Medical Council of India New Delhi

Minutes of the 32nd Meeting of Board of Governors

The 32nd Meeting of the Board of Governors was held on 17th & 18th September, 2013, at 11.00 A.M. in the Council office at Sector-8, Pocket-14, Dwarka, New Delhi-110077. The following members of the Board of Governors attended the meeting :-

- 1) Dr. R.K. Srivastava, Chairman, BOG In Chair
- 2) Dr. K. Mohandas, Member, BOG
- 3) Dr. K.S. Sharma, Member, BOG
- 4) Dr. A.K. Bardhan, Member, BOG
- 5) Dr. Raja Babu Panwar, Member, BOG
- 6) Dr. Brijendra Kumar Rao, Member, BOG
- 7) Dr. Manoj K. Singh, Member, BOG

and Dr. P. Prasannaraj, Additional Secretary, MCI.

At the outset, the Chairman, Board of Governors read out the letter dt. 17th September, 2013 received from the Ministry of Health & F.W. wherein the Ministry conveyed the Board of Governors ".....the existing Indian Medical Council (Amendment) Ordinance, 2013 would cease to operate on 16.9.2013. The Government is proposing to promulgate a fresh Ordinance so that the work already done by the Board of Governors (BOG) of the Council as per Provisions of the earlier ordinance gets validated and may continue. In view of the foregoing, until the fresh Ordinance is promulgated, the BOG is requested not to convene any meeting from 16.9.2013 not take any major decision."

In view of above, the Board of Governors decided to adjourn the meeting till reconstitution of the Board is made.

- 1. Minutes of the meeting held on 10th & 11th September, 2013 confirmed on 17.9.2013
- 2. <u>Approval to the Minutes of the Meeting of the Academic Council held on 12th</u> July, 2013,

3. Panel of Advocate of MCI.

The Board of Governors after perusal of agenda note constituted a Sub-Committee headed by Dr. B.K. Rao, Member, Board of Governors to examine the issue in entirety, including the mode of appointment, tenure, uniformity in structure of the professional fees reimbursed to the Advocates of the Council. The Committee shall consist of Secretary, Addl. Secretary, Deputy Secretary (Administration) and Law Officer.

4. <u>Increase of seats in various PG Courses at Mahatma Gandhi Medical College &</u> <u>Hospital, Jaipur – withholding letter of permission in view of surprise/CBI</u> <u>assessment report.</u>

For consideration of next meeting.

5. <u>Recognition of DTCD Course granted by Rani Durgavati Vishwavidyalay in</u> respect of students trained at Netaji Subhash Chandra Bose Medical College, Jabalpur.

For consideration of next meeting.

 <u>Consideration of the minutes/observation of PG Committee meeting dated 21st,</u> <u>22nd & 23rd August, 2013 for recommendation of recognition of various</u> <u>postgraduate courses u/s 11(2) of the IMC Act, 1956.</u>

Confirmation of 1 to 140 items decisions.

7. <u>Marathwada University/Dr. Babsaheb Ambedkar Marathwada University –</u> <u>approval of SRTR Medical College, Ambajogai for the award of MD (Radiodiagnosis/Radiology) & DMRD Qualification.</u>

For consideration of next meeting.

 Bangalore University - (1) Recognition of MD(TB&CD) in respect of students being trained at Bangalore Medical College & Research Institute, Bangalore; and (2) Permission to restart MD (TB&CD) (Pulmonary Medicine) course at Bangalore Medical College, Bangalore under Rajiv Gandhi University of Health Sciences, Bangalore.

For consideration of next meeting.

9. <u>Mahatama Gandhi University, Kottayam – Recognition of MD(Paediatrics)</u> <u>qualification against increased intake from 03 (three) to 05(five) seats in respect</u> <u>of students being trained at Government Medical College, Kottayam.</u> For consideration of next meeting.

10. <u>Change of affiliating university from Rajiv Gandhi University of Health Sciences,</u> <u>Bangalore to Sri Siddhartha University, Tumkur in respect of students being</u> <u>trained at Sri Siddhartha Medical College, Tumkur.</u>

For consideration of next meeting.

11. <u>Eligibility qualification for admission in DM(Neurology) by the holders of MD(Psychiatry).</u>

For consideration of next meeting.

- 12. <u>Recommendation for withdrawal of LOP granted for establishment of a new</u> medical college at Chennai in the name and style of "DD Medical College & DD Hospital, Chennai", DD Medical & Educational Trust, Chennai with an annual intake of 150 students with retrospective effect from the academic year 2010-11 u/s 10 A of the IMC Act,
- 13 <u>UG Committee Report with regard to continuation of Recognition/Compliance</u> Verification Assessment Reports.
- 14. Inclusion of PMR & Radio-therapy as mandatory subject in the existing MBBS Curriculum.

The Board of Governors perused the note forwarded by the Academic Cell with regards to inclusion of Physical Medicine and Rehabilitation and Radio-Therapy in the curriculum of MBBS course and after detailed discussion approved the Inclusion of PMR & Radio-therapy as mandatory subject in the existing MBBS Curriculum.

The following requirements in terms of faculty, teaching hours, clinical training and internship duration for Physical Medicine & Rehabilitation and Radio-Therapy recommended as under:-

		Physical Medicine & Rehabilitation			Radio-Therapy
Department	:	Independent department	&	Essential	Independent & Essential department

Faculty	:	Requirement as per Mini Standard Requirements 50/100/150/200/250	
		Minimum Qualification for Teachers in Medical Institut Regulations, 1998 PHYSICAL MEDICINE REHABILITATION	1998 AND
Mede		REHABILITATION(A)M.D.(P.M. R)/M.D.(M ess edicine)(i) As Reader/ ate Prof in Physi Diploma in PMR/M.S. Rehabil (General Surgery)/ in a M.S.(Orth recognis opaedics)Medicin for four Surgery)/ in a 	/Assoc fessor ical he and litation years sed l <u>ble</u> mum ch tions d in s/natio nal e th tion in tional
		training approved	

a a	n the subject in iny ipproved		(A) Profess or	M.D.(Radio- Diagnosis)/ M.D.(Radiol ogy/ M.S. (Radiology)	(i) As Reader/As sociate Professor in Radio- Diagnosis/ Radiology for four years in a recognised medical college. <u>Desirable</u> (ii) Minimum of four Research publication s indexed in Index Medicus/n ational journal and one research publication
ir	nstitution n India. do-	(i) As Assistant Professor/Lect urer in Physical Med. And Rehabilitation for five years in a recognised medical college. <u>Desirable</u> (ii) Minimum of four Research publications indexed in Index Medicus/natio nal journals.			
(C) -C Assi stan t Prof ess or/ Lect urer	do-	 (i) Requisite recognised postgraduate qualification in the subject. (ii) Three years teaching experience in the subject in a recognised medical 	(B) Reader / Associa te Profess or	-do-	in Internation al Journal. (i) As Assistant Professor/ Lecturer in Radio- Therapy/R adiology for five

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		college as resident/ Registrar/Dem onstrator/ Tutor.			years in a recognised medical college. <u>Desirable</u>
1	 (D) MBBS Tut or/ De mo nstr ator /Re side nt/ 	un	211		(ii) Minimum of four Research publication s indexed in Index Medicus/n ational journals.
	Reg istra r.		(C) Assista nt	-do-	(i) Requisite recognised
1	···		Profess		postgradua
		COUNCIL TOTAL	or/ Lecture r		te qualificatio n in the subject. (ii) Three years teaching experience in the subject in a recognised medical college as resident/ Registrar/D emonstrato r/ Tutor.
			(D)	MBBS	

			Tutor/ Demon strator/ Reside nt/ Registr ar.
Teaching Hours	:	05 hours of lectures from Community Medicine (4 th semester onwards*) may be utilized for PMR	05 hours of lectures from Community Medicine (4 th semester onwards*) may be utilized for Radio therapy.
Neor		In addition, in the following specialities when related topics are being taught, its PMR aspects may be taught by the faculty of PMR: (a) Medicine (b) TB & Chest (c) Surgery (d) Orthopaedics (e) Paediatrics (f) E.N.T. (g) Ophthalmology	In addition, in the following specialities when related topics are being taught, its Radio-therapy aspects may be taught by the faculty of Radio-therapy: (a) Medicine (b) OBG (c) Surgery (d) Orthopaedics (e) Paediatrics (f) E.N.T.
Clinical Training	:	One week each from Orthopeadics, ENT and Paediatrics (03 weeks).	One week each from Surgery, Medicine, OBG for Radio-therapy (03 weeks).
During Internship		PMR is already an elective posting for 15 days. May be made mandatory and only one posting may be made elective instead of two.	15 days Radio-therapy as part of Medicine / Surgery / OBG postings

* Total 10 hours of community medicine (4th Semester onwards), as per current Graduate Medical Education, 1997.

15. <u>Consideration of the minutes/observation of PG Super Specialty Committee</u> meeting dated 27.8.2013 for recommendation of recognition of various postgraduate courses u/s 11(2) of the IMC Act, 1956.

Confirmation of decisions.

16. <u>Complaint regarding deficiency of teaching faculty and clinical material in the department of CTVS.</u>

For consideration of next meeting.

17. <u>Request to review the application for increase of seats in MD(General Medicine),</u> <u>MS(OBG) and MD(Pathology) at Sri Aurubindo Institute of Medical Sciences,</u> <u>Indore.</u>

Reiterate earlier decision already taken.

18. <u>Consideration of the Order dated 25.06.2013 of the Government of Jammu & Kashmir, ARI and Training Department regarding migration of Ms. Ayushi Sharma.</u>

The Board of Governors considered the matter of migration of students within the Jammu & Kashmir State of Ms.Ayushi Sharma whose migration was denied by the State Health Authorities as the 5% ceiling laid down by the Graduate Medical Education Regulations was exhausted and aggrieved by this decision she approached the Hon'ble High Court of J & K. The Court directed the competent authorities in this case, MCI to pass an order accordingly. The BOGs perused the regulation that permits consideration of migration on individual merits by MCI for request that are not covered under the provisions of GME Regulation. The State Govt. has granted migration on similar grounds to other candidates within the 5% ceiling. Further, the Board in the light of the Court order and the prevailing situation in the State of Jammu & Kashmir and the powers conferred by the Regulation, granted migration of Ms. Ayushi Sharma from Govt. Medical College, Srinagar to Govt. Medical College, Jammu as well of Rahil Farooq Shah from Govt. Medical College, Jammu to Govt. Medical College, Srinagar.

The rational of fixing a particular percentage of ceilings is required to be recommended keeping in mind the present medical education scenario. Accordingly the Board decided to constitute a Sub-Committee for re-looking the migration issue in Undergraduate Medical Education with following.

19. <u>Review of the Gazette Notification dated 09.05.2013 pertaining to the post of</u> <u>Secretary, Medical Council of India.</u>

The Board of Governors deliberated upon the amended Recruitment Rules for the post of Secretary, MCI notified in the official Gazette of India on 17th May 2013.In this regard, following points were noted by the Board of Governors : -

First, the amended Recruitment Rules is directly in conflict with Section 9 of the Indian Medical Council Act, 1956 which provides that the Medical Council of India shall appoint a Secretary, whereas, by the amendment notification by which recruitment rules have been amended confers power of appointment of Secretary on the Government of India. In terms of section 3A (3) of the Indian Medical Council (Amendment) Act, 2010, the Board of Governors "exercise the power and perform the functions of the Council" and therefore it is the Board of Governors that are vested with the power to appoint the Secretary, Medical Council of India The amendment notification provides that the appointment of Secretary should be done through Search-cum-Selection Committee constituted by the Ministry of Health and Family Welfare [Ministry of Health & Family Welfare] with the concurrence of Department of Personnel and Training [DOPT]. It is well settled in law that the provisions of Regulation cannot override the provision of the Act. Hence, in case, the appointment of Secretary is to be done through the procedure laid down in the notification dated 17.05.2013, it calls for an amendment to the IMC Act itself.

Second, the essential qualification prescribed is postgraduate degree from a recognized University including MD/MS/DM/M.Ch. This may allow persons with nonmedical qualification, including MA, M.Sc, M.Com or LL.M also apply and carry out the functions of the Principal Executive Officer of an Organization wherein the primary duties pertain to grant of permission for establishment of Medical Colleges, recognition of qualifications awarded by Medical Colleges and matters relating to professional conduct of Doctors. The Principal Executive Officer of the MCI, i.e., its Secretary has to be a person with Medical qualifications, and post-graduate degree only in the field of Medicine and from no other subject in view of the functions and responsibilities entrusted by the Indian Medical Council Act, 1956 upon the Council.

Third, the mode of recruitment is through deputation from officers under the Central Government/State Government/Autonomous bodies under Central/State Government/Medical Universities/Government Medical Colleges or Government Hospitals including All India Service Officers. It means that the post would be required to be circulated to the various Ministries/Departments of the Government of India and State Governments and many persons from non-medical background may apply for the

position, that has to be exclusively held by a medical person. The mode of recruitment by deputation also compromises with the autonomy of the Council that is provided in the IMC Act, 1956.

Fourth, the constitutional and statutory validity of this notification is subject matter of challenge in the Hon'ble High Court of Delhi in a petition filed by the Indian Medical Association.

In view of the above, the Board of Governors deems it appropriate to request the Ministry to re-examine the notification dated 17.05.2013.

20. <u>Review of the current workload of the MCI vis-à-vis available posts and proposal</u> for enhancing the present manpower to address the challenges of increasing workload.

The Board noted that with increasing number of medical colleges the proportionate increase of manpower is not in place in the Council. There are nearly 381 medical colleges currently as a result of said increase in there number. The shortage of manpower in the Council is due to non-approval of nearly 57 created posts and non fulfillment of 47 posts remaining vacant. The Board decided that Ministry of once again be requested to grant approval for notification of the created posts.

The Council is directed to fill the notified vacant posts till such time.

Ministry's approval for notification for created posts is received. Meanwhile to meet the acute shortage of manpower, consultant in the following areas be appointed for a period of 3 to 6 months:-

- a) Consultant (Finance)
- b) Consultant (Surveillance & Monitoring)
- c) Consultant (Building Maintenance)
- d) Consultant (Liaison Officer)

The Board also decided to request the Chief of the Armed Forces Medical Services for

21. <u>Review of the Residency Scheme.</u>

The Board observed that there are quite a few court cases with Residency Scheme. The Board reviewed the Residency Scheme taking into consideration the training capacity spectrum required to be undergone by the postgraduates and the pattern of working in the hospital and the medical college and constituted a Sub-Committee under the Chairmanship of Dr.Raja Babu Panwar, Member, Board of Governors (BOGs) with Dr.K.S.Sharma, Member, BOG and Dr.B.K. Rao, Member, BOG with a request for submission of their report in two weeks time.

22. Review of Teachers experience equivalence norms.

The Board considered the increasing requirement of faculty for improving medical education facilities in both UG & PG institutions. The Board noted that there are many potential teachers who have yet to be given recognition/equivalence for their teaching experience engaged in various health care organizations under – (a) Armed Forces Medical Services;(b) ESI Hospitals; (c) District Hospitals & (d) Railway hospitals. In order to work out the mechanism of granting equivalence to those potential teachers working in the above mentioned clinical setups, a Sub-Committee is constituted under the Chairmanship of Prof. Mohandas, Member, BOG with Dr.A.K.Bardhan, Member, BOG duly supported by Dr. R.K. Srivastava, Chairman, BOG.

The Board noticed about the inclusion of qualifications with nomenclature MD which are actually basic medical qualification equivalent to MBBS awarded in our country. This has created confusion among the public as the said basic medical qualification is taken equivalent to the Postgraduate MD qualification awarded in India. In order to avoid such confusion in public interest, the Board decided that henceforth the

registration certificate issued to such candidates who have completed their basic medical degree with MD nomenclature which should be clearly mentioned in Bold letter that the MBBS qualification is and among part of notification and on the foot note written as equivalent to the degree with nomenclature as awarded abroad.

The draft certificate may be submitted in the BOGs meeting for approval and necessary measures to be taken for appropriate correction in the certificate that have been already issued with MD nomenclature for basic medical qualification.

23. <u>Dr. A.S. Nayyar's case – to formulate MCI's views for presentation before the Chairman, National Commission for Scheduled Caste on 23.9.2013.</u>

24. Matter relating to the suspension of Shri A.K. Ahluwalia, Accounts Officer.

The matter related to suspension of Shri A.K. Ahluwalia, Accounts Officer was considered by the Board of Governors and the Board decided to extend the suspension for 45 days and perused the Enquiry Report and decided to peruse enquiry report in the next meeting.

> (Dr. P. Prasannaraj) Additional Secretary

(Dr. Manoj K. Singh) Member, BOG (Raja Babu Panwar) Member, BOG (Dr. K. S. Sharma) Member, BOG (Dr. Brijendra Kumar Rao) Member, BOG. (Dr. K. Mohandas) Member, BOG. (Dr. A.K. Bardhan) Member, BOG

(Dr. R.K. Srivastava) Chairman

