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SYMBIOSIS INTERNATIONAL (DEEMED UNIVERSITY)

(Established under section 3 of the UGC Act 1956)

Re-Accredited by NAAC with 'A' grade (3.58/4) I Awarded Category - I by UGC

Founder : Prof. Dr. S. B. Mujumdar M.Sc. Ph.D. (Awarded Padma Bhushan and Padma Shri by President of India)

Notification No. SIU/ U-28/ 1133 dated 4th February, 2022

Subject: Quality Policy, 2022

1) **Whereas,** in order to foster a quality culture, ensure stakeholder satisfaction and to provide a mechanism to internally assess the performance of activities and processes, and for enhancing quality in all spheres of activities in the Constituent Institutes, Research Centers, Support Departments and Administrative Sections of the University, there was a need for a comprehensive Quality Policy.

2) **And whereas,** considering functional nuances of Symbiosis Medical College for Women (SMCW) and Symbiosis University Hospital and Research Centre (SUHRC), certain additional provisions applicable to SMCW and SUHRC are specifically appended to this policy.

3) **And whereas,** in accordance with Clause 14.0 (xxxxi) & (xxxxii) of the Memorandum of Association (MoA) of Symbiosis International (Deemed University), 2019, the Board of Management vide **Resolution No. A1: BoM: 28.01.2022**, has approved the Quality Policy of Symbiosis International (Deemed University), 2022.

4) **Now therefore,** Quality Policy of Symbiosis International (Deemed University), 2022 is notified for information of all concerned as Annexure 'A'. The policy will be effective from the date of publication this notification.

SIU/ U-28/ 2022/ 641
Date: 4th February, 2022

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Dr. M. S. Sheijul
Registrar

To: The Hon'ble Chancellor, Pro Chancellor, Vice Chancellor, Principal Director, Symbiosis, Dean-Academics and Administration, Symbiosis, Deans of Faculties of Symbiosis International (Deemed University), Directors, Deputy Directors, Administrative Officers/ Assistant Administrative Officers/ Office Superintendents of Constituent / Departments of SIU, Officers of Symbiosis Society and Symbiosis International (Deemed University).

Lavale, Pune 412 115, Maharashtra, India. | Tel: +91-20-28116200/08/09 | Fax : +91-20-28116206
Email: info@siu.edu.in | Web: www.siu.edu.in

Annexure 'A'

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SYMBIOSIS INTERNATIONAL (DEEMED UNIVERSITY)

(Declared as Deemed to be University u/s 3 of the UGC Act, 1956)
Accredited by NAAC with 'A' Grade in 2009 and 2016 | Awarded Category-I by UGC

QUALITY POLICY

2022

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Symbiosis International (Deemed University)

Quality Policy

A. Preamble

Symbiosis, a trust established in 1971 is solely engaged in the field of education. Initially, academic programmes were offered through its schools and HEIs affiliated to the University of Pune. The institutes were then complying with the quality assurance requirements of the affiliating university. However, in 2002, three institutes of Symbiosis affiliated to the University of Pune were brought under the newly established University that was awarded the Deemed tobe University status namely the Symbiosis International (Deemed University) hereinafter referred to as SIU.

The University has been complying with the rules and regulations of all regulatory bodies like the University Grants Commission (UGC), All India Council for Technical Education (AICTE) and other Statutory Councils like the Bar Council of India, Indian Nursing Council, Indian Medical Council and Council of Architecture. SIU has also undergone two assessment cycles of National Assessment and Accreditation Council (NAAC) and have been awarded the highest grade on both occasions. The process for the third cycle of assessment is underway.

SIU has also been participating in the National Institutional Ranking Framework (NIRF) and has been ranked among the top 50 Universities in India because of which it is graded as Category 1 University in India.

In order to foster a quality culture, ensure stakeholder satisfaction and to provide a mechanism to internally assess the performance of our activities and processes there was a felt need to articulate the Quality Policy. This Quality Policy aims at providing the necessary guidelines to enhance quality in spheres ofactivities of the University

B. Vision, Mission and Core Values of the University

The University has well-articulated Vision and Mission statements that are disseminated widely amongst all stakeholders and displayed on the website.

Vision: Promoting international understanding through quality education

Mission:

- to inculcate spirit of 'Vasudhaiva Kutumbakam' (the world is one family).
- to contribute towards knowledge generation and dissemination
- to promote ethical and value-based learning
- to foster the spirit of national development
- to inculcate cross-cultural sensitization
- to develop global competencies amongst students
- to nurture creativity and encourage entrepreneurship
- to enhance employability and contribute to human resource development
- to promote health and wellness amongst students, staff and community
- to instill sensitivity amongst the youth towards the community and environment
- to produce thought provoking leaders for the society

Core Values:

The University endeavours to promote and foster an eco-system where stakeholders believe in and practice

- *Vasudhaiva Kutumbakkam:* The world is one Family
- Diversity & Inclusion
- Integrity and Honesty
- Transparency & Accountability
- Social Commitment
- Gender Equity

C. Stakeholders

SIU recognizes the following as their stakeholders and is committed to rendering quality services and to continuous improvement in all activities related to them.

D. Definition of Quality

Quality is the totality of features and characteristics of a product or service that bears on its ability to meet a stated or implied need. [ISO 8402 ISO, 1986]. Quality is also defined as conformance to requirement [Crosby, 1979] . Juran, 1988 defines quality as "fitness for use". Japanese companies found the old definition of quality "the degree of conformance to a standard" too narrow and consequently have started to use a new definition of quality as "user satisfaction" [Wayne, 1983].

Authors have defined quality from different view-points. Literature is replete with customer-centric definitions, service/product-centric definitions, value-centric definitions [Ho,S, et al 2008]

Customer-centric definitions

- Edwards [1968] Quality consists of the capacity to satisfy wants...
- Gilmore [1974] Quality is the degree to which a specific product satisfies the wants of a specific consumer.
- Kuehn & Day [1962] In the final analysis of the marketplace, the quality of a product depends on how well it fits patterns of consumer preferences.

- Juran [1988] Quality is fitness for use.
- Oakland [1989] The core of a total quality approach is to identify and meet the requirements of both internal and external customers.

Manufacturing & Service-centric definitions

- Crosby [1979] Quality [means] conformance to requirements
- Price [1985] Do it right first time

Value-centric definitions

- Broh [1982] Quality is the degree of excellence at an acceptable price and the control of variablity at an acceptable cost.
- Feigenbaum [1983] Quality is the degree to which a specific product conforms to a design or specification
- Newell & Dale [1991] Quality must be achieved in five basic areas: people, equipment, methods, materials and the environment to ensure customer's need are met.
- Kanji [1990] Quality is to satisfy customers' requirements continually; TQM is to achieve quality at low cost by involving everyone's daily commitment.

There are several challenges to defining quality:

(i) Varying perspectives: To some quality can neither be defined or quantified whereas according to others the definition of quality changes depending on which stakeholder's lens one is looking through

(ii) quality is a multi-dimensional concept and cannot be reduced to a single sentence without compromising on specificity and depth of meaning

(iii) quality is a dynamic concept and not static in nature

Keeping these factors in mind, Schindler, L. et al (2015) have compiled the classification of the various quality definitions by authors on four broad attributes:

(i) Purposeful i.e. conformance to stated Vision/Mission statements, to requirements of regulators or accrediting agencies (Cheng & Tam, 1997; Commonwealth of Learning, 2009; Green, 1994; Harvey & Green, 1993; Harvey & Knight, 1996; Peterson, 1999)

(ii) Exceptional i.e. products and services exceed minimum requirements and establish distinctiveness and exclusivity (Bogue, 1998; Cheng & Tam, 1997; Green, 1994; Harvey & Green, 1993; Harvey & Knight, 1996; Peterson, 1999)

(iii) Transformative i.e. products and services bring about a positive change in learners and their learning (affective, cognitive and psychomotor domains) thus impacting their professional and personal potential (Biggs, 2001; Bobby, 2014; Bogue, 1998; Green, 1994; Harvey & Green, 1993; Harvey & Knight, 1996; Haworth & Conrad, 1997; Pond, 2002; Quality Assurance Agency for Higher Education, 2012; Srikanthan & Dalrymple, 2002, 2004, 2005, 2007)

(iv) Accountable i.e. demonstrating to stakeholders, responsible use of resources and delivery of products and services with zero defects (American Society for Quality, n.d.; Cheng & Tam, 1997; Green, 1994; Harvey, 2005; Harvey & Green, 1993; Harvey & Knight, 1996; Nicholson, 2011)

Simply put, **Quality is:**

- doing the right thing (in alignment with the Vision, Mission and the core values of SIU) - Fitness of Purpose
- doing the right thing the right way (ensuring that the right activities and methods are adopted while doing the right thing) - Fitness for Purpose
- using resources optimally (men, material and money)
- developing students and employees by providing them with the necessary knowledge and skills
- providing services of high standards and in time to all stakeholders
- seeking feedback regularly from all stakeholders and
- pursuing excellence through continuous improvement

SIU will seek to ensure that all activities of the University ensure compliance with these dimensions of quality.

Elements of Quality may also be expressed with the help of the acronym QUALITY

QUALITY stands for

- Quest for Excellence
- Understand the concept
- Action-oriented
- Learner/Client-centric approach
- Innovation for change
- Training to build competencies
- Year-round activity

E. Purpose of this Quality Policy :

The purpose of this Quality Policy is to articulate SIU's approach to quality management and disseminate the quality management framework to all its stakeholders. This Quality Policy of SIU contains the following sections:

1. SIU's Quality Statement
2. The Objectives of the Quality Policy
3. Scope of the Quality Policy
4. The Quality Management Framework detailing:
    - (i) structures and channels established to facilitate free-flow of information between stakeholders
    - (ii) strategies planned to achieve the objectives
    - (iii) procedures and activities identified to implement the strategies
    - (iv) indicators to assess the performance of procedures, activities and strategies adopted
    - (v) setting benchmarks to compare performance with
    - (vi) data for the indicators to measure performance
    - (vii) the process required to review and revise any of the above
5. A sample toolkit for select activities and operations of the University

Each of the sections mentioned above are explained below in detail.

1. The Quality Statement of the University

The Quality statement of the SIU is "To make quality the defining element in all academic and non-academic activities including services of the University".

The University is committed to providing quality education, services, generation and dissemination of knowledge, and outstanding experience that meet and exceed stakeholders' expectations that lead to international recognition. To fulfil this commitment quality will be the defining element in:

- governance
- teaching-learning-evaluation
- research and innovation
- collaboration with academia, industry, NGOs, alumni and the community around

- compliance with regulators and accreditation agencies
- service to the public

2. Objectives of the Quality Policy

The principal objectives of the quality policy are listed below:

1. Attainment of the desired academic and administrative outcomes

- To establish necessary structures to drive the quality management strategies and procedures laid out in this policy
- To specify and periodically upgrade the quality of education and allied offering provided by establishing necessary structures and processes
- To facilitate improvement in quality, relevance and quantum of research and innovations maintaining high standards of ethics
- To lay out policies for collaborations with other HEIs, Industry, Ministries, Government Bodies, NGOs, Local Bodies and facilitate the implementation
- To lay out the approach and policies to connect with the community around in mutually beneficial activities
- To lay out policies for judicious use of resources and monitor the same for achieving the desired outcomes
- To enhance quality of services by adopting technology-driven processes in executing all functions so as to improve stakeholder satisfaction
- To provide staff with an empowering and collegial environment that imbues in them a quality culture
- To comply with the requirements of regulators and accrediting agencies

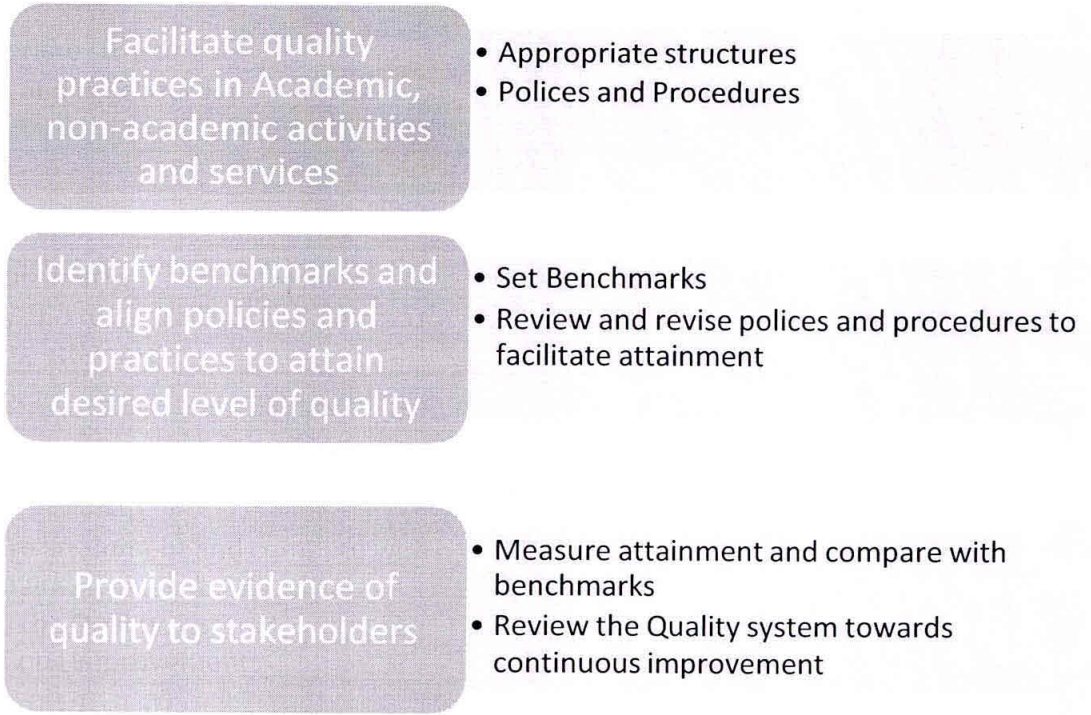
2. Periodically identifying benchmarks and aligning policies and activities to attain the respective benchmark (within the framework of its vision and mission)

- To periodically identify appropriate benchmarks in India and abroad, regarding the different aspects of the University activity (programs, research, teaching, managing, community outreach)
- To periodically undertake evidence-based review of the outcome of the policies/ activities and revise them as required to ensure appropriateness, adequacy and relevance
- To periodically seek feedback from all stakeholders regularly, analyze the same for suitable action thereafter

3. Providing evidence of quality to stakeholders

- To measure the attainment of commitment to stakeholders using data collected through objective indicators
- To contrast those measurements with the benchmarks to understand its attainment level indicators and
- To build mechanisms to foster a robust quality culture that would enhance stakeholder satisfaction

The principal objectives of the quality policy is diagrammatically depicted below



3. Applicability/Scope of this Policy

This Policy is applicable to all University operations across all constituent institutes/departments across all campuses/ locations of the University including the SMCW and SUHRC and with specific provisions as mentioned in **Appendix 1.0.**

This Policy is applicable to the following stakeholders:

- All teaching staff in regular employment or on contract -full-time or part-time (including Chair Professors, Distinguished Professors, Advisors)
- All non-teaching staff including administrative and technical support staff
- The decision-making bodies at Symbiosis
- Service providers/vendors, alumni, recruiters, society, academic fraternity outside SIU through MoUs, service contracts and any other form of agreements that will be the basis of SIU's interaction with them

While this quality policy will be directly applicable predominantly to our internal stakeholders, it is expected that through instruments mentioned in point 3 and through our own performance requirements from our employees and staff, the impact of our Quality Policy will have ripple effects and will permeate to all our external stakeholders as well.

4. SIU's Quality Management Framework

The University has created necessary structures and resources to achieve the vision statement which is underpinned by a quality framework. This framework comprises (i) quality assurance structures, (ii) strategies, (iii) activities, (iv) procedures and I (v) indicators to enhance the quality of internal and external stakeholders' experience (vi) Periodical monitoring and evaluation mechanisms resulting in improved versions of the policies

(i) Structures and Resources:

a) Governance Structure to permeate the Vision and Mission statements of the University
b) Establish the Quality Management and Benchmarking Department with the approval of the Board of Management of SIU
c) Constitute an Advisory Board comprising experts for quality management agencies and academics from India and abroad to provide direction to the QMB department:
d) Establish a data management centre (institutional repository) to collect, collate and analyze data using technology as far as possible
e) Provide the necessary resources – trained manpower, equipment, financial support and monitor effective utilization of the same

(a) Governance structure to permeate the Vision and Mission statements

All activities undertaken by the university are aligned to its Vision and Mission and will permeate through appropriate academic and administrative governance structures.

The Memorandum of Association (MoA) of the University lays down the governance mechanism, decision-making authorities and the inter-se relationship between the between SS, Symbiosis International (Deemed University) and its constituent institutes

All academic activities and processes shall be initiated, implemented and monitored through the following bodies all of which have been constituted as per the UGC guidelines ensuring that all stakeholders have a fair representation.

- Authorities of the University: The Board of Management, Academic Council, Planning and Monitoring Board, Board of Examination, Board of Studies, Finance Committee

- Some Authorities constituted by the University drawing powers from its MoA such as the Board of University Development, Quality Management and Benchmarking Department, Deans Council, Quality Improvement Cells at the constituents and Programme Review Committee, BOS Sub-committee
- Some Committees / Cells that are mandated by the UGC: Anti-Ragging Monitoring Committee, Internal Committee, Institutional Ethics Committees: One for Health & Biomedical Research and one for Clinical Trials

Provisions regarding each of the authorities/committees mentioned above are articulated in the MoA of the University. The same is in the custody of the Registrar of the University. These authorities functions through participatory and consultative decision-making process following the UGC regulations and other Statutory/ Regulatory Bodies.

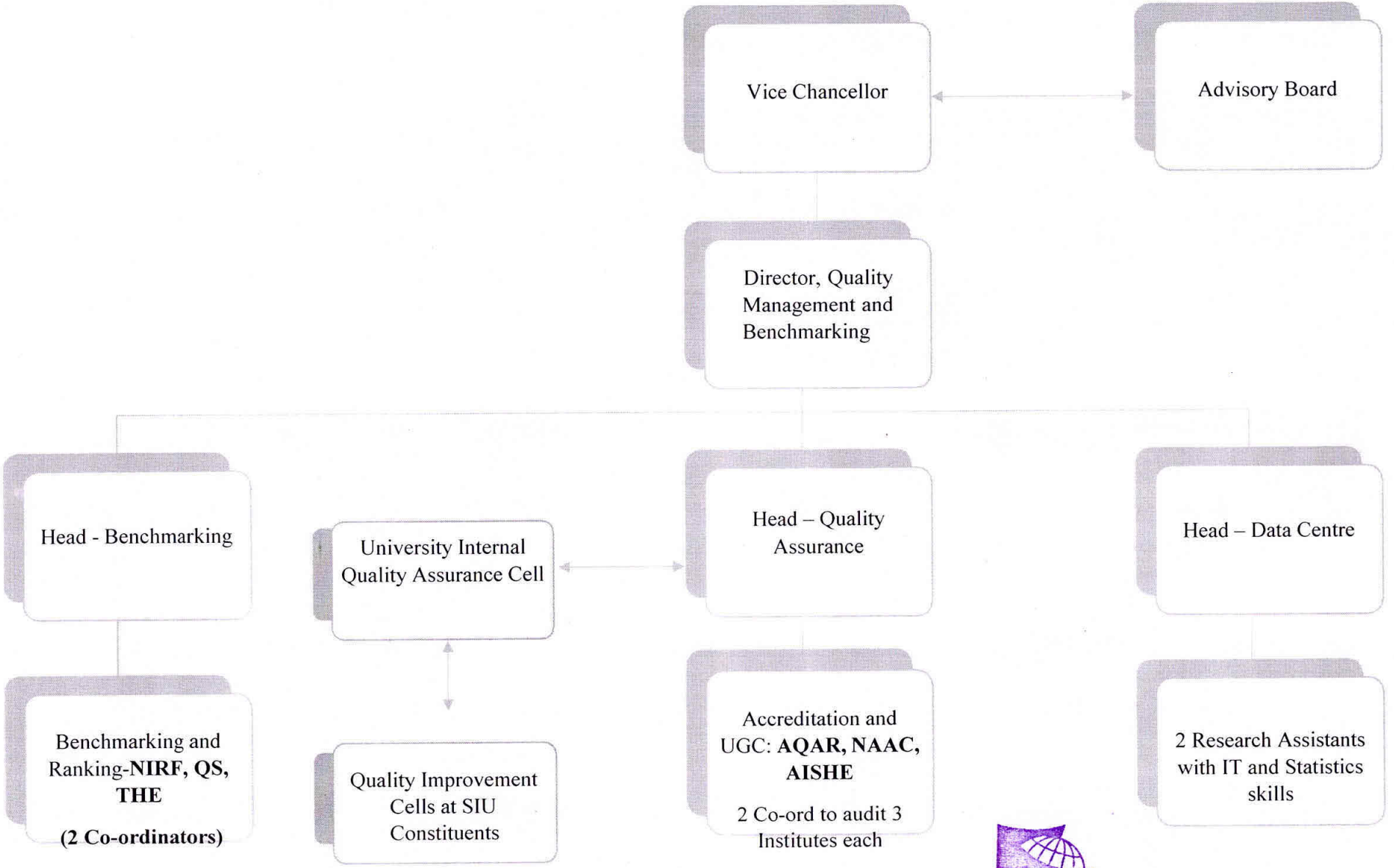
This quality frame-work, fortified with the adoption of a decentralized, process-driven and consultative decision-making culture, will help the university to pursue a stakeholder-centric university administrative framework / administrative policy.

(b) Quality Management and Benchmarking Department

The University is committed to achieving its Vision and Mission keeping in focus, maintenance of quality in all its endeavours. As per the statutory requirements of the NAAC, the University had a duly constituted Internal Quality Assurance Cell at the central level and Quality Improvement Cells at the constituent level. The Quality Management and Benchmarking (QMB) department reflects the University's belief that SIU's quality initiatives should go beyond compliance with 'minimum essentials' to strengthening its procedures to achieve the 'maximum possible'.

Duly approved by the Board of Management, the organogram of this department is depicted below.

Quality Management & Benchmarking Department



The important functions of the QMB will be:

i. to create quality policies in collaboration with the respective departments/stakeholders for all academic and non-academic operations of the University

ii. to provide the necessary instruments, tools and infrastructure to collect, collate and analyze data regularly and continuously

iii. to make available the adequate resources to effectively sustain the quality management system in the university (human resource, adequate budgetary provisions)

iv. to ensure that the necessary link, checks and balances are built in the governance system by outlining the process flows within the QMB and between QMB and authorities of the university.

v. to recommend to the University the appropriateness and preparedness to seek assessment towards accreditation or ranking

vi. to ensure requisite regulatory compliances / meeting accreditation standards to enhance quality

vii. to conduct training programmes regularly and continuously to teaching and non-teaching staff of the university to create awareness about the latest developments in QA in general and QA in the context of HE.

viii. to collaborate with other stakeholders of higher education institutions for quality evaluation, promotion and sustenance

ix. to invite participation of QA experts, experienced academics, HE administrators and leaders as members of the QMB advisory board and adopt good practices recommended by them

x. to achieve continuous quality improvement in compliance with national & International quality parameters and maintain standards as defined

(c) Advisory Board for QMB

The composition of the Advisory Board is given below:

- Chairperson - Vice Chancellor of SIU
- One member of the BoM nominated by the Board of Management of SIU
- At least two representatives from Accreditation agencies from India and abroad (eg. NAAC, INQUAAHE, ENQA, ANECA, APQN etc.)
- At least two representatives from HEI networks from India and Abroad
- Dean - Academics and Administration -SIU
- Two Deans of Faculty - SIU
- Director QMB - Member Secretary

(d) Establish a data management centre (institutional repository) to collect and collate data using technology as far as possible

The Institutional Research Centre will be the repository of important data generated within the university which will provide the input for analysis that would be presented to the BoM and the Advisory Board through the QMB for any decision making related to policy, practice or procedure - existing or new. Currently, there are stand-alone software solutions that support collection of data from different sources. The proposed centre will be an independent centre that will consolidate and integrate data collection and provide the same to the various departments/authorities/policy makers for informed decision-making. This role of this Centre will be to-

(i) Define procedural guidelines for data collection, storing, dissemination and archival
(ii) Define rules and protocols for upgrading and maintaining infrastructure for data management
(iii)Establish data access and authorization rights to stakeholders in consultation with the central IT organization
(iv)Ensure cumulative and perpetual collection of institutional data
(v) Conduct pre-processing and processing of data to fulfill the periodical requirements of both internal and external stakeholders

(e) Provide the necessary resources

The resources required at QMB are as follows:

(i) Trained and experienced manpower as specified in the organogram.
(ii) Appropriate equipment, hardware and software
(iii)Adequate budgetary provision

(ii) Strategies (plan embracing the chain of activities and procedures) to reach these quality assurance objectives.

The university has adopted a multi-pronged strategy to create, maintain and enhance the quality-conscious environment that motivates its stakeholders to be on the path of continuous improvement. These strategies are broadly categorised as:

a) Empowerment
b) Dissemination
c) Compliance

The measures taken by the university under each of these strategies to achieve the quality objectives are presented below

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a) Empowerment strategies

QMB will:

i. adopt a consultative approach with stakeholders concerned - (primarily academics and service providers) while creating the manual of policies and practices.
ii. build checks and balances in the system to ensure robust quality assurance in processes and practices
iii. provide appropriate and regular training to all process-owners and users
iv. encourage a collegial and transparent environment that solicits objective feedback for continuous improvement
v. to nurture a quality culture where each individual appreciates the need to embrace and willingly adopt quality assurance initiatives as continuous journey towards excellence

b) Dissemination strategies

QMB will:

i. create and share the quality handbook and reports through the University website/portal with all the stakeholders as a transparency measure.
ii. institute an encouraging eco-system that acknowledges and disseminates good practices

c) Compliances with internal and external requirements

QMB will:

i. ensure compliances with SIU's internal rules and requirements
ii ensure that NAAC requirements with respect to IQAC and AQAR are met in time

(iii) Procedures and activities

(a) The procedures and activities undertaken to implement the Empowerment Strategies of QMB are explained below.

QMB will nurture a quality culture where each individual appreciates the need to embrace and willingly adopt quality assurance initiatives as continuous journey towards excellence.

Procedures and Activities:

- QMB to initiate conversations and deliberations across stakeholders while creating a manual of policies and practices such that the process owners of the activity and audit are independent of each other so as to provide the necessary checks and balances.

- Provide need-based, customized training programmes for faculty, staff and students and conduct periodical feedback analysis to ensure the validity and relevance of the QMB initiatives.
- Encourage a collegial environment that is quality-conscious and willingly embraces an approach that appreciates that pursuit of quality is a journey and not a destination.

(b) The procedures and activities undertaken to implement the Dissemination Strategies of QMB are explained below.

QMB will endeavour to create an encouraging eco-system that disseminates initiatives of QMB and good practices of constituents

Procedures & Activities:

- Plan and provide opportunities and platforms to share good practices that may be emulated by other departments and constituents.
- Plan and disseminate a training calendar every academic year to create awareness of the QMB and its activities.
- Organize seminars, conferences and workshops to encourage new ideas and be updated on the developments in the domain of Quality Assurance
- Publish the quality manual on the website of the University with all stakeholders as a measure of transparency

(iv) Indicators used to measure and assess the functioning of QMB (*Marked in italics*)

1. To assess the efficiency in the functioning of the QMB - *Number of meetings conducted, resolutions passed, Action Taken report, unresolved issues, successful implementation of resolutions*
2. *Notice, Agenda and Minutes* of the Advisory Board meeting, *Action Taken Report*
3. *Ratio of vacancies to total positions* approved for the QMB department
4. *Number of training programmes conducted vs. planned* by QMB for the various stakeholders.
5. *Number of good practices identified*
6. *Frequency* of updating website/ publishing newsletters to disseminate new initiatives, good practices etc.
7. Director, QMB will periodically assess (*self-assessment*) the appropriateness and relevance of standards and processes set and revise them as and when required. The *self-assessment instrument* will be constructed through a consultative process and will be based on metrics like but not restricted to: *Number of grievances received regarding processes inefficiencies, number of compliance defaults, number of days required to complete specific tasks/services* etc.
8. Assess the performance of QMB and its verticals juxtaposed to the objectives by institutionalizing a system of seeking *feedback* from the following stakeholders:
   a. Process users on adequacy of policies and ease of processes

b. Staff of the department on adequacy of processes and ease of procedures in accomplishing tasks assigned or objectives to be achieved
c. Decision-makers on adequacy of processes to ensure compliance and accomplishment of objectives of QMB

(v) Benchmark used to assess the degree of fulfilment of the quality policy.

The University will benchmark the activities of the QMB with:

- Other Universities in India and Partner Universities abroad to learn good practices at the (a) Structure level (b) Desired Outcome level (c) Activities level
- Metrics of the Accreditation agencies of India (NAAC, NBA) and other International bodies (for ex. TEQSA)

(vi) Data to measure performance

QMB will receive all data from the Institutional Repository which will be an independent, central department in-charge of collecting data relating to:

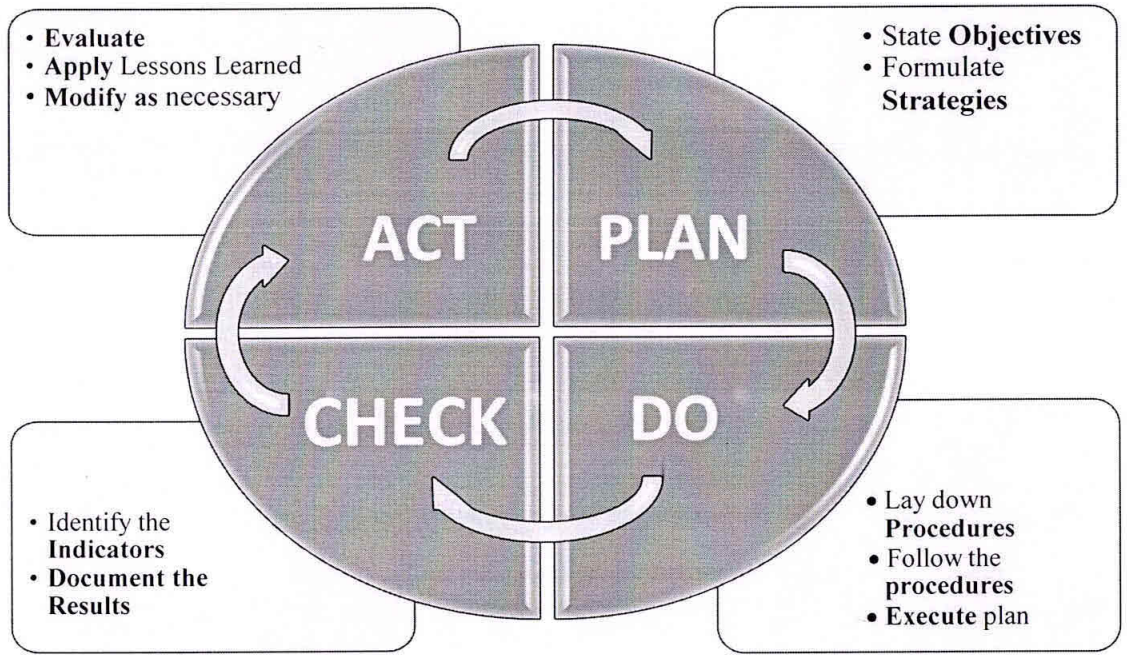
1. Academic programmes and courses	2. Movable Assets
3. Students- admission, examination, placement, progression, entrepreneurship	4. Immovable Assets
5. Admission	6. Examination
7. Faculty and staff	8. Awards and recognition
9. Research outcome (publication, projects, patents etc.)	10. Health and wellness
11. Training programmes conducted	12. Placements
13. Training programmes attended by employees	14. MDPs
15. Governance metrics like meetings conducted, resolution passed, actions implemented, grievances received and resolved etc.	16. Consultancies
17. Financial data	18. Extension activities
19. Internationalisation - Mobility (student and faculty), research, collaborations, courses co-created and co-taught, joint programmes	20. New initiatives

* indicative and not an exhaustive list

(vii) Review and if required, revise

Once a quality system cycle is completed, the available results will facilitate review of effectiveness of each pillar of the system namely, objectives, strategies, procedures and indicators. Any gap identified in any one or more of the pillars will be addressed to enhance the effectiveness of the pillar(s) concerned in the entire system. For example, if the 'Indicators' are not comprehensive enough to effectively measure performance, they will be appropriately modified/fortified for the next quality cycle. We are also cognizant of the fact that there could be situations requiring review of all pillars at the same time.

The diagram below reflects the universally accepted 'Plan, Do, Check, Act – PDCA model, ensuring that continuous quality improvement is a planned intervention and not left to chance.



5. A sample toolkit for select activities and operations of the University:

In section 1, the University's commitment to providing quality education, services and outstanding experience has been articulated. The dimensions of quality mentioned elsewhere in the document will manifest in the following that will:

- Enhance the quality of students' experience -
- Identify, recruit, train, develop and empower faculty and staff
- Facilitate exposure to good practices followed outside SIU
- Ensure that the University is financially self-reliant and fosters a sustained growth
- Engage with the community around to bring about a meaningful change there in
- Forge partnerships with service providers to nurture long-term, mutually beneficial relationships
- Provide channels of communication to receive complaints/grievances and address them

The strategies, procedures& activities and indicators for each of the above-mentioned parameter are detailed below.

Strategies	Procedures and Activities	Indicators
Enhance the quality of students' experience	1. Offer a range of Programmes/courses	1. Growth in the number of disciplines/ specializations in programmes/courses offered
	2. Facilitate flexibility in choice of courses	2. (a) Prospectus permitting flexibility (b) Spectrum of choices offered
	3. Provide access to learning resources	3. List of library resources subscribed to
	4. Ensure Quality and relevance of curriculum	4. (a) Audit reports showing compliance with SIU requirements (b) Feedback from industry, alumni and recruiters
	5. Provide support services that will enhance quality of experience	5. (a) Annual survey on the range of support services requested by Students and staff (b) Feedback on adequacy of services offered (i.e. the number) (c) Feedback on quality of services offered
	6. Provide exposure to community service	6. (a) Number of students registering for Service Learning embedded in the curriculum and comparative trend (b) Number of beneficiary organizations involved

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		Impact analysis of extension activities undertaken through service learning (c) Number of outreach activities undertaken (d) Number of students involved in the outreach activities (e) Impact analysis of the outreach activities undertaken
	7. Embed Immersive and experiential learning interventions	7. (a) Number of credits delivered through experiential interventions (b) Number of ways in which experiential interventions are offered (c) Number of students opting for immersive experiences that are not mandatory (d) Feedback on quality of such immersive/experiential interventions
Identify, recruit, train, develop and empower faculty and staff	1. Recruit qualified and experienced Faculty adopting a selection process based on merit	1. % of Faculty with PhD from renowned Universities 2. Average experience of faculty members 3. Average tenure of faculty members in Symbiosis
	2. Provide equal opportunities	1. Equal opportunity policy 2. Steps taken to ensure transparency in selections process
	3. Create a collegial environment to encourage scholarship	1. Number of forums and platforms to appreciate unique capabilities of faculty and staff 2. Mentoring mechanisms to support younger faculty 3. Mechanisms to appreciate different types of contributions by faculty members 4. Mechanisms to identify and recognize scholarship
	4. Make available resources for learning and research	1. Investment in IT resources 2. Investment in Library resources 3. Opportunities available to faculty to travel for conferences and collaborate with international faculty
	5. Provide for funds to engage in collaborative research, student engagement	1. Investment in research eco-system 2. Per faculty research budget (for publication, research support etc.) 3. Investment is co-curricular and extra-curricular interventions

	6. Conduct regular performance appraisals, providing feedback and incentives for good performance	1. Notification of the Performance Appraisal Review Committee (PARC) 2. Notification of the annual online performance appraisal process 3. Report of the PARC showing incentives awarded
	7. Provide for and encourage regular training and development	1. Investment in Training and Development of faculty and staff 2. Per faculty budget for training
	3. Provide opportunities for growth in career	1. Merit-based selection of faculty for leadership positions in this growing organization 2. Merit based selection of non-teaching staff for higher positions in this growing organization
	4. Adopt employee-friendly human resource policies	1. Range of welfare measures 2. Investment in welfare measures
Facilitate exposure to good practices followed outside SIU	1. Forge networks between the University and the academic community outside	1. Number of collaborations with like-minded, renowned Universities in India and abroad 2. Number of joint activities undertaken during the year 3. Number of joint activities completed 4. Range of activities undertaken
	2. Create facilitating policies that encourage faculty to collaborate and engage in joint research, projects, jointly hosted conferences, seminars etc.	1. Policies that facilitate collaborative academic activities 2. Incentives to faculty to encourage such collaboration
	3. Provide exposure to faculty to visit other HEIs and learn/share good practices	1. Number of faculty engaged in academic collaboration 2. Outcome of such collaborative activities
Ensure that the University is financially self-reliant and equipped	1. Attract meritorious students and ensure full admission of students to all programmes	1. Investment in admission announcement 2. Transparency in the process 3. Scholarships awarded to attract meritorious students

to achieve what the Management has envisioned	2. Explore avenues to increase the proportion of non-fee revenue	1. Number of Management Development Programmes offered and number enrolled 2. Number of Continuing education programmes for working professionals 3. Number of consultancy projects 4. Endowments for institution of Chairs
	3. Prepare a road map to make the University internally quality-conscious, compliant with requirements of the regulatory authorities	1. Notification of policies created/amended 2. Regular meetings of the Quality Improvement Cells at the constituent level and the Internal Quality Assurance Committee at the University level
Engage with the community around to bring about a meaningful change therein	1. Engage closely with the community providing them health services amongst others	1. Number of initiatives undertaken through the assessment period 2. Number beneficiaries of each of the initiatives 3. Amount invested in resources to undertake community initiatives
	2. Embed service learning in the curriculum to sensitize students to the needs of the community	1. Identify different avenues to enable Service Learning (Symbiosis Service Scheme -SSS on the lines of NSS) 2. Number of students engaged in Service Learning 3. Number of beneficiaries 4. Number of initiatives undertaken 5. Student feedback on their experience 6. Student performance in the evaluation for four credits
	3. Continuously monitor incremental progress and impact of initiatives undertaken.	1. Periodic audit reports highlighting compliances and variances
	1. Adopt a transparent and fair selection process	1.Selection procedure - unbiased and transparent 1. 2. Selection criteria favouring quality of services rather than cost focused

	2. Adopt a collaborative approach in providing services and addressing the users' requirements	1. Grievance redressal mechanisms 2. Number of grievances addressed 3. Time required to address grievances/complaints
	3. Adopt an audit process to monitor quality of services provided and compare with requirements specified in the work order	4. Analysis of feedback received from stakeholders
	5. Ensure prompt payment to service providers for services rendered	1. Time taken to issue Purchase orders 2. Time taken to remit payment to vendors
	Create and communicate to all stakeholders, the committee/ Department that will address their complaints/grievances	1.Notification of the constitution of the Committees: a) Grievance Redressal Committee b) Fee Concession Committee c) Anti-ragging Committee d) Campus Disciplinary Committee e) Central Disciplinary Committee f) Internal Committee g) Mess Committee h) Campus Coordination Committee
Provide channels of communication to receive complaints/grievances and address them	Lay down procedures regarding receiving, method of addressing, time period for resolving and reporting	1. Notification of procedures that will be adopted to resolve the complaints /grievances 2. Number of grievances received - stakeholder-wise 3. Number resolved satisfactorily 4. Action taken on grievances that were not resolved satisfactorily

	1. Student Satisfaction Survey	1. Analysis of Student Satisfaction Survey a) Curricular aspects b) Hostel c) Mess food 2. General Student experience on campus experience

These activities, procedures and indicators will be benchmarked with those of other Category 1 private Universities in India, other well-establishedinternational offices of partner universities and parameters recommended by quality assurance agencies like NAAC, ENQA, ANECA etc.

If required, the 'review and revise' process as explained in the previous section will be undertaken as a continuous improvement exercise.

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References

Ho,S, Fung,C, (2008) TQM Excellence Model http://www.hk5sa.com/tqm/tqmex/intro.htm

Schindler, L., Puls-Elvidge, S., Welzant, H., & Crawford, L. (2015). Definitions of quality in higher education: A synthesis of the literature. Higher Learning Research Communications, 5(3), 3-13. http://dx.doi.org/10.18870/hlrc.v5i3.244

https://www.universitiesnz.ac.nz/sites/default/files/AQA_UNZ_QA_Brochure_2013.pdf

https://www.helsinki.fi/en/about-us/strategy-economy-and-quality/quality-management

https://63b044d2-f3cd-4b1f-8511-9623751022cc.filesusr.com/ugd/e7e2e3_88d1c9cd0e5c46de850420a10a117905.pdf (Equambi toolkit developed for SIU)

Appendix 1.0

Preamble: SMCW & SUHRC

1) The Quality Management and Benchmarking (QMB) department at SIU is as depicted in the SIU organogram

2) The above diagram depicts relationship *inter-alia* between QMB Dept.at SIU and the same at Constituents/Departments of SIU including FoHS.

3) As depicted at the SIU level, we have Internal Quality Assurance Cell (IQAC), whereas, at individual constituent level, we have Quality Improvement Cell (QIC).

4) SMCW & SUHRC have been established jointly as a constituent of SIU vide BOM resolution (Notification No A. 17 dated 27th June, 2019).

5) However, the functioning of SMCW is different from that of SUHRC.Consequently, the scope of operations of the QIC at SMCW (focus on academics) is distinct from that of SUHRC (focus on services). Hence, it is proposed to have two different QICs: one for SMCW and one for SUHRC.

6) However, it may be noted that the faculty of SMCW are the predominant service providers at SUHRC.

7) Given the overlap mentioned in point 6 above, there would, therefore, be some members common to both QICs. The two QICs would, however, have different members, conduct meetings independently and have separate member secretaries. Most importantly, scope of operations would be independent and distinct for each of the two QICs.

8) Further, given the diversity of their scope of operations (academics v/s services), both the QICs would have different Quality Improvement Sub-committees (QIC) under their jurisdiction.

9) Each committee under the QIC of SMCW and SUHRC will be chaired by the Dean,SMCW & CEO, SUHRC respectively. The concerned subject matter expert (HoD)will be the member secretary of the respective committee. Other members will be nominated either by the Dean-SMCW/ CEO-SUHRC.

10) Certain Quality Improvement Sub-committees under the two different QICs of SMCW and SUHRC would be common viz. Hospital infection control committee,Bio-medical Waste Management Committee, PCPNDT Committee, and Pharmacovigilance Committee.

11) Finally, both QICs would align with the QMB initiatives at SIU and report to Dean FoHS.

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