

-Medical College and Hospital-Minutes of Meeting

| Meeting Title | Internal Quality Assurance Cell | |
|-----------------|--|--|
| Date of Meeting | 22.06. 2019 | |
| Meeting Venue | College council hall | |
| Meeting Agenda | To review the minutes of the previous meeting and action plan report of the year 2018-19 To discuss on implementation of competency based medical | |
| | education | |
| | 3. To discuss academic calendar for year 2019-2020 | |
| | 4. To discuss on the action taken report of stockholders feedback | |
| | 5. To discuss on implementation of students support system | |
| | 6. To review the NIRF data and to address the gap | |
| | 7. Update on NAAC | |
| , | 8. Any other issues | |

| Key I | Key Meeting Outcomes | | |
|-------|--|--|--|
| 1 | The action plan report of 2018-2019 year was approved | | |
| 2 | The action plan for implementation of competency based medical education was | | |
| | finalized | | |
| 3 | The academic calendar for 2019-2020 was finalized | | |
| 4 | The stockholders feedback and action taken report was evaluated | | |
| 5 | The plan for implementation of Students support system was finalized | | |
| 6 | The attainment plan for the parameters of NIRF was finalized | | |
| 7 | The process of NAAC was discussed | | |
| 8 | The Student / Faculty exchange program with National / International Institute to be initiated | | |

IQAC

Chairperson

IQAC

Kalitheerthalkuppam, Madagadipet, Puducherry - 605107.
Tel: 0413 - 2643000, 2643014, College: 2643023 | Fax: 0413 - 2641549 | E-mail: principal@smvmch.ac.in | Web: www.smvmch.ac.in



-Medical College and Hospital -Internal Quality Assurance Cell

Action Taken Report

2018-2019

| Sl. No | Decisions | Action Initiated |
|--------|---|--|
| 1 | To conduct orientation programme for second year students. | The orientation program for second year students was conducted and session on AETCOM was introduced. |
| 2 | The need for the Skills lab was discussed. | The Skills laboratory at 5 th floor of hospital block will be renovated and Dr. S. Jaysree, Professor of OBG will coordinate the activities related to Simulation based medical education. |
| 3 | To review the action plan for Faculty development program. | The FDP on AETCOM during 23 rd -27 th July 2018 was organized under the observation form nodal centre of Dr.Kadambari. The team of trainer for Curriculum Implementation support program was approved and disseminated to JIPMER, MCI Nodal centre. |
| 4 | As suggested by the Governing body, IQAC would coordinate with each department to apply for NIRF ranking. | The IQAC coordinated with the documentation process in the department and same was collected for NIRF also. |
| 5 | The action taken report on student's feedback was reviewed. | The feedbacks from alumni, faculty, employer and parents were analyzed and submitted. |
| 6 | To consider application for accreditation of institutional ethics committee. | Institutional Ethics committee has approved by the Strategic Initiative for Developing Capacity in Ethical Review (SIDCER) accreditation process. |

Kalitheerthalkuppam, Madagadipet, Puducherry - 605107.



| 7 | The concerned department should | The department has nominated one faculty for |
|----|---|--|
| | train the students participating in | training the students participating in quiz |
| | quiz. | program. |
| 8 | All faculty should be oriented / | As per the instruction of MCI the faculty |
| | trained to competency based | belonging to Phase I and Phase II were trained |
| | medical education. | in CISP for implementation of CBME. |
| 9 | The MBBS course program | The preparation of time table as per |
| | outcomes and time table have to | Competency based medical education was |
| | be prepared as per the competency based medical education | planned with Head of the departments through |
| | based medical education envisioned by MCI | curriculum committee. |
| 10 | The faculty should be motivated | The administrators were asked to convey to |
| | to attend capacity building | the faculties during the department monthly |
| | programmes for their personal | meetings. |
| | professional development. | |
| 11 | To evaluate the faculty | The feedback received was reviewed. |
| | development programs organized | |
| | by the institution. | |

Coordinator IQAC

Chairperson IQAC



———Medical College and Hospital————

Internal Quality Assurance Cell

Minutes of Meeting

| Meeti | ng Title Internal Quality Assurance Cell | | |
|------------------------------------|--|---|--|
| Date of Meeting | | 18.01.2020 | |
| Meeting Venue College council hall | | College council hall | |
| Meet | eting Agenda 1. To review the minutes of the previous meeting | | |
| | | 2. To review the NAAC process | |
| | | 3. To discuss on research and publication | |
| | | 4. To review the status of NIRF data | |
| | | 5. Any other issues | |
| Key | Key Meeting Outcomes | | |
| 1 | The previous minutes of meeting was discussed | | |
| 2 | The SSR was submitted and DVV completed | | |
| 3 | The plan of action for peer team was finalized | | |
| 4 | The analysis of Publication was done | | |
| 5 | The plan of action for research funding was finalized | | |
| 6 | The status of IPR implementation was reviewed | | |
| 7 | The NIRF data was reviewed and the areas for improvement was discussed | | |
| 8 | The submission of data for AISHE was discussed | | |
| 9 | The renewal of ISO certification, Green audit and Energy audit was discussed | | |

Coordinator IQAC

Chairperson IQAC

Kalitheerthalkuppam, Madagadipet, Puducherry - 605107.



— Medical College and Hospital —— Internal Quality Assurance Cell

Minutes of Meeting

| Meeting Title Internal Quality Assurance Cell | | | |
|---|--|---|--------------------------------------|
| Date of | of Meeting | 18.11.2020 | |
| Meeti | ng Venue | College council hall | |
| Meeting Agenda | | To review the minutes of the Action taken report of 2019-20 | previous meeting and approve the 020 |
| | | 2. To discuss the criteria wise g for NAAC accreditation | ap report and further plan of action |
| | | 3. To discuss implementation by Peer Team 4. To discuss on FDP for reseat 5. To discuss on NIRF report 20 6. To discussion on Publication 7. Any other issues | 19 and areas for improvement |
| Kev | Meeting Outcomes | 7. This other issues | 32 |
| 1 | The previous minu | ites of meeting was discussed and A | ction taken report of 2019-2020 was |
| | approved | | |
| 2 | The following wa | s discussed | |
| | | er Team report | |
| | - Institutiona | al Grade sheet | 1 1046 |
| | | | ap report was approved and IQAC |
| 3 | coordinator will oversee the pan The Criteria wise weighted grade score was assessed | | |
| | | | |
| 4 | Organizing FDP on research publication in indexed journal and IPR was discussed | | |
| 4 | The analysis of publication was discussed | | |
| 5 | The renewal of ISO certification, Green audit and Energy audit was planned | | |
| 6 | The gap in NIRF data was identified and planned to address the gaps | | |
| 7 | The evaluation of CBME program of Ist year will be conducted by Dr. Soudriyaa and team | | |

Coordinator

IQAC

Charperson IQAC

Kalitheerthalkuppam, Madagadipet, Puducherry - 605107.





—Medical College and Hospital —

Internal Quality Assurance Cell

Action Taken Report of 2019-2020 meeting outcomes

Date: 02.07.2020

| Sl. No | Decisions | Action Initiated |
|--------|----------------------------------|--|
| 1 | Implementation of competency | 1. Foundation course for one month was |
| ž 8 | based medical education | implemented was coordinated by Dr.Deepika, |
| 2 | a | Assistant Professor of Physiology |
| | , · | 2. FDP on Integration , E-learning, CO-PO |
| | | mapping, planning Time table was organized |
| | | by MEU |
| 2 | Stockholders feedback | The feedbacks from alumni, faculty, employer |
| | | and parents were analyzed and submitted. |
| 3 | Implementation of students | 1. The current Mentor-mentee program was |
| | support system | modified as student's support system. |
| | | 2.The mentors were trained in Students |
| | | Support system |
| | | 3.SOP for prepared and implemented |
| 4 | To address the identified gap in | 1.Publication in Indexed journal: FDP on |
| | the NIRF data. | 'How to write article?' and Publication in |
| | | indexed journal was conducted |
| | | 2. IPR: MoU was signed with MIT for |
| | | guidance in Patent |
| 5 | Update on NAAC | 1.Applied for IIQA on12.4.2019 and was |
| 41 | 0 | approved on 11.7.2019 |
| | | 2.SSR will be reviewed and submitted by 31 |
| | | August 2019 |
| | | |

Kalitheerthalkuppam, Madagadipet, Puducherry - 605107.



Sri Manakula Vinayagar Medical College and Hospital

Continuation Sheet

| | | 3. The preparation for Peer team visit was |
|---|---------------------------------|---|
| | | planned and team for oversee the visit was |
| | , x | formed. Will be supervised by Director / Dean |
| | | 4.Orientation of about Peer team visit and |
| | | NAAC process was conducted to the faculties |
| | | 5.Certificate courses form MBBS students was |
| | | planned and conducted |
| 6 | Green Audit Energy audit and | The Green audit / ISO certificate was renewed |
| | ISO certificate | |
| 7 | To finalize AISE data for 2019- | The AISE data was approved and submitted |
| | 2020 | |
| | | |

Coordinator

IQAC

Chairperson

IQAC