

## 9th INTERAL QUALITY ASSURANCE CELL MEET

Date & Time: July 20, 2022 at 10.00 am

Venue: Board Room, IV floor, MAHE Manipal

## Agenda:

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

Attendance as per the attendance register

## Discussion:

Vice Chancellor chaired the meeting, Pro Vice Chancellor – Med. & Dental Sciences and Registrar were present on this occasion, Director, Compliance / Coordinator, IQAC welcomed all the members to the meeting and informed about the NAAC Reaccreditation status like MAHE's Grade, CGPA Score, validity period etc. and continued the proceedings as per the agenda.

Sl. No.	Agenda Point	Discussion	Action	Responsibili ty	Target date
1		Discussion Point: All MAHE Institutions need to offer consultancies to outsiders to increase the revenue generation - VC suggested to the Committee Chairman that the process to identify areas in which consultancies can be offered to outsiders and publicizing it in website need to be completed by June 30, 2022			



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		Status: The mails had been sent to HOI s and a meeting with institutional coordinators was held. Following this, MCOPS, MCODS, DOC and MSLS have updated their website by including consultancy tab on website. Under the guidance of Director TAPMI, Prof Jeevan Arakal,Dr Naveen Salins and Dr. Vikram Baliga are studying about the concept of consultancy as applicable for various constituent units of MAHE. For this exercise, they may need finance data related to consultancy. After that, they will come out with a report in terms of clear cut policy on Consultancy and royalty sharing, website update etc.	<ul> <li>Director Research to facilitate meeting of the group of faculties with Director Finance .</li> <li>Group of Faculties to submit report.</li> </ul>	Director Research/Dir ector Finance Prof Jeevan Arakal, Dr Naveen Salins and Dr. Vikram Baliga	Aug 14, 2022 Aug 31, 2022
			• Discussion of Report with Management and Approval	Director Research and Faculty group	September 15,2022
			• Finalizing and Website update	Director Research/HoIs	Sept 30,2022



Sl. No.	Agenda Point	Discussion	Action	Responsibili ty	Target date
		Discussion Point: To make 20% MOOCS courses mandatory in all institutions by next academic year.			
		<u>Status</u> :. Draft policy regarding adoption of MOOCs in the curriculum submitted to Registrar for advice on June 17 <sup>th</sup> , 2022.	Draft Policy to be reviewed and approved for implementation. Forward for Academic Council approval.	Deputy Registrar (Academics)	Aug 13 <sup>th</sup> , 2022
		Discussion VC expressed doubt about the acceptance of courseera platform by UGC. Hence, he suggested that, let the students take course era courses and evaluation be done by our faculty, so it would be acceptable to UGC. He also suggested that, gradually we should enhance the weightage upto 40% MOOCS courses as per regulatory body guidelines, wherever possible.	Monitored for implementation by Deputy Registrar Academics.		
		Discussion Point: To implement a barrier free access to facilities for the differently abled - VC suggested that acceptable terminology and signage which is internationally approved needs to be used across all campuses. Status: Phase – 1 completed. Phase 2 - Biochemistry & KMC Office – Work in progress, Physiology Building – work yet to be started.	Committee to review the signage and ensure proper implementation of acceptable terminology. Time bound implementation to be reviewed & presented in next IQAC meeting in Sept 2022	Committee for empowerme nt of Persons with disabilities	Aug 13 <sup>th</sup> ,2022 Next IQAC
		<u><i>Discussion:</i></u> VC Suggested that, before next NAAC visit, all our buildings should be differently abled friendly.			
		<u>Discussion Point</u> : 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 - It was suggested to hold separate meetings with Heads of	Admissions planned for Academic Year 2022- 23 to be submitted by Director Admissions	Director Admissions	Aug 6 <sup>th</sup> ,2020



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		concerned constituent units with low admissions to discuss the proposed intake matrix <u>Status:</u> Programs with poor intake have been identified. Dr PLNG will initiate a discussion shortly with the HoI of concerned constituent units. <u>Discussion</u> Dr PLNG and Director Compliance have received the data for last 3 years from admissions. Awaiting Admissions plan for this year in terms of intakes. After receiving the data Pro VC (Med. & Dental Sciences) & Director Compliance will come out with some suggestions in consultations with concerned HoIs.	Discussion with HoIs and re-fixing intake.	Pro VC (Med. & Dental Sciences) & Director Compliance	Aug 13 <sup>th</sup> , 2022
		<ul> <li><u>Discussion Point:</u> Average number of days from the date of last semester-end/ year- end examination to the date of declaration of results - Registrar Evaluation to identify the constituent units which contribute to delay in declaration of results on time</li> <li><u>Status:</u> <ol> <li>All the HOIs have been sensitised regarding the seriousness of this with respect to NAAC accreditation.</li> <li>SLCM implementation is in progress for health sciences programs too. Once it is in place, result declaration could happen only in a few days after last exam.</li> <li>Corrective steps are being taken to get the results published with in 15 days of completion of examination and we are hopeful of achieving this target in the next evaluation cycle.</li> </ol> </li> <li><i>Discussion</i> VC said that, autotomy of evaluation is not that they are outside the ambit of academic audit. It is the responsibility of Evaluation dept. to do audit of autonomous college after every exam, see if there are any short comings, whether they have implemented</li></ul>	Registrar /Registrar evaluation to call for a meeting and implement the suggestion by VC.	Registrar /Registrar Evaluation	Aug 13 <sup>th</sup> , 2022



Sl. No.	(Deemed to be University under Section 3 of the U Agenda Point	Discussion	Action	Responsibili ty	Target date
		University's new grading system etc. He further said that, some of the autonomous units have still not implemented new grading system. Autonomous units are not outside the examination guidelines of the University. A fresh circular to be sent to all the autonomous units about the scope of autonomy.			
		A separate meeting with Registrar Evaluation to be convened on this			
		Discussion Point: Registrar Evaluation had suggested to revise target of declaration of results 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 - Registrar to convene meeting related to SLCM issues.			
		Status: An initial meeting with MAHE functional Departments concerned has been conducted on May 9, 2022, chaired by the Vice- Chancellor. The meeting(s) with the HoIs/ HoDs concerned were held on 15th and 16th June 2022, chaired by the Vice-Chancellor. Advised to give the training to those who face the problems / issues and review meeting to be conducted after 3 months			
		Discussion Point: Average percentage of student complaints /grievances about evaluation against the total number of students appeared in the examination during last 5 years VC suggested that, revaluation request may also be considered as Grievance, to improve the valuation process and make it robust	Registrar Evaluation to look into the suggestion given by Registrar for possible implementation and report status in next IQAC meeting.	Registrar Evaluation	Next IQAC
		<u>Status</u> :	Review of NAAC Criteria 2 metrics for improvement.	Director Compliance	August 13 <sup>th</sup> , 2022



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		Registrar Evaluation ensures sensitizing of the faculty through HoI's to achieve the goal of maintaining the result changes after revaluation less than 1 %. It is continuously monitored.			
		Discussion: VC said that, if our evaluation process is robust, there will not be much result changes. Also, if our examination process is rigorous, the outcome should not change. This impacts significantly in our accreditation score.			
		Registrar suggested that, Paper seeing is to be facilitated before grading, for the sake of transparency and also to reduce the re-evaluation related grievances.			
		VC suggested to look at all the parameters of Evaluation in NAAC, benchmark and do brainstorming sessions and see how we can come out with a better data which is critical for evaluation.			
		Discussion Point: Introduction of Gender Equity policyin MAHE - HR to submit the policy to MAHEManagement ( submit by April 15th ,2022)Status :Registrar informed that the policy is ready and will beout in couple of days	Policy launch and communication	Dy. Director HR	August 15, 2022
		<u>Discussion Point</u> : Review of Existing Code of Conduct for students, teachers and admin/staff - It was observed that Teacher/admin/staff code of conduct may need to be reviewed.			
		<u>Status</u> Director Student Affairs said that, we have code of conduct for students in University level and also separately at individual college level. University level	Documentation of Awareness session on Code of Conduct and Monitoring through	Director Student	Next IQAC



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		code of conduct is available on the website. Code of Conduct for staff is available in Peoples Manual.	Committees . This will be reviewed in next IQAC meeting.	Affairs / Dy. Director HR	
		Discussion It was discussed that, training/awareness on Code of conduct, Ethics should be documented and evidence to be maintained for both students and staff. Code of Ethics for staff to be reviewed and updated if required. Also, a monitoring committee needs to be formed to oversee this.	Documentation on Training on Professional Ethics for students/faculty	HoIs	Continuous
		<b>Discussion Point:</b> Metrics 1.1.2/1.2.2/1.2.3 - To track closely in comparison with peers	Dy Registar Academics to implement the suggestions and report status in next IQAC meeting.	Dy Reg. Acad.	Next IQAC
		<u>Status:</u> Being monitored in comparison with peers. Comparison is available in compliance office			
		Discussion VC suggested that we need to monitor these metrics by benchmarking with latest assessment and see how we could improve			
		Pro VC suggested to capture percentage of revisions in syllabus, before it comes to BoS or Academic Council			
		VC also suggested that, whenever a new program comes for preliminary meeting, before approving that, we should receive the entire syllabus of that program for all the semesters. If it is not there, we should not approve such program.			
		<b>Discussion Point:</b> Metric 2.4.2: % of fulltime teachers as Ph.D guides as per the eligibility criteria stipulated by the Regulatory Councils during the year	Centre for Doctoral Studies to monitor on continuous basis. Review in next IQAC meeting.	Deputy Director CDS	Next IQAC Meeting



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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			
		Status:The eligibility Criteria have been relaxed for Co-Guideship to improve the current state % of full time faculty asguides.As of May 2022, excluding resignations/ retirements, the presentachievement value is 27.73 %.After ignoring clinicians for PhD guideship, the presentachievement value would be 38.61 %Discussion:VC suggested that we need to improve in this metric, aswe have lost few points in the recent NAAC assessment			
		<b>Discussion Point:</b> Metric 4.2.4: Teaching Hospital /         Clinical Laboratory accreditation by any National         Accrediting Agency-Pro VC M& D S suggested discussion         with Dr Srikala Baliga about the challenges involved in applying         for GLP/GCLP accreditations .         Status: Meeting has been conducted with Dr. Shrikala on 5 <sup>th</sup> July,         2022. Director Compliance & Pro VC – M&D Science are         studying the guidelines. We may need to form a Committee to         identify the labs to be accredited for this accreditation.         Director Compliance suggested formation of committee         under the leadership of Dr Shrikala Baliga to identify the         labs that can be accredited. It was suggested that MSLS,         MIV & MCBR to be explored for this accreditation	To form a committee to study which lab can apply for GLP / GCLP accreditation.	Registrar	Aug 13 <sup>th</sup> ,2022



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		Discussion Point:5.1.3 Average percentage of studentsbenefited by guidance for competitive examinationsand career advancement offered by the Institution5.2.2 Average percentage of placement /self-employedprofessional services of graduating students5.2.3 Percentage of the graduates in the precedingacademic year, who have had progression to highereducation - To be monitored in comparison with peersStatus: Data will be presented once the AQAR for 21-22 iscompiledDiscussionVC opined that, this point is very important for us bothin NAAC and NIRF. Hence, Graduate outcome needs tobe increased by 20% by next one year and another areais Perception where 20% increase is urgently required.This may be considered as KPA by HoIs.	To discuss this in the next Acd. & Admn Heads meet, as an important deliverable by HoIs	Office of the Registrar	Next Acd. & Admn Heads meet
		Discussion Point:Metric 7.1.2:The Institution hasfacilities for alternate sources of energy and energy conservation measures- It was suggested to check the availability of Bio Gas facility at ASARE and Hotel Valley ViewStatus:FIVV Bio Gas Plant is a demo unit and currently non- functional. However, it is available at ASAREDiscussion :VC suggested to put atleast 2-3 demo units. MIT can be the best place for this. Mr. Derrick to take up this project.	Derrick to make a study and suggest suitable locations .	Director Gen. Services / Mr. Derrick I Joshua	Nov. 30, 2022



Sl. No.	D BY UP (Deemed to be University under Section 3 of the UG Agenda Point	Discussion	Action	Responsibili	Target date
2	Review of actions initiated based on NAAC peer team	Director Compliance presented the NAAC Peer team 2022 observations & recommendations		ty	uate
	observations - Peer Team Report 2022 Observations	<u>Discussions :</u> The observations will be forwarded to the concerned for taking necessary actions and will present the ATR in the coming IQAC meetings	Observations related to NAAC	Respective Dept. Heads	By Next IQAC meeting
		VC said that, all the intra mural funds to be monetized and recorded including scholarship for PhD scholars. Also, have to form 10-15 focus research groups for increase in intra mural funds, and it should happen from top down only, as it doesn't happen bottom up.	Monetization of intramural funds /Formation of focus groups	Director, Research	Aug 31 <sup>st</sup> ,2022
		About Alumni association registration, VC suggested exploring registration of the same as per NAAC guidelines	Exploring the option of Registration of Alumni Association	Registrar & Director Alumni	By Next IQAC
		Also, VC said to explore the possibilities of starting NSS in line with VSO	Starting of NSS	Registrar	By Next IQAC
3	Review of Qualitative /Quantitative Metrics.	Will be discussed/reviewed in the next meeting after compiling the AQAR 2021-22		Director Compliance	Next IQAC meeting
4	Best practices sharing and new initiatives	Discussion Point: Best Practices: Discussion:			
		VC suggested that following activities can be showcased as Best Practices: 1. VSO	To send the format for documenting Best Practice to the concerned process owner to fill and submit	VSO Coordinator/ Dir. Student Affairs/	Aug. 31, 2022



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		2. Student Support Center		DGS / Mr Derrick	
		3. Energy Savings			
		VC also suggested to talk to NAAC and get clarification as to whether yearly two best practices to be submitted or is to two for entire 5 years.	To get clarification from NAAC about the number of Best Practices to be submitted .	Director Compliance	By next IQAC
		Discussion Point: New Initiatives:			
		Will be presented and discussed in the next MRM.			
5	Review / approval of the Annual Quality Assurance Report	AQAR for 2020-21 submitted AQAR for 2021-22 to be submitted by Dec 31 ,2022	To start compiling AQAR for 2021-22	IQAC Coordinator	Sept. 30, 2022
6	Review of Academic audit outcomes (if	Discussion Point: NAAC Internal Mock audit - Held from May 2 – 7, 2022. All the observations were sent to concerned institutes to take necessary actions for closure of the observations. NAAC External Mock audit - Held on May 16 & 17, 2022. Shared the audit findings among the auditee institutes for closure of the findings	Mock Audits to be conducted Internal: October 2022 External: November 2022	Director Compliance	Oct. 31 & Nov. 30, 2022
	conducted during the period)	DiscussionVC suggested to have Mock audits as a yearly activity.It should be an IQAC activity.2 months beforesubmitting AQAR, Internal mock audit should beconducted and one month before submitting AQARexternal mock audit to be held, based on the AQAR. So			



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		that, their findings can be incorporated in the AQAR before submission.			
7	Stakeholders inputs/Suggestions for Improvement	<ul> <li><u>Discussion Point:</u> Inputs from Stake holders:</li> <li><u>Students:</u></li> <li>Manipal Institute of Management(MIM) – Satisfied with all academic and administrative processes</li> <li>Manipal Centre for Humanties (MCH) –Suggested that, it would be good if the institution could conduct some remedial programs for slow learners.</li> <li>Manipal College of Dental Sciences (MCODS) Manipal: Satisfied with the Academics and the facilities offered at MAHE Campus. Suggested following</li> </ul>	This point needs to be noted and discussed in next HoI Meeting	Registrar's office	Next HoIs meet
	Financial support by MAHE for the Nationa	<ul> <li>Few Improvements in infrastructure</li> <li>Provision of designated area for interns to sit</li> <li>Financial support by MAHE for the National conference being organized by their institution</li> </ul>	Dean MCODS Manipal to discuss with VC about these suggestions	Dean, MCODS Manipal	By Aug 13 <sup>th</sup> , 2022
		•KMC Manipal – Satisfied with all academic and admin processes. Presented the plan of Student council like designing a new portal and providing sanitary napkin disposable machine at Hostels. VC suggested that, Sanitary napkin vending machine and Disposable machine to be installed in all the floors of Girls Hostels	To explore the suggestion given by VC	Dir. Gen Service & Dir. Student Affairs	By Next IQAC
		•MIT Manipal – Satisfied with all academic and admin processes . However, suggested following			



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		• Need more clarity about Evaluation process.	Dr. Preetham to convey the issues to MIT Director	Dr. Preetham Kumar	Immediatel y
		• Address SLCM issue to enable to see results on time.			
		• Expressed concern about the non-allocation of Program electives for the fourth-year students even though the classes are due to commence from 25th July 2022			
		Alumni / Industry rep: Suggested that consultancy extended by MAHE constituent units to be made known to the industries through website/portal	To be looked into by the group which has taken up the project .	Faculty Group of Prof Jeevan, Dr Naveen and Dr Vikram	By Next IQAC
		Teacher rep: Dr. Neeta Inamdar suggested to centrally establish Research Method Center under Directorate of Research, which will help PG Students, PhD scholars and faculty members	MAHE DoR to discuss and inform status in next IQAC meeting	Director Research	By Next IQAC



Sl. No.	(Deemed to be University under Section 3 of the UGC Agenda Point	Discussion		Action	Responsibili ty	Target date
8	Activities Planned for the year and	Discussion Point: Activities Planned and their status		QA Team	Continuous	
	their Progress	Activity name	Status			
		NAAC Reaccreditation	12 member Peer team visited main campus on May 23 – 25, 2022, and re – accredited with A++ Grade with CGPA 3.65			
		ISO Internal auditor training One Batch Completed. One more batch of training will be conducted shortly				
		Orientation on Academic audit	Completed			
		Integrated Data Governance system	Under prog	gress		
		NAAC Mock Peer team visit at SMU	Scheduled	from July 23 – 26, 2022		
		NIRF – India Ranking 2022 analysis and review to plan the strategy for next year	Will be arr	anged Institution wise shortly		
9	Agenda for Academic council	Discussion Point: Agenda for Academic Cou	ıncil	Approval for MOOCS policy		
10	Any other matter with the permission of the chair	gradually to other programs. Suggested to set up a people from all fa		Registrar to form a committee involving 4 people from all faculties, who need to recommend how to implement this	Registrar	August 31, 2022



Sl. No.	Agenda Point	Discussion	Action	Responsibili ty	Target date
		Dress code: Director Gen Services requested dress code for students visiting Messes and requested HoIs intervention for strict implementation	To discuss in HoIs meet	Registrar's office	Next Acd. & Admn Heads meet
		Dr. Neeta Inamdar said that, while implementing the dress code, it should be carefully done, as we have lot of foreign students coming to our campus. This is a sensitive issue.	VC said that, we need to orient the foreign students as to what sort of dresses they are expected to wear. This should be informed to them well before their arrival.	All HoIs & Heads of Teaching depts	Immediatel y
		VC expressed his reservation over Allied health students wearing OT scrubs as Uniforms and without changing they go to hotels, travel in buses etc	Requested Director Student Affairs to look into this. Also, to discuss with Dean, MCHP	DSA	

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

Sd/-

Director / Coordinator, Internal Quality Assurance cell