

**ASSESSOR'S GUIDE**  
**(2012-13)**

**BOARD OF GOVERNORS**  
**MEDICAL COUNCIL OF INDIA**  
**NEW DELHI - 77**

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## **Introduction**

The role of the Assessor in establishing the standards of medical education cannot be overemphasized. In the present scenario, there is a massive effort being made to expand medical education both in terms of numbers and geographical distribution. In recent years, besides the Government, educational institutions are being set up by various Trusts and commercial groups. The issues related to maintenance of standards have become very crucial. The Council's decisions regarding establishment of college, permission for renewals, and recognition or continuation of recognition at various stages are made based on the report submitted by the assessors. Hence, the Assessor is the face of MCI and the assessment report should be such that the competent authority can clearly take its decision on whether minimum standard requirements are met or not.

You, the Assessor are a medical teacher, with experience and knowledge regarding the needs and complexities of a medical teaching institution. However, the assessment of a college for regulatory purposes is a specific activity that involves verification that the establishment has the minimum standard requirements. These have been drawn up over the years and also undergo periodic changes. In all likelihood, you would not be aware of these. Since the purpose of the assessment process is to ensure that these are met it is important that you are familiar with them. These refer to the adequacy of clinical material, teaching faculty & infrastructure. Your final opinion based (Adequate / Inadequate) on your experience will be important for taking the decision and should be unbiased.

Finally, as Ambassador of the profession, you should treat your colleagues with respect and at no time during the assessment process reveal any prejudice or bias. Also your demeanor should be polite and not reveal your impressions to the host institution.

## **Stages of Assessment**

The assessment team consists of:

- i) Four professors from Govt. Medical Colleges -Clinical, Pre-clinical & Para-clinical subjects, for assessments to be carried out for establishment of new medical colleges / Increase Intake of 200/250 & Recognition. Three professors for all other assessments.
- ii) Any other person as and when required.
- iii) MCI reserves the right of videography as and when deemed necessary.

The senior most Professor would be the Coordinator/ Convener. A soft & hard copy of the assessment report, signed on all pages by all assessors, should be submitted in a sealed envelope to the Council within 48 hours of completion of the assessment.

### **1. Planning**

The team should plan activities in such a manner that the assigned task is accomplished within the allotted time and a soft & hard copy of the assessment report is finalized, signed and submitted in a sealed envelope to the Council within 48 hours of completing the task. The final report should be jointly made by all team members and signed by all assessors.

### **2. Organization**

The team should divide the various departments among themselves so that department wise details as provided in Standard Inspection Form A, B or C is verified and enumerated in the assessment report by at least one of the assessors. Verification of Declaration Form may also be done department wise.

The quantitative data required in the form may be collected directly from the college and this should be duly authenticated on each page by the Head of the institute. The hard copies of Faculty Declaration Form with supportive documents duly filled & signed are handed over to the Assessors at the time of assessment.

### **3. Coordination**

The tasks need to be coordinated in such a manner that visit to RHTC, UHC, Hospital Clinical departments and pre & para clinical departments in the medical college are all visited within the time available.

### **4. Cross checks**

Assessors need to cross check data provided by the college with their own observations at the time of assessment e.g. number of operations performed with the OT register / number of blood bags issued by blood bank, investigation - Microbiological, Pathological, Bio-chemical & Radiological to be cross checked etc. They should verify the records from the source data.

### **5. Reporting**

Each assessor should complete the part of report they have been allotted and handover to the Coordinator/ Convener. The final report should be jointly made by all team members and signed by all assessors. It will be the responsibility of the Coordinator/Convener to ensure that whatever information is provided by the college authorities to them is properly formatted and filled in and to submit the same information alongwith the assessment report, in a sealed envelope, to this Council. No separate letter / page to be submitted with the

main report. In case of dissent a small note / remark may be added in the main report and this could be from any one of the signatories.

6. The team should be careful as wrong reporting has serious consequences.

7. Assessors should not give any extra comments and should focus on the desired information only. They should avoid using any subjective/superlative remarks in the assessment report.

## **General Instructions**

- Assessment is to be carried out within 7-10 days from the date of selection of assessors, after due consideration of State/National Holiday.
- Exact date of assessment of a particular college is decided by mutual consent of the concerned assessors, under intimation to the Council.
- In case there is a last minute drop out of any of the Assessors, alternate arrangements made by the Secretary in consultation with the concerned Member BOG.
- The Assessor should briefly meet the Dean / Director / Principal at the start of the assessment for making constructive changes / suggestions.
- The assessment process should be completed within the working hours of the institution.
- Normal / routine functioning of the institution should not be disturbed.
- Not to accept any transportation, hospitality and any gift in any form from medical college authorities. Please note that if at any stage they are found to be accepted, the assessment report sent by you would be treated as cancelled and invalid and necessary action shall be taken.
- The services of the local staff (steno/ computer operator) of the college or the institute should not be used for preparing the Assessment report.
- Proper sanctioned leave, sudden sickness / casual leave, etc. authenticated by the head of the institution should be documented and recorded.
- Officers / officials posted to special duties (for e.g. in OTs, peripheral centers, labor-rooms, procedure rooms, etc.) and on official duties outside the institution are to be verified and

recorded. Their attendance registers, duty rosters and other related documents to confirm their roles should be verified and documented to the satisfaction of the assessor.

- Any instances of non-compliance by the Dean of the host Institute, of instructions given by the Assessors should be reported and such report should be signed by all the Assessors.
- The Assessors should report any instance of misbehavior or commission of an act not befitting the dignity of the Council or any instance of doubtful integrity by the other Assessors / by college to the Council immediately. Cheating / defrauding the Council would not be accepted at any cost.
- The Coordinator has the right to call off the assessment after informing the Secretary, MCI, and taking necessary advice and directions from the Council or seek police protection in case of undue stress, obscene behavior or threats.
- There are two forms; Part A1 which needs to be filled in by the institution and Part A2, needs to be filled in by the assessor.
- An excel sheet format is attached, which gives the actual requirement for each assessment. The assessor needs to write in the adjacent availability column.
- Apart from the two Institution and Assessor format, a self calculating excel sheet is also attached, where the assessor is required to enter the details (number) and the total figures will automatically get calculated for easy reference.
- Assessor needs to be extremely careful in entering the data in the attached excel sheet. Please ensure verification and validation of data to be entered.
- Clinical Material information is very important. Please ask the institution to submit data for a year and the assessor can randomly select data of three months, which can be entered in the format.

- Efforts should be made to understand the downtime with respect to the equipments in the institution.
- Assessors are required to verify the details at the time of assessment vis-a-vis those found in the declaration form.
- Ensure that declaration forms as per format, duly filled and signed, are supplied in respect of each member of the teaching faculty. No column should be left blank.
- **Conflict of interest, if any exists, to be disclosed by all Assessors for assessment of the assigned college, before proceeding for assessment (Annexure I).**

### **Verification of Teaching Faculty/Others**

1. The permission granted for 2012-13 by the Board of Governors/Council is for the faculty present at the college/institute.

However, the faculty would be counted at only one college for that academic year i.e. for 2012-13 in the event of any migration/transfer from one college to another.

2. All declaration forms should be checked and all possible efforts should be made to verify authenticity of the information in the Declaration Forms. The Assessment report should give the correct picture of the strength of the teaching faculty in the concerned institute. All deficiencies should be pointed out in the Report.
3. Faculty attendance should be checked before 11:00 a.m. on the first day of assessment. If Junior Residents/Sr. Resident were on night duty in their own hospital, Dean/Director should be advised to call them by 12:00 Noon. In case it is reported that any doctor is conducting surgery/procedure, this must be physically verified by a member of the assessment team, and then should be considered as a teacher.
4. If any member of the faculty presents him/her self after 11:00 a.m., the time and the date when he/she reported for assessment should be reported on the Declaration Forms. The Declaration Form should be signed by the concerned teacher and counter signed by the Dean and HOD of the Institute. In case of refusal to do so by the teacher or the Dean, this should be recorded and signed by all Assessors.

5. Teachers must be present for physical verification for **all the days** of assessment and only teachers who are present in the medical college premises during the period of assessment should be counted. Any teacher who is presented as faculty at a place other than medical college or any teacher who is not present on the first day of assessment **should not** be included in the list of faculty of the college. However, in case a teacher is present on the first day of assessment but has not been able to produce all the documents, he may be included in the faculty list, if he is able to furnish the missing documents on the subsequent day but before the assessment work is over.
6. The qualifications, i.e., MBBS and Post-graduate qualifications (degree/diploma).e.g., MD/MS/DM/M.Ch/DNB, etc. of each designated faculty must be documented for considering them as faculty.
7. In case a teacher is not able to show the Registration Certificate of additional qualification at the time of assessment, the Dean should be requested to submit the same within 7 days. A letter, specifying the names of such teachers, should be submitted to the Dean/Director and acknowledgment of the letter should be taken from the counter Dean/Director.
8. Each person accepted as teacher should have **all** the following documents (mentioned in the letter sent by the Council to all the institutions):
  - a) Recent attested photograph.
  - b) Photo ID issued by the Govt. authorities: i.e. Passport/PAN Card/Voter ID.

- c) Registration number (Both for UG & PG) and name of the Council with which registered.
- d) Degree certificate for MBBS and PG Degree, additional, if any.
- e) Date of joining in the present College and relieving order from the previous college.
- f) Details of teaching experience with exact dates of employment at each college with experience certificate from each college.
- g) Details of payment of salary from July, 2011 onwards or from date of joining whichever is later, with copy of TDS certificate/Form 16 for financial year 2010-11 and PAN card.
- h) Proof of residence i.e. telephone / electricity bill, Voter ID card or other genuine proof.

**Anyone failing to produce any one of these documents should not be counted as a teacher.**

9. An Assistant Professor **must have** 3 years experience as Tutor/Resident in the concerned subject in a medical institute. If the experience of 3 years as Tutor/Resident is not mentioned in the Declaration Form such a teacher should not be counted.

***Tip: In order to cross-check facts as provided by the Institution, students may be asked about the teachers who are teaching them for various subjects and Junior Residents may be asked to identify wards where they have been posted and brief history of various patients in the ward.***

10. In case the same management which owns the medical college is also running a Dental college, irrespective of whether the Dental College is running within the same campus or not, separate staff for the Dentistry Department may not be insisted upon.
11. The total requirement of teachers for the computation of the faculty and residents at different stages for 50/100/150/200/250 admissions should be computed as per the MSR.
12. Excess teachers should be counted for compensation only within the same group (i.e. Faculty/Residents). For example excess of Professor/Associate Professors can be counted towards deficiency of Associate Professor/Assistant Professor only. Excess of Assistant Professors should not be counted towards deficiency of Residents.
13. Tutors/Registrars of the clinical departments including Anaesthesia and Radio-Diagnosis are to be counted as Senior Residents. Tutor in Dentistry should be counted as Junior Residents.
14. Courses which are not recognized by MCI or which do not come within the purview of MCI need not be taken into consideration for calculating the teaching faculty.
15. In instances where teachers can only provide the allotment letter as evidence for staying in the college campus, 3-4 randomly selected teachers should be requested to show their quarters.

***Tip: The Assessors can note the condition of the quarters, which would give them an idea about the veracity of the statement made by the concerned teacher.***

## **Infrastructure**

1. The actual patient attendance in the indoor and outdoor facilities, numbers of clinical procedures / interventions, and laboratory procedures, teaching activities (classroom and practical) should be verified and documented by the assessor, for e.g. correlation of surgeries performed with number of blood bags being issued by blood bank.
2. The infrastructure (building, area and space, equipments, etc.) available with the institution and any other relevant information should be verified and recorded.
3. Any department that is running postgraduate course, there should be a minimum 30 beds in that unit.
4. Any discrepancy that is observed between statements made in Form A, B & Clinical material supplied by the institute and the actual position as observed during assessment, should be clearly marked and brought to the attention of the Dean/Principal of the institute and her/his signature should be obtained at the relevant place.
5. Only the physical journals subscribed to and available in the library should be counted towards the requirement as specified in the regulations for the appropriate stage. E Journals and other electronic media facilities may only be considered as additional facilities.
6. Computer generated hospital statistics pertaining to outdoor and indoor admissions, x-ray and laboratory investigations should be cross-verified with the hard data (manual register) kept in the respective departments, OPDs, laboratories and operation theatres.

Any observed discrepancies should be brought to the notice of Dean/Principal and her/his signature should be obtained at the relevant place. In case it is observed that any patient is not appropriate for clinical teaching purposes, such patients should not be counted in calculation of bed occupancy. The signature of the Dean/Principal should be obtained at the relevant place.

### **Declaration Form**

Colleges have been asked Vide Council letter dated 08.12.2011, to submit:-

- (i) Request for next renewal assessment as per Section 8 of the Establishment of Medical College Regulations, 1999.
- (ii) CD / DVDs of Declaration forms as per MCI format for 2012-13 for (a) Faculty & (b) Residents.
- (iii) CD of Standard Inspection Form A & B.

The letter contains information regarding the attested documents that each teacher needs to submit (listed on page 12 & 13 of this document). These must be countersigned by Dean/Principal/HOD.

The Declaration Forms are scrutinized and verified by the assessors from Medical Council of India at the time of assessment. The verification of declaration form should be done in light of points mentioned from 4 to 9, 13 and 14 on pages 11 to 14.

### ***Schedule of Assessment***

Colleges have been informed vide letter dated 08.12.2011 that the assessment for renewal of permission for admission of fresh batch of students for the academic year 2012-13 will be undertaken by the Council assessors within the stipulated period of time.

In order to avoid ad-hoc arrangements and creation of temporary facilities for the assessment, please do not inform the colleges about the forthcoming assessment. Travel & Stay arrangements should be made by the official MCI travel agent.

**DECLARATION**

**(Regarding Conflict of Interest)**

I Prof./ Dr. \_\_\_\_\_, S/o \_\_\_\_\_,  
r/o \_\_\_\_\_, currently working  
as \_\_\_\_\_, do hereby  
solemnly declare and state in my capacity as the Assessor  
appointed for the verification of physical infrastructure, human  
resources, clinical material etc. as per the Regulation of Medical  
Council of India of the \_\_\_\_\_ Medical College/  
Institution located at [Place/District/State] that I have no  
financial or other interest directly or indirectly involved in  
this College as well as neither me nor any of my close relative is  
associated with this college which is under the regulatory process  
this year.

(Signed)

Date:

Place: