



## **PROGRAMME REVIEW REPORT**

**University of Peradeniya**

**Faculty of Medicine**

**MBBS Programme**

**2<sup>nd</sup> to 5<sup>th</sup> September, 2019**



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**Faculty of Medicine**  
**MBBS degree programme**

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## **1. BRIEF INTRODUCTION TO THE PROGRAM**

The University of Peradeniya was officially opened as University of Ceylon, Peradeniya on 20<sup>th</sup> April, 1954. The University has 9 Faculties, 2 Institutes, 8 Centres and 2 Units. The Faculty of Medicine was established in 1962 and was the second of its kind.

The Faculty of Medicine has 17 departments and two units. The Department of Anaesthesiology & Critical Care and Department of Radiology are the two new Departments established recently to keep up with the current trends in health care and medical education. The Faculty of Medicine offers the MBBS Degree, Diploma in Forensic Medicine and Diploma in Sports Exercise Sciences. Academics are also involved with postgraduate teaching, training (for Postgraduate Institute of Medicine (PGIM), University of Colombo) and research supervision (of Postgraduate Institute of Science (PGIS) and Postgraduate Institute of Agriculture (PGIA) of University of Peradeniya). In addition they are also involved with teaching students in the PGIS and in the Faculty of Allied Health Sciences.

The student admission to the Faculty ranges from 205 to 213. Presently, there are nearly 1060 students from different ethnic communities from all parts of Sri Lanka pursuing their studies. The number graduated during the past five years was approximately 1100.

A major curriculum revision was undertaken during 2004 and since then, the curriculum has been amended whenever the requirements arose. Further another revisit was made in 2016.

## **2. OBSERVATION OF THE REVIEW TEAM ON THE SELF – EVALUATION REPORT**

The Self-Evaluation Report (SER) submitted by the Faculty of Medicine, University of Peradeniya is a comprehensive and a well-planned document and has been prepared as per the guidelines given in the *Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions*, published by University Grants Commission in 2015. Though the SER has been written by a team nominated by the Faculty Board, all staff attached to the Faculty have contributed for the SER preparation. The study program was aware of the importance of the Review Process and provided the relevant information and documentation. The SER contained the SWOT analysis and the expected improvements to be made to overcome the weaknesses.

The Faculty has considered the importance of Quality Assurance and working on the development on both academic and administrative paths. In this regard, the Faculty has established Internal Quality Assurance Cell and a coordinator among the Faculty has been appointed.

The reference material made available to the Review Team was organized and compiled for reference. However, the Review Team noted the absence of student feedback pertaining to the student satisfaction survey reports and feedback of the external examiners on the clinical examinations.

### **3. DESCRIPTION OF THE REVIEW PROCESS**

#### **PROCESS OF PREPARATION BY THE REVIEW TEAM FOR THE SITE VISIT**

Reviewers met for the pre-review meeting after a thorough desk evaluation of SER individually. The individual Desk Evaluation Report was submitted to the Director of the Quality Assurance Council (QAC) of the UGC. The Review Team shared their responsibilities among them. The Team Leader interacted with the Dean of the Faculty and prepared the Agenda before the scheduled dates of the Site Visit.

#### **SITE VISIT OF THE PROGRAM REVIEW**

The Review Team had the Site Visit from 2<sup>nd</sup> to 5<sup>th</sup> September, 2019. On the 2<sup>nd</sup> of September, 2019 the Team had a brief meeting at 6:30 am and finalized the Review Time Schedule.

The first meeting was held with the IQAU Director of the University and he made a presentation on the activity of the IQAU and its involvement with the study program. Subsequently the team met the Vice Chancellor and the administrative staff of the University along with the IQAU Director. Then the meeting was held in the Faculty with the Dean. Further, the Review Team met the following personnel during the four days of the Site Visit:

- Heads of the Departments of the Faculty
- Academic staff of the Departments of the Faculty
- Administrative staff of the Faculty
- Senior Student Counsellor and Student Counsellors of the Faculty
- Academic Support Staff of the Faculty
- Librarian and Library Staff of the Faculty
- Students of the Study Programmes Under Review of the Faculty
- Immediate alumni of the Faculty
- Non-academic Staff Members of the Faculty

Meetings were arranged with the Heads of Departments and academic staff. SER writers and the academics have had a cordial discussion and expressed the actions taken to improve the quality of the study program. The discussion indicated that all the staff are aware of the QA and the importance of maintaining the quality of education.

The documents related to evidence supporting the claims made in the SER were arranged in the space allocated for the Faculty QA cell and made available to the Review Team. The documents were filed separately for different Standards of each Criterion and the files were grouped based on the Criteria. The Team inspected the documents in the different files to find the evidence in

support of the claims made in the SER and these were cross-checked with those provided as examples in the Manual. The Chair of the FQAC and some of the young staff gave their fullest support and facilitated the verification process.

Meetings with Student Counselors indicated that they are committed. The Faculty does not have a Director and a Career Guidance Unit, which is acceptable for the study program. The Faculty conducts its own Staff Development Program. The visit to the library provided an opportunity to witness that the students and staff do not visit the library regularly.

The Team spent a considerable time with the students. There was representation of all batches of students from multi-ethnic groups. They appreciated the commitment of the Dean and the staff and did not raise any issues or complaints. Students are also satisfied with the facilities such as Canteen, study area, e-library, etc. Three live lectures were observed and teacher centred lectures and small group discussions in practice were evidenced.

Review team also visited the following places:

- Office of the Dean
- FQAC
- Curriculum coordinating centre
- Canteen
- Open dining areas
- E-library
- Medical library
- Study room
- Summit room for students
- Professorial wards in the Teaching Hospital, Peradeniya
- Student rest room in the Teaching Hospital, Peradeniya
- Student canteen in the Teaching Hospital, Peradeniya
- Auditorium in the Teaching Hospital, Peradeniya
- Anatomy museum
- Visit to Different Departments
- Pathology museum
- Parasitology microscope lab
- Nuclear medicine unit

- Skills labs
- Forensic medicine courthouse and mortuary

The Team could meet the alumni. Thus the testimony of the strength of the program was evidenced. Further there was evidence of obtaining feedback from alumni and stakeholders and there was monitoring system to ensure progressive development of the study program.

On the 4<sup>th</sup> day, a wrap up meeting was held with the staff of the faculty where key findings were presented and an interactive discussion with the staff ensued.

The Review Team is satisfied with all necessary arrangements made by the Faculty and the University Administration. The Dean of the Faculty, and Staff were very cooperative during the review process.

#### **4. OVERVIEW OF THE FACULTY'S APPROACH TO QUALITY AND STANDARDS**

Internal Quality Assurance Cell (IQAC) of the Faculty of Medicine, University of Peradeniya was established in 2013 complying with the Commission Circular No. 04/2015. The Curriculum Coordinating Centre coordinates all the academic activities, oversees the assurance of quality in all teaching and learning processes, regularly monitors the student feedback and peer review of teaching and learning. The Curriculum Coordinating Centre looks into the modifications of the curriculum and evaluation methods if needed. The IQAU has a decent space and supporting staff for normal operation. It was observed that the Faculty is adopting all standards of quality assurance.

## 5. JUDGMENT ON THE EIGHT CRITERIA OF PROGRAM REVIEW

### Criterion 1: Program Management

#### Healthy Practices and Strengths

Many healthy mechanisms are in place to ensure the smooth running of the MBBS programme under review. The Faculty has a hierarchical structure headed by the Dean, three standing committees and 20 adhoc committees meeting regularly aid in the smooth implementation of the study programme. The university and faculty by-laws and several guidelines/ policies (management guide, procurement guide) have been established to facilitate efficient implementation of the programme. The QA cell in the faculty is well established and has recently (2018) taken a lead role in the preparation of TORs/procedural guidelines for the various committees. In preparation for the review the QA has engaged in several internal reviews of the departments and have had the opportunity to share good practices. Some action has been taken on audit queries. Participatory approaches have been taken in the preparation of action plans for the faculty and departments. Student representation in the committees is satisfactory and it was reported that non-academics are also invited to meetings when required.

There was some evidence for stakeholder's feedback on curriculum matters. The faculty handbook is updated annually and given to the students (available online) and provides comprehensive details on both on academic aspects (curriculum layout for the five years, electives, course modules, examination procedures/by-laws, graduation requirements, staff information) and other aspects (sports, important contacts, student societies etc.). The Curriculum Coordinating Committee is responsible for the preparation of the MAT (available on-line) which provides a timeline for the students, enabling them to achieve their targets without lagging behind. Adjustments to the MAT when there are avoidable delays are also made. These are seen as proactive measures to minimize delays in the programme.

The student orientation programme focuses very much on the academic aspects and is aimed at instilling the importance of being conversant in English.

Adherence of staff to an acceptable code of conduct is also ensured through allocation of workloads, following SLMC regulations, MOH circulars etc. Staff have followed workshops to improve their knowledge and teaching expertise.

There is satisfactory usage of the ICT platform which is used both by staff and students and the faculty / university has provided adequate Wi-Fi facilities, recreational and study spaces to the students. The faculty website is also updated regularly with useful current information.

The faculty has prepared guidelines (for field visits, clinical rotations etc.) which is seen as good practices adopted by the faculty to ensure consistency and effectiveness. The students are made aware of the risks involved during clinical and laboratory sessions and are given safety advice. Night transport is provided to students when needed.

Feedback is obtained primarily on-line. One of the commendable practices is that the Dean gets separate feedback from students. Student's issues are addressed through the Students Affairs Committee.

There is provision to accommodate requests of students with special needs to some extent. Acceptable conduct by the students is facilitated through the Students Charter, Medical Students pledge etc. and discipline is monitored through the Deputy Proctor and the student counsellors. The faculty strictly enforces the anti-ragging policy. Provision of transport for new entrants to hostels that house only the newcomers is a step towards ensuring this.

Mentors are entrusted with the task of tracking the progress of students, particularly of those who obtain low grades. Student counsellors are enthusiastic and have regular meetings with the students.

### **Weaknesses**

There is poor student participation in online feedback and the faculty must ensure that this aspect is improved in the future. It is recommended that UGC approved feedback forms with required amendments are used as a base. There was little evidence for corrective actions being implemented after feedback, although the mechanisms are available.

The orientation programme does not consistently include sessions on student societies and sports facilities and on opportunities for the development of soft skills during their university life, which is particularly important for medical students who have a heavy work load. There was insufficient evidence to demonstrate regular staff appraisals and balancing of workloads among staff within a given department.

Research training was evident although the output in terms of publications can be further improved.

A policy on special needs is available but is not internalized yet. The helpline facility although available is seldom used, and a mechanism for follow up actions is unclear.

Although the GEE and SGBV cell has been established at the university level the participation of the Faculty of Medicine can be improved.

## **Criterion 2-Human and Physical Resources**

### **Healthy Practices and Strengths**

Faculty of Medicine has adequate and skilled staff of different grades such as Senior Lecturers, Professors and Senior Professors for designing, development and delivery of academic programmes, research and outreach activities. More than 95% of the academic staff

possesses relevant postgraduate qualifications and have been trained in mentoring and counselling processes.

Physical resources are good at present and the Faculty takes timely measures to ensure the profile of the Human Resources to meet its needs as well to match with national and international norms.

The Faculty has a clear policy on induction programmes for the academics and new staff is trained at Faculty. The induction programme is conducted annually by the Medical Education Unit and it's mandatory for the confirmation of the staff.

The Faculty ensures that the capacity of all staff is continuously upgraded and enhanced through provision of in-service, Continuous Professional Development (CPD) programmes and the impact of CPD is monitored, and remedial actions are taken as and when it is necessary.

The Faculty ensures the availability of adequate and well maintained infrastructure facilities specified by the SLMC for administration, teaching and for continuous learning. There are plans for future improvements and lots of space is available for self-studies and small-group discussions of the students. A student-friendly environment is available for recreation as well.

As it is a professional study program, the Faculty offers suitable clinical training facilities. A fully fledged teaching hospital which is also accredited for postgraduate training is available in close proximity.

The Faculty has a spacious library, well-resourced library facility with networking and holds up to date print and electronic forms of study materials, coupled with other facilities such as reprography, internet, inter-library loans etc., and provides a user-friendly service; but the library usage very little.

The Faculty ensures the availability ICT facilities with e-library and technical assistance to provide adequate opportunities for students to acquire ICT skills.

The Faculty ensures the students are provided with guidance in learning and use of English as a Second Language (ESL) in their academic work through a well-resourced English Language Teaching Unit (ELTU). Students have appreciated the training and activities of ELTU.

The Faculty ensures that the students are provided with adequate training on 'soft skills/life skills'.

Students engage in multicultural programmes to promote harmony and cohesion among students of diverse ethnic and cultural backgrounds. Students expressed their satisfaction.

### **Weaknesses**

It is recommended to improve the number of PhD holders in the faculty as only 23% of the staff have PhD degrees.

Student feedback on Human and Physical resources have not been obtained and documented.

### **Criterion 3: Program Design and Development**

#### **Strengths and Good Practices**

The MBBS degree programme followed a traditional curriculum until 2004, when a major curriculum revision called “Beyond 2004” was undertaken. It is an outcome-based curriculum which consists of four streams comprising modules/ course units and follows a semester calendar. The clinical stream begins in the second year and remains subject based. This course structure ensures the achievement of the programme outcomes / graduate profile. Subsequently, amendments were made in 2007, 2010 and 2013. The last re-visit took place in 2016 with further improvement in the curriculum incorporating current trends and developments in the field of medicine which is aligned with the SLQF. Adaptation of SLQF and the adaptation of the Subject Benchmark System (SBS) were evident in preparation of revised curriculum in MBBS study programme. The amendments were forwarded through Faculty Board to ADPC for Senate approval.

The programme design and development with revision of curriculum has been carried out with wider participation of the Departments, Faculty Board, Curriculum Development Centre (CDC), Clinical Curriculum Development Committee (CCDC) and external stakeholders such as Ministry of Health, and extended Faculty specialists, by having curriculum revision workshops and making a Programme Management Policy. Extended Faculty Specialists and Hospital Administrators of the Ministry of Health are members of the Faculty Board and Curriculum Development Committee. They have participated in the programme reviews and development.

The revised MBBS programme is well designed to achieve the vision and mission of the Faculty of Medicine and intended learning outcomes of the programme. This programme has 8 semesters in the pre-clinical and para-clinical segments and a clinical clerkship programme of 3½ years overlapping with the basic sciences from year 2. Faculty is following the semester system for the first four years of study and for the final year, the term system is adopted.

The programme is managed by the Curriculum Development Centre (CDC), established under the “Beyond 2004 Revised Curriculum”. The CDC is monitoring, reviewing and updating the curriculum. The Clinical Curriculum Development Committee (CCDC) was established in 2016, to assist CDC to manage the clinical curriculum.

The programme adopts an Outcome Based Education (OBE) concept, where there is a good constructive alignment. The constructive alignment is ensured by blue printing and mapping for Teaching / Learning activities and Assessment strategy. Intended Learning Outcomes (ILO) of the Course/ module/ clinical appointments are blue printed against the programme ILOs and graduate Profile. The programme complied with qualification descriptors of SLQF level 7, SBS

SLMC requirements. Programme fulfils the national need for doctors as specified by the MOH and recommended by professional colleges, UGC and WHO.

The programme requires students to engage in diverse learning activities and delivery is student centred. Student centred learning is incorporated incrementally throughout the programme. It is also designed to enhance intellectual engagement and impart practical and transferable skills in an incremental manner. Integrated self-directed, collaborative learning, critical thinking, interpersonal communication, and teamwork via comprehensive range of teaching / learning methods including assignments, practicals, seminars, research. Skills laboratory training sessions, independent clerking of patients, student ward rounds, student internship and case presentations are embedded in the programme.

Learning outcomes are clearly defined and made known to students through detailed Faculty Handbooks updated every year. Programme also has selective and elective modules incorporated. The programme includes student orientation for new entrants, with an English course for all the new entrants conducted by the English Language Unit of the faculty. In addition this programme has Sinhalese language classes for international students especially for Bhutanese.

MBBS programme has been completed on schedule with good completion rates and awards. It has illustrated good graduation rates and employment rates such as internships and postgraduate programmes.

There is evidence of dissemination of programme design guidelines to relevant staff, and staff feedback.

They have an effective process for regular monitoring and review of design, development and senate approval of programmes. The Faculty has an effectively functioning IQAC, which is involved in internal monitoring and evaluation.

### **Weaknesses**

Although recently, the Faculty considered and developed a fall back option programme such as Diploma in Human Biology and Bachelor of Health Sciences, it is not implemented yet. However the dropout rates are also very low.

There is a functioning Medical Education Unit in the faculty with specifically trained staff. But it is desirable to increase the number of staff.

The feedback forms and its analysis about teaching and assessments from students were evident, but participation was not good, less than 50% in some modules.

The feedback from employer/ professional satisfaction survey was not conducted.

The provision for students with disabilities is evaluated and identified recently but is not implemented yet.

## **Criterion 4 – Course / Module Design and Development**

### **Strengths and Good Practices**

Course design and development followed a systematic process, which is laid down in the faculty policy document. The process followed an outcome-based approach. The course design and development has been carried out by the internal experts and external subject experts and Faculty Board. The required guidelines in course design have been followed. Approval has been obtained from relevant bodies such as the Faculty board and Senate.

The course has four main streams and modules, designed to meet the programme objectives and outcomes. The courses are designed in compliance with SLQF, SBS, SLMC, MOH and professional bodies.

Course modules have been developed with specified ILOs, detailed course contents, credit value, assessment methods and references using standard formats.

Each course / module is designed with contents, learning activities and assignment tasks are systematically blueprinted and aligned with course / module outcomes are aligned with programme outcomes, in order to ensure constructive alignment.

The course design incorporates different types of learning such direct contact hours, self-learning time, laboratory studies, field studies, clinical work, shadow house officers training etc. The students are informed of the course specification and the detailed curriculum documents well in advance via the Faculty Handbook, Faculty Webpages, lecture schedule, time table and introductory lectures. The course is structured and scheduled to allow students to complete the course within the stipulated period of time. The programmes of all batches are plotted on a timeline using the MAT for completion of courses on time. The low dropout and good pass rates are commendable achievement of the courses.

Course design and development incorporated with appropriate Information Communication Technology (ICT) facility.

Staff of the faculty undergoes regularly Continuous Professional Development (CPD) activities and staff development workshops etc.

Courses are regularly monitored by the Monitoring & Evaluation Committee. Faculty has a well-functioning IQAC since 2013 and actively involved in monitoring, evaluating and improving the courses and modules of the programme.

### **Weakness**

There is a mechanism considered for differently abled students and special needs of students but not internalized yet.

## **Criterion5 – Teaching and Learning**

### **Strengths and Good Practices**

The Faculty has teaching and learning strategies that are based on the Faculty's mission and curriculum requirements. The Faculty has been developing and adopting its corporate plan and the action plan.

The Faculty provides course specifications in the Student Handbook and timetables are prepared weekly and displayed in the web before the commencement of the course. They place the whole plan of the course called 'MAT' and also are displayed in the web. The Faculty regularly updates the website.

Course specifications, intended ILOs and the details on student evaluation are clearly presented in the Student Handbook and the student Handbook is given to the students during registration. Almost all the subjects have the blue prints. Substantial numbers of clinical appointments have log books to monitor the student progress.

Faculty had a major curriculum revision in 2004 and have been amending the curriculum with various modifications and had another considerable revision during 2016. The revision also has incorporated the adoption of the semester system and then later the SLQF. The staff have been given awareness on SLQF by conducting several workshops through Medical Education Unit and the Staff Development Centre of the Faculty. Now the Faculty is following the semester system for the first four years of study and for the final year, the term system is adapted.

The Faculty encourages blended learning (mixture of diverse delivery methods such as seminars, small group discussions, court room studies, clinical training) at different levels to maximize student engagement with the program. Technology is being used as instructional aid. The study materials are available in LMS and the student feedback is obtained through LMS. Teachers engage students in self-directed learning and collaborative learning through skill laboratories using simulated manikins. Soft skills are provided at the beginning of the course, during the induction program.

Evidence was provided and personal observations during the site visit showed adoption of teacher-directed and student-centred teaching-learning methodologies. Teachers integrate appropriate research and scholarly activities of their own/others' and current knowledge in the public domain into their teaching. The Curriculum Coordinating Committee prepares the time table and the Curriculum Monitoring Committee monitors these activities. All these committees have their monthly meeting and the activities are monitored systematically.

Paper-setting, scrutinising, marking and second marking are systematically carried out. Pre-results boards are conducted either at the department level or with the examiners of the co-modules. The results are displayed on the Notice Board. The Faculty provides the transcripts on time. Results are released in time and the repeat examinations are also conducted without delay. Certain subjects have in-course assessment examinations and monitor the performance of the

students. The results of the weak performers are sent to the respective mentors for observations and advice.

Teaching learning strategies are assessed by collecting the student feedback and by obtaining feedback of the final year clinical examinations, for which the external examiners are invited. More than 75% of the students are satisfied with the clinical teaching. A full cycle of peer review was carried out by the faculty.

Teachers encourage students to contribute to scholarship, creative work, and discovery of knowledge to relate theory and practice appropriate to their programs and the institutional mission. The students carry out research and different modules are introduced to introduce research, communication skills and to get into e-books and e-journals to have better awareness on the study program, research information and to be in pace with the developments. The e-library is also opened till 6pm for student use. The students are grouped into a minimum of 10 to carry out the research. This helps them to learn, how to work in a group and to share responsibilities. The Research Committee monitors the activity and the teachers have published their research findings in journals and books and presented in scientific forums. To evidence this students have published in journals and have made presentations in research symposia. Further during 2018, a student research symposium was conducted by the Faculty. The Faculty has several study areas, equipped with Wi-Fi facilities and a closed area with multimedia facility in addition to the Wi-Fi facility. This helps the students to have group studies and promotes collaborative learning habit.

The Faculty has Wi-Fi facilities in the open study areas and in a closed area where multimedia facilities are available. The Faculty has considered the possibility of getting differently-abled students and have developed a policy, but the faculty does not get such students. However during the course of their studies, a few students meet with accidents and their short-term problems have been taken into account. The new buildings are equipped with lift facilities and other buildings have ramps.

The students have evidenced that there is no gender discrimination. Policy on gender equity is available at the University level and the faculty gives equal opportunities to both the sexes.

Annually the students select best three teachers among pre-clinical, para-clinical and clinical levels and the Faculty issues certificates for all nine teachers. Student performance statistics and reports are available. The Faculty maintains personal files for each student.

Allocation of work to the staff is fair and transparent and the staff inform the Head of the Department in time so that the workload is evenly distributed among the available staff. Documents on work norms and work load of staff are available along with the notional hours.

## **Weaknesses**

Certain subjects do not have an in-course assessment component and hence continuous monitoring of the students is not done in those subjects. It would be advisable to include at least two in-course evaluations for a semester for such subjects/ modules. The basic principles of the 'semester system' is not followed, i.e. in-course assessments include the written examinations, mid-semester examinations; quiz, etc. are not conducted in most of the subjects.

The feedback from the final year external examiners has to be prepared in an objective manner and should be streamlined. The feedback on the courses and course modules are provided by only a small number of students. The students have to be advised and emphasised on the need to provide feedback on different aspects such as teaching-learning process, clinical teaching at different levels, evaluation methods, etc.

Large size research groups are carrying out the research projects and this number will not help to achieve the objectives of carrying out research and hence the reduction in student number needs to be considered. The research publications and the abstract presentations are few when compared with the research activities of the students. However the faculty has commenced a Student Research Symposium during 2018 and it is a good start.

The common merit list during the past four years, does not give significant changes in the performance of the students.

No appraisal avenues are available for both academic and non-academic staff.

## **Criterion 6: Learning Environment, Student Support and Progression**

### **Healthy Practices and Strengths**

The Faculty adopts a student-friendly administrative, academic and technical support system that ensures a conducive and caring environment, and greater interaction among students and staff. There are dedicated staff for student affairs.

Faculty identifies learning support needs for its programmes and provides effective learning environment through appropriate services and training programmes. Learner support is provided through appropriate online support, tutor support, library and information service, laboratories, skill labs and clinical training.

The Faculty offers all incoming students an orientation programme regarding the rules and regulations of the institution, student-centred learning, outcome based education and technology based learning.

The Faculty guides its students to comply with the code of conduct for students (Student Charter), discharge their rights and responsibilities and utilize services available in the faculty. The Student Handbook gives all the information adequately. Students led activities being monitored by academic staff and provide platform for students to voice their concerns.

The Faculty's library and e-library use ICT-led tools to facilitate student access and enable them to use information effectively. On-going training programmes conducted by library, e-library, MEU, SDC and ELTU provide ample training for students/staff on use of common learning resources.

Mentors provide advice to poor performers.

The Faculty promotes active academic/social interaction between the faculty and students. A few students are assigned to each mentor, with dedicated time for meetings. The medical exhibition, student research sessions and academic sessions promote the academic staff-student interaction.

Co-curricular activities such as sports and aesthetic programmes with social and cultural dimensions are encouraged and facilitated to enhance the educational experience in keeping with the mission of producing responsible compassionate doctors.

The Faculty regularly monitors retention, progression, completion/ graduation rates. The dropout rate is negligible and all graduates are guaranteed employment by the Ministry of Health to date.

The Faculty promptly deals with students' complaints and grievances, and delivers timely responses. Students' complaints are addressed by the Student Advisory Committee, academic mentors, student counsellors and individual teachers.

The Faculty networks with alumni and encourage them to assist students in preparing for their professional future. There was evidence for the Peradeniya Medical School Alumni Association (PeMSAA) supporting the faculty and students morally as well as financially.

### **Weakness**

The Faculty needs to improve the academic support services and guidance to meet the needs of differently abled students.

## **Criterion 7 – Student Assessment and Awards**

### **Strengths and Good Practices**

Assessment of student learning is considered as an integral part of programme design, with a clear relation between assessment tasks and the programme outcomes. The Faculty has policy on outcome based programme design; Programme and Course specifications; By-laws; examination rules and regulations. The assessment strategy is aligned to specified qualification level descriptors of the SLQF and SBS and requirements of the UGC. The curriculum contains course specifications which are aligned with the ILOs and teaching learning methods.

The Faculty has procedures for designing, approving, monitoring and reviewing the assessment strategies for programmes through curriculum development, Curriculum Coordinating and

Curriculum Monitoring Committees (incorporating all aspects of clinical training). The meetings are conducted monthly and the minutes are circulated to the members, which are also discussed at the Faculty Board Meeting.

The Faculty reviews and amends assessment strategies and regulations periodically as appropriate and remains fit for purpose in assessment methods. The weightage relating to different components of assessments are provided in the Student Handbook.

The Faculty has a policy for the appointment of internal and external examiners. The duties related to the internal examiners are informed to the Heads of the respective Departments while the external examiners are personally informed by sending letters. The Faculty ensures that the reports from external examiners are considered by the examination board in finalizing the results. Rules and regulations related to examinations procedures are provided to the examiners.

The Examinations By-laws and details of the examination offence related punishments are provided in the Student Handbook. The Faculty ensures that staff involved in assessing the students are competent to undertake their roles and responsibilities and have no conflict of interest. Each examiner prepares the question papers with the marking scheme and the second examiner scrutinises the question paper. The first and second markings are carried out and for each module and a chief examiner is also appointed. The policies to appoint the examiners were developed recently. The external examiners are appointed for the final year clinical examinations.

The students are informed of the examination schedules and time tables, which are displayed in the web. The Faculty has its own tailor-made Staff Development program to train the new comers as well as conduct development oriented programs which are currently in practice or on all the teaching learning activities to be introduced to the staff.

Appropriate arrangements are made available by the Faculty for students with disabilities whenever necessary, for examinations. The Faculty has prepared a policy to deal with differently abled students.

Some of the Courses / modules have formative assessment examinations and provide regular feedback to the students; the results of the weak performers are informed to the receptive mentors.

The pre-results board is held at the Department level or with the examiners of the Modules depending on the type of examination; whether the examination is conducted by a particular Department or by incorporating academics from different departments. The results of the papers / modules are released at the Faculty. Only the final results are released by the Vice Chancellor.

Graduation requirements are ensured in the degree certification process and the transcript accurately reflects the stages of progression and student attainments. A complete transcript indicating the courses followed, grades obtained and the aggregate GPA/grades, and class (where appropriate) is made available to all students by the Faculty.

The results are released in time. Examination results are documented accurately and communicated to students within the stipulated time. The results are displayed on the notice board and repeat examinations are held 6 weeks after release of the results.

The Faculty ensures that the degree awarded and the name of the degree complies with the guidelines (qualification descriptor), credit requirements and competency levels (level descriptor) detailed in the SLQF.

### **Weakness**

The continuous monitoring of the students based on the semester system is not in place for most of the subjects during the first four years.

## **Criterion 8: Innovative and Healthy Practices**

### **Healthy Practices and Strengths**

The Faculty and Departments have in place some strategies to foster innovative and healthy practices which have led to enhancing of the learning experiences of the students. The use of ICT facilities were impressive with two e-libraries which are open for the students even after hours manned by trained staff, use of ICT facilities for teaching many modules/laboratories with digital demonstrations. The e-library and the library provide easy access to many up-to-date journals and e-books and there is provision for students to request and obtain journal papers through the library in a short space of time. There was evidence for the establishment of an appropriately designed LMS that facilitates multi-mode delivery which, as reported, is being used by the staff to a satisfactory level.

The impressive skills laboratory is used to give students hand-on experience with managing emergencies, trauma etc. and the court room atmosphere (Forensic Medicine) also gives the student a real-life experience. These are seen as innovative teaching approaches.

The curriculum incorporates a group research project and the students have received some training in research methodologies, writing proposals and statistics. The reports produced are of a satisfactory standard. Collaborative research is conducted with other national / international universities / institutions and there was evidence for some student exchanges. The maintenance of academic standards has been facilitated by having well documented procedures (TOR and guidelines of management of the MBBS programme, two booklets that have been prepared in 2018, Guidelines for clinical rotations), the HDC and the Research Committee. The faculty has placed heavy emphasis on research and some measures have been taken to encourage research by providing grants (particularly to young staff as seed money – grants evaluated and monitored by the Research Committee), providing training on proposal writing and through collaborative work or being resource persons for national (e.g. PGIS/PGIM) and international entities. There is provision to test for plagiarism. There was some evidence for the dissemination of knowledge

through national / international peer-reviewed publications, collaborative research work and MOUs. Staff and students have been provided with an opportunity to present their findings at the Faculty sessions (although this is not regularly held) and university sessions. Achievements (awards) of the academics are announced at the FB.

The faculty has diversified means of generating funds which includes two fee-levying courses (Diplomas in Forensic Medicine and Sports Exercise Science), enrolment of overseas students, grants obtained through the university (e.g. WHO, UGC) and those secured in personal capacities and through clinical diagnostic services. The generated funds are utilized by the faculty / departments to purchase equipment/kits for research work and for undergraduate teaching.

The academics have contributed in various ways to national development through research findings (e.g. shaping policies /guidelines – toxicology, CKDu) and by offering their services to the community (holding educational exhibitions/ medical camps) and hospitals and expertise to address national issues (e.g. renal transplants, snake bites).

The faculty supports extra-curricular activities cultural/religious events, talent shows by providing physical, financial and human resources. The outdoor mini-auditorium is especially conducive for such activities. There was some student participation in national/ international competitions, particularly in quizzes.

Sound procedures are followed for curriculum design and approval, and for first and second marking.

The study programme also includes one-the job training (shadowing House Officers) which better equips the final years to take on the role. Students are also exposed to the world of work through partnerships with industries (i.e. clinical training) and other national entities/units.

Good teachers are rewarded by the giving the Best Teacher awards to three academics in the faculty each year.

The university has a newsletter which announces the achievements of both staff and students and the Department of Forensic Medicine publishes a journal which is commendable.

A fall back option has been put in place in 2018.

### **Weaknesses**

A few areas which could be improved were noted. The medical students should be urged to participate more in university sports teams.

The research output can be improved as many of the departments conduct postgraduate research or collaborate with other postgraduate units elsewhere. The student sessions have commenced only recently and only a few students have presented their research findings outside the faculty. Starting up a medical journal (Faculty) is also recommended.

There is no credit transfer policy as at present and the fall back option (Diploma in Human Biology/Bachelor of Health Sciences) has been recently been put in place (2018) and is yet to be internalized.

## 6. FINAL EVALUATION

| No | Criterion   | Weighted Minimum Score* | Actual Criterion-Wise Score |
|----|---|-------------------------|-----------------------------|
| 1  | Programme Management                                  | 75                      | 143                         |
| 2  | Human and Physical Resources                          | 50                      | 97                          |
| 3  | Programme Design and Development                      | 75                      | 138                         |
| 4  | Course / Module Design and Development                | 75                      | 145                         |
| 5  | Teaching and Learning                                 | 75                      | 139                         |
| 6  | Learning Environment, Student Support and Progression | 50                      | 94                          |
| 7  | Student Assessment and Awards                         | 75                      | 144                         |
| 8  | Innovative and Healthy Practices                      | 25                      | 45                          |
|    | <b>Total score (out of 1000)</b>                      |                         | <b>945</b>                  |
|    | <b>Total score (out of 100)</b>                       |                         | <b>94.5</b>                 |

**Final Grade: A**

## 7. COMMENDATIONS AND RECOMMENDATIONS

### **Commendations**

#### **Administration**

1. A hierarchical structure headed by the Dean, Faculty Board along with three standing committees and 20 adhoc committees aid the smooth implementation of the study program. Student representation in the committees is satisfactory.
2. The action plan and corporate plan, Faculty by-laws and several guidelines/ policies (management guide, procurement guide) are in place. Participatory approaches for the preparation of action plans for the faculty and departments.
3. QA cell was established in 2013 and has in 2018 taken a lead role in the preparation of TORs/procedural guidelines for various committees. QA has had several internal reviews and had an opportunity to share good practices
4. Faculty handbook / website is updated annually and has comprehensive information with course details and ILOs. Students receive the Handbook during registration.
5. Orientation programme is offered to all incoming students regarding the rules and regulations of the institution, student-centred learning, outcome-based education and technology based learning.
6. MBBS programme is well designed to achieve the vision and mission of the faculty with intended learning outcomes for the programme.
7. Faculty conducts a tailor made staff development program for the medical faculty staff, which is also attended by other medical faculty staff.
8. Staff undergo CPD and staff development workshops etc regularly.
9. Peer review is being completed.

#### **Curriculum**

1. MBBS programme was reviewed and revised in 2004 from the traditional method. It has been revised and amended 3 times since then, with wider participation of Ministry of Health (Employer), CDC, CCDC, Departments and Faculty Board following subject bench mark fulfilling the national need for doctors as specified by the MOH and recommended by professional colleges, UGC and WHO.
2. It has also responded to national needs e.g. National Health Policy and global trends were taken into consideration by establishing new departments and unit such Anaesthesiology Department, Radiology Department and Family Health unit.

3. Each course / module is designed with contents, learning activities and assignment tasks are systematically aligned with course / module outcomes are aligned with programme outcomes – constructive alignment approved by the Faculty and Senate.
4. Course/ module/ clinical appointments with ILOs prepared based on blue print and graduate Profile are available.
5. The programme complied with qualification descriptors of SLQF level 7, SBS, and professional bodies. Staff are well-informed on SLQF through Workshops.
6. The required guidelines in course designing have been followed. Approval has been obtained from relevant bodies such as the Faculty board and Senate.
7. Programme also has selective and elective modules incorporated.
8. The faculty and department have in place some strategies to foster innovative and healthy practices teaching and learning
9. The programme ensures diverse student centred learning activities, Integrated collaborative learning, critical thinking, interpersonal communication and teamwork by incorporating direct contact hours, self-learning time, laboratory studies, field studies, clinical work, shadow house officers training etc. – it is included in the Faculty Handbook, lecture schedule and time table.
10. Learning outcomes are clearly defined and made known to students through a comprehensive Faculty Hand book (FHB) updated every year and given to them at the orientation programme.
11. The course is structured and scheduled to allow students to complete the course within the stipulated period of time.
12. Orientation programme focuses very much on the aspects of introduction of academic aspects and instills the importance of being conversant in English.
13. Sinhalese language classes are conducted for international students, especially the Bhutanese.
14. Soft skills are provided at the beginning of the course during the induction program.
15. MAT (available on-line) provides a timeline for the students to achieve targets.
16. Course design and development incorporated with appropriate ICT facility, LMS (Moodle) is being used.

### **Curriculum monitoring**

1. The Curriculum Monitoring & Evaluation committee regularly monitors the courses.
2. Different subjects have logbooks.
3. Feedbacks of the external examiners for the final year clinical examinations are obtained.

4. Student feedback has been obtained and more than 75% of the students are satisfied with the clinical teaching
5. Staff are grouped into preclinical, para-clinical and clinical and best teachers are selected by the students.

### **Evaluation**

1. The student evaluation has been amended from time to time.
2. Paper setting, scrutinizing, marking, second marking are carried out. Sound procedures are followed for curriculum design and approval, and for first and second marking.
3. The policies to appoint the examiners were developed recently and are in place.
4. Examination guidelines are given to the staff.
5. The examiners lists are informed to the respective Heads of the departments and the external examiners are informed by sending individual letters.
6. A marking scheme is prepared by the examiners and first and second markings are done systematically.
7. Results are released on time.
8. The examination formats for the final year are followed based on the UGC guidelines.
9. The students were informed on the examinations and the timetables are displayed in the web.
10. The clinical departments have formative assessments. External examiners summative assessments are included in the final results.
11. The student's handbook contains the information on the examination offences.
12. The pre-results board as well as the faculty level results board are held
13. The results are placed on the notice board
14. The faculty provides the transcripts

### **Research**

1. Students are given in-depth knowledge on research and communication.
2. Student research is presented and published, and in 2018, the first student symposium was conducted
3. Heavy emphasis on research - providing grants (particularly seed money), providing training on proposal writing, opportunities for collaborative work.

4. Academics contribute to national development – through research findings or services.
5. There is provision to test plagiarism.

### **Learning environment and facilities**

1. The Faculty adopts a student-friendly administrative, academic and technical support system that ensures a conducive and caring environment, and greater interaction among students and staff and appropriate services and training programmes.
2. Satisfactory usage of the ICT platform, freely available Wi-Fi facilities recreational and study spaces facilitating Students centred learning.
3. The Faculty's library and two e-libraries (manned by trained instructors opened between 8 am to 6 pm) use ICT-led tools to facilitate the students to access journal papers /e-books and use information effectively.
4. Innovative practices includewell-equipped skill labs, and a court room atmosphere with hands-on-experience.

### **Student andstaff welfare**

1. Faculty strictly enforces the anti-ragging policy withseparate hostels for new entrants, transport to and from hostels.
2. The Faculty guides the students to comply with the code of conduct for students (Student Charter), discharge their rights and responsibilities and utilize services available in the faculty. Student Handbook gives all the information adequately.
3. Students Affairs Committee addresses student matters and students are content with the curriculum and facilities.
4. Student safety/discipline is ensured through Students Charter, Medical Students pledge etc. and discipline - Deputy Proctor and the Student Counsellors
5. Faculty promptly deals with students' complaints and grievances, and deliver timely responses.
6. Mentors provide advice to poor performers.
7. The Faculty regularly monitors retention, progression, completion / graduation rates.
8. A fall back option was put in place since 2018.
9. The Faculty promotes active academic/social interaction between the faculty and students.
10. The Faculty networks with alumnus and encourage alumnus to assist students in preparing for their professional future.

11. The faculty supports extra-curricular activities cultural/religious events, talent shows and by providing physical, financial and human resources - outdoor mini-auditorium. Increased participation in sports in recent years.
12. Student participation in national/ international competitions, particularly in quizzes
13. Diversified means of generating funds - fee levying courses, enrolment of overseas students, grants – university/ faculty and personal capacities, alumni, exhibitions and through clinical diagnostic services
14. Generated funds are utilized by the faculty / departments to purchase equipment/kits for research work, student scholarships, etc.
15. Teaching and supervision in other national (e.g. PGIS/PGIM) and international entities
16. On-the job training (shadowing House Officers) and community projects. Partnerships with industries and other national entities/units provided
17. Achievements (awards) of the academics are announced at the FB, good teachers are rewarded (Best Teacher awards)
18. University has a newsletter and the Department of Forensic Medicine publishes a journal

## **Recommendations**

### **Administration**

1. It is advised to obtain the feedback from employer/ professional satisfaction survey.
2. Even though the dropout rates are very low, it is recommended to take action whenever necessity occurs.
3. It is recommended to increase the number of specifically trained staff to Medical Education Unit.
4. It is recommended to develop avenues for the appraisal of both academic and non-academic staff.

### **Curriculum**

1. It is recommended to follow the ‘proper’ “Semester system’ principles such as having in course assessments including the written examinations, mid-semester examinations, quiz, etc.
2. Credit transfer policy need to be developed.

### **Curriculum monitoring**

1. It is recommended to streamline the final year clinical examination reports.
2. It is recommended to improve the ranking of graduates from the Faculty on the common merit list
3. Improve student number giving feedback.

### **Evaluation**

1. Continuous monitoring of the students based on the semester system to be implemented for certain subjects.

### **Research**

1. It is recommended to improve the research output of both the students and the staff
2. It is recommended to increase the number of research abstract presentations and publication of the students
3. Reduce the number of students in research groups

### **Student welfare**

1. The curriculum needs to address the requirements of the differently-able students
2. It is recommended to urge the medical students to participate more in university sports teams.

## 8. SUMMARY

This report presents the findings of the review panel on the quality of the MBBS degree program conducted at the Faculty of Medicine, University of Peradeniya, Sri Lanka. The review was conducted during 2<sup>nd</sup> to 5<sup>th</sup> September 2019 adhering to the guidelines provided in the *Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions*.

The QA cell was established at the Faculty in 2013 and in 2018 has taken a lead role. The Faculty gives priority for improving and monitoring the processes of quality enhancement. Teaching and learning strategies specified in the curriculum documents comply with the institutional mission and curricular requirements. Curriculum of the MBBS degree has been revised adopting the Qualification Framework of UGC. The use of LMS is in place.

The basic services for the students in terms of canteen, medical facilities, recreational facilities, library, and hostels are commendable while the sports and extracurricular activities need more input. There is a student database/ student portfolio to get to know the progress made by students during their course of studies is in place and poor performers are monitored and advised by the mentors.

The overall score of the MBBS degree program is 94.5%. Actual criterion wise scores for all eight criteria were more than the relevant weighted minimum score. The programme is awarded a Grade “A” with a very strong mark and the accomplishment is considered as “Very Good”. This indicates an excellent level of accomplishment of quality expected in the Programmes of Study and the program needs improvements in the few shortcomings indicated.

## Annex 1

### Site Visit Time Schedule

| Day                                | Time          | Activity  |
|------------------------------------|---------------|---|
| <b>Day 1:</b><br><b>02/09/2019</b> | 8.00 - 8.30   | Meeting with IQAU Director  |
|                                    | 8.30 – 8.45   | Meeting with Vice Chancellor  |
|                                    | 8.45 -9.00    | Meeting with Dean of the Faculty  |
|                                    | 9.00 - 9.30   | Meeting with Heads of the Departments   |
|                                    | 9.30-10.00    | Meeting with Academic Staff members   |
|                                    | 10.00 – 10.15 | Tea Break   |
|                                    | 10.15-12.45   | Scrutinizing documentation of evidence  |
|                                    | 12.45-13.30   | Lunch   |
|                                    | 13.30- 13.45  | Observing an exam (Y2S2 Pathology, 1 -3)  |
|                                    | 13.45 – 14.00 | Observing a lecture ( Y3 Psychiatry WLT 1.30 – 2.30)  |
|                                    | 14.00 – 14.30 | Observing a practical ( Y2S1 Physiology 1.15 – 4.15)  |
|                                    | 14.30-15.00   | Visiting FQAC and CCC   |
|                                    | 15.00 – 15.15 | Tea break   |
|                                    | 23.15–16.30   | Scrutinizing documentation of evidence  |
| <b>Day2:</b><br><b>03/09/2019</b>  | 8.00 – 8.15   | Observing a lecture ( Y1S2 Physiology LT 8 -9)  |
|                                    | 8.15- 9.15    | Observing student Facilities ( Canteen, open dining areas, E library, medical library, study room, Summit)  |
|                                    | 9.15 – 10.45  | Observing clinical teaching and hospital facilities ( Prof. wards, student rest room and canteen, auditorium)   |
|                                    | 10.45 – 11.00 | Tea break ( hospital consultant lounge)   |
|                                    | 11.00 – 13.00 | Department visit/observing teaching learning facilities (Anatomy museum, Path museum, Parasite microscope lab, nuclear medicine, Skills lab, Forensic medicine courthouse and mortuary) |
|                                    | 13.00 – 13.45 | Lunch   |
|                                    | 13.45– 4.15   | Meeting with non-academic support staff   |
|                                    | 14.15 – 16.30 | Scrutinizing documentation of evidence  |

|                                    |               |  |
|------------------------------------|---------------|--|
| <b>Day 3:</b><br><b>04/09/2019</b> | 8.00 - 10.15  | Department visits continue...<br>Anatomy dissection                |
|                                    | 10.15 – 10.30 | Tea break  |
|                                    | 10.30 – 12.30 | Observing documentation of evidence                                |
|                                    | 12.30 – 13.15 | Lunch  |
|                                    | 13.15 - 13.45 | Meeting with the members of faculty,students union / Recent Alumni |
|                                    | 13.45-14.00   | Meeting with the student counsellors                               |
|                                    | 14.00 – 14.30 | Meeting with students  |
|                                    | 14.30 - 15.15 | Observing documentation of evidence with tea                       |
|                                    | 15.15 – 15.30 | Observing a SGD (Micro 14.30 – 15.30)                              |
|                                    | 15.30 – 16.30 | Observing documentation of evidence                                |
|                                    |               |  |
| <b>Day 4:</b><br><b>05/09/2019</b> | 8.00 – 10.00  | Observing documentation of evidence                                |
|                                    | 10.00 – 10.15 | Tea break  |
|                                    | 10.15 – 12.30 | Wrap-up meeting  |
|                                    | 12.30 – 13.30 | Lunch  |