

MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY)
Mullana, Ambala, Haryana,133207
(Established under section 3 of the UGC Act, 1956
(NAAC Accredited Grade ‘A’)

**BEST PRACTICES AT MAHARISHI MARKANDESHWAR (DEEMED TO BE
UNIVERSITY), MULLANA, AMBALA**

1. Title of Best Practice: Mentoring System

2 Objectives of the Practice □The goal of the mentoring system is to establish a trusting relationship with accountability and responsibility between the mentor and mentee. □Provides counselling and guidance to the mentees regarding their career related queries and their personal problems and to overcome their grievances. □Appraise the mentees about the procedure, schemes, facilities scholarship/freeship available. □Motivate the mentees to take part in extra co-curricular activities.

3. The Context

Mentoring is an increasingly popular way of providing guidance and support to young people in need. Mentoring System in education is a personal developmental relationship in which an experienced or knowledgeable teacher (Mentor) counsel and guide the Students (Mentees) for their overall development. The counselling sessions establishes the mentor as a coach who provides advice to enhance the mentees professional performance and development.

4. The Practice

our mentoring program provides an opportunity to mentees to share their problems and also put their suggestions and to mentors to help the future professionals with proper guidance. Mentor counsels the mentees one to one and assist them with career exploration, project critiques, and skill building, based on mentees' needs and interests. The program begins each semester with a mentor-mentees allocation and counselling sessions which provides an opportunity to the students and mentor to meet and interact for the first time. During the semester, mentees share their academic as well as personal problems with their respective mentor from time-to-time. In mentoring program, each mentor also arranges counselling session for the corresponding mentees at least once in 15 days. Mentor also communicates with the parents/Guardians regarding the progress telephonically to make aware them about the performance of their wards once in a month. Mentor also despatched the progress reports to the parents of each mentee regarding one's attendance record and marks of sessional examination.

MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY)
Mullana, Ambala, Haryana,133207
(Established under section 3 of the UGC Act, 1956
(NAAC Accredited Grade ‘A’)

5. Evidence of Success □

- i) Enhances confidence and offers challenge to set higher goals. □
- ii) Individual recognition and encouragement. □
- iii) Access to a support system during critical stages of academic and career development.
- iv) Exposure to diverse perspectives and experiences.

6 Problems Encountered and Resources Required.

Whenever the mentor dispatched the progress report of their respective mentees, in case of remote areas, the correspondence with parents/guardians becomes difficult.

MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY)
Mullana, Ambala, Haryana,133207
(Established under section 3 of the UGC Act, 1956
(NAAC Accredited Grade ‘A’)

1. **Title of Best Practice:** Providing Affordable Quality Health Care and Community and Social Outreach Services

2. Objectives of the Practice:

- i) To provide best possible quality healthcare at affordable cost
- ii) To provide best community health services
- iii) To provide education and awareness on health issues to deprived poor local community.
- iv) To provide education and awareness on socially relevant issues
- v) To provide legal aid services

3 The Context: Maharishi Markandeshwar (Deemed to be University), Mullana is situated in remote rural location. The rural poor population in nearby area (20 km periphery) is dependent primarily on Government primary health care service centers. MM (DU) has a 940 bed hospital associated with Medical College (MMIMSR), a Dental College with dental hospital equipped with state of the art facilities, Two nursing colleges, one Pharmacy College and one physiotherapy college. The MM(DU) along with it's hospitals are serving the local population to meet the objectives mentioned above.

4. The Practice: The students, faculty of different constituent institutes/colleges of MM(DU) regularly participate in various community and social outreach activities like free medical camps, Free dental check up camps, health awareness camps, awareness about gender sensitization, gender equity, cleanliness, legal aid camps etc. The above practices are useful for local community on the one hand while on the other providing opportunity to students and faculty to connect with local population. It helps the student to understand the ground realities of healthcare and social status of community.

MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY)
Mullana, Ambala, Haryana,133207
(Established under section 3 of the UGC Act, 1956
(NAAC Accredited Grade ‘A’)

5. Evidence of Success: MM (DU) is adopting the methodologies for development of facilities and meeting needs of local social periphery. The university is located in rural location. A 940 bedded NABH accredited super specialty hospital is fully functional with state of the art modern facilities (like MRI, CT Scan, Advance surgeries etc.) to serve local health care needs. Providing healthcare services at nominal cost is the biggest strength of the University. Along with this through curricular, extracurricular and outreach activities (Rural posting of interns, organizing health camps for rural population, establishing PHCs in nearby villages like Mullana, Barara, organizing blood donation camps, social surveys, field projects, NSS activities etc) university is playing a major role in development socio-economical status of nearby villages (Mullana, Budhia, Sohana, Dosarka, Barara). A large number of local population was benefited by services offered by MM(DU).

4. Problems Encountered and Resources Required:

During efforts made by students and faculty to uplift the healthcare status of local community, it was observed that economic condition of poor villagers is not allowing to get optimal advantages of services offered by the MM(DU). Establishment of communication in local languages sometimes become a barrier in offering quality health care services. Resource limitation is observed to get broader coverage of community to provide benefits of services provided by the MM(DU).