

INSTITUTIONAL BEST PRACTICE - 1

Title: CO-CURRICULAR ADVISORY COMMITTEE

Objectives of the Practice: The Co-curricular advisory committee (CAC) is aimed to remove the bottleneck and provide astute advice from a department's perspective for smooth conduct of co-curricular activities and judiciously allocate the resources for Conference/Workshop /Seminars/Quiz/Debate etc.

The Context: CAC is a strategic venture to share opinions and perspectives, and develop recommendations in a structured manner on design, budget and execution of the program, following submission of the proposal by the concerned department. CAC is constituted of Chairperson, secretary and members and requires collaboration from various departments and the Medical education unit.

The pre-requisites to be submitted by event organizers:

- A) Advanced booking of the venue.
- b) Identification of financial sponsors
- c) Requirement of funding from the institution
- d) Detailed Program schedule.

The Practice: CAC motivates and guides faculty to conduct need-based co-curricular events by adopting the following protocol.

1. Submission of the proposal to the IQAC in the prescribed format
2. IQAC gets recommendation from CAC
3. CAC submits for approval by Director/ Dean
4. Approved proposal sent to Registrar (Copy to IQAC)
5. Organisers to collect funds (if needed) from the Registrar


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a. Organizing committee:

The applicant forms an organizing committee constituting of Organizing Chairman, Secretary, Treasurer, and various sub-committees representing the departments/allied specialties.

b. Event funding:

The management assists and facilitate the event, but the final responsibility of arranging finances remains with the event organizers. The organizers shall obtain PAN card if the budget exceeds one lakh INR.

c. Event Conduct:

The event shall be conducted in compliance with all applicable rules and regulations. An application shall be submitted to TNMC for CME credit points where ever applicable.

d. Report:

Upon completion of the event, the Organizing Secretary shall submit a report to IQAC within 10 working days.

e. Disputes and Jurisdiction:

In case of any disputes, the organizing committee's decision is final.

f. Function of the advisory committee:

CAC reviews the proposal submitted by each sub-committee and approves/disapproves as deemed necessary. In case of disapproval, the committee recommends suggestions and after necessary rectifications, the proposal can be resubmitted for final approval. Once approved, the organizing committee shall seek advice/approval from CAC during implementation of the proposal.


Evidence of Success:

The involvement of the CAC in organizing events had shortened the planning and execution time by removing the bottlenecks and had resulted in the dramatic increase in number of events

organized by the institution. Apart from professional development, CAC had set trend for students to plan and execute events like 'SIMSCON'. Apart from reiterating the departments to follow systematic protocols in conducting programs, CAC greatly enhances the academic visibility of the institution globally.

Problems Encountered and Resources required:

Submission of proposal at last minute without proper window time for CAC results in lack of coordination, difficulty in obtaining approval from authorities and allocation of various resources. Allotment of venue for events planned on same date, allocation of funds for over budgeting proposals with international resource persons and accommodating delegates from the out station are also challenging.


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INSTITUTIONAL BEST PRACTICE - 2

OUTCOME-BASED EDUCATION (OBE) - CO-PO MAPPING

Objectives:

To evaluate the student learning outcomes by attainment percentage level calculation based on mapping of defined program and course outcomes, since it is the most important aspect in the outcome-based education. It includes both direct as well as indirect methods to assess the learning.

The context

The graduate attributes and the competencies are stated as per the regulatory bodies: National Medical Council and Pondicherry University. The process of calculating the competency attainment for the assessments further confirms that the teaching learning process are in alignment with each other. The process assists in identifying the competencies which are; attained; not attained; tested; not tested in the assessment. The **final attainment** is calculated based on grading-20% weightage to internal attainment and 80 % weightage to external attainment (60% weightage to theory and 20% weightage to practical and viva together).

The practice:

The competencies are mapped with the PSOs and the correlation matrix is prepared for each course. Workshops on mapping and correlation matrix are conducted phase wise by the Medical Education Unit. Correlation matrix is leveled as 1, 2, 3; where 3 represents that the specified competency and PSO/specified PSO and graduate attribute are in perfect alignment and hold high degree of correlation, 2 represents moderate alignment and correlation while 1 represents low alignment and correlation.

Action plan

Based on the correlation matrix and competency attainment calculation, the gaps are analyzed for which action plans are worked out for the non-attained competencies/PSOs.

Framing of Course Outcomes:

The alignment part of the “constructive alignment” process is taken care by the respective teacher. The faculty is mindful regarding the “Bloom’s taxonomy” to understand different levels of cognition. They are also trained in framing and mapping the learning outcomes with appropriate Teaching Learning Methods and assessments during the “Revised Basic Course Workshop in Medical Education Technologies” organized by the Institution as per the NMC guidelines. The trained faculty frame the objectives for the competencies stated

by the NMC. The teaching learning method and assessment for all the competencies are planned by the respective department at the beginning of the academic year.

a. Communication to the students

During orientation program for students, the basic attributes and roles of an “Indian Medical Graduate” are elaborated. Mentors and the faculty utilize all the possible ways to inculcate the graduate attributes through effective pedagogic strategies.

b. Methods of assessment

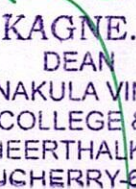
The different assessment methods employed are Formative and Summative assessments. The marks secured by students in every question of the Examinations are considered to determine the attainment of corresponding CO and it is matched with attendance, internal assessment exams and university exams.

5. Evidence of success

Evaluating the attainment of learning outcomes had resulted in better understanding of the competency level of students, identify the gaps in their learning process and provide tailor made teaching learning as per the learners’ needs.

6. Problems encountered and resources required

Time commitment of the faculty to plan and design the course outcomes amidst their academic and clinical workload is a major challenge.


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