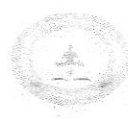


Feedback Implementation Committee(FIC)



Amala
INSTITUTE OF MEDICAL SCIENCES
NABH ACCREDITED ISO 9001:2015



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Introduction

The Feedback Implementation Committee of Amala Institute of Medical Sciences, functioning under the aegis of the IQAC, is constituted to ensure a structured and responsive approach to the collection, analysis, and implementation of feedback across academic and administrative domains. This aligns with our commitment to quality assurance and continuous improvement. This manual provides the Standard Operating Procedure (SOP) and supporting documentation for its operations.

Purpose

To promote continuous academic and administrative improvement through a structured feedback mechanism.

Objectives

To collect structured feedback from stakeholders (students, faculty, staff, alumni, employers, and parents).

To analyze feedback and identify actionable insights for academic and administrative improvement.

To initiate and monitor corrective measures based on the feedback received.

To recommend actionable steps to the respective departments or authorities.

To ensure and document the implementation of suggestions and reforms.

To review and evaluate the effectiveness of the actions taken.

To promote transparency and participatory governance within the institution.



Composition of the Committee

Feedback Implementation Committee		
Sl. No.	Name	Designation
1	Dr. Betsy Thomas	Chairperson
2	Dr. Deepti Ramakrishnan	IQAC Coordinator
3	Dr. Neeraja B.	FIC Convenor, IQAC Criterion head
4	Dr. Iswarya Babu	Faculty Representative
5	Dr Taniya George	Faculty Representative
6	Dr. Sruthy C. M.	Faculty Representative
7	Dr. Tinju James	Faculty Representative
8	Dr. Rakesh L John	Alumni Representative
9	Ms. Smitha Varghese V	HR Representative
10	Mr. Jithu Joy M	Social Service Coordinator
11	Mr. Sujith K Surendran	IT Support
12	Mr. Makhlouf Mathew Martin - (2022 batch)	Student Representative

Meeting Frequency

The Feedback Implementation Committee shall meet every six months.

Additional meetings may be convened as and when necessary, based on institutional requirements or urgent matters arising from stakeholder feedback.

Sources of Feedback

Students (Phase-wise)

Graduates (After Internship)

Faculty (Curriculum, Infrastructure, Institutional Support)

Alumni (Post-graduation Relevance, Institutional Experience)

Employers (Skill Relevance, Employability)

Employee

Parents (Support and Communication)

Patients and Community



Frequency of Feedback Collection

Sl. No.	Stakeholder	Frequency
1	Students	Every Phase
2	Faculty	Annually
3	Alumni	Annually
4	Employers	Annually
5	Employee	Annually
6	Parents	Annually
7	Social Extension Activity	For all activities
8	Canteen Feedback	Biannually
9	Annual Community Survey	Annually
10	Patients Feedback	For all Patients

Standard Operating Procedure (SOP)

Step 1: Designing Feedback Forms

Develop stakeholder-specific feedback forms (students, alumni, parents, employers, faculty).

Include both Likert scale and open-ended questions.

Align with curriculum, teaching-learning process, infrastructure, and governance aspects.

Step 2: Scheduling and Collection

Frequency: Depends on the type of feedback

Mode: Online (Google Forms//LMS/ERP) or Offline (printed forms).

Ensure anonymity and voluntary participation.

Step 3: Data Analysis

Compile responses



Generate visual summaries (charts/tables).

Identify areas needing attention.

Step 4: Feedback Reporting

Prepare a comprehensive Feedback Analysis Report.

Present findings to the Feedback implementation committee.

Step 5: Action Plan & Implementation

Develop a department-wise Action Taken Report (ATR).

Allocate responsibilities for implementation.

Review progress periodically.

Step 6: Documentation & Communication

Maintain:

Feedback Forms

Analysis Reports

ATRs

Meeting Minutes

Roles and Responsibilities

Chairperson

Approves final plans and reports.

Guides implementation across departments.

Convenor

Coordinates collection and analysis.

Schedules meetings and maintains records.

Members

Disseminate and collect feedback.

Assist in report generation and implementation.



Timeline of Feedback Process

Activity	Timeframe
Feedback Collection	Depends on the type of feedback (e.g., mid-semester, end-semester)
Data Analysis	Within 2 weeks of feedback collection
Feedback Report Preparation	By the 1st week of January and June
Action Taken Report (ATR) Preparation	Within 2 weeks after the feedback report
Implementation Review	Ongoing throughout the academic year

Quality Assurance

Feedback should be unbiased, fair, and used only for institutional improvement.

Maintain confidentiality of individual responses.

Regular audit of feedback processes by IQAC.

Review and Amendments

This SOP and Manual shall be reviewed annually by the IQAC.

Changes shall be approved by the Principal and updated in institutional records.

Contact Information

Name : Dr. Neeraja B.

Role : FIC Convenor, IQAC Criterion head

Contact No : 9497340946


Mail ID : fic.iqac@amalaims.org



Annexures

Annexure 1: Feedback Template Forms

1. Student Feedback on Faculty





PHASEWISE FEED BACK FORM

Academic Year :

Name : _____

Batch : _____

1. Always well prepared for the class	YES / NO
2. Could successfully relate the subject to real life	YES / NO
3. Encouraged me to think in depth about the subject	YES / NO
4. Encouraged class participation	YES / NO
5. Carried out continuous assessment	YES / NO
6. Gave enough assignment/cases	YES / NO
7. Provided timely feedback on assignments	YES / NO
8. Have good communication skills and explanation power	YES / NO
9. Could deliver lecture with confidence, poise and authority	YES / NO
10. Was available for discussion / problem solving outside class room	YES / NO

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2. Faculty Feedback on Curriculum



FEED BACK FROM FACULTY REGARDING CURRICULUM

Dear Faculty,

As part of our continuous quality improvement process in medical education, we value the insights and suggestions of our faculty members regarding the current curriculum. Faculty feedback plays a vital role in evaluating the relevance, effectiveness, and applicability of the curriculum in achieving desired learning outcomes.

Your responses will help in identifying gaps, improving instructional design, and ensuring that the curriculum remains dynamic, student-centered, and aligned with national standards and institutional goals. We appreciate your time and constructive input in strengthening the academic framework at AIMS, Thrissur.

Thanks and Regards,

Dr. Bero Thomas, Principal & Chairman of IQAC

Dr. Deepthi Ramakrishnan, Vice Principal & IQAC Co-Ordinator

* Indicates required question

1. Name of the Faculty *

2. Designation *

Dropdown

Mark only one oval

Professor and Head

Professor

Associate Professor

Assistant Professor

Tutor

3. Department *

Feedback on Curriculum



4. Are the curriculum objectives aligned with national health priorities and CBME guidelines? *

Mark only one oval.

- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

5. Are innovative teaching strategies (e.g., small groups, SDL, simulations) effectively used in your department? *

Mark only one oval.

- Always
- Often
- Sometimes
- Rarely
- Never

6. Is horizontal and vertical integration across subjects implemented effectively? *

Mark only one oval.

- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

7. Is Early Clinical Exposure (ECE) meaningful and implemented as per CBME standards? *

Mark only one oval.

- Very Effective
- Effective
- Neutral
- Ineffective
- Not Implemented



8. Are internal assessments aligned with the competencies and mapped to learning outcomes? *

Mark only one oval.

- Fully Aligned
- Partially Aligned
- Not Aligned
- Not sure
- Not Applicable

9. Does the institution encourage faculty and student research and provide necessary support? *

Mark only one oval.

- Strongly Encouraged
- Encouraged
- Neutral
- Not Encouraged
- No Support

10. Are regular training programs/workshops (CME, MET, AETCOM) available for faculty? *

Mark only one oval.

- Yes, regularly
- Occasionally
- Rarely
- Never
- Not informed

11. Is faculty performance evaluated through structured appraisals and student feedback? *

Mark only one oval.

- Always
- Often
- Sometime
- Rarely
- Never



12. Are infrastructure and teaching resources (labs, IT, skills lab, library) adequate to deliver the curriculum?

Mark only one oval.

Excellent

Good

Average

Poor

Very Poor

13. Please share any suggestions or comments for improving teaching, learning, or academic processes:

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Google Forms





Student Satisfaction Survey

(Through Moodle)

Alumni Feedback Form : **TO BE ADDED**

Employer Feedback Form :Ajeena

Parent Feedback Form

Graduate Satisfaction Survey

Canteen Feedback Form - Quality

Social Extension Activity - Public Feedback Form (സാമൂഹിക
വിപുലീകരണ പ്രവർത്തനം - പൊതു പ്രതികരണ ഫോറം)

Annual Community Feedback Form

Employee Feednack (one amala and faculty feedback)

Patients Feedback - Quality

Betsy

Dr. BETSY THOMAS
MD, FRCOG, DNB, MICOG
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