

SHRI DHANWANTRY AYURVEDIC COLLEGE & HOSPITAL



Run by : SHRI DHANWANTRY EDUCATIONAL SOCIETY (REGD.)

SECTOR 46-B, CHANDIGARH

College : 0172-2631021, 5046200 Hospital : 0172-5046000, 7710778822

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Affiliated with Shri Krishna Ayush University Kurukshetra (Hry.)

INTERNAL QUALITY ASSURANCE CELL (IQAC) ACTION TAKEN REPORT

Reference: IQAC Meeting held on 10th November 2025

Report Date: 6th January 2026

1. Review of Internal Audit (NAAC, NABL & NABH)

Observations in Meeting:

- CO-PO mapping documentation required updating.
- Patient record indexing needed improvement.
- Laboratory calibration logs required periodic verification.
- Central digital storage for committee documentation required.

Action Taken:

- All departments updated Course Outcome–Program Outcome (CO-PO) mapping files and submitted revised documentation to IQAC.
- Clinical departments implemented systematic indexing of patient records with monthly verification by department heads.
- Laboratory in-charges completed verification of calibration logs; a quarterly verification schedule has been implemented.
- A centralized digital documentation repository was established under the Documentation & Data Management Cell for storing committee minutes and compliance records.

Status: Implemented and under periodic monitoring.

2. Establishment of New IQAC Verticals

Resolution: Formation of new IQAC verticals:

- Research & Innovation Cell
- Documentation & Data Management Cell
- Skill Enhancement & Training Cell

Action Taken:

- Official orders issued constituting the three new IQAC verticals with designated coordinators and members.
- Research & Innovation Cell prepared a roadmap for increasing publications, IPR filings, and funded research proposals for 2026.
- Documentation & Data Management Cell initiated digital archiving of institutional records.
- Skill Enhancement & Training Cell scheduled CME programs and skill certification workshops for the upcoming semester.

Status: Implemented.

3. Stakeholder Feedback Implementation

Inputs Identified:

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- Increased clinical exposure and guest lectures (Students)
- Structured internship documentation (Alumni)
- Waiting area management (Patients)
- Skill-based certification modules (Employers)

Action Taken:

- Weekly clinical case discussions strengthened and additional clinical postings scheduled.
- Internship logbook format standardized and circulated to departments.
- Patient Flow Monitoring Committee constituted; seating and token-based queue monitoring initiated.
- Skill-based certification workshops are planned to commence in the next semester under the Skill Enhancement Cell.

Status: Implemented / Ongoing.

4. Faculty Training & Documentation Strengthening

Resolution:

- Conduct training on QCI/Accreditation parameters and documentation best practices.
- Circulate standard file index format.
- Conduct quarterly documentation review workshops.

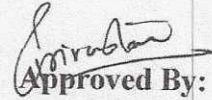
Action Taken:

- Faculty training session conducted and attendance recorded.
- Standard file indexing and documentation formats circulated to all departments.
- Quarterly documentation review mechanism established beginning January 2026.

Status: Implemented and ongoing.

Conclusion

All resolutions passed during the IQAC Meeting dated 10th November 2025 have been duly acted upon. The institution has strengthened its documentation system, implemented stakeholder feedback measures, established new IQAC verticals, and initiated structured monitoring mechanisms to ensure continuous quality enhancement in alignment with NAAC, NABL, NABH, and QCI standards.


Approved By:

Dr. Sumit Srivastava
Chairman, IQAC