Minutes of Meeting

The minutes of fourth meeting of the National Council for Clinical Establishments held under the Chairmanship of Dr. Jagdish Prasad, DGHS on 13-1-2014, at Nirman Bhawan, New Delhi are sent herewith for information and necessary action.

(Dr. Arun K. Panda)
Joint Secretary

To

1. All participants including members of National Council as per the list annexed.
2. Other Members of the National Council for Clinical Establishments
   i. The Chairman, Board of Governors, Medical Council of India, Pocket 14, Sector 8, Dwarka, New Delhi- 77
   ii. Dr. K Reddemma, Dean, Behaviral Sciences, Department of Nursing, National Institute of Mental Health and Neuro Sciences, Bangalore
   iii. Dr. Vanithamuralikumar, Vice President (Ayurveda), CCIM, 7/2, Anthoniyar Koil Street, Opposite to Bus Stand, Dharkhast, Chennai-44
   iv. Dr. Rashidullah Khan, Vice President, Unani, CCIM, D-176, Abul Fazal, Jamia Nagar, New Delhi-110025
   v. Advisor (Planning), North Eastern Council, Ministry of Development of North Eastern Region, North Eastern Council Secretariat, Nongrim Hills, Shillong-793003
   vi. Chief Secretary, Government of Andhra Pradesh, Hyderabad

Copy for information to-
1) Secretary, Dental Council of India
2) Secretary, Central Council of Indian Medicine
3) Secretary, Indian Nursing Council
4) Registrar –cum- Secretary, Pharmacy Council of India
5) Secretary, Central Council of Homoeopathy
6) PPS to DGHS
MINUTES OF MEETING

The 4th meeting of National Council for Clinical Establishments was held under the Chairmanship of Dr. Jagdish Pradesh, DGHS on 13.1.2014 at 11.00 A.M. at Nirman Bhawan, New Delhi. The list of participants is annexed.

After welcome and introduction, the Chairman re-emphasized the purpose of the National Council and said that every Clinical Establishment shall be required to follow the range of rates for different medical procedures and services which will be displayed by the Clinical Establishments. The range of rates shall be finalized in consultation with the States and stakeholders. However, there will be flexibility in the minimum standards to be prescribed and the state councils will be given flexibility as far as implementation of minimum standards is concerned. Regular continuing medical education/workshops would be organized in the states and UTs who have adopted the Act. Dr. Arun K. Panda informed that Govt. has released Standard Treatment Guidelines for important medical conditions for rational treatment by the clinical establishments which were developed by medical experts from both public and private sector and finalized by technical committees of Dte.GHS. Dr. N.S. Dharmsaktu stated that there is an urgent need to regulate the exorbitant rates being charged by some private sector establishments and prescribe the minimum standards for proper healthcare.

A presentation regarding the Action taken report on the minutes of the last meeting of National Council was made by Dr. Anil Kumar. The minutes of last meeting were confirmed. Following information on various action points was given:

Survey of Clinical Establishments in 61 districts

The initial findings of survey Report of Clinical Establishments was presented by QCI (Quality Council of India) and IMA (Indian Medical Council) before the Chairman of National Council during which feedback was given. After this, a consolidated Draft report was received and finally State wise reports have also been received in the Ministry. Report was shared with the members of the National Council for feedback. QCI representative stated that as there was delay in submission of the report, a penalty is being proposed by Ministry as per MOU, however, the delay is due to the late feed back of the comments received from the members of the Council and late receipt of permission from the UT of Lakshadweep and difficulties faced due to rainy season in the North Eastern States. QCI requested National Council to consider and recommend waving of the penalty being proposed as per MOU.
Following Action points were approved:

I. Uploading the Survey report on the website
II. Sharing the State –wise reports with the States/UTs for their information and feedback
III. National Council recommended waiving off the penalty as per MOU for consideration of
      the competent authority, provided justifiable reasons are provided by QCI-IMA.

Draft Minimum Standards

QCI was given task of developing draft minimum standards for consideration of National
Council. Preliminary standards on 15 categories were developed and shared with members and
States for feedback. After incorporating survey findings and feedback, draft of minimum
standards for 35 categories have now been received from QCI.

Following Action points were approved

I. The draft standards will be shared with the members and they will be required to
   submit their comments within next 15 days. A small committee of inside and outside
   experts shall go into the suggestions to finalize the inputs which will be incorporated in
   the draft standards.
II. QCI shall modify standards as per recommendations of first two subcommittees
   (categorization and template subcommittees) already received and feedback received
   from the members--- and also after review by 3rd subcommittee (subcommittee on
   minimum standard) and recommendations of 4th subcommittee (statistics to be
   collected from clinical establishments).

Standard Treatment Guidelines

Standard Treatment Guidelines (STGs) for 20 areas of allopathic system of medicines were
shared with the members which have also been put up on the website of the Clinical
Establishments Act.

Following Action points were approved

I. The STGs shall also be hosted on the website of Ministry of Health & Family Welfare and
   DGHS
II. Letters will be written to State Governments and professional associations regarding
   information on STGs. The newspaper advertisement informing the public about the
   STGs may be published. The Chairman requested the National Council members
   specially the Indian Medical Association to disseminate information about the Standard
   Treatment Guidelines.
IEC Material and Publicity of the Act

I. Advocacy Workshops for spreading awareness about the Clinical Establishments Act may be organized in various States and UTs. The organization like Indian Medical Association may be involved in organizing these workshops. At least one Council Member and a Member from M/o Health & FW and Dte.GHS shall be present during the Workshop. Dr. Rai and Dr. Saini from IMA said that IMA is willing to take up the responsibility of organizing awareness and advocacy workshops for the doctors.

II. IEC material on the Act may be developed through CBHI.

Work of Subcommittees

In pursuance to the minutes of 3rd meeting and based on names received from members of the council and other stakeholders, 5 subcommittees with Chairpersons as mentioned under were approved. The detail list of the conveners and members of each subcommittee was shared with the members of the council during the meeting. Categorization and Classification of CE (Chairman: Dr. B.Suresh)

I. Template for Developing Minimum Standards (Chairman: Dr. B.D. Athani)
II. Minimum Standards (Chairman: Dr. Arun K. Agarwal)
III. Information & Statistics to be collected from CE (Chairman: Dr. S.Y. Kothari)
IV. Defining range of rates of Procedures & Services (Chairman: Dr. B.D. Athani)

In pursuance of the minutes of third meeting of National Council, the first two subcommittees have met and submitted their recommendations to the National Council which was shared with all the members of National Council for approval. The detail presentation on the terms of reference of the subcommittee, Agenda of the meetings held, methodology, draft recommendations, conclusion and way forward was made by Dr.T.K. Ravi and Dr. B.D. Athani in respect of the Subcommittee on categorization and Template respectively.

Following Action points were recommended / approved

I. The National Council approved the constitution, Reports and recommendations of the Subcommittees on categorization and Template of minimum standards.

II. The National council approved the proposed composition of remaining 3 subcommittees.

III. Dr. Athani suggested that the draft standard prepared by QCI will have to be revisited taking into account the reports of two sub-committees already received and the inputs from the members of the Council. The same was approved by National Council.
IV. DG suggested that categorization may extend further to include the super specialty. It was agreed that sub centre shall not be included separately as a category under clinical establishments, as also recommended by the subcommittee on template. It shall be part of the PHC.

V. The Report of the two subcommittees shall be hosted on the website.

**Progress of implementation of the Act in the States**

Mr. Sunil Nandraj made a presentation on the progress of the Act in various states and UTs and the budget provided by Govt. of India for implementation of the Act. The National council expressed apprehension regarding the slow implementation of the Act by the States and reluctance shown by some State/UT like Delhi.

**Following action points were recommended:**

I. DG suggested that implementation of the Act and online registration should be monitored through video conferencing, which was agreed.

II. IMA was requested to help build advocacy and acceptability of the Act in the States/UTs.

**Progress on AYUSH Standards and STGs**

Dr. D.C. Katoch made a presentation on the Development of Minimum Standards of Clinical Establishments and STGs of AYUSH. Decision with the approval of Secretary (AYUSH) was taken in the Department of AYUSH to assign the responsibility of drafting minimum standards and STGs to respective National Institutes of AYUSH by 20th November, 2013. A Technical Committee with following members was set up to consider the draft standards.

- Adviser (Unani) : Chairman
- Joint Adviser (Ayurveda) : Convener Member
- Joint Adviser (Siddha) : Member
- Deputy Adviser (Homoeopathy) : Member
- Sowa Rigpa Expert from Central University of Tibetan Studies, Sarnath, Varanasi : Member

Relevant materials (Template, Survey Report and Preliminary draft prepared by QCI) were provided to National Institutes seeking first drafts by 15th November 2013. Briefing was given to Director of each National Institute. First drafts were prepared by the National Institutes by 15th November. Drafts were presented and discussed in the meeting of Technical Committee on 13th November 2013. The feedback has been provided to the National Institutes and following action plan has been worked out.
Following Action points were approved

I. The draft minimum standards under AYUSH may be finalized by 15.2.2014.

II. It was decided that information and statistics to be collected by the AYUSH establishments for sending to district, state or national level shall be separate from the allopathic system and developed by the Department of AYUSH.

III. AYUSH standards as mentioned for the primary health centres under NRHM will not be interfered with and they will remain applicable as such.

IV. The Standard Treatment Guidelines for AYUSH systems of medicine shall be as per AYUSH principals and AYUSH line of treatment and as per AYUSH clinical terminology.

V. It was agreed that broad variations in various systems of medicines should be specified.

VI. As there are no separate trainings/approved courses for General Nurse and Midwife (GNM), Pharmacists and other paramedicals under AYUSH, the training for GNM pharmacists etc. for AYUSH should be prescribed.

Points raised / Feedback from other members

The Maharashtra Secretary (Health), Ms. Meeta Rajivlochan informed that they are planning to have their own Act in the State of Maharashtra and the same will be implemented soon. She suggested the following to be included as a part of the records under the minimum standards:-

1. Death audit
2. Complications audit
3. Medication audit
4. Audit of repeat surgery cases
5. Prescription audit

Further she stated that the hospital bill should give detail break-up of charges. Regarding use of medical devices during hospital stay, the patient should be informed and given a choice whether they would like to use certain medical devices. Process standard should include the processes for issue of death certificates, processes involved in post-mortem and handing over of the body.
Bihar representative pointed out that IMA, Bihar has been protesting vehemently against this Act and the Patna High Court had to order for proper implementation of the Act. The IMA representative, Dr Saini said that IMA wants self regulation wherein the State Government also cooperates with IMA, there is no issue as far as regulation is concerned however flexibility is required. IMA representative desired that financial support to the Clinical Establishment for stabilizing the emergency medical condition should be considered by Govt. DG stated that the Act does not prevent the doctor from charging the patient and patient can always be referred after provision of first aid.

North Eastern Council member Dr. Tada suggested that orientation trainings for six months may be prescribed for the para medicals working in other systems of medicine, as building the bridges between the various systems of medicines is important.

**Following other action points were approved**

I. The Chairman and members agreed with the points raised by Secretary (Health), Maharashtra and recommended that same may be considered by the subcommittee on the minimum standards for inclusion as part of standard.

II. As suggested by Dr. Mira Shiva, It was agreed that smaller hospitals and nursing homes will be involved in drafting of minimum standards.

III. It was decided that the finalized draft of the minimum standards and statistics, etc. to be submitted to the Ministry should be ready before 10th March so that after necessary approvals, the same may be put in public domain before the deadline of 19th March. For this purpose, two more meetings of National Council may be organized in the month of February and March.

The meeting ended with vote of thanks to the Chair and the participants.
# List of Participants

**4th Meeting of National Council for Clinical Establishments on 13/1/2014**

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name, Address &amp; Designation</th>
<th>Address</th>
<th>Telephone /Fax No./Mobile No.</th>
<th>E.mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Dr. T.K. Ravi, Principal,</td>
<td>College of Pharmacy, Coimbatore (Pharm. Council of India)</td>
<td>0422-4500194 0422-2244412(home) 09842434412</td>
<td><a href="mailto:pha_sripms@yahoo.com">pha_sripms@yahoo.com</a></td>
</tr>
<tr>
<td>2.</td>
<td>Dr. Ramjee Singh, President,</td>
<td>Central Council of Homoeopathy, New Delhi</td>
<td>09334102797</td>
<td><a href="mailto:dr_ramjeesingh@rediffmail.com">dr_ramjeesingh@rediffmail.com</a></td>
</tr>
<tr>
<td>3.</td>
<td>Dr.B. Muthukumar, EC Member, CCIM- (SIDDA)</td>
<td>2/1, Madley Road, T-Nagar, Chennai - 17.</td>
<td>09600035447 9443153448</td>
<td>Muthukumar B <a href="mailto:muthuclinical@gmail.com">muthuclinical@gmail.com</a></td>
</tr>
<tr>
<td>4.</td>
<td>Dr. Mira Shiva, Consumer Education Research Centre</td>
<td></td>
<td>9810582028 01126512385</td>
<td><a href="mailto:mirashiva@gmail.com">mirashiva@gmail.com</a></td>
</tr>
<tr>
<td>5.</td>
<td>Dr. D.R. Rai, Hon.Secretary General IMA, HQ</td>
<td></td>
<td>09312504480</td>
<td><a href="mailto:Dr.drrao@yahoo.co.in">Dr.drrao@yahoo.co.in</a></td>
</tr>
<tr>
<td>6.</td>
<td>Dr. Narendra Saini</td>
<td>IMA</td>
<td>9810252127</td>
<td><a href="mailto:drsaini@yahoo.co.in">drsaini@yahoo.co.in</a></td>
</tr>
<tr>
<td>7.</td>
<td>Dr. B.K. Rana</td>
<td>NABH/QCI</td>
<td>9899548050</td>
<td><a href="mailto:bkrana@nabh.co">bkrana@nabh.co</a></td>
</tr>
<tr>
<td>8.</td>
<td>Dr. K.K. Kalra</td>
<td>CEO/NABH/QCI</td>
<td>9810302124</td>
<td><a href="mailto:ceo@nabh.co">ceo@nabh.co</a></td>
</tr>
<tr>
<td>9.</td>
<td>Dr. Gyani, Girdhar J. CEO, NABH, Quality Council of India</td>
<td></td>
<td>9810730040</td>
<td><a href="mailto:ceo@nabh.co">ceo@nabh.co</a></td>
</tr>
<tr>
<td>10.</td>
<td>Dr. Jatin Kumar</td>
<td>NABH/QCI</td>
<td>9899462558</td>
<td><a href="mailto:jatin@nabh.co">jatin@nabh.co</a></td>
</tr>
<tr>
<td>11.</td>
<td>Dr. D.C. Katoch, Jt. Adviser</td>
<td>D/o AYUSH</td>
<td>9968076668 24651973</td>
<td><a href="mailto:drkatoch@rediffmail.com">drkatoch@rediffmail.com</a></td>
</tr>
<tr>
<td>12.</td>
<td>Ms. Meeta Rajiv Lochan</td>
<td>Sec.(Health) Maharashtra, 10th Floor, GT Hospital, LT MARG, Fort Mumbai</td>
<td>9869242733</td>
<td><a href="mailto:meetarajivlochan@gmail.com">meetarajivlochan@gmail.com</a></td>
</tr>
<tr>
<td>13.</td>
<td>Sh. S. Kishore Kumar, Scientist F and Head</td>
<td>BIS, Manak Bhawan</td>
<td>09427213484</td>
<td><a href="mailto:hmnd@bis.org.in">hmnd@bis.org.in</a></td>
</tr>
<tr>
<td>14.</td>
<td>Sh. Bhuvnesh Mishra,</td>
<td>NIC</td>
<td>9717665353</td>
<td><a href="mailto:mishra.b@nic.in">mishra.b@nic.in</a></td>
</tr>
<tr>
<td>15.</td>
<td>Sh. Prasanth KS, Consultant,</td>
<td>NHSRC, New Delhi</td>
<td>9310353647</td>
<td><a href="mailto:prasanth.mph@gmail.com">prasanth.mph@gmail.com</a></td>
</tr>
<tr>
<td>16.</td>
<td>Sh. Ashish Sanyal</td>
<td>COO &amp; Secretary Consumer Voice</td>
<td>9350998460</td>
<td><a href="mailto:coo@consumer-voice.org">coo@consumer-voice.org</a></td>
</tr>
<tr>
<td>17.</td>
<td>Dr. Bamin Tada</td>
<td>Adviser Health, North East. Council, Shillong,</td>
<td>09436040657</td>
<td><a href="mailto:putnaghee@yahoo.com">putnaghee@yahoo.com</a></td>
</tr>
<tr>
<td>18.</td>
<td>Dr. Arun K. Panda</td>
<td>JS</td>
<td>01123063155</td>
<td></td>
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<tr>
<td>19.</td>
<td>Dr. Tarsem Chand</td>
<td>Director MOHFW</td>
<td>9818603070</td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>Dr. N.S. Dharmshtaku</td>
<td>DDG (NSD)</td>
<td>01123062193</td>
<td></td>
</tr>
<tr>
<td>21.</td>
<td>Dr. Anil Kumar</td>
<td>CMO</td>
<td>01123061259</td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td>Mr. Sunil Nandraj</td>
<td>Advisor</td>
<td>9811419292</td>
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