- a) Ministry of HFW will refer the issue again to the Dept. of Pension and PW and to DoPT for their concurrence/approval, in the light of today's meeting.
- b) The Ministry of Law will be consulted on the validity of the Agreement signed between the Centre and the State at the time of takeover of the Institute.
- c) Advice/approval of the Dept. of Expenditure will be sought whether creation of GPF Account for LGBRIMH has to be notified or whether it can be met from the corpus to be created by LGBRIMH,
- d) After obtaining necessary approvals/concurrence from the relevant Ministries, the Ministry of HFW will prepare draft service conditions for absorption of the inherited employees into the LGBRIMH society. The draft service conditions will be circulated to DoP&T, D/o P&PW and DoE for concurrence.

The meeting ended with thanks to and fro the Chair.

ANNEXURE

MENTAL HEALTH ACT, 1987: SECTION 38

Monthly Inspection by Visitors Not less than three Visitors shall, at least once in every month, make a joint inspection of every part of the psychiatric hospital or psychiatric nursing home in respect of which they have been appointed and examined every minor admitted as a voluntary patient under section 17 and, as far as circumstances will permit, every other mentally ill person admitted therein and the order for the admission of, and the medical certificates relating to, every mentally ill person admitted subsequent to the joint inspection immediately preceding, and shall enter in a book kept for that purpose such remarks as they deem appropriate in regard to the management and condition of such hospital or nursing home and of the inpatients thereof:

Provided that the Visitors shall not be entitled to inspect any personal records of an impatient which in the opinion of the medical officer incharge are confidential in nature:

Provided further that if any of the Visitors does not participate in the joint inspection of the psychiatric hospital or psychiatric nursing home in respect of which he was appointed a Visitor for three consecutive months, he shall cease to hold office as such Visitor.

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