July-August 2022

Volume VII, Issue 4





CAG is a Member of CAC of FSSAI

S. Saroja, CAG, has been nominated as a Member of the Central Advisory Committee (CAC), Food Safety and Standards Authority of India (FSSAI), where she will represent the interests of consumers. The CAC is a platform to allow for close cooperation between the FSSAI and food safety departments of all states in the country, and other organisations that work in the area of food and food safety.

CAG's multi-stakeholder regional meeting on non-communicable diseases and the need for warning labels

CAG organised a regional meeting on July 17, 2022 on the topic "Non-communicable diseases and the need for warning labels on front of processed food products" to bring together various stakeholders like doctors, nutritionists, child right activists, consumer group representatives, and the food industry from Andhra Pradesh, Telangana, Karnataka and Tamil Nadu to discuss this important issue and gather their support for warning labels on front of packages of processed foods. Dr. Kritika, Gynaecologist; Dr. Arunachalam, Interventional Cardiologist; Dr. Rama Rao, Physician; Dr. Hemamalini, Clinical Nutritionist; Dr. Ramya, Nutritionist; Ms. Sarojamma, Child Rights Activist from Chiguru Balavikasa Samsthe, Ms. Subha J, Social Behaviour Change Consultant, UNICEF and various industry representatives across South India gave their support and initiated the signature campaign to bring in regulations on warning labels on front of processed foods.



REGIONAL MEETING ON

"Non-communicable diseases and the need for warning labels on front of processed food products"

DATE 17 AUG 2022

TIME 10 AM - 1 PM

VENUE: HOTEL RAJ PARK, TTK ROAD, ALWARPET



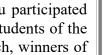












Apart from this, various consumer group representatives from all the districts of Tamil Nadu participated and extended their support to this policy as well. Ms. Soma Basu and Ms. Suhaina Begum, students of the Department of Clinical Nutrition, Sri Ramachandra Institute of Higher Education and Research, winners of the first and second place of the label designing competition on warning labels, organised by CAG earlier, presented their warning label designs, explaining why they were best suited for India.

Patanjali's ghee and rice failed to meet the food safety standards

In a sample test conducted at the state laboratory of Uttarakhand, it was found that Patanjali's pure cow ghee was adulterated and failed to meet food safety standards. Earlier, in 2021, the food safety and drugs department found that the same product was injurious to health. Additionally, sample rice (of the same brand) was taken from a hotel for testing and the report confirmed that the rice had large quantities of pesticides. Source: Northeast Now

National Consumer Disputes Redressal Commission (NCDRC) orders Sankara Netralaya to pay 1 crore as compensation for medical negligence

The parents of the deceased child, took their only son to Sankara Nethralaya, Chennai for squint eye surgery. The child was examined by the physician, Dr. Sujatha. She noticed a faint functional systolic murmur and chest wall abnormality. This was then brought to the attention of senior cardiologist, Dr. S. Bhaskaran, who further examined the child and found that there was no murmur. The doctor ruled out any further tests, such as an ECG, ECHO, or Chest X-ray, and declared that the child was ready for the surgery under general anaesthesia. The child was taken to the hospital on the originally scheduled date at 9 AM, but was not admitted until 3 PM. The child remained fasting for almost nine and half hours. Dr. Kannan was the anaesthetist and Dr. T. S. Surendran was the ophthalmologist who performed the surgery. Mid-procedure, the child suffered a cardiac arrest and died on the operating table. Later, the parents accused the doctors and the hospital of gross medical negligence and deficiency in service and filed a complaint in the Consumer Fora.

On the complainant's side, it was argued that leaving the child fasting for more than 9 hours could have led to him becoming hypoglycemic, putting him in danger of a cardiac arrest. It was mentioned that Halothane is an anaesthetic agent that can cause bradycardia, and in such cases, it's important to monitor the patient's heart rate closely. The doctors failed in their duty resulting in the death of the child.

The opposite party contended that the anaesthetists, cardiologists and other doctors took all efforts to resuscitate the patient. It was also claimed that all cooperation was extended to his parents, and upon request, all medical records were provided, thus ruling out the possibility of poor performance. Claims regarding the wrong dose and timing of atropine were also submitted as baseless. In addition, the patient was also intubated by standard paediatric procedures, and such life-threatening reactions were rare, it was claimed.

However, the NCDRC held that the doctors failed to exercise their duty of care with required skills and standards and were therefore liable for medical negligence. Although the Commission did not weigh the claim of fasting in children, it found that use of muscle relaxant "Scoline", further accelerated the bradycardia that had already occurred due to halothane anaesthesia. The Commission felt that the anaesthetist should have warned the surgeon, who was unaware of the specific warnings regarding use of Scoline in paediatric cases. Also, Ocular Cardiac Reflex (OCR) - a condition where there is a reduction in the heart rate secondary to direct pressure placed on the eyeball - was determined to be the cause of death. The Commission observed that patients who are considered at risk for OCR should warrant particular attention and in this case, the intraoperative diagnosis of OCR was overlooked resulting in the cardiac arrest.

The Commission therefore held the cardiologist, surgeon, and anaesthetist responsible for medical negligence. The hospital was also held vicariously liable for the acts of omission and commission committed by the doctors and was held jointly and severally liable to pay compensation to the Complainants.

The hospital was ordered to pay Rs. 85 lakhs; the anaesthetist Dr. R. Kannan Rs. 10 lakhs and the operating ophthalmologist, Dr. T. S. Surendran, Rs. 5 lakhs to the Complainants within six weeks of the date of order, failing which, the amount was stated to carry interest @ 9% per annum till its realisation. The hospital was further directed to pay Rs. 1 lakh towards the cost of litigation. **Source**: <u>Live Law</u>

CAG invited as a guest speaker by Prince Shri Venkateshwara Arts and Science College

Savitha T, CAG addressed the students of the Prince Shri Venkateshwara Arts and Science College on 25th July 2022, about the pros and cons of digital financial services. She explained the provisions of the Consumer Protection E-Commerce Amendment Rules, 2021, and advised students to be cautious while transacting online. She also asked them to spread the message as e-commerce and online transactions have become the modern way of life. Around 200 students participated in the webinar.



Completion certificate can be issued only after completion of construction as per the approved plan

The Madras High Court ordered that the building completion certificates can be obtained only after constructing the building as per the approved plan. The court said that bank loans can be sanctioned only after production of the building completion certificates. The direction was given in the case of demolition of the unauthorised portion in an apartment building, where the Court found that the builder had obtained permission only to build six flats with a stilt and two floors over 2070 sq. feet area. But the builder had converted the stilt into the ground floor and constructed flats there, and additionally constructed flats on the third floor; this resulted in Floor Space Index (FSI) and set back area violations. **Source**: The Hindu

Bank Account Holders can seek recourse under the Consumer Protection Act

In the case between Arun Bhatiya versus HDFC Bank & Ors, the Supreme Court held that the consumer complaint alleging premature encashment of Joint Fixed Deposit by the bank in violation of the terms and conditions is maintainable. In light of this, a person who uses any service from a bank falls within the definition of a "consumer" under the 1986 Act. As a result, it would be open to such a consumer to take recourse to the remedies provided under the 1986 Act.

The complainant and his father opened a joint bank account with HDFC Bank. The complainant and his father deposited 75,000 rupees jointly for 145 days. The Fixed Deposit (FD) was credited to the account of the complainant's father on 31 May 2016 on the request of the father. The complainant argued in a complaint before the State Consumer Disputes Redressal Commission (SCDRC) in Lucknow that, even though both the complainant and his father had jointly issued a direction to the bank for renewing the FD for a period of ten days, the bank credited the FD into the account of the father alone. The SCDRC held that the dispute was basically between the complainant and his father on the issue of the FD sum kept, and dismissed the case stating that only a civil court was competent to deal with such a dispute. The NCDRC rejected the appeal. Afterwards, the complainant recorded a review application stating that he had not furnished instruction to his advocate to apply for withdrawal of the appeal. But the application was not entertained.

The Apex Court Bench noted that the terms and conditions on the FDR mandates all signatories to sign for the premature encashment. The essence of the complaint of the appellant is that there was a deficiency on the part of the respondent bank in proceeding to credit the proceeds of a joint FD exclusively to the account of his father. The SCDRC ought to have determined whether the complaint related to deficiency of service as defined under the Consumer Protection Act. The SCDRC erred in considering it to be a dispute between father and son and thus, declining to entertain the consumer complaint based on merits, the Supreme Court observed. It ordered that the consumer complaint was maintainable and set aside the earlier orders passed by the NCDRC. The case was referred back to the NCDRC and NCDRC was directed to dispose of the case based on merits within four months. Source: Live Law

ஆன்லைன் மோசடிகளுக்கு புகார் அளிக்க இலவச தொலைபேசி எண் - சைபர் கிரைம் போலீசார் தகவல்

ஒரு நுகர்வோரின் பாஸ்போர்ட் மற்றும் தனிப்பட்ட தகவல்கள் ஹேக்கர்களின் கைகளுக்கு கிடைக்கும் பொழுது சம்பந்தப்பட்ட நபரின் பேங்க் அக்கவுண்டில் இருந்து மிக எளிதாக பணத்தை திருடுவதால் பலரும் பணத்தை இழந்து என்ன செய்வதென்று தெரியாமல் தவிக்கின்றனர். இதுபோன்ற சம்பவங்களில் பாதிக்கப்பட்ட நபர்கள் தனது முழு பணத்தையும் திரும்பப் பெற 1930 என்ற எண்ணில் தொடர்பு கொண்டு ஆன்லைன் மோசடி குறித்து புகார் தெரிவித்தால் அவர்களது புகார்கள் மீது உடனடியாக நடவடிக்கை எடுக்கப்படும் என்று சைபர் கிரைம் போலீசார் தகவல் தெரிவித்துள்ளனர். Source: Dinakaran

TRAI releases Telecom Subscription Data as on 31st July, 2022 '

| Highlights of Telecom Subscription Data as on 31st July, 2022 | | | |
|---|----------|----------|----------------------------------|
| Particulars | Wireless | Wireline | Total (Wireless+ Wireline) |
| Total Telephone Subscribers (Million) | 1148.03 | 25.63 | 1173.66 |
| Net Addition in July, 2022 (Million) | 0.64 | 0.06 | 0.70 |
| Monthly Growth Rate | 0.06% | 0.24% | 0.06% |
| Urban Telephone Subscribers (Million) | 626.74 | 23.66 | 650.40 |
| Net Addition in July, 2022 (Million) | 1.25 | 0.06 | 1.31 |
| Monthly Growth Rate | 0.20% | 0.25% | 0.20% |
| Rural Telephone Subscribers (Million) | 521.29 | 1.97 | 523.26 |
| Net Addition in July, 2022 (Million) | -0.61 | 0.002 | -0.61 |
| Monthly Growth Rate | -0.12% | 0.11% | -0.12% |
| Overall Tele-density*(%) | 83.25% | 1.86% | 85.11% |
| Urban Tele-density*(%) | 129.88% | 4.90% | 134.78% |
| Rural Tele-density*(%) | 58.15% | 0.22% | 58.37% |
| Share of Urban Subscribers | 54.59% | 92.31% | 55.42% |
| Share of Rural Subscribers | 45.41% | 7.69% | 44.58% |
| Broadband Subscribers (Million) | 777.95 | 29.47 | 807.42 |

Source: TRAI



CAG is a 36 year old non profit, non political, professional organization working towards protecting citizen's rights in consumer and environmental issues and promoting good governance including transparency, accountability and participatory decision making.

The complaints cell at CAG addresses specific problems of consumers. Also CAG regularly conducts consumer awareness programmes for schools, colleges and special target groups.

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