



GOVERNMENT OF KERALA

Social Welfare (A) Department

NOTIFICATION*

G. O. (P) No. 13/2000.

Dated, Thiruvananthapuram, 19th June, 2000.

S. R. O. No. 603/2000.—In exercise of powers conferred by sub-section (1) read with sub-section (2) of Section 73 of the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, (Central Act 1 of 1996), the Government of Kerala hereby make the following rules, namely:—

RULES

CHAPTER I

PRELIMINARY

1. *Short title and commencement.*—(1) These rules may be called “The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Kerala Rules, 2000”.

(2) They shall come into force at once.

2. *Definitions.*—In these rules, unless the context otherwise requires:—

(a) “Act” means the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (Central Act 1 of 1996);

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GCPT/16/1050/2012/DTP.

(b) "chairperson" means a Chairperson of the State Co-ordination Committee or as the case may be the State Executive Committee;

(c) "member" means a member of the State Co-ordination Committee or as the case may be the State Executive Committee;

(d) "member-secretary" means a member-secretary of the State Co-ordination Committee or as the case may be the State Executive Committee;

(e) "notification" means the notification published in the official Gazette;

(f) "rules" means rules made under the Act;

(g) "section" means a section of the Act;

(h) "year" means the financial year;

(i) HE—Words and expressions not defined in the rules but defined in the Act shall have the same meaning respectively assigned to them under the Act.

CHAPTER II

EVALUATION OF VARIOUS DISABILITIES

3. *Guidelines for Evaluation of Various Disabilities.*—The Guidelines for evaluation of various disabilities as published in Gazette of India, Part I, Section I No. 4-2/83-HW-III dated 6th August, 1986 Government of India, Ministry of Welfare, and as may be amended from time to time, shall be followed for evaluation of various disabilities mentioned in clauses (b), (e), (i), (l), (n), (o), (q), (r), (t) and (u) of section 2 of the Act which is annexed as Annexure 'A' to these rules.

4. *Authorities to give Disability Certificate.*—A Disability Certificate shall be issued by a Medical Board duly constituted by the State Government. The State Government shall constitute a Medical Board at every District Headquarters consisting of at least three members out of which at least one may be a specialist in the particular field for assessing the disability. The Medical Board shall issue the Disability Certificate within one month of the date of receipt of the application.

5. *Disability Certificate.*—(1) The Medical Board may after due examination, give a Permanent Disability Certificate in cases of such permanent disabilities where there are no chances of variation in the degree of disability. Wherever there is any chance of variation in the degree of disability, the Medical Board may indicate the period of validity in the Certificate.

(2) The form of application for certificate of disability and the form of Disability Certificate, are annexed as Annexure 'B' to these rules.

6. *Validity of the Certificate.*—The Certificate issued under the above rule shall be valid for whole of the country except the State of Jammu and Kashmir and may make a person eligible to apply for facilities, concessions and benefits admissible under any scheme of Government or Non-Governmental Organisations, subject to such conditions as the Central or the State Government may impose from time to time.

7. *Appellate Medical Board.*—The State Government shall also appoint an Appellate Medical Board to resolve any dispute. The Superintendent, Medical College Hospital, Thiruvananthapuram shall be the Chairman of the Appellate Medical Board and the Professor and Head of the Department, Physical Medicine and Rehabilitation, Medical College, Thiruvananthapuram and the Professor and Head of the Department of the concerned speciality, Medical College, Thiruvananthapuram shall be the members.

CHAPTER III

THE STATE CO-ORDINATION COMMITTEE

8. *Membership Roll.*—The Member-Secretary shall keep a record of names of members and their addresses.

9. *Change of Address.*—If a member changes his address, he shall inform his new address to the Member-Secretary who shall thereupon enter his new address, in the official records but if he fails to inform his new address, the address in the official records shall for all purpose be deemed to be member's correct address.

10. *Daily and Travelling Allowances.*—(1) Non-official members of the State Co-ordination Committee resident at State Headquarters, shall be paid an allowance of Rs. 125 for each day of the actual meetings of the State Co-ordination Committee.

(2) Non-official members of the State Co-ordination Committee, not resident at State Headquarters, shall be paid daily and travelling allowances for each day of the actual meetings admissible to Grade I Officer of the State Government.

Providing that in case of a Member of State Legislature who is also a member of the State Co-ordination Committee, the said daily and travelling allowances shall be paid at the rates admissible to him as member of State Legislature, when the Legislature is not in session and on production of a certificate by the member that he has not drawn any allowance for the same journey and halts from any other Government source.

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11. *Notice of meetings.*—(1) The meetings of the State Co-ordination Committee shall ordinarily be held at the State Headquarters on such dates as may be fixed by the Chairperson:

Provided that it shall meet at least once in every six months.

(2) The Chairperson shall, upon the written request of not less than ten members of the State Co-ordination Committee, call a special meeting of the State Co-ordination Committee.

(3) Fifteen clear days' notice of an ordinary meeting and five clear days' notice of a special meeting specifying the time and the place at which such meeting is to be held and the business to be transacted thereat, shall be given by the Member-Secretary to the members.

(4) Notice of a meeting may be given to the members by delivering the same by messenger or sending it by registered post to his last known place of residence or business or in such other manner as the Chairperson, may, in the circumstances of the case, thinks fit.

(5) No member shall be entitled to bring forward for the consideration of the meeting any matter of which he has not given ten clear days' notice to the Member-Secretary, unless the Chairperson, in his discretion, permits him to do so.

(6) (a) The State Co-ordination Committee may adjourn its meetings from day to day or to any particular day.

(b) Where a meeting of the State Co-ordination Committee is adjourned from day to day, notice of such adjourned meeting shall be given to the members available in the city, town, or other place where the meeting which is adjourned if held, either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(c) Where a meeting of the State Co-ordination Committee is adjourned not from day to day but from the day on which the meeting is to be held to another date, notice of such meeting shall be given to all the members as provided in sub-rule (4).

12. *Presiding Officer.*—The Chairperson shall preside at every meeting of the Board at which he is present, and in his absence, the members present shall elect one of the members to preside at that meeting.

13. *Quorum.*—(1) One-third of the total members shall form the quorum for any meeting.

(2) If at any time fixed for any meeting or during the course of any meeting less than one-third of the total members are present, the Chairperson may adjourn the meeting to such hours on the following or on some other future date as he may fix.

(3) No quorum shall be necessary for the adjourned meeting.

(4) No matter, which had not been on the agenda of the original meeting, shall be discussed at such adjourned meeting.

(5) (a) Where a meeting of the State Co-ordination Committee is adjourned under sub-rule (2) for want of quorum to the following day, notice of such adjourned meeting shall be given to the members available in the city, town or other place where the meeting which is adjourned is held, either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(b) Where a meeting of the State Co-ordination Committee is adjourned under sub-rule (2) for want of quorum not to the following date with sufficient gap, notice of such adjourned meeting shall be given to all the members as provided in sub-rule (4) of rule 11.

14. *Minutes.*—(1) Record shall be kept of the names of members who attend the meeting and of the proceedings at the meeting in a book to be maintained for that purpose by the Member-Secretary.

(2) The minutes of the previous meeting shall be read at the beginning of every succeeding meeting, shall be confirmed and signed by the presiding officer at such meeting.

(3) The proceedings shall be open to inspection by any member at the office of the Member-Secretary during office hours.

15. *Absence from meetings of State Co-ordination Committee.*—Any non-official member of the State Co-ordination Committee absents himself from three consecutive meetings without leave of the Chairperson shall cease to be a member of the State Co-ordination Committee.

16. *Maintaining order at meeting.*—The presiding officer shall maintain order at the meeting.

17. *Business to be transacted at meeting.*—Except with the permission of the presiding officer, no business which is not entered in the agenda or of which notice has not been given by a member under sub-rule (5) of rule 11, shall be transacted at any meeting.

18. *Agenda.*—At any meeting business shall be transacted in the order in which it is entered in the Agenda, unless otherwise resolved in the meeting with the permission of the Chair.

19. *Decision by majority.*—All questions considered at a meeting of the committee shall be decided by a majority of votes of the members present and voting and in the event of equality of votes, the Chairperson, or in the absence of Chairperson, the member presiding at the meeting, as the case may be, shall have casting vote.

20. *No proceeding to be invalid due to vacancy or any defect.*—No proceeding of the State Co-ordination Committee shall be invalid merely by reasons of existence of any vacancy or any defect in the constitution of the Committee.

CHAPTER IV

THE STATE EXECUTIVE COMMITTEE

21. *Daily and Travelling Allowances.*—(1) Non-official members of the State Executive Committee, resident at State Headquarters, shall be paid an allowance of Rs. 125 per day for each day of the actual meetings of the State Executive Committee.

(2) Non-official members of the State Executive Committee, not resident at State Headquarters, shall be paid daily and travelling allowances for each day of the actual meetings admissible to a Grade I Officer of the State Government.

22. *Notice of meetings.*—(1) The meetings of the State Executive Committee shall ordinarily be held at the State Headquarters, on such dates as may be fixed by the Chairperson:

Provided that it shall meet at least once in every three months.

(2) The Chairperson shall, upon the written request of not less than ten members of the State Executive Committee, call a special meeting of the State Executive Committee.

(3) Fifteen clear days' notice of an ordinary meeting and five clear days' notice of a special meeting specifying the time and the place at which such meeting is to be held and the business to be transacted thereat, shall be given by the member-Secretary to the members.

(4) Notice of a meeting may be given to the members by delivering the same by messenger or sending it by registered post to his last known place of residence or business or in such other manner as the Chairperson, may, in the circumstances of the case, thinks fit.

(5) No member shall be entitled to bring forward for the consideration of the meeting any matter of which he has not given ten clear days' notice to the Member-Secretary, unless the Chairperson, in his discretion, permits him to do so.

(6) (a) The State Executive Committee may adjourn its meetings from day to day or to any particular day.

(b) Where a meeting of the State Executive Committee is adjourned from day to day, notice of such adjourned meeting shall be given to the members available in the city, town or other place where the meeting which is adjourned if held, either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(c) Where a meeting of the State Executive Committee is adjourned not from day to day but from the day on which the meeting is to be held to another date, notice of such meeting shall be given to all the members as provided in sub-rule (4).

23. *Presiding Officer.*—The Chairperson shall preside at every meeting of the Board at which he is present, and in his absence, the members present shall elect one of the members to preside at that meeting.

24. *Quorum.*—(1) One-third of the total members shall form the quorum for any meeting.

(2) If at any time fixed for any meeting or during the course of any meeting less than one-third of the total members are present, the Chairperson may adjourn the meeting to such hours on the following or on some other future date as he may fix.

(3) No quorum shall be necessary for the adjourned meeting.

(4) No matter which had not been on the agenda of the original meeting shall be discussed at such adjourned meeting.

(5) (a) Where a meeting of the State Executive Committee is adjourned under sub-rule (2) for want of quorum to the following day, notice of such adjourned meeting shall be given to the members available in the city, town or other place where the meeting which is adjourned is held, either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(b) Where a meeting of the State Executive Committee is adjourned under sub-rule (2) for want of quorum not to the following date but to another date, notice of such adjourned meeting shall be given to all the members as provided in, sub-rule (4) of rule 22.

25. *Minutes.*—(1) Record shall be kept of the names of members who attend the meeting and of the proceedings at the meeting in a book to be maintained for that purpose by the Member-Secretary.

(2) The minutes of the previous meeting shall be read at the beginning of every succeeding meeting, shall be confirmed and signed by the presiding officer at such meeting,

(3) The proceedings shall be open to inspection by any member at the office of the Member-Secretary.

26. *Absence from meetings of State Executive Committee.*—Any non-official member of the State Executive Committee absenting himself from three consecutive meetings without leave of the Chairperson shall cease to be a member of the State Executive Committee.

27. *Maintaining order at meeting.*—The presiding officer shall maintain order at the meeting.

28. *Business to be transacted at meeting.*—At any meeting business shall be transacted in the order in which it is entered in the agenda, unless otherwise resolved in the meeting with the permission of the Chair.

29. *Decision by majority.*—All questions considered at a meeting of the committee shall be decided by a majority of votes of the members present and voting and in the event of equality of votes, the Chairperson, or in the absence of Chairperson, the member presiding at the meeting, as the case may be, shall have casting vote.

30. *No proceeding to be invalid due to vacancy or any defect.*—No proceedings of the State Executive Committee shall be invalid merely by reasons of existence of any vacancy in or any defect in the constitution of the committee.

31. *Manner and purpose of Association of persons with State Executive Committee.*—(1) The State Executive Committee may invite any person, whose assistance to advice, if considered useful in performing any of his functions, to participate in the deliberations of any of its meetings.

(2) If the persons associated with the State Executive Committee under sub-rule (1) happens to be a non-official, resident at the State Headquarters, he shall be entitled to get an allowance of Rs.125 per day for each day of actual meeting of the State Executive Committee in which he is so associated.

(3) If such a person is not resident at the State Headquarters, he shall be paid daily and travelling allowances for each day of the actual meeting admissible to a Grade I Officer of the State Government.

(4) If such person is a Government servant, or an employee in a Government undertaking, he shall be entitled to travelling and daily allowances only at the rates admissible under the relevant rules applicable to him on production of a certificate by him that he has not drawn any such allowance for the same journey and halts from any other Government source.

32. *Fee for the associated person.*—The State Executive Committee may pay the person associated with the Committee, with the prior approval or to the State Government such fees as considered appropriate depending on the nature of work assigned under Section 22, and the qualifications and experience of the associated person:

Provided that the State Executive Committee shall not associate any person without the prior approval of the State Government, if the period of association exceeds four months or fees payable to him exceeds Rs. 3000 per month.

33. *Associated person not to disclose any information.*—The associated person shall not disclose any information either given by the State Executive Committee or obtained during the performance of the duties assigned to him either from the State Executive Committee or otherwise, to any person other than the State Executive Committee without the written permission of the Chairperson of the Committee.

34. *Duties and functions of the associated person.*—The associated person shall discharge such duties and perform such functions as are assigned to him, by the State Executive Committee.

EMPLOYMENT

35. *Notification of vacancies to the Special Employment Exchanges.*—(1) Vacancies in posts of a technical and scientific nature occurring in establishments in respect of which the State Government is the appropriate Government under the Act shall be notified to such Special Employment Exchanges as may be specified by the State Government by notification in the Official Gazette in this behalf.

(2) Vacancies other than those specified in sub-rule (1) shall be notified to the local Special Employment Exchange concerned.

36. *Form and manner of notification of vacancies.*—The vacancies shall be notified in writing to the appropriate Special Employment Exchange, and the following particulars shall be furnished, where practicable, in respect of each type of vacancy:—

- (1) Name and address of the employer
- (2) Telephone number of the employer, if any
- (3) Nature of vacancy—
 - (a) Type of workers required (Designation)
 - (b) Description of duties
 - (c) Qualifications required
 - (i) Essential
 - (ii) Desirable
 - (d) Age limits, if any
 - (e) Whether women are eligible?
- (4) Number of vacancies—
 - (a) Regular
 - (b) Temporary
- (5) Pay and allowances
- (6) Place of work (name of town/village and district in which it is situated)
- (7) Probable date by which the vacancy will be filled.

(8) Particulars regarding interview/test of applicants—

- (a) Date of interview/test
- (b) Time of interview/test
- (c) Place of interview/test
- (d) Designation and address of the person to whom applicants should report.

(9) Whether there is any obligation or arrangement for giving preference to the Physically Handicapped persons in filling up the vacancies, and if so, the number of vacancies to be filled by such persons.

(10) Any other relevant information—

The vacancies shall be re-notified in writing to the appropriate Special Employment Exchange if there is any change in the particulars already furnished to the Special Employment Exchange under sub-rule (1) of rule 35.

37. *Time limit for the notification of vacancies.*—(1) Vacancies, required to be notified to the local Special Employment Exchange, shall be notified at least fifteen days before the date on which applicants may be interviewed or tested where interviews or tests are held, or the date on which vacancies are intended to be filled, if no interviews or tests are held.

(2) Vacancies, required to be notified to the Special Employment Exchange notified under sub-rule (1) of rule 35 shall be notified at least four weeks before the date on which applicants may be interviewed or tested where interviews or tests are held, or the date on which vacancies are intended to be filled, if no interviews or tests are held.

(3) An employer shall furnish to the concerned Special Employment Exchange, the results of selection within fifteen days from the date of selection.

38. *Submission of Returns.*—An employer shall furnish to the local Special Employment Exchange quarterly returns in Form I and biennial returns in Form II, as may be amended from time to time. Quarterly returns shall be furnished within thirty days of the due dates, namely, 31st March, 30th June, 30th September and 31st December. Biennial return shall be furnished within thirty days of the due date as notified in the official Gazette.

39. *Form in which record to be kept by an employer.*—An employer shall maintain the record of employees with disabilities in Form III, as may be amended from time to time.

RECOGNITION OF INSTITUTIONS FOR PERSONS WITH DISABILITIES

40. *The form of application.*—Every application for a certificate of registration shall be made in Form IV and the certificate granted shall be in Form V.

41. *Order refusing to Grant Certificate.*—The competent authority may, after giving the applicant reasonable opportunity of being heard, make an order refusing to grant a certificate. Such order shall contain specific reasons for refusal to grant such a certificate and shall be communicated to the applicant through registered post.

42. *Validity of Certificate of Registration.*—A certificate of registration granted under Section 52 shall, unless revoked under Section 53, remain in force for a period of three years.

43. *Appeal.*—A person aggrieved by the order of the competent authority refusing to grant a certificate or revoking a certificate may, within a period of thirty days from the date of such order prefer an appeal to the Government against such refusal or revocation:

Provided that the Government may entertain an appeal after the expiry of the said period of thirty days if it is satisfied that there was sufficient cause for not filing it within that period.

CHAPTER VII

COMMISSIONER FOR PERSONS WITH DISABILITIES

44. *Procedure to be followed by Commissioner.*—(1) A Complaint containing the following particulars shall be presented by the complainant in person or by his agent to the Commissioner of persons with disabilities or be sent by registered post addressed to the Commissioner—

- (a) the name, description and the address of the complainant;
- (b) the name, description and the address of the opposite party or parties, as the case may be, so far as they can be ascertained;
- (c) the facts relating to complaint and when and where it arose;
- (d) documents in support of the allegations contained in the complaint; and
- (e) the relief which the complainant claims.

(2) The Commissioner on receipt of a complaint shall refer a copy of the complaint to the opposite party/parties mentioned in the complaint directing him to give his version of the case within a period of thirty days or such extended reasonable period as may be granted by the Commissioner.

(3) On the date of hearing or any other date to which hearing could be adjourned, it shall be obligatory on the parties or their agents to appear before the Commissioner. Whether the complainant of his agent fails to appear before the Commissioner on such days, the Commissioner may in his discretion either dismiss the complaint on default or decide on merits. Where the opposite party or his agent fails to appear on the date of hearing, the Commissioner may take such necessary action under section 63 of the Act as he deems fit for summoning and enforcing the attendance of the opposite party. He may, however, decide to dispose of the complaint ex-parte also.

(4) The Commissioner may on such terms as he deems fit and at any stage of the proceedings, adjourn the hearing of the complaint. But the complaint shall be decided, as far as possible, within a period of three months from the date of notice received by the opposite party.

45. *Salary and Allowances of the Commissioner.*—The Commissioner for Persons with Disabilities shall be entitled to salary, allowances and other perquisites as are available to Secretary to the State Government.

46. *Submission of Report to the State Government.*—The Commissioner shall submit report to the State Government on the implementation of the Act under Section 61 (d) of the Act at the interval of six months in such a manner that atleast two reports are sent in one financial year.

47. *Submission of Annual Report.*—(1) The Commissioner shall, as soon as possible, after the end of the financial year but not later than the 30th day of September in the next year ensuing, prepare and submit to the State Government an annual report giving a true and faithful account of his activities during the said year.

(2) In particular, the annual report referred to in sub-rule (1) shall contain information in respect of each of the following matters, namely:—

- (a) Names of officers of staff of the Board and a chart showing the organisational set up.
- (b) The functions which the Commissioner has been empowered under sections 61 and 62 of the Act and the highlights of the performance in this regard.
- (c) The main recommendations made by the Commissioner.
- (d) Progress made in the implementation of the Act, district-wise.
- (e) Any other matter deemed appropriate for inclusion by the Commissioner or prescribed by State Government from time to time.

FORM II

(See rule 38)

Occupational return to be submitted to the Local Special Employment Exchange once in two years (on a date to be specified by Notification in the Official Gazette).

Name and address of the employer.....

Nature of business.....

(describe what the establishment makes or does as its principal activity)

1. Total number of persons on the pay rolls of the establishment on (specify date).....
(This figure should include every person whose wage or salary is paid by the establishment). (Separate figures for men with disability and women with disability may be given)
2. Occupational classification of all employees as given in item 1 above (Please give below the number of employees in each occupation separately).

Occupation	Number of employees			
	Men with disability	Women with disability	Total	Please give as far as possible approximate number of vacancies in each occupation you are likely to fill during the next calendar year due to retirement
Use exact terms, such as Engineer (Mechanical); Teacher (Domestic/Science); Officer on duty (Actuary); Assistant Director (Metallurgist); Scientific Asst. (Chemist); Research Officer (Economist); Instructor (Carpenter); Supervisor (Tailor); Fitter (Internal combustion engine) Inspector (Sanitary); Superintendent (Office); Apprentice (Electrician).				

(1) (2) (3) (4) (5)

Total

Signature of Employer

Dated.....

To

The Employment Exchange.....

(Please fill in here the address of your Local Special Employment Exchange)

Note:—Total of Col. 4 under item 2 should correspond to the figures given against item-1.

FORM III

(See rule 39)

1. Name and address of the employer.....
2. Whether Head Office.....
Branch Office.....
3. Nature of business/principal activity.....
4. Total number of persons on the pay-roll of the establishment (this figure should include every person whose wage or salary is paid by the establishment)
5. Total number of disabled persons (disability-wise) on the pay-roll of the establishment (this figure should include every person with disability whose wage or salary is paid by the establishment).
6. (a) Occupational qualification of all employees as given in item-5 above.
(Please give below the number of employees in each occupation separately).

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Occupation	Number of employees			
	Men with disability	Women with disability	Nature and extent of disability	Total
Use exact terms such as Engineer (Mechanical); Teacher (Domestic/Science); Officer on duty (Actuary); Assistant Director (Metallurgist); Scientific Asst. (Chemist); Research Officer (Economist); Instructor (Carpenter); Supervisor (Tailor); Fitter (Internal combustion engine); Inspector (Sanitary); Superintendent (Office); Apprentice (Electrician).	(1)	(2)	(3)	(4)
				(5)

Total:

(b) Please indicate the main reasons for any increase or decrease in employment if the increase or decrease is more than 5% during the quarter

.....

7. *Vacancies*.—Vacancies carrying total emoluments of Rs. 60 or over per month and of over three months duration.

(a) Number of vacancies occurred and notified during the quarter and the number filled during the quarter.

Number of vacancies which come within the purview of the Act.				
Occurred	Notified		Filled	Sources (Describe the source from which filled)
	Local Spl. Emp.	Exchange	G.E.E.	
(1)	(2)	(3)	(4)	(5)
Total				

(b) Reasons for not notifying all vacancies occurred during the quarter under report vide 2 (a) above.....

8. Manpower Shortages

Vacancies/posts unfilled because of shortage of suitable applicants.

Name of the occupation or designation of the post	Number of unfilled vacancies/posts			
	Essential qualification	Essential experience	Experience not necessary	
(1)	(2)	(3)	(4)	

Please list any other occupations for which this establishment had recently any difficulty in obtaining suitable applicants.

Signature of Employer

FORM IV
(See rule 40)

APPLICATION FOR A CERTIFICATE OF REGISTRATION

1. Name of the applicant Organisation :
2. Address and Phone Number :
3. Applicant is :
 - (a) An organisation registered under the Charitable Societies Registration Act, 1860 (Act XXI of 1860)
 - (b) A Public Trust registered under any Law for the time being in force
 - (c) Indian Red Cross Society or its branches
 - (d) Company registered under Section 25 of the Companies Act, 1956
 - (e) Any other organisation (details of the registration with the name of the Act) which may be recognised by the Ministry for the purpose of this Scheme (Details of registration with the name of the Act)
4. Date of establishment of the Organisation :
5. Nature of the organisation. (Please indicate precisely whether it is educational or training institution or a workshop for the blind, the deaf and dumb, the orthopaedically handicapped or mentally retarded persons, etc.)
6. Brief history of the organisation and of its objects and activities :

7. Whether recognised by the State Government :
8. Whether the organisation is of an All India Character. If so, give the nature of it All India activities :
9. Whether located in its own/rented building :
10. Present number of disabled beneficiaries :
11. Likely dates of commencement and completion of project :
12. Whether the project is likely to be assisted by some other official or non-official source :
13. Whether necessary land for the proposed building is available. If so, give details. (Please indicate the location of the plot and enclose permission certificate for construction from the competent authority, etc.) :
14. (a) Whether trained staff and other suitable facilities for undertaking the project are available. If so, give details.
(b) In case new staff is to be appointed, give details of the qualifications, academic, professional and experience prescribed for the purpose.
(c) Number of the employees working in the Organisation :
15. List of papers/statements to be attached :
 - (a) Prospectus or a brief descriptive note giving aims and objects/activities of the Organisation;
 - (b) Constitution of the Organisation;
 - (c) Constitution of the Board of Management with particulars of each Member;

(d) Latest available annual report;

(e) Income and Expenditure accounts and Receipt and Payment accounts duly audited by a Chartered Accountant or a Government auditor for the last two years for the Organisation as a whole (along with a copy of the certified balance sheet from the previous financial year for the Organisation as whole);

(f) A statement giving details (year, purpose, amounts, etc.) of assistance received during the last five years from the Central/State Government, Central Social Welfare Board, Local Bodies or any other quasi-Government institution including requests made thereof to any one of those or any other Organisation for the projects under consideration or for any other project;

(g) A statement giving item-wise and year-wise details of estimated recurring and non-recurring expenditure on the project;

(h) A copy of the plan of the proposed building (rough sketch giving broad indication of the building to be constructed and area to be covered) and estimated cost of construction;

(i) A statement indicating the equipments apparatus, furniture, library books, etc. (by number of details whichever is possible) already available; and separately a statement indicating the above items purchased year-wise with financial assistance from the Ministry of Welfare; and

(j) Details of budget estimates of the Organisation as a whole exhibiting the estimated receipts and expenditure during the year for which grant sought for.

16. List of additional papers, if any;

17. List of additional information, if any;

FORM V

(See rule 40)

CERTIFICATE OF REGISTRATION

1. No. of Certificate of recognition
2. Name and Full Address of the Institution
3. Name and Full Address of the Manager/NGO
4. Year of establishment of the Institution
5. Nature of the Institution
For (1) Persons with Blindness/Low vision
(2) Persons with Hearing impairment
(3) Persons with Locomotor Disability
(4) Persons with Mental Retardation
(5) Persons with multiple Disabilities
6. Maximum number of inmates that can be admitted
7. Minimum standards regarding
Boarding/Lodging/Clothing/Sanitation
Health and hygiene etc.
(a) Boarding .. Food that would keep the Health
(b) Lodging .. Each child 18 Sq. ft. for sleeping
(c) Sanitation .. Health and Hygiene—Medical certificate to be furnished each year
(d) Clothing .. Proper clothing
8. The Standard of education or : Compulsory elementary education for all persons with Disabilities who are within the school age attending the Institution and vocational training according to the aptitude and convenience.

Thiruvananthapuram,
Date :

Competent authority

Seal

1. This certificate is granted subject to the provisions of the persons with disabilities (Equal Opportunities, Protection of Rights and Full participation) Act, 1995.

2. The certificate shall not be transferable.

3. The certificate shall remain in force for three years from the date of issue, unless revoked.

ANNEXURE 'A'

(See rule 3)

(To be Published in the Gazette of India Part I Section I)

No. 4-2/83-HW. III

GOVERNMENT OF INDIA

Ministry of Welfare

Dated, 6th August, 1986.

Subject :—Uniform Definitions of the Physically Handicapped.

At present, different definitions for various categories of handicapped are adopted in various schemes/programmes of the Central and State Governments. In order to have a standard set of definitions, authorised certification authorities and standard tests for purpose of objective certification, Government of India in Ministry of Welfare set up three committees under the Chairmanship of Director General of Health Services—one each in the area of visual handicaps, speech and hearing disorders and locomotor disabilities and a separate committee for mental handicaps.

2. After having considered the reports of these committees and with the concurrence of the State Governments/UTs and the concerned Ministries/Departments the undersigned is directed to convey the approval of the President to notify the definitions of the following categories of physically handicapped :—

- (1) Visually handicapped
- (2) Locomotor handicaps
- (3) Speech and hearing handicaps
- (4) Mental handicaps

3. Each category of handicapped persons has been divided into four groups viz. mild, moderate, severe and profound/total. It has been decided that various concessions/benefits would in future be available only to the moderate, severe and profound/total groups; and not to the mild groups. The minimum degree of disability should be 40 % in order to be eligible for any concession/benefits.

4. It has been decided that the authorised certifying authority will be a medical board at the district level. The board will consist of the Chief Medical Officer/Sub Divisional Medical Officer in the District and another expert in the specified field viz. ophthalmic surgeon in case of visual handicaps, either an ENT surgeon or an audiologist in case of speech and hearing handicaps; an orthopaedic surgeon or a specialist in physical medicine and rehabilitation in case of locomotor handicaps; a psychiatrist or a clinical psychologist or teacher in special education in case of mental handicaps.

5. Specified tests as indicated in Annexure should be conducted by the medical board and recorded before a certificate is given.

6. The certificate would be valid for a period of three years.

7. The State Govts./UT Admn. may constitute the medical boards indicated in para 4 above immediately.

M. C. NARASIMHAN,

Joint Secretary to the Government of India.

ORDER

Ordered that the above notification be published in the Gazette of India for general information. Copies of the Gazette notification may be sent to all Ministries/Department of the Central Government, all State Governments/UT Admn. President Sectt. P.M.'s. Office, Lok Sabha, Rajya Sabha Sectt. for information and necessary action.

M. C. NARASIMHAN,

Joint Secretary to the Government of India.

To

The Manager,
Government of India Press,
Mayapuri, New Delhi.

Combine Report of the three Committee recommending uniform set of definitions, authorities for certification and standard tests for visual, hearing and speech and locomotor disabilities.

List of the Member of the Committees of Annexure I.

Introduction

India is a vast country with variable social, cultural, geographical and economic background. Despite breakthrough on health services a number of disabilities continue to appear due to polio communicable and congenital diseases. Increased industrialization and mechanization, vehicular traffic leading to locomotor disabilities; vitamin—A deficiency, cataract and infections, injuries, nutritional deficiency leading to visual loss; ear infection, external injuries, noise pollution contributing to hearing loss. These are the three major disabilities, which manifest themselves as a result of one or more of such factors

1. Government of India are providing a large number of facilities and concessions to disabled persons. In order to provide these facilities and concessions it is imperative that a standard definition of these disabilities decided upon. Consequently to recommendation of the National Council for Handicapped Welfare the committees under the Chairmanship of Director General of Health Services met for the adoption of standard set of definitions which should be uniformly applicable through out the country.

The exercise of evolving a uniform set of definition should not be however construed to mean that no definitions have been set forth at present. Definitions of these three major disabilities which are prevalent at present for extending various concessions and facilities to handicapped are given in Annexure II.

Recommended definitions

Physical impairment leads to functional limitation and functional limitation leads to disability. Physical impairment, functional limitation and disability have been defined by W.H.O. and this committee would recommend adopting this classification, which is as follows:—

(i) *Impairment*.—An impairment is a permanent or transitory psychological, or anatomical loss and/or abnormality. For example a missing or effective part, tissue organ or "mechanism" of the body, such as an amputated limb, paralysis after polio, myocardial infarction, cerebrovascular thrombosis, restricted pulmonary capacity, diabetes, myopia, disfigurement, mental retardation, hypertension, perceptual disturbance.

(ii) *Functional limitation*.—Impairment may cause functional limitations which are the partial or total inability to perform those activities necessary for motor, sensory or mental functions within the range and manner of which a human being is normally capable such as walking, lifting loads, seeing, speaking, hearing, reading, writing, counting, talking interest in and

making contact with surroundings. A functional limitation may last for a short time a long time be permanent or reversible. It should be quantifiable whenever possible. Limitation may be described as "Progressive or regressive."

(iii) *Disability*.—Disability is defined as an existing difficulty in performing one or more activities which, in accordance with the subject's age, sex and morative social role, are generally accepted as essential, basic components of daily living, such as self-care, social relations and economic activity. Depending in part on the duration of the functional limitation disability may be short-term, long-term or permanent.

Medically, disability is physical impairment and inability to perform physical functions normally. Legally, disability is a permanent injury to body for which the person should or should not be compensated.

The disability can be divided into 3 periods.

(i) Temporary total disability is that period in which the affected person is totally unable to work. During this time he may receive orthopaedic, ophthalmological auditory or speech or any other medical treatment.

(ii) Temporary partial disability is that period when recovery has reached the stage of improvement so that person may begin some kind gainful occupation.

(iii) Permanent disability, applies to permanent damage or loss of use of some part/parts of the body after the stage of maximum improvement from any medical treatment has been reached and the condition is satisfactory.

The classification 7 various concessions being recommended are for the permanent disability only.

1. Evaluation and Assessment of Visual Disabilities

The group recommended the classification of visual impairment/disability may be categorized in four groups for consideration/concessions to visually handicapped:

The question regarding one-eyed person was considered at length. The committee is of the view that the guidelines recommended for evaluation of visual loss of persons who have lost one eye but have the other eye normal should be totally unambiguous. The committee feels that such persons may not be clubbed with other visually handicapped so that facilities/concessions available to severely/profoundly visually handicapped and totally-blind are not eroded. If one eyed persons are clubbed with severely/profoundly visually handicap and totally blind persons, the committee feels that most of the concess especially

jobs reserved for the blind persons shall go to one eyed persons as their visual loss is minimal compared to other 2 categories and in this manner most of the Government officers/public sector undertakings will be fulfilling the quota but in actual practice will not be given to totally blind and persons with severe visual loss. The committee, however feels that it should be made clear the loss of one eye will not be considered as a disqualification on medical grounds unless a partial post is of such a technical nature that it requires of a person the use of both eyes or 3 dimensional vision. The committee also recommends if a person has been declared unfit due to some temporary visual loss/defect, it should not be construed to mean as disabled if such a temporary impairment in the opinion of a Medical Board can be overcome with treatment or visual aids.

Guidelines for evaluation and categorization of visual disabilities are given in Appendix III.

2. *Evaluation and Assessment of Hearing and Speech Disability*

The committee recommended that the definitions which are internationally accepted and have been adopted by WHO may be adopted in this country also for evaluation and categorization of hearing and speech loss.

The recommended classification and guidelines for evaluation of hearing loss are given in Appendix II. The committee also considered various facilities/concessions which may be given to hearing handicapped persons and suggestions of the facilities which may be offered to the hearing handicapped for rehabilitation are also given in Appendix II.

3. *Evaluation and Assessment of Orthopaedic disabilities*

The committee recommends that Kessler's method may be taken as a general guideline for evaluating orthopaedic disability. Since issues have been raised regarding the qualification of degree of disability, the authorized Medical Board may also consult any other suitable method and use Kessler's method as a basic guideline.

The committee is aware that there are other methods of quantification which are at variance with the Kessler's guidelines. However, Kessler's/ various degrees of disability. It is expected would held good for most of the time. The individual Medical Board could take into consideration other methods which may help the board in evaluating disability in an individual case.

The Authorities to give Certification

A permanent disability certificate will be issued by a board duly constituted by the Central and the State Governments. It is recommended that a Medical Board for evaluation of disability should be available minimum at the

district level. It is also recommended to have at least 3 members in the board, out of which at least one should be a specialist in the particular field assessing locomotor/visual/hearing 7 speech disability as the case may be.

It is also recommended that the competent authority may also appoint an appellate medical board to resolve any disputes.

Concessions/Facilities which may be offered to disabled persons

Keeping in view the set of definitions and the categorisation being recommended, various Ministries/Departments and the State Governments shall have to also specify the facilities and concessions which would be available to different categories of the handicapped. The Committee recommends that if a person has the degree of disability below 40% in a particular category, no such benefits/concessions may be given to such a person. All other categories may be extended concessions/facilities like scholarships, job reservation; aids and appliances either free of cost or at concessional rates, conveyance allowance etc. For hearing handicapped, the committee recommends that 3 language formula may be revised so that the hearing handicapped have to study one language only.

Guideline for evaluation of welfare

Ministry of Social and Women's may make out proposals based on these recommendations with the appropriate Ministry for necessary modifications in the policy of 3 language formula.

The committee also recommended that Ministry of Health and Family Welfare may also take up amending medical standards for necessary relaxation in respect of mild handicapped in all the categories so that on account of their mild disability, they are not put in a position that neither they are able to get the facility of job reservations nor are eligible otherwise for entering into services in the general category. The medical rules may also indicate in clear terms that loss of one eye will not be considered a disqualification unless the particular post is of such a technical nature that it requires of a person the use of both the eyes or three-dimensional vision. The some medical board at the district level may examine suitability or otherwise of a one eyed persons for a particular post.

The degree and extent of disability of the 3 types, namely, visual, hearing and orthopaedic will be indicated as follows:

(a)	Mild	less than 40%
(b)	Moderate	40% & above
(c)	Severe	75% & above
(d)	Profound/total	100%

For persons suffering from cardio pulmonary diseases, there may be no reservations in jobs. These persons may however, be considered for extending other concessions such as exemption in typing etc.

The Director General of Health Services, Ministry of Health and Family Welfare will be the final authority, should there arise any controversy/doubt regarding the interpretation of the definitions/classifications/evaluation tests etc.

Only those persons who have disability more than 40% and above shall be eligible for registration in Employment Exchange in the category of handicapped and considered against jobs in public sector reserved for the physically handicapped.

ANNEXURE I

Composition of Committee to recommend standard definitions of disabilities

DR. D. B. BISHT,
Director General of Health Services,
Ministry of Health & Family Welfare,
Nirman Bhavan, New Delhi.

Chairman
(of all the three committees)

On Visually Handicapped

1. Dr. Madan Mohan,
Head, Deptt. of Ophthalmology,
All India Institute of Medical Sciences,
New Delhi. Member
2. Dr. G. H. Gidwanl,
Assistant Director General of Health Services,
Ministry of Health & Family Welfare,
Nirman Bhavan, New Delhi. Member
3. Shri R. S. Srivastava,
Joint Director,
Director General of Employment of Training,
Ministry of Labour, Sharam Shakti Bhavan,
New Delhi. Member

4. Director,
National Institute for the Visually Handicapped,
Rajpur Road, Dehradun Member
(Represented by Shri S. R. Shukla, Asst. Director)
5. Dr. G. Venkataswami,
Arvind Eye Hospital, Madura, Tamil Nadu Member
6. Dr. J. M. Pahwa,
Chief Medical Officer,
Gandhi Eye Hospital,
Aligarh Member
7. Shri Harcharanjit Singh,
Under Secretary,
Ministry of Social and Women's Welfare Member Secretary

On Hearing Handicapped

1. Dr. G. H. Gidwanl,
Assistant Director General of Health Services,
Ministry of Health and Family Welfare,
Nirman Bhavan, New Delhi Member
2. Shri R. S. Srivastava,
Joint Director,
Director General of Employment and Training,
Ministry of Labour, Sharam Shakti Bhavan,
New Delhi Member
3. Dr. S. K. Kacker,
All India Institute of Medical Science,
New Delhi Member
3. Dr. Nithya Seelan,
Director,
All India Institute of Speech and Hearing, Mysore Member
4. Dr. Rathna,
Director,
All Yavar Jung Institute of Hearing, Handicapped,
Haji Ali Park, Mehaxmi,
Bombay-400 034, Member
(Represented by Dr. M. N. Nagaraja,
Dy. Director in the meeting on 25-6-84)
8. Shri Harcharanjit Singh,
Under Secretary,
Ministry of Social and Women's Welfare,
New Delhi Member Secretary

On Orthopaedically Handicapped

1. Dr. G. H. Gidwanl,
Assistant Director General of Health Services,
Ministry of Health and Family Welfare,
Nirman Bhavan, New Delhi
2. Shri R. S. Srivastava,
Joint Director,
Director General of Employment and Training,
Ministry of Labour, Sharam Shakti Bhavan,
New Delhi
3. Dr. Natrendra Kumar,
Indian Council of Medical Research,
Ansari Nagar, New Delhi
4. Director,
National Institute of Orthopaedically
Handicapped, B/T Road, Bon Hooghly,
Calcutta
5. Dr. A. K. Mukherjee,
Director,
All India Institute of Physical Medicine and
Rehabilitation, Haji Alo Park, Bombay
6. Dr. S. K. Varma,
Head of Depart. of Physical Medicine and
Rehabilitation, All India Institute of Medical
Science, New Delhi
7. Dr. B. P. Yadav,
Head, Rehabilitation Department,
Safdarjung Hospital,
New Delhi
8. Dr. J. S. Guleria,
Prof. and Head of Deptt. of Medicine
Dean, All India Institute of Medical Science,
New Delhi
9. Shri Harcharanjit Singh,
Under Secretary,
Ministry of Social and Women's Welfare.

Member

Member

Member

Member

Member

Member

Special
InviteeSpecial
InviteeMember
Secretary

ANNEXURE II

1. Visually Handicapped

The definition adopted for visual handicapped for extending the concession, scholarships admission to integrated education system, reservation in jobs, assistance for purchase/fitting of aids and appliances:—

The blind are those who suffer from either of the following conditions,—

- (a) Total absence of sight.
- (b) Visual acuity not exceeding 6/60 or 20/200 (9 snellen) in the better eye with correcting lenses.
- (c) Limitation of the field of vision subtending and angle of degree or worse.

Definition of Hearing Handicapped under various schemes

Scholarships

The deaf are those in whom the sense of hearing is non functional for ordinary purposes of life. They do not hear/understand sound at all even with amplified speech. The cases included in the category will be those hearing loss more than 70 decibels in the better ear (profound impairment) or total loss of hearing in both ears.

Assistance to Disabled Persons for Purchase/Fitting of Aids/Appliances

The partially hearing are those falling under any one of the categories indicated below:—

Category	Hearing Acuity
Mild Impairment	More than 30 but not more than 45 decibels in better ear.
Serious Impairment	More than 45 but not more than 60 decibels in better ear.
Severe Impairment	More than 60 but not more than 90 decibels in the better ear

Reservation Orders issued by Department of Personnel and Administrative Reforms

The deaf are those in whom the sense of hearing is non-functional for ordinary purposes of life. They do not hear understand sounds at all events with amplified speech. The cases included in this category will be those having loss more than 90 decibels in the better ear (profound impairment) or total loss of hearing in both ears.

GCPT/16/1050/2012/DTP.

Locomotor Handicapped

Similarly the definition adopted for orthopaedically handicapped is not uniform as all orthopaedically handicapped are eligible for getting a scholarship but only those orthopaedically handicapped persons can get the facility of reservation in jobs or have a minimum of 40% disability.

Situation in State Governments

Various State Governments have also adopted different sets of definition. For example Government of Tamil Nadu declare one eyed persons in the same category as blind persons and have extended various concessions including the reservation in jobs under the State Government to one eyed person also. The Central Government on the other hand has declared that a one eyed person with one eye good vision is not medically unfit and can be considered for jobs which do not require a three dimensional vision to the specific requirement of the jobs.

Visual impairment disability categories bases on its severity and proposed disability percentages

All with corrections		Percentage impairment
Better eye	Worse eye	
Category 0	6/9-6/18	20%
Category I	6/18-6/36	60%
Category II	6/60-4/60	75%
or field of vision 110-20		
Category III	3/60 to 1/60	
or Field of vision 100		100%
Category IV	F.C. at 1 ft. to Nil	100%
or Field of vision 100		
One eyed persons	6/6	30%

The method of evaluation shall be the same as recommended in handbook of Medical Examination.

Impairment of 20%-40% or less may only be entitled to aids and appliances.

A. Recommendations about the categories and the Tests required

1. Recommended classification

Sl. No.	Category	Type of Impairment	DB level and/or	Speech Discrimination	Percentage of Impairment
1		Mild hearing impairment	DB 26 to 40 db in better ear	ear 80 to 100% in better ear	Less than 40%
2	I	Moderate hearing impairment	41 to 55 dB in better ear	50 to 80% better ear	40% -50%
3	II	Severe hearing impairment	56 to 70 Hearing impairment in better ear	40 to 50%	50-75%
4	V	(a) Total deafness (b) Near Total deafness (c) Profound hearing impairment	No hearing 91 dB and above in better ear 71 to 90 dB	No discrimination do. less than 40% in better ear	100% 100% 75%-100%

(Pure tone average of hearing in 500, 1000 and 2000 Hz by air conduction should be taken as basis for consideration as per the test recommendations.)

Further it should be noted that—

(a) When there is only an island of hearing present in one or two frequencies in better ear, it should be considered as total loss of hearing.

(b) Whenever there is no response (NR) at any of the 3 frequencies, 9500, 1000, 2000 Hz. It should be considered as equivalent to 130 dB loss for the purposes of classification of disability and in arriving at the average. This is based on the fact that maximum intensity limits in most of the audiometers is 110 dB's and tone audiometers has additional facilities for +20 dB for testing.

II. Recommendations about the categories of disability (Hearing impairment—Physical aspect only—test recommended)

(a) Pure tone audiometry (ISO R 382-1970 at present is being used as audiometric standard in most of the audiometers. Hence the audiometers used in testing should be accordingly calibrated). Three frequency average at 500, 1000 and 2000 Hz. by Air Conditions (A.C.) will be used for categorisation.

(b) Whenever possible the pure tone audiometric results should be supplemented by the Speech discrimination score—Tested at sensation level (S.L.) i.e., the speech discriminations test is conducted at—dB above the patient's hearing threshold. The stimuli used be either phonetically balance words (Pb) of the particular language or its equivalent material. At present only a few Indian Languages have standard test material is not available either Standardised Indian English Test could be made use of, with English knowing population or equivalent material to Pb, be used.

(c) Whenever children are tested and pure tone audiometry becomes not possible free field testing should be employed.

B. Suggestions of the facilities to be offered to the disabled for Rehabilitations

Category I No special benefits.

Category II Considered for hearing aids free or concessional costs only.

Category III Hearing aids free of cost or at concessional rates job reservation—benefits of special Employment Exchange.

Scholarships at School: Single language formula.

Category IV Hearing Aids—Facilities of reservation—special employment exchange, Special facilities in schools like scholarship. Hearing aids—Exemption from 3 language formula (to study in recommended single language).

It is felt that for consideration to admission under special category for courses conducted by institutions like Indian Institute of Technology (IIT), Industrial Training Institute (ITI) and others, categories 1 and 2 only should be considered for reservation of seats, provided they fulfill the other educational stipulations for the course.

We have considered the different types of hearing affection i.e., conductive VS sensory neural, and agree that the disability will be judged by the conditions prevalent in the patient at the time of referral and examination. In case of failure of surgery or other therapeutic intervention, the patient will be considered and categorised on the basis of the recommended tests.

APPENDIX V

1. Guidelines for Evaluation of various disabilities

(1) Locomotor Disability

1.1. Upper Limb

1. The estimation of permanent impairment depends upon the measurement of functional impairment, and is not expression of a personal opinion.
2. The estimation and measurement must be made when the clinical condition is fixed and unchangeable.
3. The upper extremity is divided into two component parts the arm component and the hand component.
4. Measurement of the loss of function of arm component consists in measuring the loss of motion, muscle strength and co-ordinated activities.
5. Measurement of the loss of function of hand component consists in determining the Prehension, Sensation and Strength. For estimation of Prehension; Opposition, lateral pinch, cylindrical grasp, spherical grasp and hook grasp have to be assessed as shown in the column of "prehension component" in the pro forma.
6. The impairment of the entire extremity depends on the combination of the functional impairment of both components.

Arm Component

Total value of arm component is 90%

Principles of evaluation of range of motion of joints:

1. The value of maximum R.O.M. in the arm component is 90%.
2. Each of the three joints of the arm is weighted equally (30%).

Example:—A fracture of the right shoulder joint may affect range of motion so that active abduction is 90%. The left shoulder exhibits a range of active abduction of 180%. Hence there is loss of 50% of abduction movement of the right shoulder. The percentage loss of arm component in the shoulder is 50%. 30 or 15% loss of motion for the arm component.

If more than one joint is involved, same method is applied, and the losses in each of the affected joints are added. Say,

Loss of abduction of the shoulder = 60%
 Loss of extension of the wrist = 40%
 Then, Loss of range of motion for the arm = $(60 \times 0.30) + (40 \times 0.30) = 30\%$

Principles of Evaluation of Strength of muscles

1. Strength of muscles can be tested by manual testing like 0-5 grading.
2. Manual muscle grading can be percentage like:

0.	..	100%
1.	..	80%
2.*	..	60%
3.	..	40%
4.	..	20%
5.	..	0%

3. The mean percentage of muscle strength loss is multiplied by 0.30.
4. If there has been a loss of muscle strength of more than one joint, the values are added as has been described for loss of range of motion.

Principles of Evaluation of co-ordinated activities

1. The total value for co-ordinated activities is 90%
2. Ten different co-ordinated activities are to be tested as given in the Pro forma
3. Each activity has a value of 9%.

Combining values for the Arm Component:

1. The value of loss of function of arm component is obtained by combining the values of range of movement, muscle strength and co-ordinated activities using the combining formula.

$$a=b(90-a)/90$$

where a=higher value

and b=lower value

Example:

Let us assume that an individual with a fracture of the right shoulder joint has in addition to 16.5% of motion his arm, 8.3% loss of strength of muscles and 5% loss of co-ordination. We combine these values as:
 Range of motion: 16.5.

Strength of Muscles: $8.3\% \ 16.5 \ 8.3 \ (90-16.5)/90=23.3\%$

Co-ordination: $5\% \ 23.3+5 \ (90-23.3)/90=27.0\%$

So Total value of arm component=27.0%

Hand Component:

Total value of hand component is 90%

The functional impairment if hand is expressed as loss of prehension loss of sensation, loss of strength.

Principles of Evaluation of prehension:

Total value of prehension is 30%. It includes:

- (a) Opposition (8%). Tested against Index finger (92%), Middle finger (2%)
 Ring finger (2%) and Little finger (2%).
- (b) Lateral Pinch (5%). Tested by asking the patient to hold a key.
- (c) Cylindrical Grasp (6%). Tested for
 (a) Large object of 4 inch size (3%)
 (b) Small object of 1 inch size (3%)
- (d) Spherical Grasp (6%) Tested for
 (a) Large object of 4 inch size (3%)
 (b) Small object of 1 inch size (3%)
- (e) Hook Grasp (5%). Tested by asking the patient to lift a bag.

Principles of Evaluation of Sensations:

Total value of sensation is 30%. It includes:

1. Radial side of thumb (4.8%)
2. Ulnar side of thumb (1.2%)
3. Radial side of each finger (4.8%)
4. Ulnar side of each finger (1.2%)

Principles of Evaluation of Strength:

Total value of strength is 30%. It includes:

1. Grip Strength (20%)
2. Pinch Strength (10%)

Strength will be tested hand dynamo-meter or by clinical method (Grip Method) 10% additional weightage to be given to the following factors:

1. Infection
2. Deformity
3. Malalignment
4. Contractures
5. Abnormal mobility
6. Dominant extremity (4%)

Combining Values of the hand component:

The final value of loss of function of hand component is obtained by summing up values of loss of prehension, sensation and strength.

Combining Values for the Extremity:

Values of impairment of arm component and impairment of hand component are combined by using the combining formula.

Example:

$$\text{Impairment of the arm} = 27.0\% \quad 64 \quad 27 \quad (90 - 64) / 90 = 71.8\%$$

$$\text{Impairment of the hand} = 64\%$$

Guidelines for Evaluation of Permanent Physical Impairment in Lower Limbs:

The lower extremity is divided into two component and stability component.

Mobility Component:

Total value of mobility component is 90%. It includes range of movement and muscle strength.

Principles of Evaluation of Range of Movement:

1. The value of maximum range of movement in the mobility component is 90%.
2. Each of the three joints i.e. hip, knee, foot-ankle component, is weighted equally—0.30.

Example

A fracture of the right hip joint may affect range of motion so that active abduction is 27. The left hip exhibits a range of active abduction of 54. Hence, there is loss of 50% of abduction movement of the right hip. The percentage loss of mobility component in the hip is 50×0.30 or 15% loss of motion for the mobility component.

If more than one joint is involved, same method is applied and the losses in each of the affected joints are added.

For Example:

1. Loss of abduction of the hip = 60%
2. Loss of extension of the knee = 40%
3. Loss of range of motion for mobility = $(960 \times 0.30) + (40 \times 0.30)$
component = 30%

Principles of Evaluation of muscle strength:

1. The value for maximum muscle strength in the leg is 90%.
2. Strength of muscles can be tested by manual testing like 0.5 grading.
3. Manual muscle grading can be given percentages like:

Grade 0	=	100%
Grade 1	=	80%
Grade 2	=	60%
Grade 3	=	40%
Grade 4	=	20%
Grade 5	=	0%

4. Mean percentage of muscle strength loss is multiplied by 0.30.
5. If there has been a loss of muscle strength of more than one joint, the values are added as has been described for loss of range of motion.

Combining Values for the Mobility Component:

Let us assume that the individual with a fracture of the right hip joint has in addition to 16% loss of motion. 8% loss of strength of muscles.

Combining Values:

Motion 16% strength 8% $16+8 (90-16)/90=22.6\%$

Where a = higher value b = lower value

Stability Component:

1. Total value of stability component is 90%
2. It is tested by 2 methods:
 - (i) Based on scale method
 - (ii) Based on clinical method.

Three different readings (in kilograms) are taken measuring the total body weight (W). Scale 'A' reading and scale 'B' read.

Guidelines for Evaluation of permanent physical Impairment of Trunk:—(Spine).

The local effects of lesions of spine can be divided into traumatic and non-traumatic lesions.

Traumatic Lesions:

Cervical Spine Fracture:

Per cent whole body permanent physical impairment and loss physical function to whole body.

- A. vertebral compression 25% one or two vertebral adjacent bodies, no fragmentation, no involvement of posterior elements, no nerve root involvement, moderate neck rigidity and persistent soreness. 20

- B. Posterior elements with X-ray evidence of moderate partial dislocation

- (a) No nerve root involvement healed

15

- (b) With persistent pain, with mild motor and sensory manifestations 25
- (c) With fusion, healed, no permanent motor or sensory changes. 20

C. Severe dislocation, fair to good reduction with surgical fusion.

- (a) No residual motor or sensory changes 25
- (b) Poor reduction with fusion, persistent radicular pain, motor involvement only slight weakness and numbness 35
- (c) Same as (b) with partial paralysis, determine additional rating for loss of use of extremities and sphincters.

Cervical intervertebral Disc

1. Operative, successful removal of disc, with relief of actuate pain, no fusion, no neurologic residual.
2. Sale as (1) with neurological manifestations, persistent pain, numbness, weakness in fingers.

Thoracic and Dorsolumbar Spine Fracture

Per cent Whole Body Permanent Physical Impairment and Loss of Physical Function to Whole Body.

- (a) Compression 25% involving one or two vertebral bodies, mind, no fragmentation, healed, no neurological manifestations 10
- (b) Compression 50% with involvement posterior elements, healed, no neurologic manifestations, persistent pain, fusion indicated 20
- (c) Same as (B) with fusion, pain only on heavy use of back 20
- (d) Total Paraplegia 100
- (e) Posterior elements partial paralysis with or without fusion, should be rated for loss of use if extremities and sphincters.

Low Lumbar

1. Fracture:

- (a) Vertebral compression 25% one or two adjacent cerebral bodies little or fragmentation no definite pattern or neurologic changes 15
- (b) Compression with fragmentation posterior elements, persistent pain, weakness and stiffness, healed, no fusion, no lifting over 25 pounds 40
- (c) Same as (B) healed with fusion, mild pain 25
- (d) Same as (B), nerve root involvement to lower extremities, determine additional rating for loss of industrial function to extremities. 35
- (e) Same as (C) with fragmentation of posterior elements, with persistent pain after fusion, no neurologic findings 100
- (f) Same as (C) with nerve root involvement to lower extremities rate with functional loss to extremities
- (g) Total Paraplegia -
- (h) Posterior elements, partial paralysis with or without fusion, should be rated for loss of use of extremities and sphincters.

2. Neurogenic Low Back pain—Disc Injury:

- (a) Periodic acute episodes With acute pain and persistent body list, test, tests for sciatic pain positive temporary recovery 5 to 8 weeks 5
- (b) Surgical excision of disc, no fusion, good results, no persistent sciatic pain 10
- (c) Surgical excision of disc, no fusion, moderate persistent pain and stiffness aggravated by heavy lifting with necessary modification of activities 20
- (d) Surgical excision of disc with fusion, activities of lifting moderately modified 15
- (e) Surgical excision of disc with fusion, persistent pain and stiffness aggravated by heavy lifting, necessitating modification of all activities requiring heavy lifting 25

Non-Traumatic Lesions

The whole spine has been given rating of 100% and region wise the following percentages are given:

Dorsal Spine	50%
Lumber Spine	30%
Cervical Spine	20%

Kobb's method for measurement of angle of curve in standing position is to be used the curves have been divided into three sub groups:

	Cervical Spine	Thoracic Spine	Lumbar Spine
Less than 30 (Mild)	2%	5%	5%
31-60 (moderate)	3%	15%	12%
Above 60 (Severe)	5%	25%	33%

In the curves ranging above 60, cardio-pulmonary complications are to be graded separately. The junctional curves are to be given that rating depending upon level of apex of curve. For example, if apex of dorso-lumber curve falls in the dorsal spine the curve can be taken as a dorsal curve. When the scoliosis is adequately compensated, 5% reduction is to be given from final rating (for all assessment primary curves are considered for rating).

Kyphosis

The same total rating (100%) as that suggested for scoliosis is to be given for kyphosis. Region-wise percentages of physical impairment are:

Dorsal	50%
Cervical Spine	30%
Lumber Spine	20%

For dorsal spine the following further grading are:

Less than 20.	10%
21-40	15%
41-60	20%
above 60	25%

For kyphosis of lumbar and cervical spine 5% and 7% respectively have been allocated.

Paralysis of flexors and Extensors of Dorsal and Lumbar Spine.

The motor power of these muscles to be grouped as follows:—

Normal	
Weak	5%
Paralysed	10%

Paralysis of Muscles of Cervical Spine

For cervical spine the rating of motor power is as follows:—

	Normal	Weak	Paralysed
Flexors	0	5%	10%
Extensors	0	5%	10%
Rotators	0	5%	10%
Side bending	0	5%	10%

Miscellaneous

Those conditions of the spine which cause stiffness and pain etc. are rated as follows:—

	% Physical impairment
A. Subjective symptoms of pain. No involuntary muscle spasm Not substantiated by demonstrable structural pathology	0%
B. Pain. Persistent muscle spasm and stiffness spine, substantiated by demonstrable mild radiological changes	10%

- C. Same as B with moderate radiological changes 15%
 - D. Same as B with severe radiological changes involving and one of the region of spine (cervical, dorsal or lumbar) 20%
 - E. Same as D involving whole spine 30%
- In kypho-scoliosis, both curves to be assessed separately and then percentage of disability to be summed.

Guidelines for Evaluation of permanent physical impairment in Amputees Basic Guidelines

1. In case of multiple amputees, if the total sum of percentage permanent physical impairment is above 100% it should be taken as 100%.
2. Amputation at any level with uncorrectable inability to wear and use prosthesis, should be given 100% permanent physical impairment.
3. In case of amputation in more than one limb percentage of each limb is counted and another 10% will be added, but when only toes or fingers are involved only another 5% will be added.
4. Any complication in form of stiffness, neuroma, infection etc. has to be given a total of 10% additional weightage.
5. Dominant upper limb has been given 4% extra percentage.

Upper Limb Amputations

	Per cent Permanent Physical Impairment and loss of physical function of each limb
1. Fore-quarter amputation	100%
2. Shoulder Disarticulation	90%
3. Above elbow up to upper 1/3 of arm	85%
4. Above elbow up to lower 1/3 of arm	80%
5. Elbow disarticulation	75%
6. Below Elbow up to upper 1/3 of forearm	70%
7. Below elbow up to lower 1/3 of forearm	65%
8. Wrist disarticulation	60%
9. Hand through carpal bones	55%
10. Thumb through C. M., or through 1st M.C. Joint	30%
11. D.	25%
12.	15%

	Index Finger (15%)	Middle Finger (5%)	Ring Finger (3%)	Little Finger (2%)
13. Amputation through proximal phalanx or disarticulation through MP joint	15%	5%	35%	2%
14. Amputation through middle phalanx or disarticulation through PIP joint.	10%	4%	2%	1%
15. Amputation through distal phalanx or disarticulation through DIP joint	5%	2%	1%	1%

Lower Limb Amputations

- Hind quarter
- Nip disarticulation.
- Above knee up to upper 1/3 of thigh
- Above knee up to lower 1/3 of thigh
- Through knee
- B. K. up to 8 cm
- B. K. up to lower 1/3 of leg
- Through Ankle
- Syme's
- Up to mid-foot
- Up to fore-foot
- All toes
- Loss of first toe
- Loss of second toe
- Loss of third toe
- Loss of fourth toe
- Loss of fifth toe

Guidelines for Assessment of Physical Impairment in Neurological conditions

Motor System disability:	Disability Rate
Monoparesis	25%
Monoplegia	50%
Hemiparesis	..
Paraparesis	75%
Paraplegia	100%
Hemiplegia	75%
Quadriparesis	..
Quadriplegia	100%
Sensory System Disability:	
Anaesthesia	Each Limb 10%
Rypoaesthesia	..
Paraesthesia	..
Fors INVOLVEMENT	..
For involvement of hand/hands	25%
Foot/feet	..

Guidelines for assessment of Physical Impairment in Neurological conditions

- Assessment in neurological conditions is not the assessment of disease but its the assessments of the effects, i.e. clinical manifestation.
- Any neurological assessment has to be done after six months of on set.
- These guidelines will only be used for central and upper motor neurone lesions.
- Pro forma A & B will be utilized for assessment of lower motor neurone lesions, muscular disorders and other locomotor conditions.
- Total percentage of physical impairment in neurological conditions will not exceed 100%.
- In the mixed cases the highest score will be taken into consideration. The lower score will be added to it and calculations will be done by the formula $A+b (100-1)/100$.
- Additional rating of 4% will be given for dominant upper extremity.
- Additional 10% has been given for sensation in each extremity, but the maximum total physical impairment will not exceed 100%.

Disability Rate

Mild
Moderate
Severe
Very Severe

25%
50%
75%
100%

Tested by a 100 word text. Ability to read (in educated), comprehend when read cut, answer question on text clearly and ability to write a synopsis (in educated). Guidelines for Evaluation of Physical Impairment due to Cardio Pulmonary Diseases Basic Guidelines.

1. Modified New York Heart Association subjective classification should be utilised to assess the functional disability.
2. The physical should be alert to the fact that patient who come for disability claims are likely to exaggerate their symptoms. In case of any doubt patients should be referred for detailed physiological evaluation.
3. Disability evaluation of cardiopulmonary patient should be done after full medical, surgical and rehabilitative treatment available, because most of these diseases are potentially treatable.
4. Assessment of a cardiopulmonary impairment should also be done in diseases which might have associated cardiopulmonary problems, e.g. amputees, myopathies etc.

The proposed modified classification is as follows:—

- Group 0: A patient with cardiopulmonary disease who is a symptomatic (i.e.o has no symptoms of breath-lessness palpitation, fatigue chest pain).
- Group 1: A patient with cardiopulmonary disease who becomes symptomatic during this ordinary physical activity but has mild restriction (25%) of the ordinary physical activities.
- Group 2: A patient with cardiopulmonary disease who becomes symptomatic during his ordinary physical activity and has 25-50% restriction of his ordinary physical activity.

Mental Disorders

Source: Glossary and guide to their classification, A publication by W.H.O.

"MENTAL RETARDATION": A condition of arrested or incomplete development of mind which is especially characterized by subnormal of intelligence. The coding should be made on the individual's current level of functioning without regard to its nature of causation—such as psychosis, cultural deprivation, Down's, syndrome etc. where there is a specific cognitive handicap—such as in speech—the four digit coding should be based on assessment of cognition outside the area of specific handicap. The assessment of intellectual level should be based on whatever information is available, including clinical evidence, adaptive behavior and psychometric findings. The IQ levels given are based on a test with a mean of 100 and a standard deviation of 15—such as the wechsle scales. They are provided only as a guide and should not be applied rigidly. Mental retardation often involves psychiatric disturbances and may often develop as a result of some physical disease or injury. In these cases, an additional code or codes should be used to identify and associated condition, psychiatric or physical. The impairment and Handicap Codes should also be consulted.

(b) Mild Mental Retardation

Feeble-minded
High Grade defect
Mild Mental subnormality.

• Moron

IQ 50-70

(c) Other Specified Mental Retardation

- (i) Moderate mental retardation
Imbecile
IQ 45-49
- (ii) Severe mental retardation
IQ 20-34
- (iii) Profound mental retardation
Idiocy
IQ under 20

Moderate Mental subnormality

Severe mental subnormality

• Profound mental subnormality

(d) Unspecified Mental Retardation

Mental deficiency NOS Mental subnormality NOS.

ANNEXURE B

[See sub-rule (2) of Rule (5)]

FORM I

Application for Certificate of Disability

1. Name and Address :
2. Male or Female :
3. Age :
4. Name and Address of Parent/
Guardian or close relative who
shall represent the applicant or
accompany him, if so required :
5. Category of Disability :
6. Whether Temporary or Permanent :
7. Whether congenital or acquired :
8. Nature of physical impairment :
9. Functional Limitation :
10. Other Relevant Information, If any :
11. Date of Application :
12. Signature of Applicant and two
identification marks. :

DECLARATION

I,..... do hereby solemnly affirm and declare that what is stated above is true to the best of my knowledge, information and belief. I also understand that causing certificate issued on the basis of false information is an offence under section 59 of the Persons Disabilities (Equal Opportunities Protecting Rights and Full Participation) Act, 1995.

Applicant

For office use only

- (a) Date of Examination :
- (b) Findings of the Medical Board as to—
(i) Physical or mental Impairment
(ii) Functional limitations
(iii) Nature of disability and its category
(iv) Percentage of disability
(v) Any other relevant fact :
- (c) Degree or Disability—as to whether
(i) Mild—less than 40%
(ii) Moderate —40% and above
(iii) Severe —80% and above
(iv) Total—100% :
- (d) Whether the disability is
Temporary or Permanent
Partial or Total :
- (e) Nature of Treatment or rehabilitation recommended :
- (f) Signature of
Chairman of Medical Board
Member of Medical Board
- (g) Date of issue of Certificate of disability or any other Communication disposing of the application

Certificate of disability

This is to certify that, the Medical Board constituted as certification Authority for persons with disabilities, Dist. Hospital.....
 Examined Sri/Smt.
 (Name and Address of the applicant) on (date)
 and found him/her as a person with disability by reason of Physical/Mental
 impairment and functional limitation due to
 (Nature of disability).

The disability is of Temporary/Permanent nature and is partial/total, the
 degree of disability having been found as..... %.

(Identification marks of the applicant and his Signature)

Signature of Chairman of Medical Board

(Seal)

By order of the Governor,

DR. SATYANARAYANA DASH,

Principal Secretary to Government.

Explanatory Note

(This does not form part of the notification, but is intended to indicate its general purpose.)

Section 73 of the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (Central Act 1 of 1996) empowers the appropriate Governments to make rules for carrying out the Provisions of the Act. Accordingly Government of Kerala have framed necessary rules, for the above purpose.

This notification is intended to achieve the above object.

The Secretary to Government of India, Ministry of Welfare, Government of India.
 The Secretary to Government of India, Ministry of Social Justice and Empowerment, Government of India, New Delhi.
 The Chief Commissioner for Persons with Disabilities, Government of India, New Delhi.
 The Director of Social Welfare, Thiruvananthapuram.
 The State Commissioner for Persons with Disabilities Thiruvananthapuram,
 The Chairman, Bureau Public Enterprise.
 Secretaries/Additional Secretaries of all Departments of Secretariat.
 All Heads of Departments.
 Private Secretary to Chief Minister.
 Private Secretary to Minister (Industries and Social Welfare).
 Personal Assistant to Principal Secretary (SW).
 General Administration (SC) Department (vide item No. 4570 dated 14-6-2000).
 Finance Department (vide U. O. No. 108906/Dev.2/98/Fin. dated 12-1-1999).
 Law Department (vide U.O. No. 2503/Leg. CI/2000/Law dated 15-2-2000).