

## Sri Lakshmi Narayana Institute of Medical Sciences

Date: 05.04.2020

From Dr.G.Jayalakshmi Professor and Head, Department of Microbiology, Sri Lakshmi Narayana Institute of Medical Sciences Bharath Institute of Higher Education and Research, Chennai.

To The Dean, Sri Lakshmi Narayana Institute of Medical College Bharath Institute of Higher Education and Research, Chennai.

Sub: Permission to conduct value-added course: STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI

Dear Sir.

With reference to the subject mentioned above, the department proposes to conduct a value-added course titled: STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI for interns May to June 2020. We solicit your kind permission for the same.

Kind Regards

Dr.G.Jayalakshmi

#### FOR THE USE OF DEANS OFFICE

Names of Committee members for evaluating the course;

The Dean: Dr. K. Balagurunathan

The HOD: Dr. G.Jayalakshmi

The Expert: Dr. G.Jayalakshmi

The committee has discussed about the course and is approved.

Dean

Subject Expert

Prof. K. BALAGURUNATHAN MOS G. JAYALAKSHMI, 8 St. MRSS. DFCD. MD. (Mose). (General surgeon)

SRI LAKSHMI NARAYANA Si Lakhni Narajura instate di Medical Sciences
INSTITUTE OF MEDICAL SCIENCE Guida, Kudajuakan, Puducheny 606 502.

OSUDU PONDICHERRY



#### OFFICE OF THE DEAN

## Sri Lakshmi Marayana Institute Of Medical Sciences

OSUDU, AGARAM VILLAGE, VILLIANUR COMMUNE, KUDAPAKKAM POST,

PUDUCHERRY - 605 502

#### Circular

24.04.2020

Sub: Organising Value-added Course: STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI. reg

With reference to the above mentioned subject, it is to bring to your notice that Sri Lakshmi Narayana Institute of Medical Sciences, Bharath Institute of Higher Education and Research is organizing "STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI". The course content is enclosed below."

The application must reach the institution along with all the necessary documents as mentioned. The hard copy of the application should be sent to the institution by registered/ speed post only so as to reach on or before 30th April 2020. Applications received after the mentioned date shall not be entertained under any circumstances.

Prof.K.BALAGURUNATHAN.M.S (General surgeon) SRI LAKSHMI NARAYANA INSTITUTE OF MEDICAL SCIENCES

OSUDU PONDICHERRY

Encl: Copy of Course content

### **Course Proposal**

Course Title: STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI

#### **Course Objective:**

- 1. To enhance the performance skill of biomedical waste segregation by training the CRRI Using STEPS Framework Model.
- 2. To assess the BMW segregation performance skill using DOPS after conventional teaching like Didactic lectures and Video demonstration which is equivalent to the first step of the STEPS Model SET Induction.
- 3. To assess the BMW segregation performance skill using DOPS after full implementation of all steps of STEPS Framework Model.

To assess the reaction of target CRRI students towards the STEPS Framework Model and DOPS method by getting their feedback.

Course Outcome: Improvement in the BMW segregation skill after implementing STEPS TL method

**Course Audience: Medical Interns of 2015 Batch** 

Course Coordinator: Dr.G.Jayalakshmi

**Course Faculties with Qualification and Designation:** 

1.Dr.G.Jayalakshmi, Professor & HOD 2.Dr.Naveen kumar, Assistant Professor

Course Curriculum/Topics with schedule (Min of 30 hours)

SlNo	Date	Topic	Time	Hou	Lecture taken by
				rs	
1.	14.05.2020	Introduction to BWM, Background,	4-5p.m	1	Dr.G.Jayalakshmi
1.		Objectives,			
2.	15.05.2020	BMW Rules	2-3p.m	1	Dr.G.Jayalakshmi
3.	16.05.2020	Infection and importance of BMW	4-6p.m	2	Dr.Naveen kumar
3.		management			
4	18.05.2020	PPE- Donning &Doffing practical	4-6p.m	2	Dr.G.Jayalakshmi
4.		&video demonstration			
5.	19.05.2020	Categories of BMW, Labels of Bio	4-6p.m	2	Dr.Naveen kumar
3.		Hazard Warning			
	20.05.2020	Collection & Segregation at the source	4-5p.m	2	Dr.G.Jayalakshmi
6.		of generation of waste conventional			
		didactic lecture and video.			
7.	21.05.2020	conventional didactic lecture and video	4-5P.M	1	Dr.G.Jayalakshmi
8.	22.05.2020	Transportation & common storage	4-5p.m	1	Dr.G.Jayalakshmi
0	22.05.2020	Transportation and treatment at CTF	4-6p.m	1	Dr.G.Jayalakshmi
9.	23.05.2020	facility	1		·
1.0	27.05.2020	Liquid waste from Hospitals and	4-6p.m	2	Dr.Naveen kumar
10.	27.05.2020	effluent treatment	_		
11	20.05.2020	Safe Handling of Sharps, needles and	4-6p.m	1	Dr.G.Jayalakshmi
11.	28.05.2020	management of needle stick injuries	1		ľ

12.	29.05.2020	BMW in Special Situation, Limitations Of The Course And Its Implementation	4-6p.m	2	Dr.G.Jayalakshmi
13.	30.05.2020	Pre course and Post Course evaluation, Feedback analysis from Likert scale	2-5p.m	3	Dr.Naveen kumar
		Practical Class I			
13.	02.06.2020	Steps model explanation and various performance assessment methods	4-5 pm	1	Dr.G.Jayalakshmi
14.	03.06.2020	Orientation of the students about the training program and assessment methodology by DOPS	4-5 pm	1	Dr.G.Jayalakshmi
15.	04.06.2020	Video demonstration of BMW segregation, infection control practice, PPE, Donning & Doffing, Needle stick injuries and Biomedical waste management in special situation	4-6 pm	2	Dr.G.Jayalakshmi
16.	05.06.2020	Biomedical waste segregation procedure by STEPS model	4-6 pm	2	Dr.Naveen kumar
17.	06.06.2020	Assessment by DOPS procedure and giving feedback in weaker areas Obtaining feedback for the session.	2-6p.m	4	Dr.G.Jayalakshmi
		Total		30 hrs	

### **REFERENCE BOOKS:**

- 1. Miller GE(1990), The assessment of clinical skills/competence/performance. Academic medicine, 65(9), 63-67.
- 2. Syndneysmee ABC of skill learning BMJ 2003; 326.703-706.
- 3. Biomedical Waste Management & Handling Rules (2016) with Amendment, updated on 2018.
- 4. BangBangal V. Training and assessment of medical interns using "direct observation of procedural skills (DOPS)" tool in obstetrics and gynecology. *MOJ Womens Health*. 2018;7(4):120–123. DOI: 10.15406/mojwh.2018.07.00181al V. Training and assessment of medical interns using "direct observation of procedural skills (DOPS)" tool in obstetrics and gynecology. *MOJ Womens Health*. 2018;7(4):120–123. DOI: 10.15406/mojwh.2018.07.00181

Date: 06.06.2020

From
Dr.G.Jayalakshmi
Professor and Head,
Department of Microbiology,
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research,
Chennai.

Through Proper Channel

To The Dean, Sri Lakshmi Narayana Institute of Medical Sciences Bharath Institute of Higher Education and Research, Chennai.

Sub: Completion of value-added course: STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI

Dear Sir,

With reference to the subject mentioned above, the department has conducted the value-added course titled: Influence of STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI on May to June2020, 27 interns. We solicit your kind action to send certificates for the participants, that is attached with this letter. Also, I am attaching the photographs captured during the conduct of the course.

Kind Regards,

Dr.G.Jayalakshmi

**Encl:** Certificates

**Photographs** 

Influence of STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI: **TEACHING SESSION** 



Influence of STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI: **ASSESSMENT SESSION** 



### **VALUE ADDED COURSE**

### 1. Name of the programme & Code

STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI & CD/ME03

### 2. Duration & Period

30 hrs & May-June 2020

### 3. Information Brochure and Course Content of Value Added Courses

Enclosed as Annexure- I

### 4. List of students enrolled

Enclosed as Annexure- II

## 5. Assessment procedures:

Assessment Evolution by DOPS method - Enclosed as Annexure- III

## 6. Certificate model

Enclosed as Annexure- IV

### 7. No. of times offered during the same year:

1 times May– June 2020

8. Year of discontinuation: 2021

## 9. Summary report of each program year-wise

	Value Added Course- May- June 2020				
Sl.	Course	Course Name	Resource Persons	Target Students	Strength &
No	Code				Year
1	CD/ME03	STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI	Dr. G.Jayalakshmi Dr.C.Naveen Kumar	CRRI Interns	20 students MAY- JUNE 2020

#### 10. Course Feed Back

Enclosed as Annexure- V

**RESOURCE PERSON** 

COORDINATOR

1. Dr.G.Jayalakshmi

Dr.G.Jayalakshmi

2. Dr. V. Naveen Kumar

# STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI



**PARTICIPANT HAND BOOK** 

## **COURSE DETAILS**

Particulars	Description
Course Title	STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI
Course Code	CD/ME03
Topics and content	Introduction of BMW     Background
of the course in the	3. Objectives
Hand book	4. BMW Rules 2016
Traine book	5. Infection and importance of BMW management
	6. PPE – Donning & Doffing practical & video demonstration
	7. Categories of BMW and colour coding containers
	8. Labels of Bio Hazard Warning
	9. Collection & Segregation at the source of generation of waste conventional didactic lecture and video.
	10.Transportation & common storage
	11. Transportation and treatment at CTF facility
	12.Liquid waste from Hospitals and effluent treatment
	13. Safe Handling of Sharps, needles and management of needle stick injuries
	14.BMW in Special Situation
	15.Limitations Of The Course And Its Implementation

	16. Pre course and Post Course evaluation
	17.Feedback analysis from Likert scale
	18.Practical sessions
	a. Steps model explanation.
	b. Orientation of the students about the training program and assessment methodology by DOPS.
	c. Video demonstration of BMW segregation, infection control practice, PPE, Donning & Doffing, Needle stick injuries and Biomedical waste management in special situation.
	d. Biomedical waste segregation procedure by STEPS model.
	e. Assessment by DOPS procedure and giving feedback in weaker areas
Advantages of learning and evaluation	<ul> <li>Proper Implementation of Biomedical Waste segregation evaluation by DOPS method</li> <li>Correction of the mistake on the spot</li> <li>Mistake will never be repeated</li> </ul>
Further learning Opportunities	Structured TL methods like STEPS Frame work model are the need of the day.
	2. Competency based assessment must be evaluated properly as per the IMG 2019 MCI guidelines.
	3. Boost the self confidence of the students.
	4. As they are the lifelong learner, the foundation will be laid strong.
	5. As a responsible person committed to the society they know their roll and contribute to the society.
	6. Can be included in I MBBS ECE period itself if the study is approved.
	7. Can be included in the university examination for

	testing KH, SH, P and ethical issues.
Key Competencies	<ul> <li>8. WPBA conforms to the highest level of MILLER's PYRAMID as" Does "is assessed</li> <li>9. Self satisfaction for the student as their performance is evaluated in a transparent method.</li> <li>WPBA asses the optimal and judicious uses of competencies in authentic settings.</li> <li>• The new curriculum focuses on competencies and outcomes. It gives a list of emphasis to skill development in all places. Competencies S H and P under supervision or independently is listed and they are related to the skill to be developed by IMG. The senior batch which can also be trained like the current batch of August 2019 at least in MUST KNOW areas for developing competencies.</li> <li>• Evaluation by DOPS method will satisfy the criteria of testing the apex of MILLERS PYRAMID.</li> </ul>
Target Student	CRRI Interns
Duration	
	30hrs May to June 2020
Theory Session	20hrs
Practical Session	10hrs
Assessment	Assessment Evolution by DOPS method
Procedure	

## **INTRODUCTION:**

Bio Medical Waste Management is the most known area in the Health sector as HAI, following which personal & Community protection from Health hazards can be prevented. BMW segregation Skill is the most needed one among the Interns.

## **Background**

Bio Medical Waste Management is the must known area in the health sector as HAI, personal and community protection from health hazards can be prevented. BMW segregation skill is one of the must for any intern.

WPBA is strongly recommended for inclusion in the in-training assessment.

In this study the competencies like knowledge, technical skill, performance skill, attitude and professionalism will be taught and hence all the competencies will be evaluated.

#### **AIM OF THE COURSE:**

To evaluate the enhancement of Biomedical Waste(BMW) Segregation performance skills by DOPS method after implementing all steps of STEPS Framework Model.

### **OBJECTIVE**

- 1. To enhance the performance skill of biomedical waste segregation by training the CRRI Using STEPS Framework Model.
- 2. To assess the BMW segregation performance skill using DOPS after conventional teaching like Didactic lectures and Video demonstration which is equivalent to the first step of the STEPS Model SET Induction.
- 3. To assess the BMW segregation performance skill using DOPS after full implementation of all steps of STEPS Framework Model.

To assess the reaction of target CRRI students towards the STEPS Framework Model and DOPS method by getting their feedback.

## **METHODOLOGY**

- 1. 25 CRRI students willing to take part in the study were included.
- 2. The study group students were briefed about the new curriculum, structured TL methods, performance evaluation at each level, DOPS, STEPS model method, and also a brief account of BMW, National guidelines and its importance.
- 3. Assessors were gives instructions and training to contact program. DOPS Score sheet was checked, validated and approved.
- 4. **STEPS Frame work Model** was implemented for Teaching BMW Segregations at source. **First step**: Set Induction of STEPS Model constituted the conventional and teaching method for the study group.

4.1 Set Induction: Didactic lectures with PP presentation and Video play were showed to project the procedures of segregation, hand washing technique, PPE components, spillage handling including how and when to use the PPE.

All aspects of BMW segregation management was covered in 2 sessions of Didactic lectures 30 minutes each with a break in between .A 20 Minutes session of Video play was done.

- 4.2 Assessment was done using a pre validated, checked assessment score for BMW segregation performance technical skill by DOPS method of evaluation. Feedbacks were given to the students in weaker areas.
- 4.3 Tutor Demonstration: without commentary this was done using Video Sessions for 20 minutes in mute condition showing all the Procedural skill of segregation of BMW into the appropriate color coded containers including PPE, donning, doffing, Hand hygiene and spillage management.
- 4.4 Explanation was followed demonstrating all the Aspects of segregation by the Expert to the students.
- 4.5 Performance by Students on their own under practically expert supervision was done.
- 4.6 Subsequent practice was encouraged until they become competent to do the same on their own without supervision.
- 4.25. Final assessment of the Students performance of BMW segregating procedural performance skill was done using a pre validated checked ASSESSMENT score by DOPS method of evaluation. Feedbacks were given to the students in weaker areas.
- 5(a) Feedback were obtained from students for both the training given by STEPS model and the evaluation technique using DOPS method and they were analyzed optional.
- b. Feedback was given by students for improvement based on performance.

### **BMW Rules 2016**

- The Government of India made Bio medical Waste Management and Handling rules in July 1998
- Government of India Bio Medical waste Management Rules 2016

• The rule is applicable across the country to all the Health Care establishments



## MINISTRY OF ENVIRONMENT, FOREST AND CLIMATE CHANGE NOTIFICATION

New Delhi, the 28th March, 2016



Salient features of New BMW Rules 2016

- Bio-Medical Waste has been classified into 4 categories instead of 10 to improve the segregation at source.
- The ambit of the rules has been expanded to include health camps, medical or surgical camps, vaccination camps, blood donation camps, first aid rooms of schools, forensic laboratories and research labs
- No occupier shall establish on-site treatment and disposal facility, if a service of common bio-medical waste treatment facility is available at a distance of seventy-five kilometre.
- Pre-treat the laboratory waste, microbiological waste, blood samples and blood bags through disinfection or sterilisation on-site in the manner as prescribed by the WHO or NACO guidelines and then sent to the CBMTF for final disposal
- Provide training to all its health care workers and others, involved in handling of bio medical waste at the time of induction and thereafter at least once every year and the details of training programmes conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report
- Immunise all its health care workers and others, involved in handling of bio-medical waste for protection against diseases including Hepatitis B and Tetanus that are likely to be transmitted by handling of bio-medical waste
- Vaccination to be certified & Documented.
- Ensure occupational safety of all its health care workers and others involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipments
- maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule I.

Hospital A

Month	Nursing details	CBMWTF
Apr-15	73	73
May-15	144	144
Jun-15	79	79
Jul-15	84	84
Aug-15	90	90
Sep-15	75	75
Oct-15	97	97
Nov-15	95	95
Dec-15	12	18
Jan-16	60	75
Feb-16	149.7	83
Mar-16	122	122
Total	1080.7	1035

- BMW Staff- verify the daily bill from CBMWTF & their register. Then accept daily receipt.
- Office Superindentent- verify the monthly consolidated register from Staff nurse & CBMWTF. Then accept the bill from CBMWTF.

- make available the annual report on its web-site and all the health care facilities shall make own website within two years from the date of notification of these rules
- Establish a system to review and monitor the activities related to biomedical waste management through BMW committee and the Committee shall meet once in every month and the record of the minutes of the meetings of this committee shall be submitted along with the annual report.
- Phase out use of chlorinated plastic bags, gloves and blood bags within two years from the date of notification of these rules
- All plastic bags shall be as per BIS standards (Bureau of Indian Standards).
- Untreated human anatomical waste, animal anatomical waste, soiled waste and, biotechnology waste shall not be stored beyond a period of forty –eight hours

## Infection

The infectious agents enter into the body through

- Puncture
- Abrasion
- Cut in the skin
- Through mucous membranes
- By inhalation and ingestion.

## **Most Common Infections**

- 1. Gastro enteric through faeces and/or vomit
- e.g. Salmonella, Vibrio Cholera, Helminthes Hepatitis A
- 2. Respiratory through inhaled secretions

- e.g. Mycobacterium tuberculosis; Measles virus; Streptococcus pneumoniae
- 3. Ocular infections through eye secretions
- e.g. Herpes virus,
- 4. Skin infection through pus
- e.g. Streptococcus spp,
- 5. Meningitis through Cerebrospinal fluid
- e.g. Neisseria meningitides
  - 6. Blood borne diseases
    - AIDS

ORGANISM	DISEASES CAUSED	RELATED WASTE ITEM
<u>VIRUSES</u>	AIDS, Infectious Hepatitis,	Infected needles, body
HIV, Hepatitis B, Hepatitis A,C,	Infectious Hepatitis,	Fluids, Human excreta, soiled
Arboviruses, Enteroviruses	Dengue, Japanese encephalitis, tick-borne	linen, Blood, body fluids.
	fevers, etc.	
BACTERIA	Typhoid, Cholera, Tetanus	Human excreta and
Salmonella typhi,	Wound infections,	body fluid in landfills and
Vibrio cholerae,	septicemia,	hospital wards,

Clostridium Tetani,	rheumatic fever, endocarditis, skin	Sharps such as needles, surgical blades in
Pseudomonas,	and soft tissue	hospital waste.
Streptococcus	infections	
<u>PARASITES</u>	Cutaneous	Human excreta,
	leishmaniasis,	blood and
Wucheraria Bancrofti,	Kala Azar, Malaria	body fluids in poorly
Plasmodium		managed sewage system of
		hospitals.

- Septicaemia and bacteraemia
- Viral Hepatitis B & C
- Hemorrhagic fevers through body fluids
- Lassa, Ebola and Marburg viruses

## Genotoxicity and Cytotoxicity

• Irritant to skin and eyes

E.g. alkylating agent, intercalating agent

• Carcinogenic and Mutagenic

e.g. Secondary neoplasia due to chemotherapy



## **Label of Hazard Warnings**



Segregation at the source of generation of waste



## Pre course and Post Course evaluation

- At the end of the course, pre validated assessment score using DOPS method after Set induction step of STEPS model i.e. Didactic and video play (conventional teaching) for BMW segregation at source will be compared with the score using DOPS method after final step of the STEPS model i.e. subsequent practice on their own without supervision. And the difference if any will be evaluated.
  - Feedback will be analyzed. Opinion, advantages, and requirement of improvements of the method can be inferred.
  - Performance level of the CRRI for DOPS has definitely improved after STEPS than conventional teaching method.
  - All the interns have given their opinion that this type of teaching learning method and WPBA improves their
  - Self confidence
  - Self satisfaction due to the transparency.
  - - Assesses the KH, SH, Performance, communication, ethical, attitude and professional skills.

- Foundation is laid strongly.
- - As responsible person their contribution to the society will be improved.
- - As all domains are assessed, it satisfies the goals of IMG 2019 and they will be Global Doctors.
- This type of Formative Assessment gives them guidance for improved learning skills due to feedback given on spot.
- Structured TLM like STEPS will make us to touch millers apex of the pyramid
- STEPS seem to be the best TLM for DOPS.
- Feedback of students favours this TLM for DOPS.
- Feedback of faculty indicates some difficulties but still they agree it is the best method.
- Periodic and regular FDP and motivation will make them to mould and adapt.

## **Limitations Of The Course And Its Implementation**

- 1. Performed with limited no of students.
- 2. Takes extra time and effort
- 3. Motivation of all teachers to implement
- 4. Training of the assessors is mandatory.
- 5. Study is performed with limited number of interns.
- 6. Takes extra time and effort than conventional TLM and AM.
- 7. Periodic FDP is important to motivate the teachers.
- 8. Pre briefing and training of faculty is necessary for assessment and implementation.
- 9. Pre briefing of objectives expected out of students is necessary to achieve the goal.

## **VALUE ADDED COURSE**

STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI and  ${\rm CD/ME03}$ 

## 4. List of Students Enrolled May 2020 – June- 2020

CRRI Interns				
Sl. No	Name of the Student	Roll No		
1	AMARNATH.S	U15MB258		
2	DHANALAKSHMI.M	U15MB279		
3	SIVARAJ.S	U14MB318		
4	PIRAI NILA.M	U15MB337		
5	MAHESWARI.C	U15MB 318		
6	SHAKTHY.K	U15MB364		
7	SREERAM.M	U15MB376		
8	SOWMYALAKSHMI.I	U15MB375		
9	VENKATESH.G	U15MB393		
10	SURIYA.S	U15MB384		
11	VIGNESH.V	U15MB395		
12	ARUL NIVETHINI.V.A	U15MB263		
13	ASWIN.B	U15MB269		
14	EZHILARASI.R	U15MB286		
15	AKSSHAYA.M.R	U15MB257		
16	ARUN PRASAD.K	U15MB266		
17	PADMA SUNDARI.P	U15MB336		
18	ABDUL RAHMAN.A	U13MB151		
19	ABINAYA.J	U15MB253		
20	DEEPIKA DIVYA KUMARI	U15MB274		

21	AARTHI.H	U15MB251
22	SIVASHAKTHIVELAN.A.V	U15MB370
23	ASHOK.VSI	U14MB223
24	DEVANATHAN.R	U15MB277
25	DEVANAND.M	U15MB276
26	DHANUSH.R	U15MB280
27	SHIYAM.M	U15MB368

**RESOURCE PERSON** 

**COORDINATOR** 

## Sri Lakshmi Narayana Insitute of Medical Sciences

DATE:06.06.2020

Attendance List

Attendance List			DATE:00:00.2020	
s.no.	NAME OF THE CRRI	ID.NO	SIGNATURE OF THE CRRI	
1	AMARNATH.S	U15MB258	Sacr	
2	DHANALAKSHMI.M	U15MB279	XIAND	
3	SIVARAJ.S	U14MB318	( Street	
4	PIRAI NILA.M	U15MB337	Junt	
5	MAHESWARI.C	U15MB 318	J. Molinage	
6	SHAKTHY.K	U15MB364	Dahnitut-	
7	SREERAM.M	U15MB376	Showay	
8	SOWMYALAKSHMI.I	U15MB375	Sulprinters	
9	VENKATESH.G	U15MB393	6 sproust	
10	SURIYA.S	U15MB384	Susurja	
11	VIGNESH.V	U15MB395	V oling	
12	ARUL NIVETHINI.V.A	U15MB263	beulnesvethini v. A	
13	ASWIN.B	U15MB269	Aburin - R	
14	EZHILARASI.R	U15MB286	Coxemsei	
15	AKSSHAYA.M.R	U15MB257	Alexage.	
16	ARUN PRASAD.K	U15MB266	Some Brased	
17	PADMA SUNDARI.P	U15MB336	gadma Rindari. P	
18	ABDUL RAHMAN.A	U13MB151	Bulagemanue	
19	ABINAYAJ	U15MB253	Abrinaya - T	
20	DEEPIKA DIVYA KUMARI	U15MB274	Drawindan V	
21	AARTHI.H	U15MB251	AL	
22	SIVASHAKTHIVELAN.A.V	U15MB370	delinh	
23	ASHOK.VSI	U14MB223	Ashir	
24	DEVANATHAN.R	U15MB277	Bok	
25	DEVANAND.M	U15MB276	mun -	
26	DHANUSH.R	U15MB280	Thanushe	
27	SHIYAM.M	U15MB368	Thomas	

RESOURCE PERSON

COORDINATOR



**Annexure - III** 

## Influence of STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI

## **Direct Observation Of Procedural Skills**

## **DOPS Score Assessment Form**

Sri Lakshmi Narayana Institute of Medical Sciences, Puducherry

#### **CANDIDATE AND ASSESSOR INFORMATION**

Course code: CD/ME03

Candidate Name	Assessor Name	
Date of Assessment	<b>Assessor Position</b>	

### **PATIENT INFORMATION**

Age of patient	NA	Patient gender	NA	Setting	WPBA Work Place Based Assessment
Procedure	BMW Se	gregation Proc	edure and	Discipline	Microbiology
riocedule		Performance sl	cill .	Discipinie	Wilciobiology

Please record a rating for each component of the procedure observed on the scale 0(extremely poor) to 4 (extremely good). A score of 0- is not observed, 1-is considered below expected level, 2 –borderline 3– adequate performance 4 above expected level, for the **MBBS standard**. Support ratings of 1-2 with an explanation / example in the comments box. Please add other relevant comments about this doctor's strengths and weaknesses that support your ratings and guide future learning.

the comments box	•	comments about this doctor's	•	•
0-not observed	Below expected level (0 to 1)	Borderline (1 to 2)	Adequate performance (2 to 3)	above expected level (3 to 4)
( I ) Able to demons and implications wi	_	f basic concepts of BMW, indic	cations ,LIFECYCLE 3x4=1	2
1. What are the indi	cations for Biomedical Wa	aste Separation and Special Tre	atment? (Ma	rks)
		-1-		



2. What is BMW Life cy	ycle? Tell the com	ponents of it?			
3. What are the variou	ıs Bio Medical Rule	es with amendme	ents you know off	?	
(II) Obtains Ethical /	Informed Cons	<u>ent</u>			3x4=12
<ol> <li>XDR TB patient is attached patient.</li> <li>a)What advice and pre-</li> </ol>	_				
2. You want to collect	blood from patien	t.			
a) What precaution you	u will take.				
<b>b)</b> Apart from blood wh	nat else you will co	ollect?			
(III)Aseptic Techniqu	e				3x 4= 12
1. How and where	e will you dispose	Sputum cups of p	olastic container c	ontaining sputu	ım?
2. Why you want	to use fresh hypo	chlorite? How wil	l you prepare 1%	hypo from 10%	hypo?
<b>3.</b> steps of hand v	vashing technique	S.			Demonstrate six
(IV) Demonstrates app Donning: Sequence a Donning:		tion: PPE proced	ural Donning		1 x 4 = 4



Siloc cover	, manu uisii	nfection, Gown, H	caa cap mana alsii	, 68	, ,	
(V) Demon	istrates rel	evant indications,	infrastructure, an	d Technical skills	_	ituation I = 12
-	•		ty of general waste ochlorite solution.		Hand disinfection	solution. Availability
2). How and	d where wi	ll you dispose brol	ken glass ampoule	containing cytoto	oxic drug?	
What act	ion to be t	•	loor due to accide Il kit? What are the		-	•
(VI) Technic					16 x	1 = 16
Cotton soal Petri dishes Broken glas	ked with pu s with med sses, Expire	ed tablets, Tissue p	g water bottle. od transfused set, E aper and newspap tinum metal denta	er, Ascetic fluid,	ared glass slides, Urobag ,	1 = 16
Cotton soal Petri dishes Broken glas	ked with pu s with med sses, Expire	ia, Blood bag, Bloc ed tablets, Tissue p	od transfused set, E paper and newspap	er, Ascetic fluid,	ared glass slides, Urobag ,	1 = 16
Cotton soal Petri dishes Broken glas Endotrache  (VII) In nece and a 1) Unkr 1) W 2) T 3) T	essary situction Plan hown acid	ia, Blood bag, Blood dag, Blood dag, Blood bag, Blood bag, Blood dag, Blood d	end transfused set, E paper and newspap tinum metal denta	er, Ascetic fluid, I implant ,amput	ared glass slides, Urobag , ated leg	1 = 16
Cotton soal Petri dishes Broken glas Endotrache  (VII) In necc and a 1) Unkr 1) W 2) T 3) T 4) T	essary situ ction Plan hown acid hat action o make eve o open the	ation seeking attention bettle broken with to be taken erybody alert windows etemperature	end transfused set, E paper and newspap tinum metal denta enders/manpower h fumes all over	ver, Ascetic fluid, I implant ,amput  /using resources	ared glass slides, Urobag , ated leg  s/spot decision 3 x4	
Cotton soal Petri dishes Broken glas Endotrache  (VII) In neco and a 1) Unkr 1) W 2) T 3) T 4) T	essary situction Plan hown acid hat action o make ever o open the o lower the	ation seeking attention bettle broken with to be taken erybody alert windows e temperature	end transfused set, E paper and newspap tinum metal denta enders/manpower h fumes all over	ver, Ascetic fluid, I implant ,amput  /using resources	ared glass slides, Urobag , ated leg  s/spot decision 3 x4	= 12



3)			How to colle	ect the spill?	
	es- yellow bin (ii)	_		ove head cap-	1x4=4 · yellow bin (iv) Removes rials.
(IX) Communication s (1) Do you know what		or BMW in CBMWT	F- how do they di	spose of.	2x 4 = 8
(2) What are the vario	ous symbols you	know off used in me	edical fieldof BMV	۷? Can you ex	olain 4 R s?
(X) Consideration for What will be your rea  1) If you see the auto Reaction.	ction with the fo	llowing situations?	121° C required fo	r sterilization-	2 x 4 = 8
2) If a disposable need	dle syringe being	reused for another	Person without o	isposing it Off.	
TOTAL MARKS OBTAI	INED BY THE CAN	IDIDATE =			
(XI)Overall performa	nce				
	-	verbal feedback to rainee suggestions	_	-	e assessment. eas of improvement.

Assessor name	Signature	Date	Time taken for assessment
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Examinees name Signature Date Time taken for assessment



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		Direct Obs						
		-intervention					enger en e	
Sril	akshmi	Narayana l	Institute	of Medic	al Science	s, Pudu	icheri	y
		CANDIDAT	TE AND AS	SSESSOR INFO	RMATION			
indidate Name	Da. A	ARTHI		Assessor N	iame D	. JAY	ALAI	CSHMI
e of Assessment		6/2020		Assessor Po				
		TON						
PATIENT IN	VEURIVIAI	Patient	202	#3.50E-1	MARRA	West nie	na Da-	ed Assessme
ge of patient	NA	gender	NA	Setting	WPBA	VVQ1K PIdi	Le bas	eu maacaann
			edure and			Mice	robiolo	CW.
Procedure e record a rating	for each of 0-	is not observed	the proces	dure observer sidered belov	v expected is	le 0(extre evel, 2 –b	mely p	oor) to 4 ne 3– adequ
e record a rating emely good). A so rmance 4 above comments box.	for each of the core of 0- expected Please at	Performance sk component of t is not observed level, for the N id other relevan	the proceed, 1-is cons MBBS stan	dure observed sidered below dard. Suppor	t ratings of :	le O(extre evel, 2b 1-2 with a	mely p orderli	oor) to 4 ne 3– adequanation / ex
e record a rating emely good). A so	for each of the core of 0- expected Please at	Performance sk component of t is not observed level, for the N id other relevan	the proceed, 1-is cons MBBS stan	dure observed sidered below dard. Suppor	t ratings of :	le O(extre evel, 2b 1-2 with a	mely p orderli	oor) to 4 ine 3- adequanation / ex
e record a rating emely good). A so rmance 4 above comments box.	for each of core of 0- expected Please ad and guide	Performance sk component of t is not observed level, for the N id other relevan	the proced d, 1-is cons MBBS stan nt comme	dure observer sidered below dard. Suppor ents about thi	t ratings of : s doctor's st	le O(extre evel, 2 – b 1-2 with a rengths a	mely p orderli in expla nd wea	oor) to 4 ine 3- adequanation / exaknesses tha
e record a rating emely good). A so rmance 4 above e comments box. ort your ratings a	for each of core of 0- expected Please ad and guide	Performance sk component of t is not observed level, for the N id other relevan future learning	the proced d, 1-is cons MBBS stan nt comme	dure observed sidered below dard. Suppor ents about this	t ratings of : s doctor's st	le 0(extre evel, 2 –b 1-2 with a rengths a	mely p orderli in expla nd wea	oor) to 4 ine 3– adequ anation / exa aknesses tha
e record a rating emely good). A someone 4 above comments box. ort your ratings a 0-not observed  (1) Able to de implications of	for each of core of 0- expected. Please ad and guide	Performance sk component of t is not observed level, for the N id other releval future learning  Below expected leve (0 to 1)	the proced d, 1-is cons MBBS stan ant comme	dure observer sidered below dard. Suppor ents about thi Borderline (1 to 2)	expected in tratings of the ratings	le O(extre evel, 2 – b 1-2 with a rengths a rengths a	mely p orderli in expla nd wea	oor) to 4 ne 3- adequenation / examples that bove expected level (3 to 4)  CYCLE and 3x4=12
e record a rating emely good). A someone 4 above comments box. ort your ratings a 0-not observed  (1) Able to de implications of	for each of core of 0- expected. Please ad and guide	Performance sk component of t is not observed level, for the N id other relevan future learning Below expected leve (0 to 1)	the proced d, 1-is cons MBBS stan ant comme	dure observer sidered below dard. Suppor ents about thi Borderline (1 to 2)	expected in tratings of the ratings	le O(extre evel, 2 – b 1-2 with a rengths a rengths a	mely p orderli in expla nd wea	oor) to 4 ne 3- adequenation / examples that bove expected level (3 to 4)  CYCLE and 3x4=12
e record a rating emely good). A someone 4 above comments box. ort your ratings a 0-not observed  (1) Able to de implications of 1. What are the	for each of core of 0- expected. Please ad and guide	Performance sk component of t is not observed level, for the N id other relevan future learning Below expected leve (0 to 1)	the proced d, 1-is cons MBBS stan ant comme	dure observer sidered below dard. Suppor ents about this bout this bout this basic concept ste Separation	expected in tratings of the ratings	le O(extre evel, 2 – b 1-2 with a rengths a rengths a	mely p orderli in expla nd wea	oor) to 4 ine 3- adequanation / examples and the expected level (3 to 4)  CYCLE and 3x4=12
e record a rating emely good). A someone 4 above comments box. ort your ratings a 0-not observed  (1) Able to de implications of 1. What are the	for each of core of 0- expected. Please ad and guide	Performance sk component of t is not observed level, for the N id other relevan future learning Below expected leve (0 to 1)	the proced d, 1-is cons MBBS stan ant comme	dure observer sidered below dard. Suppor ents about this bout this bout this basic concept ste Separation	expected in tratings of the ratings	le O(extre evel, 2 – b 1-2 with a rengths a rengths a	mely p orderli in expla nd wea	oor) to 4 ine 3- adequanation / examples and the expected level (3 to 4)  CYCLE and 3x4=12
e record a rating emely good). A someone 4 above comments box. ort your ratings a 0-not observed  (1) Able to de implications of 1. What are the comments box.	for each of core of 0-expected. Please ad and guide emonstrativith RULE. The indication of the core of	Performance skeeperformance sk	the proced d, 1-is considered to the proced d, 1-is considered to the proced and the proced to the p	biscipline dure observer sidered below dard. Suppor ents about thi  Borderline (1 to 2) basic concept ste Separation s of it?	Add perfo	le 0{extre evel, 2 -b 1-2 with a rengths a rengths a indication	mely p orderli in expla nd wea	oor) to 4 ne 3- adequenation / examples that bove expected level (3 to 4)  CYCLE and 3x4=12
e record a rating emely good). A someone 4 above comments box. ort your ratings a 0-not observed  (1) Able to de implications of 1. What are the comments box.	for each of core of 0-expected. Please ad and guide emonstrativith RULE. The indication of the core of	Performance sk component of t is not observed level, for the N id other relevan future learning Below expected leve (0 to 1)	the proced d, 1-is considered to the proced d, 1-is considered to the proced and the proced to the p	biscipline dure observer sidered below dard. Suppor ents about thi  Borderline (1 to 2) basic concept ste Separation s of it?	Add perfo	le 0{extre evel, 2 -b 1-2 with a rengths a rengths a indication	mely p orderli in expla nd wea	oor) to 4 ine 3- adequanation / exaknesses tha bove expected level (3 to 4)

1. XDR TB patient is attending OP. You want to collect sputum from the patient and to do

a)What advice and precaution you will give to the patient? b)What you are supposed to collect?

Bronchoscopy for the patient.



b) Apart from Good	what cise you will	11 millers			
(III)Aseptic Technic	que				3x 4= 12 -
1. How and wh	ere will you dispos	se Sputum cups of	plastic container of	containing sputur	n?
		25			2.5
2. Why you wa	nt to use fresh hyp	pochlorite? How wi	ll you prepare 1%	hypo from 10%	hypo?
			25		. 25
<ol><li>Demonstrat</li></ol>	e six steps of hand	d washing techniqu	es.		
			3		(3)
Shoe cover, Hand dis		- 3		[3.21]	3.72
	A THE STATE OF THE				
(V) Demonstrates re	elevant indication	is, infrastructure, a	nd Technical skill	ls for the existing	4 = 12
Availability of 4 c solution. Availability	ontainers, Availab	ility of general was	te container, PPE	, Hand disinfection	c4 = 12
Availability of 4 c	ontainers, Availab	ility of general was	te container, PPE	, Hand disinfection	c4 = 12
Availability of 4 c	ontainers, Availab of 2% glutaraldeh	nility of general was hyde, 1% and 10%	te container, PPE hypochlorite solu	, Hand disinfection.	c4 = 12
Availability of 4 c solution. Availability	ontainers, Availab of 2% glutaraldeh	nility of general was hyde, 1% and 10%	te container, PPE hypochlorite solu	, Hand disinfection.	c4 = 12
1). Availability of 4 c solution. Availability  2). How and where v  3). Observes HIV BLG	ontainers, Availab of 2% glutaraldeh will you dispose br DOD Spilled on the taken? What is s	roken glass ampoul	te container, PPE hypochlorite solu e containing cyto	, Hand disinfection.  toxic drug?  a glass tube in tr	ansport.
1). Availability of 4 c solution. Availability  2). How and where v  3). Observes HIV BLG What action to be	ontainers, Availab of 2% glutaraldeh will you dispose br DOD Spilled on the taken? What is s	roken glass ampoul	te container, PPE hypochlorite solu e containing cyto	, Hand disinfection.  toxic drug?  a glass tube in tr	ansport.
1). Availability of 4 c solution. Availability  2). How and where v  3). Observes HIV BLC What action to be Corrective measures  (VI) Technical skill Cotton soaked with	ontainers, Available of 2% glutaraldeh will you dispose br DOD Spilled on the taken? What is s s you will take?	roken glass ampoul e floor due to accid pill kit? What are the	te container, PPE hypochlorite solu e containing cyto ental dropping of he risks associate	toxic drug?  a glass tube in trd? What prevent	3) ansport. ive and 2)5
1). Availability of 4 c solution. Availability  2). How and where v  3). Observes HIV BLO What action to be Corrective measures  (VI) Technical skill	ontainers, Available of 2% glutaraldeh  will you dispose br  DOD Spilled on the taken? What is s s you will take?  pus+ blood, Drink edia, Blood bag, Blood tablets, Tissue	roken glass ampoul  e floor due to accid pill kit? What are the	te container, PPE hypochlorite solu e containing cyto ental dropping of he risks associate  & S  , Blade, Blood sm aper, Ascetic fluid	, Hand disinfection.  toxic drug?  a glass tube in trd? What prevent  eared glass slides , Urobag ,	3) ansport. ive and 2)5



		A ser Veneza de la constante d	or Traction entres	erze Jenot decisio	n (n
VII) in necessary sits	uation seeking atti	onders/manpow	or pushing reside	3	3×4=32 - 1 8
and action Pla	nning I battle braken wit	h former all more			
Unknown action     What action		il ibilies an over			
	verybody alert				
3) To open th	e windows				
4) To lower th	ne temperature				
47 10 10 11 11					
			3		
2) 5 also ass	cury spillage on the	e ground. Ask th	em to tell 1) v	hat they have to	do like seek
the help of a	in attender 2 ) plui	nge into action 3	cordoning of	f the area.	
		2			
3) How to colle	ect the spill?				
			3		0
					- ( 3
(VIII)Post procedure	management pla	n Doffing.			1x4=4
(i) Removes glov	ves- vellow bin (ii)	Removes grown -	yellow bin (iii)	Remove head cap	- yellow bin
(il meninares Bio	collass bi	a Charking the a	for almostic	r Proper disposal o	of all the
find Romaves sho	se cover- vellow or	n. Checking the c	rea for cleanile	i i obe a selection	at and access
(iv) Removes sho	be cover- yellow bi	n. Checking the e	irea for cleanile		
(iv) Removes sho materials.	oe cover- yellow of	n. Checking the a	rea for cleanile	- Topos	
	se cover- yellow of	n. checking the a	3		0
materials.		n. Checking the a	3		2x 4 = 8
materials.	skills:		3		0
materials.	skills:		3		0
materials.	skills:		3		0
materials.  (IX) Communication  (1) Do you know wh	n skills: at is being done fo	or BMW in CBMV	VTF- how do th	ey dispose of.	2x 4 = 8
materials.	n skills: at is being done fo	or BMW in CBMV	VTF- how do th	ey dispose of.	2x 4 = 8
materials.  (IX) Communication  (1) Do you know wh	n skills: at is being done fo	or BMW in CBMV	VTF- how do th	ey dispose of.	2x 4 = 8
materials.  (IX) Communication  (1) Do you know wh	n skills: at is being done fo	or BMW in CBMV	VTF- how do th	ey dispose of.	2x 4 = 8
materials.  (IX) Communication (1) Do you know wh  (2) What are the var	askills: at is being done for rious symbols you	or BMW in CBMV	VTF- how do th	ey dispose of.	2x 4 = 8
materials.  (IX) Communication  (1) Do you know wh	askills: at is being done for rious symbols you	or BMW in CBMV	VTF- how do th	ey dispose of.	2x 4 = 8
(IX) Communication (1) Do you know wh (2) What are the var	rious symbols you	know off used in	VTF- how do the medical fieldof	ey dispose of.	2x 4 = 8
(IX) Communication (1) Do you know wh (2) What are the val (X) Consideration for	rious symbols you patient/ profess	know off used in sionalism.	VTF- how do the medical fieldof 2:75	ey dispose of.  BMW? Can you ex	2x 4 = 8  xplain 4 R s?
(IX) Communication (1) Do you know wh (2) What are the val (X) Consideration for	rious symbols you patient/ profess	know off used in sionalism.	VTF- how do the medical fieldof 2:75	ey dispose of.  BMW? Can you ex	2x 4 = 8  xplain 4 R s?
(IX) Communication (1) Do you know wh (2) What are the var	rious symbols you patient/ profess	know off used in sionalism.	VTF- how do the medical fieldof 2:75	ey dispose of.  BMW? Can you ex	2x 4 = 8  xplain 4 R s?
(IX) Communication (1) Do you know wh (2) What are the var (X) Consideration for What will be your re	rious symbols you patient/ profess	know off used in sionalism.	VTF- how do the medical fieldof 2:75	ey dispose of.  BMW? Can you ex	2x 4 = 8  xplain 4 R s?
(IX) Communication (1) Do you know wh (2) What are the var (X) Consideration for What will be your re 1) If you see the au Reaction.	ricus symbols you patient/ professeaction with the fo	know off used in sionalism.	vTF- how do the medical fieldof 2.75	ey dispose of.  BMW? Can you ex	2x 4 = 8  xplain 4 R s?  2 x 4 = 8
(IX) Communication (1) Do you know wh (2) What are the var (X) Consideration for What will be your re	ricus symbols you patient/ professeaction with the fo	know off used in sionalism.	vTF- how do the medical fieldof 2.75	ey dispose of.  BMW? Can you ex	2x 4 = 8  xplain 4 R s?  2 x 4 = 8

TOTAL MARKS OBTAINED BY THE CANDIDATE



(XI)Overall performance						
					-1	
Please make sure to pr	ovide verbal fe	edback to	the train o	once you	complete t	he
assessment. Please use this space to	give trainee sug	gestions a	bout areas	of strength	and areas	of
improvement.					Chan	Stt
Communication	Chilotoin	monte		-		A TI AL
Scepig its help a	nd prive	ntive			Tech.	+ t
Overall formind	ianty al	chech	1 Julian	Time taker	for	
Assessor name assessment	Signature	De	ite	20		
Dra Jayalahl	Mh	- •		av	100	
Examinees name assessment	Signature		- S-	Fime taker		
AAnIT	JA.H	Pre- U	intervent	n To	tal mo	ski - 69
1) Demonstration u	udentar	dung	(12)		7	
2) Obtains ethical			(12)	-	1.5	
3) asepti Techni	gnes		(12)	-	8	
4). Pre preparation			(4)	_	3.2	
5). Relevant Indi	catione		(12)		76	
6) Technical skill	L		(16)	_	15	
7) Seeks Relp			(12)	-	8	
87 Post procedure			(4)	_	3	
9) Com munication	skille		(8)		475	
10) Consideration	Profession	natism	(8)		5	
					9.05	11

### **Student Feedback Form**

**Course Name:** <u>STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI</u>

Subject Code: CD/ME03	
Name of Student:	Roll No.:
We are constantly looking to impr	ove our classes and deliver the best training to you. Your

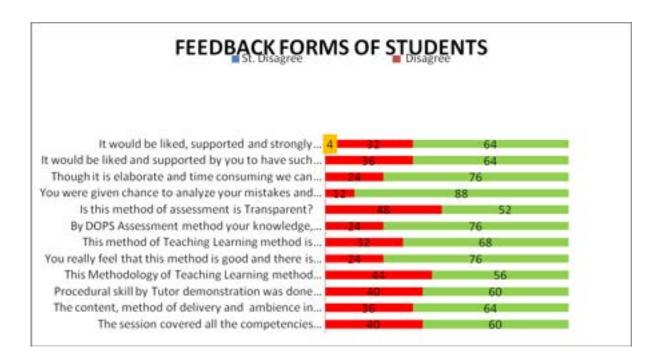
evaluations, comments and suggestions will help us to improve our performance

## Feedback Form FIVE POINT LIKERT SCALE

- 1. All the Sessions covered all the competencies like knowledge, analysis, training, practical Demonstration, Performance skill on your own and all other aspects related to overall global skills.
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 2. The content, method of delivery and ambience in the lecture session will help you to develop an overall performer?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 3. Procedural skill by Tutor demonstration was done with clarity and made you to understand thoroughly.
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 4. This Methodology of Teaching Learning method made you to understand all aspects of Technical skill thoroughly.
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 5. You really feel that this method is good and there is increase in the self-confidence?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree

- 6. This method of Teaching Learning method is comprehensive in developing all competencies.
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 7. By DOPS Assessment method your knowledge, performance general skills and overall ability were completely assessed?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 8. This method of assessment is Transparent?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 9. You were given chance to analyze your mistakes and rectify in future in the form of feedback from Examinee?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 10. Though it is elaborate and time consuming we can apply in future?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 11. It would be liked and supported by you to have such comprehensive competency testing assessment methods in future?
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
- 12. It would be liked, supported and strongly recommended by you if this type of TL Method and assessment method is implemented in future.
- 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree

Signature	of	the	CRRI
Date:			





## Feedback Form FIVE POINT LIKERT SCALE

 All the Sessions covered all the compatencies like knowledge, analysis, training, practical Demonstration, Performance skill on your own and all other aspects related to overall global skills. 1. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4 Agree, 5. Strongly Agree 2. The content, method of delivery and ambience in the lecture session will help you to develop an overall performer? 1. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree A. Agree, 5. Strongly Agree 3. Procedural skill by Tutor demonstration was done with clarity and made you to understand thoroughly. 1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree 4. This Methodology of Teaching Learning method made you to understand all aspects of Technical skill thoroughly. 1. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree A Agree, 5. Strongly Agree 5. You really feel that this method is good and there is increase in the self-confidence? 1. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4 Agree, 5. Strongly Agree This method of Teaching Learning method is comprehensive in developing all competencies. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree By DOPS Assessment method your knowledge, performance general skills and overall abilit were completely assessed?

1, Strongly Disagree, 2, Disagree, 3, Neither Agree nor Disagree, 4, Agree, 5

. 9. You were given chance to analyze your mistakes and rectify in future in the form of feedback from Examinee?  1. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree Agree, 5. Strongly Agree
1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree & Agree of Strongly have
10. Though it is elaborate and time consuming we can apply in future?
1. Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree A. Agree, 5. Strongly Agree
11. It would be liked and supported by you to have such comprehensive competency testing assessment methods in future?
1, Strongly Disagree, 2. Disagree, 3. Neither Agree nor Disagree, 4. Agree, 5. Strongly Agree
12. It would be liked, supported and strongly recommended by you if this type of TL Method a assessment method is implemented in future.
1, Strongly Disagree, 2. Disagree, 3 Neither Agree nor Disagree, 4. Agree, 5. Strongly Agre
1 miles of
Signature of the Student  Date: ab b 2020
Date: ab   b   2020

1, Strongly Disagree 2 Disagree 3 Neither Agree nor Disagree 4 Agree Strongly Agree

8. This method of assessment is Transparent?



## Sri Lakshmi Narayana Institute of Medical Sciences

Affiliated to Bharath Institute of Higher Education & Research
(Deemed to be University under section 3 of the UGC Act 1956)

## CERTIFICATE OF MERIT

This is to certify that AMARINATH. S has actively participated in the Value Added Course on STEPS frame work model as TL method in enhancing the procedural and performance skill in CRRI in BMWM held during May 2020 – June 2020 Organized by Sri Lakshmi Narayana Institute of Medical Sciences,

Pondicherry- 605 502, India.

Dr. G. Jayalakshmi

RESOURCE PERSON

Dr. G.Jayalakshmi
coordinator

Dr. G. JAYALAKSHMI, 8.5c., MBBS. DTCD., M.O. (MKH9)
DEAN-UNIVERSITY AFFAIRS
SRI LAKSHMI NARAYANA INSTITUTE OF VEDICAL REPEYES
DSUDU. KOODAPHOKANI. PUDUCHERRY 4606 5c.

Dr. G. JAYALAKSHMI, B.SC. MEBS SOTCO, M.D., (Micro).

DEAN - UNIVERSITY APPAIRS SCIENCES

SRI LAKSHIK MARAYANA INSTITUTE OF MEDICINES CIENCES
OSUDU. KOOOMPAKKAM, PUDUCHERRY, ADS 573