

Date : 18- 03 - 2019

# **MNR MEDICAL COLLEGE & HOSPITAL**

## **Academic and Administrative Audit Committee**

### **MNR MEDICAL COLLEGE & HOSPITAL**

**2018 - 2019**

**Dr.Babu Rao, Professor & HOD Ophthalmology**

**Dr.Bhavani, Professor & HOD OBGY**

**Dr.Irshad Hussain Askari, Professor & HOD  
Physiology**

**Dr. Gayathri , Associate Professor Anatomy**

**Dr. Ravi D. Mala, Associate Professor Pharmacology**

## **Terms of reference for the Academic and Administrative Audit Committee**

- 1.** The Academic and Administrative Audit is expected to provide an objective insight to the MNRMCH on the level of holistic quality improvements.
- 2.** The audit process will involve escorted tours to the physical facilities, interaction with heads of departments, faculty, MNRMCH officials, students, their parents, alumni, employees and other stakeholders and review of documents pertaining to the information included in the Self Study Report. The members may request for any additional documents/clarifications that may be required for successfully completing the audit process. The audit process will also include the assessment of the action taken report provided by the MNRMCH on the recommendations made by the Peer Team that conducted the first cycle of NAAC assessment and accreditation.
- 3.** The period of visit may be usually for three days, but could be extended with mutual agreement if the Committee feels that such extension is necessary in the interest of effective completion of the audit process, ending with an exit meeting in which the Chairman and members of the AAA Committee will brief the Vice Chancellor and other officials of the MNRMCH with a provisional summary of their findings.
- 4.** Observations made during the visit and interactions/verifications conducted by the AAA Committee in a narrative style with appropriate headings and bullet points. Extracts from any of the material presented by the MNRMCH or documents reviewed by the Committee may be included in the report if required. The report will cover, as far as possible, all the seven criteria adopted by the NAAC on Institutional Accreditation. The report will also include at the end, an analysis of the Strength, Weakness, Challenges and Opportunities and conclude with Recommendations if any, that the Committee may feel relevant in enhancing the quality of higher education provided by the MNRMCH.
- 5.** Handing over of signed copies of the AAA Committee Report may be carried out later in a formal meeting by the Committee members to the Vice Chancellor and officials of the MNRMCH on a mutually agreed date, coupled with a faculty-briefing meeting by the AAA committee experts.
- 6.** Observations made during the visit and interactions/verifications conducted by the AAA Committee in a narrative style with appropriate headings and bullet points. Extracts from any of the material presented by the MNRMCH or documents reviewed by the Committee may be included in the report if required. The report will cover, as far as

possible, all the seven criteria adopted by the NAAC on Institutional Accreditation. The report will also include at the end, an analysis of the Strength, Weakness, Challenges and Opportunities and conclude with Recommendations if any, that the Committee may feel relevant in enhancing the quality of higher education provided by the MNRMCH.

7. Handing over of signed copies of the AAA Committee Report may be carried out later in a formal meeting by the Committee members to the Vice Chancellor and officials of the MNRMCH on a mutually agreed date, coupled with a faculty-briefing meeting by the AAA committee experts.

S. No.	Activity	Yes	No	Points
1	T/L schedules are displayed and sufficient time is given to faculty for preparation	✓		80
2	Judicious use of T/L aids	✓		85
3	Measures are taken to improve T/L methods, based on the student performance	✓		80
4	Theory papers and Answer scripts are coded	✓		85
5	Special care taken for slow learners	✓		80
6	Additional guidance is given for fast learners	✓		76
7	Departmental monthly review meetings conducted, pertaining to academics and administration	✓		81
8	Students participation in co-curricular activities is encouraged by the department	✓		86
9	Mentoring of the students is done	✓		83
10	Updating the files / documentation are done regularly	✓		75
11	Regular interdepartmental academic activities are carried out	✓		86
12	Faculty feedback from students is taken	✓		90
13	Completed / Ongoing research activities are carried out in the department	✓		80
14	Recent publications by the faculty	✓		79
15	Innovative / new best practices adopted in the department for the previous batch	✓		90
16	Attending to Faculty development programs	✓		85
17	Honour to the Faculty	✓		75
18	IQAC	✓		60
19	Best Practices	✓		75
20	<b>Overall assessment</b>	✓		82
	<b>Total Points</b>	82		82

Department: AAA Committee

## Strength, Weakness, Challenges and Recommendations

### Strength

- MNRMCH has succeeded in establishing its brand identity based on the quality of its educational programs, patient care and safety records and commitment to research, community services and extension activities.
- The sprawling, well-maintained campus with its good landscaping, gardens, lawns, sports and play fields and spacious grounds provide a healthy environment and enhance the academic ambience.
- MNRMCH has a team of highly qualified and dedicated faculty who value quality in education, research and healthcare and are eager to establish higher quality benchmarks for the institution.
- The achievements of MNRMCH Faculty Development and its recognition as a Regional and Nodal Center by the Medical Council of India mark a high point in academic excellence by the MNRMCH. The subsequent establishment of education units by the Dental, Pharmacy and Allied Health Sciences Faculties adds yet another dimension to the MNRMCH's commitment to achieve excellence in education.
- There is rich scope for interdisciplinary learning in the campus.
- The conscious commitment to excellence in research and publications in the last five years has started showing results and its effects are evident in the outlook and mindset of students, faculty and technical staff.
- The massive expansion of MNRMCH and its continued commitment to provide free healthcare and participate in the State Government's initiative to provide surgical care to Below Poverty Line population has added to the strength and stature of the institution. The state of the art operation theaters and other support services add another dimension of quality here.
- The achievement and sustenance of global standards of healthcare and patient safety in MNRMCH is highly commendable as certified by both national and international agencies.
- Recognition and accreditation of many of the services and departments of the MNRMCH by national and international agencies like NAAC, NABH, and ISO have not only created a wider recognition for its commitment to quality, but also raised the confidence among the employees creating an air of buoyancy and expectancy in the campus.
- There are clear indications of internalization of quality standards and benchmarking in the philosophy and work culture of the MNRMCH.
- The department of Environmental Health Engineering and thereby MNRMCH have earned global recognition through the work on adverse health effects of indoor air pollution. There is obvious potential for the department and the MNRMCH to build on this and gain international recognition in the important area of research on the effects of adverse environmental factors on health and disease burden in the community.

**Weakness:**

- There is scope for improving the administrative machinery for human resource management when compared to the swift pace of reforms which have taken place in the educational, healthcare and research activities.
- There is a wide variation in the number of publications in indexed journals across departments and across Faculties. Some of the departments/Faculties are yet to make a mark in terms of funded research projects and publications.
- Internet and Wi-Fi facilities are confined to limited locations and access is inadequate in some critical areas.
- User-friendly facilities for differently-abled students and faculty in some of the critical areas like the Central Library and lecture halls are lacking.
- There is a dearth of signage displays in the campus and within the buildings.

**Challenges:**

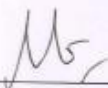
- A significant proportion of teaching faculties especially in the clinical departments are young and highly accomplished. Innovative and proactive HR policies need to be put into action to retain their interest and long-term commitment to the institution.
- Although MNRMCH has established its distinct brand identity in the region, several other institutions in the neighborhood appear to be motivated to make equally rapid strides in identical areas. This requires prompt action to implement the strategic action plans.
- Research consultancy and Institute-Industry collaborations in research and drug discovery needs to be accelerated to ensure larger returns from consultancy services to make the MNRMCH's research initiatives self-sustained and self-sustainable and justify the sizeable financial investments into research activities.

**Recommendations:**

- Teachers of basic sciences like Anatomy, Physiology and Biochemistry need to pay more attention to recognize the limitations and learning needs of students other than those in the MBBS course.
- Greater efforts to pursue and strengthen more funded research projects and quality publications by faculty.  
The current practice of the MNRMCH to have publications across the departments/faculties analyzed for their quality (impact factor, H-index) is commendable. While the top-performing departments need to be recognized and rewarded, those which trail far behind should be motivated and enabled to catch up.
- Centers for Excellence is a good concept for nurturing and promoting the best research thrust and potentials. The MNRMCH can identify a couple of the most promising among them and provide concerted support to enable them to emerge as Nationally/Globally recognized centers.

- The MNRMCH may explore the avenues for more curricular reforms and innovative add-on courses besides adhering to basic curricular content prescribed by the regulatory bodies.
- The staff strength of the Central Library needs to be increased by recruiting better qualified candidates with postgraduate/doctorate qualifications in Library Science as may be necessary as per regulations.
- More textbooks are to be added under various disciplines in the central library to overcome the difficulties students have reported in finding sufficient number of textbooks especially during examinations. Other steps like RFID for security of books may be considered at the same time.
- Increasing library hours till late at night will be especially helpful for postgraduate students who would be occupied with clinical responsibilities till late evenings.
- Wi-Fi facilities need to be extended and made more widely available in the campus.
- In view of the rapid infrastructure expansion of MNRMCH with doubling of its bed strength, a comprehensive database that allows students to access patient information in a more efficient manner, including the facility to search by diagnosis, search by key word etc may be considered; subject to patient confidentiality.
- The initiatives taken for e-Governance of the MNRMCH with acquisition of appropriate MIS software needs to be accelerated. The advantage of Phase I training of faculty and staff in IT technology which has already been completed is likely to be lost by further delay.
- Access and participation in the National Knowledge Network (NKN) assisted teaching-learning may be expedited on a larger scale.
- The MNRMCH may add modular courses on the Humanities, practice management, communication skills, critical thinking, infection control policies and on the importance of maintaining patient confidentiality.
- A student website to help disseminate information among all students and to all the constituent units of the MNRMCH will be welcomed by the students.
- The MNRMCH may initiate steps to prepare alumni profile for various undergraduate courses as an additional instrument to indicate the success of the programs. This will add a significant outcome measure and show that the goals and objectives of the program have been successfully met with.
- While the visibility of existing supportive and rehabilitative facilities in the campus needs to be increased, more facilities to help differently-abled students especially in crucial areas like the Central Library and lecture halls may be provided.

*Name Dr. S.B. Malipatil*



Signature of the Coordinator, IQAC

**Coordinator, IQAC  
MNRMedical College and Hospital  
Sangareddy**

*Name Dr. T. Venkata Ramanaiah*



Signature of the Chairperson, IQAC

**Chairperson IQAC  
MNRMedical College and Hospital  
Sangareddy**