The Standing Committee on Health and Family Welfare (Chair: Mr. Ram Gopal Yadav) submitted its report on the Medical Council of India (MCI) on March 8, 2016. Key observations and recommendations of the Committee include:

- **Composition:** Presently, the MCI is largely an elected body and contains only medical doctors. In light of issues arising due to the its elected nature (disproportionate private representation, etc.), the Committee recommended that a regulatory framework must be set up under which regulators are appointed through an independent selection process. Also, diversity in the composition of the MCI must be brought in, to include professionals other than medical doctors (such as public health experts, etc.). Presently, the Indian Medical Council Act, 1956 does not limit the reappointment of members of the council. The Committee suggested that the reappointment of members should be limited to two terms.

- **Establishment of colleges:** The Committee observed that the present requirements for establishing a medical college are based only on physical space, infrastructure and rigid faculty requirement. The land requirement leads to high initial investment due to which the government and genuine parties (interested in providing medical education) cannot open colleges. The existing minimum standards are causing impediments in the establishment and expansion of medical colleges. It recommended that the requirements for infrastructure must be reduced accordingly.

- **Medical education:** As the two stages of medical education (undergraduate and postgraduate) require different kinds of expertise, they should be regulated separately (through setting up of separate boards). Further, the Committee recommended that in order to tackle the issue of high capitation fees and to bring transparency, etc., the central government must introduce a common entrance exam for undergraduate, postgraduate and super speciality courses. To standardise the competencies etc. of graduating doctors, an exit test must be introduced for under and postgraduates.

- Presently, there are two systems of post graduate certification, namely DNB (diploma) and MD/MS (master’s degree). The Committee recommended that the current system of postgraduate admission must be restructured. One common entrance and exit test must be introduced for all candidates. The training and evaluation must be integrated into one national qualification. Till such time, DNB students should be given equal status as MD/MS, once they complete two years of teaching experience in a medical college.

- **Accreditation:** The Committee observed that the functioning of the MCI leads to conflict of interest as it gives permission to establish medical colleges and also ensures quality of education. Therefore, an independent and autonomous accreditation body must be set up which will be responsible for ensuring the quality of education.

- **Professional conduct:** The Committee observed that the present focus of the MCI is only on licensing of medical colleges. There is no emphasis given to the regulation of medical ethics. In light of this, the Committee recommended that the areas of medical education and medical practice should be separated. A separate board of medical ethics should be set up which will be responsible for developing mechanisms for the promotion of medical ethics. Further, the government must establish a system of auditing medical practice.

- **Indian Medical Register:** According to the Ministry the doctor-population ratio in India is 1:1674 as against the WHO norm of 1:1000. The Committee was of the view that this number may not be the correct estimate. Presently, the Indian Medical Register also contains the names of registered medical practitioners who are dead or retired from active practice. This hinders healthcare human resource planning. Therefore, the Committee recommended that the register should be maintained as a live database to provide a realistic assessment of number of practitioners.

- **Corruption:** The Committee observed issues related to corruption in the MCI. Further, it noted that autonomy should be balanced with accountability. As MCI is funded by the government, therefore it should enforce accountability on the MCI. The Ministry should take measures to amend the present statute or enact a new legislation which allows the government to intervene in matters of corruption.