DATTA MEGHE INSTITUTE OF MEDICAL SCIENCES

(Declared as Deemed to be University under Section 3 of UGC Act, 1956)
Conferred 'A' Grade Status by HRD Ministry, Govt. of India
Re-accredited by NAAC (3rd Cycle) with 'A+' Grade (Score 3.53 on 4 Point Scale)
Sawangi (Meghe), Wardha

IQAC

Internal Quality Assurance Cell

Quarterly Meeting 10.06.2021

Agenda Papers

Agenda for Quarterly Meeting of Internal Quality Assurance Cell to be held on 10 June, 2021 at 12.00 noon at IQAC Board Room, DMIMS (DU), Sawangi (Meghe), Wardha.

	Item to be discussed
1	To **confirm the minutes** of the last Quarterly IQAC Meeting held on 16th January, 2021 at IQAC Board Room Sawangi (Meghe), Wardha.
2	To approve the **'Action Taken Report'** of the last Quarterly IQAC Meeting held on 16th January, 2021 at IQAC Board Room of DMIMS (DU), Sawangi (Meghe) Wardha.
3	To review the status of ATR of PM board meeting held in July 2020
4	To consider the policy contribution for "**Preparation of Competency based Guidelines and Minimum Standard Requirements (MSR) for DM Geriatric Mental Health' under convenorship of Dr Sunil Kumar, Professor, Medicine**
5	**To review the status of AQAR 2019-20.**
6	**To deliberate upon revised AQAR format to be filled from 2020-2021**
7	**To deliberate upon the action plan of DMIMS regarding its preparedness for the 3rd wave of COVID pandemic.**
8	**To adopt the** **1. Draft Competency Based Dental Education (CBDE), 2. ICT based Teaching Learning and Assessment strategies during COVID – 19 Pandemic and Tangible Outcomes 3. The Roll out model of CBDE**
9	**To standardize the concept note of 'Validation of Outcome based Electronic Question bank by learners : A quality initiative towards Empowering learners as proponents of curricular change DMIMS(DU)'**
10	**To propose 'Elective in Obstetric Ultrasound for MD/MS Obstetrics and Gynecology – A value added course'**
11	**To review PDP status and discuss new parameters with respect to IOE/TIMES/QS/NIRF/ NAAC**
12	**To consider the road map of IRAW for International Accreditations and Rankings**
13	**To adopt the AAA report for 2020**
14	**To Compare the NIRF data of Various Deemed to be Universities vis a vis DMIMS submitted data**
15	**To propose the 'Education program on Systematic literature review for Doctoral scholars' as a value added course in Doctoral program of DMIMS(DU)**
16	**Any other matter :** **a. To consider the note sheet from Dr Alka Rawekar, Dean SAHES for Institutional policy for Quality enhancement of the faculty of Allied Health Sciences Program** **b. To consider Qualitative measures emanating out of meeting of COE held on 10th June 2021** **c. To Establish IQAC cell at DMMC**

Internal Quality Assurance Cell

Date: 10/06/2021

Minutes of the Quarterly Meeting of Internal Quality Assurance Cell held on the 16th January, 2021 in IQAC Board Room, DMIMS (DU), Sawangi (Meghe), Wardha

A Quarterly meeting of Internal Quality Assurance Cell, Datta Meghe Institute of Medical Sciences (Deemed to be University), held on the 16th January, 2021 in Board Room, DMIMS (DU), Sawangi (Meghe), Wardha.

The Following members and Invitees attended the meeting:

Sn	Name of Member	Designation
1	**Dr Vedprakash Mishra** *Hon'ble Pro-Chancellor, DMIMS (DU)*	Invitee
2	**Shri. Sagarji Meghe** *Hon'ble Member of Board of Management, DMIMS (DU)*	Invitee
3	**Dr. Rajiv Borle** *Hon'ble Vice-Chancellor, DMIMS (DU)*	Chairman, IQAC
4	**Dr.Lalitbhushan Waghmare** *Hon'ble Pro Vice-Chancellor, DMIMS (DU)*	Member, IQAC
5	**Dr.B. Ghewade** *Hon'ble Registrar, DMIMS (DU)*	Member, IQAC
6	**Dr. S.S. Patel** *Hon'ble Chief Co-ordinator, DMIMS (DU)*	Member, IQAC
7	**Dr. Sandeep Shrivastava** *CEO, Hospital, DMIMS(DU)*	Member, IQAC
8	**Dr Priyanka Banode** Director EAE	Member, IQAC
9	**Dr Minal Choudhary** Director PhD	Member, IQAC
9	**Dr Zaheer Quazi** Director R &D	Member, IQAC
10	**Dr Swanand Pathak** Director SHPER	Member, IQAC

11	**Dr.Abhay Mudey** *Dean, DMMC*	Member, IQAC
12	**Dr Dilip Gode** *Dean, Jawaharlal Nehru Medical College*	Member, IQAC
13	**Dr Manoj Chandak** *Dean, Sharad Pawar Dental College*	Member, IQAC
14	**Dr.Vaishali Kuchewar** *Dean, Mahatma Gandhi Ayurved College, Hospital & Research Centre*	Member, IQAC
15	**Dr. R.K. Sinha** *Principal, Ravi Nair Physiotherapy College*	Member, IQAC
16	**Dr. Seema Singh** *Principal, Smt. Radhikabai Meghe Memorial College of Nursing*	Member, IQAC
17	**Dr Alka Rawekar** Member, IQAC	Member, IQAC
18	**Dr Sagar Wankhede** Dean , DMCOP	Member, IQAC
19	**Dr.Tripti Srivastava** *Director, IQAC, DMIMS(DU)*	Member Secretary, IQAC
20	**Dr. Gaurav Mishra** Co-Convener IQAC	Member, IQAC
21	**Dr.Ranjit Ambad**	Member, IQAC
22	**Dr Pawan Bajaj**	Member, IQAC

Leave of absence was granted to Hon Vice Chancellor, Dr RM Borle, in view of his ill health. The meeting was chaired by Hon Pro Vice Chancellor, DMIMS (DU) Dr Lalitbhushan Waghmare.

Item no 3 : To note plan of Accreditation, Rankings & Awards and Academic and Administrative Audit for 2020-2021 and 2021-2022

The Accreditation plan for the year 2020-2021 and 2021-2022 was presented in detail. The various issues related to NIRF 2021 application were presented by Director IQAC as follows;

a. Number of PhD (ongoing and registered in relevant year): MD/MS/MDS to be added both at number and passing : Hon Pro VC suggested that the number of passes MD/MS/MDS students during the given year must be included under this category unlike previous year.
b. Online Education regarding Number of courses developed and available online on SWAYAM platform by your Institution faculty. Hon Pro Chancellor suggested that preparation of SWAYAM courses must

be undertaken on priority. A separate expert group must be formed for this task and the work should be undertaken with defined targets.

c. Mean salary in placement

d. Student Faculty ratio: Hon Pro Chancellor and Hon Chief Co-ordinator suggested that the optimum faculty : student ratio must be worked out taking into consideration various parameters where faculty number is considered in denominator.

Item no 4: To consider the Status of PDP indicators – revised in September 2020 in view of new key indicators and metrices by NAAC for Health Sciences and NIRF rankings

The newly added PDP indicators were discussed regarding action plan to achieve the targets. It was discussed that student training programs for capability enhancement and career counselling must be planned and implemented under the guidance of Director Student Welfare for various courses of the University.

Item no 6: To propose 'An operational framework for Validity and Authenticity of theory examination in a Competency Based Curriculum".

Hon Pro VC appreciated the proposed model and directed IQAC to submit the same for copyrighting and piloting from 2nd Year CBME batch onwards and the experience generated thereto upon completion of the first admitted batch under the CBME Mode be catalogued and forwarded to the competent authorities for their usage thereon for policy framework as a 'basal or a referral document'

Item no 7. To present the 'Compendium on COVID-19 Initiatives of DMIMS(DU)'

Director IQAC informed the house that the compendium has been complied and is organized into Academics, Research, Health Care and Administrative initiatives. The Compendium was approved by Chair with a suggestion to incorporate the Immunization of COVID – 19 vaccine within 'healthcare' initiatives.

Item no 8 : To present the 'Utility document on policy frame for reference for mentee colleges'.

The Utility document was appreciated and found to be of significant consequence to any mentee college. The said document was suggested to be submitted for copyright.

Item no 9 : To recommend the Modified Academic Calendar DMIMS (DU) course in view of COVID-19 Pandemic

Modified academic calendar prepared under guidance of Dean faculty of all courses of the University was appreciated and approved by Hon Pro Chancellor Dr Vedprakash Mishra. Director IQAC informed the chair that prepared the academic calendar is prepared taking into account the residual portion of curriculum after notional promotion, policy guidelines and academic calendar as prescribed by various regulatory bodies.

Item no 10 : To note Introduction of Standardised Patient (SP) for Skill training in Medicine, Dentistry, Ayurveda, Physiotherapy and Nursing Faculty of DMIMS(DU)

a. Director IQAC informed the house the University has taken initiative to introduce Standardized patient based clinical Skill training of undergraduate students for all health care courses. The objectives of the initiative is to offer ethical ground for practice of clinical skills and multiple opportunities to practice those skills in a safe and controlled environment

b. To foster clinical skills (History taking skills, procedural skills, physical examination, clinical reasoning skills etc.) in an Indian Health Professional Graduate.

A total of 362 case scenarios are prepared and role actors are coached to portray the same.

Item no 11 : To recommend the plan of on-boarding and Integration of the off campus centre of DMIMS (DU), Datta Meghe Medical College , Nagpur with various Academic, Research and Administrative process and practices of DMIMS(DU)

Hon Pro Chancellor approved the plan of on boarding and Integration of the off campus centre of DMIMS (DU), Datta Meghe Medical College , Nagpur with various Academic, Research and Administrative process and practices of DMIMS(DU), as suggested by Hon Vice Chancellor.

Item no 12 : To present the 'Concept note on Research Advancement in High priority areas under Intramural Grant Scheme'.

The Concept note was appreciated and found to be relevant for targeted intramural grant applications. Hon Pro Chancellor suggested the concept note to be incorporated in Research Policy of the Institute with provision of financial bearing in the existing intramural grant budget of R&D.

Item no 13. Any other matter with the permission of the Chair

The status of PO-CO mapping and EQP Mapping with CO was presented by Director IQAC and Director SHPER. Hon Pro Chancellor directed Director SHPER to certify the content and format of electronic question bank and Test blueprints.

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Internal Quality Assurance Cell

Date: 10/06/2021

Actionable Points of the Quarterly Meeting of Internal Quality Assurance Cell held on 16th January, 2021 at 12.30 p.m. in IQAC Board Room, DMIMS (DU), Sawangi (Meghe), Wardha.

Sr no	Actionable point	Person responsible	Action taken report
1	The Student Apprenticeship program be rechristened as 'Structured embedded Apprenticeship' Program and be considered as one of the initiatives towards actualization of NEP 2020	Director IQAC	Structured embedded apprenticeship program is incorporated in revised curriculum of AHS & ODL courses (BA, BBA & B Com) as an initiative towards actualization of NEP along with allocation of credits , credit transfers and multiple entry / exit option.
2	**'School of One Health Sciences'** be established in DMIMS (DU) to actualize the recommendations of Planning and Monitoring Board. A collaboration be worked out with the Government Animal Husbandry Unit for the purposes of broadening the horizons of the School.	Director R&D	A department of 'One Health Sciences' is established under the 'School of Epidemiology' in 2020. As such the objective of incorporating the veterinary sciences is after the phase 1 and the collaboration will be worked out within the next six months.
3	Venture into Application for 'Institute of Eminence' for the year 2021-22 as and when the next cycle of application is initiated by the UGC and MOE.	Hon Pro VC Director IQAC	The actionable points for IOE application is prepared. Call for Applications are awaited.
4	The International Accreditations wing of IQAC recommends venturing into QS Star Ratings and TIMES Impact rankings with a tangible 5 year action plan for International Accreditations.	IRAW wing of IQAC Director IQAC	The concept note and road map of International rankings and accreditations (TIMES & QS) is submitted by IRAW of IQAC. The five year road map is included in Agenda Item
5	Allocation of a team of experts with		SWAYAM / SWAYAM PRABHA courses

	a targeted action plan for preparing UGC - 'SWAYAM' courses. Quarterly IQAC to monitor.	Director IQAC	JNMC : 25 thematic lectures identified. Application mailed to SWAYAM PRABHA portal MGAC : Dr Vaishali Kuchewar, Dr Priti Desai 1.Fundamentals of Ayurveda 2.Ayurvedic Dietetics system of Medicine, Dieticians , Health care workers etc. Application mailed to SWAYAM PRABHA portal IFFW & ICC : Dr Nilima Thosar, Dr Bhavana Lakhkar, Course on 'Women safety & empowerment at Workplace'
6	Application for copyright of three Literary work "An operational framework for Validity and Authenticity of theory examination in a Competency Based Curriculum", 'Utility document on policy frame for reference for mentee colleges' and 'Concept note on Research Advancement in High priority areas under Intramural Grant Scheme' presented in Quarterly IQAC Jan 2021.	Director IQAC	All documents have attained copyright status by IPR Office, GOI 1. An operational framework for Validity and Authenticity of theory examination in a Competency Based Curriculum : **L-102034/2021** 2. a. Utility document on policy frame for reference for mentee colleges : **L-103960/2021** 2.b. Activity plan for mentorship under Paramarsh by Datta Meghe Institute Of Medical Sciences, **L-103960/2021** 3. Concept note on Research Advancement in High priority areas under Intramural Grant Scheme : **L-102491/2021**
8	The Concept note on Research Advancement in High priority areas under Intramural Grant Scheme be incorporated in Research Policy of the Institute with provision of financial bearing in the existing intramural grant budget of R&D.	Director R &D	Concept note on Research Advancement in High priority areas is incorporated in Research Policy of the Institute with provision of intramural grant.
10	Compilation of 'Evidence based Health Professions Education	Director IQAC	The compilation of Evidence based Education practice in 1. Teaching Learning

	practices' at DMIMS(DU) with regards to Teaching, Learning, Assessments, Examinations and Evaluation.		& 2. Assessment and Evaluation practices at DMIMS is being prepared taking into account various projects, publications , copyrights, processes and SOPs generated by DMIMS till date and will be completed by 15th July 2020.
11	The Perspective Development Plan (PDP) and aligned quantitative indicators for the off campus center of DMIMS (DU), DMMC, be structured and put to regular monitoring of targets against identified indicators by IQAC.	Director IQAC	PDP of DMMC is prepared and put to regular monitoring of targets by IQAC.

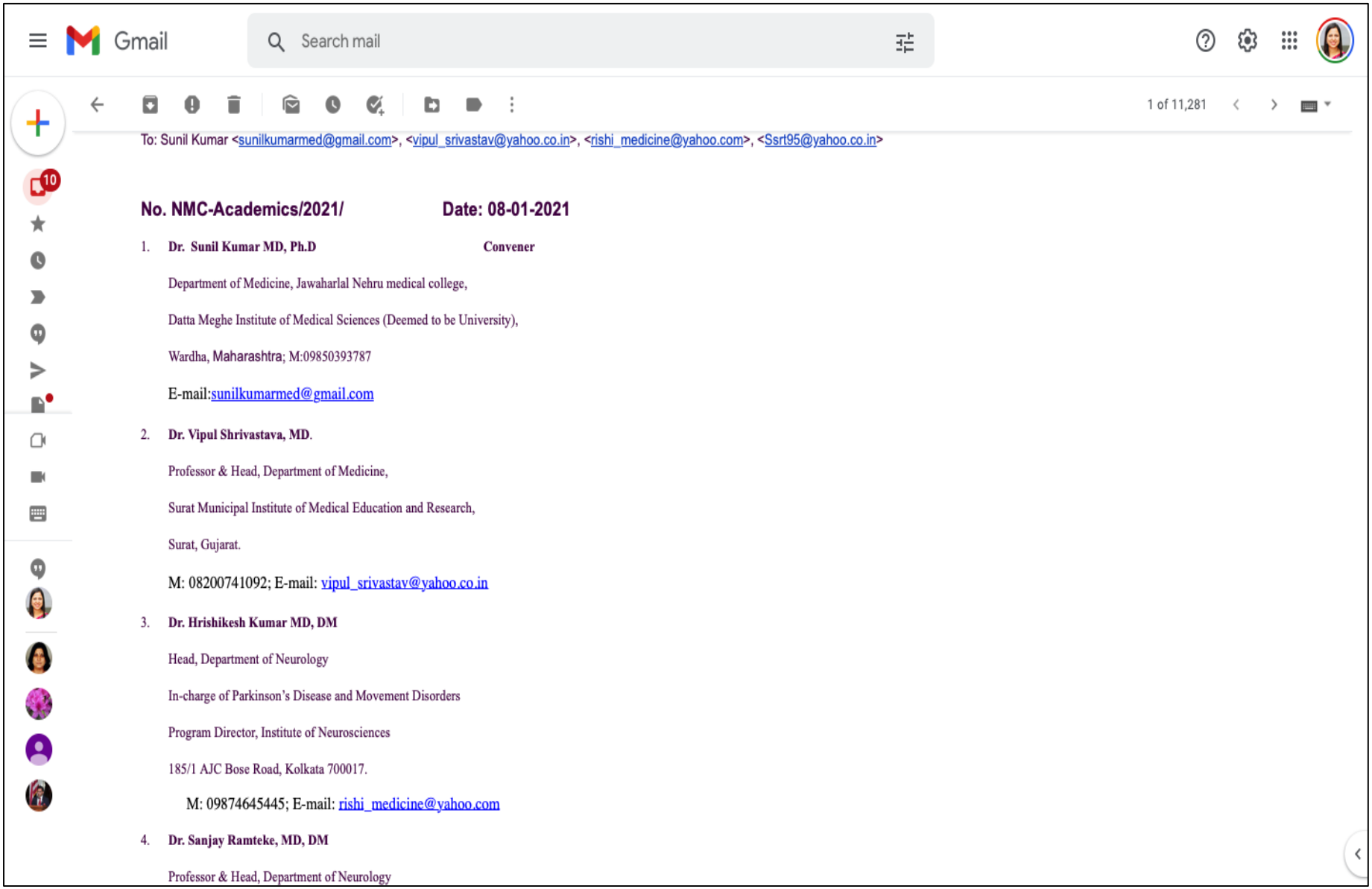
Agenda item 3 : To review the status of ATR of PM board meeting held in July 2020

Sr. no	Actionable points	Person responsible	ATR
1	To incorporate the future targets of NIRF ranking into a set targets and move in accordance with the same	Director IQAC	The future targets for NIRF ranking are included in PDP along with inclusion of 5 new indicators and 2 revised indicators
2	To structure standing planning mechanism to align the PDP of the university in terms of the Education Policy of UGC and policies of various Govt. Authorities in a continual manner.	Director IQAC	The Planning mechanism to align PDP is structured. The suggested inclusions are presented as an agenda item for discussion
3	To update the thrust areas in terms of directional details for probable areas and areas of probable operation pertaining to the Tribal health	Director R & D	Complied . Areas identified. Concept note on 'Research Advancement in high priority areas under intramural grant scheme' submitted.
4	• To work out collaborative linkages between DMIMS and Sri Ramchandra Institute of Hr. Edu. And Research Chennai to work together for operational implementation of OUTCOME Assessment Model for Health Sciences Institution as DMIMS model. • To structure a white paper on operational part of this model jointly by both the institutions. • To put the Operational aspects/parts/modes at both the centers • To incorporate this document as referral a document (DMIMS model) for the purposes of further policy frame by the policy makers of the country on this count. • To undertake some pilot projects in some PG Subjects i.e. dermatology, psychiatry, ENT etc.	Director IQAC	SRIHER has principally agreed for a multicentric project on our copyrighted model '4 step escalating DMIMS blended learning mode of higher education' for operational implementation of OUTCOME Assessment. A virtual meeting for further plan of action will be scheduled under chairmanship of Hon Pro Chancellor sir once the date is confirmed from their end.
5	1. To analyze the underachieved targets in terms of operational constraints and to work out the action plan to bridge the gap. 2. To indicate/categorize the Aspirational targets separately in		1. Operational plan for underachieved targets is prepared and being implemented accordingly 2. Aspirational targets indicated within PDP

	the PDP. 3. To analyze the consistently over achieved, optimally achieved and under achieved targets and present the same in the in the next meeting of P & M Board. 4. To work out consolidation/strengthening mechanism with regard to optimally achieve targets including resetting of the targets. 5.To incorporate certain tangible areas in PDP which are over and above the prescribed by the Accrediting body. 6.To work out the addition/deletion/modifications of targets in regard to the parameters/indicators which has been changed at the ranking level and/or needs modifications in view of the prevailing COVID 2019 Pandemic situation since March, 2020		3. Will be presented in PMB meeting in July 2021 4. Resetting of targets done 5. Included in agenda item for discussion 6. The contextual resetting were done in PDP in view of COVID
6	To work out incorporation of the suggestions/ observations/analytical depiction brought out in the report of the external peer team of AAA for the purposes of appropriate target setting and future development of the university including incorporation of the same in the PDP of the university. o To set a target of 3.75 score in the next AAA due in 2023.	Director IQAC Convener AAA	Incorporated in PDP of the University
7	To Ensure the incorporations included in the Study Group Report as prepared by Dr. Lalitbhushan Waghmare, Pro Vice Chancellor in the PDP of the university.	Hon Pro VC	Incorporated in PDP of the University
8	1. To workout/prepare a Compendium of the entire spectrum of various undertakings/activities invoked by the university during the CoViD 2019 period for the purposes of its objective analysis and inclusion of the same as targets in the PDP of the university. 2. To work out Modality of Tele-working by identifying various areas of tele-working/functioning as a regular mode for the	Director IQAC	1. Compendium published 2. Telemedicine and Teleconsultation services initiated at AVBRH in regular mode. 3. IT capacity augmented in terms of designing

	functioning of the university on the basis of the present experience. 3. To plan for augmentation/strengthening the IT Capacity of the University and incorporation of the same in the future plans of the university in PDP		Institutional Learning Management System. Complete Automation of Library and Examination is underway. Included in PDP.
8	1. To Venture into starting/launching many more ODL and online programs in recent future within the boundaries of the Regulatory frameworks of UGC. 2. To launch UG/PG/Ph.D. courses under School for Epidemiology and Public Health 3.To Establish and develop the Artificial Intelligence in Health Sciences Education. 4. To establish and enrich Clinical Research Division 5. To Establish many more Super-specialities courses and Oncology Centre at Teaching Hospital 6. To establish 'One Health' concept and to implement related activities in the university. 7. Strengthening of Animal experimentation and animal research and reflect the them in the futuristic development concept of clinical research and also linked with one health concept /integrated medicine initiated by the university for the purposes of future development.	Director IQAC Director R&D	1. 3 new ODL programs initiated (BA, BBA, BSc-IT) . Applied to UGC for online programs. 2. UG , PG and PhD programs in SOE&PH launched 3. AIML courses launched in undergraduate courses of Medicine & Dentistry 4. Clinical Research Division established 5. 6. Department of 'One health' established at SOE&PH. 1) One Seminar activity conducted - Topic 'One Health- An interface between Veterinary and Human health' 2) Review article on One Health - Manuscript drafting is ongoing 3) Research Project - In Planning Phase 7. Strengthening of Animal experimentation and animal research reflected in clinical research division
9	To update the thrust areas in terms of directional details probable areas and areas of probable operation pertaining to the Tribal health	Director R&D	Areas identified. Concept note on 'Research Advancement in high priority areas under intramural grant scheme' submitted.

Agenda item 4 : To consider the policy contribution for "**Preparation of Competency based Guidelines and Minimum Standard Requirements (MSR) for DM Geriatric Mental Health' under convenership of Dr Sunil Kumar, Professor, Medicine**



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To: Sunil Kumar <sunilkumarmed@gmail.com>, <vipul_srivastav@yahoo.co.in>, <rishi_medicine@yahoo.com>, <Ssrt95@yahoo.co.in>

No. NMC-Academics/2021/ **Date: 08-01-2021**

1. **Dr. Sunil Kumar MD, Ph.D** **Convener**

   Department of Medicine, Jawaharlal Nehru medical college,

   Datta Meghe Institute of Medical Sciences (Deemed to be University),

   Wardha, Maharashtra; M:09850393787

   E-mail:sunilkumarmed@gmail.com

2. **Dr. Vipul Shrivastava, MD.**

   Professor & Head, Department of Medicine,

   Surat Municipal Institute of Medical Education and Research,

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3. **Dr. Hrishikesh Kumar MD, DM**

   Head, Department of Neurology

   In-charge of Parkinson's Disease and Movement Disorders

   Program Director, Institute of Neurosciences

   185/1 AJC Bose Road, Kolkata 700017.

   M: 09874645445; E-mail: rishi_medicine@yahoo.com

4. **Dr. Sanjay Ramteke, MD, DM**

   Professor & Head, Department of Neurology

NATIONAL MEDICAL COMMISSION
Postgraduate Medical Education Board

D 11011/1/21/AC/Guidelines 05

Date: 02-06-2021

GUIDELINES FOR COMPETENCY BASED POSTGRADUATE TRAINING PROGRAMME FOR DM IN GERIATRIC MENTAL HEALTH

Agenda item 5: To review the status of AQAR 2019-20

The AQAR 2019 -2020 is updated till Dec 2020 as per guidelines by NAAC. The last of submission which was initially 31st May 2021 is further extended to August 2021. It was decided to be submitted on or before 10th June 2021, however the online submission portal is not available currently. The AQAR shall be submitted as and when the portal is available.

Agenda item 6: To deliberate upon revised AQAR format to be filled from 2020-2021

New AQAR format inclusions

Criteria I		
Key Indicator	**Metric No**	**Criteria**
1.1 Curriculum Design and Development	**1.1.1**	Curricula developed and implemented have relevance to the local, national, regional and global health care needs which are visible in Programme Outcomes (POs), and Course Outcomes (COs) offered by the University, as per the norms of the Regulatory Bodies.
1.2 Academic Flexibility	**1.2.3**	Number of interdisciplinary courses under the Programmes offered by the University during the year
1.3 Curriculum Enrichment	**1.3.1**	Institution integrates crosscutting issues relevant to Gender, Environment and Sustainability, Human Values, Health Determinants, Right to Health Issues, Emerging demographic changes and Professional Ethics in the curricula
Criteria II		
2.1 Student Enrolment and Profile	**2.1.1**	Due consideration is given to equity and inclusiveness by providing reservation of seats to all categories during the admission process
	2.1.2	Student Demand Ratio, applicable to programmes where State / Central Common Entrance Tests are not conducted
	2.1.3	Student enrolment pattern and student profile to demonstrate National/International spread of enrolled students from other states and countries
2.2 Catering to Student Diversity	**2.2.1**	The Institution assesses the learning levels of the students after admission and organises special programmes for advanced learners and slow performers
2.3 Teaching - Learning Process	**2.3.1**	Student-centric methods are used for enhancing learning experiences by:
	2.3.2	The Institution has provision for the use of Clinical Skills Laboratory and Simulation-Based

		Learning
2.4 Teacher Profile and Quality	**2.4.2**	Number of fulltime teachers with Ph.D./D.Sc./D.Lit./ DM/M Ch/DNB in super specialities /other PG degrees (like MD/ MS/ MDS etc.,) in Health Sciences for recognition as Ph.D guides as per the eligibility criteria stipulated by the Regulatory Councils during the year
	2.4.3	Teaching experience of fulltime teachers in number of years (preceding academic year)
	2.4.4	Number of teachers trained for development and delivery of e-contents / e-courses / video lectures / demonstrations during the year
2.5 Evaluation Process and Reforms	**2.5.3**	Evaluation-related Grievance Redressal mechanism followed by the Institution
	2.5.4	Reforms in the process and procedure in the conduct of evaluation/examination; including Continuous Internal Assessment to improve the examination system
	2.5.5	Status of automation of Examination division using Examination Management System (EMS) along with approved online Examination Manual
Criteria III		
3.1 Promotion of Research and Facilities	**3.1.1**	The Institution has a well-defined Research promotion policy and the same is uploaded on the Institutional website
	3.1.2	The Institution provides seed money to its teachers for research
	3.1.5	University has the following facilities 1. Central Research Laboratory / Central Research Facility 2. Animal House/ Medicinal plant garden / Museum 3. **Media laboratory/Business Lab/e-resource Studios** 4. **Research/Statistical Databases/Health Informatics** 5. Clinical Trial Centre
	3.1.6	Number of departments with recognition by ICMR-CAR, DST-FIST, DBT, MCI, DCI, PCI,

		AICTE, AYUSH, NACO, WHO, NIH etc. and other similar recognitions by national and international agencies, (excluding mandatory recognitions by Regulatory Councils for UG /PG programmes)
3.2 Resource Mobilization for Research	**3.2.3**	**Ratio of research projects/clinical trials per teacher funded by Government/Industries and Non-Government agencies during the year**
3.4 Research Publications and Awards	**3.4.1**	The Institution has a stated Code of Ethics for research, the implementation of which is ensured by the following:
	3.4.2	The Institution provides incentives for teachers who receive state, national or international recognitions/awards
	3.4.7	Number of books/ chapters in edited volumes and papers in National/International conference-proceedings published per teacher and indexed in Scopus/Web of Science/ PubMed UGC-CARE list during the year
3.5 Consultancy	**3.5.1**	Institution has a policy on IPR and consultancy including revenue sharing between the Institution and the individual, besides a training cum capacity building programme for teachers, students and staff for undertaking consultancy.
Criteria IV		
4.1 Physical Facilities	**4.1.1**	The Institution has adequate physical facilities for teaching –learning, skills acquisition etc.
	4.1.2	The Institution has adequate facilities to support physical and recreational requirements of students and staff: sports, games (indoor, outdoor), gymnasium, auditorium, yoga centre etc. and for cultural activities
	4.1.3	Availability and adequacy of general campus facilities and overall ambience:
4.2 Clinical, Equipment and Laboratory Learning Resources	**4.2.1**	Teaching Hospital/s, Equipments, Laboratory and clinical teaching-learning facilities including equipment as per the norms of the respective Regulatory Bodies.
	4.2.2	Describe the adequacy of both outpatients and inpatients in the teaching hospital vis–a–vis the

		number of students trained and programmes offered (based on HIMS / EMR) within 100 – 200 words.
	4.2.3	Availability of infrastructure for community-based learning
	4.2.4	Is the Teaching Hospital / Clinical Laboratory accredited by any National Accrediting Agency?
4.3 Library as a Learning Resource	**4.3.3**	Does the Institution have an e-Library with membership/ subscription for the following:
	4.3.4	Annual expenditure for purchase of books and journals (including e-resources) during the year
4.4 IT Infrastructure	**4.4.1**	Number of classrooms, seminar halls and demonstration rooms linked with internet /Wi-Fi enabled ICT facilities (data for the preceding academic year)
	4.4.2	Institution frequently updates its computer availability for students and IT facilities including Wi-Fi
Criteria V		
5.1 Student Support	**5.1.4**	The Institution has an active International student cell
5.3 Student Participation and Activities	**5.3.3**	Number of sports and cultural activities / events/ competitions organised in the Institution during the year
5.4 Alumni Engagement	**5.4.1**	The Alumni Association/Chapter (registered and functional) has contributed significantly to the development of the Institution through financial and other support services during the year
	5.4.2	Provide the **areas of contribution by the Alumni Association** / chapters during the year 1. Financial / kind 2. Donation of books /Journals/ volumes 3. Students placement 4. Student exchanges 5. Institutional endowments
Criteria VI		
6.1 Institutional Vision and	**6.1.1**	The Institution has clearly stated Vision and Mission which are reflected in its academic and

Leadership		administrative governance
6.2 Strategy Developments and Deployment	**6.2.1**	The Institutional Strategic plan is effectively deployed
	6.2.2	Effectiveness and efficiency of functioning of the Institutional bodies as evidenced by policies, administrative setup, appointment and service rules, procedures etc.
6.3 Faculty and Staff Empowerment Strategies	**6.3.5**	Institution has Performance Appraisal System for teaching and non-teaching staff
6.4 Financial Management and Resource Mobilization	**6.4.1**	Institutional strategies for mobilisation of funds and the optimal utilization of resources
6.5 Internal Quality Assurance System	**6.5.1**	Institution has a streamlined Internal Quality Assurance Mechanism
	6.5.3	Impact analysis of the various initiatives carried out and used for quality improvement during the year
Criteria VII		
7.1 Institutional Values and Social Responsibilities	**7.1.3**	Describe the facilities in the Institution for the management of the following types of degradable and non-degradable waste (within 100 - 200 words)
	7.1.4	Water conservation facilities available in the Institution
	7.1.5	Green campus initiatives include
	7.1.6	Quality audits on environment and energy regularly undertaken by the Institution and any awards received for such green campus initiatives:
	7.1.8	Describe the Institutional efforts/initiatives in providing an inclusive environment i.e., tolerance and harmony towards cultural, regional, linguistic, communal socioeconomic and other diversities (within 100 - 200 words).

	7.1.9	Sensitization of students and employees of the Institution to the constitutional obligations: values, rights, duties and responsibilities of citizens
	7.1.11	Institution celebrates / organizes national and international commemorative days, events and festivals

Agenda item 7: To deliberate upon the action plan of DMIMS regarding its preparedness for the 3rd wave of COVID pandemic.

Agenda item 8: To adopt and deliberate upon the;

1. **Draft Competency Based Dental Education (CBDE)**
2. **ICT based Teaching Learning and Assessment strategies during COVID – 19 Pandemic And Tangible Outcomes**
3. **The Roll out model of CBDE**

Sharad Pawar Dental College And Hospital

Datta Meghe Institute of Medical Sciences

Deemed to be University

Established under section 3 of UGC Act 1956 PLACED UNDER CATEGORY-1
(GRADED AUTONOMY BY UGC)

SAWANGI

HI-TECH HI-TOUCH MODEL OF COMPETENCY BASED DENTAL EDUCATION

Dental Education Unit

Sharad Pawar Dental College & Hospital

Datta Meghe Institute of Medical Sciences (Deemed to be University), Sawangi (Meghe), Wardha-442001

S. NO.	TITLE
	SECTION I
1.	**Need Analysis Of Competency Based Dental Education For Dental Undergraduates**
2.	**Overview of Competency Based Dental Education for Indian Dental Graduate**
3.	**Manual Users Guide**
4.	**Definition of Terms Used**
5.	**Abbreviations**
6.	**Subject Codes with Competencies**
7.	**Teaching Learning Methods**
8.	**Competency Based Foundation Program**
9.	**Electives Module**
10.	**Early Clinical Exposure**
11.	**Skill Training Module**
12.	**Competency Based Assessment Methods**
13.	**Internship Module**
14.	**Log Book**
15.	**Competency Based Curriculum - FIRST YEAR**
16.	**Competency Based Curriculum – SECOND YEAR**
17.	**Competency Based Curriculum – THIRD YEAR**
18.	**Competency Based Curriculum – FINAL YEAR**
	SECTION II
19.	**DMIMS model of ICT Based Teaching Learning & Assessment Strategies during Covid-19 Pandemic For Faculty of Dentistry**
	SECTION III
20.	**CBDE roll out plan and aligned model of Faculty development program**

Agenda item 9: To standardize the concept note of 'Validation of Outcome based Electronic Question bank by learners : A quality initiative towards Empowering learners as proponents of curricular change DMIMS(DU)'

Validation of Outcome based Electronic Question bank by learners

A quality initiative towards Empowering learners as proponents of curricular change

DMIMS(DU)

Dr Vedprakash Mishra

Dr Lalitbhushan Waghmare

Dr Swanand Pathak

Dr Alka Rawekar

Dr Pradnya Dandekar

Dr Irshad Qureshi

Dr RM Borle

Dr Tripti Waghmare

Dr Sunita Vagha

Dr Shweta Pisulkar

Dr Jaya Gawai

Introduction :

Learners are the key stakeholders of curriculum. Hence, rather than being regarded as consumers of the education programme they must be considered as partners in the various curricular processes. The term '**student engagement'** refers not only to students' being engaged with their academic content but also to their engagement with their medical school, its curriculum, quality assurance, teaching practices and their colleagues.[1] . Engaging students in curricular planning develops a sense of ownership over their educational program. It denotes that they have equal role to play in various curricular decisions of the University and their opinion is being considered. It strengthens student faculty collaboration.

As per educational theory and principle , Literature identifies three factors about how students' learn to engage effectively ; [2]

1. **Understanding how to use and extend their personal epistemology**: Personal epistemologies comprise individuals' beliefs about what knowledge is and how their knowing is justified and shape their actions. The implication students make of their engaging experiences influences how they learn, and subsequently shape the outcomes and understandings of their practice.

2. **Maximizing opportunities in self-directed learning environments**: One of the key Graduate attribute of Health Sciences student is to be a self-directed lifelong learner.[3] Hence, self-directed learning opportunities must be embedded in the overall academic experience of the learner so that they take charge of their learning and instil life-long learning skills

3. **Employing assertive communication**: Employing assertive communication opportunities enable the learner to express his/her opinion while respecting those of others and thus have their learning needs addressed in a better way.

Rationale :

Datta Meghe Institute of Medical Sciences (DU), as a policy, considers feedback of all stakeholders viz. Students, Academicians, Parents, Patients and Administrators in curriculum revision cycles through a structured and validated approach. Student representation is mandated in all statutory and non-statutory bodies of the University. Student feedback on Curriculum, Teaching Learning, Assessments, Examinations, Academic ambience and Infrastructure is

periodically taken, actionable points are derived and corrective measures are adopted accordingly. The implementation of these corrective measures are monitored through a robust monitoring mechanism of monthly college councils, quarterly college councils, joint college councils and IQAC.

Towards fortification of this best practice of the University with regards to engaging learners in various curricular decisions , a novel initiative was adopted wherein the entire revised electronic question bank of various courses (Medicine, Dentistry, Ayurveda, Nursing, and Physiotherapy) of the University, mapped with course outcomes (CO), was shared with the students in order to obtain their feedback and suggestions through a structured SOP (Fig 1). The idea was to obtain learners perspective thereby imparting value to curriculum design, implementation and evaluation The initiative was mainly focussed to bring about meaningful student engagement and improve validity of theory examination particularly in terms face validity.

Aim :

To engage learners meaningfully towards improving the face validity of revised outcome based electronic question bank of various educational programs of the University **.**

Objectives : The objectives of the initiative were to;

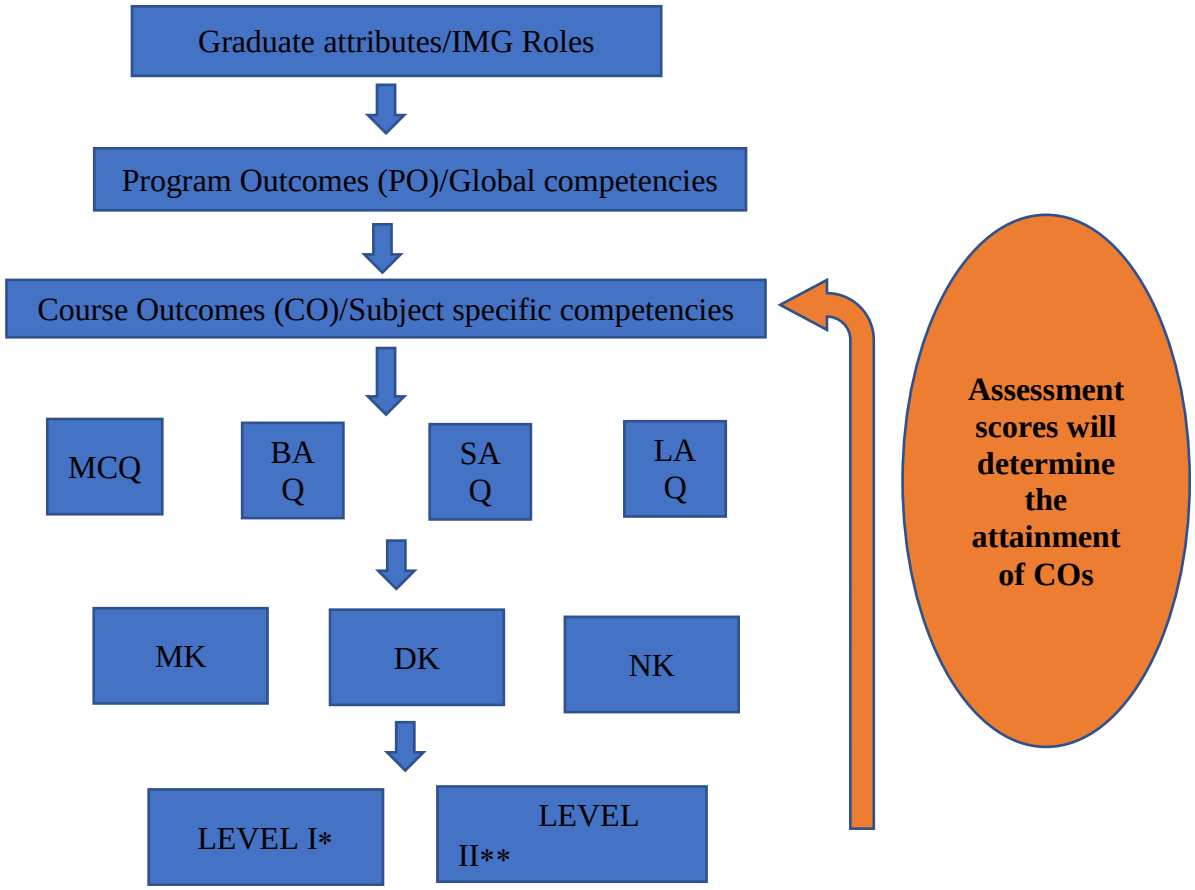
1. formally train the learners towards University policy about outcome based education (OBE), program and course outcomes, mapped questions with course outcomes and type, level and difficulty level of questions of questions in electronic question bank to ensure meaningful engagement.

2. systematically integrate the learner's role in curriculum design, implementation and revision, thus supporting an Institution-wide cultural shift that empowers students to play a significant role in decision making.

3. to materialize collaborative learning of students under guidance of faculty with a solutions-based approach to electronic question bank of the University.

The Seven step process of outcome based eQB validation by learners:

The outcome based electronic question bank of the University is designed taking into account the desirable course outcomes, objectivity , validity , reliability , relevance to the curriculum and level of cognition; as depicted below;



*Level I : Revised Blooms' taxonomy - Remember and Understand, **Level II : Revised Blooms' taxonomy – Apply, Analyze, Evaluate, Create [4]

Fig 1 : DMIMS Model of outcome based Electronic Question bank (L-61423/2015, L-102034/2021) [5]

The entire process of student validation is organised into seven steps as depicted in Fig 1 :

1. Training of students towards OBE, eQB - question types (MCQ, BAQ, SAQ, LAQ), relevance relevance (MK, DK, NK) and level of difficulty, (Level I : Remember / Understand and Level II : Apply/Analyze/Evaluate/Create of Revised Bloom’s taxonomy)

2. Allotting a set of 10-15 students to a faculty mentor to guide and supervise the overall activity

3. A defined set of internally validated questions mapped with course outcomes shared with each student that include all type and difficulty level of questions, either on LMS or mail.

4. The learners validate their set of questions and document feedback and suggestion for each question as per defined format and modality under guidance of faculty mentor.

5. The learner submits final report after review by faculty mentor

6. The student's suggestions are shared with Head of department of respective subjects and necessary corrections are done by expert in consultation with Head of department

7. The validated question bank is submitted to examination cell of the University

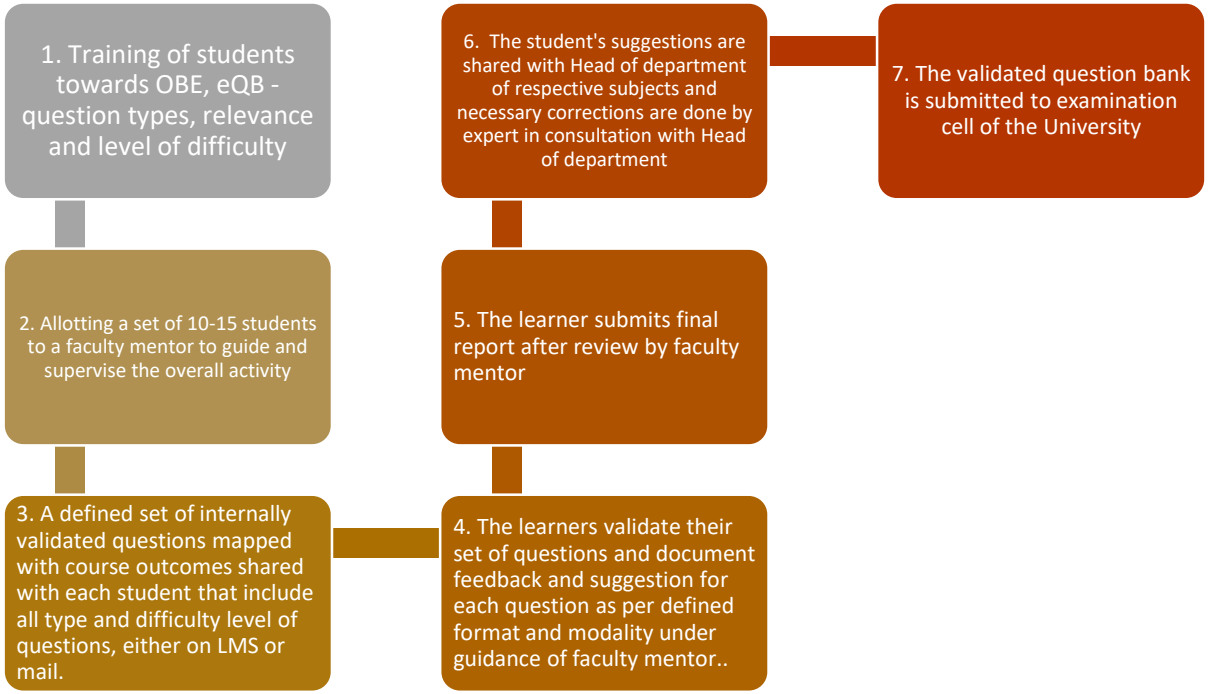


Fig 2 : SOP of validation of outcome based eQB by learners

Immediate Outcomes :

1. Each question of the question bank is validated by the end users. The total quantum of questions thus validated are as follows;

   a. Faculty of Medicine : 1,86,482
   b. Faculty of Dentistry : 39,887
   c. Faculty of Ayurveda : 69,550
   d. Faculty of Physiotherapy : 29,304
   e. Faculty of Nursing: 83,678

2. The process has improved the face validity of outcome based e-question bank thus ensuring suitability of the test instrument for assessment pertaining to cognitive domain of learning.

3. The entire outcome based electronic question bank is shared with the learners. Thus all learners are apprised of course outcomes that are expected to be attained and graduate attributes that must be inculcated at the end of the course.

References :

1. Geraghty JR, Young AN, Berkel TDM, Wallbruch E, Mann J, Park YS, Hirshfield LE, Hyderi A. Empowering medical students as agents of curricular change: a value-added approach to student engagement in medical education. Perspect Med Educ. 2020 Feb;9(1):60-65.

2. Richards, J. et al. "Preparing medical students as agentic learners through enhancing student engagement in clinical education." Asia-Pacific journal of cooperative education, 2013; 14 : 251-263.

3. https://www.mciindia.org/CMS/e-gazette (last accessed on 25th May 2021)

4. Anderson, L. W., & Krathwohl, D. R. (2001). A taxonomy for learning, teaching, and assessing, Abridged Edition. Boston, MA: Allyn and Bacon.

5. DMIMS model of competency based assessment framework for theory examinations , L-102034/2021

Abbreviations :

1. BAQ – Brief Answer Question
2. CO – Course Outcomes
3. DK – Desirable to Know
4. eQB – Electronic Question Bank
5. IQAC – Internal Quality Assurance cell
6. LAQ – Long Answer Question
7. LMS – Learning Management System
8. MCQ – Multiple Choice Question
9. MK – Must Know
10. NK – Nice to know
11. OBE – Outcome Based Education
12. PO – Program Outcomes
13. SAQ – Short Answer Question

ANNEXURE I : EQB Validation Format for students

Guidelines :

1. MCQ

Kindly go through these guidelines for format validation of MCQs

a. Stem

- Precise and clear
- Focus on central single problem
- options should be matching with the questions
- Grammatically correct
- No double negatives
- Capital and Underline EXCEPT or NOT in negative format
- No uncommon terminology or abbreviations
- Sentence should not start with a numerical
- No clues for key
- All sentences to be framed in Sentence Case (first letter of the sentence should be in capital, words like 'Except' ,'True' , 'False' in the questions should be in BOLD/CAPITAL and Underlined)

b. Options/Alternatives

- Homogenous
- Plausible
- Grammatically consistent with stem
- Uniformity – Length, Level of difficulty
- Numerical in ascending or descending order
- Key – Correct and unambiguous

2. BAQ / SAQ/ LAQ

Kindly go through these guidelines for format validation of BAQ

- Precise and clear
- Focus on central single problem
- Grammatically correct
- Use of the proper verb in the question
- Distribution of the marks for the sub questions given clearly
  For level II questions
- There is a clear and precise proper case scenario
- The case histories should have a simple and conclusive language
- The sub-questions should be logically linked the main question/case scenario

Format for suggesting corrections :

A. MCQ

Sr. No.	Theme/System/Topic	Competency/ CO & Question No.	MK / DK / NK	Level I / Level II	Proper framing of stem (Question) Y/N	Stem (Question) and options grammatically consistent Y/N	Use of 'all of the above' or 'none of the above' as option Y/N/NA	Plausible Options Y/N	'Except', 'True', 'False' underlined , Capital and Bold wherever applicable) Y/N/NA	Order of Options in ascending or descending order (wherever applicable) Y/N/NA	Corrections required in the content (if any)

B. BAQ

Sr. No.	Theme/System/Topic	Competency/ CO & Question No.	MK / DK / NK	Level I / Level II	Structured Y/N	Use of Proper Verb Y/N	Level II (case scenario properly framed and clear) Y/N	Corrections required in the content (if any)

1. SAQ

Sr. No.	Theme/System/Topic	Competency / CO & Question No.	MK / DK / NK	Level I / Level II	Structured Y/N	Use of Proper Verb Y/N	Level II (case scenario properly framed and clear)Y/N	Marks distribution (for subunits of question) given clearly Y/N	Corrections required in the content (if any)

2. LAQ

Sr. No.	Theme/System/Topic	Competency/ CO & Question No.	MK / DK / NK	Level I / Level II	Structured Y/N	Use of Proper Verb Y/N	Level II (case scenario properly framed and clear) Y/N	Marks distribution (for subunits of question) given clearly Y/N	Corrections required in the content (if any)

Themes / Topics validated :

a. Total MCQ Validated :
b. Total BAQ Validated :
c. Total SAQ Validated :
d. Total LAQ Validated :

(Name, Batch, Roll no and signature of the Student)

Agenda item 10: To propose 'Elective in Obstetric Ultrasound for MD/MS Obstetrics and Gynecology – A value added course'

ELECTIVE IN OBSTETRIC ULTRASOUND FOR MD/MS OBSTETRICS & GYNAECOLOGY
A VALUE ADDED COURSE

CONTRIBUTERS

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4. DR TRIPTI SHRIVASTAVA , DIRECTOR, IQAC

GUIDED BY -DR VED PRAKASH MISHRA (HON'BLE PRO-CHANCELLOR DMIMSU)

PREAMBLE

Ultrasound has been in clinical use in the field of obstetrics for the last four decades and over the years its application has risen exponentially. For any given low risk antenatal patient minimum two sonographies are done throughout pregnancy ,while for an high risk case the number can be from minimum four to six. (1)

With advances in technology, there has been improvement in resolution, and colour doppler study, allowing for far better imaging of the fetus and maternal pelvic vascular changes in pregnancy. This together with new developments in the field of screening for pregnancy disorders has lead to a change in the clinical application of ultrasound in the care of not only high risk but even routine low risk pregnant women. Altogether ultrasound in obstetrics has made it possible not only to diagnose fetal abnormalities but for early detection of at risk mothers and fetus. (2)

The application of ultrasound in obstetrics may be broadly classified as either elective or reactive. Elective or planned use implies scanning to detect potential problems in an otherwise uncomplicated pregnancy (screening), whereas reactive use is the application of ultrasound to help in the management of a clinical problem. It is this elective application in which every obstetrician should be competent and self-sufficient .Reactive application is meant for high risk mothers and feti who can be evaluated by an expert obstetric sonologist.(3)

RATIONALE

Recently the PG curriculum of Medical Education has been revised and designed to competency based (4). The main goal of this revised competency based curriculum for post graduate course (MS) in Obstetrics and Gynaecology is to produce a competent Obstetrician and Gynaecologist. One of the outcomes to achieve this goal is to produce a competent Obstetrician and Gynaecologist who can ***perform*** obstetrical ultrasound in normal and abnormal pregnancy including Doppler(page 1 point d)(5).

The subject specific course objectives pertaining to this goal in both cognitive (page 2) and psychomotor (page 6) domains mention the ability to ***only interpret*** the ultrasound pictures and not perform independently .(5)Hence, in order to translate the goal of MD/MS OBGY comprehensively, a value added course addressing the competencies related to performance of Obstetric ultrasound is desirable.

An Elective in Obstetric Ultrasound in MD/MS Obstetrics & Gynaecology is hereby proposed

as a value added programme to the present post graduate curriculum in obstetrics and gynecology to fill the gap in the programme goals and course objectives of present curriculum prescribed in CBME in relation to ability of the practicing obstetrician having post graduate degree (MS in Obstetrics and Gynecology) to perform basic obstetric ultrasound and thereby giving comprehensive basic antenatal care in community.

SCOPE

This elective will offer an opportunity to gain additional skill training in performing a basic obstetric ultrasound and report it to post graduate students of obstetrics and gynaecology, as mentioned in the goals of the present CBME curriculum. They will be trained under direct supervision of experts from the department of radiodiagnosis to learn nuances of performing obstetric ultrasound. As they actually walkthrough and undergo the skill training during this elective the learner will feel confident to perform and report findings of basic obstetric ultrasound examination of all three trimesters of pregnancy. Thus this comprehensive course will enhance the skill of future practicing obstetrician to give comprehensive care to while providing antenatal care under one roof.

GOAL OF THE COURSE :

1.To fill the gap between programme goals and course outcomes of post graduate curriculum prescribed in CBME curriculum for the degree of MS in obstetrics and gynecology.

2. To provide post graduate students of obstetrics and gynecology with comprehensive academic and clinical training in performance and interpretation of basic obstetric ultrasound skills .

3. To master the technique and interpretation of elective obstetric ultrasound investigation.

4. To enable them for certification for ability to perform basic ultrasound in obstetrics and consequently have a successful career in clinical practice.

5.To be able to make them eligible for advanced training in ultrasound in obstetrics.

COURSE OBJECTIVES :

- To acquire basic skills that are required for performance of obstetric ultrasound examination in routine obstetric practice, including normal pregnancy ultrasound
- to acquire basic skills to perform obstetric ultrasound scan and to report the findings of the scan.

COURSE OUTCOMES- On completion of this elective the learner will be able to -

1. perform obstetrics ultrasound to -
   (i) identify of an intrauterine pregnancy
   (ii) identify of viability of pregnancy
   (iii) Basic first trimester biometry

(iv) Basic second trimester biometry
(v) Basic third trimester biometry
(vi) Diagnose normal fetal anatomy and variants of normal
(vii) Identify indications for referral or need to take second opinion.
(viii) Write a structured report

2.develop professionalism related to

- Consent taking
- Maintenance of patients privacy while performing scan
- Communication of results of findings to the parents

3. follow and maintain documentation/records related to

- PCPNDT act

ELIGIBILITY:

Post graduate students who have completed 1st year residency of post -graduation in obstetrics and gynecology (MS in obstetrics and gynecology)

CORE DEPARTMENT :DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

VENUE- At antenatal Ultrasound unit of department of Radiodiagnosis

ELIGIBILITY FOR SUPERVISOR -

Expert Radiologist/Fetal Medicine expert/Obstetrician trained in basic and advanced ultrasound approved and appointed by University .

STUDENTS PER BLOCK OF ELECTIVE – 3

TOTAL CREDIT HOURS - 30

(3 working hours = 1 credit hour)

DURATION- TOTAL WORKING HOURS = 90

- **Spread over 2months**
- **2hours per day /12 hours per week / Total 45 sessions of 2 hours each**

- **Timings 2pm to 4pm**

DISTRIBUTION OF LEARNING HOURS

12 HOURS - ON VIRTUAL MODE-US MENTOR IN SVL

78 OURS- REAL PATIENTS - IN ANTENATAL USG UNIT

SALIENT FEATURES

NAME OF ELECTIVE	TRAINING IN OBSTETRIC ULTRASOUND EXAMINATION
LOCATION OF HOSPITAL LAB OR RESEARCH FACILITY	DEPARTMENT OF RADIOLOGY- ANTENATAL USG UNIT
NAME OF INTERNAL PRECEPTOR(S)	HOD DEPARTMENT OF OBGY/(PROFESSOR)
NAME OF EXTERNAL PRECEPTOR (IF ANY)	HOD DEPARTMENT OF RADIOLOGY /(PROFESSOR)
LEARNING OBJECTIVES OF THE ELECTIVE	AS SPECIFIED ON PAGE-2
NUMBER OF STUDENTS THAT CAN BE ACCOMMODATED IN THIS ELECTIVE	3 PER BLOCK
CREDIT HOURS TO BE COMPLETED	30
DURATION OF ELECTIVE	2 MONTHS
PREREQUISITES FOR THE ELECTIVE	COMPLETION OF 1ST YEAR OF RESIDENCY Of POST GRADUATE COURSE OF MS IN OBSTETRICS AND GYNECOLOGY
LOG BOOK ENTRY REQUIRED	AS SPECIFIED ON PAGE 6-11

ASSESSMENT	DIRECT SUPERVISION AND LOG BOOK VERIFICATION

SYLLABUS : BASIC IMAGING SKILLS

1. Machine set-up
    1. Choice of probe
2. Counselling
3. Decide transabdominal vs transvaginal route
4. Patient positioning
5. Orientation
6. Identify normal endometrium
7. Identify normal myometrium
8. Identify normal ovaries
        1. Measure cervical length
    2. Recording images
9. Note keeping and documentation

1. **ULTRASOUND OF FIRST TRIMESTER OF PREGNANCY**

1. Confirm viability
2. Date pregnancy
3. Diagnose corpus luteum cyst
4. Diagnose multiple pregnancy
5. Determine chorionicity /zygosity
6. Identify retroplacental haematoma
7. Diagnose anembryonic pregnancy

3. ***ULTRASOUND IN THE SECOND AND THIRD TRIMESTERS***

1. Components of basic second- and third-trimester ultrasound examinations.
2. Components of fetal biometry in sonographic dating in second and third trimesters.
3. Predisposing factors for fetal macrosomia and fetal growth restriction in third trimester.
4. Imaging parameters for placental localization.
5. Risks and indications for genetic amniocentesis.

Ultrasound evaluation of twin gestations

1. Role of ultrasound in diagnosis of twins.
2. Chorionicity and amnionicity in multifetal pregnancies.

Placental abnormalities

1. Risk factors and sonographic diagnosis of placenta previa and low-lying placenta.
2. Risk factors of placenta accreta.

Amniotic fluid assessment

1. Methods for diagnosing oligohydramnios.
2. Methods for diagnosing polyhydramnios.

MEDICOLEGAL & DOCUMENTATION SKILLS-

1. Counselling Of The Patient For Scan
2. Explaining PCPNDT Act
3. Taking Consent
4. Form F Filling -
5. Reporting the findings of ultrasound
6. Documentation And Storing Data
7. Explaining report to the patien

The learning resource material - will be standard textbook of obstetric ultrasound
(Ultrasound Diagnosis in Obstetrics and Gynecology, Step By Step Ultrasound In Obstetrics)
LOG BOOK –

The skill training will be documented and monitored through log book entries made by the learner on weekly basis and feedback remarks made by the Expert.

COMPETENCIES TO BE ACHIEVED AND ENTERED IN LOG BOOK –

A-VIRTUAL MODE-12 HOURS- 4 SESSIONS

B-ANC USG CLINIC -78 HOURS - 26 SESSIONS

A) ON VIRTUAL MODE - US MENTOR)- AT SCHOOL OF VIRTUAL LEARNING- DURATION - 12 HOURS

Credit hours- (4)

Month

Number of week(date from- to)

Expected credit hours completed during this week

COMPETENCY # ADDRESSED		**DATE**	**DOMAIN & TYPE OF ACTIVITY**	**(MINIMUM NUMBER PERFORMED)**		
	TO APPLY KNOWLEDGE OF FOLLOWING WHILE PERFORMING OBSTETRIC ULTRASOUND			**ASSISTED 10**	**PERFORMED 10**	**REMARK** Needs Development/ Approaching Competetence/ Competetent
1	**Applied Basic principles of ultrasound physics in following aspects**		**HANDS ON TRAINING AT SVL ON US MENTOR**			
	Ultrasound modes (B-mode, M-mode, Doppler, two-dimensional (2D) and three-dimensional (3D)). Bioeffects of ultrasound (mechanical and thermal effects: ALARA principle – As Low As Reasonably Achievable)10. Ultrasound artifacts. Official statements from professional societies (AIUM, ACOG, ACOOG, ACR, ISUOG, SMFM and SRU)			y	y	

2	**Applied basic principles of ultrasound physics while using *ultrasound equipment (PROFESSIONALISM***					
	Ultrasound transducers: principles of sound generation; compare transducer characteristics and applications. Sound penetration and bioeffect with consideration related to acoustic power output. Effect of frequency on resolution and penetration. Effect of depth settings on field of view and image size. Gain settings for optimal image brightness with minimum power output. Focal zone depths to achieve best resolution of structures of interest. Image persistence settings to reduce background noise. Counselling ,consent and record keeping-Inputting patient information into ultrasound system before starting an ultrasound examination.			y	y	

3	***Performance following aspects of the ultrasound examination*** Effective positioning of patients and application of coupling agents. Ergonomic practices that minimize repetitive stress injuries (positioning of operator and equipment). Correct transducer manipulation and image orientation. Ultrasound image labeling and storage. Appropriate communication of ultrasound findings to other health professionals. Protocol for transducer cleaning and disinfection.			y	y	
4	***Performance of ultrasound in the first trimester*** Steps for performance of first-trimester transvaginal ultrasound examination. Indications for first-trimester ultrasound examination. Gestational sac evaluation (intrauterine location, discriminatory human chorionic gonadotropin levels and differentiation from endometrial fluid). Yolk sac. Amnion.					

	Embryo/fetus (number). Embryo/fetus cardiac activity; document with M-mode or movie clip. Criteria for definitive diagnosis of embryonic/fetal death in first trimester. Components of sonographic dating in first trimester. Ultrasound evaluation of ampullary tubal ectopic pregnancy. Subchorionic hematoma. Sonographic features of molar pregnancy. Association between thickened nuchal translucency and fetal chromosomal anomalies.					
1.	***Ultrasound in the second and third trimesters*** Components of basic second- and third-trimester ultrasound examinations. Components of fetal biometry in sonographic dating in second and third trimesters. Predisposing factors for fetal macrosomia and fetal growth restriction in third trimester. Imaging parameters for placental					

	localization. Risks and indications for genetic amniocentesis.					
2.	***Performance of ultrasound for evaluation of twin gestations*** Role of ultrasound in diagnosis of twins. Chorionicity and amnionicity in multifetal pregnancies.					
3.	***Performance of ultrasound for evaluation of Placental abnormalities*** Risk factors and sonographic diagnosis of placenta previa and low-lying placenta. Risk factors of placenta accreta.					
4.	***Performance of ultrasound for evaluation of Amniotic fluid assessment*** Methods for diagnosing oligohydramnios. Methods for diagnosing polyhydramnios.					

B)ON REAL TIME PATIENTS -AT ANC USG UNIT - BASICS OF ULTRASOUND IN THE FIRST/SECOND/THRD TRIMESTER - - DURATION -78 HOURS

Credit hours (26)

Month

Number of week(date from- to)

Credit hours completed during this week

COMPETENCY # ADDRESSED	**DATE**	**NAME OF ACTIVITY**	**LEVEL OF COMPETENCY EXPECTED TO BE ACHIEVED (AND NUMBER PERFORMED)**			
PROCEDURAL SKILSS – ABILITY TO PERFORM OBSTETRIC ULRASOUND TO IDENTIFY AND REPORT FOLLOWING CONDITIONS -		**HANDS ON TRAINING IN ANC USG UNIT OF DEPARTMENT OF RADIODIAGNOSIS**	**ASSISTED 20**	**PERFORMED UNDER SUPERVISION MINIMUM MINIMUM 20**	**PERFORMED INDEPENDENTLY MINIMUM 5**	**REMARK** Needs Development/ Approaching Competetence/ Competetent
1. Atypical locations of ectopic pregnancy, including interstitial, ovarian, cervical, abdominal and Cesarean scar implantations. 2. Workup of pregnancy of unknown location.				y	y	
1. Sonographic appearance of major fetal malformations in early gestation						

twin gestations 1. determining twin placentation by ultrasound. 2. serial evaluation of discordant twins. 3. findings of monochorionic monoamniotic twins				y	y	
Placental abnormalities 1. Risk factors and sonographic diagnosis of vasa previa. 2. Risk factors and sonographic findings of placenta accreta. 3. Ultrasound assessment of placental abruption. 4. Ultrasound assessment of placental previa				y	y	
Amniotic fluid assessment 1. Estimation of amniotic fluid volume in twin gestations.				y	y	

Cervix 1. Measurement of cervical length in second and third trimesters of pregnancy				y	y	

COMPETENCY # addressed	**DATE**	**NAME OF ACTIVITY**	**LEVEL OF COMPETENCY ACHIEVED (AND NUMBER PERFORMED)**			
			OBSERVED	**PERFORMED UNDER SUPERVISION**	**PERFORMED INDEPENDENTLY**	**REMARK** Needs Development/ Approaching Competence/ Competent
Ultrasound in the second and third trimesters 1. Normal fetal head anatomy and common malformations. 2. Normal fetal facial anatomy and common malformations. 3. Normal fetal thoracic anatomy and common malformations. 4. Normal fetal heart anatomy and common malformations. 5. Normal fetal abdominal anatomy and common malformations. 6. Normal fetal pelvic anatomy and common malformations. 7. Normal fetal skeletal anatomy and common malformations. 8. Role of umbilical artery Doppler studies in evaluation of fetal growth				y	y	

restriction. 9. Ultrasound diagnosis of hydrops. 10. Writing the ultrasound report						
Ultrasound evaluation of twin gestations 1. diagnosis and management of twin–twin transfusion syndrome. 2. evaluation of twin anemia–polycythemia sequence and selective intrauterine growth restriction in monochorionic twins. 3. Doppler studies in the evaluation of fetal twin–twin transfusion syndrome.				y	y	
Ultrasound in the second and third trimesters 1. Assessment of middle cerebral artery peak systolic velocity in screening for fetal anemia				y	y	
Ultrasound evaluation of twin gestations 1. Sonographic features of conjoined twins. 2. Diagnosis and evaluation of twin reversed arterial perfusion.				y	y	
Ultrasound evaluation of twin gestations 1. Sonographic features of conjoined twins. 2. Diagnosis and evaluation of twin				y	y	

reversed arterial perfusion						
MEDICOLEGAL DOCUMENTATION ***SKILLS- & PROFESSIONALISM*** ➢ Counselling Of The Patient For Scan ➢ Explaining PCPNDT ACT ➢ Taking Consent ➢ Form F Filling - ➢ Documentation And Storing Data						

ASSESMENT AND CERTIFICATION

- Assessment will be work based by the supervisor/expert faculty on day to day basis by observing the skill development and improvement while achieving all competencies.
- The expert faculty will grade the performance of the learner into following grades - Needs Development/ Approaching Competetence/ Competetent
- The log book will be the document of achievement of competencies specified in the course & of completion of specified credit hours
- The log book will be verified by the head of the department of radiology on weekly basis and learner will be eligible for certification after completion of 30 credit hours.
- The certification will be awarded along with convocation ceremony of the candidate for the degree of MS in Obstetrics And Gynecology.

REFERENCES

1. Ultrasound_in_obstetrics_and_gynecology.pdf [Internet]. [cited 2021 Feb 28]. Available from: https://www.glowm.com/pdf/Ultrasound_in_obstetrics_and_gynecology.pdf
2. Sonek J. First trimester ultrasonography in screening and detection of fetal anomalies. Am J Med Genet C Semin Med Genet. 2007 Feb 15;145C(1):45–61.
3. Hollis B, Thilaganathan B. Role of ultrasound in obstetrics. Current Obstetrics & Gynaecology. 2001 Apr 1;11(2):78–85.
4. PG Curricula | NMC [Internet]. [cited 2021 Feb 28]. Available from: https://www.nmc.org.in/information-desk/for-colleges/pg-curricula-2
5. MS-OBGY.pdf [Internet]. [cited 2021 Feb 28]. Available from: https://www.nmc.org.in/wp-content/uploads/2019/09/MS-OBGY.pdf

Agenda item 11: PDP status and considerations with respect to IOE

SN	Quantitative Indicators of PDP based on Strategy 2012-17	2019	2021	**Current Status 2021**
1	Syllabi Revision	PG	Fellowship	**In process**
2	Teachers with PhD Qualification	49	53	**68**
3	Student Computer Ratio	1:40	1:40	**1:28**
4	The Number of Departments with UGC/SAP/CAS/DST/FIST etc, in university	18-20	18-20	**19**
5	No. of Post-Doctoral Fellows/ Research Associates working a) Locals b) outsiders	65	70	**69**
6	Total Ongoing Research Projects	500	520	**535**
7	International Collaborative Research Projects	25	28	**45**
8	No. of completed Research Projects/Per Teacher (Funded by National/ International Agencies)	96	106	**112**
9	National Recognitions for Faculty for Teaching/Research/ Consultancy/ Extension (Reputed/recognized bodies)	230	245	**247**
10	No. of Patents Filed	40	50	**121**
11	PHD Registrations per Supervisor	>1	1.5	**1.51**
12	Revenue Generated from Consultancy	58	300	**78**
13	Number of MoUs with International Recognized Bodies	53	62	**99**
14	Publications per faculty	560	572	**2.37**
15	Percentage of Papers Published in Journals listed in Scopus Web of Science and Pub-med (3yrs)	390	525	**1250**
16	Number of Papers with More than 10 Citations	39	51	**275**
17	Number of Book Titles per Student (in the Central Library) excluding Book Bank	110-115	115-120	**115-120**
18	Percentage of Annual Allocation for Library spent on purchase of Journals (National & International) and other Library Resources (CDs, Cassettes, etc.)	>20%	>20%	**>20%**
19	No. of National/International Conferences /Workshops organized per year	3+1	3+1	**15 National webinars 2 International Symposia**
20	Student Performance in National/International Level Exams (eg: NET/SLET/GATE/GMAT/CAT/GRE/TOFEL, Civil Services/Others)	31-36%	36-42%	**36%**
21	Centers of Excellence	7	7	**7**
22	University has the following. i)IQAC ii)National Accreditation/Ranking	AAA +GMP	NIRF NABL, NABH	1. IQAC 2. NAAC, NIRF-61,29,14,

	iii)International Accreditation/Ranking iv)AAA			NABL,NABH 3. QS I Gauge E LEAD
23	Outstanding Achievements/ Recognition of faculty/alumni both at national and international level	60-70 Per Year	60-70 Per Year	**16**
24	Outstanding Performance of Students in Sports/Cultural Activities at National Level	10-12 Per Year	10-12 Per Year	**- COVID – 19 exemption**
25	Feedback received from different stakeholders on syllabi etc. i) Students ii)Alumni iii)Parents, iv)Employers v)peers display on website	All Stakeholders per year	All Stakeholders per year	**All Stakeholders per year**
26	Percentages of recommendations of the stakeholders implemented	75-80% On Yearly Basis	75-80% On Yearly Basis	**80%**
27	Number of interdisciplinary course combinations including skill courses introduced during last five years as percentage of total program	8	8	**26**
28	Number of courses, where continuous assessment of student performances is structured into the system	All	All	**All**
29	Percentage of faculty availing international fellowship for advance studies	22-25%	22-25%	**22%**
30	e-learning resources from National Programmed Teaching Enhanced Learning (NPTEL) Digital library retrieval	1 new	1 new	**I new**
31	Percentage of annual budget allocated for augmentation of infrastructure facilities(average of last 3years)	>15% On Annual Basis	>15% On Annual Basis	➢ **15% on annual basis**
32	Total number of classrooms, seminar halls with LCD/OHP etc.	100%	100%	**100%**
33	Declaration of results within	15 Days	15 Days	**Within 15 days**
34	Percentage of student progression to higher education	85-90%	85-90%	**HE : 9.95% Placement : 89.49% Median salary 9-11lac**
35	Student Placement percentage average per year Median Salary			
36	Average pass percentage of students	85-90%	85-90%	**85-90%**
37	Average drop-out percentage of students	<2%	<2%	**<2%**
38	Unit cost of Education (excluding salary)	>Rs. 50,000	>Rs. 50,000	**>Rs. 50,000**
39	Percentage of teachers from other states	>10%	>10%	**>10%**
40	No. of differently abled persons on roll: Teaching /Non-Teaching/ Students	1-2%	1-2%	**1 student**
41	Percentage representation of staff (teaching/ nonteaching) in decision making bodies	>20%	>20%	**>20%**
42	Donations received for institution of Chairs, endowments, seminars, and lecture series in crores of INR in last 5 years.	2 E	1 chair	**-**

43	Contribution of Alumni/parents for development of university in lakhs	20-25 lacs per annum	20-25 lacs per annum	**20-25 lacs per annum**
44	Percentage of Female Students	> 50%	> 50%	**63.14%**
45	Programme for professional development of Teaching staff per year	7 per year	7 per year	**>7 per year**
46	Projection of successful innovative practices	11	13	**8**
47	National Level Sports competition		1	**-**
48	National level Cultural competition	1	1	**-**
49	ICT Incorporations	Online Paper Valuation	Virtual Learning	**Online teaching learning and assessments**
50	Faculty Position (regular + Foreign + Adjunct + Research+ emirates+ Distinguished) 1:10 +ratio	550	600	**549**
51	Startups	02	05	**6 in pipeline**
52	Patents Granted	3	8	**16+8**
53	Research Expenditure on seminar workshop conference cumulative 3 years	11 Cr	18 Cr	**18 cr**
54	PhD enrollments	250	325	**253**
55	Citations	2400	3500	**16539**
56	Research funded Projects (above 1 Cr)	10	18	**14**
57	H index	41	60	**51**
58	Clinical Research Revenue (cumulative 3 yrs)	1.5 Cr	5 Cr	
59	Copyrights including Impartus Lectures	200	250	**444**
60	Number of faculties	15	15	**11**
61	ODL	5	10	**8**
62	Online	0	10	**-**
63	Off Campus / Off shore	Off campus	Off shore	**Off campus**
64	UGC Grants	Spark	FIST	**Paramarsh**
65	20% Additional foreign students	5	20	**1**
66	Super-specialty Courses	02	08	6
67	Journals in Scopus	01	03	**1**
68	Number of published conference proceedings in Pubmed/Scopus/WOS	**-**	150	**11**
69	Number of books/chapter published **in Scopus**	**-**	10	**10**
70	Percentage of students enrolled in subject related certificate/diploma/add-on program	**-**	30% 20%	**60%**
71	Number of Value added courses offered **(electives to add??)**	**-**	30	**26**
72	Number of extramural activities/beyond classroom activities- student club/cultural societies etc	**-**	10	**6**
73	Teachers trained in delivery of e-content /e-courses.	**-**	50%	**100%**

74	Number of training programs in IPR, RM, GC & lab practices, Research grant writing & Industry academics collaboration.	**-**	**6**	**9**

New indicators as per NIRF, AQAR, QS, TIMES, IoE :

Sr no	**Indicators**	**Accreditation/Ranking/Policy**
1	Co-Authored Activities	IoE
2	Faculty Exchange	IoE
3	International Accreditations and Rankings	IoE
4	Sustainability Development Goals	IoE, QS, Times
5	Internationally Qualified Faculty	IoE, QS, Times
6	Multi-disciplinary courses	IoE, QS, Times
7	Research Contribution to Country	IoE, QS, Times
8	Number of programs with integration of SWAYAM courses	NIRF
9	Number of programs with integration of SWAYAM courses	NIRF
10	Contribution of alumni Financial/Donations/Placements/Student exchange/Endowments	NAAC
11	Twinning programs	NEP, UGC
12	Joint degree programs	NEP, UGC
13	Dual degree programs	NEP, UGC
14	Courses with embedded apprenticeship program	NEP, UGC
15	Lateral entry exit courses	NEP, UGC

16	Multiple entry exit courses	NEP, UGC
17	Credit banking, credit redemption, credit transfer	NEP, UGC
18	Number of electives / Honours/ Minors/ Value added courses	
19	Multilingual courses	NEP
20	Vocational courses	NEP

Agenda item 12: To consider the road map of IRAW for International Accreditations and Rankings

CONCEPT NOTE

INTERNATIONAL RANKINGS AND AWARDS – A ROAD MAP – DMIMSU (Deemed to be University)

Authors –

- **Dr. Gaurav Mishra, Convener, IRAW**
- **Dr. Pavan Bajaj, Member Secretary, IRAW**
- **Dr. Sudhakar Shinde, Member, IRAW**
- **Dr. Ashish Anjankar, Member, IRAW**
- **Dr. Aditya Patel, Member, IRAW**
- **Dr. Waqar Naqvi, Permanent Invitee, IRAW**

PREAMBLE

Throwing light upon the echelons of the status of higher education institutions/universities, reflection of the same is delivered by the various rankings, standings of the said institution/ university on numerous counts of quality centricity. It is not only a ranking but also a certificate of the quality of education and associated activites, initiatives as well as best practices prevalent therein. The impetus provided by such magnanimous endeavours invariably helps the said institution/ university to strengthen its ground not only on the national soil but mainly on the international cadre.

SCOPE

The perennial principle pursuit after quality centricity forms the base of all activities, curricular or extracurricular. It goes on to glorify its credence at an international level, or on a global level as may also be said. The international rankings are totally capable of adding a flair and flavour of how excellence in quality centricity has been achieved by the said institution/ university on all of the respective mentioned grounds. The same endeavour can be metaphorically analogous to a dynamic and an ongoing process, perennial as has been mentioned earlier, to be true to its meaning and of essence. It is an internationally accepted and prevalent calibration of quality centricity which marks the institution/ university on the global map based on its level of excellence in quality delivery.

MANDATE

The Institution/ University being a legitimately authorised body for delivering quality higher education and quality centricity with ideal effect, has to get calibrated according to global norms and standards in order to strengthen and maintain its own standards of delivery of higher education to the main stakeholders, its learners, as well as upholding the baton of quality centricity, come what may. Therefore, for the institution/university, catering to the essential onus and responsibility needs to be of utmost importance and attention for etching its own credits, credence and credibility.

OPERATION

a. **Availability** –

Proper planning from the institutional side and aspect needs to be materialised and for this, a road map is required to guide and direct this voyage in the right direction. For this, multiple agencies responsible for the purpose of international rankings as well as accreditation have been included in this draft for consideration, planning and proceeding thereto.

The different agencies are as follows:-

TIMES HIGHER EDUCATION RANKINGS

1. THE ASIA UNIVERSITY RANKINGS
2. THE YOUNG UNIVERSITY RANKINGS
3. THE WORLD UNIVERSITY RANKINGS
4. THE IMPACT RANKINGS

QS RANKINGS

1. QS INDIA RANKINGS
2. QS E LEARNING READINESS CERTIFICATION(applied and certified previously for 1 year till September 2021)
3. QS I GAUGE UNIVERSITY AND COLLEGE RATINGS
4. QS ASIA RANKINGS
5. QS WORLD UNIVERSITY RANKINGS
6. QS STAR RANKINGS

The requirements stated and stipulated by the different agencies responsible for international rankings and accreditation are enlisted according to the weightages to each of the criteria and sub criteria enlisted therein as annexures to this draft.

b. Feasibility

The annexures attached to this draft encompass over the said requirements, stipulations and standards prescribed by international ranking agencies in detail. It has been observed that numerable parameters overlap with each other generically but are subtly different in specifics relative to each ranking/rating system herein.

The feasibility with regards to every addressed parameter needs to be worked out in concordance with international requirements for fulfilment of international requirements. The action plan with regards to the year of consideration to be applying for the said rankings are mentioned as follows and are open to further discussion and planning for the purposes of diligent execution.

c. Action plan

i. **Immediate targets** –

QS India Rankings – 2021-22/2022-23

QS E Learning Readiness Certification – 2021-22/2022-23

QS I Gauge University And College Ratings - 2021-22/2022-23

ii. **Phasic targets** –

QS Asia Rankings – 2022-23
QS Star Rankings – 2023-24
QS World University Rankings– 2024-25
THE Asia Rankings – 2024-25
THE Young Universities Rankings – 2024-25
THE World Universities Rankings – 2024-25
THE Impact Rankings - 2024-25

IMPACT

It is expected that the endeavour to achieve international rankings would implicitly and explicitly result into the betterment and refinement of the quality centricity and delivery of education to the learners, the main stakeholders and will benefit all the stakeholders involved upon materialisation of international rankings in the form of newer opportunities and doorways to more such laudable ones for all times to come. The main advantage out of this endeavour will be increased visibility of the University on a global scale along with refinement and improvement of the educational services delivered by the University with an added international flair of standards and stipulations making it commensurate with international standards and stipulations.

Timeline for Accreditations and Rankings, DMIMS (DU)

Sr. no	Accreditations and Rankings	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
1	**NAAC**	AQAR	AQAR	AQAR	AQAR	AQAR + SSR	NAAC 4th cycle
2	**NIRF**	NIRF Overall University Medical Dental	NIRF Overall University Medical Dental Research	NIRF Overall University Medical Dental Research	NIRF Overall University Medical Dental Research	NIRF Overall University Medical Dental Research Pharmacy ODL/Online (?)	NIRF

3.	**NABH**	NABH – Ayurveda hospital	NABH – Dental hospital	NABH – AVBRH	NABH – Ayurveda hospital + Wana (entry level)	NABH – Dental hospital	
4	**NABL**	NABL : Ethics Committee, DMIMS	NABL – CRL Wardha + Wana COVID	NABL : CCL, Wardha	NABL : Ethics Committee, DMIMS, CCL Wana , IVF Wardha, Blood bank	NABL – CRL Wardha + Wana COVID	NABL : CCL Wardha
5	**NBA**						NBA (Pharmacy & engineering)
6	**ISO**	Yearly audit	Yearly audit	Yearly audit	Yearly audit	Yearly audit	Yearly audit
7	**ARIAA**	ARIAA	ARIAA	ARIAA	ARIAA	ARIAA	ARIAA
8	**FICCI**	Excellence in Faculty	Excellence in Faculty University of the Year	Excellence in Faculty University of the Year	Excellence in Faculty University of the Year Excellence in Enabling Research Environment	Excellence in Faculty University of the Year Excellence in Enabling Research Environment Excellence in Internationalization of Education	Excellence in Faculty University of the Year Excellence in Enabling Research Environment Excellence in Internationalization of Education
9	**QS I gauge**	-	QS I gauge				
10	**QS I gauge E LEAD**	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD
11	**QS India rankings**			QS India rankings	QS India rankings	QS India rankings	QS India rankings
12	**QS Asia rankings**				QS Asia rankings	QS Asia rankings	QS Asia rankings
13	**QS Star rankings**					QS Star rankings	QS Star rankings
14	**QS World Rankings**						QS World Rankings
15	**THE Ranking**					THE Ranking	THE Ranking
16	**TIMES Impact Rankings**			TIMES Impact Rankings (Selected SDGs)	TIMES Impact Rankings (Selected SDGs)	TIMES Impact Rankings (Selected SDGs)	TIMES Impact Rankings (Selected SDGs)
17	**Accreditation service for International schools , colleges**				ASIC		

	& Universities (ASIC)						
18	**Institute of Eminence**			Institute of Eminence			
19	**Guinness book of world records**				Guinness book of world records		
20	**Asia Pacific Quality Network (APQN)**			APQN			

Agenda item 13: To adopt the AAA report for 2020

The report of Internal Academic and Administrative audit , under the guidance of Hon Chief Coordinator Dr. SS Patel, was presented by Dr Bhushan Lakhkar, Convener, AAA on 9th June 2021. Hon Pro Chancellor Dr. Vedprakash Mishra chaired this meeting. Following points emerged out of this meeting;

1. A resetting of evaluation parameters to be worked up for DMMC by IQAC

2. A pre-audit meeting must be done for internal AAA. The purpose of preaudit will be to seamlessly integrate central information to peripheral units. Pre audit must follow actual audit which must ensure on spot remedial corrections.

3. To consider Pharmacy and Physiotherapy college in the stage stabilisation and hence parameters of evaluation should be considered accordingly.

Agenda item 14: To Compare the NIRF data of Various Deemed to be Universities vis a vis DMIMS submitted data.

NIRF 2021 - OVERALL CATEGORY												
Sr.No.	Categories	**DMIMS**	Amrita University	Jamia Hamdard	Kalinga Institute	Sri Ramachandra Institute	Dr. D. Y. Patil Vidyapeeth	JSS Medical College	Saveetha Institute of Medical	Manipal Academy of Higher Education	Siksha `O` Anusandhan	**DMIMS Ranking out of 10 University**
1	Total Intake	**1335**	7859	2364	1761	2274	1443	1919	2664	7996	4329	**10**
2	Student Strength	**3887**	21108	5646	4680	6744	4422	5629	9797	23443	12912	**10**
3	Within State	**2695**	7884	2505	2483	5444	2373	2054	4533	7133	5537	**6**
4	Outside State	**1109**	13140	2926	2007	1060	2010	3427	5102	15780	7202	**9**
5	Outside Country	**83**	84	215	190	238	39	148	162	530	173	**9**
6	% of Diversity	**30.666**	**62.649**	**55.632**	**46.944**	**19.247**	**46.336**	**63.510**	**53.731**	**69.573**	**57.117**	**1**
7	PHD	**795**	1213	591	101	897	206	331	905	1086	1005	**6**
8	PHD Awarded	**138**	93	59	18	206	26	70	41	168	97	**3**
9	Library	**5.11 CR**	18.30 CR	0.84 CR	2.56 CR	4.40 CR	3.23 CR	6.30 CR	6.87 CR	21.17 CR	8.90 CR	**6**
10	New Equipment	**16.26 CR**	94.00 CR	1.92 CR	0.9 CR	25.18 CR	29.40 CR	15.50 CR	39.70 CR	16.59 CR	157.51 CR	**7**
11	Engineering Workshops	**0.25 CR**	16.35 CR	0.06 CR	0.21 CR	4.17 CR	0	2.01 CR	3.63 CR	4.84 CR	10.33 CR	**8**
12	Studios	**0**	0	0	0	0	0	0	0	0	0	**-**
13	Other Expenditure	**3.10 CR**	27.01 CR	5.09 CR	3.95 CR	7.42 CR	21.12 CR	16.58 CR	22.20 CR	47.06 CR	18.89 CR	**10**
14	Salaries	**165.65 CR**	370.13 CR	147.61 CR	21.32 CR	256.98 CR	230.73 CR	168.58 CR	128.17 CR	613.32 CR	273.58 CR	**7**
15	Maintenance	**134.95 CR**	298.36 CR	44.23 CR	2.30 CR	310.00 CR	116.55 CR	100.88 CR	222.72 CR	895.55 CR	277.75 CR	**6**
16	Seminars/Conferences	**10.57 CR**	17.44 CR	0.74 CR	0.35 CR	2.87 CR	0.86 CR	3.23 CR	3.36 CR	3.18 CR	6.24 CR	**2**
17	Patents Published	**18**	24	6	0	6	8	3	90	26	9	**4**
18	Patents Granted	**15**	11	3	0	3	1	1	1	2	7	**1**
19	Sponsored Research Project	**4.50 CR**	88.40 CR	13.24 CR	2.32 CR	14.39 CR	6.31 CR	6.83 CR	24.38 CR	26.44 CR	7.54 CR	**9**
20	Consultancy Project	**2.5 CR**	9.25 CR	5.47 CR	1.82 CR	9.27 CR	14.42 CR	6.24 CR	7.24 CR	93.74 CR	11.34 CR	**9**
21	Executive Development Program	**1.48 CR**	2.16 CR	0.16 CR	0.5 CR	0.66 CR	0.59 CR	3.23 CR	3.98 CR	8.40 CR	0.22 CR	**5**
22	Publication											
23	Citations											
24	Total Faculty	**537**	Not Display	473	Not Display	747	651	813	876	2661	1393	**9**
25	**NIRF Rank 2020 (Overall)**	**97**	**13**	37	**44**	**51**	**75**	**54**	**66**	**14**	**38**	
26	**NIRF Rank 2020 (University)**	**61**	**4**	21	**24**	**28**	**46**	**33**	**42**	**8**	**20**	

NIRF 2021 - MEDICAL CATEGORY

Sr.no.	Categories	DMIMS	Amrita University	Jamia Hamdard	Kalinga Institute	Sri Ramachandra Institute	Dr. D. Y. Patil Vidyapeeth	JSS Medical College	Saveetha Institute of Medical	Kasturba Medical College	Siksha `O` Anusandhan	DMIMS Ranking out of 10 University
1	Total Intake	**403**	256	208	Not Available in website	440	468	465	220	469	257	**6**
2	Student Strength	**1543**	876	736		1723	1707	1521	927	1701	991	**5**
3	Within State	**599**	76	194		909	463	463	436	231	394	**3**
4	Outside State	**866**	793	542		655	1225	1045	396	1397	597	**5**
5	Outside Country	**78**	7	0		159	19	13	95	73	0	**4**
6	% of Diversity	**61.180**	**91.324**	**73.641**		**47.243**	**72.876**	**69.560**	**52.967**	**86.420**	**60.242**	**8**
7	PHD	**404**	142	3		647	527	56	387	139	282	**4**
8	PHD Awarded	**102**	148	0		152	115	5	18	31	49	**5**
9	Library	**3.70 CR**	8.17 CR	0.11 CR		4.40 CR	1.68 CR	2.50 CR	4.76 CR	6.13 CR	2.96 CR	**6**
10	New Equipment	**14.97 CR**	79.47 CR	0.63 CR		24.17	27.27 CR	8.82 CR	28.00 CR	15.55 CR	96.50 CR	**8**
11	Other Expenditure	**2.98 CR**	9.15 CR	4.76 CR		5.96 CR	18.52 CR	3.61 CR	8.51 CR	2.12 CR	3.32 CR	**9**
12	Salaries	**136.87 CR**	206.14 CR	70.68 CR		145.86 CR	**195.15 CR**	101.81 CR	68.99 CR	117.96 CR	133.62 CR	**5**
13	Maintenance	**121.40 CR**	203.08 CR	26.62 CR		255.35 CR	130.20 CR	38.23 CR	8.45 CR	339.06 CR	120.07 CR	**6**
14	Seminars/Conferences	**6.79 CR**	15.32 CR	0.17 CR		2.36 CR	0.45 CR	0.64 CR	1.69 CR	1.9 CR	2.62 CR	**2**
15	Patents Published	**11**	8	1		1	8	1	2	1	9	**1**
16	Patents Granted	**10**	3	0		1	1	1	0	0	7	**1**
17	Sponsored Research Project	**4.50 CR**	44.72 CR	0.52 CR		11.80 CR	1.28 CR	3.77 CR	**4.40 CR**	**6.91 CR**	1.25 CR	**5**
20	Publication											
21	Citations											
22	Total Faculty	**327**	338	163		443	430	388	270	569	340	**8**
23	**NIRF Rank 2020**	**29**	**7**	**22**	**32**	**13**	**24**	**20**	**34**	**9**	**23**	

NIRF 2021 - DENTAL CATEGORY

Sr. NO	Categories	**Datta Meghe Institute of Medical Sciences**	Maulana Azad Institute of Dental Sciences	Manipal College of Dental Sciences, Udupi	Dr. D. Y. Patil Vidyapeeth	Saveetha Institute of Medical and Technical Sciences	A. B. S. M. Institute of Dental Sciences	Manipal College of Dental Sciences, Mangalore	Sri Ramachandra Institute of Higher Education And Research	Nair Hospital Dental College	SRM Dental College	JSS Dental College and Hospital	M. S. Ramaiah University of Applied Sciences	Siksha `O` Anusandhan	Amrita Vishwa Vidyapeetham	**DMIMS Ranking out of 14 Colleges**
1	Total Intake	**135**	68	135	149	144	149	131	128	Not Available in website	154	134	100	124	89	**8**
2	Student Strength	**577**	229	590	635	637	657	566	496		554	561	402	460	365	**7**
3	Within State	**493**	165	47	466	361	155	70	399		414	149	246	190	28	**1**
4	Outside State	**81**	64	525	168	225	491	493	76		136	399	152	270	337	**11**
5	Outside Country	**3**	0	18	1	51	11	3	21		4	13	4	0	0	**8**
6	% of Diversity	**14.558**	27.948	92.034	26.614	43.328	76.408	87.633	19.556		25.271	73.440	38.806	58.696	92.329	**14**
7	PHD	**177**	0	0	24	114	9	3	84		186	22	41	11	13	**2**
8	PHD Awarded	**34**	0	0	2	4	4	1	26		54	1	4	1	0	**2**
9	Library	**0.58 CR**	0.80 CR	0.68 CR	0.56 CR	0.98 CR	065 CR	0.49 CR	4.40 CR		0.43 CR	1.06 CR	0.7 CR	1.28 CR	0.7 CR	**9**
10	New Equipment	**0.77 CR**	15.99 CR	0.81 CR	1.52 CR	7.82 CR	2.14 CR	0.84 CR	1.81 CR		0.76 CR	0.74 CR	0.73 CR	10.30 CR	0.7 CR	**10**
11	Other Expenditure	**0.10 CR**	7.59 CR	0.31 CR	0.3 CR	4.74 CR	0.25 CR	0.26 CR	0.44 CR		1.88 CR	0.16 CR	0.19 CR	5.37 CR	0.88 CR	**13**
12	Salaries	**17.88 CR**	32.97 CR	21.55 CR	18.52 CR	22.38 CR	14.37 CR	17.09 CR	14.79 CR		9.46 CR	20.25 CR	13.37 CR	12.80 CR	6.74 CR	**6**
13	Maintenance	**5.99 CR**	10.75 CR	13.67 CR	15.03 CR	17.61 CR	22.19 CR	13.80 CR	14.89 CR		9.93 CR	5.04 CR	4.75 CR	28.33 CR	1.71 CR	**10**
14	Seminars/Conferences	**2.10 CR**	1.19 CR	0.5 CR	0.16 CR	1.13 CR	0.17 CR	0.5 CR	0.22 CR		9.46 CR	0.41 CR	0.14 CR	0.66 CR	0.14 CR	**2**
15	Patents Published	**7**	3	2	8	71	0	0	2		10	1	3	9	0	**4**
16	Patents Granted	**4**	2	0	1	0	0	0	0		0	0	0	7	0	**2**
17	Sponsored Research Project	**0.61 CR**	4.88 CR	1.64 CR	0.32 CR	9.21 CR	2.97 CR	0.14 CR	1.02 CR		0.78 CR	0.59 CR	0.29 CR	0.73 CR	0.35 CR	**9**
18	Publication															
19	Citations															

20	Total Faculty	**89**	94	64	81	108	130	60	82		162	125	69	118	75	**8**
21	**NIRF Rank 2020**	**14**	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	

Agenda item 15: To propose the 'Academic program on Systematic literature review for Doctoral scholars' as a value added course in Doctoral program of DMIMS(DU)

Dr Vedprakash Mishra
Dr Minal Choudhary
Dr Nazli Quazi

Need Analysis:

The vast scale of scholarly literature leads to a problem with regards to how to comprehensively record and assess the state of knowledge on a particular topic. A scientific means of doing so is that of systematic literature reviews. Systematic literature reviews search, appraise and collate all relevant empirical evidence in order to provide a complete interpretation of research results.

A systematic literature review is more exhaustive than a literature review as it includes both published and unpublished literature, often called grey literature. Grey literature is a significant part of a systematic review and adds value to the review. This is because grey literature is often more current than published literature and is likely to have less publication bias. Grey literature includes unpublished studies, reports, dissertations, conference papers and abstracts, governmental research, and ongoing clinical trials.

Benefits of Systematic Literature Review is as follows:

1. They deliver a clear and comprehensive overview of available evidence on a given topic.
2. They help identify research gaps in our current understanding of a field.
3. They can highlight methodological concerns in research studies that can be used to improve future work in the topic area.
4. They can be used to identify questions for which the available evidence provide clear answers and thus for which further research is not necessary.

Aim:

The aim of the Academic Programme on Systematic Literature Review is to identify, evaluate, and synthesize research results to create a summary of current evidence that can contribute to evidence-based practices.

Objectives:

A literature review should accomplish the following objectives:

- It should discuss the major findings related to an identified topic.
- It should summarize what is and is not known about the topic.
- It should evaluate the existing research, identify controversies that appear in the literature.
- It should identify novel hitherto untapped areas for further research.

Program outcomes

1. Systematically identify the Problem/Population, Intervention, Control and Outcomes for the identified area of research
2. Crystallize Research question based on need analysis, gaps and concerns backed by scientific evidence.
3. Design Research protocol with a robust scientific approach and evaluation plan
4. Apply suitable search strategies as per applicability and relevance with precision to extract relevant information and evidence
5. Identify and apply various screening parameters for search of scientific data within the studies as filtered through various literature search strategies
6. Analyse and Interpret screened data for systematic review or meta-analysis
7. Perform and publish systematic review and metanalysis in respective areas of interest

Course outcomes

1. Describe the distinguishing characteristic of a systematic review and identify the main sources of such reviews
2. Decipher the relevance of P-I-C-O for search of relevant literature for gap analysis.
3. Choose relevant scientific publications , as filtered by PICO search, that are applicable to area of study

4 . Formulate a befitting research question that is feasible,
Interesting, novel, ethical and relevant.

5. Frame a broad aim and measurable objectives of systematic review.

6. Recognise appropriate review techniques and tools of potential applicability.

7. Prepare research protocol as per PRISMA-P checklist

8. Interpret various search terms to apply for search strategy for various search engines, especially PubMed and CENTRAL.

9. Perform search strategies by suitable application of various search filters.

10. Save and retrieve search results for use on a later date.

11. Import the search data to screening software

12. Screen the imported data for relevance and utility as per the area of interest

13. Assess the risk of bias in finally screened studies

14. Analyse critically and synthesize findings of key research studies that addresses the research question

15. Perform systematic review or meta-analysis of the selected screened data after assessment of RoB with subgroups.

16. Prepare the manuscript of systematic review and metanalysis as per standard scientific norms.

Credit Allocation:

S.No	Theme	Topics	Credits allotted	Min. Credit requirement
1	I	• PICO components • Research Question • Aim and Objectives • Protocol development	3	1.5*

2	II	• Search strategies • Screening of studies • Data extraction • Risk of Bias assessment • Meta-analysis (For only those where data permits to do meta-analysis)	3	1.5*
3	III	• Overall preparation of manuscript	3	1.5*

Total allocable credits= 9
Minimum passing credits per theme= 1.5*
Minimum total passing credits= 6

Note:

1. *- indicates that fractions will be converted to the nearest higher integer in each Theme.
2. These credits will be considered as Add-on Credits and may be availed to achieve the minimum 75 credits required to qualify for the award of Doctoral Degree. This provision of Add-on Credits would be available only when the total accruable credits by the Scholar are equal to or more than 6.

Agenda item 16: Any other matter

a. To consider the note sheet from Dr Alka Rawekar, Dean SAHES for Institutional policy for Quality enhancement of the faculty of Allied Health Sciences Program

Note sheet

Sub: Institutional policy for quality enhancement of the faculty of Allied Health Sciences programs

The DMIMS (DU) was granted A+ grade in the third cycle of the NAAC reaccreditation in the year 2017 and the university was placed in the Category –I (Vide UGC letter Dated 20-04-2018), thereby in terms of the UGC notification dated 12-02- 2018, regarding the graded autonomy .

The DMIMS (DU) has launched School of Allied Health Sciences in the Year 2017 and also launched Undergraduate courses in the Faculty of Allied Health sciences in the Academic year 2017-18. Subsequently, the ambit of courses was broadened and more Undergraduate and Post Graduate courses were launched in the subsequent academic years, with due intimation to the UGC from time to time.

During the launch of these courses the model curricula prescribed by the Ministry of Health and family Welfare, GOI for some allied HS courses was taken as bench mark and for all courses the same pattern was followed.

On 28th March 2021, the Govt of India published a gazette notification and the National Commission For Allied And Healthcare Professions Act, 2021 was came in public domain. According to the act, an Allied health sciences council shall be constituted, thereby all these allied health sciences shall be governed by the Allied Health Council regulations prescribed from time to time and which will be binding in character.

Each allied health sciences course has basic foundation course and the core subjects. In terms of the NEP 2020 notified by the Govt of India, all these courses now onwards shall be of 3 years duration, with embedded internship. In the initial phase we had to pool teachers from the core department for imparting the training to these students. Now most of the allied HS courses have come to a stage where the qualified degree holders generated within the University are available at Graduate and Post Graduate level who can be potential and effective teachers for the said courses.

It is therefore proposed that:

1. Regular faculty positions be created under the university for each Allied HS course to ensure that the teaching, skill training and monitoring of the students as well as **overall development of the student in their core field,** is done in the desired way.
2. The post graduate degree holders in the field of MSc MRIT, MLT, MHA, MPH, *Medical Anatomy, Microbiology, Biochemistry, physiology, Pharmacology*, passing from our university may be **recruited as Tutors** for imparting training to undergraduate students.
3. The graduate degree holders can also be **appointed as Demonstrators** for monitoring the clinical/ practical training of these students.

4. The **teaching work load be** ascertained and desirably for each course a Tutor and demonstrator, each be appointed.
5. This Institutional initiative shall **ensure placement opportunities** for the qualified personnel from our own institute, proper teaching-learning, proper training and monitoring of the programs and shall ensure quality enhancement of the program.
6. After the regulations are issued by the Allied Health council, taking into account the provisions therein, we may think of **launching Doctoral programs** in the allied health sciences thereby creating opportunity the post graduate students to achieve higher qualification and enhancing their prospects of getting employment as Faculty in other centres offering the Allied health sciences programs.

Submitted for consideration please.

Dean
Faculty of Allied Health Sciences
DMIMS (DU)
24.05.2021

b. To consider Qualitative measures emanating out of meeting of COE held on 10th June 2021

A quarterly review meeting of Centres of Excellence was held on Thursday 10th June 2021, at 11:00 a.m. in the esteemed presence of Hon'ble Pro Chancellor Dr Vedprakash Mishra under the Chairmanship of Dr S S Patel.

The following points pertaining to qualitative initiatives were emanated during the discussion in the meeting.

- In order to Broaden the scope of working of Center of Excellence for Therapy Evaluation and Interdisciplinary Research, the centre shall work under three divisions ,
    - Reverse Pharmacology
    - Pragmatic Trials/RCT designs
    - Safety efficacy studies

This initiative shall contribute in augmenting the research profile.

- Strengthening the system of impact analysis of community services dispensed by Centre of excellence Arogya setu to generate an outcome in the form of **'Evidence based Community Services'**
- Conduct of Colloquium on the theme 'Exploring New Vistas In Health Sciences during COVID 19'

c. To Establish IQA unit of DMMC

DMMC IQA unit is constituted as follows;

1. **Dr. Anagha Sahasrabuddhe , Physiology**
2. Dr. Suvarna Sande, Microbiology
3. Dr. Ninad Nagrale, FMT
4. Dr. Manju Chandankhede, Biochemistry

Dr Tripti Waghmare
Director, IQAC, DMIHER (DU)