# Appendix-25 Resolution No. 41

# RELOCATION PLAN OF UNIVERSITY COLLEGE OF MEDICAL SCIENCES

#### Preamble

University College of Medical Sciences(UCMS) is a maintained college of University of Delhi (DU) started in 1971 at chemistry block of DU. Since a medical college should have an associated hospital, students briefly used to attend clinical classes at LLRM hospital Meerut and later it was shifted in Safdarjung hospital campus(1973) as interim measure. It was envisaged that the upcoming 500 bedded hospital ( in fourth five year plan) in East Delhi was to be its associated hospital. UCMS was shifted in 1986 to Dilshad garden and got its associated GTB hospital to provide quality medical education and tertiary health care.

UCMS is funded by Ministry of Education through UGC while GTB Hospital is managed and funded by Govt. of National Capital Territory of Delhi (GNCTD). UCMS land belongs to GNCTD as well as its infrastructure is managed by GNCTD.

The development of land, building and hospital infrastructure rest with the Government of NCT of Delhi [GNCTD] while providing faculty, residents (PG and interns) rests with UCMS.

<u>Contribution of UCMS</u>: Majority of faculty (192) and all the post-graduate resident doctors (approximately 600 in number), senior residents (117) and interns (approximately 170), total approximately 1080, are provided by UCMS for running UCMS and GTBH Complex. Good number of non-teaching staff (laboratory technicians) are also provided by UCMS. The Hospital is run by GNCTD which provides some of the faculty, non-teaching staff and physical infrastructure of both the College and the Hospital.

**Problems arising out of dual administration of UCMS-GTBH complex:** Since UCMS is controlled by DU and GTBH by GNCTD, it poses significant problems and obstacles in smooth functioning of UCMS. While planning the UCMS-GTBH complex a 3-tier arrangement was envisaged, with a Campus Committee, chaired by Principal UCMS with MS as member, to plan and develop UCMS-GTBH complex at local level. At the second level a Coordination Committee, to be chaired by Principal Secretary Health (the then Delhi administration and now Govt. of NCT Delhi). Third level Apex Committee was to be chaired by Lt. Governor of Delhi with Vice Chancellor of DU as member. The mechanism of dual control of UCMS & GTBH has evidently not succeeded. This is evident in many ways:

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- 1. The mechanism of multiple committees to resolve the issues arising out of dual control has not worked as these committees have never met, except in the initial years.
- 2. Even the efforts of the Supreme Court of India to intervene and bring DU and GNCTD to a workable solution have not been successful (petitions filed bySupreme Court Young Advocates Forum in 1997 and 2003).

As a result UCMS and GTBH has worked as two separate institutions in one complex. In 53 years of its existence UCMS has missed many development deadlines and opportunities. Even the basic infrastructural requirements are not met. Some of these are listed below:

- 1. The increase in infrastructure requirements of UCMS-GTB Hospital Complex due to increase in UG and PG intake on account of implementation of OBC and EWS reservation have not been met. As a result, the UG intake could not be increased to 250 and is restricted to 170 every year.
- 2. Expansion of Lecture Theatres and Demonstration Rooms required to manage increased intake of UG and PG admissions have not taken place.
- 3. MRI machine has not been provided despite being a minimum requirement for MD radiology courses. Even though fund was made available by UGC, MRI machine could not be purchased.
- 4. Japanese Grant (1992), to upgrade the infrastructure of UCMS was not utiliseddue to lack of coordination.
- 5. Funds for development of super-speciality block for starting DM/ MCh courses at UCMS through the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) have not been utilized, leading to lack of advanced care.
- 6. Faculty Block and Auditorium have not been developed.
- 7. Hostel facilities have not been augmented.
- 8. Playground, which is an essential requirement for a medical college, has been taken away by GNCTD.
- 9. The creation of many essential departments ( Physical Medicine and Rehabilitation, emergency medicine ) have not taken place.
- 10. Operating capacity in various departments is far below the current requirements. As a result not only quality patient care is suffering , but also training of MD/MS students.

These are some of the glaring examples. Day-to-day issues have been stumbling block in delivering quality medical education as well as patient care. That is the reason for significant attrition of promising faculty from UCMS.

The medical college can function only if all the norms of National Medical Commission (erstwhile Medical Council of India) are adhered to and infrastructure development, commensurate with changing needs and requirements. This will also ensure rapid growth of the entire medical college-hospital complex.

Despite our best of efforts, the vision of Hon'ble Prime Minister and focus of GOI to expand quality medical education and base of tertiary care could not be realised.

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We seek your intervention to resolve this long pending issue and make the only maintained Medical College of DU to prosper and contribute to medical education, research and quality tertiary health care.

**Best solution** will be to have medical college and hospital under DU administrative control in larger public interest. In addition to permitting UCMS to realize its full potential as a medical college, this will allow opportunity to have collaborative translational research with basic science colleges of DU. The medical college and hospital complex will render quality tertiary health care to all students, staff (teachers and non-teachers) of University of Delhi.

#### Infrastructure Requirements

Following are the NMC requirements for infrastructure to establish medical college and attached hospital for an annual intake of 250 MBBS students.

#### CAMPUS

- 1. Every medical college shall comprise of the Medical College, the attached Teaching hospital/(s), and the hostels for the students& interns, with or without the residential area for faculty and other staff of college/hospital.
- 2. The medical college, hostels for students/interns and the teaching hospital/institution shall be in a **unitary campus**
- 3. There shall be gymnasium, and **playground** for outdoor games and track events in the college.
- 4. Auditorium of seating capacity of 800 persons in two floors is desirable. The auditorium should have additional smaller annexes/ seminar rooms/ conference rooms of smaller capacities for holding smaller gatherings.
- 5. Multi-level parking to accommodate vehicles for both staff and visitors/ patients.
- 6. Residential quarters for staff as per requirement

#### COLLEGE

- 1. There should be adequate **officeaccommodation** for the Principal/Dean, College council, Academic and examination sections, Accounts, and other administrative offices, the Medical education unit and the server room for the computer network.
- 2. There shall be minimum of four **lecture theatres** with audio-visual and internet facilities, preferably air conditioned, of gallery type in the Institution, each of them with seating capacity for 300 students *(shall provide at least 1.40 sq.m/student)*.

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- 3. **Teaching Rooms**: The minimum number of teaching rooms in the medical college for Pre- and Para-Clinical Departments for 250 students annually shall be 9 rooms (25 seating capacity each) and 9 rooms (50 seating capacity each) *(each teaching room shall provide at least 1.2 sq.M/student).*
- 4. **Student Practical Laboratories**. There shall be at least **8** student practical laboratories, one each for Histology, Clinical Physiology, Biochemistry, Histopathology & cytopathology, Clinical pathology &Hematology, Microbiology, Clinical Pharmacology, and Computer Assisted Learning (CAL) in Pharmacology. Each laboratory shall have capacity to accommodate at least 60 students and shall have 60 work stations fitted with water taps, sinks, and electric points. Each laboratory shall have additional rooms as required for technical staff, stores, equipment storage, etc. Each lab shall provide for at least 3.5 sq.m/per student, which shall be sufficient for workbenches, a delineated teaching area for 20 students, stores and room for technical staff.
- 5. **Museum:** There shall be at least 3 museums in the college i.e. 1 (one) for Anatomy, 1 (one) to be shared by Pathology and Forensic Medicine, and 1 (one) to be shared by Pharmacology, Microbiology and Community Medicine. In addition to the display area, each of these museums shall also have sufficient space to seat at least 50 students (at least 1.2 sq.M/student).
- 6. Every medical institution shall have a Skills Laboratory. The skills laboratory shall have a total area of at least 800 sq.M for and shall have -i) a minimum of 04 rooms (preferably 08) for examination of patients or standardized/ simulated patients ii) a room for demonstration of skills to small groups iii) area for review or debriefing area iv) rooms for faculty coordinator and support staff v) adequate space for storage of mannequins and/or other equipment vi) facility for video recording and review of the interaction for teaching communication skills vii) stations for practicing skills individually or in groups viii) trainers or mannequins required to achieve skills outlined in the competency based undergraduate curriculum document.
- 7. **Rooms:** Every Teaching Department shall have: i) room for Head of Department with Space for Department Office, for office staff and storage of records ii) rooms with adequate space for teaching faculty, and Tutors/Demonstrators/Residents (both Junior & Senior) iii) rooms for faculty, provided with communication, computer and internet facilities. iv) rooms for non-teaching staff.
- 8. There is need for three Examination halls of 300 capacities each
- 9. There shall be an air-conditioned Central library with good lighting and adequate space for stocking the books and journals (1500 sq.m for annual intakes of 250 MBBS students). There shall be provision for: a. Rooms for the Librarian and other staff. b. Reading rooms with adequate seating for 500 students distributed over 2 areas. c. Reading room for faculty d. Room for stocking old books, journals, etc. e. A computer room with computer nodes with internet facilities for at least 65 students
- 10. There shall be a **Medical Education Unit** for faculty development and have an area of at least 150-160 sq.M).
- 11. There shall be **facilities for common rooms** for boys and girls (separate), cafeteria, cultural activities, indoor games and student counselling services.
- 12. There shall be a **Dissection hall** to accommodate 125 students (area of at least 4.20 sq.M/student shall be provided which shall be sufficient for ante-room for students with

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lockers, wash basins. embalming room, space for storage tanks and cold storage room or cooling cabinets with space sufficient for at least 1 body/10 student annual intake).

13. There shall be a **Separate service laboratory** each for histopathology, cytopathology, Hematology and other specialized work of the hospital which shall be suitably equipped. These service labs shall have adequate storage space for stores and equipment. There shall be a separate service laboratory each for (a) Bacteriology including anaerobic bacteria; (b) Serology; (c) Virology; (d) Parasitology; (e) Mycology; (f) Tuberculosis; and (g)Immunology. The service laboratories shall have adequate storage space for stores and equipment.

## HOSPITAL

- 1. The **bed strength** of the teaching hospital shall be at least **1400** for undergraduate & post graduate teaching.
- 2. The hospital building shall conform to the existing national **building norms** taking into consideration the requirements of the hospital as a service provider including administration, registration, records storage, out-patient and inpatient areas, operating theaters, CSSD, ICUs, Radiology and laboratory services, emergency areas, etc.
- 3. There shall be well equipped and updated **intensive Care** Unit (ICU), Intensive Coronary Care Unit (ICCU), Intensive Respiratory Care unit, Pediatric intensive care (PICU) and Neonatal Intensive care unit (NICU), Critical care Burns unit, Post-op surgical critical care unit, Obstetric HDU/ICU.
- 4. The **Operating theaters** shall conform to existing norms. There shall be 30 major operating theaters and Every surgical specialty shall have at least one well equipped Minor OT attached to it.
- 5. There shall be available a fully functional hospital with **all necessary infrastructure** like OPD, Indoor wards, OTs, ICUs, Casualty, Labour Room, Laboratories, Blood Bank, CSSD, etc
- 6. Magnetic resonance imaging shall be available.
- 7. Every Teaching Hospital should have Anti-Retroviral Treatment (ART) Centre
- 8. There shall be well-equipped and updated **Central laboratory** preferably along with common collection area for all investigation.
- 9. There shall be a well-equipped air-conditioned **Blood Bank** capable of providing component therapy.
- 10. There shall be 24-hr **pharmacy services** to cater to the out-patient, emergency and other patients attending the teaching hospital.
- 11. The teaching hospital shall have provision for Laundry and Dietetic services.
- 12. There shall be a **mortuary cum postmortem**/ Autopsy Block (approx.400 sq. M. area) with facilities for cold storage for cadavers, ante-rooms, washing facilities, with an accommodation capacity of 20-25 students, waiting hall, office etc.
- 13. Every medical college shall have at least **one primary health center/rural health training center** and one urban health center for training of students. The urban health center shall be owned by the college.

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# RESIDENTIAL

- 1. Residential quarters for staff as per requirement
- 2. **Hostel:** The College/Institution shall provide accommodation for at least 75% of all students enrolled and interns, and all girl students (provide for at least 9 sq.M area/student). It is desirable that hostel rooms are either single or double accommodation facilities.

## SUPERSPECIALITY BLOCK

1. We need super specialty departments with indoor and outdoor treatment infrastructure of Cardiology, Cardio-thoracic surgery, Gastroenterology, GI Surgery, Neurology, Neurosurgery, Endocrinology, Nephrology, Transplant Surgery, Urosurgery, Pulmonology.

#### **MAJOR BLOCKS/ AREAS IN CAMPUS**

- College Teaching block
- College Administrative block
- Library block
- Auditorium
- Multi-level parking
- Hostel area
- Playground
- Animal House
- Administrative block Hospital
- Inpatient Department & OT block
- OPD block
- Trauma & emergency block
- Ancillary services area
- Mortuary
- Civil amenities facilities
- Cafeteria
- Super specialty block
- Open/ green area as per norms

In view of the above, major blocks/ areas in campus, the land requirement is 40 - 50 acres (built up area of approx. 25 acres, future expansion of approx. 2.5 acres, and remaining open area as per regulations).

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