Internal Quality Assurance cell, DMIMS (DU)

Rural Base, Global outlook

Annual report, 2021

<h1 style="text-align:center; color:red;">Meetings of Internal Quality Assurance Cell, 2021</h1>

1. **Internal Quality Monthly Review** (IQMR): The Internal Quality Monthly Review (IQMR) was held every month to review the overall functioning of the University.

2. **Internal Quality Assurance Quarterly Meeting**: The Quarterly IQAC meetings, preceding Joint College Council meeting, were held as depicted below in table 1. The recommendations arising out of the Quarterly meeting were submitted to Joint College council and Academic council for consideration.

Sr no	Date of IQAC meetings
1.	16.01.21
2.	10.06.21
3.	18. 10.21

<h1 style="text-align:center; color:red;">IQAC Recommendations</h1>

A. Recommendations of Internal Quality Assurance cell (IQAC)
16.01.21

1. The Student Apprenticeship program be rechristened as 'Standard Apprenticeship' Program and be considered as one of the initiatives towards actualization of NEP 2020.
2. **'School of One Health Sciences'** be established in DMIMS (DU) to actualize the recommendations of Planning and Monitoring Board. A collaboration be worked out with the Government Veterinary College/ University for the purposes of broadening the horizons of the School.
3. Venture into Application for 'Institute of Eminence' for the year 2021-22 as and when the next cycle of application is initiated by the UGC and MOE.
4. The International Accreditations wing of IQAC recommends venturing into QS Star Ratings and TIMES Impact rankings with a tangible 5 year action plan for International Accreditations.
5. Allocation of a team of experts with a targeted action plan for preparing UGC - 'SWAYAM' courses. Quarterly IQAC to monitor.
6. Application for copyright of three Literary work "An operational framework for Validity and Authenticity of theory examination in a Competency Based Curriculum",

'Utility document on policy frame for reference for mentee colleges' and 'Concept note on Research Advancement in High priority areas under Intramural Grant Scheme' presented in Quarterly IQAC Jan 2021.

7. The operational framework for Validity and Authenticity of theory examination in a Competency Based Curriculum be piloted from 2nd Year CBME batch onwards and the experience generated thereto upon completion of the first admitted batch under the CBME Mode be catalogued and forwarded to the competent authorities for their usage thereon for policy framework as a 'basal or a referral document'.

8. The Concept note on Research Advancement in High priority areas under Intramural Grant Scheme be incorporated in Research Policy of the Institute with provision of financial bearing in the existing intramural grant budget of R&D.

B. Recommendations of Internal Quality Assurance cell (IQAC)
10.06.21

1. To adopt the documents on:

   a. Competency Based Dental Education, hi-tech hiTouch model of instructional strategy for CBDE, roll out plan & Faculty development and propose the same to MoHFW, GOI , DCI and NITI Aayog.

   b. Elective in Obstetric Ultrasound for MD/MS Obstetrics and Gynecology – A value added course', introduce the same in PG OBGY curriculum from 2021-2022 academic year with a provision of credit transfer of the said course for higher studies.

   c. Education program on Systematic literature review for Doctoral scholars' as a value added course in Doctoral program of DMIMS(DU)' for Doctoral scholars. The scope of the said course to be extended to PG program of the University.

2. To identify indicators of International accreditation parameters for QS and TIMES and prepare a road map in accordance with PDP inclusions and target setting and to apply for the relevant international accreditation as per the timeline proposed by IRAW of IQAC .

3. To revise Institutional PDP in terms of deletion/revision of existing indicators, inclusion of new indicators in tandem with NEP, UGC, NIRF, NAAC, QS, TIMES & IoE parameters and present the same in Planning and Monitoring board meeting scheduled in July 2021 for its approval with modifications.

4. To create an umbrella mechanism of the University for meaningful student engagement in all curricular initiatives and related decision making.

5. To segregate the 'DMIMS preparedness plan for 3rd wave of COVID – 19' into two parts; Academic pursuits and Public health with inclusion of Vaccination drive and Psychosocial support initiatives to frontline health workers. The related parts of the document to be shared with Divisional Commissioner and DMER. To conceptualize a blueprint for actualization of the seven opportunities, as envisioned in DMIMS preparedness document, in operational terms.

6. AAA recommendations as approved by IQAC:

a. Resetting of evaluation parameters to be worked up for DMMC by IQAC for AAA

b. A pre-audit meeting to be done for internal AAA with a purpose to seamlessly integrate central information to peripheral units. The Pre audit to follow actual audit which shall ensure on spot remedial corrections.

c. To consider Pharmacy and Physiotherapy college in the stage stabilization and modify AAA parameters of evaluation accordingly.

C. Recommendations of Internal Quality Assurance cell (IQAC)
18. 10.21

1. A **Centralized Institutional Knowledge Portal** must be established which will act as a Central Depository and Repository of DMIMS both for Digital and Physical Documents , Data Security and Safety and devise norms for Disaster Management.

2. Every constituent unit of DMIMS (DU) must have an assortment of **Value Added** courses, **Interdisciplinary** courses and **Electives** for every academic program. A range of value added courses and Interdisciplinary courses must be planned for every professional year (incl Internships) and program respectively. A range of Electives must be offered for all academic programs including AHS, AS and ODL/Online program. Interdisciplinary programs may be planned in alignment with 17 Sustainable Developmental Goals (SDGs) given by UN.

3. Training of teachers in preparation and delivery of e-content must be one of the quality initiative of IQAC. Certification of every teacher in handling technology for TLA must be ensured.

4. The University **Website** must be aligned with the requirements of NAAC manual for Health Sciences University. Accordingly a list of inclusions that are mandatorily to be displayed on the website must be worked out by IQAC and suggested to the website committee for necessary action.

5. **Impact analysis** of various initiatives for Potential and Rapid learners and SDL initiatives based on different learning styles must be included in departmental presentations.

6. All future activities (Scientific, Outreach & extension, student club etc) reports must be submitted to respective monitoring authorities with **geotagged** photographs.

7. Academic and Administrative audit must include **audit of all Autonomous cells and Finance** in order to ensure proper data management for NAAC Quantitative metrices. The draft audit parameters must be worked out by IQAC aligned to NAAC mandates. All AAA audits must include verification & validation of related records, since it will amount to 65% weightage in 4th NAAC assessment.

8. An action plan for **diligent planning, systematic implementation, strict monitoring and robust feedback mechanisms** must be worked out for Medical, Dental, Ayurveda, Nursing, Physiotherapy and Pharmacy education by respective Dean Academics & Education Units regarding Competency Based education. Gap analysis w.r.t implementation of Competency based education must be done. Process owners must be identified in every college to lead the mandatory inclusions of competency based education.

9. A Competency Based Education wing to be created in IQAC. Apart from the conventional approach to fulfill various CBME inclusions, following novel methods may be adopted;

    a. Integration of all three settings in ECE

    b. Matrix based Integration and Alignment

    c. Baseline analysis of Learning styles & individual traits and Clinico-psychological orientation must be ascertained to guide Self-directed Learning and choice of electives respectively. SDL approach must aim to Institutionalize SDL philosophy and strive to Individualize and Internalize SDL skills.

    d. Mayo clinic model must be adopted for training in Real life settings.

    e. AETCOM training must be oriented towards competency based rather than module based with relevant inclusion of Ethical dilemmas and humanities.

10. In view of possibility of National Eligibility exit Examination (NExT) from 2023, following initiatives are warranted:

a. Conscious implementation of CBME (As per approved plan) and strict monitoring mechanisms

b. Integrated and clinically oriented instructional pedagogy

c. Increased Opportunities for Hands on student experience by optimal inclusion of community based learning, Simulation based learning and learning in clinical settings.

d. Systematic introduction of Peer (near peer) teaching for skill training (in SVL & Clinics) eg : evening clinics and student lead in SVL

e. Introduction of Value added courses, Interdisciplinary courses & Electives aligned to CBME & NExT Principles.

f. Real time assessment of all skills including AETCOM and its certification.

g. Introduction of student Portfolios for assessment and record of learning trajectory

h. Rigorous Internal Assessment completely aligned with NExT

i. Augment quantity and quality of Level II questions within eQB and its extensive use in Continuous assessments, so as to prepare learners for Step 1 NExT.

11. The **Academic Appraisal program** (AAP) of the University must be revisited and revised to address the necessary inclusions of undergraduate Competency based Education.

12. Flexible Curricula may be designed for academic programs of AHS, AS, ODL / Online in terms of Multiple entry/Multiple exit , opportunities for cross disciplinary and interdisciplinary learning, allocation of credits, creation of Academic Bank of credits for allocation, transfer and redemption of credits.

13. **Every Constituent Unit of DMIMS (DU) must evolve 'Best Practices' that corroborates with the five NAAC core values. These Best Practices must be unique to every constituent unit so as to showcase a wide and diverse arena of consequential initiatives**.

IQAC to identify a range of such 'Best Practices' as an illustrative list, some of which are as follows;

IQAC initiatives aligned to NAAC core values

1. **Timeline for Accreditations and Rankings, DMIMS (DU)**

S.N	Accreditations and Rankings	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
1	**NAAC**	AQAR	AQAR	AQAR	AQAR	AQAR + SSR	NAAC 4th cycle
2	**NIRF**	NIRF Overall University Medical Dental	NIRF Overall University Medical Dental Research	NIRF Overall University Medical Dental Research	NIRF Overall University Medical Dental Research	NIRF Overall University Medical Dental Research Pharmacy ODL/Online (?)	NIRF
3.	**NABH**	NABH – Ayurveda hospital	NABH – Dental hospital	NABH – AVBRH	NABH – Ayurveda hospital + Wana	NABH – Dental hospital	
4	**NABL**	NABL : Ethics Committee, DMIMS	NABL – CRL Wardha + Wana COVID	NABL : CCL, Wardha	NABL : Ethics Committee, DMIMS, CCL Wana , IVF Wardha	NABL – CRL Wardha + Wana COVID	NABL : CCL Wardha
5	**NBA**						NBA
6	**ISO**	Yearly audit	Yearly audit	Yearly audit	Yearly audit	Yearly audit	Yearly audit
7	**ARIAA**	ARIAA	ARIAA	ARIAA	ARIAA	ARIAA	ARIAA
8	**FICCI**	Excellence in Faculty	Excellence in Faculty University of the Year	Excellence in Faculty University of the Year	Excellence in Faculty University of the Year Excellence in Enabling Research Environment	Excellence in Faculty University of the Year Excellence in Enabling Research Environment Excellence in Internationalization of Education	Excellence in Faculty University of the Year Excellence in Enabling Research Environment Excellence in Internationalization of Education
9	**QS I gauge**	-	QS I gauge				

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10	**QS I gauge E LEAD**	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD	QS I gauge E LEAD
11	**QS India rankings**			QS India rankings	QS India rankings	QS India rankings	QS India rankings
12	**QS Asia rankings**				QS Asia rankings	QS Asia rankings	QS Asia rankings
13	**QS Star rankings**					QS Star rankings	QS Star rankings
14	**QS World Rankings**						QS World Rankings
15	**THE Ranking**					THE Ranking	THE Ranking
16	**TIMES Impact Rankings**			TIMES Impact Rankings (Selected SDGs)	TIMES Impact Rankings (Selected SDGs)	TIMES Impact Rankings (Selected SDGs)	TIMES Impact Rankings (Selected SDGs)
17	**INQAAHE** (International Network for Quality Assurance Agencies in Higher Education (INQAAHE)					INQAAHE	
18	**Accreditation service for International schools , colleges & Universities (ASIC)**				ASIC		
19	**Institute of Eminence**			Institute of Eminence			
20	**Guinness book of world records**				Guinness book of world records		
21	**Asia Pacific Quality Network (APQN)**			APQN			

2. An operational framework for Validity and Authenticity of theory examination in a Competency Based Curriculum

The Undergraduate Competency based Medical Education (CBME) was introduced from the year 2019 by Medical Council of India (Regulations on Graduate Medical Education (Amendment), 2019). **CBME** has been defined as an **outcome-based approach** to the design, implementation, assessment and evaluation of a medical education program using an organized framework of competencies. **Assessment plays a crucial role in in CBME implementation**. Traditionally expressed as a product of validity, reliability, acceptability, feasibility and

educational impact; **assessments are cornerstone to an authentic Competency based curriculum, with validity and authenticity as its important attributes**.

One of the assessment tools that cater to various levels of cognitive domain of learning is theory examination. In a view to address the cognitive skills of various competencies, a question paper in theory exam must to be carefully designed taking into consideration **construct, content and difficulty leve**l. A validated **question bank and test blueprints are major pre-requisites** for generating a balanced question paper within a Competency based curriculum. Test blueprints define parameters for assessment, review assessment for alignment to competencies and learning objectives and also guide instructional activities, thereby enriching the **validity** of the test tool.

Hence, while implementing CBME, addressing the entire spectrum of competencies within question bank (by questions of varied construct and content) and test blueprints, in a systematic way, is desirable for a valid and authentic theory examinations.

Aim: To ensure validity and authenticity of theory examination in a Competency Based Curriculum

Objectives: To propose;
1. Organisation grid of subject specific competencies into instructional objectives in MK:DK:NK areas
2. Organisation of questions (type, distribution and difficulty level) aligned with competencies and instructional objectives
3. Formula for calculation of quantum of questions (as specified in objective no 3) within question bank
4. Table of specifications for Primary and Secondary Test blueprint aligned with competencies &instructional objectives.

3.   **Compendium on COVID-19 Initiatives of DMIMS(DU)**

4.   **Utility document on policy frame for reference for mentee colleges (L-103908/2021)**

Datta Meghe Institute of Medical Sciences (Deemed to be University) has been accepted as a Mentor institution to provide Mentorship to at-least five mentee institutions under the PARAMARSH scheme initiative of University Grants Commission since September 2020. It aims to provide mentorship to the mentee institutions linked to it, with a vision that each mentee institution shall get accreditation of National Accreditation and Assessment Council (NAAC) with a minimum score of 2.5 in two years i.e. by 2022 for mentees linked in year 2020.

Datta Meghe Institute of Medical Sciences (Deemed to be University) structured an activity plan of activities to be undertaken for mentorship stretched throughout the year as a part of this ongoing mentorship. The objectives of activities included:

- Training of staff for proper process, documentation and presentation Sharing of knowledge, information and resources
- Opportunities for research collaboration and faculty development
- Guidance and encouragement to institutions to identify the best practices

Accordingly, an activity planner was prepared for the mentee institutions linked to DMIMS (DU) as:

Activity Plan for DMIMS (DU) 'Paramarsh' Mentorship-

S.N	Month	Activity
1	Month 1	Identification of Mentee institutions and creation of MOU of mentee institutions with mentee college
2	Month 2	Identification of Nodal officers and constitution of IQAC at all mentee colleges
3	Month 3	Orientation on core values and concept of quality Onsite interaction on core values of IQAC
4	Month 4	Workshop - Nodal officers from all the institutes will Revisit/ Frame the Vision & Mission of the Institute. Further discussion and framing of Goals and objectives aligned with Vision and Mission of the institutes.
5	Month 5	Orientation on - Principles of SWOC and its operationalisation Activity - SWOC Analysis of the Institute Co-coordinators will conduct focused discussion with major officials of the institute and develop roadmap for conversion of weakness into strengths and challenges into opportunities and discuss with faculty allotted
6	Month 6	Orientation regarding Accreditation frameworks and its various parameters and experience sharing as per criteria Criterion 1: Curricular aspects Criterion 2 : Teaching-Learning and Evaluation

7	Month 7	Orientation regarding Accreditation frameworks and its various parameters and experience sharing as per criteria
		Criterion 3: Research Consultancy and extension
		Criterion 4: Infrastructure and Learning Resources
8	Month 8	Orientation regarding Accreditation frameworks and its various parameters and experience sharing as per criteria
		Criterion 5: Student Support and Progression
		Criterion 6: Governance, Leadership and management
9	Month 9	Orientation regarding Accreditation frameworks and its various parameters and experience sharing as per criteria
		Criterion 7: Innovations and best practices
10	Month 10	Facilitating - Genesis and stabilization of best practices and innovations
11	Month 11	Mentoring on strategic planning and development of Perspective development plan document
12	Month 12	Facilitating the implementation, monitoring and evaluation process

Accordingly, a standing committee has been notified by the university comprising of resource persons and administrative staff for conducting these activities. Resource persons are linked to activities related to their expertise as mentors for the activities. Mentors plan for details of activities to be conducted and resource material to be shared to mentee institutions. Also, Faculties are linked to mentee institutions to review the progress of works and take follow-up of accomplishment of allotted tasks on a regular basis.

Such a framework is expected to produce following benefits.

Benefits to Mentee institutions:
- Enhancement in the overall quality of mentee institutions
- Enhancement in the profile of mentee institutions as a result of improved quality of research, teaching and learning methodologies
- Receives support in the professional development of Academics
- Increased exposure and speedier adaptation to best practices
- Advantage point in NIRF ranking and NAAC accreditation

Benefits to Mentor Institution
- Additional learning acquired from experience
- Intellectual challenge of working in different environment
- Opportunities for increased collaboration
- Satisfaction of helping newer institutions and see them succeed

Guidelines for mentee colleges regarding making application to NAAC for institutional accreditation

- Mentee institution is expected to submit the assignments during sessions timely and get them approved from mentor faculties.
- Documents created by mentee institutions for upcoming NAAC at their own institution shall be submitted to mentors for suggestions and improvement wherever possible.
- It will be the responsibility of mentee colleges faculty participating in the program to undergo timely creation and validation of documents for NAAC
- Mentee institution has to mandatorily apply for NAAC within one year of completion of Paramarsh training program. Thus, Mentees linked in 2019-20 should apply for NAAC latest by 20201 and get accredited with NAAC scoring a minimum score of 2.5 by 2022.
- Mentees have to themselves prepare and implement their accreditation plan and also share it with mentors as it will be reviewed by DMIMS Mentor team and UGC on a timely basis.

5. **Introduction of Standardised Patient (SP) for Skill training in Medicine, Dentistry, Ayurveda, Physiotherapy and Nursing Faculty of DMIMS(DU) to ensure equal learning opportunity of core clinical competencies**

Simulated/Standardised patients are the persons trained to portray a patient with specific clinical condition in a realistic and standardized way (where they give a consistent presentation which does not vary from student to student) and can be effectively used for teaching and assessment clinical/physical examination skills and consultation, in simulated teaching environments or in situ. They can also be coached to give feedback and evaluate student performance. SP based training is enormously evidenced to have a significant impact on healthcare education for developing clinical and professional skills.

In order to combat the **enormous challenge in clinical training during this global emergency situation**, SP based training in **history taking, physical examination, clinical reasoning, critical thinking, problem solving , team skills, inter-professional skills and clinical judgment** is need of the hour. This will ensure provision of equal opportunity to every learner to practice in a safe and controlled environment for mastery over essential

clinical skills. It can also serve as a pre-requisite to obtain training in a real life clinical setting.

Aim:

The aim of introducing Standardised patient in skill training is to ensure equal learning opportunity of core clinical competencies to every learner in a safe and controlled setting.

Objectives:

1. To offer ethical ground for practice of clinical skills and multiple opportunities to practice those skills in a safe and controlled environment.
2. To foster clinical skills (History taking skills, procedural skills, physical examination, clinical reasoning skills etc.) in an Indian Health Professional Graduate.

6. **Plan of on-boarding and Integration of the off campus centre of DMIMS (DU), Datta Meghe Medical College , Nagpur with various Academic, Research and Administrative process and practices of DMIMS :** Integration Of Wana Off Campus With The Dmims (Du) Campus

7. **Action plan of DMIMS regarding its preparedness for the 3rd wave of COVID pandemic: IQAC gave a detailed action plan to combat with anticipated 3rd wave of pandemic based on experiences and global evidences.**

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MANAGING GROWTH AND IDENTIFYING OPPORTUNITIES AMIDST 3RD WAVE

1. Focus on UG research publication
2. Strengthen automations
3. Enrich digital resources
4. Develop a DMIMS repository of digital learning resources
5. Focus on COVID related grants - Modern medicine & Ayurveda
6. Emerge as center for training and capacity building in COVID care
7. Strengthen National and International collaborations for joint activities on virtual / blended mode

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8.   IQAC proposed three drafts for consideration to Academic council :
   1. Draft Competency Based Dental Education (CBDE)
   2. ICT based Teaching Learning and Assessment strategies during COVID-19 Pandemic and Tangible Outcomes
   3. The Roll out model of CBDE

Sharad Pawar Dental College And Hospital
Datta Meghe Institute of Medical Sciences
Deemed to be University
Established under section 3 of UGC Act 1956 PLACED UNDER CATEGORY-1
(GRADED AUTONOMY BY UGC)

HI-TECH HI-TOUCH MODEL OF COMPETENCY BASED DENTAL EDUCATION

Dental Education Unit
Sharad Pawar Dental College & Hospital
Datta Meghe Institute of Medical Sciences (Deemed to be University), Sawangi (Meghe), Wardha-442001

9. 'Validation of Outcome based Electronic Question bank by learners : A quality initiative towards Empowering learners as proponents of curricular change DMIMS(DU)'

Datta Meghe Institute of Medical Sciences (DU), as a policy, considers feedback of all stakeholders viz. Students, Academicians, Parents, Patients and Administrators in curriculum revision cycles through a structured and validated approach. Student representation is mandated in all statutory and non-statutory bodies of the University. Student feedback on Curriculum, Teaching Learning, Assessments, Examinations, Academic ambience and Infrastructure is periodically taken, actionable points are derived and corrective measures are adopted accordingly. The implementation of these corrective measures are monitored through a robust monitoring mechanism of monthly college councils, quarterly college councils, joint college councils and IQAC.

Towards fortification of this best practice of the University with regards to engaging learners in various curricular decisions, a novel initiative was adopted wherein the entire revised electronic question bank of various courses (Medicine, Dentistry, Ayurveda, Nursing, and Physiotherapy) of the University, mapped with course outcomes (CO), was shared with the
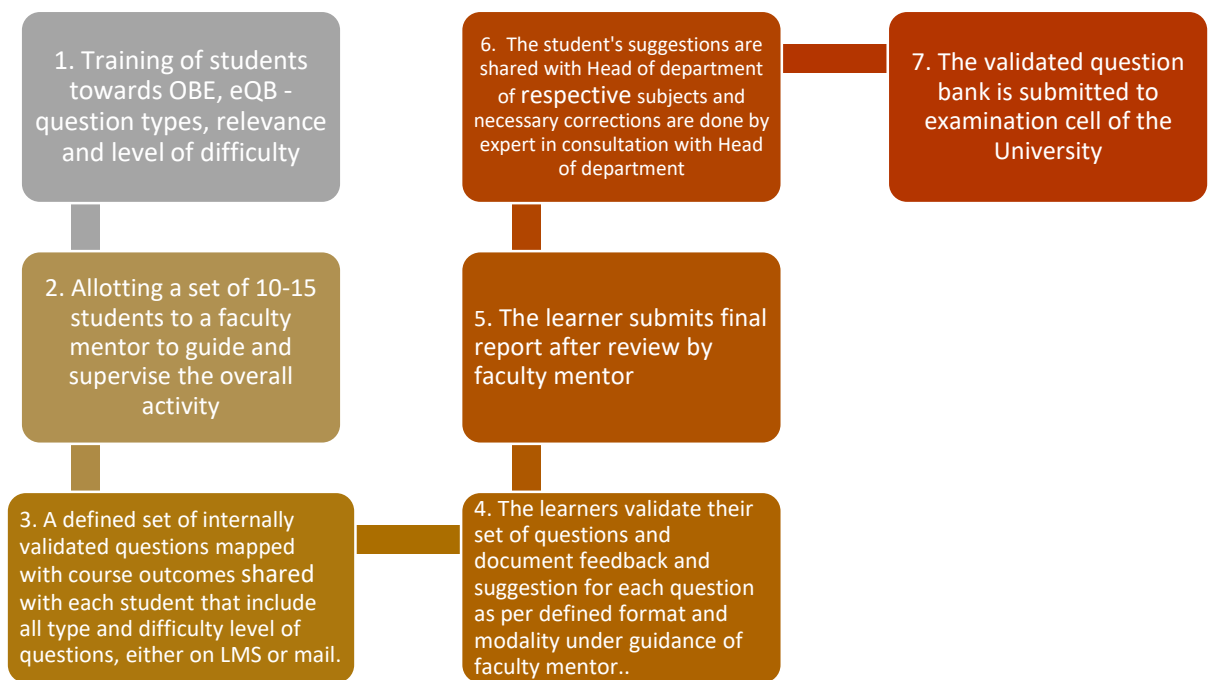
students in order to obtain their feedback and suggestions through a structured SOP (Fig 1). The idea was to obtain learners perspective thereby imparting value to curriculum design, implementation and evaluation the initiative was mainly focussed to bring about meaningful student engagement and improve validity of theory examination particularly in terms face validity.

Aim:

To engage learners meaningfully towards improving the face validity of revised outcome based electronic question bank of various educational programs of the University**.**

Objectives: The objectives of the initiative were to;

1. Formally train the learners towards University policy about outcome based education (OBE), program and course outcomes, mapped questions with course outcomes and type, level and difficulty level of questions of questions in electronic question bank to ensure meaningful engagement.

2. Systematically integrate the learner's role in curriculum design, implementation and revision, thus supporting an Institution-wide cultural shift that empowers students to play a significant role in decision making.

3. To materialize collaborative learning of students under guidance of faculty with a solutions-based approach to electronic question bank of the University.

1. Training of students towards OBE, eQB - question types, relevance and level of difficulty	6. The student's suggestions are shared with Head of department of respective subjects and necessary corrections are done by expert in consultation with Head of department	7. The validated question bank is submitted to examination cell of the University
2. Allotting a set of 10-15 students to a faculty mentor to guide and supervise the overall activity	5. The learner submits final report after review by faculty mentor	
3. A defined set of internally validated questions mapped with course outcomes shared with each student that include all type and difficulty level of questions, either on LMS or mail.	4. The learners validate their set of questions and document feedback and suggestion for each question as per defined format and modality under guidance of faculty mentor..	

SOP of validation of outcome based eQB by learners

10. **'Elective in Obstetric Ultrasound for MD/MS Obstetrics and Gynecology – A value added course'**

Recently the PG curriculum of Medical Education has been revised and designed to competency based (4). The main goal of this revised competency based curriculum for post graduate course (MS) in Obstetrics and Gynaecology is to produce a competent Obstetrician and Gynaecologist. One of the outcomes to achieve this goal is to produce a competent Obstetrician and Gynaecologist who can *perform* obstetrical ultrasound in normal and abnormal pregnancy including Doppler(page 1 point d)(5).

The subject specific course objectives pertaining to this goal in both cognitive (page 2) and psychomotor (page 6) domains mention the ability to *only interpret* the ultrasound pictures and not perform independently.(5) Hence, in order to translate the goal of MD/MS OBGY comprehensively, a value added course addressing the competencies related to performance of Obstetric ultrasound is desirable.

An Elective in Obstetric Ultrasound in MD/MS Obstetrics & Gynaecology is hereby proposed as a value added programme to the present post graduate curriculum in obstetrics and gynaecology to fill the gap in the programme goals and course objectives of present curriculum prescribed in CBME in relation to ability of the practicing obstetrician having post graduate degree (MS in Obstetrics and Gynaecology) to perform basic obstetric ultrasound and thereby giving comprehensive basic antenatal care in community.

SCOPE: This elective will offer an opportunity to gain additional skill training in performing a basic obstetric ultrasound and report it to post graduate students of obstetrics and gynaecology, as mentioned in the goals of the present CBME curriculum. They will be trained under direct supervision of experts from the department of radio diagnosis to learn nuances of

performing obstetric ultrasound. As they actually walkthrough and undergo the skill training during this elective the learner will feel confident to perform and report findings of basic obstetric ultrasound examination of all three trimesters of pregnancy. Thus this comprehensive course will enhance the skill of future practicing obstetrician to give comprehensive care to while providing antenatal care under one roof.

11. New indicators proposed by IQAC aligned with NIRF, AQAR, QS, TIMES, IoE :

S.N	Indicators	Accreditation/Ranking/Policy
1	Co-Authored Activities	IoE
2	Faculty Exchange	IoE
3	Sustainability Development Goals	IoE, QS, Times
4	Internationally Qualified Faculty	IoE, QS, Times
5	Multi-disciplinary courses	IoE, QS, Times
6	Research Contribution to Country	IoE, QS, Times
7	Number of programs with integration of SWAYAM courses	NIRF
8	Number of programs with integration of SWAYAM courses	NIRF
9	Contribution of alumni Financial/Donations/Placements/Student exchange/Endowments	NAAC
10	Twinning programs	NEP, UGC
11	Joint degree programs	NEP, UGC
12	Dual degree programs	NEP, UGC
13	Courses with embedded apprenticeship program	NEP, UGC
14	Lateral entry exit courses	NEP, UGC
15	Multiple entry exit courses	NEP, UGC
16	Credit banking, credit redemption, credit transfer	NEP, UGC
17	Number of electives / Honours/ Minors/ Value added courses	
18	Multilingual courses	NEP
19	Vocational courses	NEP

Quality centric Faculty Development programs by IQAC

1. FDP workshop series on CBME

S.N	FDP/Workshop	Participants
1.	Curriculum Implementation and Support Program (CISP II) for CBME	Faculty of Pre/Para/Med allied/Surg allied
2.	Revised Basic course workshop	Faculty of Pre/Para/Med allied/Surg allied
3.	Early Clinical Exposure in CBME	Faculty of 1st Prof yr
4.	Alignment and Integration in CBME	Faculty of Pre/Para/Med allied/Surg allied
5.	Skill training in CBME	Faculty of Pre/Para/Med allied/Surg allied
6.	Conduction of OSCE / OSPE	Faculty of Pre/Para/Med allied/Surg allied
7.	Problem Based Learning & mPBL	Faculty of Pre/Para/Med allied/Surg allied
8	Attitude Ethics and Communication Skills (AETCOM)	Faculty of Pre/Para/Med allied/Surg allied

2. Developing partnerships in Education Research: A collaborative initiative of **DMIMS (DU) and University of Sydney**, Innovations in Clinical teaching and Assessment: In a novel initiative to further the partnership in Education Research; Datta Meghe Institute of Medical Sciences (DU), Wardha and University of Sydney, Australia conducted a Symposia on 'Innovations in Clinical teaching and Assessment' on 17th March 2021.

DMIMS (DU) ties up with Sydney University to conduct symposia

■ **Principal Correspondent**

IN A novel initiative to further the partnership in Education Research, Datta Meghe Institute of Medical Sciences (DU), Wardha and University of Sydney, Australia conducted a Symposia on 'Innovations in Clinical teaching and Assessment' on Wednesday. The event was conducted on a virtual platform with 160 selected clinical teachers and academicians as participants from both the countries.

Dr Shailendra Sawleshwarkar, Program Director, PG coursework programs, Sydney Medical School and gave the opening remarks. Dr Vedprakash Mishra, Pro Chancellor, DMIMS(DU) delivered the inaugural address wherein he emphasized the need of such symbiotic collaborations resulting in resilient operating systems in academic and research-intensive Universities. He interestingly denoted this move as a transcendental turn in integration of knowledge and practices. Guest speaker, Dr Aileen Barett, Editor in Chief of 'The Clinical Teacher' and deliberated upon 'Scholarly networks, Research, Development & Collaboration in Health Professions'. Dr Tripti Waghmare, Director, IQAC, Dr Neema Acharya, Professor and Head, Obstetrics and Gynaecology and Dr Samarth Shukla, Vice Dean presented three innovative educational projects from DMIMS(DU) and similarly, Dr Priya Khanna, Dr Linda Taoube, Medical Educator, Dr Annette Burgess, Associate Professor and Dr Chris Roberts, Professor Medical Education, Sydney Medical School presented three educational projects. Dr Swanand Pathak, Director, School of Health Professions Education & Research moderated the Panel discussion on the innovative projects presented during the symposia.

IQAC participation in Accreditations and Rankings

S.N	Accreditation	Categories of Accreditation
1	**NIRF 2021 Rankings**	1. Overall 2. University 3. Medical colleges 4. Dental college
2	**ARIIA Rankings**	Innovation Achievements
4	**FICCI Awards**	Excellence in Faculty (Shortlisted amongst 5 HEI)
5	**AAA**	Internal audit

Standardization of Process and Copyrights

1. Credit framework for various programs under Datta Meghe Institute Of Medical Sciences **L-98561/2021**
2. Standard operating procedure for assignments as part of e academic teaching learning process, **L-99246/2021**
3. Standard operating procedure for e practical discussions as part of e academic teaching learning process, **L-99505/2021**
4. Standard operating procedure for e attendance discussions as part of e academic teaching learning process , **L-99245/2021**
5. DMIMS model of competency based assessment framework for theory examinations , **L-102034/2021**
6. Logbook for foundation course of first professionals of undergraduate competency based medical education **L-102618/2021**
7. Concept paper on Academic Guidance Centre , **L-102840/2021**
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10. Utility Document for Paramarsh Mentee Institutions Under Datta Meghe Institute Of Medical Sciences Deemed to be University, **L-103908/2021**
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