



INTERNAL QUALITY ASSURANCE CELL

Sri Devaraj Urs Academy of Higher Education & Research

A DEEMED TO BE UNIVERSITY

TAMAKA, KOLAR-563 103, KARNATAKA, INDIA

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No: SDUAHER/KLR/IQAC/188/2024-25

Dated: 01-12-2025

IQAC MEETING NOTICE

The 4th Quarterly Meeting of the **Internal Quality Assurance Cell (IQAC)** of Sri Devaraj Urs Academy of Higher Education and Research, Kolar will be conducted on **17th December 2025 at 11.00am** in the Council Hall of the Academy **under the Chairmanship of Dr. B Vengamma, Hon'ble Vice Chancellor, SDUAHER.**

All the members of the IQAC are requested to attend the meeting without fail.

Agenda with notes follows.

To,

All the members of IQAC committee of
Sri Devaraj Urs Academy of Higher Education and Research
Tamaka, Kolar

Dr. Muninarayana C
Director (Quality and Compliance)
SDUAHER



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No: SDUAHER/KLR/IQAC/188/2024-25

Dated: 16-12-2025

AGENDA WITH NOTES

Number	Agenda
SDUAHER/IQAC- IV/01/2024-25	Approval of the Proceedings of previous meeting minutes of the IQAC held on 14-06-2025
SDUAHER/IQAC- IV/02/2024-25	Action Taken Report on the decision taken in the previous meeting of the IQAC held on 14-06-2025
SDUAHER/IQAC- IV/03/2024-25	Discussion on plan of action for the criteria wise areas of implementation
SDUAHER/IQAC- IV/04/2024-25	Progress report on SDG Goals.
SDUAHER/IQAC- IV/05/2024-25	Progress on ISO Certification
SDUAHER/IQAC- IV/06/2024-25	Update on NIRF
SDUAHER/IQAC- IV/07/2024-25	Update on Times Higher impact ranking 2025 and challenges incharge incurred during documents preparation
SDUAHER/IQAC- IV/08/2024-25	Preparation for BAF and formation of ten criteria convenors
SDUAHER/IQAC- IV/09/2024-25	Update on NABH activities
SDUAHER/IQAC- IV/10/2024-25	Update on NABL
SDUAHER/IQAC- IV/11/2024-25	Proposal on external NAAC advisory services
SDUAHER/IQAC- IV/12/2024-25	Any other matter

Agenda: SDUAHER/IQAC- IV/01/2024-25

Subject: Approval of the Proceedings of the Previous IQAC Meeting

The committee has reviewed, validated, and formally approve the minutes of the previous IQAC meeting held on 22/8/2025, ensuring that all discussions and decisions have been recorded.

Agenda: SDUAHER/IQAC- IV/02/2024-25

Subject: Action Taken Report on the Previous IQAC Meeting Decisions

An overview of actions implemented based on the previous meeting's resolutions are discussed.

Agenda	Discussion	ATR
Agenda 1: Approval of the Proceedings of the Previous IQAC Meeting.	Approval of the proceedings of the previous IQAC meeting was done	-
Agenda 2: Action Taken Report on the decision taken	The action taken report on the decisions from the IQAC meeting held on	The IQAC reviewed the implementation status of all decisions taken in the



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in the previous meeting of the IQAC held on 14/06/2025.	14/06/2025 was presented & approved by the members.	previous meeting held on 14th June 2025. The members expressed satisfaction with the progress made and approved the Action Taken Report.
Agenda 3: Progress status of AQAR 2024-25 Documents.	The IQAC reviewed the status of AQAR 2023–24 submission. Members noted that verification and compilation were completed for most criteria, and the response from NAAC on portal reopening has been received. The matter will be revisited upon receipt of updated submission guidelines under the new BAF and MBGL framework.	Documents under Criteria 6 are still awaited and pending final verification. Time line is given till December 31/12/2025
Agenda 4: Progress of SDG's.	The IQAC reviewed activities under the SDGs. The Hon'ble Vice Chancellor advised categorizing outreach programs as in-house and out-house under MCH, community, school, and NCD screening. Members emphasized benchmarking, focused SDG implementation (1, 2, 6, 17), systematic documentation, and organizing an annual SDG Week with regular website updates.	SDG activities have been suggested to all departments for categorization and documentation under in-house and out-house initiatives. Benchmarking and outcome documentation templates are under development. Planning for the SDG Week (September 2026) and regular website updates is in progress.
Agenda 5: Progress of ISO certification	The Assistant Registrar Dr. Sharath reported that a training programme for teaching and non-teaching staff was conducted by Zero Defect Consultancy on 22–23 August 2025. Gap analysis was completed, and format preparation is in progress. The Hon'ble Vice	Timelines for the preparation of required formats have been finalized and communicated to all departments. The format development work is progressing as per schedule. Follow-up review will be conducted



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	Chancellor advised setting a clear timeline to ensure timely completion and effective implementation	in the next IQAC meeting.
Agenda 6: Update on Academic Collaboration and MOUs with Academy	The Director of R&D presented a detailed report on the University's MoUs from 2018 to 2025, highlighting the steady increase from 1 to 19 MoUs in 2025. A total of 79 functional MoUs have been established across academic, clinical, and research domains. The distribution of MoUs for 2024 and 2025 was reviewed, reflecting strengthened collaborations. Members appreciated the progress and emphasized continued tracking and outcome assessment of MoU activities.	The updated MoU database has been compiled and categorized by type and year. Functional status and outcome tracking formats should be developed for periodic review. Departments have been advised to document activities under each MoU. The R&D will review MoU outcomes annually to assess impact and effectiveness.
Agenda 7: Update on Faculty Development Programs (FDP) conducted/planned (UCHPE & MEU Director).	The IQAC noted that UCHPE regularly conducts monthly FDPs for faculty of affiliated colleges, engaging both internal and external experts. A standardized tool for assessing FDP outcomes is being developed through a UCHPE PhD research project.	The standardized FDP assessment tool has to be implemented to evaluate programme outcomes.
Agenda 8: Progress on implementation of 2nd Cycle NAAC Peer Team suggestions & AAA Suggestions	All criterion conveners presented detailed progress reports covering actions taken, outcomes achieved, and areas requiring improvement under their respective criteria. The presentations reflected accountability and ongoing quality enhancement efforts. Members reviewed	The progress reports from all seven criteria have been reviewed and documented. Identified gaps and areas requiring improvement have been noted for detailed discussion. Departments have been advised to address these areas in a time-bound manner. The

	the reports and appreciated the progress made. The discussion focused on aligning activities with preparedness for the next accreditation cycle.	specific improvement measures will be reviewed in the next IQAC meeting.
Agenda 9: Improving NIRF Ranking in SDUAHER:	The Assistant Registrar Dr. Sumanth, presented the University's NIRF update, noting participation among 4,000 plus institutions and sharing a three-year comparative progress graph showing improvement in teaching, learning, and research. Members discussed strategies to improve NIRF performance through SDG-linked initiatives, enhanced visibility, and digital outreach. Suggestions included a dedicated portal, newsletters, stakeholder engagement, and promoting Ph.D. enrolments. The Principal, Dr. Prabhakar, SDUMC, recommended systematic document collection and monthly data pooling for accuracy.	Work on updating the University website and NIRF data portal is in progress. Monthly departmental data pooling and documentation meetings have been initiated. Plans to enhance digital outreach, and promote Ph.D. enrolments are underway.
Agenda 10: Enrolment in Times Higher Education Impact Ranking 2025	The IQAC Coordinator, Dr. C Muninarayana, informed that the Academy plans to participate in the Times Higher Education (THE) Impact Rankings for 2025–26, aligning with global benchmarking and SDG initiatives. Members appreciated the initiative and emphasized timely preparation. It was agreed that data collection and documentation processes should begin	Times Higher Education Impact Rankings participation was initiated. Criteria-wise data collection and documentation formats were developed. Relevant evidence aligned with the SDGs were collected from departments and uploaded on The Times Raking Portal on 24-11-2025.

	immediately.	
Agenda 11: Update on NABH activities	The Medical Superintendent informed about the three-day Professional Development Program conducted from 16–18 September 2025 on the 6th Edition of Hospital Accreditation Standards. The sessions focused on patient safety, clinical quality, and documentation per NABH guidelines. Members appreciated the initiative for fostering a strong quality culture and enhancing accreditation readiness.	The PDP was successfully conducted with active participation from healthcare professionals. Feedback was collected to assess training effectiveness and identify further training needs. Follow-up sessions and continuous quality improvement activities are planned as part of ongoing NABH compliance.
Agenda 12: Update on NABL	Dr. Arvind informed the members that the renewal application for the 5th cycle of NABL accreditation is scheduled for submission in November 2025. Preparatory activities such as documentation review, equipment calibration, and internal audits are underway. Members acknowledged the progress and emphasized adherence to timelines for successful renewal.	Preparatory activities for the NABL 5th cycle renewal are progressing as planned. Documentation review and equipment calibration have been completed, and internal audit reports are under final review. The application submission to NABL within the scheduled timeline is in process.

Agenda: SDUAHER/IQAC- IV/03/2024-25

Subject: Discussion on the Plan of Action for Criteria-wise identified area of improvement and Implementation.

The members discussed the detailed plan of action for each NAAC criterion, focusing on strategies, allocation of responsibilities, and timelines required to achieve targeted quality improvements.

Criteria I:

Suggestion given	Areas that need improvement	Action Plan
Strengthening outcome-based education with mapping to attainment in summative exams.	For all the programs under the academy Competency mapping and PO/CO attainment analysis has to be done by the respective departments and office of COE.	In process
More curricular revisions with emphasis on skill enhancement, patient safety, Biosafety environment, and sustainable development goals (UNESCO 17 Goals).	Revision to be initiated AHP – 2026-27 UG-05 programs, PG-05 programs.	Program director need to focus on the required curricula revisions and discuss in the BOS.
Starting super specialty program in Geriatrics, Oncology.	Proposed MD programs 2025-26 Radiation Oncology. 3 programs Respiratory Medicine, Laboratory Medicine and Palliative Medicine Proposed during 2026-27 Super Specialty Programs: 03 DM Clinical Hematology MCh Plastic Surgery MCh Neurosurgery	In Process
Starting / strengthening sub-specialty in branches like Ophthalmology, Medicine, Surgery.	Other departments to start the Post-doctoral fellowship and the Post-doctoral certificate course	
Orthopaedics, OBG, and Dermatology.	Departments to start the Post-doctoral fellowship and the Post-doctoral certificate course	
Allied Health Science faculty offering UG & PG programs may be created.	Proposed 2026-27 -01 MSc Clinical Embryology	Program Directors/ Dean to work on pre-requisites.

Criteria II

Suggestion given	Areas that need improvement	Action Plan
Strengthening Mentor, Mentee Programs.	Better co-ordination between mentors and dept faculty and counsellor for continuous monitoring and provide support for coping stress due to curricular and extra-curricular causes.	Regular mentor - mentee meetings have been scheduled and included in the time table on fixed dates (schedule enclosed) Mentorship monitoring committee Convener compiles mentor Mentee interactions and submits to DSW The WhatsApp group formed by DSW monitors the mentor Mentee encounters shared by respective mentors in WhatsApp with geotagged pics and names of Mentee's who have not attended and rescheduled dates The academic modules are programmed that attendance and report cards of Mentee's link with invitation to parent teacher meetings go to mentors so that mentors are aware of Mentee progress. Counsellors are in touch with mentors and faculty of dept in case there is a need.
Creating a separating Director/ Coordinator for the skill lab, preferably from medicine, with structured teaching and evaluation.	-	-
To increase full-time Ph.D. students by providing fellowships and other research incentives and also encourage faculty to enrol for Ph.D.	Develop structured mentorship and research support systems for Ph.D. scholars. Establish collaborations with external research bodies for joint projects and funding opportunities.	Faculty members are encouraged and supported to enrol for Ph.D. programs. Stipend is increased for full time scholars and intramural funding upto 2 lakhs is given by the Academy to support scholarly work. Workshops have been arranged by R& I for PhD scholars to train in writing grant proposals to funding bodies

In the Skill lab, up-gradation of equipment is essential as models are old. High-end simulation modules are essential.	Continuous maintenance and periodic updating of simulation models to keep pace with evolving technology. Training of faculty in advanced simulation pedagogy and scenario-based assessment.	Team from Academy has visited state of the art skill labs to implement similar model in our university and budget has been proposed for the same. Phased up-gradation of skill lab equipment have been initiated. Faculty development programs have been conducted on advanced simulation-based pedagogy and scenario-based assessment.
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CRITERIA III

Suggestion given	Areas that need improvement	Action Plan
More PG and UG are to be encouraged to apply for STS projects (ICMR and University grants)	External review before submission to ICMR. Completion of the projects and publications as outcome.	Departmental review has been mandated before submission to ICMR.
To increase the functional MOUs with national and international organizations / Universities.	Need to collect the activities details under MOUs. Plan more activities and research projects under available MOUs.	In process
To start a Bio Incubation Centre in the university and prepare a start-up policy to encourage faculty to innovate and incubate.	To appoint CEO. To encourage students to start start-ups in IIC. To procure the equipment's for the start of 3 Incubates.	Renotification of ICC with facility of Technology Background
To increase publication by the faculty and post-graduates by improving the research ecosystem.	The faculty need to submit the manuscript to indexed and with impact factor journals. The PG student's manuscript must be channelized to at least indexed journals. Recruitment of more faculty/research staff with research focus.	All PG Dissertation should be published mandatorily. The guide should take active role in this.
Research and publications may be strengthened.	The faculty need to submit the manuscript to indexed and with impact factor journals. The PG student's manuscript must be channelized to at least	

	indexed journals.	
Collaboration with other Universities and medical institutions may be made, and regular collaborative activities should materialize.	More student exchange programmes. Industry-academia cell. More collaborative projects.	Industry-academia cell and enterprenanship cell to be notified by the Academy.

CRITERIA IV

Suggestions	Areas that need improvement	Action Plan
IT infrastructure emphasis should be given to the installation of Display boards and smart boards.	Lecture capturing systems need to install.	Smart boards have been installed across all departments of SDUMC including UCHPE, College of Physiotherapy, Speech Therapy and Allied Health Sciences. Lectures shall be captured using smart boards in the respective departments.
The SIMS and FIMS should be installed.	Need add-ons in FIMS like Auto Reconciliations with the bank statements, Integration with other software user friendly. Software updated reports as and when required.	Identified gaps in SIMS and FIMS are being addressed with the support of the University IT team. Required system improvements and integrations are currently under resolution.
Studio, YouTube channel, and community radio should be launched at the earliest.	MAC needs to be established. Active lecture capturing needs to be started. University Radio needs to be started	The University is effectively maintaining official social media platforms and YouTube channel. Establishment of University Radio and a centralized active lecture capturing system is under discussion and planning.
Emphasis may be more on developing Subspecialty departments in all departments.	Can strengthen the child psychology clinic, establish a deaddiction clinic, and a palliative care center.	A Child Rehabilitation Center has been established by the Department of Pediatrics and is fully functional, providing rehabilitation services along with counseling support.
The Oncology Super specialty department may be established.	Up gradation of radiation equipment.	Upgradation of radiology equipment is currently in process to strengthen

		diagnostic, academic, and clinical services.
The unique department of "Clinical Nutrition and Dietetics" may be showcased. Speech and hearing department to be outlined.		The departments of Clinical Nutrition & Dietetics and Speech & Hearing have been outlined and are actively involved in research and community outreach activities.
The College of Physiotherapy may be a separate entity.	Needs Infrastructure Up gradation for a 100-seat capacity, Hi-tech labs	The College of Physiotherapy has been established as a separate academic entity. Infrastructure upgradation including approval for a 100-seat intake capacity and hi-tech laboratories is under process.
The count of RHTC may be enhanced.	Needs initiation	Devarayasamudra RHTC is fully functional. Initiation of additional RHTCs is planned in the next assessment year to strengthen rural health services.

Criteria V

Suggestion given	Areas that need improvement	Action Plan
Training for Competitive Exams (NEET PG entrance examinations) should be organized more in number.	Nil	Monthly events have been planned
Career Counselling training programs should be conducted regularly.	Career counselling Guidance Activities to be conducted	Monthly one activity to be planned for SDUAHER students
Pre-placement activities should be organized regularly.	Frequent activities to be conducted	
The NSS activities are not satisfactory, more activities should be in place.		Monthly two activities have been planned

Criteria VI

Suggestions	Areas that need improvement	Action Plan
To have a performance-based appraisal system linked with salary incentives and promotion with 50% weightage for research activities.	Proforma needs to be revised and incentive or increment needs to be channelized as a regular process.	The academy has revised the proforma and increment/incentives were provided as per the policy
To conduct regular AAA Audits annually with internal and once in 3 years with external assessors.	NA	
To prepare an Institutional development plan with definite short and mid-term and long-term goals.	Many Community based activities need to be conducted.	SDUAHER IDP is in process for short term and midterm plan (2030)

Criteria VII

Suggestion given	Areas that need improvement	Action plan
To revisit the best practices of the university to make them more outcome based, and one of them related to the research of innovation and entrepreneurship, particularly in rural India. Similarly, Institutional distinctiveness also requires modification with clear cut objectives and analysis.	Best practices and Institutional distinctiveness should be derived from Sustainable development Goals (SDGs) to achieve the higher NAAC score.	Plan for center of excellence in – ex: simulation lab, Research areas. Molecular genetics. Adoption of villages.

Agenda: SDUAHER/IQAC- IV/04/2024-25

Subject: Progress Report on Sustainable Development Goals (SDGs)

Continuous progress achieved by institution towards various SDG targets and the next step to strengthen sustainability initiatives will be presented.

Agenda: SDUAHER/IQAC- IV/05/2024-25

Subject: Progress on ISO Certification



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Update on the status of ISO certification activities, covering documentation, internal audits, compliance improvements, and readiness for external assessment.

Agenda: SDUAHER/IQAC- IV/06/2024-25

Subject: Update on NIRF

Discussion on the progress of NIRF 2025 data preparation and submission along with strategies to improve institutional performance across ranking indicators.

Agenda: SDUAHER/IQAC- IV/07/2024-25

Subject: Update on Times Higher Impact Ranking 2025

Presentation on SDG selection and submission for THE IMPACT RANKING 2025 and Discussion on challenges encountered by the respective in-charges and measures to streamline future submissions.

Agenda: SDUAHER/IQAC- IV/08/2024-25

Subject: Preparation for BAF and Formation of Ten Criteria Conveners

On behalf of preparation for BAF, a workshop was conducted by IQAC on Integrated Quality Assurance & Performance Enhancement Framework for Higher Education: Aligning NAAC, NIRF, Academic Audit & Sustainable Institutional Rankings by Dr. Tholkappia Arasu CEO of Aassaan Accreditation Pvt. Ltd., Chennai, Tamil Nadu, India on 28-11-2025 at Dr. B C Roy AV Hall, 1st Floor ULLRC, SDUAHER, Tamaka, Kolar. Total 55 faculty got sensitized on BAF & MBGL. Continuation of this the director IQAC will finalize the formation of ten criteria conveners, and clarify their roles and responsibilities in coordinating quality initiatives.

Agenda: SDUAHER/IQAC- IV/9/2024-25

Subject: Update on NABH Activities

Presentation on progress update on ongoing NABH-related activities will be presented to assess compliance with standards and plan for upcoming quality enhancement measures.

Agenda: SDUAHER/IQAC- IV/10/2024-25

Subject: Update on NABL

Discussion on advancements toward NABL accreditation, including documentation status, laboratory process improvements, and any pending requirements.

Agenda: SDUAHER/IQAC- IV/11/2024-25

Subject: Proposal on external NAAC advisory services

The academy plans for external NAAC Advisory services to improve accreditation score.

Agenda: SDUAHER/IQAC- IV/12/2024-25

Subject: Any Other Matter

Dr. Muninarayana C
Director (Quality and Compliance)
SDUAHER



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