



Item No. 76.13

76<sup>th</sup> School Board of School of Health Sciences  
31<sup>st</sup> May, 2023

Agenda: To consider and approve the feedback report for experts to be submitted to CIQA

## SUBJECT EXPERT'S FEEDBACK ANALYSIS REPORT

(2022- 2023)



**SCHOOL OF HEALTH SCIENCES**  
INDIRA GANDHI NATIONAL OPEN UNIVERSITY  
New Delhi 110068



## **Introduction**

The school of Health Science was set up in the year 1991 with the objective of augmenting educational avenues for medical, nursing and paramedical personnel through distance education mode. The various functions of the school is planning, developing and launching of degree, diploma and certificate level programmes for various categories of health professionals; health awareness courses for the general public and conducting research on health issues. The school is a pioneer in developing competency-based programmes in various disciplines. The School adopts an innovative approach in implementing medical programmes through a diversified approach in which three-tier system i.e. medical colleges [Programme Study Centers (PSCs)], district hospitals [Skill Development Centers (SDCs) and the work places of enrolled doctors provide hands on training Medical Council of India through its letter No.MCI-23(1)/2019- Med./144826dt.05/09/19 has permitted IGNOU to run Continuing Medical Education programmes through Open and Distance Learning (ODL). Similarly in the field of Nursing the programmes, programmes are being developed to provide opportunities to nursing personnel for career advancement. Nursing College (PSCs), Hospitals Community Health Centres and work places of enrolled nurses provide hands on training. As per Indian Nursing Council (INC) letter No. F.No.22-203/CNE/2018- INC dated 27/11/2020 the various diploma and certificate programmes of nursing discipline are being considered under continued Nursing Education programme with 55 CNE credit hour /11 Credits as approved by INC. The school is also collaborating with various National and International organizations like Government Departments, Ministries, Councils and reputed organizations like WHO, UNICEF, National Board of Examination, NIHF, ICMR. Programmes developed by SOHS are given below:

### **Doctoral Degree Programme**

Ph.D in Nursing

### **PG and Advance Diploma Programme**

Post-Graduate Diploma in HIV Medicine (PGDHIVM)

Post-Graduate Diploma in Hospital and Health Management (PGDHHM)

Post-Graduate Diploma in Maternal and Child Health (PGDMCH)

Post-Graduate Diploma in Geriatric Medicine (PGDGM)

### **Bachelor's Degree Programme**

BSc Nursing (Post Basic) (BScN(PB))

### **Diploma Programme**

Diploma in Nursing Administration (DNA)

Diploma in Critical Care Nursing (DCCN)

### **Certificate Programme**



Certificate in First Aid (CFAID)  
Certificate in Community Health (CCH)  
Certificate in Maternal and Child Health Nursing (CMCHN)  
Certificate in Newborn & Infant Nursing (CNIN)  
Certificate in Home Based Health Care (CHBHC)  
Certificate in Health Care Waste Management (CHCWM)  
Certificate in General Duty Assistance (CGDA)  
Certificate in Phlebotomy Assistance (CPHA)  
Certificate in Home Health Assistance (CHHA)  
Certificate in Geriatric Care Assistance (CGCA)  
Certificate Programme in YOGA (CPY)  
Certificate in Adolescent Health and Counselling (CAHC)

### **PG Certificate Programme**

Post Graduate Certificate in Medical Management of CBRNE Disasters (PGCMDM)

A number of subject experts from various areas of Health Sciences and Nursing discipline were involved in design and development of curriculum in expert committee meeting, core committee meeting, orientation programme of course writing and editing including revision meeting.

### **3. Methodology**

IGNOU is the largest university in the world with a National Jurisdiction. Besides offering holistic education and multidisciplinary education, IGNOU also aims at maintaining quality. IGNOU has been accredited with Grade A++ by the National Assessment and Accreditation Council (NAAC). This could not have been possible without the support of subject experts /stakeholders as an important contributor to the programme planning/development/implementation team.

Providing frequent feedback is a significant means of improving the teaching-learning process and the system as a whole. The University obtains feedback from the stakeholders every year to maintain the quality of the system. As part of this endeavor, experts were requested to give their valuable opinion.

This year's feedback tools prepared by CIQA was focused on the implementation of the themes of G20 which are: inclusive, equitable, relevant, and quality education and lifelong learning opportunities for all, within the theme of "One Earth, One Family, One Future".

Methodology of collecting feedback is outlined below:

All points of the feedback form were listed in the google form and sent to the 233 experts involved in the curriculum design and development process in the programme of SOHS. Only 50 Subject experts involved in all programmes filled the feedback form online and submitted. The feedback was automatically analysed by google and the interpretation in the form of report was prepared for the SOHS.



#### 4. Feedback of Subject Experts

Summary of the Feedback from Subject Experts are given below:

- I. A total 50 responses were received from the subject experts
- II. Majority of experts 64% were female
- III. More than 75% of the experts were from the age group more than 46 years
- IV. 40% experts having MD, 18% having MSc in Nursing and 14% having PhD, in Nursing as higher qualification. Highlighted below in Fig.1

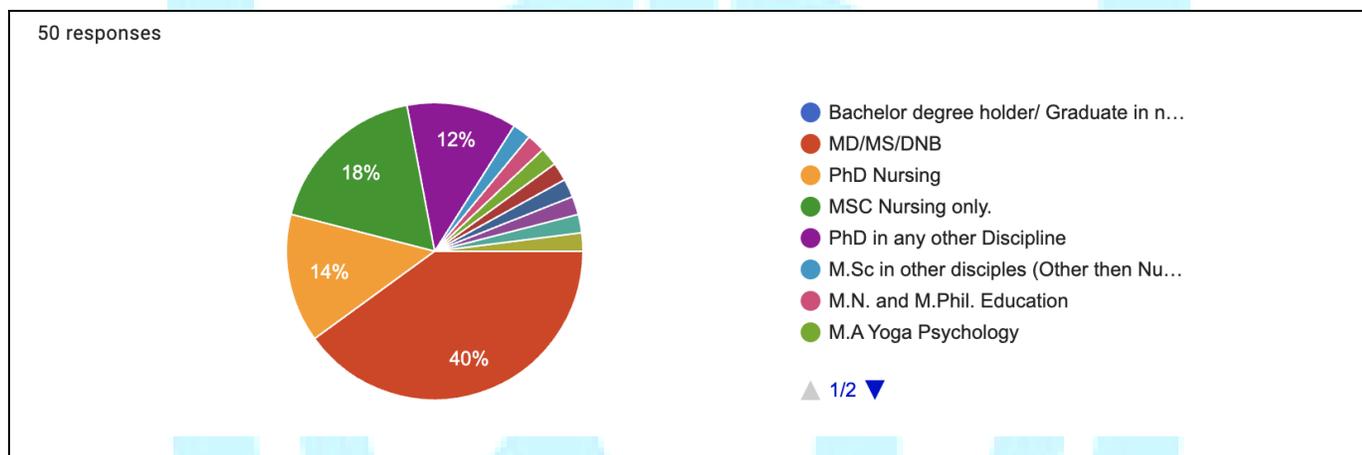


Fig: 1. Highest Qualification of Experts

- V. The experts associated with hospitals and teaching institute  
The information is listed in Table 1.

Table 1: Experts associated with hospitals and teaching institute

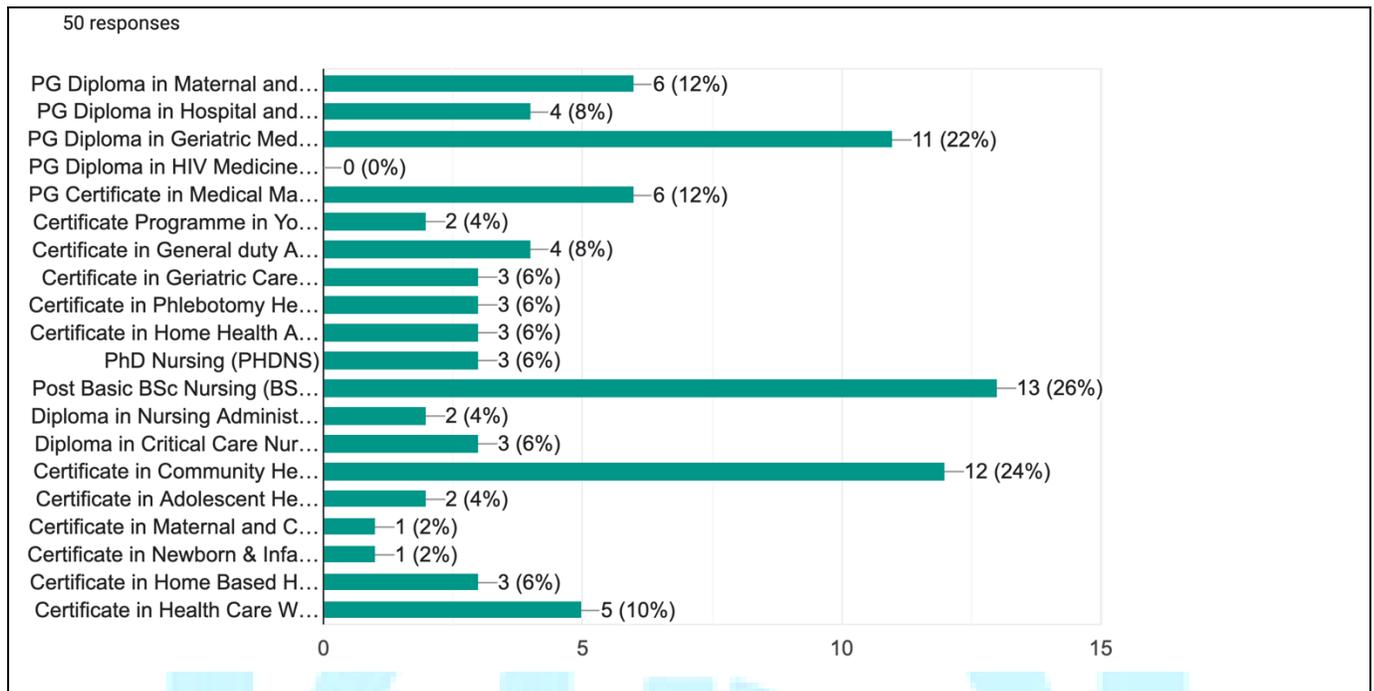
S. No	Name of the Institute
1	Amity University
2	AFMC PUNE
3	AIIMS Jodhpur
4	AIIMS New Delhi
5	BJ GMC Pune
6	Central Pollution Control Board
7	CMC College of Nursing BFUHS
8	College of Nursing Command Hospital Central Command, Lucknow
9	College of Nursing Dr RMLH Delhi India IPU
10	Department of Atomic Energy
11	Dr RML Hospital, New Delhi



12	Dr. Radhakrishnan Government Medical College Hamirpur (HP)
13	DRDE, GWALIOR
14	Formerly Jamia Hamdard, New Delhi and Sharda University Greater Noida
15	Government Nursing College
16	Govt. College of Nursing, Jaipur
17	Govt. College of Nursing, RMC, Kakinada
18	Govt. College of Nursing, Visakhapatnam
19	Govt. College of Nursing Dewas
20	Govt. College of Nursing, RMC, Kakinada affiliated with Dr.YSR University of Health Sciences, Vijayawada
21	Help Age India
22	ICAR-NIVEDI
23	Indian Council of Medical Research
24	INMAS DRDO
25	Institute of Liver and Biliary Sciences
26	Kasturba Gandhi Nursing College, Puducherry
27	KLE University
28	Kurji Holy Family Hospital, College of Nursing, Patna, Bihar.
29	LBS hospital
30	M.S. Ramaiah Medical College
31	Maharishi Markandeshwar Medical College and Hospital Kumarhatti, Solan
32	Maulana Azad Medical College, New Delhi
33	National Institute of Health and Family Welfare, Munirka, New Delhi 110067.
34	Nursing College, AIIMS BHOPAL
35	Pal College of Nursing & Medical Sciences/ Hemwati Nandan Bahuguna Uttarakhand Medical University
36	Ramaiah International Medical School
37	Ramaiah Medical College Bangalore
38	Rufaida College of Nursing, Jamia Hamdard (Deemed to be University) New Delhi-110062
39	S M S Medical College Jaipur
40	SAIHR as well as NHM, Odisha as Coordinator Maternal Health COE, SUMAN, SCBMCH
41	SBISR, New Delhi
42	Sri Padmavati Mahila Visvavidyalayam (Women's University)
43	St Stephen's Hospital, New Delhi
44	SVYASA Deemed to be University
45	Vardhman Mahavir Medical College & Safdarjung Hospital New Delhi
46	VK-AICYAM
47	VMMC & Safdarjung Hospital, New Delhi

## VI. The programmes with which the experts were associated with

Information is placed in Fig 2.



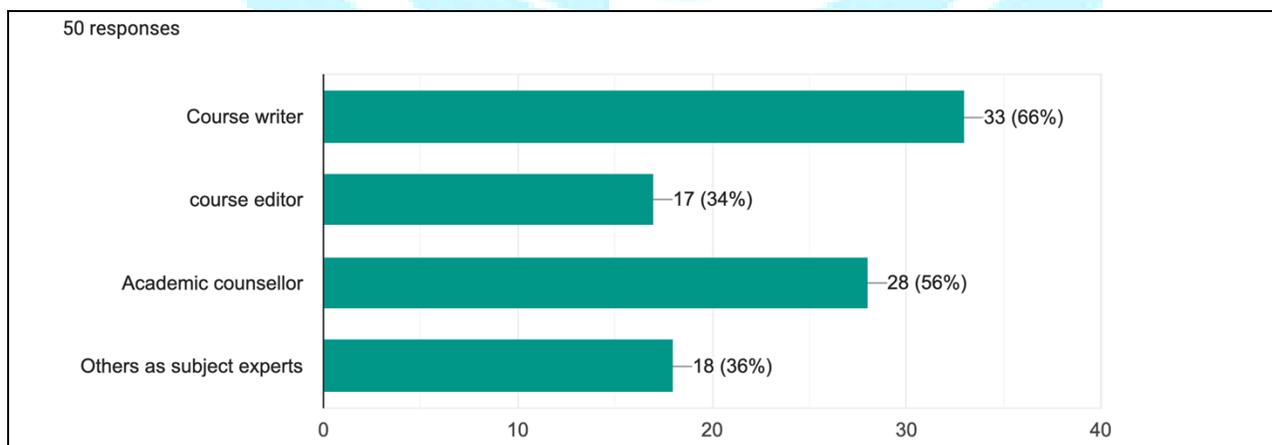
**Fig. 2. Programmes with which the experts were associated.** (Few experts were associated with more than one programme of IGNOU).

**VII. Number of years associated with IGNOU:**

Average duration associated with IGNOU was 10 years. 52% experts were associated with IGNOU less than 10 years. 42% of the experts were associated IGNOU more than 10 years.

**VIII. Type of involvement**

Information presented below (Fig 3) represents that 66% experts were involved as course writers, 56% as academic counsellors and 34% were associated as course editor.



**Fig 3: Type of involvement in IGNOU**



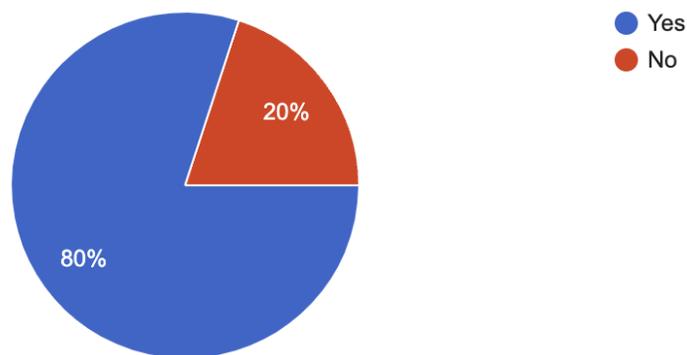
Feedback related to various themes was taken

### **Theme 1-Promotion of digital skills**

Statements wise Experts feedback was collected in relation to Theme 1-Promotion of digital skills on the following statements as: Yes /No

1. Does the programme have components to develop the desired digital skills and competencies in the learner?

50 responses



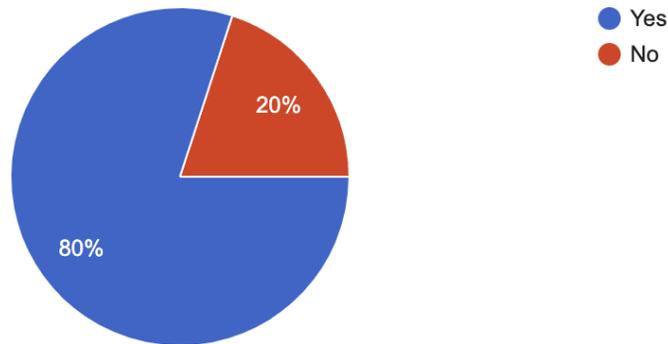
**Fig. 4: Opinion regarding Programme have components to develop the desired digital skills and competencies in the learner.**

For the statement -1 majority of experts (80%) agreed that the Programmes offered by SOHS have components to develop the desired digital skills and competencies in the learner. however (20%) disagreed with the statement that the programmes have components to develop the desired digital skills and competencies in the learner.



2. Are the existing MOOCs/ Open Educational Resources (OERs) integrated into the programme?

50 responses

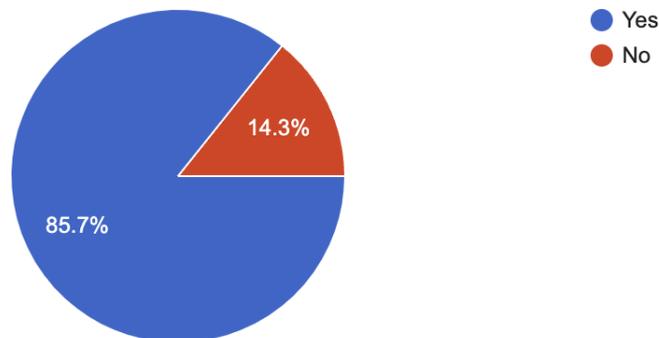


**Fig. 5 MOOCs/Open Educational Resources integrated into the programme**

For the statement regarding integration of MOOCs/ Open Educational into the programmes offered by SOHS, majority of experts (80%) agreed however (20%) disagreed with the statement that the existing MOOCs/ Open Educational Resources (OERs) integrated into the programme.

3. Does the programme have components of digital learner support like IRC, TC, Web counselling, use of social media, WEAS, online submission of assignments etc which promote the desired digital skill and competency in the learner?

49 responses



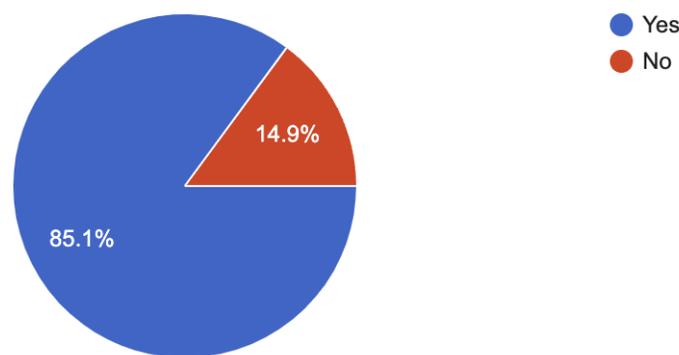
**Fig. 6 Programme Components have digital learner support**



For the statement regarding Programme Components have digital learner support, majority of experts (85.7 %) agreed, however (14.3%) disagreed with the statement that the programme have components of digital learner support like IRC, TC, Web counselling, use of social media, WEAS, online submission of assignments etc which promote the desired digital skills and competency in the learners

4. Do the digital initiatives of the University facilitate the learners in achieving the expected learning outcomes?

47 responses



**Fig. 7: Digital initiative of the university facilitating the learners in achieving the expected learning outcomes**

For the statement that Digital initiative of the university facilitating the learners in achieving the expected learning outcomes, majority of experts (85.1 %) agreed, however (14.9%) disagreed with the statement.

**5. Some of the suggestions expressed by experts for promoting digital skills to learners enrolled in the programme**

- More focus should be on E learning content
- Teach digital skills prior to course
- Short week-long workshops for hands-on experiences
- Practical classes in terms of visit to Health Care Facilities and Common Bio-medical Waste Treatment facility for the students would facilitate to
- Quality MOOCS
- I am happy with the existing digital skills promoted.
- Add Up new evidence based technology as nurses deal humans, sensitisation along with latest technologies will definitely help to upgrade the education standards.
- Have more webinars
- To give online assignments, give work to refer journals online and write assignments etc



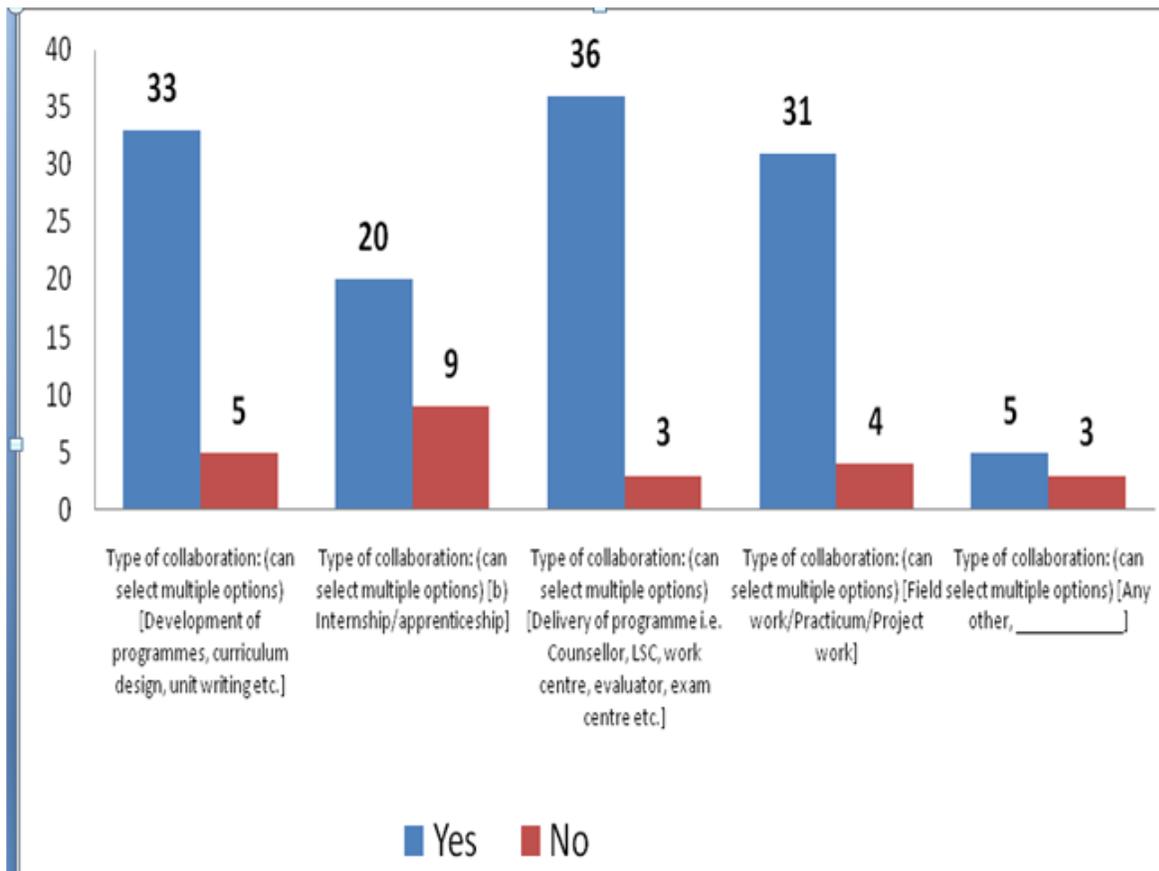
- One to one session for development & assessment of competencies. It will be more beneficial for the students
- Learners should be taught about the digital skills, interfaces before starting the actual scientific course material. They should be provided time to learn and become proficient in digital skills. Feedback about their ease for its usage should be sought.
- Students to improve their digital capabilities through ongoing contextualised digital literacy development activities, not as a separate topic or course but integrated into discipline learning.
- Learners should increase case presentation
- More online sessions
- Online classes through Zoom or other platform
- Students should be more engaged, encouraged to be more involved in online learning, workshops webinar etc
- Need a robust website with student-friendly modules and assessment system
- It should be more practical
- A video can be developed to orient students on the digital skills required such as filling online forms, attending classes online etc
- Enabling access to wifi and development of programme based app.
- Digital skill based counseling, regular innovations in training
- All parts of course theory to be digitised
- Online assignments, webinars, presenting webinars online
- More user friendly platforms
- If there are doubts in course material to have a chat based AI with authors to clarify at the earliest.
- Already using the digital platform fully during the course which should be continued in future
- M-Health can be included in the curriculum
- Teacher-learner interaction should be more frequent. Online weekly tests for students to ensure their study schedule
- Orientation to specific digital platform used to both faculty and students
- Availability of modules and study material in digital platform with evaluation process
- Relevant digital learning should be integrated in eth course contents
- Online practical sessions
- We can introduce computer literacy into the program
- Conduct some digital classes as well
- SWAYAM portal should be incorporated

## **Theme 2- Collaboration and partnership with industries and communities**



6. Statements wise Experts feedback was collected in relation to Theme 2 Collaboration and partnership with industries and communities on the following statements as: Yes/No

For the statement -6 majority of experts (82%) agreed however (18%) disagreed with the statement that programme involve collaboration in its development or delivery



**Figure No 8: Type of collaboration and partnership with industries and communities**

Number of experts agreed that programme involve collaboration in its development or delivery in following areas:

70% experts agreed that programme involve collaboration in Development of programmes, curriculum design, unit writing etc.

40% agreed that programme involve collaboration in Internship/apprenticeship

75% agreed that programme involve collaboration in Delivery of programme i.e. Counsellor, LSC, work centre, evaluator, exam centre etc.

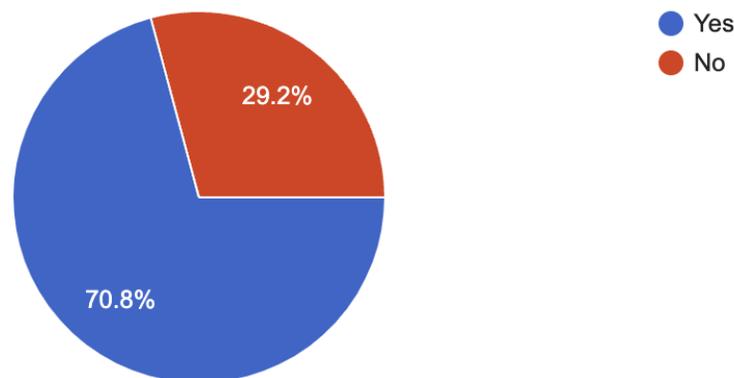
75% agreed that programme involve collaboration in Field work/Practicum/Project work



Any other – Few of the experts (6%) expressed that programme involve collaboration and Programme Incharge tailor make the programme to needs of learners. Collaborate with national Strategy, Technical collaboration for implementation, Hospital postings and lab work, Hospital visits and patient care along with community care in health activities

### 8. Does your programme entail learner's interaction/participation with industry/communities?

48 responses



**Fig. 9: Programme entail learner's interaction/participation with industry/communities**

For the statement that programme entail learner's interaction/participation with industry/communities majority of experts (70.8 %) agreed, however (29.2 %) disagreed with the statement.

Following are the list the activities expressed by the experts which entail learner's interaction/participation with industry/communities

- Interaction with Community for Assessment and other activities
- It involves hands-on skills in patient care in hospitals and preventive and promotive aspects of care in community.
- Virtual platform
- Counseling, promotion, health education
- Posted in DH, CHC, PHC, Subcentre, UHC
- Experience in PHC, UPHC & Sub center
- Interaction during Counselling Session
- Contact sessions in designated healthcare facilities.
- Got chance to use the hospital and lab facilities. Got chance to work with the community and impart knowledge and education



- Field visit
- Posting in the community for field visit.
- Lactating mothers adolescents to know their issues that change with times
- Participation in health care areas in community can do research also
- Patient care in wards and ICU
- Practical sessions with patients in hospital setting
- It is done while the students are taken for field studies and submitting reports and having group discussions. Writing their projects.
- Health education, home visit, field visit, home visit and exhibition, projects, etc
- Field visit, family study, case discussion, etc
- Visit to Hospital, Visit to CBWTF
- Family health services, school health programme and maternal & child health practices
- Field visit in institutions and departments
- Work closely with communities in Post graduate diploma in Geriatric Medicine and PGDMCH
- field visits, clinical visits, Field activities
- Field visits to communities
- The students come for 2 wks to our hospital for pt integration and real class
- Web Counseling
- Clinical Training
- Hospital interactions during clinical postings
- Activities designed to interact with the community stakeholders and target group
- posting at health and wellness centers
- Visit to Health sub-centre, PHCs, CHCs, district hospital, TB sanatorium, Leprosy hospital and Local self Government functionaries and NGOs

**10. Following are the suggestions given by experts to bridge the gap between HEIs and industry/communities:**

- Industries in health care and corporate hospitals should be approached for clinical training, support and placements.
- Have an academic counsellor in industries
- Planned interactions on a common theme; inter-disciplinary participatory projects
- In the form of visits
- By capacity building training programmes for all relevant stake holders.
- Impart soft skills training. Use the concept of Learning. Combine didactical approaches and existing concepts with emerging topics of the industry. Ensure smooth communication and coordination between academia and industry.
- More interaction
- Giving more assignments to do in the community settings. Arrange field visit in

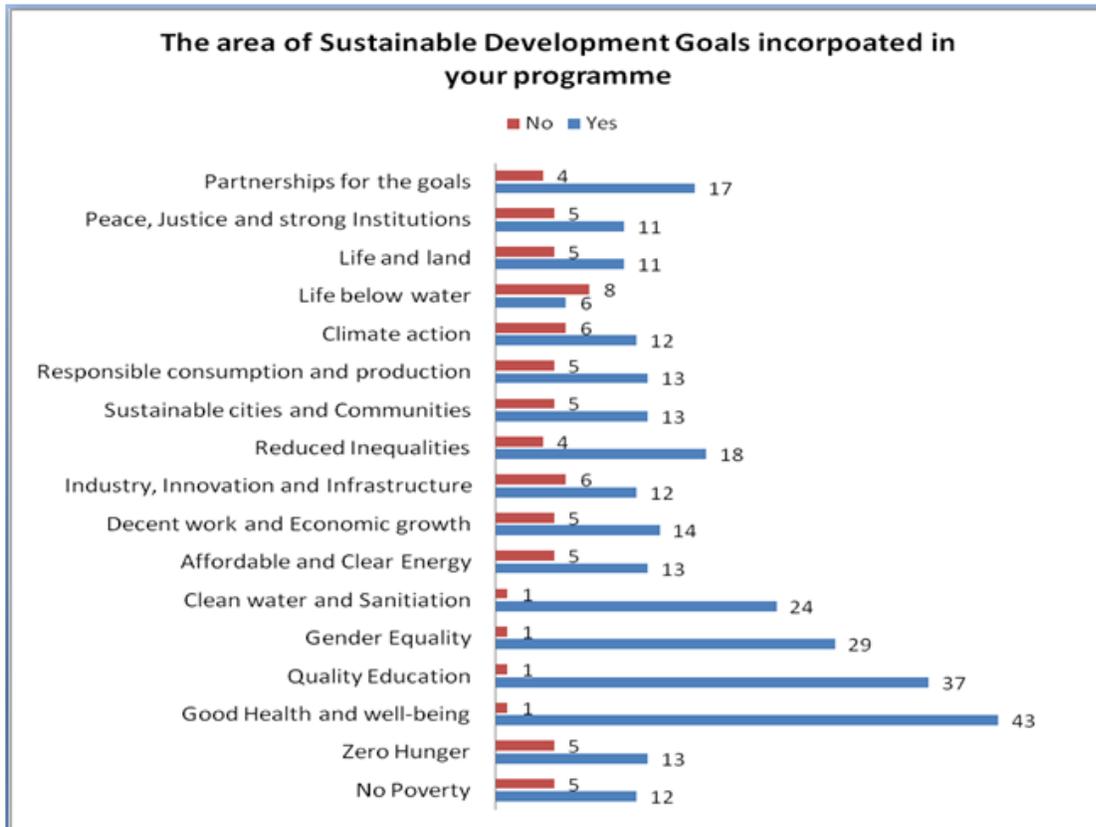


Community too visit health centres and submit report also industrial visit for occupational health awareness.

- Remove gap between demand and supply reach out to the communities and involve them in planning implementation and monitoring of the HEIs
- Can arrange some sessions in collaboration with community
- Online sessions webinars/ CME/workshops at regular intervals
- Some sort of internship program may be started by attaching the students to various hospitals and/or with the execution of national health programs done at district levels.
- Mentors training and appropriate remuneration
- Allocating additional amount for field visits and resource person.
- Students can be posted for one month internship in an organization or industry under guidance of faculty
- More placement tie ups with industry
- Communication with the stakeholders ie community and Industry
- Make a small community project mandatory
- more of field visits
- Field posting
- Theory linked to community practice
- Through introducing product oriented modules in the course and industry visits.
- By working at the gross root level in the community
- Increasing field work and practical assignments so that the interaction of learners and educators is more
- Clinical and community placements
- Activities should be included in the course that encourages students to interact with all stakeholders
- Awareness programmes for industry employers shall be organized
- We can make lectures of the books and introduce online interactive session with the students at the end of the course
- practical hours may be increased for more hands on skills training
- The visits and interaction with community is made more focused for learning

### **Theme 3: Contribution towards Sustainable Development Goals and Life (Life for Environment)**

Statements wise Experts feedback was collected in relation to Theme 3 Contribution towards Sustainable Development Goals and Life (Life for Environment) on the following statements as: Yes /No



**Fig. 10: Experts agreed for the above-mentioned areas of Sustainable Development Goals incorporated in Programme**

For the statement regarding incorporation of mentioned areas of Sustainable Development Goals in Programme most of the experts agreed for the statement (Fig 10)

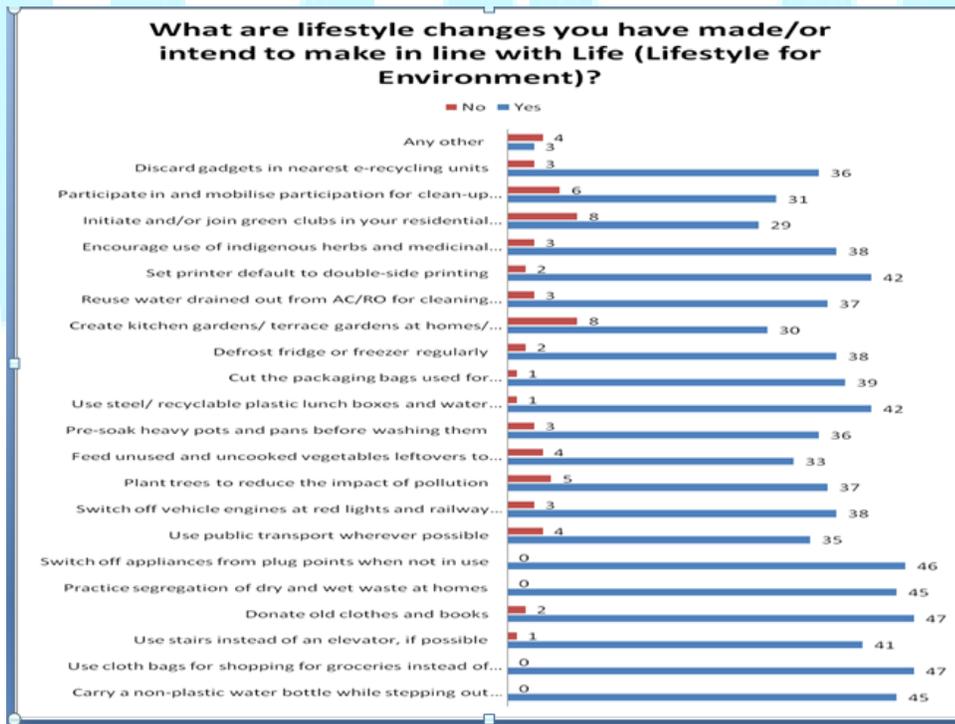
12. Following suggestions were given by experts to make the University Campus Clean and Green



- University is already clean and green
- Having a place for refilling a water bottle
- Special campaigns for students
- Plantation
- Solar panels may be installed, waste management may be improved in terms of reduce and reuse and recycle papers, plastics etc. Plastic use may be banned in campus.
- Plant trees during every programme culmination by individuals
- More trees & small gardens;
- Small zonal administration-monitoring-evaluation scheme;
- Periodic incentives (No money, written/oral appreciation in public)
- Plantation, n kitchen garden, clean surroundings
- Plant the plants
- Share the gifts with plants
- Waste management
- Plantation
- Adopt source segregation, safe storage and disposal in an environmentally sound manner
- Regular training and refresher training. b. Cultivating a culture of minimalistic use of non biodegradable items. c. Developing the horticulture department and planting more trees/greenery.
- Install Recycling and Composting Stations on Campus.
- Set Up an E-Waste Drive.
- Get Active with Bike Rentals services.
- Reduce Paper Waste.
- Use solar panel
- Grow more trees
- Proper waste management
- Adequate water supply and no plastic
- Plantation drives and installing more dustbin segregation of the waste at source
- To grow more plants in campus, cleanliness should be maintained in regular basis
- advance technology for sanitation can be used.
- Not applicable as I worked remotely
- Less paper use (more online use)
- More trees
- Less concrete construction on floor (more raw soil floor to absorb rain water)
- Involve all categories of human resources in the university with quality circle meetings
- Proper implementation of Tobacco Smoking and eating ban, Appropriate tree plantation, water harvesting system
- Tree plantation, clean and green programmes
- Bicycles should be available and encouraged (parking space for them near buildings, shared bicycles) within campus and vehicle use should be limited. I am myself using bicycle for transport to AIIMS Jodhpur campus and found its feasible and rewarding

for both environment and health.

- Involvement of Leadership, Involve Students, Regular Plantation drive and focus on green campus
- More green hours
- Regular Campaign
- Green Audit
- initiate poster-making competitions for a cleaner environment sensitizing the children of the residents regarding a clean and green environment slogan making competitions and weekly programs for employees working at IGNOU
- Vehicle free campus carbon emission monitoring, rainwater harvesting, creation of lakes plantation of cherry blossom trees to attract butterfly and birds, cross pollination
- Emphasize the need to act responsibly and not waste anything. Minimize use of harmful stuff
- Sapling plantation, no smoking and tobacco. Waste disposal .
- Plastic free, plating trees. rainwater harvesting , rain forests
- A water harvesting system may be introduced though the campus has a lot of greenery.
- Efforts for solar energy are there



**Fig. 11 : stated that most of the experts agreed the lifestyle changes made/or intend to make in line with Life.**

For the statements regarding lifestyle changes made/or intended to make in line with Life Style for Environment most of the experts agreed for the statements (Fig 11)