

SRI	DEVARAJ URS COLLEGE OF NURSING,
	TAMAKA, KOLAR.
	INTERNAL COMMUNICATION FORM

Format No.	ADM-15	
Issue No.	02	
Rev. No.	00	
Date:	01-09-18	

CIRCULAR

This is for the information of all Teaching and Non-teaching staff that Post Surveillance Audit ISO 9001:2015 meeting is scheduled on 24-05-2023 at 4pm in council hall of SDUCON, Hence all are requested to attend the same.

Agenda:

- 3. Discussion on Post Surveillance Audit Report
- 4. Any other

ISO coordinat

Principal Sri Devaraj Urs College of Nursing Tamaka, Kolar-563103

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Sri Devaraj Urs College of Nursing Tamaka, Kolar-563101.

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SL.	Names	Sign.	SL	Names	Sign.
No.	·		No.		0
	Dr.G.Vijayalakshmi.	and the	27	Ms.Swathisree, N.	- Ho
02	Dr. Lavanya Subhashini	nue	28	Ms.Getcia	Guine
	Dr. Zeanath.C.J.	42	29	Mrs.Sreelakshmi	Silon
03	Prof. Jairakani Aruna	18	30	Mrs.Beneta,V	Bunto
04	Prof. Punitha M.	Q.	31	Mrs.Marthasherly	ned
05		14/	32	Mrs.Kanthamma.B.	ter
06	Mrs. Gayathri.K.V	- Ar	33	Ms.Kokila.K	hours
07	Dr. Malathi K.V.	0.2	34	Mrs.Shanthi.D	Carti
08	Mrs. Vani R.	- Une	35	Mrs.Nethravathi.K.	Nee
09	Mrs. Sumana yesu priya	- X	36	Mrs.Susheela Rani	Redul
10	Mrs. T.Umadevi	Real	37	Mrs.Vanajakshi. R.	Veren
11	Mrs. Ramya M.	The		Ms.Greena pushpa	Apria
12	Mrs. Saritha.V	- Dr	38	Mr.Mahesh.S.	ian
13	Mrs. Komaladevi.R	Loro	- 39	Ms. Bharathi.S	RS
14	Mrs. Rashmi.A	Tar a	40	Ms. Vanaja.K.T	ille
15	Mrs. Sumalatha, C.V.	Im	141	Mrs.M.Kavitha.	Kanke
16	Mrs. Kavitha.P	Kil		Mrs.M.Kaviula. Mr.NaveenKumar.H.V	Navee
17	Mrs. Geetha.S.	SV .	43	Mr.Anil Kumar.J.V.	Art
18	Mr. Gajendra Singh	Sine	44	Mrs.Shobha Mathew	C/
19	Mr. Monappa.	- AR	- 45	Mrs.Uma.S.	1100
20	Mrs. K.Gunasheela	Guna	46	Mrs.C.Rukaminidevi	02
21	Mr. Rajendra Prasad	d d	47	Mrs.Lavanya N N	TE
22	Mr. Sampath Kumar	LOF		Ms. Asha S.	Ros
23	Mrs. Pavithra.S.	- E	49	Mrs. Jebamani Hepzibai	TEAC
2,4	Ms.Angeli Monika K	XAB-	50	Mrs. Shwetha S.G	She
24	Ms.Likitha S V	QL	51	Mrs. Malathi B	Malak
26		YAR	52		The
		Office CS	ce Stat		K.
01	Mrs.Sulochana G	2	02		5
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SRI DEVARAJ URS COLLEGE OF NURSING,	Format No.	MAR-08	
TAMAKA, KOLAR.	Issue No.	02	
Action plan for points suggested for improvement	Rev. No.	00	
Action plan for points suggested for improvement	Date:	01-09-18	
	Date: 24-	05-2023	

The Faculty of SDUCON met on 24-05-2023 at 4.00pm in the council for the discussion of Post surveillance audit ISO 9001:2015 under the chairmanship of Dr.G.Vijayalakshmi, Principal, Dr. Zeanath C.J. CNO, and Prof. Jairakini Aruna ISO coordinator, expressed their appreciation on the committed work towards quality substance of teaching learning process. The audit highlighted on the following observations:

Audit team:

Mr. Amith Mali (Lead Auditor)

Mr. Jegatheesan Kalirajan (Technical expert)

Audit summary:

- Level of Maturity of MS is fulfilled.
- Legal and other requirements are fulfilled.
- Risk and opportunities were verified and found basically effective.
- Employees are aware about the policy and objectives.
- Employees are trained and seems to be competent. Shown continual improvements by taking objectives and programs into consideration.
- Verified KPIs and trends of objectives
- Internal audit and MRM conducted once in 6months.
- Internal audit Doc No. IQA-09 conducted on 14th &115th March 2023 Total 0NCR raised.
- MRM DOC no MRM-09 dated 24-03-2023 chaired by principal all agenda points are covered

Positive Points:

- ✓ Feedback from students and parents is 100%
- ✓ No any customer complaint recorded till date
- ✓ Research center for Ph.D is approved in 2022 and No. of faculty applying for research guide recognition is 4

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Opportunities for improvement:

✓ Risk register is evident can be done according to process wise

Weakness and Minor NC-01

- ✓ Audit result: Analysis and evaluation is partially evident. (For 2nd Year BSc Nursing Sociology Subject Assignment 1 dated april2023 criteria for evaluation not evident)
- ✓ Correction: Institution has adopted evaluation format based on Institutional policy statutory guidelines. Hereafter the institution will follow affiliated university/ statutory guidelines to finalize the internal assessment marks.
- ✓ **Root cause** : to improve the students IA marks, the institution has adopted 02 assignments and 03 IA test to finalize IA
- ✓ Corrective: Hereafter the institution will adhere to the statutory / affiliated university norms to finalize internal assessment marks.

Recommendation/result:

✓ Maintenance of certificate recommended

Based on the points suggested for improvement the members discussed and decided the action as follows

SI. No	Area/ Process	Points To Discuss	Discussions And Decision Taken	Responsible	Timeline
01.	Principal & ISO coordinator	Risk register is evident can be done according to process wise	Addressing risk analysis should be done specifically with program wise and department wise before the initiation for academic year 2023-2024	Class coordinator wise, Course coordinator wise and dept. wise for 2023- 24	Completion of the academic year
02	Physical tour	Labs equipment's traceability	All the Labs equipment's should be labeled and master list to be placed on the cupboard for easy traceability	All dept. lab in charges	Completion of academic year
		Signboard for Rain water Harvest Lab equipment's	Location of destiny reaching water location to be placed As per institutional policy	7 th criteria convener and members Concerned	

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		Calibration can be done as per usage Name board for trees	calibration of lab equipment's will be done All the Trees should be named with botanicals name	Lab in charges Environmental cell members	Completion
03	Class coordinators	Analysis and evaluation is partially evident. (For 2 nd Year BSc Nursing Sociology Subject Assignment 1 dated April 2023 criteria for evaluation not evident)	To improve the students IA marks, the institution has adopted 02 assignments and 03 IA test to finalize IA. Hereafter the institution will adhere to the statutory / affiliated university norms to finalize internal assessment marks.	Course coordinators & class coordinators	of academic year
04		 -Examination cell to be created and one faculty to be made in- Charge and -University guidelines to be followed for the conduct of IAs -More faculty can be trained under swayam portal. -In future Internal audit can be done starting from one student admission till the result 		Principal, HODs Class coordinators Course coordinator	Completion of academic year

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ISO coordinator

Encl:

1. Audit Report

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Sri Devaraj Urs College of Nursing Tamaka, Kolar-563101.

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2	Prof. Zeanerthic.7	Prof. & HODMAN	24/05/2023		
3	Dr. Lavarya Subhasher	Vice-Principal2	Nesient J23		
9	prof. Taisallissi Anu	Prof. & HOD MHN	P2416/23		
5.	1 (1)	Proof 4 HOD JOB4	24/5/23		
6.	Jayathi KV	Anoc probenos	eL		
7	V. Sautha	Juton	ler		
8.	Gazindra Singh.	Tutor	Sus		
9.	Sumana Yesu Priza. S. H	Asst. professor	R		
10	Mrs. Konitera.p	Tutor	the		
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13.	Ms-Swathi Shree.N	Neg Talor Asst. profesor	24/5		
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17.	Mr. Lajendra	Tuta	24/3/2)		
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ISO POST AUDIT					
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20	Mrs. Silanshmig	Tutor	upolo y		
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