THE INDIAN ASSOCIATION OF PHYSIOTHERAPISTS

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WEST BENGAL BRANCH

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Ref. : IAP-WB/191/2014-17 Date : 16/05/2016

To
The Member Secretary
6th Pay Commission
Government of West Bengal
Bikash Bhavan, Salt Lake
Kolkata - 700091

Subject : **Restructuring of pay scale (Pay Band) and promotional avenues of physiotherapists in the Health & Family Welfare Dept. and Labour Dept., Govt. of W.B.**

Respected Sir,

In response to your notice on 20.02.2016 in the Times of India, Kolkata, we the Physiotherapists, are submitting our memorandum as you have advised.

The Indian Association of Physiotherapists is the largest Association of this profession in our country and a proud member of world Confederation of Physical Therapy.

Introduction on Physiotherapy : The term Physiotherapy derives from the ancient art of medicine which the Greek and Roman employed and they understood that the capacity to move is a element of health and well being. Now it is most important Branch of modern science. Physiotherapy is broadly composed of manual, mechanical, chemical and various energy affects and its modifications based on physics, working at cellular levels in tisues at various depth and these effects are regulated by the individualized DOSIMETRY. Physiotherapists are proud members of the multi disciplinary medical services and its intervention is required in various specialized field in Medicine, Surgery, Neurology, Orthopedics, Gynecological & Obstetrics Cardiovascular, Chest, Dermatology, Pediatrics, Geriatrics, Industrial hazards, Disaster Management, Critical care, Sports field etc. **broadly Doctors save life and Physiotherapists improve the quality of that life.**

The Definition of Physiotherapy by WHO is :

"Physiotherapists assess, plan and implement rehabilitative programs that improve or restore human motor functions, maximize movement ability, relieve pain syndromes, and treat or prevent physical challenges associated with injuries, diseases and other impairments. They apply a broad range of physical therapies and techniques such as movement, ultrasound, heating, laser and other techniques. They may develop and implement programmes for screening and prevention of common physical ailments and disorders".

Apart from the WHO definition, the **"Ministry of Health, Government of India"** announced on 12th July 2012 that medicines legislation would be changed to allow appropriately trained Chiropodists/ Podiatrists and Physiotherapists to act as Independent Prescribers". **As per Government of India**, Quality Council of India, Survey Report & Recommendations of Clinical Establishments – Page – 15 : Physiotherapy Clinics are Categorized as "Individual Practitioners Clinic".

(a) 1. CADRE STRENGTH

We, the Physiotherapists are in the subordinate health services (non medical technical personnel – known as NMTP cadre) with effect from 1st April 1960, vide GO No. – Medl/3369/8S-83/59, dated 6th April 1960. This cadre consists of 4 groups – A, B, C, D with different categories of staffs. Physiotherapists along with Social Welfare Officers, Dieticians, Artist etc. were placed in Group-C (Rehabilitation, Health Education and Social Services)

Vide Annexure (Health manual and Recruitment Rule) – I

In 1995, on the recommendation of third Pay Commission, Govt. of W.B. and its review committee, Govt. made changes in the NMTP Cadre on some following cases.

(i) The pay scale of medical technologists from Group – A was upgraded from scale no. 6 to scale no. 7 and the post was excluded from the NMTP cadre.

(ii) The scale of Pharmacist and Ophthalmic Assistant also from Group – A were upgraded from scale no. 6 to scale no. 8.

(iii) The pay scales of Physiotherapists from Group – C were upgraded as follows :

For Grade – III from Scale – 7 to Scale No. – 9

For Grade – II from Scale – 10 to Scale No. 10

For Grade – I from Scale – 11 to Scale No. 12

While others categories of staffs in the same Group – C remained in the same scale as before i.e. scale no. 7, 10, 11.

Since then we have been suffering from Grade Promotion and unfortunately the legitimate gradation for us come to halt till now due to presence of disparities of scales of different staffs in the same group. As a result in the last 20 years, many Physiotherapists retired from their service in Grad – 2 without having the benefit of Grade – 1.

N.B. : The fourth Pay Commission, Govt. of W.B. remarked "with such changes in scales of pay in some of the posts as mentioned above, the spirit of the NMTP cadre is virtually non existent as present. There are no uniformity in pay scales in a particular group. As s result, Grade Promotion has come to a halt".

2. MEN IN POSITION

The following table will justify the above statement also

Grade	Pay Band	Grade Pay	Number of Physiotherapists
III	**3** (Rs. 7,100/- – 37,600/-)	Rs. 3,600/-	**158** (all were appointed after 1995)
II	**3** (Rs. 7,100/- - 37,600/-)	Rs. 3,900/-	**50** (all were upgraded in 1995)
I	**4** (Rs. 9,000/- - 40,500/-)	Rs. 4,400/-	**0** (Vacant)

Though they are in the above grades but enjoying the benefits of career advancement scheme as 8, 16 & 25 years of service experience.

Unfortunately in last 20 years many Physiotherapists superannuated from their service in the Grade – II inspite of having right to enjoy the Financial Benefit Grade – 1.

3. PRESENT PAY STRUCTURE

Grade	Previous Scale No.	Pay Band	Grade Pay
III	**9**	**3** (Rs. 7,100/- – 37,600/-)	Rs. 3,600/-
II	**10**	**3** (Rs. 7,100/- - 37,600/-)	Rs. 3,900/-
I	**12**	**4** (Rs. 9,000/- - 40,500/-)	Rs. 4,400/-

4. EXISTING CONDITION OF THE SERVICE

Inspite of having favourable recommendation from various previous Pay Commissions we were deprived in all aspects like formation of separate cadre only for us, pay scales and other benefits. Here we further mentioning the recommendations of previous Pay Commissions for your kind observation as we have not yet achieved the result of the recommendations of the previous Pay Commissions till now.

Recommendations of Previous Pay Commission, Govt. of W.B. :

A. *Report of the 2nd Pay Commission Govt. of W.B.*

Report of 2nd Pay Commission (Govt. of West Bengal) Page No. 280-283, 290, 38, 880, 490.

Notes of Mr. R. P. Chandra, Member of 2nd Pay Commission (Govt. of West Bengal).

"As admitted by the witnesses they are the only non-medical personnel who make their work treatment plan and programmes and carryout medical exercises which involve many variations and adjustment according to patients responses. As advance or post graduate courses are available in the country the Central Govt. have provided for graded posts of Heads, Teachers, Supervisor, senior, Junior. Thus there are good ground for taking these categories out of the groups structures and form into a separate service like Nursing."

"As proper rehabilitation of patients suffering from disabilities is of great importance of the society, it has been accepted that large expansion of this service is desirable so that every hospital in the state have the necessary facilities. Physiotherapist starts function is not only after usual medical treatments have ended but some time before surgical operations are usually delicate or sensitive tasks. Thus conditions are favourable to cope with state wide demands for rehabilitation facility for creating a separate cadre with hierarchical pattern. Simultaneously existing training facilities should be largely expanded and advanced courses should be started. The branch of physical medicine should be headed by a Deputy Director who may be entrusted with overall responsibilities."

B. Recommendation of 3rd Pay Commission (Govt. of West Bengal) 13.15.11. & 13.15.12, Page 97 & 143

"The posts of Physiotherapist and Social Welfare Officer are at present included in Group – C of the cadre of Non-Medical Technical Personnel. There are many other posts in the said Group which are borne in Grade – I, Grade – II and Grade – III the existing scales of pay being Rs. 440-1170/- for Group – I, Rs. 425 – 1050/- for Grade – II and Rs. 340-750/- for Grade – III. In our view, the duties and responsibilities of Physiotherapists and Social Welfare Officers entitle the, to somewhat higher scales of pay".

"We suggest that the posts of Physiotherapist and Social Welfare Officer should be taken out of the cadre of Non-Medical Technical and that each of the categories should be distributed in three grades, namely, Grade-I, Grade-II and Grade-III posts of both the categories should be out suggested scales No. 12, 10 and 9 respectively."

C. Recommendation of 3rd Pay Commission, Govt. of India 1973

"The Physiotherapists have contended that their pay scales should be improved as their duties and responsibilities are comparable to those of Medical and Dental Practitioners. (Vol. No. 1, Page 192).

According to the all previous Pay Commission's report, we have been deprived and have been enjoying a low pay scales since very beginning with respect to our nature of works, responsibilities, accountability and dignity, it is fact. According the their written comments as well as verbal comments they were unable to uplift our pay scales due to low profile essential criteria of

Physiotherapist's recruitment in the government service according to the previous recruitment rule for Physiotherapists.

Vide Annexure (Previous recruitment rule of 1960) **– I**

Furthermore we have been treated as non-medical or paramedical staffs since very beginning. But we are neither paramedical nor non-medical at all. Hope you will be understood and satisfied with our opinion from the various informations from various levels (international and national).

D. According to International Level

International Labour Organization (ILO)

ILO is the international organization responsible for drawing up and overseeing international labour standards. It is the only 'tripartite' United Nation's Agency that brings together representatives of government, employers and workers to jointly shape policies and programmes promoting Descent work for all. International standard clarification of occupation **(ISCO)** is a tool for organizing jobs into a clearly defined set of groups according to the tasks and duties undertaken in the job.

ILO has classified Physiotherapists as a separate professional group **ISCO** Code **2264** and Paramedical have been classified as **ISCO** Code **2240**. Which clearly **distinguishes Physiotherapy professional from Paramedical professionals.**

Source : http.//www.ilo.org/public/english/bureau/stat/isco/isco88/3226.htm

E. According to National Level

i. ***Ministry of Law/Legal Affairs***

Ministry of Law/Legal Affairs **stated that the profession of Physiotherapy should not be covered or equated within the term paramedical in 2001** and according to this opinion, Physiotherapy was excluded from the then "proposed Para-Medical and Physiotherapy Council Bill – 2007" with independent professional status and recently the NCHRH Bill 2011 is rejected by the Parliamentary Health Standing Committee and the committee has recommended to the union health ministry to reform the bill with their suggestions to concentrate on the submissions of various stakeholders **including Physiotherapy – as an separate and independent profession**.

ii. ***31st Report of Parliamentary Standing Committee on Health and Family Welfare presented in Rajya Sabha on 21st Oct. 2008***

(x) Article 9.46 – The Committee has given deep thought to all the views and opinions aired before it by all concerned. Voluminous material relating to both national and international arena placed before it has also received full attention of the committee. The fact that Physiotherapy education over the years has made significant advancement and has evolved as a distinct profession seems to be well established. This is strengthened by the considered **opinion of Ministry of Law that Physiotherapy profession should not be equated with the paramedical profession**.

(y) Article 25.6 – The Committee feels that all the allied health professionals including physiotherapists and occupational therapists play a crucial role in the field of medicine and physical rehabilitation. The committee, therefore, strongly recommends that their legitimate interest should be taken care off and their **existing pay structure may be revised according to their qualifications and duration of the course they have to put in before entering into a Govt. job.**

iii. **According to different Physiotherapy State Council**

(x) ***The Delhi Council for Physiotherapy and Occupational Therapy Act, 1997*** (Delhi Act No. 7 of 1997) defines Physiotherapy, "physiotherapeutic system of medicine which included examination, treatment, advice and instructions to any person preparatory to or for the purpose of or in connection with movement disfunction, bodily malfunction, physical disorder, disability healing and pain from trauma and disease, physical and mental conditions using physical agents including exercises, mobilization, mechanical & electrotherapy, activity and devices for diagnosis, treatment and prevention".

(y) ***Maharashtra State Council for Occupational Therapy and Physiotherapy Act, 2002*** (Mah Act No. II of 2004) defines Physiotherapy, "a branch of modern medical science which includes examination, assessment, interpretation, physical diagnosis, planning and execution of treatment and advice to any person for the purpose of preventing, correcting, alleviating and limiting dysfunction, acute and chronic bodily malfunction including life saving measures via chest physiotherapy in the Intensive Care Units curing physical disorders or disability promoting physical fitness, facilitating healing and paid relief

and treatment of physical and psychosomatic disorders through modulating psychological and physical response using physical agents, activities and devices including exercises, mobilization, manipulations, therapeutic ultrasound, electrical and thermal agent and electrotherapy for diagnosis, treatment and prevention".

iv. **Administrative Instruction No. – 2 of 2004, No. A3063/250, dated 12/08/04**

We like to state that in West Bengal the Government of West Bengal **has recognized the importance of Physiotherapy** with a view to rendering effective and corrective treatment for the ailing patients and frame the duties and responsibilities of the Physiotherapists ascertaining in the light of modern trend and development of this subject by the Director of Health Services, Govt. of W.B. 0rder No. A3063/250 dated 12/08. **In terms of this order, physiotherapists are entitled to intervene and treat the patients directly and independently.**

Vide Annexure (2 pages – II)

v. **Order for Separation of Physiotherapists from the Cadre bearing No. HF/O/MA/709/1P-03/8, dated 26th March 2014**

For your kind information initiation for separation of Physiotherapists from the existing cadre NMTP; Group-C was started by the Secretariat Order from the Department of Health and Family Welfare. Though it was issued for the separation of Physiotherapist from the Cadre of Non-Medical, Technical personnel (NMTP) but so far we know separate cadre is not constituted till now. **Vide Annexure No. – III**

vi. **New Recruitment Rule for Physiotherapist (The Kolkata Gazette on 21st August 2009)**

For the post of Physiotherapist **qualification**

(a) **Essential**

Passed Higher Secondary Examination (10+2) from West Bengal Council of Higher Secondary Examination or its equivalent with Physic, Chemistry, Mathematics/Biology and 2 years Diploma Course in Physiotherapy recognized by the Government of W.B.

(b) **Desirable**

Bachelor's degree in Physiotherapy course recognized by the Govt. of W.B.

Vide Annexure (2 pages of present recruitment rule) – IV

Vide Annexure (Previous recruitment rule) - I

Though the new recruitment rule has been introduced in the August-2009 but after that no one candidate has been appointed on this essential qualification.

This is for your kind information that according to human resources of **WHO** Physiotherapists **:** Population = 1 **:** 1000 is needed. According to this source West Bengal needs about 1,00,000 Physiotherapists, but we have about 4,000 Physiotherapist only at present in West Bengal. Sorry to say further more not getting employment in Govt. Service with reasonable salary, **many Physiotherapists after passing BPT (Degree Course in Physiotherapy) leaving W.B. for better job in the other states or abroad. So, which increases the more scarcity of qualified Physiotherapist in West Bengal.** For which quackism in the field of Physiotherapy is increasing day by day and people are not getting proper physiotherapy. In this way the general mass have been suffering in two folds, they are not getting sufficient physiotherapeutic scopes due to shortage of qualified Physiotherapists and secondly getting maltreatment my the quacks in this field.

Another point we should mention here a few number of under qualified (not having Diploma in Physiotherapy from W.B. State Medical Faculty) were recruited in the Health Directorate, Govt. of W.B. up to 2007 as Physiotherapists according to the scope of previous recruitment rule before introduction of the new recruitment rule for the Physiotherapist by W.B. Govt. in 2009.

According to the health manual 1960, we appeal for them, the designation should be Physiotherapist Assistant instead of Physiotherapist. (as there is a provision in the health manual – Category No. 11 in Group – C. **Vide Annexure (Recruitment Rule) – 1**

They should not be placed in our asking cadre for Physiotherapist only. They may be placed in a dead cadre or as you think fit for them.

We played a vital role for rehabilitation of many paralyzed patients due to oil tragedy in Dum Dum and subsequently in Behala in 1988.

Vide Annexure (Newspaper Clippings) - V

Continuously we are playing a vital role for rehabilitation of many paralyzed or handicapped patients due to Cerebral Vascular Accident, Cerebral Pulsy, Orthopedic or Neurological conditions or accidental conditions.

We are so important member in the rehabilitation team for treating disable children, where any doctor who have not any training after passing MBBS in the handling of disable children cannot treat the disable child, but we can do. **Vide Annexure (2 pages) – VI & Annexure (notification of MCI) - VII**

We, the Physiotherapists, have been deprived since very beginning in respect of salary structure as well as dignity for an example inspite of having more qualifications than that of Junior Engineers in Govt. of W.B. as Higher Secondary with science and 2½ years Diploma in Physiotherapy (DPT) from W.B. State Medical Faculty or 4½ years Bachelor in Physiotherapy from W.B. University of Health Sciences. For your kind information we are giving a reference a recruitment rule for Junior Engineer (Previously known as Sub Assistant Engineer) in the different departments of Govt. of W.B. including Health and Family Welfare in a comparative table as follows.

Vide Annexure (current Recruitment Rule of Physiotherapists) - **IV**, and **Vide Annexure** (advertisement by PSC for Junior Engineer and for Physiotherapist) – **VIII & IX**

Designation of Occupation	Essential Qualification & duration for recruitment in Govt. Service		Total duration of the educational year for essential qualification	Present Pay Structure	
	General	Professional		Pay Band	Grade Pay
Junior Engineer	10 years Madhyamik	3 yeas Diploma in Civil/Electrical/ Mechanical	10+3 = 13 years	**4** (9,000/- - 40,500/-)	**4,400/-**
Physiotherapist	10+2 years/ H.S. with Science	2½ years Diploma in Physiotherapy **(DPT)** including 6 months internship training	10+2+2½ years i.e. **total 14½ years**	**3** (7,100/- - 37,600/-)	**3,600/-**
Physiotherapist	10+2 years/ H.S. with Science	4½ years Bachelor in Physiotherapy **(BPT)** including 6 months internship training	10+2+4½ years i.e. **total 16½ years**	**3** (7,100/- - 37,600/-)	**3,600/-**

We would like to mention that such an anomalies or marked disparity is going on for Physiotherapist. Point of reference is this under the same government the Junior Engineers are enjoying higher pay band and grade pay than that of Physiotherapist inspite of having less duration of years to achieve the essential qualification for employment in the same government.

(b) SUGGESTIONS FOR CHANGES IN PAY STRUCTURE

We are placing here a comparative table showing the disparities in the pay structure for Physiotherapist working under Government of W.B. and in the other State Government including Central Government

Sl.	Govt./Govt. Office	Old Pay Scale (Physiotherapist)	New Corresponding Pay Band	Pay Band No.	Grade Pay
1	India (6th & 7th CPC)	5,500 – 9,000 (merged with 6,500 – 10,500)	9,300 – 34,000	PB – 2	4,200
2	Bihar in the year 2010 **(Annexure – X attached)**	5,500 – 9,000	9,300 – 34,000	PB – 2	4,200
3	Rajasthan	6,500-10,500 Grd.I 5,900-9,900 Grd.II	9,300 – 34,800	PB – 2	4,200
4	Jharkhand	5,500 – 9,000 merged with (6,500 – 10,500)	9,300 – 34,800	PB – 2	4,200
5	N.I.O.H. (Bonhooghly) W.B. Clinical Physiotheerapist	5,500 – 9,000 merged with (6,500 – 10,500)	9,300 – 34,000	PB – 2	4,200
6	Tamil Nadu	6,500–10,500 Grd.I 5,900-9,900 Grd.II	9,300 – 34,800	PB – 2	4,600 4,500
7.	West Bengal (Clinical Physiotherapist)	4,000 – 8,850	7,100 – 37,600	PB – 3	3,600

OUR DEMANDS

(i) ***West Bengal Physiotherapy Service***

With the above all various references (successive Pay Commission's report and Annexure – III) we are demanding a separate cadre **namely West Bengal Physiotherapy Service** for the clinical Physiotherapist only for

the sake of Physiotherapist in service as well as better physiotherapy service to the society in our state

(ii) ***Proposed Pay Structure as follows***

According to the above comparative table and Annexure from V to X we demanding the new pay structure for Physiotherapists as follows :

Designation	**Proposed Existing Scale No**	**Proposed Existing Pay Band**	**Proposed Existing Grade Pay**	**Proposed Promotional Avenue**
Junior Physiotherapist	**14** Rs. 9,000/- - 40,500/-	**4**	Rs, 4,700/-	N/A
Senior Physiotherapist	**16** Rs. 15,600/- - 42,000/-	**4A**	Rs. 5,400/-	Continuous satisfactory service for 8 years as Junior Physiotherapist
Superintendent Physiotherapist	**17** Rs. 15,600/- - 42,000/-	**4A**	Rs. 6,600/-	Continuous satisfactory service for 8 years as Senior Physiotherapist
Chief Physiotherapist or Administrative Physiotherapy Officer	**18** Rs. 28,000/- - 52,000/-	**4B**	Rs. 7,600/-	Continuous satisfactory service for 8 years as Superintendent Physiotherapist

For teaching faculty Physiotherapist (Demonstrator, Lecturer, Assistant Professor and Professor) at par the UGC norms and or Medical Education Services in Govt. of W.B.

(c) EXISTING PROMOTION POLICIES AND RELATED ISSUES AND SUGGESTION FOR CHANGES

Virtually we the Physiotherapists have no promotion, have only financial benefit in terms of periodical gradation i.e. in Grade – III with continuous satisfactory work for 5 years he will be upgraded to Grade – II and in this grade continuous satisfactory work for 10 years he will be upgraded to Grade – I.

Already you became aware from our previous information which we have placed in the previous pages, unfortunately we are not getting any gradation for last 20 years. Though we are enjoying the benefit of career advancement scheme i.e. 8, 16, 25 years service benefit.

Practically as we have no promotional scope, this is unconstitutional and act as a demotivating factor to the members to restore the constitutional right of vertical mobility in the promotional policy.

OUR DEMAND :

As we have demanded different designated post as follows :

- Junior Physiotherapist
- Senior Physiotherapist
- Superintendent Physiotherapist
- Chief Physiotherapist or Administrative Physiotherapy Officer

Junior Physiotherapist in the basic grade should be promoted to the post of senior physiotherapist after 8 years continuous and satisfactory service. After 8 years of continuous and satisfactory service in the post of Senior Physiotherapist should be promoted to the post of Superintended Physiotherapist, and after 8 years of service in that capacity should be promoted to the post of Chief Physiotherapist or Administrative Physiotherapy Officer.

(d) SPECIAL PAY AND OTHER ALLOWANCES, LTC

(i) Risk/Hazardous Allowances

(ii) Higher Qualification pay or Allowances

(iii) Infectious Allowances

(iv) LTC

(v) Non. Practicing Allowances

(vi) Medical Allowances or Total Treatment (indoor and outdoor) expenditure.

(i) ***Risk/Hazardous Allowances***

Another silent points to the reference here is the job hazards with which physiotherapists are to work are hazardous, Physiotherapists have to work with electro-medical equipments like ultraviolet rays, infrared rays, LASER therapy, shortwave diathermy etc. which have much side effects. Prolonged irradiation of rays may cause eye sight problems, skin diseases even malignancy. Since physiotherapists are also to treat the patients suffering from the contagious diseases, there is every possibility of being affected by those diseases in addition.

Our suggestion, physiotherapist should be granted risk/hazards allowance @ Rs. 1,0000/- per month.

(ii) ***Higher Qualification pay or Allowances***

Persons having higher qualification than the essential qualification for entry in government service i.e. Diploma in Physiotherapy (DPT) should be provided with higher qualification pay for BPT or MPT Physiotherapist.

(iii) ***Infectious Allowances***

Some Physiotherapist have to work specially with highly infectious diseases like leprosy, tuberculosis etc. There are discrepancy of infectious allowances for different categories of staffs engaged with the treatment for infectious diseases. The discrimination should be rectified as risk factor of the disease is the same for all categories of staffs.

Our suggestion : **Infectious allowances should be Rs. 1,000/- per month for all categories of staffs involved in the treatment of infectious diseases.**

(iv) ***LTC***

It should be introduced every two years of span of service life.

(v) ***Non. Practicing Allowances***

Recommendation of Parliament's Estimate Committee 1982-1983 (53rd report 7th Lok Sabha 24th April 1983)

The Estimate Committee observed Physiotherapist are crucial to day in the field of Medicine and Physical rehabilitation. It recommended "further the committee desire that Physiotherapists should be given independent and appropriate status. Regarding non-practicing allowance it recommended "the demand of grant of NPA to Physiotherapists appear to the committee to be reasonable. They accordingly desire that this issue should be carefully considered by the Ministry. It it is not found feasible to grant them non-Practicing Allowance they ought to be permitted to undertake private practice which could improve their skills."

A Physiotherapist is entitled to practice as a professional to earn livelihood like any other profession in the health services. It is imperative to grant non

practicing allowances to Physiotherapist to attract competent personnel in State Government Service as Physiotherapist employed in private concerns and other nation's concern are getting much higher pay. Our demand is justified by the above recommendations of Parliament's Estimate Committee. And also Parliament of India – Committee on Subordinate Legislation Hundred and Seventy Eight Report presented on 19th December, 2008.

Vide Annexure - XI

(vi) *Medical Allowances or Total Treatment (indoor and outdoor) expenditure.*

There should be provision for choice either Medical Allowance or total medical indoor and outdoor expenses in Govt. or non Govt. Hospitals or Nursing Home enlisted by the Govt.will be borne by government as like as CGHS.

(e) ISSUES RELATING TO RETIREMENT BENEFIT

All existing retirement benefit should be increased in amount as per market value. We want introduction of cashless (without limit) treatment facilities both indoor and outdoor in the government and non government hospitals or nursing homes enlisted by the government. To avoid hazards for treatment procedure for the incumbent and his/her dependants, we want to introduction of electronic card system by which the payment can be done by the government.

(f) BRIEF SYNOPSIS OF THE SILENT POINTS

(i) ***Constitution of State Level Service for Physiotherapists, namely West Bengal Physiotherapy Service – styled as W.B.P.T.S.***

(ii) ***Re-orientation of separate Physiotherapy Cadre.***

Clinical	**Academic**
Junior Physiotherapist	Demonstrator
Senior Physiotherapist	Lecturer
Superintendent Physiotherapist	Assistant Professor
Chief Physiotherapist or Administrative Physiotherapy Officer	Professor

`(iii) ***Restructuring of the Pay Scale and Provision of Promotional Avenue***

Designation	**Proposed Existing Scale No**	**Proposed Existing Pay Band**	**Proposed Existing Grade Pay**	**Proposed Promotional Avenue**
Junior Physiotherapist	**14** Rs. 9,000/- - 40,500/-	**4**	Rs, 4,700/-	N/A
Senior Physiotherapist	**16** Rs. 15,600/- - 42,000/-	**4A**	Rs. 5,400/-	Continuous satisfactory service for 8 years as Junior Physiotherapist
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(iv) ***Special Pay And Other Allowances, Ltc***

(a) Risk/Hazardous Allowances

(b) Higher Qualification pay or Allowances

(c) Infectious Allowances

(d) LTC

(e) Non. Practicing Allowances

(f) Medical Allowances or Total Treatment (indoor and outdoor) expenditure.

(v) ***Issues Relating To Retirement Benefit***

(vi) ***Audio-Visual Demonstration and Hearing***

May kindly be fix up date and time for exhibition and hearing

CONCLUDING REQUEST

Considering the above all references, we solicit for justice in the interest of our profession, public and nation and accordingly stressfully request the member secretary and members of the 6th Pay Commission, Govt. of West Bengal to please and kindly examine each and every issues, grievances, suggestions and demands made within this memorandum in reasonable details and specifically submit just, fair and equitable recommendation with a degree of fairness i.e. humanly possible and lastly from the Government much considering what have been mentioned above.

The applicant as in duty bound shall ever pray.l

With thanks and warm regards,

Yours faithfully,

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