

National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

Certificate of Accreditation

National Institute of Homoeopathy
Block GE Sector III
Salt Lake, Kolkata - 700098, West Bengal

has been assessed and found to comply with *NABH*
accreditation standards for AYUSH Programmes.
This certificate is valid for the Scope as specified
in the annexure subject to continued compliance
with the accreditation requirements.

Valid from : February 24, 2019
Valid thru : February 23, 2022

Certificate No.
AH-2019-0067



Dr. Harish Nadkarni
Chief Executive Officer

National Accreditation Board for Hospitals & Healthcare Providers, 5th Floor, ITPI Building, 4A, Ring Road, IP Estate, New Delhi 110 002, India
Phone: +91-11-2332 3518/ 17/18/19/20, Fax: +91-11-2332 3515 • Email: info@nabh.co • Website: www.nabh.co



NABH as an organisation is ISQua Accredited

National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

Scope of Accreditation

National Institute of Homoeopathy **Certificate No. AH-2019-0067**

Block GE Sector III
Salt Lake, Kolkata - 700098, West Bengal

Valid from : February 24, 2019
Valid thru : February 23, 2022

General Services

- Acute Diseases Management
- Chronic Diseases Management

Homoeopathy Special Services

- Ano Rectal Disorders Non-Surgical
- Dermatology/ Skin Disorders
- ENT
- Cardiology
- Endocrinology/ Diabetology
- Oncology
- Gastroenterology
- Geriatrics
- Gynecology
- Infertility

- Pediatrics
- Lifestyle Disorders
- Obstetrics
- Ophthalmology
- Orthopedics
- Nephrology
- Neurology
- Palliative Care
- Psychiatry/ Mental Disorders
- Rehabilitation : Physiotherapy
- Respiratory Medicine
- Preventive Medicine (Homoeopathy Prophylaxis)



NABH as an organisation is ISQua Accredited

Dr. Harish Nadkarni
Chief Executive Officer

April 2013

PART-2 DRAFT REPORT

**Evaluation of Scheme
"National Institute of Homoeopathy (NIH), Kolkata"**



Department of AYUSH

Ministry of Health & Family Welfare, Government of India



Centre for Market Research and Social Development

241, Ground & Third Floor, Sant Nagar, East of Kailash, New Delhi-110065

Telephone: 011-46578478, 011-41621978, Fax: 011-40504743

Email: officemail.cmsd@gmail.com, cmsd2000in@yahoo.com

[Handwritten signature]

ACKNOWLEDGEMENTS

Centre for Market Research & Social Development, New Delhi, wishes to express its sincere gratitude to the Department of AYUSH, Ministry of Health and Family Welfare, Government of India for entrusting this work to us. We express our sincere thanks to the officials of Department of AYUSH for their timely suggestions and advice, and for their support throughout the evaluation.

We are greatly indebted to the officers of National Institute of Homoeopathy for their kind cooperation and support extended towards this evaluation study. We are also thankful to the staffs of the Institute for providing us with the best available data and observations required for the study. Our thanks are also due to the faculties, students and patients for giving us the relevant data and information required for the study.

We gratefully acknowledge the professional contributions of all the staffs of Centre for Market Research & Social Development for their involvement in the study. Special acknowledgement goes to Shri Swarup Panigrahi for his sincere association in the successful completion of the evaluation.



Dr. Girja Bhusan Nanda
(Director)



CONTENTS

<u>CHAPTER</u>		<u>PAGE</u>
	EXECUTIVE SUMMARY	i-iv
I	BACKGROUND, STUDY OBJECTIVES & METHODOLOGY	1-3
II	SCHEME OBJECTIVES	4-7
III	FINANCIAL PERFORMANCE OF THE SCHEME	8-10
IV	ACHIEVEMENTS UNDER THE SCHEME	11-33
V	IMPACT OF THE SCHEME	34-35
VI	CONCLUSIONS & SUGGESTIONS	36-37
ANNEXURE	PHOTOGRAPHS OF PHYSICAL VERIFICATION OF NIH	38-43



EXECUTIVE SUMMARY

On behalf of the Department of AYUSH, Ministry of Health & Family Welfare, Government of India, Centre for Market Research & Social Development evaluated the scheme of National Institute of Homoeopathy (NIH) India, in order to review the implementation and impact of the scheme.

The broad objective of the evaluation was to assess the achievements of the assistance provided by the Department of AYUSH under the scheme. This would enable the Department to eliminate deficiencies and constraints if any, of the Institute, promote development of the Institute in terms of performance and better facility. The major findings of the evaluation are given hereunder.

- There are primarily four activities undertaken in NIH, i.e., teaching, hospital, research and administration. The Director is the Chief Executive of the Institute and is responsible for overall management of the organization. The Heads of the Departments are responsible for day to day functioning of their respective departments. The Management of the Institute is under the control of Governing Body and the financial matters are supervised by the Standing Finance Committee, constituted by the Department of AYUSH.
- At the start of the XI plan, there was an outlay of Rs. 45 crore for the scheme of NIH. However, cumulative year wise budget estimation (BE) for the scheme was raised to Rs. 98 crore, which was more than double of initial outlay. The revised estimation (RE) for the scheme was raised from Rs. 17 crore to Rs. 18.74 in 2008-09, from Rs. 20 crore in 2009-2010 to Rs. 32 crore in 2010-11; and overall, there was an increase of 14% in the revised estimation than the budget estimation.
- NIH has got most of the grant from the Department of AYUSH. The Institute has got Rs. 118.92 crore from Department of AYUSH in last five financial years as grant-in-aid. It has got Rs. 3.39 lakh from Directorate of State Health Services as the scholarship for students. In the year 2007-08, NIH had received a sum of Rs. 21,830/- from the State Governments of Tripura and Uttar Pradesh as the SC/ST grants. The income of the Institution is primarily from OPD, IPD registration fees and tuition fees from the students.



- The funds received from the Department of AYUSH were almost utilized by the Institute and little amount of fund could not be utilized due to non-filling up of posts, purchases did not materialized up to the desired level as per the budget outlay.
- The main campus of the NIH is located at GE Block, Salt Lake in the city of Kolkata. The academy block, library block and the Hospital facilities are in the NIH main campus at GE - Block. The residential campus of NIH is located in JC - Block, close vicinity to the main campus. Besides the main and residential campus, a herbal garden at Kalyani (about 60 km. from Kolkata) is maintained by the Institute which has been envisaged for acclimatizing exotic species of plants.
- The Institute is conducting the 5 ½ years Degree Course in Homoeopathy viz., Bachelor of Homeopathic Medicine and Surgery (B.H.M.S.) and 3 years Post-Graduate Course viz., Doctor of Medicine in Homoeopathy [M.D.(Hom)] courses. A total number of 93 seats are available for the BHMS course in NIH. A total number of 36 seats are available for PG courses in the six subjects.
- The Institute has 29 permanent teaching faculties and 14 guest Lecturers. Out of the 29 teaching faculties 10 are Professors, 7 are Readers and 12 are Lecturers. Several faculty posts are vacant in many departments of the NIH for a long period. It would be seen that though there is increase in seats in both Undergraduate and Postgraduate courses for students in NIH in the recent past but there is no new posts created or sanctioned to meet the minimum standards of education prescribed by the regulating body from time to time.
- A total number of 91 students were admitted to BHMS course in the session 2012-13. It was surprising to observe that though the 14th batch PG students have been selected, they have not got the admission in NIH at the time of field verification. The NIH officials informed that as per CCH amendment regarding Guides, all students cannot be admitted due to shortage of faculties. However, immediately after the field visit of the NIH, as per Orders of Hon'ble High Court of Calcutta, all 14th batch PG students got admitted in the Institute.



- There are more than 10, 000 books available in the library. Computerised database maintained for the availability of books and the circulation of books is required to be updated at regular intervals. Purchase of new and latest edition of the books, journals, catalogues, and magazines should be made on regular basis to meet the growing demands of the students, faculties, researchers and doctors.
- The Institute has separate boys and girls hostels. The hostels have TV room, newspaper room and gymnasium with all modern fitness equipments as well as facilities for indoor and outdoor games.
- The staff quarters are in the residential campus of the Institute which is situated in the JC Block. Besides the staff quarters, there is guest house, Hostel for Postgraduate students (both boys' & girls') and International Hostel situated in the same residential campus.
- Till March 2011, 5 TOT/ROTP programmes have been conducted successfully by five departments namely Pharmacy, Pathology, Organon, Materia Medica and Repertory following the guidelines given by RAV, and teachers from all over India participated actively in those programmes.
- Hospital facility is the main strength of the NIH. Both OPD and IPD facilities are available in the NIH campus, further there is a peripheral OPD at Kalayani monitored by the NIH. There are 18 OPD sections including research, x-ray & USG and dispensary. In an average, 800-1000 patients are registered everyday for OPD in the hospital of the Institute at Salt Lake, while, 100-150 patients are registered everyday at the peripheral OPD at Kalyani. The Institute is providing indoor facilities through 100-bed hospital. The new hospital building is under construction for expansion 250 bed Hospital.
- There are nine physicians in the hospital consisting of one Deputy Medical Superintendent, 4 RMOs and 4 MOs. There are 29 paramedical staff and 63 other staff in the hospital.

- There is a central laboratory facility in NIH with the facilities for hematology, clinical pathology, and clinical bio-chemistry tests. There is the need of a full time pathologist in the NIH so that large number of pathological investigations can be carried out.
- The hospital has the radiology facilities such as X - rays including contrast X-rays, HSG, ultrasonography, etc. Though there is the all modern infrastructure and machineries for the radiology, there is no permanent radiographer. Thus, there is need to fill up the post of radiologist cum sinologist to take up more radiology investigations in the hospital.
- The prescribed medicines of IPD and OPD patients are dispensed by 13 staff from the in-house dispensary of the Hospital. Special care is taken to dispense quality medicine at free of cost. Hospital procures and maintains stocks of bulk quantities of medicines as per availability list (Formulary).
- Little effort is being given on research by the Institute. There is the need of financial assistance for research infrastructure, research laboratory, research publication, and also for research training & seminar at national and international level, which can improve the present research activities in the Institute.
- Most of the faculties and students are satisfied with the infrastructure and learning facilities available in NIH, and generally the quality of the learning experience for students. Given the excessively large number of study programmes available NIH, there is considerable scope for filling-up of the vacant faculty posts, in order to strengthen the learning experience for students, reduce staff teaching time and improve some of the issues like class sizes and student-faculty ratios.
- To keep up with the changing times and meet the need for greater transparency and improved service delivery, the Institute must implement monitoring and evaluation systems in all mandated activities of the institution.
- In-house training and reorientation programmes should be organized for all the staff for self improvement and appropriate measures should be taken for the staff participation in



CHAPTER-I

BACKGROUND, STUDY OBJECTIVES & METHODOLOGY

1.1 Background

National Institute of Homoeopathy (NIH) was established on 10th December 1975 in Kolkata as an autonomous organization, and later implemented as a central sector scheme of Department of AYUSH under the Ministry of Health and Family Welfare, Government of India. The Institute is affiliated to the West Bengal University of Health Sciences, and presently conducts the 5½ years degree course in Homoeopathy viz Bachelor of Homeopathic Medicine and Surgery (BHMS) since 1987 and 3 years Post-Graduate course viz Doctor of Medicine in Homoeopathy (MD [Hom.]) in six subjects.

The Institute is having a hospital with an outpatient department (OPD) and a 100 bed inpatients department (IPD) along with laboratory and pathology facilities. The Institute has separate boys' and girls' hostels as well as staff quarters and guesthouse.

1.2 Objectives & Scope of Evaluation of the Scheme

The current evaluation of the scheme for NIH was commissioned by the Department of AYUSH, Ministry of Health & Family Welfare, Government of India in order to review the implementation and impact of the scheme for NIH.

The broad objective of the evaluation was to assess the achievements of the assistance provided by the Department of AYUSH under the scheme. This would enable the Department to eliminate deficiencies and sickness if any, of the Institute, promote development of the Institute in terms of performance and better facility.

The study reviewed the status of the National Institute including the type and nature of Institute, size, spread, scope and magnitude. This has helped in identifying the constraints faced by the



those training programmes. Apart from that, top-down communication as well as decentralization of activities and management needs improvement.



Institute with regard to infrastructure, functioning, manpower, training, skills, development, technology, finance, etc.

As per the scope of the assignment, the evaluation is conducted in two parts. Part - 1 is "Short Term Deliverable" and Part - 2 is "Long Term Deliverables". In short term deliverable, the study report brings out the impact of the scheme in achieving its stated objectives implemented during XI Plan period (2007-08 to 2011-12). The Part - 1 evaluation report also brings out, in qualitative and quantitative terms, the efficiency and effectiveness of the scheme for NIH.

In long term deliverables, the evaluation report consists of the following.

- Documentation of specific objectives of the scheme for NIH
- Physical and financial achievements of the scheme for NIH
- Documents, achievements and analyze to what extent the outputs / outcomes fulfill the objectives of the scheme
- Find out the difficulties in implementation of the scheme
- Suggestions for better implementation of the scheme

1.3 Methodology

In order to generate information on the quantitative aspects of the study, interview was used as method and semi-structured questionnaires were used as the tool. Semi-structured Institute schedule was prepared to collect detailed information pertaining to the scheme. Apart from that CEO schedule, HOD/Faculty Schedule, Research Fellow Schedule, Student Schedule, and Patient Schedule were developed to conduct the interview with the CEO, HODs and faculties, research fellows, students and patients. Unstructured observations were also conducted in a natural setting to supplement the information provided by the respondents. Also, various components of the scheme and compounds were photographed during the physical verification. The above mentioned tools helped in capturing all the relevant process and impact indicators as well as the data that assisted in assessing the implementation and impact of the scheme. Also, scheme implementing officials engaged in implementing the scheme were interacted during the study period.



Secondary Research

Under secondary research, a thorough desk review was undertaken to develop insight into the key areas of the primary research. Various records available with implementing and monitoring officials were examined to ascertain relevant information regarding implementation of the scheme for NIH for the reference of the study.

Primary Research

Under the primary research was of two different modules i.e.,

- a) Qualitative Research for conducting the soft / intangible areas &
- b) Quantitative research for collecting information from the benefitted faculties, students and patients.

1.4 Sampling

Physical verification of the National Institute of Homoeopathy, Kolkata was undertaken for the evaluation of the scheme. During the evaluation, the HODs of all the academic departments, at least one faculty from each academic department, two students from each department, and 30 patients (covering both OPD and IPD) were randomly selected for the interview and assess the impact of the Institute.

1.5 Field Visit

The field visit to the Institute was conducted in January 2013. During the field visit, two senior research officers from Centre for Market Research and Social Development conducted the evaluation by collecting the data and information from the target respondents.

1.6 Data Management

All the questionnaires were scrutinized prior to the data entry. All questionnaires were scrutinized on the basis of specially drafted Scrutiny Notes and data analysis was done as per the Analysis Plans. Prior to data analysis, data was entered in the MS Excel package and contained all relevant range and consistency checks. Finally data were entered in SPSS 12.0 version and both qualitative and quantitative data was analyzed according to the analysis plan.



CHAPTER-II

SCHEME OBJECTIVES

The National Institute of Homoeopathy was established on 10th December, 1975, in Kolkata, as a Central Government Autonomous Organization of national importance, under the Ministry of Health & Family Welfare, Department of AYUSH, Government of India. All Central Government Rules with regard to Service matter are applicable at the NIH mutatis mutandis. The Institute has comprehensive facilities for teaching, research and patient care. The Institute aims at –

1. To develop patterns of teaching in undergraduate and postgraduate education, so as to demonstrate a high standard of medical education in homoeopathy to achieve competitive excellence.
2. To bring together as may be, in one place educational facilities of the highest order for the training of personnel in homoeopathy.
3. To attain self-sufficiency in Undergraduate and Postgraduate medical educations in homoeopathy to meet the country's needs for competent homoeopathic physicians and homoeopathic medical teachers.
4. Serving the society through education, empowering the youth to develop high levels of intelligence, emotional and spiritual quotient through scientific and professional knowledge thereby creating unlimited opportunities.
5. Outstanding patient care by providing service to the suffering individuals and providing better opportunity for learning the clinical aspects of homoeopathy.
6. Developing qualitative research in homoeopathy by which the students will develop an insight in further progress of the system of homoeopathy.
7. The growth of this science with professional and social support that is appropriately positions to take on the burden of disease amongst the rural and tribal poor, the urban slum and the under privileged, the diseased in the mind and in the body.



2.1 Mission

The mission of National Institute of Homoeopathy, Kolkata is to foster excellence in Homoeopathic Medical Education and Research, to educate and train under graduate, post graduate students and research scholars of homoeopathy in accordance with highest professional standards and ethical values unfettered by the barriers of nationality, language, culture, plurality, religion and to meet the healthcare needs of the community through dissemination of knowledge and service.

2.2 Vision

National Institute of Homoeopathy aspires to be the India's most energetic and responsive organization, offering unparalleled educational opportunities in homoeopathy for learner community seeking the highest quality Undergraduate, Postgraduate, and continuing personal or professional enrichment in higher education and selected professionals that will lead to formation of scholarly community serving the Nation by advancing, sharing and applying knowledge, and by facilitating the development of thoughtful, creative, adaptable, contributing citizens.

2.3 Goals

1. To facilitate accessible and affordable quality education that leverages the students with scholarly and professional skills and moral principles in global prospective.
2. To augment both faculty and students research addressing basic and regional problems.
3. To integrate a national and international perspective into fundamental fivefold missions of teaching, research, patient care, training and consultancy.
4. To cultivate adaption of ethics, morality, healthy practice in professional life by installing habit of continual learning.
5. To explore for knowledge and wisdom in order to build a wealth of academic resources indispensable for a sustainable development to accomplish the status of a leading research-intensive Institution; and to engage in transferring of knowledge to the community in order to strengthen and elevate the community potential, and to increase the competitiveness of India in homoeopathy at the global level.



2.4 NIH Objectives

1. To promote and develop Homoeopathy.
2. To produce Graduates and Postgraduates in Homoeopathy.
3. To conduct research on various aspects of Homoeopathy.
4. To provide medical care through Homoeopathy to the suffering humanity.
5. To provide and assist in providing services and facilities for research, evaluation, training, consultation and guidance related to Homoeopathy.
6. To conduct experiments and develop patterns of teaching in Undergraduate and Post graduate education on various aspects of Homoeopathy.

2.5 Quality Statement

In order to meet the challenges of the knowledge era and to keep with the pace of knowledge explosion in higher education, the National Institute of Homoeopathy is committed to inculcate and sustain the quality in all the dimensions of Homoeopathic Education viz. teaching, research, providing service to suffering humanity, catering to the regional and global needs.

2.6 Administration & Management of NIH

There are primarily four activities undertaken in NIH, i.e., teaching, hospital, research and administration. The Director is the Chief Executive of the Institute and is responsible for overall management of the organization. The Heads of the Departments are responsible for day to day functioning of their respective departments. The Management of the Institute is under the control of a Governing Body and the financial matters are supervised by the Standing Finance Committee, constituted by the Department of AYUSH. The president of the governing body is the Hon'ble Union Minister of Health & Family Welfare, Govt. of India, while the vice-president is the Hon'ble Minister of Health & Family Welfare, Govt. of West Bengal. Academy In-Charge is responsible for overall academic activities of the Institute.

2.7 NIH Campus

The main campus of the NIH is located at GE Block, Salt Lake in the city of Kolkata. The main campus is spreading over 16 acres of land. The academy block, library and the Hospital facilities



are in the NIH main campus. The residential campus of NIH is located on 10 acres of land at JC Block in Salt Lake, which is in close vicinity to the main campus. Residential quarters for the employees, PG hostels, international hostels and guesthouse facilities are available in the residential campus. Besides the main and residential campus, a herbal garden stretched over a land area of 25 acres at Kalyani (about 60 km. from Kolkata) is maintained by the Institute which has been envisaged for acclimating exotic species of plants and to build a repository of authentic specimens of medical plants for use by students and researchers.



CHAPTER-III

FINANCIAL PERFORMANCE OF THE SCHEME

3.1 Plan and Actual Expenditure under the Scheme

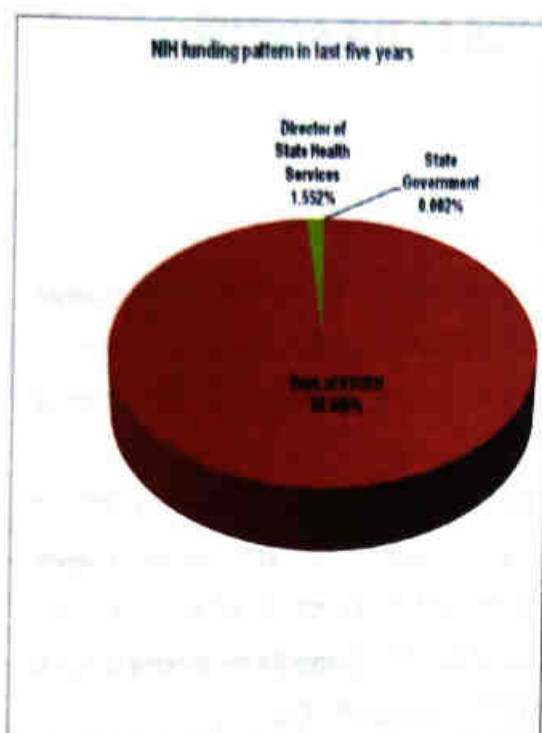
At the start of the XI plan, there was an outlay of Rs. 45 crore for the scheme of NIH. However, cumulative year wise budget estimation (BE) for the scheme was raised to Rs. 98 crore, which was more than double of initial outlay. The revised estimation (RE) for the scheme was raised from Rs. 17 crore to Rs. 18.74 in 2008-09, from Rs. 20 crore to Rs. 32 crore in 2010-11; and overall, there was an increase of 14% in the revised estimation than the budget estimation. The study observed that the Department has released the grant amount according to the revised estimation. However, there was contrasting figures between the financial data of the Department and financial data of NIH. While the Department has the expenditure figure of Rs. 111.79 crore for the scheme of NIH in XI plan, the Institute has the receipt figure of Rs. 118.92 crore from the Department as grant-in-aid for the same period.

Table-3.1: Year wise break-up of plan and actual expenditure incurred under the scheme of NIH in XI Plan period

Financial Year	Budget Estimation (BE)	Revised Estimation (RE)	Actual Expenditure by the Department (AE)	%age of actual expenditure against the revised estimation
2007-08	19.00	19.00	19.68	103.6
2008-09	17.00	18.74	18.74	100.0
2009-10	20.00	20.00	20.00	100.0
2010-11	20.00	32.00	32.00	100.0
2011-12	22.00	22.00	21.37	97.1
Total	98.00	111.74	111.79	100.0

(Figures in Crore Rupees)

3.2 Receipt & Utilization of Grant by NIH



The evaluation observed that during the XI plan, NIH has got most of the grant from the Department of AYUSH. While the Institute has got Rs. 118.92 crore from Department of AYUSH as the grant-in-aid during XI plan, it has got Rs. 3.39 lakh from Directorate of State health Services as the scholarship for students. In the year 2007-08, NIH had received a sum of Rs. 21, 830/- from the State Governments of Tripura and Uttar Pradesh as SC/ST grant. The details of the amount of the grant received by the Institute from different sources has been given in the below table.

Table-3.2: NIH funding pattern

Source of Funding	Type of Fund (Grant/Aid/ Loan)	Funding Organization	Year-Wise Funding (in Rs. Crore)				
			07-08	08-09	09-10	10-11	11-12
State Govt.	Grant	Government of Tripura and Uttar Pradesh	0.0022	0	0	0	0
Central Govt.	Grant-in-Aid	Dept. of AYUSH	17.46	21.29	22.33	35.35	22.49
Others Sources	Scholarship	Director of State Health Services	0.0031	0.0096	0.0026	0.0186	0
Total			17.47	21.30	22.33	35.3686	22.49

Handwritten signature

The income of the institution is primarily from OPD, IPD fees and tuition fees from the students. The evaluation observed that the income of the Institute has been increased gradually in last three years. The details of income in last five years has been given in the below table.

Table-3.3: NIH in-house income

Year	OPD Fees	In-Patient Fees	Others	Total Income
2007-08	3.12	3.97	32.73	39.82
2008-09	3.90	4.45	35.61	43.96
2009-10	4.10	5.96	103.77	113.83
2010-11	5.00	6.62	64.14	75.76
2011-12	7.37	5.35	88.73	101.45

(In Rs. Lakh)

On an average, the Institute's annual expenditure is Rs. 20 crore and the Department of AYUSH funds the amount. The funds received from the Department were almost utilized (96%) by the Institute during the XI plan period and little amount of fund could not be utilized due to non-filling up of posts, purchases did not materialized up to the desired level as per the budget outlay. At the same time, it was observed that no fund was earmarked for the Public Health Intervention activities, Seminars, Conferences, Fairs etc. organized by the Institute. These expenses are generally met from out of Academic Expenses.

Table-3.4: Utilization of fund received from Department of AYUSH as grant-in-aid

Year	Amount Received (Rs. in Crore)	Amount Spent (Rs. in Crore)	%age of utilization	Reasons for Unspent Amount
2007-08	17.46	14.17	81.2	Could not be utilized in full due to non-filling up of posts, purchases not materialized up to the desired level as per budget outlay
2008-09	21.29	23.36	109.7	
2009-10	22.33	21.87	97.9	
2010-11	35.35	34.22	96.8	
2011-12	22.49	20.92	93.0	
Total	118.92	114.54	96.3	

CHAPTER-IV

ACHIEVEMENTS UNDER THE SCHEME

1. TEACHING ACTIVITY

1.1 Study Courses

The Institute is conducting the 5½ years Degree Course in Homoeopathy viz., Bachelor of Homeopathic Medicine and Surgery (B.H.M.S.) and 3 years Post-Graduate Course viz., Doctor of Medicine in Homoeopathy [M.D.(Hom)] courses. These are fulltime regular courses and recognized by the Govt. of India. The Institute is affiliated to the West Bengal University of Health Sciences, Kolkata for both these courses. Besides the BHMS and MD courses, the Institute conducts periodic TOT/ROTP/CME programs.

1.1.1 Bachelor of Homoeopathic Medicine and Surgery (BHMS)

Since December 1987, the Institute has been conducting regular 5½ years Degree course in Homoeopathy viz. Bachelor of Homeopathic Medicine and Surgery (BHMS) including 1 year compulsory Internship, affiliated to the University of Calcutta (up to 15th batch affiliated to university of Calcutta). Students from 16th batch BHMS onwards are getting admission under the West Bengal University of Health Sciences. There are 12 subjects in which degree courses are undertaken, and the list of those subjects is given below. The eligibility criteria for getting admission to the course is passing of intermediate or equivalent examination with minimum 50% marks (45% for SC/ST) in aggregate and applicant must pass five subjects individually including the subjects of English, Physics, Chemistry & Biology. The selection of candidates for BHMS course is done through All India Entrance Test conducted by NIH in various centers all over India followed by subsequent merit list and counseling. A total number of 93 seats are available for the BHMS course in NIH. Category wise number of availability of seats is given below.



Table-4.1: List of subjects in which BHMS course is undertaken in NIH

Sl. No.	Subject
1	Anatomy
2	Physiology & Bio-Chemistry
3	Homeopathic Pharmacy
4	Organon of Medicine and Homoeopathic Philosophy
5	Materia Medica
6	Pathology and Microbiology
7	Forensic Medicine and Toxicology
8	Practice of Medicine
9	Community Medicine
10	Case Taking and Repertory
11	Obstetrics and Gynecology
12	Surgery

Table-4.2: Category wise number of seat availability for BHMS course in NIH

Category	Number of seats available in BHMS
General	30
OBC	16
SC	9
ST	5
Physically handicapped	1
Nominees	14 (From 14 States/UTs)
BIMSTEC	5
Foreign Nationals	1 (Self financing)
Sri Lanka	10
Malaysia	2

1.1.2 Doctor of Medicine in Homoeopathy [MD (Hom.)]

From the session 1998-99, NIH is conducting Postgraduate course viz. Doctor of Medicine in Homoeopathy (MD [Hom.]) affiliated to the University of Calcutta. From 6th batch, 2004-05



onwards, the PG course is affiliated to the West Bengal University of Health Sciences. The PG course started in three subjects, i.e., Materia Medica, Organon, Repertory. In 2009-10 Practice of Medicine and Pediatrics were introduced and Homoeopathic Pharmacy was introduced as the PG course in 2010-11. Currently NIH has been conducting PG course in six subjects and three new subjects i.e., Psychiatry, Dermatology and FMT have been proposed by the NIH to be introduced. A total number of 36 seats are available for PG courses in the six subjects and the department wise number of seats available for the PG course is given below.

Table-4.3: List of subjects in which MD course is undertaken in NIH

Subject	Number of seats available
Homeopathic Pharmacy	3
Organon of Medicine	9
Homoeopathic Materia Medica	9
Practice of Medicine	3
Repertory	9
Pediatrics	3

1.2 Teaching Faculty

1.2.1 Faculty Status in NIH

The Institute has 29 permanent teaching faculties and 14 guest Lecturers. Out of the 29 teaching faculties 10 are Professors, 7 are Readers and 12 are Lecturers. The department wise number of teaching faculties and their ranks is given below.

Table-4.4: Cadre wise number of faculties in each department of NIH

Sl. No.	Name of the Department	Professor	Reader	Lecturer	Total number of teaching staff	Guest Lecturer
1	Anatomy	1	0	1	2	1
2	Physiology & Bio-Chemistry	1	1	1	3	1

3	Homeopathic Pharmacy	1	1	1	3	0
4	Organon of Medicine and Homoeopathic Philosophy	1	1	1	3	0
5	Materia Medica	3	2	1	6	0
6	Pathology	0	1	1	2	0
7	Forensic Medicine and Toxicology	1	1	0	2	0
8	Practice of Medicine	1	0	2	3	2
9	Community Medicine	0	0	1	1	1
10	Case Taking and Repertory	0	0	1	1	1
11	Pediatrics	0	0	0	0	1
12	Obstetrics and Gynecology	0	0	1	1	1
13	Surgery	1	0	1	2	6
Total		10	7	12	29	14

The evaluation further observed that several faculty posts are vacant in many departments of the NIH. Due to recruitment rules of the NIH, many Lecturers have not been promoted to Reader and from Reader to Professor for last 7-8 years for which many Lecturers reported to be unhappy with the NIH's recruitment rules and suggested for the modification. Details of the faculty position and vacant posts are given in the below table.

Table-4.5: Faculty position in NIH

CADRE	As per CCH (Amended in September 2002)	Sanctioned Post	In-position	Vacant Post
Professor	13+6=19	11	10	1
Reader	15+6=21	20	07	13
Lecturer	15	19	12	7

1.2.2 Opinion & Satisfaction of faculties

During the interaction with the faculties of the Institute, it was noticed that majority (70%) faculties are satisfied with the adequacy of courses and study materials in NIH. However, other faculties reported that the courses and study materials need to be updated at par with Medical Council of India (MCI) curriculum so that the students could undergo further higher studies in the streams and further avenues could open up for them. Most of the faculties (80%) are satisfied with the availability of various facilities in NIH. However, majority of the faculties were dissatisfied with the classroom facilities and internet facilities available in NIH. Most (90%) faculties said that the faculty-student ratio in the Institute is bad, and there is urgent need of appointment of new faculties in various departments. Majority of faculty members expressed their concern for the vacant teaching posts. They suggested that the existing recruitment rule of the Institute needs to be amended to facilitate promotion of teachers, deprived of the same for a long time and promotion in a time bound manner. This shall facilitate the filling up vacant teaching posts.

1.3 Departments in NIH

As discussed above, there are thirteen academy departments in NIH and the evaluation visited each department and tried to have a glance on the functioning and teaching pattern of each department. A brief note of each department has been given hereafter.

1.3.1 Department of Anatomy

Presently the dissection & histology demonstration are conducted in a temporary hall adjacent to the department. The study noticed that the space of the hall is quite small for the number of students. The extension and renovation work of dissection room and museum of the department is in progress for a long period, and needs to be completed as soon as possible. Presently, there is one Professor, one Lecturer and one guest Lecturer in the department, and the Reader post was found to be vacant.

1.3.2 Department of Physiology and Bio-chemistry

The department has a practical hall and a bio-chemistry laboratory. No post was vacant in the department. One Professor, one Reader, one Lecturer and one guest provide teaching to the students in the department.



1.3.3 Department of Organon of Medicine

For teaching facility, the department has two rooms. There are one Professor, one Reader and one Lecturer in the department, and as per the CCH norms, four posts are vacant in the department.

1.3.4 Department of Pharmacy

There is a practical hall, museum, department room and pharmacology in the department. There are one Professor, one Reader and one Lecturer in the department, and as per the CCH norms, one Professor post and one Reader post is vacant in the department.

1.3.5 Department of Materia Medica

The department has four rooms. There are three Professors, two Readers and one Lecturer in the department, and as per the CCH norms, one Reader post and one Lecturer post is vacant in the department.

1.3.6 Department of Pathology and Microbiology

The department has a departmental room, a laboratory and a practical hall. There are one Reader and one Lecturer in the department, and as per the CCH norms, the post of Professor is vacant in the department.

1.3.7 Department of Forensic Medicine and Toxicology

The department has a departmental room and a museum. There are one Professor and one Reader in the department, and as per the CCH norms, the post of Lecturer is vacant in the department.

1.3.8 Department of Practice of Medicine

The department has only a departmental room. There are one Professor, two Lecturers and two visiting Lecturers in the department, but still three Readers posts are vacant in the department.

1.3.9 Department of Surgery

The department has a departmental room and an operation theatre. At present, there are one Professor, one Lecturer and six visiting Lecturers in the department. However, as per the CCH norms, the Reader post is vacant in the department.

1.3.10 Department of Obstetrics and Gynecology



There is a departmental room and a labour room in the department. There are only a Lecturer and a visiting Lecturer in the department, and the Professor and Reader posts are vacant.

1.3.11 Department of Community Medicine

The department has departmental room and a museum. There are only a Lecturer and a visiting Lecturer in the department, and the Professor and Reader posts are vacant.

1.3.12 Department of Repertory

The department has a departmental room and a computer lab cum class room. There are only a Lecturer and a visiting Lecturer in the department, and two Professor and two Reader posts are vacant in the department.

1.3.13 Department of Pediatrics

The department has a departmental room. There are only one Professor and visiting Lecturer in the department, and the post of a Reader is vacant in the department.

1.4 Students

1.4.1 BHMS Students

The admission process for the BHMS course in NIH takes for four to five months. The dates for the admission of 24th batch (Session 2012-13) are as under.

- ☐ Advertisement Published on : 23.03.2012
- ☐ Entrance Test held on : 03.06.2012
- ☐ Result of Test published on : 18.06.2012
- ☐ First Counselling held on : 03.07.2012
- ☐ Second Counselling held on : 13.08.2012

Total 91 students has been admitted to the 5 ½ years BHMS Degree Course in the session 2012-2013. Out of which Gen – 30, OBC – 27, SC – 10, ST – 05, Nominees – 09, Sri Lanka – 09, Japan – 01.



Table-4.6: BHMS student details of last five batches

Students details	2007-08	2008-09	2009-10	2010-11	2011-12
Batch	19 th	20 th	21 st	22 nd	23 rd
Male	33	24	51	39	88
Female	17	22	25	47	40
General	35	40	27	28	48
SC	06	01	10	09	33
ST	07	05	02	04	09
OBC	02	00	14	20	05
Nominated	11	12	10	11	17
Foreign Students	01	08	13	14	10
Drop out	03	00	00	01	14
From WB	05	04	22	22	35
From outside WB	45	42	54	64	53

The university result of the BHMS course of NIH is good and satisfactory. The details of university result of the BHMS course of NIH for last three years are as under.

Table-4.7: Result of last three years

BATCH	2010		2011		2012	
	R	S	R	S	R	S
First	33/45	10/12	45/71	22/26	49/87	37
(In %)	73.33	83.33	63.38	84.61	56.32	
Second	13/48	34/35	35/43	8/8	44/67	23
(In %)	27.08	97.14	81.39	100	65.67	-

Third	47/51	4/4	44/48	4/4	42	-
(In %)	92.15	100	91.66	100	-	-
Four	27/38	11/11	32/52	20/20	47	-
(In %)	71.05	100	61.33	100	-	-

1.4.2 MD Students

Out of the 36 PG seats, 34 seats are filled up by All India Admission Test conducted by affiliating The West Bengal University of Health Sciences (WBUHS), Kolkata and subsequent counseling. 2 seats are earmarked for the students of BIMSTEC countries; nominated through Indian Council for Cultural Relations (ICCR). Apart from that, there is proposal for one seat to be earmarked for the students of North East States to be filled up by nomination from session 2012-15.

The evaluation found that 12th Batch PG students are preparing their dissertation work, while 13th Batch PG students are pursuing their housejobship. It was surprising to observe that though the 14th batch PG students have been selected, they are yet to get the admission in NIH. The NIH officials said that due to shortage of faculties, the 14th batch PG students have not been admitted yet. However, as per the order of the High Court, Kolkata, all the PG students should be get admitted latest by 31st January 2013. After the order, NIH has taken initiatives for the admission of 14th batch PG students. The details of students of the 13th batch PG students are given below.

Table-4.8: Details of 13th batch PG students in NIH

General		SC		ST		PH		OBC		BIMSTEC		Total	
M	F	M	F	M	F	M	F	M	F	M	F	M	F
8	7	4	2	1	1		1	8	2	0	1	21	14

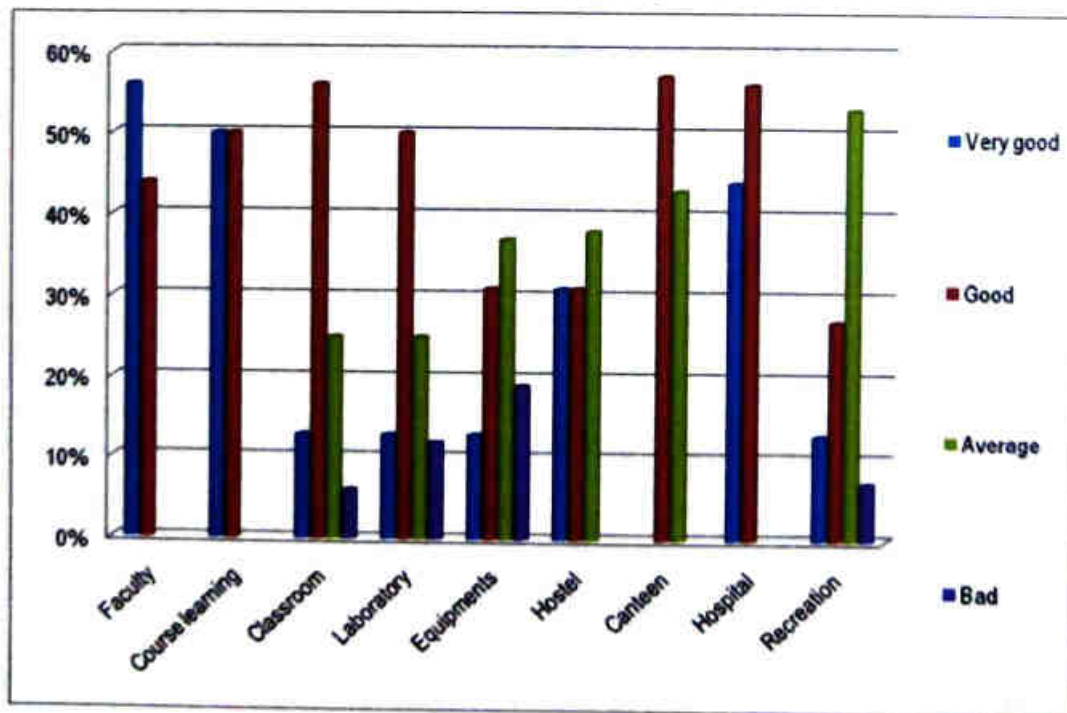
1.4.3 Fee(s) structure of the courses

During the interaction with the students in NIH, it was observed that the total amount of the BHMS course is between Rs. 50000 to Rs. 1 lakh, whereas the total amount of the MD course is between Rs. 1 lakh to 5 lakhs. Most of the students reported that they have chosen the NIH for the study since it is a national Institute of repute and best quality of teachers and study atmosphere.

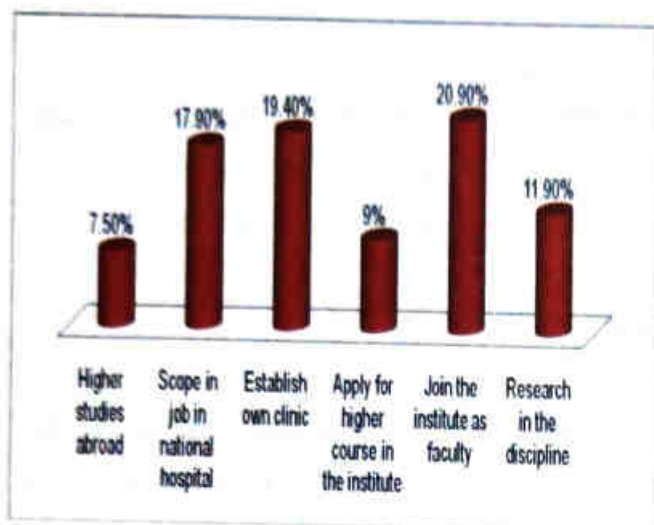
1.4.4 Satisfaction level of the students

When asked about the quality of facilities in NIH, all the students were seem to be happy with the quality of faculties, course learning and hospital. However, a significant percentage of students reported the quality of recreation facilities, canteen, equipments, laboratory and class rooms were just average or below par. Overall, majority (63%) students in NIH liked the Institute, while 37% did not like the Institute for the facilities available for the students. On being asked to rate the Institute's emphasis on developing academics, promoting scholars and intellectual qualities, 44% students rated it as very good, 50% rated good, and 6% rated it as average.

Satisfaction level of the students with the quality of facilities available in NIH



1.4.5 Future prospects of students in NIH



Being asked about their future prospects, highest percentage (21%) of students said that they would join the Institute as a faculty, while 19% said that they would establish their own homoeopathy clinic and 18% said that there is the scope of job in renowned national level homoeopathy hospitals after the

completion of the course. Some students also said that the present course would help them for research in the discipline, or help to apply for higher course in the Institute, or help for higher studies abroad. Overall, most students reported that their present course in the Institute has a good future prospect, and most (81%) students have good expectation from the course to carry out advance degree course in future. Majority of the students were satisfied with the teachers and the teaching process adopted.

2. LIBRARY & INFORMATION SERVICES

The present NIH library is in the area of 4000 sq. ft. (approx.) and there are three reading rooms in the library. The library section will be shifted to the new building after the construction. The library timing is from 9 AM to 5.30 PM. There are more than 10000 books available in the library and the type and number of books available in the NIH library is given below.

Table-4.9: Type and number of books available in the NIH library

Type	Number of books
Total including book bank	25671
Title	10022
Rare books on homoeopathy (most of them published in 19 th century)	65
Bound Volumes (Periodicals)	62
Foreign Periodicals	31
Indian Periodicals	31

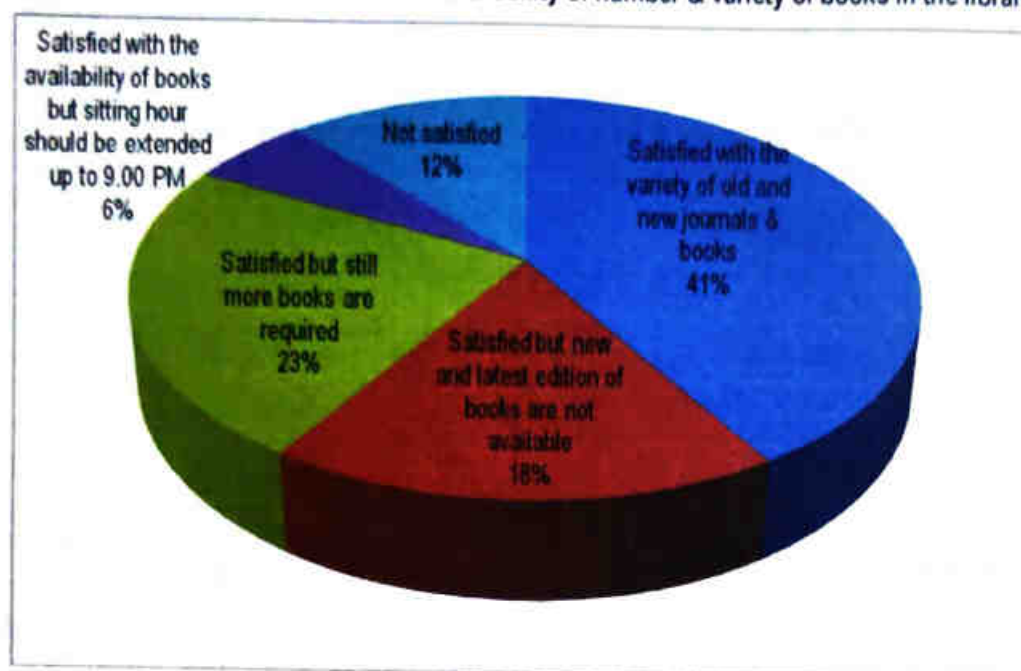
The books in the library are collected and classified according to the *Universal Decimal Classification* (UDC), while the *Classified Catalogue Code* (CCC) are used for cataloguing. The library has a computerised database on micro-documents of homoeopathy. Computerised database is maintained for the availability of books and the circulation of books and requires regular update. Internet facility is available in the library and the library provides reprographic services as well as current awareness services (CAS) to its Readers. The library also provides inter-library-loan and audio-visual services to its Readers. The library also provides reference service via direct reference tools and text service for advancement of learning. The Institute also publishes a quarterly bulletin incorporating scientific articles by the faculty members, Postgraduate trainees, interns, other students and distinguished guest authors.

During the interaction with the students, it was observed that most (88%) students are satisfied with the number and variety of books in the library. However, 23% students reported that more number of books are required in the library, while 18% reported that latest edition of books are not available in the library. Also, very few students opined that the sitting hour in the library should be



extended up to 9.00 pm, which is presently 9.00 am to 5.00 pm. The book keeping tenure is for 15 days and all the students reported that they do not find any difficulty in getting books from the library.

Satisfaction level of the students with availability of number & variety of books in the library



[Handwritten signature]

3. RESIDENTIAL FACILITY

3.1 Hostel Facility

The Institute has separate boys and girls hostels. Presently there are three boys' hostels. The details of the boys' and girls' hostels with their capacity and number of students residing are given below. Besides the below mentioned hostels, there are international hostels for international students. The intake capacity of the boys' international hostel is 69 and girls' international hostel is 42. The international hostel buildings have been taken over by the NIH and the international students will be shifted to those hostels recently. The hostels have TV room, newspaper room and gymnasium with all modern fitness equipments as well as facilities for indoor and outdoor games.

Table-4.10: Details of hostels in NIH

Hostel Type	Name of the Hostel	Intake Capacity of Students	Number of Students Residing
UG	NIH Boys' Hostel	203+30 (Dormitory)	158
Interns' Hostel (UG)	NIH Interns' Hostel	51	50
PG	NIH PG Boys' Hostel	53	43
UG	NIH Girls' Hostel	135	145
PG	NIH PG Boys' Hostel	21	27

3.2 Staff Quarters

The staff quarters are in the residential campus of the Institute which is situated in the JC block. There are 24 staff quarters consisting of Type II - 8 quarters, Type III - 8 quarters, Type IV - 4 quarters, and Type V - 4 Quarters. Besides the staff quarters, there is a guesthouse in the same residential campus.



4. TOT/ROTP/CME PROGRAMMES

Till March 2011, 5 TOT/ROTP programmes have been conducted successfully by five departments namely Pharmacy, Pathology, Organon, Materia Medica and Repertory following the guidelines given by RAV, and teachers from all over India participated actively in those programmes. Apart from that, during the period from March 2011 to 2012, 5 CMEs for physicians were conducted by the NIH hospital. The feedbacks of those programmes are encouraging



5. HOSPITAL FACILITY

Hospital facility is the main strength of the NIH. Both OPD and IPD facilities are available in the NIH campus, while there is a peripheral OPD at Kalayani monitored by the NIH. There are 18 OPD sections including research, x-ray & USG and dispensary. In an average, 800-1000 patients are registered everyday for OPD in the hospital of the Institute at Salt Lake, while, 100-150 patients are registered everyday at the peripheral OPD at Kalyani. The Institute is providing indoor facilities through 100 bedded hospital. There are 71 beds for general category patients, 6 beds for pediatrics, 10 beds for surgery, 5 beds for obstetrics and gynecology, and 8 beds in AC cabins. There is a patient waiting hall near to the registration counter where patients wait for consultation and medicines.

5.1 Hospital Staff

There are nine physicians in the hospital consisting of one deputy medical superintendent, 4 RMOs and 4 MOs. There are 29 paramedical staff and 63 other staff in the hospital. Category wise number of hospital staff is given in the below table.

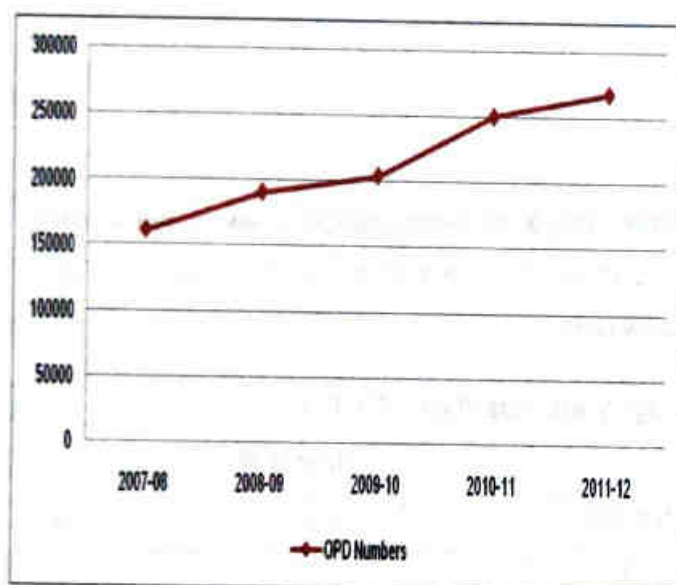
Table-4.11: Category wise hospital staff in NIH

Paramedical Staff		Other staff	
Category	Number	Category	Number
Nursing Superintendent	1	UDC	1
Matron	1	Stenographer	1
Nurse	13	Ward Boy	7
Dietician	1	Ayah	5
Radiographer	1	Safaiwala	13
Dispenser	3	Cook	7
Lab Technician	4	GDA	8
ECG Technician	4	Attendant	21
Physiotherapist	1		

5.2 Patients

A large number of patients come from far-flung areas seek treatment in the OPD. The OPD registrations is held from 9 AM to 12 PM (for three hours). There is special clinic for geriatric, cancer, pediatric and maternal care. There is large number (800-1000) of OPD registration held everyday. The registration counter does both OPD and IPD registration, all the registration are done manually. Registration and hospital charges are collected in the registration counter through three terminals. The registration counter functions from 9 am to 3 pm to register OPD patients, new & old separately and IPD admission.

OPD and IPD records of NIH



Increase in OPD numbers in NIH

The study observed that over the years there was a gradual increase of the OPD numbers in NIH. While there was an increase of 18% in the OPD numbers in 2008-09 than the previous year, the increase was 7% in 2009-10, 23% in 2010-11, and 7% in 2011-12. The annual average increase of OPD numbers in NIH was 14% in the XI plan period.

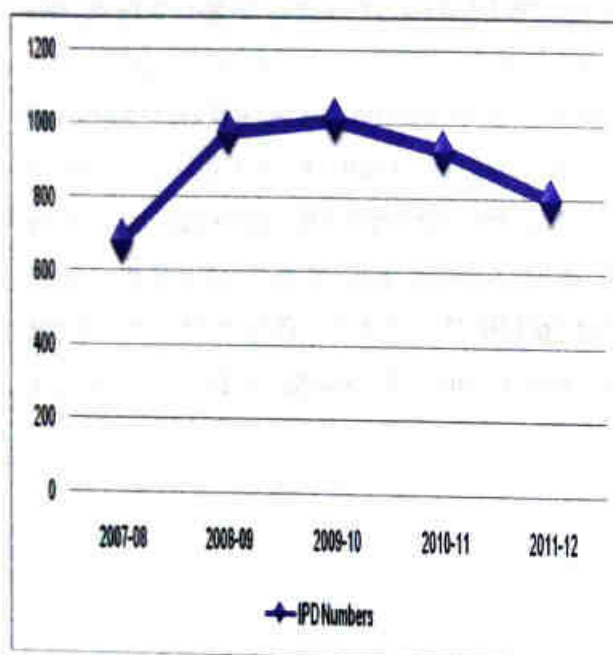
Table-4.12: OPD records in NIH (SALT LAKE OPD+PERIPHERAL OPD) in last five years

Month	2007-08	2008-09	2009-10	2010-11	2011-12
APR	12147	14011	14795	17179	18974
MAY	12480	14770	14194	19474	23257
JUNE	12414	14581	18703	21519	23620
JULY	13885	19057	21586	23938	28812
AUGU	16379	20318	19148	23105	15747

Signature

SEPT	14179	16363	9705	21633	27617
OCT	12239	12246	21030	21827	19684
NOV	13801	16203	19082	21378	21451
DEC	12661	16826	17072	20220	20683
JAN	13086	15893	13848	17994	20776
FEB	13829	16941	15947	19671	22669
MAR	14305	13770	19579	23003	25098
TOTAL	161405	190979	204689	250941	268388

- * OPD SALT LAKE (Upto August 2006) then includes peripheral OPD (Kalyani & Gobardanga)
- * KLAYANI OPD (TRIWEEKLY FROM SEP.2006 to 2009) & WEEKLY FROM MARCH 2009
- * OPD GOBORDANGA WAS CLOSED ON MARCH 2009



IPD numbers in NIH

The study observed that while there was an increase in IPD numbers in NIH in 2008-09 and 2009-10 than the previous years, it gradually decreased in 2010-11 and 2011-12. While there was an increase of 43% in the IPD numbers in 2008-09 than the previous year, the increase was 4% in 2009-10. In the subsequent years, the IPD numbers decreased by 8% and 14% respectively in 2010-11 and 2011-12.

Table-4.13: IPD records in NIH in last five years

MONTH	2007-08	2008-09	2009-10	2010-11	2011-12
APR	72	67	96	83	62
MAY	67	72	101	76	84
JUNE	51	81	126	73	65
JULY	76	99	114	99	77

[Handwritten Signature]

AUGU	77	96	82	113	32
SEPT	57	72	50	101	66
OCT	38	60	76	60	42
NOV	44	91	56	54	59
DEC	40	74	77	71	39
JAN	55	82	64	67	106
FEB	56	94	73	61	84
MAR	48	89	97	73	83
TOTAL	681	977	1012	931	799

Impact on patients

During the interaction with the patients, it was observed that a good majority (84%) of patients have come to the Institute for treatment by train and from different districts of West Bengal. Majority (57%) patients said that they have come to the Institute for treatment because of the reputation of the Institute, while half of the patients said that they have come to the Institute for treatment after the advice of the family. A good majority (86%) of patients reported that they were satisfied with the attitude of the doctors treating them, while all the surveyed patients reported that they were satisfied by the treatment received in the hospital of NIH. Majority of the IPD patients reported that they were satisfied with the cleanliness in the ward, bathroom, testing centre, and other facilities available in the IPD.



5.3 Investigation Facilities

5.3.1 Laboratory

There is a central laboratory facility in NIH. The laboratory has all the facilities for hematology & clinical pathology, and clinical bio-chemistry. Investigation of blood, urine, stool, etc. are being carried out in clinical pathology while blood sugar, urea, creatinine, SGPT, SGOT, alkaline phosphatase, bilirubin, total protein, albumin, globulin, cholesterol, triglyceride, HDL, LDL, uric acid, etc. are being investigated in biochemistry laboratory.

In an average, while 400-500 cases were investigated in a month in the laboratory in 2011-12, it has been reduced to 300-400 per month in 2012-13. The cases have been reduced because there is a pathologist who is working as a part timer (contract basis) for 40 hours in a month. About two hours of work in a day for a pathologist is not sufficient for a National Institute. Thus, there is the need of a full time pathologist in the NIH so that large number of investigations can be done. Also, presently only routine investigations are carried out in the laboratory. If regular pathologist appointed, other major investigations like sputum, semen, etc. could be carried out which are presently being carried out outside.

5.3.2 Radiology

The hospital has the radiology facilities such as X-rays including contrast X-rays, HSG, ultrasonography, etc. Though there is availability of all modern infrastructure and machineries for the radiology, there is no permanent radiographer. There is only one radiographer who is conducting 10 X-rays and 30 ultrasonographs per week. Thus, there is need to fill up the post of radiologist-cum-sonologist to take up more radiology investigations in the hospital.

5.4 Dispensary

The prescribed medicines of IPD and OPD patients are dispensed by 13 staff from the in-house dispensary of the Hospital. Special care is taken to dispense quality medicine at free of cost. Hospital procures and maintains stocks of bulk quantities of medicines as per availability list (Formulary). There is a committee who manages the procurement of the medicines. The stocks of the medicines are maintained manually, and thus there is the need of computerized dispensary stock for proper maintenance of the stocks. During the interaction with the patients, it was observed that the dispensary provides medicine to the patients free of costs.



There are a pharmacist, two general duty assistant and two assistants in the pharmacy. Other staffs are on outsourcing basis recruited through the private agency. The study observed that there is no distillation plant in the pharmacy, thus there is the need of the distillation plant at the pharmacy to use distilled water for the medicines.



6. RESEARCH ACTIVITY

Apart from 14 OPD units a research unit is also situated in main campus. On an average 250-300 patients per day attend the research unit. There are three Assistant Research Officers who are conducting clinical research on thyroid diseases, cervical spondylitis, allergic rhinitis, and on psoriasis. During the evaluation it was observed that more efforts are given for teaching and for patient care in NIH, but little effort is being given on research.

Three assistant research officers of NIH reported that they were not getting ample support from the Institute to carry out their research activities. Lack of fund, infrastructure and support are the major hindrances to carry out wider research activities in NIH. All the research officers reported that the available infrastructure and facilities related to research in the Institute are average and the management should improve research facilities in the Institute.

For extensive and vigorous research in homoeopathy, collaboration with international Institutes are also required. There is the need of financial assistance for research infrastructure, research laboratory, research publication, and also for research training & seminar at national and international level, which can improve the present research activities in the Institute.

7. OTHER FACILITIES

7.1 Physical Medicine

There is a rehabilitative section in the NIH which is functioning with a physiotherapy unit for diseases like osteoarthritis, Rheumatoid arthritis spondilitis etc. Yoga therapy has also been introduced very recently.

7.2 Diet Service

Hospital provides free diet to the IPD patients through the in-house kitchen. Renovation & modernization of kitchen has already been completed keeping in view the upcoming 250 bed Hospital.

7.3 Infrastructural Facilities

There are other facilities such as one playground, one auditorium, six Lecturer theatres, one conference hall, one common room, one board room, two gymnasiums, one computer centre, one cyber café, and two canteens are available in the Institute campus.



CHAPTER-V

IMPACT OF THE SCHEME

The major objectives of the scheme for National Institute of Homoeopathy are to provide better teaching facilities to the students of homoeopathy, research on homoeopathy, and better homoeopathy healthcare facilities to the society. This chapter is trying to bring out the impact of the scheme on such attributes.

5.1 IMPACT ON TEACHING & LEARNING

The evaluation observed that, in the Institute of teaching and research and the range of study programmes on offer, NIH enjoys appreciable level of autonomy. From the documents provided and the visits to faculties and students, and in talks with faculties and students across a wide range of fields, the evaluation came to the conclusion that a most of the faculties and students are satisfied with the infrastructure and learning facilities available in NIH, and generally the quality of the learning experience for students. At the same time the evaluation also observed that there were wide varieties of opinion of the students and faculties on class sizes and student-faculty ratios. Given the excessively large number of study programmes available NIH, there is considerable scope for filling-up of the vacant faculty posts, in order to strengthen the learning experience for students, justifying teaching load and improve some of the issues like class sizes and student-faculty ratios.

5.2 IMPACT ON RESEARCH

Despite a number of high performing areas and some faculties with good research outputs, the data provided by NIH clearly shows that research outputs (e.g. number of articles and highly cited articles published in leading journals, number of recently registered patents, knowledge transfer, nationally funded research projects completed or in progress in recent years) are not in line with the Institute's flagship status and size. Closer examination of the data also reveals that research is very disoriented in the Institute, and in all cases undertaken individually, unstructured, and does not appear to follow any shared vision or strategic direction. During the meeting with the researchers, it was also understood that there is need of motivation for the promotion of research in the NIH.



5.3 IMPACT ON HEALTHCARE

One of the major objectives of NIH is to provide healthcare facility to the patients. NIH has become a leader in providing homeopathic healthcare and has been involved in providing public health care.

To assess the effects of healthcare facilities provided by NIH, the evaluation considered various operational characteristics, such as size of hospital establishment, number of employees, facilities available, and quality of the facilities provided. Based on these characteristics and the responses provided by the patients and doctors participated in the evaluation to questions about the effect of the healthcare of NIH were overwhelmingly positive.

In order to measure the impact of NIH hospital, the study tried to determine whether there is greater access to health care of the Institute or not. It was observed that the number of patients visiting to the hospital has been gradually increased and that reflects that the hospital has an impact on the social health care. The evaluation further found that there are strong positive satisfaction and experience of patients on the health care facilities in NIH. The patient satisfaction has increased because doctors and staffs of the NIH hospital take the patients' problem seriously, explain information clearly, and try to understand the patient's sufferings, and provide viable options. The evaluation also observed that length of healthcare visits to the NIH hospital has been increased in most patients, and that implies patient satisfaction rate has been increased.

5.4 IMPACT ON COMMUNITY

Besides teaching, research, and providing healthcare, as part of the community service, NIH also participates in various health melas held in different parts of the country such as AROGYA mela, National EXPO, etc. promoting awareness on the Homoeopathic system of medicine. NIH has also hosted one international seminar and an exhibition on the history of homoeopathy incorporating current information on research, education and other areas. NIH has also coordinated state level and district level activities on mother and child care campaign in 16 States. The Institute has also distributed more than 100 medical kits to the schools and NGOs of rural and remote areas. These



activities of NIH had immense impact in providing clinical knowledge on homoeopathy to the society.

CHAPTER-VI

CONCLUSIONS & SUGGESTIONS

The evaluation of the scheme for National Institute of Homoeopathy (NIH) has yielded a wealth of very rich data as findings. We have attempted to classify and organize this data in the previous chapters so that insights can be obtained, inferences can be drawn and conclusions can be reached. These would be useful for assessing the implementation and impact of the scheme for the NIH and the steps to be taken in the future in this regard.

- In line with the objectives set forth, the scheme for NIH is found to be useful. Though efforts have been made by the Institute to provide better teaching facility and better healthcare facilities, severe constraints are often felt due to shortage of manpower and time taken in procedures. Acute shortage of manpower is felt in teaching and service areas like library, laboratory, X-ray, store, pharmacy, etc.
- Due to shortage of teaching faculty, the work load of the teachers has immensely increased. There is wide variation between workload and number of teachers in most departments. There should be proper policy and planning for meeting the manpower shortage in the Institute. There is an urgent need to strengthen the human resource of the Institute. The working of the Institute has increased manifolds over the last several years without any increase in permanent staff strength. With a view to streamline the overall office work, it is suggested that permanent measures to meet the growing need for staff members should be considered.
- Presently, there is no policy for monitoring and evaluation of the activities of NIH. To keep up with the changing times and meet the need for greater transparency and improved service



delivery, the Institute must implement monitoring and evaluation systems in all mandated activities of the institution. There should be definite principle for monitoring and evaluation of the classes taken by the teaching faculties, patients examined by the medical officers and performance of the staff. A monitoring and evaluation framework for the implementation of the strategic plan as well as management plans should be developed and implemented. There should be a system in place for academic staff appraisal.

- There is no framework for institutional human resources management practices, which results interpersonal conflicts among the staff members. There is the need of re-orientation workshops for the staffs of the Institute on frequent basis to maintain a cordial interpersonal relationship. In-house training and reorientation programmes should be organized for all the staff for self improvement and appropriate measures should be taken for the staff participation in those training programmes. Apart from that, top-down communication as well as decentralization of activities and management needs improvement.
- There is requirement regular maintenance of existing facilities in NIH. Library resources such as new edition of books, computers should be updated and expanded to meet the growing demands from the students, teachers, researchers and doctors. Latest editions of books, journals, magazines, periodicals, etc. should be purchased on regular basis to meet the requirement of the students. Thus, the Institute should develop a policy on infrastructure and facility management.
- The Institute does not have a strong policy on teaching and learning assessment. The Institute lacks systematic approach to improve research on homoeopathy. The Institute should improve and strengthen the existing student support services and adopt a systematic approach to improve research on homoeopathy. No fund is earmarked for the public health intervention activities, seminars, conferences, fairs etc. organized by the Institute. These expenses are generally met from out of academic expenses. There should be some earmarked fund to meet the community activities organized by the Institute.
- Since long time NIH has not devised any new course curriculum. So new course curriculum like short term administrative course, management course, paramedical courses should be devised and pursued.



ANNEXURE

PHOTOGRAPHS OF FIELD VERIFICATION OF NIH

Main gate of NIH	Administrative Building



Entrance to administrative building	Administrative office
-------------------------------------	-----------------------

Auditorium	Seminar Hall
------------	--------------



Girls' Hostel	Boys' Hostel
Boys' Intern Hostel	PG Boys' Hostel



PG Girls' Hostel	International Hostel
Pharmacy	Research Documentation
Staff Quarters	NIH Hospital

Central Library	Patient Waiting Hall
-----------------	----------------------



New Academy Block	Que for patients' registration
-------------------	--------------------------------

