Dr D Y Patil School of Engineering, Lohegaon, Pune.



Quality Manual

Standardizing Academic Processes





Approved by AICTE, Recognised by Govt. of Maharashtra, Affiliated to Savitribai Phule Pune University

Doc No. DRDYPSOE/EOMS/ QM/01

QUALITY MANUAL

Section No.: ISO 21001:2018

Quality Manual

General Requirements for the competence of Educational Organizational Management System (EOMS)

Reference Standard	ISO 21001:2018
Issue Number	01
Issue Date	15/06/2021

Dr. D.Y. Patil School of Engineering

Dr. D. Y. Patil Knowledge City, Charholi (Bk), Lohegaon, Pune - 412 105

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"RELEASE AUTHORISATION"

DR. D.Y. Patil School of Engineering, Charholi (Bk), Lohegaon, Pune - 412 105 has established an Educational Organization Management System (EOMS) conforming to the requirements of ISO 21001:2018 for the competence of Educational Organizational Management System (EOMS). This manual outlines the Quality Management System implemented in DR. D.Y. Patil School of Engineering, Lohegaon, Pune.

The Principal of DR. D. Y. Patil School of Engineering is responsible for planning and co-coordinating with the help of members of ISO committee, Heads of all seven departments and registrar with his administrative office, for implementation and maintenance of the documents of EOMS. He has been authorized to get prepared, amend and issue this manual and co-ordinate with his team members for all the Quality activities within the organisation and interact with external organizations and individuals for all the related matters.

This document is approved for implementation in the laboratory

Authorized by

Principal

DR. D. Y. Patil School of Engineering

Charholi Bk., Lohegaon, Pune-411047

Principal

Aleenkya BY Patil School of Engineering, Lohegaen, Pune

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AMENDMENT RECORD

Amendments are recorded in the amendment record sheet as below.

Sr No.	Section/ Clause/ Para/ line (as applicable)	Date of Amendment	Amendment made	Reason of Amendment	Sign of Quality Manager
01					
02					
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vi) Profile of the Institute:

DR. D. Y. Patil School of Engineering (DR. DYPSOE), Lohegaon, Pune was incepted in the year 2010 with the vision "To excel as a centre of excellence in technical education." Initially it started with the 4 UG programmes and within last 13 years it has established itself as one of the leading institutes of Pune region now, with running of seven UG programs, five PG programs and two diploma programs. The DR. DYPSOE is affiliated to Savitribai Phule Pune University (SPPU) and is committed to offer quality engineering education to the students, to make them industry compliant and to earn job and subsequently make them become good citizens to help progress the nation.

DR. D. Y. Patil, a Padmashree recipient, and former Governor of the Indian States of Bihar, Tripura and West Bengal, a true visionary in the field of higher technical education is the founder of the D Y Patil Group. Dr. Ajeenkya DY. Patil who is highly educated in UK, is an entrepreneur and an educationalist and it is his exemplary vision that has led to the initiation of DR.D.Y. Patil Knowledge City, a truly unique confluence of institutions at one place wherein, DR. D.Y. Patil school of Engineering (DR DYPSOE) is also located.

The structural profile of the DR.D.Y. Patil school of Engineering (DR DYPSOE), Lohegaon is shown in Figure vi. DR. DYPSOE is the student-centric, participative and democratic engineering institute with an intensive focus to equip our student with a complete set of competencies both depth and breadth of knowledge, updated trends and analytical framework of courses beyond the curriculum.

DR. DYPSOE believes in supplementing routine classroom teaching, with different pedagogies like flipped classrooms and onsite training and guidance from Industry experts and academicians in order to make the students to be Industry compliant engineers. We give our students that extra edge' through continuous interaction with entrepreneurs, practicing managers and academic experts and periodic exposure to business organizations.

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ORNOGRAM

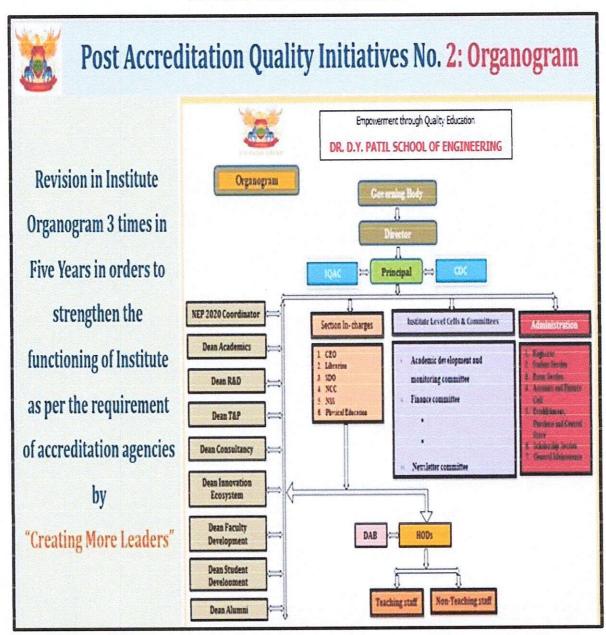


Figure vi: Ornogram of the DR. D.Y. Patil school of Engineering (DR DYPSOE), Lohegaon

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0.6 Quality Policy

We strive to impart the quality technical education through academic excellence and provide best of facilities to satisfy the need and expectations of the students and stakeholders.

0.7 Quality Objectives:

i. Quality Culture Promotion:

Measurable Outcome: Achieve a 20% increase in the participation rate of faculty And staff in quality culture initiatives /workshops within the next academic year.

ii. Mechanism Development:

Measurable Outcome: Establish and implement a set of 10 key performance indicators (KPIs) for academic and administrative units, with a target of achieving an 80% compliance rate within six months.

iii. Internalization of Best Practices:

Measurable Outcome: Recognize and reward at least one faculty/staff from all six viz. Civil, Mech., E & T.C., AIDS, and Automobile departments annually for successfully implementing and internalizing best practices identified through periodic assessments.

iv. Timely and Efficient Performance:

Measurable Outcome: Conduct quarterly performance audits for academic, administrative, and financial units, with the aim of identifying and addressing inefficiencies, resulting in a 15% improvement in overall efficiency over the next year.

v. Relevant Academic Programs:

Measurable Outcome: Implement a curriculum review cycle for Elective/Audit subjects, within the framework of SPPU, ensuring that at least 20% of the curriculum is updated annually to align with industry trends and demands.

vi. Equitable Access:

Measurable Outcome: Increase the number of students from underrepresented communities by 15% through targeted outreach programs (coaching for Graduate Aptitude Test examinations (GATE) and central and state public service commission

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including scholarship initiatives within the next academic year.

vii. Modern Teaching and Learning Methods:

Measurable Outcome: Implement at least two new technology-supported teaching methods or software each academic year, with 80% faculty participation in related professional development programs.

viii. Credible Assessment and Evaluation:

Measurable Outcome: Conduct an annual external review of assessment and evaluation processes, aiming for a 90% satisfaction rate among students and faculty.

ix. Support Structure and Services:

Measurable Outcome: Assess the adequacy of support structures and services annually, with a target of addressing identified gaps and achieving a 95% satisfaction rate among faculty and staff.

x. Research Collaboration, Patent registration and Networking:

Measurable Outcome: Facilitate collaboration with at least two institutions in India and one abroad within the next academic year, resulting in joint research projects and the exchange of research findings. Separate registration for Patents on Institute's name.

The detailed plan and procedure to achieve above mentioned objectives is described in Chapter 4, Context of the Organization.

1.0 Scope

The Quality Manual specifies requirement for a **Management System for Educational Organizations** (EOMS) like DR. DYPSOE which:

- a) Needs to demonstrate its ability to support the acquisition and development of competence through teaching, learning or research;
- b) Aims to enhance satisfaction of learners, other beneficiaries and staff through the effective application of its EOMS, including processes for improvement of the system and assurance of conformity to the requirements of learners and other beneficiaries.

All requirement of this document are generic and are applicable to educational

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organizations within larger organizations also, however this does not apply to organizations that only produce or manufacture educational products.

2.0 Normative references:

- 1.1 The DR. DYPSOE is affiliated to the Savitribai Phule Pune University and therefore is governed by its and circulars and ordinances issued by the Govt. of Maharashtra from time to time which forms one of the Normative references.
- 1.2 ADYPU's policy and procedures
- 1.3 ISO 9001:2015 Quality management system- Requirements
 - 1.3.1 ISO 9000:2015 Quality management system Fundamentals and vocabulary
- 2.4. ISO 21001:2018 EOMS, Requirements with guidance for use

3.0. Terms and definitions:

For the purposes of this document, the following terms and definitions apply

- 3.1 Quality management system: A quality management system is a set of interrelated or interacting elements that organizations use to formulate quality policies and quality objectives and to establish the processes that are needed to ensure that policies are followed and objectives are achieved. These elements include structures, programs, procedures, practices, plans, rules, roles, responsibilities, relationships, contracts, agreements, documents, records, methods, tools, techniques, technologies, and resources.
- 3.2 Quality policy: It is a policy which tries to express the top management's commitment to the QMS by allowing managers to set quality objectives.
- 3.3 Quality: The adjective quality applies to objects and refers to the degree to which a set of inherent characteristics fulfils a set of requirements.

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- 3.4 Requirement: need or expectation that is stated, generally implied or obligatory
- 3.5 **Educational service:** process that support acquisition and development of learners' competence through teaching, learning or research
- 3.6 **Educational product:** /learning resource/ tangible or intangible goods used in pedagogical support of an educational service
- 3.7 **Teaching:** working with learners to assist and support them with learning
- 3.8 **Training:** The process of imparting and developing knowledge, skills, and abilities to meet requirements
- 3.9 **Curriculum:** documented information of what, why, how and how well learners should learn in a systematic and intentional way
- 3.10 **Strategy:** plan to accomplish the organization's mission and achieve the organization's vision
- 3.11 **Process:** set of interrelated or interacting activities that use inputs to deliver an intended result
- 3.12 Output: An output is the result of a process that has been successfully completed.
- 3.13 Context of the organization: An organization's context is its business environment. It includes all of the internal and external factors and conditions that affect its products and services, have an influence on its QMS, and are relevant to its purpose and strategic direction.
- 3.14 Interested parties: /stakeholder/ person or organization that can affect, be affected by, or perceive itself to be affected by a decision or activity. The interested parties in the context of the organisation are shown in Figure 3.14.1

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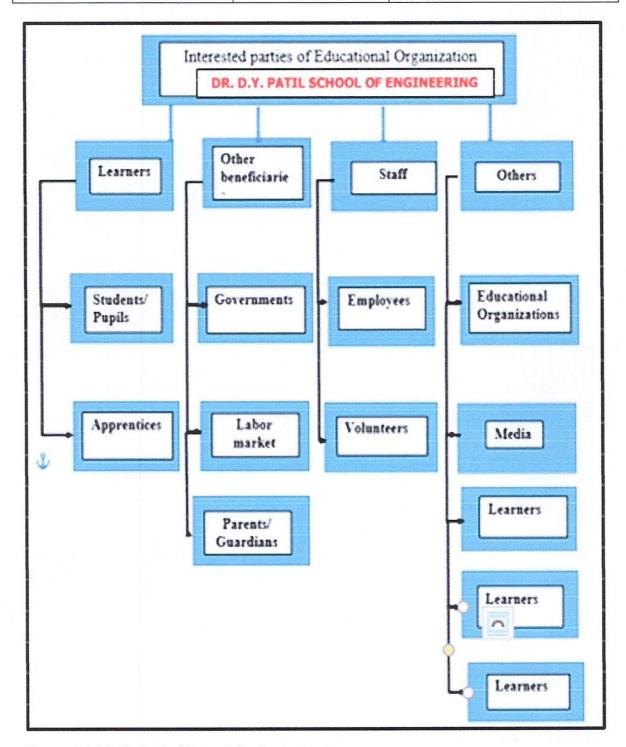


Figure 3.14.1: Stake holders of the Organisation

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- 3.15 Top management: person or group of people who direct and control an organization at the highest level. There in university board and presidents
- 3.16 Learner: beneficiary acquiring and developing competence using an educational service
- 3.17 Outsource: make an arrangement where an external organization performs part of an organization's function or process
- 3.18 Social responsibility: responsibility of an organization for the impacts of its decisions and activities on society and the environment, through transparent and ethical behaviour that
- Contributes to sustainable development, including health and the welfare of society;
- Takes into account the expectations of interested parties;
- Is in compliance with applicable law and consistent with international norms of behaviour;
 and
- Is integrated throughout the organization and practiced in its relationships
- 3.19 Documented information: information required to be controlled and maintained by an organization and the medium on which it is contained
- 3.20 Risk: effect of uncertainty
- 3.21 Opportunity: Positive change from risk creates opportunity, but not every positive risk outcome brings opportunity
- 3.22 Competence: ability to apply knowledge and skills to achieve intended results
- 3.23 Audit: systematic, independent and documented process for obtaining objective evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled
- 3.24 Internal audit: A documented process for determining compliance and non-conformance with standards
- 3.25 Performance: measurable result
- 3.26 Correction: A correction is any action that is taken to eliminate a nonconformity. However, corrections do not address root causes. When applied to products, corrections can

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include reworking products, reprocessing them, regrading them, assigning them to a different use, or simply destroying them.

- 3.27 Corrective action: action to eliminate the cause of a nonconformity and to prevent recurrence
- 3.28 Monitoring: Determining the status of a system, a process or an activity
- 3.29 Review: A review is an activity. Its purpose is to figure out how well the thing being reviewed is capable of achieving established objectives.
- 3.30 Effectiveness: extent which planned activities are realized and planned results achieved
- 3.31 Validation: confirmation, through the provision of objective evidence, that the requirements for a specific intended use or a application have been fulfilled
- 3.32 Accessibility: usability of product, service, environment, or facility by people within the widest range of capabilities
- 3.33 Continual improvement: recurring activity to enhance performance

3.34 List of abbreviations

ISO	International Organisation for Standardisation
DR. DYPSOE	DR. D. Y. Patil School of Engineering
QM	Quality Manual
IA	Internal Audit
MoM	Minutes of Managing Committee meeting
SPPU	Savitribai Phule Pune University

4. CONTEXT OF THE ORGANIZATION

4.1 Understanding the organization and its context

The DR. DYPSOE uses the SWOT analysis method to determine and analyse both external and internal issues that are relevant to its purpose and its strategic direction and that affect its ability to achieve the intended results of its management system. The SWOT analysis consists of a description of the strengths and weaknesses of the organization's internal environment

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(values, culture, knowledge, performance, environment, infrastructure, resources) and the opportunities and risks of the external environment (macro and micro). The process of strategic planning and evaluation of the DR. DYPSOE is depicted in the following diagram.

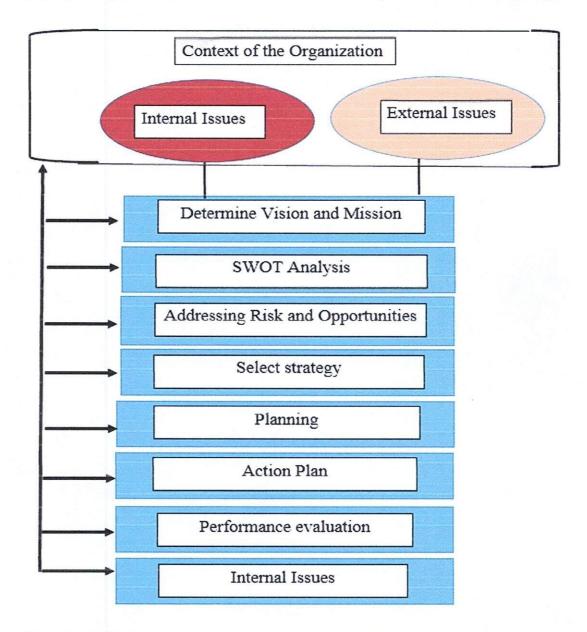


Figure 4.1: Understanding the Organisation and its content

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4.2 Strategic plan and mechanism, required to monitor achievement of its objectives:

- **4.2.1** The DR. DYPSOE has an Internal Quality Assurance Cell (IQAC), which has also developed a mechanism for monitoring the work, meant for achieving the above objectives. This also includes the objectives set for getting accreditation from the bodies like National Assessment and Accreditation Council (NAAC), National Board of Accreditation (NBA), New Delhi and National Institutional Ranking Framework (NIRF) etc. The detailed procedure is described below.
- 4.2.2 The IQAC of DR. DYPSOE, will prepare a five years' strategic plan comprising of 20 activities. This plan would also include its implementation and monitoring strategies. (Quality Procedure Document No. DR. DYPSOE /IQAC/QP-4.2.2/Strategic Plan/)
- 4.2.3 Additionally the IQAC also prepares a comprehensive Academic calendar for all branches of academics at the beginning of new academic year. In this, all the activities expected to be completed by all department through faculties and heads of the department are mentioned. (Quality Procedure Document No. DR. DYPSOE /IQAC/QP-4.2.3/Academic calendar/)
- 4.2.4 The implementation of the activities mentioned in strategic plan and academic calendar are monitored and evaluated annually. Accordingly, the measures will be taken to intensify its implementation. Based on the assessment, measures will be planned to improve the performance of the activities that did not reach the target for the current year, and to include them in the next year's performance plan. (Quality Procedure Document No. DR. DYPSOE /IQAC/QP-4.2.4/Performance evaluation)

RELATED DOCUMENTS:

- DR. DYPSOE strategic plan: Annexure I
 (Quality Procedure Document No. DR. DYPSOE /IQAC/QP-4.2.2/Strategic Plan/)
- DR. DYPSOE Procedures for planning, reporting and monitoring activities: Annexure II

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(Quality Procedure Document No. DR. DYPSOE /IQAC/QP-4.2.3/Academic calendar/)

• DR. DYPSOE to evaluate and reward the work of teachers and staff: **Annexure III** (Quality Procedure Document No. DR. DYPSOE /IQAC/QP-4.2.4/Performance evaluation/)

4.3 Understanding the needs and expectations of interested parties

The DR. D. Y. Patil School of Engineering (DR. DYPSOE), identifies and categorizes its interested parties in order to ensure the continuity and sustainability of educational services in accordance with the requirements of the law and regulations. These are included in Table 4.3.1.

Table 4.3.1: Shows needs and expectations of the parties

Sr. No.	Interested Parties	Туре	Needs and expectations
1	Government	External	 Increase the reputation and rating of the Institute High performance and results Quality products and services Current curriculum, plan and content
2	Learners	Internal	Favourable learning environment, infrastructure and facilities Teachers and staff understand each other and help and advise Eligibility for tuition discounts and scholarships Promote the profession you are studying Independent learning, development and creative thinking Participate in contests, competitions and Olympiads and show success Increase practical experience Graduate on time and receive a diploma Conduct research and write diplomas that meet the needs of the market, society and time Get a job after graduation
3	BoS of SPPU	External	Increase the reputation and rating of the Institute
4	Director, Board of	Internal	High performance and results • Quality products and services

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	Directors,		Revenue growth
	Academic		• Cost savings
	Council of		• Increase enrolment
	DR.		• Increase foreign and domestic donations and investment
_	DYPSOE		Therease roteign and domestic donations and investment
5	Teachers	Internal	• Sufficient environment, material base, supply and
	and staff		support for work, training and study
			Current curriculum, plan and content
			High salaries and bonuses
			Receive merit, awards and respect
			Develop and improve knowledge, experience and skills
			Talented and skilled entrants
			• Internal information flow should be fast and transparent
			• Management that delivers on its promises and accepts
			criticism
			Satisfaction with the work you do
6	Labour	External	Graduates who meet or exceed job expectations
	market		A graduate with well-developed personal soft
			skills
7	Partner	D-41	Continue to employ interns
1	Partner	External	• Exchange of experience and learning
			Provide scholarships to learners in related fields
			Work with the best graduates
			Donate to the university
			Carry out trustworthy and reliable operations
			Use of university material resources
8	Society	External	Carry out trustworthy and reliable operations
9	Trade unions	Tutama1	Results and evidence of social research
9	Trade unions	Internal	Protection of labour rights and legitimate interests
			of members and citizens
10	C W	T	Trade union membership tax
10	Consulting	Internal	• Improving and supporting the teaching methods
	Professor, Senior		of young teachers
	Lecturer	ll ll	Receive titles and awards
			• Get help in times of need
			Continue to work and school
Ž.			Have additional financial income

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1.1	Ta .	T	
11	Contract	External	Favourable working environment and infrastructure
	teachers and staff		Have additional financial income
			 Work for a reputable organization called MUST
12	Parents and	External	Training in a prestigious public school
	guardians		Socialize your child
			Get to know your child's learning at any time
			Successfully educate and graduate your child
			Get a good job after graduation
13	Organizations	External	Exchange of experience
V	with similar activities		Collaborate on training and research
14	Student	Internal	To create conditions for the protection and
	Union of the		development of learners interests
	MUST		To develop learners' creative thinking and
			increase their active participation
15	Alumni	External	Attend professional development and advanced
	Association		training
		Y .	 Stay in touch with school and alumni
16	Foreign and	External	Provide quality education services
	domestic	× ,	 Increase the number of programs and institutional
	accreditation and		accreditations
	certification		Meet the requirements
	bodies		Continuous improvement
17	Other	External	Expand science - based research
	government		Recruit quality professionals
	Agencies		Receive specialized training
			Use of university material resources
18	Courts and	External	Comply with laws and regulations
	Police		Organize crime prevention activities
			Resolve issues internally without labour disputes

DR. DYPSOE will always focus on meeting the needs and expectations of interested parties.

Here are some indicators of how their needs are being met:

- QS ranking [Global higher education analyst Quacquarelli Symonds (QS)].
- Activity reports and results

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- Financial statements
- Performance evaluation
- Number of admissions
- GPA (Grade Point Average)
- Graduate employment rate
- Satisfaction survey results
- Status of petitions, comments and complaints

4.4. Determining the scope of the management system for DR. DYPSOE

The **DR. DYPSOE** is implementing a quality management system in the following processes. These include:

4.4.1. Educational service:

- Bachelor's, Master's and Doctoral degree programs
- Long-term and short-term professional training
- Research and innovation
- Patent registration

4.4.2. Educational support processes

- Human resource
- Finance
- Environment and facilities
- Utilities (library and Sports Facilities)
- Information technology

Location information of the units covered:

Sr. No.	Name of Entity	Building No	Location
1	Ajeenkya DY. Patil School of		Map displayed
	Engineering		below

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Figure 4.4.1: Location Plan of DR. DYPSOE

4.5 Quality and Environmental management system and its processes.

The DR. DYPSOE has established, implemented, maintained and continually improve a quality management system, including the required processes needed and their interaction, in accordance with the needs of this international standard.

The DR. DYPSOE has developed its own "Process Manual", describing the following processes to be established for smoothly running of the curriculum, as per effective syllabus of Savitribai Phule Pune University(SPPU). Its other purpose is to further satisfy all the needs and requirements of all stake holders and achieve sustainable development.

4.5.1 Relevant Processes (Process Manual)

- (i) Admission, administration and financial management
- (ii) Teaching and learning as per effective syllabus of Savitribai Phule Pune University(SPPU).
- (iii)Delivery of knowledge
- (iv) Examination & Evaluation

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(v) Research & Innovation

(vi) Placement

Each department /section shall define input/output and their requirements for smooth functioning of their process. They will also assign responsibilities, execute the process and improve the same by implementing effective management system. The entire process is shown in Figure 4.5.1 with the help of Social, Economic and Environment matrix.

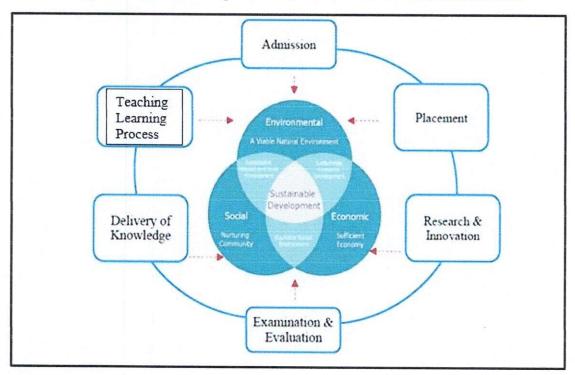


Figure 4.5.1: Organisation and Social, Environment and economic matrix

5. LEADERSHIP

5.1 Leadership and commitment

The top management is fully committed towards the development, implementation and improvement of Educational Organisation Quality Management System(EOMS). Regular reviews and communication sessions are organized and necessary resources are provided to enhance the Quality of Services/Operations.

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The top management i.e. the Chairman, Director, Principal, Internal Quality Assurance Cell (IQAC) In charge, Dean (Academic Affairs), Registrar, all Departmental Heads and Training and Placement (T & P) Officer, ensure development, implementation and improvement of EOMS in line with requirements of QMS - ISO 9001:2015 and EMS - ISO 21001: 2015 as well as with policies of the University.

The top management ensures effective implementation and improvement of EOMS through actions such as:

- Deployment of an appropriate Quality and Environmental Policy and ensuring its continuing suitability.
- Providing framework, guidance and monitoring of objectives to maintain and improve QEMS.
- Conducting Management Reviews to guide and monitor proactive improvements.
- Deployment of human resources and infrastructure for meeting QEMS requirements.
- Effective Communications throughout the University and various coordinating agencies for the implementation of QEMS, Statutory and Regulatory bodies.

5.2 Quality and Environmental policy

DR. DYPSOE, strives contributing to the growth of Energy Education, Research, Innovation and Centre of Excellence to be a World Class education centre.

To achieve it, the DR. DYPSOE is committed to:

- Compliance to applicable statutory, legal and other requirements;
- Serving society to lead to its enrichment and advancement;
- Maintaining dialogue with its students and other stakeholders to understand their needs, expectations and determining their level of satisfaction;
- Contributing to the growth of higher education and upholding the highest ethical and professional standards;
- Bring Environmentally Awareness, among the school of engineering community to conserve the natural resources and minimize pollution;
- To evolve mechanisms for 'R4': Reduce, Reuse, Recycle and Repurpose;

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				School



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• To provide a framework for setting objectives and continually improve the effectiveness of the Quality & Environmental Management System.

A Quality and Environmental Policy provides overall direction to formulate objectives and measures to monitor the same to cater needs of all stake holders and to ensure all round sustainable development. The policy will be communicated to all the stakeholders from time to time through official website and also through the awareness initiatives.

5.3 Organizational roles, responsibilities and authorities

The DR. DYPSOE, has a structure of Director's office, Principal's office governing administration, Accounts, Store, departments teaching various disciplines, Academic Coordinators, Dean for various activities like R and D, Patent filing, Consultancy services research and innovation, placements etc., to work in collaboration for the flow of information and operations. Top management defines responsibilities and powers related to the functions of the relevant units/officials and assigns them by job description, decrees, orders and decisions. A decision flow chart is shown below:

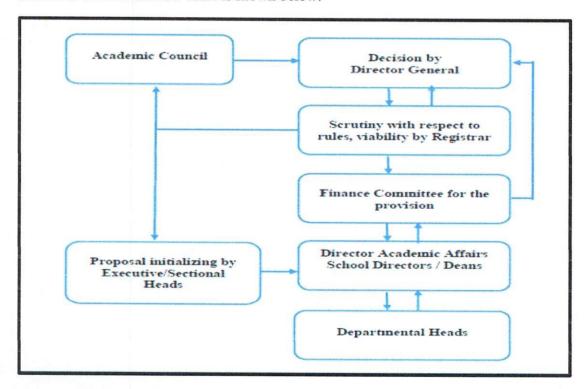


Figure 5.3: Organisation and Social, Environment and economic matrix

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6. PLANNING

6.1 Action to address risk and opportunities

- **6.1.1 Top management of the DR. DYPSOE** will continuously foresight risk and opportunity to improve the quality of education and to meet students and all stakeholders' expectations. This manual proposes risk assessment methodology for all the areas and procedures with its degree.
 - Use risk-based thinking;
 - Identify potential risk and opportunities based on internal / external factors;
 - Assess degree of risk associated with decisions;
 - SWOT analysis by Principal and Director;
 - Frame actions to address risk and appreciate opportunity;
 - Evaluate the effectiveness of the measure taken;

Reference document:

SWOT Analysis for Engineering schools: Annexure IV

(DR. DYPSOE /IQAC/QP-6.1.1/SWOT ANALYSIS)

Risk assessment in various processes: Annexure V

(DR. DYPSOE /IQAC/QP-6.1.1.1/RISK ANALYSIS)

6.1.2 Actions to address Environmental Aspects

- Identify the various aspects focusing the activities done on the campus
- Use risk based thinking for quantifying the severity of the impact of the activity on the environment
- Estimate the probability (or likelihood) of the respective activity being done
- Considering the Probability of the respective activity being done along with the severity of its impact, estimate the Environmental Significance of the activity as Low, Medium or High
- Evolve environmental management plan focusing the environmental significance of the activities.

6.1.3 Actions to address the Compliance Obligations

- Identifying the activities which require prior approvals and continuous monitoring
- Proper documentation to be done for taking the approvals of the respective activities
- Create adequate infrastructure for continuous monitoring of the specific data and create proper mechanism for its documentation and reporting.

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6.2 Educational organization objectives and planning to achieve them

6.2.1 DR. DYPSOE, establishes educational organization objectives at relevant functions, levels, and processes needed for the EOMS.

The educational organization objectives are:

- a) consistent with the educational organization policy;
- b) measurable (if practicable);
- c) take into account applicable requirements;
- d) relevant to the conformity of products and services and to the enhancement of learner, staff and other beneficiary satisfaction;
- e) continually monitored;
- f) communicated;
- g) Updated as appropriate.

DR. DYPSOE, maintain and retain documented information on the educational organization objectives and the achievement of them.

6.2.2 When planning how to achieve its educational organization objectives, DR. DYPSOE, determines, and outline in its strategic plan:

The institutional objectives for each academic year defined every year in College Development Counsel (CDC) and approve the same in the General Body (GB) meeting.

- a) what will be done;
- b) what resources will be required;
- c) who will be responsible;
- d) when it will be completed;
- e) how the results will be evaluated

Reference document: Annexure VI

DR. DYPSOE / /IQAC/ QM-6.2.2/Action plan to achieve objectives & goals.

6.3 Planning of changes

Where DR. DYPSOE, determines the need for changes to the EOMS, the changes shall be carried out in a planned manner.

DR. DYPSOE, considers:

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- a) the purpose of the changes and their potential consequences;
- b) the integrity of the EOMS;
- c) the availability and readiness of internal resources;
- d) the allocation or reallocation of responsibilities and authorities;
- e) The availability and readiness of external providers needed to implement the change.
- 7.0 Support
- 7.1 Resources

7.1.1 General

7.1.1.1 DR. DYPSOE determines and provides the resources needed for the establishment,

Implementation, maintenance and continual improvement of the EOMS, in such a way that they sustainably enhance:

- a) learner engagement and satisfaction through activities that improve learning and promote the achievement of learning outcomes;
- b) staff engagement, trainings and satisfaction through activities to improve staff competencies to facilitate learning;
- c) other beneficiary satisfaction, through activities that contribute to the social benefits of learning.

7.1.1.2 DR. DYPSOE determines and monitors which resources will be provided by:

- a) the organization;
- b) external providers.
- **DR. DYPSOE** takes into account the needs of learners with special needs and shall ensure that a variety of accessibility requirements are anticipated.

7.1.2 Human resources

7.1.2.1 Human resources include as applicable:

- a) staff employed by the organization;
- b) volunteers and interns working with or contributing to the organization;
- c) staff of external providers working with or contributing to the organization.

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7.1.2.2 The DR. DYPSOE shall:

- a) determine and provide the human resources necessary for the effective implementation of its EOMS and for the operation and control of its processes;
- b) determines, implements and publish recruitment or selection criteria, which shall be available to relevant interested parties;
- c) Maintains documented information on the process used for recruitment or selection, and retains documented information on the results of the recruitment.

The institution keenly processes the recruitment of staff within the above levels. The institution determines and provides the required human resources for the effective implementation of its EOMS and for the operations and process controls. To select competent human resources, the institute determines and deployed a selection and recruitment process and criteria to ensure that the same is available for interested parties. The institute determines for the development of necessary competence of the personnel performing work for every position in teaching and non-teaching categories. The qualifications and experience required as eligibility criteria for various positions are established as per the regulatory and funding agencies like UGC, AICTE, Government of Maharashtra (DTE) and others.

Wherever applicable and whenever needed, training is planned and delivered accordingly to various categories of employees to achieve the necessary competence in the activities being performed by them. The institute organizes various training program, faculty development program, short term programs, and conferences for the employees and also provides financial assistance to the employees for these activities. The institute encourages the research and development activities by providing financial resources and facilities to the faculties, and research scholars.

7.1.3 Facilities:

7.1.3.1 The facilities include, as applicable, the following facilities that meet learner requirements:

- a) buildings, and grounds;
- b) equipment including hardware and software;
- c) Utilities.

7.1.3.2 The DR. DYPSOE shall:

- a) determine, provide and maintain safe facilities:
- i) that are suitable for human resources to support learners' development of competence;

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- ii) that enhance learners' development of competence;
- b) ensure that the dimensions of the facilities are adequate to the requirements of those using them.

7.1.3.3The institute ensures the availability of infrastructure and facilities for:

1) Teaching-learning, Self-learning, and implementing knowledge process for institutional human resource and learner, to develop and enhance competence. Rest and recreation schedule to acquire adequate time for maintenance and restructure or renovate the building infrastructure, and/or technical facilities.

7.1.4 Environment for the operation of educational processes:

The institute has developed a healthy and Conducive environment for its operations. The state-of-art infrastructure, proper office set-up, behavioural policy (code of conduct) plays a vital role in the maintenance of the requisite operations environment. The organization abides to provide and maintain a suitable environment to promote the overall well-being of overall stakeholders by considering:

- 1) Psychological factors consist of work demands, influence at work, possibilities for development, commitment to workplace, rewards, role clarity of leadership, etc.
- 2) Physical factors include environmental factors like temperature, workplace luminous, humidity, ventilation, hygiene, and noise, etc.

7.1.5 Monitoring and measuring resources:

7.1.5.1 General:

The DR. DYPSOE determines and provides the resources needed to ensure valid and reliable results when monitoring or measuring is used to verify the conformity of products and services to requirements.

The DR. DYPSOE ensures that the resources provided:

- a) are suitable for the specific type of monitoring and measurement activities being undertaken, i.e. adequate to the target, the type, method of educational delivery and duration of the educational service;
- b) are maintained to ensure their continued fitness for their purpose.

The DR. DYPSOE, retains appropriate documented information as evidence of fitness for the purpose of monitoring and measurement resources.

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Reference documents:

Employee training schedule for faculty and staff: Annexure VII

(DR.

DYPSOE /IQAC/QP/7.1.1.1/Schedule for faculty & Staff)

Competence matrix: Annexure VIII

(DR. DYPSOE / IQAC /QP/ 7.1.1.2/Training competency matrix)

Workshop and training attended: Annexure IX

(DR. DYPSOE / IQAC /QP/7.1.3/Workshop and Training)

7.1.5.2 Measurement traceability:

When measurement traceability is a requirement or is considered by the DR. DYPSOE to be an essential part of providing confidence in the validity of measurement results, measuring resources are:

- a) verified or calibrated, or both, at specified intervals, or prior to use, against measurement standards traceable to international or national measurement standards; when no such standards exist, the basis used for calibration or verification are retained as documented information;
- b) identified in order to determine their status;
- c) Safeguarded from adjustments, damage or deterioration that would invalidate the calibration status and subsequent measurement results.

The DR. DYPSOE, determines if the validity of previous measurement results has been adversely affected when measuring equipment is found to be unfit for its intended purpose, and take appropriate action as necessary.

7.1.6 Organizational knowledge:

7.1.6.1 General:

The DR. DYPSOE, determines the knowledge necessary for the operation of its processes and to achieve conformity of products and services. This knowledge is maintained and made available to the extent necessary. When addressing changing needs and trends, DR. DYPSOE, considers its current knowledge and determine how to acquire or access any necessary additional knowledge and required updates.

The DR. DYPSOE, encourage the exchange of knowledge between all educators and staff, particularly amongst peers.

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7.1.6.2 Learning Resources:

DR. DYPSOE, provides learning resources, as appropriate, and shall make them available where

and when needed. The learning resources are:

- a) reflect the needs and requirements of learners, other beneficiaries and educators;
- b) be reviewed at planned intervals to ensure they are up to date;
- c) be catalogued and referenced.

The DR. DYPSOE, respect intellectual property requirements and encourages reusability of resources.

7.2 Competence:

7.2.1 General:

The DR. DYPSOE:

- a) determines the necessary competence of person(s) doing work under its control that affects its educational organization performance;
- b) ensures that these persons are competent on the basis of appropriate education, training, or experience;
- c) establishes and implements methods for evaluating the performance of staff;
- d) where applicable, take actions to acquire the necessary up to date competence, and evaluate the effectiveness of the actions taken;
- e) take actions to support and ensure the continual development of relevant staff competence;
- f) Retains appropriate documented information as evidence of competence.

7.2.2 Competence:

7.2.2.1 General:

The DR. DYPSOE,

- a) determines the necessary competence of person(s) doing work under its control that affects its educational organization performance;
- b) ensures that these persons are competent on the basis of appropriate education, training, or experience;
- c) establish and implements methods for evaluating the performance of staff;
- d) where applicable, take actions to acquire the necessary up to date competence, and evaluate the effectiveness of the actions taken;
- e) take actions to support and ensure the continual development of relevant staff competence;
- f) retains appropriate documented information as evidence of competence.

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7.2.2.2 Additional requirements for special needs education

The DR. DYPSOE, supplies resources to support educators by:

- a) ensuring that all educators and staff having contact with learners with special needs have appropriate specialized training, which can include:
- 1) meeting the learning needs of learners who have different requirements;
- 2) differentiated instruction and assessment;
- 3) instructional scaffolding;
- b) Providing access to a network of specialists.

7.3 Awareness:

The DR. DYPSOE ensures that relevant persons doing work under the organization's control are aware of:

- a) the educational organization policy and strategy, and relevant EOMS objectives;
- b) their contribution to the effectiveness of the EOMS, including the benefits of improved educational organization performance;
- c) the implications of not conforming with the EOMS requirements.

7.4 Communication:

7.4.1 General:

The DR. DYPSOE, determines the internal and external communications relevant to the EOMS, including:

- a) on what it will communicate;
- b) why to communicate;
- c) when to communicate;
- d) with whom to communicate;
- e) how to communicate:
- f) Who to communicates.

7.4.2 Communication purposes:

Internal and external communication has the purpose of:

- a) seeking the opinion or consent of relevant interested parties;
- b) conveying to interested parties relevant, accurate and timely information, consistent with the organization's mission, vision, strategy, and policy;
- c) Collaborating and coordinating activities and processes with relevant interested parties within the organization.

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7.4.3 Communication arrangements:

7.4.3.1 The DR. DYPSOE determines and implements effective arrangements for communicating with learners and other interested parties in relation to:

- a) organizational policy and strategic plan;
- b) design, content, and delivery of educational products and services;
- c) inquiries, application, admission, or registration;
- d) learners' performance data, including results of the formative and summative assessment;
- e) Learner and interested parties' feedback, including learner complaints and learners/interested parties' satisfaction surveys.

The DR. DYPSOE, informs to the learners and other beneficiaries about external contact points in case of unresolved issues like information about university tribunal, Anti-Ragging ombudsman, etc.

7.4.3.2 At the planned intervals, the DR. DYPSOE:

- a) monitors the implementation of its communication efforts;
- b) Analyse and improve the communication plan based on the results of monitoring.

The DR. DYPSOE retains documented information of the communication process. Reference Document:

Communication Matrix: Annexure X

ADPSOE/IQAC/ QP 7.4.3.2 /Communication Matrix.

7.5 Documented information:

7.5.1 General:

The DR. DYPSOE 's EOMS includes:

- a) documented information required by this document;
- b) documented information determined by the organization as being necessary for the effectiveness of the EOMS.

7.5.2 Creating and updating:

When creating and updating documented information, The DR. DYPSOE ensures appropriate:

- a) identification and description (e.g. a title, date, author, or reference number);
- b) format (e.g. language, software version, graphics) and media (e.g. paper, electronic), taking into account the accessibility requirements of persons with special needs;
- c) review and approval for suitability and adequacy.

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7.5.3 Control of documented information

7.5.3.1 Documented information required by the EOMS and by this document are controlled to ensure:

- a) it is available and suitable for use, where and when it is needed;
- b) it is adequately protected (e.g. from loss of confidentiality, improper use, or loss of integrity, or unintended alterations).

7.5.3.2 For the control of documented information, The DR. DYPSOE addresses the following activities, as applicable:

- a) distribution, access, retrieval, and use;
- b) protection and security, including redundancy;
- c) storage and preservation, including preservation of legibility;
- d) control of changes (e.g. version control);
- e) retention and disposition;
- f) ensuring confidentiality;
- g) prevention of the unintended use of obsolete documented information.

Documented information of external origin determined by the DR. DYPSOE to be necessary for the planning and effective operation of the EOMS is identified, as appropriate, and controlled

Reference:

Master list Management System documents: Annexure XI

(DR. DYPSOE /IQAC/QM/ 7.5.1 & 2 Master list of external origin documents)

List of records / files / registers: Annexure XII

(DR. DYPSOE /IQAC/QM/7.5.3/Procedure for document control/

8. OPERATIONS

8.1 Operational Planning and control

The DR. DYPSOE offers graduate degree, post graduate in the field of Mechanical Engineering, Computer Engineering and Electronic and Telecommunication Engineering, to impart and create new knowledge and cater the needs of changing market. All of these programs and research activities are well planned and disseminated through academic calendar across the departments of DR. DYPSOE.

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A STATULA

"Empowerment through quality technical education"

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The DR. DYPSOE, has a focused mandate for protecting and enriching the environment by optimizing the use of resources like electricity and water, reduce the food wastage.

8.2 Requirements for the educational products and services

8.2.1 Determining the requirements

- A. Requirements at Strategic level
- (i) Statutory and regulatory requirements
- (ii) Strategic planning requirements.

B. Requirements at planning level

- (i) Induction / orientation programs for new entrants.
- (ii) Academic planning
- (iii) Academic Calendar
- (iv) Detailed Curriculum of program (with credits)
- (v) Teaching and Evaluation Plan
- (vi) Policies for students to attain degree.
- (vii) Placement Policies
- (viii) Course handout and study material
 - Applicable environmental, health and safety requirements.
 - Information regarding scholarships and grants applicable to the University.
 - Information about facilities available on the campus.

8.2.2 Requirements for research and innovation services

The DR. DYPSOE fraternity supports for the free and responsible conduct of investigative, scholarly and creative activities. The Office of Dean - Research and Development provides support from the initial stages of proposal development to grants management, publication and the transfer of technology in terms of patent and prototype. The DR. DYPSOE provides internally funded grants, pre-award and post-award support for externally funded grants and offer education and support information on grant compliance and the responsible conduct of research.

Various committees for smooth running of the day to day affairs of DR. DYPSOE are constituted and through which following policies have been drafted and these are now available in the office of I.Q.A.C. These include:

- Finance Policy
- Academic development and Monitoring Policy

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ALEXANDE

"Empowerment through quality technical education"

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- Budget Policy
- Purchase Policy
- Staff welfare Policy
- Parent Teacher Association Policy
- Sports Policy
- Consultancy Policy
- Student Research Projects
- Newsletter Committee Policy
- Industry Institute Interaction Policy
- Canteen Policy
- Eco-friendly/ Green campus Policy
- Policy for preparation and submission of Student Projects
- Hostel Committee Policy
- Internal Examination Conduction Policy
- Internal complaint redressal Policy
- Anti ragging Policy
- Cultural activity Policy

Various inter-related activities that lead to enhance research atmosphere at DR. DYPSOE and promote students and faculty to do quality research for societal benefits are shown in Figure 8.2.2 below:

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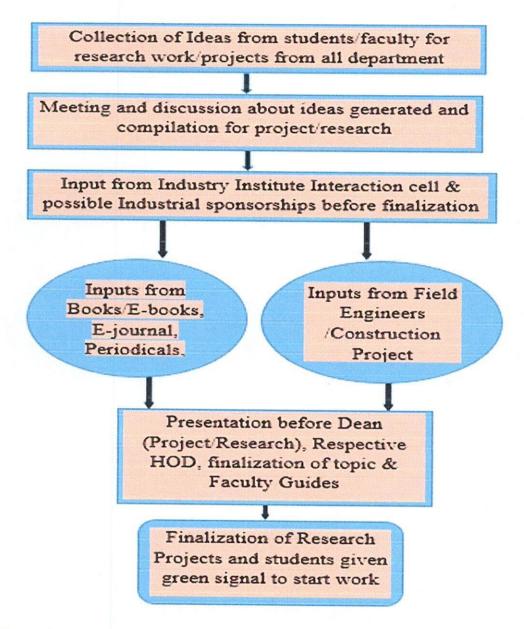


Figure 8.2.2: Organisation and Social, Environment and economic matrix

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8.2.3 Changes to requirements for the educational products and services:

DR. DYPSOE. ensures that relevant documented information is amended and that relevant interested parties are made aware of the changed requirements when the requirements for educational products and services are changed.

8.3 Design and development of the educational products and services.

8.3.1 General

The DR. DYPSOE runs the degree and Post graduate courses as per the curriculum designed by Savitribai Phule Pune University (SPPU) and as such there is no independence of selection of subject and its teaching pattern to be decided at DR. DYPSOE level. Also during annual meeting with Board of Studies (BOS) of SPPU, some suggestions are made to include new subjects or add/modify certain existing curriculum based on inputs from Industry and peer reviews. However, the curriculum design remains to be under the jurisdiction of SPPU. The provisions as regards implementation of curriculum as per guidelines of UGC/ AICTE/ NBA/ NAAC and other such regulating or accrediting authorities is carried out on priority.

8.3.2 Design and development planning

This is not applicable since curriculum framing remains entirely at the discretion of SPPU.

8.3.3 Design and development inputs

This is not applicable since curriculum framing remains entirely at the discretion of SPPU.

8.3.4 Design and development controls

This is not applicable since curriculum framing remains entirely at the discretion of SPPU.

8.3.5 Design and development output

This is not applicable since curriculum framing remains entirely at the discretion of SPPU.

8.3.6 Design and development Changes

This is not applicable since curriculum framing remains entirely at the discretion of SPPU.

8.4 Control of externally provided services

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8.4.1 General

Visiting/Guest faculties are selected based on criterion such as Back ground of the faculty; Qualification of faculty; Subject; expertise of faculty; Experience of faculty; Past performance of faculty; Trial lectures by faculty; Recommendations and references from other Institutes of repute; Participants feedback about faculty; Time availability of faculty; Communication and delivery expertise.

8.4.2 Type and extent of control

Head of each department along with Store Keeper monitors the content delivery and other needful competencies as per the requirements, analyse and report the same.

References:

List of approved outsourced agencies and its monitoring status: Annexure XIII DR. DYPSOE /IQAC/QP/ 8.4.2/List of approved outsourced agencies and its monitoring status

8.4.3 Information for external providers

The departments communicate required expertise, qualification and competencies for visiting / guest faculty in advance. Expectations, terms and conditions as per the university system is also conveyed and updated for better output.

References:

Guest lecture/faculty performance record: Annexure XIV DR. DYPSOE /IQAC/QP/8.4.3/ Guest lecture/Faculty performance record

8.5 Delivery of the educational products and services

The teaching activities of the DR. DYPSOE is managed and organized by the Principal, Dean Academics, All Head of the departments their Coordinators and I.Q. A. C. The annual educational activities are divided into two main semesters as per the academic calendar.

8.5.1 Admission of students

Admission of students to the DR. DYPSOE will be organized according to the Admission Procedure, mentioned and updated on the website. However, the rules of SPPU are final and binding on all admissions. The main stages of the admission process include:

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- Application for the admission as per eligibility
- Conduction Entrance Exams (if applicable)
- Declaration of Merit list
- Offer of admission

8.5.2 Teaching

Students are to be imparted the subject knowledge as per the curriculum designed and the academic calendar. The Teaching work is to be activity based, flip class room concepts, laboratory sessions to achieve the course outcomes. Teaching methodologies should enhance students conceptual understanding so, that they can apply concepts in real life situation. Students shall be sensitized towards ethical, social and environmental responsibilities. The teaching and evaluation activities will continue in the following cycles and as per the policy framed.

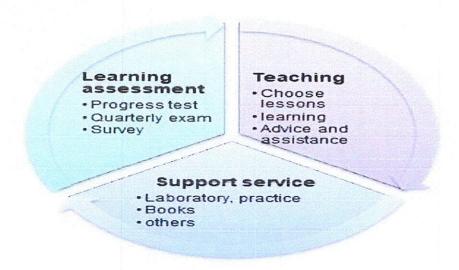


Figure 8.5.2: Teaching & Evaluation

Clean and green initiatives - 'R4': Reduce, Reuse, Recycle, Repurpose

- 1. Reduce Food Waste
- 2. Waste Segregation

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- 3. Recycling the Treated Wastewater: The University must strive to be a 'Zero Liquid Discharge' University. Focusing this objective, the University has installed a Wastewater Treatment Plant which treats the wastewater generated in the campus.
- 4. Conserve the natural resources, increase the biodiversity and minimize the pollution on campus.
- 5. Ground Water Recharge initiatives.
- 6. The DR. DYPSOE, has a green policy and is always focussing on harnessing the energy from the various natural sources like Solar, Wind, Geothermal, Bio-fuel and reduce the dependence on non-renewable sources.

8.5.3 Property belonging to Students

The DR. DYPSOE only have caution money/security deposit and returned after the clearance of NO DUES.

8.5.4 Preservation

All the relevant documents - registers /records are identified at various levels/sections/departments and preserved as per the guidelines and university policy.

8.5.5 Post delivery

After the completion of the academic program, the students are facilitated/trained for placement activity. At the same time Letter of Recommendation (LoR) is also issued to students interested for higher studies as per university policy

8.6 Release of Educational Product and Services

- 1. Students will be awarded with degrees if they adhere to all the criteria placed by SPPU for the award of the degree. Students will also be trained and facilitated for placement on the basis of merit, skill and policy.
- 2. The result output of research activity conducted at the DR. DYPSOE will be published in the form of journal publication in the peer review and indexed journals, funded projects, collaborative studies, start up initiatives, innovation ideas and patents.

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8.7 Control of the educational nonconforming outputs

The DR. DYPSOE, will monitor correction and corrective action on the inconsistencies in educational services or training programs, enrolment, training and graduation processes shall be carried out continuously. The details are shown in Figure 8.7.

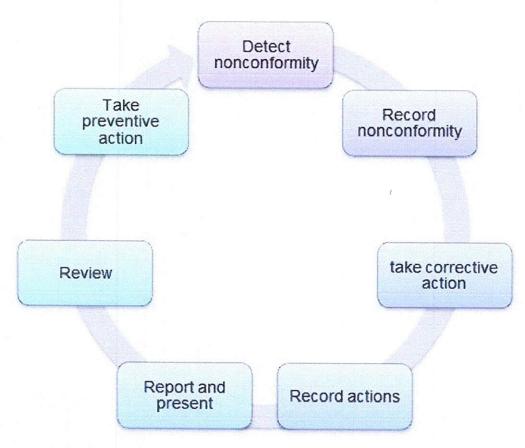


Figure 8.3: Control of educational non-conforming outputs

9. PERFORMANCE EVALUATION

9.1 Monitoring, measuring, analysis and evaluation

1. Monitoring - During the implementation of EOMS at operational level, it will be monitored and evaluated both qualitatively and quantitatively on a continuous basis.

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2. Measuring - Quality of educational services will be measured through feedback mechanism.

Processes that need to be monitored are measured through various mechanism processes are mentioned below.

Sr. No.	Process	Performed by	Frequency of monitoring	Monitoring mechanism	Acceptance Authority
1	Teaching learning process • Faculty wise • Overall	Students	Twice in one Semester	HoD of the department	Principal
2	Program and Curriculum development	BoS of SPPU	Asper SPPU's decision	BOS Committee of SPPU	BOS Chairman of SPPU
3	Extra-curricular activities	Students	Yearly	Coordinators of respective department	Respective Coordinators and HODs
3	Placement & career opportunities	Alumni	Yearly	CDC	Top Management
4	Awareness and green initiatives	All the employees and students	Yearly	Environment expert on the campus	Top Management
5	Overall work culture and job satisfaction	All the employees	yearly	HR	Top Management
6	Encouragement for Research	Faculty, Students	Yearly	R and D cell	Top Management

Reputation in the market and industry

- Number of admissions
- Grade Point Average
- Graduate employment rate
- Satisfaction survey result

Green initiatives are continuously monitored and measured through:

• The number of programs organized by the respective student clubs, no. of participants

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and their feedback; The quantity of the different types of wastes. Environmental Quality (Air, Water and Treated Waste water) on the campus. The consumption of various resources on the campus like Electricity, Water, Paper.

9.1.2 Student and stake holder's satisfaction

The university shall monitor perception and extent to which needs and expectations of all the stake holders especially students is fulfilled by different feedback mechanisms.

9.1.2.1 Monitoring, Analysis and Evaluation of the Ambient Environment

The quality of the ambient Environment checked through continuous monitoring and assessment which will follow mitigation measures as per the need. Parameters like (i) Ambient Air Quality (ii) Treated Drinking Water Quality (iii) Raw Ground Water Quality (iv) Sound Levels (v) Treated Wastewater Quality used for gardening would be assessed at least once a month by the joint efforts of the Amenities Department in association with Environmental Engineering and Chemistry Section and the data would be analysed by the Environmental Engineering and Chemistry Section with action plan in case of exceedances.

Reference:

Feedback from Parents: Annexure XV

DR. DYPSOE /IQAC/QP/ 9.1.2/Feedback from Parents

Customer complaint log book and improvement register: Annexure XVI

DR. DYPSOE /IQAC/ QP/9.1.2.1/ Customer complaint log book, & improvement register

9.1.3 Analysis and Evaluation

The DR. DYPSOE will analyse and evaluate all the needful data to understand degree of students' satisfaction and effectiveness of EOMS in terms of planning and implementation. Monitoring and measurement data will be analysed to address risks and appreciate opportunities. This analysis is a useful tool to improve the quality and environmental system eventually.

Reference:

Students feedback analysis: Annexure XVII

DR. DYPSOE /IQAC/ QP/ 9.1.3/Students feedback analysis

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9.2 Internal Audit

Process of internal audit is based on the strong feedback mechanism from interested parties. Internal audit shall follow the principles of professional ethics and evidence-based outputs. Internal Auditors must identify the areas as mentioned in 9.1 in phase wise manner with plan - ground work - report - follow ups.

Reference:

Internal audit observation report: Annexure XVI

i) DR. DYPSOE /QM/9.2/Internal audit observation report

Internal auditor plan: Annexure XVII

ii) DR. DYPSOE /IQAC/ QPM/9.2(1) /Internal auditor plan

9.3 Management Review

Top management of DR. DYPSOE will analyse adherence of EOMS for the strategic directions. Inputs for management review will be:

9.3.1. Changes in external and internal issues relevant to EOMS.

- 4. Changes in external and internal issues relevant to EOMS
- 2. Feedback of all the stake holders of the university.
- 3. Quality control and monitoring result.
- 4. Nonconformity and corrective actions.
- 5. Audit results.

9.3.2 Management Reviews output includes:

Propose changes required in EOMS

- 1. Identify resources required.
- 2. Identify continual improvement opportunity

Reference:

Minutes of Management Review Meeting: Annexure XVII

DR. DYPSOE /IQAC/QP/9.3.1/ Minutes of leadership review meeting

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Audit Check list and findings: Annexure XVII

DR. DYPSOE /IQAC/QP/9.3.2Audit Check list and findings

10. IMPROVEMENT

10.1 General

It covers, explores and identify opportunities for EOMS to satisfy the needs of all the stake holders and further enhance their association with the University by analysing the gap and responding to the industry needs.

- 10.2 Nonconformity and corrective actions
- 10.2.1 The DR. DYPSOE will identify non conformity and recognize opportunity to improve all the operations including environmental initiatives to meet students' requirements and to make them industry ready. We will also ensure satisfaction and long-term relations with all the stake holders for sustainable development. It includes:
- 1. Meeting requirements of quality education and research;
- 2. Responding to nonconformity and identify the root cause to reduce the frequency of the same;
- 3. Ensuring social responsibility by green and clean environment awareness program.

Reference:

Internal Audit (IA), Non-conformance (NCs) and corrective action taken report (ATP): Annexure XVIII

- i) DR. DYPSOE /IQAC/QP/ IA/NCs/ATP/ 10.2/ Non-conformance (NCs) and corrective action taken report (ATP
- 10.2.2 All the relevant documents pertaining to non-conformity and corrective actions will be retained.
- 10.3 Continual Improvement

The DR. DYPSOE, will analyse and evaluate the outputs from the management review to determine the need/expectations of the concerned parties and risks/opportunities to be addressed for the continual improvement and sustainable development.

.....End of Manual...

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List of Annexures

Sr. No.	Code name/section of Annexures Content		Document	
1	DR. DYPSOE /IQAC/QP-4.2.2/	Strategic Plan	Institute Strategic Plan	
2	DR. DYPSOE /IQAC/QP-4.2.3/	Needs and Expectations of the interested parties	1] Academic Planning 2] IQAC Plan of action 3] AQAR Plan of action	
3	DR. DYPSOE /IQAC/QP-4.2.4/	Process Input-Output Matrix (Performance evaluation)	1] Faculty Feedback 2] Academic performance 3] 360 Feedback	
4	DR. DYPSOE /IQAC/QP-6.1.1/	E /IQAC/QP-6.1.1/ SWOT Analysis		
5	DR. DYPSOE /IQAC/QP-6.1.1.1	Risk Assessment and Mitigation Plan	1] Department Advisory Board Meetings and actions	
6	DR. DYPSOE / /IQAC/ QP-6.2.2	Action plan to achieve objectives & goals.	Covered in Annexure QP 4.2.3	
7	DR. DYPSOE /IQAC/QP/7.1.1.1	Schedule for Faculty & Staff	1] Department Academic Calendar 2] Load distribution 3] Individual Time Table	
8	DR. DYPSOE / IQAC /QP/ 7.1.1.2	Training competency matrix	4] Lab Time Table 1] Faculty & Student Induction Program 2] Faculty Development Programs 3] Skill Development and Capacity Building Initiatives	
9	(DR. DYPSOE / IQAC /QP/7.1.3	Workshop and Training	1] Training Workshop for Faculty & Student	

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10	ADPSOE/IQAC/ QP 7.4.3.2	Communication Matrix.	1] Principal Meetings 2] IQAC Meetings 3] Department Meetings 4] Dean Meetings 5] Parent Teacher Meetings 6] Various Committee Meetings
11	(DR. DYPSOE /IQAC/ QM/ 7.5.1 & 7.5.2 /	Master list of external origin documents	1] Annual Report to SPPU 2] AQAR to NAAC 3] AISHE Report 4] NIRF Report 5] Social Welfare Department of GoM 6] NSS Report 7] SDO Report to SPPU 8] Report of CEO to SPPU 9] Staff Approval
			Report 10] Report to UGC & AICTE
12	DR. DYPSOE /IQAC/QP/ 8.4.2/	List of approved outsourced agencies and its monitoring status.	1] Approved Vendor List 2] E-Waste Collection Agency 3] Paste Control Agency 4] Water Supply Tankers 5] Medical Facility 6] Canteen Facility
13	DR. DYPSOE /IQAC/QP/8.4.3/	List of Guest lectures from Industry and academics	1] Available as a departmental record.
14	DR. DYPSOE /IQAC/QP/ 9.1.2/	Feedback from Parents	1] Parent Teacher Meet Record
15	DR. DYPSOE /IQAC/QP/9.1.2.1/	Customer complaint logbook, & improvement register	1] Suggestion Box and PTM Record
16	DR. DYPSOE /IQAC/ QP/ 9.1.3/	Students feedback analysis	Covered in Annexure QP 4.2.4

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17	DR. DYPSOE /QM/9.2/	Internal audit observation report	1] Internal Academic,
			Administrative, and
			Financial audit records
18	ii) DR. DYPSOE /IQAC/ QPM/9.2(1)/	Internal auditor plan	At the end of each
			academic year.
19	DR. DYPSOE /IQAC/QP/ 9.3.1/	Minutes of leadership review	1] Governing Body MoM
		meeting	2] CDC Meetings
			3] Principal Meeting
20	DR. DYPSOE /IQAC/QM/	Audit Checklist and findings	1] Study of auditors'
			report and Action to be
			taken
21	DR. DYPSOE /IQAC/QP/	Non-conformance (NCs) and	Compliance of NC's and
	IA/NCs/ATP/ 10.2/	corrective action taken report	Submission of Action
		(ATR)	Taken Reports.

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