

### INTERNAL QUALITY ASSURANCE CELL

### Sri Devaraj Urs Academy of Higher Education & Research

A DEEMED TO BE UNIVERSITY

TAMAKA, KOLAR-563 101, KARNATAKA, INDIA

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Dated: 11-06-2018

No: SDUAHER/KLR/IQAC/43/2017-18

Proceedings of the Quarterly Meeting of the University IQAC of Sri Devaraj Urs Academy of Higher Education and Research, Kolar held on the 04-06-2018 at 03.00pm in the Council Hall of the Academy Vice-Chancellor i/c chaired the meeting.

#### Members present:

- 1. Dr.M.L.Harendra Kumar, Principal, SDUMC.
- Dr.K.Mohan Kumar, Director Academics, SDUAHER & Med. Supdt., RLJH&RC.
- 3. Dr.V.Lakshmaiah, Professor of Medicine, SDUMC.
- 4. Dr.A.Bhaskaran, Vice Principal & Prof. of Surgery, SDUMC.
- 5. Dr.N.Sarala, Prof. & HOD of Pharmacology, SDUMC.
- 6. Dr.T.N.Suresh, Co-ordinator, R&D, SDUAHER
- 7. Dr.K.N.V.Prasad, Prof. & HOD of Pediatrics, SDUMC.
- 8. Dr.Karthiyanee Kutty, Prof. of Physiology, SDUMC.
- 9. Dr.G.K.Narayana, ENT Surgeon, Kolar.
- 10. Mr.Suresh.B, Journalist, Kolar.
- 11. Dr.D.K.Ramesh, Surgeon, Kolar.
- 12. Dr.Prasanna Kamath, Prof.& HOD of Community Medicine, SDUMC. (Coordinator, IQAC)

#### **AGENDA**

- · Approval of the proceedings of the preceding meeting
- Action taken report on the resolutions and decisions previous meeting
- NABL accreditation of the diagnostic laboratory and strategies for quality sustenance
- Review of the preparation of the NABH accreditation of the teaching hospital
- · Status review of AQAR submission
- Any other matter

The Chairman welcomed all the members and invited the IQAC coordinator to initiate the proceedings of the meeting.

### Approval of the proceedings and action taken report of the Previous Meeting

Chairman, requested the coordinator to present the proceedings of the meeting of the IQAC held on 04-06-2018 and action taken there upon on the resolutions and decisions taken during the previous meeting. In response IQAC coordinator presented the excerpts of the proceedings and the action taken. The members discussed the details present the threadbare and decided to approve the proceedings and the action taken report.



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#### Resolution:

The IQAC members resolved to approve the proceedings and action taken report.

# NABL accreditation of the diagnostic laboratory and strategies for quality sustenance

The chairman informed the central diagnostic facility comprising microbiology, biochemistry and pathology had undergone for NABL accreditation team visit on 17th and 18th February 2018 and the diagnostic laboratory had been accredited for two years with effect from 18th April 2018. He added that it was a great achievement in the quality initiatives of the Academy particularly in respect of patient care. He said that it also brought in substantial expertise on laboratory quality issues among the personal involved in the process of laboratory NABL accreditation. He apprised the cell that this achievement was a clear indication of quality to be a culture in the Academy. He emphasized that even though remarkable credit in the form of NABL accreditation was achieved there was a need of sustenance of the quality of services provided by the laboratory. In this regard he added that NABL taskforce team of the Academy had planned for strategies for sustenance and enhancement of quality of the laboratory services.

#### Resolution:

The members of the cell after discussion appreciated the efforts of the academy in successfully obtaining NABL accreditation and furthering the efforts to provide quality laboratory services.

### Review of the preparation of the NABH accreditation of the teaching hospital

Chairman informed that, R.L.Jalappa Hospital and Research Centre had obtained entry level NABH accreditation 07-12-2016 and the next task was to obtained full accreditation with in the time frame as put forth by NABH. In view of this he suggested that lot more to be achieved and the functioning and performance of the hospital should meet the necessities of the NABH standards.

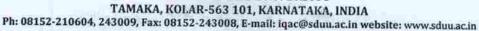
In view of this a quality cell had been established in hospital and it had been holding meetings and introducing and monitoring NABH accreditation related ways of functioning. The Chairman said that the IQAC of the Academy periodically interacted and monitored these activities so that all personnel involved were trained to achieve the required quality standards. He stated that there were certain areas of concerns on fire safety clearance certificate which was being attended to on a priority. However the other areas of hospital functioning had been satisfactory in meeting with the NABH requirements.



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Resolution: Members appreciated the activities in respect of NABH accreditation process.

#### Status review of AQAR submission

Chairman informed that, the Academy had undergone NAAC accreditation in the year 2015 and subsequent to the accreditation it was necessary that the Academy submitted AQAR to NAAC every year. He added that though the IQAC of the Academy was monitoring the quality related matters, the consolidation and submission of Annual report could happen only for the year 2015-16 but not for the subsequent years. Chairman informed that this was essentially an account of some setbacks in the leadership of IQAC. Following the rectification of the setbacks the IQAC was reconstituted and it had been pro-active in complaining the data for AQAR preparation. He informed the members that data for preparation of AQAR for the years 2016-17 and 2017-18 had been compiled and would try to submit the same to NAAC. The members discussed the subject in the light of the briefing by the chairman and observed that these laps on the submission of AQAR should have been avoided and suggested that AQAR should be submitted timely.

**Resolution:** Members suggested that AQAR to be submitted on time which would be a reflection of functional aspects of the Academy.

The meeting concluded with the rendition of vote of thanks by the coordinator.

Coordinator IQAC

Co-ordinator
Internal Quality Assurance Cell (IQAC
Sri Devaraj Urs Academy of
Higher Education and Research

Tamaka, Kolar - 563 103.