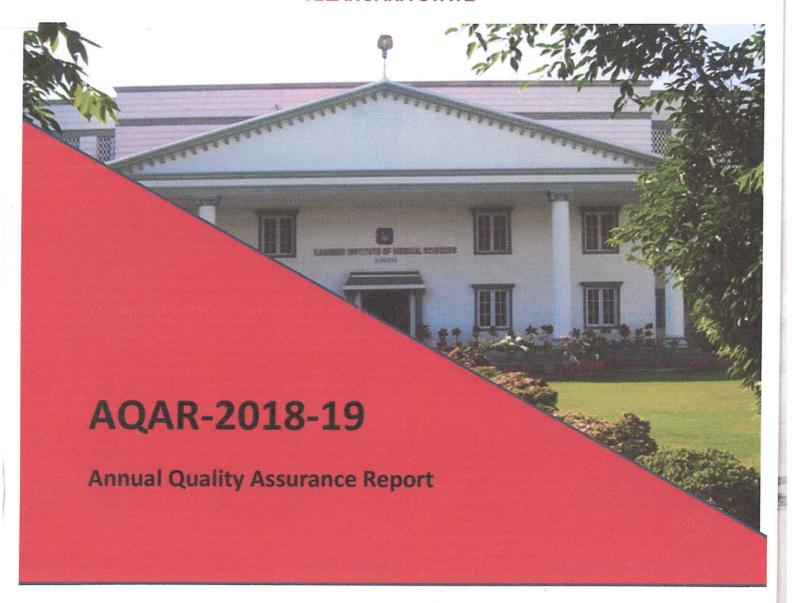


## KAMINENI INSTITUTE OF MEDICAL SCIENCES

#### **SREEPURAM**

NARKETPALLY- 508254

**TELANGANA STATE** 



Submitted To National Assessment and Accreditation Council Bangalore



## The Annual Quality Assurance Report (AQAR) of the IQAC

(For Affiliated/Constituent Colleges)

Institutions Accredited by NAAC need to submit an Annual self-reviewed progress report i.e. Annual Quality Assurance Report (AQAR) to NAAC, through its IQAC. The report is to detail the tangible results achieved in key areas, specifically identified by the IQAC at the beginning of the Academic year. The AQAR period would be the Academic Year. (For example, July 1, 2017 to June 30, 2018)

#### Part - A

#### **Data of the Institution**

(data may be captured from IIQA)

1. Name of the Institution

Kamineni Institute of Medical Sciences

• Name of the Head of the institution:

Dr. Shruti Mohanty

Designation: Principal

• Does the institution function from own campus: Yes

• Phone no./Alternate phone no.:

08682-272344

08682-279999- ext. 300

• Mobile no.: 09490294931

Registered e-mail: principal@kimsmedicalcollege.org

• Alternate e-mail: kims@kimsmedicalcollege.org

Address : Sreepuram, Narketpally

• City/Town : Nalgonda

• State/UT : Telangana

• Pin Code : 508 254

2. Institutional status:

 Affiliated: Yes Constituent: No

• Type of Institution: Co-education/Men/Women Coeducation

• Location: Rural/Semi-urban/Urban: Rural

• Financial Status: Grants-in aid/ UGC 2f and 12 (B)/ Self financing

(please specify): Society

Name of the Affiliating University: KNR University of Health Sciences, Warangal, T.S.

Name of the IQAC Co-ordinator : Dr. P Sudhir Babu

• Phone no.: 08682-272344

Alternate phone no. 08682279999

• Mobile: 09701896996

• IQAC e-mail address: iqac@kimsmedicalcollege.org

Alternate Email address: info@kimsmedicalcollege.org

3. Website address: www.kimsmedicalcollege.org

Web-link of the AQAR: (Previous Academic Year): http://www.kimsmedic alcollege.org/AQAR2016-17.pdf

For ex. http://www.ladykeanecollege.edu.in/AQAR2012-13.doc

4. Whether Academic Calendar prepared during the year?

Yes/No...., if yes, whether it is uploaded in the Institutional website: www.kimsmedicalcollege.org

Web link: https://www.kimsmedicalcollege.org/ac\_clinical\_meeting.htm

#### 5. Accreditation Details:

Cycle	Grade	CGPA	Year of Accreditation	Validity Period		
1 <sup>st</sup>	A	3.06	2008	From:2008 To:2015		
2 <sup>nd</sup>	A	3.08	2015	From:2015To:September 2020		
3 <sup>rd</sup>				from: to:		
4 <sup>th</sup>	-	a a	× ×	from: to:		
5 <sup>th</sup>	- 4			from: to:		

6. Date of Establishment of IQAC:

DD/MM/YYYY: 31-12-1999

## 7. Internal Quality Assurance System

Item /Title of the quality initiative by IQAC	Date & duration	Number of participants/beneficiaries		
<ol> <li>Communication skills training for undergraduate, Interns and Postgraduates.</li> </ol>	I IIIIV XI ( Ictober 701 V)	286		
2.) Administrative audit	April 2019	272		
3.) Blood Bank Audit	August 2019	14		
4.) Feedback from stake holders	December 2018, July 2019	185		
5.) Community health education camps	First week of every month	130		
6.) Library Audit	March 2019 & July 2019	15		

# <u>Noie</u>: Some Quality Assurance initiatives of the institution are: (Indicative list)

- Regular meeting of Internal Quality Assurance Cell (IQAC); timely submission of Annual Quality
  Assurance Report (AQAR) to NAAC; Feedback from all stakeholders collected, analysed and used for
  improvements
- Academic Administrative Audit (AAA) conducted and its follow up action
- Participation in NIRF
- ISO Certification
- NBA etc.
- Any other Quality Audit

## 8. Provide the list of funds by Central/ State Government-

## UGC/CSIR/DST/DBT/ICMR/TEQIP/World Bank/CPE of UGC etc.

Institution/	9 2	Funding	Year of award with	
Department/Faculty	Scheme	agency	duration	Amount
Community Medicine	STS	ICMR	2019, Six Months	Rs.10000/-
Community Medicine	STS	ICMR	2019, Six Months	Rs.10000/-
Psychiatry	STS	ICMR	2019, Six Months	Rs.10000/-
Emergency Medicine	STS	ICMR	2019, Six Months	Rs.10000/-
Ophthalmology	DBCS	NPCB	2018	Rs.500000/-

9. Whether composition of IQAC as per latest NAAC guidelines: Yes/No: Yes

<sup>\*</sup>upload latest notification of formation of IQAC

10. No. of IQAC meetings held during the year: 7

The minutes of IQAC meeting and compliance to the decisions have been uploaded on the institutional website......

Yes/No Yes

(Please upload, minutes of meetings and action taken report)

11. Whether IQAC received funding from any of the funding agency to support its activities during the year? Yes No  $\sqrt{\phantom{a}}$ 

If yes, mention the amount:

Year:

- 12. Significant contributions made by IQAC during the current year (maximum five bullets)
  - Session on 'Suicide prevention' for Undergraduates
  - Research initiative among Postgraduates.
  - Communication skills Training for Under Graduates, Interns, Postgraduates.
  - Organised Faculty Development program . OSCE Assessment pattern
  - Conducted Foundation program for Undergraduates and Basic Course Workshop for Interns and Postgraduates.
- 13. Plan of action chalked out by the IQAC in the beginning of the Academic year towards Quality Enhancement and the outcome achieved by the end of the Academic year

	Plan of Action	Achievements/Outcomes
1.	. Mandatory End Posting exams for Interns in all departments	Started end posting exams for interns in all the departments before completion certificate to as t ensure uniform standards of expected outcome.
2.	Centralised Quarterly postgraduate thesis review to be conducted by Institutional Thesis Board.	Conducting regular thesis review of the postgraduate students by a Institutional Thesis Board.
3.	Training of undergraduate s, Interns, and Postgraduates n Humanities, Attitude and Communication	Conducted training workshops on Humanities, Attitude and communication skills for undergraduates, Interns and Postgraduates.

Prescription     writing as per Regulatory     guidelines	Regularly Conducting workshops on prescription writing for Undergraduates, Interns and Postgraduates and prescriptions being audited by hospital administrators.
5. Analysis and Counselling of MBBS Students by clinical Psychologist	Regularly Conducting one to one counselling for MBBS students by faculty of psychiatry department and clinical psychologist.
6. Fortnightly formative assessment for postgraduates followed by feedback.	Centralised formative Theory examination/Viva voce conducted fortnightly as per university examination pattern, followed by evaluation and feedback by the concerned department faculty for Postgraduates.

14. Whether the AQAR was placed before statutory body? Yes /No: Yes

Name of the statutory body: Academic Council Date of meeting(s): September 2019

15. Whether NAAC/or any other accredited body(s) visited IQAC or interacted with it to assess the functioning?

Ves/No: No

Date:

16. Whether institutional data submitted to AISHE: Yes/No:

Year: Yes

Date of Submission: June

17. Does the Institution have Management Information System?

Yes No

If yes, give a brief description and a list of modules currently operational. (Maximum 500 words)

The Institution uses the following modules available on Management Information System for various academic, administrative and patient care purpose.

- 1.) HRMS Human Resource Management System.
  - Staff Attendance: All teaching and non teaching staff attendance is Biometric linked and is monitored by HR department.
  - Leave Management: Leave application and approval are done through HRMS software linked to biometric devices.
  - Duty Rosters: All departments Duty rosters are uploaded on the HRMS software as to ensure and facilitate smooth functioning of Hospital and college departments.
- 2.) Medical College management system MCMS
  - Student Admission: (UG, PG, Superspeciality) Students admissions are done through MCMS portal, where in student fills all relevant information online and is stored in the system for further reference.

 Student Attendance: Student attendance is monitored through MCMS system linked to biometric devices. All the classrooms have biometric devices installed for students punching before and after every class and Clinical areas. Attendance particulars are sent to parents by SMS to their registered mobile numbers on daily basis.

Attendance of all postgraduates is monitored through Biometric devices linked to MCMS and their attendance is calculated to decide their eligibility for university examinations.

- Hostel Management: The details of Hostel inmates are maintained digitally.
- Examination Management: KIMS is a recognised digital valuation centre for university examinations. All examination papers are coded and downloading of question papers is done twenty minutes before exams.

## 3.) Hospital Optimum Process Engine (HOPE) - Hospital Information System (HIS)

- Accounts and Billing: Outpatient, In patient ,Pharmacy and Diagnostic investigations billings are done through HIS
- Patient Registration and IP Admission: Outpatient and Inpatient registration, duration of stay and discharges are coordinated through Medical record Department and Hospital administration department which is managed through HIS.
- Patient Discharge and Summary: Inpatient Discharge summary is prepared
  online by the concerned department and a hard copy is handed over to the patient
  and soft copy is stored as Data in MRD System.
- **Pharmacy**: Apart from billing, Drug details, Stock verification and availability is managed through HIS.
- Laboratory: All lab reports are entered electronically and can be accessed by the treating physicians.
- Central Stores: Purchase requests, invoice details, Stock maintenance, and issues to the departments are managed through HIS.
- Central Kitchen: Stock is maintained online in the central kitchen and updated daily.

#### Part-B

#### CRITERION I - CURRICULAR ASPECTS

#### 1.1 Curriculum Planning and Implementation

1.1.1 Institution has the mechanism for well planned curriculum delivery and documentation. Explain in 500 words

Curriculum planning forms part of institutional norm which is revised every year.

Curriculum committee is formed consisting of Principal, Medical Education Unit Coordinator, one Representatives from each of PreClinical, Para Clinical, Medicine and allied subjects, Surgery and allied subjects. Student representative from 9<sup>th</sup> semester is also included in the curriculum committee. Curriculum Committee meets every quarterly to review the progress of the planning.

Both the faculty and student are oriented for the intended curriculum. Student's handbook is given to them in the beginning of the year to give them insight. Faculty are sensitised to the new paradigm shift of curriculum coming on their way in the form of Competency Based Medical Education.

- In the view of newer competency based curriculum being implemented by MCI from the academic year 2019-20, MEU KIMS, had planned Faculty Development Workshop on CISP (Curriculum Implementation Support Program) to orient the Faculty of all the semesters with emphasis on the Pre Clinical Departments. Workshop was conducted in the month of JULY 2019.
- Emphasis was given to train the faculty for conducting Integrated Teaching, Early Clinical Exposure, Interactive Small Group teaching & Self Directed Learning.
- Foundation course conducted for the undergraduates in the beginning of their 1st semester
  for four days in July 2018, so that the students experience a smooth transition phase and
  acclimatise to the professional life in the institute. During this course they not only learn the
  ethics and etiquettes, institution disciplines ,team work etc but also learn how to handle
  difficult situations stress management, importance of exercise and yoga etc
- Curriculum governance is taken care by periodic ensuring from each departments regarding implementation of the given curriculum for the given time
- Formative assessment forms the integral part of curriculum, performance of the students are tracked. Poor performers and those with attendance shortage have to undergo parent teachers counselling.
- End posting exams are conducted for the undergraduates as Objective Structured Clinical Examination and marks scored are documented and structured feedback is given.
- Interns End posting exams is mandatory for certification of skills acquired during their internship in the concerned department. Each department has got structured program for skills training and certification.

- The faculty and junior residents are trained on the newer teaching and learning tools in workshops conducted by medical education unit
- Fortnightly internal assessment for post graduates are conducted as per university pattern and doubly evaluated by the faculty with appropriate feedback.
- Postgraduates also have mock practical pre final exams similar to university exam where an
  external examiner is invited to evaluate the postgraduates and give feedback.

1.1.2 Certifi	cate/ Diplo	oma C	ourses i	introduc	ced dur	ing the Acade	mic vear			îa H
Name of	Name of		ate of i	introduc	ction		mployabilit	y/ S	Skill development	
the	und duid		nd dura	ation		entreprene	urship			
Certificate	Diploma	* * * *						-		
Course	Courses			West Williams						
NIL	NIL			NIL			NIL	1.2		NIL
1.2 Academi	c Flexibili	ity			. 141					
1.2.1 New pro	ogrammes	/cours	es intro	duced d	luring t	he Academic			k.	
Programm Code		Date	of Intr	oductio	on .	Course wi	th Code	Date of	f Introd	luction
NIL				IIL		N			NI	
	i	. Prog	gramme	es in wh	ich Ch	oice Based Cr	edit System	(CBCS)	/Electiv	e course
		syst	em imp	lemente	ed at th	e affiliated Co	olleges (if ap	plicable	during	the the
<b>A</b>	N/ 1	Aca	demic y	year.						
As per	r Medical	Coun	cil of Ir	ndia Gu	ıidelin	es under KNI	R Universit	y of IIca		
Name of Prog		*	UG	P	G	Date of imple			UG	PG
adopting CBC	, i					CBCS / Elect	ive Course	System		-
adapted (man	. 41	20	201		14					
adopted (mer	appolled:	ear) 20	)04 :e: /	D: 1	-	• • •				
1.2.3 Students	Co	n Cert	incate/	Diplom	na Cour	ses introduced				
No of Students		Tuncai	.e			a Courses	Parame		Diploma Courses	
.3 Curriculu		ment	d	166 - 18		2			24	
.3.1 Value-ad		2.54	arting 1	transfer	ahle an	d life skills of	fored during	a tha was		
alue added co	ourses	ob IIIIp	uring	Date o	of introd	duction				lod.
1. BLS tra		interns		Date of introduction			Number of students enrolled			
2. BLS	traini		for	01-04 <sup>th</sup> April 2019			108			
Postgra		ug 	101	06 – 08 <sup>th</sup> June 2019		69				
3. CISP	Training f	or Fac	ulty	11 <sup>th</sup> to 13 <sup>th</sup> Feb 2019 4 <sup>th</sup> to 6 <sup>th</sup> July 2019		36				
.3.2 Field Pro	jects / Int	ternsh	ips und					1.		= 0
				-		nt of OBG on nothers on car	For 190 (190 and 190 a		205	
pregnan	су		5					9	203	
	ess on wo la, Telanga		health	among	engine	ering student	of		80	

	<ul> <li>Camps conducted to increase awareness of Glaucoma among rural people in Nalgonda district</li> </ul>							
<ul> <li>Health Education</li> <li>Senisitisation</li> </ul>	60							
	<ul> <li>Health hazards of Tobacco consumption and smoking among rural population of Nalgonda Dist.</li> </ul>							
<ul> <li>Free Cervica population of</li> <li>1.4 Feedback System</li> </ul>	women	208						
		eived from all the sta	Iroh oldowa					
1) Students	2) Teachers	3) Employers	4) Alumni	5) Parents				
Yes/ <del>No</del>	Yes/ No	<del>Yes</del> /No	Yes/ No	Yes/ No				

# 1.4.2 How the feedback obtained is being analyzed and utilized for overall development of the institution? (maximum 500 words)

As feedback forms the backbone of reforms, Student feedback is an integral part of curriculum planning, Both formal and informal feedback is taken from the following stake holders.

- ▶ Students: Undergraduate Students, Postgraduate Students, Interns.
  - > Faculty.
  - > Non Teaching staff: (Technical, Non technical and Universal staff).
- > Parents.
- Alumni.
- > Patients and attenders.

## Student Feedback: (Undergraduate Students, Postgraduate Students, Interns)

- Student feedback is taken through a validated questionnaire and scoring done.
- The feedback forms are scored and analysed statistically.
- Every faculty receives his/her individual score and the highest score of faculty in the institution.
- Feedback from students is analysed critically and necessary action taken.
- The faculty with lower scores are counselled and subjected to teaching methodologies under MEU faculty.
- Feedback about Hostels and campus facilities are communicated to the Hostel wardens and administrators/ Management for prompt addressing of the issues.

## Faculty Feedback: ( Pre Clinical , Para Clinical , Clinical)

- Formal and Informal feedback is taken from faculty and suggestions are forwarded to curriculum committee for their evaluation and implementation.
- The feedback about students' academics and discipline is presented during Academic council meetings apart from monthly Departmental meetings.
- The feedback appraisal forms for the junior faculty by the HODs reflect overall academic and administrative performance of the faculty.
- The faculty is apprised of the feedback and necessary action taken.
- Feedback about teaching and teachers are conveyed to the concerned with opportunity for training by Medical Education Unit.
- Based on the feedback Medical Education Unit members conduct faculty development workshops

- for faculty.
- Medical Education Unit also conducts basic course workshops for postgraduates interns and undergraduates and feedback taken thereof.
- Feedback from teachers regarding teaching facilities, curriculum advancement, faculty development programs are reviewed and implemented on a regular basis.

## Non Teaching Staff Feedback: (Technical, Non technical and Universal staff).

• Feedback from non teaching staff is primarily informal in nature. The feedback is for improving the infrastructure and amendment in policies tailoring to the needs of the various statutory organizations. Feedback also includes suggestions to improve campus discipline and modification of certain regulations.

#### Parents Feedback:

- During Parents teacher meeting both formal and informal feedback is collected and analysed.
- Direct feedback is given by parents during Foundation Day and Graduation Day celebrations.
- The suggestions and ideas from parents are reviewed and discussed during council meetings.
- The suggestions are incorporated during policy amendments.

#### Alumni Feedback:

- Alumni are invited for pep talks and encouraging prosont students, at the same time feedback is taken.
- Alumni feedback is sought in the form of a questionnaire before they graduate from the institute.
- The Feedback is useful to bring about changes in academic and administrative policies and practices.

#### Patient Feedback:

 Feedback is taken from patients and their attenders at the time of discharge by a structured feedback questionnaire, any suggestions and grievances are addressed by the General Manager Hospital Administration.

## CRITERION II -TEACHING-LEARNING AND EVALUATION

#### 2.1 Student Enrolment and Profile

	tio during the year		
Name of the Programme	Number of seats available	Number of applications received	Students Enrolled
MBBS	200	Admission for entire	200
MD/MS	92	State is as per counselling by KNR	69
DIPLOMA	2	university of Health sciences based on NEET score.	1

#### 2.2 Catering to Student Diversity

#### 2.2.1. Student - Full time teacher ratio (current year data)

Yeār	Number of students enrolled in the institution (UG)	Number of students enrolled in the institution (PG)	Number of full time teachers available in the institution teaching only UG courses	Number of full time teachers available in the institution teaching only PG courses	Number of teachers teaching both UG and PG courses
------	---	---	--	--	---

2019	200	)	76	137	79	216
	ching - Learn			1		
(LMS),	E-learning re	eachers using sources etc. (c	ICT for effective teach current year data)	ing with Learning	Managemen	t Systems
Number teachers	s on roll te	fumber of eachers using CT (LMS, e-esources)	ICT tools and resources available	Number of ICT enabled classrooms	Number of smart classroom s	E-resources and techniques used
2	16	216	LCD, Smart Boards, e-Learning, Blogs	7	6	Internet, Wi- Fi, Blogs, Social media.

## 2.3.2 Students mentoring system available in the institution? Give details. (maximum 500 words)

Regular mentoring is carried out for all the students of our college. Specific sessions are earmarked for one-to-one mentoring with their respective mentors. In addition, the students meet the mentors anytime they require any support for academic or personal issues.

#### > ORIENTATION AND TRAINING:

All faculties are sensitized regarding mentoring through Medical Education • Unit. The Mentors undergo training sessions for being active listeners; develop patience and stepping into the shoes of the mentee and give advice accordingly.

- In our institution the Mentor –Mentee relationship is initiated soon after the students are admitted into the 1<sup>st</sup> year of MBBS during the orientation program.
- Each student is allotted a mentor; the student along with his/her parents interacts with the mentor on the orientation day, exchange mobile numbers and develops a rapport with each other.
- Throughout their 1<sup>st</sup> year the student interacts with his/her mentor regarding academics, hostel adjustment or hostel problems, interaction with seniors or any personal problem which requires attention.
- The mentees meet the mentors on regular basis apart from the formal interaction during the prescribed schedule.
- The academic progress is documented and necessary support and guidance is extended/communicated to the concerned.
- Some parents are in constant touch with the mentors to enquire about their ward's progress.
- As the students' progress to subsequent semesters, fresh mentors are allotted from the Para clinical faculty and eventually clinical faculty, to provide support and guidance in academics, cocurricular and extracurricular activities.
- Some of the mentees are benefited by receiving guidance and support during their professional development from experienced professional mentors when facing professional problems or during crisis.
- Some require psychological counselling for which they are directed to a clinical psychologist and regular follow-up is done.

## > EFFECT OF MENTORING ON STUDENTS:

Students open up and express their grievances and difficulties and get a way out of the challenging situations with the help of their mentors. There is increased focus on the academics and balancing the .Students feel more confident and comfortable after mentoring sessions. Improved student teacher relationship is witnessed. Verbal feedback is taken from the students.

Number of students enrolled in the institution	Number of fulltime teachers	Mentor: Mentee Ratio		
200 Per Year	216	1:10		

			and Quality				×		
2.4.1 N	umber	of ful	l time teachers appo	inted	during the ye	ear			
No. of sanction	No. of sanctioned positions		lo. of filled positions				sitions filled during current year	No. of faculty with Ph.D	
2	16		216		NIL		42	3	
2.4.2 He (received during the Year of av	l award w yeur ,	ls, recog	ecognitions received gnition, fellowships at a of full time teachers rece	State, 1	eachers National, Intern Designation	ation	1		
		awara	ds from state level, nation international level		Designation		Government or recogn	llowship, received from nized bodies	
201	8	Dr. S	unita Sudhir Padgul	E	Professor OBG	of	Best Paper award in Telangana S Obstetrics & Gynecology Conference		
. 201	9	Dr. Sunita Sudhir Padgul			Professor OBG	of	Conferred FICOG (Fellow of India College of Obstetrics & Gynaecolog ) at AICOG 2019, Bengaluru		
2019	9	Dr. V	amshi Krishna Kond	le	Professor Paediatrics		Awarded Vaidya Megacity Nava Kai		
2019 Dr. Sudhir Babu Padgul		1 kg	Proferssor Head Ophthalmolo	& gy	Awarded Best Project Poster awa FAIMER- CMC Ludhiana.				
	nber of		s and Reforms from the date of seme	ester-e	nd/ year- end	exam	ination till the declar	ration of results	
Program ne Vame	rogram Programme Semester/ year Last seme		seme	date of the last ster-end/ year- ination			tion of results of ear- end		
MBBS	UG	G-1	2 <sup>nd</sup> semester / 1st year	111 × 1	July / August		September		

	UG -5	5 <sup>th</sup> semester	February / March	May
	UG -7	7 <sup>th</sup> semester	February / March	May
12	UG -9	9 <sup>th</sup> semester	January /February	March
MD/MS	PG -3	6th semester / 3 <sup>rd</sup> year	April /May	June
Diplom a	PG -2	4th semester /2 <sup>nd</sup> year	April /May	June

2.5.2 Reforms initiated on Continuous Internal Evaluation(CIE) system at the institutional level (250 words)

Institute has a structured continuous internal evaluation system (CIE) for various stake holders is in place for reforms and corrective action to be taken where ever needed.

## **CONTINIOUS INTERNAL EVALUATION FOR UNDERGRADUATES:**

- During the teaching schedule, surprise slip test on the syllabus covered, quiz contest, multiple choice questions etc are conducted.
- Internal assessment of theory and practical are conducted similar to that of university exams on a regular basis and paper are doubly evaluated .mentors enquire about the poor performance of students and counsel adequately along with their parents.
- After each postings students take up end posting exams in the form of OSCE/OSPF
- Mentors allotted for each students know the students performance and update the same to the UG coordinators and academic administrators as and when required
- All the students are made to present clinical cases at least once in their clinical postings which is documented before they take up the exams.

#### **CONTNIOUS INETRNAL EVALUATION FOR POST GRADUATES:**

- All the departments have scheduled PG teaching programme in the department from 2-4pm for three days a week, which includes seminars and case presentations and journal club. Where each postgraduate is allotted topic and are moderated by one of the faculty allotted as per the timetable prior to their presentation. Each postgraduate gets a feedback on their performance by all the faculty present
- Every Wednesdays integrated teaching is conducted where postgraduates from different department give their presentations and at the end will conduct active discussion among the undergraduates and their colleagues.
- Every alternate Wednesday (Integrated Teaching) there will be competition among the
  postgraduates. Judged by three senior professors and the best presenter will be awarded the
  certificate of appreciation.

- Every Thursdays clinical meetings(9-10 am) are conducted by each department in rotation, where in the postgraduates present and discussion done by the junior faculty .they are allowed to present interesting cases managed and best practices in their department, under the moderation of senior faculty in their department.
- KNR University of Health sciences, conducts Internal assessment for postgraduates every six months with central valuation and topics based on university examination pattern.
- Every alternate Saturdays postgraduates take up theory / viva exams for the syllabus covered, in the preceding weeks. The papers are evaluated and feedback is given.
- Final year postgraduates take, a mock pre-final exam, three months prior to final exams. Theory
  exam in the university pattern and practical exam is conducted with an external examiner from
  the other medical college to have an unbiased assessment

## COUNSELLING:

- Basic psychosocial analysis is done for all the first year MBBS students by psychologist in an formal
  way to detect any abnormal behaviour and act necessarily, and is followed up through their stay in
  the campus.
- At the end of each semester based on the student's performance and poor attendance of the students, they will have parent teacher meeting and counselling session along with their mentors

#### **COCURRICULAR TRAINING SESSIONS FOR UGS AND PGS**

- Basic Life Support workshop are conducted for both undergraduates and post graduates in batches.
- SHE team in coordination with Nalgonda police conducted ANTI RAGGING AWARENESS PROGRAMME.
- Communication or soft skills workshops are conducted in orientation programmes for post graduates and foundation courses for undergraduates in batches.
- Hand Hygiene and Bio Medical Waste segregation and disposal training sessions are being conducted on regular basis for UGs and PGs.

#### **CONTINIOUS INTERNAL EVALUATION FOR FACULTY:**

- Faculty are monitored regarding their interaction with the students and timely feedback is given to them where ever necessary.
- Faculty are assessed for the quality of teaching being done during theory and clinical sessions.

- Feedback is taken from the students regarding quality and accessibility of the faculty for academics.
- Regular appraisal from HOD is sought and considered during promotions.
- Apart from academics research and publications are taken as yard stick for their progress.

# 2.5.3 Academic calendar prepared and adhered for conduct of Examination and other related matters (250 words)

The academic activities are conducted centrally in addition to the departmental activities. The departments on rotation organize the monthly conferences. The conferences are conducted for one or two days, and some departments include hands on workshops to improve the clinical skills. The eminent speakers are invited from various States and all efforts are made to integrate basic sciences with the clinical specialties for the benefit of the postgraduates.

Academic calendar preparation and smooth conduct of scheduled programs is monitored by Vice Principal Academics.

#### The schedule for the monthly conferences for the year 2019 is as follows:

January	Psychiatry		
February	Pediatrics		
March	Ophthalmology		
April	Physiology		
May			
June	General Medicine		
	20		

July	Anesthesiology		
August	General Surgery		
September	DVI. Orthopedics		
October			
NT1	International		
November	Conference		
December	Urology		

The concerned department submits their conference program schedule of 8 hours program to Academic Cell of the Institution office at least three weeks prior to obtain credit hours from Telangana State Medical Council.

The Monthly Guest Lectures are organized every 2<sup>nd</sup> Wednesday of the month by the departments on rotation.

### The schedule for the guest lectures for the year 2019 is as follows:

January	General Surgery

February	Community Medicine.			
March	General Surgery			
April	Pathology			
May	-			
June	Microbiology			

July	Dermatology		
August	General Medicine		
September	Pharmacology		
October	General Surgery		
November	Anaesthesiology		
December	Ophthalmology		

The concerned department submits the name of the Speaker and topic along with the name of Chairperson for the session to Principal office, at least one week prior to the program to circulate the same to all departments.

Apart from above activities every Thursday clinical meeting is conducted where the designated department presents cases of clinical importance along with discussion by concerned faculty. One year time table of clinical meeting is charted out in Academic calendar.

The schedule for the Clinical Meetings for the year 2019 is as follows:

#### **CLINICAL MEETINGS CALENDER**

JANUA	ARY - JUNE 2019	JULY - DECEMBER 2019		
DATE	DEPARTMENT	DATE	DEPARTMENT	
03.01.2019	Paediatrics Surgery	04.07.2019	Radio diagnosis	
10.01.2019	Obst & Gynecology	11.07.2019	Psychiatry	
17.01.2019	Paediatrics	18.07.2019	Pulmonary Medicine	
24.01.2019	Orthopaedics	25.07.2019	Transfusion Medicine	
31.01.2019	ENT	01.08.2019	Emergency Medicine	
07.02.2019	Community Medicine	08.08.2019	Hospital Administration	
14.02.2019	Ophthalmology	22.08.2019	General Surgery	
21.02.2019	Anaesthesiology	29.08.2019	General Medicine	
28.02.2019	DVL	05.09.2019	Paediatrics Surgery	
07.03.2019	Radio diagnosis	12.09.2019	Obst & Gynecology	
14.03.2019 Psychiatry		19.09.2019	Paediatrics	
21.03.2019	Pulmonary Medicine	26.09.2019	Orthopaedics	

28.03.2019	Transfusion Medicine	03.10.2019	ENT
04.04.2019	04.04.2019 Emergency Medicine		Ophthalmology
11.04.2019	11.04.2019 Hospital Administration		Community Medicine
18.04.2019	Urology	24.10.2019	Anaesthesiology
25.04.2019	General Medicine	31.10.2019	DVL
02.05.2019	General Surgery	07.11.2019	Radio diagnosis
09.05.2019	Obst & Gynecology	14.11.2019	Psychiatry
16.05.2019	Paediatrics	21.11.2019	Pulmonary Medicine
23.05.2019	Orthopaedics	28.11.2019	Plastic Surgery
30.05.2019	ENT	05.12.2019	Emergency Medicine
06.06.2019	Ophthalmology	12.12.2019	Hospital Administration
13.06.2019	Nephrology	19.12.2019	Forensic Medicine
20.06.2019	Anaesthesiology	26.12.2019	General Medicine
27.06.2019	DVL		

## 2.6 Student Performance and Learning Outcomes

2.6.1 Program outcomes, program specific outcomes and course outcomes for all programs offered by the institution are stated and displayed in website of the institution (to provide the weblink)

2.6.2 Pass percentage of students

Program me Code	Programme name	Number of students appeared in the final year examination	Number of students passed in final semester/year examination	Pass Percentage
UG -2	1 <sup>st</sup> MBBS	206	180	87.37%
UG -4	2 <sup>nd</sup> MBBS	188	175	93.08%
UG -7	Final MBBS	203	159	<b>5</b> 0.0007
	Part I			79.83%
	Final			
UG -9	MBBS	136	114	84.00%
	Part II	· · · · · · · · · · · · · · · · · · ·	1 2	8 e

## 2.7 Student Satisfaction Survey

2.7.1 Student Satisfaction Survey (SSS) on overall institutional performance (Institution may design the questionnaire) (results and details be provided as web link)

A questionnaire has been designed for student survey and is being implemented in the current academic year.

## CRITERION III - RESEARCH, INNOVATIONS AND EXTENSION

•						TIADIC	/A
3.1 Resource	e Mobiliza	tion 1	for Rese	earch	2 4	W 12	
3.1.1 Research	ch funds sa	nction	ned and	received from va	rious agenci	ies, ind	ustry and other organisations
Nature of th	e Project	Dı	ıration	Name of the funding Agency	Total gra	int	Amount received during the Academic year
Major project		2	years	KES			2
Minor Projec		1	year	KES			6.4
Interdisciplin Projects		1	year	KES		- 111	
Industry spon Projects			L <sup>a</sup>	*	i i		g Car
Projects spons the University	/ College	2:	years	To the state of	=		H Fag. 91
Students Rese Projects	earch	a	ñ	el .	l v		
(other than	et 11,	6 M	lonths	ICMR	Rs.30000	/-	Rs.30000/-
compulsory by	the				n A a a		
College)	9	1815/57		*1	1 1		
	International Projects						
Any other(Specify)			15				ja –
Total				18			
					#	D.	d:
3.2 Innovatio	n Ecosyste	em	E)				
3.2.1 Worksho	ps/Semina	rs Co	nducted	on Intellectual P	roperty Rigl	hts (IPI	R) and Industry-Academia
Innovative pra	ctices duri	ng the	year	37			- 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Title of Work	shop/Semi	nar	Name of the Dept.		Dept.		Date(s)
Psychoph			Dept of Pharmacology & I Psychiatry		у		27.04.2019
3.2.2 Awards f	or Innovati	on w	on by In	stitution/Teacher	s/Research	scholar	s/Students during the year
Title of the	Name	of the			Date of Award		Category
innovation	Awa	rdee					Category
					=		-
2 4				42	35	2	
3.2.3 No. of Inc	ubation ce	ntre c	reated,	start-ups incubat	ted on camp	us durii	ng the year
Incubation	Incubation Centre		Name			Sponsored by	
<b>₩</b> X				_			-
U.		= ,,		0			
Name of the	Start-up		Nati	ire of Start-up	+	D	ate of commencement
· , • ) •				a <b>.</b> 1			
3.3 Research P	ublication	s and	Award	ls	a = 0		8

3.3.	1 Incentive to the teachers who i	eceive recognition/awards	
	State -1	National – 1	International -2
	1.) Reimbursement of conference	es registration fees and travel alle	
	2.) Special leave to attend confe		
3	3.) Weightage given for promoti	ons.	
4	4.) The faculty is encouraged by	sanction of grants from KES for	research through Research cell.
3.3.2	2 Ph. Ds awarded during the year	r (applicable for PG College, Res	earch Center)
	Name of the Department		Ph. Ds Awarded
	NIL		NIL
3 3 3	Desearch Publications in the Io	yamala notified on IICC	
3.3.3	Department	urnals notified on UGC website on No. of Publication	Average Impact Factor, if any
Nat	ional	140. Of 1 doll-cation	Average impact ractor, if any
1	Anatomy	1	* · · · · · · · · · · · · · · · · · · ·
2	Physiology	1	
3.	Biochemistry	2	* 1
4	Pharmacology	2	
5	Pathology	1	
6	Community medicine	1	<u> </u>
7	Ophthalmology	1	
8	General surgery	1	70 W
9	Orthopacdics	1	
10	Obstetrics& Gynaecology	4	
11	Anaesthesia	2	
12	Hospital Administration	1	
13	Psychiatry	2	
	rational	2	
Inter	Anatomy	2	f 2
1	Ophthalmology	1	
2	Biochemistry	2	
3	Obstetrics & Gynaecology	1	**************************************
4			<u> </u>
	ENT	1	
5	Anaesthesia	2	
6	Paediatrics	3	а : п <del>применя учения на применя на представа</del>
7	Pharmacology	1	
8	Pulmonology	1	
	Books and Chapters in edited Verence Proceedings per Teacher	olumes / Books published, and pa	(c) 130 I
	Department	No. of publications	Papers in National, International conference.
Anato	·*/	3	2
	emistry	4	1
	acology	3	1
Comm	unity medicine	1	6

Ophthalmology	2	4
General surgery	1	9
Orthopaedics	1	1
Obstetrics& Gynaecology	5	12
Anaesthesia	4	9
Hospital Administration	1	3
Psychiatry	2	6
ENT	1	6
Paediatrics	3	1
Pulmonology	1	2

3.3.5 Bibliometrics of the publications during the last Academic year based on average citation index in Scopus/ Web of Science or Pub Med/ Indian Citation Index

Title of the proper

Title of the paper	Name of the author	Title of the journal	Year of publication	Citation Index	Institutiona l affiliation as mentioned	Number of citations excluding self citations
	# 8 0   1 8 0				in the publication	
Study of variations in	Raghavendra	International	2018	3	KIMS	
muscular branches of	DR ,Nirmala D ,	A DESCRIPTION OF THE PROPERTY				
radial nerve in axilla	Maveshettar G			F:	E.	
and posterior	F	Research		ie .	× 1	Se III
compartment of arm	*	× ×				
Study of variation in	Raghavendra D	International	2018	1	KIMS	
course of radial nerve in	R, Nirmala D	Journal of				ш ј
axilla and posterior	,Maveshettar G	Anatomy and			Pro gr	A 2
compartment of arm	F.	Research				
Comparative study of	Dr. Vinay. P.D.	MedPulse	2019		KIMS	1 1
preloading with ringer's		International	ā	_		8
lactate and 6 %		Journal of		1		
hydroxyethyl starch for		Anesthesiology.	_	14		X1
prevention of		September				
hypotension following		2019; 11(3)				1
spinal anaesthesia	,		a ·	,		- 10 m
Hemodynamic stability	Dr. Vinay. P.D.	MedPulse	2019		KIMS	
after epidural fentanyl		International	11 11 11		1	
alone and with	11	Journal of				
magnesium sulphate for	11 11	Anesthesiology.				
post-operative	(7) iii iii	September	* * * * *	111		
analgesia: A	. 10	2019; 11(3)				
comparative study		2 2 20				
Hypouricemia in type 2	Bindu	International	2018		KIMS	
diabetes mellitus	Pavani.CH1,*,	Journal of	ato 18 de 18		1	

without nephropathy: A	Shruti	Clinical			1	
case control study	Mohanty2,	Biochemistry				
cube control study	Archana A.					
*	Dharwadkar3	and Research				
	Dilai Waukai S					
Assessment of Plasma	Dr. Md Masood	Scholars Journal	2018		KIMS	
Paraoxonase Activity in	Ahmed	of Applied				
Metabolic Syndrome	Shareef1, Dr.	Medical Sciences		1		
Patients	Nitin	(SJAMS)	2 8		21	- E
	Faldessai2*, Dr.					E 11 11
11 8	Rahul Saxena3,			1.5		-
į.	Dr. Ijen	18/2				20 0
m - 100 g i	Bhattacharya4	77			2	*
¥	,			5		
Evaluation of	sandhya	Journal of	2018	7	KIMS	
Dyslipidaemia and	Metta1, Nitin	Clinical and	* =	€		2
Echocardiographic	Fal Dessai2,	Diagnostic	.19		1	
Markers of Myocardial	Satyanarayana	Research		14		
Contractility in Smokers	Uppala3, Shruti				1	×:
with Ischaemic Heart	Mohanty4,	A	*			7.
Disease	Archana Anand	***	2 2 2			
	Dharwadkar5	*	a .			
		3	V			
Medical students	Bindu Pavani.	International	2018		KIMS	** 1.
perception on	Ch1, Nitin	Medical Journal		10	a x	1° g
assignment	Faldessai2*,	*	=	=		
1	Archana A	9 Å				
based learning in	Dharwadkar3,	9 91 9	11		5	-
biochemistry	Shruti		7 1 2 2			•
e e	Mohanty4		1 k			
			2010		****	=
Concept Map as a	Veena Bhaskar	Journal of	2018		KIMS	
Reinforcement and	S, Bindu Pavani.	Research in	= 1		55	, '
Assessment Tool in	Ch2,, Archana A	Medical		= =		
Biochemistry for First	Dharwadkar3,	Education and				
Year Medical Students	and Shruti	Ethics	10. T T 1	_50	a = 11	
	Mohanty4		a			
Fredrick of	Made D. C. When	Int I of modical	2018		KIMS	
Evaluation of	Mede R. S, Khan	Int. J. of medical science and	2018	Ξ =	KIIVIS	
Cervical	M.A, Rangari P.			= 2	w	
Lymphadenopathy	e a	clinical research				
			144		la:	8
in Lesions of Ear,	1 a ± a 1	"	,,			10.00
Nose and Throat -	* * * * * * * * * * * * * * * * * * * *		9 1 1 1			* .
An Observational		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	*	*	1 2	1.0
Contraction of the Contraction o	5	= = = = = = = = = = = = = = = = = = = =		0	55	
Clinical Trial.,						
"Comparitive	(Tropical	Dr. K Aruna	2019;		KIMS	
analysis of local	journal of					27

		*		-		
infiltration	of Ophthalmology				2.4	
tonsillar fossa wit				9		
Bupivacaine versu	Rhinolaryngolo					
	By)					
Dexamethasone o	n				1	- 4
post Tonsillectom	у	*	2			
morbidity -319.		2 2				
morbially 515.		1. The second se			0	
* * 7			E 1	=	12	
Prevalence and	Amrita Singh, N	Obs Gyn Review:	2018		TZTD 4G	
analysis of abnormal par		lournal of	2018		KIMS	
smear: Prospective study		P				
		obstetrics and				
of 752 patients in a		gynecology				
tertiary care hospital of		1 2		×*		
South India.	1 2	P .				
Prevalence of	Amrita Singh,	Obs Gyn Review	2018	ai ai	KIMS	
hypothyroidism in	Sushma	: Journal of		2.4		
pregnancy.	Pedduri.	Obstetrics and				
		Gynecology	2 2			1 6 2
Etialanianianianiani	D 0 1					41
Etiological evaluation of		Journal of basic	2019		KIMS	*
primary amenorrhea in	Sudhir	and clinical		-	*.	
a rural hospital		research.			27	
Cardiotocography in	Kavita K	Journal of basic	2018		KIMS	
labour and fetal	Ravitaix	and clinical	2018		KIMS	0
outcome	::	research.	- "			
·	E 11	research.				
Clinicopathological	Jayashree	Journal of basic	2019		KIMS	
study of ovarian		and clinical			TENVIS	
tumours in tertiary		research.			<sub>/-1</sub> -	
rural hospital	* . *	1		2	in the second	
F						
Etiological evaluation of	Asma Akhtar	Journal of basic	2018		KIMS	11
primary amenorrhea in		and clinical				
a rural hospital	1.00	research.	- 4		2	
	- 12 g at a	IV) or it is				
Clinical profile of cases	Dedeepya	Journal of basic	2018	P	KIMS	
with leiomyoma		and clinical				
		research.			a 9	
Companies hat	Cubbanna	Income al - Cl	2010		IZD (C	
Comparison between	Subhaprada	Journal of basic	2018	.	KIMS	
sublingual ad vaginal	T P	and clinical				
oute of misoprostol in		research.				1
he management of 1 <sup>ST</sup>		×				
rimester abortions	E 0	· · · · · · · · · · · · · · · · · · ·			-	
Clinicopathological	Bindu pallavi	JBCR	2019		KIMS	
	Dilluu pallavi	ואסמו	2013		VIIVIS	
tudy of abnormal		V		35.		

uterine bleeding in	10					
perimenopausal wome		18 1 7 x 3			W 11	
permienopausai wome	· 11					E
Ocular manifestations	Dr. Sudhir Babu P	, Med plus	2019	-	KIMS	
of HIV infections in	Dr Kanishk singh,		2013		KIMS	
southern India in the	Dr pavan kumar	journal of			1	
era of HAART	21 pavairaina	ophthalmology				
1 102	· · · · · · · · · · · · · · · · · · ·	opinmannology			8	
			5 V W 30		* 5 = 4	
DIIC					4	72
DHS versus PFN is		Journal of		2018	KIMS	
The state of the s	<b>f</b>	evidence based		- X		-
intertrochanteric		medicine and				
- A	a	health care				
comparative		(jebmh)	H			a s
study.	E # E	# II e A				
	2.		× 111		1	•
9 11 3			N 1 8			
	- Harris			٠		
Prospective study of	Komal Garg,	International	1 8 5	2018	KIMS	
clinical profile, causes,	Vamshi	Journal of				
risk factors, and	Krishna	contemporary		-		
treatment of	Kondle	Pediatrics in			10 To	
hyperbilirubinemia in	31	m E		₽"		
preterm and term	0 22 1	× -				
babies.	a with			0.11		
Chualta Fallandur Tui		Pediatr Neurol.		2019	KIMS	
Stroke Following Tri	1 1	rediati Neuroi.		2019	KIMS	
vial Trauma.	P, Swamy	= = =				
	D, Saini L.	2 2			-	
		* * * * * * * * * * * * * * * * * * * *				
Renal scarring following	Bandari B.	Sudan I		2010	7777.60	4 2
urinary tract infections	Bandari B, Sindgikar SP,	Paediatr.		2019	KIMS	=
in children.	Kumar SS,	r aculati.	_ ×		7	
	Vijaya MS,					
	Shankar R.					
•						
Pediatric Crohn disease	Kumar SS,	Indian I Child	101	2010	TVD 40	
: A case series from a	Sindgikar SP,	Indian J Child Health		2019	KIMS	
tertiary care center	Shenoy V, Sinha	пеан	4.5		1	
7 × ×	S, Shankar R.					11
	a lig	10.0			= -	
C.IC. II.	1 2				11	
Self-medication	. Patil SB,	National journal		2018	KIMS	
practices among second medical students in a	Bhaskar HN, Raikar SR,	of physiology, pharmacy and		9	₽ ×	
rural medical college of	Venkatarao Y.	pharmacology	-	- 10		*
telangana state		Printingcowy	- F - S			
¥						1

•	ji	t land the same a	*		- 1	
Effect of agomelatine of psychomotor function tests in healthy human volunteers.	Shovan P.	G, Int J Basic Clir Pharmacol		2018	KIMS	
2.52	Shrinivas Of Raikar, Shivara O B Patil, Venkata	77		2018	KIMS	
anti-retroviral therap	y Rao Y	Dharmacology			a <sup>T</sup> of	
government hospital.	ragnaveer B	9 2 9		9		
High Risk Behaviour in	K Anupama, CM	Indian Journal of		2019	KIMS	
patients with Alcohol	Pavan kumar	Psychiatry.		-		
Dependence.	Reddy.		2 14 M 1980			
Academic stress among high school children.	Anupama K, Sarada D	Indian Journal of Neurosciences		2018	KIMS	
			111 2	E 100	2 31 1 3 5 3 7	
Impact of Spectral	Ruchi Kothari,	Journal of		2018	2 =	n g
Severity of Alcoholism	Praveen	Neuroscience in				*
on visual evoked	Khairkar, Sneh	Rural Practice.	g in w		20	
potentials: A	Babhulkar,		. 115		8	
neuropsychiatric	Pradeep	, ~			8	9
analysis.	Bokaria			ar ar		
How to treat hazardous	Raje Madhav,	Journal of		2018	KIMS	
alcohol consumption?	Khairkar	Pharmaceutical	, in a	= -	TENIVIS	5 2
Which Method is better,	Praveen, Raje	and Biomedical				
Combination of	Anurag, Mishra	Sciences.				
Pharmacotherapy with	KK.	71%	5 , ×			9
Psychotherapy or	# # # # # # # # # # # # # # # # # # #					•
Psychotherapy Alone?			4 ±		5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Sensation Seeking and	Anupama K,	Indian Journal of		2018	KIMS	
High Risk Behaviour	Pavan Kumar	Neurosciences.		ä		x 1
among Alcohol	Reddy CM.	, e				
Dependent Patients.	e (C 5 1 4 2	1		* 1		
				45		

A Case of right sided pleural effusion due to	Dr. D. Kavya	Indian Journal of applied research	9 8	2019	KIMS	
acute on chronic	0 × E					•
pancreatitis : A Case						
report					7	
The study of evaluation	Dr. D. Kavya	International journal of	+ <	2018	KIMS	
of pulmonary function in various occupations.		scientific research	- H - H - H	u , :		e 1 _ 1
The study of pulmonary	A 1000	International		2019	KIMS	
hypertension in chronic respiratory illness.	Dr. Rekha	journal of scientific research			(RE) (F)	

3.3.6 h-index of the Institutional Publications during the year. (based on Scopus/ Web of science)

Title of the paper Name of the Title of the author journal h-index citations affiliation as

	author	journal		excluding self citations	mentioned in the publication
Study of variations in	Raghavendra	International			KIMS
muscular branches of	DR ,Nirmala D	Journal of	0X1 a s111	e ::	
radial nerve in axilla	, Maveshettar	Anatomy and	v. e		
and posterior	GF	Research			
compartment of arm	ve <sup>t</sup> =		* - *		
Study of variation in	Raghavendra	International	Œ		KIMS
course of radial nerve in	DR, Nirmala	Journal of	e 1		M
axilla and posterior	D	Anatomy and	18 18		7"
compartment of arm	,Maveshettar G	Research			•
	F.		a 1 8 "		
Comparative study of	Dr. Vinay. P.D.	MedPulse			KIMS
preloading with ringer's	111	International			4
lactate and 6 %	-	Journal of			a a
hydroxyethyl starch for	e	Anesthesiolog	19		
prevention of		y.September	e e di		
hypotension following		2019; 11(3)		a II	
spinal anaesthesia		-	9 94	2 (10) x 2 (2)	11 11 8
Hemodynamic stability	Dr. Vinay. P.D.	MedPulse			KIMS
after epidural fentanyl	15	International			
alone and with	· v	Journal of			н 1
magnesium sulphate for	a	Anesthesiolog	= 5	'. 	2 a
post-operative	A .	y.September			•

analgesia: A		2019; 11(3)	1			
comparative study		2019, 11(3)				4
comparative study	· F	51 20				in a
Hypouricemia in type 2	Bindu	International				KIMS
diabetes mellitus	Pavani.CH1,*,	Journal of				KIIVIS
without nephropathy: A	150 0	Clinical				
case control study			1 1 E	4		
case control study	Mohanty2,	Biochemistry	8.7			
4.7	Archana A	and Research				
	Dharwadkar3					
Assessment of Plasma	Dr. Md	Scholars		+		KIMS
Paraoxonase Activity in	Masood	Journal of				KIIVIS
Metabolic Syndrome	Ahmed		(F)			
Patients	5 - 50 (CH 10 (CH 10 CH	Applied	₹ 1			•
Patients	Shareef1, Dr.	Medical				
	Nitin	Sciences				
	Faldessai2*,	(SJAMS)		-		
	Dr. Rahul					P <sub>a</sub>
	Saxena3, Dr.					
	Ijen	1				The state of the s
	Bhattacharya4			-		
2 2	(4)	in the second			*	
Evaluation of	sandhya	Journal of				KIMS
Dyslipidaemia and	Metta1, Nitin	Clinical and	· ·	5		0 10
Echocardiographic	Fal Dessai,	Diagnostic				
Markers of Myocardial	Satyanarayana	Research				
Contractility in Smokers	Uppala3,	Common to Commonwealth Common		9		14 gt (4.1
with Ischaemic Heart	Shruti	5 III	,a	. 1		78 h
Disease	Mohanty4,		₹			
2.500.50	Archana	14, pr				
a a	Anand		g = 100		es a	
		F 9			=	
21	Dharwadkar5			Ī		
Medical students	Bindu Pavani.	International			20	KIMS
perception on	Ch1, Nitin	Medical			er *	KIIVIS
assignment	Faldessai2*,	Journal			9_	
assignment	Archana A	Journal		1	2) T	
based learning in		n   1    22		1.		
biochemistry	Dharwadkar3,	40				
bioenemistry	Shruti	111	*		5	
	Mohanty4	s				
Concept Man as a	Veena Bhaskar	Journal of				KIMS
Concept Map as a	Children and the Children and Children	■ STREETHERMONEUM				VIIVIO
Reinforcement and	S, Bindu	Research in				11
Assessment Tool in	Pavani. Ch2,,	Medical				•
Biochemistry for First	Archana A	Education and				
Year Medical Students	Dharwadkar3,	Ethics	er er			
	and Shruti				2	
n **	Mohanty4					s <sub>ii</sub>
1 1000 2 100 100				#I		7777.60
Evaluation of	Mede R. S,	Int. J. of				KIMS
	Khan M.A,	medical		<u> </u>	3 03	A

			F1			
Cervical	Rangari P.	science and				
Lymphadenopathy	4 4	clinical				0 pt
in Lesions of Ear,	. = **	research				
Nose and Throat -	8					
				-		-
An Observational	2 10			2		•
Clinical Trial.,						
"Comparitive	(Tropical	Dr. K Aruna				KIMS
analysis of local			- 1			
infiltration of	Ophthalmolog	1	11			, ** · · · ·
• tonsillar fossa with	y and Oto-					
1 / 2001   18 / 4 - 6 A / 2 - 6 A /	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	= 1				
Bupivacaine versus	ogy)"					
Dexamethasone on	5	17 Co.				in the second
post Tonsillectomy	020		- 18	0		e = e
morbidity -319.	3 *a					
morbialty 51%	a 11	ja		0		11 1
21.9				e		
Prevalence and	Amrita Singh,	Obs Gyn				KIMS .
analysis of abnormal pap	N Madhavi.	Review: Journal			a	4
smear: Prospective study		of obstetrics	121 1 8			
of 752 patients in a		and gynecology				
tertiary care hospital of						4
South India.	2.5°	10 100	,			70
Prevalence of	Amrita Singh,	Obs Gyn			La Caración de la Car	KIMS
hypothyroidism in	Sushma	Review:	w		,	
pregnancy.	Pedduri.	Journal of			_ 4	
	n swi	Obstetrics and	- =			1
		Gynecology	IVG		1	
Etiological evaluation of	Dr Sunita	Journal of				KIMS
primary amenorrhea in	Sudhir	basic and	-			20 2 1 00
a rural hospital		clinical	. H			4.4
		research.	- 1			*
Cardiotocography in	Kavita K	Journal of	П П			KIMS
Cardiotocography in labour and fetal	Navila N	basic and	134			CIMIN
outcome		clinical				1
outcome		research.			п	
11	1 24					· · · · · · · · · · · · · · · · · · ·
Clinicopathological	Jayashree	Journal of		il i	E1	KIMS
study of ovarian	12	basic and				
tumours in tertiary	·	clinical			76	7,
rural hospital	11 CON 11 11 11 11 11 11 11 11 11 11 11 11 11	research.			20 19	
Etiological evaluation of	Asma Akhtar	Journal of				KIMS
primary amenorrhea in		basic and				
FJ minoriori mou m						

a rural hospital	n +	clinical	A		
		10.000			÷
n 0		research.	J. 11 8	*	# H
Clinical profile of cases	Dedeepya	Journal of			III IG
with leiomyoma	1.5	basic and			KIMS
		clinical			E 3
	z = z	research.		14	
•		rescaren.			
Comparison between	Subhaprada	Journal of			KIMS
sublingual ad vaginal	= "	basic and			KIND
route of misoprostol in	12 151	clinical		8 152	
the management of 1st		research.		e a = *	
trimester abortions	N2			101	
	v			0	
Clinicopathological	Bindu pallavi	JBCR			KIMS
study of abnormal	V F	1 min 1			1211110
uterine bleeding in			=	=	•
perimenopausal women			2 0 3	- A - a	
Ocular manifestations of	D 0 11 - 1	13			
	Dr. Sudhir Babu	Med plus	6.		KIMS
HIV infections in	P, Dr Kanishk	international			
southern India in the	singh, Dr pavan	journal of			*
era of HAART	kumar	ophthalmolog			2
3	-	у			
7 *		7			
		11	11 07		
DHS versus PFN in	Dr.P. Ashok	Journal of		- 18 - 18	7777.50
stabilization of		evidence			KIMS
intertrochanteric		based			
fractures – a		medicine and			
comparative		health care			
		(ЈЕВМН)	=		•
study.		(LEDMIL)			
		2.			
Prospective study of	Vomal Carr				
clinical profile, causes,	Komal Garg, Vamshi	International			KIMS
risk factors, and		Journal of	2 2		
*	Krishna	contemporary			ŢĮ
treatment of	Kondle	Pediatrics in		W 11	
hyperbilirubinemia in	H M		2	E	" = " =
preterm and term	*.			* 1	
babies.		v 1			
C. 1 7 11		Dadiatu			
Stroke Following Tri	Mauaan	Pediatr	ga ga	9	KIMS
vial Trauma.	P, Swamy	Neurol.			
	D, Saini L.	-			•
- 1	D. Salili I.	I I			
4 W	D, Sailli L.	21	E 71 N	_ = .	

Repal scarring following urinary tract infection		B, Sudan J P, Paediatr.			KIMS
in children.	Kumar SS Vijaya MS	· ·		* * * * * * * * * * * * * * * * * * *	
1131	Shankar R.	7).		E a an in	- 13
18 F	N.	11 12			4
Pediatric Crohn disease		Indian J Child			KIMS
: A case series from a tertiary care center	Sindgikar SP, Shenoy V,	Health		Π α	
- same contex	Sinha S,	# # # # # # # # # # # # # # # # # # #		9	-
	Shankar R.			m Au	7
	n a				
Self-medication practices among second	. Patil SB d Bhaskar HN		2 2		KIMS
medical students in		A CONTRACTOR AND A CONT	5		
rural medical college o		pharmacy and			
telangana state		pharmacology			
3.4					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Effect of agomelatine or	n Sirisha G.	Int I Deele Cli		E	
psychomotor function		Int J Basic Clin Pharmacol			KIMS
tests in healthy human		, xaa ga saa saasa sa			u geografia
volunteers.	Shriniyas	National	2		KINAG
An Assessment of		Journal of	11 -		KIMS
Adverse reactions to	Jilivaraj D	Physiology,	E 20 11		
anti-retroviral therapy in a south indian	,	Pharmacy & Pharmacology			
in a south indian government hospital.	Rao Y, Raghuveer B				s, i
80 voramono noopreun	Ragnuveer B				h n n
High Risk Behaviour in	K Anupama,	Indian Journal			WD 40
patients with Alcohol	CM Pavan				KIMS
	Sto suscess year house.	of Psychiatry.	-		- N
Dependence.	kumar Reddy.		-	1804 (4.31)	
The second second			7	1 12 31	
Academic stress among high school children.	Anupama K,	Indian Journal	9	* .	KIMS
ingii school cinkircii.	Sarada D	of Neurosciences		· · · · · · · · · · · · · · · · · · ·	5° 1
		Trear obelefices		- 11	•
e				A	
Impact of Spectral	Ruchi Kothari,	Journal of		4	KIMS
Severity of Alcoholism	Praveen	Neuroscience	,		***
on visual evoked	Khairkar, Sneh	in Rural		E	× 1
potentials: A	Babhulkar,	Practice.		11	
neuropsychiatric	Pradeep	8		**	
analysis.	Bokaria		e *		

		68							177
How to treat hazar alcohol consumpti Which Method is b Combination of	on? etter,	Raje Madhav, Khairkar Praveen, Raje Anurag,	F 1 E	ournal Pharmaceutic ar Biomedical Iciences.	5155				KIMS
Pharmacotherapy	with	Mishra KK.							
Psychotherapy or		25	1 2			a: -			
Psychotherapy Alo	ne?	12					n u		
Sensation Seeking	and	Anupama K,		ndian Journa	al		e v		KIMS
High Risk Behaviou	ır	Pavan Kumar	0: N				- K		1
among Alcohol		Reddy CM.	IN	euroscience	S				
Dependent Patients	s.		•			10.5			
								, , , , , , , , , , , , , , , , , , ,	
A Case of right side	d	Dr. D. Kavya	In	dian Journa	ıl		V		KIMS
pleural effusion due	e lu		of	11	d				
acute on chronic			re	search		e e			
pancreatitis · A Cas	۾ ا					Ð		- 1	
report			SE SE			2 64			
The study of evalua of pulmonary functi in various occupation	on	Dr. D. Kavya	joi sci	ternational urnal of ientific search	f	* **	s	24	KIMS
The study of pulmor	nary		Int	ternational		2 ;			KIMS
hypertension in chrorest illness.	onic	Dr. Rekha	sci	irnal of entific search					•
3.3.7 Faculty partic			nfe				ing the year:		
No. of Faculty	Inte	ernational level		National	lev	el	State level		Local level
Attended Seminars/ Workshops		4		32			37		165
Presented papers		11	-	24			26		14
Resource Persons				06			23		41
3.4 Extension Active 3.4.1 Number of extension Government Organisa Fitle of the Activities	nsion ar tions tl	Organising u	/Re nit/	d cross/Youtl	h Ro Nui	ed Cross (Y mber of te	RC) etc., during achers co-	ng the Num	year ber of students
g	-	collaborating	age	ency	ord	inated suc	h activities	parti activ	icipated in such ities

Anti Leprosy av	1			10	15		
program		Medic	ine & DMH(	О	10	45	
Suicide prevention  Awareness program	Dept of Psychiatry			5	36		
World environmen	UHTC Panagal			4	32		
World population	Dept. of Community			a <u>a</u>	No. No. 1		
awareness program	Medicine			2	28		
World breast feeding program	ng week	Dept. of Community Medicine & DMHO			2	35	
World AIDS day	noster				x '		
competition	poster	Department of Community Medicine & HIV centre Nalgonda.			4	35	
World TB Day aw campaign	vareness	RNTCP Nalgonda			2	45	
3.4.2 Awards and re bodics during the ye Name of the Activity	ar		4	50 (-)	12 00 2 1	ent and other recognized	
value of the Activity	y Awarc	ard/recognition			Awarding bodies Indian Red Cross	No. of Students benefited	
Mega Health Camp	0 130	Recog	nition		Society	105	
	Organising unit/ agency/ accollaborating agency		activity		teachers coordinated such activities	participated in such *activities	
Kanti Velugu	Govt of		Cataract		6	11	
ann volugu	Telangar		surgeries				
OBCS	National		Control	of	6	30	
	program		blindness				
Swachh Bharath RHTC		Swachh Bharath		arath	10	28	
	cherlapally awareness		7	18			
	_	UHTC Panagal program				A Example 1	
Kaya Kalp	Govt of			harat	12	71	
	MOH & FW, Abhiyan			**			
NABH				T F	*	a lea	
5 Collaborations		ie H	R on tw	3 1		7 · · · · · · · · · · · · · · · · · · ·	
NAME OF THE OWNER OF THE PARTY	aborative	activities	for research,	facul	ty exchange, studen	t exchange during the year	
Nature of Activity		articipant Source of fina		finan	cial support	Duration	
Student exchange		24	KES	S/IIT	/ BMJ	2 Weeks	
			s for internsh	ip, on	-the-job training, pro	oject work, sharing of	
search facilities etc. ature of Title of the			partnering Duration				
ofrance of I Title of I	No.	Tame of the partnering			Duration	participant	

linkage	linkage	institution/ industry /research lab with contact details	(From-To)	
MOU	Laboratory service Agreement t	Credence Laboratory Services & KIMS Narketpally	2019-20	KIMS Laboratories
Training/ MOU	Fertility Training	Kamineni Fertility Centre	Oct - Nov	OBG Post Graduates.
MOU •	Eye bank technician training	LV Prasad eye institute Hyderabad	2018 -2019	Ophthalmic Technician
Training	PG Super specialty training	Regional institute of Ophthalmology, Hyderabad	Aug –Sep every year	Ophthalmology Postgraduates
Training	PG Super specialty training	MNJ Cancer institute, Hyderabad	Aug –Sep every year	Obstetrics and Gynaecology Postgraduates
Training	PG Super specialty training	Niloufer Hospital Hyderabad	Aug – Sep every year	Paediatrics Postgraduates.
Training	PG Super specialty training	NIMHANS, Bengaluru	Oct – Nov Every year	Psychiatry Postgraduates.

3.5.3 MoUs signed with institutions of national, international importance, other universities, industries,

corporate houses etc. during the year

Organisation	Date of MoU signed	Purpose and Activities	Number of students/teachers participated under MoUs		
LV Prasad Eye	March	Eye Bank activities and	10		
Institute Hyderabad	2019	Referral	10		
District collector Nalgonda  Jan 2019		Implementation National programs	18		
DM&HO Nalgonda	July 2018	NPCB National program for control of blindness under DBCS ( District blindness control society.)	16		
	1	RNTCP ( National Tuberculosis Control Program)	12		

#### CRITERION IV – INFRASTRUCTURE AND LEARNING RESOURCES

4.1 Physical Facilities

4.1.1 Budget allocation, excluding salary for infrastructure augmentation during the year

augmenta	or infrastruc ation	ture		Budget utili	zed for infra	structure development		
10,500,0	00/-	П	10,480,596/-					
4400		2000						
4.1.2 Details of augm	ientation i	n infrastr	ucture fa			r		
Communa	Facilities			xisting	Newly added			
Campus area			60	0 acres	a la			
Class rooms	3 3 11 3		(i)	07	01			
Laboratories	K E B B			08	01			
Seminar Halls				28	189 g 1			
Classrooms with LCD				7	2			
Classrooms with Wi-F				0	3			
Seminar halls with IC'	T facilities	1 8			4	1		
Video Centre	1 2 3			9	1	1 *		
No. of important equip	ments pur	chased (≥ 1	1-0 lakh)	21 11	334	23		
during the current year			ti l	= 1				
Value of the equipmen	t purchased	d during th	e year (R	s. 3655	552431/-	13777856/-		
in Lakhs)	-		l					
Others		2 1				w		
•								
4.2 Library as a Lear			2 8 0	91	1 1 1 1 1 1 1 1 1			
4.2.1 Library is automa	ited {Integr	rated Libra	ıry Manaş	gement Syst	tem -ILMS	}		
				E/ U. 148//				
Name of the II MC	Noture	fautamati			1 4 2			
		f automati		Version	* * *	Year of automation		
software	(fully or	partially)	on	Version	8 8	Year of automation		
software MCMS	(fully or		on		8 8			
software MCMS	(fully or	partially) PARTIAL	on	Version 1.1	8 8	Year of automation 2018		
software MCMS	(fully or	partially) PARTIAL	on Newly	Version 1.1 added		Year of automation 2018 Total		
MCMS 4.2.1 Library Services:	(fully or	partially) PARTIAL	on	Version 1.1	8 8	Year of automation 2018 Total		
Name of the ILMS software MCMS 4.2.1 Library Services:  Text Books Reference Books	(fully or l	partially) PARTIAL	Newly No.	Version 1.1 added	No.	Year of automation 2018 Total		
MCMS 4.2.1 Library Services:  Text Books	Exist No. 17789	partially) PARTIAL	Newly No. 439	Version 1.1 added	No. 18228	Year of automation 2018 Total		
MCMS 4.2.1 Library Services:  Text Books Reference Books -Books ournals	Exist No. 17789	partially) PARTIAL	Newly No. 439	Version 1.1 added	No. 18228	Year of automation 2018 Total		
MCMS 4.2.1 Library Services:  Fext Books Reference Books -Books ournals -Journals	Exist No. 17789 5248	partially) PARTIAL	Newly No. 439	Version 1.1 added	No. 18228 5378	Year of automation 2018 Total		
MCMS 4.2.1 Library Services:  Ext Books Reference Books -Books ournals -Journals Digital Database	Exist No. 17789 5248	partially) PARTIAL	Newly No. 439	Version 1.1 added	No. 18228 5378	Year of automation 2018 Total		
MCMS 4.2.1 Library Services: Fext Books Reference Books -Books ournals -Journals Digital Database ED & Video	Exist No. 17789 5248 142 2120	partially) PARTIAL	Newly No. 439	Version 1.1 added	No. 18228 5378 145 2120	Year of automation 2018 Total		
MCMS 4.2.1 Library Services: Ext Books Reference Books -Books ournals -Journals Digital Database D & Video ibrary automation	Exist No. 17789 5248 142 2120 40	partially) PARTIAL	Newly No. 439	Version 1.1 added	No. 18228 5378 145 2120 40	Year of automation 2018 Total		
MCMS 4.2.1 Library Services:  Text Books Reference Books -Books ournals	Exist No. 17789 5248 142 2120 40	partially) PARTIAL	Newly No. 439	Version  1.1  added Value  -  -  -  -  -  -  -  -  -  -  -  -  -	No. 18228 5378 145 2120 40	Year of automation 2018 Total		

4.3 I	Γ Infras	tructur	2	4							
			radation (or	verall)		* [		3			
=	Total Comp uters	Compu ter Labs	Internet	Browsing Centres	Comp uter Centr es	Office	Departments	Available band width (MGBPS)	Others		
Existi ng	190	01	109	02	01	06	51		_12		
Adde d	6	1	06	01	01	01	16		05		
Total	196	01	115	03	02	07	67	20	17		
		: 20 M				# 4		8 99			
4.3.3 I	Facility 1	for e-cor	itent	*				es es	1.		
Name of the e-content development facility					reco	Provide the link of the videos and media centre and recording facility					
Intranet					Intr	Intranet					
(Under	Gradua	te) SWA	YAM other		latform ?	NPTEL/N	NMEICT/any	e-PG-Pathshala CE0 other Government	C +		
Name of the Name of the module			Pla	Platform on which		Date of launching c -					
teacher	eacher			mo	module is developed content						
	Rakesh iswas	B	Blogs and case discussions			Social media platform		September 2019			
	Suresh		Research	training	1 E	Swayam September 2019			)19		
	Shruti hanty	3 3	Research training			Swa	yam	September 20	)19		

4.4 Maintenance of	Campus Infrastructure	1 %	15 A
4.4.1 Expenditure inc	curred on maintenance of pl	ysical facilities and acad	emic support facilities,
excluding salary com	ponent, during the year		*
Assigned budget on academic facilities	Expenditure incurred on maintenance of academic facilities	Assigned budget on physical facilities	Expenditure incurred on maintenance of physical facilities
Rs.22.00 Crores	Rs.21.63 Crores	Rs.4.0 Crores	Rs.4.47 Crores

4.4.2 Procedures and policies for maintaining and utilizing physical, academic and support facilities - laboratory, library, sports complex, computers, classrooms etc. *(maximum 500 words)* (information to be available in institutional Website, provide link)

#### Classrooms:

- Seven State of art AC classrooms with seating capacity of 200 each and internet enabled smart boards and high quality Audio Visual system available.
- Two multi-purpose halls with seating capacity of 350 and 500 available for conferences & CMEs
- Classrooms maintained by trained EDP personnel.

#### Academic:

\*Full time qualified and trained teachers are available throughout the year for academic activities.

Additional support and guidance for students specially slow learners, by conducting special classes by the faculties of respective subjects.

- Regular CMEs on monthly basis taken up departments on rotation basis for enrichment and updating of current knowledge.
- Students are encouraged for conducting CMEs and attending State and National and international Conferences.
- Guest lectures presented by eminent speakers on selected topics on every second Wednesday of the month.

#### Computers:

- Every department is equipped with computer and internet, available for teaching and learning purpose.
- Digital Library is equipped with 40 computers with internet connection and connection to MEDLARS and NTRUHS available throughout the year for student learning purpose.
- Institution is a recognized centre for online evaluation of answer scripts by Dr.NTR University of Health Sciences and KNR University of Health Sciences. There are 25 computers with internet facilities available.

#### Laboratory:

- All Pre and Para clinical departments are equipped with appropriate laboratories, total no. of labs available:
- Anatomy, Biochemistry, Physiology, Pathology, Pharmacology, Forensic Medicine one each and Microbiology two labs.
- All the laboratories are equipped with appropriate high quality equipments and separate Lab technicians are available in each lab for maintenance.
- Apart from above labs we have:
- Fully equipped Central Research Laboratory to carry out research projects by faculty and students.
- Genetics Lab: Lab is equipped with latest equipments for genetic research and diagnosis DNA extractors, thermal cyclers etc. Lab is headed by a qualified Geneticist
- Medical Education Unit has a Skills lab with simulator mannequins for demonstration and training of skills like ACLS and BLS training etc.
- The Research committee members scrutinize and approve the research projects before submitting for external/internal funding
- Qualified and trained biomedical engineers are dedicated towards maintenance and upgradation of labs.

# Library:

- Air conditioned Library of 250 seating capacity and 18228 books available with various national and international journals in all subjects available.
- Library committee conducts quarterly meeting and seeks suggestions from faculty keeps updating latest addition of textbooks in all subjects and journals and maintenance

Total no. of books available:

:18228

Total No of journals available.

:145

# Sports:

- Dedicated time is allotted in the time table for student's Sports and recreational activities.
- Students are encouraged to participate in state and national level sports activities where they have bagged awards in various events.
- Dedicated Physical Education teacher is available on the campus for fitness and sports training and guidance of students.
- Separate Sports room for Boys and are Available in the campus.
- Sports room and well equipped gymnasium available on the campus for students.
- Playground for Football and Cricket practice net grounds available for students and faculty.

# **CRITERION V - STUDENT SUPPORT AND PROGRESSION**

#### 5.1 Student Support

5.1.1 Scholarships and Financial Support

e to the contract of the contr	Name /Title of the scheme	Number of students	Amount in Rupees
Financial support from institution	A	40	1000000
	Financial sup	port from other source	ces
a) National	SC / ST /BC / EBC		
	Minority scholarship	38	6873750
•	scheme		
b) International	" , 5		

5.1.2 Number of capability enhancement and development schemes such as Soft skill development, Remedial coaching, Language lab, Bridge courses, Yoga, Meditation, Personal Counselling and Mentoring etc.,

Name of the capability enhancement scheme	Date of implementation	Number of students enrolled	Agencies involved
Student Counselling along with Parents	June – July 2019	107	Principal & UG Coordinator KIMS, Narketpally.
Yoga and Meditation	June -July 2019	200	Medical Education Unit, KIMS, Narketpally
One to One counselling	August-Sept. 2019	200	Department of Psychiatry, KIMS Narketpally
Suicide prevention program	September 2019	115	Department of Psychiatry, KIMS Narketpally
Attitude and	June 2019	135	Medical Education Unit,

	unication pment pro		•	=	## #**			KIMS	, Nark	etpally
	students be		guidance	for com	petitive e	xaminat	ions and o	career counsel	ling of	fered by the
Year	Name of	the scheme	- I SUBSCIENT THE PROPERTY OF		nce stu	mber of b dents by inselling		Number of str who have pas the competiti exam	sed in	Number of students placed
2018	Bhatia P entrance Course	G training		121 98 98			98			
2019	Beckers coaching	USMLE	6	03		21		13 3 <b>3</b>	7	
sexual l	stitutional harassmen rievances i	t and ragg	ing cases	during th			Average	nt grievances,	*	
	-				-		redressal	-		
21 D	dent Prog etails of ca Or ne of				year Name	of		Campus of Students	Nı	umber of
Organ	izations sited	of Student Participa d	s Stud	ents	Organiza Visite	ations		cipated		ents Placed
	-	. =	-		- 4		8	-		-
.2.2 St	udent prog	ression to	higher ed	ucation	in percent	age dur	ing the year	ar 2018-2019	, a	2
l'ear	Number of students of into higher education	enrolling er	Programme graduated from		oartment duated n	The state of the s		19 II	Name of Programme admitted to	
2018 - 2019	98	8	MBBS	I	KIMS	<ul> <li>JIP</li> <li>Ka sci</li> <li>MI</li> <li>CA</li> <li>PII</li> <li>Ossi Hy</li> </ul>	ences , Na NR Medic IRMS MS mania Me derabad	ndicherry stitute of Med	*	PG Courses

	0 14				Hyderaba	d	
	2	MS	-	nthalmo logy	• LVPEI Hy		Super Speciality Fellowshi
- 2	4	MD		eneral edicine	Osmania med Gandhi Medic		DM
	2	MS	su	eneral rgery	Surgical Oncology		MCh
5.2.3St	udents qualifying in ET/SLET/GATE/GM	state/ nation	nal/inter	national l	evel examination	ons during the year	(eg:
TVE I76	Items	IAI/CAI/C		of Studer	its selected/	Registration	number/roll
NET				quali	ying	ing number for	
SET					1 T		
SLET	*						
GATE	,	-					
GMAT			`c.				35 25
CAT	**************************************				* E* 151		
GRE				5.4	2/ A)		
TOFEL					7		
Civil Se	mices				1.5		0.7 *
	overnment Services	5 N					14
Any Oth	A CONTRACTOR OF THE PROPERTY O		U.	00			<u> </u>
Any Ou	ICI NEET			98			(r)
5 2 4 Sp	orts and cultural acti	vities / com	natitiona	organica		:11.11	
Acti	vity	Vities / com	vel	organise	at the institut		e year -
	Ball, Basket Ball,		VEI	-		Participants	1
foot ball	4 5	Ins	stitutional level		* =	64	
Cultural	Activities	Ins	titutional	level		310	8
F 2 C+	E NE E						
5.3 Stu	dent Participation	n and Acti	vities			er - 31	
				ng perfoi	mance in spo	rts/cultural activi	ties at
5.3.1 Nu national	mber of awards/me /international level	edals for o	utstandi	ng perfoi event sh	mance in spo	rts/cultural activi ed as one)	ties at
5.3.1 Nu	mber of awards/me/ /international level   Name of the award/	edals for o (award for National/	utstandi r a team	ng perforevent sh	mance in spo	ed as one) Student ID	Name of the
5.3.1 Nu national	mber of awards/me /international level	edals for o	utstandi r a team	event sh	ould be count	ed as one) Student ID number	
5.3.1 Nu national	mber of awards/me/ /international level   Name of the award/	edals for o (award for National/	utstandi r a team	event sh	ould be count	ed as one) Student ID	Name of the
5.3.1 Nu national	mber of awards/me/ /international level   Name of the award/	edals for o (award for National/	utstandi r a team	event sh	ould be count	ed as one) Student ID number Games winners	Name of the
5.3.1 Nu national	mber of awards/me/ /international level   Name of the award/	edals for o (award for National/	utstandi r a team	event sh Sports	ould be counted Cultural	ed as one) Student ID number Games winners Over all	Name of the
5.3.1 Nu national	mber of awards/me/ /international level Name of the award/ medal	edals for o (award for National/	utstandi r a team	event sh Sports Lawn	ould be counted Cultural	ed as one) Student ID number Games winners	Name of the
5.3.1 Nu national Year	mber of awards/me/ /international level Name of the award/ medal	edals for o (award for National/ Internation	utstandi r a team onal	event sh Sports	ould be counted Cultural	ed as one) Student ID number Games winners Over all	Name of the
5.3.1 Nu national	mber of awards/me/ /international level Name of the award/ medal	edals for o (award for National/	utstandi r a team onal	Event sh Sports Lawn Tennis	ould be counted Cultural	ed as one) Student ID number Games winners Over all	Name of the
5.3.1 Nu national Year	mber of awards/me/ /international level Name of the award/ medal	edals for o (award for National/ Internation	utstandi r a team onal	event sh Sports Lawn	ould be counted Cultural	ed as one) Student ID number Games winners Over all	Name of the
5.3.1 Nu national Year	mber of awards/me/ /international level Name of the award/ medal	edals for o (award for National/ Internation	utstandi r a team onal	Lawn Tennis Basket	ould be counted Cultural	ed as one) Student ID number Games winners Over all championship	Name of the student

2018	NTRUHS 21 <sup>st</sup> intercollegiate games meet for men Narayana medical college	National	Basket ball winners Table Tennis Runners	146037	S . Bharath Kumar ( Gold Medal)

5.3.2 Activity of Student Council & representation of students on academic & administrative bodies/committees of the institution (maximum 500 words)

Class representatives and volunteers from all the semesters constitute student council. Equal opportunities are given to both boys and Girl students. They are included in various academic and administrative bodies of the college and involved in various activities.

Apart from getting involved in various activities "Student's council represents various problems faced by the students and their redressal at administrative levels.

- Health Education & Social Service Committee.
- Ant Ragging committee.
- Student redressal committee
- Academic audit committee.
- Integrated PG teaching committee.
- Sports, cultural and literary committee.
- Students Alumni association
- Students Research committee.

#### Health Education & Social Service Committee:

• Student representatives in coordination with department of community medicine and marketing are actively involved in health education and spreading awareness among the rural population of Nalgonda district on various issues like smoking hazards, AIDS etc.

# Anti Ragging committee:

• Committee is formed including senior and junior students, administrative faculty, wardens of the hostels and police personnel from Nalgonda district. Police department conducts session on 'ragging and its ill effects' and statutory rules to sensitise senior and junior students separately.

#### Student redressal committee:

Students can approach this committee to represent their grievances regarding academic, administrative or any other issues. The issues are discussed and addressed as per the needs and

policies.

#### **Academic Audit Committee:**

A team of senior faculty, members of MEU and members of IQAC constitute the Audit Committee.
They visit one department per day and have meeting with departmental leadership, faculty, and students. They ask questions pertaining to the current state of their efforts to improve student learning and the academic quality of their programs. They verify the documentation supporting the exemplary practices along with describing their strengths and weaknesses, in areas of learning Objectives, designing curriculum, designing teaching learning methods and developing student learning assessment. They describe areas and scope that need improvement.

# Integrated PG Teaching Committee.

• This committee constitutes of Postgraduates, PG coordinator and various faculties. The committee decides on various topics to be included in the academic calendar based on the needs assessment done by the PG coordinator along with member postgraduates.

### Sports, Cultural and Literary Committee.

• This committee is represented by administrators, students and physical education teacher. They focus on the quality of various cultural events organized in the institution and sports teacher is engaged in picking up potential sports student and training them for various levels of intercollegiate competitions. The students also participate in co-curricular activities like debate, quiz, poster competition, Theme competition, elocution and theme-painting competition organised in the institution. Prizes are awarded to the three participants with highest scores.

#### Alumni association

• Constitutes of all passed out students and present students. They are in contact with the alumni students in arranging the guest lectures and inspirational talks for undergraduate students.

#### **Students Research committee:**

Research committee consists of postgraduate and undergraduate representative. They conduct research orientation in coordination with central research cell and motivates the students to take up small research projects and ICMR projects.

5.3 Alumni Engagement

- 5.3.1 Whether the institution has registered Alumni Association? Yes/No, if yes give details (maximum 500 words):
- 5.3.2 No. of registered enrolled Alumni: 129
- 5.3.3 Alumni contribution during the year (in Rupees): Nil
- 5.3.4 Meetings/activities organized by Alumni Association: 4

# CRITERION VI -GOVERNANCE, LEADERSHIP AND MANAGEMENT

### 6.1 Institutional Vision and Leadership

•6.1.1 Mention two practices of decentralization and participative management during the last year (maximum 500 words)

Governance, Leadership and management is brought through Decentralisation and participation.

Decentralization and participative management leads to enhanced involvement of the faculty and students in implementation of policies and procedures.

#### ADMINISTRATVE DECENTRALISATION:

- Administrative decentralisation undertaken under a Statutory Body.
- Statutory body constitutes of following member

Principal, Medical Superintendent, Vice principal administration, Human resources., Civil and electrical engineering department. Inspection coordinator, UG coordinator, PG coordinator, Medical education unit coordinator.

Functions of statutory body are to form various committees for smooth administrative functioning of institutional activities. Various committees meet at a stipulated time, chalk out program, and supervise their implementation. Body conducts wooldy review meetings and governs their activities. Apart from this, Statutory Body also conducts regular administrative audit with feedback to the concerned department.

Statutory cell also looks after various on-going inspections in the institute by various government and regulatory hodica. It is responsible for providing support to the administrative staff during these inspections. It has crucial role in regulating and implementing discipline within the campus among students, faculty and non-teaching staff.

#### ACADEMIC DECENTRALIZATION:

Academic decentralisation is done for simultaneous and smooth conduct of earmarked the academic activities through the year.

Apart from Curriculum committee Vice principle Academics supervises the implementation of academic •calendar prepared in January of every year.

- The central academic activities conducted every week on Wednesday, Thursday and Friday, includes integrated seminar, Panel discussion, Clinical Case Discussion, Mortality and Morbidity meetings and Clinico-Pathological meetings. All the departments are delegated responsibility to organise and participate on rotation.
- Alignment and Integrated teaching committee comprises of Vice principal academics and Faculty representatives from pre clinical, para-clinical, medicine & allied branches, Surgery & allied branches. Committee plans and monitors the topics, type and schedule of integrated teaching.
- The Academic Vice principal and two senior professors are members of the core committee.
   Depending on the topic of presentation, the concerned faculty from clinical, Para clinical & Pre clinical departments are included in the planning team. The faculty and Postgraduates are actively involved during presentations.
- The decentralization of the weekly academic program has empowered the faculty of all departments to participate and give suggestion and ideas for bettering the program. This has resulted in improved

effectiveness and efficiency

6.1.2 Does the institution have a Management Information System (MIS)?

Yes/No/Partial:

Yes

# 6.2 Strategy Development and Deployment

6.2.1 Quality improvement strategies adopted by the institution for each of the following (with in 100 words each):

# Curriculum Development :

Institute has constituted a Curriculum committee consisting of seven members headed by Principal , other members are coordinator – Medical Education Unit , one representative each from , Preclinical subjects, Para clinical subjects, Medicine and allied subjects, surgery and allied subjects and a student representative from 9<sup>th</sup> semester.

Every department has a curriculum committee, which meets in January and July of every year. They suggest change in the curriculum required in their concerned specialty. After being ratified by the chairperson and HOD, it is forwarded to the institutional Curriculum committee, which after necessary changes is incorporated into the institutional curriculum. It is further recommended to the university.

# Topics added in the curriculum are:

- End postings exams and skills certification for interns.
- Communication skills training for interns.
- Recent advances in retinal diseases and their management.
- Mandatory peripheral postings in other specialised areas of concerned department.
- Introduction of EPA based teaching learning among OBG postgraduates.

# Strategies For Improved Teaching and Learning

Newer and Innovative strategies for teaching and learning are adopted at our institution for undergraduate and postgraduate teaching. Necessary training is imparted to the faculty to empower them with the latest medical education tools on a regular basis.

#### **UNDERGRADUATE:**

# Teaching students on the grounds of Competency Based Medical Education.

- Focus is on one to one student learning and interactive teaching and learning methods.
- Early clinical Exposure for students of 1<sup>st</sup> MBBS.
- Role plays on the burning issues like communication skills and Doctor patient relationship.
- Seminars, panel discussions, symposiums, integrated teaching.
- Group dynamics are frequently used in undergraduate teaching
- Student sensitization Short video demonstration prior to bed side teaching.
- Teaching in skills lab using mannequins and dummies.
- Communication skills teaching based on AETCOM module.
- Introduction of Self Directed learning (SDL as per new curriculum.

Implementation of Competency Based Medical Education.

# \*POSTGRADUATE:

- Fortnightly Formative assessments for postgraduate students.
- Self-directed learning and regular assessments through slip tests.
- Peer assisted learning clubbed with feedback.
- One-minute preceptor method of teaching leaning.
- E Learning portal and internal.
- Weekly Grand Rounds coupled with SNAPS model of teaching.
- Integrated teaching presentations on every 3<sup>rd</sup> Wednesday with award for best presentation
- Weekly Clinical Meeting where in postgraduate will present and discuss cases in the supervision of designated faculty.
  - Examination and Evaluation Quality Improvement Strategies

# Undergraduates: Formative Assessment:

- All MBBS under graduate students will be having three internal assessments as a part of
  formative assessments, followed by feedback and counselling. Pre-final examinations including
  practical and Viva voce will be conducted as per university pattern. All the answer scripts are
  subjected to double evaluation.
- Apart from this all students going to clinical training will undergo end posting examinations.
- Institute is conducting assessment, MCQ's and Objective Structured Clinical Examination to meet with the global standards.

# Postgraduate Assessment: Formative Assessment:

- All the postgraduates undergo formative assessment in the form of Practical /Viva/Theory every fortnight followed by feedback.
- Every six months postgraduates have university internal examination as a part of formative assessment.
- EPA (Entrusted Professional Activity) Module is being implemented for postgraduate training in department of Ophthalmology and Obstetrics and Gynaecology.

# Research and Development

Our institute is a recognized SIRO centre. We have a good research oriented faculty with ample number of quality research projects rolling out every year.

# Faculty:

- Conducting Faculty development program for research methodology and statistical analysis is highlighted.
- Faculty promotions are given based on their quality research work as per Medical Council of India

#### Guidelines.

Two of the faculty are undergoing FAIMER training with Medical Education Research project as part
of the training program.

# Postgraduate:

Postgraduates have to take approval from ethics committee and thesis committee before starting-their thesis work

Dissertation is reviewed quarterly by centralised dissertation committee to know the progress of the work done and appropriate feedback is given

- Postgraduate students are mandated to have one research publication under the guidance of on senior faculty
- Postgraduates present scientific paper or poster in their respective subject conferences at state or national level.

### Undergraduate:

- During undergraduate training and internship students are encouraged to present papers in the conferences.
- Two of our interns presented papers in OSMECON 2018 at Hyderahad.
- Our Institutes encourages and motivates students to take up ICMR STS projects are encouraged through the institution

# LIBRARY, ICT AND PHYSICAL INFRASTRUCTURE / INSTRUMENTATION:

- Library has an AC Hall with seating capacity of 250 students and a digital library with 40 computers
  with internet facility and NTRUHS MEDLARS. There are 18228 books available in the central
  library. Apart from this each department maintains its own library with stock of essential books and
  journal pertaining to their subject. Central library is equipped with 145 journals.
- Physical infrastructure available for students recreational activities are, Gymnasium, football and lawn tennis ground, basketball court, shuttle court etc.
- All departments are equipped with latest instruments pertaining to their speciality as per requirement.

# **\*** Human Resource Management

- There is a separate human resource department in place with one Head HR, HR and Assistant HR.
- Any resume received is first forwarded to HR. After verification of eligibility, it is forwarded to recruitment committee, which short lists the candidates. The short listed candidates are called for an interview on a stipulated date before the panel members. Selected candidate will be intimated and

absorbed as per the institutional protocol.

Other functions coming under the purview of HR are:

- Attendance and leave record maintenance.
- Personnel file maintenance.
- Monitoring staff movement and discipline
- Addressing employees grievances

HR works through HRMS (Human Resource Management System)

# Industry Interaction / Collaboration

Our institute being in the rural area, most of industries come under our purview for their health care management.

- Three day health check-up camps are conducted by our team of specialist in the industrial campus on rotation basis for industrial workers and their families.
- Workers requiring further management are referred to KIMS hospital and treated.
- Industrial workers are trained in first aid management by our Medical Education Unit Team.
- Health awareness and health education camps are conducted on occupational diseases and hazards.
- School health check-up camps are being conducted in the schools of all industries and surrounding areas.

#### **Admission of Students**

- Qualifying criteria for admission to MBBS course is 50% in intermediate or equivalent examination with English, Physics, Chemistry and Biology as Compulsory subjects.
- Students are selected as per all India NEET ranking.
- Kaloji Narayana Rao University of Health Sciences, Warangal is the responsible body for conducting counselling for the NEET qualified candidates.
- ❖ From this year onwards, the Telangana Cut off of NEET 2018 for 15% All India Quota seats will be released as the state has agreed to participate in through centralized counselling conducted by Directorate General of Health Services (DGHS).
- Post graduate admissions are through All India NEET ranking.
- \* Kaloji Narayana Rao University of Health Sciences, Warangal is the responsible body for conducting counselling and allotment of seats.

# 6.2.2 : Implementation of e-governance in areas of operations:

- Planning and Development
- The 21st century has seen us become a knowledge-based society and the world has shrunk into a

- global village with erudite, better-informed and connected citizens all meriting a re-think in the way we govern our Hospitals.
- E-governance in medical sciences is virtually in its infancy and could range from single window permission and sanction of licenses for medical institutions to monitoring of vital statistics like birth and death rates, and delivery of healthcare services through concepts like e-ICUs.
- ❖ E-Health can be described as the application of information and communication technologies across the whole range of function that affect the health sector, from the doctor to the hospital manager, via nurses, data processing specialists, social security of administrators and − of course − the patients'. It encompasses tools like web-based libraries, electronic medical records (EMR) and electronic health records (EHR), continuing medical education (CME) programmes, inventory control; hospital information system (HIS), computerised prescriptions, medical and nursing audits, quality assurance tools, finance modules, image capture, storage and transmission tools like PACS and tools for doctor-patient communication. Some of the services that can be used are Tele health, mobile health, digital health etc.

#### Administration

- E-governance (Electronic Governance), is the integration of Information and Communication Technology (ICT) in all the processes, with the aim of enhancing ability to address the needs of the public. The basic purpose of e-governance is to simplify processes for all stakeholders in hospitals
- Types of Interactions in E-Governance:
  - Hospital to patients: in registration as Out Patient or In Patient, in billing for Investigations, medicines and Discharges.
  - Hospital to employees: attendance, salary statements, leaves
  - Hospital to vendors: raising purchase requisition, purchase orders, goods receipt notes,
  - Hospital stores to retail outlets: stock management, inventory control, indenting, auditing
  - Hospital to Insurance agencies; raising claims, submitting replies to queries, realizing claims
- Employees are trained for adopting E governance including HR and other staff in key areas in the hospital like OP and IP registration, billing, pharmacy, central stores, Laboratories and operation theatres.
  - E-governance has a great role to play, that improves and supports all tasks performed by the Hospital departments, because it simplifies the task on the one hand and increases the quality of work on the other.

#### Finance and Accounts

- Accounts department is fully computerised where all the accounts and finance related data is maintained digitally.
- Internal and external auditing is conducted regularly by concerned agencies.
- All the transactions are entered immediately in the system.
- Accounts and billing in the hospital side is maintained through HOPE software of HIS (Hospital Information System).
- On the college side, all admissions and fees are collected online or through DD which is reflected electronically and managed through MCMS software of Management information system.

# **Student Admission and Support**

- Student admissions are though MCMS software integrated with Management information system where all the student data is stored online.
- Apart from this every student 's attendance is linked with biometric devices stored electronically.
- All parents receive their wards attendance status to registered mobile number and registered email.
- Mentoring and counselling records of the students are maintained through e governance.
- Students' academic performance is also maintained electronically.

#### Examination

- All internal examinations are conducted centrally.
- Student Internal assessment marks and student attendance is being uploaded through university MIS portal.
- In summative examinations Marks uploading is done through MIS system adopted by the Hosting university.
- The answer scripts are subjected to double valuation, which are maintained digitally and average calculated for internal assessment marks.
- Slow learners are imparted special lectures and subjected for mentoring sessions followed by mock examinations.
- Post graduate e- Port Folio is maintained in the department which contains his/her formative internal examination, marks, attendance, Seminars and journal clubs conducted and CME'S conferences attended by them.

# 6.3 Faculty Empowerment Strategies

6.3.1 Teachers provided with financial support to attend conferences / workshops and towards

Year	Name	of teacher	worksho which fir provided	Name of conference/ workshop attended for which financial suppor provided		body fo	of the professional or which members rovided	hip	Amount of support
2018	Dr. Su	ıdhir Babu P	Dudillalla		FAIMER		FAIMER		11000
2018	3 -19 Dr. Su	ınita Sudhir	P FAIMER 2019				FAIMER		11000
2018	, a ps	ınita Sudhir	conference	ce, Bengalur	u	3 11	FOGSI	100 E	5000
Cone	ge for teachi	ng and non	teaching stat	ff during the	ative t	raining	programmes org	aniz	ed by the
Year		amme sed for			(fro	Oates om-to)	No. of participar (Teaching staff		No. of participan ts (Non-teaching staff)
2018	OSCE Ass	sessment		OSCE Assessment pattern in Nursing.		2 <sup>nd</sup> 2018	30		25
2018 (2)	Diomedica segregation , transporta	storagė	Blomedical w management			8.2018 1.2018	32		109
2019 (2)	disposal managemen	nt	a - #			.2019	32		109
2018	Hand Hygie Program	6	Hand Hygiene	e Program	10.10	.2018	10		20
2018	Professiona Ethics	1.	Ethics in Nurs	sing	12.01	.2019	15		30
2019	Inventory & procedure.	r	nventory & ir orocedure.	ndent	24.04.	.2019	8		
019	Managemen	injury	e II		05.05.	2019	11		25
019	CPR – ALS	- BLS C	CPR – ALS - I	BLS	17.07.	2019	15		20
019	Wound care Managemen		Wound care M	lanagement	13.03.	2019	16	~	30
019	Prevention of Nosocomial infections		revention of Josocomial in	fections	05.06.2	2019	7		25
3.3 No	o. of teachers er Course, Sh	attending pr ort Term Co	ofessional de ourse, Faculty	velopment pr Developmen	ogramı it Progr	mes, viz	., Orientation Prog during the year	ramı	ne,
Title	e of the profe	ssional deve	lopment	Number o	f teach	ers who	attended I	Date Duratorn -	ion

	2	ter it ou
FAIMER		January & April 2018
	6	
CISP	× 1	Feb & May 2019
Spine Surgery Fellowship	1	July 2019 +
Cardiac Radiology	1	Apr – May 2019
Phaco Fellowship	1	July 2019

6.3.4 Faculty and Staff recruitment (no. for permanent/fulltime recruitment):

Teaching		Non-	teaching
Permanent	Fulltime	Permanent	Fulltime/temporary
216	216	1100	88

# 6.3.5 Welfare schemes for

Teaching			N Free		5	
Non teaching		14	E 2/4			Medical Benefit Scheme
Students	2.5			e	Sire o	

# 6.4 Financial Management and Resource Mobilization

6.4.1 Institution conducts internal and external financial audits regularly (with in 100 words each)

Institute has an internal and external auditing system in place.

# **Internal Auditing:**

- Internal auditing procedures are under taken by an experienced team of auditors.
- They monitor day-to-day transactions.

# **External Auditing:**

• Institute has efficient external auditors.

They do monthly auditing related to all transactions and culminate to final tax audit.

6.4.2 Funds / Grants received from management, non-government bodies, individuals, philanthropies during the year(not covered in Criterion III)

Name of the non government funding agencies/ individuals	Funds/ Grants received in Rs.	Purpose

6.4.2 Total corpus fund generated 693,944,550/-

# 6.5 Internal Quality Assurance System

6.5.1 Whether Academic and Administrative Audit (AAA) has been done?

Audit Type	Ext	ernal	Internal		
Yes/No	Yes/No	Agency	Yes/No	Authority	
A 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No		Yes	Medical Education	
Academic		X x ± g		Unit	

4.	No	 Yes	Medical
			Education
Administrative	a a	MSI .	Unit

# 6.5.2 Activities and support from the Parent – Teacher Association (at least three)

- Foundation Day Program.
  - Counselling and guidance.
  - Orientation program
  - Graduation day program

# 6.5.3 Development programmes for support staff (at least three)

- Attitude and Communication skills
- Curriculum Support Implementation Program
- OSCE Orientation program

# 6.5.4 Post Accreditation initiative(s) (mention at least three)

- 1.) NABH Got entry level Accreditation from NABH
- 2.) NABL Got entry level Accreditation from NABL
- 3) Awarded Kaya Kalp certificate with score of 86.8%
- 4.) Implementation of Competency Based Medical Education in Undergraduates.
- 5.) Implementation of Competency Based Medical education pattern among postgraduates.

#### 6.5.5

a. Submission of Data for AISHE portal : (Yes /No)

b. Participation in NIRF : (Yes /No)
c. ISO Certification : (Yes /No)

d. NBA or any other quality audit : (Yes /No)

# 6.5.6 Number of Quality Initiatives undertaken during the year

	Name of quality initiative by	Date of conducting		Number of
Year	IQAC	activity	Duration (fromto)	participants
2018	UG orientation course for 3 <sup>rd</sup> semester students.	Oct 2018	15 <sup>th</sup> - 17 <sup>th</sup> Oct 2018	146
2019	Postgraduates Basic course workshop	June 2019	06 <sup>th</sup> - 08 <sup>th</sup> June 2019 15 <sup>th</sup> - 17 <sup>th</sup> June 2019	69 66
•2019	Interns orientation program	April 2019	01 -04 <sup>th</sup> April 2019	108
2018	Gender harassment sensitisation program	Oct 2018	15 <sup>th</sup> - 17 <sup>th</sup> Oct 2018	132
		Feb 2019	20 <sup>th</sup> Feb 2019	50
		March 2019	01 -04 <sup>th</sup> April 2019	108

#### CRITERION VII - INSTITUTIONAL VALUES AND BEST PRACTICES

# 7.1 - Institutional Values and Social Responsibilities

7.1.1 Gender Equity (Number of gender equity promotion programmes organized by the institution during the year)

T'41 - C41	Davis d (frame to)	Participants	
Title of the programme	Period (from-to)	Female	Male
Gender Equity Sensitisation program	1 Day ( 15 <sup>th</sup> Oct 18)	20	20

1 Day ( 20 <sup>th</sup> Feb 2019)	30	20	
1 Day (01 April 2019)	60	48	

7.1.2 Environmental Consciousness and Sustainability/Alternate Energy initiatives such as: Percentage of power requirement of the College met by the renewable energy sources

# WATER RECYCLING FOR GARDENING:

- Effluent treatment plant processes wastewater, which is utilised for gardening and plantation to maintain campus eco-friendly and green.
- No plastic on campus.

7.1.3 Differently abled (Divyangjan) friendliness

Yes/No	No. of Beneficiaries
Yes	11
Yes	All staff
Yes	All staff
No	N/A
Yes	50
No	NA
	10
Tollo .	
	Yes Yes Yes No Yes

# 7.1.4 Inclusion and Situatedness

Enlist mo	st important initiativ	es taken to addi	ress locational a	dvantages ar	nd disadvantages dur	ing the year
Year	Number of initiatives to address locational advantages and disadvantages	Number of initiatives taken to engage with and contribute to local community	Date and duration of the initiative	Name of the initiative	Issues addressed	Number of participating students and staff
2018 -19	1	1	Throughout the year	Swachha bharath	Cleanliness	40+20
2018-19	3.	5	Quarterly	Say no to Tobacco	Hazards of Tobacco use	22+7
2018 -19	1	1.	Throughout the year	Safe Water	Provide safe defluorinated drinking eater to all staff and patients int he campus	Supportive staff
2018 -19	12	12	2 <sup>nd</sup> Tuesday of every month	Specialist medical camp	Screening, treatment and referral to KIMS hospital for all	40 +20

211 18						
	3 - X - X - X - X - X - X - X - X - X -	I a	day	100 I	Health problems in the community	
2019	1	1	12.08.2019	Kaya Kalp	Cleanliness awareness	70+30
7 1 5 Uumai	n Values and Pro	£!1.E	13.		E 17	
						х
	luct (handbooks)			, .	4.00	
• 11116	Date of Put	oncation			num 100 words each)	
Student Handbook for Undergraduate  Code of conduct hand book for postgraduates  Date of Publication  August 2019  May 2019		19	Includes Hippocratic oath, vision, mission, personnel data of student. List of holidays Names of administrative staff with designations and contact numbers. , New Curriculum and syllabus as per regulatory body and affiliated university regulations. Period and time distribution. Various gold medal instituted by the universities and institution. Rules of conduct and attendance. General discipline, dress code. Guidelines by regulatory bodies. Hostel admission and rules, Information or anti-ragging followed by annexures.  Includes Hippocratic oath, vision, mission, personnel data of student. List of holidays Names of administrative staff with designations and contact numbers. , Training program & LOG book and leave policies. Curriculum and syllabus as per regulatory body and affiliated university regulations. Period and time distribution. Various gold modals instituted by the universities and institution. Rules of conduct and attendance. General discipline, dress code. Guidelines by regulatory bodies.			
		2	Hostel admission and rules, Guidelines for writing PG dissertation .BLS, ACLS, ATLS, PALS guidelines. Information on anti-ragging .followed by annexures.			
Infection control March 2019 nandbook		1019 P	This hand book includes guidelines and code of conduct for infection control in and around the hospital. Contents include Infection control principles, Had hygiene protocols, Personal protective equipments (PPE), Colour Coding of biomedical wastes, protocols in needle stick injuries and post exposure prophylaxis, body and body fluid spill. Mercury spill management, transmission based infections and Transmission prevention protocol, Nosocomial infections, Surveillance, prevention and control of antibiotic resistant organisms (ARO). List of Notifiable diseases.			
.1.6 Activities	conducted for pr	omotion of	universal Values and	d Ethics		1
Activity			Duration (fromto) Number of participa			rticipants
Workshops and seminars			Oct 15 <sup>th-</sup> 17t April 01 <sup>st</sup> - 04 June 06 <sup>th</sup> - 08	th 2019	132 108 69	55 S

# 7.1.7 Initiatives taken by the institution to make the campus eco-friendly (at least five)

- 1. Clean and Green Campus.
  - 2. Save water: Recycled water used for plantation
  - 3. No to Food wastage:
  - 4. Save trees with Minimal Paper use: switching on to electronic mode. One side use of papers for routine documentation.
  - 5. Ban on plastics and encourage use of cloth bags etc.
  - 6. Participation in Kaya Kalp an initiative from Swachh Bharat program.

## 7.2 Best Practices

Describe at least two institutional best practices

Upload details of two best practices successfully implemented by the institution as per NAAC format in your institution website, provide the link

# 1.) Meet the Faculty:

# Undergrduates:

One to one counselling is conducted for all the undergraduate students who secure less marks in their formative assessments and who have less than mandatory 75% of attendance in theory and practical.

# Postgraduates:

Informal interaction of Postgraduates along with their Parents / Guardians meet principal, HOD and PG Coordinator and are appraised of their ward's progress and professional behaviour.

# 2.) Monthly CME's / Conferences:

As per the competencies envisaged by Medical Council of India an Indian Medical Graduate is a *Life Long Learner*.

- Academic calendar is drawn, every month and one department takes up a (CME)
  Continuing Medical Education program open for all. At least one International / National/
  State level conference is organised in a calendar year.
- Every CME or Conference organised is at the state level and delegates are invited from outside state, each conference and CME is credited with 2 credit hours as per Telangana State Medical council.
- Undergraduates and postgraduates participate in the conferences & CMEs and few of them given responsibilities.
- This year Department of Anaesthesia conducted State level conference at KIMS Narketpally.

# 3.) Painting competition on World Mental Health Day:

- Every year department of Psychiatry arranges awareness program on prevention of suicide and Reduction of Stress on World Mental Health day.
- On this day painting competition is organised with various themes and best paintings are awarded.





#### 7.3 Institutional Distinctiveness

Provide the details of the performance of the institution in one area distinctive to its vision, priority and thrust

Provide the weblink of the institution in not more than 500 words

# Maternal & Child Health:

**Aim**: To provide comprehensive health care to mother and child.

# Objectives:

- 1. ) Health Education on pregnancy and care during pregnancy.
- 2. ) Promote safe and institutional deliveries.

## **Under this Project:**

# 1. Health education on pregnancy and care during pregnancy.

Mother craft classes are being conducted on every Thursday by experienced faculty in which antenatal mothers are made aware of hazards of various myths and superstitions. They are educated on various aspects of antenatal and postnatal care

Awareness on Breast feeding is done during antenatal sensitisation. on every Monday, Wednesday and Friday trained nursing staff visits antenatal ward and demonstrates importance of and correct method of breast feeding to mothers.

# 8. Future Plans of action for next academic year (500 words)

# 1. Implementation of newer curriculum on the lines of Competency Based Medical Education at Undergraduate and Postgraduate level

Medical council of India has adopted CBME which focuses on the outcome. Aim of imparting competency based medical education is to train our Indian medical graduate as an efficient professional who can takecare health care needs of the society independently. Here graduate is trained keeping in focus the health care needs of the society and is competent enough to deliver the same. In this system student training is continuous and coupled with frequent assessments and feedback till the learner acquires required competency and proficiency in that field. We are shifting from Traditional Medical education to Competency based Medical education incorporating various student centred learner and outcome based learning and teaching activities. Our faculty is trained in imparting Competency Based Medical Education

# 2. Introduction of Integrated teaching and Early Clinical Exposure for undergraduate medical students.

Implementation of Horizontal and vertical integration as per Hardens integrated system for undergraduate and postgraduate medical students. We are planning to conduct Early Clinical Exposure from first MBBS onwards, where in first year students are posted in the hospital settings and are shown the relevant cases of clinical importance in alignment with the basic sciences classes being conducted in the college. Here student is able orient himself to the Hospital settings and knows how a patient of particular disease presents in the hospital and at the same time is able to analyse and applied aspects of Basic sciences knowledge.

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Signature of the Coordinator, IQAC	Signature of the Chairperson, IQAC

# Annexure I

#### Abbreviations:

CAS - Career Advancement Scheme

CAT - Common Admission Test

CBCS - Choice Based Credit System

CE - Centre for Excellence

COP - Career Oriented Programme

CPE - College with Potential for Excellence

DPE - Department with Potential for Excellence

GATE - Graduate Aptitude Test

NET - National Eligibility Test

PEI - Physical Education Institution

SAP - Special Assistance Programme

SF - Self Financing

SLET - State Level Eligibility Test

TEI - Teacher Education Institution

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# For Communication with NAAC

# The Director

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