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Agenda for this meeting was taken up as follows:

1. Some problems of IITG Hospital and its remedial measure.

HoS, Medical informed the MUG with respect to the views of the Competent Authority (CA) on certain problems and issues that are related to the administration and management of the matters of the IITG hospital. The CA is of the opinion that IITG Hospital has adequate manpower and hence no additional manpower in terms of permanent Medical Officer or Nurse is required in the Hospital. The CA has also suggested discontinuing the service of Psychiatry, Eye OPD in the Hospital. HoS Medical also informed that for one Medical Officer Post in the OBC category, another advertisement was issued in Nov 2019. However, due to COVID-19, the interview could not take place till date and is yet to be conducted. Also, three ANM posts are as well vacant.

After discussion, the MUG unanimously resolved as follows:

R/MUG/01/2020/01: It was resolved that the permanent doctor and nurses are very much essential for the IITG Hospital.

Further, it was unanimously opined that the Psychiatry and Eye OPD services should continue in Hospital. Few members also conveyed that these services are of paramount relevance with the ongoing COVID-19 Pandemic in the OPDs of even panel hospitals. In this regard, the MUG provided the following justification –

1.a: Continuation of Psychiatry and Eye OPD service:

i) With the administrative setup being established from 2006, the Psychiatry OPD service has been continuing well for the past 14 years at the IITG Medical Section.

ii) **Service of a psychiatrist in the IITG hospital of the institute is very much essential to all medical users of the institute.**

Many students and few faculty/staff reside in the campus that requires regular psychiatric treatment so as to perform well in their academics and in their personal lives.

iii) Presently, apart from providing service in the IITG hospital, the Visiting Consultant (Psychiatry) also provides services in the private chamber in the city. Thus, for emergency cases, the Institute doctors have been seeking the advice of the Consultant over the phone.

iv) The withdrawal of such service will create difficulty as Narayana Superspecialty Hospital (NSH), Amingaon do not have a Psychiatry OPD. On the other hand, despite GNRC Medical having Psychiatric OPD, ample time could not be provided to the patients at the OPD due to large pool of the patients. The same is the case with Gauhati Medical College & Hospital (GMCH) and other empanelled hospitals in the city. Also, for such cases, the patients need an attendant to accompany them, which is difficult to manage. From past experience, IITG had great difficulty to manage an attendant during a night time emergency visit to the visiting Consultant's chamber.

iv) The relation between a psychiatrist and students is special. In many cases, due to availability of Psychiatrist in IITG Hospital, the Institute doctors are able to keep the patient in IITG Hospital only. The present psychiatrist **Restricted** has an experience of 13 years (since 2007) in IITG Hospital itself. He has a good relation with students and faculty/staff who comes to attend his OPD.

v) Also few Psychiatrists are available in Guwahati city. Some of them are working in Govt. Hospital and hence they could not provide service in IITG hospital. So, Institute has to depend upon a practitioner working in private hospitals which are again few in numbers. Many of them are also not willing to come to IITG hospital for few hours.

vi) The Eye OPD service started at IITG Hospital in 2015 following recommendation of Overall improvement committee and subsequent approval of CA of the Institute. After that, it has provided a vital role in giving services to IITG community.

vii) Presently, eye specialist attended 40-42 patients in his two visits per week. So the number of patients attended in a month is approximately equal to 160-170. The Authority may be aware that NSH, Amingaon do not have Eye OPD. Also, a whole day is wasted if one has to attend OPD service in Sankardeva Nethralaya, Guwahati or any other empanelled hospital in the city.

viii) After starting the Eye OPD, many highly expensive instruments have been bought such as Autorefractometer, Slit lamp and patient chair which cost around Rs.10 lakhs to the Institute. If the OPD service is withdrawn, these instruments will be of no use and it will be a wastage of government property.

1.b) Accommodation of hospital staff:

i) Traditionally, the Institute doctor (CMO/MO) resides in campus and therefore, **providing accommodation to our institute doctor on priority basis should be considered by the Competent Authority.** If quarter is lying vacant, quarter may be allotted to the **Restricted** (e.g. **Restricted**) who has been applying to get institute quarter since long and his/her in-campus accommodation will be more valuable to the in-campus medical users particularly in non-office hours. Presently, only HoS, Medical is staying in campus. Accommodation is necessary, as CMO/MO has to attend emergency cases or suicide related cases in odd hours which are not possible if they are staying out of campus.

ii) IITG hospital has outsourced staff to be here for 24x7. The doctors and nurses sometimes have to attend additional duty like in Alcheringa, sports meet or due to sudden leave of medical consultant/GDMO or to attend emergency cases. So to reduce commutation, it is recommended by the MUG to provide a hostel room and facilitate dining facilities for atleast 50% nurses and ward attendants. Presently, IITG Hospital provides only a changing room to the nurse. Due to COVID-19 pandemic, few hospital staff members have been provided temporary accommodation in Lohit hostel and Dibang hostel. However, as soon as students would arrive in the campus, the hospital staff residing in Dibang hostel has to vacate their hostel rooms.

iii) Purchasing food in the hostel mess is expensive for the nurses and ward attendants. Therefore, it is recommended to subsidize the food purchase rates in the mess on a daily basis. If it is not possible, the MUG herewith recommends that the hospital staff may be permitted to use electric cooking utensils to prepare food in their hostel room or atleast ensure a small kitchen room in the hospital so as to prepare food and remain isolated to tide over the situation of COVID-19.

1.c) Recruitment of doctors and nurses:

i) Doctors and nurses are the backbone of a hospital. The current doctor and nurse strength of hospital are as follows

Si No	Manpower	Institute CMO/MO	Consultant on	Remarks

			consolidated pay	
1	Doctors	5	2	One Institute CMO will superannuate in 2024. One consultant resigned in Feb 2020

Based on above information and due to current situation of COVID-19, it is necessary to appoint one doctor in hospital. The doctors also need time to familiarize with hospital set up and to get accustomed with the administrative responsibilities. Therefore, the Authority needs to conduct the interview for the post of Medical Officer (OBC) at the earliest, given the shortlisting process being done as early as January 2020.

ii) **Requirement of more permanent Medical Officers and staff are essential** to considering the increasing in-campus population of the institute as well as the increasing average age of medical users.

iii) IITG hospital has only one permanent staff nurse with ANM qualification. All the other nurses i.e. 8 GNM qualified nurses and 05 ANM qualified nurses are provided by outsourced service provider. The outsourcing of hospital service started from 2006. As informed by HoS, Medical, it has been observed that getting GNM nurses is very difficult in temporary position. GNM nurses frequently resign from their job due to getting job in NHM/ State Govt. or due to personal reasons etc. This contributes towards difficult situations in the smooth delivery of healthcare facilities. Because the new nurses provided by outsourced services provider have to be trained again according to the needs of our hospital and nurses also needs some time to adjust to the present setup of hospital. The IITG community has also increased in the last 24 years. The MUG takes a note of the fact that 03 posts (certificate course/ANM) of nurses with a G.P. of Rs.2000 were advertised on 19.01.2017. However, the recruitment stopped due to some administrative reason. Considering the above, the MUG recommended to create (i) 3 GNM qualified nurse post with G.P. Rs.4200 (pre-revised) and (ii) readvertise the 03 nurse posts that have already been sanctioned.