

(A unit of Sri Devaraj Urs Educational Trust) Post Box No. 7, Tamaka, Kolar-563 103, Karnataka.

(Affiliated to RGUHS, Bangalore and Recognized by KNC, Bangalore & INC, New Delhi, NAAC 'B' Accredited) ISO 9001:2015 Certified

Ref. No. SDUCON/11/2022-23

Date: 10-10-2022

#### CIRCULAR

The IQAC meeting will be held on 14-10-2022 at 11:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing. All the members are requested to attend the same without fail.

#### Agenda:

- 1. Minutes of the previous meeting (28/06/22 at 11:30am) and Action taken report.
- 2. Progress report on Quality indicator frame work -Criteria Conveners.

Criteria I: Curricular aspects (4 Key Indicators).

Criteria II: Teaching Learning and Evaluation (7 Key Indicators).

Criteria III: Research Innovation and Extension (5 Key Indicators).

Criteria IV: Infrastructure and Learning Resources (5 Key Indicators).

Criteria V: Student Support and Progression (4 Key Indicators).

Criteria VI: Governance, Leadership and Management (5 Key Indicators).

Criteria VII: Institutional Values and Best Practices (3 Key Indicators).

Part B: Discipline - Specific - Nursing

Any other matters addressed by the chairperson and committee members.

NAAC LOAC Co-Ordinator

Principal

Sri Devaraj Urs College of Nursing Copy To: Ors College of Nursing hti-J. Rajendra, Vice President, SDUET. (Management Repliesentative). 103

2. Shri H. Hanumantha Rao, Advisor, SDUET (Senior Administrative Officer)

- 3. Dr. K.N.V Prasad, Director, Quality & Compliance, SDUAHER (Special Invite).
- 4. Dr. Sheela S.R, Medical Superintendent, RLJH & RC. (Senior Administrative
- 5. Mr. Ganesh, District Reporter, Udayavani, Kolar. (Local Society Representative).
- 6. Mrs. Bharathi K.V, Chenne Gowda CON, Kolar (Alumni Representative).
- 7. Dr. Lavanya Subhashini. Convener.
- 8. Mrs. Jairakini Aruna, Convener.
- 9. Prof. Mary Minerva, Convener.
- 10. Mrs. Punitha M, Convener.
- 11. Mr. R. Rajesh, Convener
- 12. Mrs. Umadevi T, Convener
- 13. Mrs. Shamala, Asst. Librarian, Representative from Library.
- 14. Mr. Narayana swamy, Sr. FDA, Principal Office Representative.
- 15. Mrs. Pramelamma, I M.Sc.(N), (Student Representative).
- 16. Ms. Nirmala, IV B.Sc.(N) (Student Representative).
- 17. Ms. Mala., I Year P.B.B.Sc.(N) (Student Representative).
- 18. Prof. (Dr). Zeanath Cariena .J. NAAC Co-Ordinator.
- 19. Mrs. Gayathri K.V, Deputy Co-Ordinator.
- 20. Office copy.

AIMS

- · Optimization and Integration of modern methods of Teaching and Learning.
- · It ensures efficient and progressive performance of Academic, Administrative tasks.

**IOAC ASSESORS** 

CHAIRPERSON

Dr. G. Vijayalakshmi

NAAC Co-Ordinator

Dr. Zeanath C.J

NAAC Deputy Co-Ordinator

Mrs. Gayathri K.V

Criteria Convenors

Dr. Lavanya

Subhashini Mrs. Gayathri K.V

Mrs. Jairakini Aruna

**Prof. Mary Minerva** 

Mrs. Punitha M

Dr. G. Vijayalakshmi

Mr. Rajesh R

G. Raferder



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#### Proceedings of the IQAC Meeting held on - 14-10-22 at 11:30 AM

The SDUCON-IQAC Committee meeting was held on 14/10/22 at 11:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing, under the chairmanship of IQAC, Dr. G. Vijayalakshmi. The Chairperson welcomed all the members and invited Dr. Zeanath C.J, IQAC Co-coordinator to continue the meeting as per the planned agenda & to read out Action Taken Report of the previous IQAC Meeting held on 28/06/22 at 11:30 am.

#### Agenda:

- 1. Minutes of the previous meeting (28/06/22 at 11:30am) and Action taken report.
- 2. Progress report on Quality indicator frame work -Criteria Conveners.

Criteria I: Curricular aspects (4 Key Indicators).

Criteria II: Teaching Learning and Evaluation (7 Key Indicators).

Criteria III: Research Innovation and Extension (5 Key Indicators).

Criteria IV: Infrastructure and Learning Resources (5 Key Indicators).

Criteria V: Student Support and Progression (4 Key Indicators).

Criteria VI: Governance, Leadership and Management (5 Key Indicators).

Criteria VII: Institutional Values and Best Practices (3 Key Indicators).

Part B: Discipline Specific - Nursing

3. Any other matters addressed by the chairperson and committee members.

#### Members Present: (Enclosed copy)

#### Members couldn't attend (leave of absence)

| Sl. No | Name               | Designation   |  |
|--------|--------------------|---|--|
| 1      | Dr. Sheela S.R     | Medical Superintendent, R.L.J.H & RC, Senior Staff    |  |
| 2      | Prof. Bharathi K.V | Principal, Chenne Gowda CON                           |  |
| 3      | Mrs. Punitha       | Convener of Criteria V                                |  |
| 4      | Mr. Rajesh R       | Convener of Criteria VII                              |  |
| 5      | Mr. Ganesh         | District Reporter, Udayavani, Society Representative. |  |

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| Agenda:   | Action taken report   | Status  |
|---|---|---|
| 1. Minutes of the previous meeting which was conducted on 28-6-2022 with Action taken report.         | Minutes were confirmed and circulated   | Completed   |
| 2. Progress report on Quality indicator   | rame work -Criteria Conveners.  |   |
| Criteria I: Curricular aspects (4 Key Indicators). Criteria II: Teaching Learning and                 |   |   |
| Evaluation (7 Key Indicators). Criteria III: Research Innovation and                                  | Progress made on each criteria was presented and taken approval from the members for future course of action.   |   |
| Extension (5 Key Indicators).  Criteria IV: Infrastructure and Learning Resources (5 Key Indicators). |   | Completed, circulated and on process for the submission for   |
| Criteria V: Student Support and Progression (4 Key Indicators).                                       |   | AQAR  |
| Criteria VI: Governance, Leadership and Management (5 Key Indicators).                                |   |   |
| Criteria VII: Institutional Values and Best Practices (3 Key Indicators).                             |   |   |
| Part B: Nursing Part.   |   |   |
| 3. Any other matters addressed by the chairperson and committee members.                              | <ul> <li>Approval of fees concession from 30% to 50% for P.B.B.Sc &amp; M.Sc Nursing programme.</li> <li>The management encouraged the</li> </ul>   | Approved  |
|   | faculty to enrol for the Ph.D. degree at SDUAHER were given due consideration would be given for fees concession at a rate of 50%.  | Approved & 03 scholars<br>have availed the facility.  |
|   | <ul> <li>The management encouraged the faculty to enrol to publish the research articles in UGC Care Journals&amp; if any fees is paid towards the same shall be reimbursed with the double of the charge.</li> <li>Empower and train the local health</li> </ul> | As permitted and decided by<br>the members 03 published<br>articles shall be paid the<br>double the amount of the<br>publication expenditure. |
|   | care providers at SDUCON Training Simulation Centre.  | Scheduled during the month<br>of December 2022  |

Based on the agenda specified for 14/10/22, the following agenda was discussed & decided for time bound action plan:

The IQAC of SDUCON presented the initiatives under taken by the cell as follows: In the process of optimization of Institutional Vision through Quality Initiative, Sri Devaraj Urs College of Nursing has formulated the IQAC on 29/09/2019.

| Total Meetings held till date are          | 11(three months once) |  |
|--|-----------------------|--|
| The NAAC final assessment was done on date | 27 & 28 August 2021   |  |



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Members changed after IQAC Initiated are

Dr. Radha M.S changed to Mrs. Gayathri K.V

Dr. M. L. Harendra Kumar to Dr. K N V Prasad

Dr. Azeem to Dr. Sheela S.R,

Medical Superintendent, RLJH & RC. (Senior Administrative Officer)

PRESENT IOAC MEMBERS

| Sl. No | Name of the Member       |             | Designation                             |  |  |
|--------|--------------------------|-------------|---|--|--|
| I      | CHAIR PERSON             |             |   |  |  |
|        | Dr. G. Vijayalakshmi     |             | Principal                               |  |  |
|        | MEMBERS                  |             |   |  |  |
| II     | SENIOR ADMINISTRATIVE OF | FICER'S C   | ADRE                                    |  |  |
| 1      | Shri H. Hanumantha Rao   |             | Advisor, SDUET                          |  |  |
| 2      | Mr. Balaji               |             | Finance Officer, SDUET                  |  |  |
| III    | FACULTY                  | LINGSTIN.   |   |  |  |
| 1      | Prof. Mary Minerva       | Marie Marie | HOD, Dept. of CHN, SDUCON               |  |  |
| 2      | Dr. Lavanya Subhashini M | ES SCHIEF   | HOD, Dept. of Child Health Nsg, SDUCON  |  |  |
| 3      | Prof. Jairakini Aruna    |             | HOD Dept. of Psychiatric Nsg., SDUCON   |  |  |
| 4      | Prof. Punitha M          |             | HOD, Dept. of OBG Nursing, SDUCON       |  |  |
| 5      | Prof. Rajesh R           |             | HOD Dept. of FON, SDUCON                |  |  |
| 6      | Mrs. Vani R              |             | Asst. Prof. Dept of CHN, SDUCON         |  |  |
| 7      | Mrs. Sumana Yesu Priya   |             | Asst Prof. of Community Health Nursing  |  |  |
| 8      | Mr. Umadevi T            | -           | Asst. Prof. of Medical Surgical Nursing |  |  |
| 5      | Mrs. Shamala             |             | Librarian, SDUCON                       |  |  |
| 6      | Mr. Narayanaswamy        |             | Clerk- SDUCON                           |  |  |
| IV     | MEMBERS FROM MANAGEMEN   | NT          |   |  |  |
|        | Shri. J. Rajendra,       |             | Vice President, SDUET                   |  |  |
| V      | NOMINEE FROM EMPLOYERS   |             |   |  |  |
| 1      | Dr. Sheela S R           |             | Superintendent, RLJH & RC               |  |  |
| 2      | Dr. K N V Prasad         | Director,   | , Quality & Compliance, SDUAHER         |  |  |
| VI     | NOMINEE FROM LOCAL SOCIE |             |   |  |  |
| 1.     | Mr. Ganesh               | District 1  | Reporter, Udayavani, Kolar              |  |  |
|        | STUDENTS AND ALUMNI      |             |   |  |  |
| 2      | Prof. Bharathi KV        |             | l, Chenne Gowda CON, Kolar              |  |  |
| 3      | Mrs. Pramelamma          | I M.Sc.(    | N)                                      |  |  |
| 4      | Ms. Nirmala              | IV B.Sc.    | (N)                                     |  |  |
| 5      | Ms. Mala                 | I P.B.B.S   | Sc.(N)                                  |  |  |
| VII    | NAAC-IQAC COORDINATOR    |             |   |  |  |
|        | Dr. Zeanath Cariena J    | HOD, M      | SN Dept. SDUCON & CNO, RLJH& RC         |  |  |
|        | DEPUTY CO-ORDINATOR      |             |   |  |  |
|        | Mrs. Gayathri K. V       | Assoc. P    | rof, Dept of OBG Nursing                |  |  |

#### **IQAC INITIATIVES**

1. Structure and strengthen teaching learning process through cross cutting issues, certificate and value added

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courses, monitoring and evaluation.

- Enhance quality culture by accreditation and certification process. (ISO Certification, NAAC Accreditation, MoUs, Student and Faculty exchange program, Extension activities, conducting National and International Conferences).
- 3. Student and staff welfare initiatives.

#### Faculty Welfare Initiatives

 The management encouraged the faculty to enrol for the Ph.D. degree at SDUAHER were given due consideration would be given for fees concession at a rate of 50%.

Outcome: - Approved & 03 scholars have availed the facility

 The management encouraged the faculty to publish the research articles in UGC Care Journals & if any fees is paid towards the same shall be reimbursed with the double of the charge.

Outcome: - As permitted and decided by the members 03 published articles shall be paid the double the amount of the publication expenditure.

 The management encouraged the faculty to enhance Research Culture by availing research seed money for conducting research either as a department or individual faculty wise.

Outcome: - All the Six departments of the college availed the facility.

 The management encouraged the faculty to enrol for competency-based training either as providers/instructors/master trainers.

Outcome: - Five faculty have availed the facility of deputation to competency-based training on Skill Standardization & Simulation Training And Simulation Teaching & Learning Strategies.

• Teaching and Non-Teaching Faculty children/Spouse has 50% fees concession for M.Sc & P.B.B.S C **Outcome:** - 40% Concession for Four of the staff children in R L Jallappa Central School.

#### Student Welfare Initiatives

\* In view of empowering the local community (Backward) the management has approved for fee waiving that is concession of fees from 30% to 50% has been approved for P.B. BSc & M. Sc Nursing programme.

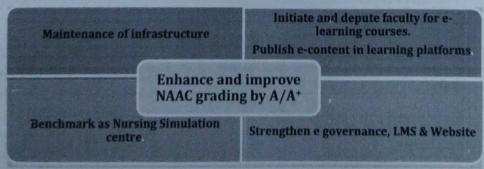
Outcome: -After the amendment & permission a total of five students have enrolled for P.B. BSc & Nine students for M. Sc(N) Degree.

#### Institutional Initiatives

· Enhanced infrastructural teaching learning facilities.

**Outcome:** - As per the revised curriculum by INC 2020 the management has approved to expand the infrastructural facilities as per the regulations specified (on process)

#### **IQAC FUTURE PLANS**



After the above discussion by the IQAC Cell the respective Criterion Conveners presented on the progress made in each of the key indicators by comparing with the peer team evaluation & self-assessment scores.



## Agenda 2: Progress report on Quality indicator frame work - Criteria Conveners.

Criteria 01-Curricular Aspects

| KI  | M  | etric             |  | Action             | Taken   | Taken                                 |                                      |  |
|---|----|-------------------|--|--------------------|---|---------------------------------------|--------------------------------------|--|
|   |    | Revise<br>and tin |  | Revised<br>and tim | curriculum planning is done with master, clinical e schedules.  |                                       |                                      |  |
| 1.1.1 Planni  |    |                   | 1. Nurs<br>Accred<br>plementation 10-22<br>2. Adva |                    | ing Practice standards Quality Assurance and itation Initiated and completed on 21-10-22 to 22-anced Simulation skills Scheduled in the month of r 3rd week |                                       | Compliance as per INC                |  |
|   |    | SI.<br>No         | Cours  | e Code             | Title of the course   | Instructor<br>Name/Department         | Status                               |  |
|   |    | 1                 | ACD YG -0  |                    | Yoga  | Integrative medicine                  | Completed                            |  |
| Value<br>added<br>course<br>&<br>certific<br>ate<br>courses | i  | 2                 | ACD LS-02  | VAC                | Life skills: Human values   | Dept. of Psychiatric<br>Nursing & SNA | Completed on 28/03/22 to 31/03/22    |  |
|   | ic | 3                 | ACD (<br>RS-04                                     | CC                 | Research Report & writing skills  | Research Cell                         | Completed on 11/04/22 to 14/04/22    |  |
|   | es | 4                 | ACD (  |                    | Advance Simulation<br>Skills  | Dept. of Medical-<br>Surgical Nursing | Scheduled in the month of<br>October |  |
|   |    | 5                 | ACD (  |                    | Nursing Practice<br>standards & Patient   | IQAC                                  | Completed on 21-10-22 to 22-10-22    |  |

Criteria II: TEACHING LEARNING PROCESS-Responsibility-Mrs. Gavathri K.V.

safety

| Metric  | Target  | Action taken  | Future goal  |
|---|---|---|--|
| Number of seats filled<br>in for the various<br>programs as against<br>the approved intake. | B.Sc Nursing 100%<br>admission<br>Increase M.Sc and P.B<br>B.Sc Nursing | Maintain admission status of B. Sc Nursing 30% to 50% Fee concession given to students who took admission for M.Sc and P.B.SC Nursing and policy made for the same. Advertisement was given at various colleges through placement and recruitment cell. Placement cell took initiative in orienting fee concession and 100% job assistance if they join M.Sc and P.B.Sc nursing program after completion. at our institution. | Maintain admission status of B. Sc Nursing Improve 10% of students intake in M. Sc and P. B.Sc nursing program |

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| Student-Full time teacher ration   | Increase 10% fulltime teacher ratio                            | Scholarship benefit shall<br>be provided to selected<br>candidates who are<br>eligible to both P.B.BSc &<br>M.Sc (N) programme.<br>Placement cell took<br>initiative by going to<br>colleges of St. Johns,<br>SDC, Govt college of | Improve full time teachers by 10%  |
|--|--|--|--|
|  |  | nursing for encouraging IV year B.Sc and M.Sc nursing students to apply for jobs at our college.   |  |
| Student-centric<br>methods are used for<br>enhancing learning<br>experiences.                                  | improve student centric methods                                | Student centric methods<br>are initiated with program<br>specific for enhancing<br>learning experiences<br>among students  | Department wise student – centric methods shall be initiated.                          |
| Website  | Update college website   | On process   | Update website with teaching learning content  |
| LMS  | Get updated with in<br>December 2022                           | On process   | Create and upload teaching content in college YouTube and college website/Gyan Bhandar |
| Student: Mentor Ratio  | Planned and implemented  | Planned and implemented  | Maintained   |
| Number of fulltime<br>teachers against<br>sanctioned posts<br>during the year                                  | As per INC faculty recruited                                   | Implemented  | Sustained  |
| Number of teachers<br>trained for<br>development and<br>delivery of e-<br>content/e-courses<br>during the year | Train 25% of faculty for development and delivery of e-content | On process   | Publish one e-content.   |
| Number of Full Time<br>Teachers Who<br>Received Awards And<br>recognitions for<br>excellence                   | Improve faculty awards.  | On process   | Get awards from recognised agencies.   |

Criteria 03-Research, Innovations and Extension - Responsibility- Mrs. Jairakini Aruna

| Key<br>Indicator                         | Matrix No.  | Action Taken   | Future goal  |
|--|---|--|--|
| Research<br>mobilization<br>for research | No. of teachers as PG/Ph.D Guides     No of teachers awarded national/international fellowships/ Financial support for advanced | PG guides -11 (21.56%) Ph.D guides-02+01(12%) Financial support for participation in conference- 05(10%) -Simulation training-02 | 25% Increase in no. of teachers participation in conference with financial support  50% Fee concession as financial support for advanced studies |



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|  |   |   | The same of the sa |
|--|---|---|--|
|  | studies/collaborative research and participation in conference • Applied for grants (Short term grants for UG students and faculty)                       | Online simulation on teaching and learning strategies-03     Applied for grants in RGUHS Consultation of two external faculties.  | On process   |
| Innovations ecosystem                  | Ecosystem for innovations including incubation Centre     Research workshops/seminars conducted on IPR, Research Methodology, Writing for research grants | On process     National workshop on     Research methodology-01 Faculty development Programme for two days on Systematic review and meta-analysis from MAHE, Manipal- 01  | Planned to conduct<br>worships/seminar on IPR,<br>on 2 week of Nov.2022  |
| Research<br>publications<br>and awards | Institution ensure<br>implementation of its<br>stated code of ethics in<br>research   | Amended and implemented   | Completed  |
|  | No. of Ph. D/ PG degree<br>in respective disciplines<br>received per recognized<br>PG teachers  | PGs enrolled in 2019-2020 -05(21%)  | Increase of PG admissions in all specialty   |
|  | Research publications<br>and awards in UGC<br>CARE List   | Total Research Publications= 66<br>UGC-CARE1- 10(20%)   | Each faculty on process of<br>completion of research<br>publication in UGC CARE List<br>by the completion of academic<br>process   |
|  | Number of books<br>chapters in edited<br>volumes/ books UGC<br>CARE List  | 01- Chapter in edited volume published  | Increase in No of books<br>chapters in edited volumes/<br>books UGC CARE List  |
| Extension<br>Activities                | Number of extension<br>and outreach activities<br>carried out in<br>collaboration with<br>National and<br>international agencies,<br>the community        | 21 - extension activities by all Nursing dept. Viz., CHN Dept. –world Population day, tobacco day, environmental day, Youth red cross day, Blood donor's day, NSS day, ORS day, Asthma day, world breast week day by Pediatric and OBG dept. World Heart Day by MSN, Alzheimer's day, Mental Health day, Suicide prevention day, Drug abuse day – MHN dept, and National activities -SNA activities | Planned and completed as per Schedule  |
|  | No. of awards and<br>recognition received for<br>extension activities for<br>the institution  | 03 (RGUHS Zonal tennicoit<br>competition trophy, Blood<br>donor's day and short film on<br>medication without error)  | Increase in No. of awards and recognition  |

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| Collaboration | Collaborative activities<br>for research, faculty<br>exchange, student<br>exchange/industry-<br>internship | -Research report and writing skills for 3 students from KLE Faculties for 3 days.  -3 B.Sc. Nursing students clinical training at DIMHANS for 15 days.  And IV B.Sc. Nursing students clinical training for 1 week at Vani villas hospital for OBG | Planned and completed and on process       |
|---------------|--|--|--|
|               | Functional MOUs with<br>Institutions / Industries<br>in India and abroad for<br>academic                   | MoUs done with others -09  | Activities are planned and it's on process |

Criteria 04- Infrastructure and learning Resources - Responsibility- Prof. Mary Minerva

| Matrix | Key Indicators  | Action Taken  | Status   |
|--------|---|---|--|
| 4.1    | Physical Facilities   | As Per the revised INC norms initiated expansion of the infrastructure  Multipurpose hall  AV Aids room   | On process   |
|        |   | <ul> <li>Separate OBG &amp; Paediatric Lab</li> <li>Merge Community &amp; Nutrition Lab.</li> </ul>   | Initiated as per 2022-23<br>Revised INC norms  |
| 4.2    | Clinical, Equipment<br>and Laboratory<br>Learning Resources                                   | <ul> <li>Lab equipment's has been enhanced as per the student strength.</li> <li>OBG Clinical Posting for final year students at Vani Villas, Bengaluru, MHN postings to Dharwad.</li> </ul>  | Received advanced Manikins for FON /MSN:-(06), OBG (02) & Paediatric labs (02). Paediatric Lab to be shifted from 2 <sup>nd</sup> floor to ground floor                  |
| 4.3    | Library as a learning resources   | <ul> <li>Need to subscribe for international journals speciality wise.</li> <li>Books and Journals were added.</li> <li>Learner session was conducted on access to E-Resources(Students &amp; Staffs)</li> <li>Library Reception Counter</li> </ul> | <ul> <li>Subscription of journals need to increase.</li> <li>After June 2022 no books were added.</li> <li>Conducted on 12<sup>th</sup> August 2022 initiated</li> </ul> |
| 4.1    | To improve the Physical Facilities  | As Per the revised INC Norms initiated expansion of the infrastructure.   | On process   |
| 4.2    | To increase Clinical,<br>Equipment and<br>Laboratory Learning<br>Resources                    | Lab equipment's has been enhanced as per the student strength. Clinical Posting for Mental Health Nursing at Dharwad has implemented.   | Placed order for advanced Manikins<br>for FON/MSN,<br>OBG & Paediatric labs.   |
| 4.3    | To add number of reference books & increase registration of national & international journals | 99 books were added from Jan-to June 2022   | To increase registration of national & international journals  |
| 4.4    | To improve IT facility  | 10 laptops were added   | Planning to purchase E-Podium for classrooms   |



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| 4.5 | To monitor<br>Maintenance of<br>Campus<br>Infrastructure | Shelter for students to have lunch on process. First floor false ceiling repair is initiated | Stone bench Fencing around the college on process Hang wires need to fix RO water filters (02) need to fix. |  |
|-----|--|--|---|--|
|-----|--|--|---|--|

|                      | minasurcunc  | nat freet faise centing repair is initiated  | RO water filters (02) need to fix.  |
|----------------------|--|--|---|
| Criteria V:          | Student Support and Pr   | rogression-Responsibility- Prof. Punith  | а М   |
| Key<br>Indicato<br>r | Target   | Action Taken   | Future goal   |
| 5.1.1                | Students benefited by<br>scholarship /fee-<br>waivers<br>Improve   | <ul> <li>Scholarships can be assessed through individual student account. 17/79 students (22%) has availed scholarship for 2021-22.</li> <li>Fee-waivers by non govt is done through fee concession accordingly for 15 M.sc &amp; 05 P.B.B.sc students (100%)</li> </ul> | To increase the number of scholarships availers and fee-waiver  |
| 5.1.2                | Capability<br>enhancement and<br>development schemes<br>for students   | <ul> <li>Students are enrolled in value added and certificate courses</li> <li>Increased the number of students' enrolment from 728 to 1442.</li> <li>05 certificate and value-added courses completed for different batch of students.</li> </ul>                       | Courses made as part of the curriculum for the students to enrol                                      |
| 5.1.3                | To enhance<br>Competitive exam and<br>career counselling<br>offered by the<br>Institution during the<br>year 2021-22 | <ul> <li>Conducting carrier counselling programme and orientation to Competitive examinations in coordination with INC.</li> <li>Increased the number of students' enrolment from 133 to 326</li> </ul>  | Increasing the placement opportunities by linking to various other carrier agencies & it's in process |
| 5.1.4                | International Student<br>Cell  | Advertising of the courses available in institution through website & Youtube.   | To Increase the number of international student cell admissions                                       |
| 5.1.5                | Institution has<br>transparent mechanism<br>for timely redressal of<br>grievances/POSH                               | Meetings conducted as needed. Not reported with any of the incidents till date.  | Continue with the same action plan  |
| 5.2.1                | Students qualifying in state /national /international level examination  | 90% (77/88) of the outgoing students are placed  | Implementing the course of ILTES for final year students along with TNAI.  Obtain MoU with SDUAHER    |
| 5.2.2                | Number of<br>placement/Self-<br>employment of<br>outgoing students   | 50% concession in the fees structure<br>for staffs Working at R.L. Jalappa<br>Hospital & RC  | Placement opportunities in college in collaboration with various institution and hospitals.           |
| 5.2.3                | Graduated students of<br>the preceding year<br>progressed to higher<br>education                                     | Increased higher studies from Zero to 02 (2%)  | Recruiting alumni as clinical instructors and motivating for higher education                         |



effectively deployed.

# Sri Devaraj Urs College of Nursing

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| 5.3.1 | Increasing number of<br>student's participation<br>in co-curricular<br>activities | Increased number of awards from 02 to 03 at National Level.  | MOU's with other institutions & encouraging co-curricular activities   |
|-------|---|--|--|
| 5.3,2 | Presence of student<br>council, its activities<br>related to student<br>welfare   | SNA Activities are conducted.  | Encouraging and motivating the students to participate in State & National SNA Activities.   |
| 5.3.3 | Number of sports and cultural activities /competitions                            | Intercollegiate RGUHS competition throwball & tennikoit competition held 13/09/22 & 14/09/22 & won 1 Place in Tennicoit. | To increase intercollegiate and zonal competition in collaboration with RGUHS.   |
| 5.4.1 | Alumni Association &<br>Developmental<br>activities                               | Increased from 643 to 703 alumni have registered till date   | To increase the number of activities in alumni association.  |
| 5.4.2 | Alumni contribution   | Till date Rs.30000/- contribution was made by the 15 alumni.   | Planned to donate to the college<br>Visitors lounge with the cost of<br>Rs.1,50,000/-<br>Members suggested to give teaching<br>aids rather than construction/<br>modification of visitors' lounge. |

Criterion VI- Governance, Leadership and Management - Responsibility- Dr. G. Vijayalakshmi Matrix Target **Action Taken** Status The Institution has clearly stated To sustain and enhance Vision and Mission which are Implemented & Amended the institutional reflected in its academic and Displayed Excellence administrative governance Effective leadership is reflected in To encourage the various Institutional practices such Achieved Implemented participative as decentralization and participative management practices management. 2 Teachers Obtained financial aid to attend conferences Strengthened faculty as To provide financial Financial support to attend Planning to train faculty auditors & certified aid to faculty conferences for auditors by organising trainers ISO, NAAC, AAA programmes The Institutional has well defined organizational structure, Statutory Initiated Bodies/committees of the College Completed and on On process with relevant rules, norms and process proposal submitted guidelines along with Strategic Plan



| Implementation of E-Governance in areas of operation  | Policy Amended                | Proposal Submitted  | On process & will be implemented before commencement of academic year                                  |
|---|-------------------------------|---|--|
| The Institution has effective welfare measures for teaching and non-teaching staff  | Policy Amended                | Implemented   |  |
| Number of teachers provided with<br>financial support to attend<br>conferences/workshops and towards<br>membership fee of professional<br>bodies during the year                            | Policy Amended                | Implemented<br>05 teachers/ 2<br>20 %                     | To continue further with a greater number of teachers  |
| Number of professional<br>development /administrative<br>training programmes organized by<br>the Institution for teaching and non-<br>teaching/technical staff during the<br>year           | Achieved                      | 12 /4<br>PDP conducted                                    | To proceed and to enhance  |
| Number of teachers undergoing Faculty Development Programmes (FDP) including online programmes during the year(Orientation/ Induction Programmes, Refresher Course, Short Term Course etc.) | Achieved                      | 51<br>96.2%   | To initiate enrolment of<br>faculty in online E-<br>learning courses,<br>Swayam certificate<br>courses |
| Institution has performance<br>Appraisal System for Teaching &<br>Non –teaching staff   | UGC Policy<br>Amended         | Implemented   | On process   |
| Institutional Strategies for mobilization of funds and the optimal utilisation of resources.  | Policy Amended                | Implemented   | On process   |
| Institution conducts internal and external financial audits regularly   | Achieved                      | As per schedule audits conducted                          | To maintain and update the audit regularly.  |
| Funds/Grants received from<br>government/non- government<br>bodies, individuals, philanthropists<br>(INR in Lakhs) during the year (not<br>covered in Criterion                             | Achieved                      | Applied to Affiliated<br>Universities to obtain<br>grants | To increase the number of Grants   |
| Institution has a streamlined<br>Internal Quality Assurance<br>Mechanism.   | Structured System has adopted | Implemented   | To sustain & maintain the Quality assurance mechanism  |
| Number of teachers attending programmes/workshops/seminars specific to quality improvement in the year.   | Achieved                      | 52 teachers have attended 96.2%                           | To increase participation numbers of teachers  |



| Quality Assu              | as implemented the   | Impleme       | ented   | On process                            |   | To sustain and increase<br>the number of Quality<br>Initiatives |
|---------------------------|--|---------------|---|---------------------------------------|---|---|
| riterion 7 -<br>Matric No | Institutional Values and<br>Matrix   |               | ractices- Responsibility- Prof. Rajes Action Taken Futur                    |                                       |   |   |
| 7.1.1                     | Total number of gender equity sensitization programmes   |               | 02 programme<br>as per shedule  | es completed                          | Future goals 02 programn  | nes is on process   |
| 7.1.2                     | Measures initiated by the institution for the promotion of gender equity                             |               | Defined amen implemented  | ded and                               | Fencing around the college<br>Need of extra common rooms wit<br>facilities for students & faculties.    |   |
| 7.1.3                     | Facilities for alternate sources of energy and e conservation devices.                               |               | amended and   | implemented                           | LED bulb facilities in college and<br>hostel & power efficient equipment<br>hostel and college          |   |
| 7.1.4                     | Facilities in the institut<br>the management of<br>degradable and non-<br>degradable waste           |               | Amended and   | implemented                           | Protocols for e-waste management  |   |
| 7.1.5                     | Water conservation fac<br>available in the Institut  |               | Amended and   | l implemented                         | Required Rain water harvesting facil in college and hostel  |   |
| 7.1.6                     | Green campus initiative the Institution  | es of         | Green audit to  | be conducted                          | Need pedestrian friendly pathways, landscaping with trees and plants, policy on ban on use of plastics. |   |
| 7.1.7                     | The Institution has disa<br>friendly, barrier-free<br>environment                                    | abled-        | On Progress   |                                       | Disabled friendly washrooms Screen reading software, Required Ramps facilities at hostel and coll       |   |
| 7.1.8                     | Institutional efforts/initiatives in providing an inclusive environment                              |               | Defined, ame implemented  | nded and                              | On process  |   |
| 7.1.9                     | Code of conduct handle exists for students, tead and academic and administrative staff               | chers         | Defined, ame implemented  |                                       | Sustain and continue  |   |
| 7.1.10                    | The Institution celebra<br>organizes national and<br>international commen<br>days, events and festiv | l<br>norative | Programmes<br>celebrating n<br>international<br>commemorat<br>events and fe | ational and<br>rive days,<br>estivals | On Process  |   |
| 7.2.1                     | 7.2 Best practices   |               | 1. Online e<br>2. Village A<br>Blended lear                                 | Adaptation ning                       | On process  |   |
| 7.3.1                     |  |               | Sustain and   | continue                              |   |   |

Nursing Discipline: Responsibility- Mrs. Umadevi T



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| Matrix No. | Key Indicator   | Action Taken   | 1 |
|------------|---|--|---|
| 8.1.1.     | Training of clinical skills and simulation labs   | Amended and completed  |   |
| 8.1.2      | Number of fulltime teachers who have acquired additional Degrees/ Master trainer certifications   | <ul> <li>Six Teachers are registered for Ph.D.</li> <li>Five teachers under gone Simulation training</li> </ul>                    | 3 |
| 8.1.3      | Students are exposed to quality of care and patient safety procedures   | Amended and Implemented  |   |
| 8.1.4      | Number of first year students, provided with prophylactic immunization against communicable diseases  | 100 students got Hepatitis-B Vaccine   |   |
| 8.1.5      | Is the teaching hospital / clinical laboratory accredited by any National Accrediting Agency?  1. NABH Accreditation  2. NABL Accreditation  3. ISO Certification | Accredited and Certified   |   |
| 8.1.6      | College facilities were utilized by students from other institutions  | Three Colleges Attached for theory and practical Examination center. Karnataka Educational Authority for verification of Documents |   |
| 8.1.7.     | College undertakes community oriented activities  | Completed as per Schedule  |   |
| 8.1.8      | Number of full-time faculty serving in various committees of the University   | Two Faculties are serving in committees of universities  |   |

Any other matters addressed by the chairperson and committee members.

The members suggested compare our performance with institutions who have secured A/A+ NAAC-Grade by benchmarking and comparing the implementation strategies.

The committee also permitted to visit the institution to understand the innovative and technological initiatives adopted in quality and research activities.

Finally, the management encouraged the SDUCON-IQAC to have regular assessment by experienced Peer team/ assessors to improve the NAAC grading.

After the above discussion meeting adjourned at 1.30 pm. Dr. G. Vijayalakshmi Chairperson of the Committee & IQAC Coordinator expressed a note of gratitude and thanks for all the approvals granted for operationalization of quality implementation of academic and administrative activities of the college.

Dr. Zeanath Orieta J.

NAAC Deputy Coordinator Mrs. Gayathri K.V

Dept. of OBG Ns SDUCON- Kolar

Dr. G. Vijayalakshmi Sri DevarajPrincipal

TanSDUCON-Rolar



Ref. No. SDUCON/09/2022-23

Date: 13-06-2022

#### CIRCULAR

The IQAC meeting will be held on 28-06-2022 at 11:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing. All the members are requested to attend the same without fail.

#### Agenda:

- Minutes of the previous meeting and Action taken report.
- Quality indicator frame work Action Taken Report-Criteria Conveners.

Criteria I: Curricular aspects (4 Key Indicators).

Criteria II: Teaching Learning and Evaluation (7 Key Indicators).

Criteria III: Research Innovation and Extension (5 Key Indicators).

Criteria IV: Infrastructure and Learning Resources (5 Key Indicators).

Criteria V: Student Support and Progression (4 Key Indicators).

Criteria VI: Governance, Leadership and Management (5 Key Indicators).

Criteria VII: Institutional Values and Best Practices (3 Key Indicators).

Part B: Nursing Discipline.

- IQAC Progress Report- Changes that affect Teaching Learning Process (from January 1st 2022 to May 31st 2022).
  - a. Structured Feedback: 1. Teaching & Learning, 2. Parents, 3. Alumina members, 4. Peer Team, 5. Employer, Course end feedback.
  - b. Value added & certificate course Outcome.
  - c. Result analysis (2015 to 2020) Quality assurance: 1. ISO certification, 2. Research cell initiatives, 3. Trainig Cell

Any other matters addressed by the chairperson and committee members

NAAC VOAC Co Ordinator Urs College of Nursing Copy To Tamaka, Kolar-563101.

1. Shri. J. Rajendra, Vice President, SDUET. (Management Representative).

2. Shri H. Hanumantha Rao, Advisor, SDUET (Senior Administrative Officer)

3. Dr. M. L. Harendra Kumar, Professor of Pathology & Director of IQAC/Coordinator, SDUMC (Special Invite).

4. Dr. Sheela S.R, Medical Superintendent, RLJH & RC. (Senior Administrative Officer)

- 5. Mr. Ganesh, District Reporter, Udayavani, Kolar. (Local Society Representative).
  - 6. Mrs. Bharathi K.V, Chenne Gowda CON, Kolar (Alumni Representative).
  - 7. Dr. Lavanya Subhashini. Convener.
  - 8. Mrs. Jairakini Aruna, Convener.
  - Prof. Mary Minerva, Convener.
  - 10. Mrs. Punitha M, Convener.
  - 11. Mr. R. Rajesh, Convener
  - 12. Mrs. Umadevi T, Convener
  - 13. Mrs. Shamala, Asst. Librarian, Representative from Library.
  - 14. Mr. Narayana swamy, Sr. FDA, Principal Office Representative.
  - 15. Mrs. Pramelamma, I M.Sc.(N), (Student Representative).
  - 16. Ms. Nirmala, IV B.Sc.(N) (Student Representative).
  - 17. Ms. Mala., I Year P.B.B.Sc.(N) (Student Representative).
  - 18. Prof. (Dr). Zeanath Cariena .J. NAAC Co-Ordinator.
  - 19. Mrs. Gayathri K.V, Deputy Co-Ordinator.

  - 20. Office copy.

AIMS

- · optimization and Integration of modern methods of Teaching and Learning.
- It ensures efficient and progressive performance of Academic. Administrative tasks.

**IQAC ASSESORS** 

CHAIRPERSON

Dr. G. Vijayalakshmi

NAAC Co-Ordinator

Dr. Zeanath C.J

NAAC Deputy Co-Ordinator

Mrs. Gayathri K.V

Criteria Convenors

Dr. Lavanya

Subhashini

Mrs. Gayathri K.V

Mrs. Jairakini Aruna

Prof. Mary Minerva

Mrs. Punitha M

Dr. G. Vijayalakshmi

Mr. Rajesh R

Note: Enclosed previous meeting minutes for leference.



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# Proceedings of the IQAC Meeting held on - 22-03-2022 at 11:30 AM

The SDUCON-IQAC Committee meeting was held on 22-03-2022 at 11:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing, under the guidance of IQAC Chairperson, Dr. G. Vijayalakshmi. The Chairperson welcomed all the members and invited Dr. Zeanath C.J, IQAC Co-coordinator to proceed conduct the meeting as per the planned agenda.

#### Agenda:

- 1. Previous Meeting Minutes and its Action taken report.
- 2. Approval of AQAR (QIM, QnM & Website Content) by the Committee.
- 3. IQAC Progress Report.
  - a. Training Centre Initiative.
  - b. Research Cell Initiatives.
- 4. Presentation on methodology adopted for Institutional Best Practices.
- 5. Presentation on methodology adopted for Institutional distinctiveness.
- 6. Strategic Term Action Plan 2022 to 2023 (short, mid & long term).
- 7. Any other matters with the permission of the chairperson.

#### Members Present

| SI. No | Name                         | Designation  |
|--------|------------------------------|--|
| 1      | Shri. J. Rajendra            | Director & Trustee (A & F), SDUET, Employer Representative |
| 2      | Shri H. Hanumantha Rao       | Senior Advisor, SDUET, Employer Representative             |
| 3      | Dr. Sheela S.R               | Medical Superintendent, R.L.J.H & RC, Senior Staff         |
| 4      | Mr. Ganesh                   | District Reporter, Udayavani, Society Representative.      |
| 5      | Dr. G. Vijayalakshmi         | Principal, Chairperson & VI Criteria Convener              |
| 6      | Dr. Lavanya Subhashini       | Vice Principal & I Criteria Convener                       |
| 7      | Prof. Mary Minerva           | IV Criteria Convener                                       |
| 8      | Mrs. Jairakini Aruna         | III Criteria Convener                                      |
| 9      | Mrs. Punitha M               | V Criteria Convener  |
| 10     | Mr. Rajesh R                 | VII Criteria Convener                                      |
| 11     | Mrs. Gayathri K.V            | Il Criteria Convener & Deputy Co-ordinator                 |
| 12     | Mrs. Umadevi T               | VIII Criteria Convener                                     |
| 13     | Mrs. Shamala                 | Asst. Librarian, Library representative                    |
| 14     | Mr. Narayana Swamy           | Sr. FDA, Office Representative                             |
| 15     | Mrs. Pramelamma              | I M. Sc. Nsg. Student Representative                       |
| 16     | Ms. Anna Rose                | IV B. Sc Nsg. Student Representative                       |
| 17     | Ms. Mala                     | I P. B. Sc Nsg. Student Representative                     |
| 18     | Prof. (Dr) Zeanath Cariena J | HOD Dept. of MSN, & IQAC Co-ordinator.                     |

#### Members couldn't attend (leave of absence)

| Sl. No | Name               | Designation                 |
|--------|--------------------|-----------------------------|
| 1      | Prof. Bharathi K.V | Principal, Chenne Gowda CON |

Matters discussed & Action Taken Report of the previous meeting conducted on-19-11-2021:-

| Agenda                              | Action taken report   | Responsibility       | Status    |
|-------------------------------------|---|----------------------|-----------|
| 1. Minutes of the previous meeting. | The minute of the previous meeting held on 19-<br>11-2022 was read by NAAC Coordinator and<br>confirmed by the Members. | IQAC<br>Co-ordinator | Completed |



| 2. Peer Team<br>Assessment and   | heate-at   |   |  |
|--|--|---|--|
| grading.   | Institution is Accredited with NAAC- "B" Grade (2.46) and received certificate.  | IQAC Coordinators   | Completed                                      |
| 3. Action plan on<br>implementation of<br>the observation made<br>by Peer Team-                              |  |   |  |
| Presentation by the<br>IQAC Coordinator.<br>a. Minimal enroll of P.<br>B. B. Sc. & M. Sc.<br>Nursing.        | Admission is on process  | Principal's office &<br>Administration  | On process till 31/03/2022                     |
| b. Limited Research<br>Outcome in terms of<br>publications, funding<br>and IPR                               | Members discussed to enhance the Research Publications   | Research Cell & all<br>PG/Ph.D. faculty   | On process                                     |
| c. Lack of<br>collaboration's and<br>MO U's with Institutes<br>and relevant agencies.                        | Members discussed to enhance the MoUs from present 8 to more numbers.  | Principal's office &<br>Administration  | On process                                     |
| d. Placement Opportunities of the graduates other than parent hospital                                       | Initiated IELTS/OET Training centre in collaboration with TNAI, New Delhi - rnal placement agency MoU with-kwiq health was sted  | Placement cell  | Completed                                      |
| e. Lack of Structured<br>certificate courses as<br>per prescribed<br>guidelines                              | Approved following Value Added Certificate courses for 30 hours  1. Yoga- ACD -VAC -YG -01, 2. Life Skills-ACD VAC LS-02, 3. Advance Competency based Simulation Skills- ACD -CC -ACSS-03  4. Research Report & writing Skills -ACD VAC RS-04, 5. Nursing Practice Standards & Quality Assurance and Accreditation- ACD CC NSPS- | <ul> <li>IQAC Cell,</li> <li>Course Coordinators,</li> <li>Curriculum         Committee Members     </li> <li>Dr. Lavanya         Subhashini.     </li> </ul> | On process                                     |
| Attracting students<br>or higher educational<br>rograms due to<br>eographical area.                          | Members discussed to enhance student<br>Enrollment   | Principal's office & Administration   | On Process for<br>the Academic<br>Year-2022-23 |
| Approaching the ational funding gencies for research assurce mobilization                                    | Members discussed on national funding agencies for research resource lization  | Principal's office &<br>Research Cell   | On process                                     |
| Balancing academic<br>nd clinical workload<br>ith limited faculty<br>embers due to dual<br>le working model. | The permission for recruitment of Qualified faculty is given by the management   | Principal's office,<br>Administration   | Recruitment on process                         |
| perience and senior culty for  | Members discussed to<br>empower the research cell to<br>create more opportunity for<br>faculty for undertaking   | CNE & Research<br>Committee   | On process                                     |



| trainings and updating their research acumen.   | research trainings and Updating their research acumen.   |   |  |
|---|--|---|--|
| j. Connecting with<br>senior batches of<br>alumni because of<br>their global location | Members discussed to enhance the alumni vorking for implementation of planned goals  | Alumni Association                            | On process                                       |
| 4. Quality Assurance  |  |   |  |
| system in the<br>Institution.<br>a. ISO 9001-2015.                                    | ISO 9001-2015, is on process   | ISO Coordinator & co-                         | Completed  |
| b. Initiation of AAA.   | Principal presented to the members that, needful permission is obtained from the management & Applied For AAA and response is awaited.   | Principal Office                              | On process                                       |
| 7. Approval of Best   | Approved Best Practices  |   |  |
| and Institutional Distinctiveness practices for the Academic year 2021- 22.           | <ol> <li>E-Learning platform for faculty and students: Your Door to The Future.</li> <li>Exchange programme with teaching and super specialty hospitals for Internship-The Future Begins Here</li> <li>Blended Learning-: A Move From Traditional to Technology</li> </ol> | VII Criteria Convener<br>&IQAC team           | On process                                       |
|   | Institutional distinctiveness  1. A Pride & Excellence award - Sri R.L. Jalappa Scholarship Award to Economically Backward Students:.  2. Adopt-a-Village: Extended Services for Everyone.  3. Higher Education to the tribal Youth: Ever                                  |   |  |
| B. Faculty enrollment n Trainer/Instructors courses.                                  | It was discussed and decided to send one faculty from each department (Six departments).   | Principal Office<br>& CNE                     | On process                                       |
| ). Student's exchange nternship program.  | Students will be sent to the MoU Hospitals in the internship postings.   | Principal, HODs & Class coordinators          | On Process.                                      |
| sased on the present ag   | genda, the members discussed and decided on the  | e following:-                                 |  |
|   | Discussion and decision  | Responsibility                                | Timeline   |
| QIM, QnM &<br>Vebsite Content) by<br>he Committee.                                    | The IQAC Coordinator highlighted on the data and documents prepared by each convener from I to VII and Nursing discipline Specific Criteria for AQAR-I and obtained approval of the committee for final submission to NAAC Office  | All the criteria Convener & IQAC Co-ordinator | To be<br>uploaded on<br>or before 25-<br>03-2022 |



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|  |  | Ton severe  |
|--|--|---|
| With regard to the IQAC progress report the    | CNE & IQAC Co-ordinator  | On process  |
|  |  |   |
|  |  |   |
| Initiatives made by a. Training Centre.        |  |   |
|  |  |   |
|  |  |   |
| a. Training Centre Initiatives.                |  |   |
| Two faculties are shortlisted and permitted to |  |   |
|  |  |   |
| attend Midwifery training program conducted    |  |   |
| No INC   |  |   |
|  | With regard to the IQAC progress report the IQAC team presented to the members on Initiatives made by a. Training Centre. b. Research Cell a. Training Centre Initiatives.  Two faculties are shortlisted and permitted to attend Midwifery training program conducted by IMC. | IQAC team presented to the members on Initiatives made by a. Training Centre. b. Research Cell a. Training Centre Initiatives. Two faculties are shortlisted and permitted to |

## b. Research Cell Initiatives

| Activities with Facult  | y in charge- Research Cell Members & IQAC  | Status     |
|---|--|------------|
| Establishment of separate research cell at SDUCON-2021-22   |  | On Process |
| Applied for RGUHS Research Grants- two faculty.   |  | On Process |
| Research Seed Fund  | Ongoing  |            |
| Organized National F<br>sustaining quality res<br>Events.   | desearch Methodology conference with the Theme "Excellence in earch on 25-02-2022 at SDUCON as per Institutional Calendar of | Completed  |
| Encourage & Motiva recognized journals  | tion for Quality and Innovative projects and paper publication at UGC  | On process |
| Applied for Ph. D Res   | search Centre at RGUHS   | On process |
|   | for UG/PG students –Research report writing and presentation skills in   | On process |
|   | am on systematic review and meta-analysis had been planned for   | On process |
| Initiated Institutiona  | Bulletin for the Academic Year 2021-22   | On process |
| Responsibility Princi   | pal Office, SDUET  | Status     |
| Infrastructural u     Permission to conumber of publications     The faculty who with double the     The seed money | dents to be awarded for involvement in Research activities during  | On process |
| 5. Faculty and stud college convoca   | Based on the selected three Best Practices the below Best Practices  |            |

|   | 3. Improve user-accessibility & time flexibility to engage learner in the   |            |
|---|---|------------|
|   | learning process.   |            |
|   | 4. Expand & improve technology support tools, to meet the present   |            |
|   | needs & expectations of educational system.   |            |
|   | Context:  |            |
|   | Strengthening LMS for effective remote learning experience.   |            |
|   | Creating LDS (Learning Destination Sites) application for online  |            |
|   | learning platform.  • Creating learning management ecosystem which is an extensive  |            |
|   | <ul> <li>Creating learning management ecosystem which is an extensive<br/>online learning tools that encompassed several software solutions.</li> </ul> |            |
|   | Enrolling in various e-learning certificate courses.  |            |
|   | 2. Best Practices:  |            |
|   | Title: Exchange programme with teaching and super specialty hospitals   |            |
|   | for Internship-The Future Begins Here   |            |
|   | Objectives:   |            |
|   | Enable the students to stabilize the opportunity of new learning  |            |
|   | environment at different settings.  |            |
|   | 2. To expose the students for training to a particular job/professional   |            |
|   | development.  |            |
|   | 3. Provides a professional working environment and building a   |            |
|   | network of contacts for good placement.   |            |
|   | Intended outcome:   |            |
|   | Improving ones clinical skills and help in developing network   |            |
|   | in various areas of interest.   |            |
|   | Learning more about the supportive, challenges of various   |            |
|   | health care system in India.  |            |
|   | 3. Best Practices: Title: Blended Learning-: A Move From Traditional to Technology  |            |
|   | Objectives:   |            |
|   | To combine the strengths of both traditional and online   |            |
| E LES LA CONTRACTOR DE | teaching methods.   |            |
|   | To give learners a more engaging learning experience.   |            |
|   | To retain the student's interest and inculcate self-learning  |            |
|   | procedural through web sources and ICT Models.  |            |
|   | To provide the most efficient and effective instruction   |            |
|   | experience to combine delivery modalities.  |            |
|   | Intended outcome:   |            |
|   | Broaden the spaces and opportunities available for learning.  |            |
|   | Mixing of technology and teaching with online learning  |            |
|   | components.   |            |
|   | Enhance the availability and richness of information and  |            |
|   | resources for students.   |            |
|   | More personalized learning environment.   | Convection |
| 4. Presentation on  | TITLE:  | Convection |
| methodology   | Sri R.L. Jalappa Pride of Excellence Award.   |            |
| adopted for   | Policy Guidelines:  1. The scholarship is open for students studying at SDUCON who  |            |
| Institutional   | are economically weak background (BPL).   |            |
| distinctive   | The policy guidelines will be published for awarding students of the  |            |
| practice.  By IQAC Cell and   | academic year 2021-22 & onwards.  |            |
| office of the cell  | deadeline year Ever EE & Similari   |            |
| 6. Strategic Term   | Strategic Term Action Plan 2022 to 2023 (short, mid & long term).   | Ongoing    |
| Action Plan 2022 to   | The Principal presented on the Strategic Term Action Plan 2022 to 2023  |            |
| 2023 (short, mid &  | (short, mid & long term).   |            |



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| long term).                              | SHORT TERM  |
|--|---|
| By Office of the<br>Principal and Senior | To increase an admission rate in P.B.B.Sc and M.Sc(N) and to maintain 100% in B.Sc(N)   |
| Faculty of SDUCON                        | 2. To increase university level distinction.  |
|  | 3. To improve professional knowledge of teaching faculty  |
|  | To conduct regular CNE programme to update faculty and students knowledge   |
|  | To encourage faculty to conduct curricular and co-curricular activities   |
|  | 6. Apply and procure continuation of affiliation for Basic B.Sc. (N), PB. B.Sc.(N) and M.Sc.(N)   |
|  | 7. To enhance quality education, practice, administration and research  |
|  | Intermediate goals (3years)   |
|  | To increase the MOUs with other organization  |
|  | To initiate student and faculty exchange in curricular and co-  |
|  | curricular activities   |
|  | To obtain research grants from ICMR/WHO/any other reputed   |
|  | organization  |
|  | 4. To establish research Centre   |
|  | Long term goals (5years)  |
|  | Striving towards institutional excellence across globally   |
|  | Increase student placement demand globally  |
| 8. Any other matters                     | <ul> <li>Based on the report given on the enrollment of the students for PB.BSc &amp; M.Sc Nursing,<br/>the honorable vice chairman said</li> </ul> |
| addressed with the permission            | <ul> <li>The students getting admitted to P.B.B.Sc &amp; M. Sc Nursing Program will be given 50% fee<br/>concession.</li> </ul>                     |
| of chairperson                           | The faculty enrolling for Ph.D Nursing shall be recommended for fee concession at   |
| and committee                            | SDUAHER with the Terms and Conditions of servicing the Institution for the Minimum  |
| members.                                 | period of two years.  |
|  | The honourable vice chairman and Advisor of the trust encouraged the faculty and IQAC   |
|  | Members to work towards achieving NAAC- A grade to the Institution by incorporating quality   |

AC Deputy Coordinator

research culture and teaching learning process for better outlook of the Institution.

With above discussion the meeting adjourned at 1.30 pm by vote of thanks by chairman of the committee.

Mrs. Gayathri K.V Dept. of OBG Nsg. SDUCON- Kolar

Dr. G. Vijayalakshmi

Priprincipal Sri Devaraj Usbucon-kolaga of Nursing Tamaka, Kolar-563103

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Ref. No. SDUCON/08/2022-23

Date: 14-03-2022

#### CIRCULAR

The IQAC meeting will be held on 22-03-2022 at 11:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing. All the members are requested to attend the same without fail.

#### Agenda:

- 1. Minutes of the previous meeting and Action taken report.
- 2. Approval of AQAR (QIM, QnM & Website Content) by the Committee.
- 3. IQAC Progress Report.
  - a. Training Centre Initiative.
  - b. Research Cell Initiatives.
- 4. Presentation on methodology adopted for Institutional Best Practice.
- 5. Presentation on methodology adopted for Institutional distinctive practice.
- 6. Strategic Term Action Plan 2022 to 2023 (short, mid & long term).
- 7. Any other matters addressed by the chairperson and committee members.

NAAC TOAC CO-Ordinator

Scopy Vo.aj Urs College of Nursing

1. Tashiri. J. Rajendra, Vice President, SDUET. (Management Representative).

Shri H. Hanumantha Rao, Advisor, SDUET (Senior Administrative Officer College of N.
 Dr. M. L. Harendra Kumar, Professor of Pathology & DirectoFornaka, Kolar-56310

Principal

- IQAC/Coordinator, SDUMC (Special Invite).
- 4. Dr. Sheela S.R, Medical Superintendent, RLJH & RC. (Senior Administrative Officer)
- 5. Mr. Ganesh, District Reporter, Udayavani, Kolar. (Local Society Representative).
- 6. Mrs. Bharathi K.V, Chenne Gowda CON, Kolar (Alumni Representative).
- 7. Dr. Lavanya Subhashini. Convener.
- 8. Mrs. Jairakini Aruna, Convener.
- 9. Prof. Mary Minerva, Convener.
- 10. Mrs. Punitha M, Convener.
- 11. Mr. R. Rajesh, Convener
- 12. Mrs. Umadevi T. Convener
- 13. Mrs. Shamala, Asst. Librarian, Representative from Library.
- 14. Mr. Narayana swamy, Sr. FDA, Principal Office Representative.
- 15. Mrs. Pramelamma, I M.Sc.(N), (Student Representative).
- 16. Ms., IV B.Sc.(N) (Student Representative).
- 17. Ms. Mala., I Year P.B.B.Sc.(N) (Student Representative).
- 18. Prof. (Dr). Zeanath Cariena J. NAAC Co-Ordinator.
- 19. Mrs. Gayathri K.V, Deputy Co-Ordinator.
- 20. Office copy.

### AIMS

- optimization and Integration of modern methods of Teaching and Learning.
- It ensures
   efficient and
   progressive
   performance of
   Academic,
   Administrative
   tasks.

**IOAC ASSESORS** 

**CHAIRPERSON** 

Dr. G. Vijayalakshmi

NAAC Co-Ordinator

Dr. Zeanath C.J

NAAC Deputy Co-Ordinator

Mrs. Gayathri K.V

Criteria Convenors

Dr. Lavanya

Subhashini

Mrs. Gayathri K.V

Mrs. Jairakini Aruna

Prof. Mary Minerva

Mrs. Punitha M

Dr. G. Vijayalakshmi

Mr. Rajesh R



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# Proceedings of the IQAC Meeting held on - 22-03-2022 at 11:30 AM

The SDUCON-IQAC Committee meeting was held on 22-03-2022 at 11:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing, under the guidance of IQAC Chairperson, Dr. G. Vijayalakshmi. The Chairperson welcomed all the members and invited Dr. Zeanath C.J, IQAC Co-coordinator to proceed conduct the meeting as per the planned agenda.

#### Agenda:

- Previous Meeting Minutes and its Action taken report.
- 2. Approval of AQAR (QIM, QnM & Website Content) by the Committee.
- 3. IQAC Progress Report.
  - a. Training Centre Initiative.
  - b. Research Cell Initiatives.
- 4. Presentation on methodology adopted for Institutional Best Practices.
- 5. Presentation on methodology adopted for Institutional distinctiveness.
- 6. Strategic Term Action Plan 2022 to 2023 (short, mid & long term).
- 7. Any other matters with the permission of the chairperson.

#### Members Present:

| SI. No | Name                         | Designation  |
|--------|------------------------------|--|
| 1      | Shri. J. Rajendra            | Director & Trustee (A & F), SDUET, Employer Representative |
| 2      | Shri H. Hanumantha Rao       | Senior Advisor, SDUET, Employer Representative             |
| 3      | Dr. Sheela S.R               | Medical Superintendent, R.L.J.H & RC, Senior Staff         |
| 4      | Mr. Ganesh                   | District Reporter, Udayavani, Society Representative.      |
| 5      | Dr. G. Vijayalakshmi         | Principal, Chairperson & VI Criteria Convener              |
| 6      | Dr. Lavanya Subhashini       | Vice Principal & I Criteria Convener                       |
| 7      | Prof. Mary Minerva           | IV Criteria Convener                                       |
| 8      | Mrs. Jairakini Aruna         | III Criteria Convener                                      |
| 9      | Mrs. Punitha M               | V Criteria Convener  |
| 10     | Mr. Rajesh R                 | VII Criteria Convener                                      |
| 11     | Mrs. Gayathri K.V            | II Criteria Convener & Deputy Co-ordinator                 |
| 12     | Mrs. Umadevi T               | VIII Criteria Convener                                     |
| 13     | Mrs. Shamala                 | Asst. Librarian, Library representative                    |
| 14     | Mr. Narayana Swamy           | Sr. FDA, Office Representative                             |
| 15     | Mrs. Pramelamma              | I M. Sc. Nsg. Student Representative                       |
| 16     | Ms. Anna Rose                | IV B. Sc Nsg. Student Representative                       |
| 17     | Ms. Mala                     | I P. B. Sc Nsg. Student Representative                     |
| 18     | Prof. (Dr) Zeanath Cariena J | HOD Dept. of MSN, & IQAC Co-ordinator.                     |

#### Members couldn't attend (leave of absence)

| SI. No | Name               | Designation                 |
|--------|--------------------|-----------------------------|
| 1      | Prof. Bharathi K.V | Principal, Chenne Gowda CON |

Matters discussed & Action Taken Report of the previous meeting conducted on-19-11-2021:-

| Agenda            | Action taken report                           | Responsibility | Status    |
|-------------------|---|----------------|-----------|
| 1. Minutes of the | The minute of the previous meeting held on19- |                |           |
| previous meeting. | 11-2022 was read by NAAC Coordinator and      | IQAC           | Completed |
|                   | confirmed by the Members.                     | Co-ordinator   |           |



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| 2. Peer Team<br>Assessment and<br>grading.   | Institution is Accredited with NAAC- "B" Grade (2.46) and received certificate.  | IQAC Coordinators   | Completed                                      |
|--|--|---|--|
| 3. Action plan on<br>implementation of<br>the observation made<br>by Peer Team-                                      |  |   |  |
| Presentation by the IQAC Coordinator. a. Minimal enroll of P. B. B. Sc. & M. Sc. Nursing.                            | Admission is on process  | Principal's office & Administration   | On process till 31/03/2022                     |
| b. Limited Research<br>Outcome in terms of<br>publications, funding<br>and IPR                                       | Members discussed to enhance the Research<br>Publications  | Research Cell & all<br>PG/Ph.D. faculty   | On process                                     |
| c. Lack of<br>collaboration's and<br>MO U's with Institutes<br>and relevant agencies.                                | Members discussed to enhance the MoUs from present 8 to more numbers.  | Principal's office &<br>Administration  | On process                                     |
| d. Placement Opportunities of the graduates other than parent hospital   | Initiated IELTS/OET Training centre in collaboration with TNAI, New Delhi - rnal placement agency MoU with-kwiq health was ited  | Placement cell  | Completed                                      |
| e. Lack of Structured<br>certificate courses as<br>per prescribed<br>guidelines                                      | Approved following Value Added Certificate courses for 30 hours  1. Yoga- ACD -VAC -YG -01, 2. Life Skills-ACD VAC LS-02, 3. Advance Competency based Simulation Skills- ACD -CC -ACSS-03  4. Research Report & writing Skills -ACD VAC RS-04, 5. Nursing Practice Standards & Quality Assurance and Accreditation- ACD CC NSPS- | <ul> <li>IQAC Cell,</li> <li>Course Coordinators,</li> <li>Curriculum         Committee Members     </li> <li>Dr. Lavanya         Subhashini.     </li> </ul> | On process                                     |
| f. Attracting students<br>for higher educational<br>programs due to<br>geographical area.                            | Members discussed to enhance student Enrollment  | Principal's office &<br>Administration  | On Process for<br>the Academic<br>Year-2022-23 |
| g. Approaching the national funding  | Members discussed on national funding agencies for research resource ilization   | Principal's office &<br>Research Cell   | On process                                     |
| h. Balancing academic<br>and clinical workload<br>with limited faculty<br>members due to dual<br>role working model. | The permission for recruitment of Qualified faculty is given by the management   | Principal's office,<br>Administration   | Recruitment on process                         |
| i. Motivating Experience and senior faculty for undertaking research   | Members discussed to empower the research cell to create more opportunity for faculty for undertaking  | CNE & Research<br>Committee   | On process                                     |



| trainings and updating their research acumen.  | research trainings and Updating their research acumen.   |   |  |
|--|--|---|--|
| j. Connecting with<br>senior batches of<br>alumni because of<br>their global location          | Members discussed to enhance the alumni rorking for implementation of planned goals  | Alumni Association                            | On process                             |
| 4. Quality Assurance system in the Institution. a. ISO 9001-2015.                              | ISO 9001-2015, is on process   | ISO Coordinator & co-                         | Completed                              |
| b. Initiation of AAA.  | Principal presented to the members that, needful permission is obtained from the management & Applied For AAA and response is awaited.   | Principal Office                              | On process                             |
| 7. Approval of Best and Institutional Distinctiveness practices for the Academic year 2021-22. | <ol> <li>Approved Best Practices</li> <li>E-Learning platform for faculty and students: Your Door to The Future.</li> <li>Exchange programme with teaching and super specialty hospitals for Internship—The Future Begins Here</li> <li>Blended Learning-: A Move From Traditional to Technology.</li> <li>Institutional distinctiveness</li> <li>A Pride &amp; Excellence award - Sri R.L. Jalappa Scholarship Award to Economically Backward Students:.</li> <li>Adopt-a-Village: Extended Services for Everyone.</li> <li>Higher Education to the tribal Youth: Ever to Excel.</li> </ol> | VII Criteria Convener<br>&IQAC team           | On process                             |
| 8. Faculty enrollment in Trainer/Instructors courses.  | It was discussed and decided to send one faculty from each department (Six departments).   | Principal Office<br>& CNE                     | On process                             |
| 9. Student's exchange<br>Internship program.   | Students will be sent to the MoU Hospitals in the internship postings.   | Principal, HODs & Class coordinators          | On Process.                            |
| Based on the present a   | genda, the members discussed and decided on the  | e following:-                                 |  |
| Agenda   | Discussion and decision  | Responsibility                                | Timeline                               |
| 2. Approval of AQAR<br>(QJM, QnM &<br>Website Content) by<br>the Committee.                    | The IQAC Coordinator highlighted on the data and documents prepared by each convener from I to VII and Nursing discipline Specific Criteria for AQAR-I and obtained approval of the committee for final submission to NAAC Office  | All the criteria Convener & IQAC Co-ordinator | To be uploaded on or before 25-03-2022 |



| 3. IQAC Progress<br>Report.<br>a. Training Centre<br>Initiative. | With regard to the IQAC progress report the IQAC team presented to the members on Initiatives made by a. Training Centre. b. Research Cell | CNE & IQAC Co-ordinator | On process |
|--|--|-------------------------|------------|
| b.Research Cell<br>Initiatives.                                  | a. Training Centre Initiatives.  Two faculties are shortlisted and permitted to attend Midwifery training program conducted by INC.        |                         |            |

#### b. Research Cell Initiatives

| -  | Research cell Incharge   |  |            |
|--|--|--|------------|
|  | Activities with Faculty I  | n charge- Research Cell Members & IQAC   | Status     |
|  | Establishment of separate research cell at SDUCON-2021-22  |  | On Process |
|  | Applied for RGUHS Research Grants- two faculty.  |  | On Process |
|  |  |  | Ongoing    |
|  |  |  | Completed  |
|  | Encourage & Motivation recognized journals   | on for Quality and Innovative projects and paper publication at UGC  | On process |
|  | Applied for Ph. D Resea  | arch Centre at RGUHS   | On process |
|  | Value Added Course for<br>the month of April 202   | r UG/PG students –Research report writing and presentation skills in 2.  | On process |
|  | An orientation program on systematic review and meta-analysis had been planned for faculties in April 2022   |  | On process |
| -  | Initiated Institutional Bulletin for the Academic Year 2021-22  Responsibility Principal Office, SDUET   |  | On process |
|  |  |  | Status     |
| -  | Based on the above presentation the members discussed on the following:  1. Infrastructural upgrading with required research equipment.  2. Permission to collaborating a network with Publication agencies for increasing the number of publications by faculty and students.  3. The faculty who publishes the research articles in the UGC Care List will be incentivised with double the amount of charges paid towards the article published.  4. The seed money shall be given to each of the faculty who obtains Ethical clearance from the Institutional IEC.  5. Faculty and students to be awarded for involvement in Research activities during college convocation |  |            |
| The state of the s | 3. The faculty who p with double the a 4. The seed money s the institutional II 5. Faculty and stude college convocation   | aborating a network with Publication agencies for increasing the ations by faculty and students.  ublishes the research articles in the UGC Care List will be incentivised mount of charges paid towards the article published.  thall be given to each of the faculty who obtains Ethical clearance from EC.  nts to be awarded for involvement in Research activities during | On process |



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|--|--|------------|
| 4. Presentation on methodology adopted for                     | 3. Improve user-accessibility & time flexibility to engage learner in the learning process. 4. Expand & improve technology support tools, to meet the present needs & expectations of educational system. Context:  Strengthening LMS for effective remote learning experience. Creating LDS (Learning Destination Sites) application for online learning platform. learning platform. Creating learning management ecosystem which is an extensive online learning tools that encompassed several software solutions. Enrolling in various e-learning certificate courses. Esest Practices: Title: Exchange programme with teaching and super specialty hospitals for Internship-The Future Begins Here Objectives: Enable the students to stabilize the opportunity of new learning environment at different settings. To expose the students for training to a particular job/professional development. Provides a professional working environment and building a network of contacts for good placement. Intended outcome: Improving ones clinical skills and help in developing network in various areas of interest. Learning more about the supportive, challenges of various health care system in India. Best Practices: Title: Blended Learning-: A Move From Traditional to Technology Objectives:  To combine the strengths of both traditional and online teaching methods. To give learners a more engaging learning experience. To retain the student's interest and inculcate self-learning procedural through web sources and ICT Models. To provide the most efficient and effective instruction experience to combine delivery modalities. Intended outcome: Broaden the spaces and opportunities available for learning. Mixing of technology and teaching with online learning components. Enhance the availability and richness of information and resources for students.  More personalized learning environment. | Convection |
|  | TITLE:   | Convection |
| 6. Strategic Term<br>Action Plan 2022 to<br>2023 (short, mid & | Strategic Term Action Plan 2022 to 2023 (short, mid & long term). The Principal presented on the Strategic Term Action Plan 2022 to 2023 (short, mid & long term).   | Ongoing    |



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| long term).                              |
|--|
| By Office of the<br>Principal and Senior |
| Faculty of SDUCON                        |
|  |

#### SHORT TERM

- 1. To increase an admission rate in P.B.B.Sc and M.Sc(N) and to maintain 100% in B.Sc(N)
- To increase university level distinction.
- 3. To improve professional knowledge of teaching faculty
- To conduct regular CNE programme to update faculty and students knowledge
- To encourage faculty to conduct curricular and co-curricular activities
- 6. Apply and procure continuation of affiliation for Basic B.Sc. (N), PB. B.Sc.(N) and M.Sc.(N)
- To enhance quality education, practice, administration and research

#### Intermediate goals (3years)

- 1. To increase the MOUs with other organization
- To initiate student and faculty exchange in curricular and cocurricular activities
- 3. To obtain research grants from ICMR/WHO/any other reputed organization
- 4. To establish research Centre

#### Long term goals (5years)

1. Striving towards institutional excellence across globally

Increase student placement demand globally

- 8. Any other matters addressed with the permission of chairperson and committee members.
- Based on the report given on the enrollment of the students for PB.BSc & M.Sc Nursing, the honorable vice chairman said
- The students getting admitted to P.B.B.Sc & M. Sc Nursing Program will be given 50% fee concession.
- The faculty enrolling for Ph.D Nursing shall be recommended for fee concession at SDUAHER with the Terms and Conditions of servicing the Institution for the Minimum period of two years.

The honourable vice chairman and Advisor of the trust encouraged the faculty and IQAC Members to work towards achieving NAAC- A grade to the Institution by incorporating quality research culture and teaching learning process for better outlook of the Institution.

With above discussion the meeting adjourned at 1.30 pm by vote of thanks by chairman of the committee.

NAAC Coordinator

Dr. Zeanath Cariena J.

HOD, Dept. of Med. Surg. Nsg.
Sri Bechook UH. College of Surg. Nsg.
Sri Bechook UH. Kolar Studgon, Kolar

NAAC Deputy Coordinator

Mrs. Gayathri K.V Dept. of OBG Nsg. SDUCON- Kolar Dr. G. Vijayalakshmi

Prymincipal In Devaraj USDUCON-Kolas Tamaka, Kolar-363103



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# Proceedings of the IQAC Meeting held on - 19-11-2021 at 10:30 AM

The IQAC Committee meeting was convinced on 19-11-2021 at 10:30 AM, in the Council Hall of Sri Devaraj Urs College of Nursing. The meeting was conducted under the guidance of IQAC Chairperson, Dr. G.Vijayalakshmi, who welcomed the members. Dr. Zeanath C.J, IQAC Co-ordinator, highlighted on the agenda to be discussed as specified below: -

- Agenda:
  - 1. Minutes of the previous meeting and Action taken report.
  - 2. Peer Team Assessment and grading.
  - 3. Action plan on implementation of the observation made by Peer Team
  - 4. Quality Assurance system in the Institution.
    - a. ISO 9001-2015.
    - b. Initiation of AAA.
  - 5. MoU's and its outcome.
  - 6. Approval of value added and certificate courses for the Academic year 2021-22.
  - 7. Approval of Best and Institutional Distinctiveness practices for the Academic year 2021-22.
  - 8. Faculty enrollment in Trainer/Instructors courses.
  - 9. Student's exchange Internship program.
  - 10. Any other matters addressed by the chairperson and committee members.

| Membe  | Members Present:            |   |  |  |  |
|--------|-----------------------------|---|--|--|--|
| Sl. No | Name                        | Designation   |  |  |  |
| 1      | Shri. J. Rajendra           | Director & Trustee (A & F), SDUET, Employer               |  |  |  |
|        |                             | Representative  |  |  |  |
| 2      | Shri H. Hanumantha Rao      | Senior Advisor, SDUET, Employer Representative            |  |  |  |
| 3      | Dr. Sheela S.R              | Medical Superintendent, R.L.J.H & RC, Senior Staff        |  |  |  |
| 4      | Mr. Ganesh                  | District Reporter, Udayavani, Society Representative.     |  |  |  |
| 5      | Dr. G. Vijayalakshmi        | Principal, Chairperson & VI Criteria Convener             |  |  |  |
| 6      | Dr. Lavanya Subhashini      | Vice Principal & I Criteria Convener                      |  |  |  |
| 7      | Prof. Mary Minerva          | IV Criteria Convener                                      |  |  |  |
| 8      | Mrs. Jairakini Aruna        | III Criteria Convener                                     |  |  |  |
| 9      | Mrs. Punitha M              | V Criteria Convener                                       |  |  |  |
| 10     | Mr. Rajesh R                | VII Criteria Convener                                     |  |  |  |
| 11     | Mrs. Gayathri K.V           | II Criteria Convener & Deputy Co-ordinator                |  |  |  |
| 12     | Mrs. Umadevi T              | VIII Criteria Convener                                    |  |  |  |
| 13     | Mrs. Shamala                | Asst. Librarian, Library representative                   |  |  |  |
| 14     | Mr. Narayana Swamy          | Sr. FDA, Office Representative                            |  |  |  |
| 15     | Mrs. Pramelamma             | I M.Sc Nsg, Student Representative                        |  |  |  |
| 16     | Ms. Anna Rose               | IV B.Sc Nsg, Student Representative                       |  |  |  |
| 17     | Ms. Mala                    | I P.B.Sc Nsg, Student Representative                      |  |  |  |
| 18     | Prof. (Dr) Zenath Cariena J | HOD Dept of MSN, CNO of R.L.J.H & RC, & IQAC Coordinator. |  |  |  |

Members couldn't attend (leave of absence)

| SI. No Name |                    | Designation                 |  |
|-------------|--------------------|-----------------------------|--|
| 1           | Prof. Bharathi K.V | Principal, Chenne Gowda CON |  |

Based on the agenda, the following discussions and decision were made:

Sri Devaraj Urs College of Nursing Tamaka, Kolar-563103

NAAC CO-ORDINATOR
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Di,



| Agenda   | Antion tolers  | Dogway aibility  | status    |
|--|--|--|-----------|
| Agenda 1 a. Minutes of the previous meeting and Action Taken Report (ATR). | Action taken report  The minute of the previous meeting was held on22-04-2021was read by Dy. Coordinator and confirmed by the Members.   | Responsibility IQAC Co- ordinator & Deputy IQAC Co-ordinator | Completed |
| b. Mock<br>Peer Team<br>Visit  | The Mock Peer Team Visit was completed on 13 & 14 July 2021by the following Assessors:  1.Dr. L.S. Nandeesh – Chairperson.  2.Mr. Anil Patil Kulkarni – Member.  The Mock Peer Team Assessor highlighted on the following:  Institutional Strength  Proactive Management with effective leadership.  ICT-enabled Teaching & Learning environment.  Reasonably Good library with full Automation and a unique LMS system and "Gyan – Bhandar" a learning resource.  Academically good pass percentage achievement.  Conductive academic environment with good career enrichment by introducing applied certificate and value-added courses.  A Good student support through effective mentoring and counselling.  Students are exposed to good clinical training and hands-on skill at parent Hospital which is NABH and NABL accredited.  Eco friendly campus and well-equipped nursing laboratories.  Reasonably good placement services.  Feedback on various parameters were collected and analysed.  Institution adopts several Quality Assurance activities through IQAC.  College web site quite informative and is user friendly. | IQAC Co-<br>ordinator &<br>Deputy IQAC<br>Co-ordinator       | Completed |
| a  | <ul> <li>Institutional Weakness:</li> <li>No financial assistance was availed from funding agencies with the result very limited research work/research centre.</li> </ul>   |  |           |
|  | Limited admission for Post Basic B.Sc.(N) & M.Sc.(N)     No faculty and students exchange programmes with  | Sri Down Princi  | P         |

NAAC CO-ORDINATOR
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Sri Devaraj Urs College of Nursing Tamaka, Kelar-563103



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| ities for<br>Peer Team | (list enclosed)  | Belles hill    |           |
|------------------------|--|----------------|-----------|
| responsibil            | PTV to prepare for the final assessment.   | convenors      |           |
| Allotment              | allotted to incorporate suggestions in the documents/system/process, as observed by the Mock   | criteria       |           |
|                        |  | ordinators and | Completed |
| C.                     | reputed institutions.  Steps have to take to arrange/National/International level conferences/workshop periodically.  Very limited publication in indexed journals.  No Collaborative research with parent Medical College.  Absence of PH. D guides to activate research culture.  No outstanding Awards and Recognition in Teaching learning process by teachers.  Steps have to take to conduct a greater number of Extension and outreach programmes in collaboration with Government/NGO organisation.  Top priority may be given to improve community-based learning.  Provision may be imparted to students for training and Guidance in competitive examination.  Alumni Association activities may be further promoted.  (Report Circulated)  As discussed, and decided the responsibilities were | IQAC Co-       | Completed |

After the above presentation on Action Taken Report, the members deliberated on the present agenda as follows:

| Agenda  |  | Discu                                     | ssion and decis                                  | ion   | Responsibility | Timeline  |
|---|--|---|--|---|----------------|-----------|
| Agenda-2. Peer Team Assessmen t and grading.  The Deputy Co-ordinator, Mrs. Gayathri K.V, highlighted on the report given by the NAAC, PTA. The details of report has linked below. C:\Users\COUNCIL HALL\Desktop\NAAC DOCUMENTS\NAAC Peer Team Score\Graphical Representation based on QnM & QlM.html. |  |   | IQAC Members<br>and Convenors<br>of the criteria | Completed<br>on 27 <sup>th</sup> and<br>28 <sup>th</sup> August<br>2021 |                |           |
| Agenda-3. Action plan on implement  | The IQAC Co-ordinator, Dr. Zeanath C.J., presented to the members on the Action plan for needful approval to aim for higher ranking/grading by NAAC. |   | IQAC Members                                     | Completion<br>of one<br>academic<br>year                                |                |           |
| ation of the observatio   | SI.<br>No  | Area of improvement                       | Action Taken                                     | IQAC<br>Approval  |                | (2021-22) |
| n made by<br>Peer Team  | 1  | Minimal<br>enrolment of<br>P. B. B. Sc. & | On process -                                     | Initiation of<br>starting research<br>centre 2021-22                    |                |           |

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|     | M. Sc. Nursi  | ng  | • Enhancing faculty research  |  |
|-----|---|---|---|--|
|     |   |   | • Publication,  |  |
|     |   |   | • Research grants   |  |
|     |   |   | • IPR – Related activities  |  |
|     |   |   | Initiation of college Journal   |  |
|     | 2 Limited Research Outcome in terms of publication funding and IPR                      | s,  | Initiated the faculty to publish in index journals and apply for funding agencies |  |
|     | 3 Lack of<br>collaboration<br>and MoU's<br>with Institution<br>and relevant<br>agencies | ites  | (Eight Existing)  |  |
|     | 4 Placement Opportunit of the graduates other than parent hospital                      | ies On process  | Initiated external placement agency MOU- Quick link agency                        |  |
| 2-9 | 5 Lack of<br>Structured<br>certificate<br>courses as<br>prescribed<br>guidelines        | Certificate Courses as per HEI Standards for both Faculty and Students for the academic | IQAC approval<br>of Value Added<br>and Certificate<br>Courses done                |  |
|     |   | year-2021-22  |   |  |

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| 6  | Attunation      | 0   | Y-111-11  |
|----|-----------------|---|---|
| 0  | Attracting      | On process  | Initiation of   |
|    | students for    |   | deputation in   |
|    | higher          |   | house staff   |
|    | educational     |   | nurses and B.   |
|    | programs due    |   | Sc. Faculty   |
|    | to              |   | (Five admitted)                                       |
|    | geographical    |   |   |
|    | area.           |   |   |
| 7  | Approaching     | On process -  |   |
|    | the national    | (ICMR/ICSR,   |   |
|    | funding         | DST, TNAI,  |   |
|    | agencies for    | DVT/ NGOs)  |   |
|    | research        |   |   |
|    | resource        |   |   |
|    | mobilization    |   |   |
| 8  | Balancing       | On process -  | approval  |
|    | academic and    | on process  | obtained on   |
|    | clinical        |   | recruitment of  |
|    | workload with   |   | teaching faculty                                      |
|    | limited faculty |   | teaching faculty                                      |
|    | members due     |   |   |
|    | to dual role    |   |   |
|    |                 |   |   |
|    | working         | - ST ST. |   |
| 0  | model.          | 0   | Defined the   |
| 9  | Motivating      | On process –  | TOTAL STREET, ST. |
|    | Experience      |   | budget and  |
|    | and senior      |   | training  |
|    | faculty for     |   | protocol  |
|    | undertaking     |   |   |
|    | research        |   |   |
|    | trainings and   |   |   |
|    | updating their  |   |   |
|    | research        |   |   |
|    | acumen.         |   |   |
| 10 | Connecting      | Planned the   | THE REPORT OF   |
|    | with senior     | networking  |   |
|    | batches of      | process   |   |
|    | alumni          | through   | MEN NO BEN A  |
|    | because of      | placement   |   |
|    | their global    | and Alumni  |   |
|    | location        | Association   |   |

As presented above the members agreed and approved to consider the requests placed before the committee.

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Agenda-4. Quality
Assurance system in the Institution a. ISO 9001-2015.

**b.** Initiation of AAA.

With regard to benchmark the quality teaching learning process, ISO Co-ordinator, Mrs. Jairakini Aruna, presented on the Remote surveillance Audit which was conducted on 02-07-202.



The Audit findings are as follows: -

#### **Positive Strength:**

- 1. Very competitive Staffs
- 2. 100% admission in B.Sc (N) & Diploma Nursing.
- 3. Student feedback above 92%
- 4. Availability of 1204 bedded hospital for practical session.
- 5. Gyan Bhandar-LMS to keep students engaged during the pandemic.
- 6. Initiation for NAAC accreditation.

#### Opportunities for improvements:

- Verification of names and details during online submission to University may be done to avoid errors.
- 2. Analysis of results may be further taken to University level analysis and action plan to be maintained when deviations are found.
- 3. Risk and opportunities may address the risk, opportunity and associated action plan for each programs and year of the student.
- 4. Status of the actions taken to mitigate risk may be monitored to understand the mitigation level.
- 5. Lesson plan vs Actual unity plan vs actual need to be verified for adequacy.
- Internal auditor training for the identified persons may be conducted so that internal audit will be effective.
- 7. IQA report may include the details of sample taken and verified.
- 8. Sanitary certificate and building stability certificate need to be maintained.
- 9. Water portability test need to be done annually last done on 04.03.2020.

Principal, IQAC members, ISO-Co-ordinator and MRM Completion of Academic year 2021-22

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Weakness/Minor NC

NIL.

Recommendations

Recommended for continuation of certificate for ISO 9001-2015

Further, to enhance and strengthen the teaching learning process, the IQAC has requested the members

to approve on **Triple- A**: AAA (Administrative, Academic, Audit) from this Academic year onwards. The approval for the same is obtained.

Agenda-5. MoU's and its

outcome.

The principal of SDUCON, Dr. G. Vijayalakshmi, presented to the members on MoU's, initiated as follows:

| Sl.<br>No. | Title of the<br>Collaborative<br>Activity                        | Name of the<br>Collaborating<br>Agency           | Year & date of<br>Collaboration | Duration |
|------------|--|--|---------------------------------|----------|
| 1          | Faculty Exchange & Student Exchange                              | KLE Institute of<br>Nursing Science              | 21-11-2020                      | 03 Years |
| 2          | Soft Skill Training<br>Services for<br>faculties and<br>students | Parimala<br>consultancy                          | 05-01-2021                      | 3 years  |
| 3          | Services to the need/society-women health.                       | Rotary Club of<br>Bangalore Lake<br>world        | 26-08-2021                      | 3 years  |
| 4          | Services to the society  | Gram Vikas,<br>Honnashetta halli                 | 26-08-2021                      | 3 years  |
| 5          | Faculty Exchange & Student Exchange                              | Allied Health & Basic<br>Science of SDUAHER      | 08-10-2021                      | 5 years  |
| 6          | Faculty Exchange & Student Exchange                              | SDUMC  | 16-06-2020                      | 03 Years |
| 7          | Clinical Training  | R.L.J.H. NH                                      | 29-06-2021                      | 03 Years |
| 8          | Exchange of<br>Library resource's                                | SDUAHER University<br>Library resource<br>centre | 18-08-2021                      | 03 Years |

with tentative planned outcomes for the implementation in 2021-22 Academic years. Based on the presentation, the management encouraged the IQAC to have more of external MoU's, for student and staff exchange, as well as for research initiations.

Responsibility: IQAC, Institutional Research Cell, CNE of SDUCON

**Timeline:** Completion of Academic year 2021-22.

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| Agenda-6.   |
|-------------|
| Approval of |
| Value       |
| Added and   |
| Certificate |
| Courses for |
| the         |
| Academic    |
| year 2021-  |
| 22.         |
|             |

SI.

No

1

2

3

4

5

Course

ACD-VAC-

ACD- VAC -

ACD-VAC-

ACD -CC -

ACSS-04

ACD CC

NSPS-05

Code

YG-01

LS-02

RS-03

With regard to Value Added and Certificate Courses as decided and approved in the Curriculum Committee meeting held on 11-11-2021, the following course of Value Added and Certificate Courses were presented to the members by the Criteria I Convener, Dr. Lavanya Subhashini.

Yoga

values

Title of the course

Life Skills & Human

Research Report &

Advance Competency

**Nursing Practice** 

Standards & Quality Assurance and Accreditation

based Simulation Skills

writing Skills

| ented to<br>anya |   |  | M |
|------------------|---|--|---|
| urs              |   |  |   |
|                  | 2 |  |   |
|                  | 2 |  |   |
|                  | 2 |  |   |
|                  | 2 |  |   |
|                  | 2 |  |   |

Ho

Cr

30

30

30

30

30

IQAC and Completion
Curriculum of
Committee Academic
Members year 202122

After the presentation made, the Members proposed to make 'Research Report Writing' as value added instead of Certificate Course, as a means of strengthening the Best Practice of the Institution.

# Agenda-7. Approval of Best and Institution al Distinctive ness practices for the Academic year 202122.

As per the discussion held on 11-11-2021 during College Curriculum Committee meeting, Mr. Rajesh R, Convenor of 7<sup>th</sup> criteria, presented on the shortlisted best and distinctive practices as below.

#### **Best Practices**

- E-Learning platform for faculty and students: Your Door to The Future.
- Exchange programme with teaching and super specialty hospitals for Internship-The Future Begins Here
  - Blended Learning-: A Move from Traditional to Technology

#### INSTITUTIONAL DISTINCTIVENESS

- Sri R.L. Jalappa Scholarship Award to Economically Backward Students: A Pride & Excellence.
- 2. Adopt-a-Village: Extended Services for Everyone.
- As per the presentation to the tribal Youth: *Ever to Excel*. As per the presentation the management of the college appreciated the focus of Best and Distinctive practice and approved all the practices.

7<sup>th</sup> Criteria Convener and Team IQAC of SDUCON

Completion of Academic year 2021-22

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Agenda-8. Faculty enrolment in Trainer/In structors Courses.

Prof. Mary Minerva, in charge of CNE presented on the shortlisted Training Courses according to Department specific to enable the Faculty to be certified as Trainer/Instructor. Based on the presentation, members deliberated to enrol Staff according to Department specific to empower the Teaching skills as well as to create a Centre of Training to the neighbouring Nursing Institutions. The details of

CNE In charge and IQAC Coordinators Accepted

Completion of Academic year 2021-22

| Nursing<br>Department          | Training programme   | Organization/Ag<br>ency   |
|--------------------------------|--|---|
| Child Health<br>Nursing        | Neonatal<br>Resuscitation<br>Programme   | National<br>Neonatology<br>Forum and Indian<br>Academy of<br>Pediatrics   |
| OBG                            | Capacity building programme-<br>Skills standardization and Simulation training for midwifery faculty             | Indian Nursing<br>Council New Delh<br>National<br>Reference<br>Simulation Centre<br>SGT University,<br>Gurugram.  |
| Community<br>Health<br>Nursing | Clinic –<br>Community<br>linkage: quality<br>care  | Ministry of Health<br>and family welfar   |
| Psychiatric<br>Nursing         | Psychosocial care/support in Disaster Youth Mental Health First Aid Communication skills/Life Skills/Soft Skills | National Institute<br>of Disaster<br>Management<br>Ministry of Home<br>Affairs, New Delh<br>WHO/NIMHANS/<br>USAID |

The IQAC Members agreed and approved on the same. The administrator Mr. J. Rajendra had suggested to Incentivise the Staff/Faculty who completes the course and implement for the students Learning Process.

Rrincipal

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| Agenda-9,<br>Student's<br>exchange<br>Internship<br>program.  | With regard to students exchange internship program, members decided to select Speciality Specific Clinical areas as follows:  A. OBG Nursing- KGF Govt Hospital.  B. Psychiatry Nursing-DIMMS, Dharwad.  C. Pediatric Nursing- Bapuji Hospital, Davanagere.  D. Community postings at Urban and Rural Health centre at rural Kolar.  E. Medical Surgical Nursing postings at HIV centre, SNR, Kolar. | IQAC Co-<br>ordinators and<br>curriculum<br>committee        | Completion<br>of<br>Academic<br>year 2021-<br>22 |
|---|---|--|--|
| Agenda-<br>10.<br>Any other<br>matters<br>addressed<br>by the<br>chairperso<br>n and<br>committee<br>members. | Shrì J Rajendra, Director suggested on the following areas: -  1. To strengthen the weakness noted by the NAAC Peer Team Members.  2. Funding research projects should be conducted by the faculty and publications should be strengthened by the seed amount.  3. Rs. 3, 00,000/- would be released by the trust to start Institutional Research Centre.   | Principal, IQAC<br>Co-ordinators<br>and Criteria<br>Convenor | Completion<br>of<br>Academic<br>year 2021-<br>22 |

With above discussion the meeting adjourned at 1.30 pm by vote of thanks by chairman of the committee.

NAAC Coordinator
Dr. Zeanath Cariena J.
HOD, Dept. of Med. Surg. Nsg.
& CNO-RLJH & RC
SDUCON- Kolar

NAAC Deputy Coordinator Mrs. Gayathri K.V Dept. of OBG Nsg. SDUCON- Kolar

Dr. G. Vijayalakshmi Principal SDUCON- Kolar

Chairperson

AQAR-II

20 CO CONDINATOR

AAC CO CONEGE OF NUTSING

Devardj Urs College of Nursing

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