PROGRAMME REVIEW REPORT

Bachelor of Ayurveda Medicine and Surgery

Gampaha Wickramarachchi Ayurveda Institute

University of Kelaniya

11th to 14th February 2020

Review Panel: **Prof. S. R. Weerakoon (Chairperson)**

Prof. J. M. C. K. Jayawarana

Dr. M. C. M. Maheez

Prof. P. I. N. Fernando

Quality Assurance Council

University Grants Commission, Sri Lanka

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University: University of Kelaniya

Faculty/Institute: Gampaha Wickramarachchi Ayurveda Institute

Programme: Bachelor of Ayurveda Medicine and Surgery

Review Panel:

Name	Signature
Prof. S. R. Weerasinaon	
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Prof. P. I. N. Fernando	

Date: 01 / 07 / 2024

Section 1: Introduction to the Study Programme

Gampaha Wickramarachchi Ayurveda Institute (GWAI) of University of Kelaniya, was established by the Government Notification of Universities Act No. 16 of 1978 with effect from 1st March, 1995, as an autonomous institute to set patterns in Undergraduate and Postgraduate Ayurveda Medical Education in all its branches so as to demonstrate a high standard of Ayurveda Education.

In 1929 Gampaha Wickramarachchi Sidhayurveda Medical College was established by a renowned patriot traditional Ayurveda Physician, Late Ayurveda Chakrawarti Pandit G.P. Wickramarachchi with the aims of improving Ayurveda Medicine and provide free treatment. By recognizing the emerging trends in Ayurveda Medicine and its tremendous contribution to national health sector, the Vidyalaya was declared as state recognized institute in 1951, making its diploma holders eligible to serve in state sector Ayurveda Hospitals. In 1982 Vidyalaya was upgraded to Gampaha Wickramarachchi Ayurveda Institute under the Ministry of Indigenous Medicine by the parliamentary act No 30, in 1982. In 1995, it was uplifted to the status of a University Institute.

The institute has five academic departments. These include;
1. Department of Ayurveda Basic Principles
2. Department of Dravyaguna
3. Department of Kaumarabhrithya & Stree Roga
4. Department of Chikitsa
5. Department of Shalya Shalakya

The Degree of Bachelor of Ayurveda and Surgery (BAMS) programme has been in existence since 1998. It is a professional degree in the field of Ayurveda Medicine developed as per guidelines declared by World Health Organization and University Grants Commission of Sri Lanka. The Degree programme is a fulltime course consisting of pre-clinical, para-clinical and clinical phases which is conducted over a five year period. An additional one-year internship training in state Ayurveda Hospitals is mandatory for registration at the Ayurveda Medical Council. Since the inception of BAMS programme, GWAI has been constantly upgrading the course content in line with the changing needs. Many of these changes which have been taken place for the past years have been reflected in the present BAMS programme curriculum.

The number of students enrolled for BAMS programme for the last five consecutive academic years indicate some increase in the academic years 2016/2017 and 2017/2018 (Table 1.1). Table 1.2 indicates the number of students continuing undergraduate studies at present in GWAI. As per available data, there is an approximate dropout rate of 10% of enrolled students over the first academic year, without completing the BAMS degree.

Table 1.1. Number of students enrolled at GWAI in the last five academic years

Academic Year	Number of Students
2017/2018	111
2016/2017	111
2015/2016	78
2014/2015	79
2013/2014	90

Table 1.2. Number of students in GWAI at present

Academic Year	Number of Students
2017/2018	101
2016/2017	105
2015/2016	68
2014/2015	66
2013/2014	85

Institute has a dedicated and qualified academic staff, in which there are 34 permanent academic staff members (Table 1.3). The qualifications of the permanent academic staff includes 10 PhDs, 11 MDs (Ayu), 06 MPhils, and 05 MScs. There are no filled professor cadres in GWAI.

Table 1.3. Number of Academic staff as at 31st December 2018

Designation	Number
Senior Lecturer Gr. I	07
Senior Lecturer Gr. II	15
Lecturer	09
Probationary Lecturer	03
Temporary Lecturer/Assistant Lecturer	07
Temporary Research Assistant	-
Temporary Demonstrator	06

Source: SER (2019)

The staff student ratio of the institute (based on currently available permanent academic staff) is 1: 16. The inadequacy of staff to cover core subjects in BAMS programme seems

to be due to delay in recruiting/filling the existing cadre positions of academic staff.

Infrastructure facilities of the Institute for undergraduate education is at a satisfactory level as an independently operating institute. However, adequate measures have not been taken to expand the infrastructure facilities to cater to the expanding student population.

The institute provides several student support services such as library facilities, sports facilities, Health care services, ICT facilities, student counselling services, career guidance etc. to uplift the quality of the education of undergraduates. GWAI primarily focuses on students to acquire knowledge, develop skills and realize their own intellectual capacities to pursuit their academic goals.

To be in par with the Ayurvedic medical professional expectations, GWAI regularly has revised the BAMS curriculum in 5-year cycles in compliance with SLQF (SLQF6) guidelines and relevant SBS.

Section 2: Review Team's Observation on the Self Evaluation Report

The review team observed that the Self Evaluation Report (SER) has been prepared according to the guideline given in the Program Review (PR) manual, using a participatory approach involving all stakeholders of the Institute. The SER was prepared for the reviewing of Bachelor of Ayurveda Medicine and Surgery (BAMS) Programme of Gampaha Wickramarachchi Ayurveda Institute (GWAI) of University of Kelaniya. The references for the evidence have been provided alongside the standards and criteria according to the template provided. It was observed that most of the documents have been submitted and, in some cases, the documents required had to be requested although they were readily available but not provided. The length of the report was appropriate and has been prepared following the standards of formatting recommended in the manual.

SER was prepared in four sections: Section 1-Introduction to the study programmes, Section 2-Process of preparing the SER, Section 3-Compliance with the Criteria and Standards, and Section 4-Summary.

The SER of GWAI contains a comprehensive introductory section to the BAMS degree programme with each of five Departments that offer the degree programme of five year duration. The functions of each Department has been described in detail. A summary of students and staff population, learning resource system and SWOT analysis which reflects the strengths and weaknesses of the program was also available.

In SWOT analysis, in the section "Weaknesses" following important facts are not mentioned.

- Nonexistence of policies to cater to differently abled students and policies on gender equity and equality
- Opportunities of obtaining postgraduate qualifications (MD) to the junior staff is limited and time consuming due to certain inconsistencies in policy/MOUs making process by the UGC (UGC did not make any special efforts to obtain seat allocation and scholarships for GWAI from CCIM (Central Council of Indian Medicine), India.

  CCIM is the only academic body which provides postgraduate training (MD Clinical programmes) for GWAI in which the syllabi have been recognized for the past 20-year period. A highly competitive common seat allocation and scholarships system is available for GWAI and IIM (Institute if Indigenous Medicine), Sri Lanka

- Frequent changes of top management of GWAI has affected most of the administrative processes including programme management, necessary staff recruitment and student learning at all levels

The review team observed that the programme reflects the mission, goals and objectives set out in the Strategic Management plan of the Institute. Student centered learning and outcome based educational approaches have been adopted to certain extent, along with a clearly laid down graduate profile. The strengths and weaknesses observed in the SER is listed below.

Strengths of the programme:
- o Remarkable recognition for GWAI
- o Eighty years' service of the Institute to the country as a whole
- o Experienced, highly motivated competent staff and practitioners to preserve Ayurvedic tradition
- o Support received to the Institute of its affiliation to University of Kelaniya
- o Well-structured programme design and assessment methods
- o Availability of learning resources.

Weaknesses of the programme
- o Uncertainty of duration of academic programme due to various situations
- o Dearth of academic staff
- o Lack of operational links with national and International education institutes
- o Lack of full-fledged teaching hospital facilities
- o Inadequacy of some infrastructure facilities including student accommodation
- o Non adoption of recommendations of the previous programme review held in 2010

Section two describes the process of SER writing, process of preparing the SER with the participation of the academic staff members of the Departments. It was noted that several workshops have been held to make the staff members aware of the review process. Team members assigned to each criteria and tasks allocated to different groups were elaborated in a detailed table.

Section three is the main section of the programme review, which describes "Compliance with the Criteria and Standard", has been prepared following the given format in the PR review manual. List of documentary evidence to support each claim of compliance in many standards were supportive. However, some of the documentary evidence provided for some sections of the criteria seemed irrelevant and insufficient to support those standards. Each criterion ended with a summary and evidence has been listed alongside the standards and criteria using the template provided in the manual. This facilitated the reviewers to get an overview about the study programs.

Section 3: A Brief Description of the Review Process

The self-assessment report of the BAMS programme was made available to review team on 4th July 2019. Completed template of the desk evaluation was sent to UGC on 30th July 2019 and the review team conducted the desk evaluation individually based on the information provided by the Self-Evaluation Report (SER). On 2nd August 2019 the members met at the pre-site visit workshop organized by the QAC and discussed the marks allocation of their Desk Evaluation reports.

The Review Chair interacted with the Director of the Institute. The agenda of the four-day site visit was prepared by the Review Chair with the agreement of the review members and the Director of the Institute.

Programme Review Site visit

The site visit was held from 11th to 14th February 2020. Prior to that, Coordinator of QAC of GWAI was provided with a site visit time schedule (Annex 1).

The four-member review team gathered at Hotel Clarion, Kiribathgoda on 10th February 2020 evening and revisited the plan. The team successfully completed the site visit from 11th to 14th February 2020 as per the schedule.

During the visit, the review team physically verified the contents of the SER with stakeholder meetings and observing the facilities as per the schedule of the site visit (Annex 2). In evaluating the eight criteria, the review team has paid special attention to the SER prepared by the Institute, information gathered from meetings held with different parties of the Institute, physically observing the available facilities, observing the teaching and practical secessions and clarifications provided by the SER writing team.

As indicated in the schedule a number of meetings were held with different individuals and groups as follows:
- The Vice Chancellor, University of Kelaniya
- CQA Director, University of Kelaniya
- Competent Authority, GWAI
- Heads of the Departments and SER Team
- Academic Staff
- Administrative Staff
- Computer Instructors
- Non-academic and Support Staff

- Library staff
- English Teaching staff
- Students, Student Counsellors, Alumni and Stakeholders

The meetings with different category were cooperative and satisfactory.

The existing facilities visited include:
- IQAC
- ICT facilities
- Career Guidance Unit
- Laboratories
- Lecture Halls
- Teaching Hospital
- Library
- SDC and
- Medical Centre
- Music Unit
- Gymnasium
- Hostels

The first meeting was held with the CQA Director of the Kelaniya University and the IQAC coordinator at the CQA Office. Subsequently the review team met the Competent Authority/GWAI and the Vice Chancellor of the Kelaniya University and had a successful discussion on Quality assurance process of the University and the Institute.

Summary of meetings held during the site visit are given in Table 3.1.

Table 3.1. A list of meetings held during the site visit

Day 1 – 11.02.2020	1. The Vice-Chancellor, University of Kelaniya
	2. The Director/CQA, University of Kelaniya
	3. Competent Authority/GWAI, University of Kelaniya
	4. Coordinator/IQAC, HODs and SER Coordinators, GWAI
	5. Senior Academic staff, GWAI
	6. Temporary Lecturers and Demonstrators, GWAI
	7. Administrative staff, GWAI
	8. Directors of Centers/Units/Cells, GWAI
	9. Student councilors, GWAI

Day II – 12.02.2020	1. Librarian/Sen. Asst. Librarian and staff
	2. Technical officers
	3. Director and staff, Gampaha Wickramarachchi Ayurveda Teaching Hospital
Day III – 13.02.2020	1. Undergraduates, GWAI
	2. Medical officer/Academic Warden/Sub Wardens/Music coordinator
	3. Coordinator/Research & Publication Division, HODs, GWAI
	4. Academic support and non-academic staff, GWAI
	5. External stakeholders and Alumni members of GWAI
Day IV – 14.02.2020	1. Director and staff of Carrier Guidance Unit, GWAI
	2. Members of English Teaching Unit, GWAI

All discussions were held in a satisfactory manner and the review team was able to gather many valuable information for a successful review. All meetings indicated that stakeholders such as academic staff, non-academic staff, students, alumni, and outside stakeholders were satisfied with the BAMS degree programme.

Following were the information gathered and the concerns raised by different stakeholders of the Institute during the meetings held.

1. Frequent changes of top management of the Institute is found to affect most of the administrative processes including programme management, untimely delay in necessary staff recruitment/filling the existing cadre positions and student learning at all levels.
2. Opportunities of obtaining postgraduate qualifications (MD) to the junior staff is limited and time consuming due to certain inconsistencies in policy/MOUs making process by the UGC (UGC need to make special effort in seat allocation and scholarships for GWAI in CCIM (Central Council of Indian Medicine), India).
3. Need for more clinical practices and field training opportunities for the students.
4. Necessity of converting the medium of conduct of the programme to dual (English/Sinhala) medium.
5. Requirement of a Skill Laboratory for clinical practices.
6. Necessity of senior staff with postgraduate qualifications to conduct core courses of the programme

7. Importance of smooth functioning of GWAI without interruption due to frequent student strikes, which results in uncertainty of duration to complete the BAMS degree.
8. Junior academic staff is overloaded with lectures and clinical classes as such they have less opportunities to engage in research.
9. Students' academic progress is poorly monitored.

Classroom observations (Observation of teaching learning process) were carried out in two different classrooms. All four reviewers participated together in the observation process.

It was observed that Level 1 and Level 2 undergraduate lectures are conducted only in Sinhala medium (as per UGC decision and latest two UGC Handbooks stated the medium as Sinhala for the BAMS programme). However, the Stakeholder Feedback obtained for the last BAMS curriculum revision revealed that 80% of respondents and other stakeholders have emphasized the importance of conducting lectures in dual (English/Sinhala) medium. These recommendations of the last curriculum revision should be implemented. This will facilitate to produce competent graduates to cater for national and international demand and to open higher education opportunities.

The review team also visited the facilities available for students such as Lecture halls, Computer labs, Practical Training Unit and Hospital. Subsequently, the team met with students and gathered information from them about the quality of teaching, availability of welfare facilities, internship programme, workload of the programme and other services provided by the Institute. The problems faced by students in the Departments were also discussed. Overall, the opinion of the review team is that adequate facilities are available for the smooth conduct of the programme, except the availability of facilities for clinical training in the Teaching Hospital. However, future expansion of the facilities for the programme is required to accommodate the expansion of programmes and increase of student intake.

Scrutiny of documentary evidences was carried out during the first three days. The documentary evidence related to eight criteria was scrutinized separately. The team experienced that the documentary evidences provided to support each claim of compliance in many standards were supportive. However, some of the documentary evidence provided seemed irrelevant and insufficient to support those standards. Each criterion ended with a summary and evidence has been listed alongside the standards and criteria using the template provided in the manual, facilitating the reviewers to get an overview about the study programs. Senior members of the staff have been open and supportive in providing necessary information. The logistic support provided was

satisfactory.

On the final day the wrap-up meeting was conducted in the presence of the Heads of Departments, Coordinator IQAC, Team Leader of SER writing team, Senior Academics, Deputy Registrar and Senior Assistant Registrar/Examination. During this session the reviewers conveyed their key findings to the members of the Institute. In concluding, the review team expressed its satisfaction for the arrangements and the hospitality afforded by the Director of CQA, Coordinator of IQAC and the other members of the faculty including SER writing team.

Report of the Key Findings and the scoring table will be submitted to the QAC of UGC in due course.

In evaluating the BAMS degree programme the review panel looked at the whole programme. Our observations and recommendations are based on documentary evidence made available to us at the time of the review and the views expressed by different stakeholders at formal and informal discussions the panel had during the review.

Section 4: Overview of the Institute's approach to quality standards

The Internal Quality Assurance Cell (IQAC) of Gampaha Wickramarachchi Ayurveda Institute is guided by the Center for Quality Assurance (CQA), University of Kelaniya. The Terms of Reference (TOR) of the IQAC details out the purpose, composition of the committee, responsibilities, and duties of the IQAC and the Chairperson of the faculty IQAC. Dr. W.M.B. Weerasooriya is serving as the Coordinator of the IQAC of the Institute. The management committee of the IQAC of the Institute is chaired by the Director of GWAI, and is constituted as per guidelines issued by the University Grants Commission with the Coordinator/IQAC, Heads of the Departments (and/or a nominee in each department, recommended by the board of studies), Deputy Registrar (or his nominee), Deputy Bursar (or his nominee), Senior Assistant Librarian (or his nominee) and Assistant Registrar Convener/Secretary to the IQAC. However, the student representation of the management committee is not evident. Therefore, incorporation of student representation for the IQAC committee is recommended for increasing the student participation of QA activities.

A separate location for the IQAC office with sufficient facilities have been allocated and adequate human resources for activities of Internal Quality Assurance is also provided. All the documents within the IQAC are maintained in order and common formats for feedback and, syllabi were available. The review team was of the view that the IQAC coordinator Dr. W.M.B. Weerasooriya has been offering a satisfactory service to improve the quality of academic programmes of the Institute. It was evident that the IQAC has initiated many internal monitoring activities in the recent past to improve the quality standards of the academic programmes of the Institute. Even though the student feedback was regularly taken, peer evaluation is not in a satisfactory level and no mechanisms were observed which integrate feedback of peer evaluation for programme improvement. Further laboratory and field practical evaluation formats are still in the developing stages. Therefore, it is recommended to initiate peer evaluation and laboratory field practical evaluation procedures and incorporate their feedbacks for programme improvement.

The IQAC organize necessary workshops for the staff and students when the need arises and the necessary budget is also allocated. However, annual plan or schedule of activities and fixed budget allocation for QA activities at the beginning of the year is not evident. Such regularization is required for the formalization of the QA activities within the

Institute. Therefore, the regularization of QA annual activity plan and budget allocation for QA activities within the Institute is an essential step in formalizing the QA activities within the year.

The Institute has already initiated revising their syllabi, incorporating the details such as, detailed course descriptions, new assessment methods, making learning outcomes, prerequisites and the attributes of graduates. However, attention is needed to improve the mapping of Programme Outcomes and Intended Learning Outcomes of different modules and Assessment methods with SLQF and SBS. Therefore, it is recommended to provide necessary training to staff by the IQAC on SLQF and SBS and initiate mapping of Programme Outcomes and Intended Learning Outcomes of different modules and Assessment methods with SLQF and SBS.

Further some Internal Quality Assurance policies such as policies for Programme approval and monitoring, Assessment, Gender equity and Differently abled students were not evident. Therefore, it is recommended to organize necessary workshops with stakeholders of the Institute for the Development of new Internal Quality Assurance Policy Framework for the Institute.

During the period of the Programme review, active involvement of all categories of staff of the Institute for the QA activities were evident. It was a positive sign which indicated the commitment of all staff of the Institute towards the improvement of quality of programmes of the Institute.

Approach of IQAC in preparation of SER of the BAMS programme

The compilation of the SER of BAMS programme has been conducted with a participatory approach of all stakeholders of the programme. The preparation and final submission process of the SER was conducted following the process given below;

1. The first meeting on awareness of staff on SER writing was held on 25th July 2018. A consultant was appointed for guiding the team members and compilation of the SER.
2. Eight members were appointed for eight criteria of the SER and a steering committee was appointed with a TOR. Three to four staff members for each criteria together with the steering committee members were given the responsibility of each criteria.
3. Formal and informal meetings were followed for the process of familiarization of the Programme Review manual and for the methodology of the review process.
4. A SWOT analysis was conducted to identify strengths and weakness of the programme. However, there was no mentioning of the follow up and implementation of previous recommendations of the previous programme reviews.

5. Activity schedules of working teams and the methods of collection of information and draft report preparation were assigned to team members in subsequent meetings.
6. A writing team of SER was appointed and the Competent Authority of the Institute served as the advisor of the team; other members of the team included the Consultant for the SER report preparation, Coordinator/IQAC, the leader and co- leaders and members of each criteria.
7. Compilation of draft SER and after subsequent discussion final SER was prepared and presented to the University community.
8. After about a series of 7 meetings (as stated in the SER report) with the team members beginning from the July 2018, the Final SER report was submitted to QAC on 5th June 2019.

Section 5: Judgments on the Eight Criteria of Programme Review

This section presents the review teams judgments of the level of attainment of quality under each of the eight criteria of the SER. The review team arrived at these judgments through careful evaluation of evidence gathered by document review, observations and meetings and discussions held with different individuals and groups listed in Section 3 of the report.

5.1   Criterion 1: Programme Management

The Institute has an established IQAC which provide directions for the quality improvement of the academic programmes offered by the Institute. The Institute has an adequate administrative structure for the implementation and management of its programmes. The Action Plan of the Institute is structured in line with the Strategic Management Plan of the Institute and the other core functions and management of the Institute is carried out following available SOPs. However, mechanisms of monitoring of SMP and action plans seems inadequate. The Curriculum revisions are carried out through the Curriculum Revision Committee and the approvals were obtained from the relevant authorities. However, policies and SOPs related to programme design and monitoring is not available. Student-Cantered Learning is exercising in some course units and detailed course outline included in the curriculum lacks its alignment with SLQF and SBSs.

The Institute has established collaborative partnerships mostly with local universities and Institutes. However, the collaborations with International Institutes and Universities is inadequate in the view of the potential and the uniqueness of the BMS programme. The Students Handbook with degree programme details and other information such as facilities available and student discipline related information is annually distributed to newly enrolled students and the students are well informed about the study programme from the beginning. The student charter which is published by the UGC is also distributed to the incoming students at their entry to the Institute. The Institute website includes sufficient information about the Institute and the programmes offered. An orientation programme is conducted for newly enrolled students and the personal welfare of students is ensured by means of mentoring and counselling. However, Institute lacks

policies on gender equity and catering to differently abled students. The Institute has taken some attempts to initiate a Management Information Systems (MIS) for effective implementation of academic programmes and other administrative activities but with further of improvements.

Following specific strengths and weaknesses have been identified in Programme Management.

Strengths:

1. The Institute's organizational structure is adequate for effective management and mobilizing its core functions.
2. Institute has a strategic management plan with annual action plans which has realistic goals and achievable objectives.
3. Institute adopts a participatory approach in its governance and management and have student representation in most of these committees.
4. Active involvement of young staff in Quality Assurance activities is a positive sign in institution's future commitment for ensuring the quality of its educational provision.
5. Institute makes available to all students, Handbook, general information of the institute, information on study programmes, student support services, disciplinary procedures, welfare, rights and responsibilities of students and grievance address mechanisms.
6. Institute has established an Internal Quality Assurance cell within the Institute, and it has defined functions and annual work plans to implement the Quality Assurance strategy within the Institute.
7. Institute assures that all students have access to health care services, cultural and aesthetic activities, sports facilities.

Weaknesses:

1. Frequent changes of top management of the Institute is found to affect most of the administrative processes including programme management, necessary staff recruitment and student learning at all levels.
2. Nonexistence of mechanisms for the monitoring of Annual Action Plan and its alignment with SMP and respective KPIs.
3. Nonexistence of progress monitoring and evaluation mechanism for Departments and Centers in relation to their Action Plans and to make sure their contribution for overall achievement of the total organization.
4. Even though the IQAC has been established within the Institute most of the vital policies and SOPS for the Institute are still to be developed. *i.e*: Programme approval and monitoring, policies related to assessment.

5. Programme outcomes, and outcomes of the modules and Assessment criteria are not properly matched with the SLQF level descriptors.
6. Separate unit for student counselling is not available at the Institute.
7. Experienced and trained student counsellors are inadequate and, also not in prompt action.
8. Existing strategies to prevent ragging and harassment and to maintain student discipline seems inadequate.
9. Staff appraisal system for both academic and non-academic staff is not up to the satisfactory level.
10. Nonexistence of policies to cater to differently abled students and policies on gender equity and equality.
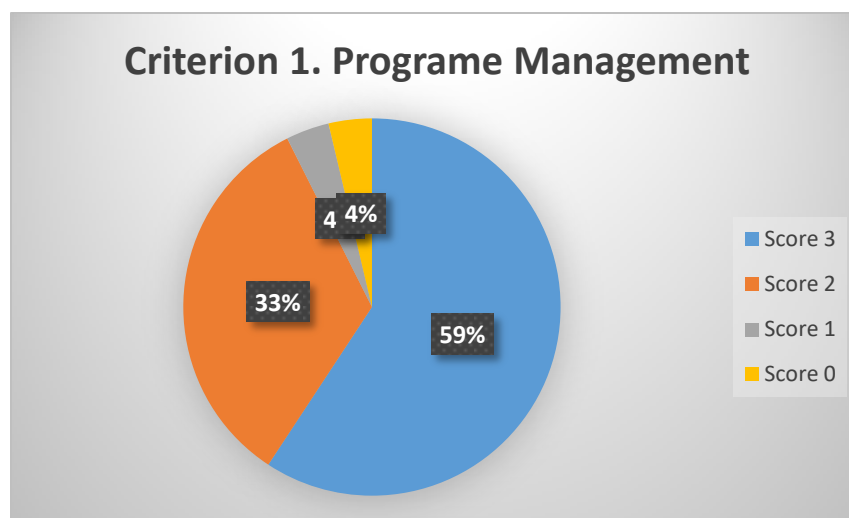11. Nonexistence of Grievance addressing mechanisms for academic staff.

Fig. 5.1. Scores Obtained for Programme Management
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.2   Criterion 2: Human and Physical Resources

The Institute has a dedicated and qualified academic staff, administrative staff and other categories of staff for designing and delivery of BAMS programme. All the staff members undergo an induction programme to acquire competencies required to perform in their assigned roles.

However, recruitment (to fill existing cadre positions) of especially academic staff is not at a satisfactory level.

Opportunities of obtaining postgraduate qualifications to the junior academic staff is limited and time consuming due to certain inconsistencies in policy making process by the UGC, especially in MD (Clinical programmes). These delays directly affect the academic staff of their carrier progression and therefore, needs prompt action,

Infrastructure facilities of the Institute for undergraduate education is at a satisfactory level as an independently operating Institute. Site visit confirmed that Institute has acquired considerable amount of infrastructure for the teaching and learning process, except teaching hospital for the clinical training, patient management and to develop soft skills competencies. Eg. doctor - patient relationship.

Practicing of student-centered learning (SCL) is minimal as observed at the site visit. Facilities available for the students such as library, sports, medical, aesthetic, and computer are at a satisfactory level. However, the usage of library, data base and internet facilities for teaching and learning needs further improvement.

The review team is impressed about the students' engagements in multicultural programmes, which promote harmony and cohesion among students.

Following specific strengths and weaknesses have been identified in human and physical resources:

Strengths:
1. Institute has a dedicated and qualified academic staff, administrative staff and other categories of staff.
2. Current infrastructure facilities of the Institute is at a satisfactory level.
3. Services provided through Library, Sports unit, Medical Centre, Music unit, ICT Centre are satisfactory.
4. Institute encourages students to engage in multicultural and innovative programmes.

Weaknesses:
1. Adequate measures have not been taken to expand the infrastructure to facilitate the increasing number of students.
2. Recruitment/filling existing cadre positions of especially academic staff is not at a satisfactory level.
3. Provide opportunities for undergraduates to have more exposure in teaching hospital for their clinical training, patient management and to develop soft skills competencies. Eg. doctor - patient relationship.
4. Establishment of a professorial unit in Teaching hospitals.

5. Opportunities of obtaining postgraduate qualifications to the junior staff is limited and time consuming due to certain inconsistency in policy making.
6. Career Guidance Unit needs to play a bigger role to provide better opportunities for students by organizing a relevant activity throughout the academic year.
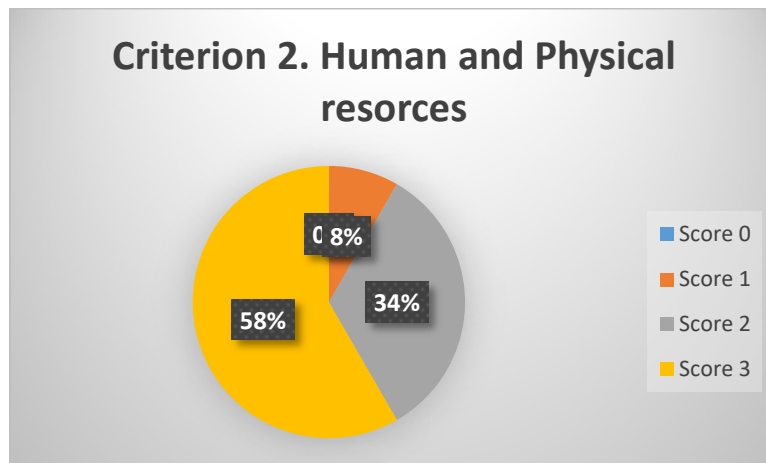

Fig. 5.2. Scores Obtained for Human and Physical Resources
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.3 Criterion 3: Programme Design and Development

BAMS programme has been developed collaboratively in a participatory manner with the contribution of stakeholders in key stages of programme planning, design and development and review. The documents of the curriculum revision recently conducted for the BAMS was available by incorporating comments of stakeholders.

There is inadequacy of approved policies and SOPs on programme approval and monitoring.

Detailed curriculum with programme ILO, Course unit ILO and curriculum mapping with graduate profile were not available. Therefore, it was difficult to identify that the programme design fully complies with the Sri Lanka Qualifications Framework (SLQF level 6), and is guided by other reference points such as Subject Benchmark Statements (SBS).

The number of qualified academic staff members to teach core courses in the curriculum was not at a satisfactory level.

Following specific strengths and weaknesses have been identified in programme design and development.

Strengths:

1. BAMS degree Programme has been logically structured throughout the five years period.
2. Programme developed by getting relevant stakeholder feedback such as academics in relevant discipline in other Institutions, Industry experts and other external stakeholders. The evidences for Programme revision was available with the comments of the stakeholders.
3. Adoption of 5-year cycle of programme revision as the evidences available on revision
4. Integration of diverse courses into core curriculum for the development of soft skills of the students.
5. Industrial Training and Internship programmes are integrated to the degree programme to increase the practical and clinical exposure of the students.

Weaknesses:

1. There is inadequacy of approved policies and SOP's on programme approval and monitoring.
2. Course specifications reflecting constructive alignment of contents, teaching learning activities and assessments with ILOs were not available for all course units.
3. Programme design does not fully comply with SLQF level 6 and SBS.
4. The curriculum development related documents as evidences were not available. Therefore, the level of adaptation of stakeholder comments for the present BAMS curriculum was not evident.
5. Detailed curriculum lacks alignment of programme ILOs with, course units ILOs, teaching learning activities and assessment strategies. Further curriculum mapping was not available.
6. Lack of qualified academic staff allocation for certain core-curricular course units. Same time the permanent academic cadres has been used for optional course units with less credit weight.
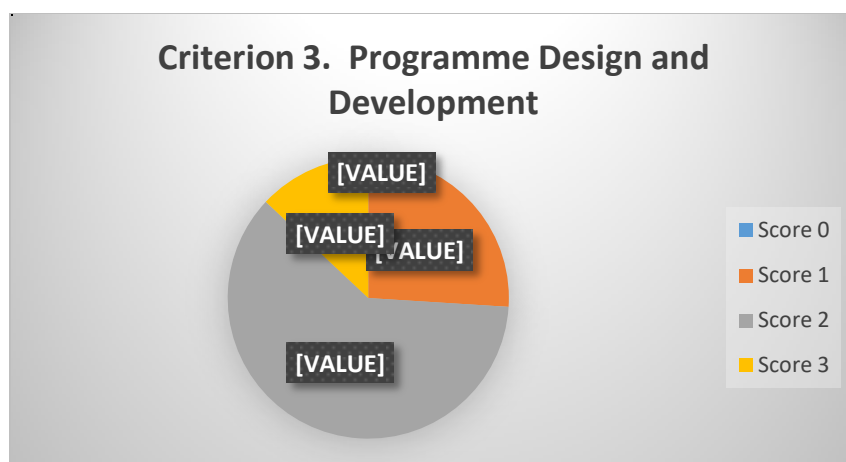
Fig. 5.3. Scores Obtained for Programme Design and Development
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.4 Criterion 4: Course/ Module Design and Development

The evidence provided of complying with SLQF and SBS/ professional bodies; policy and procedures on course design is inadequate. Further, the evidence of course design showing course ILOs aligned with the programme ILOs were inadequate. Adequate training for all academic staff on programme design might be a good initiative to overcome these insufficiencies.

There were adequate physical and documentary evidence of the use of ICT during design, development, and delivery of courses. However, the use of Library resources was not in a satisfactory level.

The curriculum mapping by incorporating graduate profile, programme ILO's and course unit ILO's is suggested.

The outputs from the external teaching staff such as resources from Teaching Hospital might enhance the quality of the course module designing process. Therefore, it is suggested to apply a participatory approach in course module designing process in future.

Following specific strengths and weaknesses have been identified in Course/ Module Design and Development.

Strengths:
1. The BAMS programme has adopted the Student-Centered Teaching – Learning strategies (SCL) when delivering the curriculum in a satisfactory level. However, still there is a room for improvement of the SCL strategies of BAMS.

Weaknesses:

1. Distribution of senior Lecturers on need basis for the core curricular. Suggest to re-address the staff allocation with rational distribution of workloads among staff aligned with work norms.
2. Stakeholder feedbacks such as students and external academic/industry resource persons need to be addressed and implementation must be on priority basis.
3. The detailed curriculum in most course units didn't mention which ILO is assessed through each assessment in the course units. Therefor it is difficult to decide whether the programme and course objectives and ILOs were really accomplished after following the course.
4. Inadequate records of peer-observations and their integration to course design and development process.
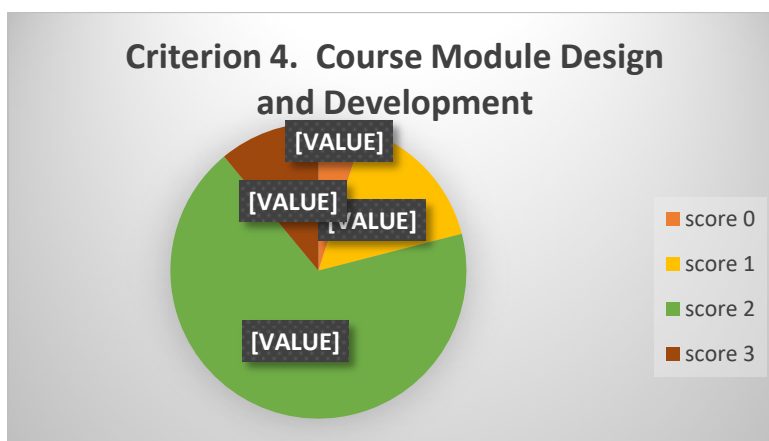5. Not conducted a student satisfaction survey for the BAMS programme.

Fig. 5.4. Scores Obtained for Course Module Design and Development
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.5 Criterion 5: Teaching and Learning

Sample of student assessments presented for a few course units indicated the use of Student-Centered Teaching and Learning (SCL) strategies are practiced adequately. Some Industrial visits were designed for achieving the objectives of the core-curriculum and they reflected the adequate adoption of SCL within the BAMS programme. Further, since the Teaching Hospital and its facilities are lacking, arrangements have been made to obtain such facilities from other government Ayurveda Hospitals to enhance clinical training and internship training.

There was some evidence to support the claim that teachers integrate scholarly and research activities of their own and the use of technology, self-directed learning and collaborative learning.

Our own classroom observations support the claim that SCL strategies are adopted by the teachers to some extent. However, further evidence such as peer observation records, course evaluation reports were not adequately available for scrutiny. Evidence of administration of a graduate satisfaction survey was also lacking.

The Level 1 and Level 2 of the degree programme is offering in Sinhala medium. However, it was not mentioned in the SER document submitted. Even the UGC handbook of past two years also stated the BAMS programme is offered in Sinhala medium. However, our observations of the documentary evidence related to past curriculum revision, indicated the recommendations for changing the medium of instructions of the programme to dual medium (Sinhala and English). However, it was evident that these recommendations were not implemented. Our meetings with both academics and students highlighted the importance of the use of dual medium for course delivery for securing opportunities of higher education in foreign countries. Therefore, the review team is suggesting to re-address this issue.

Following specific strengths and weaknesses have been identified in teaching and learning:

Strengths:
1. The usage of ICT in teaching and learning is commendable.
2. The laboratory facilities for the research activities for the students, academic staff and post-graduate studies up to the satisfactory level
3. Teaching learning environment encourages students to work in groups, projects and research activities in some of the courses.
4. Teachers use both learner-centered, and teacher-directed methods for teaching where appropriate.

Weaknesses:
1. The number of academics with MD qualification is not adequate to conduct teaching sessions and clinical practices at the Teaching Hospitals. The space in wards and students to bed ratio too is not adequate.
2. The cooperation and coordination both GWAI academic staff and Teaching Hospital staff should be improved.
3. It was observed that the Level 1 and Level 2 undergraduate lectures are conducted only in Sinhala medium (as per UGC decision and latest two UGC Handbook stated the medium as Sinhala for the BAMS programme).

However, the Stakeholder Feedback obtained for latest BAMS curriculum development (revision) also revealed that 80% respondent and other stakeholder discussions emphasized the importance of conducting lectures in dual (English/Sinhala) medium to produce competent graduates to cater for national and international demand and to open up higher education opportunities.

4. Documents related to workload and work norms for academic staff were not available for scrutiny.
5. Lack of evidence of the use of information gathered through student assessments to improve teaching and learning.
6. Senate approved indicators of excellence in teaching for evaluation of the performance of teachers was also not made available.
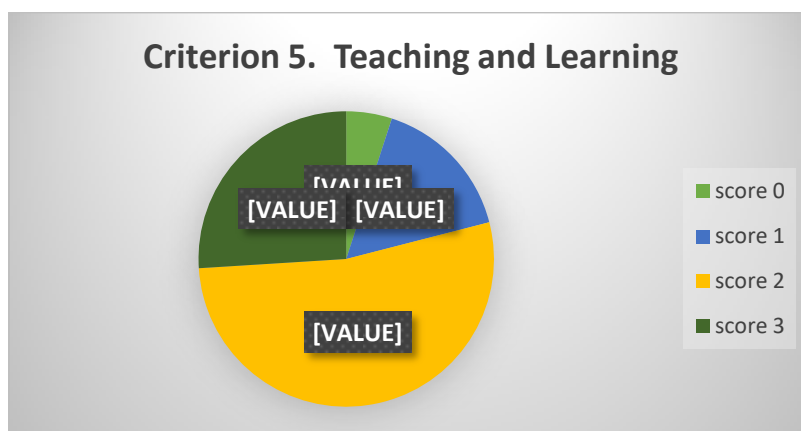

Fig. 5.5. Scores Obtained for Teaching and Learning
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.6   Criterion 6: Learning Environment, Student Support and Progression

The review team finds the conditions of the lecture theatres and laboratories are suitable for effective teaching and learning. Further, the administrative structure facilitates interaction between students and staff.

The mentoring and counselling process might be more strengthen at the Institute, by providing adequate training to all student counselors.

The students' progression is not monitored to give a necessary feedback. According to students pass rates of past five years in their last examinations, it was observed a high failure rates such as an average of 25% failures. These high failure rates of last examinations of the students might affect to the overall pass-out rate from the GWAI.

The student's progression has not been addressed promptly by the Institute and should be prioritized.

Co-curricular activities conform to the mission of the Institute and contribute to enhance the social and cultural aspects of educational experience of the students. Further, students' reports on Industrial Training and other field training was in a satisfactory level.

The Institute has not done any recent surveys on the level of satisfaction of students on support services. Further, during the students meeting, it was observed that, an inadequate attention has given to grievances handling mechanism of students.

The Institute has not taken any initiative to form a cell to address the Gender issues (such as a GEE Cell) up to date. Therefore, it is suggested to address these concerns.

The strengths and weaknesses of the learning environment, student support and progression are as follows.

Strengths:
1. Induction programme, Student-centered learning and Technology-based learning are effective in BAMS programme.
2. Industrial placement, Internships and other field work are giving opportunities for entrepreneurship and learning experiences to students.
3. Friendly administrative academic and technical support system that ensure a conducive learning environment.
4. Availability of adequate co-curricular activities to support the student learning process.

Weaknesses:
1. Insufficient documentary evidence on follow- up of the student-progression by the Institute. It was observed a huge failure rates, such as an average of 25% failure rates for past five years. The remedial actions to the certain issue was not taken as it will highly contribute to the programme quality.
2. Library usage and information resources are not integrated into the learning process.
3. Even though the student feedbacks are available, whereas peer-observation mechanism should be more enhanced. Less evidences also available.
4. Feedback of student satisfaction on the learning environment and student support services are not available (student satisfaction survey).
5. Inadequate number of experienced student counsellors with adequate training/ qualifications in student counselling.

6. There are opportunities for improvement in the mechanism of academic counseling and mentoring.
7. Further prompt responses for handling grievances and sound student welfare might bring the harmony among the student community. Therefore, grievances handling, and student welfare of the Institute could be improved.
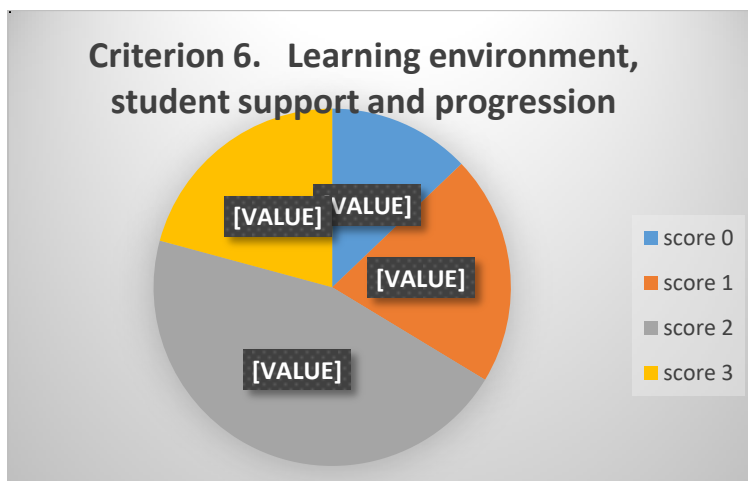

Fig. 5.6. Scores Obtained for Learning Environment, Student Support and Progression (Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.7 Criterion 7: Student Assessment and Awards

The Institute implements the Semester System. Outcome-based programme design is confirmed through course outlines and examination processes of the Degree Programme. Evidence of assessment strategies, minutes of review meetings, Examination rules By-laws and regulations, Curriculum Development Committee minutes related to Assessment have been produced. However, there were inadequate evidences of periodical reviews and amendments to the assessment strategies and regulations. Similarly, clear policy document on student assessment was not available. In the curriculum, assessment procedure is mentioned, however, mapping of assessment criteria with course objectives and ILOs was not evident and therefore the level of achievement of programme objectives is unclear. In some courses regular, feedback on formative assessments were given to students to promote effective learning of students. Further, appointments of external examiners, marking schemes of assessment, by-laws of examinations, senate minutes and appointment letters to examiners were produced.

All arrangements have been made to cater to differently abled students, case by case and no policy developed for catering differently abled students sitting for the exams.

Examination results are processed at the department level and confidentiality of the documents were maintained and the results of the exams were communicated to students. Final examination results are announced through detailed transcripts at graduation.

The strengths and weaknesses of student assessment and awards are as follows.

Strengths:
1. Assessment strategy of student learning is considered integral part of the programme design.
2. Students are communicated on assessment criteria and regulations in a published format at the time of enrolment.
3. Students are provided with regular timely feedback on formative assessments such as in clinical activities and mid semester exams.

Weaknesses:
1. Programme outcomes and assessment criteria are not properly aligned and not mapped with assessment criteria.
2. Weightages related to different components of assessment are not specified in the course specifications.
3. No evidence of releasing examination results to students on time.
4. Inadequate records on external examiners feedback
5. Nonexistence of policies governing the appointment of both internal and external examiners.
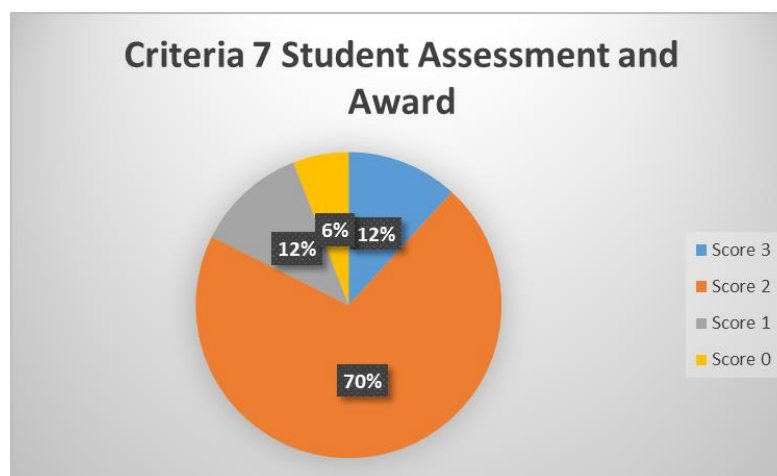

Fig. 5.7. Scores Obtained for Student Assessment and Award
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

5.8   Criterion 8: Innovative and Healthy Practices

The Institute has established a learning management system (LMS) to facilitate multi-

mode teaching and learning. However, very few staff and students were using the LMS during the time under review.

The Institute has established a research committee to coordinate and facilitate research and innovation by the staff. Further, an annual research conferences is organized by the Institute. Students are encouraged to participate in institutional, national and international competitions. The BAMS programme has been subjected to regular curriculum revisions considering stakeholder requirements.

Following specific strengths and weaknesses have been identified in innovative and healthy practices.

Strengths:
1. Availability of annual research conferences, research funds etc.
2. Availability of staff reward schemes.
3. National MOUs for research collaborations.
4. Student participation in national and international competitions.

Weaknesses:
1. Limited use of LMS for teaching and learning.
2. Inadequate use of OER.
3. The research Grants Committee is just established. So far research grants were not provided to staff.
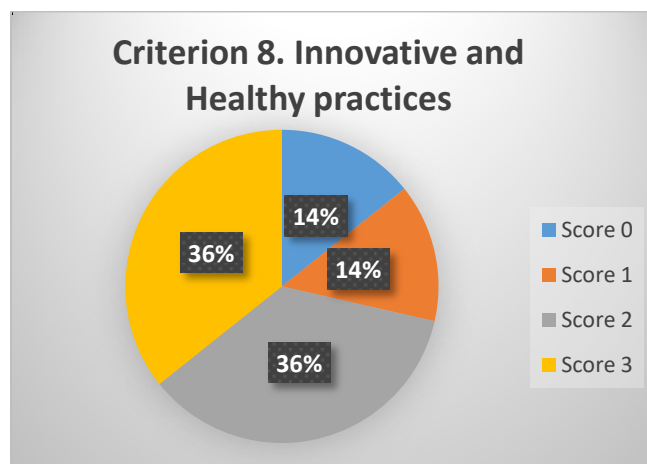

Fig. 5.8. Scores Obtained for Innovative and Healthy Practices
(Score 3- Good, Score 2- Adequate, Score 1- Barely adequate and Score 0-Inadequate)

Section 6: Grading of Overall Performance of the Programme

The overall score achieved by the programme is 67.99%. Actual criterion wise score for all eight criteria were more than the relevant weighted minimum score (See Table 6.1 for details).

Table 6.1. Criteria Performance

C	Criterion	Weighted minimum score	Actual criteria wise score
01	**Programme Management**	**75**	124.0
02	**Human and Physical Resources**	**50**	83.0
03	**Programme Design and Development**	**75**	96.0
04	**Course/ Module Design and Development**	**75**	92.0
05	**Teaching and Learning**	**75**	100.00
06	**Learning Environment, Student Support and Progression**	**50**	58.0
07	**Student Assessment and Awards**	**75**	94.0
08	**Innovative and Healthy Practices**	**25**	32.0
	Total score on a thousand scale		680.0
	Total score (%)		67.99%

Grade: C - Satisfactory

The total score on a thousand scale was 680.0 and each of 8 criteria did score more than the minimum weighted score. Therefore, the programme is awarded a Grade C which is considered as "Satisfactory" indicating a minimum level of accomplishment of quality

expected of a programme of study which requires improvement in several aspects as indicated in section 5.

Section 7: Commendations and Recommendations

7.1   Commendations

The BAMS programme has been subjected to a curriculum revision over the past years. Majority of the recommendations and stakeholder suggestions has been addressed in the curriculum revision, and yet the new syllabus is not in operation. The curriculum revision process is commendable, and it has helped the BAMS to adapt the curricula for changing needs of the stakeholders and the socio-economic, academic, and business environments in local and global.

The Institute used a participatory approach to decision making in programme development and approval process. Views of industry experts in Ayurveda Medicine has been considered in the programme development and the relevant MOU approvals obtained. The GWAI has developed partnerships and collaborations with the Department of Ayurveda, Ministry of Health, Nutrition, and Indigenous Medicine to provide all students internship opportunities. Adoption of Student-centered learning strategies in a satisfactory level, whereas students' assessments based on practical in most cases. GWAI maintains an orderly environment with appropriate infrastructure facilities with laboratories.

However, the lack of academic staff allocations based on work norms and distribution among five Departments and lack of senior academics in core-curricular might reduce the quality of the academic provision.

The review team highly appreciates the above features of an emerging quality culture in the GWAI and wishes to make following recommendations for its advancement

7.2. Recommendations

1. Recruitment/filling existing cadre positions of especially academic staff needs immediate attention and necessary prompt action to maintain the quality of BAMS programme.
2. Provide opportunities for undergraduates to have more exposure in Teaching Hospital for their clinical training, patient management and to develop soft skills competencies. Eg. doctor - patient relationship.
3. Establishment of a Professorial Unit in the Teaching Hospital.
4. Develop necessary policy frameworks and SOPs for Institute and for the academic programmes (i.e. Programme approval and monitoring, teaching and learning,

assessment, student support etc.)

5. Conduct student satisfaction surveys to identify strengths and weaknesses of the programme implementation, learning environment and student support systems and utilize such information for improvement.

6. Identify appropriate set of indicators for staff appraisal at the Institute level.

7. Revise the detailed curriculum documents indicating constructive alignment of learning outcomes, teaching learning strategies and assessment at programme level.

8. Make necessary actions to address the high failure rates of students. The student progression can be monitored at Institution level.

9. Take necessary steps to allocate as much as possible, the senior academic staff members to core-curricular course units.

10. Deliver the BAMS programme in dual medium (Sinhala and English language) to comply with stakeholder suggestions.

11. More weightage could be given to core-curricular course units.

12. Improve structures and strategies for prevention of ragging and harassment in the GWAI.

13. Incorporate student representation to the MC of IQAC.

14. Initiate Peer evaluation of lecturers and laboratory and field practical evaluation procedures and develop mechanisms to incorporate those feedbacks for programme improvement process.

15. Regularize QA annual activity plan and budget allocation for formalizing the QA activities within the Institute

16. Provide necessary training to staff on SLQF and SBS. Improve the syllabus by mapping of Programme Outcomes and Intended Learning Outcomes of different modules and Assessment methods with SLQF and SBS.

17. Organize necessary workshops with stakeholders of the Institute for the Development of new Internal Quality Assurance Policy Framework for the Institute.

Section 8. Summary

Gampaha Wickramarachchi Ayurveda Institute (GWAI) of the University of Kelaniya offers Bachelor of Ayurveda Medicine and Surger**y** (BAMS) degree. The Institute had prepared a SER covering BAMS programme. The Quality Assurance Council of the University Grants Commission had appointed four reviewers to review the BAMS programme.

The review of the BAMS programme concluded with a 4-day site visit from 11th to 14th February, 2020. The claims made in the SER by the Institute under eight criteria were verified through perusal of documentary evidence, meetings/discussions conducted with relevant authorities and various groups, and observation of infrastructure and classroom teaching.

The site visit concluded with a wrap-up meeting held with the Heads of Departments, Coordinator of IQAC, Team Leaders of SER writing teams, Senior Academics, Deputy Registrar and Senior Assistant Registrar/Examinations. The purpose of the meeting was to provide feedback on the key strengths and areas for improvement.

The degree programme received a cumulative score of 680.0 on a thousand scale which is equivalent to 67.99%. According to the criteria specified in the Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions, the BAMS programme offered by GWAI received a grade C. A grade of C indicates that the programme of study reached a minimum level of accomplishment of quality expected of a programme of study which requires improvement in several aspects.

The review team hopes that the GWAI of the University of Kelaniya will take necessary steps to implement the recommendations made in this report and to bring about changes and innovations necessary to achieve excellence in BAMS degree programme.

The Review Team

Prof. S. R. Weerakoon (Chairperson)
Prof. J. M. C. K. Jayawarana
Dr. M. C. M. Maheez
Prof. P. I. N. Fernando

ANNEX 1 – SITE VISIT PROGRAMME FROM 11TH TO 14TH FEBRUARY 2020

BAMS Degree Programme
Gampaha Wickramarachchi Ayurveda Institute
University of Kelaniya
Revised site visit programme from 11th February 2020 to 14th February 2020
Day 1 – 11. 02. 2020

Time	Activity	Participants
8.45 AM – 9.15 AM	Meeting with the Director - IQAU	Director – IQAU
9.30 AM – 10.00 AM	Meeting with the Vice Chancellor	Vice Chancellor/ Dean/Competent Authority, Director – IQAU/ Coordinator – FQAC, Chair – SER Preparation
10.00 AM – 10.30 AM	Return to GWAI from University of Kelaniya	
10.30 AM – 10.45 AM	*Tea*	
10.45 AM – 11.45 AM	Presentation about the Faculty and respective study programs	Dean/Competent Authority/ Director-IQAU/Coordinator FQAC/ All HODs of the Faculty/ Cluster Chair and SER Team/ Study program coordinators
11.45 AM – 12.45 PM	Meeting with academic staff in permanent cadre (excluding HOD)	Teaching panel of respective programs (excluding HODs) Senate representatives
12.45 PM -01.15 PM	*Lunch*	
01.15 PM – 02.00 PM	Meeting with temporary academic staff	Temporary Demonstrators, Tutors etc
02.00 PM – 02.45 PM	Meeting with Administrative Staff	Registrar/Bursar/SARs/AB/SAB/Work Engineer/DR Examination
02.45 PM - 03.15 PM	Meeting with Directors of Centres / Units / Cells	All Directors of Centres/ Units/ Cell Coordinators

03.15 PM – 03.45 PM	Meeting with Student Counselors	Senior Student Counselors and student counselors
03.45 PM – 05.00 PM	Observing, Physical Facilities *Tea*	Review Team/ Facilitators

Day 2 – 12. 02 2020

Time	Activity	Participants
08.30 AM – 09.00 AM	Observing documentation	Review Team/ Facilitators
09.30 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 -01:00 PM	*Lunch*	
01:00 PM - 04:00 PM	Observing Documentation *Working Tea*	Review Team
04.00 PM – 05.00 PM	Open hour for any stakeholder to meet review panel	Review Team

Day 3 – 13. 02. 2020

Time	Activity	Participants
08.30 AM – 09.30 AM	Observing Documentation	Review Team
09.30 AM – 10.30 AM	Meeting with Students *Working Tea*	Group of students (30) representative of gender, ethnicity, level of study programs
10.30 AM – 11.30 AM	Meeting on support for student welfare	Director/Physical Education, University Medical Officer
11:30 PM -12:00 Noon	Meeting on research activities	Chairman / 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 - 01:15 PM	*Lunch*	
01:15 PM - 02:15 PM	Meeting with external stakeholders and alumni members *Working Tea*	Group of external stakeholders (about 20 employers, industry, private sector, representatives with link to or involvement with the University) and Alumni
02:15 PM - 04:00 PM	Observing Documentation	Review Team
04.00 PM – 05.00 PM	Open hour for any stakeholder to meet Review Team	Review Team

Day 4 – 14. 02. 2020

Time	Activity	Participants
08.30 AM – 09.00 AM	Meeting with mentors and Career Guidance staff	Coordinator/mentoring and mentors, and Director – Career Guidance
09.00 AM –0 9.30 AM	English Teaching Unit	Members of English teaching unit

09.30 AM – 12.30 PM	Observing Documentation *Working Tea*	Review Team
12:30 PM - 01:30 PM	*Lunch*	
01:30 PM - 03:00 PM	Private meeting of reviewers and report writing *Working Tea*	Review Team
03:00 PM - 04:00 PM	Closing meeting for debriefing	Vice Chancellor/Dean/Competent Authority/Director – IQAU/ HODs/ Coordinator – FQAC/Chair & the SER – Team

ANNEX 2 – ATTENDANCE SHEETS OF MEETINGS HELD DURING THE SITE VISIT