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PREAMBLE

In exercise of the powers conferred by Chapter VI, clause “h” of the Medical and Health Council Act, 2002, Kingdom of Bhutan, the Bhutan Medical and Health Council hereby makes the following regulation:

PART I: PRELIMINARIES

SHORT TITLE AND COMMENCEMENT

1. This regulation shall be known as “Teaching Hospital Regulation, 2014.”
2. This Regulation shall come into force on the 17th Day 8th Month of Wood Horse Year of the Bhutanese calendar corresponding to the 10th October, 2014.

PURPOSE AND EXTENT

3. The purpose of this regulation shall be:
 - a) To outline the general criteria for the designation of a hospital as a Teaching Hospital for imparting Undergraduate and Postgraduate Medical Education Programme in Bhutan; and
 - b) The Hospital shall attain and maintain all the criteria mentioned in this regulation in order to be accredited as a Teaching Hospital by Bhutan Medical and Health Council (hereinafter referred to as Council).
4. This regulation shall extend to all the Undergraduate and Postgraduate Teaching Hospitals within the Kingdom of Bhutan.

REPEAL

5. Upon coming into force of this regulation, any existing regulation in the country pertaining to the subject matters addressed by this regulation shall be repealed.
6. Notwithstanding the repeal in section 5, anything done or any action taken before coming into force of this regulation shall be deemed to have been done or taken under existing, relevant guidelines, policies and regulations.

INTERPRETATION

7. In this regulation, unless the context indicates otherwise, the singular shall include the plural and masculine shall include the feminine.

PART II: APPLICATION FOR RECOGNITION OF A HOSPITAL AS TEACHING HOSPITAL

APPLICATION

8. An application for recognition of a Hospital as Teaching Hospital shall be made in duplicate to the Council in Form 1 as stipulated in Annexure and accompanied by the processing fee as stipulated in Annexure at least one year prior to start of the Programme.
9. An application for recognition of a Hospital as Teaching Hospital shall be made to the Council only upon completion of every other formality from relevant agencies as per the laws of the land.
10. Upon receipt of the application by the Council, the Council shall adhere to the procedures enshrined in the relevant Guidelines.
11. The Council shall defer, deny or grant recognition of a Hospital as Teaching Hospital depending upon the fulfilment of the requirement by the University/Institution as prescribed by the Council.

ESTABLISHMENT

12. No Hospital shall be allowed to be recognized as Teaching Hospital without prior sanction of the Council.
13. Any Hospital with intent to be recognized as Teaching Hospital shall adhere to specific Regulations and Guidelines framed by the Council.

REGISTRATION AND RENEWAL OF REGISTRATION

14. Any Hospital that intend to be recognized or any Hospital that is already recognized as Teaching Hospital shall register with the Council as per the prescribed Guidelines.
15. The Certificate of Registration shall be renewed three months prior to completion of the validity period of five years.

FEES

16. The Teaching Hospital shall pay fees for Registration, Renewal and Introduction of new Programme; and any such fees as deemed necessary by the Council as per the prescribed Regulations and Guidelines.

PART III: GENERAL REQUIREMENT

MISSION AND OBJECTIVES

17. The Teaching Hospital shall have a defined mission and objectives of proposed teaching programme.

Administration and Management

18. A Teaching Hospital shall be appropriately organized to demonstrate a commitment to excellence in both Medical Education and patient care.
19. The Teaching Hospital shall have adequate financial and human resources to manage both the educational programme and patient care services.
20. There shall be a Board or equivalent for the overall management of the hospital including Head of Academic Affairs as one of the members.
21. The Head of the respective department shall be responsible for the management of academic programme for Undergraduate Medical Education Programme.
22. There shall be a Memorandum of Understanding (MoU) signed between the University / equivalent Institution and Teaching Hospital outlining the use of Hospital resources for academic purposes. The MoU shall be renewed at least every five years.
23. The Hospital Administration in Collaboration with the University/equivalent Institution shall have written policies and procedures in place for clinical education of Undergraduate and Postgraduate trainees to guide their role, responsibility and authority when in the Teaching Hospital. This should include, but shall not be limited to, the following: duty hours, disciplinary regulations and grievance processes.
24. The hospital management and University/equivalent Institution shall have regular meetings wherein the minutes of the meeting shall be kept for record.
25. The Teaching Hospital shall have in place a quality improvement process to assess the hospital's performance improvement programme, and plans to apply for international accreditation.
26. The Teaching Hospital shall have in place a Continuing Professional Education Program that is accessible to the Clinical Faculty and trainees and interns.
27. A department considered fit to impart Post Graduate or Undergraduate Medical Education programme shall be headed by a full time head of department of same specialty and supported by at least two or more senior academic appointees.

28. The Teaching Hospital shall not be shared between two or more University/equivalent Institution offering the same programme.
29. The Hospital shall be functional for a minimum of three years prior to being designated as Teaching Hospital.
30. The Teaching Hospital shall have Medical Education Department or equivalent for coordinating the Medical Education Programme including the Pedagogy training and continuing professional development programme.

CLINICAL FACULTY

31. A Teaching Hospital shall indicate the number of practicing clinicians and others, by specialty that shall be identified as clinical and other faculty.
32. The key clinical faculty shall be active clinicians with broad knowledge of, experience with, and commitment to medical students, and have current practicing certification by the Council
33. The key clinical faculty shall have following responsibilities:
 - a) dedicate an average of at least 15 hours per week throughout the year to the residency programme and at least 20 hours per week for Undergraduate Programme;
 - b) provide teaching and supervision of residents and undergraduate medical students in the clinical setting;
 - c) assist in the preparation of the written curriculum;
 - d) assist in the development and evaluation of the competencies in the residents and undergraduate students; and
 - e) Identify any conditions among the postgraduate and undergraduate trainees that is inhibiting the trainee's academic performance or learning abilities and report to the program director.
34. The clinical and other faculty shall have a minimum of three years clinical experience with evidence of effective patient care.
35. All clinical and other faculties shall have undergone pedagogy training.

EDUCATIONAL RESOURCES

36. The Teaching Hospital shall have required financial and physical resources to enable the programme to fulfill its mission, goals, and expected outcomes.
37. Adequacy of resources shall be reviewed periodically and resources shall be modified as when deemed necessary by the Council.
38. The Teaching Hospital shall have dedicated office for the heads of the administration, and clinical and nonclinical departments.
39. The Teaching Hospital shall have appropriate space for clinical teaching both in outpatient and inpatient areas along with required teaching aids and other educational resources.
40. The Teaching Hospital shall also have library equipped with relevant books and journals, and Information Technology (hereinafter referred to as IT) facilities with access to online journals and adequate number of computers for individual students.
41. The Teaching Hospital shall have Medical Record Section to provide hospital records necessary for patient's continuity of medical care that shall be utilized for medical sciences education and clinical research under strict confidential manner.

PART IV – OTHER REQUIREMENTS

42. The Teaching Hospital shall have following over and above those provided hereinabove in Part III:
- a) A minimum functional bed strength of not less than 300 beds
 - b) Variety of case-mix
 - c) Following departments:
 - i. Obstetrics and Gynecology;
 - ii. Medicine;
 - iii. Surgery;
 - iv. Pediatrics;
 - v. Pathology and Laboratory Medicine;
 - vi. Pharmacology and Pharmacy;
 - vii. Community Medicine/Preventive & Social Medicine;
 - viii. Ophthalmology;
 - ix. Otorhinolaryngology;
 - x. Orthopedics;
 - xi. Radiology and Diagnostic Imaging;
 - xii. Anesthesiology;
 - xiii. Psychiatry;
 - xiv. Dermatology;
 - xv. Forensic Medicine & Toxicology;
 - xvi. Emergency;
 - xvii. Dentistry;
 - xviii. Nursing; and
 - xix. Physiotherapy.

43. For each postgraduate training programme of two trainees, the Teaching Hospital shall have the minimum Bed strengths, outpatient visits and bed occupancy as mentioned below:

<i>Specialties</i>	<i>Inpatient Beds</i>	<i>Outpatient visits per year</i>	<i>Bed Occupancy</i>
Any discipline	Minimum of 20	1000 - 1600	80%

44. For undergraduate programme, the Teaching Hospital shall have the minimum Inpatient admission and outpatient visit as follows:

<i>Specialties</i>	<i>Inpatient admissions per student per year</i>	<i>Outpatient visits per student per year</i>
Major disciplines combined : Surgery, Orthopedics, Ob-Gyn, Medicine, Paediatrics	Minimum of 50	Minimum of 50

45. The Teaching Hospital shall have 24 hours of fully functional emergency services backed up by adequate diagnostic facilities such as appropriate laboratory, pathology and radiology services to support timely and quality patient care.
46. The Teaching Hospital shall have well equipped Intensive Care Unit for adult, pediatrics and neonates.

AFFILIATED HOSPITAL

47. If there are inadequate numbers of patients in a department for teaching purpose then an affiliated hospital shall be identified. The affiliated hospital shall have minimum of the following four departments- Surgery, Medicine, Pediatrics, Obstetrics and Gynecology including Orthopedic, with adequate number of both in patient and outpatients.
48. The affiliated Hospital shall be approved by the Council for teaching purpose upon payment of Registration Fees and any such fees as deemed necessary by the Council.

Hospital Quality Assurance

49. The Teaching Hospital shall have documented processes of quality assurance and control mechanism in place to assure patient safety i.e. infection control, safe surgery, medication safety, etc.
50. The Teaching Hospital shall carry out clinical auditing every three years and ad hoc auditing by the Council as and when deemed necessary.

NURSING STAFF IN THE HOSPITAL

51. The Teaching Hospital shall have the minimum nurse patient ratio of 1:7 in general and 1:1 in the specialized units

PART V – OFFENCES AND PENALTIES

OFFENCES

52. Any person/Teaching Hospital that contravenes or fails to comply with any provisions of these Regulations and relevant guidelines commits an offence.
53. Any person/Teaching Hospital that contravenes or fails to abide with any provisions of these regulations thereby violating BMHC Act, Regulations and Guidelines commits an offence.

PENALTIES

54. Any person/Teaching Hospital that commits an offence for first time shall be warned and asked to rectify and comply accordingly within the period specified by the inspection team.
55. Any person/Teaching Hospital that commits same offence for second time shall be fined with minimum wage for a maximum of ninety days or suspension of certificate of registration till the lapses are rectified or complied with or both.
56. Any person/Teaching Hospital that commits same offence for third time shall be fined with minimum wage for a maximum of one eighty days or suspension/cancellation of certificate of registration or both; depending upon the severity of the case.
57. Any person/Teaching Hospital that commits an offence shall be dealt accordingly as per the existing BMHC Act, Regulations and Guidelines.
58. Any person/Teaching Hospital that commits an offence which is not under the purview of this regulation but under the purview of existing relevant Acts, Regulations and Guidelines shall henceforth be dealt accordingly as per the existing relevant Acts, Regulations and Guidelines.

PART VI – MISCELLANEOUS

INSPECTION

59. The Council shall be empowered to visit the Hospital to inspect the Physical facility and other educational resources prior to grant of approval.
60. The Council shall coordinate ad hoc inspection whenever the Council deems necessary as per the prescribed guidelines.
61. The Teaching Hospital shall hand over every record and documents maintained to the Inspection Team as deemed necessary by the Council.

AMENDMENTS AND APPEAL

62. This regulation shall be revised from time to time as may be required by the Council.

DEFINITIONS

63. In this Regulation, unless the context otherwise requires:
 - a) **“Council”** shall mean the Bhutan Medical and Health Council.
 - b) **“Institution”** shall mean the institute imparting medical education.
 - c) **“IPD”** shall mean In-patient Department.
 - d) **“Medical Education”** shall mean any education/training program leading to undergraduate or postgraduate or certificate courses in allopathic, traditional, nursing, public health and allied health sciences.
 - e) **“OPD”** shall mean Out-patient Department.
 - f) **“Teaching Hospital”** shall mean a Hospital recognized by the Council to be used for imparting medical education to the undergraduate and postgraduate trainee.
 - g) **“University”** shall mean university imparting undergraduate and postgraduate medical education.

SCHEDULE

1. MINIMUM REQUIREMENT OF THE TEACHING HOSPITAL FOR INDIVIDUAL DEPARTMENT an Annexure 1.

ANNEXURE: 1

1. HUMAN RESOURCE

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Departmental Head (Professor)	Specialist in relevant specialties (Pre and Para clinical departments can be headed by MD/MS/PHD)
Specialized staff (Associate. & Assistant Professor.)	2 Specialized in relevant specialties (full time)
Tutors (lecturer, demonstrator)	Specialists /residents available to trainees on a regular basis
Support staff	Adequate full-time management and secretarial support

2. PATIENT CARE FACILITIES

2.1 OPERATION ROOM FACILITIES

<i>Accreditation Requirements</i>	<i>Minimum Requirements (All departments should have standard operating procedures)</i>
Operation room	6 functional Ors
Operation room session per department	An average of 4 sessions per department per week
Caseload and Case mix	Adequate number of case load in each specialties
Operation room facilities	Adequate & appropriate facilities for OR procedures
Peri-operative care	a. Scheduled pre-operative clinics b. Dedicated recovery care c. Scheduled post-operative ward rounds d. Access to ICU
Safe Surgical Practices established and in use	Protocols for correct site surgery, radiation safety, infection control, audit of surgical procedures
Surgical Governance	Designated OR In-charge responsible for optimal functioning of OR

2.2 DIAGNOSTIC & INTERVENTIONAL SERVICES

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Imaging Diagnostic/ Intervention Services	Dedicated Radiology & Imaging Department
Laboratory Services	Pathology Department should have full range of services including Transfusion Services
Other diagnostic services	Full range of endoscopic services, ECHO, EKG, EEG, angiography, (as required for respective PG programs)
Other interventional services	Dialysis, laser services,

2.3 INPATIENT SERVICES

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Dedicated beds	Each trainees should have dedicated inpatient beds for regular follow up of patients
Regular ward rounds with teaching	a. Daily round; b. Weekly academic meeting of various nature : Grand round with case presentation/discussion, morbidity/mortality conference, journal club, etc.

2.4 OUTPATIENT SERVICES

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Supervised outpatient clinics in consultative practice	Each trainee should be given the number of patients to be worked up on a weekly basis;
Specialty clinics	Trainees should have access to sub-specialty clinics as required in the curriculum;
Minor Surgical Procedures	Trainees should have access to minor surgical procedures in OPD set up if required in the curriculum

2.5 ALLIED HEALTH CARE SERVICES

Allied health care services	Dedicated full range of allied health sciences including Preventive, Promotive and rehabilitative services;
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2.6 EMERGENCY MEDICAL SERVICES

Emergency Department	Dedicated Emergency Services Department, ambulance services, EMT
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2.7 CRITICAL CARE SERVICES

Intensive Care Unit (ICU)	<ul style="list-style-type: none"> a. Access to ICU with Teaching Hospital of emergency medicine b. Critical care unit; c. Coronary care unit; d. Neonatal care unit e. Paediatric ICU (If required by the curriculum)
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2.8 NURSING CARE SERVICES

Nursing care	Full range of general and specialized nursing services
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3. TEACHING REQUIREMENTS

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Coordinated training schedule	Regular schedule for various teaching programmes
Access to structured lectures / tutorials / academic activities	Once weekly for common academic activity in the Teaching Hospital
IT Teaching Hospital/Library	Access to IT Teaching Hospital/library
Tutorial room	Tutorial room available in every department
Clinical governance	Regular mortality-morbidity meetings and clinical conferences attended by all concerned department staffs
Trainee log book	Appropriate log book/portfolio should be maintained for the trainees
Opportunity for faculty & trainees to attend appropriate external educational activities	Enabling system to facilitate participation in relevant international events
Video-conferencing Facilities	Videoconferencing facilities should be in place

4. TRAINEE SUPERVISION

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Trainee Supervisors	<ul style="list-style-type: none"> a. Must have post-graduate degree b. Trainer : Trainee ratio as stated separately for undergraduate and postgraduate medical education
Funding support	Responsible agency should secure sufficient fund

6. STUDY AND RESEARCH FACILITIES

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Access to library	Library available with textbooks and core reference books of latest editions
IT facilities	Access to IT Teaching Hospital with internet access
Access to medical records	Access to medical records under strict confidential manner
Private study area	24-hour access to designated study area/room
Journals	<ul style="list-style-type: none"> a. Each department should have access to international journals /E- library in their respective disciplines b. Facilities to borrow books and journals from other institutions;
Documentation	<ul style="list-style-type: none"> a. Stationeries, printing, photocopy, scanning & binding facilities at subsidized rates;

7. STUDENT WELFARE SERVICES

Cafeteria	<ul style="list-style-type: none"> a. Tea, snacks and meals at subsidized rates;
Stationery shop / convenience store	<ul style="list-style-type: none"> b. Books, stationery and other items at subsidized rates;
Recreation	<ul style="list-style-type: none"> c. Facilities for indoor and outdoor games;
Others	ATM, banking facilities

8. RISK MANAGEMENT PROTOCOL

<i>Accreditation Requirements</i>	<i>Minimum Requirements</i>
Clinical Governance	Documented processes of quality assurance and control mechanism in place
Safety Policy Awareness and Implementation	Quality systems to assure patient safety as well as health personnel safety
Code of Conduct	Standard code of conduct available on hospital website

