



PENSIONERS' RAIL SAMPARK

QUARTERLY BULLETIN OF THE

RAILWAY SENIOR CITIZENS WELFARE SOCIETY (RSCWS)

(Estd. 1991, Regd. No. 1881 - under Societies Registration Act) Website for Pensioners: www.rscws.com

Affiliated to: Bharat Pensioners Samaj (BPS)

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Court Case for higher FMA filed by RSCWS in CAT Chandigarh Notice issued to Government

Court Case for higher FMA (Fixed Medical Allowance) @ Rs. 2000 pm at par with EPFO (instead of Rs.300 pm at present) to CG & Railway Pensioners, has been filed by RSCWS-Vs-UOI, in CAT Chandigarh and Notice has been issued to Respondents to file Reply before the Next Date of Hearing which was fixed on 7th January, 2014. However, the actual hearing may take some more time as the Government had yet not filed its reply.

7TH PAY COMMISSION LIKELY TO BE APPROVED BY THE CABINET SOON

The central government is likely to constitute the 7th Pay Commission for revising the salaries of its over 50 lakh employees before the start of process of next general elections due in May, 2014.

"The Finance Ministry is working out a Cabinet proposal for constitution of the 7th Pay Commission which could be taken up for consideration in the next couple of weeks," a source said.

According to information available, the government's intention to constitute 7th Pay Commission before going for polls is clear as it has made provision of Rs 3.5 crore in the second supplementary demands for grants in this regard which was approved by Parliament in the just concluded Winter Session.

Earlier in September this year, Finance Minister P Chidambaram had announced that Prime Minister Manmohan Singh has approved setting up of the 7th Pay Commission. However, after that announcement, no formal proposal was put up before the Union Cabinet for constitution of the Commission.

The Commission will be mandated to submit its report in two years' and its recommendations would be implemented from January 1, 2016. As per the past practice, the Commission will be headed by a former Supreme Court Judge and its other members would include experts and officials.

SUPREME COURT DISMISSES REVIEW PETITION OF GOVT REG MODIFIED PARITY

The Review Petition filed by the Government was rejected by a Division Bench of the Supreme Court on 12-11-2013, regarding its judgement dated 29th July, 2013, upholding the CAT judgment in OA 655/2010, regarding grant of Modified Parity at the Minimum of each of Pre revised Pay Scale – as per accepted recommendations of the Sixth Pay Commission. However, 3 other SLPs, filed by the Govt., on similar matters, are pending in the Supreme Court and are scheduled to be heard on February 4, 2014.

CONTEMPT PROCEEDINGS ADJOURNED

Hearing in the Contempt Case has been pended to January 15, 2013, by the Full Bench of Principal Bench of CAT New Delhi, against non-implementation of its judgement in OA 655/2010, regarding grant of Modified Parity at the Minimum of each of Pre revised Pay Scale

➤ **THOUSANDS THROUG 58th AGM OF BPS AT SECUNDERABAD (See Report & Resolutions on Page 3 & 4)**

NOTICE- GBM RSCWS

**MEMBERS RSCWS - PLEASE ATTEND WITH YOUR SPOUSE & OTHER RAIL PENSIONERS
ANNUAL GENERAL BODY MEETING (AGM) OF RSCWS, CULTURAL PROGRAMME &
MEDICAL SEMINAR ON "CHEST PROBLEMS & THEIR TREATMENT IN OLD AGE" BY DR ZAFAR IQUABAL
TO BE HELD FROM 10 AM TO 1 PM ON 22ND FEBRUARY, 2014
AT GOVT. MUSEUM & ART GALLERY AUDITORIUM, SECTOR 10 C, CHANDIGARH
(Brunch will be served after the Meeting)**

- President & Secretary General RSCWS

**WE WISH A VERY HAPPY, HEALTHY & PROSPEROUS NEW YEAR
TO ALL OUR MEMBERS & WELL WISHERS**

MINUTES OF GENERAL BODY MEETING & MEDICAL SEMINAR OF RSCWS

HELD ON 19-10-2013 AT GOVT. MUSEUM AUDITORIUM SECTOR 10, CHANDIGARH

1. Shri N. P. Mohan, President RSCWS, presided over the Meeting. 65 Members of RSCWS attended the Meeting. A Medical Seminar was held immediately after the Meeting.

2. Sh. Harchandan Singh SG RSCWS heartily welcomed the Members

3. The meeting started with a cultural programme conducted by Shri HS Sachdeva, where in prayers and songs were sung by Sh T. S. Chawla, H. S. Sachdeva, Sh Bhalla and Smt. Rama Dogra & others.

4. Sh. M. S. Batra, Chairman, RSCWS, inaugurated the Meeting with best wishes for the success of it.

5. Sh. N. P. Mohan, President RSCWS, in his opening speech, welcomed the members. He informed that even after Delhi High court had dismissed the appeal of the Government reg. Modified Parity on 29-4-2013 and the Supreme Court had also dismissed the SLP at the preliminary stage on 29-7-2013 itself, the Gov. had filed a Review Petition - thus dragging the pensioners through further rigors of the Legal battle.

He informed that various sub-committees of RSCWS had been constituted to help in the membership drive and to look after welfare and health care of members. Members were requested to come forward and help the Society in its working.

6. Shri Harchandan Singh, Secretary General, RSCWS, regretted that a) Empanelment of Hospitals in Tricity had been delayed in spite of issue of clear orders by the Railway Board to Railways to recognize all Hospitals empanelled under CGHS. This was causing much inconvenience to Railway employees, Pensioners and their dependents. Fortis Hospital Mohali had now applied for empanelment for 7 Super-specialties by the Railways and hopefully the same will soon be approved by the Railway Board.

b) Issue of Revised PPOs had been extremely delayed. RSCWS is constantly urging the Railways for early issue of the same.

c) RSCWS had formed Sub-Committees to look after the Welfare & Health Care of Members and for better coordination and functioning of the Society.

d) Fixed Medical Allowance (FMA) had further been raised in EPFO from Rs 1200 to Rs. 2000 PM but it remained Rs. 300 PM for Central Govt & Railway Pensioners. RSCWS had again represented the issue to the Govt. Court Case for revision of FMA to Rs. 2000 pm shall soon be filed if the same is not revised early.

7. Inter Action with Members: There was a brief session of inter-action with the Members, wherein queries of the Members were replied to by the Secretary General.

8. Confirmation of Minutes & Constitution Amendments of RSCWS: The Meeting unanimously approved and confirmed the Minutes of the last General Body Meeting – including the Constitutional Amendments adopted in that meeting held on 11-8-2013.

9. Resolution for Filing Court Case for higher FMA: The General Body Meeting of the Railways Senior Citizens Welfare Society, Chandigarh, Panchkula & Mohali held on 19-10-2013 resolved to the effect that the payment of Rs.300/- of Fixed Medical Allowance, is extremely inadequate to meet with the requirement of day to day treatment of the Pensioners and their dependents and as such it was resolved to file a court case for issuance of direction to the respondents to grant the pensioners at least minimum of Rs.1200/- p.m. as Fixed Medical Allowance, as given to employees and pensioners of EPFO.

10. MEDICAL SEMINAR: A Medical Seminar was held on the topic of 'Urinary Problems in old age and their management'. It was addressed by Dr Amit Sharma of Fortis Hospital Mohali, followed by inter-action with the Members. A special appeal was made by the Secretary General to the Members to offer Organ or Body Donation after demise – to help the needy and the suffering humanity. One couple amongst the members who had pledged donation of their body was felicitated

C P SINGH NOMINATED AS TREASURER & K S BHANDARI AS VICE PRESIDENT RSCWS

Executive Committee RSCWS, in its meeting held on 1-12-2013, nominated Sh. C. P. Singh as the Treasurer RSCWS, and accepted the resignation of Shri K. S. Bhandari in view of his ill health.

Executive Committee recorded its high appreciation for the dedicated services of Sh. K. S Bhandari as the Treasurer of the Society for nearly 15 years. EC requested Sh. Bhandari to accept the post of Vice President as a special Case. Sh. Bhandari accepted the request and was nominated as the Vice President.

BHUBNESHWAR BRANCH OF RSCWS ALLOTTED RAILWAY ACCOMMODATION FOR ITS OFFICE

Bhubaneshwar Branch of RSCWS has been allotted Railway accommodation for its office, by DRM Bhubneshwar, as per long pending demand of the Society. The Branch has 150 Railway Pensioners as its Members.

OBITUARY

With deep sorrow we inform the Members about the sad demise of our veteran Vice President RSCWS, Shri Jaswant Singh, on 19th Dec. 2013 after prolonged sickness. Bhog & Antim Ardas was held on 29th Dec. at Gurdwara Charan Kamal, Phase 10 Mohali. May God Almighty grant peace to the departed soul & solace to the bereaved family

– President & Secretary General, RSCWS



THOUSANDS THROG 58th AGM OF BPS AT SECUNDERABAD

Over 1000 pensioners from Hyderabad, Secunderabad & vicinity along with 876 delegates from different parts of the country thronged the sprawling premises of Keyes high School Secunderabad to participate in the 58th AGM of Bharat Pensioners Samaj (BPS) which was held on 17.11.201.

Chief Guest Sh K.R.Gangadharan; President International Federation on Ageing(IFA), Canada, in his inaugural speech while reiterating IFA's support to BPS at National & International levels, apprised the audience of various provisions at National and International level for the care of the Elderly People. He talked about "The National Policy on older persons,1999", which admits that, "concerns of Elderly are National concerns and they will not live unprotected, ignored, or marginalized". That, the state will extend support for Financial Security, Health Care, Shelter, Welfare and other needs of Older Persons. However, he was sore about poor implementation progress of NPOP 1999 & inadequate health care facilities for the elderly. He pointed out that, the older people constitute more than 12% of the Electoral of the Country & as such could not be ignored.

Special Guest of Honour Sri Shiva Gopal Mishra, General Secretary, AIRF.(All India Railwaymen's Federation) - While appreciating BPS& assuring all out support to it, said, "BPS has a larger platform, it should strive to bring all pensioners under one umbrella".Referring to Department wise pensioners' organizations, he said that there should be only one community kitchen & not separate kitchens. He uttered, "*Kuch Lena ho to ladna hoga, ek ho kar chalna hoga*". He talked about the plight of the Railwaymen, while in service, as well as, when they retire about non implementation of smart card facility for RELHS beneficiaries. He criticized passing of PFRDA (NPS) Bill applicable to those entered service on or after 01.01.2004 , explained its menacing effect on would be Pensioners and their Family members & the likelihood of its extension to existing pensioners also. .He called upon the Pensioners' Organizations of the country to get united to resist. Mishra said,"Pension is a social security tool and we all should fight for its retention in its pre 01.01.2004 form". He also called for eradication of corruption and bribery in the Administration.

President AISSCCON D.N.Chake, President AIRROA (Secunderabad) representatives of AIFPA (Chennai),NFRP (Palghat),A P State Govt. Retired Employees Association, EPS -95 who expressed their support to BPS & resolve to fight Common issues jointly & severally.

President AIRROA P.S.Venkataraman said that BPS as an umbrella organization for several associations representing many departments is doing an excellent service for the welfare of Govt. Pensioners. Sri Venkataraman requested BPS Secretary General to help Railway Pensioners in 2 pending matters below;

i) RELHS beneficiaries were to be issued Smart Health cards by Railway Administration as per Railway Board's letter issued more than a year ago. With this card in Emergencies RELHS beneficiaries can get admitted directly into approved private hospitals without going through Rly hospitals and thereby saving valuable time which is crucial for life saving. So far these cards have not been issued by Railways, the reason being no corporate hospital is interested in accepting the terms offered by Railways. Issue of this card is to be expedited.

ii) Those Group B officers who retired prior to 1996 are given minimum pension as per modified priority with Grade pay of Rs.4200 only with PB-2, where as those Gr.B officers who are serving are given Grade pay of Rs.4800 .This needs to be redressed, as this affects a large number of old/family Pensioners.

AGM empowered Secy. Genl. to constitute a coordinating committee to draft memorandum to 7th CPC and for its follow up action. AGM also empowered Secy. Genl to co-opt suitable persons to strengthen BPS HQ.

A Special Resolution of Demands was passed for Staging a DHARNA, on 24th February, 2014 "at Jantar Mantar", New Delhi to support the resolutions adopted by 58th AGM

Sh. Harchandan Singh Vice President, BPS, called upon all the Pensioners and their various organizations to join hand under the banner of Bharat Pensioners Samaj – as Pensioners unity is the need of the hour and because BPS is the oldest and the largest organization representing the Pensioners. Sh. Singh asserted that the spirit of Nakra's Judgement must be revived at all cost as it established the right of the Pensioners for the first time and the Supreme Court had clearly laid down that "*Pension is not a bounty -- a grace – or an Ex-gratia payment, but a payment for past services rendered*". He called upon the Pensioners all over India to join the Dharna in large numbers on 24th February, 2014, at Jantar Mantar, New Delhi, and show their unity and strength for the common cause. (In pic. Sh. Harchandan Singh, addressing BPS AGM) >



**BHARAT PENSIONERS' SAMAJ WILL
STAGE A MASSIVE DHARNA AT JANTAR MANTAR, NEW DELHI,
ON 24.02.2014, FROM 10:00 AM TO 3:00 PM,
IN SUPPORT OF OUTSTANDING DEMANDS OF PENSIONERS.
ALL PENSIONERS, AFFILIATES AND MEMBERS ARE REQUESTED TO
PARTICIPATE IN LARGE NUMBERS & MAKE IT A GREAT SUCCESS.**

Shyam Sunder, President, BPS

**RESOLUTIONS ADOPTED BY THE 58TH AGM OF BHARAT PENSIONERS SAMAJ
HELD AT SECUNDERABAD ON 17.11.2013**

1. Solidarity & sympathies with Phailan affected people of AP & Odisha, and congratulations to Scientists and Technicians of ISRO for successful launch of India's first Inter-planetary satellite "*The Mars Orbiter space Craft*".
2. Full Parity in Pension in the same Homogeneous group of Pensioners,
3. Revision of Pension & Family pension to 70% & 50% respectively of the last Pay drawn
4. Extension of same fitment benefit as implemented to serving employees from 1.1.2006 to all pre 1.1.2006 pensioners and family pensioners;
5. Revision of Pension every 5 years:
6. Extension of VI CPC's new benefits to past pensioners;
7. Additional age related Pension 'every five years' after the age of 60 years
8. Additional pension for qualifying service above 20 years;
9. Enhancement of Minimum Guaranteed pension:
10. Implementation of modified parity to pre 1.1.2006 central government pensioners retrospectively w.e.f., 1.1.2006 as per Hon'ble Principal bench, CAT, New Delhi's Order dated 1.11.2011
11. Merger of DR whenever it goes above 50%:
12. Interim Relief to pensioners and family pensioners and ex-gratia beneficiaries.
13. Carrying forward the parity principle enunciated by V CPC;
14. Fitment Benefit be raised to 50%:
15. Enhanced family pension for 10 years even in cases of death of the pensioner after retirement;
16. Restoration of commuted value of pension in 12 years
17. Revision of Pensionary benefits to pensioners born on 1.1.1946/1938/1928 owing to their retirements on 31.12.2005/1955/1985 – as they were unjustly denied the benefit of all Pay Commissions so far.
18. Issue of revised PPOs to pre 1.1.2006 pensioners and family pensioners as per VI CPC;
19. Pension should be net of Income Tax: Purchase value of pension gets reduced day by day
20. Withdraw new pension scheme introduced w.e.f., 1.1.2004.
21. Roll-back pension fund regulatory and development authority bill.
22. Medical facilities: Implementation of judgments of Supreme Court
23. Increase FMA (Fixed Medical Allowance) to Rs2000 pm
24. Issue of smart cards to RELHS beneficiaries – Implantation of Orders of Railway Board
25. Extension of RELHS & change in Service criteria for eligibility;
26. Extension of CS(MA) Rules, 1944 to central government pensioners residing outside CGHS area: 27.CGHS coverage for all Postal & KVS Pensioners:
28. Extension of constant attendant allowance to all pensioners and family pensioners;
29. Liberalization of retirement complimentary as well as widow pass rules;
30. Reduction in period of service to 10 years for entitlement of retirement complimentary passes;
31. Revision of ex-gratia rates of pre 1.1.86 CPF/ SRPF© beneficiaries and their families;
32. EPS 95 be modified to remove Pensionable Salary limit of Rs 6500, minimum pension equal to 50% of Central Govt. minimum Salary and free health care facilities to all EPS 95 pensioners & their dependents.
33. Extension of OSD canteen facilities to defence civilian pensioners:
34. Control abnormal price rise
35. Improvement of Retiral Benefits of Retired rural medical practitioners, of Andhra Pradesh
36. Improvement of Retiral Benefits of Chhattisgarh Pensioners.
37. Improvement of Functioning of SCOVA
38. Restoration of Pension, revision of Pensions, payment of all attendant benefits on full pension, to treat at par, extend all attendant benefits to PSU absorbee Pensioners as per Supreme Court Judgment.
39. Festival advance to pensioners.
40. Funeral grant to Pensioners – as in many States.
41. House rent and Transport allowances to pensioners;
42. Childrens' Educational Allowance & Hostel subsidy to the eligible children of retired employees
43. Ex-gratia once a year to all railway pensioners in lieu of productivity-linked bonus.
44. Abolition of Nuclear weapons.
45. AGM resolved to Stage a massive DHARNA, on 24th February, 2014 "at "Jantar Mantar", New Delhi to support above resolutions of Demands of the Pensioners at large & to high light the most deplorable condition of lakhs of "Pensioners" under EPS – 95 .

LEGAL FORUM**GRATUITY CANNOT BE WITHHELD OR FORFEITED IN DISCIPLINARY OR CRIMINAL CASES OR NON VACATION OF QUARTER – JUDGMENTS OF VARIOUS COURTS CITED**

1. **GRATUITY, AS PAYABLE TO AN EMPLOYEE, CAN BE FORFEITED ONLY WHEN HE IS DISMISSED FROM SERVICE FOR WILLFUL OMISSION AND RIOTOUS AND DISORDERLY BEHAVIOUR INVOLVING MORAL TURPITUDE etc. as stipulated under section 4(6) of the Payment of Gratuity Act, hence, withholding of gratuity by the employer of an employee retired from service will not be justified.** *Texmaco Ltd. v. Shri Ram Dhan*, (1993) 1 LLN 129: (1992) 2 CLR 256: (1993) III LLJ (Supp) 20B: 1992 LLR 369: 1992(65) FLR 742 (Del HC).

2. **Withholding of gratuity of an employee compulsorily retired from service will not be justified.** *Brundaban Sahu v. a.s.R.T. Corp. Ltd.*, (1993) 1 LLN 129: (1992) 2 CLR 256: (1993) III LLJ (Supp) 20B: 1992 LLR 696 (Ori HC).

3. **Gratuity of an employee cannot be withheld even if disciplinary proceeding is pending against him.** *Gopal Krishna v. Kamataka Soaps & Detergents Ltd.*, 1996 LLR 306 (Ker HC).

4. **Gratuity of an employee cannot be withheld even if he fails to surrender employer's land.** > *Travancore Plywood Ind. Ltd. v. Regional Joint Labour Commissioner*, (1996) II LLJ 85: 1996 LLR 397 (Ker HC).

5. □ **Gratuity of an employee dismissed for willful slowing down of work cannot be withheld since there is no such bar in the Act.** *Permolli Wallace Ltd. Bhopal v. State of Madhya Pradesh*, (1996) 88 FJR 652: (1996) II LLJ 515: 1996 LLR 414 (MP HC).

6. **Gratuity of an employee cannot be withheld by an employer.** *Lt. Col. A. V. Tiwari (Retd.) v. The Secretary Ministry of Welfare, Government of India*, 1996 LLR 1092 (AU HC).

7. **Compensation of Rs. 50,000 will be payable for withholding gratuity for three years.** *Mohammad Zaheeruddin Siddiqui v. Executive Council, AM.U.*, 2000 LLR 458 (SC).

8. **Gratuity of an employee can be withheld only in case of his dismissal and not otherwise.** Page 2 of 6 *KC. Mathew v. Plantation Corporation of Kerala, Ltd.*, 2000 LIC 1519: (2000) LIC 1519: 2000 LLR 1280 (Ker HC).

9. **No deductions can be made from gratuity except shortage or assessed misappropriation.** *P.D. Chiyanna v. Kamataka Agro Ind. Corp Ltd. Bangalore*, 2001 LIC 19: (2001) 85 FLR 814: 2001 (III) CLR 846: 2001 LLR 250 (Kam HC).

10. **Loss of property has to be ascertained (ii) Disorderly conduct must be supported by evidence of activities creating misbehaviour to damage machinery, urniture etc. while forfeiting the gratuity of an employee.** *Bapalswamy (since dead) by LRs v. Management of Usha Martin Industries*, 2001 (II) LLJ 1060 (Kam HC).

11. **Gratuity of an employee will not be forfeited on subsistence allowance.** *PD. Chiyanna v. Kamataka Agro Industries Corporation Ltd.*, (2001) LIC 19: (2001) 85 FLR 814: 2001 LLR 250 (Kam HC).

12. **Deduction of gratuity with employee's consent cannot be challenged.** *Kuttan Pillai v. State of Kerala*, (2001) II CLR 900: (2001) 3 LLN 618: (2002) 92 FLR 387: 2001 LLR 1145 (Ker HC).

13. **A notice must be issued to the employee before forfeiting his gratuity.** *J.P. Micheal D'Souza v. Appellate Authority under Payment of Gratuity Act, Bangalore*, 2002 LLR 7 (Kam HC).

14. **Mere pendency of criminal case shall not disentitle an employee from receiving Gratuity.** *Rajendra Kumar Nangia v. Rashtriya Chemicals & Fertilizers Ltd.*, (2002) 1 LLJ 648: 2002 LLR 266 (Born HC).

15. **In the absence of specific order against an employee, his gratuity cannot be forfeited.** *Ahmedabad Municipal Corporation v. Elivina Samuelbhai Christian*, (2002) 1 LLJ 342: 2002 LLR 269 (Guj HC).

16. **Gratuity of an employee cannot be withheld for non- vacation of staff quarter.** *Beer Bala Gupta v. 15- Adl. Sessions judge, Meerut*, 2002 LLR 619 (All HC). *Dhanwant Rai v. Delhi Transport Corporatinn*, 2005 LLR (SN) 302 (Del HC).

17. **Gratuity being a statutory right payable as a retiral benefit after serving an employer for a long period can not be taken away by an agreement between the parties which cannot be reduced but could be enhanced.** *Y.R. Shenoy v. Syndicate Bank*, (2003) II LLJ 977: 2003 LLR 615: 2003 (97) FLR 812 (Kam HC).

(See citations of more judgments on the subject on our Website www.rscws.com)

RAILWAY PENSIONERS / FAMILY PENSIONERS**BE ACTIVE MEMBERS OF RSCWS****PAY YOUR SUBSCRIPTION FOR RSCWS EARLY,****ANNUAL SUBSCRIPTION RS.300 PA, LIFE MEMBERSHIP RS.2500***(INCLUDING THAT FOR PENSIONERS RAIL SAMPARK – QUARTERLY JOURNAL OF RSCWS)***DONATE LIBERALLY TO LEGAL-CUM-STRUGGLE FUND TO FIGHT FOR THE CAUSE OF PENSIONERS****DONATIONS & SUBSCRIPTIONS MAY BE SENT BY LOCAL OR AT PAR CHEQUES OR DEMAND DRAFT OR M.O.****& THE SAME MAY BE SENT OR PAID IN CASH WITH YOUR FULL DETAILS IN THE MEMBERSHIP FORM TO –****SH. C. P. SINGH, TREASURER, RSCWS, G-210, RAIL VIHAR, PANCHKULA, (CHANDIGARH)-1600-- (PH. 09888054477).****- PRESIDENT & SECRETARY GENERAL, RSCWS****PENSIONERS & SENIOR CITIZENS !****VISIT OUR FREE & INFORMATIVE WEBSITE [HTTP://WWW.RSCWS.COM](http://www.rscws.com) REGULARLY****FOR ADMINISTRATIVE ORDERS, INFORMATION OF ACTIVITIES OF RSCWS,****COPIES OF “PENSIONERS RAIL SAMPARK” & OTHER MULTIFARIOUS FEATURES OF INTEREST**

DEFICIENT PATIENT CARE DECREED BY SUPREME COURT

Wrong diagnosis, wrong drugs, wrong dosage, drugs given at wrong frequency, missed dosages and administering drugs which interact with each other are some of the major medical errors which, at times, prove fatal.

The recent Supreme Court judgment in the Anuradha Saha case is a landmark verdict that has the potential to significantly improve healthcare delivery. It awarded a hitherto unheard of sum of Rs. 5.96 crore as compensation to Dr. Kunal Saha, husband of Anuradha, who died as a result of medical negligence in 1998.

The judgment is significant for two reasons. First, it shows that the highest court in the land takes medical negligence seriously and is prepared to levy punitive fines for serious cases resulting in loss of life. This would surely embolden the lower courts also to levy stiffer penalties. Second, the very strong signal it sends out to the medical community on the need to reform its ways and pay more attention to patient safety. More such judgments will surely force the healthcare community to at least start adopting the much-needed patient safety measures.

According to statistics provided by the American Medical Association, medical errors contribute to between 40,000 and 80,000 deaths each year in the United States. Other reports put the figure at as high as 1,80,000. Medical errors are believed to be directly and solely responsible for over 7,000 deaths each year. Medical errors are emerging among the top 20 causes of death in the U.S.

If this is the situation in the U.S., where there are clear and defined standards of care and protocols to be followed and where there is a system of medical audit in place, one can well imagine what the situation is like in India. There are no estimates available of the number of patients being impacted by medical errors and we do not even have a system in place of measure them on a country wide basis. Part of the problem is the fear of what might emerge should we start measuring and no one, is interested in opening a Pandora's box.

Medication errors: So where exactly do medical errors occur? Well, for starters from the diagnoses. Very often the diagnosis is incorrect or delayed with serious consequences. The documentation of what's really wrong with you may also contain errors. The notes may carry wrong information which may be acted on by another doctor, leading to serious consequences. Medication errors are a major component of medical errors. The wrong drug being administered, wrong dosage frequency, dosages being missed out, drugs which interact with each other being given, drugs to which the patient is allergic being administered, the list is endless.

Then we have the "never" events, those that should never ever occur, like patients being operated on the wrong eye or limb; sponges, scissors etc., being left in the body during surgery; food being pushed down the airway tube and medical equipment that doesn't work.

Hospital-acquired infections due to a lack of proper infection control systems are another major reason for adverse events. Hospital-acquired infections are believed to affect 5-10% of all patients admitted to hospitals in India but this number may be as high as 25% among patients admitted to Intensive Care-units. Hospital infections occur in the best of healthcare facilities in the world but to have the infection occur when all precautions are taken is one thing and to have them occur because infection control measures are not followed is quite another.

The complete lack of coordination among the various specialists treating patients is a major reason for medical errors. It is very rare for all specialists to sit together and review the treatment plan and this not being done is often disastrous. The Joint Commission International says, in its annual report on Quality and Safety, that lack of communication between healthcare providers contributed to more than half of all adverse events.

There are enough systems available to enhance patient safety and minimize errors. Simple software applications can alert doctors about wrong dosage, drug-drug interactions, two different brand names of the same drug being administered, etc., but even India's top hospitals do not use them though they cost very little. The healthcare industry in India will not adopt such systems as they do not lead to an increase in revenue for the hospital or doctor though there is an overwhelming volume of evidence to show that they reduce errors and improve patient outcomes. It is imperative for the government to insist that such safety systems be used.

In the absence of any government intervention, it is judgments like these that will introduce the fear factor in the medical community and force it to adopt patient safety systems. The country owes a debt of gratitude to Dr. Kunal Saha. His relentless fight for more than 15 years has opened up the possibility of better healthcare for millions. If that happens Anuradha Saha would not have died in vain.

- *Courtesy: Pensioners' Coordinator*

EMPANELMENT OF FORTIS HOSPITAL MOHALI APPROVED, CONTRACT SIGNED

AGREEMENT HAS BEEN SIGNED BY NR FOR EMPANELMENT OF FORTIS HOSPITAL MOHALI FOR NEPHROLOGY (KIDNEY), UROLOGY, CRITICAL MEDICINE & TRAUMA ETC. ON BILLING SYSTEM FOR RAILWAY EMPLOYEES, PENSIONERS & THEIR FAMILIES IN AMBALA DIVISION AS PER DETAILS PUBLISHED JULY-SEPT 2013 ISSUE OF PRS
NEWS FLASH: EXTENSION OF FORTIS FOR CARDIOLOGY HAS ALSO SINCE BEEN APPROVED.

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| • Critical Care | • Gynaecology & Obstetrics | • Neonatology | • Pulmonology |
| • Dentistry | • General Surgery | • Nephrology | • Radiology & Imaging |
| • Dermatology | • Haematology | • Nuclear Medicine | • Rheumatology |
| • Dietetics & Nutrition | • Internal Medicine | • Ophthalmology | • Transfusion Medicine Urology |
| • Emergency Medicine | • Interventional Radiology | • Paediatrics | • Vascular Surgery |

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Sector 62, Phase-VIII, Mohali - 160 062. Tel: 0172-4692222. Fax: 0172-4692221. Email: contactus.mohali@fortishealthcare.com

GOVT / RAILWAY BOARD'S ORDERS**RBI Notification: Reg: TDS: Banks to ensure Timely Issue of TDS Certificate to Customers**

RBI/2013-14/361, DBOD.No.Leg.BC.65/09.07.005/2013-14 Dt : 06.11.2013 to All Scheduled Commercial Banks, Timely Issue of TDS Certificate to Customers

It has been brought to our notice that, some banks are not providing TDS Certificate in Form 16A to their customers in time, causing inconvenience to customers in filing income-tax returns timely.

2. The matter has been examined and with a view to protect interest of the depositors and for rendering better customer service, banks are advised to provide to their customers from whose income tax has been deducted at source, TDS Certificate in Form 16A. Banks are advised to put in place systems that will enable them to provide Form 16A to the customers within the time-frame prescribed under the Income Tax Rules. Banks should avoid waiting till the last moment.

3. This advice is issued under Section 36 (1) (a) of the Banking Regulation Act, 1949 (10 of 1949).

ADVANCE CORRECTION SLIP FOR AMENDMENT OF PARA ^\$* OF IRMM-2000

The Powers of the GM/AGM/DRM for sanction of Medical Reimbursement Claim for Treatment taken in an emergency is as following:

DRMs: i) To sanction reimbursement upto Rs.25000 per case, without any annual ceiling limit, for treatment undertaken in emergency in private non-recognised Hospitals.

ii) To sanction reimbursement upto Rs.50000 per case, for treatment undertaken in emergency in Government including Autonomous Body Hospitals, without any annual ceiling limit.

AGMs: To sanction Medical reimbursement up to Rs. 4 lakhs per case, for treatment taken in non-recognised private Hospitals and without any limit for Govt Hospitals including Autonomous Body Hospitals in emergency.

GMs: To sanction Medical Reimbursement up to Rs. 5 lakhs for treatment taken in non-recognised private Hospitals, and without any limit for Government Hospitals including Autonomous Body Hospitals in emergency.

Copy of RB letter No. 2005/H/6-4/Policy Dated 10-10-2013

Sub: Enhancement of Powers at Zonal Level for PROCUREMENT OF HEARING AID

The issue of further delegation of powers at the Zonal level for procurement of Hearing Aid for Railway Beneficiary has been engaging attention of the Ministry of railways for some time. After careful consideration in the matter, the following cost ceiling (inclusive of all taxes and Vat) for procurement of various types of hearing aids for one ear has been decided:-

Body worn/Pocket type	- Rs.2500
Analogue BTE	- Rs.7000
Digital BTE	- Rs.20000
ITC/CIC	- Rs.25000

For procurement and supply of Hearing Aid, the following procedure is laid down:

I) Beneficiaries covered under Railway Medical Attendance and Treatment Rules shall be eligible to obtain hearing aid after the same has been recommended by a Railway/Government ENT Specialist on the basis of Audiometric and Audio logical assessment. Ent Specialist shall specify the type of hearing aid most suited for the beneficiary.

II) If required Hearing Aids may be replaced after a period of 5 years on the basis of condemnation certificate issued by an expert and on approval of a Railway ENT/Government Ent Surgeon.

III) Cost of Repair/maintenance of Hearing Aid (inclusive of taxes).

The cost of Repair/maintenance/Battery etc should be borne by the beneficiary.

IV) Procurement and supply of Hearing Aid:

i) Hearing Aid shall be procured by the Railway Hospital

ii) Hearing Aid will be procured from an Agency which agree with the following conditions:

a) It has facility for repair and replacement

b) It is ready to give 3 years warranty

c) The Authorised Dealer ha facility to prepare flexible ear molds.

d) That the authorized dealer is ready to fit and modify the hearing Aid as per patient's requirement.

e) The dealer should be ready to give Hearing Aid Trials upto patient's satisfaction.

V) Reimbursement of Hearing Aid shall not be exceeded to.

It is also advised that at the beginning of every financial year, CMD of the zone in consultation with Finance of the Railways may fix the rates (not exceeding the ceiling limits prescribed as per Para 1 above) with appropriate agencies for different types of Hearing Aids, commonly prescribed for the whole year so that unnecessary paper work may be avoided in all cases. This issues with the concurrence of Finance Directorate and approval of the competent Authority in the Ministry of Railways.

PRS: 10-12, 2013

PRINTED MATTER

If undelivered, please return to:

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