SREE BALAJI DENTAL COLLEGE & HOSPITAL,

Annual Quality Assurance Report

2022-2023

Sree Balaji Dental College (**approved by Dental Council of India** and **Ministry of Health & Family Welfare**, Govt. of India, New Delhi and **affiliated to Bharath Institute of Higher Education & Research –BIHER,** Chennai) with its hospital complex is situated at Pallikaranai, a beautiful suburban landscape on the Velachery Main Road, Chennai, easily accessible by road either from Saidapet or Tambaram.

Sree Balaji Dental College & Hospital is a private, non-profit, self-financing Dental Institution, pledged to the service of the community, catering to the healthcare needs of the people in general and especially to the needy, underprivileged, suffering section of humanity in particular.

The College and Hospital complex has been raised in an area of 5.4 acres, ideally located with salubrious surroundings. It is provided with state of art infrastructure in terms of its blocks of buildings, which include, comfortable and well furnished departments, laboratories, classrooms for students, and separate quarters for staff, besides equipment of latest technological quality.

Highly qualified and well experienced staffs serve the institution. Well equipped laboratories, library and modern teaching aids help in making the students study and learn professional skills with ease. A very prominent centre of Dental care in the city of Chennai, it has all the facilities to give the best treatment to its patients, attracting multitudes of patients every day.

Field practice training to dental students and helping the needy people nearby and those in remote rural areas has been established through the department of community dentistry. The college has emerged as a pioneer in the state of Tamil Nadu by providing medical and health care programs through internationalization, innovation in academic and research

studies. The college offers undergraduate course in Dentistry (B.D.S), postgraduate degree (M.D.S) in 8 dental disciplines.

The institute has following Departments

Basic Sciences

- Anatomy
- Physiology & Bio Chemistry
- Pathology & Microbiology
- Pharmacology

Specialty

- Oral Medicine
- Oral Surgery
- Oral Pathology
- Prosthodontics
- Orthodontics
- Periodontics & Public Health Dentistry
- Conservative dentistry and Endodontics
- Paedodontics

IQAC

AIM

- To develop a system for conscious, consistent and catalytic improvement in the overall performance of institution.
- To channelize all efforts and measures of the institution towards promoting its holistic academic excellence.

OBJECTIVES

- To ensure continuous improvement in the entire operations of the college.
- To ensure stakeholders connected with higher Education, namely parents, teachers, staff, would be employers, funding agencies and society in general, of its own quality and probity.

VISION

- The institution envisions to serve humanity by creating dental surgeons of global stands with humane touch.

MISSION

- To facilitate regular update of knowledge of staff
- To improve learning resources
- To enhance communication skills and soft skills
- To encourage publications
- To obtain periodic feedbacks and to develop quality bench marks
- To disseminate Information across the departments
- To facilitate Documentation and Optimization

FUNCTIONS

- Design and implementation of annual plan for Institution – level activities for quality enhancement
- Arrange for feedback responses from students for quality – related institutional processes
- Development and Application of quality bench marks / parameters for the various Academic and Administrative activities of the Institution
- Retrieval of Information on various quality parameters of Higher Education and best practices followed by other Institutions
- Organization of workshops and seminars on quality – related themes and promotion of quality circles and institutions – wide dissemination of the proceeding of such activities
- Development and application of innovative practices in various programmes / activities leading to quality enhancement
- Participation in the creation of learner – centric environment conducive for quality education
- Work for the development of Internationalization and Institutionalization of quality enhancement policies and practices
- Prepare focused annual quality assurance report (AQARs).

SREE BALAJI DENTAL COLLEGE & HOSPITAL

Core committee Members of Internal Quality Assurance Cell (IQAC) 2021-2022

Chairperson IQAC	Prof. Dr. S. Jimson, Principal
Co-ordinator IQAC	Prof. Dr. J. Bhuvaneswarri (Dept of Periodontics)
Senior Co-ordinators	Prof. Dr. S. Bhuminathan, M.D.S (Registrar – *BIHER)* Prof. Dr. S. Kishore Kumar, M.D.S (Vice- Principal-SBDCH)
IQAC Secretary	Dr. S. Mitthra, M.D.S , Reader (Dept of Conservative Dentistry and Endodontics)
IQAC Core-committee	Dr. Saravana Kumar, M.D.S, Professor (Dept of Oral Surgery) Dr.V.T.Hemalatha, M.D.S, Reader (Dept of Oral Medicine) Dr. V. Ramya, M.D.S, Professor (Dept of Periodontics) Dr.A. Karthick, M.D.S, Professor (Dept of Conservative Dentistry & Endodontics) Dr. Gnana Shanmugham, M.D.S, Professor (Dept of Orthodontics)
Senior PROFESSORS	1. Prof. Dr. K.M.K Masthan Professor & Head of Oral Pathology 2. Prof .Dr. Nalini Ashwath, Professor & Head of Oral medicine & Radiology 3. Prof. Dr. A. Subbiya, Professor & Head of Conservative & Endodontics

	4. Prof Dr. A.Ponnudurai Professor & Head of Pedodontics 5. Prof Dr. Ragavendra Jayesh Professor of Prosthodontics 6. Prof. Dr. G. Mohan Valiathan Professor of Periodontics 7. Prof. Dr. Anitha Balaji Professor of Periodontics 8. Prof . Dr. M.S. Kannan, Professor & Head of Orthodontics 9. Prof. Dr. Vijay Ebenezar, Professor & Head of Oral Surgery 10. Prof .Dr.Sumathy Professor & Head of Anatomy 11. Prof Dr. Julius, Professor & Head of Biochemistry 12. Dr. Geetha Rani, Lecturer of Physiology. 13. Prof Dr. K. Mahalakshmi Professor & Head of microbiology 14. Prof Dr. T. Shoba Professor & Head of General pathology 15. Prof. Dr. Sumathy Jones, Professor & Head of Pharmacology. 16. Dr. M. Anitha, Reader of Community Dentistry.
External Experts	Prof. Dr. Aswath Narayanan Registrar., The Tamilnadu Dr. M.G.R Medical University, Chennai

Alumni representative	Prof. Dr. Gnana Shanmugham, Prof. Dr. T. Sarumathi, Dr. Thulasi Ram. E
Student members	Dr. R. Akshaya Vaikundam (UG) Dr. A. Srikanth (UG) Dr. Ishwariya (PG)
Parent members	Mrs. Vaijayanthi Mala Mr. Asaithambi Adhi
Stake holders	Dr. Johnson Moses Dr. Prabhakaran Dr. Karthikeyan
Community / Local society representative	Mrs. Kayalvizhi Headmistress Govt. Panchayat Middle School
Management representative	Mr. Shankar

AQAR for the year 2022-2023

1. Details of the Institution

1.1 Name of the Institution	Sree Balaji Dental College and Hospital
1.2 Address Line 1	Velachery main road, Narayanapuram, Pallikaranai
Address Line 2	Same as above
City/Town	Chennai
State	Tamilnadu
Pin Code	600100
Institution e-mail address	https://www.bharathuniv.ac.in/
Contact Nos.	044-22460619,044-22461883
Name of the Head of the Institution:	Prof. Dr. S. Jimson
Tel. No. with STD Code:	044-22462179 / 044-22461883
Mobile:	9940309211
Name of the IQAC Co-ordinator:	Prof. Dr. J. Bhuvaneswarri
Mobile:	9994044047

IQAC e-mail address: sbdchiqac@gmail.com

1.3 **NAAC Track ID** *(For ex. MHCOGN 18879)*

OR

1.4 **NAAC Executive Committee No. & Date:**
(For Example EC/32/A&A/143 dated 3-5-2004. This EC no. is available in the right corner- bottom of your institution's Accreditation Certificate)

1.5 Website address: https://sbdch.ac.in/

Web-link of the AQAR:

1.6 Accreditation Details

Sl. No.	Cycle	Grade	Institutional score	Year of Accreditation	Validity Period
1	1st Cycle	B	70-75%	2006	5 yrs
2	2nd Cycle	B	70-75%	2010	5 yrs
3	3rd Cycle	A	80-85%	2015	5 yrs

1.7 Date of Establishment of IQAC: DD/MM/YYYY

1.8 Details of the previous year's AQAR submitted to NAAC after the latest Assessment and Accreditation by NAAC (*(for example AQAR 2010-11submitted to NAAC on 12-10-2011)*

1. AQAR 2009-2010 submitted to NAAC on 28/12/2009
2. AQAR 2010-2011 submitted to NAAC on 27/12/2010
3. AQAR 2011-2012 submitted to NAAC on 26/12/2011
4. AQAR 2012-2013 submitted to NAAC on 28/12/2012
5. AQAR 2013-2014 submitted to NAAC on 26/12/2013
6. AQAR 2014-2015 submitted to NAAC on 29/12/2014
7. AQAR 2015-2016 submitted to NAAC on 23/12/2015
8. AQAR 2016-2017 submitted to NAAC on
9. AQAR 2017-2018 submitted to NAAC on
10. AQAR 2018-2019 submitted to NAAC on
11. AQAR 2019-2020 submitted to NAAC on
12. AQAR 2020-2021 submitted to NAAC on

1.9 Institutional Status

University	State	☐	Central	☐	Deemed	☐	Private ☑
Affi liated College	Yes	☑	No	☐			
Constituent College	Yes	☐	No	☐			
Autonomous college of UGC	Yes	☐	No	☑			
Regulatory Agency approved Institution	Yes	☑	No	☐			

(Recognised by the Dental Council of India)

Type of Institution Co-education [✓] Men [ ] Women [ ]

Urban [✓] Rural [ ] Tribal [ ]

Financial Status Grant-in-aid [ ] UGC 2(f) [ ] UGC 12B [ ]

Grant-in-aid + Self Financing [ ] Totally Self-financing [✓]

1.10 Type of Faculty/Programme

Arts [ ] Science [ ] Commerce [ ] Law [ ] PEI (Phys Edu) [ ]

TEI (Edu) [ ] Engineering [ ] Health Science [✓] Management [ ]

Others (Specify) None

1.11 Name of the Affiliating University *(for the Colleges)* BHARATH INSTITUTE OF HIGHER EDUCATION AND RESEARCH (BIHER)

1.12 Special status conferred by Central/State Government -- UGC/CSIR/DST/DBT/ICMR etc.

University with Potential for Excellence

Sciences for recognition as a 'Centre for Excellence' (the recognition is pending)

2. IQAC Composition and Activities

2.1 No. of Teachers	22
2.2 No. of Administrative/Technical staff	4
2.3 No. of students	3
2.4 No. of Management representatives	1
2.5 No. of Alumni	3
2.6 No. of any other stakeholder and community representatives	4
2.7 No. of Employers/ Industrialists	1
2.8 No. of other External Experts	1
2.9 Total No. of members	39

2.10 No. of IQAC meetings held

At least one of IQAC (at least 2 of individual IQAC sub-committees) meeting held

2.11 No. of meetings with various stakeholders: 4 Faculty 4

Non-Teaching Staff 4 Students 4 Alumni 4

Parents 4

2.12 Has IQAC received any funding from UGC during the year? Yes No

If yes, mention the amount Not Applicable ☐ ✓

2.13 Seminars and Conferences (only quality related)

(i) No. of Seminars/Conferences/ Workshops/Symposia organized by the IQAC

Total Nos. ☐ International ☐ National ☐ State ☐

Institution Level ☐

(ii) Themes Anti-ragging & Flying Squad

2.14 Significant Activities and contributions made by IQAC

- New student members included in the various sub-committees of IQAC
- In addition to the existing IQAC subcommittees, new criteria-wise committees instituted to oversee NAAC data compilation and implementation of the action plan for forth coming NAAC inspection
- Special cognizance of poor attendance of BDS students taken by the Academic sub-committee of the IQAC. The proposal of daily SMS alerts to parents of absentee students discussed and implemented
- A faculty appraisal form designed and subsequently revised as per the discussions of the IQAC members
- Hostel renovation taken up in a phase-wise manner and successfully kick started. Important suggestions implemented by Infrastructure sub-committee of the IQAC include paving of the campus roads and increase in the number of hot water connections to the hostels, among others
- All the Heads of Departments have been asked to prepare a road-map/plan of action to improve the departments and undertake new research in the following years and submit the same to the IQAC
- Commencement of NSS-related activities
- Proposal for rainwater harvesting has been accepted and the Infrastructure subcommittee of the IQAC has been advised to prepare a plan for the same after consultation with experts.

2.15 Plan of Action by IQAC/Outcome

The plan of action chalked out by the IQAC in the beginning of the year towards quality enhancement and the outcome achieved by the end of the year*

Plan of Action	**Outcome**
Daily SMS alerts to parents regarding student absenteeism	Overall improvement in student attendance has been observed
Hostel renovation	Has started in a phase wise manner
Improvement of the Library book repository	Proposal sent for increase in budget allocation
Regulation of documentation and planning for NAAC inspection and AQAR	Criteria wise subcommittees have been formed for the purpose
Regular meetings of IQAC and various subcommittees to ensure plan of action is implemented	Regular meetings are held with active participation and contributions from all members.

* *See Academic Calendar of the year (Annexure I).*

2.15 Whether the AQAR was placed in statutory body ☑ Yes ☐ No

Management ☐ Syndicate ☐ Any other body ☐

Part - B

Criterion – I

1. Curricular Aspects

1.1 Details about Academic Programmes

Level of the Programme	Number of existing Programmes	Number of programmes added during the year	Number of self-financing programmes	Number of value added / Career Oriented programmes
PhD	1			–
PG	8	–	8	–
UG	1	–	1	–
PG Diploma	–	–	–	–
Advanced Diploma	–	–	–	–
Diploma	–	–	–	–
Certificate	–	–	–	–
Others		–	–	–
Total		–	–	–

Interdisciplinary		–		
Innovative				

1.2 (i) Flexibility of the Curriculum: CBCS/Core/Elective option / Open options
(ii) Pattern of programmes:

Pattern	Number of programmes
Semester	None
Trimester	None
Annual	3 (BDS, MDS, PhD)

1.3 Feedback from stakeholders* Alumni ✓ Parents ✓ Employers ✓ Students ✓
(On all aspects)

Mode of feedback : Online ✓ Manual ✓ Co-operating schools (for PEI) -

1.4 Whether there is any revision/update of regulation or syllabi, if yes, mention their salient aspects.

None

1.5 Any new Department/Centre introduced during the year. If yes, give details.

Research Cell

Criterion – II

2. Teaching, Learning and Evaluation

2.1 Total No. of permanent faculty

Total	Asst. Professors	Associate Professors/Reader	Professors	Others
136	24	10	42	63

2.2 No. of permanent faculty with Ph.D. 9

2.3 No. of Faculty Positions Recruited (R) and Vacant (V) during the year

Asst. Professors		Associate Professors		Professors		Others		Total	
R	V	R	V	R	V	R	V	R	V
2	Nil	Nil	Nil	0	Nil	Nil	Nil	Nil	nil

2.4 No. of Guest and Visiting faculty and Temporary faculty 9

2.5 Faculty participation in conferences and symposia:

No. of Faculty	International level	National level (includes State level)
Attended Seminars/ Workshops	33	45
Presented papers	27	22
Resource Persons	40	42

2.6 Innovative processes adopted by the institution in Teaching and Learning:

The interns during their posting of four months in the Department of Multispecialty Dentistry participate in monthly continual educational programmes where two interns every month are allowed to select a topic of their choice pertaining to clinical dentistry and give a talk on the same making use of PowerPoint and audio-visual aids. This is to encourage and prepare them in terms of public speaking and to improve their practical knowledge pertaining to the subject. Also, 'role play' where mock patients mimicking real-life cases, with students expected to manage these mock cases—in terms of diagnosis and general patient management. This has aided in managing real-life cases: Slow learners identified and improvement examinations undertaken.

2.7 Total no. of actual teaching days during this academic year 280

2.8 Examination/ Evaluation Reforms initiated by the Institution (for example: Open Book Examination, Bar Coding, Double Valuation, Photocopy, Online Multiple Choice Questions) Double Valuation

2.9 No. of faculty members involved in curriculum restructuring/revision/syllabus development 4

as member of Board of Study/Faculty/Curriculum Development workshop

2.10 Average percentage of attendance of students | 80%

2.11 Course/Programme wise distribution of pass percentage:

Title of the Programme	Total no. of students appeared	Division		
		Distinction %	I %	Pass %
BDS	347	91 (26.2%)	195 (56.2%)	38 (10.9%)
MDS	45	-	-	44 (97.8%)

2.12 How does IQAC Contribute/Monitor/Evaluate the Teaching & Learning processes :

The Academic Committee, which is part of the IQAC develops the calendar of academic events and conducts examinations as stipulated by the affiliating university. The Convener also develops goals, objectives, targets and monitors teaching programme, and evaluates the results and outcomes.

2.13 Initiatives undertaken towards faculty development

Faculty / Staff Development Programmes	*Number of faculty benefitted*
Refresher courses	2
UGC – Faculty Improvement Programme	10
HRD Programmes	1
Orientation Programmes	7
Faculty exchange Programme	nil
Staff training conducted by the University	1
Staff training conducted by other Institutions	5
Summer / Winter schools, Workshops, etc.	12
Others	-

2.14 Details of Administrative and Technical staff

Category	Number of Permanent Employees	Number of Vacant Positions	Number of permanent positions filled during the Year	Number of positions filled temporarily
Administrative Staff	38	4	0	4
Technical Staff	170	6	6	0

Criterion – III

3. Research, Consultancy and Extension

The IQAC and its Research Committee highlighted the availability of university research grants among its faculty and students, which enabled them to apply for the same and receive grants.

3.2 Details regarding major projects

	Completed	Ongoing	Sanctioned	Submitted
Number	84	40	30	70
Outlay in Rs. Lakhs	82.51lakhs	35.8lakhs	10.25 lakhs	64.33 lakhs

3.3 Details regarding minor projects

	Completed	Ongoing	Sanctioned	Submitted
Number	115	51	24	72
Outlay in Rs. Lakhs	46.95	35.65	15.24	48.92

3.4 Details on research publications

	International	National	Others
Peer Review / Journals	96	135	45
Non-Peer Review Journals	37	66	34
Conference proceedings	12	16	9

3.5 Details on Impact factor of publications:

Range 8.95-49.42 Average 22.71 h-index 75 Nos. in SCOPUS 43

3.6 Research funds sanctioned and received from various funding agencies, industry and other organisations

Nature of the Project	Name of the funding Agency	Total grant sanctioned	Received
Major projects	BHARATH university	163.88	92.27
Minor Projects	BHARATH UNIVERSITY	146.76	88.26

3.7 No. of books published i) With ISBN No. 11 Chapters in Edited Books 7

ii) Without ISBN No. 5

3.8 No. of University Departments receiving funds from

NA 17 NA NA

	UGC-SAP		CAS	DST-FIST	
	DPE	NA		DBT Scheme/funds	NA
3.9 For colleges	Autonomy	-	CPE	-	DBT Star Scheme	-
	INSPIRE	-	CE	-	Any Other (specify)	ICMR, RGUHS, Colgate

3.10 Revenue generated through consultancy 2,36,935/-

3.11 No. of conferences organised by the Institution APPROX 60

Level	International	National	State	University	College
Number	3	26	15	11	22

3.12 No. of faculty served as experts, chairpersons or resource persons

3.13 No. of collaborations International 2 National 7 Any other 2

3.14 No. of linkages created during this year 1

3.15 Total budget for research for current year in lakhs:

From Funding agency 2.17 From Management of University/College 37

Total 39.17

3.16 No. of patents received this year: 15

3.17 No. of research awards/ recognitions received by faculty and research fellows
Of the institute in the year

Total	International	National	State	University	District	College
9	2	5	1	1	0	0

3.18 No. of faculty from the Institution
who are Ph. D. Guides 11

and students registered under them 13

3.19 No. of Ph.D. awarded by faculty from the Institution 2

3.20 No. of Research scholars receiving the Fellowships (Newly enrolled + existing ones)

JRF	SRF	Project Fellows	Any other
4	0	0	0

3.21 No. of students Participated in NSS events:

University level	1	State level	-
National level	-	International level	-

3.22 No. of students participated in NCC events:

University level	-	State level	-
National level	-	International level	-

3.23 No. of Awards won in NSS:

University level	-	State level	-
National level	-	International level	-

3.24 No. of Awards won in NCC:

University level	-	State level	-
National level	-	International level	-

3.25 No. of Extension activities organized

University forum	-	College forum	35		
NCC	-	NSS	4	Any other	-

3.26 Major Activities during the year in the sphere of extension activities and Institutional Social Responsibility

(a.) the college was been a part of swach bharat programme conducted by the government of india and the human resource development.

Criterion – IV

4. Infrastructure and Learning Resources

4.1 Details of increase in infrastructure facilities:

Facilities	Existing	Newly created	Source of Fund	Total
Campus area	5.4	-	-	5.4
Class rooms	6	-	-	6
Laboratories	6	-	-	6
Seminar Halls	8	-	-	8
No. of important equipments purchased (≥ 1-0 lakh) during the current year.			-	
Value of the equipment purchased during the year (Rs. in Lakhs)			-	
Others	-	-	-	-

Yes

4.2 Computerization of administration and library

4.3 Library services:

	Existing		Newly added		Total	
	No.	Value	No.	Value	No.	Value
Text Books	8233	82.50 Lakh	66	1 Lakh	8216	83.5 Lakh
Reference Books						
e-Books	500	-	-	-	-	-
Journals	70 Annual Subscription			25 Lakh	70	25 Lakh
e-Journals	300					
Digital Database	2 Annual Subscription	5.4 Lakh			2	5.4 Lakh
CD & Video	312		-	-	312	
Others (Back volumes)	2735	460 Lakh	77	25 Lakh	2812	485 Lakh

4.4 Technology up gradation (overall)

	Total Computers	Computer Labs	Internet	Browsing Centres	Computer Centres	Office	Depart-ments	Others
Existing	116	-	4Mbps	24	-	15	38	10

Added	4	-	-	-	-		5	5
Total	120	-	4 Mbps	32	-	13	43	15

4.5 Computer, Internet access, training to teachers and students and any other programme for technology upgradation (Networking, e-Governance etc.) None

4.6 Amount spent on maintenance in lakhs :

i) ICT Rs. 3.5 lakh

ii) Campus Infrastructure and facilities Rs. 65.3 Lakh

iii) Equipments Rs. 6.94 Lakh

iv) Others Rs. 20.5 Lakh

Total: Rs.96.24 Lakh

Criterion – V
5. Student Support and Progression

5.1 Contribution of IQAC in enhancing awareness about Student Support Services

NSS activities initiated; existing Students' Council continues to operate with periodic meetings; separate Dean for Support Services continues

5.2 Efforts made by the institution for tracking the progression

Principal and Dean, Academics, make full effort to track progression of students and their performance in university examination; individual department heads and faculty also make monitor student performance in internal and university examination.

5.3 (a) Total Number of students

(b) No. of students outside the state: Approx. 20

(c) No. of international students: nil

Last Year						This Year					
General	SC	ST	OBC	Physically Challenged	Total	General	SC	ST	OBC	Physically Challenged	Total
73	3	-	24	-	100	80	3	-	16	-	99

Demand ratio - Dropout % 2

5.4 Details of student support mechanism for coaching for competitive examinations (If any)

Lectures provided by the faculty experts; college provides facility for students to attend external coaching classes.

No. of students beneficiaries: Approx. 60

5.5 No. of students qualified in these examinations

NET	-	SET/SLET	-	GATE	-	CAT	-
IAS/IPS etc	-	State PSC	-	UPSC	-	Others	DDS

5.6 Details of student counselling and career guidance

Counselling and Career Guidance Cell organises lectures on practice management; external experts invited to lecture on opportunities available after BDS within and outside the country.

No. of students benefitted | Approx. 60

5.7 Details of campus placement

On campus			*Off Campus*
Number of Organizations Visited	Number of Students Participated	Number of Students Placed	Number of Students Placed
NA	NA	NA	Approx. 60

5.8 Details of gender sensitization programmes

Committee on safety of women at workplace is in existence; policy on 'Mechanism for Redressing Student Grievance' addresses steps to redress female student grievance.

5.9 Students Activities

5.9.1 No. of students participated in Sports, Games and other events

State/ University level | 6 | National level | - | International level | -

No. of students participated in cultural events

State/ University level | - | National level | - | International level | -

5.9.2 No. of medals /awards won by students in Sports, Games and other events

Sports: State/ University level | - | National level | - | International level | -

Cultural: State/ University level | - | National level | - | International level | -

5.10 Scholarships and Financial Support

	Number of students	Amount
Financial support from institution	-	-
Financial support from government	-	-

Financial support from other sources	-	-
Number of students who received International/ National recognitions	-	-

5.11 Student organised / initiatives

Fairs : State/ University level	-	National level	-	International level	-
Exhibition: State/ University level	-	National level	-	International level	-

5.12 No. of social initiatives undertaken by the students 69

5.13 Major grievances of students (if any) redressed: None

Criterion – VI

6. Governance, Leadership and Management

6.1 State the Vision and Mission of the institution

The vision of the college is 'Learner-centered education, patient-centered service and community-oriented research of excellence'; the mission statements of the college are:

- Contribute professionally competent general and specialty personnel to meet regional, national and global oral health care needs
- Foster strong community relationships through research, services and linkages
- Provide an efficient, effective and community-acceptable system that excels in education and service
- Inculcate values in learners to be socially and professionally acceptable

6.2 Does the Institution has a management Information System

no

6.3 Quality improvement strategies adopted by the institution for each of the following:

6.3.1 Curriculum Development

Modules on communication skills and critical thinking continues.

6.3.2 Teaching and Learning

Identification of slow-learners, and appropriate remedial measures for the same.

6.3.3 Examination and Evaluation

Competency-based assessment continues.

6.3.4 Research and Development

Central Research Lab initiated.

6.3.5 Library, ICT and physical infrastructure / instrumentation

Library is computerised with the biometric in and out attendance, e journals, latest text books for the benefit of faculty, students and research scholars.

6.3.6 Human Resource Management

Teaching and non teaching faculty have been constanly interacting with the dental patients with human public relations officer has been handling issues related to human resources and camps.public relations officer has been handling issues related to human resources and camps.

6.3.7 Faculty and Staff recruitment

Faculty recruitment interview includes Head of Department in the panel of interviewers (others being Principal and Management Representative)

6.3.8 Industry Interaction / Collaboration

Collaboration with industry leaders such as Colgate (USA), and ADIN Implants (Israel).

6.3.9 Admission of Students

The college Management representatives have participated in educational fairs (e.g., in West Asia); publicity for admissions also generated through participation in national news weekly magazine survey (and appearing in the nation's Top 10 institutes); publicity for admission also generated through website and alumni.

6.4 Welfare schemes

6.5 Total corpus fund generated 1,00,00,000/-

6.6 Whether annual financial audit has been done Yes [✓] No [ ]

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

Audit Type	External		Internal	
	Yes/No	Agency	Yes/No	Authority
Academic	Yes	AAC	Yes	College Management
Administrative	Yes	AAC	Yes	College Management

6.8 Does the University/ Autonomous College declares results within 30 days?

For UG Programmes Yes [ ] No [✓]

[ ] [✓]

For PG Programmes Yes No

6.9 What efforts are made by the University/Autonomous College for Examination Reforms?

The University has initiated digital valuation of answer scripts.

6.10 What efforts are made by the University to promote autonomy in the affiliated/constituent colleges?

Internal (formative) assessments conducted by the institute autonomously; the institute can provide the University with a list of potential examiners from which the University selects the examiners; in case of examiners from University selection refuse to be examiners, the institute is given the right to appoint examiners of its choice.

6.11 Activities and support from the Alumni Association

Continual professional education programmes organised by Oral Surgery, Oral Pathology and Orthodontics involved the respective departmental alumni in organisation/participation/serving as resource faculty.

6.12 Activities and support from the Parent – Teacher Association None

6.13 Development programmes for support staff

All the administrative staffs have been provided with support for developing latest computer skills and technical staff dental mechanics have been encouraged and supported to update their skills via continuing education programmes

6.14 Initiatives taken by the institution to make the campus eco-friendly

The institution follows a number of environmental-friendly measures in terms of ambience, waste disposal, infrastructure, maintenance and routine workings:

1. The college's policy on green computing recommends the following:
   - Adjust computer monitor brightness settings to be at 30%, and computer monitor contrast settings to be at 70%
   - Adjust computer settings to automatically turn off the computer monitor display after 10 minutes of idle-usage
   - Adjust computer settings to put the computer to 'sleep' mode after 15 minutes of idle-usage
   - Adjust computer settings to turn off the hard disk after 20 minutes of idle-usage
   - Turn off the computer at the end of each day
2. All bags used to store waste are recyclable and are purcahsed through a government-authorised vendor
3. On-campus recycling of water using etp for on-campus horticulture use
4. On-campus street lighting is powered by solar panels
5. Empolyee health records are maintained on files made of recycled paper
6. Heavy metals such as mercury, lead and other metals such as silver, tin and stainless steel, are sent for recycling to a government-certified contractor; sharps are collected separately, cut into non-hazardous fragments and buried five feet below ground level.
7. Periodic circulars recommending electric power saving measures and minimal or back-to-back printing of documents ensure that faculty, staff and students follow these environmental-friendly measures; a number of communications are also circulated electronically (through the college domain emails), also ensuring paper-free communication

Criterion – VII

7. Innovations and Best Practices

7.1 Innovations introduced during this academic year which have created a positive impact on the functioning of the institution. Give details.

Implementation of Educational & Teaching Methodology

7.2 Provide the Action Taken Report (ATR) based on the plan of action decided upon at the beginning of the year

1. Establishment of Research Cell
2. Enhanced student performance

7.3 Give two Best Practices of the institution* *(please see the format in the NAAC Self-study Manuals)*

1. Teaching-learning module in communication skills and critical thinking
2. Competency assessment of students based on specific formats developed in-house

7.4 Contribution to environmental awareness / protection

1. The college's policy on green computing recommends the following:
   - Adjust computer monitor brightness settings to be at 30%, and computer monitor contrast settings to be at 70%
   - Adjust computer settings to automatically turn off the computer monitor display after 10 minutes of idle-usage
   - Adjust computer settings to put the computer to 'sleep' mode after 15 minutes of idle-usage
   - Adjust computer settings to turn off the hard disk after 20 minutes of idle-usage
   - Turn off the computer at the end of each day

2. All bags used to store waste are recyclable and are purchased through a government-authorised vendor

3. On-campus street lighting is powered by solar panels
4. Employee health records are maintained on files made of recycled paper

5. The establsihment and use of a central sterile supplies department (CSSD) has reduced electricity and water consumption by approx. 30%.

6. Periodic circulars recommending electric power saving measures and minimal or back-to-back printing of documents ensure that faculty, staff and students follow these environmental-friendly measures; a number of communications are also circulated electronically (through the college domain emails), also ensuring paper-free communication

7.5 Whether environmental audit was conducted? [✓] Yes [ ] No

7.6 Any other relevant information the institution wishes to add (for example SWOT Analysis).

Strengths:
- Visionary Management
- Well-qualified & experienced faculty
- Good, steady patient flow (300/day)
- Robust, continually improving infrastructure
- International collaborations
- Faculty / staff receptive to new concepts & changes
- Robust research grants (government & industry)
- NAAC accreditation

Weaknesses:
- Constraints in admitting students of uniform academic achievement
- Difficulty in procuring essential materials
- Location of the institution — relatively indirect connectivity

Opportunities:
- More international linkages with industry and academic organisations
- Greater research output

Threats/Challenges:
- Retention and availability of faculty
- Declining student interest in dentistry as a career
- Inconsistent state government policies
- Competition from similar institutions in the country

8. Plans of institution for next year

- PhD Centre for all recognised dental specialties
- Enhance number of PhD Guides in college
- Development measures for enhancing patient input
- More international linkages with industry and academic organisations
- Maintaining existing high standards
- Continue to strive for excellence
- Implement of some of the pending NAAC recommendations
- To encourage organisation of faculty development programmes
- Digitalisation of all academic records and OP records.

Name Dr. J. Bhuvaneswarri
Coordinator, IQAC

Name :Dr .S. Jimson
Principal & Chairperson, IQAC

Signature of the Coordinator, IQAC

Signature of the Chairperson, IQAC

***

Annexure I – The Academic and Clinic Schedule

Academic Schedule for I BDS

Day/Time	**9.00 am-9.50 am**	**9.50 ma-10.40 am**		**11.00 am-1.00 pm**	**Lunch (1.00-2.00 pm)**	**2.00-3.00 pm**	**3.00-5.00 pm**
Monday	Dental Anatomy (8.30-9.30)	Prosthodontics/Dental Anatomy Practical (9.30 am-12.30 pm)				Physiology	Physiology/ Biochemistry Practical
Tuesday	Biochemistry	Anatomy		Dissection		Physiology	Physiology/ Biochemistry Practical
Wednesday	Physiology	Biochemistry		Embryology		Prosthodontics/ Dental Anatomy Practical	
Thursday	Physiology	Anatomy/ Histology		Histology Practical		Dental Anatomy Practical	
Friday	Dental Anatomy	Osteology Demonstration		Dissection		Dental Anatomy Practical	
Saturday	Dental Anatomy (8.30 – 9.30)	Guest Lecture/ Constitution of India/Kannada/ General Medicine (9.30-10.30 am)	Dental Materials (10.30-11.30 am)	Rotatory Clinical Posting (11.30 am to 12.30 pm)			

Academic Schedule for II BDS

Day/Time	8.30-9.30 am	9.30-10.30 am	10.30-11.30 am	Lunch (1.00-2.00 pm)	1.30-4.30 pm
Monday	Oral Pathology	Conservative Dentistry	Prosthodontics (10.30 am-11.30 am) Dental Materials (11.30 am-12.30 pm)		Dental Anatomy/ Conservative Dentistry Practical
Tuesday	Pathology//Microbiology (Theory & Practical)				Dent Materials/ Conservative Dentistry Practical
Wednesday	Prosthodontics	Prosthodontics Practical 9.30 am To 12.30 pm			Dent Materials/ Conservative Dentistry Practical
Thursday	Pathology/ Microbiology	Pathology/ Microbiology Practical			Pharmacology (Lecture & Practical)
Friday	Oral Pathology	Prosthodontics Practical			Pharmacology (Lecture & Practical)
Saturday	Dental Materials/ Conservative Dentistry	Dent Materials/ Conservative Dentistry Practical			

Academic and Clinic Schedule for III BDS

Day/Time	8.30-9.30 am	9.30-10.30 am	10.30 -11.30 am	11.30 am-12.30 pm	Lunch (1.00-2.00 pm)	1.30-4.30 pm
Monday	Paedodontics	Prosthodontics	General Medicine/ General Surgery Clinics			Clinics
Tuesday	General Medicine	General Surgery	General Medicine/ General Surgery Clinics (Alternative Week)			Clinics
Wednesday	Oral Surgery	Oral Pathology	Conservative Dentistry	Orthodontics		Clinics
Thursday	Periodontics	Oral Pathology	Oral Pathology/ Orthodontics Practical			Clinics
Friday	General Medicine	General Surgery	General Medicine/ General Surgery Clinics			Clinics
Saturday	Oral Medicine & Radiology	Oral Pathology	Oral Pathology/ Orthodontics Practical			

Academic and Clinic Schedule for IV BDS

Day/Time	**8.30-9.30 am**	**11.30 am-12.30 pm**	**Lunch (1.00-2.00 pm)**	**1.30-2.30 pm**	**2.30-3.30 pm**	**3.30-4.30 pm**
Monday	Internal Assessment Exam	Clinics		Periodontics	Paedodontics Practical	
Tuesday	Periodontics	Clinics		Orthodontics.	Public Health Dentistry	
Wednesday	Paedodontics	Clinics		Oral Medicine & Radiology	Conservative Dentistry	
Thursday	Conservative	Clinics		Prosthodontics	Prosthodontics Crown & Bridge Practical	
Friday	Public Health Dentistry	Clinics		Prosthodontics	Prosthodontics Crown & Bridge Practical	
Saturday	Oral Surgery	Clinics				

Clinic Schedule for the Interns

Batch	Oral Medicine	Periodontics	Orthodontics	Geriatric Dentistry	Prosthodontics	Batch	Oral Surgery	Paedodontics	Conservative	Community
A1a	7-6-14 to 6-7-14	7-7-14 to 6-8-14	7-8-14 to 21-8-14	22-8-14 to 6-9-14	7-9-14 to 6-10-14	**B1a**	7-6-14 to 6-7-14	7-7-14 to 6-8-14	7-8-14 to 6-9-14	7-9-14 to 6-10-14
A1b	7-6-14 to 6-7-14	7-7-14 to 6-8-14	7-8-14 to 21-8-14	22-8-14 to 6-9-14	7-9-14 to 6-10-14	**B1b**	7-6-14 to 6-7-14	7-7-14 to 6-8-14	7-8-14 to 6-9-14	7-9-14 to 6-10-14
A2a	7-9-14 to 6-10-14	7-6-14 to 6-7-14	7-7-14 to 21-4-14	22-4-14 to 6-5-14	7-5-14 to 6-6-14	**B2a**	7-9-14 to 6-10-14	7-6-14 to 6-7-14	7-7-14 to 6-8-14	7-8-14 to 6-9-14
A2b	7-9-14 to 6-10-14	7-6-14 to 6-7-14	22-4-14 to 6-5-14	7-7-14 to 21-4-14	7-5-14 to 6-6-14	**B2b**	7-9-14 to 6-10-14	7-6-14 to 6-7-14	7-7-14 to 6-8-14	7-8-14 to 6-9-14
A3a	7-5-14 to 6-6-14	7-9-14 to 6-10-14	7-6-14 to 21-6-14	22-6-14 to 6-7-14	7-7-14 to 6-8-14	**B3a**	7-8-14 to 6-9-14	7-9-14 to 6-10-14	7-6-14 to 6-7-14	7-7-14 to 6-8-14
A3b	7-5-14 to 6-6-14	7-9-14 to 6-10-14	22-6-14 to 6-7-14	7-6-14 to 21-6-14	7-7-14 to 6-8-14	**B3b**	7-8-14 to 6-9-14	7-9-14 to 6-10-14	7-6-14 to 6-7-14	7-7-14 to 6-8-14
A4a	7-7-14 to 6-8-14	7-5-14 to 6-6-14	7-9-14 to 21--9-14	22-9-14 to 6-10-14	7-10-14 to 6-10-14	**B4a**	7-7-14 to 6-8-14	7-8-14 to 6-9-14	7-9-14 to 6-10-14	7-6-14 to 6-7-14
A4b	7-7-14 to 6-8-14	7-5-14 to 6-6-14	22-9-14 to 6-10-14	7-9-14 to 21--9-14	7-10-14 to 6-10-14	**B4b**	7-7-14 to 6-8-14	7-8-14 to 6-9-14	7-9-14 to 6-10-14	7-6-14 to 6-7-14
General Dentistry from 7-10-2013 to 6-2-2014; Batch A1a – 1,2 A1b – 3,4 A2a – 5,6 A2b – 7,8 A3a – 9,10 A3b – 11,12, A4a – 13,14 A4b – 15,16										
B1a	7-10-13 to 6-11-13	7-11-13 to 6-12-13	7-12-13 to 21-12-13	22-12-13 to 6-1-14	7-1-14 to 6-2-14	**C1a**	7-10-13 to 6-11-13	7-11-13 to 6-12-13	7-12-13 to 6-1-14	7-1-14 to 6-2-14
B1b	7-10-13 to 6-11-13	7-11-13 to 6-12-13	22-12-13 to 6-1-14	7-12-13 to 21-12-13	7-1-14 to 6-2-14	**C1b**	7-10-13 to 6-11-13	7-11-13 to 6-12-13	7-12-13 to 6-1-14	7-1-14 to 6-2-14
B2a	7-1-14 to 6-2-14	7-10-13 to 6-11-13	7-11-13 to 21-11-13	22-11-13 to 6-12-13	7-12-13 to 6-1-14	**C2a**	7-1-14 to 6-2-14	7-10-13 to 6-11-13	7-11-13 to 6-12-13	7-12-13 to 6-1-14
B2b	7-1-14 to 6-2-14	7-10-13 to 6-11-13	22-11-13 to 6-12-13	7-11-13 to 21-11-13	7-12-13 to 6-1-14	**C2b**	7-1-14 to 6-2-14	7-10-13 to 6-11-13	7-11-13 to 6-12-13	7-12-13 to 6-1-14
B3a	7-12-13 to 6-1-14	7-1-14 to 6-2-14	7-10-13 to 21-10-13	22-10-13 to 6-11-13	7-11-13 to 6-12-13	**C3a**	7-12-13 to 6-1-14	7-1-14 to 6-2-14	7-10-13 to 6-11-13	7-11-13 to 6-12-13
B3b	7-12-13 to 6-1-14	7-1-14 to 6-2-14	22-10-13 to 6-11-13	7-10-13 to 21-10-13	7-11-13 to 6-12-13	**C3b**	7-12-13 to 6-1-14	7-1-14 to 6-2-14	7-10-13 to 6-11-13	7-11-13 to 6-12-13
B4a	7-11-13 to 6-12-13	7-12-13 to 6-1-14	7-1-14 to 21-1-14	22-1-14 to 6-2-14	7-10-13 to 6-11-13	**C4a**	7-11-13 to 6-12-13	7-12-13 to 6-1-14	7-1-14 to 6-2-14	7-10-13 to 6-11-13
B4b	7-11-13 to 6-12-13	7-12-13 to 6-1-14	22-1-14 to 6-2-14	7-1-14 to 21-1-14	7-10-13 to 6-11-13	**C4b**	7-11-13 to 6-12-13	7-12-13 to 6-1-14	7-1-14 to 6-2-14	7-10-13 to 6-11-13
General Dentistry from 7-2-2014 to 6-6-2014; Batch B1a – 17,18 B1b – 19,20 B2a – 21,22 B2b – 23,24 B3a – 25,26 B3b – 27,28 B4a – 29,30 B4b – 31,32,33										

C1a	7-2-14 to 6-3-14	7-3-14 to 6-4-13	7-4-13 to 21-4-14	22-4-14 to 6-5-14	7-5-14 to 6-6-14	**A1a**	7-2-14 to 6-3-14	7-3-14 to 6-4-14	7-4-14 to 6-5-14	7-5-14 to 6-6-14
C1b	7-2-14 to 6-3-14	7-3-14 to 6-4-13	22-4-14 to 6-5-14	7-4-13 to 21-4-14	7-5-14 to 6-6-14	**A1b**	7-2-14 to 6-3-14	7-3-14 to 6-4-14	7-4-14 to 6-5-14	7-5-14 to 6-6-14
C2a	7-5-14 to 6-6-14	7-2-14 to 6-3-14	7-3-14 to 21-3-14	22-3-14 to 6-4-14	7-4-14 to 6-5-14	**A2a**	7-5-14 to 6-6-14	7-2-14 to 6-3-14	7-3-14 to 6-4-14	7-4-14 to 6-5-14
C2b	7-5-14 to 6-6-14	7-2-14 to 6-3-14	22-3-14 to 6-4-14	7-3-14 to 21-3-14	7-4-14 to 6-5-14	**A2b**	7-5-14 to 6-6-14	7-2-14 to 6-3-14	7-3-14 to 6-4-14	7-4-14 to 6-5-14
C3a	7-4-14 to 6-5-14	7-5-14 to 6-6-14	7-2-14 to 21-2-14	22-2-14 to 6-3-14	7-3-14 to 6-4-14	**A3a**	7-4-14 to 6-5-14	7-5-14 to 6-6-14	7-2-14 to 6-3-14	7-3-14 to 6-4-14
C3b	7-4-14 to 6-5-14	7-5-14 to 6-6-14	22-2-14 to 6-3-14	7-2-14 to 21-2-14	7-3-14 to 6-4-14	**A3b**	7-4-14 to 6-5-14	7-5-14 to 6-6-14	7-2-14 to 6-3-14	7-3-14 to 6-4-14
C4a	7-3-14 to 6-4-14	7-4-14 to 6-5-14	7-5-14 to 21-5-14	22-5-14 to 6-6-14	7-2-14 to 6-3-14	**A4a**	7-3-14 to 6-4-14	7-4-14 to 6-5-14	7-5-14 to 6-6-14	7-2-14 to 6-3-14
C4b	7-3-14 to 6-4-14	7-4-14 to 6-5-14	22-5-14 to 6-6-14	7-5-14 to 21-5-14	7-2-14 to 6-3-14	**A4b**	7-3-14 to 6-4-14	7-4-14 to 6-5-14	7-5-14 to 6-6-14	7-2-14 to 6-3-14
General Dentistry from 7-6-2014 to 6-10-2014; Batch C1a − 34,35 C1b − 36,37 C1a − 38,39 C2b − 40,41 C3a − 42,43 C3b − 44,45 C4a − 46,47 C4b − 48,49,50										

Annexure II

Best Practice I

1. Title of the Practice

Communication Skills and Critical Thinking

2. Objectives of the Practice

Communication is a vital soft skill necessary in daily life. It is equally important in dental practice for interacting with, and managing, patients. However, it is not part of the prescribed dental curriculum and recognising it relevance, the college introduced the topic as a module in August 2010 for III BDS. The intention of commencing it in the third year of the undergraduate course was on account of students' exposure to the clinics in that year—this would ensure that neither is it too early (potentially affecting comprehension and appreciation of relevance), nor was it too late (possibly affecting patient management). Salient objectives include:

- To build skills to be a respected oral healthcare specialist
- To be competent in:
  - Communicating confidently with all kinds of people
  - Presenting thoughts and ideas in a coherent and critical order in the clinic context, writing for journals and developing research findings
  - Creating lasting bonds with patients, seniors, peers and various other interfaces

3. The Context

A challenge was to create a group of faculty members who would be in a position to train students through the application of a proper approach and using appropriate methods. The college identified a group of six faculty members and hired the services of a corporate trainer for the purpose. The latter provided reading/learning material, as well as PowerPoint® lectures, and trained the faculty members over a period of ~20 weeks. At the outset, faculty members identified their specific topic of interest within communication skills—such as verbal-non-verbal communication, written communication, presentation skills, etc. The focus then was to hone skills in the teaching of the identified areas of interest. Since each taught session for students would include a mixture of lecturing and hands-on exercises, an 'assistant' was also designated from among the same faculty group to aid in a particular topic. The pair of presenter and 'assistant', together, would conduct the respective individual communication skills session for III BDS students.

4. The Practice

As aforementioned, communication skills are not prescribed in the current dental curricula developed by the DCI and this is a first-of-its-kind initiative in India. The communication skills and critical thinking module has been developed keeping in mind the demands of dental training and practice not just in the country but beyond. India is a highly diverse and multi-cultural society with numerous ethnic, religious and linguistic groups. It is therefore necessary that graduates appreciate the importance of communicating in an appropriate and acceptable manner with people of diverse backgrounds, and the module assists in this. Apart from appointing a trainer for mentoring a team of dedicated in-house faculty members, academic slots were identified and integrated into the teaching schedule. The schedule also meant that faculty members were required to perform additional duties, spend more time preparing for the modules and away from their routine work and areas of specialisation. All faculty members, however, were enthusiastic and up to the responsibility. Following the initial training in 2010-11, faculty members have independently undertaken the training for students in this module.

5. Evidence of Success

Competency in communication skills was tested as part of an assessment in Public Health Dentistry on the format 'Competency Assessment in Cultural Communication' in internship. Over 95% of students who took this assessment successfully fulfilled the requirements therein/were deemed competent.

6. Problems Encountered and Resources Required

A one-time modest additional financial resource allocation may be required for hiring the services of a corporate trainer. Departments from which the faculty members were identified to be part of the module may require to be flexible in terms of providing adequate time to the faculty members for undergoing the requisite training and gaining expertise. However, once the training of faculty members is complete, the latter can easily handle the module on a continual basis. Additional minor resources required include stationery used in a variety of classroom based exercises on team work, preparing mock advertisements, writing mock letters to head of institutions and departments expressing interest in pursuing a course or research.

7. Notes

Identification and recognition of relevant teaching programmes, which can potentially benefit students, and their implementation through allocation of modest financial resources, appointment of experts for training, and a core group of motivated faculty, can ensure the introduction of new educational modules and dissemination of soft skills for the benefit of the students and, in turn, the community.

Best Practice II

1. Title of the Practice

Competency Assessment of Clinical Skills

2. Objectives of the Practice

The aim of this innovative practice is to assess more objectively the college students' competency in different diagnostic and treatment modalities using in-house developed competency assessment forms (and possibly also facilitate the gaining of competence).

3. The Context

The competency assessments, in place since 2010-11, are orchestrated by individual departments; they are used to gauge competence once the faculty members therein deem a student has completed a set threshold/clinical quota of cases. Competency in different diagnostic and treatment modalities is evaluated using competency assessment forms. On completing the required threshold, the student is permitted to 'challenge' a particular competency, which faculty members evaluate on the prescribed form (Annexure 10). The competency assessment forms contains a number of queries with a 'Yes/No' response, and the student is expected to achieve a 100% 'Yes' response in order to be deemed competent. In the event a student does not gain a satisfactory grading, s/he is allowed to 'challenge' the competency again.

4. The Practice

The generally followed examination system in Indian dental colleges continues to be the question-paper and viva-voce based theoretical assessment, and evaluation of a limited number of clinical skills. In an attempt to make the evaluation relatively on par with international standards, the college embarked on the creation of more specific assessment of dental treatment skills of students. This was undertaken on certain formats that were used as guides in the evaluation

process, which are listed below. Note that the forms were based on certain existing internationally used formats, which were adapted to the college and Indian requirements.

Oral Medicine & Radiology

- Diagnosis & Treatment Planning—IV BDS
- Chart Documentation—IV BDS
- Critical Evaluation of Clinical Case—IV BDS
- Urgent Care—IV BDS

Conservative Dentistry & Endodontics

- Amalgam Restorations—IV BDS
- Caries Status & Risk Assessment—IV BDS

Oral Surgery

- Simple Extractions—IV BDS
- Infection Control—IV BDS
- Administering Local Anesthesia—IV BDS
- Managing Medical Emergencies—IV BDS
- Prescription Writing—IV BDS
- Urgent Care—IV BDS

Prosthodontics

- RPD Designing—II BDS
- Complete Dentures—IV BDS

Orthodontics

- Competency in Orthodontics—IV BDS

Paediatric Dentistry

- Pediatric Dentistry—IV BDS
- Caries Status & Risk Assessment—IV BDS
- Anxiety Management—IV BDS
- Managing Patients with Special Needs—IV BDS
- Urgent Care—IV BDS
- Post Treatment Review—IV BDS

Periodontics

- Periodontal Treatment Planning—IV BDS
- Periodontal Instrumentation and OHI—III BDS/IV BDS
- Infection Control—III BDS/IV BDS

Public Health Dentistry

- Community Dentistry—Internship
- Cultural Communication—Internship
- Ethical Analysis—Internship
- Practice Management—Internship

General Dentistry

- Diagnosis & Treatment Planning—Internship
- Critical Evaluation of Clinical Case—Internship
- Endodontic Treatment—Internship
- Composite Restoration—Internship
- PFM/All-ceramic—Internship
- Cast Gold—Internship
- Managing Patients with Special Needs—Internship
- Anxiety Management—Internship
- Post Treatment Review—Internship

This approach can serve as an indicator of student competency (as well as teaching quality, to an extent) for information and reference of students and faculty member; however, it's results

cannot alone be used as a measure of determining the academic advancement of students since that is done based on the year-end university examination.

5. Evidence of Success

Provide evidence of success such as performance against targets and benchmarks, review results. What do these results indicate?

The competency assessment have allowed the recognition of areas that require to be addressed by students, and served as a useful guidance to initiate rectification. For example, in one of the assessment, over 92% of all students were judged to be competent in the formal competency assessment in different treatment procedures, and deficiencies in certain treatment modalities were noted. These were rectified which resulted in 100% success of the non-competent students in the year-end university examination. Some of the areas that were recognised as requiring further improvement, both in terms of teaching/training and learning were as follows:

- In Public Health Dentistry, methods of measuring common oral diseases, understanding some of the ethical principles in practice, the social, cultural and environmental factors which contribute to health and illness, and students' ability to manage their practices, were areas that required more emphasis and scrutiny.
- In Paediatric Dentistry, students' ability to demonstrate knowledge and evidence-based thinking when assessing caries status, caries risk and planning treatment was found to be deficient; also students' competency rates in one-third of the criteria used for assessing competency in special needs patients' diagnosis and treatment planning fell below 90% (designated a desirable 'benchmark'). Following intervention, all students previously deemed incompetent successfully passed the year-end RGUHS examination.
- In Periodontics, students' ability to remove calculus without tissue trauma was an area that required improvement; again, due to intervention, all 'in-competent' students passed the year-end university examination.
- In Prosthodontics, preparations of both preliminary and final impressions were areas that required additional emphases. Additional training and stress on the concerned areas resulted in all 'incompetent' students passing the university examination.
- In Conservative Dentistry, students' ability to assess caries status and risk, as well as design interceptive strategies to control or arrest progress of caries, was found wanting and required more focus and elaboration. Here too, following intervention, students successfully cleared their university examination.
- In Oral Surgery, students' competency in many aspects of prescription writing was below par, so was their ability to identify risk factors for medical emergencies in dental settings, as well as locate and utilise the emergency resuscitation equipment. The identification and communication of these issues to the concerned students and faculty members ensured improvement in teaching-leaning objectives and success in the year-end university examination.

6. Problems Encountered and Resources Required

Perhaps the only problem was the potentially longer time required for the competency assessment. One solution offered to obviate this was to integrate the internal assessment and the competency assessment, not only saving time but also ensuring that the competency evaluated and gained actually contributed to the year-end university marks. Apart from the time put in by the individual department faculty to provide their expert comments on the composition of the competency assessment forms, the 'resource' primarily required for the competency assessment forms are paper and printing ink.

7. Notes

The mechanism of evaluation in dentistry has seen major evolution across the world. To keep up to pace, colleges in India may require implementing certain initiatives that can assist both faculty members and students, and contribute to the overall teaching-learning programme. These initiatives can also be integrated to existing evaluation methods so that it also has a practical justification. However, before, its implementation, differences that may exist in the approach to teaching-learning activities in India and elsewhere necessitate developing country-specific alterations.

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