RAJAS DENTAL COLLEGE AND HOSPITAL KAVALKINARU JUNCTION

RESOURCE MOBILISATION POLICY

The cardinal principle of management of the institution is to provide best resources to the students and faculty to run the institution for realizing its vision and mission. This document draws the policies for resource mobilization. Accordingly, the budget estimates and funds requirements are made and mobilization of resources is planned.

The institution is a self-financed organization in which the major financial resource is the student's fees coming from courses offered by the institute. The institution makes all efforts to secure additional funding such as it collects fee from outsiders to attend Seminars and Workshops organized at the institute and receives sponsorship for the events. However, the funds so received are mainly utilized to offset the deficiency arising due to offering subsidized treatment to patients in order to treat maximum number of patients as it helps to our students to treat different type of patients, to offset the deficiency arising due to organizing camps at different villages nearby the college and to offset the cost arising due to offering free treatment to poor patients on case to case basis.

The following procedure is adopted for utilization of resources:

- 1. <u>Planning</u>: Governing council of the college calls a meeting to finalize the annual budget.
- 2. <u>Budget Formulation</u>: Administrative office in consultation with the Principal prepares consolidated budget of the institution and then forwards it to the Governing Council for its final approval.
- 3. <u>Allocation</u>: The governing council reviews the proposed budget and then allocates the budget as per necessity of proposed expenses. If there is no incongruity, then the budget is sanctioned and funds are released.
- 4. Expenses : Funds are utilized for the development of laboratories, procurement of books, journals, staff salary, development and maintenance activities. In case any additional funds are required for unplanned activities like attending seminars / workshops / conferences / technical competitions, then the concerned faculty has to prepare a note stating the details of the importance with supporting documents. The concerned person is instructed to produce a detailed report for the utilization of funds. Thereafter, the note is forwarded to principal through HOD for the consideration and approval by the principal. Looking to the importance of the requirement, principal forwards the note to the governing council for its final approval.
- 5. <u>Audit</u>: The internal audit team of the college verifies the expenses carried out under various institutional / departmental activities from supporting documents and give their remarks for the final settlement of the account. Internal and external audits are carried out by the Chartered Accountant at regular intervals to ensure a proper utilization of the funds as per their allocation.

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Results Framework Document (RFD)

OMFS

The RF provides a summary of the most important results that a specific teaching program or curriculum initiative expects to achieve during a defined period of time, typically in anacademic year.

The RF serves two main purposes:

- To aid in helping the Faculty and Institution progress from processorientation to result-orientation
- Provide an objective and fair basis to evaluate programs overall performance at the end of the defined period

This Results Framework Document should have a stated vision, with definite Vision, Mission Objectives and Function that lead to an outcome

Vision:To provide quality dental education, incorporating new knowledge,innovation with state of the art technological developments in each speciality, to provide quality dental health care services locally at global standards

Mission: Regular and consistent updation of Restorative, Surgical, & Preventive treatment care and Education with an emphasis on research related to basic health needs

Delivery of Tertiary dental operatory and surgical care services in tandem with the Social Welfare Schemes of the Government, providing dental health for all with community participation

Objective: To provide quality Dental Education facilities with a vibrant Centre of Research and provision of integrated Quality Health Care Services with equity.

Functions: Planning and Execution of quality education CDE programmes at State, National and International level, to promote planning and execution of research work, direct and supervise designing new facilities and maintenance of existing infrastructure, procurement of equipment and instruments in tandem with constant updation of treatmentfacilities, increase public awarenessof the Institutions treatment facilities and modalities and implementation of policy



Specific Performance Requirements from Oral and Maxillofacial surgery

S.n o	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
			Equipment		
1	Comprehensiv e dental care	Air compressor connection to dental chairs in PG clinic	To provide faster diagnosis and surgical treatment to the patients	7	Diagnosis and surgical treatment become time-consuming
2	Comprehensiv e dental care	Water connection todental chairs in PG clinic	To provide faster diagnosis and surgical treatment to the patients	7	Diagnosis and surgical treatment become time- consuming
3	Comprehensiv e dental care	Suction connection to dental chairs in PG clinic	To provide faster diagnosis and surgical treatment to the patients	5	Diagnosis and surgical treatment become time- consuming
4	Comprehensiv e dental care	Drainage connection to dental chairs in PG clinic	To provide faster diagnosis and surgical treatment to the patients	1	Diagnosis and surgical treatment become time- consuming
5	Comprehensiv e dental care	Spittoon connection to dental chairs in PG clinic	To provide faster diagnosis and surgical treatment to the patients	3	Diagnosis and surgical treatment become time- consuming
6	Comprehensiv e dental care	Full fledged dental chair with micromoto r connection in UG clinic	To provide emergency surgical treatment to the patients	1	Surgical treatment becomes time- consuming
7	Minimally invasive dentistry	Soft tissue laser	To providesurgical treatment to patients with minimal pain and bleeding	1	Patient has to suffer from postoperative sequalae of conventional surgery
3	Digital	Intraoral	To make the patient aware of	1	Patient may ignore

	dentistry	camera	his problems and thus the need for treatment		his problem and thus suffer from its sequalae later
9	Comprehensiv e dental care	Portable X- ray machine + RVG sensor	To make emergency radiographs during surgery	1	Surgical treatment becomes time- consuming
			Infrastructure		
1	Comprehensiv e dental care	Bring UG and PG clinic next to each other	Better administration and management of students and patients	-	Need for more personnel in the department Patient not comfortable

Linkage between outcome / impact and financial inputs and number of indicators

Sl.No.	Outcome/ Impact identified in Section	Relative importanc e (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes in Column 4	Total number of indicators focused on each outcome	Total weight of all indicators in Column 6 (out of 100)
			Equipmen	t		
1	Full fledged dental chair in PG and UG clinic	100%	-	200000	-	-
2	Soft tissue laser	70%	-	300000	-	-
3	Intraoral camera	70%	-	50000	-	-
4	Portable X-ray machine + RVG sensor	90%	-	200000	-	-
]	Infrastructu	re		•
1	Bring UG and PG clinic next to each other	90%	-	1000000	-	-





Description / Definition of outcome / Impact and how each of them will be measured?

Who will measure them and when?

Sl. No.	Outcome/	Impact	Weight		Reasons (if it is not measureable)	Total Allocated Budget
			Who	When		Duager
			Equi	pment		
1	Full fledged dental chair in PG and UG clinic	100%			Diagnosis and surgical treatment become time-consuming	200000
2	Soft tissue laser	70%	,		Patient has to suffer from postoperative sequalae of conventional surgery	300000
3	Intraoral camera	70%			Patient may ignore his problem and thus suffer from its sequalae later	50000
4	Portable X- ray machine + RVG sensor	90%			Surgical treatment becomes time- consuming	200000
			Infrast	ructure		
1	Bring UG and PG clinic next to each other	90%			Need for more personnel in the department Patient not comfortable	1000000





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BRANCH VI - ORAL & MAXILOFACIAL PATHOLOGY AND ORAL MICROBIOLOGY

Specific Performance Requirements from other Departments

Departments	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
Oral medicine	Increase in cytology and biopsy cases CBCT	Referral to oral pathology Data of older case to evaluate	Motivate for diagnostic importance Age and sex determinati	WEEKLY Cytology -10 Biopsy -8 Once in 6 months	Students will not be benefitted Forensic odontology library – lack of data
Oral surgery	Increase in biopsy cases	Referral to oral pathology	motivate for diagnostic importance	WEEKLY biopsy -8	Students will not be benefitted
Tobacco cessation clinic	Awareness of illeffect of tobacco	Referral to oral pathology	Stop addiction to tobacco	DAILY Cases -2	Lack Of Biopsy cases
Public health	Oncology cases	Oral cancer screening camp.	Early detection of malignancy	Quarterly -1 camp	Population based case awareness studies
Central research lab	Studies in CRL and external funding	PCR and molecular diagnostic hands on course	Updating in recent diagnostic techniques and nodal centre for research	Yearly one session	Sticks on to only traditional ways and lack of academic progression

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<u>Linkage between outcome / impact and financial inputs and number of indicators</u>

Sl.No.	Outcome/ Impact identified in Section	Relative importanc e (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes in Column 4	Total number of indicators focused on each outcome	Total weight of all indicators in Column 6 /100
1	2	3	4	5	6	7
1.	Biopsy tissue archival	90%	3	Usage of existing resources	Cases study material	90
2.	Forensic library	60%	1	usage of existing resources	Establishmen t of forensic odontology department	60
3.	Epidemiologi cal data	100%	4	50,000/-	Research paper	100

• <u>Description / Definition of outcome / Impact and how each of them will be measured? Who will measure them and when?</u>

Sl. No.	Outcome/	Impa ct/10	Wei	ght	Reasons (If it is not measurable)	Total Allocated Budget
			Who	When		
1	2	3	4	5	6	7
1.	Cases Study material	9	Examiner	yearly		-
2.	Establishment of forensic department	7	Audit	yearly		-
3.	Research paper	10	Publication	yearly		100000/-

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Infrastructure

- Department renovation [Entrance elevation, Painting]
- Renovation of seminar hall & Post graduates' room.
- Staff cupboards with lockers.

Equipment

We are in need of the following:

- UG Microscopes- 30
- Image analyser software updated version
- Hard tissue microtome
- Digital pathology
- Gel electrophoresis

Academics

- Increase in post graduate seat (1 seat)
- Nissan like models dental developmental set
- Forensic odontology course
- Academic tie up with liver pool head and neck pathology -guide Dr .Keith Hunter ,professor of Head and neck pathology



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BRANCH VII - ORAL MEDICINE & RADIOLOGY

Specific Performance Requirements from other Departments

Departments	Releva	ntWhat do you	Why do you	How much	What
	Success indicators	need	need	you need	happens if you do not get it
Oral pathology	Cytology reports Biopsy reports from the specimen provided	Histo- pathological assessments Investigatory reports '	Better management of the patient and referral	WEEKLY Biopsy-2 Cytology-5	Effective managemen t of patients will be hampered
Oral surgery	Complex biopsy cases Management of Cystic and Malignant lesions aiding in final diagnosis	Report of the biopsies helps in final diagnosis	motivate for diagnostic importance	WEEKLY biopsy –2-5	Patients and students will not be benefitted
Tobacco cessation clinic	Making the patient aware of the harmful effects of tobacco	Community outreach and increase in patients	Stop addiction to tobacco	DAILY Cases -5	Decrease in cessation awareness
Public health	Oncology camps conducted along with Public health	Camp	early detection of malignancy	Quarterly - 1 camp	Post graduation case dearth
Implantology	Referral of patients for CBCT	CBCT scans	Treatment planning and assessment	WEEKLY CBCT – 5	Lacunae in the treatment

Sl. No.	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
		Equipme	nt		
1	New OPG Machine	Sensor quality is decreased	Image clarity for better	1	Lagging in accurate diagnosis

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2	Vistascan – PSP	Digital imaging	resolution Quick and digital imaging	1	Lagging in time and accurate diagnosis
3.	SOFT TISSUE LASER	Soft tissue laser	Biopsy for mucosal lesions	1	Lagging in postoperative healing phase
		Infrastructure/A	cademics		
1	Upgradation of existing Radiology section	Entire radiology section renovation			Lagging in infrastructur e
2	Room facility for third/ final year/ intern	Seating area for undergraduates			Department is cramped

What do you need	Why do you need	What happens if you do not get it
Expansion of Department for UG and separate seating area for undergraduates (iii, iv yr and interns)	Lack of space in U.G Department	Entire department is cramped with all patients, auxiliary staff, undergraduates, post graduates and staff members
and interns)		without any delineation

<u>Linkage between outcome / impact and financial inputs and number of indicators</u>

Sl.No.	Outcome/ Impact identified in Section	Relative importanc e (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for the scheme	Total number of indicators focused on each outcome	Total weight of all indicators
			Equipment			
1	OPG MACHINE	100%	nil	Rs.15,00,0 00	-	-
2	VISTASCAN - PSP	80%	-	Rs.1.75,00	-	-
3.	SOFT TISSUE LASER	70%		Rs. 2,00,000		

Infrastructure/Academics



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1	Upgradation of U.G Radiology	100%	1	-	-
2	Room facility for undergraduate	100%	-	-	-

Infrastructure

- Proposed new radiology building to be constructed. Plan has been approved already by Chairman.

Equipment

- It's more than a decade our OPG machine has been running successfully, the sensor of the machine is slowly getting worn out. Depending on the wear and tear of the sensor, we may need to replace it as in when necessary.

Academics

- Increase in post graduate seat (1 seat)

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BRANCH II - CONSERVATIVE DENTISTRY& ENDODONTICS

Specific Performance Requirements from Conservative dentistry and Endodontics

Sl. No.	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
		Equipmen	t		-
1	Digital dentistry	Intraoral Scanner	Digital innovation	1	Lagging in advanced technology
2	Esthetic dentistry	Digital smile designing soft ware Photography room	Digital Innovation For	I	Lagging in advanced technology
		1	documentation	1	Better outcome of esthetic procedures
3	Laser Clinic	Soft tissue laser	For crown lengthening, Root canal disinfection and Bleaching procedures	1	Students will not be benefitted Betterment of patient care.
4	Dental Chairs	Electrical Chairs	In UG Section	15	DCI requirement For
		Dicerioal Chans	In od section	13	betterment of patient care and comfort
5	Advanced restorative options	Chair side CAD- CAM	Crown delivered promptly	1	Patient waiting can be reduced
6	Air Compressor	Powerful Compressor	Pressure can be maintained and suction can be used simultaneously	1	Patient working time can be reduced
7	Autoclave	B Class autoclave	For enhanced sterilization protocol	2 (UG 1, PG 1)	For better sterilization Protocol

ı	8	Advanced) M:	I P 1 "		l					
	o	microscope setup	Microscope	For better management of	1	For betterment of					
				complicated		patient care					
				cases and in		and comfort					
				instrument		and					
				retrieval		documentati					
-						on by PGs					
	Infrastructure/Academics										
	1	Upgradation of Pre-	Total revamp of pre	Roof falling	2	Lagging in					
		Clinical Lab	clinical lab with	down in	Smart	infrastructure					
			more powerful	pieces.	TVs	Roof pieces					
			compressor and a smart TV	Compressor	and 1	can fall down					
			Smart I v	pressure lag	Com	anytime.					
					press	Smart Tv will					
			* - 10		OI	enhance the					
						learning					
						process					
						Working time					
						for students					
						can be					
						maximized by					
						using more powerful					
						Compressor					
	2	Upgradation of the	Modernization of	To enable	As	Betterment of					
		Labs	the Dry and Wet	fabrication of	per	patient care					
			' Labs	Crowns,	need						
				Inlays, Onlays		Students will					
				To		not be					
				To enable more lathes.		benefitted					
				more rathes.							
				Provide more							
				moulds for the							
				benefits of the							
				students							
	3	Upgradation of the	Revamp and			Convenience					
		Staff wash rooms	upgrade the	In UG and PG	2	of Staff and					
			washroom	section		PGs					

Linkage between outcome / impact and financial inputs and number of indicators

Sl.No.	Outcome/ Impact identified in Section	Relative importance (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget forthe scheme	Total number of indicato rs focused on each outcome	Total weight of all indicato rs
		E	quipment			
1	Intraoral scanner	75%	nil	Rs.8,00,000	-	-
2	Digital smile designing soft ware and Photography room	80%	t _	Rs. 2,50,000	-	-
3	Soft tissue laser	70%	-	Rs.2,75,000	-	-
4	Chair side CAD-CAM	65%	-	Rs.20,00,000	-	-
5	Advanced microscope setup	80%	-	Rs 9,00,000		
6	Air Compressor	80%	-	Rs 5,00,000		
7	B Class autoclave (2)	100%	-	Rs 2,50,000		
8	Dental Chairs- Fully Electric	80%	-	Rs 12,50,000		
		Infrastru	cture/Acade	mics		
1	Upgradation of Pre-Clinical Lab, Compressor and smart TVs	100%	1	Rs.35,00,000	-	-
2	Upgradation of the Dry and Wet Labs- (Moulds, Lathes)	80%	-	Rs 80,00,000	-	-
3	Washrooms	100%	2	Rs 5,00,000		

Description / Definition of outcome / Impact and how each of them will be measured?

Who will measure them and when?

Sl. No.	Outcome	Impact	W	eight	Reasons (if it is not measureable)	Total Allocate d Budge
			Who	When		(Rs)
			Equipr	nent		
1	Intraoral scanner	100%	-	-	Digital innovation and for better patient comfort	Rs.8,00,00 0
2	Digital smile designing software and Photography room	80%	-	-	For better outcome of smile designing and for documentation	Rs.2,50,00
3	Laser Clinic	70%	•	-	Upgradation of postgraduate skills and reduced patient treatment time.	Rs.2,70,00
4	Chair side CAD-CAM	65%			Crown can be delivered in a day which will help in reducing patient waiting time and better patient compliance	Rs.20,00,0 00
5	Advanced microscope setup	80%			Ease of instrument retrieval and better management of complex root canal anatomy	Rs 9,00,000
6	Air compressor	80%	,		Constant pressure can be maintained (improves longevity of the handpiece and helps in unhindered cavity preparation)	Rs 5,00,000
7	B Class autoclave	100%			used simultaneously For enhanced sterilization protocol and to maintain longevity of the instruments	Rs 2,50,000
8	Dental Chairs	80%			For betterment of	Rs

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	Electric	Infract		/Acader	patient care and comfort and also for better students compliance to the prescribed protocols	12,50,000
1	Upgradation of Pre- Clinical Lab, Compressor and smart TVs	100%	-	-	For students safety and betterment of Preclinical work and theoretical understanding	Rs. 35,00,00 0
2	Upgradation of the Dry and Wet Labs- (Moulds, Lathes)	80%	-	-	For unhindered functioning of preclinical work and fabrication of Crowns, Inlays, Onlays	Rs 80,00,00 0
3	Washrooms	100%	-	-	Need of the hour	Rs 5,00,000



BRANCH IV - ORTHODONTICS& DENTOFACIAL ORTHOPEDICS

Specific Performance Requirements from other Departments

Sl. No.	Release Success indicators	yantWhat you n		Why do you	need	How much you need	you de	happens it o not get it
				Equipmen	ıt			
1	Digital dentistry	Intrac scann		Ease of stora Easy commu	ge.	1	lack of unders	sion due to patients tanding. me space rage of s and
2	Digital dentistry	Digita design soft w		Treatment pl ,Virtual surg planning & s fabrication. Aligner plan	ical plint	-	Inaccurs splint f	racy in abrication, aligner ent
3	3D printer		printer odels	For aligner forthognathic splints		1	will not to convest scanned impression models/s	
]	Infrast	ructure/Ac	ademics			
1	Upgradation Pre-Clinica			ater ,well ted lab	Existing insufficie accommo full stren batch.	ent to odate		Lagging in infrastru cture. Work of the students are affected.
2	Upgradation clinic	of UG	Upgrad dental	dation of the chairs.	To enable smooth treatment			Reduced patient comfort during treatment.

Departments	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
Oral medicine	Increase awarenes s of various malocclus ions and diagnosis amongst patients	Referral to ortho dontics PG departm ent	To increase variety of cases for post graduate training. To provide treatment for the needy	Daily- 25	Students and patients will not be benefitted
	CBCT 3D			Monthly - 10	Lack of thorough diagnosis and treatment plan.
	imaging and 3D tracing software	Data evaluatio n for research	To evaluate impacted canine, orthognathic		Inability to perform new CBCT research studies.
		Image evaluation for treatment planning.	surgical cases, Cleft lip and palate, airway assessment, sleep apnea craniofacial pathologies, mini implant placements, MARPE,SA RPE placement. Research		Reduced precision affecting quality treatment.
Oral surgery	Increase in orthognathic surgical cases, impacted canine cases, TMJ disorder patients,	Referral to orthodo ntics departme nt;	-To increase the number of cases for student training.	Weekly -6	Students and patients will not be benefitted

	Craniofacial deformity, Cleft lip and palate, post traumatic rehabilitation of occlusion.	Interdepar tmental meetings	provide Treatment , for the needy For a multi- disciplinary treatment planning		
Prosthodontics	Increase in patients for adjunctive orthodonti c procedures	Referral to orthodo ntics departme nt; Interdepar tmental meetings	For better patient care For a multidisciplinar y treatment planning	Weekly -5	Students and patients will not be benefitted
Endodontics	Increase in patients for adjunctive orthodonti c procedures	Referral to orthodo ntics departme nt; Interdepar tmental meetings	For better patient care For a multidisciplinar y treatment planning	Weekly -1	Students and patients will not be benefitted
Pedodontics	Counseling patients for intercepti ve and preventiv e orthodont ic procedure s	Referral to orthodo ntics departme nt	Earlydiagnos is and manageme nt of malocclusi ons like growth modificati on procedures	Weekly- 5	Students and patients will not be benefitted. Students lack learning growth modification treatment procedures. Patients if not treated at the early stage with orthodontic therapy, will end up with skeletal
Periodontics	Increase in	Referral	For better	Weekly - 1	malocclusion. Students and

	patients for adjunctive orthodonti c procedures	to orthodonti cs departme nt;	patient care		patients will not be benefitted.
		Interdepar tmental meetings	For a multidisciplinar y treatment planning		
Public health	Orthodontic cases	Camps	Early detection of malocclusion s and counseling of patients for orthodontic treatment	Quarterly - 1 Camp	Students and patients will not be benefitted. Lack of awareness amongst patients about malocclusions

Linkage between outcome / impact and financial inputs and number of indicators

SLC no	eutcome/ Impact Identified in Section	Relative Importance (weight) in %	Number of Plan / non Plan Schemes Focused on the indicator	Total budget for all the Schemes in column 4	Total numbe r of indicat ors focused on Each Outcome	Total weight of all Indicators in column 6 /100
1	2	3	4	5.	6	7
	Fixed mechanoth erapy cases	90%	2	Rs. 5,60,000/-	Fixed orthodo ntic cases	90
2	Functional appliance and growth modificati on procedures	20%	3	Rs. 20,000/-	Functiona I and orthopae dic cases	20



3	Research data	100%	2	Usage of Existing Resources	Research paper	100
4	Adjunctive orthodon tic procedur es	20%	4	Rs. 1,12,000/-	Interdisci plinary managem ent	20
5	Surgical cases	20%	1 ,	Rs. 1,12,000/-	Interdisci plinary managem ent	20
6	Removabl e appliance s	40%	2	Rs. 40,000/-	Removab e orthodo ntic cases	40

Infrastructure:

Sl. no.	Infrastructure requirement	Total budget	Relative Importance (weight) in %
1	Record room for storing diagnostic records in the orthodontics department: - Cupboards for keeping orthodontic diagnostic records of patients - Boxes for storing study models	Rs. 70,000/- Rs. 15,000/-	90%
2	Orthodontics pre clinicallab(II year BDS and III year BDS) renovation	Rs. 4,00,000/-	90%

Equipments:

Sl. no.	Equipments	Total budget	Relative Importance (weight) in %
1	3D printer		du
		Rs. 13,00,000/-	70%



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2	Intraoral scanner	•	Rs. 15,00,000/-	70%

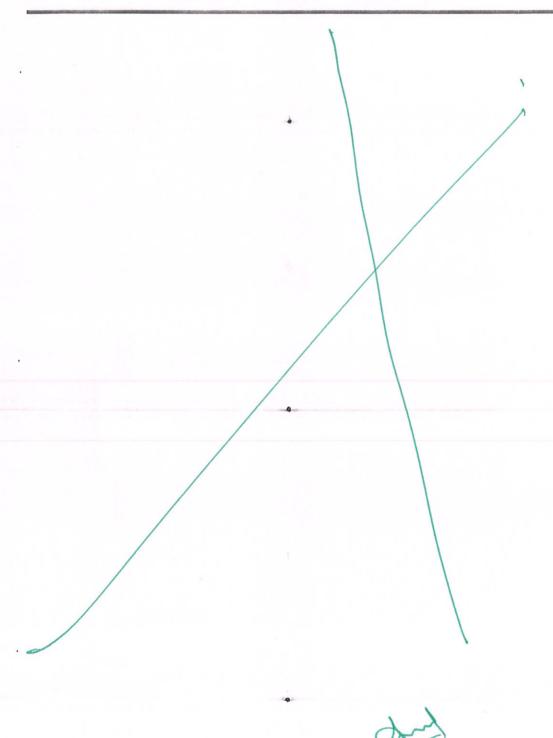
<u>Description / Definition of outcome / Impact and how each of them will be measured?</u>

Who will measure them and when?

Sl.	Outcome/	Impact/	Weigl	Weight Reasons (if it		Total
No.		10	Who	When	not Measureable)	Allocated Budget
1	2	3	4	5	6	7
1.	Cases	10	Audit	Yearly	-	Rs. 6,20,000/-
2.	Interdisciplinary cases		Audit	Yearly	-	Rs. 2,24,000/-
3.	Research Paper	10	Publication	Yearly	-	-
4.	Infrastructure	9	Audit	Yearly	-	Rs. 4,60,000/-
5.	Equipments	7	Audit	Yearly	-	Rs. 28,00,000/-







BRANCH III – PERIODONTOLOGY

Specific Performance Requirement from Periodontics and Implantology

Sl. No	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
			EQUIPMENT		
. 1	LASER Dentistry	LASER unit	1. To improve the skills of the post-graduates in periodontics in using LASER units. 2. High quality patient care in the department of periodontics.	1 unit	1. Post graduate students will lag in the LASER technique as it requires prior permission from another department. 2. Delay in the patient care for
					mild procedures like crown lengthening or biopsy due to referrals.
2	Peizoelectric Bone Surgery	Ultra- surgery unit.	1. To improve the skills of the post-graduates in periodontics in using Peizo-surgical technique for osseous surgerly. 2. High quality patient care in the department of periodontics.	1 unit	1. Post graduate students will lag in the Peizosurgical technique as it requires prior permission from another department. 2. Delay in the patient care for mild procedures like crown lengthening due to referrals.
3	Digital Radiography	RVG, Portable X-ray unit and desktop system.	1. To improve the skills of the post-graduates in periodontics in using advanced digital radiography. 2. High quality patient care in the	1 RVG Unit 1 portable X- ray unit and Desktop system	1. Post graduate students will lag in learning the technique of latest digital radiography. 2. Delay in the patient care for



4	Pre-clinical	High and	department of periodontics. 3. To avoid patient inconvenience by referring the patients back to the department of oral medicine.	Phantom	talking x-rays due to referrals
	Lab for the Postgraduates	High end Phantom head	1. To improve the skills of the post-graduates in periodontics to surgical procedures like incision, splinting etc,.	Head	1. Post graduate students will lag in learning the technique required to become good periodontal surgeons.
Sl.	Relevant	What do	Why do you need	How much	What happens
. No	Success	you need		you need	if you do not
	indicators		ACADEMICS		get it
1	Department	New	1. To improve the	1 copy of	1. Lack of
	library	edition books including 1. Misch's Contempo rary Implant Dentistry— 4 th ed 2.Lindhe's Clinical Periodonto logy and Implantolo gy — 7 th ed. 3.Newman qnd Carranza's Clinical Periodonto logy — 13 th	theoretical knowledge of the post-graduates in periodontology and implantology.	each book.	opportunity for the postgraduates to improve their theoretical knowledge in periodontics and implantology.

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<u>Linkage between outcome / impact and financial inputs and number of indicators</u>

Sl.No	Outcome/ Impact identified in Section	Relative importance (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes	Total number of indicators focused on each outcome	Total weight of all indicators
		I	EQUIPMENT			
1.	LASER Dentistry	70%		Rs 2,50,000		
2.	Peizoelectric Bone Surgery	80%		Rs 1,50.000		
3.	Digital Radiography	70%		Rs 2,50.000		
. 4.	Pre-clinical Lab for the Postgraduates	80%		Rs 50,000		
Section Section (1)		A	ACADEMICS			
5.	Department library	80%		1,00,000		

<u>Description / Definition of outcome / Impact and how each of them will be measured?</u>

Who will measure them and when?

Sl. No	Outcome/	Impact	Weig	tht	Reasons (if it is	Total Allocated
•			Who	When	measurea ble)	Budget
			EQUIPMEN	Γ		
1	LASER Dentistry	100%			Better Pati ent complianc e and	Rs 2,50,000
Page	3 of 4				acceptanc	

did

				1		,	
						e Research possibiliti es	
	2	Peizoelectric Bone Surgery	80%	1		Better Pati ent complianc e and acceptanc e Research possibiliti es	Rs 1,50.000
	3	Digital Radiography	80%			Better Pati ent complianc e and acceptanc e	Rs 2,50.000
						Research possibiliti es	
	SI. No	Outcome/	Impact		Weight	Reasons (if it is not measurab le)	Total Allocated Budget
-	4	Pre-clinical	100%	Who	When		
	4	Lab for the Postgraduates	100%			Need of the hour	Rs. 50,000
				ACADEM	IICS		
	1	Department library	100%			Need of the hour	Rs 1,00,000



Kavalkinaru, Tirunelveli, Tamil Nadu - 627105

BRANCH I - PROSTHODONTICSAND CROWN & BRIDGE

Specific Performance Requirements from Prosthodontics

SI. No.	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
	,	Equipme	nt		
1	Digital dentistry	Intraoral Scanner/Lab scanner	Digital innovation	1	Lagging in tech'
2	-do-	Digital smile designing soft ware	-do-	-	-do-
3	Comprehensive care	Soft tissue laser	For crown lengthening and minor procedures	1	Delay in tmt' due to referrals
4	Advanced restorative options	Chair side CAD- CAM	Crown-in-a- day	1	Patient waiting can be cut down for single crown etc.
		Infrastructure/A	cademics		•
1	Upgradation of Pre-Clinical Lab	Total revamp of pre clinical lab with high end equipment, robotics, • infotainment and the like.	PCL is not modified for the past 2 decades!	-	Lagging in infrastru cture
2	To incorporate recent advancements	Upgradation of the Cr-Co/Ceramic lab	To enable All-ceram and DMLS crowns	As per need	-do-

Linkage between outcome / impact and financial inputs and number of indicators

Sl.No.	Outcome/ Impact identified in Section	Relative importance (weight) in	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget forthe scheme	Total number of indicator s focused on each outcome	Total weight of all indicato rs	4
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		Ec	quipment			
1	Intraoral scanner	75%	nil	Rs.15,00,000	-	-
2	Digital smile designing soft ware	80%	-	Rs.50,000	-	
3	Soft tissue laser	70%	-	Rs.3,50,000	-	
4	Chair side CAD-CAM	65%	-	Rs.20,00,000	-	
		Infrastru	cture/Acad	demics		
1	Upgradation of Pre-Clinical Lab	100%	1	Rs.25,00,000	-	-
2	Upgradation of the Cr-Co/Ceramic lab	70%		1-2C	-	-

Description / Definition of outcome / Impact and how each of them will be measured?

Who will measure them and when?

Sl. No.	Outcome	Impact		Reasons (if it is not measureable)		Total Allocated Budge	
			Who	When			(Rs)
			Equip	ment			
1	Intraoral scanner Digital innovation adding to cutting edge tech'	100%	-	-	Better Patient compliance and acceptance Research possibilities	R	s.15,00,000
2	Digital smile designing soft ware	80%			More acumen in smile designing]	Rs.50,000
3	Soft tissue laser	80%			More patient compliance	R	s.3,50,000
4	Chair side CAD-CAM	100%	•		Crown in a day can up our ante	R	s.20,00,000
		Infrast	ructure	Acade	mics		
1	Upgradation of Pre- Clinical Lab	100%	-	-	Need of the hour		Rs. 25,00,000
2	Upgradation of the Cr-Co/Ceramic lab	80%	-	-	Futuristic gesture		1-2 C



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Results Framework Document (RFD)

PHD

The RF provides a summary of the most important results that a specific teaching program or curriculum initiative expects to achieve during a defined period of time, typically in an academic year.

The RF serves two main purposes:

- To aid in helping the Faculty and Institution progress from process-orientation to result-orientation
- Provide an objective and fair basis to evaluate programs overall performance at the end of the defined period

• This Results Framework Document should have a stated vision, with definite Vision, Mission Objectives and Function that lead to an outcome

Vision: To provide quality dental education, incorporating new knowledge, innovation with state of the art technological developments in each speciality, to provide quality dental health care services locally at global standards

Mission: Regular and consistent updation of Restorative, Surgical, & Preventive treatment care and Education with an emphasis on research related to basic health needs

Delivery of Tertiary dental operatory and surgical care services in tandem with the Social Welfare Schemes of the Government, providing dental health for all with community participation

Objective: To provide quality Dental Education facilities with a vibrant Centre of Research and provision of integrated Quality Health Care Services with equity.

Functions: Planning and Execution of quality education CDE programmes at State, National and International level, to promote planning and execution of research work, direct and supervise designing new facilities and maintenance of existing infrastructure, procurement of equipment and instruments in tandem with constant updation of treatment facilities, increase public awareness of the Institutions treatment facilities and modalities and implementation of policy

Specific Performance Requirements from Public Health Dentistry

Sl. No.	Relevant Success indicators	What do you need	Why do you need	How much you need	What happens if you do not get it
		Equipmen	t		
1	Digital dentistry	Intraoral Camera	Digital innovation	1	Lagging in tech'
2	Advanced diagnostic system	Carie scan Pro Pulp tester Portable hand held X ray unit	Digital innovation	1 1 1	Lagging in diagnosis, in camp site
3	Comprehensive	 Caries detecting dye Preventive procedures(pit &fissure, topical fluoride technique) 	Early detection of dental caries	1	Failure of detecting the early incipient caries that are not even visible in Radiograph
		Infrastructure/Ac	ademics		
1	Installation of new Satellite clinic	Full-fledged dental clinic setup capable of providing all kinds of dental treatment	For better outreach of the college	-	Lagging in outreach
2	To incorporate recent advancements	Upgradation of the Cr-Co/Ceramic lab	To enable All-ceram and DMLS crowns	As per need	-do-

Linkage between outcome / impact and financial inputs and number of indicators

Sl.No.	Outcome/ Impact identified in Section	Relative importance (weight) in	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget forthe scheme	Total number of indicators focused on each outcome	Total weig ht of all indic ators
		\mathbf{E}	quipment			
1	Intraoral camera	90%	nil	Rs. 18,000	-	-
No. of the Control of						

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2	Cariescan Pro	80%	-	Rs. 85,000	-	-
3	Pulp tester	70%	-	Rs. 2,500	-	-
4	Caries detecting dye	65%	-	Rs. 300	-	-
		Infrastru	cture/Acad	emics		
1	Upgradation of satellite centre	100%	1	Rs.5,00,000	-	-
2	Preventive procedures(pit &fissure, topical fluoride technique)	70%	-	Rs.5,000	-	-

Description / Definition of outcome / Impact and how each of them will be measured?

Who will measure them and when?

Sl. No.	Outcome	Impact	We	eight	Reasons (if it is not measureable)	Total Allocated Budget
			Who	When		(Rs)
			Equipn	nent		
1	Intraoral camera	80%	_	-	For better Patient education, compliance and acceptance	Rs.18,000
2	Cariescan Pro	100%	1		Futuristic gesture	Rs.85,000
3	Pulp tester	80%			More patient compliance	Rs.2,500
4	Caries detecting dye	100%	;		Detection of caries in earliest stages	Rs.300
		Infrasti	ructure	/Acader	nics	
1	Upgradation of satellite centre	100%	-	-	For better outreach	Rs.5,00,000
2	Preventive procedures(pit &fissure, topical fluoride technique)	80%	-	-	Preventive measures for the pedo patients	Rs.5,000

Specific Performance Requirements from other Departments

Departments	Relevant	What do	Why do you need	How	What happens if
	Success	you need		much	you do not get it
	indicators			you	

				need	
Oral Medicine & Radiology	General Public Screening Camps	1 Staff and 1 PG	Identification of oral lesions	As and when required	Students will not be benefitted and Lack of patients in college
Prosthodontics	Geriatric Oral Rehabilitation	1 Staff and 1 PG	Rehabilitation of patients in geriatric homes	As and when required	Poor oral functioning of geriatric patients
Pedodontics	School Oral Health Program	1 Staff& 5 Interns	Screening, education and promotion of oral health among schoolchildren	As and when required	Poor oral health among schoolchildren
Tobacco Cessation Clinic	Tobacco Counselling	1 Staff and 1 PG from Oral Medicine	Tobacco Counselling for quitting tobacco usage	15 patients per day	Number of precancerous & cancerous conditions will increase
Conservative Dentistry	Identification of Relevant Patient Cases in General Public Screening Camps	1 PG	To identify potential patients seeking endodontic treatment and referral to college	As and when required	PG students won't be benefitted if referrals to college are not proper
Periodontics	Identification of Relevant Patient Cases in General Public Screening Camps	1 PG	To identify potential patients seeking periodontal treatment and referral to college	As and when required	PG students won't be benefitted if referrals to college are not proper
Orthodontics	Identification of Potential Malocclusions & Deleterious Oral Habits among School and College Students	1 Staff and 1 PG	To identify potential patients seeking orthodontic treatment and referral to college	As and when required	PG students won't be benefitted if referrals to college are not proper
Oral Pathology	Oncology Screening Camps for Special Groups	1 Staff	To identify potential precancerous & cancerous conditions and any other facial anomalies	As and when required	Number of biopsy cases will get reduced and PG students won't be benefitted if referrals to college are not

					proper
Oral Surgery	Awareness campaign on Oral and Maxillo-facial defects and surgical procedures	1 Staff	Education and promotion of various maxilla-facial defects and surgical procedures	As and when required	Number of surgical cases will get reduced and PG students won't be benefitted
Implantology	Promotion of implant treatment to general public	1 Staff and 5 Interns	Education and promotion of implant procedures among general public during outreach programs	As and when required	Number of implant cases will get reduced and interns (CRRI) and PG students won't be benefitted

$Linkage\ between\ outcome\ /\ impact\ and\ financial\ inputs\ and\ number\ of\ indicators$

SI. No.	Outcome/ Impact identified in Section	Relative importance (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes in Column 4	Total number of indicators focused on each outcome	Total weight of all indicators in Column 6 /100
1	2	3	4	5	6	7
1	Epidemiological Data	100%	10	Essentials provided from college	10	100

Description / Definition of outcome / Impact and how each of them will be measured? Who will measure them and when?

SI.			Weig	ght	Reasons	Total
No.	Outcome	Impact/10	Who	When	(if it is not measureable)	Allocated Budget
1	2	3	4	5	6	7
1	PG Department	10	Department	Year 2022		As decided by Finance section and college

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					managemen t
2	Research Paper	10	Staff Members and Interns	Quarterly	Use research fund from college managemen t
3	Copyright for Oral Health Education Materials	10	Staff Members	As and when required	5000/- per copyright

MDS Requirements -1 Unit

STAFF

Professor	1	
Reader/Associate Professor	2	
Lecturer/Assistant Professor	3	

PATIENTS PER DAY

Unit	Starting MDS	2nd Renewal	3 rd & 4 th Renewal	Recognitio n
1 st Unit	40	45	50	50

DEPARTMENT INFRASTRUCTURE

Facility	Availability		
Faculty Rooms	Need 2 More		
Clinics	PG Area Needed		
Seminar Room	Present		
Department Library	Biostatistics Room can be used		
PG Common Room	Needed		
Patient Waiting Room	Needed		

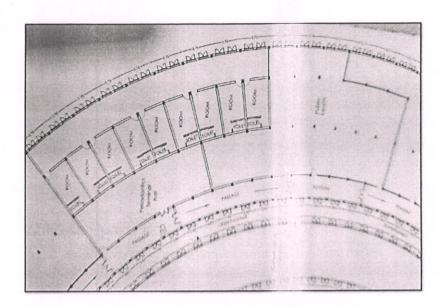
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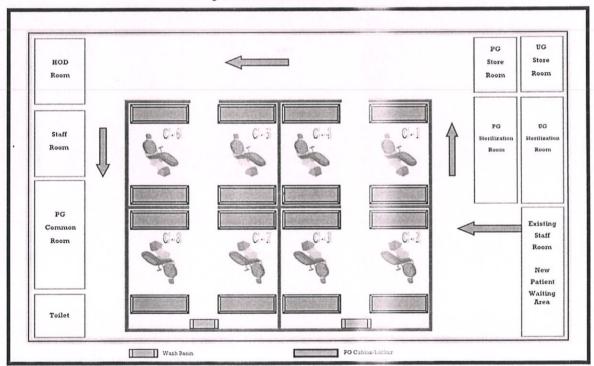
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Proposed Infrastructure PG Section



LIBRARY

BOOKS	CENTRAL LIBRARY		DEPARTMENT LIBRARY	
	Required	Available	Required	Available



RAJAS DENTAL COLLEGE & HOSPITAL Kavalkinaru, Tirunelveli, Tamil Nadu – 627105

No. of Titles	20		10	
Total No. of Books				
JOURNALS	Intern	ational	Natio	onal
JOORIVILIS	Required	Available	Required	Available
	4-6		2-3	
	Na	me of the Journ	nal	Number
No. of Back volumes in print form (8-10 years) of				
any 3 journals of concerned				
specialty	•			

EQUIPMENT

Sl. No.	NAME	SPECIFICATION	Quantity	Availa bility
	Instruments in the depar	tment for comprehensive Oral ho programme	ealth care	
1	Dental chairs	Electrically operated with shadowless lamp, spittoon, 3 way syringe, instrument tray and motorized suction, micromotor attachment with contra angle handpiece, airoter attachment, ultrasonic scaler (Piezo) with detachable autoclavable hand piece with min 3 tips.	One chair and unit per post-graduate student and one chair with unit for the faculty	
2			1 Unit	
3	Extraction forceps		4 sets	Nil
4	Filling instruments		4 sets	Nil
5	Scaling instruments	Supra gingival scaling	4 sets	Nil
6	Amalgamator		1	Nil
7	Pulp tester		1	Nil
8	Autoclave			Present
9	X-ray viewer		1	Present
10	Instrument cabinet		1	Nil



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	LCD or DLP multimedia			B .
11	projector			Present
	Computer with internet			
12	connection with attached			Present
	printer and scanner			
		ental care or field programme	1	D
13	Staff bus		11	Present
	Mobile dental clinic fitted			Present
14	with at least 2 dental chairs		1	(With
1.	with complete dental unit			one
	with fire extinguisher			chair)
15	Ultrasonic scaler,		1	Present
16	Ultrasonic cleaner capacity 3.5 lts		1	Present
17	Compressor	One with chair		Present
18	Generator		1	Present
19	Public address system, audio-		1	Present
19	visual aids			
20	Television		1	Present
21	Digital Versatile Disc Player		1	Present
				Need
		·b		Emerge
	Instrument cabinet,			ncy
22	emergency medicine kits,		1	medici
22	Blood pressure apparatus		•	ne Kits
	Blood pressure apparatus			and BP
				apparat
				us
23	Portable oxygen cylinder		1	Nil
24	Portable chair		1	Present
				(2)
25	Refrigerator		1	Nil

Planned Academic Activities

- 1. Conduct a Clinical skill development program regarding the importance of Pit and fissure sealants and various caries detection methods
- 2. Conduct hands on program on Pit and fissure sealants.
- 3. Enhance learning programs on newer preventive treatments.
- 4. Conduct hands on program on Topical fluoride application.

BRANCH VIII -PEDIATRIC DENTISTRY

Specific Performance Requirements from Department of Pedodontics

Infrastructure

What do you need	Why do you need	What happens if you do not get it	
Expansion of Department for PG	For the start of PG	Couldn't proceed to Develop Department as a Postgraduate	

Academic

What do you need	Why do you need	How much you need	What happens if you do not get it
CDE programme on Conscious Sedation (Lecture and Hands on) by Dr.Padmanabhan Yuvaraj	Improves knowledge on Conscious Sedation	1	Difficult to handle uncooperative pediatric dental patients
Clinical skill development programme (Lecture and Hands on) on Stainless steel crown placement in primary teeth	Improves knowledge and develops clinical skill	1	Difficult to handle pediatric dental patients
Hands on workshop- Fixed space maintainer	Improves knowledge and develops clinical skill	1	Difficult to handle pediatric dental patients
Printed journal collection (for past 5 years)	1. IJCPD 2. JISPPD 3. JCDR	1set each	To improve knowledge of students
Online pediatric dentistry journal access	1. IJCPD 2. JISPPD 3. JCDR	Online access	To improve knowledge of students

Jul

Equipment

What do you need	Why do you need	How much you need	What happens if you do not get it
Conscious Sedation Unit	Aids in behaviour management of uncooperative children & special children	1	Behaviour management is hindered
Apex Locator	Helps to improve quality of treatment of RCT in permanent teeth	1	The quality of dental care is compromised
Endomotor	Helps to improve quality of treatment	1	Completion of treatment procedure on time is compromised
Stainless steel Crown kit for Permanent teeth	For management of young permanent teeth	1 set	Couldn't complete treatment for permanent teeth
Plastic impression trays	To reduce the discomfort caused while using stainless steel impression trays for children	1 set	Increased discomfort to children during impression procedure
Permanent molar extraction forceps	For the extraction of permanent molars in children when indicated	1 set	Difficult to perform permanent molar extraction
Band material, silver solder, band adaptation pliers for fixed space maintainer	For the fabrication of fixed space maintainers when indicated in pediatric dental patients	1 set	Inability to fabricate fixed space maintainers following premature loss of deciduous tooth
Refrigerator	Storage of LA, composite kit, MTA	1	Composite material getting dried and wasted



Developer box	To develop the IOPAs taken in the Department of Pedodontics		Difficult to develop X rays. Student has to go to another department to develop the X ray film which delays the patient treatment
MTA and MTA carrier	For the management of young permanent teeth	1	Difficult to manage immature young permanent teeth



Specific Performance Requirements from other Departments

Departments	Relevant Success indicators	What do you need	Why do you need	How Much you need	What happens if you do not get it
Oral Medicine	Increase in special cases	Referral of pediatric patients (special children) to Pedodontics	To promote Speciality care and to improve knowledge and clinical skills of students and staff	2 cases /Month	• UG student exp osur e of spec ial chil d case s will bec ome obs cure
					Stu dent s are deprived of Kno wle dge abo ut craniofa cial ano malies, special children and



			•			othe r med icall y com pro misi ng con diti on
1	Conservative Dentistry	More number of Patients getting Vital/Non vital Pulp therapy for young Permanent teeth	Referral of relevant cases from Conservative Dentistry	Management of Young Permanent Teeth	3 cases /Month	Patients who need multidiscip linary approach may not be benefitted
C	oral Surgery	 Pediatric patients who have sustained trauma referred to pedodontic s Special children when posted for any oral and maxillofaci al surgery can be coordinate d with Pedodontic s 	Referral of relevant cases from Oral surgery	Rehabilitation of pediatric patients who have sustained trauma including splinting, reimplantation Post surgical management of pediatric patients can be well planned		Certain Patients who need multidiscipli nary approach may not be benefitted

On

			C r	1	1
		,			
Public Health Dentistry	Oral hygiene awareness and importance of preventive dental care can be created amongst pediatric patients in urban and rural areas	Interdepartment School/ Public Dental Camps	To impart knowledge about oral hygiene and preventive dental care	3 cases/ Month	Patient awareness could not be created
Orthodontics	Increase in Preventive Orthodontic procedures	Referral of relevant cases From Orthodontics	Developing	2 cases /Month	Certain Patients who need Multidiscip linary approach may not be benefitted
	More number of				Certain Patients who need multidiscip
Prosthodontics	Full mouth rehabilitation of pedodontic special cases	Referral of relevant cases from Prosthodontics	For the betterment of Patient care	1 case /Month	linary approach may not be benefitted
	Minor oral surgical procedures in pediatric	,	Students can be trained for Minor oral surgical procedures in pediatric		Certain Patients who need Multidiscip linary
Periodontics	patients can be referred to Pedodontics	Referral of relevant cases	Patients (eg. Frenectomy, frenotomy)	1 case /Month	approach may not be benefitted
		For multi			Certain Patients who need Multidiscip linary approach
All departments	Interdepartmental meetings	disciplinary treatment planning	For the betterment of Patient care	2 cases /Month	may not be benefitted

Linkage between outcome / impact and financial inputs and number of indicators

SI.N o.	Outcome/ Impact identified in Section	Relative importanc e (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes in Column 4	Total number of indicators focused on each outcome	Total weight of all indicators in Column 6 /100
1.	Restorations	90	4	Usage of existing resources	2	100
2.	Young Permanent tooth management	70	4	Usage of existing resources	2	100
3.		50	2	Usage of existing resources + Lab charges	2	80
4.	Preventive Orthodontic procedures	40	1	Usage of existing resources + Lab charges	1	80

<u>Infrastructure</u>

Sl.No.	Outcome/ Impact identified in Section			all the schemes in	Total number of indicators focused on each outcome	Total weight of all indicators
·1	PG Intake	10	4	Yet to be Finalised	2	100



Equipment

Sl.No.	Outcome/ Impact identified in Section	Relative Importance (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes in Column 4	Total number of indicators focused on each outcome	Total weight of all indicators in Column 6
1	Conscious Sedation Unit	90	, 4	Rs.2.30 Lakh (Approx)	2	100
2	Apex Locator	80	2	Rs.10,000 – Rs.100,000 (Approx)	2	80
3	Endomotor	80	3	Rs.61,000 – Rs.125,000 (Approx)	2	80
4	SS Crown for Permanent Kit	100	1	Rs.25,000 (Approx)	1	100
5	Plastic impression trays	100	2	Rs.1,000 (Approx)	2	100
6	Permanent molar extraction forceps	100	3	Rs.10,000 (Approx)	3	100
7	Band material, silver solder, band adaptation pliers for fixed space maintainer	100	2	Rs.2,000 (Approx)	2	100
8	Refrigerator	100	2	Rs.10,000 (Approx)	2	100
9	Developer box	100	2	Rs.2,000 (Approx)	2	100
10	MTA and MTA carrier	100	2	Rs.5,000 (Approx)	2	80



Academic

Sl.No	Outcome/ Impact identified in Section	Relative importance (weight) in %	Number of Plan / Non Plan Schemes focused on the indicator	Total Budget for all the schemes in Column 4	Total number of indicators focused on each outcome	Total weight of all indicators in Column 6
1	2	3	4	5	6	7
1	CDE programme on Conscious Sedation (Lecture and Hands on) by Dr.Padmanabhan Yuvaraj	100%	1	Registration fee for Participants (Approx Rs.750/Person) Approximate Expected No Of Participants- 500	1	100
	Clinical skill development programme (Lecture and Hands on) on Stainless steel					
2	crown placement in primary teeth	100%	1		1	100
	Hands on workshop- Fixed		,			
3	space maintainer	100%	1		1	100



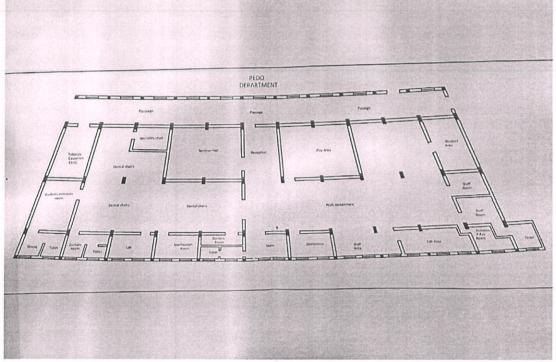


Description / Definition of outcome / Impact and how each of them will be measured?

Who will measure them and when?

Infrastructure

			Weight		Reasons (if it	Total
Sl. No.	Outcome/	Impact	Who	When	is not measureable	Allocated Budget
1	2	3	4	5	6	7
1	Special care Clinic	10	Interdepartment auditor	Yearly		Yet to be allotted
2	PG Department	10	Department auditor	Yearly		Yet to be allotted





Academic

		Outcome/	Impact	Weight		Reasons (if it	Total
	Sl. No.			Who	When	is not measureable)	Allocated Budget
Γ	1	2	3	4	5	6	7
	1	CDE Programs	10	Department auditor	After each program		Yet to be allotted
	2	Patient Education setup	10	Interdepartment auditor	Yearly		Yet to be allotted
	3	School adaptation programs	10	Interdepartment auditor	Monthly		Yet to be allotted

Equipment

			Weight		Reasons (if it	Total
Sl. No.	Outcome/	Impact	Who	When	is not measureable	Allocated Budget
1	2	3	4	5	6	7
1	Patient Management	10	Department auditor	Yearly		Yet to be allotted
2	Young permanent tooth treatment	10	Department audifor	Yearly		Yet to be allotted

