



# Sree Gokulam Medical College & Research Foundation

(A Unit of Foundation of Non-Resident Indians)

Approved by National Medical Commission, Affiliated to Kerala University of Health Sciences

Accredited by NABH & NABL

To whomsoever it may concern

This is to certify that the information in the attached document is verified by me and is found to be true to the best of my knowledge.



**PRINCIPAL**  
*Sree Gokulam Medical College &  
Research Foundation, Venjaramoodu  
Thiruvananthapuram-695 607*



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## Sree Gokulam Medical College & Research Foundation

### INTERNAL QUALITY ASSURANCE CELL (IQAC)

NAAC proposes the constitution of an Internal Quality Assurance Cell in every Higher Education Institution for the comprehensive evaluation and implementation of measures for the overall quality enhancement in academic and administrative areas.

The Internal Quality Assurance Cell (IQAC) of Sree Gokulam Medical College & Research Foundation was constituted in June 2022, with the intention of improving the quality of academic activities and health care facilities. Earlier the College Curriculum Committee was involved in addressing the academic matters with respect to evaluation, collecting feedback from stakeholders and evolving measures to enhance quality improvement. Similarly the feedback from stakeholders in improving the hospital facilities were collected by the hospital administration and necessary steps taken to improve the quality of care provided. With the constitution of IQAC, all the quality improvement measures could be comprehensively assessed, implemented and outcome evaluated.

#### STRATEGIES

The IQAC shall evolve mechanisms and procedures for (As per NAAC):

- Ensuring timely, efficient and progressive performance of academic, administrative and financial tasks
- The relevance and quality of academic and research programmes
- Equitable access to and affordability of academic programmes for various sections of society
- Optimization and integration of modern methods of teaching and learning
- The credibility of evaluation procedures
- Ensuring the adequacy, maintenance and functioning of the support structure and services
- Research sharing and networking with other institutions in India and abroad



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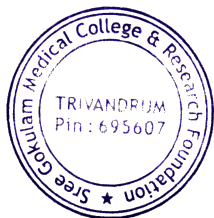
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## FUNCTIONS:

Some of the functions expected of the IQAC are (As per NAAC):

- Development and application of quality benchmarks/parameters for various academic and administrative activities of the institution
- Facilitating the creation of a learner-centric environment conducive to quality education and faculty maturation to adopt the required knowledge and technology for participatory teaching and learning process
- Arrangement for feedback response from students, parents and other stakeholders on quality-related institutional processes
- Dissemination of information on various quality parameters of higher education
- Organization of inter and intra institutional workshops, seminars on quality related themes and promotion of quality circles
- Documentation of the various programmes/activities leading to quality improvement
- Acting as a nodal agency of the Institution for coordinating quality-related activities, including adoption and dissemination of best practices
- Development and maintenance of institutional database through MIS for the purpose of maintaining/enhancing the institutional quality
- Development of Quality Culture in the institution
- Preparation of the Annual Quality Assurance Report (AQAR) as per guidelines and parameters of NAAC, to be submitted to NAAC after the first accreditation.



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## BENEFITS:

IQAC will facilitate/contribute (As per NAAC):

- Ensure heightened level of clarity and focus in institutional functioning towards quality enhancement
- Ensure internalization of the quality culture
- Ensure enhancement and coordination among various activities of the institution and institutionalize all good practices
- Provide a sound basis for decision-making to improve institutional functioning
- Act as a dynamic system for quality changes in Higher Education Institution
- Build an organised methodology of documentation and internal communication

## OBJECTIVES:

1. To formulate measures to ensure quality in academic and administrative activities of the institution.
2. To implement methods to impart quality education to the students through teaching- learning methods, formative and summative assessments.
3. Incorporate the changes in the UG and PG curriculum as and when put forward by the NMC and KUHS.
4. To ensure faculty development programs to carry out teaching - learning methods and assessment methods for the benefit of students.
5. To ensure quality in the various departments of our institution for overall development of hospital facilities apart from academic matters.
6. To collect feedback from stakeholders, analyse them and ensure that timely actions are taken on the matters discussed



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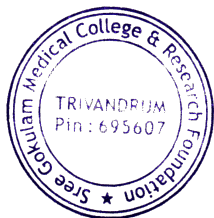
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## IQAC MEMBERS:

It was decided to hold regular meetings of the IQAC with the following members every 6 months or as and when necessary. Discussion of Agenda, feedback from stakeholders, ATR (Action taken report) on previous agenda and outcome analysis would be done at each meeting. External member was added in February 2024.

Sl. No	Names	
1	Dr K K Manojan	Vice Chairman
2	Dr Chandramohan P	Dean Emeritus
3	Dr Lalitha Kailas ,Principal	Chairperson
4	Dr Mamata Chimmalgi	IQAC coordinator
5	Dr Geetha O	Chairperson, Criterion 1
6	Dr Vivek George	Chairperson, Criterion 2
7	Dr Regi Jose	Chairperson, Criterion 3
8	Dr Rajesh Vijayan	Chairperson, Criterion 4
9	Dr Anil Bindu	Chairperson, Criterion 5
10	Dr Assalatha	Chairperson, Criterion 6
11	Dr Benny P V	Chairperson, Criterion 7
12	Dr Remani P T	Chairperson, Criterion 8 (Part B)
13	Dr Jarlin John	Member
14	Dr Rekha R S	Member
15	Dr Swapna K Pillai	Member
16	Dr Keba	Member
16	Dr Tony P Joseph	Alumni Representative
17	Mr Seyadali, 2018 batch	Student representative
18	Mr Githosh	Secretary to Chairman
19	Mr Dharmapalan	Administrative officer
20	Mr Rajendran	H R manager
21	Mrs Swapna	Faculty Resource Coordinator
22	Mr Anil	Accounts manager
23	Mr Manu	Purchase manage
24	Mr Aji	Project manager
25	Prof Latha, Professor of Physiology, Sri Venkateshwara Med College Hospital & Research Centre, Puducherry	External Member



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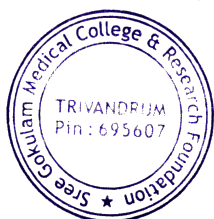
Following quality assurance mechanisms have been established by IQAC:

## I. General:

1. College website was created to document college & hospital data.
2. Freezing the vision and mission statements of the institution.
3. Update faculty on new competency based undergraduate curriculum through concerted efforts with MEU.
4. Sensitise faculty regarding early clinical exposure, self-directed learning, electives, AETCOM, aligned and integrated teaching, learning by reflection, training in skills lab, etc.
5. Annual Report of the college
6. Mentoring program
7. E-governance
8. Outcome based education
9. Organise seminary/expert talks regarding quality improvement

## II. Academic activities: Policies were prepared based on the guidelines from the regulatory body and university:

1. Develop academic calendar
2. Attendance policy
3. Continuous Internal Assessment: Notifications, frequency, methods, transparency, eligibility for university examinations, post-examination evaluation.
4. Slow learners and high performers: Measures to identify, methods to help, protocols to measure the learning outcome.
5. Remedial teaching and on-demand examinations.
6. Honour roll to award the achievers.
7. Curriculum committee meetings
8. Strengthening curriculum: program quality assurance, development of instructional tools, innovative teaching methods, new program development and approval.



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### III. Learner-friendly campus:

1. Policies on academic freedom, academic integrity, positive learning environment, inclusivity and equal opportunity.
2. To inculcate behaviour befitting the profession, code of conduct, ethical and professional behaviour, honour code & students' dress code were detailed.
3. To ensure safety and health, we are smoke-free and substance-free campus.

### IV. Empowerment:

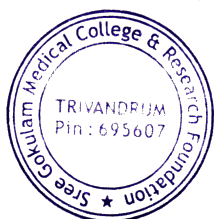
1. Faculty development programs, professional development programs, quality improvement programs were conducted.
2. Add-on & Value added courses
3. Mechanisms of grievance redressal both for students and staff were established.
4. Academics decision appeal policy was drafted.
5. Internal Complaints committee has been established.

### V. Research:

1. Research policy
2. Postgraduate research activities
3. Incentivising research and scholarly activities
4. Responsible conduct of research.

### VI. Administration:

1. Strategic plan document was developed
2. Hostel & Library rules & membership were detailed.
3. Leave policy
4. Students course completion & clearance policy, withdrawal policy
5. Policy on International electives & international visiting students



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## VII. Monitoring:

1. Performance appraisal policy
2. Designed and established mechanism for online collection of feedback from students, teachers', parents' alumni, patients, library, employers, professionals, etc., analysed for actions.
3. Academic and administrative audits

## VIII. Decentralisation

1. Participatory governance through Medical & administrative councils.
2. Development of organogram
3. Formation of various Committees and SOPs

## IX. External quality assurance

1. Standardised system in management of medication, patient education, hospital infection control and prevention, clinical audit, quality improvement projects, incident reporting system, facility management (Biomedical & Engineering), employee health check-up and credentialing & privileging has led to NABH accreditation.
2. Stringent quality control measures, internal/external audits to evaluate quality of service and upgradation of protocols has resulted in NABL accreditation of the Department of Laboratory Medicine.
3. Preparation for NAAC accreditation & participation in NIRF
4. Green & energy audits.

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