

**SUB: MINUTES OF THE MEETING OVER MEDICAL ISSUES HELD ON  
10.04.2018 AT 01:00 PM UNDER THE CHAIRMANSHIP OF DIG  
(P)**

A Meeting which was earlier scheduled for 26.03.2018, was rescheduled and held on 10.04.2018 at about 01:00 PM, under the Chairmanship of the DIG (P) with the RMO of Tihar/Mandoli/Specialist doctors from outside hospitals (DDUH/G.B.Pant), for detailed deliberations/discussions to frame a new policy/guidelines for treatment of convicts and under trials who are terminally ill as ordered by the Hon'ble High Court of Delhi in W.P. (C) No.4866/2012 in the matter of Neha Singh Vs. DG, Central Jail & Ors.

Following were present in the meeting:

1. Sh. S.S. Parihar, DIG (P) Tihar
2. Dr. Sanjay A. Lakra, RMO, Central Jail Hospital
3. Dr. Rajesh Kohli, MS DDU Hospital
4. Dr. R.K. Kalra, OPD In-charge G.B.Pant Hospital
5. Dr. Arun Thakran, CJH

During the meeting all expressed grave concerns towards need of best possible medical treatment to the needy patients particularly those who are terminally ill and struggling for life being in grip of fatal diseases like AIDS/Cancer/T.B.

**1. Study of prevailing policies regarding medical treatment**

- All Standing Orders/Circulars/Orders issued so far by the Prison Department, Delhi, or other agencies/Govt. of NCT of Delhi, were studied and discussed by the attending members.
- Existing Policy regarding medical treatment of inmates was also read with the purpose of close examination to detect deficiency and to explore possibility of improvement.
- Facility and policy of hospitals on panel of Delhi Govt.

**2. All observed unanimously that delay in getting results of medical tests of the patient inmates is a major hurdle in providing adequate medical treatment timely as due to delay sometimes a disease which is curable at one stage becomes incurable leading to innumerable sufferings or even end of life. Cause of delay is usually not on part of the Prison Department, Delhi, however, it cannot be denied that certain caudal formalities to be met consume too much of time before approval of such treatment/tests. It is chiefly on part of the concerned outside hospitals only which fail to get results of the medical test either due to long waiting list of patients/inmates requiring the same treatment/test or some other formalities. Non**



availability of the doctor/specialist in the concerned OPD of outside hospital is also one of the reasons of delay in medical treatment or even diagnosis.

**3. It was also discussed that sometimes illness is not properly diagnosed as the medical men do not opt to get the required but expensive medical tests conducted** and remain satisfied with the results of multiple medical tests of the inmates so far and this happens due to non availability of any provision/rule in the existing policy, hence there is need to change the policy to the extent that doctors may be permitted to get the higher/better medical tests of the patient inmates conducted if the results of all such tests done so far is same and the medical prescription is not giving any relief.

**4. It was also discussed that for the purpose of extending best medical facilities to the terminally ill inmate patient, he/she may be referred to get the treatment from such hospitals (whether private or government hospital) on government panel which offers best facility, no matter it is expensive or not as nothing is more precious than life and good health is a right of a prisoner, hence it is the prime duty of the Prison Department to ensure best medical treatment is provided to the inmate patient who is terminally ill.**

After extensive deliberations with the authorities present in the meeting with due analysis of prevalent Rules & Regulations and practice relating to providing treatment to terminally ill prisoners, following decisions were made and directions were passed:

1. All Standing Orders issued on medical facilities will be strictly complied with by all concerned and the RMO & SCJ will personally supervise all medical facilities for the inmates.

**(Action: RMO/SMOs/SCJs)**

2. Using best available technique/technology, a thorough medical check up of all inmates will be done on yearly basis, preferably even earlier if infrastructure facility permits, which would ensure early detection of the disease, if any, and in turn ensure adequate and effective medical treatment saving & prolonging life of a terminally ill patient inmate.

**(Action: RMO/SMOs/SCJs)**

3. If medical check-up of an inmate reveals even slightest of symptoms of any such disease (AIDS/Cancer/TB/Heart etc.) the said case will be required to be tested/examined meticulously from the best medical centre/hospital for proper detection/diagnosis and treatment.

**(Action: RMO/SMOs/SCJs)**

4. For required medical treatment, the inmate patient who is terminally ill may be referred to private/super specialty hospital {(i) at their own expenses, subject to the approval of DG (Prison) (ii) those who are not capable of incurring such expenses, subject to the approval of Govt.} or government hospitals which offer best medical facility for such treatment.

**(Action: RMO/SMOs/SCJs)**



5. All patients with terminal illness shall be ensured special psychological counseling and spiritual support either in the prison or through a specialty/super-specialty government hospital where maximum/best medical care facilities could be made available to them since they face the prospect and trauma of impending death.

**(Action: RMO/SMOs/SCJs)**

6. All patients with terminal illness shall be extended all possible legal measures to enable the patient inmate to apply for bail/interim bail/parole/suspension of sentence etc. before the court concerned without any delay and inconvenience and to live the remaining part of their lives with dignity, in peace and in the close vicinity of their family members and close friends. General amnesty for early/pre-mature release may also be prayed for such terminal ill prisoners. Applications for grant of parole/furlough on compassionate grounds may be moved frequently must bear the medical status of the patient inmate in case he/she is terminally ill prisoner.

**(Action: SCJs/Jail Visiting Advocates)**

7. Provisions for non-custodial measures and alternatives to imprisonment shall also be pleaded before the Court for the terminally ill prisoners in case they do not pose any risk to the society.

**(Action: RMO/SMOs/SCJs)**

8. Terminally ill prisoner with poor general condition/physical disability shall be provided suitable attendant/Sewadar to assist him/her. Concerned Jail SMO shall make special recommendation for such facility of wheel chair or attendant/Sewadar.

**(Action: RMO/SMOs/SCJs)**

9. Public support may also be garnered for ensuring special provisions for the treatment of inmates suffering from terminal diseases.

**(Action: RMO/SMOs/SCJs)**

10. All the terminally ill prisoners and their families shall be made aware of the special powers of the President of India and Governor/Lt. Governor of the State under the Article 72 and 161 of the Constitution of India, respectively, to grant pardons, reprieves, respites or remissions of punishment or to suspend, remit or commute the sentence of any person.

**(Action: RMO/SMOs/SCJs/Jail Visiting Advocates)**

11. To ensure proper care of terminally ill prisoners inside the prison and even after his/her release, co-operation of community health care services, NGOs and civil society shall be sought.

**(Action: RMO/SMOs/SCJs/Jail Visiting Advocates)**



12. While all facilities available to Indian terminally ill prisoners shall also be available to Foreigner terminally ill prisoners and their cases shall be immediately take up with their respective countries for repatriation as per provisions of the Repatriation of Prisoners Act 2003 and Repatriation of Prisoners Rule, 2004 or through diplomatic channels on humanitarian grounds.

**(Action: RMO/SMOs/SCJs/Jail Visiting Advocates)**

13. By way of this minutes of the meeting, the above provisions as mentioned at Sl No.1 to 12 shall be considered incorporated as contents of Standing Order No.40.

**(Action: RMO/SMOs/SCJs)**

14. With the advice/suggestions of the treating doctors, frequency of visits of the family members visiting terminally ill prisoners in jail/hospital may be increased by the SCJs on compassionate ground if there is no safety and security issue and this direction be read as content of the Standing Order No.53 also.

**(Action: SCJs)**

15. New policy/guidelines on medical treatment to terminally ill prisoners shall be translated in Hindi also and the same shall also be displayed at prominent places in jail so that every person can read and extend support in ensuring best available medical treatment to the terminally ill prisoners.

**(Action: RMO/SMOs/SCJs)**

16. Every fresh proposal targeted to increasing medical facility for the terminally ill prisoners shall be accepted and submitted before the senior authority at the Prisons Headquarter, Tihar, for consideration.

**(Action: RMO/SMOs/SCJs)**

Meeting proved productive in desired manner.

All concerned will perform their respective duties dedicatedly to bring a complete makeover in the shortest possible period.

*E. S. Singh*  
Superintendent  
CENTRAL JAIL (Tihar)  
New Delhi  
Tihar: PHQ, New Delhi

7/29/2018

U.No.10 (10245)/CJ/Legal/2018/19122

Dated: 21/5/18

- RMO, Tihar/Mandoli
- All SMOs/MOs
- All Jail Superintendents of Delhi Prisons

Copy to:

1. S.O. to DG (P)
2. P.A. to DIG (P) Tihar/Mandoli