To

All the Directors/ Medical Superintendents
NBE Accredited Hospitals

Sub: Implementations of recommendations for improving teaching, training and thesis work for DNB candidates in accredited institutions/ hospitals

Sir/Madam,

It is for your kind information that as per the decision taken by the competent authority of NBE, four Expert Groups were appointed to examine the current role of NBE vis a vis the mandate given to it in its Memorandum of Association, identify the constraints and to recommend mechanisms for strengthening the infrastructures, processes and procedures in order to meet the new challenges in the area of post graduate medical education in the country as well as to suggest measures to improve teaching, training and thesis work for DNB candidates in accredited institutions/ hospitals.

The recommendations of the expert groups were accepted by the competent authority. I hereby enclose the relevant recommendations for implementation in your hospital/ institution and request to you to take necessary action and send a compliance report to NBE.

Yours sincerely,

[Signature]

Mr. B.N. Khatri
(Assistant Director Accred)
Recommendations of the expert groups duly approved by the competent authority of NBE for implementing in a phased manner in all accredited hospitals/ institutions

Recommendations for improving DNB teaching and training in accredited hospitals

1. Improve hands on training facility in surgical specialties.
2. Ensure proper teaching and training as per NBE curriculum for Basic Sciences.
3. Ensure that the consultants are available for teaching and training for atleast 8 hours per week as per NBE norms and the hospitals must give them adequate incentives.
4. Consultant’s turnover rate high in some specialties for that develop mechanism for immediate replacement within 1 month.
5. Consultants may be given teaching designations by NBE, such as NBE Professors and Associate Professors etc. if they fulfill the minimal criteria developed by NBE for them.
6. The hospitals must link with local hospitals in Government and private sector to ensure adequate exposure to clinical and surgical cases as per NBE curriculum.
7. Consultants working on part time basis or those having their own clinics should not be considered for NBE courses.
8. Teaching is not priority in the opinion of management of Hospitals. They should therefore also be sensitized to encourage teaching and research activities and undertaking in this regard be procured from them at the time of accreditation.
9. Increase Consultants- Students interactions by having more frequent case presentations, academic ward rounds, guest lectures, seminars etc.
10. Ensure proper placement of students in various sub-specialties to cover NBE curriculum. Efforts should be made to ensure that no single specialty hospital is accredited for DNB courses.
11. The hospitals must maintain documents and records for training schedules, sessions taken by various consultants and DNB candidates and NBE should develop online mechanism for keeping records of these.
12. Teaching and training activities should be standardized so that all hospitals cover the NBE curriculum in same way by specifying contents at the end of first, second and third years.
13. Formal lectures/ sessions must be conducted by accredited hospitals to cover basic sciences, basic aspects of statistics, research methods, recent advances as per the NBE curriculum. Larger hospitals must have statistical experts fulltime or part time basis for DNB candidates.
14. The hospitals must have networking within departments, between departments and within local accredited hospitals for teaching and training of DNB candidates.
15. Hospital campuses should be in one place. Outsourcing of facilities by hospitals may result in inadequate training of DNB candidates in these areas.
16. Consultants shown for DNB courses must be oriented to teaching and training methods, research methods periodically and records by maintained for these.
17. The hospitals must encourage teaching culture and environment.
18. Consultants involved in DNB courses must have log books for taking teaching sessions, attending CME on TOT etc. and this should be taken into consideration while designating them as NBE Professors/ Associate professors. Feedback from students on consultants should also be taken as one of the parameters by NBE.
19. The hospitals should pay incentives to consultants involved in teaching and training out of the fee paid by students.
20. Best teacher awards should be introduced by NBE based on objective parameters for teaching and training.
21. Residency designation for DNB candidates as Junior / Senior residents would ensure uniform working conditions for DNB candidates.

Recommendations for improving DNB thesis research work in accredited hospitals

1. All Consultants involved in DNB courses must be oriented to research methods, ethical issues, writing research papers etc.
2. The DNB thesis protocols must be screened by thesis and ethical committees. And the thesis progress should also be monitored by the thesis committee regularly. NBE should develop some mechanism to ensure this on regional basis.
3. The hospitals must keep some separate funds for DNB thesis research.
4. Research is not a priority many times with the hospitals. NBE having nearly 6500 DNB candidates every year doing thesis, must develop mechanisms to ensure joint research projects with common guidelines so that national level research data is available. These mega projects would make DNB thesis research work must more relevant for the medical fraternity.
5. No statistical experts are available at many NBE accredited hospitals for guiding students. NBE must ensure that these inputs are available to the DNB candidates by issuing necessary guidelines and modifying accreditation criteria.
6. Quality of thesis is not good. There may be duplication / copying of data / fake data by the candidates. This results in high Thesis rejection. Compulsory training of DNB candidates and their guides and co guides in research methods, statistical methods, paper writing etc must be planned by NBE.
7. Students not given separate time for thesis works / data collection / not are given resources for investigation etc. NBE must ensure that adequate time and resources are provided by the hospitals to the DNB candidates and the hospitals must give undertaking in this regard in the accreditation agreement with NBE.
8. No emphasis is given on writing research articles, or making presentation in conferences etc. by consultants. NBE must ensure that the DNB candidates as well as the consultants (shown as NBE consultants) make minimal contribution during the three years of DNB course.
9. Students must contribute research articles for journals or NBE Journals before they take final examination at least from their thesis work. This must be given weight-age in their log books or towards concurrent assessments.
10. NBE should coordinate with INCLEN, NICD, PHFI, NML, ICMR for developing research registry, identifying areas for research in various specialties, compile summary or thesis as such in digital format for wider dissemination within and outside the country as crucial research resource material.
11. NBE should include it its thesis guidelines an Undertaking from the DNB candidates and consultants for allowing NBE to use the thesis work for above mentioned academic activities
12. NBE must encourage good research by instituting Best paper award and Best thesis award based on objective parameters.
Recommendations for improving availability of Learning Material and Library

1. The hospitals must ensure that adequate number of Text Books / Reference Books (latest Editions) in various specialties are available in their libraries. NBE should make much more stringent norms for libraries.
2. The hospitals must ensure availability of online journals in libraries besides the hard copies.
3. Learning materials on DVDs (all sets) must be available to DNB candidates and in libraries. NBE must explore the possibility of giving online access to DNB candidates to all the learning materials, for this suitable fees be charged from the candidates and hospitals.
4. The hospitals must ensure adequate participation in tele-conferencing and radio counseling sessions conducted by NBE for consultants and students. All these be recorded on log books and penalty be introduced if students and consultants’ participation is not at the desired level. These should be taken as a part of the academic activities for the DNB candidates.
5. NBE should coordinate with NML, DELNET or other agencies for extension of library facilities to hospitals and candidates. NBE should also explore the possibility of taking up the responsibility of providing online journals and virtual library facilities on the basis of some charges from hospitals and the candidates.
6. NBE must develop its own Learning Resource Centre with online connectivity, facilities for learning courses and materials, online virtual classroom sessions etc.
7. NBE must charge from students for learning materials and from institution for strengthening these facilities.

Recommendations for reforms in the periodic appraisal system or concurrent assessment

1. NBE should make it on a regional basis through the regional centers.
2. NBE should appoint its own examiners as appraisers.
3. NBE should ensure that all the hospitals follow the curriculum in the same way there are clear cut directions in the curriculum about the skills and topics to be covered in I, II and III year. NBE appointed experts in each of the region should conduct appraisals using the same question papers and practical examination plan. This would ensure standardization of the concurrent assessment system and also then due certification can be made by NBE based on the performance of the candidates in these assessments.
4. NBE can the issue certification to candidates on I, II, III year performance.
5. NBE team to inspect infrastructure & facilities at hospitals more frequently.
6. NBE should introduce penalty & administrative actions if facilities for teaching and training are not satisfactory.
Accredited Hospitals will ensure the following measure to improve communications

- Appointment DNB coordinators and co-ordinators as per NBE guidelines.
- It will be mandatory for them to interact with students for 2-3 hours per week to give them information and share circular related to DNB courses.
- The hospitals will download all Circulars, Applications forms, Registration form, Thesis form, information bulletin and curriculum etc. and send a copy to all the dept. of DNB courses.
- The Departments running DNB courses will display the circular guidelines on the departmental notice boards
- The Hospitals will prepare monthly teaching and training schedule for case presentations, Seminars, Guest lectures, interesting case reviews, research methods, rotation in various dept. etc. and give to each DNB candidate and also display it on the departments’ notice boards.
- The hospital will maintain records of the teaching and training activities accredited by the consultants and the DNB candidates department wise, and would update the same on NBE website at least once in a month as per the details given for the same by NBE.
- The Hospital will separately conduct thesis review committee and ethic committee meetings every quarterly.

Each candidate undergoing DNB course will ensure:

- He / She has a copy of latest information bulletin, curriculum, circulars and guidelines for registration, thesis, Accreditation, Appraisal etc.
- He / She will refer to NBE website www.natboard.edu.in at least once in a fortnight to download circulars and other information from time to time.
- He / She will meet atleast once in a fortnight with local DNB coordinator, co-ordinator to clarify doubts etc.
- He / She will write to NBE with through local DNB coordinator only after seeking their remarks.
- No candidates will directly contact NBE office except in cases where the grievances of the candidate have not been addressed by the local coordinators or where the NBE has asked the candidates to clarify or send additional documents.