



AMALA COLLEGE OF NURSING

(An undertaking of Amala Cancer Hospital Society)

Amala Nagar P.O., Thrissur-680 555, Kerala, India.

Website : www.amalanursingcollege.org

FIRST CYCLE NAAC ACCREDITATION 2022

CRITERION 6

GOVERNANCE, LEADERSHIP AND MANAGEMENT

6.5. Internal Quality Assurance System

6.5.3 Minutes of the IQAC meetings 2017-2018

Submitted to



THE NATIONAL ASSESSMENT AND ACCREDITATION COUNCIL

**MINUTES OF NAAC
STEERING COMMITTEE**



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MINUTES OF THE FIRST MEETING OF NAAC STEERING COMMITTEE

The special committee in starting the quality assurance process and feasibility of applying for accreditation process was converted to NAAC steering committee

The following were the members of the committee

1. Rev Fr Francis Kurissery CMI
2. Prof Dr Rajee Reghunath Principal Amala College of Nursing
3. Sr Litha Lizbeth Vice principal
4. Sr Merly John
5. Prof Lakshmi G

The first meeting of the committee was held on 12th March 2018 at conference hall Amala College of Nursing at 3 pm The meeting was chaired by Rev Fr Francis Kurissery CMI

The major areas of discussion under for the meeting were

Regular participation in hospital quality committee

Since Dr Sr Merly john has taken charge as CNO on January 1st 2018 , Prof Dr Rajee Reghunath suggested that she should regularly participate in all the quality activities of the hospital and other faculty members should also be involved in the quaulity meetings

Regular training in NABH

The faculty as well as student should be regularly trained along with the hospital staff in the NABH process, for this training and documentation workshops could be arranged

Feasibility study of the NAAC accreditation process

Rev Fr Francis kurissery suggested the principal to conduct a feasibility study of the process of NAAC accreditation for Amala college Of nursing and submit the report by next meting

Improving clinical learning experiences of students

Principal suggested that since now our faculty is in charge of the service side there should be a marked improvement in the quality of clinical experience provided r our student s and more cooperation to be obtained from the ward side when the students are posted

Regular meeting of steering committee

The committee unanimously agreed that the meetings to be regularized after the report of feasibility from principal and the quality process to be intuited as early as possible

The meeting adjourned at 3.30pm




PRINCIPAL



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ACTION TAKEN REPORT

SL NO	PLAN OF ACTION	ACTION TAKEN	REMARKS
1	Regular participation in hospital quality committee	All faculty members are involved in the internal audit process as a part of quality team	Going on
2	Feasibility study of the NAAC accreditation process	Prof Dr Rajee Reghunath started studying the various institutions already done NAAC for the process of feasibility	Ongoing
3	Improving clinical learning experiences of students	Dr Sr merly John assured action will betaken	


PRINCIPAL

