



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



Internal Quality Assurance Cell

Quarterly Meeting 17.09.2021

Agenda Papers



Agenda for Quarterly Meeting of Internal Quality Assurance Cell to be held on 17th September, 2021 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 10 th June, 2021 at IQAC Board Room Sawangi (Meghe), Wardha.
2.	To approve the ' Action Taken Report ' of the last Quarterly IQAC Meeting held on 10 th June, 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
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
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
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 quality DMIMS(DU)
10.	To standardize the concept note of 'Validation of Outcome based Electronic Question bank by learners : A quality initiative towards Empowering learners as proponents of
11.	To propose 'Elective in Obstetric Ultrasound for MD/MS Obstetrics and Gynecology – A
12.	PDP status and considerations with respect to IOE
13.	To consider the road map of IRAW for International Accreditations and Rankings
14.	To adopt the AAA report for 2020
15.	To Compare the NIRF data of Various Deemed to be Universities vis a vis DMIMS
16.	To propose the 'Academic program on Systematic literature review for Doctoral scholars' as a value added course in Doctoral program of DMIMS(DU)
17.	Any other matter

Agenda No. 1 :To **confirm the minutes** of the last Quarterly IQAC Meeting held on 10th June, 2021 at IQAC Board Room Sawangi (Meghe), Wardha.

The meeting was chaired by Hon Pro Chancellor and following members attended the meeting;

Chairperson : Head of the Institution	1. Dr. Rajiv M. Borle, Vice Chancellor, DMIMS(DU)
One member from Management	1. Shri Sagarji Meghe, Member Board of Management
One of the senior teachers as the Coordinator/Director of the IQAC	1. Dr. Tripti Srivastava
Co-convener	2. Dr. Gaurav Mishra
A few administrative officers	1. Dr. Lalit Waghmare - Member 2. Dr. Babaji Ghewade - Member 3. Dr. C. Mahakalkar - Member 4. Dr. Abhyuday Meghe - Member 5. Dr. Minal Chaudhary - Member 6. Dr. S.Z. Quazi – Member 7. Mr. Ajay Punwatkar - Member
Teachers (three to eight)	1. Dr. Alka Rawekar - Member 2. Dr. S. Shrihari –Member 3. Dr. Gaurav Sawarkar –Member 4. Dr. Vandana Gudhe – Member 5. Mr. Manish Deshmukh -Member 6. Ms. Darshana Kumari – Member
One /two nominees from Local Society, Students and Alumni	1. Local Society - Dr. S.S. Patel 2. Students - Ms. Priyal Shrivastava 3. Alumni - Dr. SohanSelkar - Dr. Jayant Gaiki
One /two nominees from Employers/Industrialists/Stakeholders	1. Employer – Dr. Soumya Somani 2. Industrialist – Dr. Kapil Wadhvani 3. Stake Holder – Dr. Rajimale
Member Secretary	1. Dr. Pawan Bajaj
Permanent Invitee	1. Hon. Dr. Vedprakash Mishra 2. All Heads of Institutions 3. All Deans of Faculties
Member, IQAC	1. Dr. Sandeep Shrivastava 2. Dr. Swanand Pathak 3. Dr. Ranjit Ambad

Agenda Item no 3

4. To consider the policy contribution for “Preparation of Competency based Guidelines and Minimum Standard Requirements (MSR) for DM in Geriatric Mental Health’ under convenorship of Dr Sunil Kumar, Professor, Medicine

The chair recorded his appreciation for such policy contribution in a timely manner to Dr Sunil Kumar. As recorded by chair, the most significant contribution within the document was 'Minimum Standard requirements' for DM in Geriatric Mental Health'.

Agenda Item no 4

5. To review the status of AQAR 2019-20.

Director IQAC informed the IQAC that the last date of AQAR 2019-20 submission has been extended to August 2021. It was further informed that in view of AQAR being ready for submission , it will be submitted to the portal once it becomes functional and not wait till the last date.

Agenda Item no 5

6. To deliberate upon revised AQAR format to be filled from 2020-2021

Director IQAC presented the new AQAR guidelines for Health Sciences University. The areas which needs strengthening were highlighted especially Media laboratory/Business Lab/e-resource Studios & Research/Statistical Databases/Health Informatics & Ratio of research projects/clinical trials per teacher funded by Government/Industries and Non-Government agencies during the year in Criteria III and areas of contribution by the Alumni Association in Criteria V. Revisiting and revising PDP targets in this regard was suggested along with an action plan to achieve the desired outcome.

Agenda Item no 6

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

Director IQAC, on behalf of the University, presented a note on 'DMIMS Preparedness for 3rd wave of COVID – 19'. The presentation included situation analysis, measures to maintain academic standards if 3rd wave strikes in, mechanisms to ensure academic progression, need to impart orientation about Global and National guidelines, Knowledge and necessary skills to frontline Health care workers, Brace the community in terms of knowledge, preventive and curative measures to deal with 3rd wave and ways to cater to society with quality health care. The preparedness plan was suggested to be well found by the chair. It was also suggested by chair to segregate the 'DMIMS preparedness plan for 3rd wave of COVID – 19' into two parts; Academic pursuits and Public health with inclusion of Vaccination drive and Psychosocial support initiatives to frontline health workers. The related parts of the document to be shared with Divisional Commissioner and DMER. To conceptualize a blueprint for actualization of the seven opportunities, as envisioned in DMIMS preparedness document, in operational terms.

Agenda Item no 7

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

Hon Chair particularly appreciated the efforts put in by the team of Dental Education Unit headed by Dr Anjali Borle as convener in leading the entire document of CBDE in a very meticulous and timely manner. The document on 'ICT based Teaching Learning and Assessment strategies during COVID – 19 Pandemic and Tangible Outcomes' prepared by Dean Academics, Dr Shweta Pisulkar was equally appreciated, which include blended learning and assessment strategies apart from other instructional approaches in a competency based curriculum. As mentioned by chair, the Roll out model of CBDE, prepared by Director IQAC and team complete the entire action plan for smooth implementation of CBDE across the country. Hon Chair suggested that the three documents must be personally handed over to MoHFW, GOI , DCI and NITI Aayog.

Agenda Item no 8

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)'

Director IQAC presented the concept note on 'Validation of Outcome based Electronic Question bank by learners : A quality initiative towards Empowering learners as proponents of curricular change DMIMS(DU)'. The objectives of the initiative as mentioned in the concept note was 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 SOP for outcome based eQB validation by learners was presented within the concept note. Hon Chair suggested that all such initiatives must be included under Umbrella mechanism for meaningful student engagement in all curricular transactions and to be adopted as one of the best practices of the University.

Agenda Item no 9

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

Hon Chair expressed his appreciation towards well conceptualised ‘Elective in Obstetric Ultrasound for MD/MS Obstetrics and Gynecology – A value added course’ By Dr Neema Acharya, HOD OBGY, Dr Rajasbala Dhande, HOD, Radiology, Dr Gaurav Mishra, Dean IDS and Dr Tripti Srivastava, Director IQAC and directed to introduce this course in the coming academic session. Sir also suggested that the credits must be suitably allocated within the curriculum of this 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)

Agenda Item no 2 : To approve the ‘Action Taken Report’ of the last Quarterly IQAC Meeting held on 10th June 2021 at IQAC Board Room of DMIMS (DU), Sawangi (Meghe) Wardha

The action taken report was noted with satisfaction.

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	<ul style="list-style-type: none"> • 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. 	Director IQAC	SRIHER has principally agreed for a multicentric project on our copyrighted model ‘4 step escalating DMIMS blended learning mode of higher education’

	<ul style="list-style-type: none"> 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. 		<p>for operational implementation of OUTCOME Assessment.</p> <p>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.</p>
5	<ol style="list-style-type: none"> To analyze the underachieved targets in terms of operational constraints and to work out the action plan to bridge the gap. To indicate/categorize the Aspirational targets separately in the PDP. 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. To work out consolidation/strengthening mechanism with regard to optimally achieve targets including resetting of the targets. To incorporate certain tangible areas in PDP which are over and above the prescribed by the Accrediting body. 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 		<ol style="list-style-type: none"> Operational plan for underachieved targets is prepared and being implemented accordingly Aspirational targets indicated within PDP Will be presented in PMB meeting in July 2021 Resetting of targets done Included in agenda item for discussion The contextual resetting were done in PDP in view of COVID
6	<p>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.</p> <p>To set a target of 3.75 score in the next AAA due in 2023.</p>	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. Lalitbhusan Waghmare, Pro Vice Chancellor in the PDP of the university.	Hon Pro VC	Incorporated in PDP of the University

8	<p>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.</p> <p>2. To work out Modality of Tele-working by identifying various areas of tele-working/functioning as a regular mode for the functioning of the university on the basis of the present experience.</p> <p>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</p>	Director IQAC	<p>1. Compendium published</p> <p>2. Telemedicine and Teleconsultation services initiated at AVBRH in regular mode.</p> <p>3. IT capacity augmented in terms of designing Institutional Learning Management System. Complete Automation of Library and Examination is underway. Included in PDP.</p>
8	<p>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</p> <p>3.To Establish and develop the Artificial Intelligence in Health Sciences Education.</p> <p>4. To establish and enrich Clinical Research Division</p> <p>5. To Establish many more Super-specialities courses and Oncology Centre at Teaching Hospital</p> <p>6. To establish 'One Health' concept and to implement related activities in the university.</p> <p>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.</p>	Director IQAC Director R&D	<p>1. 3 new ODL programs initiated (BA,BBA,BSc-IT) . Applied to UGC for online programs.</p> <p>2. UG , PG and PhD programs in SOE&PH launched</p> <p>3. AIML courses launched in undergraduate courses of Medicine & Dentistry</p> <p>4. Clinical Research Division established</p> <p>5.</p> <p>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</p> <p>7. Strengthening of Animal experimentation and animal research reflected in clinical research division</p>

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.

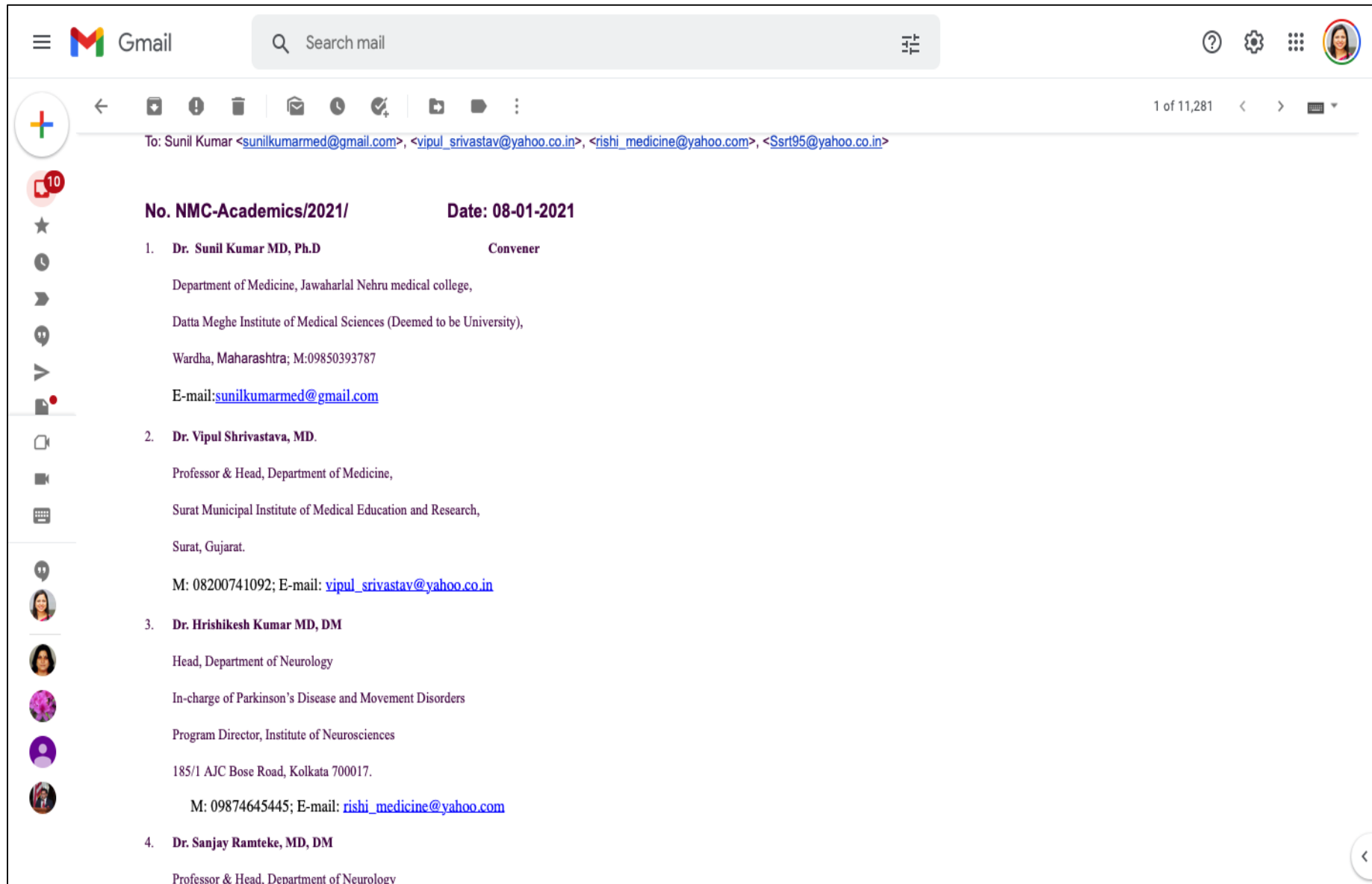
Agenda item 3 : To review the status of ATR of PM board meeting held in July 2020

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4	<ul style="list-style-type: none"> • 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	<p>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.</p> <p>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.</p>
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	<p>to optimally achieve targets including resetting of the targets.</p> <p>5.To incorporate certain tangible areas in PDP which are over and above the prescribed by the Accrediting body.</p> <p>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</p>		<p>5. Included in agenda item for discussion</p> <p>6. The contextual resetting were done in PDP in view of COVID</p>
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7	To Ensure the incorporations included in the Study Group Report as prepared by Dr. Lalitbhusan Waghmare, Pro Vice Chancellor in the PDP of the university.	Hon Pro VC	Incorporated in PDP of the University
8	<p>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.</p> <p>2. To work out Modality of Tele-working by identifying various areas of tele-working/functioning as a regular mode for the functioning of the university on the basis of the present experience.</p> <p>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</p>	Director IQAC	<p>1. Compendium published</p> <p>2. Telemedicine and Teleconsultation services initiated at AVBRH in regular mode.</p> <p>3. IT capacity augmented in terms of designing Institutional Learning Management System. Complete Automation of Library and Examination is underway. Included in PDP.</p>
8	<p>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</p> <p>3 . To Establish and develop the Artificial Intelligence in Health Sciences Education.</p> <p>4 . To establish and enrich Clinical Research Division</p> <p>5 . To Establish many more Super-specialities courses and Oncology Centre</p>	Director IQAC Director R&D	<p>1. 3 new ODL programs initiated (BA,BBA,BSc-IT) . Applied to UGC for online programs.</p> <p>2. UG , PG and PhD programs in SOE&PH launched</p> <p>3. AIML courses launched in undergraduate courses of Medicine & Dentistry</p> <p>4. Clinical Research Division established</p> <p>5.</p>

	<p>at Teaching Hospital</p> <p>6 . To establish 'One Health' concept and to implement related activities in the university.</p> <p>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.</p>		<p>6. Department of 'One health' established at SOE&PH.</p> <p>1) One Seminar activity conducted - Topic 'One Health- An interface between Veterinary and Human health'</p> <p>2) Review article on One Health - Manuscript drafting is ongoing</p> <p>3) Research Project - In Planning Phase</p> <p>7. Strengthening of Animal experimentation and animal research reflected in clinical research division</p>
9	<p>To update the thrust areas in terms of directional details probable areas and areas of probable operation pertaining to the Tribal health</p>	<p>Director R&D</p>	<p>Areas identified.</p> <p>Concept note on 'Research Advancement in high priority areas under intramural grant scheme' submitted.</p>

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



The screenshot shows a Gmail email interface. The header includes the Gmail logo, a search bar, and a user profile picture. The email content is as follows:

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,
Surat, Gujarat.
M: 08200741092; E-mail: vipul_srivastav@yahoo.co.in
- 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)

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 :

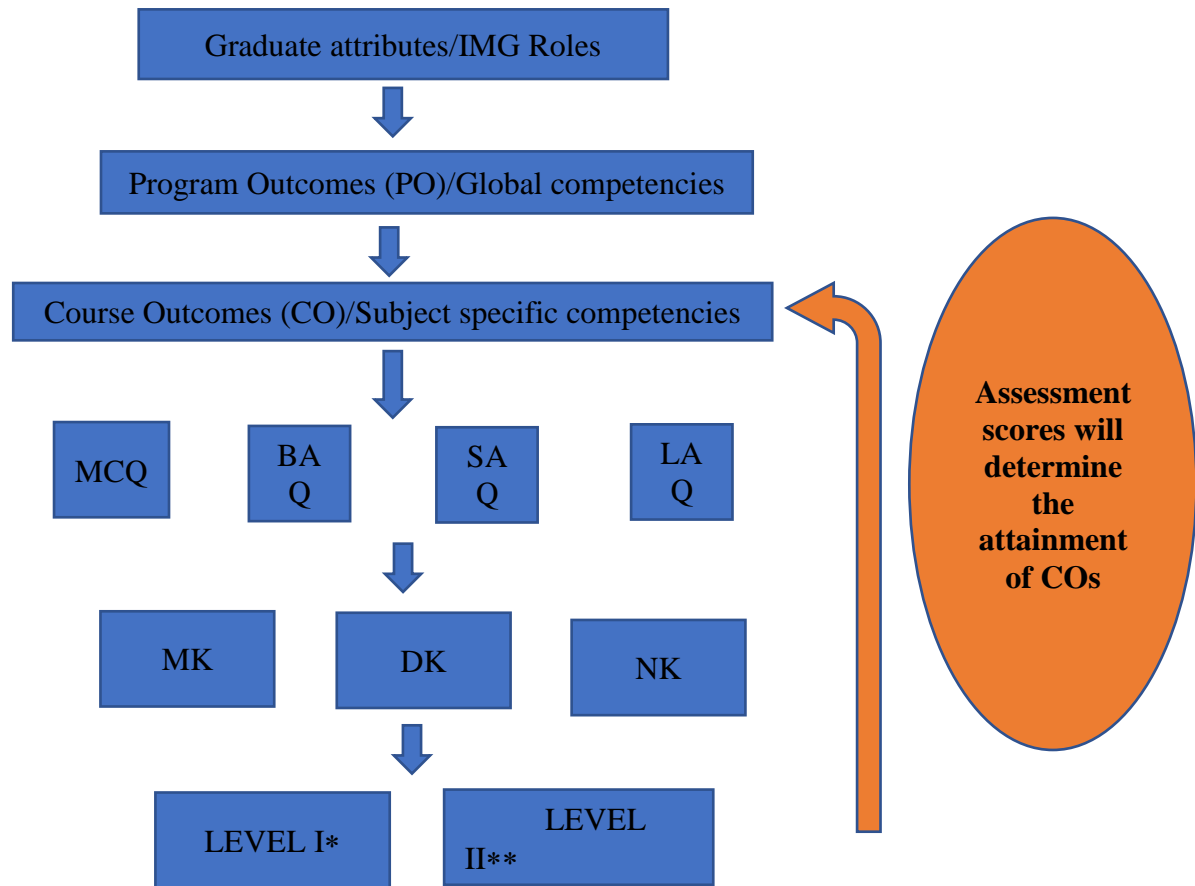
To engage learners meaningfully towards improving the face validity of revised outcome based electronic question bank of various educational programs of the University .

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, Create⁴

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 (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

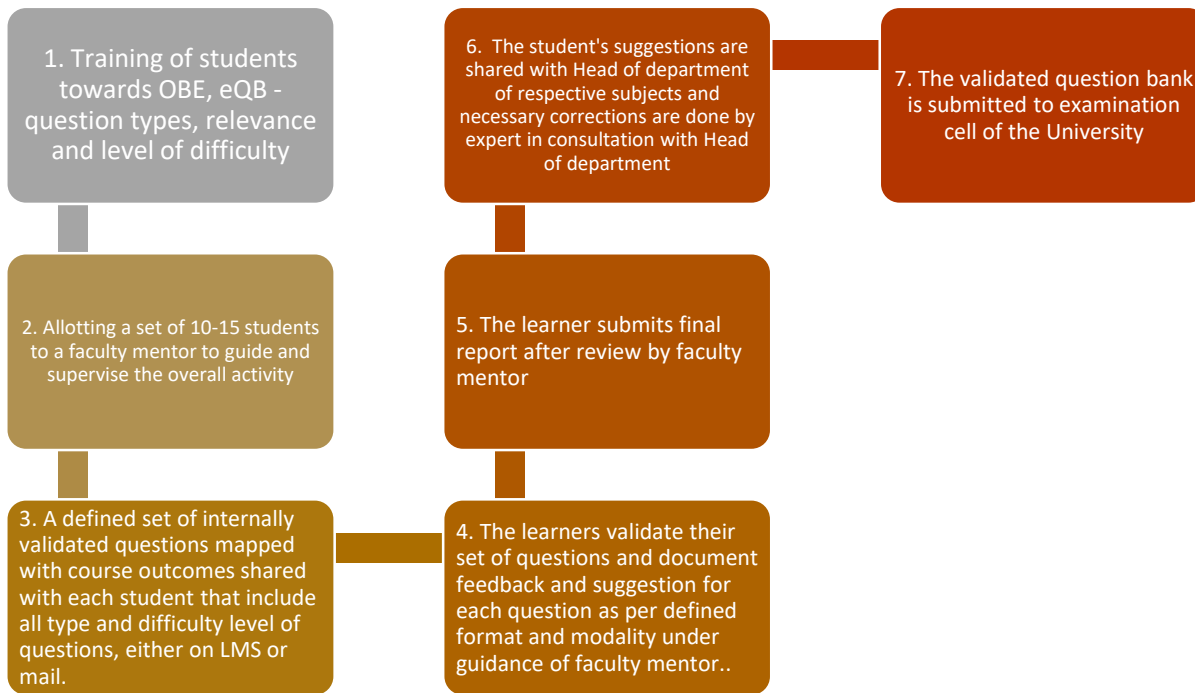


Fig 2 : SOP of validation of outcome based eQB by learners

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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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 fetu 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 LABOR 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 1 ST YEAR OF RESIDENCY OF POST GRADUATE COURSE OF MS IN OBSTETRICS AND GYNECOLOGY

LOGBOOKENTRYREQUIRED	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 patient

**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 Competence/ Competent
<i>I</i>	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) <u>10</u> .			y	y	

	<p>Ultrasound artifacts.</p> <p>Official statements from professional societies (AIUM, ACOG, ACOOG, ACR, ISUOG, SMFM and SRU)</p>					
2	<p>Applied basic principles of ultrasound physics while using <i>ultrasound equipment</i> (PROFESSIONALISM</p>					
	<p>Ultrasound transducers: principles of sound generation; compare transducer characteristics and applications.</p> <p>Sound penetration and bioeffect with consideration related to acoustic power output.</p> <p>Effect of frequency on resolution and penetration.</p> <p>Effect of depth settings on field of view and image size.</p> <p>Gain settings for optimal image brightness with minimum power output.</p> <p>Focal zone depths to achieve best resolution of structures of interest.</p> <p>Image persistence settings to reduce background noise.</p> <p>Counselling ,consent and record keeping-Inputting patient information into ultrasound system before starting an ultrasound examination.</p>			y	y	

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

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

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

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)			REMARK
			ASSISTE D 20	PERFORMED UNDER SUPERVISIO N MINIMUM MINIMUM 20	PERFORMED INDEPENDENTLY MINIMUM 5	
PROCEDURAL SKILSS – ABILITY TO PERFORM OBSTETRIC ULTRASOUND TO IDENTIFY AND REPORT FOLLOWING CONDITIONS -		HANDS ON TRAINING IN ANC USG UNIT OF DEPARTMENT OF RADIODIAGNOS IS				Needs Development/ Approaching Competence/ Competent
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						

<p><i>twin gestations</i></p> <ol style="list-style-type: none"> 1. determining twin placentation by ultrasound. 2. serial evaluation of discordant twins. 3. findings of monochorionic monoamniotic twins 				y	y	
<p><i>Placental abnormalities</i></p> <ol style="list-style-type: none"> 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	
<p><i>Amniotic fluid assessment</i></p> <ol style="list-style-type: none"> 1. Estimation of amniotic fluid volume in twin gestations. 				y	y	

<i>Cervix</i>				y	y	
1. Measurement of cervical length in second and third trimesters of pregnancy						

COMPETENCY # addressed	DATE	NAME OF ACTIVITY	LEVEL OF COMPETENCY ACHIEVED (AND NUMBER PERFORMED)			REMARK
			OBSERVED	PERFORMED UNDER SUPERVISION	PERFORMED INDEPENDENTLY	
						Needs Development/ Approaching Competence/ Competent
<i>Ultrasound in the second and third trimesters</i>				y	y	
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						

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

conjoined twins. 2. Diagnosis and evaluation of twin reversed arterial perfusion						
MEDICOLEGAL DOCUMENTATION SKILLS- & PROFESSIONALISM <ul style="list-style-type: none"> ➤ Counselling Of The Patient For Scan ➤ Explaining PCPNDT ACT ➤ Taking Consent ➤ Form F Filling - ➤ Documentation And Storing Data 						

ASSESSMENT 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 Competence/ Competent
- 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.

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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 PubMed (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	AAA +GMP	NIRF NABL, NABH	1. IQAC 2. NAAC, NIRF-

	ii)National Accreditation/Ranking iii)International Accreditation/Ranking iv)AAA			61,29,14, 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	1 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%
35	Student Placement percentage average per year Median Salary			Placement : 89.49% Median salary 9-11lac
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 decisionmaking bodies	>20%	>20%	>20%
42	Donations received for institution of Chairs, endowments, seminars, and lecture series	2 E	1 chair	-

	in crores of INR in last 5 years.			
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 peryear	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
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- 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 activities, 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 4 th 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	Excellence in Faculty University of the Year Excellence in Enabling Research Environment Excellence in Internationalization

						Education	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 & Universities (ASIC)				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
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1	I	<ul style="list-style-type: none"> • PICO components • Research Question • Aim and Objectives • Protocol development 	3	1.5*
2	II	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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.

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)