

## **Best Practices:**

### **First Best Practice**

#### **1. Title of the practice: Internationalization – The engine of Globalization**

#### **2. Objectives:**

The objectives of the best practice in internationalization and globalization initiative of the university in health sciences are:

- a) To increase the international presence of the University leading to a global University
- b) To develop a new model of institution where students and faculty earn degrees from various international locales through global partnerships and satellite campuses thereby becoming a non-traditional institution in the sense that we have no geographical borders
- c) To foster collaborations in research with international research universities to augment the research activity in the university
- d) To develop collaborative science and scholarship
- e) To augment interdisciplinary approach for advancement of learning, teaching and research activities among and between the constituent colleges of the university
- f) To develop a concept to commercialization process in development of new medicines
- g) To give the benefit of advanced medical research knowledge and outcomes for patient care, particularly where no alternate approaches are available

**3. The Context:** Development of an international market for college level research and teaching has stimulated a sharp increase in university entrepreneurialism. Increased availability of knowledge creates competition among higher education institutions to keep up with the growth in specialized knowledge and control a market share in its development and distribution. Institutional status depends on being able to contribute to acquisition and dissemination of knowledge at its frontiers. To remain competitive, higher education institutions require increasingly substantial fiscal resources, financial support, requires establishing and maintaining a reputation for academic excellence. This reputation, in turn, is enhanced by pursuing the very best student and faculty talents even if it means investing heavily in recruiting across national borders.

4. **The Practice:** The university considering that internationalization and globalization would be an important facet for its Vision and Mission in providing quality education to the students has taken several steps to strengthen its outreach initiatives with appropriate global policy, research collaborations and hiring and training of human resource in an appropriate manner.

For the said purpose, the university had initiated following steps:

- i. Appointed a Dean with sufficient international experience for Global initiatives to provide leadership and overlook international collaborations and rankings.
- ii. Organize Indo-US conference every two years inviting eminent scientists with medical background to provide impetus to research
- iii. Entered with Memorandum of Understanding (MoU) with prominent universities outside India reaching from far east to the far west.
- iv. The RCC also Co-ordinates with institutional research co-ordinator and promotes collaboration between health industry and the university and its constituent colleges through a structured process,
- v. Timely publication of university research journal, "International Journal of Health and Allied Sciences" (available at [www.ijhas.in](http://www.ijhas.in)), which is an indexed journal published by Medknow Publications and Media Limited, which is a part of Wolter Kluwers Health and listed in the NLM Catalogue
- vi. Conduct of inter-disciplinary seminars, workshops and symposia with national and international experts and pioneers in health sciences research.
- vii. Identify established areas of research strength and strengthen available resources in those areas of research and doctoral study
- viii. Identify nationally/internationally faculty who can augment research and encourage them to join the university.
- ix. Develop the identified strengths mentioned above into potential nationally and internationally recognized centres of excellence.
- x. Achieve national/international recognition through publication of research articles in scientific journals, presentations in national and international scientific meetings and competing for national and international highly acclaimed awards.

5. **Evidence of Success:** The impact of research and consultancy advocacy within the university and outside the university is seen in terms of:
- i. Indo-US conferences – The University has successfully conducted two major Indo-US conferences with MoU's signed with prestigious Universities of the USA such as Penn State Hershey School of Medicine and Johns Hopkins Bloomberg School of Public Health
  - ii. MoU with prominent universities with student and faculty exchange. Currently JSS University has MoU with La Trobe University, Australia, AIIMS University, Malaysia, Khon Kaen University, Thailand, Maastrich University, Netherlands, Mayo Clinic, USA, Penn State Hershey School of Medicine, USA and Johns Hopkins School of Public Health, USA to name a few.
  - iii. Student and Faculty Exchange – Few faculty have been appointed as visiting faculty in partnering universities abroad and there has been student exchange programs also with students of La Trobe University, Australia visiting JSS University institutions.
  - iv. Joint proposals submitted to funding agencies with large number of Principal Investigator (PI) driven research projects supported by national funding agencies such as Department of Science & Technology, (DST) Department of Bio-Technology, (DBT) Defence Research & Development Organization (DRDO), UGC, ICMR, AICTE etc., to the tune of nearly Rs.13 crores in the last four years.
  - v. Nearly, 40% year on year on year increase in the research publications in various national and international peer reviewed journals and similarly an increase by 50% of the number of publications in high impact factor journals.
  - vi. The conduct of industry driven research in the form of consultancy from the concept of commercialization; from product development to clinical trials; and from drug discovery to development and delivery has resulted in increase in the consultancy services in the last four years to the tune of nearly Rs. 4 crores.
  - vii. The number of research scholars who had registered with the university for pursuing research leading to the award of Ph.D from health sciences graduates has enhanced substantially and visible through 137 scholars in various disciplines, including medicine and dentistry who have registered for the Ph.D program.
  - viii. Establishment of Centre of Excellence in Molecular Biology and Regenerative Medicine supported by Karnataka Vision Group of Science & Technology (VGST) and Department of Science & Technology and establishment of Centre of Excellence

in Clinical Research and Trials supported by Clinical Development Services Agency of Department of Biotechnology, Government of India, New Delhi.

- ix. Highly recognised International and national research organizations and institutions willing to partner in research programmes in emerging areas.

**6. Problems encountered and Resources Required:** Lack of enthusiasm and shortage of manpower in clinical specialties was always a major constraint. Lack of enthusiasm was overcome by organizing training and orientation programmes with the faculty where approaches to research were simplified and assurances made to provide necessary technical and infra structural support to facilitate research. Also visits to International Universities by few faculty and understanding the process of learning and research gave a proper direction in the way things can be organized. Besides, the university policy to hire at least 10% of additional faculty in each of the department beyond the statutory requirement for the purpose of nurturing research reduced the resistance among the faculty from clinical specialties and got them involved in research activities. The other constraint that affected the initiative was the financial resources and the same was overcome by writing support grants to various funding agencies and also by making the provision of the Research Development Fund at the university.

## **Second Best Practice:**

### **1. Title of the practice: Innovation in Teaching Learning Methodology – Community outreach and its impact**

**2. Objectives:** Innovation in education in health sciences courses is to achieve the following objectives:

- i. To simulate community approach in health sciences education leading to the better understanding of health associated problems at the community level
- ii. Making students as partners in community based programs
- iii. To understand community problems and thereby developing and implementing programs to encounter the health issues of the community
- iv. To enhance the outreach of Government initiative and also partner with private organizations in the upliftment of the community

**3. The Context:** The individual and the community are two different facets in health care delivery systems. The individual approach has by far reach a state of excellence with state of art hospitals providing quality health care but the outreach to the community has yet to achieve great milestones. As a health sciences university, JSS envisages to have a strong presence not only as a health care provider for individual but have a strong presence as community health care promoter. Taking health care initiative to the community has many challenging and requires a constant and continuous drive to overcome the barriers to health care in the community at large

**4. The Practice:** The constituent colleges of the university consisting of JSS Medical College, JSS Dental College and Hospital, JSS College of Pharmacy in Mysore and Ootacamund have designed community based programs based on the institutional strength and available resources. Each constituent college designs and implements its own novel community based programs partnering with the students of the college. The practices being followed are:

#### **I. Model Health Village Project**

- a) Model Health Village Programme Suttur (MHVPS) – The JSS institutions have adopted a village named Suttur situated in the Nanjangud Taluk of Mysore District and the programme has been named as MHVPS.
- b) A complete survey of the 5000 people of the village along with creation of complete database of name, occupation, household details, ailments and other

information has been created for each individual. A card has been issued to each family wherein on swiping the card all details regarding the family can be accessed.

- c) The JSS Medical College & Hospital not only provides free healthcare to the entire village but also conducts health awareness programmes, studies the pattern of the diseases occurring in the village and provides necessary promotional activities.
- d) The JSS University has also established a peripheral hospital at Suttur to create a health care facility and provide secondary health care facilities at a primary health care centre.

## **II. SMARAN Project**

Dr Somashekhar and Malati Munavalli Health and Wellness foundation sponsored health education project (SMARAN project) is being implemented through, JSS Medical College & Hospital in northern districts of Karnataka. The objective of this project is to create awareness among villagers through the following activities:

- a) To conduct and organize lectures, demonstrations and clinical screening on various health related problems such as heart diseases, diabetes, cancer, blood related problem etc. by professionals and qualified experts
  - b) To prepare brochures and bulletins and other useful audio-visual aids on various diseases in simple language for free distribution among general public in large.
  - c) To create audio-visual aids for demonstration and exhibitions as often as necessary and needed to educate ordinary people.
- a) The project has been initiated with a spirit of providing comprehensive health education to villagers through health camp approach. In this regard first attempt was made in December 2012 by organizing a health education and health check-up camp in a village at Belgaum district.
  - b) In 2013 and 2014 the project was implemented in 5 backward villages of Dharwad district
  - c) In 2014-15 the project is under implementation at Vijayapura (Bijapur) District with the thrust areas on hypertension, diabetes, anemia, mother and child care.

## **National Service Scheme (NSS)**

The NSS units of the constituent colleges have been actively involved in the community outreach activities with the involvement of student NSS volunteers. Each constituent unit of NSS has adopted a village for a period of 3 years wherein periodic surveys, free health

camps, health awareness campaigns are organized along with catering to social and professional needs of villagers. The NSS units have been phenomenal in bringing about a change in the perception of health among villagers

## 5. **Evidence of Success:**

### **MHVPS**

The University has been successful in creating a database of 5000 individuals with geospatial mapping of the ailments in the village of Suttur in Nanjangud taluk of Mysore District. The University has over a period of 5 years significantly added to the health indicators of this particular village namely: the literacy rate, maternal mortality rate, infant mortality rate, death rate per 1000 population and many more indices. The health care providers have undertaken extensive environmental and sanitation surveys through which breeding centres of mosquitoes have been removed. There has been identification of lack of toilets at houses and toilets constructed in coordination the local gram panchayat.

### **SMARAN Project**

After the implementation of the project, there was significant improvement on knowledge of hypertension, diabetes, anemia and breast feeding and immunisation in the project villages. Involvement of community level link workers has found to be effective in delivering health related information to the community. Health education along with service provision in the areas of diabetic retinopathy has motivated the patients visiting local health facilities. Innovative intervention measures like moon light dinner and pregnant mother honouring programmes have attracted community members for attending health education sessions. Totally 3500 individuals staying in 5 villages received health education through 5 community link workers over a period of 15 months.

### **NSS Initiatives**

The NSS through its village adoption schemes has not only oriented the health care students to understanding the problems in the community but also made them understand the difficulties in design, development and implementation of community outreach activities. Understanding the local needs forms the basis of developing any community based initiative. The NSS has partnered with many local bodies to cater to the needs of the community at large and has successfully garnered resources and mobilized it for the benefit of the community mainly in the field of healthcare.

**6. Problems encountered and Resources Required:**

- a. Identification of Local NGO's and administrative agencies
- b. Identification and training of link workers at village level
- c. Conducting health education sessions at the time when the people in the village are available
- d. Mobilisation of resources from Mysore to Project districts
- e. Local stay and food at villages

These problems have been overcome by the involvement of local people, partnering with NGO's and avail resources within the village. Funding through public-private partnerships has helped overcome the financial needs to support the community projects.