DATTA MEGHE INSTITUTE OF MEDICAL SCIENCES

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

IQAC

Internal Quality Assurance Cell

Quarterly Meeting 07.02.2022

Agenda Papers

Agenda for Quarterly Meeting of Internal Quality Assurance Cell to be held on 07th February, 2022 at 04.00 pm 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 17th September, 2021 at IQAC Board Room Sawangi (Meghe), Wardha.
2.	To approve the 'Action Taken Report' of the last Quarterly IQAC Meeting held on 17th September, 2021 at IQAC Board Room of DMIMS (DU), Sawangi (Meghe) Wardha.
3.	To recommend the model of Value Added courses for all academic programs of DMIMS (DU)
4.	To present the IQAC report on ' Evolving best practices in Competency based Medical Education through Midterm evaluation by constituent units JNMC & DMMC of DMIMS(DU)
5.	To present the 'Credit system for Undergraduate Competency based Medical curriculum in India : towards actualization of NEP 2020'
6.	To note the Status of National Rankings and Accreditation; ARIIA, NIRF 2022 & AQAR 2021
7.	To note status of International Rankings; QS I Gauge ratings, QS Subject ratings & TIMES Impact ranking
8.	To note the letter of in-principal approval regarding change of name of Datta Meghe Institute of Medical Sciences (Deemed to be University) to 'Datta Meghe Institute of Higher Education & Research by Department of Higher education, MOE, GOI dated 4th Feb 2022
9.	Any other matter with permission of chair

Agenda item no 1 : To confirm the minutes of Quarterly Meeting of Internal Quality Assurance Cell held on 17th September, 2021 at 03.00 p.m

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Internal Quality Assurance Cell

Date: 07/02/2022

Minutes of meeting of Quarterly Meeting of Internal Quality Assurance Cell held on 17th September, 2021 at 03.00 p.m

The quarterly meeting of **Internal Quality Assurance Cell held on 17thSeptember, 2021 at 03.00 p.m in IQAC board room, DMIMS (DU), Sawangi(M), Wardha.** The Following members and Invitees 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 Co-convener	1. Dr. Tripti Srivastava 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 Wadhwani 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

Meeting was chaired by Hon Vice Chancellor Dr RM Borle. The following agenda points were discussed:

Item no 1 : to confirm the minutes of last Quarterly IQAC meeting held on 10th July 2021.

The minutes were read and confirmed without any modifications or suggestions by the members.

Item no 2 : to present the ATR of actionable points of last quarterly IQAC meeting

The ATR was presented and noted with satisfaction.

Item no 3 : To discuss the new AQAR format for HEI and HSU as proposed by NAAC from 2022 academic year onwards.

Director IQAC presented the revised and new indicators in the AQAR format from 2022 year onwards. Difference and similarities in the format of HEI and HSU were noted. Criteria wise key indicators, QnM & QlM, respective metrics and weightage were considered. The DVV process , identification of sensitive zones and pain areas and SWOC analysis of DMIMS preparedness for third cycle of accreditation were analysed during discussion. The student satisfaction survey questionnaire was also discussed in detail.

Hon Pro Chancellor sir suggested to identify constituent unit wise area Best practices' that align to NAAC core values and cater to NAAC core values. As per advice of Hon Vice Chancellor and Hon Pro Vice Chancellor, it was decided to strengthen the Alumni cell , Placement cell and identify process owners for the seven criteria. It was decided to prepare in lines with parameters for HSU as well as HEI for time being.

Item no 4 : To note the status of CBME implementation and its gap analysis.

The CBME implementation gap analysis was presented by Director IQAC. The action plan to mitigate various gaps was discussed along with identification of team members. Hon Pro Chancellor Dr Vedprakash Mishra advised to conduct a midterm analysis of the entire CBME curriculum in vogue at JNMC and DMMC through four data collection methods and triangulate the findings for improvisation of the ongoing curriculum. It was also advised to have a robust monitoring mechanism to monitor all inclusions of CBME. The chair directed to launch Competency based Dental Education from 2022 academic year.

Item no 5 : to note the status of National and International rankings and accreditations.

Convener IRAW presented the status of International rankings and informed the members that IQAC will be applying for QS i Gauge, TIMES impact ranking and QS Subject ratings in the month of Oct 2021, November 2021 and Jan 2021 respectively. Taking into consideration the quantum of data that needs to to be organised and parallel work of AQAR 2020, a task force was constituted comprising of IRAW members, IQAC incharges of respective colleges, Mr Samuel Ernst, Director Strategy , Dr Pavan Bajaj Member IQAC and OSD Ms Himanshi to complete the task in a time bound manner under supervision and guidance of Hon Pro Vice Chancellor Dr Lalitbhushan Waghmare.

Agenda item no 2 : Actionable Points of the Quarterly Meeting of Internal Quality Assurance Cell held on 18th October, 2021 at 03.00 p.m. in IQAC Board Room, DMIMS (DU), Sawangi (Meghe), Wardha.

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Internal Quality Assurance Cell

Date: 07/02/2022

Actionable Points of the Quarterly Meeting of Internal Quality Assurance Cell held on 17th September, 2021 at 03.00 p.m. in IQAC Board Room, DMIMS (DU), Sawangi (Meghe), Wardha.

SN	Actionable point	Responsibility	Action taken report
1	A **Centralized Institutional Knowledge Portal** must be established which will act as a Central Depository and Repository of DMIMS both for Digital and Physical Documents , Data Security and Safety and devise norms for Disaster Management.	Mr Samuel Ernst , Director Strategy	Vendor Identified : Wordpro Demonstration on three modules conducted Documents, Campus management and inventory management. Document management likely to start from Feb 2022 as per the action plan.
2	Every constituent unit of DMIMS (DU) must have an assortment of **Value Added** courses, **Interdisciplinary** courses and **Electives** for every academic program. A range of value added courses and Interdisciplinary courses must be planned for every professional year (incl Internships) and program respectively. A range of Electives must be offered for all academic programs including AHS, AS and 3ODL/Online program. Interdisciplinary programs may be planned in alignment with 17 Sustainable Developmental Goals (SDGs)given by UN.	Director IQAC	One fixed and one optional VAC (from a bouquet of 5) will be mandatory for each student for every professional year/academic program. One VAC on SDGs will be made mandatory during the entire UG academic program. VAC will be essentially offered beyond the curriculum. Electives : Planned as per regulatory requirements of the academic program. It will be essentially part of the curriculum.
3	Training of teachers in preparation and delivery of **e-content** must be one of the quality initiative of IQAC. Certification of every teacher in handling technology for TLA must be ensured.	Director IQAC	Training of teachers in preparation and delivery of e content is incorporated as an annual quality initiative by IQAC and certification in this regard is made mandatory for teachers across all academic programs of the University.
4	The University **Website** must be aligned with the requirements of NAAC manual for Health Sciences University. Accordingly a list of inclusions that are mandatorily to be displayed on the website must be worked out by IQAC and suggested to the website committee for necessary action.	Director IQAC Convener Website	The list of inclusions that are mandatorily to be displayed on the website is recommended by IQAC to website committee and necessary inclusions are ensured.

5	**Impact analysis** of various initiatives for Potential and Rapid learners and SDL initiatives based on different learning styles must be included in departmental presentations.	Director IQAC	The Document pertaining to Benchmarking and Impact analysis is being prepared by Director SHPER and Director IQAC respectively under guidance of Hon Pro Chancellor Dr Vedprakash Mishra. It will be availed for all quality initiatives of the University henceforth.
6	All future activities (Scientific, Outreach & extension , student club etc) reports must be submitted to respective monitoring authorities with geotagged photographs.	Director IQAC	Geotagged photographs are included in the SOP of all scientific , outreach, extension and co-curricular activities of DMIMS(DU).
7	An action plan for diligent planning, systematic implementation, strict monitoring and robust feedback mechanisms must be worked out for Medical, Dental, Ayurveda, Nursing, Physiotherapy and Pharmacy education by respective Dean Academics & Education Units regarding Competency Based education. Gap analysis w.r.t implementation of Competency based education must be done. Process owners must be identified in every college to lead the mandatory inclusions of competency based education.	Respective Dean Academics	Action plan for systematic implementation, strict monitoring and robust feedback mechanisms for Competency based education in Medical, Dental and Nursing is worked out in detail along with process owners. Student feedback and suggestions on CBME as in vogue is obtained and curriculum is fortified with relevant suggestions thereby ensuring student centricity which is the hallmark of CBME. CBAE and CBPhE is in process and will be completed by 31st May 2022
8	Apart from the conventional approach to fulfil various CBME inclusions, following novel methods may be adopted; a. Integration of all three settings in ECE b. Matrix based Integration and Alignment c. Baseline analysis of Learning styles &individual traits and Clinico-psychological orientation must be ascertained to guide Self-directed Learning and choice of electives respectively. SDL approach must aim to Institutionalize SDL philosophy and strive to Individualize and Internalize SDL skills. d. Mayo clinic model must be adopted for training in Real life settings. e. AETCOM training must be oriented towards competency based rather than module based with relevant inclusion of Ethical dilemmas and humanities.	Respective Dean Academics	Complied. Novel methods like integrated ECE, matrix based alignment & integration, baseline analysis of learning styles and clinic-psychological orientation, competency based AETCOM are adopted with CBME curriculum. The skill training is aligned to Mayo clinic model viz skill training in simulation settings followed by training in real life settings.
10	In view of possibility of National Eligibility exit Examination (NExT) from	Dean Academic	a. being implemented with robust reviewing & monitoring mechanisms in

	2023, following initiatives are warranted : **a.** Conscious implementation of CBME (As per approved plan) and strict monitoring mechanisms **b.** Integrated and clinically oriented instructional pedagogy **c.** Increased Opportunities for Hands on student experience by optimal inclusion of community based learning, Simulation based learning and learning in clinical settings **d.** Systematic introduction of Peer (near peer) teaching for skill training (in SVL & Clinics) eg : evening clinics and student lead in SVL **e.** Introduction of Value added courses , Interdisciplinary courses & Electives aligned to CBME &NExT Principles **f.** Real time assessment of all skills including AETCOM and its certification **g.** Introduction of student Portfolios for assessment and record of learning trajectory **h.** Rigorous Internal Assessment completely aligned with NExT **i.** Augment quantity and quality of Level II questions within eQB and its extensive use in Continuous assessments, so as to prepare learners for Step 1 NExT.		place b. 80% alignment and 20% integration is ensured c. training in all three settings are ensured through ECE, Integration and SVL, clinical & community postings d. Evening clinics planned for students based on learning gaps identified during ward leave exams, Student lead (peer to peer) planned during SVL training and near peer planned learning during foundation course. e. As elaborated in point no 2 f. SOP put in place g. Planning & logistics of student portfolio is completed by IT team. To be launched form 2022 academic year UG medical studentsw. h. : LMS based regular class tests (level II MCQs) planned to prepare students for NExT right from 1st Professional year. i. This task to be undertaken in 2022
11	The Academic Appraisal program (AAP) of the University must be revisited and revised to address the necessary inclusions of undergraduate Competency based Education	Dean JNMC	The revision of AAP aligned to CBME is in process. The same is being remodelled to address various CBME inclusions and serve as a continuous monitoring mechanism to ensure effective CBME implementation.
12	Flexible Curricula may be designed for academic programs of AHS, AS, ODL / Online in terms of Multiple entry/Multiple exit , opportunities for cross disciplinary and interdisciplinary learning, allocation of credits, creation of Academic Bank of credits for allocation, transfer and redemption of credits.	Dean SAHS	Presently allocation of credits are ensured for academic programs of AHS, AS, ODL and Online, however other facets of flexible curricula are yet to be introduced for want of regulations by respective regulatory councils. An DMIMS(DU) ABC model is prepared and validated. A note on 'Credit system for Undergraduate Competency based Medical curriculum in India : towards actualization of NEP 2020' is placed for consideration in agenda item no 5
13	Every Constituent Unit of DMIMS (DU) must evolve 'Best Practices' that	Respective HOI	Every department has identified one unique feature to be showcased during

corroborates with the five NAAC core values. These Best Practices must be unique to every constituent unit so as to showcase a wide and diverse arena of consequential initiatives.		2022 departmental presentations that are aligned to five Core values and seven NAAC criteria. In a similar manner, every Constituent unit of DMIMS(DU) has identified one 'Best practice' and one 'Distinctive feature' during 2022 HOI presentation. IQAC will review and recommend the most appropriate 'Best practice', for every constituent unit ensuring that all core values and all 7 NAAC criteria are addressed.

Agenda item 3 : To recommend the model of Value Added courses for all academic programs of DMIMS (DU)

CONSIDERATIONS

1. Suggestions, ideas and conclusions arising out of presentation on 'Courses' on 8th & 14th December and subsequent departmental presentations on 4th & 5th Dec 2022 .

2. Relevant , Need Based , Feasible and Tangible courses addressing overall development of learners.

3. Practices in vogue. Expertise at hand. Time at disposal.

4. Uniform implementation across all academic programs.

5. Alignment to global competencies – addressing Sustainable Development Goals (SDG)

6. Evolve a DMIMS model of VAC - a gap in recently accredited HSUs

7. Accreditations & Rankings

Organization of **Value Added courses (VAC)** in DMIMS Academic structure

One Mandatory VAC on life skills

- One Mandatory VAC for **Every professional year / program**
- UG & PG
- **Centrally** offered, Implemented , assessed and certified
- **ONSITE/ BLENDED**

One Optional VAC on life skills

- One from a bouquet of VAC for **Every professional year / program**
- UG & PG
- **Centrally** offered, Implemented , assessed and certified
- **ONLINE**

One International course on SDG

- One VAC from a bouquet of Online International courses on Sustainable Development Goals (SDG) : Harvard & Courseera
- **One VAC in entire duration of academic program**
- **Self paced online** courses with certification from respective online platforms
- **ONLINE**

Value Added courses : Undergraduate

Professional Year	VAC – UG	Bouquet
1st Prof	(Interpersonal skills, Soft skills) **GET SET GO**	1. Time management 2. Fundamentals of planning & Management 3. Art of theory paper writing 4. Pedagogical skills 5. Scientific writing
2nd Prof	(Leadership Skills , Team skills) **ADVANCED GET SET GO**	1. Advanced communication skills 2. Conflict Management 3. Emotional and social Intelligence 4. Strategic Leadership & Management 5. Change Management
3rd Prof	(Presentation skills) **PRESENTER IN ME**	1. The art & science of Psychological Counselling 2. Public speaking 3. Speechwriting and storytelling 4. Narrations and reflections 5. Digital film making

Value Added courses

Professional Year	VAC – UG	Other suggestions for fixed VAC
4th Prof	**FINISHING COURSE** (for every program)	1. Digital literacy 2. Website design 3. Coding 4. Medical Algorithms 5. Presentations using Canva 6. Excel skills for data analytics & visualization
Internship	(Employability skills) **RESUME WRITING**	1. Creativity to Entrepreneurship 2. Creating and developing a tech start up 3. Business management 4. Finance management 5. Strategic management

Value Added courses : Postgraduate

Professional Year	VAC - PG	Bouquet
1st Prof	(Analytical Skills) **SYSTEMATIC REVIEWS (for all academic programs except Medical)** **ADVANCED GET SET GO (for Medical)**	1. 2. 3. 4. 5.
2nd Prof	(Professional Skills) **7 HABITS OF HIGHLY EFFECTIVE PEOPLE**	1. 2. 3. 4. 5.
3rd Prof	(Entrepreneurship Skills) **DESIGN THINKING & INNOVATION**	1. Business Management/Strategy 2. Entrepreneurship & Intrapreneurship (E&I) 3. Creating and developing a tech start up 4. Business management 5. Legal tech start up

Optional courses on Sustainable Development goals : Harvard (Free courses)

Sr no	VAC	Sustainable development goals
1	The Health Effects of Climate Change	SDG 13
2	Bioethics: The Law, Medicine, and Ethics of Reproductive Technologies and Genetics	SDG 3
3	Introduction to Digital Humanities	All
4	Strengthening Community Health Worker Programs	SDG 3
5	Improving Global Health: Focusing on Quality and Safety	SDG 3
6	Rhetoric: The Art of Persuasive Writing and Public Speaking	SDG 4
7	Religious Literacy: Traditions and Scriptures	SDG 10
8	Humanities : Hinduism Through Its Scriptures	All

VAC on Sustainable Development goals : Harvard (Free courses)

Sr no	VAC	Sustainable development goals
9	Entrepreneurship in Emerging Economies	SDG 8
10	Entrepreneurship in Emerging Economies	SDG 8
11	Human Anatomy: Musculoskeletal Cases	SDG 4
12	Energy Within Environmental Constraints	SDG 11
13	Prescription Drug Regulation, Cost, and Access	SDG 12
14	Child Protection: Children's Rights in Theory and Practice	SDG 10

VAC on Sustainable Development goals : Courseera

Sr no	VAC	University	SDG
1	The Sustainable Development Goals – A global, transdisciplinary vision for the future	University of Copengham	All
2	Beyond the Sustainable Development Goals (SDGs): Addressing Sustainability and Development	University of Michighan	All
3	Sustainable Tourism – promoting environmental public health	University of Copengham	SDG 13
4	Global Health at the Human-Animal-Ecosystem Interface	University of Cape town	SDG 10, SDG 15
5	Urbanisation and Health - Promoting Sustainable Solutions	University of Copengham	SDG 11
6	Non-Communicable Diseases in Humanitarian Settings	University of Copengham	SDG 3, SDG 17
7	Air Pollution – a Global Threat to our Health	University of Copengham	SDG 11
8	Sustainable Digital Innovation	European Union	SDG 8

Optional courses on Sustainable Development goals : Courseera

Sr no			
9	Confronting Gender Based Violence: Global Lessons for Healthcare Workers	John Hopkins University	SDG 5
10	Introduction to statistics and data analytics in Public Health	Imperial college of London	SDG 4
11	Healthcare Data Literacy	University of California	SDG 3
12	Future Healthcare Payment Models	Northeastern University	SDG 8
13	Value-Based Care: Population Health	University of Houston	SDG 3
14	Organ Donation: From Death to Life	University of Cape town	SDG 3, SDG 17
15	Value-Based Care: Organizational Competencies	University of Houston	SDG 3
16	Intellectual Property in the Healthcare Industry	University of Pennsylvania	SDG 9
17	Value-Based Care: Managing Processes to Improve Outcomes	University of Houston	SDG 3
18	Analytical Solutions to Common Healthcare Problems	University of California	SDG 3
19	High Level Biocontainment for Healthcare Facilities	University of Nebraska	SDG 11
20	Health After Cancer: Cancer Survivorship for Primary Care	University of Stanford	SDG 3

Evolving Best practices in Competency based Medical Education through midterm evaluation by constituent units JNMC & DMMC of DMIMS(DU)

Introduction : Competency based Undergraduate Medical Education was launched in 2019 to ensure a competent Indian Medical Graduate (IMG). [1] As enshrined in the GMER document, CBME comprises of following Inclusions :

1. Foundation Course	2. Early clinical Exposure	3. Alignment & Integration	4. Self Directed Learning
5. Simulation based skill training	6. Skill training in real life settings	7. Attitude , Ethics and communication skills	8. Certification of competencies
9.Assessments 1. Continuous 2. PCTs & UT	10. Electives	11. Sports & Extracurricular activities	

  Since its launch in 2019, the competency based Medical education was embraced by Jawaharlal Nehru Medical College (JNMC). Aligned student centric instructional approaches , instructional material and assessment methods taking were prepared taking into consideration ;

1. Gazette notification for Regulations on Graduate Medical Education (Amendment), 2019 dated 4th November, 2019

https://www.nmc.org.in/ActivitiWebClient/open/getDocument?path=/Documents/Public/Portal/Gazette/GME-06.11.2019.pdf

2. The guidelines as prescribed by NMC for CBME

https://www.nmc.org.in/information-desk/for-colleges/ug-curriculum/

3. Evidence based practices on Competency based education

Mid term Evaluation of CBME :

In 2020, the off campus center of DMIMS(DU), DMMC was launched. The same set of CBME practices were shared with the Off campus centre. In 2021, the CBME curriculum , as in vogue in JNMC & DMMC was subjected to midterm evaluation for further exploration and improvisation. The mid-term evaluation mechanism adopted to analyze the ongoing CBME curriculum and need based improvisations thereupon was as follows:

1. The set of practices with regards to CBME were further analyzed and explored for improvisation.

2. A group of rapid learners were identified for Learner – led reconsideration of the entire curriculum and its related documents. Their feedback and suggestions were sought to improve learning , entirely from student's perspective. This initiative was a part of **'Umbrella mechanism of the University for Meaningful Student Engagement (MSE) in all curricular initiatives and related decision making**.'

3. The academic team (curriculum committee) along with facilitators of 1st and 2nd professional years at JNMC, reflections on the two year experience to further strengthen the curriculum, from teacher's perspective.

4. A gap analysis on implementation of CBME was done by Internal Quality Assurance cell of the University

All four set of observations were **triangulated** to delineate the changes required in current practices.

Observations of Mid term Analysis :

The various observations and suggestions, after triangulation of observations, along with its purpose and feasibility, for various inclusions of CBME are stated as under :

1. FOUNDATION COURSE :

Team : Dr Sunita Vagha and Dr ShubhadaGade

Sr no	Addition/deletion/modification	Purpose	Bearing on Curricular hours
1.	1. Sessions on CBME curriculum generic CBME sessions Inclusions Specific ECE, AETCOM, CIA, SDL ,Alignment & Integration,teaching learning	Learner's suggestions to include : CBME – Expectation, Need , Outcome , Stories	**Can be addressed in 175 Hrs as prescribed by regulatory council.** A. Scheduling sessions in Foundation Course I. Orientation Week (30

strategies,

2. Session on Sympathy / empathy

3. Bioethics session on patients rights

4. Panel discussion on addictions with psychiatrist, sociologist and students

5. Rotory/Jaycee club interactive session (also for outreach activities it will help)

6. Use of IT in medicine including medical graphics

7. CharakShapath

8. A session on LMS
9. Session on Boosting well being on Campus (Dr ShilpaliBhalerao)
10. Session on Yoga
11. Interactive session with NEET high score achiever in studying strategically
12 Career options : Interaction with an Adjuct Faculty from Mayo Clinic USA

B Instructional strategies

- An interview : Hello Doctor (to explain IMG 5 roles)

- Panel discussions (3) : One of them involving students in deaddictions,

of cancer patient , Patient rights in India' book, Neurology & Sociology of Addiction, Interaction with NGOs (can be done during shramdan hrs), Memberships to various student club, Medical graphics (1- 6)

7. As per NMC guidelines dated 4th Feb 2022

8. Orientation of students to optimally use LMS for learning and CIA

9. To address cultural diversity of the newly admitted students

10. For mindfulness, positive psychology and a stress buster

11. To prepare learners for NeXT

hrs)

The orientation week is devoted to

- Orientation towards medical profession, alternate health care systems, delivery of health care in India
- All about CBME & its inclusions
- Rules, regulations & discipline of the institute and university
- Medical Oath about the profession.
- Charak Oath
- Research skills
- Use of IT in Medicine
- Sensitisation towards language skills
- Career options

II Spread of Foundation Course till August 15th 2022 (145 Hours)

A. Professional Ethics : 10 Sundays x 4 hrs each (March, April, May) = 40 hrs (blended mode)

B. Skills Module (holidays) : 4 hrs each day x 9 holidays (1st march,17th March ,2nd April ,14th April , 15th April , 1st May, 9th July ,8th august ,15th august) = 36 hrs
C. Computer skills (1-4pm): 5 Saturdays (4 March + 1 April) X 4

		from 1st professional year onwards	hrs = 20 hrs D. Language skills (1-4pm) : 5 Saturdays (3 April + 2 May) X 4 hrs =20 hrs
		12. Orient learner towards various career options	E. Sports : 3 Sundays x 4 hrs (August) =12 hrs F. Extracurricular activities : 3 Sundays x 4 hrs (June) = 12 hrs G. Field Visit : Saturdays (4hrs) 26th Feb & 30th April = 8 hrs

2. EARLY CLINICAL EXPOSURE (ECE) , AETCOM and INTEGRATION

Team : Dr BR Singh, Dr Ujjwal Gajbe, Dr Alka Rawekar, Dr Archana Dhok

Alignment & Integration

Sr. No	Inclusions	On-going	Reforms Suggested	Objective/Rationale	Operational	Outcome
1	Ratio of Alignment and Integration	First Prof year 80:20 2nd Prof year 80:20 3rd Prof year 80:20	First Prof year 80:20 2nd Prof year 60:40 3rd Prof year 20:80	First Prof year: Basic Sciences (Fundamental Sciences): Optimum time has to be given for retention of knowledge-- Level 1/Level 2 2nd Prof year Diagnostic Sciences(Transition Sciences):: Knowledge has to be dispensed as what is normal, what is not normal and what is the cure Level 3 3rd Prof year Therapeutic Sciences(Applied Sciences) Knowledge dispensation is what is retained and correlation has to be formed (Level 3, Level 4) (what they have learnt and apply into understanding disease process, diagnosis and care- - MCI Document)	Done in DMMC , Draft ready	IMG/FMG will deal the problem in a wholesome way(Holistic approach)
2	Alignment Quantum	No. of competencies aligned in Biochemistry module provided as sample: 09	Increase in Alignment Current alignment: 32(including 09)	Simultaneous dispensation of knowledge by minimising the gap	Done for all subjects, draft ready	IMG/FMG can hold the knowledge of different subjects simultaneously
3	Alignment and Integration framed in TT	Traditional TT is followed	TT for 1--3 themes is framed for Preclinical, Para clinical and clinical (Part 1)	Simultaneous dispensation of knowledge by minimising the gap (MCI Document)	TT has to be prepared accordingly	Closely associated classes will help IMG/FMG to hold the knowledge of different subjects simultaneously

4	Theme based learning	Traditional topic based, in a fragmented way	Wherever possible convert it into themes	Taking into consideration human body as one entity, various systems operating in a aligned and integrated way , the topics also need to be aligned and integrated (MCI Document)	Integration part, draft is ready has been converted into viz. disease, system Alignment part is left	Knowledge dispensation will aid IMG /FMG to consider whole human body as a single entity
5	ECE and AETCOM	It is taken with no conscious merging of AETCOM in the module	AETCOM can be reinforced in ECE	In a changed scenario, particularly with regard to changed human behaviour, some moderation steps need to be taken for effectiveness in getting effective results (MCI Document)	DMMC has prepared one sample module, mode of conduction need to be discussed	Better IMG/FMG dealing in present circumstances
6	AETCOM Alignment and Integration	1st Prof Year: MET has taken, offline 2nd Prof Year: Video based, online	1st Prof Year: Except Cadaver module, all other modules align & share with PSM 2nd Prof Year: Except 1 module all other modules align and share with FMT 3rd Prof Year: All modules align and share with Psychiatry 4th Prof Year: All modules align with Medicine	AETCOM will be taken in an aligned and integrated way	Mode of conduction, modality has to be discussed	Reinforcement of AETCOM aligned and integrated with medical subjects will result in better IMG/FMG dealing in present circumstances
7	Integration (Correlation)	Random cases are framed and utilised	Often same case has to be used in all phases	As per MCI document	All cases (correlations in all subjects are framed)	This will allow students to correlate what they have learnt and apply into understanding disease

					process, diagnosis and care (MCI Document)

3. LOG BOOKS

Team : Dr Sandeep Srivastava and Dr BR Singh

	Current inclusions	**Improvisations**	**Purpose/Reason**	**Feasibility**
1	Index	Inclusion of Co-curricular activities	To give credence to Co-curricular activities for overall development of learner	Yes
2	ECE	Needs to be matched with desired outcome as per Index-Reflections.	As a monitoring mechanism of attainment of ECE objectives	Yes: Discussed agreed to modify
3	SKILLS listed in curriculum but NOT included	List to be included as ANNEXURE WITH Y/N Converts into checklist.	To ensure training in identified skills	Yes – can be updated in Curriculums
4	Certifiable competencies- Not following principles - eg – Discuss / Dd Thyroid.	Procedural skills -2021: Ist Phase: Inclusions as per NMC published : -2023: Can be improvised Once previous initiatives are settled.	-	Yes – directly through NMC published Documents under consultation with HODs. : Will Take 7days to be completed , verified and re-vetted.
5.	Two tables of competency certification	The certificates should be one table only from learners		Yes- Discussed Agreed to modify.

		point of view		
5	Self-directed Learning activities	Needs to be segregated into subheads + Match with Index	For ease of monitoring and certification	Yes – Included – Matchibility to be done
6	Virtual lab	To be renamed as Simulation Skills	For ease of monitoring , record keeping and certifications	Yes - Changed
		List Needs to added in log book ,should be subject specific as given in NMC list		Yes- to be added
		Details can be maintained in SVL log book		Ok
7	AETCOM	ok	-	Yes
8	Presentation Skills	Inclusions should be matchable - offline /online modalities variation to be demarcated	For ease of allocation of scores	Yes
		Subject wise		Yes – To be included by HODs
9	Research Mile stones- Centrally- Phase wise	Ok	-	Ok
10	Co-curricular is missing	To be added	As explained in point no 1	Yes - To be added
11	Time tables	Should be added	Ready reference for the students	Yes- to be added

4. CONTINUOUS INTERNAL ASSESSMENT (CIA)

Team : Dr Sunita Vagha, Dr Sonali Choudhary , Dr Tripti Waghmare

1	**Need of CIA**	CBME implementation requires CIA for following need/purpose: ▪ To determine how much & how well the students have learnt. (fulfillment of learning objectives, diagnosis of learning difficulties, needs). ▪ To enable certification of certifiable competencies. ▪ To provide feedback to students to improve their performance throughout the course. ▪ To empower learners and at the same time, asks for greater accountability, flexibility, and learner contentedness. ▪ To help both student and teacher in knowing the progress of learner. ▪ To overcome the limitations of day-to-day variability and allow larger sampling to topics, competencies, and skills.
2	**CIA inclusions**	The components of CIA must be comprehensive that include all learning domains (Cognition, Skills, Attitude, Communication). To facilitate students' learning and keep them on track regarding achievement of competencies and academic progress. The logbooks, journals (clerkship records) serves as a record of students learning progression As per GMER – a. Up To 20% IA marks (Theory and Practical) should be from Logbook assessment. b. Assessment of Foundation Course should be included in formative assessment of first phase. C. Assessment of ECE should be included in formative as well as in internal assessment in first phase subject wise. d. Assessment of electives should contribute to internal assessment in final phase part-II.

3.	**Maintaining the ratio of Theory - FA: CIA ratio (4:1) Practical - FA: CIA ratio (3:2)**	To ensure uniform CIA marks to all subjects with varied weightages in theory and practical examinations
4.	**Any bearing on the overall instructional hours prescribed by regulatory body.**	No burden/bearing on curricular hrs

IQAC Recommendation:

All the above mentioned changes may be adopted in CBME except :

a. the suggested change in ratio of alignment and integration from 1st prof to final prof (from 80:20 in first prof to 20:80 in final prof) may be reconsidered since the time available in final prof will make it difficult to organise 80% of instruction in an integrated manner (with basic sciences). Moreover , the Alignment & Integration module by NMC states that not more than 20% curriculum should be integrated [2]
https://www.nmc.org.in/wp-content/uploads/2020/08/Alignment-and-Integration_03.10.2019.pdf, hence any deviation from regulatory guidelines is to be planed with caution.

Integration

Integration is a learning experience that allows the learner to perceive relationships from blocks of knowledge and develop a unified view of its basis and its application. The GMER 2019 applies these principles to the extent that will retain the strengths of subject based education and assessment while providing experiences that will allow learners to integrate concepts.

Keeping this in mind, the Regulations recommend the adoption of temporal coordination (called **alignment** in this document) as the major method to be followed allowing similar topics in different subjects to be learnt separately but during the same time frame (Fig 1a).

Example: Pancreatic Beta cell anatomy and histology, Pancreatic Beta cell physiology and Insulin structure and synthesis in biochemistry are usually taught at different times of the year. An effort is made to group these related topics in different subjects during the same time frame in the calendar (figure 3a and 3b).

In a small proportion - not to exceed 20% of the total curriculum an attempt can be made to **share** (figure 1b) topics or **correlate** (figure 1c) topics by using an integration or linker session. The integration session most preferred will be a case-based discussion in an appropriate format ensuring that elements in the same phase (horizontal) and from other phases are addressed.

References :

1. https://www.mciindia.org/CMS/e-gazette (last accessed on 25th April 2020)
2. http://dx.doi.org/10.7860/JCDR/2020/44886.13973

Dr Tripti Waghmare
Director, IQAC
6th Feb 2022

Agenda item 5 : To present the 'Credit system for Undergraduate Competency based Medical curriculum in India : towards actualization of NEP 2020'

Credits system for Undergraduate Indian MedicalCurriculum:

Actualizing NEP 2020

(6th December 2021)

Credits system for Undergraduate Indian Medical Curriculum: Actualizing NEP 2020

Dr Alka Rawekar

Professor & Head

Physiology

JNMC

Sawangi

Philosophy:

University Grants Commission, in its concept paper dated 11th Dec 2019, with a vision for International academic interests and offer student autonomy; proposed creation of National Academic Credit (NAC) Bank as a service provider to facilitate integration of campuses and learning systems through appropriate credit transfers, to begin with, for Post graduate programs of the country. Subsequently; the National Education Policy 2020 by GOI embraced the concept as Academic Bank of Credit (ABC) which digitally stores the academic credits earned from various recognised Higher Education Institutions (HEI) so that the degrees can be awarded by a HEI taking into account credits earned for Undergraduate program with multiple exit options during its four years duration. It categorically proposes all programmes, courses, curricula, pedagogy across subjects, including those in-class, online and ODL modes to achieve global standards of quality and credit transfer facility to provide greater student mobility.

In spite of India developing a lot of Medical educational institutions, we are not on a global list of students aspiring to come to study in India and transfer of academic credits could also be one of the gaps that is perceived.

If there is a mechanism or a proper procedure that is designed to recognize previous academic performance, this would ensure that a full range of student mobility is created. Credit transfer systems provide the lubricant to ensure seamless academic mobility.

In India, the competency based medical curriculum CBME came into existence in 2019, wherein all competencies for IMG (Indian Medical Graduate) have been identified for complete duration of five and half years including internship.

By proposing the model of one course/subject, Physiology, the transformation of medical curriculum to offer Credit System and subsequently creation of ABC (Academic credit bank) for transfer of credits, as envisaged by NEP 2020, to Undergraduate medical curriculum, can be accomplished.

Some of the most relevant International academic credit systems are:

1. *The European Credit transfer and accumulation system (ECTS)*: ECTS credits are standard means of comparing the volume of learning **based on defined learning outcomes and their associated workload** for higher education across European Union and other collaborating countries. It allows credit transfer for one Education Institution to another. ECTS enhances the flexibility of study programmes for students. It also supports the planning, delivery and evaluation of higher education programmes.

   ECTS has been adopted by most of the countries in the European Higher Education Area as the national credit system and is increasingly used elsewhere.

2. *Academic Credit system in Australia* : Though the credit system is varied, the credit transfer facility is available at UG and PG programs and is established and coordinatedby Australian Qualification Framework.

3. *Academic credit system in US* : In US students receive semester credit hours which are based on number of contact hours accumulated during one semester. Credit hours are made up of contact hours which makes it different from European and UK credit systems as they are **based on student workload.**

4. *Korean Academic credit bank system (ACBS):* Most well regarded and widely appreciated credit transfer system in the world. ACBS is an open educational system which recognizes diverse learning experience gained within and outside schools. Thus, the ACBS grants **recognition to diverse learning experiences** including prior course credits and various forms of learning. It is also unique in the sense that on job trainingis allocated with credits, thus befitting adults as well.

Assessment and credits:

Credits are awarded when appropriate assessment shows that the defined learning outcomes have been achieved at the relevant level. If the student has not achieved the learning outcomes, no credits will be awarded. The number of credits awarded to the student who demonstrates the achievement of learning outcomes is the same as the number of credits allocated to the component. (ECTS users' guide 2015).

Specific credit based assessment and award system has been giving 70% weightage to the skill component and 30% weightage to theoretical component. The credit banking ie. Credit accumulation and credit transfer system allows a unit of assessment ie. a set of skill based learning outcome, which can be of any size demonstrating learning outcomes. No credits are 'earned' by a learner if the learning outcomes are not achieved. (SAMVAY, HRD Feb 2018)

Scope:

- Estimation of workload of a program
- Transfer to another university programme while keeping part or all previously earnedcredit points
- Use the credit earned by the students to study abroad if recognised internationally
- Academic credits bank act as proof of previous studies
- keep track of student progress and determine when he/she has met study requirements

Calculations of Credits:

1. For ECTS: Workload is an estimation of the time the individual typically needs to complete all learning activities such as lectures, seminars, projects, practicalwork, work placements' and individual study required to achieve the defined learning outcomes in formal learning environments. The correspondence of full-time workload of an academic year to 60 credits is often formalized by national legal provisions. In most cases, workload ranges from 1500 to 1800 hours for an academic year, which means that one credit corresponds to 25 to 30 hours of work. It should be recognized that this represents the typical workload and that for individual students the actual time to achieve the learningoutcome will vary.

2. For US: The course–credit system in the United States is the standard means of measuring academic work. Typically, an academic degree is the sum of requiredand other courses measured by the course credit system. Generally, each courseconsists of 3 credits (the meaning of each credit is one hour of in-class or laboratory work over a 16 week semester). The system is a means of measuringthe time spent on study and not the quality of the work. Since the

19th century, the course–credit system has been the major "currency" in American higher education.© 2001 International Association of Universities.

3. UGC India: In India, in higher education, the academic year has 180 working days (30 weeks) OR 90 days (15 weeks) per semester.
    1. One Credit course: 15 hours of classroom teaching/week (Didactic-Lecture/Tutorial) for a semester
    2. One Credit Course: 30 hours of Skill based teaching/Non-didactic per week (Practical, Clinical, Lab work, Field Work) for a semester.

    In order to establish equivalence and mobility between school and university higher education programs, 25 - 30 credits can translate approximately 600 Hrs of teaching per semester. (This is based on:- 15 weeks per semester: 5 and half days per week and 7 hrs of working for 5 days = 35 hrs + 5 hrs on Saturday = 40 hrs per week resulting in 600 hours (40x15=600) per semester.

4. Indian Nursing Council recently introduced competency-based nursing education where the calculation of credit is:

    Number of Weeks per Semester for instruction: 20 weeks (40 hours per week $\times$ 20 weeks = 800 hours)

    Number of Working Days: Minimum of 100 working days (5 days per week $\times$ 20 weeks)

Connecting to Indian Medical Education:

The CBCS have been implemented in all the higher education Institutes and Universities in India in 2015. According to UGC (2014), the lack of flexibility in Higher Education in India can be contained by adoption of an internationally acknowledged system, the Choice Based Credit System (CBCS). The choice based credit system not only offers opportunities and avenues to learn core subjects but also exploring additional avenues of learning beyond the core subjects for holistic development of an individual. The CBCS will undoubtedly facilitate us bench mark our courses with best international academic practices (UGC, 2014).
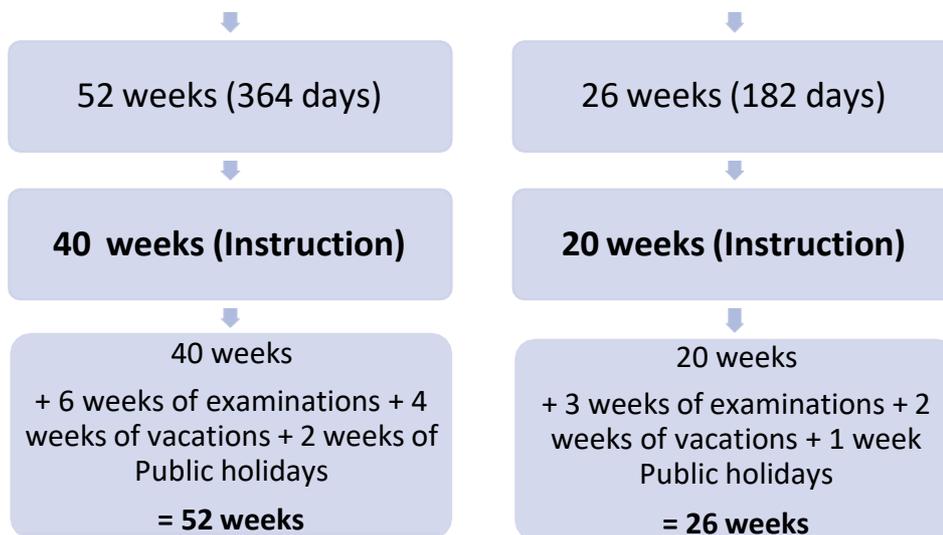
Though, CBCS has been implemented in Higher Education across India, professional programs which are governed by Apical councils of respective specialty, remained aloof. Medical Education in India is regulated by NMC National Medical Council, India, does not propose any credit framework for MBBS program though it has adopted the Competency

based Medical Education CBME since 2019. CBME was proposed by then MCI (Medical Council of India) which offered a framework of core subjects, foundation course of one month and 2 months for electives with paramount shift to clinical skills and professionalism. It still adopted the Flexnerian model of medical education, where curriculum is worked out as preclinical, paraclinical and clinical courses with more than half of the duration is allocated to clinical competencies. Translating the whole curriculum to Credit based framework, all the advantages of CBCS can be availed.

Yearly calculations of weeks or days	**Semester wise calculations weeks or days**

Translating Credits to Indian Medical Curriculum:

52 weeks (364 days)	26 weeks (182 days)
40 weeks (Instruction)	**20 weeks (Instruction)**
40 weeks + 6 weeks of examinations + 4 weeks of vacations + 2 weeks of Public holidays **= 52 weeks**	20 weeks + 3 weeks of examinations + 2 weeks of vacations + 1 week Public holidays **= 26 weeks**

1 year = 2 semesters

1 semester = Total 26 weeks (20 weeks for instructions)

1 year = Total 52 weeks (40 weeks for instructions)

Number of Working Days per year: Minimum of 220 working days

(5 ½ days per week × 40 weeks=220)

Number of instructional hours per year: 1600 hrs (40 hrs/week x40 weeks)

Example of Physiology:

- Total Themes: 11

- Number of Outcomes: 137

- Certifiable competencies: 14

Total Number of Hours: 535

- a. Didactic (Lecture): 160

- b. Nondidactic: 375

> Small group+ Tutorial + Integrated + Practicals: 310
>
> ECE: 30
>
> SDL: 25
>
> AETCOM: 10

Calculations of credits for Physiology:

Total hours for Physiology:

Professional Year	Total Number of hours	Total numberof outcomes	**Total Number of competencies for Physiology**	**Certifiable competencies for Physiology**
1st	1736 as per NMC (1600+136 as extracurricular hrs)	409+**137**+89 = 635	**137**	**14**

> Didactic: 1 hour of instruction per week per semester = 1 credit
>
> Non-didactic: 2 hour of instruction per week per semester = 1 credit
>
> (6 hrs. of didactic and 4 hrs. of nondidactic per week)

Number of credits per semester: 6 for theory (didactic) + 2 for practicals (Nondidactic) = 8

Hence, Total number of credits for Physiology = 16 (which is comparable to ECTS)

Conclusion:

The Indian medical education system though very vibrant, poised for growth and expansion, still has very large scope for improvement. When we compare the Indian medical Education system with global education, we observe dearth wherein Indian institutions are not figured amongst the top rated in the world. Also, overseas students are not opting for it.

Through a movement to create the system of "credit banking and credit transfer for medical education" (which may be comparable to ECTS) endorsed by national policy, there will definitely be a possibility of being one; amongst the globally recognized portals of medical education.

References :

1. Altbach, P. Measuring academic progress: the course–credit system in American higher education. High Educ Policy, , 2001; 14 : 37–44

2. Usher A, The Korean Academic Credit Bank: A model for credit transfer in North America? higher Education Strategy Associates Intelligence brief 8, August 2014

3. Higher education quality framework for England: guidance on academic credit arrangements in higher education in England The Quality Assurance Agency for Higher Education, August 2008

4. Evaluation reforms in Higher Educational Institutions, University Grants Commission, November 2019

5. Keerthan Raj, Dr PS Aithal, National Academic Credit Bank – A Global Perspective , Research in Higher Education , Learning and Administration, IQAC 2019, ISBN no .978-81-941751-0-0, pg 150-155

6. UGC Concept paper on National Academic Credit Bank dated 11th December 2019

7. The National Education Policy 2020 , Ministry of Human Resource Development , Government of India

8. Higher Education Policy for American Credit System) Vol. 14, (2001) 37–44

9. Indian Nursing Council; Competency based Nursing Education (2020)

Agenda item 6 : To note the Status of National Rankings and Accreditation

a. ARIIA ranking 2021 : 'Excellent' band – highest band in 2021.

b. NIRF 2022 Rankings : The NIRF data of 2020-2021 for Overall, Medical and Dental category is submitted for approval. Last date of submission has been extended from 31st Jan 2022 to 11th Feb 2022.

Comparative chart of 2019, 2020, 2021

c. AQAR 2021 : The data of AQAR 2021, as per revised NAAC guidelines (notified on 16th Nov 2021 and effective from 1st December 2021) is submitted for approval. The last date of submission to portal has been extended from 1st February 2022 to 31st March 2022.

The revised AQAR format majorly features :

1. Institutional preparedness for NEP:(Description in maximum 500 words) Multidisciplinary / interdisciplinary programs , Academic bank of credits (ABC), Skill development (Soft skills, Vocational courses, value education), Appropriate integration of Indian Knowledge system, Outcome based education, Distance education/online education

2. Integrating essential components of Health Sciences - new key indicators and VED metrics related to Health Sciences

A task force was constituted for preparing AQAR 2021 with criteria-wise mentors and team members. The team and present status of AQAR 2021 is as depicted in the table below;

SN	Criteria	Core-Criteria	Mentor	Team	% of work submitted by team
1	**Criteria - I** Curricular Aspects	Curricular Aspects	Director SHPER-Dr.Adarshlata Singh Dean Academics-Dr. Sunita Vagha	Mr. Anand Gujar Miss. Namrata Mrs. Anita Jagtap	**80%**
2	**Criteria – II** Teaching-learning & Evaluation	Teaching-learning	Co Convener NC-Dr. Alka Rawekar	Mrs. Neha Deshmukh Mrs. Manisha Deshmukh	**80%**
		Evaluation	Director EAE-Dr.MinalChoudhari		
3	**Criteria - III** Research, Innovations & Extension	Research	Director R & D-Dr.ZahirQuazi	Mr. Rahul Firke Mr. Rahul Kawale Miss. Seema Bhagat	**85%**
		Innovations	Vice Dean-Dr. Punit Fulzele		
		Extension	Prof PSM-Dr. Abhishek Joshi		
4	**Criteria - IV** Infrastructure & Learning Resources	Infrastructure & Learning Resources	Director (Strategic Planning)-Mr. Samuel Ernest Assistant Registrar-Mr. Manish Deshmukh	Mr. Ratnakar Parimal Mr. Sandesh Nimbalkar Mr. Naresh Naik	**70%**
5	**Criteria - V** Student Support & Progression	Student Support & Progression	Vice Dean Dr. Samarth Shukla Prof Biochemistry Dr. Ashish Anjankar	Mr. Ramakant Gode Mr. Nikhil Date	**90%**
6	**Criteria - VI** Governance, Leadership &Management	Governance, Leadership &Management	Director (Strategic Planning) Mr. Samuel Ernest Joint RegistrarMr. S. Shinde	Miss. Himanshi	**80%**
7	**Criteria - VII** Institutional Values & Best Practices	Institutional Values & Best Practices	Director IQAC Dr. Tripti Waghmare	-	**70%**
8	Institutional Distinctiveness		Dean Interdisciplinary Dr Gaurav Mishra	-	**80%**

Two proposed Best Practices for 2020-21

1. Umbrella Mechanism for meaningful student engagement in curricular initiatives and related decision making
2. Operational framework to ensure Validity and Authenticity of theory examination in an outcome based Curriculum
3. Competency based Dental Education
4. Systematic review and Meta-analysis for PG & PhD

Proposed Institutional distinctiveness :
1. Quality sustenance in adversity (COVID – 19 initiatives in entire spectrum of activities of the University)
2. Off Campus Medical College

Agenda item 7: To note status of International Rankings

a. QS I Gauge ratings

b. QS Subject ratings

c. TIMES Impact ranking

a. QS I gauge : QS I gauge data was submitted on 22nd October 2021. Additional evidences asked after data verification are as follows :

Criteria	Indicator Description	Evidence Required
Employability (EP):	EP1: Career counselling services	• Please share the proof of facilitating online career portal with access to jobs for the student which highlights the job notifications with screenshot.
Diversity and Accessibility (DA)	DA5: Student Scholarships/Fee waiver	• For the APJ Abdul Kalam Scholarship and Dr.Sarvapalli Radhakrishnan Freeship Reward Scheme: Please share a 434 list of students who availed the scholarship. Please highlight in the balance sheet or provide a declaration is for the specific amount.
		• **For the Lila Poonawalla foundation:** Please provide a declaration stating the total amount which is spent for the Scholarship for girls from economically disadvantaged families. It should be in the letter head with the seal and signature.
		• **ICMR-Financial Support for Research:** Please provide the evidence in the letter head with the seal and signature.
		• **Hostel Concession- Scholarship for students with financial Constraints:** Pease share a 24-student list who availed the scholarship. Please provide a declaration stating the total amount and highlight in the balance sheet. It should be in the letter head with the seal and signature.
		• **Book Bank- Scholarship for students with financial Constraints a meritorious student**: Please share a 399-student list who availed the scholarship. Please provide a declaration stating the total amount and highlight in the balance sheet. It should be in the letter head with the seal and signature.
	DA6: Differently abled	• **Number of differently abled students on campus:** Please share the proof of the 1 differently abled student on the campus. Proof can be student ID Card/ Admission details.

	DA8: Financial equality	**• Number of students availing financial aid/fee waiver from the institution (Income-based criteria):** Please share the list of 812 students who availed the financial aid.
Facilities (FC)	FC10: Facilities for Differently abled	• Please provide the evidence for Visual-aid centre and User-friendly lift for differently abled If the lifts have the push buttons with engravings in Braille please share photographic evidence
Social Responsibility (SR)	SR1: Mechanisms/Systems for Social Involvement:	• Evidence provided by the institution for the NSS activities required more additional evidence. For NSS you have mentioned 2227 students details but lot of activities is conducted. Please add for all the 64 activities with date and year. Specify the total number students which attend those activities.
	SR3: Recognition for social development	• Recognition for social development is the awards and accolades received, from non-affiliating organisations, by the institution for its direct contribution towards social development. Not by the individual faculty. Please share the evidence for the same and we require 15 such awards.
	SR4: Environmental Impact:	• Please provide a policy for the all the environmental Impact which are actively on place. • Please share evidence for sustainability with the Green certification. • Please provide evidence for the transportation like in the campus eco-transportation mechanism, electric cars inside campus are using. Please share the photographic if any. • Please share the mechanism for the recycling of waste like recycling initiatives for solid waste/biowaste/paper waste/e-waste or Sewage treatment plant.
	SR5: Funding for Social outreach	• Please share the details in the financial statements which you have invested on the community outreach activities and require supporting evidence for the same.

Governance and Structure (GS)	GS2: Board of Studies	• Please share the board members details. • Faculty appraisal/promotion: The evidence provided for the faculty appraisal details was in 2013. Please share the evidence for same with proper guidelines in the letterhead. • Teaching enhancement and Curriculum development: Please share the policy on how institution is engaging in teaching and enhancement and curriculum development.
	GS4: Annual report of Institution:	• Please share the recent annual report of 2020-2021. Institution had shared the details of 2019 annual report.
	GS6: Alumni and senior students' representation:	• Please share evidence of activities conducted with the alumni and 1 post-graduation students with the reports and other details. Kindly share the activity name and how many have been participated detailed report of that activities where you involved them.
Academic Development (AD)	AD1: Learning and Development Centre	• Continuous Learning/Training Programmes for faculty (minimum 2 weeks programme) in last 12 months: Evidence provide the institution does not specify the how many days institution conducted the training program for faculty. Mainly we are looking at training program should be conducted continuous for 2 weeks. Please provide a report for the same
		• Implementation of teaching, learning and feedback questionnaire (TLFQ): Please share the recent report for the teaching and learning details. Please share a raw data analysis of the any one of the google form data.
		• Faculty Development Workshops based on TLFQ (minimum 4 weeks programme) in the last 12 months: Evidence provide the institution does not specify the how many days institution conducted the FDP workshop program for faculty. Mainly we are looking at training program should be conducted continuous for 4 weeks. Please provide a report for the same.
	AD2: Building Academic networks	• Member of recognised regional level university/college networks: Please share evidence of building academic network with the regional level university / College.

		• Programme Strength: Please share a declaration report signed by the admission officer stating the sanctioned intake of dattameghe and the number of applications received in the last enrolment cycle.
	AD5: Best academic practices	• Workshops relating to plagiarism (at least 2 workshops) in last 12 months: Please share the workshop report details like how many students attended that workshop and other details with the photographic evidence.
		• Revision of course manuals/structure and materials (at least 20% revision) in 12 months: Please share the UG - recent years curriculum changes for the structure. That should be the letterhead with seal and signature.PG details should be highlighted and that should be in the letter head with the higher authority signature.
		· Access to e-resources, e-books, e-journals, and periodicals (at least 1 international repository of e-resources: Please share the renewal subscription details for the EBSCO
		• Strategies/Policy/Tools to increase academic engagement: Please share the details in letterhead with signature and need supporting evidence that how institution is engaging foe increase in academic engagements.
Research (RE):	RE3: Specialised Research Centres	• Number of Research Centres undertaking research on-campus, minimum 2: Please share the details of the research centre undertaking the research on campus. You can share the links of website.
		Number of international conferences organised, and research reports published by the Research centres in the last 12 months, 2 research reports/conferences per research centre scaled down to 0: Kindly share the additional supporting evidence of the publication which should published under the that research centre. Please provide the evidence of the publication poster/ reports published through that website reports/Links are be provided.

b. . **QS subject ratings** : The data submission for QS subject ratings was done on 5th Feb 2022 that entails following heads ;

1. Faculty List
2. Students Enrollment
3. Completion Rate
4. Library Facilities
5. Research Funding
6. Tech Integrated Approach
7. Incubation Center
8. Financial Support for conferences
9. Clinical Fellowships
10. Medical Ethics
11. Biomedical Waste Management
12. Cadaver Donation

c. Times Higher Education Impact Rankings : Data was submitted on 12th November 2021. The data verification is in process.

Agenda item 8: To note the letter of in-principal approval regarding change of name of Datta Meghe Institute of Medical Sciences (Deemed to be University) to 'Datta Meghe Institute of Higher Education & Research by Department of Higher education, MOE, GOI dated 4th Feb 2022

F. No. 9-48/2004-U.3
Government of India
Ministry of Education
Department of Higher Education
ICR Division

Shastri Bhawan, New Delhi
Dated: 4th February, 2022

To,

The Registrar,
Datta Meghe Institute of Medical Sciences
(Deemed to be University),
Wardha, Maharashtra -442004

Subject: Change of name of 'Datta Meghe Institute of Medical Sciences (Deemed to be University)', Wardha, Maharashtra to Datta Meghe Institute of Higher Education & Research (Deemed to be University)- reg.

Sir,

I am directed to refer to your letter No. DMIMS(DU) dated 28.05.2021 on the subject cited above and to say that the matter has been examined in this Ministry in consulation with University Grants Commission.

2. Considering the advice of UGC, the Ministry hereby conveys its **in-principle approval** for change of name of 'Datta Meghe Institute of Medical Sciences' to 'Datta Meghe Institute of Higher Education & Research' for fulfillment of the following conditions:

   i.   A separate not-for-profit Society/Trust/Company shall be registered in the new name.

   ii.   All the assets (movable & Immovable) of the Deemed to be University shall be legally transferred in the new name.

   iii.   Corpus Fund of the Deemed to be University has to be transferred in new name.

   iv.   The MoA/Rules of the Deemed to be University has to be in the new name.

3. It is clarified that **final approval** for change of name of Institution shall be conveyed only after fulfillment of the above conditions.

4. This issues with the approval of the Competent Authority.

Yours faithfully,
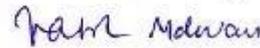
(Vijayalakshmi Mahadevan)
Under Secretary to the Government of India
Tele: 23383934

Copy to: The Secretary, UGC, Bahadurshah Zafar Marg, New Delhi.

IQAC recommendation:

1. To change the University name in the logo

2. To revisit Vision, Mission and Goal statements in view of revised nomenclature of the University.

3. To conceptualize a tagline/slogan/catchphrase for the University

Agenda item 9: **Any other matter with permission of chair**

Dr Tripti Waghmare

Director, IQAC, DMIHER (DU)