

EIGHTH INTERNAL QUALITY ASSURANCE CELL MEET

Date & Time: *March 26, 2022 at 2.30 pm*

Venue: *Board Room, IV floor, MAHE Manipal*

Agenda:

1. Review / follow up of actions from previous IQAC meeting
2. Review of Qualitative /Quantitative Metrics.
3. Best practices sharing and new initiatives
4. Review / approval of the Annual Quality Assurance Report
5. Review of Academic and Administrative audit outcomes (if conducted during the period)
6. Stakeholder Inputs (Suggestions for improvement)
7. Activities Planned for the year and their Progress
8. Agenda for Academic Council
9. Any other matter with the permission of the chair

Attendance as per attendance sheet and as downloaded from Teams platform

Discussion:

Vice Chancellor chaired the meeting, Pro Vice Chancellor – Health Sciences and Registrar were present on this occasion, Director, Compliance / Coordinator, IQAC welcomed all the members to the meeting and continued the proceedings as per the agenda.

Sl. No.	Agenda Point	Discussion	Action	Responsibility	Target date
1	Review / follow up of actions from previous IQAC meeting	<p>Discussion Point: To create a document explaining the credit system at MAHE and its comparison with European, Australian, UK and US systems</p> <p>Status: <i>The document was prepared, presented to MAHE Leadership and circulated for feedback from various stakeholders as advised by University leadership. Policy presented to IQAC for approval to be forwarded for ratification in ACM of May 2022</i></p> <p>Discussion: <i>Pro VC suggested to refer UGC's latest draft guidelines on Curriculum Framework and Credit System for</i></p>	Deputy Registrar (Academics) to refer the latest UGC guidelines for 4 year UG programs ,guidelines for online programs and update the document before presenting in ACM	Dy. Registrar Academics.	Before next ACM to be scheduled in May 2022

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		<p><i>Four Year Undergraduate Programme before presenting in ACM. VC suggested to include guidelines for Credit System for Online Programs in this policy document to make it Comprehensive.</i></p>			
		<p>Discussion Point: All MAHE Institutions need to offer consultancies to outsiders to increase the revenue generation.</p> <p>Status: A Committee was constituted to study the strengths of the Constituent Units/ Departments and to identify the areas in which consultancies can be offered to outsiders to increase revenue generation. The Committee submitted its report on July 26, 2021 and also made presentation to MAHE leadership team, including the Heads of the functional Departments concerned on August 20, 2021. Identifying areas and publicising in website is pending.</p> <p>Discussion VC suggested to the Committee Chairman that the process to identify areas in which consultancies can be offered to outsiders and publicising it in website need to be completed by June 30, 2022.</p>	Committee Chairman to complete the process of identifying areas in which consultancies can be offered to outsiders and ensure it is publicized in website .	Committee Chairman- Director, Research	June 30, 2022
		<p>Discussion Point: To rename Conference fund as “Research fund” or “Faculty Development fund”</p> <p>Status: Pending</p> <p>Discussion: It was decided that Registrar will do the needful.</p>	Registrar to issue circular by changing the name of Research fund as Faculty Development fund.	Registrar	April 30, 2022

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		<p>Discussion Point: To make 20% MOOCS courses mandatory in all institutions by next academic year.</p> <p>Status: Template for capturing data regarding the use of MOOCs has been prepared in consultation with Registrar Evaluation and circulated to the constituent units. Data is being compiled.</p> <p>Discussion: <i>Road map to be prepared by Deputy Registrar Academics in consultation with constituent units. Uniform policy to be implemented for considering credits for MOOCs offered through Courseera platform.</i></p>	Road Map to be prepared by Deputy Registrar Academics	Dy. Registrar Academics	June 30, 2022
		<p>Discussion Point: Revenue generated through consultancy needs to be improved</p> <p>Status: Industrial consultancy needs improvement</p> <p>Discussion: Revenue sharing policy may be revisited considering that faculties were reluctant to offer consultancy as they were unhappy with the share ratio.</p>	Policy on Revenue Sharing from consultancy to be revisited.	Director, Research/Chairman Committee	June 30, 2022
		<p>Discussion Point: To implement a barrier free access to facilities for the differently abled.</p> <p>Status: Committee is meeting at periodic intervals to review status. Following facilities provided in 2 Phases</p> <p>Phase 1 <i>15 toilets for differently abled and 3 ramps were taken up in various academic and hostel buildings of Mangalore(7) and Manipal(8) campus in first phase.</i></p> <p>Phase 2 <i>9 toilets for differently abled and 1 ramp has been taken up at various buildings of Manipal Campus</i></p>	Terminology and Signages to be verified across the campus	Pro VC Med. & Dental Sciences and Committee Convenor	April 30, 2022

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		<p>Discussion VC suggested that acceptable terminology and signage which is internationally approved needs to be used across all campuses .</p>			
		<p>Discussion Point: To analyse the demand for unregulated PG courses for last three years and re-fix the intake as the average of last three years' admissions. So that, demand ratio will increase in these programs. - Director, Compliance to collect the data from Admissions and submit it to Pro VC – HS, for re-fixing the intake</p> <p>Status: Proposed Intake matrix prepared in discussion with Pro VC and presented to IQAC</p> <p>Discussion: It was suggested to hold separate meetings with Heads of concerned constituent units with low admissions to discuss the proposed intake matrix.</p>	Director Admissions in Coordination with Pro VC M & D Sciences will convene the meetings.	Director Admissions /HOIs/HODs	Before 2022 Admission Intake
		<p>Discussion Point: Average number of days from the date of last semester-end/ year- end examination to the date of declaration of results.</p> <p>Status: Registrar Evaluation had suggested to revise target to 10 days after 100% implementation of SLCM. SLCM implementations across all Health Sciences (HS) and non-HS institutions are completed and they are in standard support phase. SLCM Support is managed by a combination of MAHE and a team from partner company (Corporate Serve). MAHE Admissions function has been operating on a legacy system and not in SLCM. Admission module implementation in SLCM will begin from April 2022 including integration with NPF (No Paper Form) and the target for delivery is 6 months. SLCM at TAPMI is under implementation by the internal MAHE SLCM team. Target for completion is – July 2022.</p>	<p>Registrar Evaluation to identify the constituent units which contribute to delay in declaration of results on time.</p> <p>Registrar to convene meeting related to SLCM issues.</p>	<p>Registrar Evaluation</p> <p>Registrar</p>	<p>April 30,2022</p> <p>April 15th 2022</p>

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		<p>MAHE BLR campus and MTMC – SLCM implementation is yet to start</p> <p>Discussion IQAC felt that SLCM may need to be reviewed for its effectiveness. Registrar Evaluation need to identify constituent units which are contributing to delay in declaration of results and impacting overall MAHE performance.</p>			
		<p>Discussion Point: Average percentage of student complaints /grievances about evaluation against the total number of students appeared in the examination during last 5 years.</p> <p>Status: Registrar Evaluation is monitoring consistency of Evaluation and reported Nil 'Complaints /grievances about evaluation</p> <p>Discussion VC suggested that, revaluation request may also be considered as Grievance, to improve the valuation process and make it robust</p>	Registrar Evaluation to monitor	Registrar Evaluation	Continuous
		<p>Discussion Point: Explore deploying resources on virtual platform for industries</p> <p>Status: Pure platform is made use of showing our strengths with the possibilities of attracting consultancy offerings. Similar other platforms have also been assessed.</p> <p>Discussion : VC reiterated that consultancy avenues need to be made public through website.</p>	Committee Chairman to do the needful.	Director, Research-Chairman MAHE Consultancy Committee	June 30, 2022

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		<p>Discussion Point: Introduction of Gender Equity policy in MAHE</p> <p>Status: HR is preparing the policy and will submit by April 15th, 2022</p>	HR to submit the policy to MAHE Management	Deputy Director HR	April 15 th 2022
		<p>Discussion Point: Review of Existing Code of Conduct for students, teachers and admin/staff</p> <p>Status: Reviewed by Registrar Evaluation/Directorate of Research /DSA</p> <p>Discussion: It was observed that Teacher/admin/staff code of conduct may need to be reviewed.</p>	Review of Code of Conduct for teaching/non-teaching staff	Deputy Director HR	June 30 th 2022
		<p>Discussion Point: Revisit the student dress code posted in MAHE website considering its sensitiveness to international students</p> <p>Status: DSA revisited the dress code.</p> <p>Discussion: DSA reported that there is no need for any change at present</p>	-----	-----	-----
		<p>Discussion Point: Monitoring activities reinforcing /improving the code of conduct.</p> <p>Status: Reported by 18/40 constituent units</p>	Follow-up with other constituent units	QA team	Continuous
		<p>Discussion Point : Data related to Alumni initiated student exchange programme (metric 5.4.2) need to be captured on a timely basis</p> <p>Status : May need more regular follow-ups</p> <p>Discussions: VC suggest more frequent follow-up meetings between Director Alumni Relations, Director International</p>	Monthly coordination meetings to track the status	Director Alumni Relations ,Director International Collaborations and	On monthly basis from April 2022

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		<i>Collaborations and constituent units for more effective implementation.</i>		Constituent unit representatives.	
2	Review of Qualitative /Quantitative Metrics	<p>Discussion Point: Metrics 1.1.2/1.2.2/1.2.3</p> <p>Status: <i>May need to be closely monitored for improvement</i></p> <p>Discussion: <i>To track closely in comparison with peers</i></p>	To be monitored in comparison with peers	Deputy Registrar Academics	Continuous
		<p>Discussion Point: Metric 1.3.3 % of students who successfully completed the value-added courses imparting transferable and Life skills offered during the year</p> <p>Status <i>Present achievement Value for successfully completing value added courses is 57.83% students.</i></p> <p>Discussion <i>Suggested that more electives to be developed to improve in this metric.</i></p>	Deputy Registrar to follow up with constituent units	Dy Reg. Acad. & HoIs	July 30 th 2022
		<p>Discussion Point: Metric 2.4.2: % of fulltime teachers as Ph.D guides as per the eligibility criteria stipulated by the Regulatory Councils during the year</p> <p>Status: <i>Present achievement Value is 43%.</i></p> <p>Discussion:</p>	Deputy Director CDS to follow-up in consultation with HoIs	Deputy Director CDS/HoIs	June 30 th

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		VC suggested that to improve in this metric, we may ignore the clinicians for PhD guideships. Others may be encouraged to take up guideship.			
		Discussion Point: Metric 2.6.1 Attainment of stated learning outcomes /graduate attributes, giving widely publicity through the website and other documents. Status: Integration in Assessment Process is under progress Discussion: Need monitoring on regular basis	Integration of COs/POs in Assessment Process and giving wide publicity in website and documentation. Deputy Registrar Academics to monitor on regular basis.	Nodal Officers/HoIs/ Deputy Registrar Academics	Continuous
		Discussion Point Metric 3.6.2 Status: May need to be closely monitored for improvement Discussion: To track closely in comparison with peers	To be monitored in comparison with peers	Nodal Officers /HOIs	Continuous
		Discussion Point: Metric 4.2.4: Teaching Hospital / Clinical Laboratory accreditation by any National Accrediting Agency Status: Presently we have all the accreditations prescribed by NAAC except GLP / GCLP Discussion Pro VC Me & D S suggested discussion with Dr Srikala Baliga about the challenges involved in applying for GLP/GCLP accreditations .	To call for a separate meeting to discuss about GLP / GCLP accreditations	Director Compliance	April 15 th , 2022
		Discussion Point: Metric 4.3.5 E-content resources used by teachers/students Status: Faculties to be encouraged to use E-PG Pathshala Discussion: Deputy Registrars Academics to sensitise the constituent units in this regard.	Sensitisation of constituent units about E-PG Patshala by Deputy Registrar Academics	Deputy Registrar Academics	April 15 th , 2022

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		<p>Discussion Point: Metrics 5.1.3/5.2.2/5.2.3</p> <p>Status : <i>May need to be closely monitored for improvement</i></p> <p>Discussion: <i>To track closely in comparison with peers</i></p>	To be monitored in comparison with peers	Nodal Officers /HOIs	Continuous
		<p>Discussion Point: Metric 7.1.2: The Institution has facilities for alternate sources of energy and energy conservation measures</p> <p>Status : <i>Presently we do not have Bio Gas plant</i></p> <p>Discussion: <i>It was suggested to check the availability of Bio Gas facility at ASARE and Hotel Valley View.</i></p>	Director General Services to check and update.	DGS	April 15 th , 2022
3	Best practices sharing and new initiatives	<p>Discussion Point: Best Practices:</p> <ol style="list-style-type: none"> 1. Curriculum Conclaves involving all stakeholders for Design and Development of Curriculum 2. Student Centric Methods in Teaching, Learning and Evaluation with focus on experiential learning, deployment of innovative pedagogies 3. Comprehensive Research policy and Performance Management system leading to improvement in Quality of Research output. 4. Effective Deployment of IT in all Admin and Academic Processes 5. Improving Alumni data management using MS Teams for effective retrieval of data at various locations 6. Transparent HR practices and effective employee welfare measures at MAHE 7. Digitalization of Examinations 	-----	-----	-----

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		<p>Discussion Point: New Initiatives:</p> <p>Presented and available in the IQAC office.</p>	/////	/////	/////
4	Review / approval of the Annual Quality Assurance Report	<p>Discussion Point: Submission of AQAR for 2020-21</p> <p>Status: Ready for submission</p> <p>Discussion: IQAC approved to submit.</p>	To submit the AQAR for AY 2020-21	IQAC Coordinator	March 31, 2022
5	Review of Academic audit outcomes (if conducted during the period)	<p>Discussion Point: Academic and Administrative Audit Outcomes</p> <p>Status:</p> <ul style="list-style-type: none"> Internal audit outcomes reviewed in Management Review Meetings of Aug 25th /27th in 2021 /Feb 28/March 3rd in 2022. Reports of Academic Audits conducted at constituent units were received from 13/40 constituent units. Following constituent units have completed the audits Institutions: MCODES MPL, MIM, MIT, MSAP, MSIS, PSPH, WGSHA, KMCMLR, MCON.MUTD: Library & Information Sciences, Design, European Studies, Commerce ISO Surveillance audit NC details presented. NC closure will be submitted in next 15 days 	<p>Action taken were presented with root cause analysis.</p> <p>The outcomes were reviewed and institutions were informed to submit ATR. Follow-up with remaining institutions .</p> <p>NC Closure report to be submitted to TUV Rheinland</p>	QA	<p>Completed</p> <p>Continuous</p> <p>April 15th, 2022</p>

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6	Stakeholders inputs/Suggestions for Improvement	<p>Discussion Point: Inputs from Stake holders:</p> <p>Students:</p> <ul style="list-style-type: none"> • Student Representative from MCODES Mpl reported dissatisfaction in SLCM and opined that earlier software SIS was more user friendly. • Student rep. from MIM Manipal expressed dissatisfaction with format of feedback on faculty. The student also informed that due to some issues in SLCM ,they were not able to access results in SLCM for two weeks after announcement of results <p>The concerns were noted and will be shared with HoIs for further action.</p> <p>Discussion: VC has noted the inputs.</p> <p>Alumni / Industry rep: Not present in the meeting</p> <p>Teacher rep: Dr. Neeta Inamdar raised the issue about Employee need perception Also suggested representation from Faculty of Humanities, Liberal Arts and Social Sciences in DoR to coordinate, facilitate and improve research output.</p> <p>Discussion: VC informed that need perception was captured at exit interviews, apart from annual feedback opportunity given to faculty/staff. VC suggested to have a coordinator to represent Faculty of Humanities ,Liberal Arts and Social Sciences .</p>	<p>These inputs will be shared with HoIs for necessary action as applicable and feasible . HoIs to report to VC about the action planned /taken .</p> <p>One faculty to be identified for coordinator ship</p>	<p>Respective HoIs / HODs</p> <p>Registrar</p>	<p>June 30, 2022</p> <p>April 30th, 2022</p>

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7	Activities Planned for the year and their Progress	<p><u>Discussion Point: Activities Planned and their status</u></p> <table border="1"> <thead> <tr> <th>Activity name</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td>NAAC Reaccreditation</td> <td>IIQA was submitted on 1st June 2021. It was approved on Aug 12,2021. NAAC SSR was submitted on Oct 7 ,2021. DVV queries were addressed. Now MAHE SSR status is Prequalification passed. Assessment fee also has been paid. Peer Visit Dates have been suggested. Awaiting NAAC response.</td> </tr> <tr> <td>ISO Internal auditor training</td> <td>Conducted new auditors training programme on Jan 10th - 12th , 2022. 40 Auditors were trained</td> </tr> <tr> <td>Orientation on Academic audit</td> <td>Nodal officers were comfortable with the format and were informed to suggest any changes/improvements if they identify in future audits .</td> </tr> <tr> <td>Quality Mandate implementation</td> <td>All Task Forces and Activities identified as per Mandate and are under implementation .</td> </tr> <tr> <td>Orientation on Outcome Analysis of POs/Cos - Half day Workshop</td> <td>Registrar Evaluation reported that it has been completed.</td> </tr> <tr> <td>ISO Surveillance audit for 9K, 14K & 50K standards</td> <td>Completed</td> </tr> <tr> <td>Data submission for THE WUR, QS WUR and NIRF</td> <td>Completed except THE WUR,which will be submitted by March 31,2022</td> </tr> <tr> <td>Integrated Data Governance system</td> <td>Pilot study initiated with almost all the institutions. Status to be reviewed again on March 29 ,2022</td> </tr> </tbody> </table>		Activity name	Status	NAAC Reaccreditation	IIQA was submitted on 1 st June 2021. It was approved on Aug 12,2021. NAAC SSR was submitted on Oct 7 ,2021. DVV queries were addressed. Now MAHE SSR status is Prequalification passed. Assessment fee also has been paid. Peer Visit Dates have been suggested. Awaiting NAAC response.	ISO Internal auditor training	Conducted new auditors training programme on Jan 10 th - 12 th , 2022. 40 Auditors were trained	Orientation on Academic audit	Nodal officers were comfortable with the format and were informed to suggest any changes/improvements if they identify in future audits .	Quality Mandate implementation	All Task Forces and Activities identified as per Mandate and are under implementation .	Orientation on Outcome Analysis of POs/Cos - Half day Workshop	Registrar Evaluation reported that it has been completed.	ISO Surveillance audit for 9K, 14K & 50K standards	Completed	Data submission for THE WUR, QS WUR and NIRF	Completed except THE WUR,which will be submitted by March 31,2022	Integrated Data Governance system	Pilot study initiated with almost all the institutions. Status to be reviewed again on March 29 ,2022	QA Team	Continuous
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8	Agenda for Academic council	<p><u>Discussion Point:</u> Agenda for Academic Council</p> <p><u>Status:</u> Document on Credit System at MAHE</p>	Will be presented in ACM of May 2022 subject to implementations of suggestions by IQAC .	Deputy Registrar Academics	ACM May 2022																		

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9	Any other matter with the permission of the chair	<p><u>Discussion Point:</u> Any other points/suggestions</p> <p>Vice chancellor spoke about Peer Team visit for NAAC reaccreditation and suggested to have a meeting of all the Heads of Institutions/Functional Heads at the earliest. Also suggested to prepare a presentation to orient the colleges about what is expected from the colleges during Peer team visit along with suitable checklists. It was suggested to have Mock audits before the actual Peer Team visit to prepare the institutions .</p>	To arrange a meeting of HOIs/Functional Heads and prepare PowerPoint presentation ,checklists and arrange Mock Audits as suggested	QA Team	April 10, 2022

Meeting was adjourned with the vote of thanks by the Director / Coordinator, IQAC.

Sd/-

Director / Coordinator, Internal Quality Assurance cell