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State govt to deemed varsities: Share 50% of medical, dental seats

TIMES NEWS NETWORK

Bengaluru: The government on Wednesday urged deemed universities in Karnataka to share at least 50% of their medical and dental seats with it. At a meeting with representatives of deemed universities, the government said Kannadigas should be given an opportunity to study in these universities from the next academic year.

However, the eight deemed universities, which hold 1,630 medical and 630 dental seats, made it clear to the government that the matter has to be taken up with the Directorate General Of Health Services (DGHS) as the central government agency is the nodal authority to decide seat allocation.

Medical education minister DK Shivakumar said: "From the time these eight universities were declared deemed, there has been no seat-sharing agreement with them. We have now requested them to share 50% of the seats for Karnataka students. The deemed universities can either hand over the seats to the Karnataka Examinations Authority (KEA) or themselves hold counselling for the seats."

Shivakumar later added that most universities acceded and gave a positive response. "However, they said that DGHS has to be convinced. We will officially request the central government agency to allow the seat-sharing process," the minister said.

Shivakumar said while two of the eight universities had opposed the suggestion, he was certain of convincing them.

"While these universities have availed all concessions and facilities provided to them by the state, there has never been any agreement on seat sharing. Further, considering these universities are in



KARNATAKA'S QUOTA

Fee hike talks on

On private medical colleges demanding a fee hike, Shivakumar said the government wants a practical solution for the matter. He said the demand for 30% hike in fees for MBBS course is a stumbling block and that feelers have been sent to private institutions stating they'd have to negotiate fee hike with the government. "We have asked for a practical resolution to the fee hike issue. Talks are in progress and we will try to convince them," he said.

Karnataka, the responsibility of having home-grown talent fill up vacancies in the field of medicine from these universities lies with us. We will first request the universities and the DGHS and later, if required, consider legal options," he pointed out.

Shivakumar said it may not be possible for deemed universities to part with the seats for the current academic year.

It is believed the government's seat-sharing demand also stems from the fact that the state has lost 2,410 MBBS seats after the Medical Council of India (MCI) rejected permission for new medical colleges and renewal of existing ones in the state. Shivakumar said the government will move court to restore the seats for Karnataka.

Too Few Doctors

India must pace up supply of medical practitioners, both by traditional and innovative means

The 2018 National Health Profile highlights major troubles dogging the sector, like low public expenditure on health and poor government doctor-patient ratio in India. The first dovetails into the second. Public spending on health is only a little over 1% of GDP, which translates into inadequate infrastructure including medical education. A government allopathic doctor therefore ends up serving an average population of 11,082, 11 times the WHO recommended 1:1,000 doctor-population ratio. The situation is worse in poorer states like Bihar where one doctor has to suffice for as many as 28,391 people.

Against nearly 1.2 lakh government allopaths, Medical Council of India has over 10.2 lakh registered practitioners on its rolls. Last year, government informed Parliament that India's doctor-population ratio could be 1:1,612 assuming there were 8.18 lakh active allopathic doctors, across the private and public sectors. This still translates into a whopping shortage of nearly five lakh doctors to meet WHO norms, not to mention that this shortfall grows every year with growing population. Of course 70% of India still lives in rural areas and these aggregate numbers can disguise the reality of a severe urban-rural imbalance in supply of doctors.



A fallout of this shortage is that quacks step in to fill the breach. A 2016 WHO report found that nearly one-third of those found practising as allopaths did not have medical degrees. It's true that of the 67,000 odd MBBS seats in India, nearly 13,000 have been added since 2014. But this increased intake is not adequate. Supply needs to be paced up. On the upside there have been some important public health gains, such as a 22% reduction in maternal mortality rates since 2013 and the steady expansion of the "universal" screening programme for non-communicable diseases like diabetes, hypertension and common cancers.

The Ayushman Bharat scheme, offering free secondary and tertiary care, may prove to be a gamechanger – but here too many poor and rural patients will miss out on its benefits unless the "last-mile" shortage of doctors is fixed. Out of the box suggestions like converting district hospitals into medical nursing and paramedical schools merit consideration. The expansion of India's training and licensing architecture could also include new career progression paths for nurses, whereby they could shoulder some of the healthcare delivery that is currently the exclusive domain of doctors.

Want to study MBBS? Then shell out ₹1.2 cr, says Lucknow med college

SUMI SUKANYA DUTTA @ New Delhi

IN what could be a record of sorts, a private medical college in Lucknow, Uttar Pradesh, is charging students a whopping ₹1.2 crore for each MBBS seat.

The fee-structure at Lucknow's Era Medical College for the 2018-19 academic session, which was widely shared on social media, has led to outrage, with many saying the government is allow-

ing unabashed sale of medical seats in a country crippled with acute shortage of doctors.

The first-year fee, at ₹30 lakh, is the highest, and the fifth-year, at ₹15 lakh, is the least expensive. The total adds up to ₹1,20,97,000, of which the hostel fee is ₹4 lakh per year, or over ₹33,000 a month.

The principal of the college, MMA Faridi, was not available for comment despite attempts to reach him, but a senior official of



the institute said the fee-structure had been finalised for half of the 150 seats available under management and NRI quota. "NEET is now mandatory for admission to medical colleges, so only those who clear the cut-off mark get in," the official added.

The exorbitant fee at the college, which was recognised by the Medical Council of India in 2006, prompted several angry responses. "Unregulated private

invasion in medical education has ruined India's merit system. If only the rich and influential become doctors, they cannot be expected to serve humanity," said Harjit Singh Bhatti, president of Resident Doctors' Association at AIIMS, Delhi.

Former Union health and family welfare secretary K Sujatha Rao tweeted to say that the issue was "very serious". "The implications are not good for India. We

cannot afford medical education to be for the rich only."

Arun Mitra, of the Association of Doctors for Ethical Healthcare, told *TNIE* that private colleges have been known to charge as much as ₹70-75 lakh for each MBBS seat, but a figure of ₹1.2 crore is "outrageous". "I have heard of doctors having to pay ₹2-2.5 crore for PG seats, but this is a new high, or rather, a new low," he said.

CBSE moves apex court against extra marks order

Candidates not allowed to write NEET on time

NEW DELHI, DHNS: The CBSE on Wednesday approached the Supreme Court, challenging directions issued by the Bombay High Court to give additional proportionate marks to a group of candidates for 30 minutes loss of time suffered by them due to the fault of invigilator in NEET UG 2018.

A vacation bench of Justices S Abdul Nazeer and Indu Malhotra put the special leave petition filed by the Central Board of Secondary Education (CBSE) for consideration on Thursday on a plea for urgent hearing.

The CBSE, which conducted the National Eligibility-cum-Entrance Test (NEET) on May 6 for admission to MBBS course, challenged the validity of the high court's judgement of June 15.

Acting on a writ petition filed by Vaishnavi Sandeep Maniyar, a division bench of the high court directed the CBSE to apply the formula suggested by the Supreme

Court in the judgement in 'Disha Panchal' case (Common Law Admission Test 2018) and award additional proportionate marks to 24 candidates who appeared in the test in Nagpur's Adarsh Sanskar Vidyalaya but were not allowed by invigilator to write the examinations for stipulated three hours.

The petitioner claimed the invigilator allowed them to write exams from 10.30 am only, instead of the scheduled 10 am.

The top court in the CLAT case directed for applying normalisation formula devised on the basis of answering capacity of the candidates, aspiring for admission to National Law Universities, and allot additional marks in view of technical glitches faced by them.

In the instant case, the high court had directed the CBSE to revise the marks of candidates, release corrected marksheets by June 22 and consider them for the second round of counselling for admission to MBBS course.

ರಾಜ್ಯದ ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ಶೇ.50 ವೈದ್ಯ ಸೀಟುಗಳು

ಕೇಂದ್ರಕ್ಕೆ ಶೀಘ್ರವೇ ಪತ್ರ ಬರೆಯಲು ತೀರ್ಮಾನ

ಸಂ.ಕ.ಸಮಾಚಾರ ಬೆಂಗಳೂರು

ರಾಜ್ಯದಲ್ಲಿನ 8 ಡೀಮ್ಡ್ ವಿಶ್ವವಿದ್ಯಾಲಯಗಳ ಶೇ 50 ವೈದ್ಯ ಸೀಟುಗಳನ್ನು ಕರ್ನಾಟಕದ ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ಮೀಸಲಿಡಬೇಕೆಂದು ರಾಜ್ಯಸರ್ಕಾರ ಕೇಂದ್ರವನ್ನು ಒತ್ತಾಯಿಸಿದೆ.

ಈ ಸಂಬಂಧ ಕೇಂದ್ರದ ಸಾರ್ವತ್ರಿಕ ಆರೋಗ್ಯ ವಿಜ್ಞಾನ ನಿರ್ದೇಶನಾಲಯಕ್ಕೆ ಅತಿಶೀಘ್ರದಲ್ಲೇ ಪತ್ರ ಬರೆಯಲು ವೈದ್ಯ ಶಿಕ್ಷಣ ಇಲಾಖೆ ನಿರ್ಧರಿಸಿದೆ.

ವೈದ್ಯ ಶಿಕ್ಷಣ ಸಚಿವ ಡಿ.ಕೆ.ಶಿವಕುಮಾರ್ ಬುಧವಾರ ಡೀಮ್ಡ್ ವಿಶ್ವವಿದ್ಯಾಲಯಗಳ ಪ್ರಮುಖರೊಂದಿಗೆ ಸಭೆ ನಡೆಸಿದ ಸಂದರ್ಭದಲ್ಲಿ ಮೇಲಿನ ತೀರ್ಮಾನಕ್ಕೆ ಬರಲಾಯಿತು.

8 ಡೀಮ್ಡ್ ವಿವಿಗಳಲ್ಲಿ 1630 ವೈದ್ಯ ಹಾಗೂ 640 ದಂತ ವೈದ್ಯ ಸೀಟುಗಳಿದ್ದರೂ ಪ್ರತಿ ವರ್ಷ ರಾಜ್ಯದ 100 ವಿದ್ಯಾರ್ಥಿಗಳಿಗೂ ಅವಕಾಶ ಸಿಗುತ್ತಿಲ್ಲ. ಈ ಹಿನ್ನೆಲೆಯಲ್ಲಿ ಡೀಮ್ಡ್ ವಿವಿ ಪ್ರಮುಖರ ಜೊತೆ ಸಭೆ ಕರೆದು ಅವರ ಒಪ್ಪಿಗೆ ಪಡೆಯುವ ಪ್ರಯತ್ನ ಮಾಡಲಾಗಿದೆ

ಶುಲ್ಕ ನಿಗದಿಗೆ ಹಿನ್ನೆಡೆ

ಡೀಮ್ಡ್ ವಿವಿ ಆಡಳಿತ ಮಂಡಳಿಗಳು ವೈದ್ಯ ಸೀಟುಗಳ ಶುಲ್ಕ ಏರಿಕೆಗೆ ಬೇಡಿಕೆ ಇಟ್ಟರೂ ಅದನ್ನು ಸರ್ಕಾರ ಒಪ್ಪಿಲ್ಲ. ಹೀಗಾಗಿ ಶುಲ್ಕ ನಿಗದಿಗಾಗಿ ಕೆಲವು ಡೀಮ್ಡ್ ವಿವಿಗಳ ಪ್ರಮುಖರು ಮೇಲ್ಮನವಿ ಹೋಗುತ್ತೇವೆಂದಿದ್ದಾರೆ. ಕೊಪ್ಪಳ ಕಾಲೇಜು ಪ್ರವೇಶಕ್ಕೆ ಈ ಸಾಲಿನಲ್ಲಿ ಎಂಸಿಐ ಅವಕಾಶ ನೀಡದೇ ಇರುವುದರ ವಿರುದ್ಧ ನ್ಯಾಯಾಲಯದ ಮೆಟ್ಟಿಲೇರಿದ್ದೇವೆ ಎಂದರು.

ಎಂದರು.

6 ಡೀಮ್ಡ್ ವಿವಿಗಳ ಪ್ರಮುಖರು ಸರ್ಕಾರದ ಬೇಡಿಕೆಗೆ ಸಹಮತ ಸೂಚಿಸಿದ್ದಾರೆ. ಆದರೆ ಈ ವಿವಿಗಳಿಗೆ ನೇರವಾಗಿ ಸೀಟು ಕೊಡಲು ಬರುವುದಿಲ್ಲ. ಹೀಗಾಗಿ ಕೇಂದ್ರ ಸರ್ಕಾರವನ್ನು ಒಪ್ಪಿಸಿ ಎಂದಿದ್ದಾರೆ. ಆದ-

್ದರಿಂದ ಅತಿಶೀಘ್ರದಲ್ಲೇ ಕೇಂದ್ರಕ್ಕೆ ಪತ್ರ ಬರೆಯುತ್ತಿದ್ದೇವೆ. ಈ ಶೈಕ್ಷಣಿಕ ಸಾಲಿನಲ್ಲೇ ಶೇ.50 ರಷ್ಟು ಸೀಟು ಸಿಗಲು ಪ್ರಯತ್ನಿಸುತ್ತೇವೆ. ಹಾಗೇನಾದರೂ ಸಾಧ್ಯವಾಗದಿದ್ದರೆ ಮುಂದಿನ ಸಾಲಿನಲ್ಲಾದರೂ ಸೀಟು ದೊರೆಯುವಂತೆ ಮಾಡುತ್ತೇವೆ ಎಂದು ಹೇಳಿದರು.

ಕೇಂದ್ರ ಸರ್ಕಾರ ಡೀಮ್ಡ್ ವಿವಿಗಳ ಸೀಟುಗಳನ್ನು ಹಂಚಿಕೆ ಮಾಡುವಾಗ ರಾಜ್ಯದ ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ಆದ್ಯತೆ ನೀಡಬೇಕು. ಹಾಗೇ ಸಾಧ್ಯವಾಗದಿದ್ದಲ್ಲಿ ಕರ್ನಾಟಕ ಪರೀಕ್ಷಾ ಪ್ರಾಧಿಕಾರದ ಮೂಲಕ ಹಂಚಿಕೆ ಮಾಡಲು ಅವಕಾಶ ಕಲ್ಪಿಸಬೇಕು ಎಂದು ಹೇಳಿದರು.

ಡೀಮ್ಡ್ ವಿಶ್ವ ವಿವಿಗಳು ರಾಜ್ಯದ್ದೇ ಸಂಸ್ಥೆಗಳಾಗಿದ್ದು ರಾಜ್ಯದಲ್ಲಿರುವ ಸಂಪನ್ಮೂಲ ಬಳಸಿಕೊಂಡು ಅಭಿವೃದ್ಧಿಪಥದಲ್ಲಿ ಸಾಗಿವೆ. ಹಾಗಿದ್ದರೂ ರಾಜ್ಯದ ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ಅವುಗಳಿಂದ ಅನುಕೂಲವಾಗುತ್ತಿಲ್ಲ. ಹೊರ ರಾಜ್ಯ ಹಾಗೂ ಹೊರ ದೇಶಗಳ ವಿದ್ಯಾರ್ಥಿಗಳು ಸಂಪೂರ್ಣ ಅವಕಾಶ ಬಳಸಿಕೊಳ್ಳುತ್ತಿವೆ ಎಂದವರು ತಿಳಿಸಿದರು.

ಡೀಮ್ಡ್ ವಿಶ್ವವಿದ್ಯಾಲಯಗಳ ಜೊತೆ ಚರ್ಚೆ: ಕೇಂದ್ರಕ್ಕೆ ಶೀಘ್ರ ಮನವಿ- ಡಿಕೆಶಿ ರಾಜ್ಯದ ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ಶೇ 50 ಸೀಟು

ಪ್ರಜಾವಾಣಿ ವಾರ್ತೆ

ಬೆಂಗಳೂರು: 'ರಾಜ್ಯದ ಎಂಟು ಡೀಮ್ಡ್ ವಿಶ್ವವಿದ್ಯಾಲಯಗಳಲ್ಲಿರುವ ಎಂಬಿಬಿಎಸ್ ಮತ್ತು ದಂತ ವೈದ್ಯಕೀಯ ಸೀಟುಗಳಲ್ಲಿ ಶೇ 50ರಷ್ಟನ್ನು ರಾಜ್ಯ ಸರ್ಕಾರಕ್ಕೆ ಬಿಟ್ಟುಕೊಡುವಂತೆ ಕೇಂದ್ರ ಸರ್ಕಾರಕ್ಕೆ ಪತ್ರ ಬರೆಯಲಾಗುವುದು ಎಂದು ವೈದ್ಯಕೀಯ ಶಿಕ್ಷಣ ಸಚಿವ ಡಿ.ಕೆ. ಶಿವಕುಮಾರ್ ತಿಳಿಸಿದರು.

ಡೀಮ್ಡ್ ವಿ.ವಿಗಳ ಮುಖ್ಯಸ್ಥರ ಜೊತೆ ಗುರುವಾರ ಸಭೆ ನಡೆಸಿದ ಬಳಿಕ

ಡೀಮ್ಡ್ ವಿ.ವಿಗಳು

ಯೆನಪೋಯ,
ನಿಟ್ಟೆ, ಕೆಎಲ್‌ಇ,
ಬಿಎಲ್‌ಡಿ, ಸಿದ್ಧಾರ್ಥ,
ಮಣಿಪಾಲ, ಜೆಎಸ್‌ಎಸ್,
ದೇವರಾಜ ಅರಸು

ಮಾತನಾಡಿದ ಸಚಿವರು, ರಾಜ್ಯದ ಎಂಟು ಡೀಮ್ಡ್ ವಿ.ವಿಗಳಲ್ಲಿ 1,630 ಎಂಬಿಬಿಎಸ್, 640 ದಂತ ವೈದ್ಯಕೀಯ ಸೀಟುಗಳಿವೆ ಎಂದರು.

'ಕೇಂದ್ರ ಸರ್ಕಾರವೇ ಪರೀಕ್ಷೆ ನಡೆಸಿ ಪ್ರವೇಶ ನೀಡಲಿ. ಆದರೆ, ಒಟ್ಟು ಸೀಟುಗಳಲ್ಲಿ ಅರ್ಧದಷ್ಟನ್ನು ಕರ್ನಾಟಕದ ವಿದ್ಯಾರ್ಥಿಗಳಿಗೆ ಮೀಸಲಿಡಬೇಕು ಎಂದು ಕೇಂದ್ರಕ್ಕೆ ಶೀಘ್ರದಲ್ಲೇ ಅಹವಾಲು ಸಲ್ಲಿಸಲಾಗುವುದು. ಪತ್ರ ಬರೆಯುವ ವಿಷಯದಲ್ಲಿ ಒಂದೆರಡು ವಿ.ವಿಗಳ ಮುಖ್ಯಸ್ಥರು ಆಕ್ಷೇಪ ವ್ಯಕ್ತಪಡಿಸಿದ್ದಾರೆ' ಎಂದ ಅವರು, ಆ ವಿ.ವಿ.ಗಳ ಹೆಸರು ಬಹಿರಂಗಪಡಿಸಲು ನಿರಾಕರಿಸಿದರು.

'ಡೀಮ್ಡ್ ವಿವಿಗಳ ಸೀಟುಗಳನ್ನು

ಕೇಂದ್ರ ಆರೋಗ್ಯ ಸೇವೆಗಳ ನಿರ್ದೇಶನಾಲಯ ತುಂಬುತ್ತದೆ. ಸೀಟು ಭರ್ತಿ ಮತ್ತು ಶುಲ್ಕ ನಿಗದಿಪಡಿಸುವ ವಿಚಾರದಲ್ಲಿ ರಾಜ್ಯ ಸರ್ಕಾರಕ್ಕೆ ಯಾವುದೇ ಅಧಿಕಾರ ಇಲ್ಲ. ಈ ಕಾರಣಕ್ಕೆ ಎಲ್ಲ ಸೀಟುಗಳು ಹೊರ ರಾಜ್ಯದ ವಿದ್ಯಾರ್ಥಿಗಳ ಪಾಲಾಗುತ್ತದೆ. ಇದರಿಂದಾಗಿ ರಾಜ್ಯದ ವಿದ್ಯಾರ್ಥಿಗಳು ಅವಕಾಶ ವಂಚಿತರಾಗುತ್ತಾರೆ. ಇದು ಮುಂದಿನ ದಿನಗಳಲ್ಲಿ ವೈದ್ಯಕೀಯ ಕೊರತೆ ಇನ್ನಷ್ಟು ಬಿಗಡಾಯಿಸಲು ಕಾರಣವಾಗಬಹುದು' ಎಂದೂ ಆತಂಕ ವ್ಯಕ್ತಪಡಿಸಿದರು.