

6.1.2 Effective leadership is reflected in various institutional practices such as decentralization and participative management.

INDEX

S.NO	DESCRIPTION	PAGE NUMBER
1	Certificate of the Head of the Institution	02
2	Additional Information	04

CERTIFICATE OF THE HEAD OF INSTITUTION

Dr.S. ELANCHEZHIAN, M.D.S.,

PRINCIPAL

TO WHOMSOEVER IT MAY CONCERN

This is to certify that, our institution has the effective leadership is reflected in various institutional practices such as decentralization and participative management.



son
PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN

PRINCIPAL

ADDITIONAL INFORMATION

JKKN DENTAL COLLEGE AND HOSPITAL
Standard Operating Procedure (SOP) for IQAC Committees and Working
Groups Functionality.

1. Purpose:

The purpose of this Standard Operating Procedure (SOP) is to provide guidelines for the committees catalyzing Quality Assurance (QA) and Quality Enhancement (QE) activities in the JKKN Dental college and Hospital, as well as the Learning Facilitators responsible for implementing Key Results. These committees and Learning Facilitators play a crucial role in planning, guiding, and monitoring the institution's QA and QE initiatives, as well as the successful implementation of Key Results.

2. Protocol Compliance:

All members of the committees catalyzing QA and QE activities, including the Committee Coordinators, Co-Coordiators, and Learning Facilitators, are expected to comply with the protocols and procedures established by the institution and the IQAC. Adherence to these protocols is crucial for maintaining the integrity and effectiveness of the QA and QE processes, Key Results implementation, and collaborative functioning of the committees.

3a. Committee and Working Group Structure:

- a. IQAC Chairman and Coordinator: who provides overall leadership, guidance, and coordination between the cluster and institutional-level committees.
- b. Committee Coordinators: Each committee within the cluster should have a Coordinator who facilitates the work of the committee, ensures effective communication, and oversees the functioning of the working groups.
- c. Co-Coordiators: Each committee should have two Co-Coordiators who support the Coordinator in their responsibilities and act as backup in their absence. They collaborate with the Coordinator and other committee members to ensure smooth functioning.

During these check-ins, the Working Group Managers should provide updates on their group's activities, progress, and any obstacles they might be facing. This allows the Coordinator to provide appropriate guidance and support as necessary. This ensures that all relevant parties are kept abreast of the progress and challenges of the working groups and can make informed decisions about any necessary interventions or support.

3b. Working Group Structure and Functionality:

- a. Working Group Managers: Each working group within the committee should have a Manager who facilitates the work of the group, ensures effective communication, and oversees the functioning of the group's tasks. They will be responsible for attaining the objectives of their respective working groups.



Son
PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN

b. The committees will group these working groups, helping them function as one cohesive unit, which enhances the efficiency and effectiveness of the operations.

c. The Working Group Managers should report their progress to the respective Committee Coordinators and Co-Coordinators. This ensures alignment between the goals of the working groups and the broader objectives of the committees.

d. Each Working Group Manager will also be responsible for delegating tasks within their group, monitoring progress, and ensuring that any issues or challenges are swiftly addressed.

3c. Collaborative Functioning of Working Groups:

a. Within the working groups, members should foster a collaborative working environment. This can include open discussions, shared decision-making, and the division of responsibilities based on each member's skills and capabilities.

b. It is the responsibility of the Working Group Manager to encourage this collaborative spirit, resolve conflicts, and ensure that each member is contributing effectively towards the group's objectives.

4. Effective Communication:

a. Committees and working groups should establish clear and efficient communication channels, such as meetings, emails, and designated platforms, to facilitate collaboration and information sharing.

b. The IQAC Coordinator, Committee Coordinators, and Co-Coordinators should promote open communication and encourage active participation from all members.

c. Learning Facilitators should maintain regular and timely communication with their respective Committee Coordinators or Co-Coordinators, ensuring seamless coordination and progress updates.

5. Goal Setting, Planning, and Action Planning:

a. Committees and working groups should set specific Objectives and Key Results aligned with the institution's QA and QE activities, following the guidance of the Cluster Level Coordinator and Committee Coordinators.

b. The IQAC Chairman and IQAC Coordinator, Committee Coordinators, and Co-Coordinators should facilitate goal-setting and planning discussions, ensuring alignment with the institution's overall objectives.

c. Action plans/Subtasks shall be developed by the committees and working groups, outlining the Key Results, and required resources for effective implementation.

6. Task Delegation, Follow-up, and Monitoring:

a. Committee members and working group members should be assigned specific tasks based on their expertise and capabilities.



S. Elanchezhian
PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN

b. The Coordinator and Co-Coordinators should delegate tasks effectively, considering individual strengths and workload. They should conduct regular follow-ups to track the progress of assigned tasks and provide necessary support or guidance when needed.

c. Committees and working groups have established mechanisms to monitor and evaluate the progress of their activities and initiatives. The Committee Coordinators and Co-Coordinators should ensure regular monitoring and evaluation, using key Results and objectives to assess the effectiveness of QA and QE efforts.

7. Collaborative Decision Making:

a. Committees and working groups should foster a collaborative decision-making process, allowing all members to contribute their ideas and perspectives.

b. The Committee Coordinators and Co-Coordinators should facilitate discussions, encourage active participation, and ensure that decisions are made through consensus-building approaches.

8. Documentation, Reporting, and Knowledge Sharing:

a. Accurate and comprehensive documentation should be maintained for all committee and working group activities.

b. Meeting minutes, progress reports, and any other relevant documents should be recorded and shared with committee members, working group members, and the IQAC.

c. Committee Coordinators, Co-Coordinators, and Learning Facilitators should actively collaborate and share knowledge within their respective committees and working groups, promoting best practices, successful initiatives, and innovative ideas.

9. Continuous Improvement:

a. Committees and working groups should actively seek opportunities for continuous improvement in their QA and QE activities.

b. Feedback from stakeholders, lessons learned, and best practices should be incorporated to identify areas for improvement and implement necessary changes.

c. The Committee Coordinators and Co-Coordinators should encourage a culture of continuous improvement, supporting innovative ideas and initiatives.

10. Protocol Modifications:

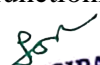
a. Committees and working groups should adapt the checklist and protocols as necessary to align with the specific Key Results and evolving needs of the institution.

b. Any modifications to the protocols should be communicated to the Committee Coordinators, Co-Coordinators, and Learning Facilitators for a coordinated approach and seamless implementation.

11. Discrepancies

a. Any discrepancies or queries related to the Key Results, Taskade App usage, or the functioning of committees should be posted in the [Technical Issues Link](#).




PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN

b. The IQAC Coordinator, Committee Coordinators, Co-Coordinators, and Learning Facilitators should address and resolve these discrepancies or queries through collaborative discussion

12. Compliance and Review:

a. All committee members, including the IQAC Coordinator, Committee Coordinators, Co-Coordinators, and Learning Facilitators, are expected to comply with this SOP and the protocols established by the institution.

b. Regular review and evaluation of the SOP should be conducted to ensure its effectiveness and relevance. Any necessary updates or revisions should be made in consultation with the IQAC and relevant stakeholders.

Responsibilities for IQAC Committees and Working Groups Functionality.

IQAC Chairman

Provides leadership and strategic direction for IQAC activities at the institutional level.

Key Tasks:

Ensures quality objectives, plans, and KIPs are perfectly aligned with the Institution's vision, government regulatory requirements, and faculty appraisal parameters.

Oversees the implementation of quality objectives and chairs monthly IQAC meetings.

Accountability:

Reports to the Managing Director and ensures alignment with the cluster vision.

IQAC Coordinator (Vice Principal)

Responsible for operational oversight, including managing fortnightly review meetings.

Key Tasks:

Coordinates the implementation of quality objectives and conducts fortnightly review meetings with the Managing Director.

Authority on Role Changes:

The IQAC Coordinator has the authority to change the Working Group Managers. Changes must be communicated through Google Chat, utilizing the '@' symbol to mention the specific person. This procedure ensures that role changes are executed promptly and are well-documented.

Accountability:

Reports to the IQAC Chairman.




PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN

Committee Coordinators

Facilitates the work of the committee, ensuring effective communication.

Key Tasks:

Oversees the functioning of the working groups and ensures effective communication.

Accountability: Reports to the IQAC Coordinator (Vice Principal).

Committee Co-Coordinators and Working Group Managers

Assists the Committee Coordinator in their duties and acts as a backup. Manages the tasks within the working group.

Key Tasks:

Collaborates with the Committee Coordinator to ensure smooth functioning. Responsible for attaining the objectives of their respective working groups.

Accountability:

Reports to the Committee Coordinator.

MECHANISM OF IQAC

The Cycle: Monthly, Fortnightly, and Weekly Meetings

Objective:

To establish a consistent and structured approach to quality management through multi-tiered meetings that ensure the alignment of quality objectives and action plans across different levels of the institution and the cluster.

Monthly IQAC Meeting

Frequency:

Conducted every month, on or before the 10th.

Agenda: A pre-circulated agenda will include items such as reviewing the previous month's action items, discussing new suggestions from various internal and external stakeholders (need assessment), and setting quality objectives for the upcoming month. Your monthly IQAC suggestions should be mentioned under the committee -working group - results. In the monthly IQAC meeting, should have gained approval for the next 3 months Pre-planned events approval

Participants:

IQAC Chairman, IQAC Coordinator, Committee Coordinators, Students, and Managing Director. For quarterly meetings, external stakeholders like industry experts are also invited.

Output: A meeting summary, including consolidated suggestions, will be prepared, and action items for quality assurance and quality enhancement will be assigned.



San
PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN

Fortnightly Review Meeting

Frequency:

Conducted every 15 days.

Agenda:

To review the progress made on the action items set during the monthly IQAC meeting and to discuss any roadblocks or challenges.

Participants:

IQAC Coordinator (Vice Principal), IQAC Chairman (Principal), and Managing Director.

Output:

A review summary and an updated action plan will be prepared.

Weekly Sprint Meeting (Agile)

Frequency:

Conducted every week.

Agenda:

To break down the action items set during the monthly and fortnightly meetings into smaller, achievable tasks to be executed within the week.

Participants:

Coordinators of each institutional committee.

Output:

A weekly sprint plan will be prepared, outlining the tasks for each committee.



son
PRINCIPAL
Dr. S. ELANCHEZHIAN, MDS.,
J.K.K. NATTRAJA DENTAL COLLEGE & HOSPITAL
KUMARAPALAYAM, NAMAKKAL - 638 183.
TAMILNADU.
JKKN