



शरीरमाद्यं रक्तु धर्मस्वप्नम्

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

AGENDA

FOR THE 3RD MEETING OF THE

CENTRAL INSTITUTE BODY

TO BE HELD ON : 24th January, 2019 (Thursday)
TIME : 11:15 A.M.
PLACE : Dr. V. Ramalingaswamy Board Room
AIIMS, Ansari Nagar, New Delhi.

Through Special Messenger
By Speed Post

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

F.No. 5-1/2019-Genl.

Ansari Nagar, New Delhi-29
Dated: 23.01.2019

MEMORANDUM

Subject: 3rd meeting of the Central Institute Body scheduled to be held on Thursday the 24th January, 2019 at 11:15 A.M. in Dr. Ramalingaswami Board Room, AIIMS, New Delhi.

Further to this office memorandum of even number dated 18.01.2019 on the above mentioned subject, the Agenda for the Central Institute Body (CIB) meeting is enclosed.


(PROF. RANDEEP GULERIA)
DIRECTOR &
MEMBER SECRETARY

Encl. As above

The Chairman and all the
Members of the Central Institute Body.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

List of the Central Institute Body Members

- | | |
|--|------------------------|
| 1. Shri Jagat Prakash Nadda
Minister of Health & Family Welfare
Nirman Bhawan, New Delhi – 110011 | President |
| 2. Shri Ramesh Bidhuri, MP (Lok Sabha)
H.No. 179, Sunpath House,
Village Tughlakabad, New Delhi-110044 | Member |
| 3. Shri Parvesh Sahib Singh Verma, MP (Lok Sabha)
1/14B, Shaniti Niketan,
New Delhi | Member |
| 4. Prof. Ram Gopal Yadav, MP (Rajya Sabha)
8-A, Lodhi Estate,
New Delhi-110003 | Member |
| 5. Shri R. Subrahmanyam
Secretary to the Govt. of India
Department of Higher Education,
Ministry of Human Resource Development
Shastri Bhawan, New Delhi-110001 | Member |
| 6. Dr. M.K. Bhan
Former Secretary, Deptt. of Biotechnology,
M/o Science & Technology | Member |
| 7. Smt. Preeti Sudan
Secretary (H&FW)
Govt. of India
Ministry of Health & Family Welfare
Nirman Bhawan, New Delhi – 110011 | Member |
| 8. Prof. Yogesh Kumar Tyagi
Vice Chancellor
University of Delhi, Delhi – 110007 | Member
(Ex-Officio) |
| 9. Dr. S. Venkatesh
Director General of Health Services
Govt. of India
Nirman Bhawan, New Delhi – 110011 | Member
(Ex-Officio) |
| 10. Dr. D.S. Rana
Chairman,
Board of Management
Sir Ganga Ram Hospital, New Delhi | Member |
| 11. Dr. (Smt.) Vijay Laxmi Saxena
Former General Secretary,
Indian Sciences Congress Association,
(ISCA), Kolkata, West Bengal | Member |

- Dr. (Smt.) Vijay Laxmi Saxena
Coordinator Bioinformatics
Infrastructure Facility Centre of DBT, (Govt. of India),
Head of Department of Zoology, Dayanand
Girls P.G. College, Kanpur, 7/182,
Swarup Nagar, Kanpur – 208002, U.P.
12. **Dr. Mahesh B. Patel** Member
F-001, Shilalekh Society,
Opposite Police Stadium,
Shahi Baug, Ahmedabad – 38004 (Gujarat) (w.e.f. 12.02.2016)
13. **Dr. D.G. Mhaisekar** Member
Vice Chancellor,
Maharashtra University of Health Sciences,
Dindori Road, Mhasrul,
Nashik – 422004 (w.e.f. 12.02.2016)
14. **Dr. N. Gopalkrishnan** Member
Professor (Nephrology)
Madras Medical College,
Chennai
15. **Shri. R.K. Vats** Member
Addl. Secretary and Financial Adviser
Govt. of India,
Ministry of Health & Family Welfare,
Nirman Bhawan, New Delhi – 110011
16. **(Prof.) Dr. Sarman Singh** Member
Director, AIIMS, Bhopal
17. **Dr. Sanjeev Misra** Member
Director, AIIMS, Jodhpur
18. **Dr. P.K. Singh** Member
Director, AIIMS, Patna
19. **Dr. Nitin M. Nagarkar** Member
Director, AIIMS, Raipur
20. **Prof. Ravi Kant** Member
Director, AIIMS, Rishikesh
21. **Dr. Gitanjali Batmanabane** Member
Director, AIIMS, Bhubaneswar
22. **Director** Member
AIIMS, Manglagiri, Andhra Pradesh
23. **Dr. Vibha Dutta** Member
Director, AIIMS, Nagpur
24. **Dr. Dipika Deka** Member
Director, AIIMS, Kalyani, West Bengal
25. **Shri Arun Singhal** Member
Additional Secretary, PMSSY
26. **Shri Sunil Sharma** Member
Joint Secretary PMSSY
27. **Prof. Randeep Guleria** Member Secretary
Director, AIIMS

AGENDA FOR 3RD MEETING OF THE CENTRAL INSTITUTE BODY ON 24.01.2019

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NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/1

Confirmation of 2nd CIB meeting held on 10.12.2018

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

F.No. 5-2/2018-Genl

Ansari Nagar, New Delhi-29

Dated:

14 JAN 2019

MEMORANDUM

Subject:- Final Minutes of the 2nd meeting of the Central Institute Body of AIIMS held on 10.12.2018 at 5:15 P.M. in the Dr. Ramalingaswami Board Room, AIIMS, New Delhi.

The Final Minutes of 2nd meeting of the Central Institute Body held on 10.12.2018 at 5:15 P.M., in the Dr. Ramalingaswami Board Room, AIIMS, New Delhi as approved by the Chairman of the Central Institute Body is being circulated to Chairman and all the Members of the Central Institute Body for information.


12/1/19

(PROF. RANDEEP GULERIA)
DIRECTOR &
MEMBER SECRETARY

Encl: As above.

The Chairman and all
Members of the Central Institute Body, AIIMS

Minutes of 2nd meeting of Central Institute Body of AIIMS held at 5:15 P.M. on 10th December, 2018 under the Chairmanship of Hon'ble Union Minister of Health and Family Welfare.

2nd meeting of Central Institute Body (CIB) of AIIMS was held at 5:15 P.M. on 10th December, 2018 in Dr Ramalingaswamy Board Room of AIIMS, New Delhi under the chairmanship of Shri J P Nadda, Hon'ble Union Minister of Health & Family Welfare, Govt. of India. The following members of CIB were present:-

- 1) Shri Jagat Prakash Nadda -- President
Hon'ble Union Minister of Health & Family Welfare
Government of India, Nirman Bhawan,
New Delhi - 110011
- 2) Prof. Ram Gopal Yadav -- Member
Hon'ble Member of Parliament (Rajya Sabha)
- 3) Shri Ramesh Bidhuri -- Member
Hon'ble Member of Parliament (Lok Sabha)
- 4) Smt. Preeti Sudan -- Member
Secretary to the Govt. of India,
Ministry of Health & Family Welfare,
Nirman Bhawan,
New Delhi - 110011
- 5) Shri R K Vats -- Member
Addl. Secretary and Financial Advisor
Govt of India
Ministry of Health and Family Welfare
Nirman Bhawan, New Delhi - 110011
- 6) Prof. Yogesh Kumar Tyagi -- Member
Vice Chancellor
(Ex-Officio)
University of Delhi, Delhi - 110007
- 7) Dr. Mahesh B. Patel -- Member
F-001, Shilalekh Society
Opposite Police Stadium
Shahi Baug,
Ahmedabad-380004
- 8) Prof. Sanjeev Misra -- Member
Director,
All India Institute Medical Sciences,
Basni Industrial Area,
Phase-2, Jodhpur, Rajasthan-342005
- 9) Prof. P.K. Singh -- Member

Director,
All India Institute Medical Sciences,
Phulwari Sharif, Patna, Bihar-801507

- 10) Prof. Nitin M. Nagarkar -- Member
Director,
All India Institute Medical Sciences,
Great Eastern Rd, AIIMS Campus,
Tatibandh, Raipur, Chhattisgarh-492099
- 11) Prof. Gitanjali Batmanabane -- Member
Director,
All India Institute Medical Sciences,
Sijua, Patrapada, Bhubaneswar-751019
- 12) Dr Dipika Deka -- Member
Director,
All India Institute Medical Sciences,
Kalyani, West Bengal
- 13) Maj General (Dr) Vibha Dutta -- Member
Director,
All India Institute Medical Sciences,
Nagpur
- 14) Shri Arun Singhal -- Member
Addl. Secretary, PMSSY,
Ministry of Health & Family Welfare,
Nirman Bhawan,
New Delhi - 110 011
- 15) Shri Sunil Sharma -- Member
Joint Secretary, PMSSY,
Ministry of Health & Family Welfare,
Nirman Bhawan,
New Delhi - 110 011
- 16) Prof. Randeep Guleria -- Member-Secretary
Director,
All India Institute of Medical Sciences
Ansari Nagar
New Delhi -110 029

Following members could not attend the meeting:-

- 1) Shri Parvesh Sahib Singh Verma, -- Member
Member of Parliament (Lok Sabha)
- 2) Shri R. Subrahmanyam -- Member
Secretary, Deptt. of Higher Education,
Ministry of HRD

- 3) Dr. (Smt.) Vijay Laxmi Saxena -- Member
Coordinator Bioinformatics Infrastructure Facility Centre of DBT
Government of India, Head of the Deptt. of Zoology
Dayanand Girls P.G. College
Kanpur - 208 002 (U.P.)
- 4) Dr M K Bhan -- Member
Former Secretary, Dept. of Biotechnology
M/s Science & Technology
- 5) Dr S Venkatesh -- Member
DGHS
Govt of India
Nirman Bhawan, New Delhi
- 6) Dr D S Rana -- Member
Chairman, Board of Management
Sir Ganga Ram Hospital, New Delhi
- 7) Dr. D.G. Mhaisekar -- Member
Vice Chancellor, Maharashtra University of Health Sciences,
Dindori Road, Mhasrul
Nashik - 422 004.
- 8) Dr. N. Gopalkrishnan -- Member
Professor (Nephrology)
Madras Medical College
Chennai
- 9) Dr Sarman Singh -- Member
Director, All India Institute of Medical Sciences
Bhopal
- 10) Dr Ravi Kant -- Member
Director, All India Institute of Medical Sciences
Rishikesh

Dr. V.K. Bahl, Dean (Academic) AIIMS New Delhi, Dr. D.K. Sharma, Medical Superintendent AIIMS New Delhi were also present as a special invitee during the meeting. Shri Subhasish Panda, Dy. Director (Admn.) and Shri Neeraj Kumar Sharma, Sr. Financial Adviser, AIIMS, New Delhi were also present during the meeting.

At the outset, the President welcomed all the members and officers to the Central Institute Body meeting of AIIMS. Director AIIMS welcomed the

President and all the members present. With the permission of the President, agenda was presented for discussion by the Director, AIIMS as under:-

1. Item No.CIB-2/1: Confirmation of 1st CIB meeting held on 16.07.2018:

All the members were requested to confirm the minutes of 1st meeting of CIB held on 16th July, 2018. As none of members raised any objection, minutes of 1st meeting were accepted as confirmed.

2. Item No.CIB-2/2: Action Taken Note on decisions taken in 1st CIB meeting held on 16.07.2018:

The action taken on the decisions of 1st CIB meeting were noted along with the following directions:

a. Agenda 1 (Review of financial, physical and recruitment progress):

Additional Secretary, MoHF&W stated that in 1st meeting of CIB, all AIIMS were requested to compare their DPR works with awarded works and check if some DPR works have not been yet started. Decisions should be taken regarding the necessity of taking up left over works and then it should be certified that the remaining works are not needed or they should be awarded quickly in order to avoid cost escalation. The President stressed upon all AIIMS to confirm within a week time. Additional Secretary also requested all AIIMS to submit resolutions passed by their IB and GB for adopting CIB decisions within a week.

b. Agenda 4 (Creation of post of CVO): AIIMS Delhi may examine the desirability of creating the post of CVO in view of the impending Court Case and inform the Ministry.

3. Item No.CIB-2/3: Review of Financial, Physical and Recruitment

Progress: Addl. Secretary, MOHF&W submitted that physical progress of many projects in different AIIMS have reached upto 99% or above and is stuck at this level for quite some time. Addl. Secretary further submitted that the timelines for completion in new AIIMS are stringent and therefore, the Director of different AIIMS should take up different issues encountered for review by the Committee under the chairmanship of Chief Secretary. The President stressed upon the need of review by Director AIIMS to ensure

timely completion of projects, especially in new AIIMS. Addl. Secretary also submitted that the scheduled date of completion of different projects should not be extended without proper justification. He further suggested that the new AIIMS may prepare catch up plans in case of delay and monitor progress of the projects accordingly. DPRs should be prepared carefully and inter departmental issues should be sorted out before approval of DPRs. AIIMS planning to start classes/ OPD next year must send proposals for creation of posts immediately.

In regards to recruitment of faculty, the President desired to know whether any policy level changes are required for improving the positions of faculty in different AIIMS. It was clarified by Directors that faculty has been leaving only if they are on contract and they secure regular appointments. Some have quit on getting appointments in other INIs closer to their home states. No systemic changes are warranted to attract faculty.

4. Item No.CIB-2/4: Measures to improve faculty strength in new AIIMS

CIB was intimated that a Committee of Directors under the chairmanship of Director AIIMS, New Delhi has deliberated the issue as decided by CIB in its 1st meeting and has preferred two cycles each of regular and contractual recruitment. The regular recruitment may be done at institute level while combined contractual recruitment may be done. Director AIIMS Nagpur suggested that a combined selection committee for regular recruitment may not be desirable, however, the same may be carried out on regional basis to address regional preference of faculty members. The President desired as there are serious shortage at senior level faculty members, all Directors of AIIMS may discuss the issue immediately and suggest suitable methodology without compromising the quality. While devising this methodology, focus on combined regular recruitment at fixed periodicity must be maintained so that critical shortage at senior faculty levels can be addressed.

5. Item No.CIB-2/5: Standard Staffing Pattern for new AIIMS: DDA AIIMS,

Delhi submitted that the details of posts of faculty and non-faculty members for 960 and 750 bed hospitals have been included. Secretary HF&W desired that the break-up of posts desired in different phases may

also be demarcated with year wise details. It was also decided that the posts of Director, DDA, MS, FA, SE and CAO may also be included in the standard staffing pattern.

6. **Item No.CIB-2/6: Proposal for transfer of procurement of Medical Equipment's activity from Ministry to AIIMS:** DDA AIIMS Delhi submitted that the committee of Directors of different AIIMS have recommended that mentor AIIMS may take up procurement requirement of new AIIMS with M/s HITES as PSA (Procurement Support Agency). Secretary, HF&W desired that the major equipment may be procured by AIIMS Delhi. Director AIIMS submitted that there are constraints in AIIMS Delhi as it has its own requirement of early commissioning of NCI and other new blocks are coming up, which are otherwise getting delayed. Director AIIMS Nagpur stated that some equipment supplied by M/s HITES is of no use at present as the buildings are not ready. She also submitted that equipment procured now would get outdated by the time the infrastructure and faculty is in position. Secretary HF&W stated that M/s HITES must make procurement action in consultation with the users. Additional Secretary stated that NITI Aayog has also mooted the model of wet lease and life cycle cost for procurement of medical equipment. Director AIIMS submitted while concept of life cycle cost has been worked out in some of equipment, the concept of wet lease may not be appropriate in academic institution like AIIMS as wet lease works on outsourced basis and the Resident doctors then will not get any experience of working on such equipment which would be detrimental to education and research. The President desired that suggestion of NITI Aayog may be examined separately and may be included as an agenda note in the next CIB. The President desired that Director AIIMS Jodhpur and Raipur may deliberate and submit their joint recommendation on major (high value) equipment which would be procured through AIIMS Delhi while the rest are procured by the respective Institutes/Mentor Institutes.

7. **Item No.CIB-2/7: Revision of the Guidelines for procurement of Medicines and Medical Equipment and Installation:** CIB approved the proposal.
8. **Item No.CIB-2/8: Proposal for approval of payment of Dress/Uniform Allowance, Nursing Allowance, Academic Allowance and Conveyance Allowance:** CIB was informed that these proposals were placed before CIB in its 1st meeting on 16.07.2018, however could not be decided. The CIB approved all the proposals in accordance with orders issued by government of India except for academic allowance, which will be taken up separately.
9. **Item No.CIB-2/9: Adoption of Recruitment Rules for new AIIMS:** CIB agreed with the proposal for adoption of Recruitment Rules of all the posts of AIIMS, New Delhi for the corresponding posts in all new AIIMS, with prospective effect. Any ongoing recruitment for which posts have been advertised may be completed on the basis of pre-revised RR. Problems encountered by any AIIMS may again be brought before CIB.
10. **Item No.CIB-2/10: Engagement of new Executive Agencies for setting up of upcoming AIIMS project under PMSSY by modifying EOI eligibility criteria:** After detailed deliberation on the options available for engagement of Executive Agency including global tenders, the CIB approved to relax the condition restricting the assignment of only upto 3 AIIMS to the empanelled PSUs – M/s NBCC, M/s HSCC and M/s HITES. CIB also desired that the users should be involved right from the beginning and there should be close monitoring of the works.
11. **Item No.CIB-2/11: Synchronization of counselling schedules of NEET/AIIMS:** AIIMS Delhi made a presentation contending that synchronization of counselling of NEET and AIIMS is already being done at present. However, as far as common counselling is concerned, it may not be possible technically as the two are separate exams and therefore have separate merit list. Secretary HF&W stated that NIC has developed the requisite algorithm/software that worked flawlessly during NEET SS counselling and AIIMS Delhi may call upon NIC for detailed deliberation.

CIB agreed that the issue may be brought before the President of CIB for decision after a detailed deliberation and technical examination.

12. **Item No.CIB-2/12: Payment of Stipend to Foreign National Students admitted in PG Courses in medical sciences in India:** After the detailed deliberation, the CIB agreed that a detailed note may be sent on the issue to MEA through MOHF&W by AIIMS, Delhi.
13. **Item No.CIB-2/13: Involving public/private sector and voluntary/social organizations in maintenance/upkeep/upgradation of wards/facilities of AIIMS under CSR/Gift/Donations etc:** CIB approved the proposal.
14. **Item No.CIB-2/14: Adoption of "Rogi Kalyan Samiti/Hospital Management Society" Model for better hospital management and patient care:** CIB approved the proposal and decided that PMJAY reimbursements may also be added to the sources of finance.
15. **Item No.CIB-2/15: Improving experience of patients in AIIMS "Greeting and treating with a smile and care:** CIB approved adoption of measures contained in paragraph III of the agenda note by all AIIMS.
16. **Item No.CIB-2/16: Deployment of Common Hospital Management Information System (HMIS):** DDA AIIMS Delhi submitted that AIIMS Delhi has implemented various IT modules, however as isolated modules. There is need to implement common HMIS. CIB agreed with common HMIS to be implemented in different AIIMS with AIIMS Delhi as lead. Secretary HF&W stated that AIIMS Delhi may evaluate the software developed by both C-DAC and NIC and consider suitably customizing it to the needs of AIIMS. The software developed finally should be open-source so that AIIMS may act as hub, with other District level hospitals adopting it at later stage.
17. **Item No.CIB-2/17: Proposal for funding of new AIIMS and other New Projects in INIs through HEFA:** CIB approved the proposal.

18. **Item No.CIB-2/18: Deputing SRs from 6 functional AIIMS to AIIMS Raebareli:** After detailed deliberation, the CIB agreed that it may not be viable to depute SRs to AIIMS Raebareli and options of providing posts of SRs on loan to Raebareli from other other AIIMS for recruitment by Raebareli or any other option may be explored.
19. **Item No.CIB-2/19: Proposal for approval of payment of Hospital Patient Care Allowance/Patient Care Allowance to the Employee of AIIMS New Delhi:** The CIB desired that the issue may be kept on hold as the issue has been taken up with the Department of Expenditure. However, for all AIIMS including those that came into existence after 30.6.2017, HPCA may be paid to group C employees upto the grade pay of Rs. 2800/- (Level 5) in order to ensure parity with AIIMS Delhi.
20. **Item No.CIB-2/20: Adoption of CCS Rules 1993 in AIIMS to provide an institutional mechanism for grievance redressal:** CIB approved the proposal.
21. **Item No.CIB-2/21: Transfer of Project Cell posts except Deputy Director (Administration) to respective AIIMS:** CIB noted the proposal for constitution of selection committee of appropriate level in each AIIMS for selection of officers at Project Posts (except for Deputy Director Administration) and subsequent action for filling up of these posts by each AIIMS.
22. **Item No.CIB-2/22: Streamlining the recruitment process of non-faculty (technical) by new AIIMS to attain speedier and better outcomes:** CIB desired that in order to attain speedier outcomes in recruitment of non-faculty (technical) cadre, the different cadres may be bifurcated into groups by AIIMS Delhi within 15 days. Each of these groups then shall be assigned to different AIIMS who shall recruit such cadres centrally for all AIIMS. Such recruitment exercise should take place at regular intervals throughout the year.

23. **Item No.CIB-2/23: Replacing the word "Mentoring Institute" with "Any other Institute of National Importance" in the order dated 01.05.2015: CIB approved the proposal.**
24. **Item No.CIB-2/24: Proposal for amendments in AIIMS Rules/Regulations suggested by Dr Balram Airan Committee:** The proposal for amendment in AIIMS Rules and Regulations as suggested by Dr Balram Airon Committee of AIIMS Delhi was deliberated by CIB and it was decided that the amended Rules and Regulations are to be sent to MOHF&W for legislative vetting. It was decided that at serial no 5 in constitution of GB, the phrase concerned Additional Secretary/Joint Secretary may be placed, instead of writing the specific designation. For recruitment of faculty members, Combined Central/Regional Committee may be added to Standing Selection Committee in view of agenda no: CIB-2/4 above.
25. **Item No.CIB-2/25: Enhancement in consolidated salary of Contractual Faculty Members in AIIMS:** The proposal for enhancement in consolidated salary of contractual faculty members from existing Rs 1,00,000/- to Rs 1,75,000/- was deliberated. CIB asked AIIMS Delhi to refer the case details to the Ministry for approval of IFD and authorised the President to take a final decision.
26. **Item No.CIB-2/26: HR Sub-Committee:** CIB considered the matter and decided that all the appointments of faculty may be decided by HR sub-committee, while other cases like personnel/disciplinary matters etc may be continued to be dealt by the GB.

The meeting ended with a vote of thanks to all those present.

sd/-
(Prof. Randeep Guleria)
Director &
Member Secretary
Central Institute Body, AIIMS

sd/-
(Jagat Prakash Nadda)
Hon'ble HFM &
President, Central Institute Body,
AIIMS

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/2

**Action Taken Note on decisions taken in 2nd CIB meeting
held on 10.12.2018**

Agenda No. CIB-3/2: Action Taken Note on decisions taken in 2nd CIB meeting held on 10.12.2018

2nd meeting of CIB was held on 10.12.2018 under the chairmanship of Hon'ble Minister for Health & Family Welfare. The action taken on the issue as discussed in 2nd meeting are as follows:

Sr No	Decision of 2 nd CIB	Action Taken/Remarks
1.	<p>Agenda 1: Confirmation of 1st CIB Meeting held on 16.07.2018: The minutes of 1st CIB meeting were accepted as confirmed.</p>	<p>The issue may be considered as closed.</p>
2.	<p>Agenda 2: Action Taken Note on decision taken in 1st CIB held on 16.07.2018</p> <p>All AIIMS were requested to compare their DPR works with awarded works and check if some DPR works have not been yet started. Decisions should be taken regarding the necessity of taking up left over works and then it should be certified that the remaining works are not needed or they should be awarded quickly in order to avoid cost escalation. All AIIMS were requested to confirm within a week time.</p> <p>All AIIMS were requested to submit resolutions passed by their IB and GB for adopting CIB decisions within a week.</p> <p>Creation of post of CVO: AIIMS Delhi may examine the desirability of</p>	<p>Details are placed at separate agenda note (CIB-3/3).</p>

	<p>creating the post of CVO in view of the impending Court Case and inform the Ministry.</p>	
3.	<p>Agenda 3: Review of Financial, Physical and Recruitment Progress:</p> <p>The physical progress of many projects in different AIIMS have reached upto 99% or above and is stuck at this level for quite some time. As the timelines for completion in new AIIMS are stringent and therefore, the Director of different AIIMS should take up different issues encountered for review by the Committee under the chairmanship of Chief Secretary. The President stressed upon the need of review by Director AIIMS to ensure timely completion of projects, especially in new AIIMS.</p> <p>The scheduled date of completion of different projects should not be extended without proper justification.</p> <p>New AIIMS may prepare catch up plans in case of delay and monitor progress of the projects accordingly.</p> <p>DPRs should be prepared carefully and inter departmental issues should</p>	<p>Details are placed at separate agenda note (CIB-3/3).</p>

	<p>be sorted out before approval of DPRs.</p> <p>AIIMS planning to start classes/ OPD next year must send proposals for creation of posts immediately.</p>	
4.	<p>Agenda 4: Measures to improve faculty strength in new AIIMS: CIB was intimated that a Committee of Directors under the chairmanship of Director AIIMS, New Delhi has deliberated the issue as decided by CIB in its 1st meeting and has preferred two cycles each of regular and contractual recruitment. The regular recruitment may be done at institute level while combined contractual recruitment may be done. Director AIIMS Nagpur suggested that a combined selection committee for regular recruitment may not be desirable, however, the same may be carried out on regional basis to address regional preference of faculty members. The President desired as there are serious shortage at senior level faculty members, all Directors of AIIMS may discuss the issue immediately and suggest suitable methodology without compromising the quality. While devising this methodology, focus on combined</p>	<p>The committee constituted under the Chairmanship of Director AIIMS, New Delhi has deliberated the issues on 28.12.2018.</p> <p>The recommendations are placed in separate agenda note (CIB-3/5).</p>

	regular recruitment at fixed periodicity must be maintained so that critical shortage at senior faculty levels can be addressed.	
5.	<p>Agenda 5: Standard Staffing Pattern for new AIIMS:</p> <p>The details of posts of faculty and non-faculty members for 960 and 750 bed hospitals were worked out.</p> <p>Secretary HF&W desired that the break-up of posts desired in different phases may also be demarcated with year wise details.</p> <p>It was also decided that the posts of Director, DDA, MS, FA, SE and CAO may also be included in the standard staffing pattern.</p>	The issue may be considered as closed.
6.	<p>Agenda 6: Proposal for transfer of procurement of Medical Equipment's activity from Ministry to AIIMS Delhi:</p> <p>It was discussed that the major equipment may be procured by AIIMS Delhi. Director AIIMS submitted that there are constraints in AIIMS Delhi as it has its own requirement of early commissioning of NCI and other new blocks are coming up, which are otherwise getting delayed. Director AIIMS Nagpur stated that some</p>	<p>Director, AIIMS Raipur and Director, AIIMS Jodhpur have submitted their recommendation.</p> <p>The recommendations are placed in separate agenda note (CIB-3/4).</p>

equipment supplied by M/s HITES is of no use at present as the buildings are not ready. She also submitted that equipment procured now would get outdated by the time the infrastructure and faculty is in position. Secretary HF&W stated that M/s HITES must make procurement action in consultation with the users.

Additional Secretary stated that NITI Aayog has also mooted the model of wet lease and life cycle cost for procurement of medical equipment. Director AIIMS submitted while concept of life cycle cost has been worked out in some of equipment, the concept of wet lease may not be appropriate in academic institution like AIIMS as wet lease works on outsourced basis and the Resident doctors then will not get any experience of working on such equipment which would be detrimental to education and research. The President desired that suggestion of NITI Aayog may be examined separately and may be included as an agenda note in the next CIB.

The President desired that Director

AIIMS Delhi has incorporated life cycle costing in procurement of NCI, Jhajjar while tendering for all medical equipment and bid ranking has been done of total ownership cost over next 10 years (inclusive of CAMC, consumables and operation cost) instead of only upfront equipment cost. Apart from this, a composite costing model has also been enforced for fixing of rates of any optional items/accessories by ensuring that the prices of the indicative quantities of these items are added while bid ranking for calculating L1.

	AIIMS Jodhpur and Raipur may deliberate and submit their joint recommendation on major (high value) equipment which would be procured through AIIMS Delhi while the rest are procured by the respective Institutes/Mentor Institutes.	
7.	Agenda 7: Revision of the Guidelines for procurement of Medicines and Medical Equipment and Installation: CIB approved the proposal.	The issue may be considered as closed.
8.	Agenda 8: Proposal for approval of payment of Dress/Uniform Allowance, Nursing Allowance, Academic Allowance and Conveyance Allowance: The CIB approved all the proposals in accordance with orders issued by government of India except for academic allowance, which will be taken up separately.	The issue may be considered as closed.
9.	Agenda 9: Adoption of Recruitment Rules for new AIIMS: CIB agreed with the proposal for adoption of Recruitment Rules of all the posts of AIIMS, New Delhi for the corresponding posts in all new AIIMS, with prospective effect. Any ongoing recruitment for which posts have been advertised may be completed on	The issue may be considered as closed.

	the basis of pre-revised RR. Problems encountered by any AIIMS may again be brought before CIB.	
10.	<p>Agenda 10: Engagement of new Executive Agencies for setting up of upcoming AIIMS project under PMSSY by modifying EOI eligibility criteria: After detailed deliberation on the options available for engagement of Executive Agency including global tenders, the CIB approved to relax the condition restricting the assignment of only upto 3 AIIMS to the empanelled PSUs – M/s NBCC, M/s HSCC and M/s HITES. CIB also desired that the users should be involved right from the beginning and there should be close monitoring of the works.</p>	The issue may be considered as closed.
11.	<p>Agenda 11: Synchronization of counselling schedules of NEET/AIIMS:</p> <p>AIIMS Delhi made a presentation contending that synchronization of counselling of NEET and AIIMS is already being done at present. However, as far as common counselling is concerned, it may not be possible technically as the two are separate exams and therefore have separate merit list.</p>	

	Secretary HF&W stated that NIC has developed the requisite algorithm/software that worked flawlessly during NEET SS counselling and AIIMS Delhi may call upon NIC for detailed deliberation. CIB agreed that the issue may be brought before the President of CIB for decision after a detailed deliberation and technical examination.	The matter was deliberated with C-DAC and NIC. As decided in 2 nd CIB meeting, the matter would be placed before the President of CIB after further detailed deliberation.
12.	Agenda 12: Payment of Stipend to Foreign National Students admitted in PG Courses in medical sciences in India: After the detailed deliberation, the CIB agreed that a detailed note may be sent on the issue to MEA through MOHF&W by AIIMS, Delhi.	The detailed note has been sent to MoHF&W.
13.	Agenda 13: Involving public/private sector and voluntary/social organizations in maintenance/upkeep/upgradation of wards/facilities of AIIMS under CSR/Gift/Donations etc: CIB approved the proposal.	The issue may be considered as closed.
14.	Agenda 14: Adoption of "Rogi Kalyan Samiti/Hospital Management Society" Model for better hospital management and patient care: CIB approved the proposal and decided that PMJAY	The issue may be considered as

	reimbursements may also be added to the sources of finance.	closed.
15.	Agenda 15: Improving experience of patients in AIIMS "Greeting and treating with a smile and care: CIB approved adoption of measures contained in paragraph III of the agenda note by all AIIMS.	The issue may be considered as closed.
16.	Agenda 16: Deployment of Common Hospital Management Information System (HMIS): AIIMS Delhi has implemented various IT modules, however as isolated modules. There is need to implement common HMIS. CIB agreed with common HMIS to be implemented in different AIIMS with AIIMS Delhi as lead. Secretary HF&W stated that AIIMS Delhi may evaluate the software developed by both C-DAC and NIC and consider suitably customizing it to the needs of AIIMS. The software developed finally should be open-source so that AIIMS may act as hub, with other District level hospitals adopting it at later stage.	Computer Facility Department of AIIMS is processing the matter.
17.	Agenda 17: Proposal for funding of new AIIMS and other New Projects in INIs through HEFA: CIB approved the proposal.	The issue may be considered as closed.

18.	<p>Agenda 18: Deputing SRs from 6 functional AIIMS to AIIMS Raebareli: After detailed deliberation, the CIB agreed that it may not be viable to depute SRs to AIIMS Raebareli and options of providing posts of SRs on loan to Raebareli from other other AIIMS for recruitment by Raebareli or any other option may be explored.</p>	The issue may be considered as closed.
19.	<p>Agenda 19: Proposal for approval of payment of Hospital Patient Care Allowance/Patient Care Allowance to the Employee of AIIMS New Delhi: The CIB desired that the issue may be kept on hold as the issue has been taken up with the Department of Expenditure. However, for all AIIMS including those that came into existence after 30.6.2017, HPCA may be paid to group C employees upto the grade pay of Rs. 2800/- (Level 5) in order to ensure parity with AIIMS Delhi.</p>	Ministry may update the progress of the case.
20.	<p>Agenda 20: Adoption of CCS Rules 1993 in AIIMS to provide an institutional mechanism for grievance redressal: CIB approved the proposal.</p>	The issue may be considered as closed.
21.	<p>Agenda 21: Transfer of Project Cell posts except Deputy Director (Administration) to respective</p>	

	<p>AIIMS: CIB noted the proposal for constitution of selection committee of appropriate level in each AIIMS for selection of officers at Project Posts (except for Deputy Director Administration) and subsequent action for filling up of these posts by each AIIMS.</p>	<p>The issue may be considered as closed.</p>
22.	<p>Agenda 22: Streamlining the recruitment process of non-faculty (technical) by new AIIMS to attain speedier and better outcomes: CIB desired that in order to attain speedier outcomes in recruitment of non-faculty (technical) cadre, the different cadres may be bifurcated into groups by AIIMS Delhi within 15 days. Each of these groups then shall be assigned to different AIIMS who shall recruit such cadres centrally for all AIIMS. Such recruitment exercise should take place at regular intervals throughout the year.</p>	<p>The details are placed in a separate agenda Note (CIB-3/6)</p>
23.	<p>Agenda 23: Replacing the word "Mentoring Institute" with "Any other Institute of National Importance" in the order dated 01.05.2015: CIB approved the proposal.</p>	<p>The issue may be considered as closed.</p>
24.	<p>Agenda 24: Proposal for amendments in AIIMS Rules/Regulations suggested by Dr</p>	

	<p>Balram Airan Committee: The proposal for amendment in AIIMS Rules and Regulations as suggested by Dr Balram Airon Committee of AIIMS Delhi was deliberated by CIB and it was decided that the amended Rules and Regulations are to be sent to MOHF&W for legislative vetting. It was decided that at serial no 5 in constitution of GB, the phrase concerned Additional Secretary/Joint Secretary may be placed, instead of writing the specific designation. For recruitment of faculty members, Combined Central/Regional Committee may be added to Standing Selection Committee in view of agenda no: CIB-2/4 above.</p>	<p>The draft Rules/Regulations have been sent to MoHF&W for processing the proposal for legislative vetting on 02.01.2019.</p>
25.	<p>Agenda 25: Enhancement in consolidated salary of Contractual Faculty Members in AIIMS: The proposal for enhancement in consolidated salary of contractual faculty members from existing Rs 1,00,000/- to Rs 1,75,000/- was deliberated. CIB asked AIIMS Delhi to refer the case details to the Ministry for approval of IFD and authorised the President to take a final decision.</p>	<p>The proposal has been sent to MoHF&W.</p>
26.	<p>Agenda 26: HR Sub-Committee: CIB considered the matter and decided that all the appointments of</p>	<p>The issue may be considered as closed.</p>

	faculty may be decided by HR sub-committee, while other cases like personnel/disciplinary matters etc may be continued to be dealt by the GB.	
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NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/3

Review of Financial, Physical and Recruitment Progress

Agenda No CIB-3/3: Review of Financial, Physical and Recruitment Progress

- I. **Introduction:** In the 2nd meeting of the CIB, this item was discussed when Additional Secretary, MOHF&W submitted that physical progress in many projects in different AIIMS have reached upto 99% or above and is stuck at this level for quite some time. Additional Secretary further submitted that the time lines for completion in new AIIMS are stringent and therefore, the Directors of different AIIMS should take up different issues encountered for review by the Committee under the Chairmanship of Chief Secretary. The President stressed upon the need of review by Director AIIMS to ensure timely completion of projects, especially in new AIIMS. Additional Secretary also submitted that the scheduled date of completion of different projects should not be extended without proper justification. He further suggested that the new AIIMS may prepare catch up plans in case of delay and monitor progress of the projects accordingly. DPRs should be prepared carefully and inter-departmental issues should be sorted out before approval of DPRs. AIIMS planning to start classes/OPD next year must send proposal for creation of posts immediately.

- II. **Point for consideration:** The matter is placed before CIB for further deliberation and decision.

Format I, Physical progress of new AIIMS Civil works (DPR Only), New AIIMS As on 31/12/2018

S#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
1	Bhopal	Civil Constructions (DPR)	19-03-2010	617.62	31-03-2013						
						Const. of Med.College	Package I	147.89	27-05-2010	99.5%	31-12-2018
						Const. of Hospital	Package II	254.39	10-09-2010	98.5%	31-12-2018
						Electrical Services	Package III	50.22	27-10-2011	98.1%	31-12-2018
						Estates Services	Package IV	45.1	02-02-2012	85%	31-12-2018
						SITC of 2 Nos of Lift at Type -V	Package V	0		100%	
							Furniture	3.67		99.99%	
							Residential	23.63		100%	
						Estate Services (Balance Work)	Add. PKG 4	0	10-01-2018	70%	31-12-2018
							Clinical	0		0%	
								[524.9]			
2	Bhubaneswar	Civil Constructions (DPR)	19-03-2010	600.49	31-03-2013						
						Medical College Complex	Package I	67.37	27-05-2010	100%	31-08-2017
						Hospital Complex	Package II	261.09	16-09-2010	99.7%	31-10-2018
						Electrical Services	Package III	56.3	12-01-2012	100%	31-07-2015
						Estate Services	Package IV	47.65	04-07-2012	100%	28-02-2018
							Furniture	3.57		100%	
							Residential	103.65		100%	

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
							Clinical	0			
							Pre-clinical	0			
	Bhubaneswar	Total		[800.49]				[539.63]			
3	Jodhpur	Civil Constructions (DPR)	19-03-2010	556.58	31-03-2013						
						Medical College Complex	Package I	66.39	30-05-2010	99.78%	30-04-2017
						Hospital Complex	Package II	217.09	16-09-2010	96.42%	31-12-2018
						Electrical Services	Package III	43.38	19-08-2011	99.91%	31-10-2015
						Estate Services	Package IV	51.84	04-07-2012	99.97%	15-11-2016
							Furniture	3.74			
							Residential	48.47		100%	
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
							Clinical	0		0%	
	Jodhpur	Total		[756.58]				[430.91]			
4	Patna	Civil Constructions (DPR)	19-03-2010	638.43	31-03-2013						
						Medical College Complex	Package I	160.69	27-05-2010	100%	31-03-2017
						Hospital Complex	Package II	284.7	14-09-2010	97.5%	31-12-2018
						Electrical Services	Package III	42.6	19-08-2011	99%	31-12-2018
						Estate Services	Package IV	66.29	02-02-2012	87%	31-12-2018
							Furniture	3.67			
							Residential	29.37			

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
	Patna	Total		[838.43]			Clinical	0			
5	Raipur	Civil Constructions (DPR)	19-03-2010	570.48	31-03-2013			[587.32]			
						Medical College Complex	Package I	115.21	30-05-2010	99.85%	31-12-2018
						Hospital Complex	Package II	262.4	09-11-2010	99.39%	31-12-2018
						Electrical Services	Package III	35.86	19-08-2011	96.32%	31-12-2018
						Estate Services	Package IV	63.33	02-02-2012	88.05%	31-12-2018
							Furniture	3.67		0%	
							Residential	30.65		0%	
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
							Clinical			0%	
							Pre-clinical			0%	
	Raipur	Total		[770.48]				[511.12]			
6	Rishikesh	Civil Constructions (DPR)	19-03-2010	583.15	31-03-2013						
						Medical College Complex	Package I	83.77	27-05-2010	95%	03-02-2019
						Hospital Complex	Package II	251.02	09-11-2010	99.45%	31-12-2018
						Electrical Services	Package III	35.51	19-08-2011	100%	30-04-2018
						Services	Package IV	54.73	04-07-2012	95%	31-12-2018
						False Ceiling and Fire Door	Package V	0	01-06-2012	90%	03-02-2019

Sl#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
							Furniture	3.67		100%	
							Residential	73.73			
						Pkg-I, Balance work (Trauma & Nursing college)	Add. PKG 1	0	17-09-2017	75%	31-01-2019
						Pkg-I, Balance Electrical work	Add. PKG 2	0	07-12-2017	58%	31-01-2019
						Pkg-I, Balance work (Auditorium)	Add. PKG 3	0	04-04-2018	40%	03-02-2019
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
	Rishikesh	Total		[783.15]			Clinical			0%	
7	Raebareli	Civil Constructions (DPR)	02-10-2009	578.54	31-03-2012			[502.43]			
						Hospital & Medical college	Package I	268.84	04-04-2018	25%	03-04-2020
							Package II	0			
							Package III	0			
							Package IV	0			
							Package V	0			
							Residential	169.47			
		Medical Equipments DPR	02-10-2009	195	31-03-2012						
	Raebareli	Total		[773.54]				[438.31]			
8	Gorakhpur	Civil Constructions (DPR)	20-07-2016	831	30-04-2020						
						Pre-Investment Boundary Wall	Package 0	7	01-05-2017	100%	
						Construction of main work (single package in EPC mode)	Package I	715.06	12-04-2018	15.76%	
							Package II	0			
							Package III	0			
							Package IV	0			

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
		Medical Equipments DPR	20-07-2016	180	30-04-2020		Package V	0			
	Gorakhpur	Total		[1011]				[722.06]			
9	Kalyani	Civil Constructions (DPR)	07-10-2015	1469	30-09-2020						
						Pre-Investment Boundary Wall	Package 0	14.55	02-07-2016	100%	
						Residential and OPD	Package I	355.15	14-09-2017	39.1%	13-03-2019
						Hospital and Academic	Package II	651.99	28-04-2018	9.7%	27-02-2020
						MGPS and MOT	Package III	60.1			
						Furniture	Package IV	63			
						External and Electrification	Package V	70			
		Medical Equipments DPR	07-10-2015	285	30-09-2020						
	Kalyani	Total		[1754]				[1214.79]			
10	Mangalagiri Guntur	Civil Constructions (DPR)	07-10-2015	1333	30-09-2020						
						Pre Investment Boundary Wall	Package 0	8.86	14-04-2016		
						Residential and OPD	Package I	272.54	14-09-2017	49.9%	13-03-2019
						Hospital and Academic	Package II	601.01	12-04-2018	15.9%	12-02-2020
						MGPS and MOT	Package III	60.1			
						Furniture	Package IV	63			
						External Electrification	Package V	70			
		Medical Equipments DPR	07-10-2015	285	30-09-2020						
	Mangalagiri Guntur	Total		[1618]				[1075.51]			

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
11	Nagpur	Civil Constructions (DPR)	07-10-2015	1292	30-09-2020						
						Pre Investment Boundary Wall	Package 0	6.48	14-04-2016		
						Residential and OPD	Package I	274.19	14-09-2017	50.5%	13-03-2019
						Hospital and Academic	Package II	582.99	28-04-2018	14%	27-02-2020
						MGPS and MOT	Package III	60.1			
						Furniture	Package IV	63			
						External Electrification	Package V	70			
		Medical Equipments DPR	07-10-2015	285	30-09-2020						
		Total		[1577]				[1056.76]			
12	Bathinda	Civil Constructions (DPR)	20-07-2016	747	30-06-2020						
						Pre Investment Boundary Wall	Package 0	6.32	27-12-2016	100%	
						Construction of main work (single package in EPC mode)	Package I	557.48	08-06-2018	8.23%	07-06-2020
		Medical Equipments DPR	27-07-2016	178	07-06-2020						
		Total		[925]			Clinical	0		0%	
13	Bathinda	Civil Constructions (DPR)									
		Medical Equipments DPR		0							
		Total		0							
14	Bilaspur	Civil Constructions (DPR)	03-01-2018	0	30-12-2021						
						Pre Investment Boundary Wall	Package 0	17.31	08-06-2018		

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
							Package I	0			
							Package II	0			
							Package III	0			
		Medical Equipments DPR	03-01-2018	185	30-12-2021						
	Bilaspur	Total		[185]				[17.31]			
15	Guwahati	Civil Constructions (DPR)	27-07-2016	0	30-06-2020						
						Pre Investment Boundary Wall	Package 0	12.5			
						Construction of main work (single package in EPC mode)	Package I	0			
		Medical Equipments DPR	27-07-2016	178	30-06-2020						
	Guwahati	Total		[178]				[12.5]			
16	Jammu	Civil Constructions (DPR)		0							
							Package I	0			
		Medical Equipments DPR		0							
17	Kashmir	Civil Constructions (DPR)		0							
							Package I	0			
		Medical Equipments DPR		0							
18	Madurai	Civil Constructions (DPR)		0							
							Package I	0			
		Medical Equipments DPR		0							
19	Bibinagar	Civil Constructions (DPR)		0							
		Medical Equipments DPR		0							

S#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
20	Deoghar	Civil Constructions (DPR)	16-05-2018	918	28-02-2022						
						Pre Investment Boundary Wall	Package 0	9.95	29-08-2017	40%	15-11-2018
							Package I	0			
							Package II	0			
							Package III	0			
		Medical Equipments DPR	16-05-2018	185	28-02-2022						
	Deoghar	Total		[1103]				[9.95]			
21	Gujarat	Civil Constructions (DPR)		0							
		Medical Equipments DPR		0				0			
Total				13,891.29				8,207.3			

Format II, FINANCIAL PROGRESS OF NEW AIIMS AS PER PFMS (OLD + NEW WORKS) , New AIIMS Phase I As on 31/12/2018

Sr#	Project	Work	Sanction date	DPR Sanction Value(Cr.)	Scheduled Completion	Cum. Funds Released (GIA)	% of cost	Total Month Exp. (Cr.)	Total Funds utilized	Funds Available
1	Bhopal	Civil	19-03-2010	617.62	31-03-2013			2.23	601.81	
		Equipments	19-03-2010	200	31-03-2013			1.3	124.85	
	Bhopal	Total		[817.62]		744.27	[91.03]	[3.53]	[726.66]	17.61
2	Bhubaneswar	Civil	19-03-2010	600.49	31-03-2013			0	571.89	
		Equipments	19-03-2010	200	31-03-2013			2.58	220.23	
	Bhubaneswar	Total		[800.49]		810.4	[101.24]	[2.58]	[792.12]	18.28
3	Jodhpur	Civil	19-03-2010	556.58	31-03-2013			428.1	872.71	
		Equipments	19-03-2010	200	31-03-2013			6.69	213.06	
	Jodhpur	Total		[756.58]		1136.38	[150.2]	[434.79]	[1085.77]	50.61
4	Patna	Civil	19-03-2010	638.43	31-03-2013			521.86	1074.17	
		Equipments	19-03-2010	200	31-03-2013			2.08	201.45	
	Patna	Total		[838.43]		1260.39	[150.33]	[523.94]	[1275.62]	-15.23
5	Raipur	Civil	19-03-2010	570.48	31-03-2013			558.63	1097.46	
		Equipments	19-03-2010	200	31-03-2013			0.04	8.28	
	Raipur	Total		[770.48]		1064.24	[138.13]	[558.67]	[1105.74]	-41.5
6	Rishikesh	Civil	19-03-2010	583.15	31-03-2013			16.13	475.88	
		Equipments	19-03-2010	200	31-03-2013			2.27	238.93	
	Rishikesh	Total		[783.15]		734.94	[93.84]	[18.4]	[714.81]	20.13
Total				4,766.75		5,750.62		1,541.91	5,700.72	49.9

Format III, FINANCIAL DETAILS OF NEW WORKS (CAPITAL) IN NEW AIIMS , New AIIMS Phase I As on 31/12/2018

S#	Project	Work	DPR Sanction Value(Gr.)	New Works Sanction Value(Gr.)	DPR Cum. Exp.	New Works Cum. Exp.	Total Funds utilized	Funds Available
1	Bhopal	Civil	617.62	344.25	583.84	17.97	601.81	
		Equipments	200	160	93.89	30.96	124.85	
	Bhopal	Total	[817.62]	[504.25]	[677.73]	[48.93]	[726.66]	17.61
2	Bhubaneswar	Civil	600.49	186.17	557.91	13.98	571.89	
		Equipments	200	281.5	151.95	68.28	220.23	
	Bhubaneswar	Total	[800.49]	[467.67]	[709.86]	[82.26]	[792.12]	18.28
3	Jodhpur	Civil	556.58	1137.36	857.03	15.68	872.71	
		Equipments	200	196.48	116.65	96.41	213.06	
	Jodhpur	Total	[756.58]	[1333.84]	[973.68]	[112.09]	[1085.77]	50.61
4	Patna	Civil	638.43	280	1074.17	0	1074.17	
		Equipments	200	50	159.26	42.19	201.45	
	Patna	Total	[838.43]	[330]	[1233.43]	[42.19]	[1275.62]	-15.23
5	Raipur	Civil	570.48	212.13	1077.51	19.95	1097.46	
		Equipments	200	26.75	0	8.28	8.28	
	Raipur	Total	[770.48]	[238.88]	[1077.51]	[28.23]	[1105.74]	-41.5
6	Rishikesh	Civil	583.15	1414.01	452.37	23.51	475.88	
		Equipments	200	651	141.35	97.58	238.93	
	Rishikesh	Total	[783.15]	[2065.01]	[593.72]	[121.09]	[714.81]	20.13
Total			4,766.75	4,939.65	5,265.93	434.79	5,700.72	49.9

Format IV, Faculty HR, New AIIMS As on 31/12/2018

Sr#	Project	Post	Sanctioned	Till Last Month	Quit	Join	Total Filled up now	%	Addl. Post	Remark
1	Bhopal	Professor	54	14	0	0	14	25.93%	0	There are three contractual Retired Faculty As Consultant working
		Addl. Professor	45	16	0	0	16	35.56%	0	
		Asso. Professor	81	51	0	0	51	62.96%	0	
		Asst. Professor	125	48	0	0	48	38.4%	0	There are 10 Contractual Faculty working as Assistant Professors
		Sr. Resident	327	159	6	13	166	50.76%	5	
		Jr. Resident	301	166	2	1	165	54.82%	0	
		Total	[933]	[454]	[8]	[14]	[450]	49.3%	[5]	
2	Bhubaneswar	Professor	54	17	0	0	17	31.48%	0	Advertisement for remaining vacant posts is under process.
		Addl. Professor	45	20	0	0	20	44.44%	0	Advertisement for remaining vacant posts is under process.
		Asso. Professor	81	46	0	0	46	56.79%	0	Advertisement for remaining vacant posts is under process
		Asst. Professor	125	99	0	0	99	79.2%	1	95 (Regular) + 04 (Contractual)
		Sr. Resident	327	192	3	0	189	57.8%	0	182 (Tenure) + 07 (contractual) Advertisement for 123 SRs has been published & interview planned in the 1st week of February 2019.
		Jr. Resident	301	94	6	0	88	29.24%	0	Recruitment for 100 JRs is in process & interview is going to be held in 22/01/2019.
		Total	[933]	[468]	[9]		[459]	49.2%	[1]	
3	Jodhpur	Professor	54	16	0	1	17	31.48%	0	
		Addl. Professor	45	11	0	2	13	28.89%	2	
		Asso. Professor	81	49	2	1	48	59.26%	1	

Sl#	Project	Post	Sanctioned	Till Last Month	Quit	Join	Total Filled up now	%	Addl. Post	Remark
		Asst. Professor	125	70	3	7	74	59.2%	13	
		Sr. Resident	327	199	5	0	194	59.33%	0	
		Jr. Resident	301	233	3	0	230	76.41%	0	
		Total	[933]	[578]	[13]	[11]	[576]	61.74%	[16]	
4	Patna	Professor	54	11	0	0	11	20.37%	0	
		Addl. Professor	45	8	0	0	8	17.78%	0	
		Asso. Professor	81	44	0	0	44	54.32%	0	
		Asst. Professor	125	58	0	0	58	46.4%	0	
		Sr. Resident	327	219	2	0	217	66.36%	0	
		Jr. Resident	301	110	4	3	109	36.21%	0	
		Total	[933]	[450]	[6]	[3]	[447]	47.91%		
5	Raipur	Professor	54	11	0	0	11	20.37%	0	Recruitment of 41 Professor on on Direct Recruitment/Deputation/Retired faculty on contract Basis is under process
		Addl. Professor	45	12	0	0	12	26.67%	0	34 Additional Professor on Direct Recruitment/Deputation/Retired faculty on contract Basis is under process.
		Asso. Professor	81	28	0	0	28	34.57%	0	26 - Regular & 02 - Contractual. 54 Associate Processor on Direct Recruitment/Deputation/Retired faculty on contract Basis is under process.
		Asst. Professor	125	75	0	1	76	60.8%	0	68 - Regular & 08 - Contractual. 54 Assistant Processor on Direct Recruitment/Deputation Basis is under process.
		Sr. Resident	327	144	5	12	151	46.18%	0	Recruitment of 127 Senior Residents Posts (Group A) on Residency Scheme Basis is under process.
		Jr. Resident	301	124	4	6	126	41.86%	0	76 Non Academic JR & 50 Academic JR. Recruitment of 50 Junior Residents Posts (Group A) on Residency Scheme Basis is under process.
		Total	[933]	[394]	[9]	[19]	[404]	43.3%		

Sr#	Project	Post	Sanctioned	Till Last Month	Quit	Join	Total Filled up now	%	Add. Post	Remark
6	Rishikesh	Professor	54	31	0	0	31	57.41%	0	
		Addl. Professor	45	25	0	0	25	55.56%	0	
		Asso. Professor	81	53	0	0	53	65.43%	0	
		Asst. Professor	125	88	0	0	88	70.4%	0	
		Sr. Resident	327	241	0	0	241	73.7%	0	
		Jr. Resident	301	243	0	0	243	80.73%	0	
		Total	[933]	[681]			[681]	72.99%		
7	Raebareli	Professor	0							
		Addl. Professor	0							
		Asso. Professor	0							
		Asst. Professor	16	6	0	1	7	43.75%	0	
		Sr. Resident	0							
		Jr. Resident	8	3	0	0	3	37.5%	0	
		Total	[24]	[9]	[1]	[10]	[10]	41.67%		
8	Kalyani	Professor	33	0	0	0	0	0%	0	
		Addl. Professor	26	0	0	0	0	0%	0	
		Asso. Professor	39	0	0	0	0	0%	0	
		Asst. Professor	85	0	0	0	0	0%	0	
		Sr. Resident	8	0	0	0	0	0%	0	
		Jr. Resident	0	0	0	0	0		0	

Sr#	Project	Post	Sanctioned	Till Last Month	Quit	Join	Total Filled up now	%	Addl. Post	Remark
		Total	[191]					0%		
9	Mangalagiri Guntur	Professor	33	2	0	0	2	6.06%	0	
		Addl. Professor	26	3	0	0	3	11.54%	0	
		Asso. Professor	39	4	0	0	4	10.26%	0	
		Asst. Professor	85	12	0	0	12	14.12%	0	
		Sr. Resident	6	6	0	0	6	100%	0	
		Tutor	8	8	0	0	8	100%	0	
		Total	[197]	[35]			[35]	17.77%		
10	Nagpur	Professor	33	4	0	0	4	12.12%	0	
		Addl. Professor	26	4	0	0	4	15.38%	0	
		Asso. Professor	39	4	0	0	4	10.26%	0	
		Asst. Professor	85	9	0	1	10	11.76%	0	
		Sr. Resident	8	7	0	0	7	87.5%	0	
		Jr. Resident	0	0	0	0	0		0	
		Tutor	8	8	0	0	8	100%	0	
		Total	[199]	[36]	[1]		[37]	18.59%		
Total			6,209	3,105	45	49	3,109			

Status of Projects at AIIMS, Delhi

(i) STATUS OF ONGOING OVERSIGHT COMMITTEE HEAD PROJECTS

Sl. No	Name of Projects	Sanctioned cost / Awarded Cost	Date of start	Stipulated Date of Completion	Expected date of Completion	Payment made till date	Physical Progress of work.	Remarks
1	Hostel Block	Rs.106.12Cr / Rs 72.84 Cr.	2.04.12	1.12.13	July 2018	Rs.82.02 Cr including consultancy	Completed. Facility is functional.	
2	Surgical Block	Rs.100.29 Cr / Rs 50.18 Cr	Sep-13	Apr-15	June 2019	Rs.68.22 Cr including consultancy	Work in progress 99% completed.	Related works of M&E are being finalized
3	Mother & Child Block	Rs.290.70 Cr / Rs 204.44Cr	11.05.15	10.05.17	June 2019	Rs.186.89 Cr including consultancy	Work in progress. 82% completed	OT design has been recently finalized by the users.

(ii) STATUS OF ONGOING PLAN HEAD PROJECTS

Sl. No	Name of Projects	Sanctioned / Awarded cost	Date of start	Date of Completion	Expected date of Completion	Payment made till date	Physical Progress of work.	Remarks
4	OPD At Masjid Moth	Rs.583.00 Cr/ Rs.351.21 Cr	11.05.15	10.05.17	March 2019	Rs.330.04 Cr including consultancy	Work is in progress. 90% completed	User department have finalized internal layout recently.
5	Trauma Expansion	Rs.35.00 Cr/ Rs.28.49 Cr	06.06.14	5 th Jan 2016	March 2018	Rs.33.66 Cr including consultancy	Completed.	Work was being done in a running hospital hence slow pace of work led to delay.
6	Dharamshala/ Night Shelter at Trauma Centre	Rs.35.00 Cr/ Rs.23.46 Cr	04.08.14	March 2016	Jan 2018	Rs 33.09crore including consultancy	Completed	There were issues regarding making a helipad on the terrace of the block and change in use of the three upper floors, which led to re planning and delay thereof.
7	Cafeteria	Rs.12.66 Cr/ Rs 10.49 Cr	17.02.15	16.05.16	Aug 2017	Rs.10.24 crore	Completed.	Work site was inside the Hospital with no vehicular access for material
8	National Cancer Institute at Jhajjar Haryana (AIIMS-II)	Rs.2035.00 Cr/ Rs.1105.52 Cr (Engg.	16.12.15	March 2018	Jan 2019	Rs 885.82 including consultancy	Work is in progress 90%, structure	Phase -I OPD started & 250 beds to be made functional by end

	Component)								of Jan 2019.
9	Burns & Plastic Surgery Block Estimated cost of	Rs.245.00 Cr/ Rs. 98.44 Cr	January 2017	January 2019	March 2019	Rs.90.840 Crore	completed.	80% Completed	No delay as per schedule
10	Hostel Block –IV Estimated cost of Rs.29.62 Cr.	Rs.34.00 Cr/ Rs. 29.86 cr.	October 2016	February 2018	Jan 2019	Rs 29.87crore	Completed.	Completed.	Delay in receiving statutory approval
11	New Paid Ward	Rs.103.00 Cr/ Rs. 89.00 Cr	14.12.2016	13.08.2018	June 2019	Rs.47.08 crore including consultancy	Work is in progress 65% structure completed.	Completed.	Site constraint as minimal working space is there due to adjoining buildings and slow pace of work by contractor led to delay.
12	Facade work	Rs.5.00 Cr/ Rs.3.85Cr	Completion period is 3 months	completed	completed	Rs.2.50 crore	Completed	Completed	
13	Construction of Geriatrics Block	Rs.250.00 Cr/ Rs.157.00 Cr	Feb 2018	Feb 2020	Feb 2020	Rs.50.48 Crore including consultancy	Work is in progress 25% structure completed.	Completed	No delay as per schedule
14	Construction of STP	Rs. 12.00 Cr/ Rs.9.70	Jan 2018	Sep 2018	Feb 2019	Rs.5.00 Crore	Work is in progress 65 % completed	Completed	Due to change in layout on account of a tree cutting permission the work was delayed.
15	BSL & CCRF	Rs.15.36 Cr/ Rs.13.50	Jan 2018	Jan 2019	Feb 2019	Rs.5.50 Crore	Work is in progress 50% Completed	Completed	delay on account of finalization of layout and fire fighting scheme.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES,
NEW DELHI



National Cancer Institute (NCI),
Jhajjar, Haryana

NATIONAL CANCER INSTITUTE

- India's largest Public Funded Hospital Project @Rs 2035 Crores
- 710 bedded Apex Centre for Translational Research in Prevention & Care of India Centric Cancers spread over 60 acres at Badsa, District Jhajjar, Haryana.
- Bhoomi Poojan performed on 12th Dec 2015

Phasing & Operational plan:

- Phase-I:
 - Dec 2018 – OPD Services Started on 18th December 2018
 - 14th Jan 2019 – In patient trial services started
 - Jan 2019 – 250 beds in Emergency, Wards & Day-care; Robotic Core Lab; Radiology Services and 9 OT's being commissioned
 - Mar 2019 – Radiation Oncology & Nuclear Medicine
- Phase-II: Dec 2019 (500 beds)
- Phase-III: Dec 2020 (710 beds)

Project Update

- **Infrastructure Works (All phases)**
 - All works awarded
 - 95% physical progress
 - To be completed by March 2019
- **Haryana Govt linked works**
 - Temporary Electrical Supply : September 2018 & Dedicated 132 KvA Sub-station: March 2019
 - Water Supply & Drainage: October 2018
- **Equipment Procurement (Phase-I)**
 - Infrastructure related equipment works near completion.
 - Other tenders for Phase-I are being awarded as finalized.
 - Tendering for Phase-II & Phase-III would be done in April 2019 & April 2020 respectively to avoid unnecessary parking of funds & avoid obsolescence of technology.

Project Update

- **Manpower (Phase-I)**
 - 634 regular posts and other outsourced services sanctioned
 - Existing staff would work on rotation initially.
- **Faculty**
 - Posts have been advertised & contract faculty have joined in interim
- **Residents**
 - Acad & Non-acad residents have joined in Aug 18 & Jan 19 batches
- **Non-faculty posts**
 - 271 employees from AIIMS have opted for NCI
 - incld. 233 nursing officers (against 306 sanctioned posts)
 - Direct recruitment posts : Advertised
 - DPC posts : Action Initiated
 - Decision taken to 1st exercise option given by existing employees so that DPC can be held for analogous posts occupied by said employees

Financial Summary

Total Project Cost	Rs.2035 Cr
Funds utilized till 31st December 2018	Rs.1117.87 Cr
Loan for Rs.525 Cr sanctioned by HEFA for NCI-AIIMS on 30th November 2018	

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/3

Review of Financial, Physical and Recruitment Progress

Format I, Physical progress of new AIIMS Civil works (DPR Only), New AIIMS As on 31/12/2018

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
1	Bhopal	Civil Constructions (DPR)	19-03-2010	617.62	31-03-2013						
						Const. of Med.College	Package I	147.89	27-05-2010	99.5%	31-03-2019
						Const. of Hospital	Package II	254.39	10-09-2010	98.5%	31-03-2019
						Estate Services	Package IV	45.1	02-02-2012	85%	31-03-2019
						SITC of 2 Nos of Lift at Type-V	Package V	0		100%	Completed
							Furniture	3.67		99.99%	31-03-2019
							Residential	23.63		100%	Completed
						Electrical Services	Package III	50.22	27-10-2011	98.1%	31-03-2019
						Estate Services (Balance Work)	Add. PKG 4	0	10-01-2018	70%	31-03-2019
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
							Clinical	0			
								[524.9]			
2	Bhubaneswar	Civil Constructions (DPR)	19-03-2010	600.49	31-03-2013						
						Medical College Complex	Package I	67.37	27-05-2010	100%	Completed
						Hospital Complex	Package II	261.09	16-09-2010	99.7%	31-03-2019
						Estate Services	Package IV	47.65	04-07-2012	100%	Completed
							Furniture	3.57		100%	Completed
							Residential	103.65			
						Electrical Services	Package III	56.3	12-01-	100%	Completed

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
		Medical Equipments DPR	19-03-2010	200	31-03-2013				2012		
							Clinical	0			
							Pre-clinical	0			
		Total		[800.49]				[539.63]			
3	Jodhpur	Civil Constructions (DPR)	19-03-2010	556.58	31-03-2013						
						Medical College Complex	Package I	66.39	30-05-2010	99.78%	31-03-2019
						Hospital Complex	Package II	217.09	16-09-2010	96.42%	31-03-2019
						Estate Services	Package IV	51.84	04-07-2012	99.97%	31-03-2019
							Furniture	3.74			
							Residential	48.47		100%	Completed
						Electrical Services	Package III	43.38	19-08-2011	99.91%	31-03-2019
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
							Clinical	0			
		Total		[756.58]				[430.91]			
4	Patna	Civil Constructions (DPR)	19-03-2010	638.43	31-03-2013						
						Medical College Complex	Package I	160.69	27-05-2010	100%	Completed
						Hospital Complex	Package II	284.7	14-09-2010	97.5%	31-03-2019
						Estate Services	Package IV	66.29	02-02-2012	87%	31-03-2019
							Furniture	3.67			
							Residential	29.37			
						Electrical Services	Package III	42.6	19-08-	99%	31-03-

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
		Medical Equipments DPR	19-03-2010	200	31-03-2013				2011		2019
	Patna	Total		[838.43]			Clinical	0			
5	Raipur	Civil Constructions (DPR)	19-03-2010	570.48	31-03-2013	Medical College Complex	Package I	115.21	30-05-2010	99.87%	31-03-2019
						Hospital Complex	Package II	262.4	09-11-2010	99.45%	31-03-2019
						Estate Services	Package IV	63.33	02-02-2012	90.05%	31-03-2019
							Furniture	3.67			
							Residential	30.65			
						Electrical Services	Package III	35.86	19-08-2011	96.85%	31-03-2019
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
							Clinical				
							Pre-clinical				
	Raipur	Total		[770.48]				[511.12]			
6	Rishikesh	Civil Constructions (DPR)	19-03-2010	583.15	31-03-2013	Medical College Complex	Package I	83.77	27-05-2010	95%	03-02-2019
						Hospital Complex	Package II	251.02	09-11-2010	99.45%	31-03-2019
						Services	Package IV	54.73	04-07-2012	95%	31-03-2019
						False Ceiling and Fire Door	Package V	0	01-06-2012	90%	03-02-2019
							Furniture	3.67		100%	Completed

Sl#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
						Electrical Services	Residential Package III	73.73 35.51	19-08-2011	100%	Completed
						Pkg-I,Balance work (Trauma & Nursing college)	Add. PKG 1	0	17-09-2017	90%	31-01-2019
						Pkg-I,Balance Electrical work	Add. PKG 2	0	07-12-2017	58%	31-01-2019
						Pkg-I,Balance work (Auditorium)	Add. PKG 3	0	04-04-2018	40%	03-02-2019
		Medical Equipments DPR	19-03-2010	200	31-03-2013						
	Rishikesh	Total		[783.15]			Clinical	0			
7	Raebareli	Civil Constructions (DPR)	02-10-2009	578.54	31-03-2012			[502.43]			
						Hospital & Medical college	Package I	268.84	04-04-2018	25%	03-04-2020
							Package II	0			
							Package IV	0			
							Package V	0			
							Residential	169.47			
							Package III	0			
		Medical Equipments DPR	02-10-2009	195	31-03-2012						
	Raebareli	Total		[773.54]				[438.31]			
8	Gorakhpur	Civil Constructions (DPR)	20-07-2016	831	30-04-2020						
						Pre-Investment Boundary Wall	Package 0	7	01-05-2017	100%	Completed
						Construction of main work (single package in EPC mode)	Package I	715.06	12-04-2018	15.76%	
							Package II	0			
							Package IV	0			

Sl#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
							Package V	0			
							Package III	0			
		Medical Equipments DPR	20-07-2016	180	30-04-2020						
	Gorakhpur	Total		[1011]				[722.06]			
9	Kalyani	Civil Constructions (DPR)	07-10-2015	1469	30-09-2020						
						Pre-Investment Boundary Wall	Package 0	14.55	02-07-2016	100%	Completed
						Residential and OPD	Package I	355.15	14-09-2017	39.1%	13-03-2019
						Hospital and Academic	Package II	651.99	28-04-2018	9.7%	27-02-2020
						Furniture	Package IV	63			
						External and Electrification	Package V	70			
						MGPS and MOT	Package III	60.1			
		Medical Equipments DPR	07-10-2015	285	30-09-2020						
	Kalyani	Total		[1754]				[1214.79]			
10	Mangalagiri Guntur	Civil Constructions (DPR)	07-10-2015	1333	30-09-2020						
						Pre Investment Boundary Wall	Package 0	8.86	14-04-2016		
						Residential and OPD	Package I	272.54	14-09-2017	49.9%	13-03-2019
						Hospital and Academic	Package II	601.01	12-04-2018	15.9%	12-02-2020
						Furniture	Package IV	63			
						External Electrification	Package V	70			
						MGPS and MOT	Package III	60.1			
		Medical Equipments DPR	07-10-2015	285	30-09-2020						
	Mangalagiri	Total		[1618]				[1075.51]			

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
11	Guntur Nagpur	Civil Constructions (DPR)	07-10-2015	1292	30-09-2020						
						Pre Investment Boundar Wall	Package 0	6.48	14-04-2016		
						Residential and OPD	Package I	274.19	14-09-2017	50.5%	13-03-2019
						Hospital and Academic	Package II	582.99	28-04-2018	14%	27-02-2020
						Furniture	Package IV	63			
						External Electrification	Package V	70			
						MGPS and MOT	Package III	60.1			
		Medical Equipments DPR	07-10-2015	285	30-09-2020						
	Nagpur	Total		[1577]				[1056.76]			
12	Bathinda	Civil Constructions (DPR)	20-07-2016	747	30-06-2020						
						Pre Investment Boundary Wall	Package 0	6.32	27-12-2016	100%	Completed
						Construction of main work (single package in EPC mode)	Package I	557.48	08-06-2018	8.23%	07-06-2020
		Medical Equipments DPR	27-07-2016	178	07-06-2020						
	Bathinda	Total		[925]							
13	Bihar	Civil Constructions (DPR)		0							
		Medical Equipments DPR		0							
14	Bilaspur	Civil Constructions (DPR)	03-01-2018	0	30-12-2021						
						Pre Investment Boundary Wall	Package 0	17.31	08-06-		

Sl#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
								0	2018		
							Package I	0			
							Package II	0			
							Package III	0			
		Medical Equipments DPR	03-01-2018	185	30-12-2021						
	Bilaspur	Total		[185]				[17.31]			
15	Guwahati	Civil Constructions (DPR)	27-07-2016	0	30-06-2020						
						Pre Investment Boundary Wall	Package 0	12.5			
						Construction of main work (single package in EPC mode)	Package I	0			
		Medical Equipments DPR	27-07-2016	178	30-06-2020						
	Guwahati	Total		[178]				[12.5]			
16	Jammu	Civil Constructions (DPR)		0							
							Package I	0			
		Medical Equipments DPR		0							
17	Kashmir	Civil Constructions (DPR)		0							
							Package I	0			
		Medical Equipments DPR		0							
18	Madurai	Civil Constructions (DPR)		0							
							Package I	0			
		Medical Equipments DPR		0							
19	Bibinagar	Civil Constructions (DPR)		0							
		Medical		0							

Sr#	Project	Work	Sanction date	Sanctioned Cost	Scheduled Completion	Package Name	Package(s)	Awarded Value	Date of Award	Physical Progress	EDC
20	Deoghar	Equipments DPR Civil Constructions (DPR)	16-05-2018	918	28-02-2022	Pre Investment Boundary Wall	Package 0	9.95	29-08-2017	40%	31-03-2019
							Package I	0			
							Package II	0			
							Package III	0			
		Medical Equipments DPR	16-05-2018	185	28-02-2022						
	Deoghar	Total		[1103]				[9.95]			
21	Gujarat	Civil Constructions (DPR)		0							
		Medical Equipments DPR		0							
Total				13,891.29				8,207.3			

FORMAT – II :- FINANCIAL PROGRESS OF NEW AIIMS AS ON 1st December, 2018 , AS PER PFMS (OLD + NEW WORKS)

Sl.	AIIMS	Sanction date	Sanctioned cost			Scheduled completion	Cum. Funds released	% of cost	Expenditure last month			Funds utilized	Balance available
			Civil	Equipment	Total				Civil	Equipment	Total		
1	Bhopal	19.03.2010	617.70	200.00	817.70	31.03.2013	844.77	103.31	0.00	1.60	1.60	831.89	12.88
2	Bhubaneswar	19.03.2010	600.49	200.00	800.49	31.03.2013	841.10	105.07	1.42	0.62	2.04	827.22	13.88
3	Jodhpur	19.03.2010	556.58	200.00	756.58	31.03.2013	801.96	106.00	0.66	2.12	2.78	764.37	37.59
4	Patna	19.03.2010	638.43	200.00	838.43	31.03.2013	742.33	88.54	6.95	0.00	6.95	743.71	-1.38
5	Raipur	19.03.2010	570.48	200.00	770.48	31.03.2013	858.69	112.19	2.36	0.08	2.44	804.05	54.64
6	Rishikesh	19.03.2010	583.15	200.00	783.15	31.03.2013	1137.24	145.21	0.70	2.27	2.97	1139.08	-1.84
7	Raebareli	10.02.2009	578.54	195.00	773.54	31.03.2012	229.16	29.62	19.93	0.00	19.93	228.19	0.97
8	Mangalagiri	07.10.2015	1333	285	1618	Sep, 2020	231.02	14.28	14.57	NIL	14.57	171.01	60.01
9	Nagpur	07.10.2015	1292	285	1577	Sep, 2020	228.48	14.49	12.75	NIL	12.75	281.78	46.70
10	Kalyani	07.10.2015	1469	285	1754	Sep, 2020	276.87	15.79	09.10	NIL	09.10	177.45	99.42
11	Gorakhpur	20.07.2016	831	180	1011	April, 2020	95.24	19.31	42.63	NIL	42.63	124.11	57.40
12	Bathinda	27.07.2016	747	178	925	June, 2020	134.28	14.52	32.88	NIL	32.88	85.33	36.17
13	Guwahati	24.05.2017	945	178	1123	April, 2021	99.82	8.89	NIL	NIL	NIL	1.43	96.07
14	Bilaspur	03.01.2018	1166	185	1351	Dec, 2021	10	0.74	NIL	NIL	NIL	NIL	NIL
15	Deogarh (Jharkhand)	16.05.2018	918	185	1103	Feb, 2022	9	0.81	NIL	NIL	NIL	NIL	NIL
16	Samba (Jammu)	10.01.2019			1661	Jan, 2023	42	NIL	NIL	NIL	NIL	NIL	NIL
17	Awantipura (Kashmir)	10.01.2019			1828	Jan, 2025	48	NIL	NIL	NIL	NIL	NIL	NIL
18	Madurai(TN)	17.12.2018			1264	Sep, 2022	NIL	NIL	NIL	NIL	NIL	NIL	NIL
19	Bibinagar (Telangana)	17.12.2018			1028		NIL	NIL	NIL	NIL	NIL	NIL	NIL
20	Rajkot (Gujarat)	10.01.2019			1195	Sep, 2022							
21	Bihar					Dec, 2022							
Cabinet approval yet to be taken													
											150.56		

Sl.	AIIMS	DPR Works	Sanctioned New Works			Cum Expenditure			Total	Executing Agency / PSA
			Civil	Equipment	Total	DPR Works	New Works	Total		
A	B	C	D	E	F = D + E	G	H	I = G + H	J	
1	Bhopal	817.70	344.25	160.00	504.25	729.31	102.58	831.89	12.88	
2	Bhubaneswar	800.49	186.17	281.50	467.67	731.02	96.20	827.22	13.88	
3	Jodhpur	756.58	1137.36	196.48	1333.84	596.49	167.88	764.37	37.59	
4	Patna	838.43	280.00	50.00	330.00	723.14	20.57	743.71	-1.38	
5	Raipur	770.48	212.13	26.75	238.88	719.49	84.56	804.05	54.64	
6	Rishikesh	783.15	1414.01	651.00	2065.01	662.23	476.85	1139.08	-1.84	

Format IV, Faculty HR, New AIIMS As on 31/12/2018

Sr. No.	Project	Post	Sanctio ned	Till Last Mon th	Quit	Join	Total Filled up now	%	Addl. Post	Remark
1	Bhopal	Professor	54	14	0	0	14	25.93%	0	There are three contractual Retired Faculty As Consultant working
		Addl. Professor	45	16	0	0	16	35.56%	0	
		Asso. Professor	81	51	0	0	51	62.96%	0	
		Asst. Professor	125	48	0	0	48	38.40%	0	There are 10 Contractual Faculty working as Assistant Professors
		Sr. Resident	327	159	6	13	166	50.76%	5	
		Jr. Resident	301	166	2	1	165	54.82%	0	
		Total	[933]	[454]	[8]	[14]	[460]	49.30%	[5]	
2	Bhubaneswar	Professor	54	17	0	0	17	31.48%	0	Advertisement for remaining vacant posts is under process.
		Addl. Professor	45	20	0	0	20	44.44%	0	Advertisement for remaining vacant posts is under process.
		Asso. Professor	81	46	0	0	46	56.79%	0	Advertisement for remaining vacant posts is under process
		Asst. Professor	125	99	0	0	99	79.20%	1	95 (Regular) + 04 (Contractual)
		Sr. Resident	327	192	3	0	189	57.80%	0	182 (Tenure) + 07 (contractual) Advertisement for 123 SRs has been published & interview planned in the 1st week of February 2019.
		Jr. Resident	301	94	6	0	88	29.24%	0	Recruitment for 100 JRs is in process & interview is going to be held in 22/01/2019.
		Total	[933]	[468]	[9]		[459]	49.20%	[1]	

Sr. No.	Project	Post	Sanctio ned	Till Last Mon th	Quit	Join	Total Filled up now	%	Addl. Post	Remark
3	Jodhpur	Professor	54	16	0	1	17	31.48%	0	
		Addl. Professor	45	11	0	2	13	28.89%	2	
		Asso. Professor	81	49	2	1	48	59.26%	1	
		Asst. Professor	125	70	3	7	74	59.20%	13	
		Sr. Resident	327	199	5	0	194	59.33%	0	
		Jr. Resident	301	233	3	0	230	76.41%	0	
		Total	[933]	[578]	[13]	[11]	[576]	61.74%	[16]	
		Professor	54	11	0	0	11	20.37%	0	
4	Patna	Addl. Professor	45	8	0	0	8	17.78%	0	
		Asso. Professor	81	44	0	0	44	54.32%	0	
		Asst. Professor	125	58	0	0	58	46.40%	0	
		Sr. Resident	327	219	2	0	217	66.36%	0	
		Jr. Resident	301	110	4	3	109	36.21%	0	
		Total	[933]	[450]	[6]	[3]	[447]	47.91%		
		Professor	54	11	0	0	11	20.37%	0	Recruitment of 41 Professor on on Direct Recruitment/Deputation/Retired faculty on contract Basis is under process
		Addl. Professor	45	12	0	0	12	26.67%	0	34 Additional Professor on Direct Recruitment/Deputation/Retired faculty on contract Basis is under process.
5	Raipur	Asso. Professor	81	28	0	0	28	34.57%	0	26 - Regular & 02 - Contractual. 54 Associate Professor on Direct Recruitment/Deputation/Retired faculty on contract Basis is under process.
		Asst. Professor	125	76	0	0	76	60.80%	0	68 - Regular & 08 - Contractual. 54 Assistant Professor on Direct Recruitment/Deputation Basis is under process.
		Sr. Resident	327	144	5	12	151	46.18%	0	Recruitment of 127 Senior Residents Posts (Group A) on Residency Scheme Basis is

Sr. No.	Project	Post	Sanctio ned	Till Last Mon th	Quit	Join	Total Filled up now	%	Addl. Post	Remark
										under process.
		Jr. Resident	301	124	4	6	126	41.86%	0	76 Non Academic JR & 50 Academic JR. Recruitment of 50 Junior Residents Posts (Group A) on Residency Scheme Basis is under process.
		Total	[933]	[395]	[9]	[18]	[404]	43.30%		
6	Rishikesh	Professor	54	31	0	0	31	57.41%	0	
		Addl. Professor	45	25	0	0	25	55.56%	0	
		Asso. Professor	81	53	0	0	53	65.43%	0	
		Asst. Professor	125	88	0	0	88	70.40%	0	
		Sr. Resident	327	241	0	0	241	73.70%	0	
		Jr. Resident	301	243	0	0	243	80.73%	0	
		Total	[933]	[681]			[681]	72.99%		
7	Raebareli	Professor	0							
		Addl. Professor	0							
		Asso. Professor	0							
		Asst. Professor	16	6	0	1	7	43.75%	0	
		Sr. Resident	0							
		Jr. Resident	8	3	0	0	3	37.50%	0	
		Total	[24]	[9]		[1]	[10]	41.67%		
8	Kalyani	Professor	33	0	0	0	0	0%	0	
		Addl. Professor	26	0	0	0	0	0%	0	
		Asso. Professor	39	0	0	0	0	0%	0	
		Asst. Professor	85	0	0	0	0	0%	0	
		Sr. Resident	8	0	0	0	0	0%	0	
		Jr. Resident	0	0	0	0	0	0%	0	
		Total	[191]					0%		
9	Mangalagiri Guntur	Professor	33	2	0	0	2	6.06%	0	

Sr. No.	Project	Post	Sanctio ned	Till Last Mon th	Quit	Join	Total Filled up now	%	Addl. Post	Remark
		Adl. Professor	26	3	0	0	3	11.54%	0	
		Asso. Professor	39	4	0	0	4	10.26%	0	
		Asst. Professor	85	12	0	0	12	14.12%	0	
		Sr. Resident	6	6	0	0	6	100%	0	
		Tutor	8	8	0	0	8	100%	0	
		Total	[197]	[35]			[35]	17.77%		
10	Nagpur	Professor	33	4	0	0	4	12.12%	0	
		Adl. Professor	26	4	0	0	4	15.38%	0	
		Asso. Professor	39	4	0	0	4	10.26%	0	
		Asst. Professor	85	9	0	1	10	11.76%	0	
		Sr. Resident	8	7	0	0	7	87.50%	0	
		Jr. Resident	0	0	0	0	0		0	
		Tutor	8	8	0	0	8	100%	0	
		Total	[199]	[36]		[1]	[37]	18.59%		
Total			6,209	3,106	45	48	3,109			

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/4

**Proposal for transfer of procurement of Medical
Equipment's activity from Ministry to AIIMS**

Agenda No CIB-3/4: Proposal for transfer of procurement of Medical Equipment's activity from Ministry to AIIMS

- I. **Introduction:** CIB in its 2nd meeting directed that the suggestion of NITI Aayog for wet lease and life cycle cost for procurement of medical equipment may be examined separately. CIB also desired that Director AIIMS Jodhpur and Raipur may deliberate the requirement of centralised procurement and submit their joint recommendation on major (high value) equipment which would be procured through AIIMS Delhi while the rest are procured by the respective Institutes/Mentor Institutes.

- II. **Points for consideration by the CIB:** Director AIIMS, Jodhpur and Raipur has deliberated the matter (report annexed) and proposed that high value equipment as mentioned below, may be procured through a Central Procurement Agency to get economy of scale.
 - a. CT Scan
 - b. MRI
 - c. LINAC
 - d. PET Scan
 - e. Cath Lab Equipments
 - f. Digital Radiography machine
 - g. Biplane DSA
 - h. Gamma Camera

However, final decision may be left to individual AIIMS to decide regarding such equipment.

Other equipment may be procured centrally or by individual AIIMS with the help of their mentoring Institutes, as required.

- III. **Administrative Comments:** AIIMS, Delhi may combine the requirement of other AIIMS with its own, while procuring its own equipment of proposed category, with same specifications for other AIIMS, as per the existing delegated financial powers. However, final decision may be left to individual AIIMS to decide regarding such equipment. Other equipment may be procured by individual AIIMS by themselves with the help of their mentoring Institutes, as required. However, in view of delegated powers of Director, AIIMS, New Delhi being restricted to accept tenders of only upto Rs 50 Crores, procurement of such high end equipment of more than one AIIMS would mean that the matter would have to be taken to SFC, which would mean substantial delays, not only for new AIIMS, but also for AIIMS, New Delhi.
- IV. **Approval Sought:** The proposal in para III is submitted for discussion and decision of CIB.

**Proposal for transfer of procurement of Medical Equipment
activity from Ministry to AIIMS**

This is in pursuance to agenda item No. CIB-2/6 discussed in the 2nd meeting of Central Institute Body held on 10.12.2018 at AIIMS New Delhi.

It was resolved that Director, AIIMS Raipur and Director, AIIMS Jodhpur may deliberate and submit their joint recommendation on major (high value) equipment which would be procured through AIIMS Delhi while the rest are to be procured by the respective Institutes/ Mentor Institutes.

1. The matter was examined and it is proposed that some high value equipments like:

- 1) CT Scan
- 2) MRI
- 3) LINAC
- 4) PET Scan
- 5) Cath Lab Equipments
- 6) Digital Radiography machine
- 7) Biplane DSA
- 8) Gamma Camera

These may be procured through a Central Procurement Agency to get economy of scale. However, final decision may be left to individual AIIMS to decide regarding such equipment.

2. Other equipment may be procured centrally or by individual AIIMS with the help of their mentoring Institutes, as required.

3. 1. 2019
Prof. (Dr.) Nitin M Nagarkar
Director and CEO,
AIIMS Raipur

Sanjeev Misra
3/1/2019
Prof. (Dr.) Sanjeev Misra
Director and CEO,
AIIMS Jodhpur

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/5

Measures to improve Faculty strength in new AIIMS

Agenda No CIB-2/5: Measures to improve faculty strength in new AIIMS

- I. **Introduction:** CIB in its 2nd meeting desired that as there are serious shortage at senior level faculty members, all Directors of AIIMS may discuss the issue immediately and suggest suitable methodology without compromising the quality. While devising this methodology, focus on combined regular recruitment at fixed periodicity must be maintained so that critical shortage at senior faculty levels can be addressed.

- II. **Deliberation by the Committee of Directors under Director, AIIMS, New Delhi:**
 1. Committee of Directors under the chairmanship of Director AIIMS, New Delhi has already deliberated this issue on 13.08.2018 as directed by CIB earlier in its 1st meeting on 16th July 2018 and that time, the committee has recommended the two cycles each of regular and contractual recruitment in a year. The regular recruitment may be done at institute level while combined contractual recruitment may be done by AIIMS, New Delhi.

 2. The issue was again deliberated in detail by members. After detailed deliberations, it was decided to reiterate earlier recommendation as was made by Director's Committee. The Committee felt that more than two cycles of regular recruitment may not be feasible because of various reasons including non-availability of adequate number of eligible candidates who could apply for these senior level posts, practical difficulty of conducting frequent recruitment exercise such as availability of Selection Committee Members, time required for screening etc.

3. Director AIIMS Nagpur gave example of how due to non-availability of the Chairman of Selection Committee, there is almost no progress in regular recruitments. After detailed discussion, it was decided to recommend to CIB to approve a proposal whereby the Chairman of Standing Selection Committee may be mandated to give a date for holding the Selection Committee meeting within four weeks of intimation in mutual discussion with Director of the Institute concerned. However, in case of his non-availability, the Chairman must nominate any of other Members of the Standing Selection Committee to the chair the meeting of Selection Committee.
 4. In order to ensure more number of candidates appearing for the interview, the Institute may convene the Standing Selection Committee meeting at any city near the Insitute which may be found to be convenient. For example, AIIMS Kalyani could hold the meeting at Bhubneswar (Mentor Institute) or Kolkata (Nearest City).
- III. **Approval Sought:** CIB may kindly deliberate on the matter.

Record of the discussion during the meeting of Directors of AIIMS held at 28th December, 2018 under the Chairmanship of Director, AIIMS, New Delhi.

The meeting of the Directors of AIIMS held on 28th December, 2018 at 12.00 Noon in Director's Committee Room of AIIMS, New Delhi under the chairmanship of Prof. Randeep Guleria, Director, AIIMS, New Delhi. The following members were present:-

- 1) Prof. Sanjeev Misra
Director,
All India Institute Medical Sciences,
Jodhpur, Rajasthan.
- 2) Dr Dipika Deka
Director,
All India Institute Medical Sciences,
Kalyani, West Bengal
- 3) Maj General (Dr) Vibha Dutta
Director,
All India Institute Medical Sciences,
Nagpur, Maharashtra.
- 4) Prof. Gitanjali Batmanabane -- On Video Conferencing
Director,
All India Institute Medical Sciences,
Bhubaneswar, Orissa.
- 5) Dr. Sarman Singh -- On Video Conferencing
Director,
All India Institute Medical Sciences,
Bhopal, Madhya Pradesh.
- 6) Dr. S.P. Dhaneria,
Dean(Academics),
All India Institute Medical Sciences,
Raipur, Chhatisgarh.
- 7) Dr. Brahm Prakash,
Medical Superintendent,
All India Institute Medical Sciences,
Rishikesh, Uttarakhand.

- 8) Shri Neeresh Sharma,
Dy. Director,
All India Institute Medical Sciences,
Raipur, Chhatisgarh.

Dr. V.K. Bahl, Dean (Academic) AIIMS New Delhi, Dr Rajeev Kumar, Associate Dean (Academic) and Shri Subhasish Panda, Dy. Director (Admn.) were also present during the meeting.

At the outset, Director AIIMS Delhi welcomed all the members. Record of the discussions is as follows :

1. The members were informed that CIB in its 2nd meeting held on 10th December 2018 has desired that as there are serious shortages at senior level faculty members, all Directors of AIIMS may discuss the issue immediately and suggest suitable methodology without compromising the quality. While devising this methodology, focus on combined regular recruitment at fixed periodicity must be maintained so that critical shortage at senior faculty levels can be addressed.
2. During the discussions it transpired that Committee of Directors under the chairmanship of Director AIIMS, New Delhi has already deliberated this issue on 13.08.2018 as directed by CIB in its 1st meeting held on 16th July 2018 and has recommended the two cycles each of regular and contractual recruitment in a year. The regular recruitment may be done at institute level while combined contractual recruitment may be done by AIIMS, New Delhi.
3. The issue was again deliberated in detail by members and it was decided to reiterate the earlier recommendation as was made by the Director's Committee. The Committee felt that more than two cycles of regular recruitment may not be feasible because of various reasons including non availability of adequate number of eligible candidates who could apply for these senior level posts, practical difficulty of conducting frequent recruitment exercise such as availability of Selection Committee Members, time required for screening etc.

4. Director, AIIMS Nagpur gave the example of how due of non-availability of the Chairman of the Selection Committee, there is almost no progress in regular recruitments. After detailed discussion it was decided to recommend to the CIB to approve a proposal whereby the Chairman of the Standing Selection Committee may be mandated to give a date for holding the Selection Committee Meeting within four weeks of intimation in mutual discussion with the Director of the Institute concerned. However in case of his non availability, the Chairman must nominate any of other Members of the Standing Selection Committee to Chair the meeting of the Selection Committee.
5. In order to ensure more number of candidates appearing for the interview, the institute may convene the Standing Selection Committee meeting at any city near the Institute which may be found to be convenient. For example, AIIMS, Kalyani could hold the meeting at Bhubneswar (Mentor Institute) or Kolkata(Nearest City).
6. The issue of procurement of Equipments was also deliberated in view of the decision of CIB taken in its meeting held on 10/12/2018. Director, AIIMS, Jodhpur and Raipur were requested to take further necessary action and make suitable recommendations in this matter.
7. The issue of streamlining of the recruitment to the non faculty posts was also discussed in brief. Director, AIIMS, New Delhi will take necessary action of grouping of various cadres and submit a proposal to assign certain groups of posts to different AIIMS for completing the recruitment process as decided by the CIB in its meeting held on 10/12/2018.
8. Director AIIMS Kalyani stated that the posts for AIIMS Kalyani has not been sanctioned so far M/o H&FW.

The meeting ended with a vote of thanks to all those present.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/6

**Streamlining the recruitment process of non-faculty
(technical) by new AIIMS to attain speedier and better
outcomes.**

Agenda No. CIB-3/6: Streamline the recruitment process of non-faculty (technical) by new AIIMS to attain speedier and better outcomes

I. **INTRODUCTION:** CIB vide Item No. CIB-2/22 had considered a proposal in its meeting held on 10.12.2018 regarding streamlining the recruitment process of non-faculty (technical) by new AIIMS to attain speedier and better outcomes. It was suggested that to do so the different technical cadres may be identified for which different AIIMS may conduct centralised recruitment for all the AIIMS. Identified AIIMS will carry out recruitment for these identified cadres regularly for all the AIIMS.

II. **ADMINISTRATIVE COMMENTS:** In pursuance of above decision of the CIB, the AIIMS, New Delhi has considered the issue and identified 19 non-faculty cadres. In this regard, Governing Body, AIIMS New Delhi in its meeting held on 21.12.2017 on the issue of conduct of recruitment examinations for other AIIMS, had decided that :-

- a) AIIMS, New Delhi may conduct entrance examination for other new AIIMS, when requested, for Academic courses like MBBS, BSc, PG, DM-MCh, etc. along with its own entrance examination for similar courses.
- b) AIIMS, New Delhi may conduct recruitment examination for other new AIIMS, when requested, for faculty posts & nursing staff along with its own recruitment process for similar posts.
- c) AIIMS, New Delhi shall not conduct recruitment and selection process for other Institutes for any other Group A, B, C & D posts except on the directions of the President.

AIIMS, New Delhi owing to its long existence has a fairly stabilized and satisfactory staff position. Hence, it does not often need to go into fresh recruitment of such cadre.

III. **POINTS FOR CONSIDERATION:** In view of decision of the Governing Body, AIIMS, New Delhi, the following is proposed:

- (i) AIIMS, New Delhi will conduct entrance examination for various courses UG and PG courses for all AIIMS,
- (ii) AIIMS will conduct centralised recruitment for nursing cadre as is being done right now,
- (iii) AIIMS, New Delhi will continue to conduct recruitment for all its other posts.
- (iv) For rest of the technical cadres (19), it is proposed that 6 new AIIMS may do the centralised recruitment as below for their own purposes and other new AIIMS by dividing the cadres amongst themselves as suggested below or as they may decide amongst themselves:

S.No.	Name of AIIMS	Responsibility to conduct examination for Cadres
1.	AIIMS, Rishikesh	1. Cadre of Dietician 2. Cadre of Physiotherapist/Occupational therapist 3. Cadre of PHN
2.	AIIMS, Bhopal	1. Cadre of Pharmacist 2. Cadre of Central Workshop 3. Cadre of Medical Record
3.	AIIMS, Jodhpur	1. Cadre of Scientists 2. Cadre of Laboratory 3. Cadre of ENT Technician 4. Cadre of Ophthalmology
4.	AIIMS Raipur	1. Cadre of MSSO 2. Cadre of Radiology 3. Cadre of Health worker
5.	AIIMS, Bhubaneswar	1. Cadre of OT 2. Cadre of Radiotherapy 3. Cadre of Perfusionist
6.	AIIMS, Patna	1. Cadre of Physicist 2. Cadre of Dental 3. Cadre of R & A L

IV. **APPROVAL SOUGHT:** The proposal regarding conducting recruitments for Technical cadres on centralized basis for all new AIIMSs proposed in para III is submitted for discussion and decision please.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/7

**Sharing of lectures of renowned faculty among all new
AIIMS through e-class rooms set up under NMCN scheme**

Agenda No. CIB-3/7: Sharing of lectures of renowned faculty among all new AIIMS through e-class rooms set up under NMCN scheme

A. Background

Development of computer networks and introduction of application of new technologies in all aspects of human activity needs to be followed by universities in their transformation on how to approach scientific, research, and education teaching curricula.

Development and increased use of distance learning (DL) over the past decade have clearly shown the potential and efficiency of information technology applied in education. To overcome the challenges in medical education, shortage of faculty being foremost, traditional teaching methods involving face-to-face instruction may not be entirely feasible in all the AIIMS. The use of educational technology promises to resolve at least part of the numerous challenges faced by PMSSY, institutional heads, educators, students and content providers. Use of information technology in medical education is where medical informatics takes its place as important scientific discipline which ensures benefit from IT in teaching and learning process involved. Distance learning in medical education, as well as telemedicine, significantly influence health care in general and are shaping the future model of medical practice. Continuing Medical Education (CME) is very vital for healthcare professionals to render high quality services in line with new developments, both in urban and rural locations.

B. National Medical College Network (NMCN) project

E-Health Division, MoHFW has initiated the National Medical College Network (NMCN) scheme aimed at creation of a homogenous environment within shortlisted 50 Medical Colleges interconnected on National Knowledge Network (NKN) to provide Tele-Education, Tele-Mentoring, Tele-Medicine and e-Learning facilities to the Students, Doctors and Citizens. The scheme got approved with the estimated budget of Rs. 104 Crores through EFC in February 2014 with implementation and Operational timelines of 5 years.

As a priority component, the implementation of Tele-Education component under NMCN scheme was implemented through M/s ERNET India (a society under MeitY). The Digitally equipped medical lecture theatres (virtual classroom) have been created at 50 Medical colleges which are under testing phase.

The infrastructure setup under Tele-Education component primarily consisted of following:

✓ **Centralized Video Conferencing system**

In the NMCN scheme, it is envisaged to create a centralized Video Conferencing system for Medical Colleges including AIIMS to collaborate in a closed ecosystem to share lectures. A Master Control Unit (MCU) has been installed at NRC, Lucknow with requisite manpower to manage the whole NMCN scheme. The endpoints viz. Video Conferencing Codecs has been installed at 49 periphery colleges / AIIMS including AIIMS Delhi (RRC) which are inter-connected with MCU.

✓ **IT and Audio Visual Equipment**

At the 50 Medical Colleges existing Lecture Theatre are upgraded by providing latest Audio-Visual equipment including projectors, screens, LED Displays, sound system and microphone system to interact with other medical colleges inter-connected through Centralized VC system.

The system is capable of streaming the lectures on web portals for anytime anywhere viewing by students and also has the facility to store lectures for processing the crisp e-content to be utilized for offline viewing by students.

The Envisaged Outcomes from the Tele-Education project comprises of:

- a) Medical Content generation at Colleges from eminent Professors
- b) Anytime Anywhere access of content for Students
- c) Demonstrate live surgery/Live Medical Procedures from Operation Theatre

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/8

**Prioritizing new projects for civil and equipment under
SFC within the available budgetary resources.**

- d) Advantages in terms of flexible education imparting and gaining
- e) Distribute the education uniformly
- f) More efficiency and high educational standards to the students and teaching staffs
- g) Reducing the Costs of educational process

C. Administrative Comments: The lecture can be shared through e-class room on recommendation of HoD and consent of the concerned faculty members delivering the lecture. An LMS is under development in AIIMS Delhi. AIIMS Delhi will share the experience with all AIIMS and guide them in setting up e-learning platform. A federation of all AIIMS can be formed through this platform and content/courses can be shared. AIIMS, Delhi will take lead in training all AIIMS to implement and use common e-learning platform.

D. Proposal for consideration for CIB

The current NMCN scheme for Tele-Education includes all functional AIIMS which may be upgraded to match the infrastructure at other institutes. A dedicated VC room for all AIIMS for providing collaborative learning experience to students and faculty is also being created by SGPGI-Lucknow, National Resource Centre (NRC) of MoHFW.

It is proposed that the NMCN scheme may be leveraged by creating a closed user AIIMS Tele-education network. An additional utility of Student's Portal for AIIMS students developed backed with Learning Management System (LMS).

Lectures of renowned faculty should be shared among all new AIIMS through e-class rooms/virtual classroom set up under NMCN scheme.

Agenda No. CIB-3/8: Prioritizing new projects for civil and equipment under SFC within the available budgetary resources

- I. **INTRODUCTION:** It has been observed that several proposal of new projects / procurement of medical equipment which are not part of DPR / CCEA approval in 2010 i.e. Phase I of PMSSY are lying pending with six AIIMS even after approval from respective SFC of AIIMS due to want of inadequacy of funds from Budgetary Grants through Grants-in-Aid; GiA (Capital). Since six AIIMS have become functional, it is felt that, there is genuine need for expansion. However there have been observations in the Performance Audit of PMSSY by CAG regarding non-utilization of resources. Hence fine-tuning between necessity, capacity and availability of resources is utmost important. The Ministry has been demanding funds through GiA (Capital) from Ministry of Finance to support the new projects; yet the budgetary support is not adequate to meet the current demands. While other avenues of financing are being explored; it is proposed that all projects that have been approved by SFC of respective AIIMS needs to be reviewed and taken up on priority basis. All six AIIMS may submit their requirement on priority basis within a fortnight i.e. 8th February, 2019 to asses and allocate funds for execution of the projects and procurement of medical equipment.

- II. **Approval sought:** Proposal is placed before Common Institute Body for consideration and decision.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/9

Implementation of State Govt. Scheme for treatment of patients in all new AIIMS along with PMJAY.

Agenda No. CIB-3/9: Implementation of State Govt Scheme for treatment of patients in all new AIIMS along with PMJAY

- I. **Introduction:** The PM-JAY (Ayushman Bharat) Scheme of the Government of India has already been implemented in all functional new AIIMS and all these AIIMS have already executed MoU with the NHA. In this connection, it is mentioned that some State Governments have not yet implemented this National Scheme resulting exclusion of the people of that State to get the benefit of PM-JAY. These States have implemented different Health Schemes and are approaching some of these new AIIMS to get enrolled in their scheme.

In order to extend maximum benefit to the people, it is proposed to authorise the Director of the new AIIMS to sign MoU with concerned State Government/other Government Agencies for implementation of different health benefit schemes other than PM-JAY after examining its terms and conditions as acceptable to the new AIIMS.

- II. **Administrative Comments:** AIIMS, New Delhi provides requisite treatment to patients availing financial assistance from other Govt Scheme of Central Govt (apart from AB-PMJAY) as well as State Govt as mentioned below:

- a. Rashtriya Arogya Nidhi (RAN) earlier known as Nation Illness Assistance Fund (NIAF)
- b. State Illness Assistance Fund of various States like Delhi Arogya Kosh (DAK)
- c. Health Minister's Discretionary Grant (HMDG)
- d. President's Fund
- e. Chief Minister's Fund etc

Under these schemes, financial assistance is sanctioned by respective Govt authorities and the same is transferred to AIIMS account with intimation to Medical Superintendent. After completion of treatment, proper utilization is sent to concerned funding authority.

- III. **Approval sought:** CIB is requested to approve the above proposal of Implementation of other Government sponsored Health Benefit Schemes besides PM-JAY (Ayushman Bharat) in all new AIIMS.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/10

**Proposal for the sanction of Intramural Research Grant to
students for new AIIMS**

Agenda No. CIB-3/10: Proposal for the sanction of Intramural Research Grant to students for new AIIMS

- I. **Introduction:** The Department Related Parliamentary Standing Committee of Health and Family Welfare in its recent inspection to different new AIIMS has emphasised to promote a culture of research amongst students including under graduate students. The ICMR has a research scheme called Short Term Studentship (STS) by which undergraduate students can conduct a short term research project and are given Rs.10,000/= for two months as incentive while Postgraduate students are given Rs.50,000/= as a research grant for their thesis during their PG training.

Undergraduate and Postgraduate students in the new AIIMS may also be given grants to promote and encourage a research culture. Likewise, accordingly, the following proposal is placed before the CIB for approval:

1. To provide Intramural Research Grant amounting to Rs. 50,000/- each to Post -graduate medical students for carrying out thesis work during the total duration of their course, which will include MD/MS/DM/MCh students.
2. To provide Intramural Research Grant amounting to Rs. 10,000/- each to the Undergraduate Medical/Nursing and Para Medical students for carrying out short term research projects under supervision of a faculty member.
3. The projects will be approved for scientific validity by the procedure that is in place in these institutions, which will include clearance by the institutional ethics committee.

II. **Administrative Comments:**

1. At AIIMS, Delhi, the following is adopted:
 - i. MD/MS/MDS/DM/MCh/PhD students are given a grant of Rs 5000/- on submission of thesis.

- ii. UG students are provided with summer fellowship (total three awarded every year) of Rs 3000/- per month for two months.
 2. A new scheme being introduced for Intramural funding for UG students. (Students from the third semester onwards will be eligible to apply. A group of 3-4 MBBS students will form a team under the guidance of a faculty member – designated as mentor and will write a research project, which will be submitted to the Research Section for review and consideration of intramural funding. Based on merit of the project, a total funding of Rs 2 Lakhs per project will be sanctioned for a period of one year. The funds will be allocated in the name of faculty/mentor, who will then use it for work/procurement of consumables etc of the research project. No funds shall be allocated to the student. Five such projects are proposed to be identified.)
- III. **Approval sought:** CIB is requested to kindly deliberate the above proposal in para I.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/11

Common e-learning platform (LMS) with online peer reviewed medical content and online courses for MBBS and Nursing courses

Agenda No. CIB-3/11: Common e-learning platform (LMS) with online peer reviewed medical content and online courses for MBBS and Nursing courses

- I. INTRODUCTION:** With the objectives of correcting regional imbalances in the availability of affordable/reliable tertiary healthcare services and also to augment facilities for quality medical education in the country, 21 new AIIMS are being set up under PMSSY scheme. Six of these Institutes are already functional and another 15 would be expected to become functional over a period of the next 3 years.
- II. Background on Medical Education:** PMSSY has set up six AIIMS-like institutions as part of its two core components and is in the process of setting up several such institutions across the country. To overcome the challenges in medical education, shortage of faculty being foremost, traditional teaching methods involving face-to-face instruction may not be entirely feasible in all the AIIMS. The use of educational technology promises to resolve at least part of the numerous challenges faced by PMSSY, institutional heads, educators, students and content providers.
- III. Framework of Blended Learning Management System (BLMS) in new AIIMS:** The use of a Blended Learning Management System, combining the two modalities of traditional face-to-face (F2F) teaching with Computer-Mediated (CM) learning, using prevalent educational technologies, is strongly recommended as a strategic direction for the new AIIMS as well as prototype for changes in medical education all over India.

IV. Challenges in Medical Education at the AIIMS-Like Institutions:

- i. **Shortage of faculty:** First and foremost, there is an acute shortage of teaching faculty. Despite the PMSSY Departments' efforts to expedite the filling up of vacancies, a huge number of posts are still lying vacant. Currently almost 60% of faculty positions are vacant at the six AIIMS-like institutions.
- ii. **Additional Faculty responsibility in view of heavy patient caseload:** The existing faculty is burdened with the additional responsibility of patient care at the attached Hospitals. Although there is a realization that sharing of teaching resources across the AIIMS-like institutions can alleviate part of the impact due to faculty shortages, there is currently no medium to harness these resources. Moreover, while there is some parity in teaching resources across all the AIIMS, some subjects are bound to have differences in teaching practices at each institute. There is no way to leverage best teaching practices from each of the AIIMS to benefit students across the group. This also applies to clinics, procedures and surgeries, where some interesting cases may only present to a certain institute, further limited by the ability to capture these in real-time.
- iii. **Exhaustive Student Evaluation system:** With the vast syllabi and the exhaustive evaluation system, students face time shortages and are unable to master key concepts. Their priorities are to pass examinations and secure post-graduate seats of their choice.
- iv. **Dilution of Teaching-Learning Process:** Students have very high affinity to digital technologies and keeping them engaged with traditional teaching methods is a challenge. Tracking their performance giving individual attention is certainly difficult in large batch-sizes.

v. ***In-appropriate Implementation of Modern Medical Technology for Student's***

utilization: Although there is a growing realization that educational technology is a cardinal element of educational reform, implementing the appropriate technology solutions aligned to the institute's vision and strategy, taking into account important factors like cost, accessibility, time and convenience, poses a significant challenge.

vi. ***In-appropriate and Fragmented curricula for Medical Graduates:*** While online content is ubiquitous, there is currently a dearth of world-class validated and relevant content developed by experts and mapped to revised MBBS & nursing curricula. Institutional content remains fragmented and there is a strong need to combine institutional content at the group-level with external peer-reviewed content.

III. Points for Consideration: There is now a greater emphasis on teaching methodologies that enable early clinical exposure and focus on building sound clinical and practical skills. Revised MBBS curriculum includes changes like skills-focused competency-based dynamic curricula and introduction of attitude, ethics and communications (AETCOM).

i. ***The Role of Educational Technology:*** In the last decade, technology-driven education – in the form of innovative technology solutions – has been adopted by majority of the education sectors in India. However, development and uptake of education technology solutions in the medical education sector has been relatively slow. Not all education technology solutions are geared to fulfill a critical need or overcome challenges faced by the teacher and learner. The ultimate objective of education technology solutions is to solve real challenges faced by the students, educators, institutions and the national education system at large.

- ii. ***Prevalent Educational Technologies:*** Apart from digitization of available static content into eBooks, various educational technologies like – Search Engines, eLearning, Multimedia content (procedural videos / audios and 2D/3D animations), Simulation, Learning Analytics, Adaptive Learning and Assessments, Mobile Learning, Massive Open Online Courses (MOOCs), Flipped Classrooms, Online tutoring, Embedded QR & Augmented Reality codes, Smart and Satellite classes, Virtual Reality, Gamification, Collaborative Learning, Offline and Mobile access - have been deployed in multiple sectors in the past decade both in India and across the globe.

IV. Benefits to various Stakeholders:

- i. e-Learning Platform or Blended Learning Management system (BLMS) is a highly-intuitive educational platform that supports the entire learning spectrum; including traditional face-to-face classroom instruction, all models of blended learning and delivery of fully virtual online courses.
- ii. The possibilities for increasing student learning, personalizing instruction, making learning accessible and creating strong institutional culture through digital learning have inspired educators and students across the globe to eagerly embrace online learning opportunities.
- iii. Full-time virtual programs are growing in popularity and “traditional” teachers are experimenting with what is possible due to the wealth of content available on the web.
- iv. This platform would be a single comprehensive solution that supports each stakeholder in the online learning community by bringing both instructors and students together on a cohesive platform, providing user-friendly tools and resources, putting analytics at the fingertips of teachers and administrators, and making proactive engagements with students a simple matter.
- v. IT applications themselves cannot enable the highest standards of education and clinical practice. It is important that the learning and

practice applications be based on high-quality medical content. Most of the content available freely on the web is not reviewed by experts and may be of poor quality.

- vi. Thus there is a need for Peer-Reviewed, Authoritative Medical Content for learning and clinical practice which empowers IT applications to deliver the best outcomes for students and practitioners.

V. Key Outcomes of the proposed Blended Learning Management System (BLMS) in AIIMS:

- i. Focus on strong know-how and hands-on experience of must-have MBBS-level skills which in turn will help students practice as basic physicians, upon graduation.
- ii. Credit based system with focus on AETCOM, research methods, public and mental health.
- iii. Competencies will be structured to modules using integrated learning, thus giving an early clinical exposure to students and allow outcomes-based learning.
- iv. Objective Structured Clinical Examination (OSCE), Competency-based assessments, and higher weightage to periodic formative assessments.
- v. Personalized pace and self-directed learning to achieve desired competencies.
- vi. Focus on early clinical exposure and holistic understanding of topics through methodologies such as Problem-Based Learning.

- VI. **Administrative Comments:** The lecture can be shared through e-class room on recommendation of HoD and consent of the concerned faculty members delivering the lecture. An LMS is under development in AIIMS Delhi. AIIMS Delhi will share the experience with all AIIMS and guide them in setting up e-learning platform. A federation of all AIIMS can be formed through this platform and content/courses can be shared. AIIMS, Delhi will take lead in training all AIIMS to implement and use common e-learning platform.

- V. **Approval Sought:** The use of a Blended Learning Management System, combining the two modalities of traditional face-to-face (F2F) teaching with Computer-Mediated (CM) learning, using prevalent educational technologies, may be implemented in all AIIMS to resolve at least part of the numerous challenges faced by PMSSY, institutional heads, educators, students and content providers.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/12

**Funding for new works (other than DPR works) in six
functional AIIMS through HEFA**

Agenda No. CIB-3/12: Funding for new works (other than DPR works) in six functioning AIIMS through HEFA

- I. **Introduction:** At present there are six (6) functional AIIMS at Rishikesh, Bhubaneshwar, Jodhpur, Patna, Bhopal and Raipur. For taking up of new works which have not been approved otherwise under the DPR works and are essential to attain full functionality of these AIIMS and ensure timely financing of these infrastructure projects, the it is proposed to take up funding of these infrastructure Projects through Higher Education Funding Agency (HEFA).
- II. **Background of HEFA:**
 1. The Finance Minister in the Budget Speech of 2016-17 announced as below: "We have decided to set up a Higher Education Financing Agency (HEFA) with an initial capital base of Rs 1,000 Crores. The HEFA will be a not-for-profit organization that will leverage funds from the market and supplement them with donations and CSR funds. These funds will be used to finance improvement in infrastructure in our top institutions and will be serviced through internal accruals".
 2. In the meeting taken by Principal Secretary to Hon'ble PM, in Jan 2018, it was decided that Ministry of Health & Family Welfare should leverage funds from Higher Education Financing Agency (HEFA) for its infrastructure projects under PMSSY.
 3. MoHF&W vide Secretary's D.O letter dated 25.01.2018 requested Ministry of HRD to include new AIIMS which are set up under the AIIMS Act in the ambit of HEFA so that their initial capital expenditure which is around Rs 1000 cr AIIMS be financed by HEFA. (Annexure-I)
 4. Ministry of HRD prepared a EFC Note in regard to strengthening of Higher Education Funding Agency (HEFA) for financing

infrastructure and research in educational institutions on 08.02.2018. Ministry of HRD sought for comments from the various Ministries on the EFC note.

5. MoHF&W vide its OM dated 26.02.2018 provided its comments to IFD, MoHFW on the EFC note circulated by Ministry of HRD.
6. Meanwhile, in a meeting taken by Principal Secretary to Hon'ble PM held on 16.06.2018 constituted a Committee comprising of Secretary, Deptt. of Economic Affairs; Secretary, Department of Financial Services; Secretary, Department of Higher Education and Secretary, Department of Health & Family Welfare for raising Extra Budgetary Resources in consultation with Department of Economic Affairs.
7. Cabinet Committee on Economic Affairs in its meeting held on 04.07.2018 approved enlarging of the present Board of Directors of HEFA, chaired by Secretary (HE), to include Secretary, Health & Family Welfare, Joint Secretary & Financial Adviser, MHRD and Joint Secretary/Additional Secretary level officer in MHRD dealing with HEFA.
8. Ministry of HRD vide letter dated 16.07.2018 informed this Ministry that Revitalizing Infrastructure and Systems in Education (RISE) by 2022 has been approved by GoI on 04.07.2018 by suitably extending/modifying the existing financing norms of Higher Education Financing Agency (HEFA) to accommodate the infrastructure needs and financial capability of several categories of institutions under higher education, school education and institutions under the Ministry of Health. Ministry of Health & Family Welfare was included in Window (5) of the credit policy for funding.
9. **Projects of MoHFW appraised and approved for HEFA Funding:** HEFA board has approved the following projects for funding under Window - 5.

- (i) AIIMS Rae Bareli
- (ii) AIIMS Mangalagiri
- (iii) AIIMS Nagpur
- (iv) AIIMS Kalyani
- (v) AIIMS Gorakhpur
- (vi) AIIMS Bathinda
- (vii) AIIMS Guwahati Assam
- (viii) AIIMS Bilaspur
- (ix) NCI, Jhajhar , AIIMS

In the above cases, loan amount of Rs 525 Crs has been sanctioned in each case and Rs 100 Crs has been released for AIIMS Gorakhpur and Rs 92.5 Crs for AIIMS Guwahati.

Release of funds is in pipeline for AIIMS Bathinda and Bilaspur.

Proposal has also been received in case of other AIIMS for release of funds which will be dealt by the Mentor Institutes

10. Proposal submitted/to be submitted for HEFA funding: Proposal for AIIMS Deoghar is being submitted for seeking HEFA funding. It is also proposed to submit papers for HEFA funding in case of approved AIIMS at Jammu, Srinagar and Gujarat shortly. JICA funding is being proposed for AIIMS at Madurai.

III. **Servicing of HEFA Loans:** As per RISE by 2022 model, the eligible institutions will be financed under the following window five:

v. Other educational institutions and grant-in aid institutions of Ministry of Health: Sponsoring Department / Ministry to give a commitment for complete servicing of the principal and interest for the institution.

Hence the funds would be fully serviced by Ministry of Health and Family Welfare and Ministry is giving full commitment for servicing of the Loan and new AIIMS would not have any liability towards repayment of the loan.

IV. Projects to be undertaken under HEFA by the 6 running AIIMS:

The new projects that were not part of original DPR sanctioned in 2010 but are essential for functioning of AIIMS would include civil and procurement of medical equipment. Brief details of the projects sanctioned is given in Annexure. However, considering the amount required, it would be difficult to provide resources for budgetary support to all these new projects, total cost of which is around Rs.2600 Cr. These projects less than of Rs.100 crores would be approved by the respective IB / GB of the Institutes and in case these projects are of cost less than Rs 500 Cr the same need to be brought to the CIB for prioritization and approval.

V. Approval Sought: Approval of CIB is sought for allowing the 6 New functional AIIMS to enter into agreement with the Lending organization (in this case HEFA) for funding for new works not included in original DPR works for development of new infrastructure and facilities.

Approval is also sought for giving commitment to HEFA for servicing of the Loan by Ministry of Health and Family Welfare and that the 6 new functional AIIMS would not have any liability towards repayment of the loan.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/13

**Finalization of a fixed date for Convocation in each
AIIMS**

Agenda No. CIB-3/13: Finalization of fixed date for convocation in each AIIMS

- I. **Introduction:** All functional new AIIMS are presently having Under Graduate & Post Graduate Medical Courses such as MBBS/MD/MS/DM/MCh, besides BSc/MSc in Nursing and also BSc in different Para Medical disciplines. Already two batches of MBBS and BSc Nursing have passed out. Some new AIIMS have completed their first Convocation and some of them are yet to hold it. Although, two batches of students in MBBS, BSc Nursing students have passed out, but the convocation are delayed due to various administrative reasons. The convocation is one of the important academic activities and students want that it should be held every year in time so that they can plan to come personally to receive the degree. In this connection, it is stated that the MBBS Academic Course is generally completed on 31 December every year, similarly BSc Nursing complete their course during July/August every year. The Post Graduate Courses are completed during last week of July and last week of February every year.

In view of the above, it is proposed that normally a specific date be fixed during August-September every year by each new AIIMS for holding Convocation so that all the students and the Institute can make proper plan in advance to award degrees to all the students who will complete their course successfully. A date during August-September is taken as it will cover maximum number of passed out students in that year.

- II. **Administrative Comments:** In July/August, newer admissions are done for various courses and multiple rounds of counselling are scheduled. Further issues related to ragging, orientation, accommodation, adjustment are in administrative focus. In March/April, no significant administrative issues are involved,

therefore, conventionally, convocation at AIIMS Delhi, is organized in March or April every year. All the students who have cleared examination in preceding year upto December are being awarded degrees in convocation held in March or April every year.

- III. **Approval sought:** CIB is requested to approve the proposal to fix a particular date every year for holding convocation in respect of all new AIIMS. The date for convocation during Aug-Sep may be decided by the respective GB and IB of the new AIIMS.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/14

**To transform the nursing college at AIIMS New Delhi and
at six new AIIMS as Centres of Excellence as per
recommendations of NITI Aayog**

Agenda No. CIB-3/14: To transform the nursing college at AIIMS New Delhi and at six new AIIMS as Centres of Excellence as per recommendation of NITI Aayog

I. **Introduction:** With the approval of Hon'ble Minister of Health and Family Welfare, Govt. of India a Committee under the Chairmanship of Dr. V.K. Paul, Member, NITI Aayog was constituted in July, 2018 with a view to take initiative to promote a culture of excellence in new AIIMS.

II. **Comments of NITI Aayog:** NITI Aayog has recommended to transform the Nursing Colleges at AIIMS New Delhi and at the New AIIMS as Centres of excellence, by 2022, Model on similar centres in other part of the world. These Institutes/College should be tasked to develop respective roadmaps for the same, and to provide additional resources and administrative empowerment toward this object.

Six regional centres of excellence in Nursing should be created in Govt. Nursing Colleges by 2022.

In an effort to encourage to enable innovations and experimentation, all the AIIMS are not under the INC. This was done so that new models nursing education could be developed for national scale up. Accordingly, all the AIIMS should be encouraged incentivised and supported for innovations and reforms in nursing education.

III. **Administrative Comments:** AIIMS, Delhi agrees with the proposal provided the space and fund allocation is available for the proposal.

IV. **Approval sought:** Central Institute Body (CIB) is requested to consider the recommendations of NITI Aayog to develop Centre of excellence in nursing in all the New AIIMS.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/15

Common Digital Medical Library Content for all AIIMS

Agenda No. CIB-3/15: Common Digital Medical Library Content for all AIIMS

I. **Introduction:** Currently, ERMED is providing e-Journals and other such commonly used resources for AIIMS and other medical institutes. Now, a need is felt for some additional e-Journals and e-Books by AIIMS to cover the entire spectrum of resources.

II. **Points for consideration:** The resources covered ERMED do not include some of the digital resource, as mentioned below:

1. **Remote Xs Service:** This enables a user to access the e-Resource remotely using Smartphone or Tablet at his/her ease.

Resources Name	One Year Subscription Price	Five Year Subscription Price
Remote Xs Service	87,272.00	4,36,359.28

2. UpToDate AnyWhere Services

Resources Name	One Year Subscription Price	Price in Indian Rupee
UpToDate Anywhere	1 Year = \$26,644.40 USD	Indian Rupee = 18,77,497.65

3. Clinical Key from Elsevier

Resources Name	2019 Price USD	Price in Indian Rupee
Clinical Key from Elsevier	201,760	1,42,10,965.60

Clinical Key Resources details: -

1. 678 journals across 30 specialties which include 10 Lancets.
2. 1100+E-books
3. 3.3 Million Multimedia content (Images + Videos).
4. Presentation Maker
5. Drug monographs
6. Patient education handouts, Procedure consult
7. Clinical Key Medical Education product for UG Student it provides 230+textbooks covering 40 medical specialties.

4. Online Resources on Ovid Platform

Resources Name	Offer Price in US \$	Price in Indian Rupee
Online Resources on Ovid Platform	\$ 1,69,500	1,19,40,427.50

Ovid Product details: -

1. 189 Ovid Journals (LWW Total Access Collection less LWW Journals, Society Publication NEJM, JAMA, Science, British Bone and Joint Journals, Neurology).
2. Ovid Discovery Services (Single window access to all resources)
3. Visible Body (3D human Atlas Anatomy, Virtual dissection)
4. Lippincott Solution – Nursing Procedures and Nursing Advisor

5. Turnitin Feedback Studio (Anti-Plagiarism Software)

Software Name	Offer Price in US \$	Price in Indian Rupee
Turnitin Feedback Studio 500 Users	\$ 13,000	9,16,175.00

Overview of Turnitin Feedback Studio: -

1. Detecting similarity in student Assignment and Dissertation/Thesis
2. Preventing Plagiarism and Promoting Academic Integrity
3. Protecting and preserving your own work at the Institutional level
4. Establishing peer Review Process for your institute
5. Enforcing Students towards original Thinking and Original Writing

All the AIIMS have either procured these digital resources on their own or in the process of acquiring. The cost may come down if they are procured centrally by making one AIIMS as nodal agency for one/two years on rotation basis.

III. **Approval Sought:** CIB may deliberate and decide.

NOTE FOR THE CENTRAL INSTITUTE BODY

ITEM NO. CIB-3/16

**Reservation for Economically Weaker Sections (EWSs)
for admission in AIIMS**

Agenda No. CIB-3/16: Reservation for Economically Weaker Section (EWSs) for admission in AIIMS

- I. **Introduction:** In accordance with provisions of the Constitution (One Hundred and Third Amendment Act 2019) and the reference of Gazette Notification dated 14th January, 2019 of Department of Social Justice and Empowerment (copy annexed), educational institutions are required to make provision for reservation to economically weaker section.

- II. **Approval Sought:** Each AIIMS may identify seats and take necessary approval for implementation in accordance with the Constitutional Provision.



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असाधारण

EXTRAORDINARY

भाग II—खण्ड 1

PART II—Section 1

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

सं० 3] नई दिल्ली, शनिवार, जनवरी 12, 2019/पौष 22, 1940 (शक)
No. 3] NEW DELHI, SATURDAY, JANUARY 12, 2019/PAUSHA 22, 1940 (SAKA)

इस भाग में भिन्न पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।
Separate paging is given to this Part in order that it may be filed as a separate compilation.

MINISTRY OF LAW AND JUSTICE (Legislative Department)

New Delhi, the 12th January, 2019/Pausha 22, 1940 (Saka)

The following Act of Parliament received the assent of the President on the 12th January, 2019, and is hereby published for general information:—

THE CONSTITUTION (ONE HUNDRED AND THIRD AMENDMENT) ACT, 2019

[12th January, 2019.]

An Act further to amend the Constitution of India.

Be it enacted by Parliament in the Sixty-ninth Year of the Republic of India as follows:—

1. (1) This Act may be called the Constitution (One Hundred and Third Amendment) Act, 2019. Short title and commencement.

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

2. In article 15 of the Constitution, after clause (5), the following clause shall be inserted, namely:— Amendment of article 15.

“(6) Nothing in this article or sub-clause (g) of clause (1) of article 19 or clause (2) of article 29 shall prevent the State from making,—

(a) any special provision for the advancement of any economically weaker sections of citizens other than the classes mentioned in clauses (4) and (5); and

(b) any special provision for the advancement of any economically weaker sections of citizens other than the classes mentioned in clauses (4) and (5) in so



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असाधारण

EXTRAORDINARY

भाग II — खण्ड I

PART II — Section 1

प्राधिकार से प्रकाशित

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Separate paging is given to this Part in order that it may be filed as a separate compilation.

MINISTRY OF LAW AND JUSTICE (Legislative Department)

New Delhi, the 12th January, 2019/Pausha 22, 1940 (Saka)

The following Act of Parliament received the assent of the President on the 12th January, 2019, and is hereby published for general information:—

THE CONSTITUTION (ONE HUNDRED AND THIRD AMENDMENT) ACT, 2019

[12th January, 2019.]

An Act further to amend the Constitution of India.

BE it enacted by Parliament in the Sixty-ninth Year of the Republic of India as follows:—

1. (1) This Act may be called the Constitution (One Hundred and Third Amendment) Act, 2019.

Short title and commencement.

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

2. In article 15 of the Constitution, after clause (5), the following clause shall be inserted, namely:—

Amendment of article 15.

‘(6) Nothing in this article or sub-clause (g) of clause (1) of article 19 or clause (2) of article 29 shall prevent the State from making,—

(a) any special provision for the advancement of any economically weaker sections of citizens other than the classes mentioned in clauses (4) and (5); and

(b) any special provision for the advancement of any economically weaker sections of citizens other than the classes mentioned in clauses (4) and (5) in so

far as such special provisions relate to their admission to educational institutions including private educational institutions, whether aided or unaided by the State, other than the minority educational institutions referred to in clause (1) of article 30, which in the case of reservation would be in addition to the existing reservations and subject to a maximum of ten per cent. of the total seats in each category.

Explanation.—For the purposes of this article and article 16, "economically weaker sections" shall be such as may be notified by the State from time to time on the basis of family income and other indicators of economic disadvantage. '.

Amendment of
article 16.

3. In article 16 of the Constitution, after clause (5), the following clause shall be inserted, namely:—

"(6) Nothing in this article shall prevent the State from making any provision for the reservation of appointments or posts in favour of any economically weaker sections of citizens other than the classes mentioned in clause (4), in addition to the existing reservation and subject to a maximum of ten per cent. of the posts in each category."

DR. G. NARAYANA RAJU,
Secretary to the Govt. of India.

NOTE FOR THE CENTRAL INSTITUTE BODY

Item No. CIB/ 17

TO CONSIDER THE REQUEST FOR ENHNCEMENT IN THE UPPER AGE LIMIT FOR APPLYING TO THE POST OF PRINCIPAL, COLLEGE OF NURSING AT THE AIIMS, NEW DELHI.

1. INTRODUCTION

The Governing Body, AIIMS, New Delhi in its meeting held on 24.01.2019 has considered the issue of enhancement in the upper age limit for applying to the post of Principal, College of Nursing, at AIIMS, New Delhi from 50 years to 55 years and approved the same. The Governing Body, AIIMS has also expressed their views that the same may also be applicable to all AIIMS on the analogy of AIIMS, New Delhi.

2. ADMINISTRATIVE COMMENTS

- 1.1 The post of Principal, College of Nursing & Lecturer in Nursing, both are Direct Recruitment posts.
- 1.2 The recruitment rules for the post of Principal, College of Nursing & Lecturer in Nursing at the Institute are as under:

Principal, College of Nursing	Lecturer in Nursing
Sanctioned strength -01	Sanctioned strength -09
Mode of Recruitment -100% by DR	Mode of Recruitment -100% by DR
Pay scales -Level 13 (118500-214100)	Pay scales -Level 11 (67700-208700)
<u>Essential Qualification:</u>	<u>Essential Qualification:</u>
1. Master's Degree in Nursing with advanced specialised in Nursing.	1. Master's Degree in Nursing from a recognized institution/University.
2. Must be registered Nurse and midwife.	2. Registered Nurse and midwife.
3. 10 years experience in the Nursing field after registration as Nurse out of which seven years must have been spent in Nursing education or administration after obtaining the prescribed postgraduate qualification.	3. 05 years experience with a minimum of two years teaching experience in Nursing.
<u>Upper Age Limit:</u>	<u>Upper Age Limit:</u>
50 years, relaxable for Government servants, SC/ST or otherwise exceptionally qualified applicants up-to 5 years and 3 years in the case of OBC candidates.	50 years, relaxable for Government servants, SC/ST or otherwise exceptionally qualified applicants up-to 5 years and 3 years in the case of OBC candidates.
<u>Age of Superannuation:</u> 65 years.	<u>Age of Superannuation:</u> 65 years.

- 1.3 In 1981, the age of superannuation for Faculty was 58, which was first increased to 60 years and further increased to 62 years. At present, the retirement age of Faculty is 65 years.
- 1.4 It may be seen from the above table that presently, upper age limit to apply for the post of Principal, College of Nursing is 50 years.
- 1.5 Because of present ceiling of age of 50 years for applying to the post, many senior faculty members who have many years of service left, can not apply to this post. In view of the changed circumstance i.e. revision of retirement age from 58 to 65 years, there is need to revise Recruitment Rules to increase upper age limit for the post of Principal, College of Nursing is by 5 years. This will provide opportunity to many more senior nursing Faculty members to be eligible to apply for this post. This will result in having a larger pool of applicants to select for this post in AIIMS.

3. APPROVAL SOUGHT

- 3.1 In view of the above decision of Governing Body of the AIIMS, New Delhi, it is submitted for the consideration and approval that the proposal of enhancement in upper age limit to the post of Principal, College of Nursing from 50 years to 55 years is also placed before the Central Institute Body for applicable to all AIIMS.

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NOTE FOR THE CENTRAL INSTITUTE BODY

Item No.CIB/ 18

TO CONSIDER THE PROPOSAL FOR CHANGE OF NOMENCLATURE OF THE POSTS EXIST IN THE CADRE OF SANITARY ATTENDANT FOR ALL AIIMS.

INTRODUCTION:-

The Governing Body, AIIMS, New Delhi in its meeting held on 24.1.2019 has considered the issue for change of nomenclature of the posts existing in the Cadre of Sanitary Attendant for AIIMS, New Delhi to Multi Tasking Staff (Sanitation) in accordance with the instructions issued by the DoPT, Government of India and approved the same. The Governing Body, AIIMS has also expressed view that the same may also be applicable to all AIIMS on the analogy of AIIMS, New Delhi.

ADMINISTRATIVE COMMENTS:-

In the above context it is to be submitted here that the 6th CPC recommended that all Group 'D' posts in the Government will stand upgraded to Group 'C', Pay Band-1 with Grade Pay of Rs. 1800, along with the incumbents (after suitable training, wherever required). The DoPT vide office memorandum dated 30/04/2010 had issued instructions that Ministries /Departments may adopt the designation of Multi Tasking Staff for some common categories of posts. A copy of the DoPT office memorandum dated 30/4/18 is annexed herewith for perusal as Annexure-I.

In view of above and as per view of the Governing Body, AIIMS, New Delhi, it is submitted for consideration that the nomenclature of the posts in the cadre of Sanitary Attendant in all AIIMS may also be revised on analogy of AIIMS, New Delhi.

NOTE FOR THE CENTRAL INSTITUTE BODYItem No.CIB/ ~~18~~ 19

TO CONSIDER THE PROPOSAL FOR CHANGE OF NOMENCLATURE IN RESPECT OF VARIOUS POSTS OF ADMINISTRATIVE CADRE AT ALL AIIMS.

1. INTRODUCTION

The Governing Body, AIIMS, New Delhi in its meeting held on 24.1.2019 has considered the issue for change of nomenclature of the posts existing in the Cadre of Administrative Cadre for AIIMS, New Delhi and approved the same. The Governing Body, AIIMS has also expressed view that the same may also be applicable to all AIIMS on the analogy of AIIMS, New Delhi.

2. PROPOSAL AND JUSTIFICATION:-

The detail of the proposal submitted by the AIIMS, New Delhi before its Governing Body is as under:-

	Existing Nomenclature	Proposed Nomenclature
1.	Assistant (NS) Level-6 in the Pay Matrix (Pay Scale Rs.9300-34800 + GP Rs.4200)	Junior Administrative Officer (JAO) Level-6 in the Pay Matrix (Pay Scale Rs.9300-34800 + GP Rs.4200)
2.	Upper Division Clerk Level-4 in the Pay Matrix (Pay Scale Rs.5200-20200+GP Rs.2400)	Senior Administrative Assistant (SAA) Level-4 in the Pay Matrix (Pay Scale Rs.5200-20200+GP Rs.2400)
3.	Lower Division Clerk Level-4 in the Pay Matrix (Pay Scale Rs.5200-20200+GP Rs.1900)	Junior Administrative Assistant (JAA) Level-4 in the Pay Matrix (Pay Scale Rs.5200-20200+GP Rs.1900)

In view of above and as per view of the Governing Body, AIIMS, New Delhi, it is submitted for consideration that the nomenclature of the posts in the cadre of Administrative Cadre in all AIIMS may also be revised on analogy of AIIMS, New Delhi.

(1)

To be circulated in
C 13.

No.Z.28015/25/2018-N
Government of India
Ministry of Health & Family Welfare
(Nursing Section)

Nirman Bhavan, New Delhi
Dated 09th January, 2019

Meeting notice

Subject: Meeting to discuss the recommendations of NITI Aayog - regarding

The undersigned is directed to refer to this Ministry's communication of even number dated 30th October, 2018 enclosing therewith the Record of Discussions of Brainstorming Session on Nursing Education Reforms Chaired by Member (Health), NITI on 25.07.2018 in NITI Aayog. (copy enclosed)

It has been decided to hold a meeting on 10.01.2019 at 11.00 AM under the Chairpersonship of Shri Sudhansh Pant, Joint Secretary (Nursing) in his chamber.

The agenda notes for the meeting is enclosed. Kindly make it convenient to attend the meeting.

A K Sahoo

(A K Sahoo)

Under Secretary to the Govt. of India

Tele: 23061203

To,

1. Department of Health Research, 2nd Floor, IRCS Building, Red Cross Road, New Delhi - 110003.
2. PMSSY Section (Shri Jitendra Arora, Director) MoHFW
3. The President, Indian Nursing Council (INC), New Delhi.
4. The Secretary, Indian Council of Medical Research, Ansari Nagar East, New Delhi.
5. Ms Manju Vatsa, Principal College of Nursing, AIIMS, New Delhi.

Copy to:-

- a. PPS to JS(SP), MoHFW, New Delhi.
- b. PS to Deputy Secretary(Nursing)
- c. ADG(N)

(3)

	<p>the AIIMS are not under the INC. This was done so that new models nursing education could be developed for national scale up. Accordingly, all the AIIMS should be encouraged, incentivized and supported for innovations and reforms in nursing education. A monitoring matrix of progress in this regard should be developed and used for tracking performance.</p>	
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Action on part of DHR/ICMR

<u>S.No.</u>	<u>Recommendations of the NITI Aayog</u>	<u>Remarks</u>
1.	<p>Nursing research through ICMR may be promoted for advancements in nursing in India. More research grants should be allocated for nursing research. Online repository for research be also created to facilitate evidence-based practice.</p>	<p>Action: DHR/ICMR We may forward the RoD to DHR for taking appropriate action</p>

Government of India
Ministry of Health & Family Welfare
(Nursing Section)

Nirman Bhavan, New Delhi-110 011

OFFICE MEMORANDUM

Subject: Record of Discussions of Brainstorming Session on Nursing Education Reforms Chaired by Member (Health), NITI Aayog on 25.07.2018 at 11 AM in NITI Aayog Constitution of the Committee - regarding

The undersigned is directed to forward herewith a copy of the Record of Discussions of Brainstorming Session on Nursing Education Reforms Chaired by Member (Health), NITI Aayog on 25.07.2018 at 11 AM in NITI Aayog/copy of extracts of notes for necessary action at your end.

(A.K. Sahoo)
Under Secretary to the Government of India
Tel. No. 2306 1203

To

1. The Secretary, Indian Nursing Council, Okhla, New Delhi. [Point No. 8 (i), (ii), (iii), (iv), (v), (vi) and (xvii)]
2. Indian Council of Medical Research, Ansari Nagar East, New Delhi. Point No. 8 (xii)
3. Department of Health Research, 2nd Floor, IRCS Building, Red Cross Road, New Delhi - 110003.
4. Establishment Division(Shri Ravindra Prasad, Director), MoHFW - [Point No. (xvi)]
5. PMSSY Section(Ms. P.A. Mini, Director) MoHFW - [Point No. 8 (vii) and 8 (viii)]
6. Hospital Division (Shri Oma Nand, Advisor), MoHFW - [Point No. (xiv)]

Copy to:-

- (i) NITI Aayog, (w.r.t. your letter No. 3(7)/2018-H&FW dated 25.07.2018)
- (ii) Senior PPS to Secretary(MoH&FW), New Delhi.
- (iii) PPS to AS(AS), MoHFW, New Delhi.
- (iv) PPS to JS(SP), MoHFW, New Delhi.
- (v) PPS to JS(Hospital), MoHFW, New Delhi
- (vi) PS to Director(Nursing).
- (vii) PA to ADG(Nursing).

**Agenda notes for the meeting on 10.01.2019 under the
Chairpersonship of JS(Nursing)**

S.No.	Recommendations of NITI Aayog	Remarks
1.	The final draft amendments to the INC Act to be submitted by the end of October, 2018. The Ministry should finalize the bill through consultative processes. The objective should be to have the Bill ready by December, 2018. Further, since there is a significant overlap between jurisdiction of INC and State Nursing Council, amendments to the INC Act should rectify the overlap and sharpen provisions to raise standards of nursing education	Action - INC
2.	An Accreditation Body for nursing should be created to develop, maintain and promote standards in nursing education. This may also be incorporated in the INC Act amendments, if necessary.	
3.	The scope of clinical activities undertaken by nurses in India to be redefined and expanded in line with developed countries. This will enable task shifting leading to efficient utilization of human resources	
4.	Nursing Education. To address the crisis of inadequate Clinical Skills among an overwhelming proportion the following is recommended: The ongoing exercise to reform the BSc Nursing Curriculum by INC should be expedited. All concerned be actively reached and involved to capture this opportunity to craft a national curriculum that addresses the existing gaps in priority competencies required for the profession, and prepares future nursing graduates for speciality nursing, nursing administration, nurse academics, and public health. The teaching and learning	

experiences must focus on skills without compromise, mainstream technology as a norm and incorporate rigorous assessment.

An **Exit Exam** for BSc Nursing as proposed by the MoHFW should be introduced, preferably by the next academic year (2019) to ensure that the graduates possess optimum theoretical as well as clinical competencies.

A comprehensive network of **simulation skill centres** should be created by the MoHFW. This should be used both for nursing schools / colleges, as well as for in service training.

Information Technology (IT) should be used more extensively for nursing education and to facilitate distance learning courses. E-education resource material and connectivity should be developed. The Government should support efforts of INC and institutions in this endeavour.

5. During the **postgraduate nursing program**, the students should **work like residents (as is the case with medical postgraduation training) ensuring deep clinical immersion. Since the PG nurses would be contributing to clinical services in this model, they programme, the students should work like residents (as is the case with medical post graduation training) ensuring deep clinical immersion. Since PG nurses would be contributing to clinical services in this model, they should be compensated (as in the case of medical residents). The same is applicable to nurse**

