4.4 QUALITY MANAGEMENT SYSTEM AND ITS PROCESSES

4.4.1 SDUCON has established, documented, implemented and maintained a quality management system to continually improve the effectiveness in accordance with the requirements of ISO 9001- 2015 international standard.

SDUCON has determined the processes needed for the quality management system in Annexure B and their application as per Annexure-C.

SDUCON has/will

a. Determined the inputs required and the outputs expected from these process in the respective procedures / work instructions. Refer List of Procedures / work instructions.
b. Determined the sequence and interaction of these processes in Annexure B & Annexure C.
c. Determined and applied the criteria and methods needed to ensure the affective operation and control of these processes in Section 6 Quality Objectives.
d. Determined the resources needed for these processes and ensure their availability through Budget planning process has described in QSP-17.
e. Assigned the responsibilities and authorities of these processes as defined in Annexure D.
f. Addressed the risks and opportunities in Procedure for Budget Planning QSP-17 and Annexure A.
g. Will evaluate these processes through the defined Quality Objectives in Section 6 as per the frequency and implement any changes needed to ensure that these processes achieved their intended results.
h. Improve the processes and the quality management system while reviewing the status of achievement of the objectives in MRM and revising the target towards improvement.

4.4.2 SDUCON will:

a. Maintain necessary records to support the operation of its process as defined in the Master list of records.

b. Retain the records for a defined period to have confidence that the processes have been carried out as planned. Retention period of the records as per SDUCON, their customer, applicable statutory and regulatory requirements is defined in the master list of records.

Prepared by

Principal
Sri Devaraj Urs College of Nursing,
Tamaka, Kolar-563 101.

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Approved by

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

6.0 PLANNING

6.1 ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES

6.1.1 When planning for the Quality Management System SDUCON will consider the issues & requirements referred in Budget Plan and Annexure A and will determine the risks and opportunities that need to be addressed to:

a. Give assurance that the quality management system can achieve its intended results.
b. Enhance desirable effects by taking actions to reduce or eliminate the risks.
c. Prevent or reduce undesired effects by taking actions on high risks identified.
d. Achieved improvements.

6.1.2 SDUCON will plan

a. Actions to address these risks and opportunities
b. How to
    a. Integrate and implement the actions in to its quality management system processes by flowing down the risks the respective process
    b. Evaluate the effectiveness of these actions through the risk register /MRM

The Risks are identified in the Budget Plan for Internal Issues, external issues and Interested parties. The risk assessment will be done as HIGH, MEDIUM and LOW. Actions will be initiated only for the HIGH Risks which will be recorded in the Risk Register (Annexure G)

6.2 QUALITY OBJECTIVES AND PLANNING TO ACHIEVE THEM

6.2.1 SDUCON has established quality objectives at relevant functions, levels and processes needed for the QMS. Refer: Annexure-F. The records of achievement monitored and measured as per the frequency is updated every month in the Objective Matrix sheet. Refer ACD01

6.2.2 When planning how to achieve its Quality Objectives, Principal of SDUCON will determine the following

a. What will be done by discussing with respective process owner
b. What resources will be required? Identified as per the business plan
c. Who will be responsible; identified in the Objective Matrix sheet.
d. When it will be completed; by reviewing in the MRM.
e. How the results will be evaluated; by the reviewing the Objective Matrix sheet.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

7.1 RESOURCES

7.1.1 General

SDUCON will determine and provide the resources needed for the establishment, implementation, maintenance and continual improvement of the Quality management system.

Resources such as man, material, methods, measuring equipments etc will be identified during Budget plan / MRM and provided by Principal.

SDUCON will consider

a. The capabilities of, and constraints on existing internal resources during Service planning, and changes to Service, process and systems.
b. The processes to be outsourced. At present no processes are outsourced

7.1.2 PEOPLE

Recruitment persons will be done as per RGUHS Requirements.

INFRASTRUCTURE

Maintenance is related to the infrastructure of the office. The assets are listed in the asset register. AMCs are provided for computers, Laptops, Generators, Telephones, Pest controls, Security etc which are listed in the approved suppliers list and monitored as defined in the process for purchase

Admin will monitor all the AMCs as per the agreement and initiate actions wherever necessary. Asset Register is maintained by Finance.

Environment for the Operation of the process

SDUCON has determined, Provided and maintained the environment necessary for the operation of its processes and to achieve conformity of products as follows

a. Hygienic work place for the Staff and students
b. Adequate Lighting and ventilation
c. Redressal of employee Grievance
d. Hostel Facilities
e. Transport Facilities

Gayathri
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Prepared by | Approved by

c. **Contribution to the effectiveness of the Quality Management System, including the benefits of improved performances**
Responsibility of Head of the department to communicate the achievement of defined quality objective to the team as per the frequency and displayed in the work place. Actions for improvement to be initiated within the team headed by the head of department which is monitored through the yearly performance appraisal.

d. **Implications of not conforming within the quality management system requirements**

Head department to communicate the following related to QMS relevant to their process

- Results of non-conformances and corrective actions taken during internal / external / customer audits
- Any corrective actions initiated in the process

e. **Relevant Quality Management System, documented information and changes there to**
Relevant Head of the department to communicate the following

- The procedure to be followed for the process
- The documents to be used for recording the activities (Master list of Documents)
- Retention period of the records and their location as per Master list of records
- Any changes made to the documents, reviewed in the MRM.

f. **Their contribution to Service conformity**
All staff and employees are aware of their roles, responsibilities and authorities and they are contributing accordingly.

h. **Their contribution to product safety**
By communicating the importance of safety information as per the Area.

j. **Importance of ethical behavior**
Communicated through induction trainings and regular review meetings with in the team.

Awareness will be communicated through MRM to all the employees of SDUCON

7.4 **Communication**

Refer Annexure F for communication matrix

7.5 **Documented information**

7.5.1 General
7.5.2 Creating and updating
7.5.3 Control of Documented information
Refer procedure for control of documents and Records (QSP-12)

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101
Prepared by

Gayathri
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103
Approved by

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

8.0 OPERATION

8.1 OPERATIONAL PLANNING AND CONTROL

Principal will identify any new services to be planned, based on the business plan. The new services will be planned and implemented as per the New service plan (SDUCON-F-XX)

8.2 REQUIREMENTS FOR PRODUCTS AND SERVICES

8.2.1 CUSTOMER COMMUNICATION

College prospectus, Newspaper advertisement and information published in professional journal (NJI) are effective media to communicate with the customer regarding the requirements expected by the customer.

College prospectus describes and highlights details of the programmes, facilities provided, admission criteria, rules / regulations for easy and unambiguous understanding of students and their parents.

The customer's perception as to whether the organization has fulfilled the requirements is gathered by implementing an effective feedback system, regarding all academic and support activities and improvement by them are initiated and monitored for its effectiveness.

8.2.2 DETERMINING THE REQUIREMENTS FOR SERVICES

Students are the first line of customers. Parents, health industry and society are the ultimate beneficiaries of the whole service rendered by the institution. A well-designed system is practised to gather information regarding the latest trends in nursing.
The entire course-related activities (theory and practical) are carried out as per the rguhs/inc/knc syllabus and guidelines.
All the co-curricular and extra-curricular activities are properly planned and executed.
All the supporting facilities like hostel & mess, library, transport and canteen etc. Are provided.
All the inc, knc, rguhs requirements are met to deliver the courses.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Prepared by

Approved by

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

8.5 SERVICE PROVISION

8.5.1 CONTROL OF SERVICE PROVISION

The University syllabus and other requirements are issued and communicated to the respective HODs and faculties

Quality System Procedures and Work Instructions are issued to the respective areas (course and other supporting activities.)

All the laboratories are provided with sufficient equipments.

Functioning / sustainability of the all laboratory equipments are ensured by periodic maintenance

8.5.2 IDENTIFICATION AND TRACEABILITY

The HODs/ concerned faculties are responsible for maintaining quality systems and records to ensure identification and traceability, corresponding to the particular department.
For establishing identification and traceability, the entire activities are grouped in different phases and a link established.
All the students, once admitted and taken into rolls are given Roll Nos. and issued with an identity card, so that any student is identified at any point of time with details of his / her status.
All the staff are issued with employee code Nos. and an identification card for easy identification of the person.

8.5.3 PROPERTY BELONGING TO CUSTOMERS OR EXTERNAL PROVIDERS

Customer's property generally includes

1. Original testimonials.
2. Caution money.
3. Record notebooks.

All the above properties are taken care of and kept in safe custody.

8.7 CONTROL OF NONE CONFORMING OUT PUTS

Refer QSP-14.

CROSS REFERENCES:

DOCUMENTS:

SI, NO.	DESCRIPTION	REFERENCE
1	Procedure for staff meeting	QSP No.-01
2	Procedure for management review meeting	QSP No.-02
3	Procedure for student and staff selection/ admission	QSP No.-03
4	Procedure for course planning , preparation and delivery	QSP No.-04
5	Procedure for conduct of IA , result analysis and follow up actions	QSP No.-05
6	Procedure for conduct of university examination , result analysis and follow up actions	QSP No.-06
7	Procedure for staff training and organizational knowledge management	QSP No.-07
8	Procedure for feedback system	QSP No.-08
9	Procedure for monitoring and performance evaluation by HOD	QSP No.-09
10	Procedure For Seminars / Guest Lecture / Symposium/ Workshop	QSP No.-10
11	Procedure for library	QSP No.-11
12	Procedure for control of documents and records	QSP No.-12
13	Procedure for IQA	QSP No.-13
14	Procedure for control of Non-Conformance	QSP No.-14
15	Procedure for corrective action	QSP No.-15
16	Procedure for risk management	QSP No.-16
17	Procedure for budget planning	QSP No.-17
18	Procedure for hostel and canteen	QSP No.-18

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101

Prepared by

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Approved by

CROSS REFERENCES

DOCUMENTED INFORMATION:

SL. NO.	DESCRIPTION	REFERENCE
1	Student feedback on teaching learning process	ACD-19
2	Student feedback on course	ACD-20
3	Student feedback on programme	ACD-21
4	Employee performance appraisal by HOD	ADM-13

SRI DEVARAJ URS SCHOOL / COLLEGE OF NURSING
CONTROLLED COPY
TAMAKA, KOLAR

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101
Prepared by

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103
Approved by

ANNEXURE-A NEEDS AND EXPECTATIONS OF INTERESTED PARTIES

Sl No.	Interested parties	Needs	Expectations	Major Risk	Opportunities	Method	Review Frequency	Responsibility	Review Record	Rema
1	Top Management (Academic & administrative Control)	Quality education Infrastructure Meeting budget Retention of competent staff and satisfaction Student admission Student satisfaction	Sustaining requirements of apex and accreditation body standards Facilitate conducive teaching &learning resources Maintaing 100% admission maintain 100%staff satisfaction Maintain 100% pass percentage	Attrition of students and staff Budget imbalance	Obtain higher education accreditation standards Improve admission status Improve staff retention	Obtain formative & summative feedback Periodic staff meetings and periodic academic and administrative committee meetings	As per institutional policy of academic and administrative committees and MRM	Top Management	Academic and administrative committee meeting and MRM minutes	-
2	Student/Customer	Programme specific quality training as per apex body requirements	Consistent and quality teaching & learning resources, monitoring and evaluation	Slow learners Pass percentage Attrition of the students	Sustained progress in implementation of quality teaching & learning resources, monitoring and evaluation	Class meetings Mentoring programme PTA Feed back analysis	As per the institutional policy	Course co-ordinators Class co-ordinators HOD	Meeting minutes Register Students progress report Student profile Result analysis sheet	
3	Supplier	Business On time Payments	Business Growth	Supplier on time delivery On time payment to supplier	Consistent on time delivery to customer FFPL Business growth	Supplier risk analysis	As per MRM	Purchase Engineer	Supplier Rating and Risk Register	
4	Parents	Quality teaching & Learning environment	Full pledged competent professionals and good citizens Better placement Professional advancement	Poor performers Attrition of students Financial crisis	Sustaining the admission status through good will Improving the pass percentage Maintain balance in budget	Career guidance PTA summative feedback	PTA & MRM	Top Management, Class co-ordinator Mentor	Risk Register	
5	Employees	Good Work environment On time salary Academic promotions and deputations	CNETrainings Welfare activities Promotions	Employee dis-satisfaction Attrition	Multi skilled employees Reduced training cost Improves reputation of the institution	Employee satisfaction survey Performance appraisal Employee Grievance	MRM Quarterly	Top Management	Risk Register	
6	Statutory & Regulatory Bodies	Compliance to the requirements	Continued Compliance to the requirements	Inconsistent updation and orientation to the changes in the requirements	Zero penalties	Through the Legal Register	MRM	Administrative heads	Risk Register	

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101

Prepared by
Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

T. Rajendran
Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Approved by

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

4.3 DETERMINING THE SCOPE OF QMS

The Scope of SDUCON is as follows:

"To Provide Quality Nursing Education for under Graduate and Post Graduate Nursing Students"

When determining the scope, SDUCON has considering the following.

1. The External and internal issues described in Annexure -A
2. Requirements of Relevant interested parties described in annexure- A
3. The Services rendered at SDUCON

SDUCON while considering the training requirements of this International standard has claimed the following as not applicable to the scope of its Quality Management System. This claimed requirement does not affect SDUCON's ability or responsibility to ensure the conformity of its products and enhancement of customer satisfaction.

Sl No.	Clause No.	Description	Justification
1	8.3	Design & Development of Services	Since Services are carried out as per the RGUHS requirements, this clause is not applicable.

Prepared by

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101.

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Approved by

G. Rajendra

Administrative Officer
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

1.0 PURPOSE

1.1 To define and outline the Quality Management System that has been structured documented and established in **SRI DEVARAJ URS COLLEGE OF NURSING** ensure that adequate system control is exercised on all functions and activities identifying the processes sequencing which monitors teaching and learning resources to achieve quality service and continual improvement of the system

2.0 SCOPE

All activities of the institution related to academic, administrative and other supportive services covers the entire working force, i.e., teaching, non teaching, supportive staff and student in the management of resources, services provided and system of measurement/evaluation.

3.0 RESPONSIBILITY

Principal, Vice-Principal, Delegated Representative, HOD's and all other teaching and non-teaching staff of the college.

4.0 CONTEXT OF THE ORGANIZATION

4.1 UNDERSTANDING THE ORGANIZATION AND ITS CONTEXT

SDUCON has determined the relevant of its purpose in the profile (QM 3.0). The external and internal issues that are relevant to its purpose and its strategic direction that affect its ability to achieve the intended results of its Quality Management System is described in Budget planning Process (QSP-17)

The Quality Policy of SDUCON is defined through objectives
SDUCON will monitor and review information about these internal and external issues in the MRM done every 6 months once (August/March).

4.2 Understanding the needs and expectations of interested parties

The institution makes considerable efforts in understanding the needs and expectations of Interested Parties through regular Academic, Administrative, Staff and stake holders meetings, feed backs and appraisals.
Refer Annexure –A

Prepared by
Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563 101.

Gayathri
IQAC
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563101.

Principal
Sri Devaraj Urs College of Nursing
Tamaka, Kolar-563103

Approved by