



**COLLEGE OF NURSING,
CHRISTIAN MEDICAL COLLEGE, VELLORE-632004**

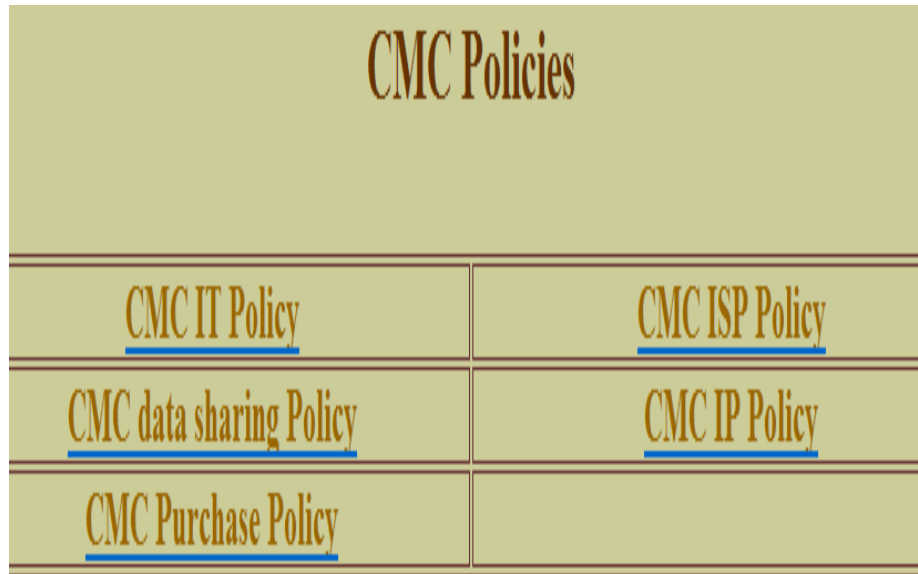
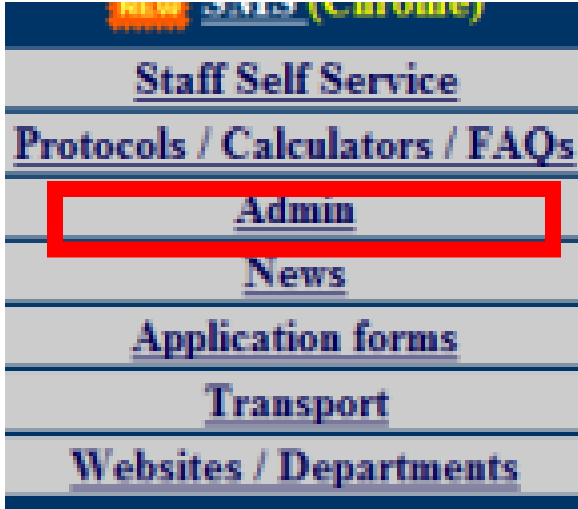


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6.2.2 Policy documents



POLICY

The following are the draft guidelines that would regulate the use of fixed IP numbers by individuals,

- 1 . All static / public IP addresses will be assigned only after scrutiny by CHIPS & computer sub-committee.
2. Server operating system and it's updates to be maintained by the network administrator.
3. Additional server security utilities, if required, like firewalls, antivirus software, IDS. etc to be installed, maintained and updated by the network administrator.
4. All applications running on the server to be managed by the network administrator installation / configuration, if done by a 3rd party vendor, to be done with the knowledge of the network administrator and details provided in writing to CHIPS.
5. Departments / services hosting / using servers may be assigned limited administrator privileges for specific tasks (like adding users, content etc.) and is decided on a case by case and cleared by CHIPS and adequate documentation provided for CHIPS as well as changes that may be made.
6. Administrator privileges on the server will be provided to the network administrator only and not the individual departments / services housing / using the server.
7. If specialist applications on a server requires remote access by a 3rd party vendor for maintenance / upgrading, this access should be granted by VPN through our Centralised VPN server (Cyber roam) and not via direct access to the server, and is decided on a case by case basis and cleared by CHIPS and the computer subcommittee.

departments, units within CMC:

All servers allocated static / public internet IP

addresses should follow the following



Background: To describe the use cases for data in CMC Vellore in order to facilitate sharing of data for various purposes within the institution.

Data mining: This is a process by which data acquired from clinical systems and operational systems are processed and stored so as to facilitate derivation of meaningful information and patterns that is not otherwise directly apparent.

This is a science by itself and involves data acquisition, transformation and design of queries to look for patterns and trends. This will require dedicated resources – hardware, software and personnel if it has to be done successfully.

Tentatively:

Data has to be acquired from live systems in a manner that does not interrupt routine activities in a non-redundant manner. Exceptions: For security or verification. Data has to be processed and stored in a format that can be queried by designated trained personnel. Access to this data has to be restricted and made accessible on a stringently controlled manner for reasons of patient and institutional confidentiality. Access will be via a Data Management Center that will oversee the whole operation.

Definitions and Assumptions:

Owner: All data and information and or knowledge derived from that data belongs to CMC (Ref the IP Document of CMC)

Permissions: Permission to access will reside at different levels generally beginning at appointing authority, IRB, administrative head (of departments) where the data is generated.

Mode of access: is envisioned in the early phase to be through the EMR and mirror server in CMC and in the later phase through a dedicated data management center which provides appropriate tools and support for data warehousing and data mining.

Transport of data: In view of security concerns the system will need to design methods of logging downloads and consider digital rights management.

Appeal and Resolution of Issues:

The Principal will resolve any issues related to research related data

The Medical Superintendent will resolve any issues related to clinical data

The Director will resolve any issues related to business intelligence data and in addition will have authority over all aspects.

Undertakings: Any one requiring access will have to sign an undertaking that data will be utilized only for the purpose for which it was sought and not removed from the hospital systems etc – detailed specs to be drafted separately. Liable for loss of rights if found to misuse these facilities.

Scenarios for data usage

Clinical management

Research

Business intelligence

Clinical Management

Patient care:

A clinician/health care giver who is an employee of CMC Vellore requires clinical data related to a patient for planning and delivering best appropriate medical/supportive care to a patient.

Persons who require access to data:



All members of the health care team who will come into contact with the patient for direct care
Clinicians who are coming into contact with the patient downstream.

Laboratory staff

Therapists

Technologists

Dieticians

OVERLAP GROUP: Auditors

Administrators

Purpose:

Any or all testing and clinical data produced by and for a patient may become relevant by any of the members of the healthcare team.

Clinicians: to know the complete history which the patient may or not be able to clearly communicate to care-givers especially when technical jargon or complex information needs to be passed on.

Laboratory Staff: Appropriate ordering and interpretation of laboratory testing has been always dependent on getting clear clinical information.

All other care-givers may require relevant information for providing appropriate care and advice as well as to protect themselves (reality).

Data location: EMR/CHIPS

Accessible via: All persons who have intranet access

Permissions: Provided by MS Office via CHIPS – new provision proposed where permissions are specified on the appointment order and sign off received.

Additional /fresh application (online) routed through designated supervisor.

Eg: Physician: request to be sent to CHIPS by appointing authority when offer of appointment is sent to the candidate.

The clinician is granted access to clinical workstation/laboratory results view.

Data provided: All laboratory and clinical data created in CMC. There may be some areas where access is restricted – such as semen analysis results, and in future HIV results or any information that may be construed as being confidential to a patient – more than others – and to be made available only to those clinicians on a need-to-know basis (dual log-in).

There are two possible ways of controlling and access:

To provide permissions only on a need to see/know basis. The advantage is that only a

restricted group will be able to access. The disadvantage is that it requires some one actively monitoring and changing permissions. For instance if a patient moves from Medicine

Surgery 6, the right to access should be invoked for the surgical team. May promote sharing of passwords as a means to get the work done without delay.

To provide permissions to larger groups and (i) log the reason for access at the time of first access and at predetermined intervals. A popup dialogue box would ask the user to choose one of the following options:

For Clinical care and patient management

Patient administration

IT or systems management

Research

Audit.

Periodic random audit by authorized systems administrator(s)

On demand audits, by patient or care giver.



Infection control

The hospital has a responsibility to reduce to the maximum extent possible any risk of infection to all caregivers, other patients and visitors that may arise as a result of a patient's stay and treatment in the hospital. This would include being able to provide current (as far as possible) and relevant information to the HICC or appropriately designated person(s) which would enable them to make relevant decisions in the larger interest of all concerned.

Persons who require access to data: HICC team

Designees

Compiled reports to concerned location/clinical units Purpose:

Current notification of prevalence and pattern of infections in the hospital Outbreak alert

Resistance patterns Alerts to clinicians Alert to staff

Data location: EMR/CHIPS Accessible via: HICC officer

Permissions: Special. MS Office/HICC authorized Data: (tentative)

Summary reports of prevalent infections in the hospital – Deidentified VAP, BSI, SSI, UTI prevalence ongoing

Identified data regarding individuals – only in situations to be pre-defined. Logged. Drug resistance information

Trend analysis to provide outbreak information

Medical Audits

One area of care that is being re-visited is quality management. There is also an effort on for accreditation. This means that the persons who are responsible for producing reports – audit reports – will need access into the clinical system. This group may require rights across departments and units since the audit in question may demand that patients in all units of a department be studied.

This will be users in the Quality management cell who will need to access the system for purpose of audits. The audit may be at the request of an administrative head or by any department.

Persons who require access to data: Quality Management team Designees

Purpose:

Audits

Data location: EMR/DMC

Accessible via: Own login to various programs – Clinical workstation, Results intranet etc

Permissions: Director/MS Office

Data:

Time motion studies Clinical chart audit content Drug ordering patterns Any audit requested

Research

IRB Accreditation: Concept: Staff/Residents are taken through a process (training, information and informed sign off) after which they become “IRB Accredited”. They will be allowed certain privileges for a predefined period of time: eg: access to limited preliminary search of Institutional databases for study feasibility etc.

Clinical Data:

Clinical Data: A clinician/researcher employed by a clinician working at CMC Vellore would like to conduct research about a particular clinical condition prevalent among patients seen in her own unit. Her Unit Chief supports the project. She needs to conduct a preliminary review of the condition to see if the research question is valid and sufficient number of patients are available to pursue a formal study.

Data location: EMR/ Mirror DMC

Accessible via: Data Management Center (DMC)

Permissions: Head of Unit/Division where the data is generated ratified by Principal or Addl Vice Principal Research



Data provided: Data views and summary only – de-identified Complete data to be provided on submission of IRB approval.

Clinical Data: A clinician/researcher employed by a clinician working at CMC Vellore would like to conduct research about a particular clinical condition prevalent among patients seen in her own unit. Her Unit Chief supports the project. Upon a preliminary review, she finds that she would not have sufficient numbers to produce valid results. She would like to include patients from other clinical units in her study.

Data location: EMR/Mirror DMC

Accessible via: Data Management Center (DMC)

Permissions: Head of Unit/Division , Head of Department where the data is generated, IRB

Data provided: Usually de-identified unless follow up and chart review are required – to be specified and permitted explicitly in IRB. Flat file in some interchangeable format (csv/delimited files) per the request of the investigator.

Clinical Data: A clinician/researcher (independently employed by CMC) has made an observation/has a research proposal and would like to do a formal study to validate this. The researcher does not belong primarily to the unit where these patients/subjects/biospecimens are seen/archived.

Data location: EMR/Mirror DMC

Accessible via: Data Management Center (DMC)

Permissions: Head of Unit/Division/Department where the data is generated, IRB

Data provided: Usually deidentified unless followup and chart review are required – to be specified in IRB. Flat file in some interchangeable format (csv/delimited files) per the request of the investigator.

Laboratory Data:

Same scenarios as above but the researcher is interested in laboratory data exclusively or in addition to clinical data:

Laboratory data that has already been delivered to the EMR as per routine investigations ordered by a physician and paid for by (i) the patient (ii) any CMC fund (CMC Charity) (iii) Any research fund (internal or external) that pays for routine patient testing as part of the research protocol

Data location: EMR/Mirror DMC

Accessible via: Data Management Center (DMC)

Permissions: Head of Unit/Division/Department where the data is generated, IRB (includes Addl VP for Research), Concerned Laboratory Department Head +/- Collaborator – where the data is generated – only if the laboratorian has contributed significantly to the initial diagnosis or will contribute significantly in the accrual of fresh data for the study*,

*Note: 1. In the event a case report is being made about a patient whose diagnosis has been significantly contributed to by a Laboratory Staff, the respective Laboratorian should be included as a contributing author.

2. This will exclude routine diagnostic reports unless the laboratorian has to review, do extra procedures or spend more than ordinary effort to accrue the data.

Eg: routine counts, screening hemostatic test results, routine chemistry and body fluid smears for infectious organisms... will not require the laboratory's permission.

Complex diagnosis – subtyping of a hemostatic disorder like vWD, review of morphology of already reported specimens to look for additional features, archiving bio-specimens and performing additional testing... where there is an interpretation usually performed by a physician or appropriately qualified scientist will require the collaboration of a laboratory staff.

Note: Suggest use contributor guidelines from ICJME



Laboratory data NOT available in the EMR that is being done primarily for the project, where a laboratory staff is a collaborator.

Data location: Independent authorized database Accessible via: Authorized research staff only

Permissions: Head of Unit/Division/Department where the researcher resides, Concerned Laboratory

Department Head +/- Collaborator – where the data is generated, IRB (includes Addl VP for Research)

Laboratory data that is NOT available in the EMR but has been created during routine investigations ordered by a physician and paid for by the patient and a a laboratory staff is a collaborator.

Data location: Concerned laboratory/laboratories

Accessible via: Authorized laboratory staff only and appropriate IT support person/group

Permissions: Head of Unit/Division/Department where the researcher resides, Concerned Laboratory

Department Head +/- Collaborator – where the data is generated, IRB (includes Addl VP for Research)

Stored of data:

Phase 1: Digitized images of charts

Phase 2: Data base – from the Data warehouse

De-identified or identified as per the permissions

Views through appropriate software tools (Data mining/Business Intelligence/Custom) Stored on network (where accredited researchers are given space accessible anywhere within the hospital via single sign on)

Permission to move the data to be decided upon. Can be mailed back and forth using the CMC Internal Mail Server.

Authorized sown load though controlled dialogue that is logged.

Business Intelligence

This section comprises all users who will be using data generated during a patient's interaction at CMC Vellore. The data will not be used for direct clinical care. May help administrator utilize/re-direct resources and efforts to better manage clinical care. Most often will not be required to provide real time data and will work off the data ware house server.

Real-time data for managers will be provided from CMC Dashboards. Since the information is related to business processes and

Types of data:

Operational information

Business process related information

Workflow management: including predictive data mining in service areas

Financial data

Personnel: deidentified summary data Data location: EMR/Mirror DMC

Accessible via: Data Management Center (DMC)

NOT intended for direct patient care of any kind. Users

Director or designee

Medical superintendent or designee

Treasurer or designee (Accounts)

Internal audit

Human resources office

Departmental/Unit heads

General Superintendent

Data location: Any database in CMC; DMC



Accessible via: Data mining tools connected to the data warehouse Permissions: Respective administrative head

Eg: Finance: Associate Director Finance or Treasurer Human resources: Associate Director HR
If individual departmental data is being mined, permission will be granted in discussion with the respective Departmental head
If there is research or publishing intent, IRB permissions are implicit.

Intellectual Property Committee (AC.Min.No.71-c:8-09) AC. 104-a:12/09; Ex. 12775/1/10

Vide AC. Min.No. 71-c:8-09, the policy on Intellectual Property was approved. It is proposed to constitute a committee to look into IP matters

After discussion and on the recommendation of the Executive Committee, it was

RESOLVED approval be granted to constitute a Intellectual Property Committee with the following members:

Associate Director (Medical)	:	Chair
Associate Director (Admin)	:	Vice Chair
Principal	:	Convenor
Associate Director (Finance)		
Treasurer		
Council Secretary		
Medical Superintendent		
Additional Vice Principal (Research)		
Senior Law Officer		
Prof. Vedantam Rajshekar, Head, Neurosurgery Unit – II		
Prof. Suresh Devasahayam, Head, Bioengineering		
Mr. Ebenezer Sundarraj, CHIPS		
Nominated member of Research Committee		
Student Representative		

Intellectual Property Policy for CMC AC. 71-b:8/09; Ex. 12733/11/09

Intellectual Property Policy for CMC and guidelines to help CMC while drawing up IP sharing agreements has been forwarded for the approval.

After discussion and on the recommendation of the Executive Committee, it was
(Appendix 23)

RESOLVED to approve the policy on Intellectual Property to help CMC while drawing up IP sharing agreements.

Christian Medical College, Vellore Intellectual Property Policy
AC. Min. No. 71-C 8/09 dated 27th August, 2009

This document contains two parts; an Intellectual Property (IP) policy for CMC and guidelines to help CMC while drawing up IP sharing agreements.

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INTRODUCTION

Scope of this document

This document outlines Christian Medical College (CMC), Vellore policy for staff (all academic and general, including visitors) and students (undergraduate and postgraduate, including visitors) with respect to Intellectual Property (IP). Matters covered include the nature of Intellectual Property, its ownership, utilization and the specific procedures adopted within CMC.

Promoting ethical research in CMC while protecting intellectual property and encouraging innovation

CMC recognizes the invaluable importance of research in improving medical care. The goal of CMC's research is to inform and improve its patient care, disseminate knowledge and information and produce outcomes of benefit to the local community and users of health care in general, and thereby fulfil its mission. CMC acknowledges, however, that what is increasingly scientifically possible need not always be ethically or morally defensible or be aligned to the values of the Institution. Hence, while encouraging and promoting research, CMC affirms that that all research conducted in CMC should fully respect every person's inalienable dignity as a person and be scientifically as well as ethically sound, particularly with regard to protecting the interests of the vulnerable. All research conducted in CMC should be free of conflicts of interest that would detract from its validity; be approved by the Institutional Research and Ethics Committees (Institutional Review Board); follow national and international ethical principles and policies regarding all aspects of design, conduct and reporting; and be aligned to the values and principles of the Institution.

CMC is also committed to providing an environment where innovation can flourish by appropriate rewards and incentives for those contributing to such innovation. In turn, CMC recognizes that intellectual property is developed as a result of the environment provided by the Institution and consciously contributes to the material and intellectual environment of scientific

development. CMC believes that intellectual property (IP) generated by CMC service personnel and researchers should be used to maximise the flow of benefits to society, and encourage value-adding innovation among staff while enabling staff to build their careers fruitfully.

The need and purpose for a documented policy on intellectual property
In developing the present policy, which draws on past practice, CMC has been guided by IP policies elsewhere, particularly the Handbook of Best Practices for Management of Intellectual Property in Health Research and Development (November 2003), Richard T. Mahoney, Editor (Published by The Centre for Management of Intellectual Property in Health Research and Development, Oxford Centre for Innovation, Mill Street, Oxford OX2 0JX, United Kingdom), which is stated as being “committed to helping improve health in Developing countries by supporting better management of intellectual property in health research.”

CMC reserves the right to modify or add to this policy at any time, provided that such change will only apply to items/inventions etc that come into being, after the institution of this policy.

INTERPRETATION

In this Policy:

‘Course Materials’ means all materials produced in the course of or for use in teaching in any form (including digital, print, video and visual material) and all IP in such materials and will include lectures, lecture notes and material, syllabi, study guides, assessment materials, images, multi-media presentations, web content and software.

‘Exceptional CMC Resources’ means resources of CMC which, for the avoidance of doubt, includes facilities, funds, services, equipment, paid leave, staff time and support staff in excess of those normally used or available to staff for producing Course Materials (for example resources from a research project externally funded);

Intellectual Property means all statutory and other proprietary rights (including rights to require information be kept confidential) in respect of inventions, copyright, trade marks, designs, patents, software developed in-house, forms designed in-house, flow charts or pathways of health care developed for patient care and research purposes, know-how, trade secrets and all other rights as defined by Article 2, VIII of the Convention establishing the World Intellectual Property Organisation, all rights to apply for the same and, for the avoidance of doubt, includes:

- Patents under the Indian Patents Act 1970 amended 1999.
- Copyright act by virtue of the Indian Copyright Act 1957 in literary works (including computer programs), dramatic works, musical works, artistic works, films, sound recordings, broadcasts, published editions and certain types of performances;
- Trade marks registered under the Trade Marks Act 1999

‘Specifically Commissioned’ means where particular consideration (which includes but is not limited to financial consideration or relief from teaching or other duties) is provided or offered by CMC, by agreement.

OWNERSHIP OF INTELLECTUAL PROPERTY

Ownership by CMC of Intellectual Property

Except as otherwise agreed in writing by an authorised officer of CMC, or stated in this Policy, CMC asserts legal and beneficial ownership of Intellectual Property:

created by academic or general staff in the course of their employment by the CMC;
created by students of CMC where:
the generation of the Intellectual Property has required use of CMC resources;
the generation of the Intellectual Property has resulted from the use of pre-existing Intellectual Property owned by CMC;
the Intellectual Property belongs to a set of Intellectual Property generated by a team of which the student is a member ;
the Intellectual Property has been generated as a result of funding provided by or obtained by CMC;
created by Visitors, Volunteers or conjoint appointees where:
the generation of the Intellectual Property has required use of CMC resources;
the generation of the Intellectual Property has resulted from the use of pre-existing Intellectual Property owned by the CMC;
the Intellectual Property belongs to a set of Intellectual Property generated by a team of which this person is a member and other members are CMC employees;
the Intellectual Property has been generated as a result of funding provided by or obtained by the CMC.

In the absence of any written agreement to the contrary, Visitors, Volunteers and Conjoint appointees who create Intellectual Property falling under this clause will be treated as academic staff for the purposes of this Policy.

Authors and Creators whose Inventions, Patents, Copyrights, Copyrightable Work and Software developed while at work in CMC and for CMC, utilizing CMCs resources shall be owned by CMC, except where superceded by another agreement or administrative directive.

All collaborative activity that results in Inventions, Patents, Copyrights and Copyrightable Work will come under the purview of CMCs 'Intellectual Property Policy (2009)' and agreements for collaborative work shall be signed up using 'Guidelines For Signing Up Agreements On Sharing Intellectual Property' (MIHR document 2004 and CMC abridged version of MIHR document 2007).

Ownership of copyright of all copyrightable work related to software shall rest with CMC with the following exceptions:

If the work is produced during the course of sponsored and/or collaborative activity, where agreements have been signed up on sharing IP.
CMCs Intellectual Property Committee has granted copyright or ownership to individuals employed by CMC.

Ownership of patented and patentable inventions, trademarks, diagnostic algorithms, data collection forms, service marks and trade secrets shall rest with CMC with the following exceptions:

If the work is produced during the course of sponsored and/or collaborative activity, where agreements have been signed up on sharing IP.
CMCs Intellectual Property Committee has granted ownership to individuals employed by CMC.

Filing of patents will name the primary research contributor(s) as the inventor(s) and CMC as the assignee.

Ownership of Course Materials and scholarly works not Specifically Commissioned or created with use of Exceptional CMC Resources

CMC does not assert its right to ownership of any Intellectual Property in scholarly books, articles, Course Materials, or other scholarly works or subject matter generated (whether in written or any other form) by staff or students, other than:

where Specifically Commissioned by CMC;

where produced with the assistance of exceptional CMC Resources.

where produced while working for CMC in any capacity other than sabbatical leave (and not involving the exceptions stated in section 3.1).

The staff member grants to CMC a perpetual non-exclusive right to use such Course Materials, works or subject matter generated by that staff member for the CMC's teaching, training and research purposes should the staff member leave the CMC.

Ownership of Course Materials Specifically Commissioned

CMC asserts legal and beneficial ownership of all Course Materials which are Specifically Commissioned. CMC may, at its discretion, give the creator(s) of Specifically Commissioned Course Materials a non-exclusive licence to use the Course Materials for teaching purposes, only provided that such a licence will not extend to use of the Course Materials for a course in direct competition with a course of CMC.

Where CMC does not commercialise commissioned Course Materials the creator may request assignment of the rights to the creator for commercialisation by that individual (or team), subject to agreement including a non-exclusive licence to CMC for educational, training and research purposes.

Ownership of Course Materials created with the use of Exceptional CMC Resources

Where Course Materials are or may be created in whole or in part with the use of Exceptional CMC Resources, a written agreement should be developed between the staff member and the CMC as soon as practicable which specifies ownership of the Intellectual Property in the Course Materials and rights to revenue in the event of any commercialisation of the Course Materials and any Intellectual Property generated from the production of the Course Materials.

In the absence of a written agreement, CMC will own the Course Materials, but the staff member(s) who provided content for the Course Materials will be entitled to a percentage of the net benefits of any commercialisation of the Course Materials by CMC (the range of 30%-70% used in Central Institutions in India may be taken as a guideline). Where more than one staff member provided content for the Course Materials, the benefits should be shared in proportions as may be agreed by them. This amount will not be paid directly to the concerned staff member(s), but will be credited into a special account of the Institution that will be operated by the above staff member(s) according to existing Institutional rules for such operations.

Ownership of artistic, musical, dramatic or creative works

The CMC does not assert any right or claim to ownership of the Intellectual Property in artistic, musical, dramatic or other creative works created or composed by its staff or students, except where these works have been Specifically Commissioned by the CMC, or are created in whole or in part with the use of exceptional CMC resources.

Assignments of Intellectual Property

The CMC and staff members will execute, in a timely manner, all assignments of Intellectual Property necessary to give effect to the ownership provisions set out above and to allow for the use and commercialisation of the Intellectual Property by CMC in accordance with this Policy.

Effect of this Policy on existing arrangements

Despite any contrary provision in this Policy, all contracts and arrangements existing at the time of the adoption of this Policy between CMC and external organisations, which relate to Intellectual Property and in which CMC has an interest, will remain in full force and effect, including those where the ownership of developed Intellectual Property is vested in a third party.

Assignment of ownership by CMC

CMC reserves its right to transfer the ownership of its Intellectual Property to third parties in accordance with this Policy, following consultations with the creator(s) of the Intellectual Property.

Dealings by staff members or students

Except where expressly permitted under this Policy no staff member or student may apply for in their own name, assign, license or otherwise deal with Intellectual Property which is the property of CMC without the prior written consent of CMC.

STUDENTS

Conditions to apply to Students

Where students contribute significantly to the development of Intellectual Property over which CMC or a third party may claim ownership, the following conditions will apply:

participation in research should not be seen as conflicting with academic performance;
the student's rights in Intellectual Property in any thesis or publications arising from the research should be protected;

the student should receive considerations and returns commensurate with his/her contribution, including a say as to the integrity of the Intellectual Property;
the student's future career choices should not be closed by the choice to work in a confidential area of research;

it should be made clear to students what the nature of the work is before they undertake the activity that leads to the claimable Intellectual Property;
any confidentiality and ownership of Intellectual Property agreement should only be signed by students after they have been first advised to obtain independent advice;
any delays in publication of the thesis that arise from a confidentiality agreement should be limited to a maximum of two years.

Student research at other Institutions

Where students of CMC may be involved in research at Institutions which are affiliated with CMC or at Institutions other than CMC, agreement should be reached with that Institution regarding the rights of the student to Intellectual Property with a view to ensuring that the student's rights under this Policy are maintained as far as practicable.

Confidentiality and Non-disclosure

Members of research groups working on potentially securable Intellectual Property should ensure adequate confidentiality measures. Discussions with anybody outside the research group may require the execution of non-disclosure agreements (NDAs). The principal researcher will ensure that a record of discussions and disclosures are adequately recorded and maintained and NDAs are signed on time.

EXPLOITATION OF INTELLECTUAL PROPERTY OWNED BY CMC

Examination of IP claims in Christian Medical College

A researcher or Principal Investigator who wishes to secure IP by filing patents, should write a request (in a prescribed format) to the Vice-Principal Research with a brief outline of the IP claims, and potential commercial value. A committee will be constituted by the Principal containing at least one independent expert from CMC (independent=not in the research group) in addition to administrative nominees. This preliminary committee will examine the claims and recommend how to invest time and money for taking it further – i.e., regarding patent filing, legal advice, commercialization, etc.

Determination by CMC as to commercialisation

Recommendations on IP claims in CMC will then be forwarded to the CMC Intellectual Property Committee as defined in rule 7.1 which will decide within a period of two months of receiving the Notification whether or not it wishes to exploit the Intellectual Property commercially.

Importance of non-disclosure for Intellectual Property protection

In order for CMC to comply with National Principles of Intellectual Property, Funded Research staff members and students should be conscious of the need to avoid premature disclosure of research results to third parties prior to completing a Notification and consideration of the need to obtain intellectual property protection.

Notice of determination by CMC and assignment to CMC

CMC will advise the staff member or student of its decision and, if it elects to proceed, will request that the staff member or student to complete an assignment of their interests in the Intellectual Property in the form of contracts that specify the rights that will accrue to the staff member or student and the Institution (CMC).

Assignment to staff members or students

If CMC decides not to proceed with the exploitation of the Intellectual Property for a particular Notification, subject to the staff member or student having complied with this Policy the staff member or student may request CMC to assign the Intellectual Property to them. Upon assignment the staff member or student will be free to protect and exploit the Intellectual Property at his/her discretion and cost, subject to the interests of any third parties. It is a condition of assignment of the Intellectual Property to the staff member or student that CMC receives a benefit amounting to 20% of the revenue received from the exploitation of the Intellectual Property after costs have been recovered [and that CMC retains a non-exclusive right to use the Intellectual Property for education, training and research purposes]. CMC (where necessary) will complete an agreement to this effect with the staff member or student.

Sharing in the benefits of commercialisation

The share of any net benefit (being benefits after costs are recovered and the legitimate claims of any third parties are satisfied) flowing to a staff member or student who is the creator of Intellectual Property commercialised through CMC will be determined by negotiation between CMC Association and the staff member or student involved. Currently, there are no financial benefits that students or staff may be eligible for (apart from that stated in section 3.4), as long as the work carried out was in the duration of employment or studentship in CMC, or done using CMC resources.

Student creators of Intellectual Property will be treated equivalently to staff members in determining their share of benefits flowing from the commercialisation of Intellectual Property.

Commercialisation by CMC

Without limiting CMC's discretion in undertaking commercialisation of Intellectual Property, in commercialising the Intellectual Property, it will consult with the creator of the Intellectual Property before determining the appropriate commercialisation pathway to be taken. This may include the filing of patent applications, the identification of possible licensees or the formation of a limited liability company to exploit the Intellectual Property.

Assistance to CMC

The creators of Intellectual Property being commercialised by CMC must provide CMC with all reasonable assistance in the exploitation of the Intellectual Property including by providing information promptly, attending meetings and executing appropriate documents without delay.

Commercialisation of Specifically Commissioned Works

The procedures outlined in this Section 5 do not apply to Specifically Commissioned Works. For such works a contract will be developed prior to the work being commenced, with the assistance of the CMC's Legal Office, and a copy of the contract will be maintained on the Intellectual Property register held by the Research Office.

Commercialisation of works for which ownership is not asserted by the CMC

Notwithstanding the exclusions to ownership of Intellectual Property in Sections 3.2 and 3.5, the CMC reserves the right to approach staff authors of works which fall within those Sections which are not Specifically Commissioned and which have not been created with the use of Exceptional CMC Resources, where the net return from exploitation in any one year exceeds a minimum fixed by CMC and reviewed from time to time for any one piece of work, to negotiate with the staff member involved a benefit for CMC which would flow to the CMC Association.

Collaborative research partners

Notwithstanding the need for CMC to ensure an equitable return on Intellectual Property, the CMC acknowledges that, in the context of collaborative research, flexibility in the approach to Intellectual Property negotiation is necessary to ensure that the rights of the third party collaborator are respected.

MORAL RIGHTS

CMC recognises the moral rights of the originators of Intellectual Property in accordance with the Copyright Act. These include the right of fair attribution of authorship or invention, the need for work not to be altered or used in such a way that it harms the reputation of the originator, and an opportunity for the originators to be involved in determining the final outcome of his/her labours.

CMC will use its best endeavours to assist authors in asserting their moral rights in cases where clear breaches of accepted academic conventions occur.

RESOLUTION OF DISAGREEMENTS OVER IP OWNERSHIP

CMC Intellectual Property Committee Membership The membership of this Committee will consist of:

Associate Director-Finance/Administration (Chairman) Principal and Vice-Principal-Research (Convener) Council Secretary/Treasurer

A nominated member of the Research Committee Student Representative

CMC Solicitor or Research Office Solicitor

Terms of reference for the Committee

The Committee will have the following terms of reference:

To make recommendations within the framework of this policy on Intellectual Property matters

To review this Policy from time to time to ensure it is consistent with best practice.

To make recommendations on Intellectual Property matters where there is a dispute.

Resolution of disputes regarding ownership of intellectual property

In the first instance, the CMC Intellectual Property Committee will be the arbiter as to whether the CMC has a legitimate claim to Intellectual Property developed by staff or students. Where a member of staff or a student believes that he/she may have grounds to contest the CMC's claims to ownership of any Intellectual Property, they should bring the dispute to the attention of the Intellectual Property Committee at the time that the development of the Intellectual Property is notified or as soon as practicable. Should he/she disagree with the decision of the Intellectual Property Committee, they may ask the Director to refer the matter to an independent expert, who will be agreed upon by all the parties. The decision of this independent expert will be conducted according to all principles of procedural fairness, and shall be regarded as final and binding on all parties. The process of determining the ownership of Intellectual Property should be completed expeditiously and, except in unusual circumstances, within three months.

Resolution of disputes regarding arrangements with CMC

Where a staff member or a student is unable to reach agreement with CMC with respect to the exploitation of Intellectual Property under Section 5.5, they may refer their grievance to the Director or to the Officer appointed by the Director for that purpose who will attempt to resolve the dispute by mediation within a period of one month. In the event of a continuing grievance, the matter will be determined by an independent expert nominated by the Director.

Confidentiality of disputes

All matters associated with the resolution of Intellectual Property disputes under this Section will be held confidential.

Annexure I

Disclosure of creative work

Disclosure is a critical part of the IP protection process and it formally documents claims of inventor-ship, the date of the invention and other details of the invention. The inventor(s) shall assign the rights of the disclosed invention to CMC.

For sponsored and/or collaborative work, the provisions of the contract pertaining to disclosure of creative work will be written into the agreement.

For all other invention(s) produced at CMC, if the inventor(s) wish to protect the invention(s) they produce, then they are required to disclose the creative work to CMC's Intellectual Property Committee at the earliest date using a Disclosure form obtainable from the CMC intranet.

Confidentiality

Issues related to confidentiality will be adhered to as stated in the 'Guidelines For Signing Up Agreements On Sharing Intellectual Property' (MIHR document 2004, and CMC abridged version of MIHR document 2007).

Assessment of IP, filing copyright/patent etc

Assessment of IP, filing copyright/patent etc shall be by the Intellectual Property Committee.

Revenue/ Royalties sharing with software commercialization

Commercialization will only be done through professional agencies and CMC shall outsource all potential products for commercialization.

CMC will indemnify itself from legal proceedings that may arise out of the products it wishes to commercialize.

From the net earnings of IP revenue to CMC, the inventor will be given an amount ranging from (30% to 70%) as recommended by the IP committee, to be credited into an Institutional account operated by the inventor according to the existing Institutional rules for such operations.

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Annexure II

Definition of terms

Author: employee or student of CMC or visiting faculty who has/have written or created a creative work.

Creator(s): person(s) who have produced any original work

Software: is anything executable in a computer

Copyright: exclusive right granted by law for a period of time to an author to reproduce, print, publish and sell copies of his/ her creative work.

Copyrightable Work: creative work that under copyright laws, including software, teaching materials, multimedia works, proposals, and research reports.

Intellectual Contribution: original technical or artistic contributions.

Intellectual Property: includes copyrights and copyrightable materials, patented and patentable inventions, trademarks, diagnostic algorithms, data collection forms, service marks and trade secrets.

Invention: includes (but is not limited to) new processes, formula, machine either as a concept or assembled in part or as a whole, within the purview of the Patent Act. Inventor(s) are person(s) who produce an invention.

Patent: means the exclusive right granted by law for making, using or selling an invention.

Licensing: is the practice of renting the intellectual property to a third party.

Net Earnings: Earnings resulting from the licensing or commercialization of the IP, reduced by the outstanding actual expenses incurred in obtaining and commercialization of the IP.

Royalty: payment made to an inventor/author or an Institution usually for legal use of a patented invention or any Intellectual Property when licensed.

Christian Medical College, Vellore Material Procurement Policy
Capital Items / All Medical Equipments / Spares & Accessories of high value
User department finalize specifications and obtain quotation from the supplier.
This quotation is forwarded to Capital Budget Committee / GAAT / Administrative Committee
for approval

Decision on Sanction

New Services / increased patient load / replacement / cutting edge.
Data on already available equipment and utilization of the same.
Space availability. Manpower, Consumables, Additional support, statutory requirements.
ROI – Return on Investment
Fund availability

Negotiation

Negotiation take place for rate / warranty & AMC at GAAT level based on
Common items
Common suppliers
Comparative quotes
CMC's strength (Brand Name, Volume of Purchase, Charitable, Teaching & Training institute,
Best Pay Master
Warranty & AMC is also negotiated (usually 3 years warranty + 2 years AMC).

Placing Purchase Order

Purchase Requests are raised based on the Administrative Committee approval These Purchase
Requests are checked and passed by Accounts Department Based on the above approval
Purchase Orders are processed

Receipt of Item

Checking the equipment through Bio-Medical Engineering / Technical Department
Installation / commissioning
Preparing Goods Received Note & Inventory Number
Settlement of payment through accounts departmen

Consumables and items other than capital in nature

User department raise Purchase Request for the required item and forward to Accounts and Directorate for approval

Material Value Rs.	Account Head	HOD	Treasurer	Director
Below 5000	Maintenance Fund	√		
Above 5000	Maintenance Fund	√	√	
Upto 15000	Special Fund	√	√	
Above 15000	Special Fund	√	√	√
Below 100,000 without AC approval (except Medial Eqpt)	Development / Project Fund	√	√	√
With AC approval	Any Fund	√	√	

Selection of Supplier & rate are done by the Purchase Committee based on the following:
Tenders (Annual / limited)
Price List
Rate Contact

Purchase Orders are processed based on the Approval by Purchase Committee Cash / local purchase are also done for items \leq Rs.5000

Items are received at CRS and GRN prepared

Item along with GRN will be sent to user department

Based on the acknowledgement of receipt item, GRNs and Invoices are forwarded to Accounts for making the payment

PURCHASE OF ITEMS AGAINST CONDEMNATION:

Users departments to contact condemnation / Asset Recycling office for condemnation process and to get the condemnation / replacement certificate.

Purchase requests to be raised along with the above certificate for the required item.

Sub Committees

User departments to contact the following technical sub-committees for necessary approvals

UPS

Purchase Orders are placed based on the approval by UPS Committee.

Computer and Printer

Purchase Orders are placed based on the approval by Computer sub-committee through online application available on intranet.

172.16.11.221/miscellaneous/CHIPS application forms/ Computer Committee Approval Form (New)

LIST OF COMPUTER/PRINTER ITEMS NEEDING CSC AND AC APPROVAL

Any computer/printer that is connected to the Clinical Services Network (CSN).

Any computer hardware/printer/software purchase which is not available on the intranet page as a standard quote.

LIST OF ITEMS NEED ONLY CSC APPROVAL WITHOUT FURTHER AC APPROVAL (AS PER AC MIN.NO. 124-a/11/14 dt. 13.11.2014)

Upgradation of RAM as per standard quote

Monitor 17" as per standard quote (new or replacement)

Dot matrix Printer or Laser printer or MF printer < Rs.15000/-

Win 8 Operating system License, MS office License, Acrobat Adobe Reader

Wi-Fi Access Points AP 650N or AP650N DRB (Motorola)

Data Switches < Rs.25000/- for offices

LIST OF COMPUTER ITEMS THAT DO NOT NEED CSC APPROVAL

Mouse, Keyboard, Printer accessories (printer head, tractor feed assembly, platen knob), power cable, printer cable, pen drive upto 8GB and DVD writer.

Spares

Spares Orders are placed based on the approval by concerned Technical Department

CMC IT policy

AC. Min. No. 46-a:5-08 dated 15th May 2008

CMC IT policy, to be read and if found acceptable, a formal agreement signed by users before access into the CMC network.

I. Introduction

Christian Medical College (CMC) provides a wide variety of computing and networking resources to all qualified members of the institution. Within CMC, there are four categories of networks:

The main institutional network

Departmental networks

Residential gateways

VPN connections including teleconferencing and remote access.

All these networks, the software that runs them and the information on them are owned by Christian Medical College and its use is a privilege which imposes certain responsibilities and obligations and which is granted subject to CMC's policies and codes, and local, state and national laws.

Information technology policies ensure that each individual's use of computing and telecommunications resources available at Christian Medical College supports its educational, research, service and administrative mission in the best possible way. Effective support of CMC's mission requires complying with relevant legal, contractual, professional, and policy obligations whenever information technology is used. Effective support also means that individuals should not interfere with the appropriate uses of information technology by others. This policy statement covers privacy of Institutional records; information security and preservation; responsible, ethical use of institutional computers and networks, privacy of electronic communications; and the acquisition and use of third-party products and services.

All users of these resources must comply with specific policies and guidelines and act responsibly while using shared computing and network resources including wireless networks.

II. Scope

This policy applies to all users of Christian Medical College's computing and network resources, whether initiated from a computer / client device located on or off any of its campuses.

III. Policy Statement

Christian Medical College has an obligation to provide accurate, reliable information to authorized recipients and to preserve vital records. CMC is increasingly dependent on the accuracy, availability, and accessibility of information stored electronically and on the computing and networking resources that securely store, process, and transmit this information. Individuals who manage or use the information and computing resources required by the Institution to carry out its mission must protect the integrity of the network and information within it from unauthorized modification, disclosure, and destruction. Information, including data and software must be protected, regardless of the form or medium that carries the information.

IV. Securing/storage-retrieval:

This will be one of the core responsibilities of the maintenance team of CHIPS (CHIPS maintenance) for all the data across all the institution's campuses. CHIPS maintenance will ensure that data is backed up appropriately and that the network has updated antivirus protection. CHIPS maintenance will also secure all signed user documents.

V. Data access:

CHIPS maintenance team will create user identity know hereafter as 'login' for individual users of the network with appropriate rules and permissions that permit access, based on a need-to-know principle and algorithms worked out in concordance with the administration. The rules that govern user identity shall be dynamic and linked into start up and end of appointments as well as roles and responsibilities within the institution.

VI (A) There will be three types of users - those who can access the intranet, those who access intranet and internet, and those who can access only the internet.

VI (A i) Intranet users are those who are authorized by CMC to access intranet in order to carry out their functions within CMC. This will hence be termed 'official users'. Official users will be assigned rights that limit them to specific areas of work in keeping with their responsibility. Each intranet user will have an individual login/password.

VI (A ii) Internet users could also be intranet users depending on the rights allotted to them. Their entry into the intranet will be secured by a password which is different from the internet access password. Those who use internet and the intranet from the same network device shall ensure that sufficient precautions are taken to secure their client device.

VI (A iii) Internet users may not be provided intranet access. Internet users may be official users or private users.

VI (B) Users: Users are persons who have a current login with CHIPS. Some of these login's could be personal (private) or official or both, but all will be logins for a named individual. Login for departmental use will also be an individual login.

VI (C) Only a current official user is authorized to use Christian Medical College's intranet computer facility.

VI (D) Private users (a private user is someone who pays the institution from their own private resources, for having their own login ID) will have access to only the internet. Official users, who also have private user access, will have access to intranet but through an extra password at entry to the intranet.

VI (E) Official users who also have private user access will be expected to be judicious in the use of their intranet access password particularly from their residential connections in order to prevent family and friends from accessing the intranet.

VI (F) Visitors to CMC will be provided individual logins which will provide access only to the internet and not the intranet and the login will be time restricted to their period of stay and is not interchangeable.

VI (G) The right of free expression and academic inquiry is tempered by the rights of others to privacy, freedom from intimidation or harassment, protection of intellectual property, ownership of data, and security of information.

VI (H) All users of CMC computer network should be aware that all logins are monitored through the cyberoam system and current national laws make it mandatory to make available to police and government authorities, log files of users, sites visited and emails sent.

VI (I) Cyberoam information on logins, sites visited and emails sent are classified as 'confidential' and hence this information can be released or looked at only with appropriate authorization by the Director of CMC under special circumstances. CMC and CHIPS being Email custodians, cannot inappropriately access or disclose the content of mail transmitted or stored on CMC owned or CMC controlled information technology resources (e.g., desktop computers, routers, servers, personal digital assistants, etc.), except in the following situations (1) as a response to a court order or other compulsory legal process, (2) in certain other circumstances only with the permission of the director / computer committee (3) when the users is unavailable and the information is necessary to conduct CMCs business, or (4) in health and safety emergencies

VI (J) Users of CMCs IT policy are also subject to CMCs telecommunication policy since the two networks are interlinked.

VI (K) CHIPS development team and CHIPS maintenance team by virtue of their different roles will make available to administration/ computer committee, separate development and maintenance logs and source codes for programmes created in-house. Administration/computer committee will audit these periodically for completeness, quality and ensure these are secured outside the CHIPS environment.

VI (L) In order to ensure that core responsibilities of CHIPS could go on uninterrupted, implementation of newer applications and software into the network for clinical or administrative use will be the responsibility of the administration and not that of CHIPS development or maintenance teams.

VII. Acceptable usage Guidelines

The specific usage guidelines that follow are not intended to be comprehensive, but rather to establish and clarify the intent of this policy. Situations not enumerated here will inevitably arise, and they should be interpreted according to the spirit of this policy.

VII (A) Each user of the Christian Medical College's computer network should hold an individual login/password assigned by CHIPS and is expected to read CMCs IT policy and sign the declaration

before the login is made active. The policy is available on request from CHIPS and also in the campus libraries.

VII (B) Users who have signed the CMC IT policy declaration should take no action that violates the Codes of Conduct and Academic Integrity or other applicable policy or law including those stated in the Staff Service rule book. While this is not a comprehensive list of applicable CMC's policies, in the event of a conflict between policies, the more restrictive use policy shall govern.

VII (C) Use security measures to protect the integrity of information, data, and systems. Users shall protect their computer systems and accounts by using passwords, installing anti-virus software consistent with management directives and keeping such software, as well as the operating system and application security patches, up to date. Users are responsible for safeguarding their identification codes and passwords, and for using them only as authorized. Examples of misuse include using a computer account and/or obtaining a password that users are not authorized to use, using the campus network to gain unauthorized access to any computer system, and using a "sniffer" or other methods in an attempt to "crack" passwords.

VII (D) Clearly and accurately identify one's self in electronic communications, not forge or misrepresent one's identity. Concealing or masking the identity of electronic communications such as altering the source of an email message by making it appear as if the message was sent by someone else is a violation of this policy.

VII (E) Use computer and network resources efficiently. Computing resources are finite and must be shared. Users may use Christian Medical College's computer and network resources for incidental personal purposes, provided that such use does not (A) unreasonably interfere with the use of computing and network resources by other users, or with Christian Medical College's operation of computing and network resources; (B) interfere with the user's employment or other obligations to Christian Medical College; or (C) violate this policy or other applicable policy or law.

VII (F) Report to CHIPS any incident where the user believes that someone tried to break in to their client or the network.

Christian Medical College retains the right to set priorities on use of the system, and to limit recreational or personal uses when such uses could reasonably be expected to cause, directly or indirectly, strain on any computing facilities, or to interfere with research, instructional or administrative computing requirements, or to violate applicable policies or laws. Examples of inappropriate use include circumventing the editor or moderator to post messages to private (closed) listservs, sending "chain letters" or engaging in pyramid schemes, or engaging in unauthorized peer-to-peer file sharing. Sending "spam," defined as unsolicited "junk" e-mail sent to large numbers of people to promote products or services or inappropriate promotional or commercial postings to discussion groups or bulletin boards, is not permitted.

VII (G) Users cannot harass or intimidate or use computer and network resources for unlawful acts. Christian Medical College, in general, cannot and does not wish to be the arbiter of content maintained, distributed or displayed by users of Christian Medical College's computing and network resources. For example, Christian Medical College, in general, cannot protect users from receiving e-mail they may find offensive. Using Christian Medical College's computer or network resources for

illegal activities, however, is strictly prohibited. Unlawful use of Christian Medical College's computer and network resources can expose the individual user and Christian Medical College to damages claims, or potential criminal liability. Unlawful uses may include, but are not limited to: harassment and intimidation of individuals on the basis of race, sex, religion, ethnicity, sexual orientation or disability; obscenity; child pornography; threats; theft; attempting unauthorized access to data; attempting to breach security measures on any electronic communications software or system; attempting to intercept electronic communication transmissions without proper authority; and violation of intellectual property or defamation laws. Users cannot use computer systems to send, post, or display slanderous or defamatory messages, text, graphics, or images. By using the Christian Medical College's computer and network services, each user accepts the responsibility to become informed about, and to comply with, all applicable laws and policies.

VII (H) The use of Christian Medical College's computer resources and networks is for legitimate academic or administrative purpose. Incidental personal use is permissible to the extent that it does not violate other provisions of this policy, interfere with the performance of employee's duties, or interfere with the education of students at the Christian Medical College. Use of personal computer account or the network for commercial activities that are not approved by appropriate supervisory Christian Medical College personnel consistent with applicable policy, or for personal financial gain (except as permitted under applicable academic policies) is prohibited. Examples of prohibited uses include using personal computer account for engaging in unauthorized consulting services, software development, advertising products/services, and/or other private commercial activity.

VII (J) Respect for copyright and intellectual-property rights: Users must adhere to the Indian Copyright Act, the Christian Medical College's Intellectual Property Policy and the terms and conditions of any and all software and database licensing agreements. Any form of original expression fixed in a tangible medium is subject to copyright, even if there is no copyright notice. Examples include music, movies, graphics, text, photographs, artwork and software, distributed in any media -- including online. The use of a copyrighted work (such as copying, downloading, file sharing, distribution, public performance, etc.) requires either (A) the copyright owner's permission, or (B) an exemption under the Copyright Act. The law also makes it unlawful to circumvent technological measures used by copyright owners to protect their works.

VII (K) Unauthorized copying includes lending software to others so that they can make unauthorized copies, as well as letting someone use one's computer on the CMC network to make an unauthorized copy. It is illegal to distribute unauthorized copies of software by any means, including a computer network. When supervisors, instructors, or others arrange for authorized distribution of information technology products and services from outside sources, those individuals are responsible for ensuring that the people having access to the products and services are advised of all the associated usage restrictions.

VII (L) Copyright infringement exposes the user, and possibly the Christian Medical College, to heavy fines and potential criminal liability. Therefore, without limitation of other possible sanctions, Christian Medical College may refuse, suspend and/or terminate computer and network access, with respect to any user who violates the copyright law, or who uses the Christian Medical College computer or network resources contrary to the terms of Christian Medical College's software or database license agreements.

VII (M) Respect for Christian Medical College's property: Misuse of Christian Medical College property includes, but is not limited to, theft or damage of equipment or software, knowingly running or installing computer viruses or password cracking programs, attempting to circumvent installed data protection methods that are designed and constructed to provide secure data and information, or in any way attempting to interfere with the physical computer network/hardware, or attempting to degrade the performance or integrity of any campus network or computer system.

VII (N) CMC owns and operates its electronic mail (e-mail) infrastructure, which must be managed in a manner that preserves a level of privacy and confidentiality in accordance with relevant laws, regulations, and current CMC policy. While CMC permits limited personal use of its email infrastructure, those availing themselves of this privilege do not acquire a right of privacy in communications transmitted or stored on CMC's information technology resources.

VII (O) Privileged access to data may only be used in a way consistent with applicable laws, institutional policies, and accepted standards of professional conduct. Those who have access to databases that include personal information shall respect individual privacy and confidentiality, consistent with applicable laws and institution policies regarding the collection, use and disclosure of personal information

VII (P) Respect and adhere to other departmental/college/Internet Service Provider's acceptable use policies. When using a university computer system and/or network to connect to a non Christian Medical College system or network, adhere to the prevailing policies governing that system or network. This does not in any way release the user's obligation to abide by the established policies governing the use of Christian Medical College computer systems and networks.

VIII. Recourse for Misuse and/or Non-Compliance:

Aforementioned policies in this document include action steps to be taken to determine whether or not an individual has, in fact, misused Christian Medical College's computing and/or network resources. Protections of the rights of individuals accused of policy violations afforded by those policies also apply.

Users who misuse Christian Medical College's computing and network resources or who fail to comply with Christian Medical College's written usage policies, regulations and guidelines are subject to one or more of the following consequences:

Temporary deactivation of computer/network access

Permanent deactivation of computer/network access

Disciplinary actions taken by the department or Principal and including expulsion from college or termination of employment

Legal prosecution under applicable laws

Possible penalties under the law, including fines and imprisonment

Violations, complaints and questions should be reported to the Head, CHIPS, by email (xxxx@cmcvellore.ac.in) or call xxxx.

IX. Obligations of the user:

Legitimate use of the computer does not extend to whatever an individual is capable of doing with it. Although rules are built into the system, each user is responsible for his or her actions while using Christian medical College's computer system.

The user must:

- IX 1. Understand and comply with current policies, requirements, guidelines, procedures, and protocols concerning Christian Medical College's electronic networks and IT devices.
- IX 2. Update \ security applications, including anti-virus software and operating system updates, in a timely fashion.
- IX 3. Protect the resources under your control with the responsible use of secure passwords and by appropriately establishing an administrator password.
- IX 4. Assist in the performance of remediation steps in the event of a detected vulnerability or compromise.
- IX 5. Comply with directives of administration, CHIPS , and local support provider(s), to maintain secure devices attached to the network;
- IX 6. Follow electronic security incident reporting requirements.
- IX 7. Comply with administration's right to introduce any new software to facilitate patient care or for more efficient ways to manage the institution.

Name of the user:

Address:

Institutional affiliation (if any):

Contact phone number:

Email ID:

Reason for being in CMC:

I have read the above policies pages 1 to 7 and I agree to the terms and conditions.

Signature.....

Date.....