



## IQAC

### INTERNAL QUALITY ASSURANCE CELL



### **Best practices: 1**

Title: COVID-19 activities during pandemic

### **Objectives**

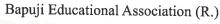
- Sensitization programmes regarding COVID 19, preventive or safety measures to be followed in clinics and campus.
- To lay down guidelines about the disinfecting and screening protocols for health care providers and patients.
- Protocol for using type of personal protective equipment during specified procedure.
- Protocol for disposing the infected biomedical waste.
- Protocol to implement the chemicals that must be used for disinfecting and sanitizion purpose.

#### The Context:

Government of India made all the medical institutions in the country aware of the fact that the fast spreading and deadly virus had infiltrated the population of India, and put into effect the first lockdown, our institute declared emergency containment measures and halted all procedures except for emergency cases. This was a necessary step in containing the spread of the novel corona virus, since Dental Surgeons work intimately with the oral cavity, which is a major mode of transmission of the disease. The college formulated several committees to deal with the various measures needed to be employed and managed to contain and limit the spread of the disease from the day one.

### The practice:

The committees helped with organising Isolation rooms for all students of college that had tested positive during screening tests or returned from their respective homes. The entire Hemavathi block of the girl's hostel and the cellar rooms of the dental boys' hostel were converted into containment zones for the isolation purpose. Regular spaced-out testing was conducted for those under isolation to monitor the remission of the infection. The testing was outsourced to the government lab in Chigateri hospital in Davangere, in collaboration with whom we conducted all our future screening tests as well. The student welfare committee took into account the health and interests of the students in these difficult times.





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The committee eliminated the exposure of exam going, undergraduate students by continuing their education through online lectures and examinations. The student welfare committee paved the way for the college to work in collaboration with a psychiatrist and a physician to address their problems, both mental and physical, to ensure complete fitness of our future doctors.

Numerous sensitisation program were conducted regarding COVID 19, preventive or safety measures to be followed in clinics and campus to undergraduate students(23/12/2020), Postgraduate students(23/12/2020), non-teaching faculty including sisters, para dental staff and attenders (28/12/2020 and 12/1/2021) & teaching faculty(22/12/2020 and 13/1/2021)

The infection control committee laid down guidelines as to how to go about the disinfecting and screening protocols for patients at various areas like at the entrance, triage area, patient waiting area, at office, at library, at rest rooms, at canteen & at parking area. At OPD to take COVID consent form sign from patient. Patients were given mouth rinse with 0.2% betadine/ 0.2% chlorhexidine mouth wash for 30 seconds to 1 minute before examination and given hand wash / plastic gloves to wear, restrict the use of hard copy reports and patient cards, use of separate containers with disinfecting solution with proper lid coverage, preferably to make OPD cubicle. At department/operatory procedures were to finish procedures within 30 min / as early as possible.

Attire committee compiled the data on increasing trend in the number of cases of patients affected with covid-19, which led to the realization of the importance of using personal protective equipment (PPE) to protect operators from contracting the virus.

This committee was formulated due to the need to safely dispose infected materials to reduce the incidence of general public coming in contact with contaminants. Segregation at the source (Doctors, Students, Lab technicians Nurses and attenders are responsible) was done. Each department was assigned the storage place in safe, ventilated and secured location of the segregated biomedical waste to ensure that there is no secondary handling, spillage or in the area where it can be easily transported to CBWTF. Segregation chart was displayed in all departments, in the designated area of colour coded bins. Highly infectious waste, laboratory waste and sharps waste were pre-treated with 1% sodium hypochlorite.

Our institution formed committee for chemical and solutions to research and implement the chemicals that must be used for disinfecting and sanitizing purposes and various protocols were enforced for proper sanitising the area.

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Bapuji Educational Association (R.)

## **COLLEGE OF DENTAL SCIENCES**

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Our college in collaboration with District Health Office, trained our institution nurses in the method of administering the vaccination and carrying out the vaccination program. All the students, dental faculty, para-dental and menial staffs were vaccinated in the college campus. We had been allotted a vaccination site for this purpose. The vaccinated list has been sent to the University for the needful.

#### **Evidence of Success:**

Following all the protocols laid down by various department our institution was able to perform all the procedures without any one affecting by the infection.

Numerous minor and major cases were effectively treated and managed which helped the community at large during the tough times of pandemic when the private practices were either shut or not operational or public were in economic crisis and were unable approach private dental consultation. We were requested to support the government in the management of Covid19 patients as there was shortage of nursing staff at Primary Health Centre, hence the nursing staff of our institution were posted at various Primary Health centre in Davangere for administering the Vaccine for the public.

As per the state government request our college Interns and Postgraduates were posted for treating patients suffering from Covid 19. Our students underwent the training from the government doctors posted in CG hospital. They were trained for serving in Triage area, ward duty and ICU duty. Our students had a great exposure by participating in treating and working with medical professionals while treating COVID 19 patients. Our college was also requested for support when the medical hospital, Chigateri hospital, was faced with a sudden rise in Mucormycosis cases, at a time when the number of doctors in service had dwindled.

### Problems encountered and resources required:

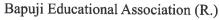
Few of our students contracted covid infections during covid duty postings, they were given all possible (mental and physical) support from the institution.

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### **Best practices: 2**

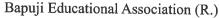
Title of the Practice: Switching to digital/online teaching learning activities during pandemic.

### **Objectives of the Practice**

- To continue the contact with students during pandemic with safety.
- To keep the learning process in continuum
- To keep the students in pace with the academic calendar
- To enhance the effectiveness and efficiency of learning
- To expose the staff and post graduate to various advances to battle covid
- To update faculty and in turn students regarding the covid guidelines and precautions
- Also to be updated with the subject through the experts during lack of conferences and CDEs.

#### The Context

Our institution along with Dental council of India, Rajiv Gandhi Health University and Indian Dental Association conducted various webinars for faculty and students on the Standard operating protocols and various aspects of COVID and to understand it in more general perspective, blended learning approach redesign courses that are developed, scheduled and implemented through a combination of virtual and physical learning activities. This approach promotes active and self-directed learning and has gained acceptance in dental education as a complementary method to traditional learning. The university E-learning management system (LMS) was utilized to facilitate various teaching and learning activities at different academic levels in the undergraduate dental program. Online education turns education to be student-centered, where students take part in the learning process, and teachers work as supervisors and guides for students. Our institution researched about various online applications and zero downed to ZOOM app. All online classes were regularly conducted and students were benefitted with completion of course without hindrance in their course.





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#### The Practice

During this COVID-19 pandemic, courses delivered with student-centered learning methods were immediately moved full E-learning.

In the first half of academic year before the pandemic, group discussions, clarification sessions and interactive lectures were carried out in-campus classroom learning while in the second half of academic year, learning activities were delivered in full distance learning employing ZOOM online meeting platforms. In order to make the format of discussion sessions stay similar as it had been conducted before the pandemic, every online session was delivered synchronously with the attendance of a facilitator in each group. Students and facilitators' time spent on setting or accomplishing tasks was similar as in classroom learning.

#### **Evidence of Success**

Students expressed that online learning helped them to acquire new experiences and skills. Apart from technical gliches, students could understand effectively the taught lessons. These were evident in their response and evaluations conducted and keep up the academic calendar. Pass percentage of the year was equivalent to previous years in university examinations. Participation of students in activities of learning and assessment was well appreciated by faculty. Faculty also attended virtual CMEs and online conferences. Our institute also partnered in organizing online conference

### **Problems Encountered and Resourcs Required**

Peer to peer communication and interaction in a group discussion are not often feasible in the virtual learning method.

The teaching faculty have been trained in imparting lectures and modulate the same with the feedback they gain during the interaction with students. This feature was lacking in the online platforms.

Students in the remote places and villages with poor internet connectivity was a main hurdle to impart education online. it also added to the expenses incurred during the economic uncertain times.

Along with technical glitches, the monitoring of students was not efficient during the lectures, though the interested wards were easy to handle, there were few whose attentiveness and concentrations on class went unmonitored.

Shobbaruti
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