



Aroor Laxminarayana Rao Memorial AYURVEDIC MEDICAL COLLEGE

(Affiliated to Rajiv Gandhi University of Health Sciences &
Recognised by Govt. of Karnataka &
National Commission for Indian System of Medicine, Ministry of AYUSH, Govt. of India
MANAGED BY AROOR EDUCATIONAL TRUST (R.) KOPPA
Koppa - 577 126, Chikmagalur Dist
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Ref. No. ALNAC 89/COMMITTEE/2025-26/028

Date: 11/05/2025

An INTERNAL QUALITY ASSURANCE CELL has been constituted for conduction of all co-curricular and extra-curricular activities in the college as indicated in provision 23 of the latest **MINIMUM ESSENTIAL STANDARDS, ASSESSMENT AND RATING FOR THE AYURVEDA MEDICAL INSTITUTE 2024** as published in the Gazette of India CG-DL-E-06052024-254049 dated 2nd May 2024 with the following members with immediate effect:

Sl. No.	Name of the Member	Designation
1	Mrs. Namitha Rao , Trustee	Management representative
2	Dr. Harsha NM , Principal	Chairman
3	Dr. Prashanth Bhat , Vice Principal	Member
4	Dr. Murali Rao , Deputy Medical Superintendent	Member
5	Dr. Krishna Kishore , Professor & Head, Dept of DG	Member
6	Dr. Karthik HV , Professor & Head, Dept of Agada Tantra	Member
7	Dr. Aloknath DD , Professor & Head, Dept of Samhita & Siddhanta	Member
8	Dr. Ashwini SG , Assistant Professor, Dept of Kayachikitsa	Member
9	Dr. Sukruth G , Assistant Professor, Dept of RSBK	Member
10	Mrs. Arathi , Matron	Member
11	Dr. PV Ramesh , External Expert	Member
12	Dr. Pankaj Prasad Shriwastava , Professor, Dept of DG	Member Secretary

Purpose and Objectives of IQAC

The primary purpose of establishing an IQAC in an Ayurveda Medical College is to ensure systematic quality improvement in all aspects of the institution's functioning. The specific objectives include:

- Development of a system for conscious, consistent, and catalytic action to improve the academic and administrative performance of the college.
- Ensuring the integration of modern educational methodologies with traditional Ayurvedic knowledge systems.
- Promoting internalization of quality culture and institutionalization of best practices.

The Roles & Responsibilities:

1. The committee will report all activities to the Principal and the College Governing body.
2. Review and update the B.A.M.S. and PG curriculum annually to integrate:
 - Classical Ayurvedic shlokas, theory, and clinical procedures.
 - Advances in biomedical sciences, AI-enabled diagnostics, and public health measures.
 - Competency mapping (CO-PO), Bloom's Taxonomy, and Miller's Pyramid for each module.
3. Teaching–Learning and Academic Schedule
 - Approve and monitor the academic calendar, timetables, and duty rosters.
 - Endorse innovative teaching methodologies: simulated OSCEs, case-based learning, digital modules, and flipped classrooms.
 - Liaise with the Medical Education Technology (MET) cell or Quality Improvement Programme (QIP) for faculty training
4. Assessment and Examination Oversight
 - Develop and periodically update question banks, assessment blueprints, and OSCE checklists.
 - Validate formative and summative assessments for validity, reliability, and fairness.
 - Implement policies to uphold academic integrity, grievance redressal, and re-examination protocols.
5. Student Progression and Support
 - Monitor student attendance, internal assessment performance, and identify at-risk learners.
 - Recommend remedial classes, mentoring, and counselling for academic or personal challenges.
6. Faculty Development and Recognition
 - Conduct needs analysis for faculty pedagogical, research, and clinical skills.
 - Organize workshops on outcome-based education, assessment design, and new therapeutic procedures.
 - Nominate faculty for NCISM-approved MET/QIP programs and recognize excellence in teaching and research.

ii. Teaching and Learning Processes

- a. **Faculty Development Programs (FDPs):** Organizing workshops on innovative teaching methodologies, research methodologies, and the use of technology in Ayurveda education.
- b. **Student Feedback Mechanism:** Establishing a robust feedback system to evaluate the effectiveness of teaching and clinical training.
- c. **Mentorship Programs:** Creating mentorship structures where faculty guide students in both academic and clinical training.

iii. Research and Innovation

- a. **Research Quality Monitoring:** Developing systems for monitoring research quality, ensuring relevance, and fostering collaborations with other institutes and industries.
- b. **Research Funding and Publication:** Encouraging faculty and students to apply for research grants and publish in high-impact journals.
- c. **Interdisciplinary Research:** Promoting interdisciplinary research between Ayurveda, modern medicine, and allied sciences.

iv. Clinical Excellence

- a. **Quality Assurance in Clinical Practices:** Ensuring the highest standards in clinical training and service delivery in the associated Ayurveda hospital.
- b. **Patient Feedback Mechanism:** Implementing a feedback system for patients to improve clinical services and training.
- c. **Standard Treatment Protocols:** Developing and regularly updating standard protocols for treatments to maintain consistency in care.

v. Student Support and Progression

- a. **Holistic Development:** Initiating extracurricular activities for holistic development (sports, yoga, meditation, cultural activities).
- b. **Career Counseling and Placement Services:** Establishing placement cells and career guidance services to help students in career planning.
- c. **Scholarships and Financial Aid:** Facilitating scholarships and financial aid for deserving students.

vi. Infrastructure and Learning Resources

- a. **ICT-enabled Classrooms and Laboratories:** Ensuring all teaching and learning spaces are equipped with modern technological aids.
- b. **Library Upgradation:** Enhancing the library resources, including access to digital databases for Ayurveda research and clinical studies.
- c. **Herbal Gardens and Museum:** Maintaining and expanding herbal gardens and an Ayurvedic museum for practical learning.

vii. Community Engagement and Outreach

- a. **Extension Activities:** Encouraging faculty and students to engage in community health programs, awareness campaigns, and free health camps.
- b. **Collaboration with Traditional Practitioners:** Facilitating the integration of traditional Ayurvedic practitioners into institutional activities to preserve indigenous knowledge.

Quality Monitoring and Evaluation Mechanisms

IQAC should implement a structured system for evaluating the quality of institutional processes:

- a. **Academic and Administrative Audit (AAA):** Conduct periodic academic and administrative audits to assess the effectiveness of programs, teaching methodologies, and administrative functions.
- b. **Student Satisfaction Survey (SSS):** Regularly conduct student satisfaction surveys to gauge the effectiveness of academic programs and clinical training.
- c. **Annual Quality Assurance Report (AQAR):** Prepare and submit the AQAR to the QCI based on IQAC's annual activities.
- d. **Self-Assessment Reports:** Faculty and departments should conduct self-assessments annually to identify areas of improvement.

Documentation and Reporting

- a. **Comprehensive Records:** All IQAC activities must be documented systematically, including minutes of meetings, feedback reports, action plans, and audits.
- b. **Data Management System:** An internal data management system should be developed to store and track quality metrics like student progression, clinical outcomes, research output, etc.
- c. **Annual Reports:** A comprehensive annual report should be published to highlight the activities and progress made by IQAC.

Review and Continuous Improvement

- a. **Review Mechanism:** IQAC should establish a review mechanism to periodically evaluate its processes and make necessary improvements.
- b. **Feedback Integration:** Regularly collect feedback from stakeholders (students, faculty, alumni, and patients) and use this input for refining policies and practices.
- c. **Benchmarking:** Compare institutional performance with national and international Ayurveda colleges to identify best practices and areas for improvement.

Copy to:

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3. Office copy
4. President Sir File




Principal
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