



PROGRAMME REVIEW REPORT

Bachelor of Siddha Medicine and Surgery Degree Programme

Unit of Siddha Medicine

University of Jaffna

10th – 13th February 2020



Review Panel:

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Quality Assurance Council

University Grants Commission, Sri Lanka

University: University of Jaffna

Name of the Unit: Siddha Medicine

Program: Bachelor of Siddha Medicine and Surgery (BSMS)

Review Panel:

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Section 1. Brief Introduction to the Programme

1.1 Introduction of University of Jaffna

The University of Jaffna (UoJ) was founded in 1974 as the Jaffna Campus of the University of Sri Lanka (SL). It is the main centre of Higher Education in Northern SL. In 1979, it became an independent autonomous National University with the name UoJ and established with Faculties of Science and Humanities. However, UoJ has now developed to ten Faculties, two Units and a Vavuniya campus. Unit of Siddha Medicine (USM) is one of the units in the UoJ. The current undergraduate student population in UoJ is approximately 8,454.

The University's motto, vision and mission statements are as follows:

Motto: Discernment is wisdom

Vision: To be a leading Centre of excellence in teaching, learning, research and scholarship

Mission: To be a leading centre of academic excellence in producing intellectual, professionally competent and capable graduates by providing quality teaching, learning, and carrying out research to meet the emerging needs of the national and international community with special emphasis on the social, economic and cultural needs of Northern Sri Lanka.

1.2 Overview of BSMS study program

In 1929, the Unit of Siddha Medicine (USM) was first established with the Ayurveda and Unani Systems of Medicine at the College of Ayurvedic Medicine in Rajagiriya, and later it was upgraded as an institute affiliated to the University of Colombo (UoC) and named as Institute of Indigenous Medicine (IIM) in 1977. The first batch of Bachelor of Siddha Medicine and Surgery (BSMS) students was enrolled in 1983. The USM was moved to UoJ in 1984 and established as USM under the Faculty of Arts. The academic activities of the Department of Siddha Medicine (DSM) were commenced at Kaithady which is 11 km away from the UoJ. In 1993, the DSM was detached from the Faculty of Arts and established as a separate unit under the direct administration of the Vice Chancellor (VC), UoJ and named as Unit of Siddha Medicine (USM). The Head of the Unit is the administrative head and a Board of Management (BoM) was appointed by the Council of the UoJ to look after all the academic and administrative activities conducted at USM.

Academic activities of USM are carried out under five sub-units; Moolathathuvam, Gunapadam, Noinadal Chikitsai, Mahaliv Maruthuram and Virana Chikitsai.

Eighty-seven cadre positions are available for academic and non-academic staff members. Of the 87 cadre positions, although 27 were allocated for academic staff members, only 18 permanent academic staff (see Table 1) are currently available to conduct the BSMS study

program. Although more weightage of the BSMS degree program should be given to clinical subjects, only a few academic staff members have obtained MD degrees in relevant subject areas to teach clinical subjects. Other members of the academic staff have carried out research degrees, such as MPhil / PhD as their postgraduate qualification.

The student intake has been increased and although students are enrolled from all provinces of Sri Lanka, it was found that only Tamil speaking students follow this degree program, as the medium of instructions is in Tamil. Table 2 shows the number of students enrolled from 2013/2014 to 2017/2018. The student dropout rates have been calculated up to 2016; it was noticed that a significantly high percentage of students have dropped out of the degree program (Table 3).

The existing curriculum is not on par with the SLQF guidelines, but it has been revised recently and will be implemented in due course.

Table 1. List of academic staff members and their qualifications

Subunit	Name of the Lecturer	Qualifications
Moolathathuvam	Dr. (Ms) V.Sanmugaraja Dr.(Ms)R.Mirraaj Dr.(Ms)S.Sivagnanam	PhD in Siddha Medicine BSMS MPhil in Siddha Medicine (Results pending)
Gunapadam	Dr.(Mrs)V.Sathiyaseelan Dr.(Ms)N. Nithiyakumar Dr.(Ms)V. Milano Prasad Dr. T. Vijayakumar	MD(s) in Gunapadam (MateriaMedica) MD(s) in Gunapadam (MateriaMedica) Reading for MD(s) in Gunapadam (MateriaMedica) Reading for M.Phil in Siddha Medicine
Noinadalchkitsai	Dr.(Mrs) A.Sritharan Dr.(Ms) T. Kumutharanjan Dr.(Ms) K. Sounthararajan Dr.(Ms) R. Raveendran Dr.(Ms) S. Krishna	MD(s) in Maruthuvam (General Medicine) MD(s) in Maruthuvam (General Medicine) Reading for Ph.D in Siddha Medicine MD(s) in NoiNaadal (Siddha Pathology) Reading for MD(s) in NoiNaadal (Siddha Pathology) Reading for MD(s) in Maruthuvam (General Medicine)
KuzhanthaiandMahalir Maruthuvam	Dr. S. Sivashanmugarajah Dr.(Ms) S. Sivaram Dr.(Ms) N. Sivaram	MD(s) in KuzhanthaiMaruthuvam (Pediatrics) M.Phil in Siddha Medicine Reading for MD(s) in KuzhanthaiMaruthuvam (Pediatrics)
Viranachikitsai	Dr.(Mrs) S. Pancharajah Dr.(Mrs)T.Thileepan	M.Phil in Siddha Medicine, Reading for Ph.D in Biochemistry M.Phil in Siddha Medicine, Ph.D in Plant Science

	Dr.(Ms) M. N. Roshana	B.S.M.S
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Table 2. Student intake in last five academic years

Academic Year	Student intake
2017/2018	80
2016/2017	67
2015/2016	34
2014/2015	46
2013/2014	46

Table 3. Dropout Rates of Student in BSMS program in Unit of Siddha Medicine

Year of entry	Number enrolled	Year passed out	Number graduated	Dropout Rate (percentage)
2012	50	2016	24	52%
2011	48	2015	31	35%
2010	62	2014	39	37%
2009	68	2013	46	32%
2008	50	2013	29	42%

The USM is functioning directly under the Vice Chancellor of UoJ and the BoM makes recommendations to the VC on matters pertaining to academic, administration, rehabilitation, reconstruction, and student problems. The Head of the Unit has been given authority for all the administrative work with an Assistant Registrar. USM do not have its own strategic plan and action plan and uses the strategic plan and action plan prepared by UoJ. It was noticed that USM web sites are regularly maintained and updated.

Section 2. Review Team's Observation on SER

The Unit of Siddha Medicine in UoJ has appointed a team to write the SER. The process of SER writing for PR was carried out in the USM. Eight academic staff members have been appointed as the domain coordinators and eight sub committees have been appointed for eight criteria of the program review. It is commendable that student representatives were included in all the sub-committees. Regular meetings were conducted to discuss the SER writing and monthly progress was presented to the CQA meetings of each year. The SER writers have participated the workshops and the seminars organized by the UGC and USM to obtain necessary training and the knowledge on SER writing. It was noticed that young junior academic staff members were heavily involved in the process of writing the SER and during the site visit. Although the SER has been written in accordance with the guidelines provided in the program review manual, the documents collected for each domain as supporting evidence were not aligned/arranged properly and during the site visit the review team had to request the necessary evidence with the help of young staff members.

Section 3. A Brief Description of the Review Process

Pre-site Visit Evaluation

The SER prepared by the USM of UoJ was handed over by the QAC to individual members of the review panel well before the site visit. Members of the panel went through the report and the individual assessments were submitted to the QAC.

The review process was based on the Self Evaluation Report (SER) of the USM submitted for their study programme of BSMS.

In the process of the Programme Review, attention was given on the following eight aspects as described in the Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions:

1. Programme Management
2. Human and Physical Resources
3. Programme Design and Development
4. Course Module Design and Development
5. Teaching and Learning
6. Learning Environment, Student Support and Progression
7. Student Assessment and Awards
8. Innovative and Healthy Practices

The team first met at the pre-site visit meeting/workshop conducted by the QAC and discussed the individual scores. It was found that the grades awarded by individual reviewers were not same.

Site visit

The evaluation of eight aspects was analyzed carefully during the site visit, by the information gathered at different meetings held with academic staff members, non-academic staff members, students in all five levels, passed out students, wardens of girls and boys hostels, librarian and their staff, Directors CQA, IQAC, ELTU, SDC, CGU, physical education and GEE.

The program review panel commenced its site visit on 9th February 2020 with a pre-review meeting in the hotel at 7.00 pm and started the site visit on 10th February 2020 as scheduled. During the period of review, the review team first met the Director, CQA of the UoJ, Deans of all the faculties, Head of the Unit of Siddha Medicine and coordinator IQAC, as the Competent Authority (CA) had to participate in a meeting with His Excellency the President of Sri Lanka, on 10th February 2020. During the discussion with the Director, CQA it was emphasized that the university has a well-established Staff Development Centre (SDC), Career Guidance Unit (CGU), Centre for Information Technology (CIT), ELTU and

Gender Equity and Equality (GEE). One of the good practices maintained at UoJ is the establishment of a Students' Wellbeing Centre, which was established in 2018. The aims of the center are handling the wellbeing of students and staff. One of the academic staff members from the USM has also been appointed to the Wellbeing Centre.

On the same day, meetings were held with the administrative staff (UoJ), Directors of Centers/Units/Cells, academic staff of USM, members of the Board of Management and alumni of the BSMS programme.

On 11th February 2020, the first meeting was held with the Competent Authority UoJ, followed by meetings with technical officers, laboratory attendants and temporary staff. On the same day, site visits were made to female and male hostels, herbal garden, canteen, maintenance branch and laboratories.

On 12th February 2020, meetings were held with students of all levels, non-academic staff, and observation of facilities of USM at Health Centre for UMO (University of Medical Officer), the teaching hospital and the newly established pharmacy.

On 13th February 2020, a discussion of the review panel about the final report, and the debriefing session with key personnel were held.

The hospitality given by the Head of USM and all the staff members are appreciated during our stay in the USM and the members of the USM did not make any delays to conduct the review process. It should be mentioned that the commitment of young academic staff members of the USM, in maintaining transparency during the programme review and their immense cooperation to carry out the review process were highly appreciated by the review panel.

Section 4. Overview of the USM's Approach to Quality and Standards

The University of Jaffna has established an internal quality assurance unit (IQAU), currently known as the Center for Quality Assurance (CQA). It is provided with an office located in the main administrative building of the University. A senior academic member has been appointed as the Director of the CQA to direct the internal quality assurance programme within the university.

The Unit of Siddha Medicine has established an Internal Quality Assurance Cell (IQAC). A senior lecturer has been appointed to the post of Coordinator IQAC and a separate office with adequate space is given for IQAC. Although the files for each criterion were properly arranged in the IQAC office, the review team noticed that relevant documents were not in those files. The study programme offered by the USM is not regularly monitored by IQAC to enhance the quality of teaching, learning and assessment. However, the findings of the evaluation were not used to improve the course content, delivery and assessment process. It was observed that the UoJ and the Board of Management continuously discussed internal Quality Assurance matters and the academic staff of the USM is aware of the QA activities.

It was further observed that USM does not have a proper mechanism to obtain stakeholder views on the content of study programmes, programme delivery and quality of outputs. Therefore, it is also necessary to implement curriculum revisions with all stakeholder participation including students and employers and external experts. The USM organizes the orientation program for all new students and it was commendable that senior students give their fullest support to organize this event. It was noted that a separate student handbook for BSMS degree is not provided to the students during the orientation program. It was noted that although USM has increased the student intake in each academic year, lecture halls are insufficient to accommodate the students in the study programme now. The main university has all the facilities, but USM can not enjoy those facilities and on many occasions, it was revealed that the USM is neglected by the UoJ, especially when it comes to student matters. One of the main reasons for this could be that the USM is established as a Unit, therefore there is no financial autonomy and no proper budgetary allocation from UoJ to maintain academic and administrative work of the USM. Hence it is recommended to upgrade to a Faculty of Siddha Medicine in UoJ.

Section 5. Judgment on the Eight Criteria of Programme Review

The review team scrutinized the documentary evidence given in the SER along with the evidence gathered during the site visit. During scrutiny of the supporting evidence presented during the site visit, it was noted that many documents mentioned in the SER were not available at first, but the academic staff members were in a position to provide them upon request.

The section below provides an analysis of the strengths and weaknesses of the study programme reviewed with respect to each criterion and recommendations for enhancement of quality.

Criterion 1. Programme Management

❖ Strengths:

- University Strategic Plans and Action Plans were available for last five years and maintained, and implementation of the action plan is regularly monitored. USM activities were also stated under the UoJ.
- Board of Management (BOM) was established and minutes of the BOM were available.
- Students are given an opportunity to be represented in the BOM.
- The Student Handbook contains information about the USM, admission criteria, student disciplinary actions and student's charter etc.
- It was revealed that progress of the CQA is one of the items in the agenda of the Senate.
- The USM adopts a student-friendly administrative, academic and technical support system, which ensures a conducive and caring environment, and greater interaction among students and staff.
- Finance committee, external and internal audit reports were available
- Academic calendar is prepared by the UoJ and academic program of USM is available in the UoJ calendar.
- A well-developed informative, user friendly website with e-resources is available. The Curriculum was available on the website.
- CDC was available for the main university and CDC subcommittee was formed for USM to discuss curriculum revision of Siddha Medicine.
- GEE and anti-SGBV policy which were formulated by the main University, are used by USM.
- Senior students were helping new entrants and created friendly and hospitable environments. **Maintenance of zero tolerance to ragging is highly commendable.** It was noted that the academics and students have a good understanding among each other. Evidence was available to show that a strong counseling system has been initiated.

- Established a Wellbeing Centre at USM to address psychological issues pertaining to staff and students.
- Nationally and internationally funded research grants were awarded to academic staff members.
- Student evaluation and peer review forms were given to students.
- Work norms and duty lists were available for staff members.
- Student counseling programs were available.
- Medical center with necessary facilities is available.
- SCL has been incorporated into academic program to some extent.
- Evidence of student participation in decision-making process and it was revealed that they represent in eight subcommittees of USM.
- Academic staff participated in CPD program of SDC.

❖ **Weaknesses:**

- Head of the USM is not a member of the Senate and the USM is not given opportunity to represent in the Senate and USM can attend the Senate meeting only on invitation.
- Though strategic plans and action plans were prepared at UoJ, USM has not developed its own strategic plan and action plans for the last five years. Monitoring process was not implemented at USM.
- Although USM has established an active IQAC, monitoring and reviewing of the curriculum has not been carried out through it.
- The organogram of USM is incomplete: the presence of Registrar, Bursar, AR, DR etc. were not indicated.
- Even though most of the infrastructure facilities are available at UoJ, during our site visit, it was revealed that USM does not contain most of the essential facilities required to conduct the BSMS program successfully.
- Although student handbook was available, a prospectus was not prepared to distribute among the students.
- Course contents were not included in the Handbook and students were not informed the availability of curriculum on the website of the USM.
- Senate approved Examination By-laws with examination procedures were not available.
- Stakeholder consultation was not implemented.
- No evidence for student-staff liaison committees.
- Student mentors and mentoring mechanism have not been established.
- The library is not well organized, limited space is available, books and journals were not arranged properly and most of the books related to SM were outdated.
- MIS is not implemented
- ICT laboratory usage is not recorded.

- OBE-SCL is not properly implemented.
- Only two student counselors are available for 250 students.
- Peer review process was not done properly.
- Lack of a gymnasium and a playground at USM premises.
- Marshal service is not available at USM.
- MoUs with academic and research cooperation were not available.
- Student union is not formed in USM, only student association is available.
- Facilities for differently-abled students are not available.

Criterion 2. Human and Physical Resources

❖ Strengths:

- The cadre list was available for academic and non-academic staff members.
- Orientation program is available for new students. When the review team visited the USM, a well-structured orientation programme for new entrants was going on. The orientation programme covers all the aspects of the programme and rules and regulations.
- The Student Charter was distributed to students as they entered the unit.
- New pharmacy was opened in the hospital with adequate space and can be used for student activities.
- Machineries for drug productions are available.
- Three-storied new building has been constructed with laboratory and lecture halls.
- Space for laboratory has been allocated in the new building.
- Medicinal plant garden is available
- The USM possesses resources to organize multicultural programmes to promote social harmony, ethnic and cultural cohesion among students of diverse backgrounds.
- Majority of the permanent academic staff members have obtained their postgraduate qualifications.
- Council of the University of Jaffna has issued a letter stating academic staff should qualify with Doctor of Medicine (Siddha) for their confirmations and promotions.
- All the academic staff members have participated in the Staff Development Program conducted by the main University.
- Teacher observation proved that staff has obtained necessary training to develop teaching skills.
- Although USM does not have its own ELTU, it is able to obtain support from the main University.
- Purchase of new land to extend the facilities of USM.
- Medical doctor in the medical center is available at USM

❖ Weaknesses:

- The hospital should be converted into an actual teaching hospital with professorial units. The teaching hospital used for BSMS program is not developed as only a few patients were in the hospitals during our site visits. This is a main issue of the BSMS program, as students do not get adequate clinical training. There is need of an urgent curriculum revision, and improvement of the internship program of passed out students.
- The existing pharmacy is in poor condition and the machinery purchased for large scale production of drugs is underutilized. The review team suggests that underutilized equipment should be installed at newly established Pharmacy of the Siddha Teaching Hospital next to the USM and a MoU can be signed between the institute and the teaching hospital in order to train the students to produce Siddha medicines.
- State-of-the-art laboratories for practicals in Siddha medicine were not adequate.
- Human resource training was not given for all categories of non-academic staff and no HRD policy.
- Students were unaware of existing CGU and OBE-SCL at UoJ.
- Standard of ELTU courses offered at USM should be monitored and linked with the Siddha medical education.
- No documentary evidence for monitoring of staff performance.
- Mode of teaching methods and management in practical group session are not consistent.
- Basic needs for Lecture halls cum Examination halls were not available and at least one lecture hall should be improved to the standard of a Smart classroom.
- The number of students has been increased without increasing infrastructure facilities.
- Availability of ICT laboratory is limited and no free Wi-Fi connections are available for students. Strength of the Wi-Fi is not adequate.
- Inadequate facilities with necessary equipment in the physiology laboratory.
- Facilities in Anatomy laboratory have not been utilized for many years.
- Dissection of cadavers has not been practiced for last five years and now it has been made redundant.
- Under-developed library with limited number of recommended textbooks and insufficient number of copies of these textbooks in SM.
- Medium of instruction for BSMS is Tamil. Western medicine is also taught in Tamil; however e-books and textbooks available in the library for these subjects are in English medium only.
- Ola Leaf manuscripts were damaged by the insects and need an urgent attention to preserve these invaluable documents, as this is a part of the national heritage.
- Poor maintenance of lecture halls, washrooms in the USM.

- Poor canteen facilities with unhygienic conditions.
- Since water hardness of this area is extremely high, water filters should be provided for students in USM as well in hostel premises, in order to supply good quality pure drinking water.
- Students face many obstacles to travel to UoJdue to lack of transport facilities.
- Lack of sport facilities and a playground at USM.
- Study areas or study rooms were not available for students.
- Medicinal garden is not maintained and should be designed to suit with the BSMS study program.
- Green house in the Medicinal Garden is poorly maintained.
- Sewage treatment plant should be installed and existing method should be discontinued.

Criterion 3. Programme Design and Development

❖ Strengths:

- The USM has established and operates ICT-based platform to facilitate multi-mode delivery and student-centered learning, use of OER to complement undergraduate teaching and training. For instance, academic staff use ICT-based platforms such as PowerPoint presentations and YouTube videos in order to communicate and share teaching materials with BSMS students.
- CDC subcommittee has been appointed.
- Mission, objectives and goals are available for USM
- University Calendar is available.
- New curriculum is prepared according to SLQF 6 guidelines.
- Attempt to introduce blue printing to the new curriculum
- Field visits have been organized in indigenous medicine related workplaces

❖ Weaknesses:

- CDC subcommittee composition was not given and monitoring system of CDC was done in an agreed cycle at USM.
- National needs, global trends and current knowledge were not taken into consideration in the BSMS study program.
- No surgery unit in the hospital even though it is an important portion of the study program.
- A Subject Benchmark Statement (SBS) is not established for Indigenous Medicine and therefore curriculum alignment with SBS is not possible.
- Programmedesign does not comply with the Sri Lanka Qualification Framework (SLQF) and is not guided by SBS.

- Optional / elective courses are not offered in the curriculum. Elective/optional courses should be introduced to strengthen interdisciplinary subjects. Programme design is not flexible in terms of entry and exit pathways, including fall back options.
- The review team could not observe good practices such as practicing outcome-based education strategies, recognition of excellence in teaching or academic performance at USM. Review team suggests establishing such good practices and encourages both the students and teachers to excel in their academic activities.
- Work based training or industrial training were not implemented.
- The programme ILOs are not aligned with the graduate profile of Siddha Medicine.
- Further, students are provided with field trips to enhance student interactions with the indigenous medicine-related entrepreneurs and industry, but no proper industrial or work-based training is provided and no MoUs signed with the industry to initiate collaborative activities.

Criterion 4. Course / Module Design and Development

❖ Strengths

- Curriculum revision meetings were held.
- It was noticed that timetables of the academic year are provided before the commencement of the lectures of the course unit.
- Students are encouraged to do mini-group-research or publish at international conferences.
- Graduate profile was available
- Teaching and learning strategies were available for clinical and Para-clinical work
- Availability of program specification, course specification and a student handbook
- Dropout rates were available for last five years.

❖ Weaknesses:

- It was noticed that although the existing curriculum was not revised for last 10 years, curriculum revision has now been initiated. However revisiting of the proposed curriculum is needed, as stakeholder participation was not considered during the preparation of this curriculum. The feedback of students, alumni, external subject experts and other relevant stakeholders should be taken into consideration in the process of revision of the curriculum.
- No course design policy and procedures at USM. The Bachelor of Siddha Medicine and Surgery (BSMS) program is not aligned with SLQF Level 6. This is one of the main deficiencies identified by the review panel. Even though there was a curriculum development committee (CDC), the monitoring and reviewing process in relation to curriculum was not done regularly. It was noticed that no mechanism has been

developed to assess the existing curriculum and the curriculum should be evaluated in a regular manner in the future.

- Student evaluations and peer review reports are obtained regularly, but no follow up actions are taken after doing lectures or tutorials. However, during discussions with them, the students complained that teaching is not according to the timetables. The lesson plans are not available for most of the subjects.
- Notional hours were not properly allocated for each course unit as described in SLQF level 6.
- No regular training programs organized for designing and development of Siddha Medicine education.
- Minimum of six credits research project was not incorporated in the curriculum and it was revealed that individual students are not given a research project with a weightage equivalent to six credits to par with SLQF level 6.
- There was no evidence of adequate industrial training or work-based learning to obtain exposure in Siddha Medicine. Although one or two industrial visits are arranged to obtain exposure on the Siddha Medicine industry, feedback on these visits were not obtained after each visit.
- The USM has no policy and procedures for credit transfer system among units /faculties and universities in conformity with institutional policies, to allow its students to transfer the earned credit among the faculties and universities. Further the USM has not initiated any activities to raise generated funds.

Criterion 5. Teaching and Learning

❖ Strengths:

- Availability of student handbook, strategic plans and action plans.
- Student Handbook is prepared in both English and Tamil languages.
- Timetables are provided before commencement of the lectures of the course unit.
- Students are encouraged to do mini- group-research or published the results in an international conference.
- Student feedback and peer review reports were obtained regularly.
- Tutorial classes were conducted for students
- Well established IQAC, which is maintained very well.

❖ Weaknesses:

- The handbook prepared only in Tamil medium is distributed to students.
- Teaching is not according to the timetables.
- Monitoring of the strategic plan and action plan were not maintained properly.
- No follow up action taken after doing lectures or tutorials
- No facilities provided for students with special needs (differently abled students)

- No constructive alignment with teaching learning strategies and ILOs
- No teacher directed and student-centered methodologies
- No LMS, and student feedback related to blended learning
- No evidence for creative / innovative work
- No evidence for fair distribution of workload among the academic staff members.
- No internalization of workload policy
- No system for teacher performance appreciation or award scheme
- No senate approved indicators for evaluation scheme for teachers
- Monitoring / reviewing of the curriculum was not carried out through the IQAC

Criterion 6. Learning Environment, Student Support and Progression

❖ Strengths:

- Handbook is prepared and distributed among students
- Distribution of Student Charter to students as they enter to the university.
- A conducive learning environment between staff and students
- Availability of gender equity and equality related policy and implementation mechanism.
- Well-structured Orientation program has been introduced for first year students.
- Availability of student soft skills development programs such as Yoga, cultural festivals, sport activities.
- Student counseling system has been initiated.
- Alumni association was established recently.
- Space has been allocated in the newly constructed building for a new library
- New books on Siddha medicine have been purchased and e-books on Siddha medicine available

❖ Weaknesses:

- Inadequate industrial training / work-based learning to obtain industrial exposure in Siddha medicine.
- No student mentoring system has been introduced.
- SDC training program was not properly oriented to develop Siddha medicine and specialized learning resources.
- Library and information resources are not integrated into student learning process.
- Limited activities of CGU were organized for students through the main university.
- Coordinators for CGU / GEE have not been appointed from USM
- Graduation rate of students is not regularly monitored.
- Skills of SCL should be improved.
- Non-availability of grievance committee in the USM for the benefit of students.
- Student satisfaction survey reports were not available.

- Examination by-laws were not available and urgent action should be taken to prepare examination by-laws.
- The ICT facilities available at the USM are limited and Wi-Fi facilities are not properly functioning.
- No MIS, and no proper examination assessment system. The LMS was not incorporated into the study programme yet and not used for teaching and learning at USM.
- Most of the academic staff do not use LMS facilities and coverage of Wi-Fi facilities are very poor. Therefore, workshops / seminars should be organized on LMS to encourage and educate the staff. The review panel found no evidence for fair distribution of workload among the academic staff members; there was no internalization of the policy on workloads.
- Student-centred teaching and outcome-based education practices are also minimally observed.
- No evidence for monitoring and evaluation of student feedback
- Attention is not given for special needs of students and an elevator has not been installed in the new building.
- Existing library, physiology laboratory, and anatomy laboratory are all in poor condition.
- Herbal garden was not maintained / designed properly.
- Equipment purchased for laboratories / pharmacy were underutilized.
- Stakeholder feedback on curriculum designing was not taken from Alumni association and a big communication gap between the Alumni association of USM and academic staff of USM.

Criterion 7. Student Assessment and Awards

❖ Strengths:

- Initiation of different evaluation strategies for continuous assessments.
- The end course examination scheduled with a list of examiners is prepared by the staff of USM and placed before the Senate for its approval, with the recommendation of the BoM to conduct the examination. A pre-results board is conducted by the Chairman and two external senate nominees of the BoM, Head /USM and examiners of the particular subjects to check the final marks with grading and hand it over to the DR/Examination, who arranges the final results board. The Vice-Chancellor, University of Jaffna (UoJ) releases the results in stipulated period. The approval branch issues the pass list to the USM and also issues detailed degree certificates for those who are eligible for graduation.
- Availability of internal and external academic staff members for moderation and second marking of the question papers.

- Results are released within the stipulated time period.
- Submission of moderator / second marking reports

❖ **Weaknesses:**

- The assessment procedures and the weightage assigned for different components were not given in the handbook.
- The BSMS degree awarded in the study programme does not comply with SLQF credit requirement.
- Assessment strategies are not aligned with ILOs.
- No examination procedures approved by the Senate.
- No constructive alignment with teaching-learning strategies and ILOs. Examination by-laws were not available and urgent corrective action should be taken in this regard. No evidence of policies and regulations in the USM governing the appointment of external examiners with clear TORs. After each examination, the results were not analyzed and this feedback should be conveyed to the relevant examiners in the USM to improve the assessment strategy.
- Transcript does not contain all the necessary information such as all the courses followed, grades obtained, percentage marks obtained and the class obtained etc. A complete transcript indicating all the courses followed, grades obtained, the percentage marks obtained, and the class obtained, should be given to all students after graduation.
- Course content has not been monitored / revised since 2008.
- Criteria for evaluation of research project was not given to the students
- Awarding classes in BSMS degree program should be aligned with SLQF 6 and are not consistent with the standard system introduced by the QAC.
- Marking of examination answer scripts are not transparent and students are not informed the grades at the end of each course units.
- Rubric for assessment practical / theory / continuous assessments components were not given.
- Teaching excellence awards were not available at USM. The USM does not implement a performance appraisal system with appraisal outcomes for promotions of the staff.
- After each examination, the results were not analyzed and this feedback was not conveyed to the relevant examiners in the USM to improve the assessment strategy.
- No facilities are provided for students with special needs (differently abled students). Attention is needed for considering difficulties/ necessities of differently abled students in designing and developing courses/ modules.

Criterion 8. Innovative and Healthy Practices

❖ Strengths:

- It was revealed that due recognition has been given for the appreciation of the innovative activities of the employers at UoJ. Vice-Chancellors' Awards have been introduced for academic staff members who have publications in peer review journals and for best researcher in the university. The University organizes an annual research symposium to allow all the academic staff members, postgraduate and undergraduate students to present their research findings.
- Initiatives were taken to organize an annual research symposium, annual exhibition, and medical camps to disseminate undergraduate research findings.
- Publication of biannual newsletter
- Organization of annual / international Yoga day
- National / International Awards have been won by academic staff members
- Opportunity given for students to participate in multicultural events organized by the University of Jaffna.
- Students are required to follow one year of internship in indigenous hospitals
- Availability of dedicated academic staff members
- Encourage of staff and student to use OER.

❖ Weaknesses:

- Not using LMS to upload lesson plans, lecture materials, tutorials etc.
- No policy in the USM to encourage the staff and students to use OBE
- No credit transfer system implemented to the study programme.
- No interfaculty collaboration developed between USM and other faculties
- No exit or fall-back programmes for students who are unable to complete the study programme successfully.
- No MoUs developed between USM and other research institute / indigenous drug industries / other indigenous entrepreneurs.
- The internship is not a part of the curriculum and is not comparable to the Indian Universities where they teach Siddha Medicine. Further students do not obtain adequate clinical exposure during five year study period.
- No activities to raise income generated funds.
- Undergraduate students are not given research projects as a compulsory course unit.
- Academic staff should be encouraged to conduct postgraduate degrees in MD (Siddha) in order to obtain necessary clinical exposure to teach BSMS study program.

Section 6. Grading of Overall Performance of the Programme

The table below (Table 6.1) presents the review team’s judgment of the level of attainment of quality under each criterion by the BSMS in the UoJ. Each standard was evaluated based on evidence provided and a score was assigned from 0 to 3 (0=inadequate, 1=barely adequate, 2=adequate, 3=good). The raw criterion-wise score was estimated based on the scoring system given in the PR manual, and the raw score of each criterion was converted to the actual criterion-wise score using the formula given in Chapter 3 of the PR Manual. The sum of the actual criterion-wise scores was taken as the overall score of the Degree Programme.

Table 6.1.Final Evaluation

No	Criterion	Weight	Weighted minimum score (WMS)*	Actual criterion-wise score	Above WMS Y/N
01	Programme Management	150	75	107	Yes
02	Human and Physical Resources	100	50	72	Yes
03	Programme Design and Development	150	75	85	Yes
04	Course / Module Design and Development	150	75	95	Yes
05	Teaching and Learning	150	75	87	Yes
06	Learning Environment, Student Support and Progression	100	50	63	Yes
07	Student Assessment and Awards	150	75	82	Yes
08	Innovative and Healthy Practices	50	25	20	Yes
	Total on a thousand scale			612	
	%			61.2	
	Final Grade			C	Satisfactory

Section 7. Commendations and Recommendations

The following commendations and recommendations are made with regard to the BSMS degree programme offered by the Unit of Siddha Medicine of the University of Jaffna.

7.1 Commendations

1. Availability of CQA and IQAC and their offices
2. Establishment of a Well-being Centre
3. Maintenance of zero tolerance to ragging is highly commendable.
4. Well-developed informative, user friendly website with e-resources.
5. The USM organizes international symposia that allows the students / academic staff in the study programme to present their innovative research findings

7.2 Recommendations

1. Upgrade the unit to a Faculty of Siddha Medicine in University of Jaffna.
2. Immediate action should be taken to revise the curriculum according to the SLFQ level 6 and obtain the council approval through the proper channel as this is one of the main deficiencies identified by the review panel.
3. Obtain internal and external stakeholder feedback at all levels to evaluate curriculum.
4. Introduce elective / optional course units from interdisciplinary subjects.
5. Introduce fall-back options / exit points in the BSMS program.
6. Six-credit research project should be implemented immediately.
7. Facilities for differently-abled students should be available, including construction of an elevator in the new building.
8. Conduct workshops / seminars on LMS for academic staff members
9. Availability of UMS owned transport facilities for student's welfare matters.
10. Appointments of coordinators for CGU and GEE from USM.
11. Improve adequate industrial trainings or work-based learning to obtain exposure in Siddha medicine.
12. Take immediate action to protect the Siddha Ola leaf manuscripts.
13. Re-establish the anatomy laboratory and introduce practicals with cadavers.
14. Sign MoU between the teaching hospital and the USM and strengthen the Siddha medicine in the teaching hospital in order to attract more patients.
15. Regularization of functions of the canteen.
16. Introduce student-mentoring system.
17. Examination by-laws should be introduced and obtained the council approval.
18. Recommend taking external and internal stakeholder feedback for revision of curriculum.

Section 8. Summary

The site visit for review of the BSMS program offered by the Unit of Siddha Medicine, University of Jaffna was carried out from 10th to 13th February 2020. The review panel comprised of Prof. Priyani A Paranagama (chairperson), Director, IIM, University of Colombo, Prof. Chandraguptha Thenuwara, Faculty of Visual Arts, University of the Visual and Performing Arts, Dr. D D A N Perera, Faculty of Livestock, Fisheries and Nutrition, Wayamba University of Sri Lanka, and Dr. S Arasaretnam, Department of Chemistry, Eastern University of Sri Lanka.

Only 27 academic cadre positions are available and only 18 of these are filled. All the staff members have successfully completed the Staff Development Programme (SDP) offered from the University Staff Development Centre (SDC) as the university has well established SDC. Further, it was noted that non-academic staff members were not given opportunity to obtain necessary skill training from relevant sections.

The Student handbooks prepared in Tamil Language was distributed among students and a few copies of English translation of the handbook have been kept in the library and uploaded to the website although it was not communicated to the students. The medium of instruction of the BSMS program is Tamil and this will discourage those who are not fluent in Tamil to follow BSMS degree program. This could affect the social harmony among different ethnic groups. Prospectus for USM has not been prepared for last five years. Detailed syllabus was not distributed among students. The evaluation procedures and the weightage assigned for different components were not given in the handbook. The policy on examination procedures, rules and regulations has not been properly formulated. Criteria for evaluation of research projects were not given to the students before the evaluation. Marking of answer scripts are not transparent (i.e. blind marking and system) and students are not informed the grades at the end of each course units. Rubric for assessment practical / theory / continuous assessments components were not given.

The main objective of the degree program is to produce competent skilled BSMS graduates to treat Siddha medicine. The student intake has been increased from 46 to 80 over the last five years without considering infrastructure facilities or conducting a needs analysis. The review panel found basic facilities such as examination halls, lecture halls, laboratories, teaching hospital needed were lacking in USM. The curriculum should be revised according to the SLQF Level 6 and we found these students are not given the opportunity to carry out a 6-credit research project. The revisions of curriculum should be done according to the SLQF, OBE and SCL requirement. A clear mapping of course/module outcomes (ILOs) to the PLOs is needed. Although the graduate profile was available, it was not aligned with the SLQF and ILOs of the course units. No course evaluation reports over 3 years.

The review team found that the University and the unit have internalized the policies on gender equity and equality established implementation mechanism. Although the main

university has a well-established CGU, limited activities of CGU were organized for USM students through the main university. Career guidance activities have to be improved. Unfortunately, up to date, coordinators for CGU and GEE have not been appointed from USM. The review team found that an alumni association was established recently, and its constitution is ready for adoption. Alumni can play a significant role to develop the USM. However, it was revealed that blended learning, SCL and LMS were not properly implemented for the study program. The USM has not published a manual of examination procedures, which should include examination by-laws. Therefore, the evaluation methods of examinations are not transparent and the students in the study program expressed their displeasure on this.

The orientation programme of a new intake of students is organized for 2 weeks and the student handbook and the student Charter are given for all the new students during the orientation programme. The curriculum of the study programme was not revised for last 10 years according to the SLQF. There is no SBS for Siddha Medicine and it should be stressed at the Standing Committee of UGC to prepare a SBS for Indigenous Medicine. A one-year internship programme has been introduced for the final year students as in other indigenous medicine degrees. However, it was noted that the internship is not included in the BSMS degree program.

Most of the books and journals in the existing library are not related to Siddha Medicine. Recently, new books on Siddha Medicine have been purchased from India, but they are still going through the accession process in the main library. The review team found that Library and information resources are not properly integrated into the student learning process. But there were e-books on Siddha available and they were uploaded to the website. Ola leaf manuscripts available in the main University were not protected properly and it was observed that insects have damaged many of them. Since this is a national heritage, immediate action should be taken to protect the Siddha Ola leaf manuscripts.

It was observed that laboratories were not maintained properly. Equipment purchased for laboratories are underutilized as they are more suitable for large-scale production of drugs / medicine. The anatomy laboratory has been not used for many years although practicals on anatomy are essential for BSMS curriculum and included in the curriculum. It was revealed that students are not given opportunity to carry out practical classes using cadavers. Even though facilities needed for storage of cadavers are available, that laboratory had not been maintained properly. Since this is an essential practical section of BSMS study program, the review team suggests renovation of the anatomy laboratory and re-establishment of the practicals related to anatomy using cadavers immediately.

During the site visit, it was evident that adequate space has been allocated in the newly constructed building for a new library as well as laboratories. But no attention is given for special needs of students and no elevator has been installed in the new building. The herbal garden was not maintained and designed properly. Review team suggests proper advice and

guidance should be sought from the National Botanical Gardens for further improvement of the herbal garden.

The USM does not use a defined set of indicators of excellence in teaching to evaluate performance of teachers, identify champions of teaching excellence, and promote adoption of excellent practices. Although student feedback on teaching was gathered, there was no student feedback related to blended learning, nor was there evidence for monitoring and evaluation of this feedback. Continuous assessment is one of the components in each examination and it was revealed that the methods used for assessment of the continuous assessments are not clearly laid out in the student manual / the website.

The review team appreciates the establishment of a Well-being Centre. It was noticed as a good practice we observed during the program review. Further the students have created a friendly environment with administrative and academic staff members in the USM. The alumni association has been initiated for the study programme recently but is not well established yet.

The graduation rate of students was not regularly monitored, and the review team noted that in 2016 graduation rate was only 52%, indicating significantly high dropout rate. USM has not conducted student satisfaction surveys.

Co-curricular activities are in place. Soft skills development programs of students were available. Students have been engaged in co-curricular activities such as yoga, cultural festivals, sports and they brought credit to the unit in the form of awards in national competitions. At discussions held with students, they complained about the lack of a playground located close to the USM as well as gymnasium as they have to travel to UoJ for which they depend on transport facilities provided from UoJ. According to the staff and the students, transport facilities provided by UoJ is not reliable. Therefore, an efficient system needs to be established for the optimum use of facilities available in the main university until their own facilities improve. Since there are major drawbacks in providing transport facilities, USM needs its own transport facilities to enjoy the facilities available at the main university.

There were no Standard Operation Procedures (SOP) and the approval process was not clearly defined. The Council of UoJ has issued a letter stating all academic staff members who are in their probationary period should carry out a MD degree in Siddha in order to obtain confirmation. The review team highly appreciated this letter, as training in both research and clinical work is essential for teaching BSMS program. Further non-academic staff training in the area was minimal and none of them were given any formal laboratory training or HR training. Non-availability of the grievance committee at the USM for the benefit of students is a major drawback.

Annexure 1. Schedule for site visit

Day 1. 10th February 2020

Time	Activity	Participants
8.00 AM – 8.30 AM	Meeting with the Director	Director, IQAU Coordinator, Chair SER Preparation
8.30 AM – 9.00 AM	Meeting with the Vice Chancellor	Vice Chancellor, Director, IQAU Coordinator, Chair SER Preparation
9.00 AM – 9.30 AM	Meeting with the IQAU Coordinator	IQAU Coordinator
9.45 AM – 10.45 AM	Presentation about the Unit of Siddha Medicine and respective study program Working Tea	Director, IQAU Coordinator, All HODs of the Institute, Chair and SER Team, Study program coordinators
10:45 AM -11:45 AM	Meeting with academic staff in permanent cadre (excluding HODs)	Teaching panel of respective program (excluding HODs)
11:45 AM -12:15 PM	Meeting with temporary academic staff	Temporary Demonstrators, Tutors etc.
12:15 PM -1:00 PM	Meeting with Administrative Staff	Deputy Registrar, Deputy Bursar, SARs, SABs, ARs
1:00 PM -1:30 PM	Lunch	
1:30 PM-2:30 PM	Meeting with Student Counselors	Senior Student Counselors and student counselors
2:30 PM -4:00 PM	Observing, Physical Facilities Tea	Review Team/ Facilitators
4.00 pm – 6.00 pm	Observing Documentation	Review Team

Day 2.11th February 2020

Time	Activity	Participants
8.30 AM – 900 AM	Hospital visits	Review Team/ Facilitators
9.30 AM – 10.30 AM	Observing teaching sessions and facilities	Review Team
10.30 AM – 11.00 AM	Meeting with Librarian/Senior Assistant Librarians [Library Visit]	Librarian/Senior Assistant Librarian/ Library Staff
11.00 AM -11:30 AM	Meeting with Technical Officers	All Technical officers
11:30 AM -12:30 AM	Observing Documentation	Review Team
12:30 PM -1:30 PM	Lunch	
1:30 PM -4:00 PM	Observing Documentation Working Tea	Review Team
4.00 PM – 5.00 PM	Open hour for any stakeholder to meet review panel	Review Team

Day 3. 12th February 2020

Time	Activity	Participants
8.30 AM – 9.30 AM	Observing Documentation	Review Team
9.30 AM – 10.30 AM	Meeting with Students Working Tea	Group of students (30) representative of gender, ethnicity, level of study programs
10.30 AM – 11.30AM	Meeting of support for student welfare	Director Physical Education, Medical Officer
11:30 PM -12:00 Noon	Meeting on research activities	Coordinator Research committee, members of research committee
12:00 PM -12:30 PM	Meeting with a cross section of academic support staff and non-academic staff	Representative group of academic support staff and non-academic staff(10)

12:30 PM -1:15 PM	Lunch	
1:15 PM -2:15 PM	Meeting with external stakeholders and alumni members Working Tea	Group of external stakeholders (about 20 employers, industry, private sector, representatives) and Alumni
2:15 PM -4:00 PM	Visiting hostels	Review Team
4.00 PM – 4.30 PM	Open for any stakeholder to meet Review Team	Review Team
4.30 pm – 6.00 pm	Observing Documentation	Review Team

Day 4. 13th February 2020

Time	Activity	Participants
8.30 AM – 900 AM	Meeting with mentors and Career Guidance staff	Coordinator mentoring and mentors, and Director – Career Guidance
9.00 AM – 9.30 AM	English Teaching Unit	Members of English teaching unit
9.30 AM – 12.30 AM	Observing Documentation Working Tea	Review Team
12:30 PM -1:30 PM	Lunch	
1:30 PM -2:00 PM	Private meeting of reviewers and report writing Working Tea	Review Team
2:00 PM -3:00 PM	Closing meeting for debriefing	Vice Chancellor, Director,, HODs, IQAUCoordinator, Chair & the SER Team