MGIMS welcomes NAAC Peer Team

Dr S Rangaswami
Dr Neeru Vasudeva
Dr Shripad Deshpande
Dr VK Jain

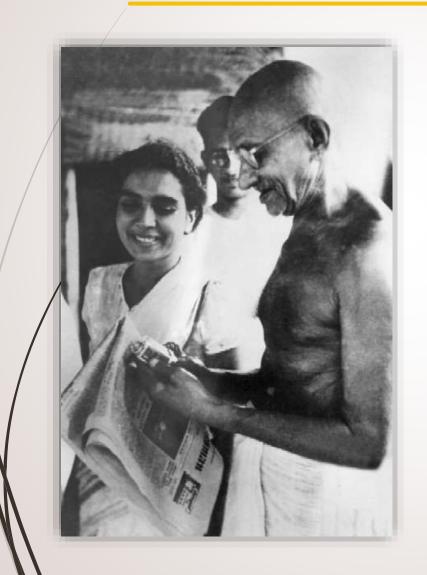


Mahatma Gandhi Institute of Medical Sciences, Sevagram

National Assessment and Accreditation Council Peer Team Visit (Cycle 2)



A brief history of MGIMS



 1936: Gandhiji arrived in Sevagram and set up his ashram



 1938: Dr Sushila Nayar came to Sevagram at the behest of Dr BC Roy to care for Bapu's health

Kasturba Hospital established



- 1944: OPD started in Birla Guest house
- Later, 15 bedded hospital for women and children established memory of Kasturba Gandhi
- ANM course started for training in midwifery

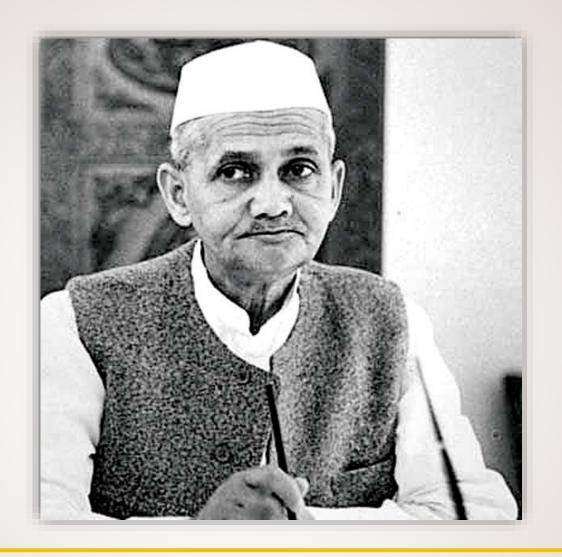
Kasturba Health Society



1964: Kasturba Health Society established



Dr Sushila Nayar elected President



1965: At Central Council of Health, PM Shastri suggests starting medical colleges in rural areas

MGIMS: A Gandhi Centenary Project



1969: Mahatma Gandhi Institute of Medical Sciences established in Sevagram

Our Vision

- To develop a replicable model of community oriented medical education
- which is responsive to the changing needs of our country and
- is rooted in an ethos of professional excellence

Mission Statement

In the spirit of its Founder, MGIMS, Sevagram

- is committed to pursuit of exemplary standards of professional excellence
- in medical education, research and clinical care
- by evolving a pattern of integrating valuebased medical education with
- accessible and affordable health care, especially to underprivileged rural communities.

Criterion I: Curricular aspects



MGIMS is affiliated to MUHS Nashik and follows MCI guidelines





MGIMS is listed in the World Directory of Medical Schools



Courses offered

Courses offered	No. of programmes
MBBS	1
MD/MS	20
Diploma	9
PhD	9
PG Diploma (IGNOU)	3

Curricular planning, design and development

Curriculum is as per the broad framework of MCI and MUHS

Curricular design & development



2012-13: MUHS undertook a major curricular review on the basis of MCI's Vision 2015 document in its move to push competency based medical education

 Several of our faculty members were part of the MCI and MUHS teams to review the curriculum

MGIMS representation @ MUHS

- The Boards of Studies at MUHS regularly review curriculum
- Eight of our faculty members are members of BoS at MUHS
- Our faculty have held the following posts at MUHS:
 - Acting Pro-Vice Chancellor
 - Member, Management Council
 - Member, Academic Council
 - Member, Faculty of Medicine
 - Chairperson and Members of several technical and administrative committees



"We may never have the opportunity to do great things in a great way, but we all have the chance to do small things in a great way."

- Abraham Flexner

MGIMS has pioneered several community-oriented curricular innovations



Curricular innovations: Milestones in an MGIMS student's journey



Orientation camp

Students spend 15 days in the camp organized in Gandhi Ashram immediately after admission to MGIMS





They are acquainted with Gandhian philosophy, and interact with eminent Gandhians

The Gandhian way of life

Students live in the simple surroundings of Bapu Kuti







Learn lessons about dignity of labour

Our Code of Conduct







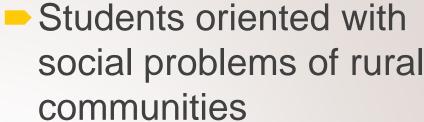
- Promote use of khadi
- All-religion community prayer
- Shramdan
- Follow vegetarianism
- Eschew alcohol and tobacco

Village adoption scheme & Social Service Camp:

- Each year a batch of medical students adopts a new village
- Each student is allotted 3-5 families
- Students learn in the community and follow up their families throughout their course











 Have a deeper understanding of social context

Reorientation of Medical Education (ROME) Camp

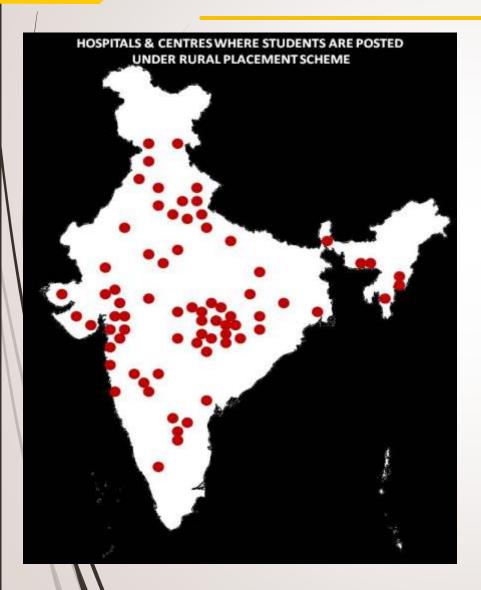


- Understand the implementation of national health programmes
- Trained to work with minimum resources in rural areas

- 15 days camp in rural health training centre during final MBBS
- Students trained to understand the organization and functioning of primary health centre



Rural Placement Scheme



- Started in 1992
- Mandatory for all graduates to serve for two years in villages as an eligibility criterion for application to PG course
- Until 2015-16, 24 batches (1155 students) have been posted to 80 recognized rural centres across the country
- Students allowed to choose centre of their choice in a structured transparent counselling process

The pioneers

"There is need to draw upon MGIMS Sevagram's initiatives and experience in curricular innovation and rural placement of its graduates"

- Report of the Task Force on Medical Education of the National Rural Health Mission (2009)

Curriculum enrichment

Besides the MUHS core curriculum we also offer several inter-disciplinary and skill based programmes to our students to foster global competencies

Curricular enrichment programmes: undergraduates

Foundation Course

Community oriented medical education

Communication skills workshops

Bioethics

Skills training workshops

Research projects

Integrated
Management of
Childhood &
Neonatal Illnesses

Study skills workshop

Values in health- a spiritual approach (VIHASA)

Curricular enrichment programmes: interns & postgraduates

Interns Orientation Programme

Research Methodology Workshops Orientation to National Health Programmes

BLS and ACLS workshops

Neonatal resuscitation Workshops

CME on Revised
National TB
Control
Programme

Curricular enrichment programmes: For medical officers (for Gol & State govt.)

Emergency
Obstetrics Care
(EmOC)

Lifesaving skills & anesthesia skills

Facility based new born care

National vector control borne disease control

Integrated
Disease
Surveillance
Project

Revised
National TB
Control
Programme

Feedback system

- Data collated by the Internal Quality Assurance Cell (IQAC)
- From students, alumni, faculty, parents, nonteaching staff, patients
- Analyzed by IQAC and disseminated to appropriate bodies
- Feedback used to improve infrastructure, processes and performance in teaching, research and patient care

Criterion II:

Teaching, Learning & Evaluation



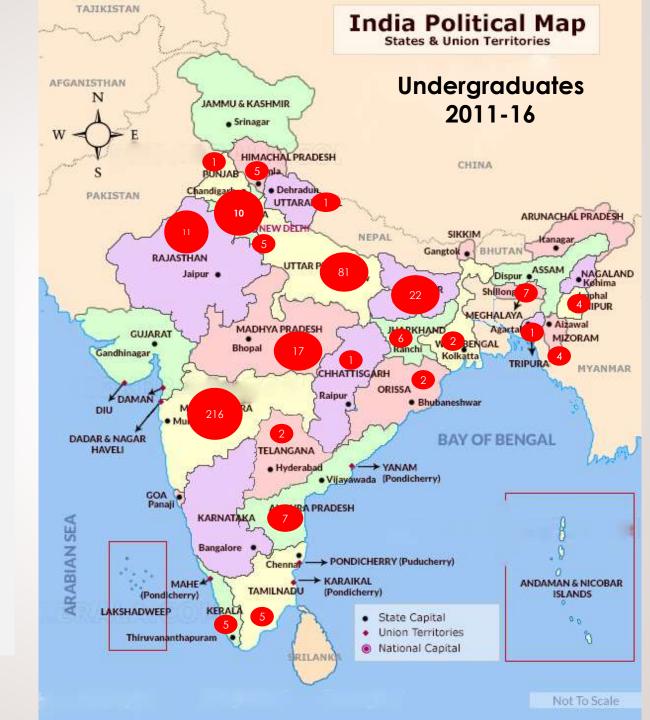


Student enrolment & profile

Admissions into MBBS Course

- Until 2015, MGIMS conducted its own premedical entrance test in April each year
- Six examination centres: New Delhi, Nagpur, Mumbai, Hyderabad, Allahabad, Kolkata
- MCQs in Physics, Chemistry and Biology
- Special paper in Gandhian Thought
- From 2016, all admissions done only on the basis of NEET scores
- 100 students per year

- 50% from Maharashtra
- 50%: Rest of India
- Students from:
- 22 states
- 1 union territory



Postgraduate admissions

- Eligibility criterion: Students have to complete rural service before PG
- One year service with bond for completing left over service after post-graduation
- First preference given to MGIMS students who have completed rural service.
- Then to outside candidates who have completed rural service at Govt PHCs

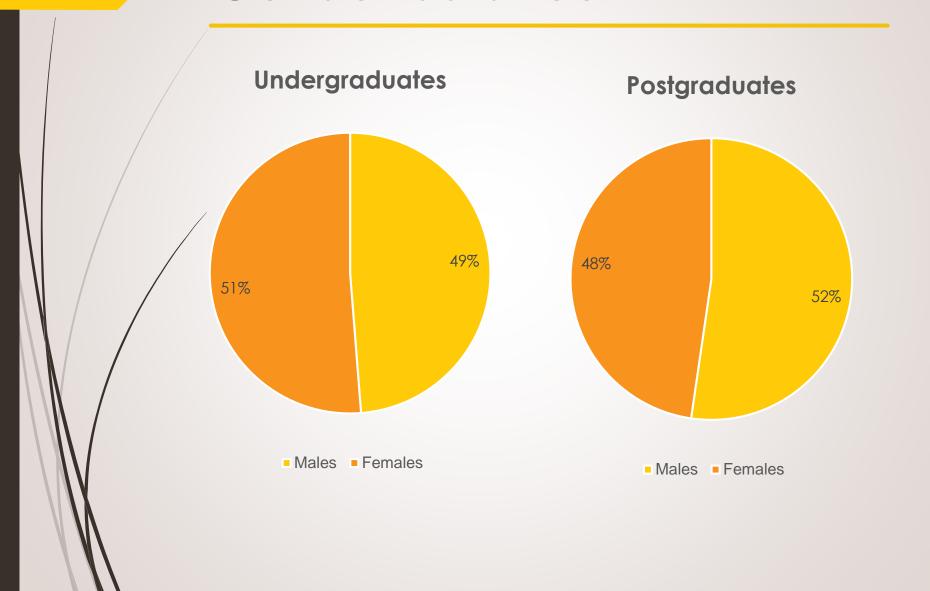
Salient achievements since 2011

- MBBS seats increased from 65 to 100
- MD Radiotherapy (1 seat) has been recognized by MCI in 2013
- Eight PG seats increased
 - Surgery (1 seat)
 - Pediatrics (1 seat)
 - Medicine (2 seats)
 - Anesthesia (2 seats)
 - Ophthalmology (2 seats)



Student diversity

Gender balance



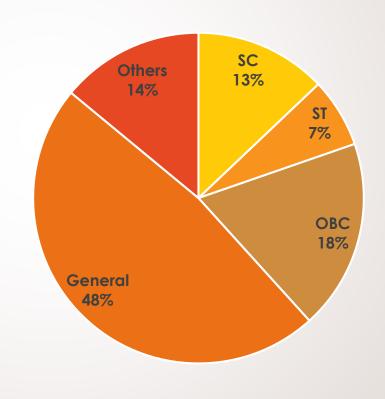
Social inclusion and diversity

Undergraduate students 2011-16

Seats reserved each year for

- Differently abled- 3 seats
- Rural category- 12 seats

30% of total seats reserved for girls in all categories





International students

MoU with

- Maastricht University, Netherlands
- Ben Gurion University, Israel
- University of Jakarta, Indonesia





In the past, students have come for elective posting from:

- North Carolina University, USA
- Rush Medical College, Chicago, USA
- London Medical College, UK
- Nottingham Medical School, UK
- Albert Ludwig University, Freiburg, Germany
- McGill University, Canada



Teaching-Learning Process

Unique model where we believe in giving students experiential learning in the field rather than teaching within the four walls of a classroom

Innovative teaching practices

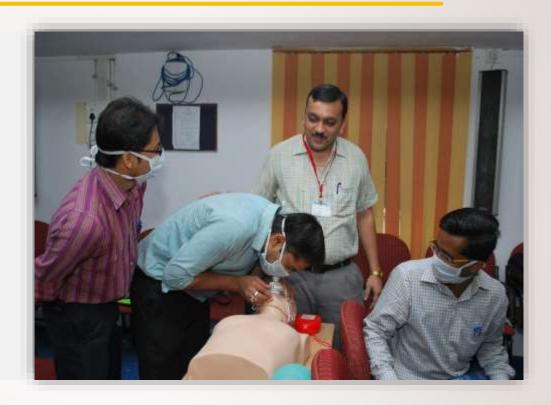
- Community oriented medical education
- Competency based medical education with emphasis on skills training
- Learner-centric approach
- Value education
- Communication skills, bioethics
- Now moving towards e-learning in a move to encourage selfdirected learning





Skills training @ MGIMS

- Centralized Skills Laboratory
- Annual Neonatal Resuscitation Workshops- Dept of Pediatrics
- Annual Basic Neonatal Care Workshops- Dept of Pediatrics



MGIMS Institute of Simulation Training:
American Heart Association accredited
Basic Life Skills (BLS) and
Advanced Cardiovascular Life Support (ACLS) courses

Skills training @ MGIMS

- Emergency Obstetric Care (EmOC) and Life Saving Anesthesia Skills (LSAS) training to Medical Officers: Dept of Ob/Gyn and Anesthesia
- IOL implantation Training:Dept of Ophthalmology



The institute has been identified as one of the five nodal centres to run National Emergency Life Support (NELS) Programme. A grant of Rs 2.68 crores has been sanctioned from Govt of India

UNESCO Nodal Centre for Bioethics

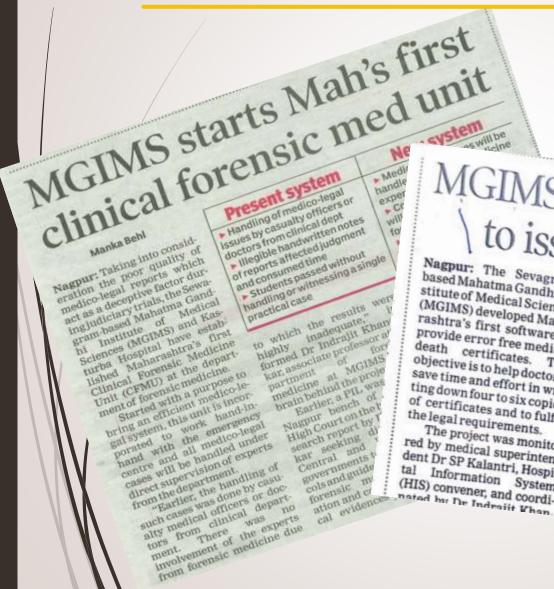
- UNESCO Chairs for MGIMS Bioethics wing established
- Bioethics teaching to be woven longitudinally into every subject of the MBBS course.







Clinical Forensic Medicine Unit



MGIMS develops first software to issue death certificate

stitute of Medical Sciences (MGIMS) developed Maharashtra's first software to provide error free medical death certificates. The objective is to help doctors' save time and effort in writing down four to six copies of certificates and to fulfil the legal requirements.

as will be

The project was monitored by medical superintendent Dr SP Kalantri, Hospital Information System (HIS) convener, and coordi-

WELCOME CHANGES

Manual system

- Doctor's time is wasted In 50% of cases names of
- doctor left incomplete
- Errors in writing names of deceased Deceased's age, sex not mentioned many times

New system

- ▶ Only 10% time needed
- ▶ Easier to take printouts
- ► Important aspects have not been missed

ath certificates issued by the treating dectare more

ging any fees.

"The medicos have to mention demographic details of patient and their own name in each copy. Average 20-30 minutes is consumed for a single case. Due to manually drafting of several copies, there used to many discrepancies and errors. With the help of new software, doctors can complete all formalities with as many printouts in a couple of minutes and without mistakes," Dr Khandekar said. Two

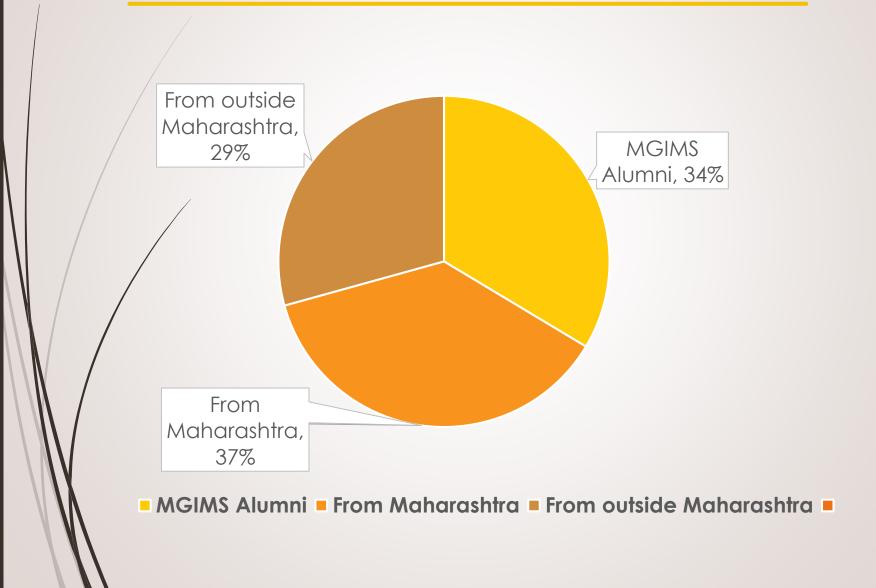
Faculty: our biggest asset

- Experienced, motivated and committed faculty
- Trained in teaching technology

Designation	Number
Dean	1
Emeritus Professors	4
Professors	55
Associate Professors	32
Assistant Professors	56
Total	148

Visiting faculty

Diversity of faculty



Medical Education Unit

- Faculty trained in medical education (MHPE, FAIMER, Advanced Course)
- Regularly conduct faculty development workshops- 24
- Student workshops on communication skills, medical humanities, developing good study skills- 22
- Conduct educational research: several projects, presentations and publications
- Invited as resource persons at national and international fora



Faculty: Academic Awards

- Dr Sharadini Dahanukar Best Teacher Award from MUHS
 Nashik 3
- Excellence in Teaching Award from Indian Academy of Pediatrics (Maharashtra branch)
- International Fellowship in Medical Education for 2012
- Champion of Neonatal Resuscitation Programme- First Golden Minute Trophy for Maharashtra State Academic Coordinator
- FAIMER Regional Institute Fellowships 4
- TUFH Fellowships to attend Network Conferences in Thunderbay (Canada), Fortaleza (Brazil) and Johannesberg (South Africa)
- Nominated member of Indian Advisory Board of Robbins & Cotran's Pathological Basis of Disease

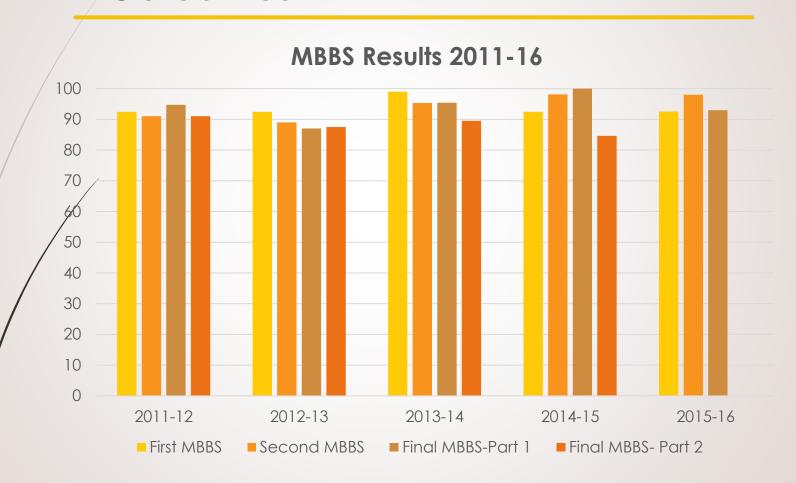
Evaluation process & reforms

- Continuous formative assessment is being done
- Answerbooks shown to students
- Feedback given on their performance in internal assessment
- Online submission of internal assessment marks
- Internal assessment grievance committee
- Monitoring of record keeping process by MUHS authorities
- MGIMS is a centre for MUHS' Central Assessment Programme

Evaluation process & reforms

- Reforms undertaken by MUHS:
 - Double evaluation, OMR, barcoding introduced
 - Online question banks and paper setting
 - CCTVs installed, strong rooms created for security
 - Internal vigilance squad monitors exams
 - Computerized result processing system at MUHS
 - Online entry of practical results
 - Timely online declaration of results within 45 days
 - Since 2016, online submission of thesis
 - Plagiarism check software in university

Student Performance and Learning Outcomes



Our results have been consistently good at the University

Excellence in academics

- 45 of our MBBS students have been awarded distinctions from MUHS in the last five years
- 11 of our students have topped their university exams in
 - MD Ob/Gyn (2), MD Forensic Medicine, MD Psychiatry, DGO (2), DA, D Ortho, DDVL
- 11 of our students have stood second in MUHS in
 - MD Ob/Gyn (2), MD Anesthesia (2), DGO (3), MD Medicine, DLO, Dortho, DCH

Criterion III:

Research, Consultancy & Extension Activities

Training in Research Methodology

- Research Methodology workshops conducted annually: Mandatory for first year postgraduates- 10
- Research Methodology workshops conducted for faculty: Mandatory for postgraduate guides- 2
- Essential National Health Research
 Workshop conducted for undergraduates- 2
- Research Protocol writing workshops- 2

Institutional measures to promote research among faculty

- 15 days special leave per year and reimbursement of expenditure incurred in attending workshops, conferences, CMEs
- Study leave: granted to pursue PhD, fellowships, courses
- KHS funds research in tropical diseases
- Rs 15 lakhs/ year- Medical Research Centre, Mumbai- Reverse Pharmacology

Institutional measures to promote research among PGs

- Seed money for PG and faculty research: upto 10 lakhs/ year.
- Maximum of Rs 25000 per postgraduate student
- 2011-16: Rs 21 lakhs awarded to 96 students
- Sushruta Award for best PG thesis annually

Undergraduate Research



ICMR-STS or MUHS-STRG awards		
Year	No. of students	
2011-12	9	
2012-13	9	
2013-14	8	
2014-15	9	
2015-16	13	

- 2014: Dr Sushila Nayar Memorial Award for best UG research
- 2016: Rs 3,00,000 per year for UG research
 - Short-term Research Grant for individual and group projects
 - Travel Grant
 - Incentives for UG students for publication in scientific journals

Undergraduate research conferences





MEDICON 2012

ETHOS 2017

Funded Research

- 2011-2016: 90 funded projects
- Grants worth Rs 18.6 crores
- MGIMS also contributes towards the infrastructure and salaries of the investigators.
- Funding agencies: WHO, UNICEF, ICMR, UNFPA, DBT, DST, IARC, UICC, USAID, Aga Khan Foundation, Bill and Melinda Gates Foundation, GOI, Govt of Maharashtra, NIPCCD, MUHS
 - Ongoing projects: 34

Research Infrastructure



- Jamnalal Bajaj Tropical
 Disease Research Centre
 (JBTDRC)
- Tuberculosis Research: Dept of Microbiology
- Cytogenetics Laboratory:Dept of Anatomy
- Bioinformatics Centre

Recognized Centres for Research and Training

- WHO Collaborating Centre for Research and Training in Community based Maternal Newborn and Child Health
- ICMR Advanced Center for Community Based Research in Maternal, Newborn & Child Health
- ICMR Population Based Cancer Registry: Dept of Pathology
- Dept of Biochemistry recognized for DST Fund for Improvement in Science and Technology (FIST) infrastructure support
- Dept of Obstetrics and Gynecology & Anesthesia:
 Emergency Obstetrics Care and LSAS
- Dept of Pediatrics: Nodal Centre for Facility Based Newborn Care

Institutional policy

- MGIMS does not accept drug industry support for any conferences, seminars or workshops
- It is the first medical institute in the country to keep drug industry away from medical education
- Freebies from medical representatives not permitted

Academic Activities organized

2011-16	No. of activities
International	6
National	67
State	116
Institutional	100
Total	289





Academy of Medical Sciences





- Meets every Wednesday afternoon
- 2011-16: 276 sessions

Guest lectures : 37CME/Workshops : 7Symposia : 4

In-house presentations: 239

- Regular annual events:
 - Eye Donation week
 - World AIDS Day
 - World TB Day
 - World Health day
 - International Women's Day

Publications (2012-16)

Year	Total public	ations PubMed Indexed
2012	212	55
2013	138	44
2014	162	53
2015	177	64
2016	155	48
Total	844	264

Citation index Range : 1-445

Impact factor Range : 0-8.7

h-index : 0-29

Publications in high impact journals

Name of journal	Impact factor
ВМЈ	19.96
Epidemiology	6.07
Am Heart Journal	4.32
BMC Pregnancy and Childbirth	2.18
Int J Tuberc Lung Dise	2.14
BMC Pediatrics	1.813
Am R Coll Surg England	1.33
Indian J Med Res	1.82
Indian J Med Microbiol	1.00
Indian Pediatrics	0.972
Indian J Dermatol Venereol Leprol	0.932
Natl Med J India	0.907

In-house publications



Research Awards

Ms Sahitya Rao (2013 batch) stood first in the Pure Sciences UG Research Project category and represented the University at the 10th Maharashtra State Inter-university Research Convention in 2015

In the last five years, 21 postgraduate and undergraduate students have won awards for best papers at various scientific meetings

Major Awards & Recognition

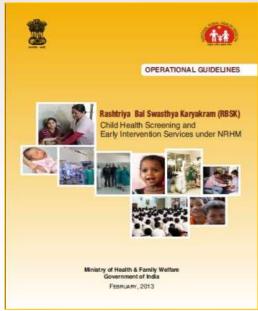
- Nominated to Governing Council of ICMR
- Member, National Task Force on Millennium Development Goal 5
- International Fellowship in Cancer Epidemiology
- Scholarship from Maternal Health Task Force, Harvard School of Public Health
- WHO Fellowship for Communicable and Non communicable diseases, Amsterdam
- ICMR Travel Fellowship
- Rajiv Gandhi National Fellowship from UGC
- Eight orations and 26 different fellowships.....

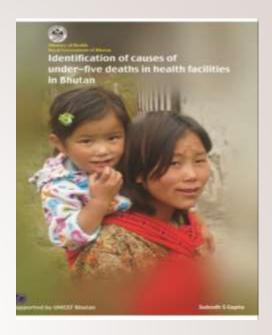
Consultancy

Our faculty have provided consultancy to:

- WHO: Development of planning and management guidelines and training material at provincial, district
 & Ri level in DPR Korea (April 2011)
- Public Health Foundation of India: External Technical Review as a part of 10 years Review of PHFI (Jan 2017)
- UNICEF Bhutan: Identification of causes of under-five deaths in health facilities in Bhutan (August 2012)
- UNICEF Bhutan: Assessment of child care services in hospitals in Bhutan (March 2013)



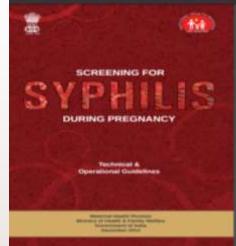


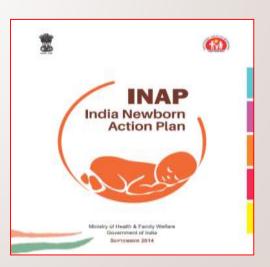


Consultancy



Our faculty have been invited as experts and contributed to formulation of international & national guidelines in these documents





MGIMS is listed in WHO's Regional Directory of Training Institutions







CIPS Five state project 2013-14

Team effort by

- MGIMS Sevagram
- CMC Vellore
- Centre for Innovations in Public Services (CIPS), Hyderabad



- MOHFW initiative
- Teams disseminated curricular innovations to other colleges with an intention to replicate them
- Medical colleges selected in
 - Kakinada (Andhra Pradesh)
 - Vadodara (Gujarat)
 - Patiala (Punjab)
 - Jorhat (Assam)
 - Agartala (Tripura)

Labs for Life Project





- Project of CDC, NACO, MOHFW
- To improve the quality of laboratory services
- Departments of Microbiology, Pathology and Biochemistry nominated
- MGIMS has achieved the highest score in the 2016 assessment among 10 medical colleges in the project from 6 states

Extension activities and Institutional Social Responsibility



Community Mobilization Activities

The institute has adopted three primary health centres and developed a model of decentralized healthcare delivery at village level through Community-based Organizations and the Panchayati Raj Institutions.





The institute has facilitated formation of

- 275 Self Help Groups
- 10 Kisan Vikas Manch
- 89 Kishori Panchayats
- 76 Village Health and Sanitation Committees

WHO Award for Excellence in Primary Health Care, 2011

(ICICI Lombard and CNBC-TV 18 India Healthcare Awards)



Tribal Health Project, Utawali, Melghat





- Tribal area infamous for malnutrition related deaths
- 2012: Dr Sushila Nayar Hospital started
- 100 villages receive community based maternal, neonatal care in Dharni block of Melghat

Social ophthalmology

- Door to door cataract screening in all 8 blocks of Wardha district
- Project on Screening for Diabetic Retinopathy in Wardha District: Queen Elizabeth Diamond Jubilee
 Trust has sanctioned a grant of Rs 2 crores





The White Coat Army







Undergraduate students spread awareness against alcohol and tobacco addiction

Health insurance scheme



कस्तुरबा दवाखाना, सेवाग्राम वार्षिक कौटुंबिक आरोग्य विमा कार्ड योजना

1.10 रुपया प्रति दिवस
5 व्यक्तिंची आरोग्य नोंदणी
50% दवाखान्याच्या बिलावर सुट
वार्षिक नोंदणी 31 डिसेंबर पर्यंत
रु.400*प्रतिवर्ष 5 व्यक्तिंच्या कुटूंबासाठी

Health Insurance Scheme:
 Rs 400 per year- 50%
 subsidy on OPD and IPD
 bills

2015-16:

- 18807 families
- 86199 members

- Jowar Health Assurance Scheme 2015-16:
- 40 villages
- 90201 rural people insured

Low cost drug initiative

- To provide appropriate and affordable drugs to our patients.
- Reduce the cost of drugs to the patient



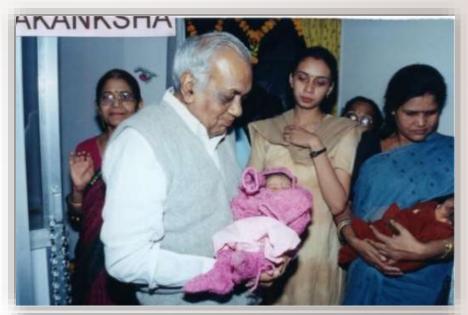
Rajiv Gandhi Jeevandayi Arogya Yojana (RGJAY)

- Kasturba Hospital was identified as a key hospital to run this health package by Govt of Maharashtra
- Provides free medical care for around 971 surgeries/ therapies/ procedures for the poor.



Akanksha: Licensed adoption home

- Sevagram Project: started to help unwed mothers – (Dept of Ob/Gyn)
- Hope for abandoned babies
- Akanksha Licensed adoption home supported by KHS





Sevabhaav: The Community Radio Show



'Seva Bhaav', MGIMS' radio show, to be broadcast from today

Seve Bhaav will broadcast a talk with Dr Ulfran Jajoo, Professor and Head. Occurrment of Medicine at MGMB at 9 am on Radio 90.4 FM on Thursday

District Correspondent WWW.Ner 22

WOULDERS Good In Longue of Medical Sciences (MGIMS). Severgreen has started 'Sever Ubsay, amilio showbarchiness light on a variety of Louisianianradiostation, MCRC hatto90.4 Fht, will be baseched on April

In a press, release here on Mediwadan, Dr. B. S. Carg. Secretary of Kastistia Health Society, Dr. K. R. Patnud, Denn. MCDMS-Drik PKolomick Machini-Superiotendent, Kosourbe Hospital, Sevagram and Shally July-Kalacott, (190), countlemed that Seta Bhan has been designed with a sole between to help the community.

constructly. The weekly show. To made out to people brusing stamed in inflatocurrous with a - a radio - a solvenou mode of community-based. Wardha: communication, Broadcasting. talks of MODNS faculty. Seve-History will other increases an apportunity/so-engagos/dbdoc-Jors from different specialities. who not create booth awarecore in the constrainty expaman mystic from excell pared help. people understood which takes to stay healthy. Also, doctors. from MCGMS shallralk on a variony of discusses and well under people in lossying how low-cost. high quality medical core our be accounted for these disorders. In prefer of the same

talk, with the Hillian Janco. Professor and Blead of the department of Medicine at MUTRICA VA.On. on Badjo 90.4 FM on April 23, EX Jupo will share blavless as community based health in a conscious harries. familias -2.64,000 membero frees 40 villages around Severation in 2014-15. Sher the booadcast, the fall's will give be assignable ordine at the MCCSES website www.mgtmcsc.in.

The Officials of MIGINS have approled radio lista cersoo take

- Weekly radio show started in April 2015 in collaboration with a community based Wardha radio station MGiri Radio 90.4 FM
- So far 57 talks broadcast by faculty members from 12 departments, 6 undergraduates and community organizations.

Alumni funded initiatives



- Alumni celebrate their silver jubilee by visiting their adopted villages and meeting their adopted families
- Contribute to Village Education and Development Fund

Arogyadham

- Traditional Health care & Research Project
- Promotion of Positive health
- Facilities for Ayurveda, Yoga& Naturopathy
- Health Retreat, Herbal Garden



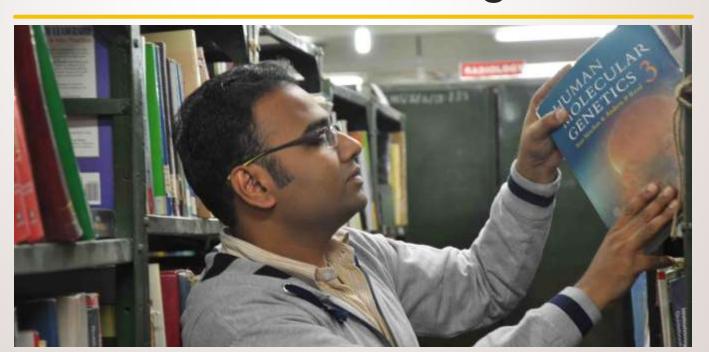




Collaborations

		Collaborations with
	Universities	Maastricht University, Netherlands; Ben Gurion University, Israel; and Jakarta University, Indonesia
	National agencies	MOHFW, Central TB Division, Public Health Foundation of India, ICMR, National Institute of Public Cooperation and Child Development, IndiaCLEN, National Reference Centre for Leptospirosis, National Centre for Disease Control, FOGSI, ICMR Cancer Registry programme, Labs for Life, Voluntary Health Association of India, Community based organizations, Government health system
	International agencies	WHO, UNICEF, UNFPA, International Agency for Research on Cancer (IARC) France, National Institutes for Health (NIH) Bethesda, Network towards Unity of Health, Population Health Research Institute, McMaster University, Canada etc.

Criterion IV: Infrastructure & Learning Resources



Physical facilities

- Spread over a sprawling campus of over 450 acres
- 934 bedded hospital with
 - 690 teaching beds
 - 100 service beds
 - 32 private rooms
 - 62 beds in different ICUs
 - 50 bed hospital in Utawali, Melghat

New Medicine Building



- Over 70000 sq ft area. Costs 7.8 crores.
- Comprises of OPD, triage facility, medical wards, a 26 bedded ICU, facilities for endoscopy, hemodialysis, Cath lab, a pharmacy, prayer room and conference and seminar room

Model Maternal and Child Health Wing



- Costs over 26 crores
- Model MCH wing for comprehensive reproductive, maternal, newborn and child and adolescent health (RMNCH+A) at MGIMS Sevagram

New Operation Theatre Complex





- 13 operation theatres
- Ten main operation theatres and three OTs for septic and emergency operations
- Ten modular OT suites, an intensive care unit and preoperative assessment ward with ten beds each, two recovery rooms and a medical store
- Over 15000 square feet

New hostels



Four new hostels constructed to meet the requirements of increased strength from 65 to 100 students per year

New Guest House



A new guest house with thirteen rooms has been constructed on campus

Digital Library

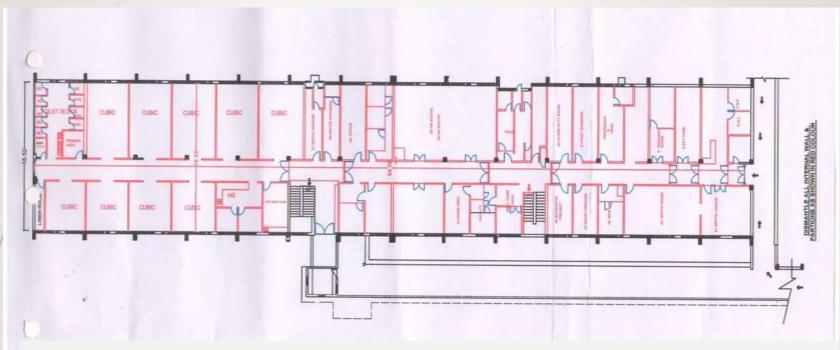
- Budget of Rs 73.2 lakhs in 2015-16
- 28487 books and 17755 bound volumes
- Subscribes to 116 journals: 71 international and 45 national
- Dedicated library server installed
- SLIM21 library management software installed
- Subscribes to
 - UpToDate
 - DELNET Network
 - ERMED consortium from 2017





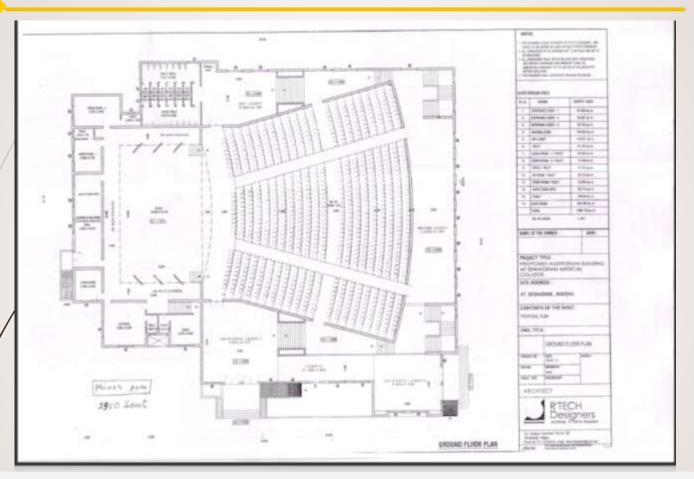


New library under construction



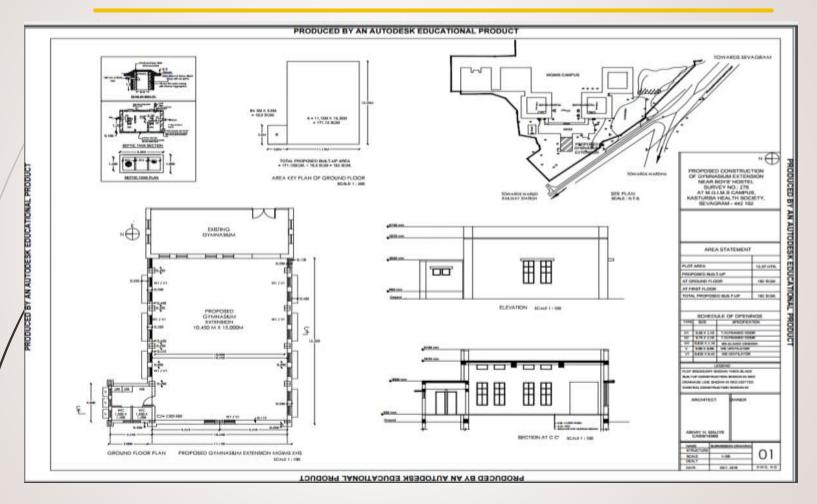
- New centrally air conditioned library is being constructed in a 17000 sq feet area at approximate cost of 3.5 crores
- It will house a digital e-library with 50 computers, reading rooms for undergraduates and residents, designated faculty area, a cafeteria, areas for team study, an audiovisual hall, staff rooms, reprography area, and kiosks for browsing.

Auditorium under construction



- The new 800 seater auditorium is being constructed over 1495 sq m.estimated cost: 5 crores
- The auditorium complex plan has green rooms, two seminar rooms with a capacity of 120, facilities for modern acoustic and audiovisual display and spacious parking area.

Gymnasium under construction



A new gymnasium worth over Rs 30 lakhs is under construction in boys' hostel

Clinical material and learning resources

Hospital data (2015-16)			
Outpatients seen	826808		
Inpatients	47204		
Outreach patients examined	94063		
Investigations (Patho, Bio, Micro)	917536		
Radiological investigations	145118		

Facilities at Kasturba Hospital

- State-of-the-art intensive care units in Medicine, Surgery, Ob/Gyn and Pediatrics
- Sri Satya Sai Accident and Emergency Unit
- Tertiary Cancer Centre
- Hemodialysis unit
- Blood Component Unit
- MRI, CT Scan, Mammography, digital subtraction angiography
- Modern diagnostic laboratories
- Cath lab

Hospital Information System





- A state-of-the-art, fully integrated hospital information system
- Provides a full set of tools for registering patients, ordering tests, retrieving test results and generating electronic discharge summaries

Use of information technology



- High speed internet on campus provided by National Knowledge Network (NKN)
- Wifi network available in hospital, hostels, faculty residences and rural centres
- Over 300 desktop computers all over campus
- Every faculty and student has an MGIMS email ID
- Most communication done online

Maintenance of campus facilities

- Looked after by the Engineering and Maintenance Department of the institute
- Attend to calls related to civil and electrical work 24 x 7
- Two biomedical engineers cater to all equipment related repair call
- Separate garden section to improve the physical ambience

Criterion V: Student Support & Progression



Student support activities

- Mentoring cell: structured programme, mentor-mentee meetings held regularly
- Students Guidance and Counseling Centre: started in 2014





Developing Good Study Skills





Workshops conducted by the Medical Education Unit

Book Bank Schemes

- MUHS Book Bank Scheme:
 - For economically backward students
 - For beneficiaries of Govt. scholarship scheme
- Needy Students Library: for all students
- Dr. Anand Karkhanis Book Bank Scheme: for all students
- Earn and learn scheme





Scholarships and Financial assistance (2011-16)

Year	Amount distributed
2011-2012	194823
2012-2013	99000
2013-2014	85420
2014-2015	83000
2015-2016	95461
2016-2017	514000
President, KHS	781300
Total	1853004

- Government scholarships to socially disadvantaged students: Rs 2.6 crores to 107 students
- Institutional financial assistance: 36 students

Rs 51 lakhs received from Shri Sathya Sai Health and Education Trust for providing free education to needy students



Support mechanisms

- Zero tolerance to ragging
- Anti ragging committee and squad in place
- Students' Grievance Redressal Committee
- Internal Assessment Grievance
 Committee
- Cell for prevention of Sexual
 Harassment in the workplace

Alumni networks

- Registered alumni association
- Strong presence and networks on social media
- Alumni contribute to development of institute
- Deliver academic talks and career guidance to students when they visit



Student progression

- Our students are given first preference for post-graduation
- MGIMS makes efforts to collaborate with NGOs for rural placement of its graduates
- No drop outs from MBBS in the last five years

Student participation and activities

- Wide range of activities:
 - Cultural
 - Sports
 - Literary
 - Magazine
 - -NSS





Students' Council









Criterion VI:

Governance, Leadership & Management



Organizational structure



Kasturba Health Society

Governing Council

Standing Finance
Committee

Local Managing
Committee

MGIMS Administration

President, KHS

Secretary, KHS

Dean MGIMS

Medical Superintendent, Kasturba Hospital

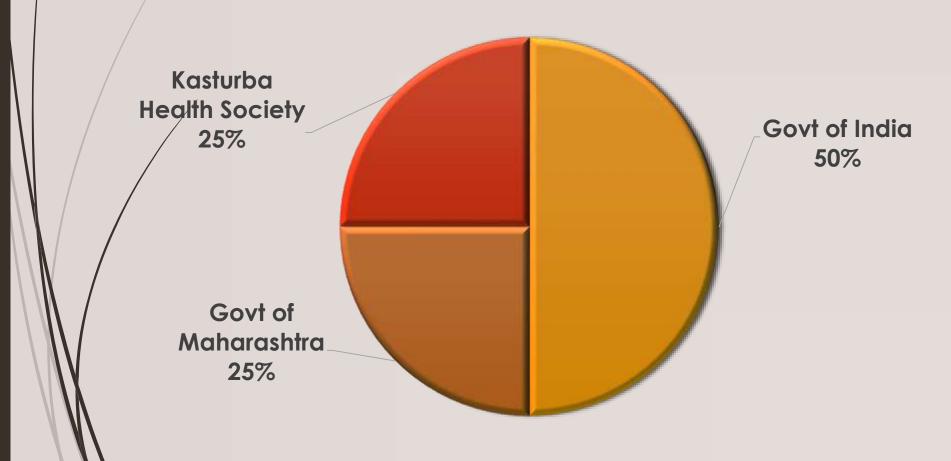
Institutional leadership



- Policies aligned with vision and mission
- Proactive and supportive management
- Healthy relationship with all members
- No administrative delays
- Transparency in administrative activities
- Effective delegation of responsibilities

The financial agreement

Annual expenditure shared between Govt of India, Govt of Maharashtra & Kasturba Health Society



Financial management and resource mobilization

- Led by a chartered accountant with good financial acumen
- Kasturba Health Society contributes to 25% of the total annual expenditure
- Raises this amount through donations from philanthropic organizations and resource mobilization through its stakeholders
- Internal and CAG audit performed

Specific strategies adopted for better governance

- Decentralization of responsibilities
- Use of information technology to make documentation, monitoring and retrieval easier
- Clearly defined policies and rules for most processes
- Benchmarks set for quality in education, research and service
- Review and action taken on feedback

Faculty retention strategies

- Faculty attrition happens especially at junior level, due to geographical location of institute
- Faculty emoluments paid according to 6th Pay Commission guidelines
- Institute's personal promotion scheme recognizes individual excellence and potential
- Promotes higher training and professional development by deputing faculty on study leave with bond
- Good residential accommodation
- 2 MBBS seats reserved for teaching and nonteaching KHS employees on basis of merit

Internal Quality Assurance Cell (IQAC)

- Nodal agency which collates feedback from students, alumni, faculty, parents, non-teaching staff
- Submits Annual Quality Assurance Report to NAAC
- Collates and compiles data through Documentation
 Unit- publishes Annual Report
- Forms basis for
 - Decision making
 - Performance monitoring
 - Budgeting and planning for the future
- Academic Audit submitted to MUHS annually
- Monitors performance of individual departments

Criterion VII:

Innovations & Best Practices

Environmental consciousness

- Tree plantation drives
- Solar water heaters installed in all hostels
- BSL-3 Laboratory (Microbiology) and Anesthesia Operation theatre are run on solar energy
- Recycling of hospital waste (paper and fabric) to create useful stationery
- Effluent treatment plant





'Cycles on campus' initiative



- Bicycle melas
- Interest free loans available to purchase cycles
- Talks to promote cycling



Best practices @ MGIMS

- Community Mobilization
- Proactive Medical Education Unit
- Thrust on community oriented research
- Hospital Information System
- Low / No cost healthcare
- Health Assurance Scheme
- White Coat Army
- Clinical Forensic Medicine Unit

SWOC Analysis

STRENGTHS

- Credibility and reputation of MGIMS Gandhian principles
- Strong linkages with community and health system
- State of the art infrastructure and learning resources
- Innovative patient schemes, innovative curricular model

WEAKNESSES

- Difficulty in starting super-specialty courses due to geographical location.
- Restrictive and rigid university schedule does not allow us to give students weightage for their performance in curricular innovations

SWOC Analysis

OPPORTUNITIES

- Recognition of work & good networking with govt and non-govt agencies
- Ability to attract grants: research and infrastructural development
- Management gives freedom and opportunities to innovate in health care, teaching and research

CHALLENGES

- Uncertainty about consequences of NEET on rural placement scheme
- Rural location makes retention of super specialists diffiicult

Best example of not-for-profit hospital

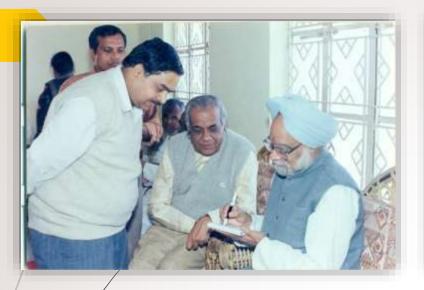
- MGIMS is one of the best examples of private-public partnership
- Combines efficiency and missionary zeal of private voluntary sector
- Concern for access of services and high coverage, compliance to rules, equal opportunities in employment of public sector

Future Plans

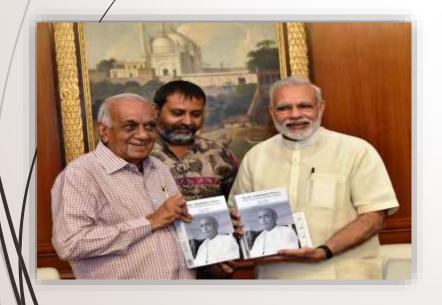
- Infrastructural additions Library,
 Auditorium
- Regional cancer centre and palliative care
- Telemedicine
- Upgradation of HIS to version 2

MGIMS is free India's first attempt to change the destiny of rural health









An attempt is a small thing, but it can be a promise for the future.