

**Government of Rajasthan  
Directorate of Medical Education, Jaipur**

No.F.6(13)/ME/Gr-1/10

Date: 5<sup>th</sup> June, 2014  
27

**Minutes of the Video Conference review meeting held on 2<sup>nd</sup> May, 2014  
from 11:00 AM onwards under the Chairmanship of Principal Secretary  
Medical Education.**

A meeting (Through Video – Conferencing) was held on 2<sup>nd</sup> May 2014 at 11.00 AM under the chairmanship of Principal Secretary Medical Education to review the new and ongoing schemes and physical and financial progress of programs. All Principal and Controller Medical College were present along with the Superintendents and other officials at the other end.

The following Officers participated in the meeting:

1. Dr.S.P.Singh, -Joint Secretary (ME)
2. Sh.Dhanna Lal -Deputy Secretary (ME)
3. Dr. Sunil Bhatnagar, OSD, ME
4. Dr. A.S. Dua, Additional Director(ME) Directorate of Medical Education, Jaipur
5. Sh. Achleshwar Meena, F A, Directorate of Medical Education
6. Dr. S.C. Soni, Dy. Director(Academic) Directorate of Medical Education, Jaipur
7. Sh. Ramesh Yadav, Dy. Director(Plan) Directorate of Medical Education, Jaipur
8. Sh. C.B.Agarwal, ALR, Directorate of Medical Education
9. Sh. J.P.Gupta, AAO(ME)

Principal Secretary addressed all PMCs and emphasized that the State Government is committed to ensure Quality services in all Hospitals attached to Medical Colleges. All Principals and Superintendents were, directed to plan and chart out systems for effective implementation of strategies specialty for better security services, sanitation and cleanliness in hospitals.

PSME deliberated that all Link Officers and assistant should be well informed about all important activities and plans and they should get in touch with the concerned person and help administrative department to resolve

them. Link officers from Ajmer and Bikaner are performing well but others need improvement. Link officer from Udaipur is always a new person with no information or knowledge of the issues. It is the duty of the Link Officers that the issues are communicated both ways from PMCs to Govt. Link officer is not only a messenger but also the facilitator.

PSME stated that all Principals should monitor progress of civil works and get forecast estimates correctly. They should consider Tender Premium correctly. New structures shall be designed looking to modifications required for being modern and eco-friendly so the additionalities are identified and added.

Following is the brief description of discussions held on agenda wise issues:

**1. Action taken Report (ATR) on decisions of last meeting :**

All PMCs submitted brief account of action taken on last meeting. All action points with pending for action were included in agenda.

**2. ATR on CM's Directions:**

**a. Jaipur:**

- i. Permission for subway for trauma hospital SMS Hospital is received from Metro Corporation, PWD forecast estimates will be sent soon.
- ii. Proposal for extension of SMS Hospital and Trauma Institute submitted .PSME directed to prepare draft note and estimated project cost with map for extension and to spot the plot in the map about the constructions sites.
- iii. Proposal for Multi storied cottage ward at SMSH to be submitted.
- iv. Proposals submitted to make SMS hospital referral centre.

**b. Jodhpur:** Medical College has collaboration with the Canada for the tie up of medical education exchange program.

**c. Bikaner, Ajmer, Kota & Udaipur:** Matter of Tie -up with major specialty Hospitals abroad is pending.

### 3. ATR on 60 days action-plan:

#### a. Jaipur:

- i. At Medical College civil works are in process, up gradation of various departments and new civil work of pathology is under progress. Extension/ up gradation of civil work is under process at SMS Hospital.
- ii. PMC made a committee of Additional Principal and CEO for tender of Zenana Hospital to study the reasons of delay.

b. **Jodhpur:** Medical College has good cleaning and parking facilities as well as sodium lights for lighting of campus. Staffs Doctors / Nurses are regularly wearing apron during duty hours. There are 55 security guards for the hospital campus.

c. **Ajmer:** 2 medicines, 2 Surgery, 2 Pediatric and one Cardiology wards have not been started fully in JLN hospital. Pediatric and Cardiology wards are functioning while 2 wards of Medicine have been handed over and will be functioning soon. The commissioning is delayed due manpower problems.

d. **Kota:** Medical College Progress is satisfactory.

### 4. ATR on Principals Forum Meeting/HM directions:

a. **Jaipur:** Regarding PG class timings PMC, Jaipur told that quality can be improved only when there are classes but the emergency services are made functional by the rest of the staff during the teaching hours.

b. **Jodhpur:** Medical College has collaboration with the Canada for the tie up of medical education exchange program. Media cell is there in Hospital, Plans for Territorial responsibility, Cafeteria in hospital, Body donation ceremony not implemented yet. Condemnation of unused articles is stopped because of the auction amount is less than 10% of purchase amount. Which cannot be done? *PSME suggested in such cases committee can be constituted and the decision can be taken for condemnation of the article for that offered less than 10% amount.*

- c. **Bikaner:** College has sent proposal for renovation of Mortuary. Plans for Media cell in Hospital, Territorial responsibility, Body donation ceremony not implemented yet.
- d. **Ajmer:**
- i. Regarding outsourcing through Arawali pathlabs - 2.5 cr. is required for MRI. For MRI place has been finalized. In case of outsourcing the teaching of PG is not possible in proper way in case of PPP mode PMC said. PMC Ajmer asked for the list of laboratory technician, Resident doctors from Arawali pathlab regarding their qualification and experience but it was not provided by him and PMC said that the only pathologist was available in the laboratory. *PSME said that the same company is there in Udaipur but is successful, why?*
  - ii. CT scan machine is available in Ajmer, 40-50 cases are being done daily.
  - iii. Proposals not sent for up-gradation of mortuary. Plans for Media cell in Hospital, Territorial responsibility, Body donation ceremony are not implemented yet.
- e. **Kota:** Cleanliness is complete and biometric system for attendance of the staff is in place. Apron is must on duty. CCTVs have been put for security purpose through RMRS the whole hospital is covered by CCTV cameras. The availability of staff and resident doctors in emergency for 24x7days has been ensured. The JK loan staff is good in numbers. Plan for Media cell in hospitals, Territorial responsibility, and cafeteria in college are not taken.
- f. **Kota:** Proposal for renovation of Mortuary is pending. Plans for Media cell in Hospital, Territorial responsibility, Body donation ceremony not implemented yet.
- g. **Udaipur:** Proposal for renovation of Mortuary is sent. Plans for Media cell in Hospital, Territorial responsibility, Body donation ceremony not implemented yet.

#### 5. Status of Civil works:

- a. **SMS Medical College:** Civil works of 3.66 cr are pending, up gradation of various departments and new civil work of pathology is under progress. Extension/ up gradation civil work is under process. PMC made a committee of Additional Principal and CEO for tender of Zenana Hospital to study the reasons of delay.
  - b. **Jodhpur:** Tenders for 6 modular O.T. for MDM hospital have been finalized which was late by 3 years.
  - c. **Bikaner:** Extra expenditure is done, that is why PWD slowed down the work. No payment given to contractors, 26 Cr contract has been given and total requirement is Rs.56 Cr.
  - d. **Ajmer:** Construction by PWD is 80% completed buildings may be handed over to the respective departments.
  - e. **Kota:** Status is satisfactory and is above 72%, status is being monitored regularly
  - f. **Udaipur:** Progress is satisfactory; above 59% expenditure is done.
6. Preparatory activity for the state level RPMT for the academic year 2014-15 have been taken up by RUHS.

#### 7. Feed back-updated information about status of UG/PG seats:

- a. **Jaipur:** PMC informed that the requisition for 109 PG seats was given but only 83 were increased, a representation for rest of 26 PG seats is given on 30/04/2014, No decision is received. Probably these will be included in next year.
- b. **Jodhpur:** 250 UG seats are sanctioned and the 111 PG seats are there.
- c. **Bikaner:** 250 UG seats and 108 PG seats are sanctioned, along with four super specialty-2-cardiology and 2-urology seats.
- d. **Ajmer:** 150 UG seats are there, regarding PG seats- college applied for 25 but only 15 seats have been increased total number of 88 seats are there.
- e. **Kota:** UG seats are 150, applied for 63 PG seats but only 23 were increased including PSM, physiology, Microbiology, Anatomy. ENT and Ophthalmology (6 seats) were rejected by MCI.

**8. Physical and financial progress of Centrally Sponsored Schemes:**

**a. Jaipur:**

- i. for Increase in PG seats an amount of Rs 90 lac is left for appointment of faculty, while 1<sup>st</sup> installment is utilized and UCs are sent for 62 lac and the expenditure under 2<sup>nd</sup> installment is in progress.
- ii. Trauma Centre: Rs 38 lacs saving is there in this scheme, PMC will purchase equipment with this amount soon.

b. **Jodhpur:** regarding Increase in PG seats satisfactory progress is there. Under **NPHEP (Geriatric)** construction work is under progress on top floor of the building of the IPD for otherwise the OPD is working fully.

c. **Bikaner:** for Increase in PG Seats College applied for 21 seats out of which 13 seats have been increased and MCI inspections in 6 subjects is pending while fees for inspection has been deposited. In 2<sup>nd</sup> installment expenditure is less. Regarding equipments there was a circular dated 11/03/2014 that the RMSCL will purchase but guidance is required from them. PSME said that If the item is not approved in rate contract than there is relaxation while in case it is single tender there might be deficiency in specification and it looks tailor made if it is not so there than there is no issue.

d. **Ajmer:** for Increase in PG Seats College applied for 25 seats against which only 15 seats were increased. There are total 88 seats. An amount of Rs. 4.34 Cr is left and college wants to procure the MRI machine cost of which is 6.50 cr, hence no expenditure is done.

e. **Kota:** 1<sup>st</sup> phase UC sent to GoI while 2<sup>nd</sup> phase has been transferred to PWD for Increase in PG seats Expenditure is 9.63% only. For Trauma Center Expenditure is 2.20% only. PMC submitted that in orthopedic surgery there are 2 Prof. and 1Asso. Prof. and total six units but six people are not available and there is no cardiothoracic surgeon available. There was an announcement for Diagnostic Wing but money was not released from RSMML. *PSME said When Government*

*changes, it happens, I am aware of it.* The probation period for assistant professor to be reduced from 2 years to 1 year this is under process.

- f. **Udaipur:** for Increase in PG seats progress is Unsatisfactory, expenditure is 0.40%. Trauma Centre: unsatisfactory 11.82% expenditure, Permission is asked for tender floating and sent for re-appropriation. PMR: Progress is good (100% expenditure).

**9. MNJY/MNDY:**

- a. **Jaipur:** Pathology head Dr Ajay Yadav told that he is facing the staff problem.
- b. **Jodhpur:** College has shortage of biostatistician staff in central laboratory.
- c. **Bikaner:** Laboratory has shortage of 15 Kits, 3 fully auto analyzer are required. 113 drugs are short from RMSCL 18 posts of pharmacists are vacant that is why the 18 DDC are having a problem in functioning..

**10. Plan Budget expenditure review:**

- a. **Jodhpur:** has satisfactory Progress but in Equipments Expenditure is 21% only.
- b. **Bikaner:** Progress is good , In Equipments head expenditure is less because re-appropriation was late i.e. sent on 30/03/2014 /
- c. **Ajmer:** has satisfactory progress but less expenditure in equipment. Expenditure is 34%, because of model code of conduct, payment could not be made.
- d. **Kota:** Has 62.87% expenditure, expenditure in Equipments is less.
- e. **Udaipur:** Has 55.51% expenditure; Expenditure for Equipment (METP) is very low i.e. 11%. Rates were low at the time of RE. Tech. specifications were not according to govt. that is why college surrendered the money. PSME said that this is planning failure. After the retirement the next HOD came and refused for the proposal.

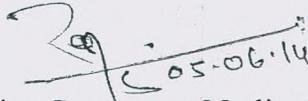
**11. Other issues:**

- a. **Jaipur:** SMS Medical College LITES: cases are pending. Sugam- Progress is there but still pendency of 19 cases. RHRC: Pending 9 cases.
- b. **Jodhpur: LITES** – zero -columns are filled. Under sugam-progress is there but still pendency is to be taken care of. Under RHRC- Pending cases to be taken care of and regarding Assurance by HM in assembly; MDM hospital Mother and child wing could not be not started due to staff problem.
- c. **Bikaner:** regarding LITES: 63 cases are pending. In Sugam-Progress is there but still pendency of 4 cases.
- d. **Ajmer:** LITES cases are pending and in Sugam- Progress is there but still there is pendency of 9 cases.
- e. **Kota:** LITES Cases are pending. Progress is there but still pendency of 1 case in Sugam.
- f. **Udaipur:** LITES cases are pending. In case Sugam Progress is there but still pendency is there. Assembly Questions: Q. no.638 is pending

**Out of above discussions following were the Decisions taken:**

1. CMIS to be accorded top priority. This includes CM directions, Manifesto “Suraaj Sankalp” and announcements.
2. 60 days Action Plan needs regular monitoring of the issues and report to be submitted weekly.
3. All PMCs should monitor civil works regularly. Monitor quality of work and time frame to be ensured. Submit report on completed/progress/handed over works.
4. Plan Expenditure needs to be monitored from the year 2014-15 monthly progress regarding expenditure to be sent. All PMCs to avoid the situation when most of the expenditure incurs in the last quarter of the financial year.

5. All PMC to update and review the status of UG/PG seats , if any deficiency is marked or informed by MCI ,PMCs should try to resolve it within time frame.
6. ATR on Principal Forum Meeting to be submitted at the earliest.
7. MNJY/ MNDY: Regular maintenance of the supply of medicine, to be taken care of and go for local purchase if required. There should be prior checking of various reagents and sutures to be supplied taken from RMSCL.
8. The remaining amount available in various schemes/CSS left unexpended is expended timely.
9. Pending cases to be uploaded online. All PMCs to review LITES, Sugam, RGDPS and RHRC cases.
10. Pending Assembly questions must be replied at earliest.
11. Vacancy positions of Faculty: As on 1<sup>st</sup> April, 2014 to be reported immediately because every time it is varied in number.

  
 Joint Secretary Medical Education

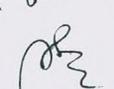
**Government of Rajasthan  
Department of Medical Education**

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Date: 27-6-14

Copy to:

1. PS to the Hon'ble Minister Medical, Health and Medical Education.
2. PS to the Principal Secretary Medical and Health.
3. Sr.PA to the Joint Secretary Medical Education.
4. Principal and Controller Medical College  
Jaipur/Ajmer/Kota/Bikaner/Udaipur/Jodhpur to initiate necessary action and send proposals accordingly.
5. Guard-File.

*Sh. Tawari to kindly upload on website.*  
  
 27/6/14

  
 OSD (ME)