



Dayananda Sagar College of Dental Sciences

**Policy Document of all committees**



# Dayananda Sagar College of Dental Sciences

## Policy Document

### INTERNAL QUALITY ASSURANCE CELL (IQAC)

**PRINCIPAL**

Dayananda Sagar College of Dental Sciences  
Kumaraewamy Layout,  
Bangalore - 560 078.

## **INTERNAL QUALITY ASSURANCE CELL (IQAC)**

Quality assessment and monitoring is an integral part to achieve academic and administrative excellence. IQAC is an integral part of NAAC, In pursuit of excellence IQAC is a part of institution's system and works toward realization of goals of quality enhancement and sustenance.

### **POLICY DOCUMENT**

#### **VISION**

Ensuring that development of quality culture is of primary importance in the institute by internalising all the initiatives with internal and external support.

#### **AIMS AND OBJECTIVE**

- To Develop of a system for conscious and consistent and catalytic action to improve the academic and administrative performance of the institution.
- To generate measures towards quality enhancement for effective functioning of the institute through internal quality culture and best practices

#### **STRATEGIES**

IQAC shall evolve mechanisms and procedures for

- a) Ensuring timely, efficient and progressive performance of academic, administrative and financial tasks.
- b) Relevant and quality academic/ research programmes.
- c) Equitable access to and affordability of academic programmes for various sections of society.
- d) Optimization and integration of modern methods of teaching and learning.
- e) The credibility of assessment and evaluation process.
- f) Ensuring the adequacy, maintenance and proper allocation of support structure and services.
- g) Sharing of research findings and networking with other institutions in India and abroad.

  
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## **FUNCTIONS OF IQAC**

- a) Development of quality checks and benchmarks.
- b) Setting of Parameters for various academic and administrative activities of the institution.
- c) Creation of a learner-centric environment.
- d) Collection and analysis of feedback from all stakeholders on quality-related processes;
- e) Organize quality related interdisciplinary, inter and intra institutional conferences, workshops and seminars.
- f) Documentation of all activities and programmes leading to quality improvement.
- g) Advise on adoption and dissemination of best practices.
- i) Conduct academic and administrative audits periodically.
- j) Preparation and submission of the Annual Quality Assurance Report (AQAR) as per the guidelines and parameters of NAAC.

## **COMPOSITION OF THE IQAC**

IQAC will be constituted under the Chairmanship of the Head of the institution with heads of important academic and administrative units, a few teachers, distinguished educationists, representatives of local society and stakeholders.

The composition of the IQAC is as follows:

1. Chairperson: Principal/Head of the Institution
2. Teachers to represent all level
3. One member from the Management
4. Few Senior administrative officers
5. One nominee each from local society, Students and Alumni
6. One nominee each from Employers /Industrialists/Stakeholders
7. One of the senior teachers as the coordinator/Director of the IQAC

The membership of such nominated members shall be for a period of two years. The IQAC will meet at least once in every three months. The quorum for the meeting shall be two-third of the total number of members. The agenda, minutes and Action Taken Reports will be documented with official signatures and maintained electronically in a retrievable format.

## **DEFINITIONS AND ROLES**

**Chairperson:** The chairperson of the IQAC committee is the presiding officer of the committee. The

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person holding the office is typically elected or appointed by members of the group and presides over meetings of the group.

**Role of the chairperson:**

Primary role is to ensure that the board is effective in its task of setting and implementing the committee's direction and strategy. To conduct the meetings, so that the decisions can be taken

**Co-ordinator/member secretary:** A person whose job is to organize events or activities and to negotiate with others in order to ensure they work together.

**Role of the coordinator/member secretary**

The role of the coordinator of the IQAC is crucial in ensuring the effective functioning of all the members. The coordinator of the IQAC will be a senior/competent person with experience and exposure in quality aspects. She/he will be a full-time functionary or, to start with, she/he will be a senior academic /administrator entrusted with the IQAC as an additional responsibility.

**Role of the members:**

A member is a designated person in the committee by the chairperson who attends all the meetings, follows the proceedings, does the given task and fulfils the expectations of the committee


**OPERATIONAL FEATURES OF THE IQAC**

The coordinator of the IQAC will have a major role in implementing these functions. The IQAC may derive major support from the already existing units and mechanisms that contribute to the functions listed above. The operational features and functions discussed so far are broad-based to facilitate institutions towards academic excellence and institutions may adapt them to their specific needs.

IQAC will prepare and submit yearly Annual Quality Assurance Report (AQAR) to NAAC by the end of September. A functional Internal Quality Assurance Cell (IQAC) and timely submission of Annual Quality Assurance Reports (AQARs) are the Minimum Institutional Requirements (MIR) to volunteer for second, third or subsequent cycle's accreditation.

The Annual Quality Assurance Report (AQAR) may be the part of the Annual Report. The AQAR shall be approved by the Governing Council of the dental college.

The IQAC will have an exclusive window tab on the institutional website for keeping the records/files of NAAC, Peer Team Reports, AQAR, and Certificate of Accreditation. Outcomes and regularly upload/ report on its activities, as well as for hosting the AQAR.

  
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# Dayananda Sagar College of Dental Sciences

## Policy Document

Academic Advisory committee

  
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**Dayananda Sagar College of Dental Sciences,**  
**Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru**

### **About the college**

Dayananda Sagar College of Dental Sciences provides quality education in courses of Bachelor of Dental Surgery, Master of Dental Surgery and Doctre degree. This institution is a pioneer in providing dental education and dental health care services in addition to conducting and publishing quality researches. Apart from the above said activities enough opportunities are provided to all the students to prooverall development encouraging physical,psychological,social and spiritual progress in students. We emphasize on developing good research skills right from undergraduate level. It has uniquely designed Mentorship & Soft-Skill Development Programs for students to provide them with exemplary support to not only complete their courses, but have all necessary skills for a successful career in dentistry. It has tie-ups with several other institutes to help train the students better.

### **Preface**

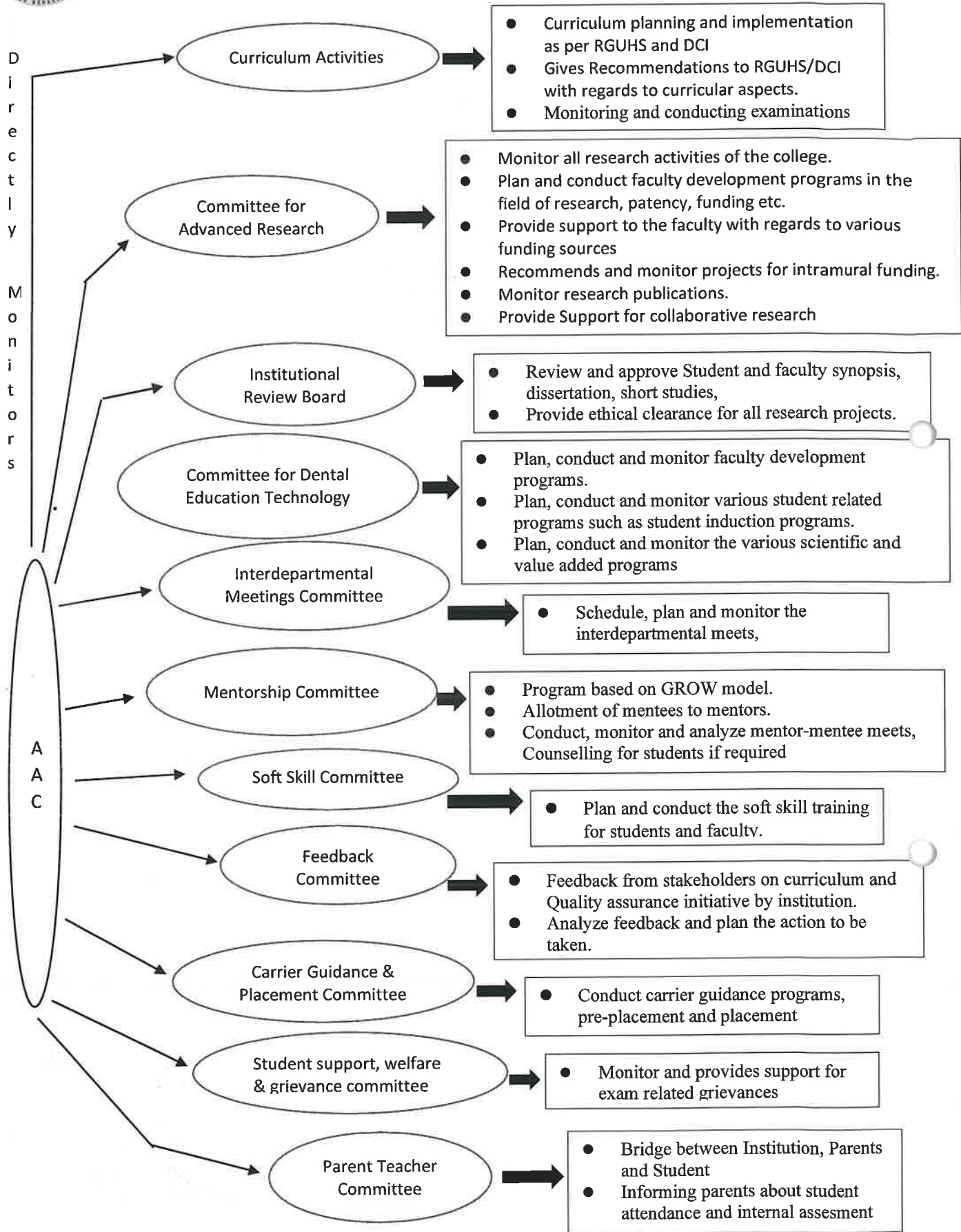
- This Academic manual is intended to help faculty members and stakeholders to understand the various academic activities including co-curricular activities in DSCDS.
- It provides a detailed description of statutory body that governs the Institutions policy and the various educational process including Curriculum design, and quality improvement.
- It provides a suitable guideline for the faculty members to develop the curriculum and syllabus that suits the needs of the society.
- This manual gives the faculty and all the stakeholders a clear understanding about the guidelines given by the various statutory bodies for the smooth functioning and also to achieve the vision and mission of the institution

  
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### **Policy Overview**

This policy describes the process for establishing academic advisory committees for instructional programs at Dayananda Sagar College of Dental Sciences and defines their functions. Academic advisory council serve as a community outreach mechanism that are of significant value to defining and implementing the mission of the College.

### **Scope and Applicability**

It is the apex committee in the institution which governs, directs and monitors all the academic activities. The committee adheres and implements academic guidelines provided by DCI & RGUHS. The committee actively conducts periodic meetings in order to approve and evaluate the academic activities as reported by the various committees such as -

- Institutional Review Board
- Committee for Advanced research
- Committee for dental education technology
- Interdepartmental meeting committee
- Library advisory committee
- Mentorship committee
- Soft skill committee
- Career guidance and Placement committee
- Feedback committee
- Student support, welfare and grievance committee

### **Policy Statement**

DSCDS is committed to creating an academic experience that provides students the tools to succeed. Academic advisory committees contribute to student success by facilitating student-faculty relationships toward the development of relevant and meaningful educational programming. DSCDS establishes academic advisory committees to solicit guidance and advice regarding curricula from community members and employers. Academic advisory committees provide expertise to inform and strengthen academic college programs.

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**Constitution of Academic Council of Dayananda Sagar College of Dental Sciences:**

- The Principal (Chairman)
- Member Secretary
- Heads of all Departments
- Faculty representation from each cadre

**Term :** The term of the nominated members shall be three years.

**Meetings :** Academic Council shall meet six times a year and as and when required.

**Function of Academic Advisory Council**

Academic Advisory Council shall:

❖ **Curricular**

- Ensure curriculum planning and delivery
- Provide oversight and support for the curricular program
- Prepare and approve time tables, postings and internal; assessments.
- Review competencies and convert them into learning objectives.
- Serve as communication links between the College and the community and between the College and professional, occupational and special service groups.
- Keep the College informed about changes in curricula from DCI /RGUHS and align the curriculum accordingly. Assist in developing, evaluating and updating curricula;
- Assess program and service needs from the perspective of the community;
- accomplishing the objectives of the institution in equipping the students with multi-disciplinary and multitasking skills,
- Introduce inter/multidisciplinary studies → Develop the curriculum, syllabi and look for new sources required.
- Provide necessary support with regard to providing sufficient resources for learning. Monitor and approve the activities conducted under the library advisory committee.
- Prepare internal assessment timetables, schedules, conduct and assess.
- Bridge between parents, teachers and students and inform parents with regard to attendance and internal assessment through Parent teacher Committee.

  
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❖ **Research**

- Monitor and approve the activities conducted under the Advanced research committee.
- Monitor and approve the activities conducted under the Institutional review board.

❖ **Placement**

- Monitor and approve the activities conducted under the Career guidance and placement committee
  - ◆ Identify work experience opportunities, apprenticeships and internships for students.
  - ◆ Refer job opportunities for and help place graduates.

❖ **Faculty development and scientific activities**

- Monitor and approve the activities conducted under the Committee for dental education technology and interdepartmental meets committee.
- Connect the College to community resources that may support or contribute to the success of programs and services;
- Identify specific skills and provide suggestions concerning technical information, equipment, and facilities necessary to assure College academic programs are relevant and up to date with current standards;
- Identify and refer potential faculty candidates, guest lecturers, speakers.
- Promote faculty recharge programs and skill development for faculty.

❖ **Student support**

- Monitor and approve the activities conducted under the Student support, welfare and grievance committee including exam related grievance.

❖ **Academic feedback**

- Monitor and approve the activities conducted under the Feedback committee
- Analyze the feedback from stakeholders.
- Monitor and approve the activities under the committee for parents teacher meet.

  
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# Dayananda Sagar College of Dental Sciences

Policy Document

Anti-Ragging Committee



**Dayananda Sagar College of Dental Sciences,**  
**Shavige Malleshwara Hills, Kumaraswamy Layout,**  
**Bengaluru**

**Policy Document**

**ANTI-RAGGING COMMITTEE**

**1. Preamble:**

In view of the directions of the Hon'ble Supreme Court and in consideration of the determination of the Central Government and the University Grants Commission we at DSCDS, in exercise of the powers conferred by Clause (g) of Sub-Section (I) of Section 26 of the University Grants Commission Act, 1956, take ragging as a very serious offence & make all the efforts in curbing this menace in our institution.


Thus, in the interest of our students, we implement the UGC regulations on curbing the ragging in our institution.

**1.1. Applicability:**

They shall apply to all the departments, constituent units and all the premises (academic, residential, sports, canteen, etc) of DSCDS, whether located within the campus or outside, and to all means of transportation of students whether public or private.

**2. Objectives:**

To prohibit, prevent and eliminate the scourge of ragging. including any conduct by any student or students whether by words spoken or written or by an act which has the effect of teasing, treating or handling with rudeness a fresher or any other student, or indulging in rowdy or in-disciplined activities by any student or students which causes or is likely to cause annoyance, hardship or psychological harm or to raise fear or apprehension thereof in any fresher or any other student or asking any student to do any act which such student will not in the ordinary course do and which has the effect of causing or generating a sense of shame, or torment or embarrassment so as to adversely affect the physique or psyche of such fresher or any other student, with or without an intent to derive a sadistic pleasure or showing all power, authority or superiority by a student over any fresher or any other student, in all higher education institutions in the country, and thereby, to provide for the healthy development, physically and psychologically, of all students.

  
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**3 - Definitions: For the purposes of these Regulations:**

3.1. "college" means any institution, whether known as such or by any other name, which provides for a program of study beyond 12 years of schooling for obtaining qualification from a university and which, in accordance with the rules and regulations of such university, is recognized as competent to provide for such program of study and present students undergoing such program of study for the examination for the award of such qualification.

3.2. "Head of the institution" means the 'Vice-Chancellor' in case of a university/deemed to be university, 'Principal' in case of a college, 'Director' in case of an institute.

3.3. "institution" means a higher educational institution (HEI), like a university, a college, an institute, etc. imparting higher education beyond 12 years of schooling leading to a degree (graduate, postgraduate and/or higher level) and/or to a university diploma.

**3.4. "Ragging" means the following:**

a. Any conduct whether by words spoken or written or by an act which has the effect of teasing, treating or handling with rudeness any other student

b. Indulging in rowdy or undisciplined activities which causes or is likely to cause annoyance, hardship or psychological harm or to raise fear or apprehension thereof in a fresher or a junior student

c. Asking the students to do any act or perform something which such student will not in the ordinary course and which has the effect of causing or generating a sense of shame or embarrassment so as to adversely affect the physique or psyche of a fresher or a junior student.

d. Any act of senior student that prevents, disrupts or disturbs the regular academic activity of any other student or fresher

e. Exploiting the services of a fresher or any other student for completing the academic tasks assigned to an individual or a group of students

f. Any act of financial extortion or forceful expenditure burden put on a fresher or any other student by students

g. Any act or abuse by spoken words, emails, post, public insults, which also include deriving perverted pleasure, vicarious or sadistic thrill from actively or passively participating in the discomfiture to fresher or any other student

h. Any act of physical abuse including all variants of it: sexual abuse, homosexual assaults, stripping, forcing obscene & lewd acts, gestures, causing bodily harm or any other danger to health or person

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i. Any act that affects the mental health & self-confidence of a fresher or any other student with or without an intent to derive sadistic pleasure or showing off power, authority or superiority by a student over any fresher or any other student.

#### **4. Punishable ingredients of Ragging:**

- Abetment to ragging;
- Criminal conspiracy to rag;
- Unlawful assembly and rioting while ragging;
- Public nuisance created during ragging;
- Violation of decency and morals through ragging;
- Injury to body, causing hurt or grievous hurt;
- Wrongful restraint;
- Wrongful confinement;
- Use of criminal force;
- Assault as well as sexual offences or unnatural offences;
- Extortion;
- Criminal trespass;
- Offences against property;
- Criminal intimidation;
- Attempts to commit any or all of the above mentioned offences against the victim(s);
- Physical or psychological humiliation;
- All other offences following from the definition of "Ragging".

#### **5. Measures for prohibition of ragging at the institution level:**

5.1. DSCDS shall strictly observe the provisions of the Act of the Central Government and the State Governments, if any, or if enacted, considering ragging as a cognizable offence under the law on par with rape and other atrocities against women and ill-treatment of persons belonging to the SC/ST, and prohibiting ragging in all its forms in all institutions.

  
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5.2. Ragging in all its forms shall be totally banned in the entire DSCDS, including its departments, constituent units, all its premises (academic, residential, sports, canteen, etc) whether located within the campus or outside and in all means of transportation of students whether public or private.

5.3. DSCDS shall take strict action against those found guilty of ragging and/or of abetting ragging.

## **6. Measures for prevention of ragging at the institution level:**

### **6.1. Before admissions:**

6.1.1. The advertisement for admissions shall clearly mention that ragging is totally banned in DSCDS, and anyone found guilty of ragging and/or abetting ragging is liable to be punished appropriately (for punishments, ref. section 8 below).

6.1.2. The brochure of admission/instruction booklet for candidates shall print in block letters these Regulations in full (including Annexures).

6.1.3. The 'Prospectus' and other admission related documents shall incorporate all directions of the Supreme Court and /or the Central or State Governments as applicable, so that the candidates and their parents/ guardians are sensitized in respect of the prohibition and consequences of ragging.

6.1.4. At the start of each academic year the students will have to fill up an Anti-ragging affidavit/undertaking online by visiting [www.antiragging.in](http://www.antiragging.in) or [www.amanmovement.org](http://www.amanmovement.org). After completion of online entry, the student should submit a copy of the affidavit duly signed to the Principal office.

6.1.5. At the start of each academic year the parents of the students also have to fill up an Anti-ragging affidavit/ undertaking online by visiting [www.antiragging.in](http://www.antiragging.in) or [www.amanmovement.org](http://www.amanmovement.org). After completion of online entry, the parent should submit a copy of the affidavit duly signed to the Principal office.

6.1.6. The application for admission shall be accompanied by a document in the form of the School Leaving Certificate/Transfer Certificate/Migration Certificate/Character Certificate which shall include a report on the behavioral pattern of the applicant, so that the institution can thereafter keep intense watch upon a student who has a negative entry in this regard.

6.1.7. A student seeking admission to the hostel shall have to submit additional undertaking in the form of Annexure I (both Parts) along with his/ her application for hostel accommodation.

6.1.8. At the commencement of the academic session the Head of the Institution shall convene and address a meeting of various functionaries/agencies, like Hostel Wardens, representatives of students, parents/ guardians, faculty, district administration including police, to discuss the



measures to be taken to prevent ragging in DSCDS and steps to be taken to identify the offenders and punish them suitably.

6.1.9. To make the community at large and the students in particular aware of the dehumanizing effect of ragging, and the approach of the institution towards those indulging in ragging, big posters (preferably multicolored with different colors for the provisions of law, punishments, etc.) shall be prominently displayed on all Notice Boards of all departments, hostels and other buildings as well as at vulnerable places. Some of such posters shall be of permanent nature in certain vulnerable places.

6.1.10. DSCDS shall request the media to give adequate publicity to the law prohibiting ragging and the negative aspects of ragging and the institution's resolve to ban ragging and punish those found guilty without fear or favour.

6.1.11. DSCDS shall identify, properly illuminate and man all vulnerable locations.

6.1.12. DSCDS shall tighten security in its premises, especially at the vulnerable places. If necessary, intense policing shall be resorted to at such points at odd hours during the early months of the academic session.

6.1.13. DSCDS shall utilize the vacation period before the start of the new academic year to launch wide publicity campaign against ragging through posters, leaflets, seminars, street plays, etc.

6.1.14. The faculties/ departments/ units of DSCDS shall have induction arrangements (including those which anticipate, identify and plan to meet any special needs of any specific section of students) in place well in advance of the beginning of the academic year with a clear sense of the main aims and objectives of the induction process.

## **6.2. On admission:**

6.2.1. Every fresh student admitted to DSCDS shall be given a printed leaflet detailing when and to whom he/she has to turn to for help and guidance for various purposes (including Wardens, Head of the institution, members of the anti-ragging committees, relevant district and police authorities), addresses and telephone numbers of such persons/authorities, etc., so that the fresher need not look up to the seniors for help in such matters and get indebted to them and start doing things, right or wrong, at their behest. Such a step will reduce the fresher's dependence on their seniors.

6.2.2. DSCDS, through the leaflet mentioned above shall explain to the new entrants the arrangements for their induction and orientation which promote efficient and effective means of integrating them fully as students.

  
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6.2.3. The leaflet mentioned above shall also inform the fresher about their rights as bonafide students of our institution and clearly instructing them that they should desist from doing anything against their will even if ordered by the seniors, and that they have nothing to fear as the institution cares for them and shall not tolerate any atrocities against them.

6.2.4. The leaflet mentioned above shall contain a calendar of events and activities laid down by our institution to facilitate and complement familiarization of fresher with the academic environment of the institution.

6.2.5. DSCDS shall also organize joint sensitization & joint orientation programs of fresher and seniors. Organization of cultural, sports & other activities on a large scale to provide a platform for the freshers & seniors to interact in presence of faculty members. In the hostel the warden should address all the students.

6.2.6. Freshers shall be encouraged to report incidents of ragging, either as victims, or even as witnesses.

6.2.7. Every student of DSCDS & his/her parents shall provide the specific affidavits required as the regulations stated under 6.1 at the time of admission or registration as the case may be, during each academic year. These shall be maintained to ensure a safe keep-up, including an electronic form, to be accessed easily when required either by the commission or any other councils or by the institution or any other relevant authorities.

6.2.8. Every student at the time of his/her registration shall inform the DSCDS about the place of residence while pursuing the course of study. In case of any change, the details of his place shall be updated to the institution.

### **6.3. At the end of the academic year:**

6.3.1. At the end of every academic year the Principal shall send a letter to the parents/ guardians of the students who are completing the first year informing them about the law regarding ragging and the punishments, and appealing to them to impress upon their wards to desist from indulging in ragging when they come back at the beginning of the next academic session.

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#### 6.4. Setting up of Committees and their functions:

6.4.1. **The Anti-Ragging Committee:** The DSCDS - Anti-Ragging Committee shall be nominated and headed by the Head of the institution and shall consist of representatives of civil and police administration, local media, NGOs involved in youth activities, faculty members, representatives of parents, representatives of students belonging to the freshers category as well as seniors and non-teaching staff. It will have a diverse mix of membership in terms of levels as well as gender. The term of the committee will be for one year.

Si no.	Constitution	Name	Designation
1.	Director of the Institute		Chairperson
2.	3-4 Faculty members		Member
1.	Administrative officer / Office Superintendent		Member
4.	Student Members		Member
5.	representatives of civil and police administration, local media, NGOs involved in youth activities, faculty members, representatives of parents, representatives of students belonging to the freshers category as well as seniors and non-teaching staff.		External Member

- a. It shall monitor the anti-ragging activities in the institution and will be its duty to see the compliance with anti-ragging regulations,
- b. To monitor and oversee the performance of Anti-Ragging Squads for prevention of ragging in the institution consider the recommendations of the Anti-Ragging Squad and take appropriate decisions, including spelling out suitable punishments to those found guilty.
- c. To take appropriate action in case an incident of ragging is reported by Anti-Ragging Squad of the institute and to further inform/get approval of action to be taken from University Anti-Ragging Committee.

6.4.2. **The Anti-Ragging Squad:** The Anti-Ragging Squad shall be nominated by the Head of the institution with such representation as considered necessary for maintaining vigil, oversight and

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controlling functions, which shall remain mobile, alert and active all the times. The number of Anti Ragging squads based on number of blocks and strength of the student so that Anti-Ragging measures can be effectively implemented. It shall consist of members belonging to the various sections of the campus community and shall have no outside representation. The term of the committee will be for one year.

Provided that the anti-ragging shall conduct such enquiry observing a fair and transparent procedure and the principles of natural justice and after giving adequate opportunity to the student/students accused of ragging and other witnesses to place before it the facts, documents and views concerning the incident of ragging, and considering such other relevant information as may be required.

a. To make surprise raids on academic blocks/hostels and other places vulnerable to incidents of ragging and having the potential of ragging. Anti-Ragging Squad shall maintain the record in the register of the surprise visits.

b. It is the duty of the squad to conduct an on spot enquiry into any incident of ragging referred to it by the head of the institution or any member of the faculty, staff, student, parent or guardian or any employee of a service provider, or by any other person, as the case may be.

c. The squad shall investigate incidents of ragging and make recommendations to the Anti-Ragging Committee and shall work under the overall guidance of the said committee.

d. the enquiry report with the recommendations shall be submitted to the anti-ragging committee for action as per UGC regulations.

**6.4.3. The Mentoring Cell:** At the end of every academic year the institution shall form a 'Mentoring Cell' consisting of Mentors for the succeeding academic year in order to promote the objectives of these regulations. The cell consists of students volunteering to be mentors for freshers in the succeeding academic year. There shall be as many levels or tiers of Mentors as the number of batches in the institution, at the rate of 1 Mentor for 6 freshers and 1 Mentor of a higher level for 6 Mentors of the lower level. The term of the committee will be for one year.

#### **Senior Level**

a. To guide and support as well as to interact with freshers through junior level mentors.

#### **Junior Level**

a. To mentor freshers, interact with them and to provide congenial and welcoming environment on the campus.

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## Faculty

- a. One faculty member for a group of higher level mentors

### 6.5. Other measures:

6.5.1. The Annexures mentioned in sub-clauses 6.1.4, 6.1.5 and 6.1.7 of these Regulations shall be furnished at the beginning of each academic year by every student, that is, by freshers as well as seniors.

6.5.2. DSCDS shall arrange for regular and periodic psychological counseling and orientation for students (for freshers separately, as well as jointly with seniors) by professional counselors during the first three months of the new academic year. This shall be done at the institution and department/ course levels. Parents and teachers shall also be involved in such sessions.

6.5.3. Apart from placing posters mentioned in sub-clause 6.1.9 above at strategic places, DSCDS shall undertake measures for extensive publicity against ragging by means of audio-visual aids, by holding counseling sessions, workshops, painting and design competitions among students and other methods as it deems fit.

6.5.4. Wardens shall be appointed as per the eligibility criteria laid down for the post reflecting both the command and control aspects of maintaining discipline, as well as the softer skills of counseling and communicating with the youth outside the class-room situations. Wardens shall be accessible at all hours and shall be provided with mobile phones. DSCDS shall review and suitably enhance the powers and perquisites of Wardens and authorities involved in curbing the menace of ragging.

6.5.5. The security personnel posted in hostels shall be under the direct control of the Wardens and assessed by them.


6.5.6. The Head of the institution shall take immediate action on receipt of the commendations of the Anti-Ragging Squad. He/ She shall also take action suo moto if the circumstances so warrant.

6.5.7. Freshers who do not report the incidents of ragging either as victims or as witnesses shall also be punished suitably.

6.5.8. Anonymous random surveys shall be conducted across the 1<sup>st</sup> year batch of freshers every fortnight during the first three months of the academic year to verify and cross-check whether the campus is indeed free of ragging or not. DSCDS will design its own methodology of conducting such surveys.

6.5.9. The burden of proof shall lie on the perpetrator of ragging and not on the victim

6.5.10. DSCDS shall file an FIR with the police / local authorities whenever a case of ragging is reported, but continue with its own enquiry and other measures without waiting for action on the

  
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part of the police/ local authorities. Remedial action shall be initiated and completed within the one week of the incident itself.

6.5.11 The Migration / Transfer Certificate issued to the student by DSCDS shall have an details relating to general conduct and behavior, whether the student has been punished for the offence of committing or abetting ragging, or not, and also whether the student has displayed persistent violent or aggressive behavior or any inclination to harm others.

6.5.12. Preventing or acting against ragging shall be the collective responsibility of all levels and sections of authorities or functionaries in the institution, including faculty, and not merely that of the specific body/ committee constituted for prevention of ragging

6.5.13. The Institution will conduct an Anti-Ragging workshop at the beginning of every academic year comprising of the Fresh students, anti-ragging committee members and an external member ( DCI Member) to sensitize the students about the menace of ragging and measures taken by the institution to curb them.

6.5.14. Access to mobile phones and public phones shall be unrestricted in hostels and campuses, except in class-rooms, seminar halls, library etc. where jammers shall be installed to restrict the use of mobile phones.

#### **6.6. Measures for encouraging healthy interaction between freshers and seniors:**

6.6.1. DSCDS shall set up appropriate committees including the course in-charge, student advisor, Warden and some senior students to actively monitor, promote and regulate healthy interaction between the freshers and senior students.

6.6.2. Freshers welcome parties( Fresher's Day) shall be organized by the senior students and the faculty together soon after admissions, preferably within the first two weeks of the beginning of the academic session, for proper introduction to one another and where the talents of the freshers are brought out properly in the presence of the faculty, thus helping them to shed their inferiority complex, if any, and remove their inhibitions.

6.6.3. DSCDS shall enhance the student-faculty interaction by involving the students in all matters of the institution, except those relating to the actual processes of evaluation and of faculty appointments, so that the students shall feel that they are responsible partners in managing the affairs of the institution and consequently the credit due to the institution for good work/ performance is due to them as well.

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## **7. Recommended action to be taken.**

### **7.1 By the Head of the Institution**

Depending upon the nature and gravity of the offence as established by the Anti-Ragging Committee of DSCDS, the possible punishments for those found guilty of ragging at the institution level shall be any one or any combination of the following:

1. Suspension from attending classes and academic privileges
2. Withholding/ withdrawing scholarship/ fellowship and other benefits
3. Debarring from appearing in any test/ examination or other evaluation process
4. Withholding results
5. Debarring from representing the institution in any regional, national or international meet, tournament, youth festival, etc.
6. Suspension/ expulsion from the hostel
7. Cancellation of admission
8. Rustication from the institution for period ranging from 1 to 4 semesters
9. Expulsion from the institution and consequent debarring from admission to any other institution for a specified period
10. Fine ranging between Rupees 25,000/- and Rupees 1 lakh
11. Collective punishment: When the persons committing or abetting the crime of ragging are not identified, DSCDS shall resort to collective punishment as per UGC regulations.

### **7.2 At the appointing authority level:**

The authorities of DSCDS, particularly the Head of the institution, shall be responsible to ensure that no incident of ragging takes place in the institution. In case any incident of ragging takes place, the Head shall take prompt and appropriate action against the person(s) whose dereliction of duty lead to the incident. The authority designated to appoint the Head shall, in its turn, take prompt and appropriate action against the Head.

## **8. Submission of report**

DSCDS will send the report of the anti-ragging workshop conducted at the start of each academic year to the Dental council of India on or before 31<sup>st</sup> December of each year.

  
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## Format of 'Anti- Ragging Committee Report

Name of the victim along with full contact details:

Names of the accused along with full contact details:

Date of filing the Complaint & to whom:

Whether FIR/criminal complaints has been lodged:

Detail of the Complaint:

Nature of the complaint:      Normal/Serious/Extremely Serious

The constitution of the Anti-Ragging Committee:

Actions taken by the Institution in solving the complaint date wise:

Date & report of the interaction of the Anti Ragging Committee with the following:-

- (a)          Victim
- (b)          Parents
- (c)          Teachers
- (d)          Wardens
- (e)          Friends
- (l)          Classmates
- (g)          Hostel mates
- (h)          Eye witnesses
- (i)          Accused
- (j)          Any other (Please specify)

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CCTV cameras/other security measures undertaken by the institution:

The names & date wise detailed report of these meetings be attached:

Anti-Ragging cases in the last three years:


Punishment recommended by the Anti Ragging Committee:

Members present in the meeting along with the name, designation and signature:

**Note: The Institution to send the Anti Ragging Committee Report as per the above format along with the following:-**

Final action taken by the Institution:

Whether the matter has been settled:


  
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## Work Flow 1

1. Anti-Ragging Squad will immediately enquire and report any incidence of ragging or abetment of ragging noticed by them immediately to the head of the institute and also to the Anti-Ragging Committee
2. Immediate action as per the situation will be taken by the Institute Anti Ragging Committee which may include:
  - i. Immediate action as per UGC regulations (4) of involved students
  - ii. Sending reinforcements or any help if required.
  - iii. Forwarding the report of the incident to the Anti-Ragging Committee of the University.
3. The Anti-Ragging Committee will examine the report and recommend appropriate punishment to University Anti Ragging Committee for approval (Reporting of the matter to the Civil Police or District Administration or lodging of complaint/FIR will not be done without the approval of University Anti Ragging Committee).
4. If any incident, even minor is reported, in addition to action taken with regard to that incidence the anti-Ragging measures will be reviewed and strengthened with immediate effect.
5. The punishment to be meted out to the persons indulged in ragging has to be exemplary and justifiably harsh to act as a deterrent against recurrence of such incidents.
6. Every single incident of ragging a First Information Report (FIR) must be filed without exception by the institutional authorities with the local police authorities.
7. The Anti-Ragging Committee of the institution shall take an appropriate decision, with regard to punishment or otherwise, depending on the facts of each incident of ragging and nature and gravity of the incident of ragging.
8. a) Depending on the nature and gravity of the offence as established by the Anti ragging Committee of the institution, those found guilty of ragging shall be liable for any one or more of the following punishment. The decision of the anti-ragging committee shall be final and binding –

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- (i) Cancellation of admission
- (ii) Suspension from attending classes
- (iii) Withholding/withdrawing scholarship/fellowship and other benefits
- (iv) Debarring from appearing in any test/examination or other evaluation process
- (v) Withholding results
- (vi) Debarring from representing the institution in any regional, national or international meet, tournament, youth festival, etc.
- (vii) Suspension/expulsion from the hostel
- (viii) Rustication from the institution for period ranging from 1 to 4 semesters
- (ix) Expulsion from the institution and consequent debarring from admission to any other institution.
- (x) In the case of offences of very serious/grievous nature, referring the case to the Police, in addition to any other punishment.
- (xi) Collective punishment: when the persons committing or abetting the crime of ragging are not identified, the institution shall resort to collective punishment as a deterrent to ensure community pressure on the potential raggers.
- (xii) Criminal proceedings can be lodged against students indulged in ragging u/s 120- a/307/319/321/336/337/339/340/350/506 or any other section under Indian Penal Code found to be applicable for the offence, committed.

  
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**Dayananda Sagar College of Dental Sciences,**  
**Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru**

June 7, 2019

**AUDIO VISUAL COMMITTEE**

**STANDARD OPERATING PROTOCOLS FOR PHOTOGRAPHY**

**Guidelines for Photography for Continuing Dental Education Programs, Workshops, Invited Lectures, Webinars, Product Launch, College Activities.**

1. AV Committee members are direct representatives (by default) of events conducted by their respective departments. All members are to coordinate together in the event of a College Function to make the event a success.
2. In case of a College Event, the AV Committee shall depute a coordinator who shall be responsible to identify a person to take pictures/ Videos and arrange for a Still/ motion camera for the event that is being organized, and shall also be responsible for collection of all pictures as well as preparation of the Brief Report with Collage of pictures for the same and submit the document and files to the AV Coordinator.
3. All pictures taken (College/ Dept Events) should be transferred in full to the AV Committee Coordinator within 24 hours of the completion of the event. Do not submit any pictures via Whatsapp/ Email, submit ONLY via Pen-drive for data storage on the Server for access.
4. For College Events where the AV requirement is required (Eg: College Day/ Orientation Day/ Sports Day/ Graduation Day...etc.) the designated in charge from the AV Committee is expected to coordinate and set up the requirements in association with DSI- EDP Department and provide all logistical support for the event. This includes identifying a Photographer and Videographer to capture event and coordinate later for Pictures and videos to be loaded on to the Server.
5. For all events conducted outside the College (Eg: Rallies/ Walkathon/ Sports/ Street Plays...etc) concerned AV Committee member in charge from the Department organizing the event shall be solely responsible for effective media coverage by means of pictures/ videos/ report write up. The same should be handed over to coordinator AV Committee within 24 hours after the event.
6. For sports and cultural events held outside the college, the concerned committee coordinators shall take responsibility for recording pictures in high quality representing the event and submit the same to the AV Committee in full and also prepare a report of the event and submit it within 2 days after event completion.
7. Locations where AV Committee will provide Support to within Campus are as follows:
  - a. Dr. D Premachandra Sagar Auditorium for Performing Arts
  - b. Dr. CD Sagar Auditorium
  - c. Seminar Hall, DSCE General Library Basement.
  - d. Department of Orthodontics and Dentofacial Orthopedics
  - e. Department of Oral and Maxillofacial Surgery
  - f. Seminar Hall, Heritage Building.

8. After Hall booking is done for any event, the concerned organizing department should send a detailed AV requirement to the coordinator with Name of Hall, In-Charge faculty for the event. The AV Committee member will make sure all requirements are met 2 days prior to the event especially those of purchase of Batteries/ Sound Checks/ Projection requirements/ Lighting and Coordination.

9. **Department Programs:**

- Department representative from the AV Committee, i.e Concerned **AV Committee member in-charge of Intra-department programs shall be responsible** for identifying a photographer, submission of all pictures and preparation of a Brief report with collage of pictures of the program.
- Short report with a collage of 8-10 pictures depicting the event and submit the same to the Coordinator without fail within 2 days of event completion, which will then be uploaded to the College website News and Events Page for marketing and coverage.

**All the coordinators shall be responsible and accountable for AV Related activities of the respective events.**

**Key Contacts:**

Mr. Dinesh	(PC Sagar/ CD Sagar)	+91-9916571884
Mr. Pandit Aradhya	(Heritage Building)	+91-9986723973
Mr. Vijay Babu	(DSCE Library)	+91-9986597870
Dr. Darsan J	(Dept of Orthodontics)	+91-9901941040
Dr. Mayank	(Dept of Oral and Maxfac Surgery)	+91-8762080204

Chairman - AV Committee & Principal

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CC:  
All Committee Members  
DSCDS Office File  
AV File  
Coordinator Sports and Cultural Committees

Dr.Vinod Rangan, AV Coordinator	Dr.Remya RM
Dr.Darshana S Nayak	Dr.Kavitha M
Dr.Sourabha KG	Dr.Jayaprasad Darsan
Dr.Mayank Jaiswal	Dr.Vidya MA
Dr.Yashwanth G	Dr.Md.Nizam Al-Deen Shan
Dr.Pradeep Chandra K	Dr.Karthik Kabbur Sports Coordinator
Dr.Gargi Cultural Coordinator	Dr. Krishnarend - Soft Skill Comm

Dr. Nageth L. Mentorship Com

KLAS



Dayananda Sagar College of Dental Sciences,  
Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

April 2, 2019

**AUDIO-VISUAL, PHOTOGRAPHY & WEBSITE - POLICY DOCUMENTS**

1. Term of the committee shall be for three years.
2. The committee shall be in-charge of facilitating / arranging audio visual arrangements of all events organized in the college.
3. The committee shall be in-charge of facilitating / arranging Photography arrangements of all events organized in the college.
4. Update timely basis on the website and Facebook page.
5. Collection of photographs from the concern departments, sports and cultural committees
6. To maintain high quality printable photographs of all the events.
7. The respective members of the committee shall be responsible for preparing and submission of a report (short write-up with photos) for the events organized by the respective departments to the committee coordinator.
8. Preparing a report of general events organized by the college such as orientation day, college day, graduation day, guest visits etc., excluding sports and cultural programs.
9. Maintenance of these records in the office.

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# Dayananda Sagar College of Dental Sciences

## Policy Document

Committee for Advanced Research Studies



**Dayananda Sagar College of Dental Sciences,**  
**Shavige Mallechwara Hills, Kumaraswamy Layout, Bengaluru**

**POLICY DOCUMENT FOR ADVANCED RESEARCH STUDIES**

**Establishment of Policy for Promotion of Advanced Research:**


Research is the foundation of knowledge that brings new energy, builds state of the art facilities, promotes research publications, develops collaborations and becomes part of active community that shares the mission objectives. Rapid growth in scientific knowledge is an indication of quest for discovery and has an impact on economic and societal development. Science, technology and innovation are often initiated at the University to create research environment and that is also the mission of Dayananda Sagar College of Dental sciences. Research and developmental activities creates and disseminates new knowledge in a range of fields, promotes innovation and these will motivate better learning and teaching among faculties and students of our institute.

**Goal:**

To promote research and research culture among faculty and students so that the research productivity of the various departments and institution as a whole is comprehensively enhanced.

**Objectives:**

1. To form sub-committees to shoulder the duties and responsibilities related to planning, organizing and Implementing specific research activities / schemes in the institution.
2. To empower the faculty and students in conducting and publishing quality research which can be beneficial to all the stakeholders of health research through conducting regular training programs (seminars, workshops, symposia) in the institution.
3. To enable the faculty and students in taking their research output in terms of quality and quantity to next higher level.
4. To promote 'funded research projects' in the institution which results in enhancement of scholarship in research.
5. To promote the faculty and students in getting patencies in their names for the innovations done by them in the institution and to provide required support system to that end.
6. To monitor the research of all the faculty and students in the institution.
7. To keep a constant tab and update the publications of all the departments.

  
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8. To guide and scrutinize the research proposal and research writing which is to be sent for publication and funding.

### **Policy on Promotion of Academic Research**

A policy on academic research faculty to promote faculty involvement in research and developmental activities shall be prepared and implemented. This policy shall deal with the higher education and up skilling of faculty members in conducting and publishing research.

The policy will spell out measures to encourage the enrolment of faculty in Ph.D programmes. It shall also declare suitable incentives for Ph.D holders and other faculty who publish research articles in reputed journals.

### **Policy on Seed Money for Internal Research**

1. Every faculty is eligible to apply for internal project which shall lead to collaborative / externally funded research projects.
2. The college shall provide the basic infrastructure required to conduct research projects.
3. Faculties are encouraged to identify inter-disciplinary research in their chosen field of research.
4. All innovative projects of faculty completed using the seed money would be earmarked for filing patents.
5. Recognition and remuneration will be given to those faculties who get patents.
6. The responsibility lies on the faculty members to take appropriate actions so that their innovations are covered by IPR and copyright protected.

### **Policy on Centre of Excellence**

The college shall develop and nurture Centre for Excellence in the frontier areas of research which shall be open to faculty, students and industry persons to conduct research and engage in innovation. The faculty and students commitment to research is enhanced in order to attract funding from governmental / international agencies and also from industry in relevant sectors. Excellence in the research skills from any faculty and student in the institution would be honored with incentives and promotion.

### **Policy on Consultancy Projects**

The college recognizes that consultancy is an effective way to disseminate knowledge. Hence it is seriously committed to make the expertise accessible and available the available to industry and society. The policy enables the researchers to take the research output to the end users by encouraging consultancies.

The college, as a socially responsible institution wants to make an early and direct impact on society through consultancy, whereas maintaining balance between consultancy and the

- traditional role as a teacher. All Research and Non-research consultancies are governed by the established norms as described in the Policy on Consultancy Projects.

### **Policy on Innovations, Incubations and Entrepreneur Development**

“Innovation, and innovation in research and development” in particular, can provide the advantage that world class organizations need to create the sustainable growth year after year. Innovation in research and development (R&D) can be a strategic weapon in which top institutions employ definable strategies and practices to catalyse high levels of organic growth, support above average margins and separate themselves from the others.

Sustaining innovations are improvements that build on existing technology, products/ services, market strategy, etc. also referred to as “incremental” innovations.

Disruptive innovations on the other hand, are offerings, processes, methods, technologies, etc. that represent a major shift from everything that has come before.

The college shall promote Innovations, Incubation, and Entrepreneurial Development among the teachers and students leading to development of innovative, commercially viable and socially relevant products / materials which shall lead to Patents and Copyrights.

### **Policy on Ethical Research**

A separate policy and committee (IRB) is established to review and oversee the ethical issues of the research undertaken. Any research intended to be conducted should first obtain the approval from IRB (Institutional Review Board), without such an approval no research is permitted by the institution. The researcher/s should submit a proposal and that would be scrutinized for its scientific and ethical integrity by the IRB. There are internal and external members in the IRB who have the required expertise to scrutinize the proposal. The committee conducts meeting periodically for the same purpose and the researcher has to present the proposal in front of the committee.

### **Establishment of Intellectual Property Rights (IPR) Cell**

Steps shall be taken to establish an Intellectual Property Right Cell to assist the researchers and inventors to get protected their inventions and intellectual properties. A separate cell shall be created with the assistance from Central and/or state government. In this connection our institution has conducted multiple CDE programs on IPR related topics. Experts in the area have catered to the intellectual needs of our researchers.

### **Constitution of the Advanced Research Committee**

- Chairperson
- Co-chairpersons
- Member Secretary
- Members

  
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## Roles and Responsibilities of the Committee members:

### **Chairperson**

- Responsible for ensuring that the committee members are effectively engaged in order to achieve the objectives of the committee.
- Responsible to make the most of all the committee members, building and leading the team.
- Responsible for giving approval for any activity under the committee.
- Provide general advice and guidance to the staff, committee members and researchers.
- Offer support, and mentorship as required to the co-chairpersons, secretary, assistant coordinators and the members.
- Develops agendas along with the secretary.
- Chair all committee meetings.
- Check and approve the Minutes in a timely manner.
- Has to apprise the Principal of the institution periodically about the activities of the committee and submit a written report annually.
- Responsible for assuming the lead reviewer role for the research synopsis submitted to the board.
- Will actively seek input from committee members during regularly scheduled meetings and conference calls.
- Will actively assign tasks to committee members that are tailored to the needs discussed.

### **Co-Chairpersons**

- In absence of the chairperson, take his/her responsibilities.
- Assist the chairperson in all the duties as assigned by him/her.
- Organize scientific programs after consultation with the chairperson
- Providing updates on relevant and contemporary issues related to health research, as well as relevant contemporary literature to the committee

### **Member Secretary/Co-ordinator**

- Organize the committee meetings regularly and ensure that they are conducted in an orderly and efficient manner.
- To prepare, in conjunction with the president, the agenda for the committee meetings.
- To ensure that all members are kept informed of dates, times and venues for meetings.
- To report all important correspondence received by the committee to the meeting.
- Arrangement of training for staff members along with the chair and co-chairs.
- Organizing an effective and efficient tracking procedure for each proposal received.
- Allocation of proposal (in consultation with the chairperson) for reviews to specific members to facilitate efficient dispensation of the projects.

  
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**Members:**

- Work along with the secretary in all aspects
- Take minutes of meetings and provide it to the committee chair within ten working days of each meeting, for distribution to the entire committee within twenty working days.
- To maintain a register of all member attendance at meetings
- For online meetings, take a record of all those in attendance
- Maintain and report accounts to all the members regularly
- Receive and check for the completeness of the proposals sent for review
- Preparation, maintenance and distribution of proposals for review
- Collection and compilation of proposals after review
- Uploading proposals to relevant websites when required
- Prepare an "action item" calendar for the meetings which will consist of all of the deadlines for abstract submissions and research grants, and the evaluation and notification dates associated with them
- Take the lead in organizing scientific programs after consultation with the chairperson and secretary
- Providing updates on relevant and contemporary issues related to health research, as well as relevant contemporary literature to the committee.

  
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# Policy Document

Dental Education Technology Unit

# **Committee for Dental Education Technology Unit**

## **POLICY DOCUMENT FOR PROMOTION OF DETU**

### **Establishment of Policy for Dental Education Technology Unit**

A majority of teachers in dentistry just learn to teach by themselves, probably simulating their teachers. In this context specific training is required for them in developing teaching skills, assessment skills and to get qualified into teaching. In this connection our college took initiative in establishing a "Dental Education Technology Unit (DETU) in 2019. This unit is managed by a special committee. The committee consists of a chairperson, co-chairperson, member secretary and members.

The committee is responsible for conducting faculty development programs in upskilling the faculty and enhancing quality improvement in teaching, learning and student assessment skills.

The goal is to create a team of teachers who are excellent in their profession of teaching, passionate about teaching and dare to engage in innovative teaching.

### **Goal:**

To create a team of teachers who are excellent in the profession of teachings, passionate about teaching and dare to engage in innovative activities


  
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## Objectives:

1. To ensure continuous quality improvement in teaching, learning and assessment in the institution.
2. To update the faculty of the current trends in dental education by conducting seminars, symposiums, workshops and conferences.
3. To promote dental education research and discover special techniques of teaching, assessment, and learning so that we can expand the existing body of end users.
4. To promote educational research publication in standard and high impact journals like Medical teachers , Academic Medicine and other Advanced journals in health science education
5. To promote inter professional education since our management has medical , physiotherapy and nursing colleges and planning to start allied health science institutes

## Policy on Promotion of Educational Research

A policy on Educational research to promote faculty involvement in research and developmental activities shall be prepared and implemented. This policy shall deal with the higher education of faculty members in health professions education.


  
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### **Functions:**

1. Plan and implement programmes to enhance teaching skills in faculty by conducting faculty development programs.
2. Strive to enable faculty in planning and delivering scientifically established instructional methodologies and strategies of teaching.
3. Educating the faculty in developing and implementing valid student assessment techniques.
4. Promoting faculty in developing, adopting and sustaining advanced teaching and learning techniques
5. Encouraging the faculty in conducting and publishing health professions educational research.

### **Responsibilities of the committee:**

1. The committee should periodically meet and plan out strategies to train the faculty in advancing their knowledge and skills pertaining to teaching professional students so as to improve the quality of teaching in our college.
2. The committee should organize and conduct faculty development programs (workshops, seminars, symposia) in various health professions education topics.
3. The committee should motivate the faculty in developing advanced teaching methodologies, especially andragogical skills based on adult learning principles.
4. The committee will organize and train the faculty to develop and adopt scientifically proven methods of student assessment.


  
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5. The committee will encourage the faculty in planning, conducting and publishing educational research.
6. The committee will encourage the faculty in pursuing further studies in health professions education so that they may train the peer group.
7. The committee will encourage and guide the faculty in delivering curriculum through proven and effective educational methods.
8. The committee will promote the faculty in preparing, and presenting scientific papers in HPE related conferences at state, national and international level.
9. The committee will work in a direction to create such faculty who may act as resource persons for faculty development programs in HPE related topics.
10. The committee will strive for taking the quality of teaching in our institution to a better and later best level.

### **Constitution of the Dental Education Technology Unit**

- Chairperson-1
- Co-chairpersons-1
- Member Secretary - 1
- Members – 11

  
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## Roles and Responsibilities of the Committee members:

### 1. Chairperson

- Responsible for ensuring the committee members are effectively engaged in order to achieve the objectives of the committee.
- Responsible for making the most of all the committee members, building and leading the team.
- Responsible for giving approval for any activity under the committee.
- Provide general advice and guidance to the staff and committee members
- Offer support, and mentorship as required to the co-chairpersons, secretary, and the members.
- Develops agendas along with the secretary.
- Chair all committee meetings.
- Check and approve the Minutes in a timely manner.
- Has to appraise the principal periodically about the activities of the committee and submit a written report annually.
- Will actively seek input from committee members during regularly scheduled meetings and conference calls.
- Will actively assign tasks to committee members that are tailored to the needs discussed.

### 2. Co-Chairperson

  
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- In absence of the chairperson, take his responsibilities.
- Assist the chairperson in all the duties as assigned by him.
- Organize Faculty development programs after consultation with the chairperson
- Providing updates on relevant and contemporary issues related to Educational research, as well as relevant contemporary literature to the committee

### **3. Member Secretary:**

- Organize the committee meetings regularly and ensure that they are conducted in an orderly and efficient manner.
- To prepare, in conjunction with the president, the agenda for the committee meetings.
- To ensure that all members are kept informed of dates, times and venues for meetings.
- To report all important correspondence received by the committee to the meeting.
- Arrangement of training for staff members along with the chair and co-chairs.

### **5. Members:**

- Assist the coordinators and secretaries in all their tasks.
- Assist in organizing Faculty development programs
- Providing updates on relevant and contemporary issues / literature related to Educational research to the committee.
- Take an active role in the committee work.

  
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- Take the lead in organizing Faculty development programs after consultation with the chairperson , co - chairperson and secretary
- To maintain a register of all member attendance at meetings
- For online meetings, take a record of all those in attendance

1. The Committee should hold periodic meeting and report the minutes of the meetings

chairperson.

2. Advance intimation about the meeting to be conducted along with agendas is prepared and sent to all the members.

3. The meeting can be conducted only when 60% of the office bearers of the committee are present.

4. The committee once framed would remain in force for a minimum of 5 years.

5. If any office bearers has to abstain from the meeting advance permission must be taken from the member secretary.

6. If any office bearer leaves the job the power to do substitution rest with principal, DSCDS.

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**Dayananda Sagar College of Dental sciences**  
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**Cultural Committee Roles and Responsibilities**

The Cultural Committee is instituted in the institute with a core objective of upholding the core values of the institute which is to contribute in the overall development of an individual capable of contributing towards the growth of the nation. Cultural Committee is responsible for keeping the spirits alive on the campus by organizing a multitude of cultural activities round the year. Be it celebration of almost every festival, we make sure that every event last in memory for a lifetime.

**Roles:**

1. The Cultural Committee shall be responsible for all intra and inter collegiate cultural events in the College.
2. To plan and schedule cultural events for the academic year. (Tentative dates to be included in the academic calendar of the institute.)
3. To prepare budget for all cultural events and take necessary steps for its approval.
4. The member secretary of the committee shall conduct a meeting of the committee to discuss and delegate task
  - a. To obtain formal permission from the college authorities to arrange program
  - b. To decide the date, time and agenda of the program
  - c. To inform members of staff and students about the event
  - d. To arrange the venue and logistics (audio/video system, dais, podium etc).
5. To enhance the interest of participants in the field of arts and cultural.
6. The committee shall display on the Notice Board/Website information about festivals to be celebrate
7. To prepare and maintain records of all cultural activities, submit report on each event with photographs within two days to the AV and website committee.
8. Shall provide necessary information for the annual report committee as and when required.
9. Shall take necessary permission from principal and Head of the Department with regard to students attending cultural events.

  
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**Responsibilities:**

1. To promote and arrange extracurricular activities to bring out the talents of students in the performing arts by motivating students and member's faculty.
2. Promoting team spirit by making healthy competition.
3. To communicate about various festivals and events to be celebrated in the college and give a wide publicity.
4. To the procedure to organize cultural events
5. To provide necessary infrastructure for performing arts.
6. To prepare and maintain records of all cultural activities.

  
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## CULTURAL COMMITTEE - POLICY DOCUMENT

1. Term of the committee shall be for three years.
2. All Cultural activities of the institution shall go through the committee.
3. The committee shall:
  - a. Plan Cultural activities for each academic year.
  - b. Prepare budget for Cultural activities for college day celebration
  - c. Prepare a report and maintain record of each event in the office.
  - d. Submit report of each event with photo graphs (high quality printable photo) within two days to the audio visual, photography and website committee.
  - e. Shall provide necessary information for the annual report committee as and when required.
  - f. Shall take necessary permission from the Principal and Heads of the department with regard to students attending a Cultural event.

PRINCIPAL

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**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES**  
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**Code of Conduct, Professional Ethics  
&**

**Disciplinary Committee**

**Policy Document**

  
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## **Code of Conduct, Professional Ethics & Disciplinary Committee**

### **POLICY DOCUMENT**

#### **1.0 : Purpose**

The purpose of this committee is to set the Code of conduct, Professional ethics to be followed by the students and to address any issues of indiscipline of the students brought forward.

#### **2.0: DEFINITIONS**

For the purpose of this policy:

'Code of Conduct' refers to the code set by the institution by which the students have to abide.

'Professional Ethics' refers to the ethics that the students have to follow which has been set by the institution.

'Discipline' refers to the rules of discipline that the students have to follow in campus as set by the institution

#### **3.0: SCOPE**

The policy applies to maintenance of Code of Conduct, Professional ethics and Discipline of the students in the College and Campus and regularly inculcating in the students the rules of Conduct, Ethics and Discipline to be followed and to address any complaints of any misconduct or indiscipline and take appropriate action.

#### **4.0 Composition of the committee**

- Chairperson – Principal
- Member Secretary
- Members - 4-5 members

#### **5.0 Term of the Committee – 3 yrs**

#### **6.0 Meetings – once a year and as and when required**

#### **7.0: Functioning and Working**

The Code of Conduct, Professional Ethics and Disciplinary Committee at DSCDS ensures the students are informed about the Code of Conduct, Professional ethics and Discipline that is to be followed in the College and Campus and to address complaints of misconduct and indiscipline and take appropriate action for the same. This committee meets once a year/as the need may be.

4.1: To ensure the students are made aware about the Code of Conduct, Professional ethics and Discipline to be followed in the institution

4.2: To address the issues, if any, are brought forward the committee and organize an enquiry committee

  
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4.3: To conduct enquiries with regard to any form of indiscipline among students and recommend suitable disciplinary action and ensure effective resolution of the same.



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**DSCDS Code of Conduct, Professional Ethics and Disciplinary Committee**

1. The committee shall prepare a protocol regarding the Code of Conduct, Professional ethics and Discipline in the college for the students and staff.
2. The committee shall sensitize the students and staff the code of conduct and professional ethics by means of talks during the Orientation and clinical Induction Progrms
3. The committee shall address any concerns or complaints regarding misconduct and/or indiscipline
4. The Committee shall conduct an enquiry committee into matters related to indiscipline.
5. The Committee shall recommend a suitable punishment against the committed misconduct, malpractice or indiscipline and submit the report to the Principal
6. The Committee shall ensure that the Code of conduct, Professional ethics and Discipline is explained to the students at the commencement of their education in the institution



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**FACILITY MANAGEMENT COMMITTEE**

**Roles and Responsibilities:**

1. Term of the committee shall be for three years.
2. Committee shall look into the maintenance of Dental Chairs and other equipment of the Dental College, infrastructural requirements, and logistics for the students. Purchase of spares activities of the institution shall go through the committee.
3. The committee will coordinate with Facilities , DSI for repairs related to electrical, plumbing, carpentry and other issues pertaining to general maintenance
4. Department of Prosthodontics will be in charge of the Acrylic/metal/ceramic lab related equipment & the Department of Oral Surgery will be in charge for the clinical pathology lab & Implantology.
5. The committee shall prepare a Standard Operating Protocol (SOP) for preventive maintenance, repairs and purchase of spares.
6. Committee shall prepare a preventive maintenance timetable for the technician to visit each clinical department daily and member secretary shall monitor it.
7. Technician will follow the timetable given to him on a daily basis. However, he will be available to any department, on-call for urgent cases
8. The member from each department shall identify the problem and submit a letter duly signed by the HOD to the Member Secretary.
9. Committee shall meet every month to discuss the problems related to equipment of each department. Committee shall prepare a consolidated requirement document for maintenance purpose which will be submitted to the principal for approval. However in case of Emergency, repairs shall be carried out by the committee after oral /written approval from the Principal.
10. The proposal for repair shall be signed by the Member Secretary and submitted to the principal for approval.
11. Bills for repair shall be certified and signed by the Member Secretary prior to submission to the Principal for payment.
12. For purchase of spares, the committee shall call for three quotations, prepare a comparative statement and submit it to the purchase committee. They shall follow up the procedure with member secretary of purchase committee till the process of the purchase and payment is completed.
13. Technician shall report to the committee member in each department and the Member Secretary and apprise them about the various maintenance/repair work carried out.
14. Relevant registers have to be maintained by the technician & committee members of respective departments.
15. Committee will conduct review meetings every three months to discuss and present the requirements of each departments.
16. Minutes of every meeting shall be maintained by the committee.
17. Committee will be responsible to prepare a policy document regarding the standard operating procedures, duties and responsibilities of its members etc.,

  
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# Dayananda Sagar College of Dental Sciences

Policy Document

FEED BACK COMMITTEE

## **PROLOGUE**

Feedback in dental education is an integral and important element of teaching, it not only encourages the learners' knowledge, skills and professional performance and also aids in achieve their goals. Feedback is most real if conducted timely, relevant, expressive, encouraging for all the stakeholders of the institution. It can be a useful assessment way for an institution based on high-quality performance. Student, teachers, patients ratings are important for gathering evidence of effective teaching practices. In this way, institutional authorities became aware of the current issues faced by students, teachers, parents, patients and institutes.

An effective feedback mechanism is also helpful in refining the syllabus, implementation of all required standard practices within the institute as per the suggestions given by stakeholders. Ideal feedback assessment can act as driving energy for educational institutes to carry out rapid and need based changes in support of students, teachers, and institutes.


Having an effective and efficient feedback system involving all the stakeholders is a must for an educational institution. Keeping this in view Dayananda Sagar College of dental science has formulated a committee under the guidance of Dr. Hemanth M chairperson for the committee. This committee is responsible for designing, distributing feedback form, collecting followed by analyzing and interpreting the data. The committee has to provide the interpretation to the principal and management as a component of the quality check.

## **GOAL**

The Goal of this feedback committee is to provide opportunities to all the stakeholders, to express their opinions and periodic evaluation in order to facilitate improvements in the performance of institution.

## **OBJECTIVES**

- To describe what effective purposeful feedback is and what is not.
- To identify strategies and tools that augment effective purposeful feedback.

  
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- To understand how to implement effective feedback strategies to determine the necessary skills the learner needs for ongoing success in learning outcomes.
- To pilot the plan of implementation and evaluate periodically.
- To effectively implement feedback mechanism at all possible levels of providing services (Academic Clinical and Communities).
- Analyze the data obtained through feedback form and interpret.
- Suggest modifications or total system changes to the decision-making authorities based on the evidence supported by collecting data.

## DEFINITIONS AND ROLES

**Feedback:** Any opinion or comment, either positive or negative, including: compliments, complaints Suggestions for improvement, and business opportunities.

**Committee:** A small group of people chosen to represent a larger organization who either make decisions or collect information for it.

**Chairperson:** The chairperson of the feedback committee is the presiding officer of an organized group such as a board, committee, or deliberative assembly. The person holding the office, who is typically elected or appointed by members of the group and presides over meetings of the group.

### Role of the chairperson:


Primary role is to ensure that the board is effective in its task of setting and implementing the committee's direction and strategy. To conduct the meetings, so that the decisions can be taken.

**Co-chairperson:** A person who is jointly in charge of something, such as planning an event, overseeing and evaluating the meetings with another person.

### Role of the co-chairperson:

To support and regularly communication with the chairperson and making sure that everything develops smoothly.

**Co-ordinator:** A person whose job is to organize events or activities and to negotiate with others in order to ensure they work together.

  
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### **Role of the co-ordinator:**

To ensure that the duties and responsibilities of the committee are carried out; respond to the email communications in a timely manner.

**Advisor:** The advisor assists the leader/organization in formulating long- range goals and in planning and initiating short-term projects. The advisor offers guidance by reviewing goals, objectives, and the progress of the organization.

### **Role of the advisor:**

Assists the committee in formulating long range goals and evaluate projects, performance and progress.

### **Role of the members:**

A member is a designated person in the committee by the chairperson who attends all the meetings, follows the proceedings, does the given task and fulfills the expectations of the committee.

## **TYPES OF FEEDBACK**

### **Student's Feedback**

The College will use Students' feedback as a base to make improvements in the existing system after reviewing and analysing it carefully. The student's feedback questionnaire is attributing quantitative and qualitative answers, focused on the quality of the in-course content, pedagogy, learning material, views about theory/practical courses, and services extended to them by the College. The survey is opened to the students twice a year at the end of each term to express their feedback/suggestions on the scheme, teaching-learning, and co-curricular activities, later on, this feedback will be analysed and shared with the concerned department. The appropriate suggestions will be put forward to the academic council for implementation. Based on the feedback, valuable changes are recommended by the Committee to revise/shift the content of the course after obtaining formal approval from the academic council of the College. (Annexure 1: Form to be attached later after approval).

  
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### **Faculty's Feedback**

The Feedback will be collected from faculty members of the College focussing on qualitative improvement in content, pedagogy, learning material, student performance, research, and extension activities for Theory/Practical courses and Other Aspects related to curriculum twice each year. The faculty members express their feedback/suggestions on the teaching-learning process; research, and extension activities, and the same would be debated and discussed. Similarly, the feedback is received from the faculty members on Programme Scheme, Theory courses, Practical Courses. The appropriate suggestions will be put forward to the academic council for implementation. Based on the feedback obtained during the teaching-learning process, improvement can be done in teaching practices and can improve the academic performance of the students. (Annexure 2: Form to be attached later after approval).

### **Patient Feedback**

Patient Feedback will be obtained through structured questionnaires asking about the treatment satisfaction, cost, duration of treatment, suggestions etc.

This Feedback will help in improving the quality of treatment delivered to the patients.

The Feedback will be obtained randomly from patients after undergoing treatment procedures from different Department. (Annexure 3: Form to be attached later after approval).


### **Parent's Feedback**

Parent feedback will be obtained from respondents through questionnaires made regarding the academic and extracurricular activities of their wards via email and correspondence twice every year.

Some of the parameters accommodated in the parent's feedback include quality of teaching, students' discipline, lab facilities, sports, cultural and co-curricular activities, examination system, cross-cutting issues, etc. (Annexure 4: Form to be attached later after approval).

### **CDE Programme/Workshop Feedback**

This Feedback will be taken at the end of the CDE Program and Workshop conducted in the college for the benefit of students and Faculty. The Feedback will help in improving the quality of CDE Programme and Workshop for the benefit of Stake Holders. (Annexure 5: Form to be attached later after approval).

  
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Kumarapada Institute of Health Sciences  
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## FEEDBACK COMMITTEE TERMS FOR MANUAL

Feedback is a vital component of medical education for students and trainers to improve as learners and clinicians contribute to the development and expertise and generate increased revenue for the institution

“Specific information about the comparison between a trainees observed performance and a standard given with the intent to improve the trainees performance”

Feedback can be given from:

1. Students to teachers
2. Patients to clinicians
3. Teachers to students
4. Self (Reflection)

It must be given in a constructive manner


There are four types of constructive feedback:

1. Negative feedback: corrective comments on past behavior
2. Positive feedback: giving affirming comments on past behavior
3. Negative feed forward: corrective comments on future performance
4. Positive feed forward: affirming comments on future performance
5. Reflection: is different from feedback. It is the act of contemplating on the state of being. Reflective feedback is the protocol used to assist a teacher in reflecting on his or her own lesson (not as effective in getting a complete picture of strengths/ weaknesses).

**Positive feedback/ constructive feedback:** is the act of giving information on the performance of the trainee emphasizing on strengths of the session and areas that require improvement. It is given in a sensitive manner immediately.

**Negative feedback:** can depress trainees and impact performance

**Pendleton's rules:** of feedback in medical education recommends that errors be phrased as points of improvement i.e encouraging interactive feedback utilized as conventional methods of feedback (pendelton et al 1984)

  
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**Formative feedback:** consists of ongoing interventions to assist the learner in attaining learning objectives.

**Summative feedback:** the final overall impression of performance at the end of instruction (evaluation) providing competency and methods of determining success and helping students achieve competency

Feedback types could be on performance of specific tasks (provides greatest benefit), of self-evaluation & self-confidence or of learner as a person.

**Multisource feedback (MSF):** recommended by the accreditation council for graduate medical education evaluates professionalism and interpersonal and communication skills. It uses input from peers and colleagues to gather information on behavior in the work place.

Feedback types could also be classified as:

1. Brief: On a daily basis (on an observed action and behavior)
2. Formal: involves setting aside a specific time for feedback like, after interacting with a patient in the OPD
3. Major: scheduled sessions at strategic points during a clinical rotation (usually at the midpoint) providing more comprehensive info to the learner so that he/she can improve before the end of the rotation when final evaluation is performed.

Feedback sandwich: frequently used method to provide feedback, which contains 3 components

1. Top of bread slice: positive comment given at the start
2. Filling of sandwich: area to improve
3. Lower bread slice: positive comment to end on positive note

**Insights into feedback:** Feedback is a vital component of medical education necessary for students and trainees to improve as learners and clinicians and contributes to the development of expertise and reinforces good behavior.

Good feedback characteristics are specific, timely, correct mistakes and provide direction of improvement and guidance on current and future behavior. It is done in a constructive way to yield results.

Feedback for learners: Allows the learner to think about the gap between the actual and desired performance and identify how they can narrow the gap between the actual and desired performance

and identify the gap between them and improve. Learner's value feedback that helps them to develop facilitates self-reflection and motivates them to learn more and improve. Trainers should be aware of biases. We try to elicit the Pygmalion effect here in a positive way.

## DOCUMENTATION AND PROCEDURAL PROTOCOLS

### 1. Purpose of Documentation and Procedural Protocol.

1.1 The purpose of this procedure is to:

- 1.1.1 Provide a transparent and consistent approach to the handling and monitoring of Feedback across the organization, and
- 1.1.2 Ensure that all staff and stakeholders of DSCDS have easy access to an equitable and responsive Feedback mechanism.

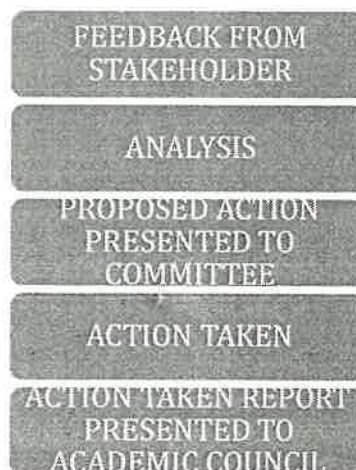
### 2. Scope of Documentation and Procedural Protocol.

2.1 This procedure applies to all Staff, Students and other stakeholders of DSCDS.

2.2 This procedure does not apply in the following instances, which fall within the scope of other DSCDS policies or procedures:

- A grievance or serious complaint.
- An allegation of harassment or bullying.
- Critical instance reporting.
- Allegations of fraudulent behavior or alleged corruption.

### 3. Flow chart of Working of Feedback Committee



### 4 FEEDBACK AGREEMENT:

Feedback agreement is to ensure that the stake Holders understand the importance of feedback provided by them. It also helps to create a series of identifiable benchmarks and goals to work towards and evaluate progress of the Stake Holders.

*[Handwritten signature]*  
PRINCIPAL  
DSCDS  
DSCDS  
DSCDS  
DSCDS

-This agreement will help Student in improving their academic, extracurricular and overall performance.

- This agreement will help Faculty enhance their teaching abilities.

- This agreement will help Patients in getting better facilities and treatment procedures.

- This agreement will help Parents getting updated about their wards academic, extracurricular and overall performance.

- This agreement will help in overall development of the institution through necessary feedback obtained from different stake holders.

## **5 DISCLAIMER AND CONFIDENTIALITY:**

### **DISCLAIMER**

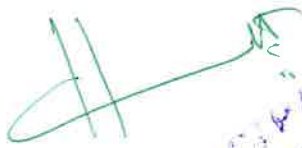
- Academic and Non-academic issues, when necessary, will be escalated to the view of higher authorities and parents.

- Parents, Patients, Students, Faculty are equally responsible and need to be committed to ensure the success of Feedback Committee.

**CONFIDENTIALITY** In no circumstances that any personal issues will be discussed or disclosed with other Stakeholders (Students Staff/Patients/Parents).

The faculty at Dayananda Sagar College of Dental sciences are always striving their best to impart quality education to the students and render best treatment to the needy. Hence setting a feedback protocol was strongly felt by the institution.

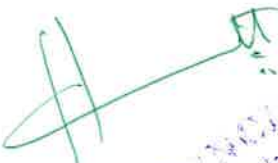
No matter whatever your field, having professional communication skills and effective feedback is essential to success in today's workplace. Hence getting a feedback from all the stakeholders is absolutely critical. Implementing a feedback program is not about collecting data. Its not about sending out surveys. Its about driving change in the organization by constant improvement. This change can be done by getting a good feedback. Without feedback, mistakes go uncorrected, good performance is not reinforced, and clinical competence is achieved empirically or not at all. It takes effort, it takes perseverance and it takes a focus to be on the constant rise. The committee will prioritize the feedback they get from the students, parents and thus work on how performance can be improved.

  
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**CDE PROGRAM**

On a scale of 1-5 with 1 being the lowest and 5 being the highest please provide us with your feedback regarding the following question.

		5 Excellent	4 Good	3 Average	2 Below average	1 Poor
1	The quality and depth of knowledge imparted by the lecture					
2	The relevance of the talk in today's scenario of practice					
3	The clarity of speaker's presentation					
4	The level of interest aroused by the talk/speaker					
5	The clarity/quality of AV arrangements like projectors/speakers/mics					
6	The level of comfort of seating arrangements/ furniture					
7	The cleanliness/lighting of the room					
8	The likelihood of you recommending this lecture to your colleagues or friends in future.					

  
 Dr. R. N. S. K. S. S.  
 In-charge, Dept. College of Physical Education  
 Government Engineering College  
 Bangalore - 560075

**FEEDBACK FORM FOR THEORY/ PRE-CLINICAL CLASS FEEDBACK**

On a scale of 1-5 with 1 being the lowest and 5 being the highest please provide us with your feedback regarding the following question.

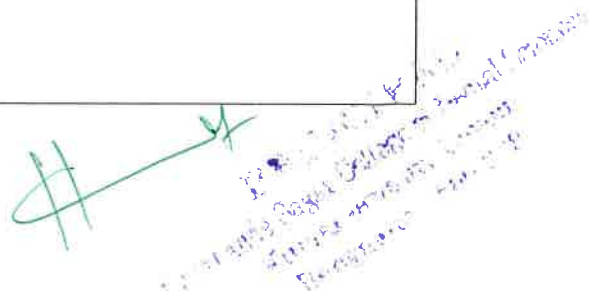
Sl No.	Questions					
		5 Excellent	4 Good	3 average	2 below average	1 Poor
1	The quality and depth of knowledge imparted by the teacher					
2	The clarity of teacher's lecture, concept, speed, tempo of speech					
3	The opportunity for clarifying doubts in class					
4	The use/ relevance/ applicability of the lecture to clinical postings and entrance exams					
5	The clarity/quality of AV arrangements/projectors/ mikes/speakers					
6	The level of comfort of the rooms/lighting /cleanliness and seating arrangement					
For pre-clinical						
8	The availability/quality of instruments in the lab					
9	The cleanliness, lighting of the lab					

*[Handwritten Signature]*  
 Dr. ...  
 ...  
 ...  
 ...

**PARENT'S FEEDBACK**

Parent's Name: \_\_\_\_\_ student's Name: \_\_\_\_\_ Academic Year: \_\_\_\_\_

Sl No		Excellent	Good	Average	Below average	Poor
1	Infrastructural Facilities					
2	Teaching-Learning Environment of the Institution (Library, Internet, and Computer etc.)					
3	Mentor system to monitor student's progress.					
4	Communication regarding the ward's performance					
5	Encouragement provided to students to participate in Curricular and Co-Curricular and personality development activities.					
6	Hostel facilities of the Institution.					
7	Are parents required Parent teacher meeting (PTM)?	YES			NO	
8	Institution organizing events Annual day/culture fest /convocation day					
9	Would you like to recommend this DSCDS/ Institution to others.	YES			NO	
10	Overall scoring of the Institution					
11	Suggestions for improvement					


  
 Headmistress  
 DSCDS  
 Bangalore



**Patient feedback form:**

Please tick the answer that best matches your view.

Name / OP Card No.: \_\_\_\_\_ Age/ Gender: \_\_\_\_\_ Phone: \_\_\_\_\_ Department & Floor:

1. Punctuality of the appointment:
  - A. On scheduled time
  - B. Delay <15mins
  - C. Delay <15-30mins
  - D. Delay <30mins
2. Were you given an explanation for the delay?
  - A. Yes, it was satisfactory
  - B. Yes, it was unsatisfactory
  - C. No
3. After 1<sup>st</sup> appointment of your treatment, were the follow-up appointments given promptly?
  - A. Given promptly
  - B. Postponed many times
  - C. Didn't give an appointment
4. How satisfied were you with the following (please tick the appropriate box)?

Sl nu	Question	Very satisfied	Satisfied	Not Satisfied
1	Manner in which/you were welcomed			
2	Cleanliness of the department			
3	Understanding your needs by the doctor			
4	Conveying treatment options & details by the doctor			
5	Resolution of your problem after treatment			
6	Doctor was helpful and courteous			

5. How likely would you continue to visit us in future in case you have dental related problem?
  - A. Very likely
  - B. May Be
  - C. Unlikely
6. How likely would you refer a patient to us?
  - A. Very likely
  - B. May Be
  - C. Unlikely
7. Do you have any suggestions?

  
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# DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

## ALUMNI FEEDBACK FORM ON DENTAL CURRICULUM

Dear Alumni,

The feedback that will be collected is an essential component for analysis & improvement in the higher education academic curriculum. Please do provide an honest and impartial feedback which stays confidential.

- 1) How do you rate the syllabus of the course in relation to the competencies expected out of the course?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 2) Do you feel any part/parts of curriculum is irrelevant and needs modification?  
1. Yes 2. No
- 3) How do you rate the assistance provided by the institute for career enhancement?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 4) How do you rate the offering of the electives in relation to the healthcare advancements?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 5) How do you rate the co-curricular activities taken up by the college to improve skills and knowledge of a subject?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 6) How was the learning experience during your student days in the institution?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 7) What is the relevance of all that you learnt during student days in the institution ?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 8) How do you rate the practical knowledge of students in terms of their relevance to the real-life application?  
1.Excellent 2.Good 3. Neither good nor poor 4.Poor 5. Very poor
- 9) If you are invited to deliver a guest lecture/special talk/ motivational session for your junior, will you be interested?  
1. Yes 2. No
- 10) Any suggestion for improvement .....

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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

**EMPLOYER FEEDBACK FORM ON DENTAL CURRICULUM**

Dear Doctor,

Please take time and fill this feedback form regarding the faculty/clinician employed with you who are our alumni. This will give valuable suggestion for further improvement of course & curriculum. Please do provide an honest and impartial feedback which stays confidential.

A) Name of the candidate serving in your college-

B) Institution and designation-

C) Subject studied in our college -

1) How satisfied are you with our student's work performance.

1. Excellent 2. Good 3. Neither good nor poor 4. Poor 5. Very poor

2) How satisfied are you with our earlier student's academic system which educated these candidates?

1. Excellent 2. Good 3. Neither good nor poor 4. Poor 5. Very poor

3) Our curriculum provided opportunities for developing new ideas / techniques.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree

4) Our curriculum provided vast opportunities for research

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree

5) Our alumni has the ability to manage the patients independently.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree

6) Do our alumni get involved in social / extra-curricular activities?

Yes/ no

7) Does our alumni have leadership qualities.

Yes/no

Any suggestion for improvement?

---

  
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Kumpalangi, Bangalore - 560 078.

## PROFESSIONAL FEEDBACK ON CURRICULUM

Dear Doctor,

The feedback collected will be helpful in focussing on qualitative improvement in content, pedagogy, learning material, student performance and research. Please do provide an honest and impartial feedback which stays confidential.

A) Name of the doctor-

B) Institution and designation-

C) Subject specialisation -

1. Curriculum and syllabi fitted the needs of students for Job Placements.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree

4. Some what disagree 5. Strongly disagree

2. Curriculum and syllabi fitted the needs of students Higher Education.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree

4. Some what disagree 5. Strongly disagree

3. Our curriculum is aligned to the need of real world.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree

4. Some what disagree 5. Strongly disagree

4. Program and curriculum is sufficient for dental health care Entrepreneurship.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree

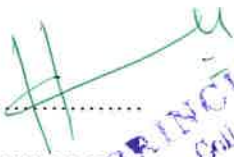
4. Some what disagree 5. Strongly disagree

5. Theory and practical are sufficiently balanced in the curriculum and syllabus.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree

4. Some what disagree 5. Strongly disagree

6. Overall perception about the course curriculum .....

  
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Kangalore - 576 115

**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES**

**TEACHING FACULTY FEEDBACK FORM ON DENTAL CURRICULUM**

Dear Faculty,

The feedback collected will be helpful in focussing on qualitative improvement in content, pedagogy, learning material, student performance and research. Please do provide an honest and impartial feedback which stays confidential.

1) You are a teaching faculty since .....year

2) You are involved in teaching

- o UG
- o PG
- o Ph.D

3) Area of specialisation? .....

4) The course content address the objective of learning in your specialisation

- 1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree
- 4. Some what disagree 5. Strongly disagree

5) The curriculum address the training need for the student in dental education

- 1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree
- 4. Some what disagree 5. Strongly disagree

6) Our curriculum allows flexibility for innovative/ newer ideas in teaching

- 1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree
- 4. Some what disagree 5. Strongly disagree

7) Our curriculum involves technological and recent advances to be incorporated.

- 2. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree
- 4. Some what disagree 5. Strongly disagree

8) Our institution provides infrastructure for using innovative teaching methods.

- 1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree
- 4. Some what disagree 5. Strongly disagree

9) Our assessment methods address the curriculum and course objectives.

- 1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree
- 4. Some what disagree 5. Strongly disagree

10) Any suggestions? \_\_\_\_\_

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**STUDENT FEEDBACK FORM ON DENTAL CURRICULUM**

*Handwritten signature in green ink*  
**PRINCIPAL**  
Dayananda Sagar College of Dental Sciences  
K. R. Nagar, Coimbatore - 641 012

Dear Students,

This feedback on the dental curriculum will be used as a tool to make improvement in the existing system after reviewing and analysing it carefully. Please do provide an honest and impartial feedback which stays confidential.

UG

PG

Ph.D

<input type="checkbox"/>	1 <sup>st</sup> year	1 <sup>st</sup> MDS	<input type="checkbox"/>
<input type="checkbox"/>	2 <sup>nd</sup> year	2 <sup>nd</sup> MDS	<input type="checkbox"/>
<input type="checkbox"/>	3 <sup>rd</sup> year	3 <sup>rd</sup> MDS	<input type="checkbox"/>
<input type="checkbox"/>	4 <sup>th</sup> year		

- 1) The objective of course content of each subject was clear .  
1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree
- 2) The Objectives of the course were fulfilled by the end of the term.  
1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree
- 3) Was active participation encouraged by the teaching methods?  
Yes/No
- 4) Was learning supported by the Theory & Clinical Classes?  
Yes/No
- 5) The learning resources were adequate at the clinic/ library and class room.  
1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree
- 6) The syllabus/ curriculum were effective in developing innovative thinking.  
1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree
- 7) Was interest stimulated by the course and content  
Yes/no

  
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Bangalore - 560 078.

8) Assessment methods used for practical classes were adequate.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree

9) Assessment methods used for theory classes were adequate.

1. Strongly agree. 2. Somewhat agree. 3. Neither agree nor disagree  
4. Some what disagree 5. Strongly disagree

10) Any Suggestion to improve the curriculum? \_\_\_\_\_

\_\_\_\_\_



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DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES

REPORT ON THE STUDENT FEEDBACK 6.5.3

Dear Students,

The feedback that will be collected is an essential component for analysis & improvement in the higher education academic curriculum. Please do provide an honest and impartial feedback which stays confidential.

**I.FEEDBACK ON COURSES (BDS,MDS,PHD-kindly tick on the course you have attended)**

		Excellent	Very good	good	Average	Below average
A	Relevance of the course					
B	Developing analytical skills					
C	Availability of resources					
D	Scope for Interdisciplinary skill development					

**II.GENERALIZED FEEDBACK ON TEACHERS**

		Excellent	Very good	good	Average	Below average
A	Knowledge base					
B	Communication Skill					
C	Approach ability of teachers					
D	Encouragement by the teacher for participatory learning					

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### III. FEEDBACK ON LIBRARY

		Excellent	Very good	good	Average	Below average
A	Availability of learning materials for prescribed readings					
B	Availability of reference books					
C	Accessibility of books and journals					
D	Availability of latest books and journals					

### IV. FEEDBACK ON INTERNAL ASSESSMENTS

		Excellent	Very good	good	Average	Below average
A	Quality of Internal assessment.					
B	Support offered by IA to achieve the course grade					
C	Frequency of assessments					
D	Evaluation mechanism					
E	Feedback mechanism					

### V. FEEDBACK ON INFRASTRUCTURAL FACILITIES

		Excellent	Very good	good	Average	Below average
A	Medical Room					
B	Girls common room					
C	Boys common room					
D	Drinking water					

E	Toilets					
---	---------	--	--	--	--	--

**VI.FEEDBACK ON INSTITUTIONAL ENVIRNOMENT**

		Excellent	Very good	good	Average	Below average
A	Placement guidance and career counselling cell					
B	Grievance redressal mechanism					
C	Student administration relationship					
D	Hostel facilities					
E	Canteen facilities					
F	Student council relationship					
G	Attitude of college towards extracurricular activities					
H	Availability of extracurricular activities					
I	Sports facilities					
J	Acessibility of computers in college					
K	Availibity of recreational facilities					
L	Internet facility					
M	Overall rating					

  
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 Bangalore - 560 075.

**Question 1-** After completion of course how would you feel speaking about your alma mater to others

- A) Proudly
- B) Extremely happy
- C) Satisfactorily
- D) Unsatisfactory


**Question 2-** Three things you appreciate about college

- 1-
- 2-
- 3-

**Question 3-** three things you would want to see a change in the institution

- 1.
- 2-
- 3-

Name and Year of study (optional)

  
K. INCIPAI  
Anna Lagan College of Dental Sciences  
Kondazhawa Layam,  
Bangalore - 560 078.


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# Dayananda Sagar College of Dental Sciences

## Policy Document

Institutional Review Board Committee


  
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## INSTITUTION'S CODE OF ETHICS FOR RESEARCH

Dayananda Sagar college of Dental Sciences, Bangalore has drafted a code of ethics which provide guidelines for professional and ethical conduct of research by the faculty, doctorate students, post graduate students and the undergraduate students. Code of research ethics is a set of principles of research conducts. It sets a benchmark for researchers while conducting their research and fulfil their duties to the research subjects, public, profession and the fellow researchers. Although ethics and laws are intricately related to each other they are not one and the same. Ethical obligations are more binding our human conscience when compared to legal stipulations. Hence, ethical obligations may and often do exceed legal duties.

The code of ethics pertains to the way in which health research has to be conducted while adhering to all the ethical principles of research. When human subjects, patients, animals are recruited for conducting research the researcher should be very careful in adhering to ethical principles. Several international and national agencies have established multiple ethical guidelines which refer to the ethical principles to be followed while recruiting subjects and also conducting and reporting of research. Majorly there are seven ethical principles which are to be strictly followed while conducting research:-

1. Social and clinical value
2. Scientific validity
3. Fair subject selection
4. Favourable risk-benefit ratio
5. Independent review
6. Informed consent
7. Respect for potential and enrolled subjects

  
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1. Social and clinical value

Every research is designed with an intention to answer a specific research question. The question should be relevant and when answered by conducting a research, should be beneficial to the subjects, patients, fraternity, administrators, policy makers and community at large. The question should be justifiable so that the research subjects, patients may be asked to accept some risk or inconvenience. This principle refers to the utility, beneficence to the stake holders of research. It refers to the contribution of research output in expanding the knowledge base, improving the treatment methods, helping the community at large in reducing the burden of disease so that it justifies exposing the research subjects to the given risk and burden of research.

2. Scientific validity

A research study should follow scientific principles of planning, conducting, analysing, reporting and publishing. The principles of research methodology should guide the process of research scrupulously. The scientific rigors maintained in a research ultimately provides validity to research. Scientifically invalid research is outright unethical because it is a waste of resources and subjects or patients are being exposed to unnecessary risks.

3. Fair subject selection

The subject selected for research should not come under vulnerable groups. Vulnerability refers to physical vulnerability, psychological vulnerability, social vulnerability, financial vulnerability and many more. The research subjects who participate and accept the risks involved should also be in a position to enjoy the benefits. Soon after completing the research a debriefing session should be organised and the benefits of the research should be extended to the other group which did not receive the benefit while the research was being conducted. Orphans, specially abled, institutionalised children, mentally unsound and insane, pregnant women, aged and shelter less, asylum seekers, illegal emigrants and ethnic minorities are considered as vulnerable groups unless proved otherwise. The researchers should be careful to avoid such vulnerable groups being recruited since they are easily available, accessible to conduct research unless there is a strong reason to justify their inclusion. Institutional Review Board (IRB) should look into this issue and resolve any deficit in fairness while selecting research subjects.

  
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4. Favourable risk-benefit ratio

Any research exposes the research subjects or participants to some degree of inconvenience, unknown and known risks while providing some benefits. There is uncertainty with respect to the equation between risks and benefits of a research until research it is completed. Every effort should be made by the researchers to minimise the risks and maximise the benefits. The risks may be physical, psychological, economic, or social. There are certain scientific methods to assess the anticipated risks and the potential benefits of a given research. Researchers should establish that the benefits are overwhelming when compared to risks. IRB should strictly scrutinize the research proposal and ascertain that the potential benefits supersede the anticipated risks well before the approval is given.

5. Independent review


Any research proposal should be thoroughly reviewed by a review board consisting of a panel of experts, nonexperts, lay persons as prescribed by the guidelines of a national, international, local, ethical organisations or agencies. The panel should scrutinize the scientific and ethical validity of the intended research by asking important questions;

- a. Are those who are conducting, examining, diagnosing and treating the research subjects free of bias?
- b. Is the methodology adopted by the researchers scientifically sound?
- c. Are the human rights of the research subjects protected at all cost?
- d. Has the trial being ethically designed and risk benefit ratio favourable?

The review board monitors the study even while it is going on in order to keep a strict watch on any violations. In our institution a structured IRB is established as per the guidelines of ICMR.

6. Informed consent

It is the primary duty of the researcher to obtain a written informed voluntary consent from the research participant. The prospective participant should be given all the required information about the research in which he/she is participating, the pros and cons of participating in the research, the right to withdraw from research at any phase, the role need

  
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to be played by the participant and the minimal information about the nature of the intervention in a language simple and understandable by the patient. This can be done by preparing a "Participant information letter" which is either handed over or explained to the patient. After giving thorough information, the consent is obtained from the participant so that human rights are protected. At times when the participant is legally a minor, proxy consent is obtained from the parents or the legal guardians after providing the required information through the participant information letter. Coercion, appeasement and exorbitant incentives for participating in the research are strictly prohibited. The research subject is given access to the member secretary of IRB by providing the contact details so that the participants are free to communicate any grievances at any time while the research is going on.

7. Respect for potential and enrolled subjects

The participant should be treated with respect as soon as they come forward to participate in the research till the completion of research and even after the research is completed. This amounts to protecting the human rights and the rights of a research participant.

- a. Respecting the privacy and maintaining the confidentiality with respect to the data and the identity of the participant during the research and after.
- b. Permitting the participants to withdraw from the research at any moment without any penalty. This refers to respecting their decision at any phase of research.
- c. Monitoring their welfare, adverse reactions, side effects and their health status regularly so that at times the decision is taken by the researcher to remove the participant from the respective arm.
- d. After the research is completed a debriefing session is organised and a clear information is given to the participant about the research outcomes and the arm under which the subject was treated so that no suspense is maintained thereafter with respect to the intervention and the details of the intervention which were administered.

  
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# INSTITUTIONAL REVIEW BOARD'S POLICY DOCUMENT

## TERMINOLOGIES

**“RESEARCH”** refers to a class of activities designed to develop or contribute to generalizable knowledge; generalizable knowledge consists of theories, principles, or relationships, or the accumulation of information on which these are based, that can be corroborated by acceptable scientific methods of observation, inference, and/or experiment.

**HUMAN BIOMEDICAL RESEARCH (HBR)** refers to any research on human subjects that involves:

- a. Intervention on, interaction with, or observation of, humans.
- b. Use or manipulation of any human biological derivative (e.g. human cells, tissues and body fluids, including those which were previously acquired and stored).
- c. Review, analysis and publication of previously compiled identifiable data; for the purpose of studying, diagnosing, treating and/or preventing, any ailment, injury or adverse condition of the human mind or body.


## THERAPY

An activity that is undertaken with the intention of improving the health of the patient may be considered **“THERAPY”**.

## **DRUG**

## **PREVENTIVE AGENT**

**Preventive medicine** -The application of preventive measures by clinical practitioners. A specialized field of medical practice composed of distinct disciplines that utilize skills focusing on the health of defined populations in order to promote and maintain health and well-being and prevent disease, disability, and premature death. In addition to the knowledge of basic and clinical sciences and the skills common to all physicians, the distinctive aspects of preventive medicine include knowledge of and competence in biostatistics; epidemiology; administration, including planning, organization, management, financing, and evaluation of health programs; environmental health; application of social and behavioural factors in health and disease; and the application of primary, secondary, and tertiary prevention measures within clinical medicine.

  
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## SUPPLEMENT INTERVENTION

**Intervention study** - An investigation involving intentional change in some aspect of the status of the subjects, e.g., introduction of a preventive or therapeutic regimen or an intervention designed to test a hypothesized relationship; usually an experiment such as a randomized controlled trial.

## ANIMAL RESEARCH

**Animal model** - A study in a group of laboratory animals that uses conditions of animals analogous to conditions of humans to model processes comparable to those that occur in humans.

## BASIC ETHICAL PRINCIPLES

All HBR must be conducted in accordance with these three fundamental ethical principles:

### 1. Autonomy (Respect for persons)

This incorporates at least two basic ethical considerations:

- ✓ *Respect for autonomy*, which requires that those who are capable of deliberation about their personal choices should be treated with respect for their capacity for self-determination.
- ✓ *Protection of persons* with impaired or diminished autonomy (such as children or the mentally disabled), which requires that those who are dependent or vulnerable be afforded additional security against harm or abuse.

2. **Informed consent:** It should be voluntary, legal, and comprehending and should be recorded from every subject recruited in the study.

### 3. Non-maleficence

This is the principle in which the actions or practices are right insofar as they avoid producing bad consequences. This is the foundation of all health care and describes the first obligation that every health care provider embraces — do no harm. In Latin, the term is *primum non nocere* which means first, do no harm.

### 4. Beneficence

This refers to the ethical obligation to maximize benefits and to minimize harm. In the research context, it is unlikely that direct benefit will accrue to research subjects. Benefits should outweigh the harms.

### 5. Justice


This refers to the ethical obligation to treat each person in accordance with what is morally right and proper, and to give to each person what is due to him/her. It is based on the principle of distributive justice. For HBR, the investigator must ensure that potential benefits and risks are reasonably balanced and risks are minimized. Justice also requires that research be responsive to the health conditions or needs of vulnerable subjects. Especially attention must be given to vulnerable persons, i.e. those with higher susceptibility to harms and/or with reduced ability to protect their rights and welfare, such as pregnant women, minors, prisoners and the mentally incapacitated

## **6. Privacy and Confidentiality**

The information, data revealed by a research subject or a patient in a relationship of trust should be maintained confidentially and should not be divulged to others. Examination of the research subject, oral consultation, counselling should be done with utmost privacy.

## **7. Veracity**

## **8. Fidelity**

  
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Dayananda Sagar College of Dental Sciences- Institutional Review Board (DSCDS – IRB) is a vehicle to review and approve all research proposals on biomedical, social and behavioural science research for health involving human participants, their biological material and data to safeguard the dignity, rights, safety and well-being of all research participants. Thus, IRB implements its system of ethics governance of research carried out in the institution and is a competent and independent board in its functioning.

- ✓ The institution, DSCDS is responsible for providing logistical support, such as infrastructure, staff, space, funds, adequate support and protected time for the member secretary to run the IRB functions.
- ✓ DSCDS is responsible for establishing a DSCDS-IRB to ensure an appropriate and sustainable system for quality scientific & ethical review and monitoring.
- ✓ All types of biomedical and health research (whether clinical, basic science, policy, implementation, epidemiological, behavioural, public health research, etc) will be reviewed by the DSCDS-IRB before it is conducted.
- ✓ DSCDS-IRB will perform its functions according to written policies and operating procedures, maintain written records of their activities, and comply with all relevant institutional and regulatory requirements.
- ✓ DSCDS-IRB will have in-depth understanding of the basic ethical principles governing research, and be familiar with existing national regulations, legislative requirements and institutional policies governing the conduct of Human Biomedical Research (HBR).

#### **GUIDELINES FOR SELECTION OF MEMBERS**


- ✓ DSCDS-IRB will be carefully composed such that there will be no room for any public perception that it is not independent of its institution/researchers, but its composition will vary depending on local circumstances.
- ✓ There will be clear institutional policies on the administration of IRB with respect to the appointment, disqualification, resignation, and replacement of the members. Office bearers, e.g. Chairperson, and other members of the IRB, will be appointed with proper terms of reference, which are mentioned in the below sections.
- ✓ Members will be selected in their personal capacities, based on their interest, ethical and/or scientific knowledge and expertise. Their experience in the domain field and profile with availability of time to review and monitor the progress of the studies would also be necessary criteria.
- ✓ The members representing medical scientist and clinicians will have a post graduate qualification and adequate experience in their respective fields. Conflict of interest will be avoided while making appointments, with transparency with regard to financial and non-financial interests.
- ✓ The conflict of interest if any will be disclosed and confidentiality agreement will be signed by all members.
- ✓ The members will collectively possess the expertise and understanding of the types of research commonly carried out in the institution.

- ✓ All IRB members will be properly oriented to their roles and responsibilities and will be given appropriate initial and continued training, where required.
- ✓ To further reinforce the independence of the IRB, and to ensure that the decisions of the board are carried out in accordance with scientific thinking accepted within the community, additional external representation by specialists of favorable reputation from other institutions will be encouraged.
- ✓ The member would have demonstrated an understanding of the purposes and operations associated with institute's Human Research Protection Program, and also the policies and procedures with respect to designing, receiving approval for, and conducting human research.

**Note:**

The potential members of RD & SC and IEC must have the qualities, skills and experience to meet the criteria as below:

- ✓ Have a strong personal commitment to ensuring the highest standards for health care research.
- ✓ Have a strong personal commitment to the interests of research participants who take part (or are asked to) in health care research.
- ✓ Be able to read, understand and analyse complex issues from research proposals and weigh up conflicting opinions.
- ✓ Be able to take an objective stance, looking at a situation from different perspectives.
- ✓ Be a good communicator with a practical approach and confidence to voice his/her opinions.
- ✓ Be able to discuss issues with people who may not agree with the member including being able to influence others from a range of backgrounds.
- ✓ Be committed to the public service values of accountability, probity, openness and equality of opportunity.
- ✓ Be able to demonstrate an ability to contribute to the work of the RD & SC and IEC.
- ✓ Understand the requirement for confidentiality in issues faced by an RD & SC and IEC.
- ✓ Be willing to undertake training to equip to carry out his/her role.
- ✓ Need to be confident about expressing and supporting their opinions.
- ✓ Live in, or close to, the geographical area of the institution RD & SC and IEC.
- ✓ Have experience of conducting research projects.
- ✓ Flexibility, excellent communication skills and a desire to 'make a difference'.

  
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## APPOINTMENT

- ✓ The Head of Institute shall appoint the Chair person, Member Secretary and other members of the DSCDS - RD & SC and IEC.
- ✓ For all the members as well as experts invited for meetings, files will be maintained by the secretariat.
- ✓ The files will have details of qualification, area of expertise, organization details (to which, member is affiliated), role in RD & SC and IEC, complete contact details and updated CV.
- ✓ Independent consultants are appointed by the chairperson.
- ✓ For the expert members, evidence of invitation of particular meeting will be retained and documented.

## TERM OF OFFICE

- ✓ The membership of IRB will be for a period of one to two years and shall be renewed after the stated term. At the end of the term, at least one third of the IEC members will be replaced to maintain the composition. Extension of membership can be considered due to non-availability of members of similar stature, qualification and intent to contribute to ethical human testing.
- ✓ In case of the resignation/ discontinuation/ disqualification/ death/ chronic absenteeism of any member, before the completion of the tenure of the existing appointed committee, the chairperson can appoint a replacement.
- ✓ This appointment will be effective for the remaining tenure of the existing committee.

## RENEWAL OF MEMBERSHIP

- ✓ The membership shall be renewed after the stated term.
- ✓ Selection of members will be done at least one month in advance.
- ✓ Designated members of the RD & SC and IEC who wish to attend meetings as observers will be informed to read, understand, accept and sign the agreement contained in the Confidentiality/Conflict of Interest form at the beginning of the RD & SC and IEC meeting and/or before scientific and ethical review tasks.

## SELF-EVALUATION

- ✓ IRB will conduct self-evaluation periodically, at least annually. The evaluation will be done for the appropriateness of its composition, attendance of members, adequate resources for functioning of IRB, the review process, etc.

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- ✓ If there is any process failure, root cause analysis will be done to identify the process failure and the corrective and preventive action taken will be documented.

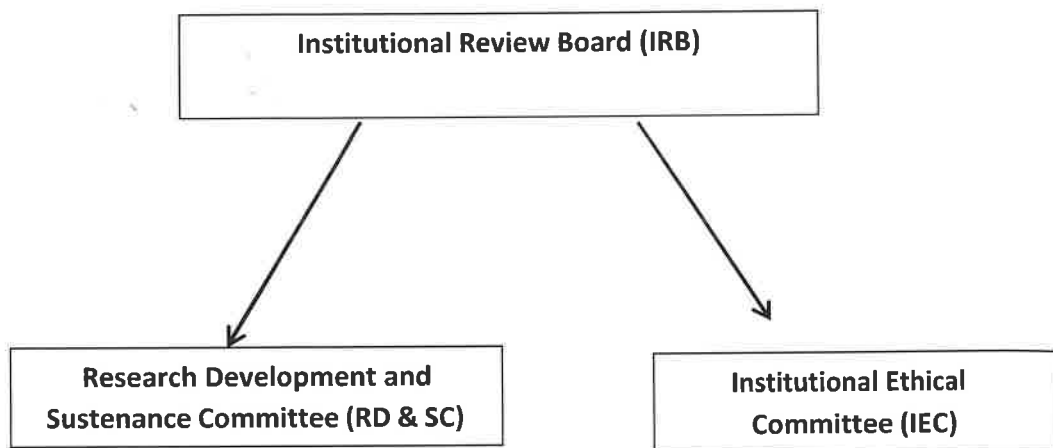
### **RESIGNATION**

- ✓ If any member wishes to discontinue from the RD & SC and IEC, he/she will inform the Chairperson, in writing.
- ✓ Members may voluntarily resign from the committee at a month's notice citing appropriate reason.

  
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**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES- INSTITUTIONAL REVIEW BOARD**

**Research Development and Sustenance Committee (RD & SC) + Institutional Ethical Committee (IEC)**



Institutional review board of Dayananda Sagar College of Dental Sciences will have two committees functioning under the common board and complement each other. Namely,

- 1. RESEARCH DEVELOPMENT AND SUSTENANCE COMMITTEE (RD & SC)**
- 2. INSTITUTIONAL ETHICAL COMMITTEE (IEC)**

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## RESEARCH DEVELOPMENT AND SUSTENANCE COMMITTEE

### **Composition of DSCDS-RD & SC**

1. Committee chairperson (Principal or any person designated by him)
2. Member secretary
3. Research methodologist
4. Biostatistician
5. Subject experts – Atleast two from each department.
  - a. Internal subject expert (selected from the institution) – 2 (from each department)
  - b. External subject expert – 1 (from each department)

External subject expert would be selected by the chairperson from anyother dental college. These selections are done by the chairperson based on the academic credentials of the candidate and inputs given by the rest of the members.

The presence of member secretary, research methodologist is mandatory for every meeting. Minimum one subject expert from each discipline of dentistry should be present in every meeting. Quorum is said to have reached when a minimum of eleven members are present in any meeting.

### FUNCTIONS OF THE DSCDS - RD & SC

1. Scrutinizing the **scientific integrity** of the submitted synopses, protocols, proposals or any other scientific manuscripts.

Scientific integrity refers to –

- a. Scientific rigors maintained while planning, designing, conducting, and reporting the research (Methodological integrity)
- b. Scientific rigors maintained with respect to data treatment, data analysis and interpretation of data (Statistical integrity)
- c. Adherence to conventions of scientific writing with respect to language, grammar, punctuations, style (Scientific writing Integrity)

### GENERAL GUIDELINES & GUIDELINES FOR CONDUCTING THE MEETINGS

- RD & SC will hold face-to-face meetings periodically based on the requirement.
- The dates of these meetings will be scheduled, announced and communicated to

  
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all the members in advance.

- The manuscripts submitted to the committee would be sent online to all the members at least 7-10 days in advance of the meeting. They can review the manuscripts and come prepared to the meeting.
- Quorum is said to have reached, when a minimum of 11 members are present for the meeting. The presence of member secretary and research methodologist is mandatory for conducting the meeting.
- Decisions will only be made at meetings where a quorum is present.
- The Chairperson or the Member Secretary will extend a formal welcome and invite the committee to conduct the proceedings.
- The research synopses or protocols or proposals have to be presented in front of the committee by the researchers on the day of meeting and also elaborate on specific issues when called for. If the researcher is a student, the guide should be present along with the student in order to answer, explain, discuss and clarify when the issues are raised by the committee members.
- Each member would be given an opportunity to place his/her comments, queries, opinions, suggestions and remarks regarding the presented research in front of the committee.
- After thorough scrutiny, synopses or protocols or proposals may be labeled as “outright accepted” or instructed to “re-submit after suggested modifications”. A synopsis might also be labeled as “outright rejected” in case the synopsis/proposal is presented after conducting the study or if the study doesn’t meet the basic requirements (lack scientific and ethical integrity).
- The resubmitted manuscripts are assessed for compliance with respect to the suggestions given earlier by the committee. Member secretary and the research methodologist should scrutinize the revised manuscripts and after ensuring 100% compliance, they may be labeled as accepted, without holding a meeting again.
- The Chairperson and Member secretary would consider the inputs from the committee members and decide whether the intended research is technically sound and can be forwarded to IEC for ethical review and approval. Such a decision would be taken after eliciting the consensus.

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## INSTITUTIONAL ETHICAL COMMITTEE (IEC) COMPOSITION OF DSCDS-IEC

### **Committee members (7 members)**

1. Committee chairperson (External person designated by Principal)
2. Member secretary
3. Advocate
4. Social scientist (An anthropologist, psychologist, theologian, a member affiliated to an NGO engaged in service to humanity or a person who has done course in Bio-ethics, philosopher or person with religious affiliation)
5. Basic medical scientist
6. Pharmacologist
7. Lay person from community


Quorum is said to have reached only when all members are present in any meeting.

### **NOTE:**

- ✓ When IEC regularly reviews research involving vulnerable populations (children, pregnant women, cognitively impaired persons, or prisoners), at least one member should be knowledgeable about and experienced in working with the subjects. After reviewing the manuscripts the member secretary would involve any such member as per requirement.

### FUNCTIONS OF THE DSCDS – IEC COMMITTEE

- ✓ The IEC will be competent and independent in its functioning.
- ✓ Ensure proper review and approval of all ethical aspects of the research in an objective manner.
- ✓ Provide advice to researchers on all aspects of welfare and safety of research participants.
- ✓ Protect the dignity, rights and wellbeing of research participants.
- ✓ IEC would ensure the continued validity of ethical approval of projects until the research is completed and evaluation of adverse event reports provided by researchers.
- ✓ Any modification to the protocol has to be brought to the prior notice of IRB and approval should be obtained, otherwise it amounts to protocol violation which would attract certain strictures.
- ✓ Providing feedback and maintaining dialogue about applicable standards with their constituent researchers.
- ✓ Reporting any unusual or unexpected events arising from the research, to their respective institutions.
- ✓ IEC have the authority to withdraw the ethics approval of research projects where there are sufficient concerns over the safety and well-being of research subjects.

  
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- ✓ Ensures that the universal ethical values and international scientific standards are exposed in terms of local community values and customs.

### **GENERAL GUIDELINES & GUIDELINES FOR CONDUCTING THE MEETINGS**

- ✓ IEC will hold face-to-face meetings periodically, which will be planned after the RD & SC approval of synopses/protocols/proposals.
- ✓ The dates of these meetings will be scheduled, announced and communicated to all the members in advance.
- ✓ The manuscripts which are approved by RD & SC are forwarded to the IEC. They would be sent online to all the members at least 7 days in advance of the meeting. They can review the manuscripts and come prepared to the meeting.
- ✓ Quorum is said to have reached, only when all members are present for the meeting.
- ✓ Decisions will only be made at meetings where a quorum is present.
- ✓ The Member Secretary will extend a formal welcome and invite the committee to conduct the proceedings.
- ✓ The research synopses will be handed over to all the members on the day of meeting.
- ✓ Each member would be given an opportunity to place his/her comments, queries, opinions, suggestions and remarks regarding the presented research in front of the committee.
- ✓ When queries are raised or clarifications are required by the committee members the researcher would be called for and in case the researcher is a student, the guide will also be invited to defend, discuss or justify.
- ✓ The presented synopses or protocols or proposals may be labeled as “outright accepted” or instructed to “re-submit after suggested modifications”. A synopsis might also be labelled as “outright rejected” in case the synopsis/proposal doesn’t meet the ethical integrity.
- ✓ The resubmitted manuscripts are assessed for compliance with respect to the suggestions given by the committee. Chairperson and member secretary should scrutinize the revised manuscripts and after ensuring 100% compliance, they may be labeled as accepted, without holding a meeting again.
- ✓ The chairperson & member secretary would consider the inputs from the committee members and decide whether the intended research is ethically sound and can be granted an ethical clearance to carry forward the research. This would be done after eliciting the consensus.
- ✓ All accepted synopses/protocols/proposals would be granted an approval letter drafted by IRB and authenticated with an appropriate registration number.

  
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## Research proposal submission

### **Role of institution**

1. Institution promotes conducting and publishing research by providing congenial and conducive environment to the faculty, doctoral, post graduate and undergraduate students.
2. As multiple technical, managerial, life sciences and allied health institutes are located in the same campus belonging to the same management, scope for conducting interdisciplinary, multidisciplinary and transdisciplinary research is possible and such a research is always promoted by the institution.
3. Institution believes in early immersion of students into research practice. Hence, undergraduate students are encouraged to conduct research, publish and present. ICMR, STS projects and RGUHS funded researches are being taken up by the undergraduate students, post graduate students and faculty.
4. A research culture is induced in the institution by providing regular training sessions, FDPs and CDE programs on research methodology, biostatistics, scientific writing, research protocol writing, publications and scientometrics. Institutional review board (IRB) is constituted and performing as per the guidelines set by ICMR. It has two committees namely;

- a. Research Development and Sustenance Committee (RD&SC)

This committee scrutinizes the scientific validity of the submitted research proposals. Only those research studies which are found to be scientifically valid as per the review done by this committee would be forwarded for ethical review. This committee consists of Chairperson, Member secretary, Coordinators, Internal & External subject experts. They are selected based on their subject and research expertise that they possess. The term of RDSC members is for two years, following which new members are selected

- b. Institutional Ethical Committee (IEC)

This committee scrutinizes the Ethical integrity of the research proposal which is forwarded by the research development and sustenance committee. This committee consists of a chairperson person, mandatorily an external member with the required competence and training in bioethics, research ethics and research methodology. In addition the committee has a member secretary, coordinators, external review members ( ) as per the guidelines of ICMR. The term of the IEC members is for two years, following which new members are selected. Only after a thorough review of the research proposal conducted by both the committees (RDSC & IEC), a research proposal is either approved, disapproved or instructed to modify and resubmit.



5. Once approval is given for conducting research by the IRB, the Principal investigators, co-investigators, Mentors and Guides may execute the research protocol. It is the sole responsibility of the Principal investigator along with the research team to ensure that the research is conducted ethically by adhering to all the ethical principles. Emphasis is being laid on the process of obtaining informed consent very scrupulously while recruiting the research subjects. The progress of the research should be periodically reported to IRB.
6. Any gross ethical violations noticed by the IRB would be handled stringently and at worst IRB may instruct the trial to be stopped. Any adverse reactions, serious morbidities, deaths and harms noticed while conducting research should be brought to the notice to IRB as immediately as possible. No research is admitted in the institution without obtaining prior written approval from the IRB.
7. IRB will meet twice yearly, which would be informed to all the faculty and students atleast one month in advance. When the research proposal doesnot involve any serious ethical implications like in case of invitro studies on biological samples, invitro material property studies, FEA studies, descriptive surveys (questionnaire studies) expedited reviews done and approval would be given bypassing the full committee, regular review. In such cases the opinion of subject expert and chairman along with three other members would be taken and approval given.

  
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**ROLES AND RESPONSIBILITIES OF RESEARCH DEVELOPMENT AND SUSTENANCE COMMITTEE**

Scrutinizing the scientific integrity of the submitted synopses, protocols, proposals or any other scientific manuscripts. Scientific integrity refers to:

- a. Scientific rigors maintained while planning, designing, conducting, and reporting the research (Methodological integrity)
- b. Scientific rigors maintained with respect to data treatment, data analysis and interpretation of data (Statistical integrity)
- c. Adherence to conventions of scientific writing with respect to language, grammar, punctuations, style (Scientific writing Integrity)

**ROLES AND RESPONSIBILITIES OF INSTITUTIONAL ETHICAL COMMITTEE**

1. The IEC will be competent and independent in its functioning.
2. Ensure proper review and approval of all ethical aspects of the research in an objective manner.
3. Provide advice to researchers on all aspects of welfare and safety of research participants.
4. Protect the dignity, rights and wellbeing of research participants.
5. IEC would ensure the continued validity of ethical approval of projects until the research is completed and evaluation of adverse event reports provided by researchers.
6. Any modification to the protocol has to be brought to the prior notice of IRB and approval should be obtained, otherwise it amounts to protocol violation which would attract certain strictures.
7. Providing feedback and maintaining dialogue about applicable standards with their constituent researchers.
8. Reporting any unusual or unexpected events arising from the research, to their respective institutions.

  
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9. IEC have the authority to withdraw the ethics approval of research projects where there are sufficient concerns over the safety and well-being of research subjects.
10. Ensures that the universal ethical values and international scientific standards are exposed in terms of local community values and customs.


  
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**INSTITUTION CODE OF ETHICS**

  
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## INSTITUTION'S CODE OF ETHICS FOR RESEARCH

Dayananda Sagar college of Dental Sciences, Bangalore has drafted a code of ethics which provide guidelines for professional and ethical conduct of research by the faculty, doctorate students, post graduate students and the undergraduate students. Code of research ethics is a set of principles of research conducts. It sets a benchmark for researchers while conducting their research and fulfil their duties to the research subjects, public, profession and the fellow researchers. Although ethics and laws are intricately related to each other they are not one and the same. Ethical obligations are more binding our human conscience when compared to legal stipulations. Hence, ethical obligations may and often do exceed legal duties.

The code of ethics pertains to the way in which health research has to be conducted while adhering to all the ethical principles of research. When human subjects, patients, animals are recruited for conducting research the researcher should be very careful in adhering to ethical principles. Several international and national agencies have established multiple ethical guidelines which refer to the ethical principles to be followed while recruiting subjects and also conducting and reporting of research. Majorly there are seven ethical principles which are to be strictly followed while conducting research:-


1. Social and clinical value
2. Scientific validity
3. Fair subject selection
4. Favourable risk-benefit ratio
5. Independent review
6. Informed consent
7. Respect for potential and enrolled subjects

### 1. Social and clinical value

Every research is designed with an intention to answer a specific research question. The question should be relevant and when answered by conducting a research, should be beneficial to the subjects, patients, fraternity, administrators, policy makers and community at large. The question should be justifiable so that the research subjects, patients may be asked to accept some risk or inconvenience. This principle refers to the utility, beneficence to the stake holders of research. It refers to the contribution of research output in expanding the knowledge base, improving the treatment methods, helping the community at large in reducing the burden of disease so that it justifies exposing the research subjects to the given risk and burden of research.

### 2. Scientific validity

A research study should follow scientific principles of planning, conducting,

  
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analysing, reporting and publishing. The principles of research methodology should guide the process of research scrupulously. The scientific rigors maintained in a research ultimately provides validity to research. Scientifically invalid research is outright unethical because it is a waste of resources and subjects or patients are being exposed to unnecessary risks.

3. Fair subject selection

The subject selected for research should not come under vulnerable groups. Vulnerability refers to physical vulnerability, psychological vulnerability, social vulnerability, financial vulnerability and many more. The research subjects who participate and accept the risks involved should also be in a position to enjoy the benefits. Soon after completing the research a debriefing session should be organised and the benefits of the research should be extended to the other group which did not receive the benefit while the research was being conducted. Orphans, specially abled, institutionalised children, mentally unsound and insane, pregnant women, aged and shelter less, asylum seekers, illegal emigrants and ethnic minorities are considered as vulnerable groups unless proved otherwise. The researchers should be careful to avoid such vulnerable groups being recruited since they are easily available, accessible to conduct research unless there is a strong reason to justify their inclusion. Institutional Review Board (IRB) should look into this issue and resolve any deficit in fairness while selecting research subjects.

4. Favourable risk-benefit ratio

Any research exposes the research subjects or participants to some degree of inconvenience, unknown and known risks while providing some benefits. There is uncertainty with respect to the equation between risks and benefits of a research until research it is completed. Every effort should be made by the researchers to minimise the risks and maximise the benefits. The risks may be physical, psychological, economic, or social. There are certain scientific methods to assess the anticipated risks and the potential benefits of a given research. Researchers should establish that the benefits are overwhelming when compared to risks. IRB should strictly scrutinize the research proposal and ascertain that the potential benefits supersede the anticipated risks well before the approval is given.

5. Independent review

Any research proposal should be thoroughly reviewed by a review board consisting of a panel of experts, nonexperts, lay persons as prescribed by the guidelines of a national, international, local, ethical organisations or agencies. The panel should scrutinize the scientific and ethical validity of the intended research by asking important questions;

- a. Are those who are conducting, examining, diagnosing and treating the research subjects free of bias?
- b. Is the methodology adopted by the researchers scientifically sound?
- c. Are the human rights of the research subjects protected at all cost?

d. Has the trial being ethically designed and risk benefit ratio favourable?

The review board monitors the study even while it is going on in order to keep a strict watch on any violations. In our institution a structured IRB is established as per the guidelines of ICMR.

6. Informed consent

It is the primary duty of the researcher to obtain a written informed voluntary consent from the research participant. The prospective participant should be given all the required information about the research in which he/she is participating, the pros and cons of participating in the research, the right to withdraw from research at any phase, the role need to be played by the participant and the minimal information about the nature of the intervention in a language simple and understandable by the patient. This can be done by preparing a "Participant information letter" which is either handed over or explained to the patient. After giving thorough information, the consent is obtained from the participant so that human rights are protected. At times when the participant is legally a minor, proxy consent is obtained from the parents or the legal guardians after providing the required information through the participant information letter. Coercion, appeasement and exorbitant incentives for participating in the research are strictly prohibited. The research subject is given access to the member secretary of IRB by providing the contact details so that the participants are free to communicate any grievances at any time while the research is going on.

7. Respect for potential and enrolled subjects

The participant should be treated with respect as soon as they come forward to participate in the research till the completion of research and even after the research completed. This amounts to protecting the human rights and the rights of a research participant.

- a. Respecting the privacy and maintaining the confidentiality with respect to the data and the identity of the participant during the research and after.
- b. Permitting the participants to withdraw from the research at any moment without any penalty. This refers to respecting their decision at any phase of research.
- c. Monitoring their welfare, adverse reactions, side effects and their health status regularly so that at times the decision is taken by the researcher to remove the participant from the respective arm.
- d. After the research is completed a debriefing session is organised and a clear information is given to the participant about the research outcomes and the arm under which the subject was treated so that no suspense is maintained thereafter with respect to the intervention and the details of the intervention which were administered.

Prof. Dr. Hemanth M


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**Guidelines for Research Publications**

  
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# RESEARCH PROPOSAL SUBMISSION AND REVIEW PROTOCOL

## ROLE OF INSTITUTION

1. Institution promotes conducting and publishing research by providing congenial and conducive environment to the faculty, doctoral, post graduate and undergraduate students.
2. As multiple technical, managerial, life sciences and allied health institutes are located in the same campus belonging to the same management, scope for conducting interdisciplinary, multidisciplinary and transdisciplinary research is possible and such a research is always promoted by the institution.
3. Institution believes in early immersion of students into research practice. Hence, undergraduate students are encouraged to conduct research, publish and present. ICMR, STS projects and RGUHS funded researches are being taken up by the undergraduate students, post graduate students and faculty.
4. A research culture is induced in the institution by providing regular training sessions, FDPs and CDE programs on research methodology, biostatistics, scientific writing, research protocol writing, publications and scientometrics. Institutional review board (IRB) is constituted and performing as per the guidelines set by ICMR. It has two committees namely;

- a. Research Development and Sustenance Committee (RD&SC)

This committee scrutinizes the scientific validity of the submitted research proposals. Only those research studies which are found to be scientifically valid as per the review done by this committee would be forwarded for ethical review. This committee consists of Chairperson, Member secretary, Coordinators, Internal & External subject experts. They are selected based on their subject and research expertise that they possess. The term of RDSC members is for two years, following which new members are selected

- b. Institutional Ethical Committee (IEC)

This committee scrutinizes the Ethical integrity of the research proposal which is forwarded by the research development and sustenance committee. This committee consists of a chairperson person, mandatorily an external member with the required competence and training in bioethics, research ethics and research methodology. In addition the committee has a member secretary, coordinators, external review members ( ) as per the guidelines of ICMR. The term of the IEC members is for two years, following which new members are selected. Only after a thorough review of the research proposal conducted by both the committees (RDSC & IEC), a research proposal is either approved, disapproved or

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instructed to modify and resubmit.

5. Once approval is given for conducting research by the IRB, the Principal investigators, coinvestigators, Mentors and Guides may execute the research protocol. It is the sole responsibility of the Principal investigator along with the research team to ensure that the research is conducted ethically by adhering to all the ethical principles. Emphasis is being laid on the process of obtaining informed consent very scrupulously while recruiting the research subjects. The progress of the research should be periodically reported to IRB.
6. Any gross ethical violations noticed by the IRB would be handled stringently and at worst IRB may instruct the trial to be stopped. Any adverse reactions, serious morbidities, deaths and harms noticed while conducting research should be brought to the notice to IRB as immediately as possible. No research is admitted in the institution without obtaining prior written approval from the IRB.
7. IRB will meet twice yearly, which would be informed to all the faculty and students atleast one month in advance. When the research proposal doesnot involve any serious ethical implications like in case of invitro studies on biological samples, invitro material property studies, FEA studies, descriptive surveys (questionnaire studies) expedited reviews done and approval would be given bypassing the full committee, regular review. In such cases the opinion of subject expert and chairman along with three other members would be taken and approval given.

### **RESEARCH MISCONDUCT AND OTHER UNACCEPTABLE PRACTICES**

Research misconduct amounts to breach of trust on the part of researchers. There are usually three types of research misconduct, namely;

- a. Fabrication: It is making up results which amounts to concocting and fudging
- b. Falsification: It refers to manipulating research materials, equipment, instruments and processes. Any changing, omitting, suppressing the data or results without justification also amounts to falsification.
- c. Plagiarism: Using and quoting other people's work without giving due credit to the original source amounts to plagiarism. There are software to check for plagiarism. When a research write up is subjected to plagiarism check and if the content is found to be plagiarized an admissible limit, the write up would not be allowed to be sent for publication. The researchers in the institution are strictly instructed to subject their write up to plagiarism to unadmissible check and submit their report to the IRB before they are permitted to upload the manuscript for publication.
- d. Intellectual property rights (IPR) is an important issue related to research and innovations. Violation of IPR is a serious offense and the researchers should have a fair knowledge. In this connection regular seminars, seminars and

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training sessions are being organized by the IRB for the benefit of the researchers in the institution.

### **PUBLICATION AND DISSEMINATION**

These are some stipulated code of ethics with respect to Publications that happen when students and faculty are affiliated to our institution and even after by name of institution. They are:-

1. All the authors are responsible for the content of the publication. Authorship and order of meeting the authors is an important issue which the research team has to resolve before starting the research. Only those researchers who have substantially contributed for the research work should be considered as authors. The corresponding author should be responsible for all communications and preferably he/she should be the first author.

2. Authors should only acknowledge the work, help, assistance and intellectual contributions of any collaborations assistants, internal or external funding or any other agencies and also individuals who extended their support to the research work in any form.

3. It is ethical responsibility of all the others to declare any conflicts of interest (financial or any other) if that exists. If a conflict of interest exists and not possible to manage and resolve author/s should gracefully stay away from the research project and should not claim authorship.

4. Authors should consider negative results as important and go ahead publishing. Negative results are as important as positive results as long as research is conducted with scientific rigors.

5. All the authors should read the final draft and provide inputs before consenting to be sent to editorial board. Once accepted for publishing by any journal editorial board, the copyright form has to be duly signed by all the authors or the corresponding author as per the guidelines of editorial board of the journal.

6. Duplicate publications by any researcher would be dealt seriously. Scientific misconduct such as fabrication, falsification and Plagiarism are considered as serious violations of code of ethics. Such violations are brought to the notice of special committee which will take necessary actions.

7. In addition to above said violations there may be some other unacceptable practices. When such practices are noticed the concerned researchers are liable to be sanctioned or punished by the special committee after the impartial enquiry of the alleged person/s.

8. Self citations when justified do not constitute ethical violations. But when self citations are done with the purpose of boosting one's reputation or metrics, the act is considered as ethical violation.

9. Gifting authorship is a ethical breach and institution discourages, prevents and

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prohibits such a practice

10. IRB of the institution will make every effort to prevent discourage and stop such acceptable practices. In this connection, periodic training would be provided to the researchers. Mentoring programs would be arranged so that the mentors ensure that the research ethics be practiced while conducting research.

### **DEALING WITH VIOLATIONS AND ALLEGATIONS OF RESEARCH MISCONDUCT(SCIENTIFIC MISCONDUCT)**

Any ethical violations brought to the notice of IRB and institution would be dealt by special committee having methodological ethical and social experts. Investigations are held in a consistent and transparent manner enough opportunity is provided to the accused to defend before taking a final decision.

- a. Enquiry is going to be fair ,comprehensive and held in a manner without compromising accuracy objectivity e and thoroughness.
- b. Enquiry is carried in a manner that it reaches logical conclusion.
- c. Proceedings are held in a manner that confidentiality is maintained.
- d. Institution makes every effort to protect the rights of whistle blowers. Their career professional growth is not allowed to be endangered for having blown the whistle. The Action is going to be taken against persons on whom allegations of misconduct is upheld . the action should be proportional to the intensity of violation.
- f. Appropriate restorative action be taken if the alleged person is exonerated of allegations of misconduct
- g. Any person accused or alleged of scientific misconduct is considered innocent until proven otherwise.

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# Dayananda Sagar College of Dental Sciences

## Policy Document

INTER DEPARTMENTAL MEETINGS COMMITTEE



**Dayananda Sagar College of Dental Sciences,**  
**Shavige Malleshwara Hills, Kumaraswamy Layout,**  
**Bengaluru**

DSCDS/Internal/2022-2023/

Date:10/12/2022

**POLICY DOCUMENT**  
**INTER DEPARTMENTAL MEETINGS COMMITTEE**

**Constitution of the committee:**

The Interdepartmental meetings committee will comprise of the Principal, Head of the Departments and the next senior faculty in the department.


**Roles and responsibilities**

- 1.To schedule & conduct interdepartmental meetings between departments comprising of interdisciplinary topics and case discussions in consultation with various concerned departments in college.
2. To maintain the records of interdepartmental meetings
3. The Interdepartmental meeting committee shall meet once every 6 months to review the present activities and plan for future actions
4. Shall maintain the minutes of meetings
5. Shall provide necessary information to office as and when required.

**Schedule of interdepartmental meetings:**

- The mandatory Interdepartmental Meetings will be held on the 3<sup>rd</sup> Thursday of every month.
- If the third Thursday happens to be a holiday, the IDM shall be conducted on succeeding thursday. The same shall apply in case the concerned department has a conference / PG convention or there is any other program. This has to be informed to the committee at least a month in advance.
- The allotment of department will be discussed in the meeting held at an interval of 6 months and scheduled with consensus of respective departments.
- The interdepartmental meet shall be for 1 Hour 30 Minutes between (9:30am and 11am) which is divided as follows:
  - 9:30am to 9:45am : Presentation by the allotted department
  - 9:45am to 10:00am : Discussion

Any additional relevant cases adding value to the main presentation or related to the main presentation can be presented

  
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- 10:00am to 10:20am : Case Presentation 1 (10 mins. Presentation followed by discussion)
- 10:20am to 10:40am : Case Presentation 2 (10 mins. Presentation followed by discussion)
- Every month is allotted to one department (for the first half of IDM). Any other department which has an interesting case for discussion will be placed in the second half of the IDM. Any two departments can present these cases in the second half (with Prior information at least one week prior to the IDM).
- The topic of presentation will be intimated to the committee 2 weeks prior and it is the responsibility of the IDM committee members to inform other faculty and postgraduate students of their respective departments. The Department responsible for the presentation in a particular month will inform other faculty on the faculty group regarding the presentation.
- Innovative studies, new concept, innovative Program conducted, cutting edge research, new learning methods, new treatment methods can be included in the scope of presentation.
- Presentation Will be by the postgraduate students and shall be on rotation.
- All the interested faculty shall attend the program. However, it is mandatory for faculty of the presenting department to be present.
- Attendance and proceedings of the IDM shall be maintained by the department incharge and a copy of the same to be submitted to the file of the IDM committee.
- Letter of excuse has to be submitted to the committee in case faculty are not able to attend the meeting.
- Postgraduate students who absent themselves should submit leave letter signed by their HOD to the committee.
- Faculty should have healthy Discussion / criticism and encourage post graduate students to be actively involved in the learning process.
- The next allotted department can inform the topic if it has been already finalized at the closure of the IDM.
- In addition to the scheduled mandatory IDM, individual departments can conduct the meetings in association with concerned departments as and when required. The report and attendance of the same should be sent to the committee file in 2 working days.
- The Interdepartmental meet committee shall meet once every six months to review the present activities and plan for future action.

  
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**Bengaluru**

**Schedule of interdepartmental meetings**

<b>SI No</b>	<b>Date</b>	<b>Department</b>
1.	19-01-2023	Oral medicine & Radiology
2.	16-02-2023	Oral Surgery
3.	16-03-2023	Conservative & Endodontics
4.	20-04-2023	Prosthodontics
5.	18-05-2023	Periodontics
6.	15-06-2023	Orthodontics
7.	20-07-2023	Public health Dentistry
8.	17-08-2023	Oral Pathology and Pedodontics
9.	21-09-2023	Basic Sciences

  
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**Bengaluru**

DS CDS/Internal/2018-19/

Date: 01/09/2018

**POLICY DOCUMENT**  
**INTER DEPARTMENTAL MEETINGS COMMITTEE**

**Constitution of the committee:**

The Interdepartmental meeting committee will comprise of the Principal, Dean, Head of the Departments and the next senior faculty in the department.

**Roles and responsibilities**

1. To schedule & conduct interdepartmental meetings between departments comprising of interdisciplinary topics and case discussions in consultation with various concerned departments in college.
2. To maintain the records of interdepartmental meetings
3. The Interdepartmental meeting committee shall meet once every 4 months to review the present activities and plan for future actions
4. Shall maintain the minutes of meetings
5. Shall provide necessary information to office as and when required.


**Schedule of interdepartmental meetings:**

The interdepartmental meet shall be for 1 Hour 30 Minutes between (9:15am and 10:30am) which is divided as follows:

- 9:15am to 9:40am : Presentation by the post graduate students of the concerned departments
- 9:40am to 10:30am: Discussion


Time allotted for each presentation will be 10 min

- The scheduled presentation should be intimated to the concerned departments a week prior
- All the faculty & post graduate students of departments concerned to the topic of presentation shall attend the program.
- Attendance and proceedings of the IDM shall be maintained by the concerned department of the IDM committee.

  
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- Letter of excuse has to be submitted to the committee in case faculty are not able to attend the meeting.
- Postgraduate students who absent themselves should submit leave letter signed by their HOD to the committee.

The tenure of the interdepartmental committee is for a period of 3 years

  
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**ROLES AND RESPONSIBILITIES OF HOSTEL COMMITTEE**

1. The committee will meet at the beginning of the academic year to know the about the accommodation of the students and mess facilities.
2. Regular review meetings will be held once every Four months
3. A minimum members should be present in order to conduct the meeting are chair person, Member secretary, Member, Warden and student representative.
4. In the absence of the Chairman, the Member secretary and one of the warden may chair the session.
5. The agenda has to be prepared atleast a week before the meeting and intimations should be sent atleast 3 days before the meeting.
6. Discussion points will be documented and a summary report will be prepared. In case of confusions and/or need for clarifications, one will bring the issues to the notice of the Principal/ Chairman of Committee.
7. The Warden of the particular hostel is responsible for maintaining the records of the list of dental students, their problems and the remedies undertaken. The committee member will collect the necessary details of the requirements from the students. The documents of the meetings and activities conducted by the committee will be present with the Member secretary.
8. The chairman's decision will be final

  
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**Interdepartmental meet Committee**

**Roles and responsibilities**

- 1.To prepare a schedule, conduct and monitor interdepartmental meets between departments comprising of interdisciplinary topics and case discussions in consultation with various departments in college.
2. Submit the schedule for the Academic Advisory Council for approval
- 3.The committee will meet once in 3 months to review the interdepartmental meets
- 4.To prepare and maintain a report of each interdepartmental meet and maintain the records
5. Shall submit the report of the meets conducted every quarter to the AAC.
- 6.Shall maintain the minutes of meetings
- 7.Shall provide necessary information to office as and when required.

  
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Dayananda Sagar College of Dental Sciences

Policy Document

Internal Complaints Committee



**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES**  
**Shavige Malleshwara Hills, Kumaraswamy layout, Bengaluru**

**Policy Against Sexual Harassment of Women**  
**at work place**

  
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**INTERNAL COMPLAINTS COMMITTEE (ICC) to prevent Sexual Harassment of women at  
work place**

**As per the Supreme Court of India Directive, it is mandatory to ensure safety of women at  
workplace**

**POLICY AGAINST SEXUAL HARASSMENT OF WOMEN AT THE WORKPLACE**

**I. Preamble**


The Parliament of India passed the "Sexual Harassment of Women at Workplace (Prevention, Prohibition, and Redressal) Act," in the year 2013. The ACT provides protection against sexual harassment of women at workplace and for the prevention and redressal of complaints of sexual harassment and for the matters connected therewith or incidental thereto.

Educational institutions are also bound by the Supreme Court's directive and the Act. Dayananda Sagar College of Dental Sciences (DSCDS), Bengaluru is committed to creating and maintaining an environment which is free of all forms of gender violence, sexual harassment, and discrimination on the basis of sex/gender. Following this, the institute is committed to uphold the Constitutional mandate ensuring the above mentioned human rights of all those who fall within its jurisdiction. As directed by the act DSCDS has constituted a committee called "Internal Complaint Committee to Prevent Sexual Harassment of Women at the Workplace." The following policy has been made keeping in mind the above facts.

**II. Objectives**

The objectives of the Internal Complaint Committee is to Prevent Sexual Harassment of Women at the Workplace are as follows:

- To develop a policy against sexual harassment of women at the institute.
- To evolve a permanent mechanism for the prevention and redressal of sexual harassment cases and other acts of gender based violence at the Institute.
- To ensure the implementation of the policy in letter and spirit through proper reporting of the complaints and their follow-up procedures.
- To uphold the commitment of the institute to provide an environment free of gender based discrimination.
- To create a secure physical and social environment to deter any act of sexual harassment.
- To promote a social and psychological environment to raise awareness on sexual harassment in its various forms.

  
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### III. Code of conduct for work place

Sexual harassment is a serious criminal offence, which can destroy human dignity and freedom. In an effort to promote the well being of all women employees at the work place the following code of conduct has been prescribed:-

1. It shall be the duty of the employer to prevent or deter the commission of any act of sexual harassment at the work place.
2. Sexual harassment will include such unwelcome sexually determined behaviour by any person either individually or in association with other persons or by any person in authority whether directly or by implication such as:

#### Behaviour that constitute sexual harassment at the workplace:

- Making sexually suggestive remarks or innuendos.
- Serious or repeated offensive remarks, such as teasing related to a person's body or appearance.
- Offensive comments or jokes.
- Inappropriate questions, suggestions or remarks about a person's sex life.
- Displaying sexist or other offensive pictures, posters, mms, sms, whatsapp, or e-mails.
- Intimidation, threats, blackmail around sexual favours.
- Threats, intimidation or retaliation against an employee who speaks up about unwelcome behaviour with sexual overtones.
- Unwelcome social invitations, with sexual overtones commonly understood as flirting.
- Unwelcome sexual advances which may or may not be accompanied by promises or threats, explicit or implicit.
- Physical contact such as touching or pinching.
- Caressing, kissing or fondling someone against her will (could be considered assault).
- Invasion of personal space (getting too close for no reason, brushing against or cornering someone).
- Persistently asking someone out, despite being turned down.
- Stalking an individual.
- Abuse of authority or power to threaten a person's job or undermine her performance against sexual favours.
- Falsely accusing and undermining a person behind closed doors for sexual favours.
- Controlling a person's reputation by rumour-mongering about her private life.

  
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**Behaviour that may indicate underlying workplace sexual harassment and merit inquiry:**

- Criticizing, insulting, blaming, reprimanding or condemning an employee in public.
- Exclusion from group activities or assignments without a valid reason.
- Statements damaging a person's reputation or career.
- Removing areas of responsibility, unjustifiably.
- Inappropriately giving too little or too much work.
- Constantly overruling authority without just cause.
- Unjustifiably monitoring everything that is done.
- Blaming an individual constantly for errors without just cause.
- Repeatedly singling out an employee by assigning her with demeaning and belittling jobs that are not part of her regular duties.
- Insults or humiliations, repeated attempts to exclude or isolate a person.
- Systematically interfering with normal work conditions, sabotaging places or instruments of work.
- Humiliating a person in front of colleagues, engaging in smear campaigns.
- Arbitrarily taking disciplinary action against an employee.
- Controlling the person by withholding resources (time, budget, autonomy, and training) necessary to succeed.

**Behaviours that may not constitute sexual harassment:**

- Following-up on work absences.
- Requiring performance to job standards.
- The normal exercise of management rights.
- Work-related stress e.g. meeting deadlines or quality standards.
- Conditions of works.
- Constructive feedback about the work mistake and not the person.


**Forms of workplace sexual harassment**

Generally workplace sexual harassment refers to two common forms of inappropriate behaviour:

- Quid Pro Quo (literally 'this for that') - Implied or explicit promise of preferential/detrimental treatment in employment - Implied or express threat about her present or future employment status
- Hostile Work Environment - Creating a hostile, intimidating or an offensive work environment - Humiliating treatment likely to affect her health or safety

**IV. Jurisdiction**

The policy and the rules & regulations would apply to all students, faculty and non-teaching staffs on active roles of DSCDS. The policy and the rules & regulations would

  
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also apply to service providers and outsiders who may be within the territory of the DSCDS at time of commission of the act coming under the purview of the policy.


1. The policy would apply not only inside the campus but also on off-campus official duty (workshops, field work, group holidays/excursions organized by DSCDS, interviews/meeting with outside people and any other activity organized by DSCDS outside the campus including the period of travelling for such activity).
2. In particular, the rules and procedures laid down in this policy shall be applicable to all complaints of sexual harassment made:
  - By a student against a member of the academic or non-teaching staff or a co-student or by a member of the academic or non-teaching staff against a student or another member of the academic or non-teaching staff in either case, irrespective of whether sexual harassment is alleged to have taken place within or outside the campus.
  - By a service provider or an outsider against a student or a member of the academic or non-teaching staff or by a student or a member of the academic or non-teaching staff against an outsider or a service provider, if the sexual harassment is alleged to have taken place within the campus.

In the above, the following definitions will apply:

Members of the IIPS include faculty (permanent and temporary), staff (permanent and temporary), research scholars/students (full time and part time) and any other visitors.

- **Faculty** refers to any person or the staff of the Institute who is appointed to a faculty position, whether full time/temporary/ad-hoc/ part-time/ visiting/ honorary or on special duty /deputation and shall also include faculty employed on a casual or project basis.
- **Staff** refers to any person in the Institute who is not included in the category of faculty. It shall also include contract workers and daily wagers.
- **Research scholars** refers to PhD scholars (full time and Part time).
- **Students** of the Institute include all BDS, MDS students.
- **Any other visitor** refers to any person visiting library / faculty members / any other place in campus; or appearing /participating in interview/ entrance tests /seminars/ workshops/conferences.
- **Campus** refers to all places of work and residence within the institute territory. It includes all administrative section, academic section, library & computer centre, project offices as well as hostel & mess, security cabin and public places, etc. within the DSCDS campus.

In order to implement the policy, a committee shall be appointed whose composition and mandate would be as described below.

  
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#### **V. Constitution of the Internal Committee**

The Committee shall consist of following nine members, who shall be appointed by the Principal as under, namely:

1. A senior female Faculty member from the Institute, as the Chair person
2. Two faculty members (one female and one male)
3. Two staff members (one female and one male from Group 'B' & 'C')
4. Three student members - BDS, MDS, PhD (two females and one male)
5. One external female member (preferably lawyer by profession or from NGO committed to the cause of women or familiar with issues related to sexual harassment)
6. At least one of the members shall be a woman belonging to the scheduled castes or the scheduled tribes or the other backward classes or minority community notified by the Central Government, from time to time
7. The term of each member shall be of three years
8. The previous committee members will continue till the new committee is constituted at the end of three years term

#### **VI. Disqualification**

No person shall be appointed or continue to be a member of the Committee, if he/she is

1. Declared insolvent by the competent Court;
2. Lunatic or a person of unsound mind;
3. Convicted for an offence involving moral turpitude;
4. Involved in a misconduct amounting to immoral trafficking;
5. Convicted in any criminal offence/s;
6. Facing any inquiry relating to sexual harassment or found guilty of sexual harassment; punished for any misbehaviour or misconduct.

#### **VII. Statutory Status**

The Internal Committee to Prevent Sexual Harassment of Women at the Workplace is empowered to carry out the mandate of the policy and has statutory power as are vested in a civil court under the Code of Civil Procedure, 1908 when trying a suit in respect of the following matters:

1. Summoning and enforcing the attendance of any person (COMPLAINANT /COMPLAINEE /WITNESS) and examining him/her on OATH and recording the statements
2. Requiring the discovery and production of valid documents
3. Any other matter which may be prescribed

  
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### **VIII. Power and Duties of the Committee:**

The committee is NOT to act as a moral police; neither will it intrude on anyone's privacy. The role of the committee is to create awareness about sexual harassment and to deal with and recommend punishment for non-consensual acts of sexual harassment, and not to curtail sexual expression within the campus. Members are expected to be sensitive to the issue and not let personal biases and prejudices (whether based on gender, caste, class) and stereotypes (e.g. predetermined notions of how a "victim" or "accused" should dress up or behave) affect their functioning as members of the committee.

#### **A. Preventive**

To create and ensure a safe environment that is free of sexual harassment, including safety from persons/visitors coming into contact at the workplace. To publicise the policy and details of committee members in English, Kannada and Hindi widely, especially through notice boards and on the website.

#### **B. Gender Sensitization**

Gender Sensitization involves creating awareness about issues of gender and sexuality and working towards and creating an enabling environment of gender justice where all can work together with a sense of personal security and dignity. Sensitization and awareness will be a basic function of the committee formed. This can be achieved by means of seminars workshops, discussions etc.

#### **C. Remedial**

1. The mechanism for registering complaints should be safe, accessible, and sensitive.
2. To take cognisance of complaints about sexual harassment, conduct enquiries, provide assistance and redressal to the victims, recommend punitive action or take immediate action against the harasser, if necessary.
3. To recommend disciplinary action for any complaint registered with the committee after the enquiry to the Principal/administration/or concerned authorities and to follow-up the action and monitor the same
4. To recommend to the institute to provide assistance to the complainant if she so chooses to file a complaint in relation to the offence under the Indian Penal Code or any other law for the time-being in force.
5. To recommend the institute to provide the medical intervention with the consent of the complainant or even without consent in such cases where the complainant is physically or mentally incapacitated to give her consent.
6. To inform the administration to arrange for appropriate psychological, emotional, and physical support (in the form of counselling, security and other assistance) to the victim if she so desires.

  
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### **Working Rules of ICC**

In pursuance of the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act 2013 and the rules framed there under, the institute hereby adopts the following procedure for determining complaints filed to the Internal Complaints Committee (ICC) constituted under the Act. The procedure complies with the basic principles of natural justice and fair play and has to be adhered to in all complaints, though, in individual complaints, for reasons to be stated in writing, the ICC reserves the right to make exceptions to the procedure stated hereunder.


1. Any aggrieved woman may make, in writing, a complaint of sexual harassment at work place to the ICC, within a period of three months from the date of incident and in case of a series of incidents, within a period of three months from the date of last incident. 6 copies of a written complaint should be submitted to the committee or any of its members along with list of witnesses and supporting documents. Additional documents and list of witnesses can be submitted to ICC at a later stage during the proceeding. Provided that where such complaint cannot be made in writing, the Presiding Officer or any other member of the ICC shall render all reasonable assistance to the woman for making the complaint in writing. Provided further that the ICC for the reasons to be recorded in writing, can extend the time limit not exceeding three months, if it is satisfied that the circumstances were such which prevented the woman from filing a complaint within the said period.
2. Any complaint received by the members should be immediately forwarded to the Presiding Officer, and this must be notified to other committee members at the earliest and not later than 3 days and a meeting should be called for discussing the matter.
3. The committee shall discuss and decide on its jurisdiction to deal with the case or reject the complaint prima facie and recommend to the Institute that no action is required to be taken in the matter.
4. Notice shall be issued to the respondent within 7 working days of receipt of the complaint and 10 working days shall be given for submission of reply (along with the list of witnesses and documents.)
5. The committee will provide assistance to the aggrieved woman, if she so chooses, to file a police complaint in relation to an offence under Indian Penal Code.
6. The committee may, before initiating an inquiry, at the request of the aggrieved woman, take steps to settle the matter between her and the respondent through conciliation.
7. No monetary settlement shall be made as the basis of conciliation. Where a settlement has been arrived at, the ICC shall record the settlement so arrived and forward the same to the employer for necessary compliance.

  
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8. The committee shall provide the copies of the settlement as recorded under (7) to the aggrieved woman and the respondent. Where a settlement is arrived at, no further inquiry shall be conducted by the ICC.
9. If conciliation is found to be not feasible, notice will be issued to both parties for hearing.
10. The committee may direct the concerned to ensure the safety and protection of the aggrieved woman if and when required.
11. As an interim measure, ICC may recommend -
  - a) The transfer of the aggrieved woman or the respondent to another section or department as deemed fit by the committee.
  - b) Grant leave to the aggrieved woman up to a period of three months or restrain the respondent from exercising any administrative authority or supervision or academic evaluation of the aggrieved woman.
  - c) Grant such other relief to the aggrieved woman as the case may require.
12. The committee shall proceed to make inquiry into the complaint in accordance with the provisions of the service rules applicable to the respondent considering sexual harassment as misconduct.
13. The Presiding Officer shall convene the first hearing of the enquiry. The respondent, the aggrieved woman, and the witnesses shall be intimated at least 7 working days in advance in writing of the date, time and venue of the enquiry proceedings. The subsequent proceedings may be on a day to day basis, to be decided by ICC.
14. The committee shall provide reasonable opportunity to the aggrieved woman and the respondent for presenting and defending her/his case.
15. The committee may at any time during the enquiry proceedings, preclude the face-to-face examination of the respondent and the aggrieved woman and/or their witnesses keeping in view the need to protect the aggrieved woman or the witnesses from facing any serious health and/or safety problems.
16. The committee may call any person to appear as a witness if it is of the opinion that it shall be in the interest of justice. The aggrieved woman/respondent has to submit the written reply before the committee within the specified time given.
17. The committee shall have the right to summon, as many times as required, the respondent, aggrieved woman and/or any witnesses for the purpose of supplementary testimony and/or clarifications.
18. The committee shall have the power to summon any official papers or documents pertaining to the aggrieved woman as well as the respondent.
19. The past sexual history of the aggrieved woman shall not be probed into as such information shall be deemed irrelevant to a complaint of sexual harassment.

  
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20. The committee shall have the right to terminate the enquiry proceedings and to give an ex party decision on the complaint, should the respondent fail, without valid ground, to be present for three consecutive hearings convened by the Presiding Officer.
21. The aggrieved woman and the respondent, or any one person on her/his behalf, shall have the right to examine written transcripts of the recordings with the exclusion of witnesses' names and identities. Any person nominated by the aggrieved woman and/or the respondent on her/his behalf shall be (only) either a student, or a member of the academic or non-teaching staff. No person who has been found guilty of sexual harassment shall be accepted as a nominee. The aggrieved woman/respondent should inform the Presiding Officer specifically if they wish to exercise this right. The Presiding Officer shall allow access to such documents on a specific date to be intimated at least two days in advance to each of the parties concerned. At no point in time, however, can the concerned parties take these documents outside the office.
22. The aggrieved woman and the respondent shall be responsible for presenting their witnesses before the committee. However, if the committee is convinced that the absence of either of the parties to the disputes is on valid grounds, the committee shall adjourn that particular meeting of the committee for a period not exceeding five days. The meeting so adjourned shall be conducted thereafter, even if the person concerned fails to appear for the said adjourned meeting without prior intimation/valid ground.
23. All proceedings of the ICC shall be recorded in writing. The record of the proceedings and the statement of witnesses shall be endorsed by the persons concerned as well as the committee members present in token of authenticity thereof. In case the minutes cannot be reduced in writing the same day, as audio recording of the proceedings may be made, and the written proceedings will be authenticated on a next available opportunity.
24. If the aggrieved woman desires to tender any documents by way of evidence, the committee can supply true copies of such documents to the respondent. Similarly, if the respondent desires to tender any documents in evidence, the committee shall supply true copies of such documents to the aggrieved woman.
25. In the event the committee thinks that supplementary testimony is required, the Presiding Officer shall forward to the persons concerned a summary of the proceedings and allow for a time period of seven days to submit such testimony, in person or in writing, to the committee.
26. The aggrieved woman and the respondent shall have the right of cross-examination of all witnesses. However such cross-examination shall be conducted in the form of written questions and responses via the committee only. The respondent shall have no right to directly cross-examine the aggrieved woman or her witnesses.

  
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27. The respondent/aggrieved woman may submit to the committee, a written list of questions that he/she desires to pose to the aggrieved woman/witness. The committee (ICC) shall retain the right to disallow any questions that it has reason to believe to be irrelevant, mischievous, slanderous, derogatory or gender-insensitive.
28. Amicus Curie can be called for helping the committee if and when required.
29. After concluding its investigation, the committee shall submit a detailed reasoned report to the Institute.
30. If the committee finds no merit in the allegations, it shall report to the institute.
31. In the event the committee finds that the allegation(s) against the respondent have been proved, it shall recommend the nature of action to be taken by the Institute. The following actions may be recommended:
  - a. A written apology
  - b. Warning
  - c. Reprimand or censure
  - d. Withholding of promotion
  - e. Withholding of pay rise or increments
  - f. Undergoing a counselling session
  - g. Carrying out of community service
  - h. Terminating the respondent from service
  - i. Any other punishment according to the service rules applicable to the respondent
32. When the committee arrives at the conclusion that the allegation against the respondent is malicious or the aggrieved women or any other person making the complaint has made the complaint knowing it to be false or the aggrieved women or any other person making the complaint has produced any forged or misleading document, it may recommend to the institute to take action against such falsification.
33. Nothing precludes the institute authority from taking cognisance of any new fact or evidence which may arise or be brought before it during the pendency of the inquiry proceedings or even after the communication of the findings to appropriate institute authorities.
34. If the allegation(s) is/are proved against the respondent, the committee may direct the institute to ensure the payment of compensation to the aggrieved woman by the respondent. The determination of compensation to the aggrieved woman shall be decided based on the following facts:
  - i. The mental trauma, pain, suffering and emotional distress caused to the aggrieved woman.
  - ii. The loss of career opportunity due to the incident of sexual harassment.
  - iii. Medical expenses incurred by the victim for physical or psychiatric treatment
  - iv. The income and financial status of the respondent

  
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- v. Feasibility of such payment in lump sum or in instalments
35. The institute authorities will file a compliance report to the committee within 30 days of issuance of such recommendation.
  36. ICC shall have the necessary powers to take suo motu notice of incidents of sexual harassment and/or gender injustice in the institute campus and act against the same in such manner as it deems appropriate.
  37. The identity of the aggrieved woman, respondent, witnesses and proceedings of the committee and its recommendations and the action taken by the institute shall not be published, communicated or made known to the public, press or media in any manner and it will be outside the purview of the Right to Information Act, 2005.
  38. No legal practitioner will be allowed to represent either the aggrieved woman or the respondent in proceedings before the Complaints Committee.
  39. The aggrieved woman or respondent may prefer an appeal to the competent authority.

#### **\*Punishment for false or malicious complaint and False Evidence**

Where the Internal committee of the campus arrives at a conclusion that the allegation against the respondent is malicious or the aggrieved woman or any other person making the complaint has made the complaint knowing it to be false or the aggrieved woman or any other person making the complaint has produced any forged or misleading document, it may recommend to the competent authority, to take action against the woman or the person who has made the complaint under, sub-section (2) of section 9, in accordance with the provisions of the service rules applicable to her or him or where no such service rules exist, in such manner as may be prescribed.

#### **Work Flow at a glance**

##### Complaints Committee's Checklist

- Review the written complaints and response to complaints
- Review the applicable policy, the Act/Rules, Vishaka Guidelines and other relevant laws
- Develop a plan
- Meet with the complainant
- Meet with the respondent
- Meet with the witnesses
- Record statements and have them dated and signed
- Review and adapt the plan, as needed
- Proceed with further interviews, as needed
- Analyse all the facts to develop reasoning
- Arrive at the findings

  
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- Give recommendations
- Prepare the report
- Submit the file to the organization or District Officer for implementation of the recommendations and for safe keeping

#### Timelines as per the Act

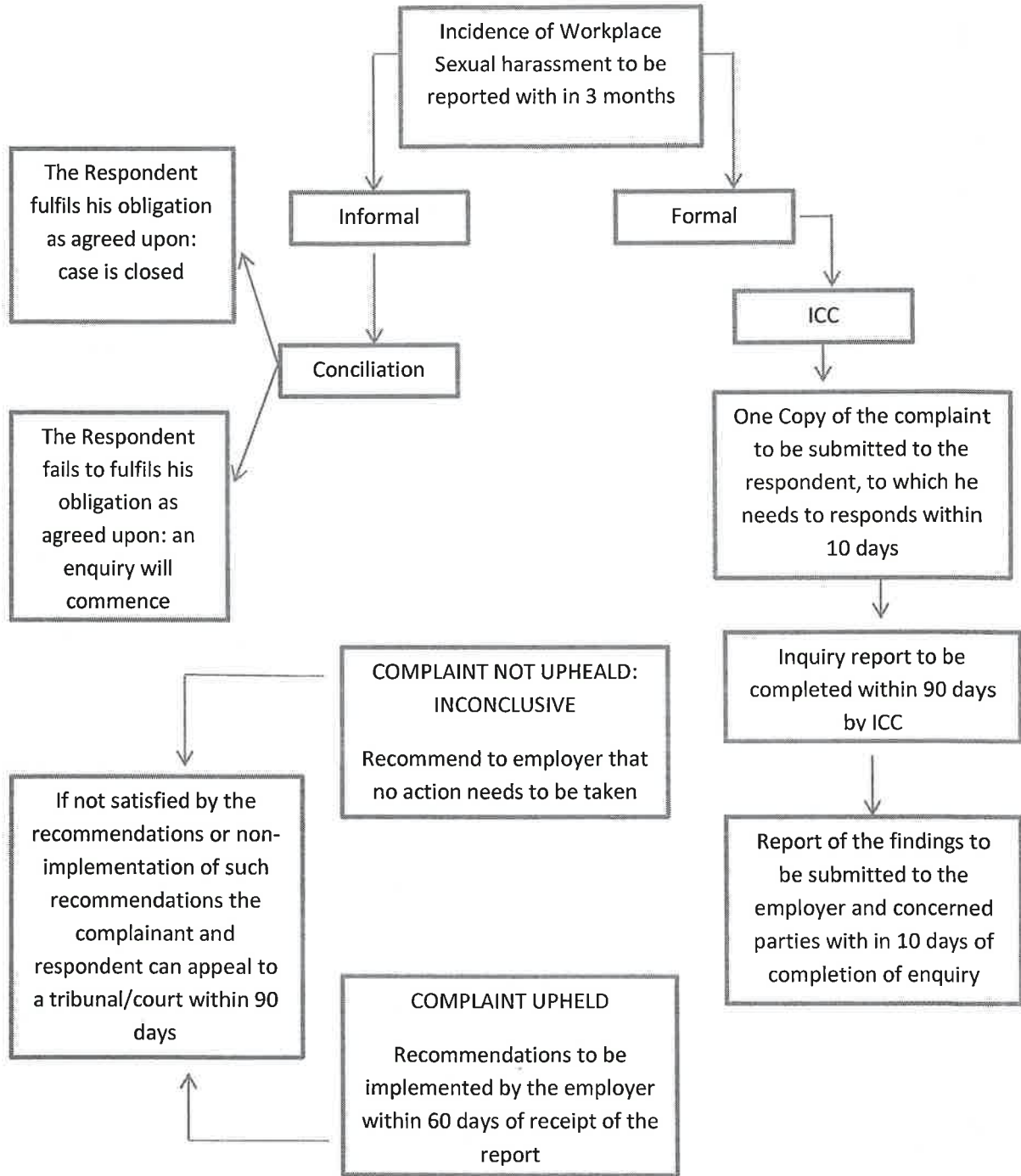
- **Submission of Complaint:** Within 3 months of the last incident
- **Notice to the Respondent:** Within 7 days of receiving copy of the complaint
- **Completion of Inquiry:** Within 90 days
- **Submission of Report by ICC to employer:** Within 10 days of completion of the inquiry
- **Implementation of Recommendations:** Within 60 days
- **Appeal:** Within 90 days of the recommendations

**To report complaint**

**Mail to [icc@dscds.edu.in](mailto:icc@dscds.edu.in)**

  
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**Flow Chat of inquiry process**



  
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**Roles and responsibilities of the ICC committee:**


The function of the Committee is to create awareness about sexual harassment and to deal with recommend punishment for non-consensual acts of sexual harassment. The ICC is assigned with the responsibilities of prevention, prohibition, and redressal of sexual harassment of women at the workplace. The committee shall ensure a safe & secure working environment for all female employers.

**Key Responsibilities of the committee:**

The key responsibilities of the ICC are highlighted below:

1. Be thoroughly prepared
2. Know the Act, Policy and/or relevant Service Rules
3. Gather and record all relevant information
4. Determine the main issues in the complaint
5. Prepare relevant interview questions
6. Conduct necessary interviews
7. Ensure parties are made aware of process and their rights/responsibilities within it
8. Analyze information gathered
9. Prepare the report with findings/recommendations

Handbook on Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act 2013. Govt of India, Ministry of women and Child development, Nov 2015.

  
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The following table highlights the objectives of the committee:

1	Prevention of sexual harassment	Ensure a safe environment for female students and faculty free of sexual harassment
2	Conduct awareness programmes/ workshops	To educate all students/ staffs of the institute regarding laws against sexual harassment.
3	Redressal of complaints filed	Unbiased and impartial (According to the regulation given by GOI)
4	Preparing reports of meeting and the programme conducted	Minutes of the meeting and the report of the programmes along with photographs to be prepared by the committee

  
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Dayananda Sagar College of Dental Sciences

Policy Document

Library Advisory Committee



**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES.**

Shavige Malleshwara Hills, Kumaraswamy Lay-out Bangalore-78,

Tel: 080 26663654 E-mail: [library@dscds.edu.in](mailto:library@dscds.edu.in)

**Dept.of Library and Information Centre.**

**Policy Manual**



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## INTRODUCTION: -

The Central Library and Information Centre of Dayananda Sagar College of Dental Sciences started in the year 1991. The library is housed in an independent 2<sup>nd</sup> floor of the Pre-Clinical Dental Block. The primary object of the library is to serve the information needs of the faculty and students community. It acts as a center for the collection of literature, predominantly related to dentistry and its allied subjects and aims to develop as a comprehensive collection of information that is useful for both teaching and references. It also ensures that information resources are acquired and organized so as to meet the present and future information needs of our time. It can accommodate more than 150 students at a time. It has an excellent ambience and provides easy access to required information. The system in the library is user friendly and provides a conducive atmosphere to read and learn.


The Library is well equipped with modern facilities, such as e-learning, access to internet and web resources including online journals and e-books. The library is providing a growing range of databases on the campus network. Access to e-resources subscribed by the library. All the library services have been automated on a modern line. The library has fully computerized its collection, which could be accessed through OPAC. The library is enabled with Wi-Fi technology and Security systems with CCTV surveillance.

The very purpose of our library is to integrate the information support system with the educational activities in all possible ways and to lead forward to the expectation of the academic community of the college and also those who resort to our library resources from other academic institutions.

The functional aspect of a library is normally an integration of **Academic** (i.e., resource selection, technical processing, organization of materials, reader's service, update new developments etc.) and **Administrative** (i.e., Acquisition of Materials, bill processing, budget management, etc.) aspects of the institution. Therefore, the College Library requires the Library Manual for its everyday activity to follow uniform procedures.

## VISION

Dayananda Sagar College of Dental Sciences Library aims to provide reliable and comprehensive information on the right time to the right users in the right manner. It is well-equipped with an elaborate collection of books, journals, and other resources to serve the various information needs of the students, faculty members, and its many users. The library is innovative and provides a sustaining, stimulating learning environment for the students, staff, faculty, and patients by providing high quality services, facilities and information resources in all formats.

  
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## MISSION

Providing high quality information, knowledge resources and tools that support clinical care, public health and research by investing in state-of-the-art systems that seamlessly integrate, retrieve, organize, analyze and preserve information.

## OBJECTIVES

1. To fulfill the information needs of students and faculty.
2. To be a center for the education of available and accessible literature related to dental and allied medical literature.
3. To acquire information resources to match the present and future needs of the recipients.

## LIBRARY ADVISORY COMMITTEE:

The Library Committee formulates policy and guidelines for the smooth and efficient functioning of LIC. It includes 11 members in addition to chairman Agenda and Minutes of the Meetings will be recorded under the chairmanship of the Principal meets once in six months to discuss various points to take the library and information Centre to greater heights.

The Library Advisory committee was headed by Dr. Hemanth. M Principal of the college and Head of the Department of Orthodontics and has representation of faculty and post graduate students as members.

## SPACE

The library is Housed in an independent 2<sup>nd</sup> floor of Pre-Clinical Dental Block with 5200 Sq.ft. It has separate Reading Rooms for undergraduate and postgraduate students, with seating capacity of 150 seats. It also has a separate internet section. There is sufficient space for further expansion.

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## STAFF DETAILS

Sl. No.	Details	Photo
01	Mr. Narasimha Murthy. A.V Librarian M.L.I.Sc., M.Phil., Ph.No. 080-26663654 e-mail: <a href="mailto:dscdslibrary@gmail.com">dscdslibrary@gmail.com</a>	
02	Ms. Divya. M. S Library Asst. D.L.I.Sc., B.Com., e-mail: <a href="mailto:msdivyashree935@gmail.com">msdivyashree935@gmail.com</a>	
03	Mr. Puttaraju. L Junior Asst. (B.Com.) e-mail: <a href="mailto:puttu_dsi@yahoo.co.in">puttu_dsi@yahoo.co.in</a>	
04	Mr. Chethan Babu Xerox Operator cum Attender PUC	

### WORKING HOURS:-


Working hours of LIC are from 09.00 AM to 08.00 PM on all the working days.

Reference Section : Monday -Friday: 9 am to 8 pm

Saturday: 9 am to 3 pm

Circulation Section : Monday -Friday- 9 am to 5 pm

Saturday: 9 am to 1.30 pm

  
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## INFRASTRUCTURE:-

To make LIC more useful to the users, it is having- (a) Stack Section (b) Periodicals Section: (c) Circulation Section (d) Internet and Multimedia section with 13 computers for providing surfing facilities and print out from e resources and Reprographic section with an advanced Sharp Copier-cum-Printer to provide copies form the documents to the users on demand.

## LIBRARY RESOURCES

The total collection of library resources as on As on 30<sup>th</sup> August 2022 stands as follows:

Collections	Total (As on August 2022)
Total no. of Titles	1566
Total no. of Books	4214
DSCDS library e-Books	551
RGUHS Helinet e- Books	6656
Print Journals subscribed for the year 2022	32
RGUHS Helinet e- Journals	44
Back Volumes of Journals	1260
CD`s/DVD`s	220
Dissertations/e-Dissertations	221

## LIBRARY E-RESOURCES.

### HELINET (Health Science Library and Information Network)

Our College has been a member of the HELINET consortium of RGUHS (Rajiv Gandhi University of Health Sciences) since 2004, by making payment of Rs.1,300000/- towards College Membership fee every year.

HELINET is a Health Sciences Information Network which enables our members of faculty and students to have quick and easy access to e-resources and printed documents (Hard copies)

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There are 10 PC's with broadband connections and internet section of Digital Library

The whole campus is networked through Wi-Fi Technology to share the information of LIC. Its provides to access to a wide variety of e-resources, including electronic books (e-books), electronic journals (e-journals), online databases.

All library e-resources can be accessed on the campus network. The library is subscribing to the following publishers e-resources through HELINET.

Sl.No	Publisher	Subjects	E-contents	URL	ACCESS
01	Jaypee Brothers	Dental/ Medical	2123 e-books 531 videos	<a href="http://www.jaypeedigital.com/">http://www.jaypeedigital.com/</a>	IP Based
02	Elsevier Clinical key database	Dental/ Medical	1130e-books 675 e-journals	<a href="https://www.clinicalkey.com/#/">https://www.clinicalkey.com/#/</a>	IP Based
03	Wiley-online library	Dentistry	26. e-journals	<a href="http://www.wileyindia.com/Wiley_Online_Resources/HELINET/RGUHS-HELINET%20Consortium.html">http://www.wileyindia.com/Wiley_Online_Resources/HELINET/RGUHS-HELINET%20Consortium.html</a>	IP Based
04	Proquest	Dental/ Medical	1946 e-journals	<a href="https://search.proquest.com/health/">https://search.proquest.com/health/</a>	IP Based
05	Springer	Dental/ Medical	3403 e-Books	<a href="http://www.rguhs.ac.in/digitallibrary/Springer%20e-books.html">http://www.rguhs.ac.in/digitallibrary/Springer%20e-books.html</a>	IP Based/ Remote access

### ARRANGEMENT OF RESOURCES

Books are classified according to a Dewey decimal classification system Books are arranged in a classificatory sequence(Subject-wise) and this is enabling the users to find their required books easily and quickly.

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## **INSTITUTIONAL MEMBERSHIP**

We have institutional membership of

- ❖ HELINET (Health Science Library and Information Network) of RGUHS- Digital Library.
- ❖ National Digital Library of India
- ❖ SWAYAM

## **PROCUREMENT OF LIBRARY BOOKS:-**

Books exhibition will be conducted once in a year for selection of Books to the Central and Departmental Libraries. The dates and selection of vendors will be decided in the LAC Meeting and four vendors are called to display books in the book exhibition who offer a higher rate of discount with quality of books in the premises. Selection of Books will be made by concerned HOD's and Staff of Dental and Medical Departments.

## **LIBRARY INTERCONNECTIVITY**

We have interconnectivity with all the educational institutions of RGUHS through the internet to share resources of knowledge, information and data, under inter Library cooperation.

## **LIBRARY AUTOMATION & COMPUTERISED INFORMATION RETRIVAL:-**

Considering the importance of Library Automation, standard and useful Library Automation Software, Namely LIBSOFT 12.0 Cloud based version of software is installed in LIC. LIBSOFT 12.0.0 provides several special facilities such as digital library, Virtual Library. DirectLink to MS-Word, MS EXCEL in case of report generation. CAS (Current Awareness Service), SDI (Selective Dissemination Service of Information) OPAC (Online Public Access Catalogue) enables our users to search within few seconds the required information such as books, journals, thesis, and e-resources available in the stock of library

Databases in LIC are constantly updated as and when new documents are added. Our users can have quick access to the latest information either by visiting LIC or from their departments because our whole campus is networked through Wi-Fi technology. All most all the functions of LIC such as (a) Acquisition, (b) Serial Control, (c) Cataloguing (d) Circulation (e) OPAC (f) Documentation (g)SDI (h) Compiling Bibliographies (i) Reports Generation (j) Library Stock Verification (k) Management of LIC are automated.

It not only saves precious time of users, but also enhances the efficiency of functioning of LIC, since barcoding is done for documents issued to users.

There are 10 PC's with broadband connections in the internet section of LIC.

The whole campus is networked through Wi-Fi Technology to share the information of our Library resources to the users

### OPAC (Online Public Access Catalogue)

OPAC is an electronic form of the library catalogue which provides its user with enhanced searching option for the library holdings. It is available online and accessed directly through intranet portal <http://192.168.72.52/opac/Search.aspx>

It can be accessed anywhere in the Campus. It also provides its user with the information of the library collection with the latest updates. The users can search required document through the different options, such as by author's name, book title, subject, department etc., only library members can access full text of digital materials by using their 'User ID' and 'Password' and online reservation can be done through web OPAC for a book which is already lent out.

### **LIBRARY SERVICES**

1. Bibliographic Service
2. Reference Service
3. Internet, Printing, Scanning Services
4. Reprographic Services
5. Current Awareness Service
6. Digital library service
7. Previous Years Question Papers
8. Book Bank Service
9. News Paper Service
10. Lending Books
11. Overnight issue of current and back volumes of journals
12. Helping in access to e journals and e books from HELINET
13. Providing borrowing facilities from British Library, Bangalore

The LIC provides training for Basic Computer concepts, information retrieval. Database search and searching e-journals and e books from HELINET to the users.

## **KIOSKS IN LIBRARY & INFORMATION CENTRE.**

KIOSKS is available in the Library and Information Centre to know more about the Library and Information Centre and to access the WEBOPAC by members of the Faculty and Students

## **SECURITY SYSTEM IN LIBRARY & INFORMATION CENTRE.**

There are 04 close circuit cameras around the library and information Centre which prevents lossof books in the Library.

## **STOCK VERIFICATION OF LIBRARY AND INFORMATION CENTRE**

Internal audit/Stock verification of the Central and Department Library will be conducted every year by the team members appointed by the Committee in consultation with Principal. The team shall submit the report to the committee which will analyze the report

## **CIRCULATION SECTION**

Library is fully automated with LIBSOFT automation software. Books for circulation are housed in the 2<sup>nd</sup> floor, Pre-clinical block. Issue of books, return and renewal is managed through library software.

- Documents are issued to all eligible members as per their entitlements.
- Closed access system is followed in the library.
- 

## **DIGITAL LIBRARY**

The Digital Library is housed in the 'Reference Section'. The users of the library can search and access all subscribed E-Resources. In order to facilitate sharing of E- resources available the college has taken up membership from RGUHS-HELINET Consortium. In addition, seekers of information are provided the required access to well-known sites.

  
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Resources that can be accessed in Digital library.

- Journals
- E-Books
- Educational videos
- Scanned model question Papers
- NPTEL (National Programme on Technology Enhanced Learning)
- National Digital Library
- Free Databases
- Open Access Resources

## REFERENCE SECTION

This section has Encyclopedia, dictionaries, text books, reference books etc. which are only available for reference. Users can make use of these resources.

## JOURNALS SECTION

The Library procures both national and international journals. They are displayed in the journals section, general magazines and newsletter are available. They are arranged alphabetically. Bound volumes of journals are arranged as subject wise and are meant only for reference within the library.

## REPROGRAPHIC SECTION

Reprographic services in the library such as photocopy and printouts are provided at nominal charges to staff and students.

## RULES AND REGULATIONS OF THE LIBRARY

- Readers are required to deposit their bags/belongings at the property counter before using library resources.
- Members should produce their ID card to the security/staff as and when asked for.
- Complete silence must be maintained. The use of mobile phones is banned.
- Underlining, scribbling and tearing of pages or disfiguring will be severely dealt with.
- Students can keep a book for a period of 06 days only
- Rules of fine for the late return of Library Book:  
-A fine of Rs. 5/- per day per book will be collected for books not returned or renewed before the due date.

-If the books are kept for more than 20 days membership will be cancelled and caution Deposit will be forfeited.

- Smoking and eating are strictly prohibited inside the library.
- Necessary action will be taken by the competent authority against the users who are found misusing the services, facilities, amenities etc.
- Library is under video surveillance, if any person is found misusing the library services necessary action will be taken.
- The above mentioned rules are subject to periodical reviews and revisions.
- Users are requested to switch off their mobiles inside the library.

## MEMBERSHIP

All the students and Staff Members are eligible to become the members of the library. The details related to the issue of documents for home use is given below:

Category	No. of Documents	Issue Period
Faculty member	02 Books	30 Days
Students	1 Book	06 Days

To get the Library membership students have to produce the below mentioned documents:

- ID CARD(Smart Card)
- Admission Receipt
- One passport size photo

## BOOK LOST.

If the books are lost, then the borrower shall replace the books of the same edition or latest edition or pay double the cost of the book after getting permission from the librarian.

## **CARE OF LIBRARY BOOKS.**

Students are required to handle the books/ Journal very carefully; marking with pencil, writing or highlighting , tearing the pages or mutilating the same in any other way will be viewed very seriously. In such case reader shall be held responsible unless these are brought to the notice of the library staff at the time of issue.

## **DISPOSE OF OLD BOOKS**

Library does not dispose old books and they are kept a separate cupboard.

## **NO DUE CERTIFICATE.**

Each student shall obtain No dues certificate from the library after returning all the books issued,surrendering the borrower's cards and after paying outstanding dues, if any.

## **LIBRARY ORIENTATION.**

The library has conducted an orientation program for the benefit of faculty and new students in the beginning of the academic year. They are taken around the library to familiarize with the available resources and services. Faculties and students desiring to know more about library resources and services or to learn how to use a particular resource like OPAC, E-resources at HELINET and databases etc. should contact any library staff member.

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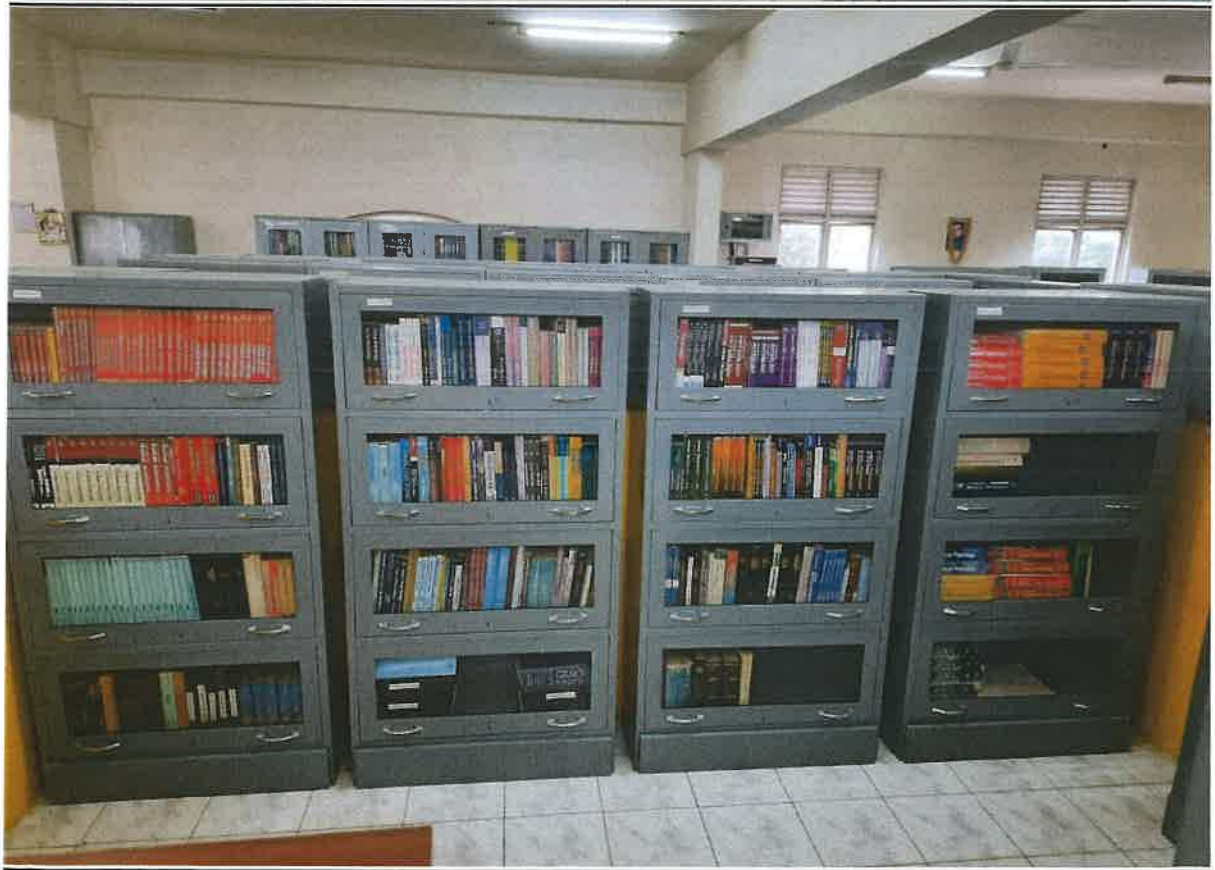
PHOTOGRAPHS OF THE LIBRARY AND INFORMATION CENTRE







  
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Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru

Duties & Responsibilities of Library Advisory Committee -

1. Term of the committee will be for 3 years.
2. Committee members will meet once every 6 months to discuss, present/future any requirement based on RGUHS/DCI. Norms
3. Committee will be responsible to prepare a policy document regarding the standard operating protocol, duties & responsibilities of its members.
4. Discuss and evaluate budgetary issues for books, journals, databases, media, E-resources etc.
5. The Committee will be incharge of the new purchases made with regards to Library Books and journals and other related library resources.
6. Evaluating the books procurement department wise and allocation of budget accordingly.
7. To monitor and evaluate, from time to time, trends and developments in information technologies, networking, library automation, library cooperation etc., and to direct the library in their adoption
8. To assist library in providing need based information services to students and faculty.
9. Support the Library's efforts in ensuring financial accountability and responsibility in the provision of library collections
10. Relevant documents have to be prepared & maintained by the committee.
11. To advise the library on policy matters concerning services, resources and facilities.
12. Monitor library usage by stakeholders.
13. Suggest and implement measure to maximize utility of resources by students and faculty
14. Look into any library related student /faculty issues
15. Conduct yearly internal audit of books and journals

  
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# Dayananda Sagar College of Dental Sciences

Policy Document

Mentorship Committee



**Dayananda Sagar College of Dental Sciences,**  
**Shavige Malleshwara Hills, Kumaraswamy Layout,**  
**Bengaluru**

**POLICY DOCUMENT**

**MENTORSHIP PROGRAM FOR STUDENTS**

**What is Mentorship Programme?**

Student success is at the core of any academic institution and, we at DSCDS believe that it is a shared responsibility. Mentoring is an exciting complex phenomenon that is natural or artificially contrived to benefit individuals within a sharing partnership (Palmer, 1987). DSCDS offers unique mentorship programme where students have the opportunity to develop a relationship with a faculty member who can become a role model and advocate for the student by offering support and also counsel.

We at DSCDS believe that mentoring of all sorts can greatly enhance students' experience and assist them in actively engaging in educationally-purposeful activities which are known to improve their success. Mentoring can assist students in engaging as part of a larger community; it can strengthen them to recognize their skills, abilities, and interests, and assist them in thinking through and accomplishing long-term goals.

Mentoring can take several forms including career exploration and life skills development. By pairing faculty or staff members with students over the course of an academic year, with scheduled meetings in a comfortable environment, the students will be given the opportunity to talk about his or her academic needs, share his or her goals, and discuss concerns and needs. The mentoring activities and support encourage academic excellence, self-esteem, and personal growth of the students.

**Why Mentorship Programme?**

1. Students in health sciences are exposed to a unique learning environment in which they not only interact with their peer group and faculty but also with the patients and their attendants. This requires special skills which can be honed by mentoring programs.

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2. The learning atmosphere in health sciences institutions are demanding and challenging. "Performance culture" is ingrained into the learning system which places stress on students. Mentoring can help in providing guidance to students and also can act as stress busters.
3. Students need a support system which can guide, care and counsel during the learning process which is readily provided by apt mentorship programs.
4. Students undergo commonly psychological upheavals while doing professional studies which needs enormous amount of social, psychological and personal adjustments. Such an adjustment is possible under the close guidance of a mentor with whom the mentee will have a trustful relationship.
5. Academic performance can certainly get boosted when personal psychological and social issues are resolved by the assistance of a mentor.
6. Parents of the students may probably feel more comfortable when their wards are supervised and guided by mentors.
7. A mentor maybe a role model for the mentee so that the mentee can grow into the shoes of the mentor. Goal setting becomes easier.
8. It provides a feedback system- feedback is central to mentoring and is a great tool to enhance and embed learning.
9. It is not exclusive – but actually complements other methods of learning.

We at DSCDS believe in giving the best for our students, and hence we have a mentorship program to help them sail through the course smoothly.

#### **Who is a Mentor?**

A mentor is a person or friend who guides a less experienced person by building trust and modelling positive behaviours. An effective mentor understands that his or her role is to be dependable, engaged, authentic, and tuned into the needs of the mentee. We have carefully chosen mentors, who have experience and eager to help our students.

#### **Who is a Mentee?**

The mentee is the student who needs to absorb the mentor's knowledge and have the ambition and desire to know what to do with this knowledge. As a student, the mentee needs to practice and demonstrate what has been learned.

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- The students under the respective mentor are supposed to complete their clinical work, field work and project work within the stipulated period of time.

### **Responsibilities of the Mentor**

1. **Advisor and coach:** provide advice, guidance, and feedback; share their experience and expertise as appropriate; act as a sounding board for ideas and action plans.
2. **Leader and motivator:** offer encouragement and support to try new things; help mentees move out of their comfort zones; celebrate successes; help mentees understand when things do not go as planned
3. **Counsellor:** a sounding board when the mentee is solving a problem or making a difficult decision. As a confidant, the mentor helps the mentee to clarify the real issues involved and to see the bigger picture.
4. **Facilitator:** takes action that will indirectly smooth the way for something else to happen; starting a process that will help the mentee to pursue their goals
5. **Resource and recommendations:** identify resources that will help mentees with personal development and growth, such as recommending books, workshops, or other learning tools.
6. **Devil's advocate and "truth-sayer":** provide the tough feedback that mentees need to hear in order to move forward; push mentees to take risks when appropriate; help mentees consider and weigh potential consequences of decisions and actions to avoid the pitfalls and predictable surprises that may occur.

### **Responsibilities of the Mentee**

1. Allow your mentor to take the lead in the relationship, at least initially. Listen and respect the opportunities, limitations and format of the relationship he or she is able to provide for you. Always act with courtesy and respect towards your mentor.
2. Use active listening skills during discussions with your mentor. Be careful not to interrupt, unless you need to clarify a point and you see no other opportunity or pause.
3. Prepare the goals and objectives you have for your career. Be prepared to ask for specific guidance and advice on your goals, plans and strategic ideas.
4. Take the initiative to ask for feedback. Feedback, although difficult to hear at times, is critical to your personal and professional growth and development.
5. Always be considerate and respect your mentor's time as you do your own.

  
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### **Duties of the Faculty Mentor**

- To meet with mentees during the last week of every month. To contact mentees if they have not heard from them by their designated due dates.
- Express your expectations for the relationship and define what you hope to gain from and offer to the relationship
- Organising and co-ordinating student learning activities in practice.
- Supervising students in learning situations and providing them with constructive feedback on their achievements.
- Setting and monitoring achievement of realistic learning objectives
- Our mentors are going to keep a constant watch on the progress of their students. Assessing total performance – including skills, attitudes and behaviors.
- Liaising with others to provide feedback, identify any concerns about the student's performance and agreed action when appropriate.
- To facilitate personal growth and development and assists with career progression, while guiding the mentèe through the clinical, educational, social and political networks of the working culture.
- Mentors will report to the Chief Mentor, the progress made by the students under their mentorship and also discuss about the problems and challenges faced by the students with a thorough note of strengths and weaknesses.
- Mentors will notify the Chief Mentor, via the Mentorship report form, if the student displays positive or negative attribute that distinguishes them from their peers or if there are any concerns regarding professionalism in any student.

### **Duties of the Mentee**

- To contact their mentor to set up a meeting.
- To meet their mentor during the last week of every month.
- To fill out their mentorship form before their mentorship meeting.
- Students are supposed to report to the mentors periodically for any problems that they face with respect to studies or otherwise.
- Every student should lend himself/herself to be mentored so that the best in the student can be extracted.

6. Demonstrate that you have followed advice or commitments for action at every opportunity, even if you have modified your plan.
7. Make only positive or neutral comments about your mentor to others. If you disagree with your mentor's values, behaviors, or attitudes, discuss it with him/her directly. Respect your mentor's confidence and trust.
8. Keep the door open to return to your mentor for assistance or advice at a future time.
9. Follow up with your mentor after termination to keep in touch, to share your progress and to continue to express your gratitude.

#### **Term of the Mentorship committee members**


The term of the committee members would be for 3 years.

#### **Meetings of Committee members**

Three meetings will be held each year. One meeting will be an internal committee members meeting & every alternate meeting will be a full committee meeting.

#### **Mentorship process outline**

1. Regular mentor mentee meeting will be held during the last week of every month.
2. Meeting will be conducted in an organized manner.
3. Meeting will be done in a conducive environment and with adequate privacy. GROW model will be applied during the mentorship session.
4. Discussion points will be documented and a summary report will be prepared. In case of confusions and/or need for clarifications one will bring the issues to the notice of chief mentor.
5. The monthly summary report will be submitted to the chief mentor within 7<sup>th</sup> of every month.
6. Once in 4 months committee meeting will be held. Every alternate meeting will be a full committee meeting. These reports will be submitted to the chairperson.

  
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## Mentoring using the **GROW** model


The GROW model is a good way to structure a meeting with your mentee. You can either start with the goal and work logically through the model or you can move the model around, starting with the reality and then the goal, if this works best. Remember to always finish with the way forward and ensure that this is set and owned by the mentee. The model is outlined below.



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## Conceptual Framework – Mentoring GROW model

Objective		Example questions
Goal	<ul style="list-style-type: none"> <li>• Agree the discussion topic</li> <li>• Agree specific objectives for the session</li> <li>• Set a long-term goal or aim if this is appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• What would you like to discuss?</li> <li>• What do you want to achieve in this session?</li> <li>• What differences would you like to see on leaving this session?</li> <li>• Do we have sufficient time for you to be able to attain this?</li> </ul>
Reality	<ul style="list-style-type: none"> <li>• Invite self-assessment of topic or situation</li> <li>• Give specific examples of feedback</li> <li>• Check assumptions for validity</li> <li>• Discard irrelevant assumptions and history</li> </ul>	<ul style="list-style-type: none"> <li>• How do you know this is accurate?</li> <li>• How often does this occur?</li> <li>• What impact or effect does this have?</li> <li>• Are there other factors that are relevant?</li> <li>• What is X's perception of the situation?</li> <li>• What have you done or tried to date?</li> </ul>
Obstacles	<ul style="list-style-type: none"> <li>• Identify obstacles</li> <li>• Find out if the mentee thinks there is more than one</li> <li>• You should consider and decide the different types: people, resources, environment etc.</li> </ul>	<ul style="list-style-type: none"> <li>• What prevents you from achieving your goal?</li> <li>• What else could be preventing you?</li> <li>• What personal changes do you think you would need to make to achieve your goal?</li> <li>• What is hindering you from changing?</li> <li>• Do any of your direct/indirect behaviours, attitudes, competencies, skills etc contribute to or help the situation?</li> </ul>
Options	<ul style="list-style-type: none"> <li>• Make sure to cover the full range of options</li> <li>• Invite suggestions from the mentee</li> <li>• Offer suggestions carefully</li> <li>• Ensure mentee makes the option choices</li> </ul>	<ul style="list-style-type: none"> <li>• What alternatives are there to that approach?</li> <li>• Who might be able to help you?</li> <li>• Would you like me to make suggestions?</li> <li>• Can you identify the pros and cons for that option?</li> <li>• Do you have a preferred option you'd like to act on?</li> </ul>
Way forward	<ul style="list-style-type: none"> <li>• Get a commitment to act</li> <li>• Identify the potential obstacles</li> <li>• Plan detailed actions within a set timeframe</li> <li>• Agree what support will be given</li> </ul>	<ul style="list-style-type: none"> <li>• What are your next steps?</li> <li>• What timeframe will you set?</li> <li>• Can you anticipate anything getting in your way?</li> <li>• How will you keep a log of your progress?</li> <li>• What support might you need?</li> <li>• How and when can you get that support?</li> </ul>

  
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**Dayananda Sagar College of Dental Sciences**

**Policy Document**

**NATIONAL SERVICE SCHEME AND THE NSS COMMITTEE**



**Dayananda Sagar College of Dental Sciences,**  
**Shavige Malleshwara Hills, Kumaraswamy Layout, Bengaluru**

## **POLICY DOCUMENT**

### **NATIONAL SERVICE SCHEME AND THE NSS COMMITTEE**

The National Service Scheme (NSS) is a Central Sector Scheme of Government of India, Ministry of Youth Affairs & Sports. It provides opportunity to the student youth of Graduates & Post Graduates of Dayananda Sagar College of Dental Sciences to take part in various government led community service activities and programmes. **The sole aim of the NSS is to provide hands on experience to young students in delivering community service.** It also provides help to everyone who needs it, to enhance and bring a better change in the standard of living and the way they lead their life with dignity. National Service Scheme (NSS) is beneficial to both students as well as the society in various different means.

**“NOT ME BUT YOU”**----is the motto of NSS and its volunteers.

The NSS committee at Dayananda Sagar College of Dental Sciences is concerned with planning, implementing and evaluating the various community service activities that have been drafted for an academic session.

#### **VISION**

The vision is to build the youth with the mind and spirit to serve the society and work for the social uplift of the down-trodden masses of our nation as a movement.

#### **MISSION**

The National Service Scheme has been functioning with the motto “NOT ME BUT YOU” in view of making the youth inspired in service of the people and hence NSS Aims Education through Community Service and Community Service through Education.

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**THE MAIN OBJECTIVES OF NATIONAL SERVICE SCHEME (NSS) ARE:**

- i. Understand the community in which they work.
- li. Understand themselves in relation to their community.
- lii. Identify the needs and problems of the community and involve them in problem-solving.
- lv. Develop among them a sense of social and civic responsibility.
- V. Utilise their knowledge in finding practical solutions to individual and community problems.
- Vi. Develop competence required for group-living and sharing of responsibilities.
- Vii. Gain skills in mobilising community participation.
- Viii. Acquire leadership qualities and democratic attitudes.
- Ix. Develop capacity to meet emergencies and natural disasters and
- X. Practise national integration and social harmony.

**NATIONAL SERVICE SCHEME COMMITTEE**

1. The committee will be headed by a Chairman (Principal of the college) and will have 1 NSS Co ordinator of RGUHS university, 6 faculty members of which 1 will be the NSS officer for the college, 1 office representative and 6 student members each representing their batch/year of study.
2. The member of the committee are selected for a period of 3 years
3. A new committee will be formed once in the beginning of the academic year and may include some or all existing members along with new members.

  
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### ROLES AND RESPONSIBILITIES OF NSS COMMITTEE


1. The committee will meet at the start of the academic year to frame the calendar of events for NSS activities
2. Regular review meetings will be held once every three months
3. A minimum of 7 members should be present in order to conduct the meeting.
4. In the absence of the Chairman, one of the senior member may chair the session.
5. The agenda has to be prepared atleast 5 days before the meeting and intimations should be sent atleast 4 days before the meeting.
6. No member can be absent consecutively for three times without valid reason. In such a scenario, the member would be disqualified from the committee and a new member would be appointed after the consensus of the committee
7. Meetings will be conducted in an organized manner.
8. Discussion points will be documented and a summary report will be prepared. In case of confusions and/or need for clarifications, one will bring the issues to the notice of the Principal/ Chairman of Committee.
9. The NSS officer is responsible for maintaining the records of the meetings and activities conducted by the committee.
10. The committee is responsible for the execution and reporting of the events planned.
11. Discussions regarding budgeting, scheduling and logistics would be designed.
12. The chairman's decision will be final



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### STANDARD OPERATING PROCEDURES (SOPS)

1. Each upcoming programme which is to be conducted will be discussed in the review meeting and planning for the program will be started two weeks prior to the date of the programme.
2. After completion of the programme, the NSS officer will make reports and maintain bills in files after approval from the chairman of the committee.
3. A copy of the report will be submitted to the NSS wing of the Rajiv Gandhi University as per University protocol.
4. Selected photographs of the programme will be sent to the Website committee for display in college website and Facebook pages.
5. All the photographs of the programme will be submitted to the AV committee for safe keeping.

  
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## NSS ACTIVITIES

1. REPUBLIC DAY- **January 26**
2. INTERNATIONAL WOMANS DAY- **March 8**
3. WORLD HEALTH DAY- **April 7**
4. WORLD NO TOBACCO DAY- **May 31**
5. WORLD ENVIRONMENT DAY- **June 5**
6. WORLD ORAL HYGIENE DAY- **August 1**
7. INDEPENDENCE DAY- **August 15**
8. NSS DAY- **September 24**
9. BLOOD DONATION DAY- **October 1**
10. KANNADA RAJYOTSAVA- **November 1**
11. NATIONAL TOOTHBRUSHING DAY - **November 7**
12. WORLD AIDS DAY- **December 1**
13. Outreach programs (Dental camps )- 3 every month
14. Danta Bhagya Scheme (Free denture delivery to BPL card holders)
15. Special camp of NSS – 1

  
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**ROLES AND RESPONSIBILITIES OF NSS COMMITTEE**

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**ROLES AND RESPONSIBILITIES OF PATENT TEACHER MEETING COMMITTEE**

- PTM committee is responsible to communicate between student, parent and Mentor to send information regarding student's attendance percentage and internal assessment marks to the respective parents.
- The committee shall prepare a protocol regarding Patent teacher meetings in the college shall prepare a schedule, conduct and monitor Patent Teacher Meetings.
- Submit the schedule to the Academic Advisory Council for approval.
- To prepare and maintain a report of each Parent Teacher meeting and maintain the records
- Shall submit the report of the meets conducted to the AAC.
- Shall maintain the minutes of meetings
- Shall provide necessary information to office as and when required.

  
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# Dayananda Sagar College of Dental Sciences

## Policy Document

### Soft skill Development Committee



**Dayananda Sagar College of Dental Sciences,**  
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**POLICY DOCUMENT**

**SOFT SKILLS DEVELOPMENT PROGRAM FOR STUDENTS**

**Skills & Soft Skills:**

A skill is the ability to make use of one's knowledge readily and effectively. Skills can be learned and are essential in the everyday function of individuals as well as organizations.


Soft or social skills are those personal values and interpersonal skills that determine a person's ability to fit in a particular structure such as a team or even an organization. By definition, soft skills are defined as personal qualities, attributes or the level of commitment of an individual that sets him apart from other individuals who may have similar skills and experience.

Soft skills in a healthcare setting is a sociological term relating to a person's "EQ" (Emotional Quotient), the cluster of personality traits, social graces, communication, language, personal habits, friendliness and optimism that characterize relationships of clinicians, researchers, academics with their patients, subjects & students respectively. Soft skills complement hard skills (part of a person's IQ), which are the occupational requirements of every dentists job and many other activities.

**Need for a Soft Skills training Program:**

Dental education has been bereft of these teachings which taught such skills for overall growth of all practitioners, hence the need to highlight them for our own betterment. Soft skills are also personal attributes that enhance an individual's interactions, job performance and career prospects in the life of every clinician, a dentist in this context. Unlike hard skills, which are about a person's skill set and ability to perform a certain type of task or activity, soft skills are interpersonal and broadly applicable.

A dentist's soft skill EQ is an important part of their individual contribution to the success of their practices. Particularly smart practitioners dealing with patients face to-face are generally more successful, if they train their staff to use these skills. Screening or training for personal habits or traits such as dependability and conscientiousness can yield significant return on investment for their clinics. For this reason, soft skills are increasingly sought out by dentists in addition to standard qualifications.

  
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## The Objectives of a Soft Skills development program:

Broadly, this can be categorized as under:

- i. To build and maintain interpersonal relationships.
- ii. To make meaningful/appropriate decisions
- iii. Efficient Communication
- iv. To influence the professional development
- v. For effective, efficient and higher performance

## Model for implementing soft skills development in Dental Education:

The modules can be customized as required for different levels that a student might be in, during the course of BDS & MDS. Broadly, the initial 2 years (comprising of I & II BDS) and the latter 4 years comprising of (III, IV, Internship & Post-Graduate years) can be grouped together for purposes of ease of managing students and their needs at these critical junctures. The 3<sup>rd</sup> year of BDS signals the entry of a dental student into clinics where he/she would be exposed to a live patient for the first time ever and this requires additional support and training from the skills team as compared to the initial 2yrs wherein the student would need to be helped to settle down more into the course properly.

Accordingly some of the topics that might be included in the first couple of years may be as under:

1. Goal Setting
  - Establishing SMART Goals
  - Importance of Mission Statement
  - Formulation of Goals
  - Procrastination
  - Visualization of Goals
2. Time Management
  - Prioritization
  - Dealing with Difficult Tasks
  - Getting Organized
  - How to get away from Distractions
  - Work-Life Balance
3. Building Confidence
  - Overcoming Nervousness
  - Deal with Conflicts Effectively
  - Developing Positive Attitude
  - Increase Public Speaking Skills
  - Reach your Personal and Professional Goals
  - Strengthening your Self-Esteem
  - Developing Social Skills
4. Communication Skills
  - Verbal & Non-Verbal
  - Manage tone of language
  - Listening Skills & Writing Skills
  - Group Discussion
5. Business Etiquette
  - Making the First Impression
  - Corporate environment Etiquette
  - Grooming and Personal Hygiene
  - Body Language
6. Building Aptitude for Exams

## 7. Interpersonal and Team Skills

- Initiating Small Talks
- Establishing Trust
- Managing Relationships
- Acclimatize to Others
- Understanding the Cultural Diversity
- Team-building Process and Techniques
- Coordination in Teams
- Assertive Communication while Dealing with Team
- Balancing Team Needs and Individual Needs
- Importance of Feedback in Team Building

## 8. Emotional Quotient

## 9. Presentation Skills

- Fundamentals of an Effective Presentation
- 5 P's of an Effective Presentation
- Importance of Visual Aids
- Understanding and Overcoming Fear
- Public Speaking
- Importance of Managing Voice and Language
- Managing Question and Answer Session

The modules that may be more relevant for the student once he/she enters clinics in 3<sup>rd</sup> BDS and starts interacting with patients signals a new need and requirement for the student which can be managed with the below listed methods:

## 10. Stress Management Skills

- Types of Stress
- Sources of Stress
- Symptoms of Stress
- Stress in the Workplace
- Four Skills for Managing Stress

## 11. Conflict Management

- Creating a Win-Win situation
- Negotiation and Persuasion
- Dealing with Aggressive Behaviour
- Different Styles of Handling Conflicts
- Dealing with Emotions
- Conflict Resolution Strategies
- Tools and Techniques for Conflict Management

## 12. Leadership Skills

- Defined Vision
- Clear Planning
- Excellent communication skills
- Excellent interpersonal skills
- Power
- Understanding Risk and Mitigating promptly
- Innovation and Creation
- Adaptability
- Negotiation skills
- Decision making
- Managing the Self and the Team

## 13. Critical thinking

- Understand the working functions of thought process inside human brain
- Learn about developing critical, analytical and creative thinking
- Learn techniques to invoke result oriented thought process
- Become more critical, analytical, creative thinker and apply them to find best fit solutions for situation at hand
- Examine the obstacles towards making your organization a great organization
- Understand psychology behind employee hesitation
- Learn to empower
- Learn to shape right attitude
- Learn to become a factory of Ideas
- Learn to develop right work environment and culture

## 14. Entrepreneurial skills

### Learning-Training methods:

The various methods that can be incorporated in the training program can be listed as under:

- |                              |   |
|------------------------------|---|
| i. Lectures                  | ix. Role Play                                     |
| ii. Clinical simulations     | x. Simulation                                     |
| iii. Problem based learnings | xi. Use of Video/ Slideshows / Films / Animations |
| iv. Roleplays                | xii. Demonstrations                               |
| v. Lecture                   | xiii. Field Visits                                |
| vi. Practice                 | xiv. Innovative methods                           |
| vii. Small Group Discussion  | xv. Pictures/Posters                              |
| viii. Case Study             | xvi. Team games                                   |

### Role of the Trainer (CIL Trainers):

A Soft Skills Trainer provides targeted training to individuals to help them strengthen their interpersonal skills. While many people are brilliant at their jobs, some fall short in the area of soft skills, which are a key component in successful working relationships. Soft Skills Trainers provide support for people who struggle with or lack interpersonal communication skills. They achieve this by teaching helpful strategies as well as providing various role-playing activities that allow the participants to realize their shortcomings and take action to correct them.

### Duties and responsibilities of the Soft Skill Training Team:

Some common duties & responsibilities include:

- Selecting or creating appropriate learning materials for instructional purposes
- Monitoring the effectiveness of training materials
- Assessing the weaknesses and strengths of individuals and adjusting training as needed
- Performing administrative tasks such as scheduling, coordinating and billing

### Soft Skills Trainer Skills

The ability to teach others, exercise leadership, negotiate and work with people from diverse backgrounds are some of the most important skills a Soft Skills Trainer will need to be able to do. In addition, an understanding of conflict resolution and the ability to teach strategies related to it are key. Social perceptiveness is also helpful because it will allow the trainer to understand the motivation or lack of motivation of specific individuals and use the information to encourage the development of interpersonal skills.

### Other key Soft Skills Trainer skill areas include:

- Analytical skills
- Decision-making skills
- Interpersonal skills
- Public speaking skills

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**Assessment pattern to be followed:**

An independent assessment will be conducted after each program. The results of each of these assessments will help the committee formulate a dynamic, policy driven program with the ultimate goal of being useful to the student community at large.

**Expected Learning outcomes:**

In addition to the academic and clinical skills every student acquires during their stint as dental students, they will also develop social & work life skills, as well as their personal & emotional well-being, including resilience, teamwork, communication, leadership, communication, emotional maturity & health, confidence, enthusiasm for learning, responsibility & employability skills.

In general, acquiring relevant chairside interpersonal skills is necessary so that dental students can organize, plan, and manage their vast learning experiences and deal with different situations during clinical encounters. The ability to respond to the patient's needs and meeting their expectations satisfactorily will strengthen students from within, and this makes a good predictor of academic success within the undergraduate dental curriculum and beyond.

**Term of the Soft Skills committee members:**


The term of the committee members would be for 3 years.

**Meetings of Committee:**

Six meetings will be held each year. All meetings will involve participation of all the committee members. The meetings will be done in a conducive environment and with adequate privacy and will be a planned & organized one.

**Soft Skills Program outline:**

1. Regular and continuous Soft Skills development programs will be held
2. The programs will be conducted in a planned & and organized manner.
3. Discussion points will be documented and a summary report will be prepared. In case of confusions and/or need for clarifications one will bring the issues to the notice of the Coordinator.
4. The summary report of every meeting & program will be documented & submitted to the Coordinator within a week.
5. Once in two months committee meetings will be held. These reports of these meetings will be submitted to the Chairperson.

  
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**Bengaluru**

**Sports Committee Roles and Responsibilities**

“A Healthy body is a Healthy Mind”


The vision of the sports committee is to organize sports so they can learn to keep themselves physically fit and aims at enhancing the interest of the participants in the field of sports. Sports committee has clear intention on that the level of commitment for sports from an extracurricular perspective should be increased.

**Roles:**

1. To create zeal amongst students and faculty members towards sports.
2. To organize training, coaching and education in sports for everybody so that they can learn to keep themselves physically fit.
3. To enhance the interest of participants in the field of sports.
4. To achieve the goals we plan to organize various competitions in the following sports: Football, Cricket, Basketball, Volleyball, Carrom, Badminton, track & field events, etc.
5. To promote every individual’s health, physical well-being as well as the acquisition physical skills among the students.
6. The committee aspires to inculcate qualities such as Sportsmanship, Team spirit and Bonding.
7. Prepare annual budget for sports activities for DSCDS
8. Prepare budget for sports day celebration
9. Maintain a record of each event in the office.
10. Submit report on each event with photographs within two days to the AV and website committee.
11. Shall provide necessary information for the annual report committee as and when required.
12. Shall take necessary permission from principal and HODs with regard to students attending sports event.

**Responsibilities:**

1. The committee shall promote sports activities by motivating students and member’s faculty.
2. Promoting Team spirit by making healthy competition.
3. To organize regular sports events in order to train students for states and national level competition.

  
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4. To arrange for better coaching facilities.
5. Proper maintenance of sports accessories/equipments.
6. To provide necessary infrastructure for sports.
7. To prepare and maintain records of all sports activities.

  
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## SPORTS COMMITTEE - POLICY DOCUMENT

1. Term of the committee shall be for three years.
2. All sports activities of the institution shall go through the committee.
3. The committee shall:
  - a. Plan sports activities for each academic year.
  - b. Prepare annual budget for sports activities for DSCDS
  - c. Prepare budget for sports day celebration
  - d. Maintain record of each event in the office.
  - e. Submit report of each event with photo graphs (high quality printable photo) within two days to the audio visual photography and website committee.
  - f. Shall provide necessary information for the annual report committee as and when required.
  - g. Shall take necessary permission from the Principal and Heads of the department with regard to students attending a sports event.

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# Dayananda Sagar College of Dental Sciences

Policy Document

Student Council

  
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Dayananda Sagar College of Dental Sciences,  
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**Student Council**

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2	Role and Responsibilities of the Student Council	1
3	Composition of Student Council:	2

  
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## 1. Introduction

A student council comprises of all the nominated members to implement and promote sports and cultural activities in the academic year. The Student Council is required to adhere to the college policies. The new 'Student Council' meets the council's faculty in charge soon after the nomination. The faculty in charge has to support and advise the members at all times. Meetings are held twice a year to discuss about the upcoming events. All the decisions must be discussed with the teacher in charge.

## 2. Role and Responsibilities of the Student Council

The student council's mission is to serve as a voice for students in the college with respect to extra-curricular activities and to communicate with other students, faculty in charge, sports committee and cultural committee. The student council's primary responsibilities are to

- a) Plan social events for the college students such as talent shows, sports and cultural events in coordination with cultural and sports committee.
- b) Ensure that students will have a voice in decisions that affect them.

The other responsibilities include,

- To recognize talent among students.
- To provide, learning and entertainment opportunities for students.
- To motivate students on sports and cultural activities that interests them.
- To uphold respectful relationships with parents and institutional staff that includes teaching and non-teaching.
- To encourage social gatherings and supports the celebration of numerous multicultural festivals, including Christmas, Onam, and Ganapathi pooja.
- To engage student council members and other students actively in preparing the e magazine.

  
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### **Composition of Student Council:**

The Student Council and the various Central Committees established in the college shall periodically review the operations of their respective domains and, as and when necessary, make recommendations to enhance their performance. These are the members of the student council:

1. President
2. Vice president
3. General secretary
4. Cultural secretary
5. Sports secretary
6. Magazine editor
7. Associate editor
8. UG & PG Student representatives
9. Member Secretary
10. Faculty representatives

### **Tenure**

The student representatives of the Student Council shall hold office for a period of 1 year.

  
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# Dayananda Sagar College of Dental Sciences

## Policy Document

**STUDENT SUPPORT, WELFARE AND GRIEVANCE**

**REDRESSAL COMMITTEE**



**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES**

DAYANANDA SAGAR INSTITUTIONS

CAMPUS-1, K.S.LAYOUT, BANGALORE 560 078

STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

**Approving Authority: Principal, DSCDS**  
**Procedural Contact : Dr. Vinod Rangan**

**Classification: Administration**  
**Effective Date:07-11-2017**  
**Mandated review: Dec - 2018**

**Ref.No.: DSCDS/SSWGRC/2017/PP&RR/08112017**

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**POLICY DOCUMENT**

**1.0 : PURPOSE**

The Purpose of this committee is to provide Student Support, address their welfare and and grievances when duly brought forward.

**2.0 : DEFINITIONS**

For the purposes of this policy:

'**Student Support**' refers to support provided to students by means of assistance to grievances

"**Welfare**" means assistance provided to improve welfare of the Student community at DSCDS.

"**Grievance Redressal**" means attending to grievances (Academic/ General) raised by any student(s) with regard to activities within DSCDS.

**3.0 : SCOPE**

This policy applies to attending to grievances raised by our student community with regard to their academic/ professional needs/ administrative/ university related grievances regularly brought forward to this committee and to provide assistance to the student(s) for resolution of the same.

**4.0 : FUNCTIONING & WORKING**

The Student Support, Welfare and Grievance redressal committee of DSCDS brings about a providing help and assistance to our Student Community at times of need and coordination with other working committees of the college for effective resolution of the grievance brought forward. This committee meets once a year/ as the need may be.

4.1: To provide Student support for academic/ professional grievances as and when the issue is brought up to this committee, which will includes exam related grievances.

4.2: To maintain student welfare by addressing the grievances brought forward by taking action to provide resolution at the shortest time frame as possible.

4.3: To receive and maintain all grievances brought forward by the Student community with regard to their Academic/ Professional needs and discuss on providing resolutions to the same which may include collaboration with other working committee of the college.

4.4: To conduct a few Student-centric programs in coordination with the Academic Advisory Committee for the benefit of our students such as:

- a. Orientation Day for all newly joined students into the BDS Program every year.
- b. White Coat Ceremony: Clinical Induction Program
- c. Hepatitis Vaccination Drive



**DAYANANDA SAGAR COLLEGE OF DENTAL SCIENCES**

DAYANANDA SAGAR INSTITUTIONS

CAMPUS-1, K.S.LAYOUT, BANGALORE 560 078

**STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE**

5.0 : This committee is for a term of 1 year.


Dr. Hemanth M	:	Chairman
Dr. Vinod Rangan	:	Member Secretary
Dr. Chaya M David	:	Member
Dr. Prashanth NT	:	Member
Dr. Ramnarayan BK	:	Member
Dr. Veena Pai	:	Member
Dr. Pallavi Nanaiah	:	Member
Dr. Brunda K	:	Member
Mr. Nanjundaswamy	:	Member
Mr. Narasimhamurthy	:	Member
Mr. Ritvik Vinayak	:	Member - UG
Ms. Thejaswini L	:	Member - UG
Dr. Rose Maria Jose	:	Member - PG
Dr. Mahesh PC	:	Member - PG

6.0 : Group Policy

All in this committee work for effective resolution of all student grievances as properly brought forward, holding meetings with the Principal and suggesting effective solutions to the grievances brought forward. The functioning may take inputs/ involve other existing working/ administrative committee within the college.

7.0 : Roles & Responsibilities Matrix

Duties	Assigned To
Student Support & Welfare	Dr. Chaya M David Dr. Prashanth NT Dr. Ramnarayan BK
Exam Related Grievances	Dr. Veena S Pai Dr. Pallavi Nanaiah Dr. Brunda K
Student Grievances	Dr. Vinod Rangan Dr. Chaya M David Dr. Prashanth NT Dr. Ramnarayan BK
Sports Grievances	Mr. Nanjundaswamy
Library Grievances	Mr. Narasimhamurthy

  
**PRINCIPAL**  
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STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

**Approving Authority: Principal, DSCDS**  
**Procedural Contact : Dr. Vinod Rangan**

**Classification: Administration**  
**Effective Date:12-11-2018**  
**Mandated review: Dec - 2019**

**Ref.No.: DSCDS/SSWGRC/2018/PP&RR/13112018**

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**POLICY DOCUMENT**

- 1.0 : PURPOSE  
The Purpose of this committee is to provide Student Support, address their welfare and and grievances when duly brought forward.
- 2.0 : DEFINITIONS  
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- "Welfare" means assistance provided to improve welfare of the Student community at DSCDS.
- "Grievance Redressal" means attending to grievances (Academic/ General) raised by any student(s) with regard to activities within DSCDS.
- 3.0 : SCOPE  
This policy applies to attending to grievances raised by our student community with regard to their academic/ professional needs/ administrative/ university related grievances regularly brought forward to this committee and to provide assistance to the student(s) for resolution of the same.
- 4.0 : FUNCTIONING & WORKING  
The Student Support, Welfare and Grievance redressal committee of DSCDS brings about a providing help and assistance to our Student Community at times of need and coordination with other working committees of the college for effective resolution of the grievance brought forward. This committee meets once a year/ as the need may be.
- 4.1: To provide Student support for academic/ professional grievances as and when the issue is brought up to this committee
- 4.2: To maintain student welfare by addressing the grievances brought forward by taking action to provide resolution at the shortest time frame as possible.
- 4.3: To receive and maintain all grievances brought forward by the Student community with regard to their Academic/ Professional needs and discuss on providing resolutions to the same which may include collaboration with other working committee of the college.
- 4.4: To conduct a few Student-centric programs in coordination with the Academic Advisory Committee for the benefit of our students such as:
- Orientation Day for all newly joined students into the BDS Program every year.
  - White Coat Ceremony: Clinical Induction Program
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Dr. Ramnarayan BK	:	Member
Dr. Veena Pai	:	Member
Dr. Pallavi Nanaiah	:	Member
Dr. Brunda K	:	Member
Mr. Nanjundaswamy	:	Member
Mr. Narasimhamurthy	:	Member
Mr. Praveen Kumar G	:	Member - UG
Ms. Aditi U A	:	Member - UG
Dr. Varsha Venugopalan:	:	Member - PG
Dr. Apurba C Saharia	:	Member - PG

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STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

**Approving Authority: Principal, DSCDS**  
**Procedural Contact : Dr. Vinod Rangan**

**Classification: Administration**  
**Effective Date:08-11-2019**  
**Mandated review: Dec - 2020**

**Ref.No.: DSCDS/SSWGRC/2019/PP&RR/09112019**

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Dr. Veena Pai	:	Member
Dr. Pallavi Nanaiah	:	Member
Dr. Brunda K	:	Member
Mr. Nanjundaswamy	:	Member
Mr. Narasimhamurthy	:	Member
Mr. Kishen KS	:	Member - UG
Ms. Deepashree	:	Member - UG
Dr. Vaishali	:	Member - PG
Dr. Nageswaran GR	:	Member - PG

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STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

**Approving Authority: Principal, DSCDS**  
**Procedural Contact : Dr. Vinod Rangan**

**Classification: Administration**  
**Effective Date:10-11-2020**  
**Mandated review: Dec - 2021**

**Ref.No.: DSCDS/SSWGRC/2020/PP&RR/11112020**

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Dr. Ramnarayan BK	:	Member
Dr. Veena Pai	:	Member
Dr. Pallavi Nanaiah	:	Member
Dr. Brunda K	:	Member
Mr. Nanjundaswamy	:	Member
Mr. Narasimhamurthy	:	Member
Mr. Parikeertan YP	:	Member - UG
Ms. Aishwarya Vijay	:	Member - UG
Dr. Subbu Kashyap	:	Member - PG
Dr. Mir Shahid Ulla	:	Member – PG

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STUDENT SUPPORT, WELFARE AND GRIEVANCE REDRESSAL COMMITTEE

**Approving Authority: Principal, DSCDS**  
**Procedural Contact : Dr. Vinod Rangan**

**Classification: Administration**  
**Effective Date:11-11-2021**  
**Mandated review: Dec - 2022**

**Ref.No.: DSCDS/SSWGRC/2021/PP&RR/12112021**

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Dr. Ramnarayan BK	:	Member
Dr. Veena Pai	:	Member
Dr. Pallavi Nanaiah	:	Member
Dr. Brunda K	:	Member
Mr. Nanjundaswamy	:	Member
Mr. Narasimhamurthy	:	Member
Mr. Manoj Kumar TV	:	Member - UG
Ms. Gargi Prakash GC	:	Member - UG
Dr. Sindhu P	:	Member - PG
Dr. Zameer Ahmed CM	:	Member - PG

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**Approving Authority: Principal, DSCDS**  
**Procedural Contact : Dr. Vinod Rangan**

**Classification: Administration**  
**Effective Date:12-11-2022**  
**Mandated review: Dec - 2023**

**Ref.No.: DSCDS/SSWGRC/2022/PP&RR/12112022**

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Dr. Brunda K	:	Member
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