



PROGRAM REVIEW REPORT

Bachelor of Medicine, Bachelor of Surgery(MBBS) Degree Programme

Faculty of Medicine and Allied Sciences

Rajarata University of Sri Lanka

27th to 30th January 2020



Review Panel: Professor Chrishantha Abeysena (Chairperson)

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University Grants Commission, Sri Lanka

1. **University** : Rajarata University of Sri Lanka
2. **Faculty** : Faculty of Medicine and Allied Sciences
3. **Program** : Bachelor of Medicine and Bachelor of Surgery
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5. **Date** : 27th to 30th January 2020

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Section 1: Brief Introduction to the Program

1.1 Overview of the Faculty of Medicine and Allied Sciences

Faculty of Medicine and Allied Sciences (FMAS), Rajarata University of Sri Lanka (RUSL) was established in July 2006 as the fifth and the second youngest Faculty of RUSL. The faculty is located 7 km from the Anuradhapura General Hospital and 17 km from the main campus at Mihintale.

Faculty comprises of seventeen academic departments and units. Anuradhapura Teaching Hospital (THA), which is the third largest hospital in the country, serves as the main teaching hospital of the faculty. THA houses the University Professorial Units in the major clinical disciplines equipped with modern diagnostic and management facilities. Staff of all Clinical Departments provide services as honorary consultants at THA. Community practice area consists of a socio-economically diverse population that enables comprehensive training in primary and preventive care.

The Bachelor of Medicine and Bachelor of Surgery (MBBS) programme is coordinated by fifteen departments through three programme coordinators; Pre-clinical, Para-clinical and Clinical Coordinator. Examinations are conducted by the Examinations division in collaboration with the respective department(s). Student Services Unit (SSU) provides a wide range of services for the convenience of the students by working in collaboration with several centers and units of the faculty.

1.2 Structure of the MBBS Degree Programme

The MBBS programme is conducted over a period of five years (10 semesters). It consists of four main phases; Foundation for medical studies, Pre-clinical, Para-clinical and Clinical phases. The foundation course is designed to make students familiar with the university setting, to improve their life skills and learning skills and to make them aware of the basic aspects of medical ethics and professionalism. During the pre-clinical phase the departments of Anatomy, Physiology and Biochemistry provides the guidance to acquire fundamental knowledge and the skills in assessment of the normal structure and functions of the human body and the basis of dysfunction. Para-clinical phase of the MBBS course which is managed by several departments (i.e. Pathology, Microbiology, Parasitology, Pharmacology, Forensic Medicine and Community Medicine) deals with the theoretical and practical aspects of abnormal structure and function of the human body and the evaluation and management of those. The clinical phase managed by the departments of Medicine, Surgery, Pediatrics, Obstetrics and Gynecology and Psychiatry provides comprehensive clinical training to prepare the graduates to deliver safe and efficient

care to the patients. Medical Education Unit provides the support and guidance for continuing professional development of the staff and for curriculum related matters. The medical curriculum underwent two major revisions in 2014 and 2016, to prepare the graduates for future challenges.

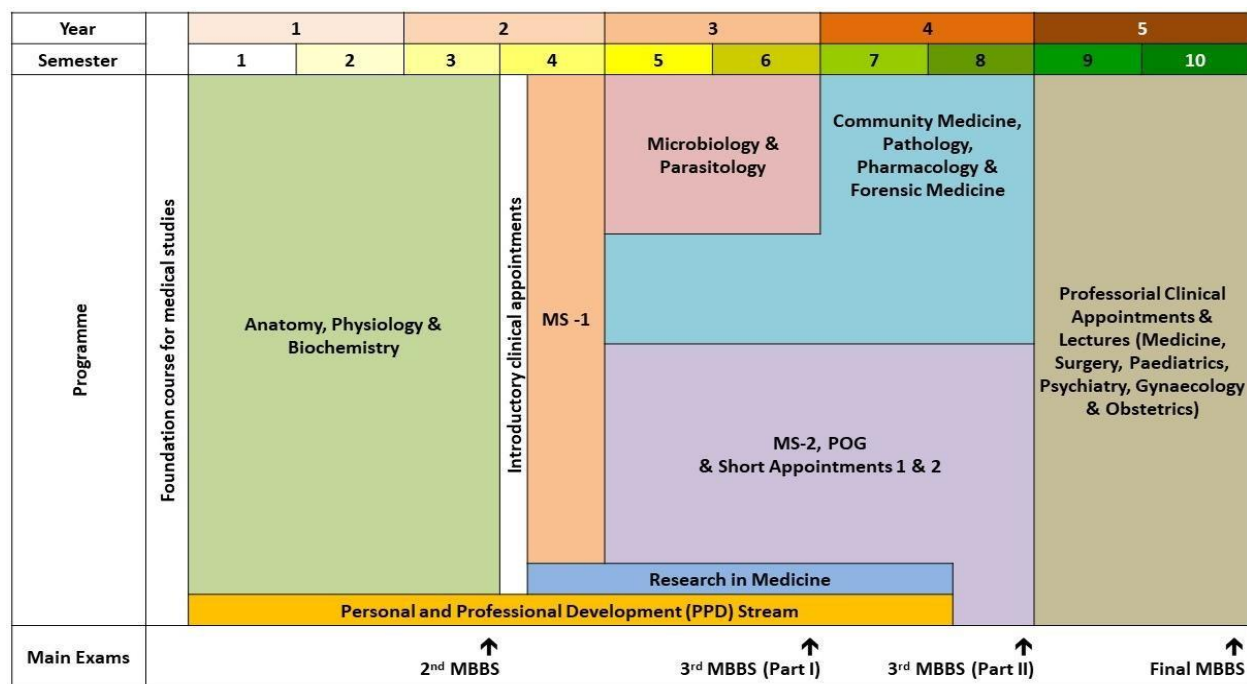


Figure 1.1: Structure of the MBBS Course

The first batch of 171 medical undergraduates from 22 districts were recruited to the faculty on 11th September 2006. Since then thirteen batches have been admitted to the faculty. Seven batches of students have graduated to date. Student intake by sex and the type of enrolment for last five years are given in the Table 1.1.

Table 1.1: Student intake by sex and the type of enrolment for last five years

Year of Intake	UGC Intake (Local Students)			Foreign Students		
	Male	Female	Total	Male	Female	Total
2012/2013	72	107	179	0	2	2
2013/2014	50	129	179	1	2	3
2014/2015	66	111	177	1	2	3
2015/2016	70	110	180	0	0	0
2016/2017	66	114	180	0	0	0
2017/2018	66	113	179	0	1	1

Faculty continually strives to uplift the standards of the institution, by paving the way for students to reach their full potential. The faculty has strengthened its human resources and other infrastructure facilities during the past decade.

Numbers and profile of the academic, academic support and non-academic staff

Table 1.2: Number and Qualification of Academic Staff – 2019

Department	Number of Academic staff - 2019			
	PhD/MD	Master's Degree	Bachelor's Degree	Total
Anatomy	0	2	1	3
Biochemistry	1	4	1	6
Community Medicine	3	2	2	7
Family Medicine	0	1	1	2
Forensic Medicine	1	0	0	1
Medical Education Unit	1	0	0	1
Medicine	6	0	0	6
Microbiology	1	1	2	4
Obstetrics &Gynaecology	2	0	0	2
Parasitology	2	0	1	3
Pathology	2	0	1	3
Pediatrics	3	0	0	3
Pharmacology	2	0	2	4
Physiology	0	1	3	4
Psychiatry	2	0	0	2
Radiology & Anesthesiology	1	0	0	1
Surgery	4	0	0	4

Section 2: Observations on the Self Evaluation Report (SER)

Review team observed, that the Self-Evaluation Report (SER) has been prepared according to the given guidelines in the Programme Review Manual using participatory approach involving academic, non-academic and demonstrators. Student involvement is also evident specially in discussing finalized document prior to submission. The preparation of the SER has been initiated by appointing a criterion group, department representatives and steering committee in 2019, which implies that the SER writing was in required standard. However, in document review during the site – visit, the review team identified unavailability of some evidence listed in the SER. On some occasions, the documents for standards, claims and evidence did not match.

The introduction has given details of insight of the faculty background which clearly helpful for reviewers to get proposition of the entire faculty background. The MBBS programme conducted over a period of five years which consists of four main phases such as Foundation for medical studies, Pre-clinical, Para-clinical and clinical phases. More positive approach is the foundation for medical studies which is helpful for students to prepare for academic work positively and to be aware of the basic aspects of medical ethics and professionalism. The description about administrative structure of the faculty in SER correctly reflected at the site visit.

In SWOT analysis, university had clearly identified unfilled carder positions (more than 50%) as a weakness and is continuously facing difficulties in attracting qualified permanent staff. However, the faculty has taken efforts to overcome the problem by using the services of visiting staff and the optimum use of services of senior experts. Further, the review committee observed that the availability of a relatively young active academic staff is a positive point for introducing new innovations. But for administrative aspects, they need fair training for quality functioning of the faculty. The review team observed that many research laboratories which not directly support the study programme, have been established at the Faculty. In the SWOT analysis this has been mentioned as an opportunity to the programme, and the review team also considered that it would be. However, a weakness that the SER writers have identified is the difficulties encountered by the staff in obtaining leave and this was also clearly highlighted during the site-visit. This is not only specific to the academic staff but also for the non-academic staff.

The review team has identified that the slow progression of infrastructure development projects of the faculty badly affects the availability of accommodation facilities for students and staff members and has considered it as a threat in the SWOT analysis. The review team considers that acceleration of those development projects is very important as the area is highly remote, and this badly affects for academic activities of the faculty.

The format used to present the criteria and standard with their claims in SER is in proper standard and is much helpful during the site visit to trace points. The team is satisfied with the SER they have produced to prove the standards and quality of the programme which are in accordance with Sri Lanka Qualifications Framework (SLQF) and the Subject Benchmark Statements (SBS).

The documents such as the Corporate Plan/Strategic Management Plan had been submitted but their relevance for the criteria and standards were weak. Further, Faculty Board memos and faculty policy documents were not appropriately highlighted for the claim of particular standards. In most occasions, the documents produced as evidence are recent ones, which are less than one year old and therefore can't be considered for this evaluation. The official approval for some documents were missing. Those documents may have been prepared for this purpose and therefore couldn't be considered as valid documents.

Faculty has not undergone a programme review earlier but the recommendation made at the institutional review in 2017 has been considered to make modification in two aspects such as establishment of teacher appraisal system and revision of English language curriculum based on stakeholder comments and requests.

Section 3: Description of Review Process

Review Panel

Review panel appointed by the University Grant Commission (UGC) consisted of Prof Chrishantha Abeyasena, University of Kelaniya (Chairman), Prof Ruwan Jayasinghe (University of Peradeniya), Dr P. Elango (Eastern University) and Dr Kapila Dissanayake (Sabaragamuwa University of Sri Lanka).

Pre site-visit Evaluation

Quality Assurance Council (QAC) of the UGC organized a training workshop for all program evaluators at the UGC. Self-evaluation report (SER) submitted by the Faculty of Medicine, Rajarata University of Sri Lanka was handed over to the individual members of the team by the QAC well before the site-visit. Individual members of the team marked them independently and sent them to the QAC. The team met at the UGC and discussed the desk evaluation reports of each member and came in to an agreement and formulated a common mark.

Site-Visit

Meeting with the Vice Chancellor

The review team started its program review of the MBBS degree program of the Faculty of Medicine and Allied Health Sciences, Rajarata University on Monday the 27th January 2020. The review team met with the Vice Chancellor, Rajarata University of Sri Lanka and had a discussion with him at his office located at the Senate House, Mihinthale.

Meetings and discussions

The review team had a meeting with Director, Internal Quality Assurance Unit of the Rajarata University (IQAU) at his office and discussed the quality assurance mechanisms placed in the University, and guidance and support given to the Faculty of Medicine by the IQAU. By-laws for the management of quality assurance is available. IQAU management committee meetings are held regularly with a minimum of 10 meetings per year but poor attendance at meetings is a major concern. There is no proper mechanism to monitor the activities of different faculties other than the reports presented by the Coordinators of Internal Quality Assurance Cells (IQACs) of the Faculties at the management committee meetings. There are no key performance indicators (KPIs) identified to monitor the activities. Faculty action plans had been prepared by the Faculties and are sent to IQAU with the progress of the previous year but there is no proper mechanism to see whether this has been implemented properly. New policies had been

developed by the IQAU and are available in the faculty website, but they are needed to be implemented. Activities are done by the IQAC of the faculties without proper coordination of IQAU.

The review team had a meeting with the Dean of the Faculty, Heads of Departments and SER writing team at the board room of the Faculty of Medicine. Dean in his presentation explained the past and present situation of the faculty with an overview of the developments of the faculty over the period of time. There had been a major curriculum revision in 2016 and with that a Personal and Professional Development (PPD) stream has been introduced as part of the curriculum but it has not been implemented until very recently. Assessment strategies and weightages are not clear. Curriculum appears to be a mixed system and community medicine appears to be conducted as a full modular system. Teaching learning methods in pre-clinical phase I are integrated however the assessments are still based on subjects. A research component with 8 credits have also been included but the results are taken only as pass or fail. Many students have presented their research findings at local as well as at international research forums which have been supported by the faculty financially. Foundation courses are part of the curriculum but only English is considered for assessment. Passing English is compulsory for graduation. 2nd MBBS exam is a bar exam. Communication skills evidenced base medicine and patients' safety have not been identified as key areas in the curriculum. Rajarata medical faculty has the lowest total recurrent expenditure among all the medical faculties in Sri Lanka due to inadequate money allocation and few numbers of staff employed (50%).

Meeting with the Dean and Heads of Departments was followed by a meeting with all academic staff members excluding the Heads of Departments. Key points raised and discussed at this meeting are as follows:

1. Inadequate number of academic staff members employed. Therefore, the workload of the existing staff is too high.
2. Most of the staff members are young.
3. They receive a good experience and opportunities to get involved with other activities. There is a good interaction with the senior staff and senior staff is providing them with good support and guidance.
4. Promotions get delayed due to excessive workload. Sometimes doing postgraduate studies also get delayed due to faculty commitments.
5. Good coordination between external agencies and international Universities for research.
6. Induction program for the newly recruited probationary lecturers is not conducted regularly by the Staff Development Centre (SDC) and there was no program for the last two years.
7. Good relationship between students in many activities.

8. If they are to do the PhDs in the same University, financial support is not provided through the UGC scheme. Due to the heavy workload in the department, they find it difficult to go out to do the PhDs.
9. Adequate money is available through the faculty development fund for the research presentations. Clear and transparent guidelines are available for allocation. Money received from Dean's awards can be utilized for publications or to buy inventory items.
10. Integrated classes are conducted in the Biochemistry Department.
11. Enough opportunities for Continuing Professional Development (CPD)s.
12. Too much students, therefore providing individual attention for students is difficult.
13. There is a serious shortage of human resources as well as inadequate infrastructure facilities.
14. There is no staff appraisal system.

The review team had a meeting with the temporary academic staff as well. They are mostly involved in research and assisting laboratory classes, few of them are doing clinical based discussions. They are not involved with lectures, tutorials and examinations. They have not been provided with a duty list. They have received some training in research but not in teaching. They do not have much opportunities to do further learning and training.

The review team had a discussion with the administrative staff of the faculty. There is a Senior Assistant Registrar (SAR) and an Assistant Bursar (AB) to the faculty. AB is handling all financial matters except salaries. There is no fund generation activity in the faculty except for the money received from external research grants and from 10 foreign students. AB has not received a job description and a duty list. There are difficulties in procurement activities especially being away from Colombo. They have not received any training program and there are problems with promotions, but there are adequate facilities to carry out high studies. AB is responsible for annual budget plans which she has prepared.

SAR is responsible for all administrative activities of the faculty including examinations. There is no online/ software system for the student data base and it is maintained only as hard copies. Examination results are released only as hard copies pasted in notice board. There is no job description, no appraisal system, no proper training. Faculty is not having blue prints/ plans of the buildings/faculty. According to the SAR, there is an urgent need to change the attitudes of the staff, they ask for benefits from the administration, but they do not do their job properly. SAR is not having any idea on academic staff leave applications process.

The review team had a meeting with Directors of Centers. There is no separate student welfare system in the faculty and the activities are coordinated by the main University at Mihinthale. There are multiple faculty committees, and different areas like scholarships, security, accommodation are handled by them. Information Technology (IT) learning time has been reduced recently based on the observations of the staff but no proper survey has been done to identify the requirement. Learning Management System(LMS) is in operation. Training on LMS for staff is done by the IT center on request but there is no proper mechanism to train them. One academic department is using a different system in addition to the LMS. Medical Education Unit (MEU) is responsible for designing, monitoring and developing curriculum, and the duties of MEU is overlapped with those of the Curriculum Committee and Faculty Quality Assurance Centre (FQAC). There is no TOR for the MEU. Obtaining student feedbacks are conducted online. As there is no faculty policy, different policies are adopted by different departments and there is no proper coordination between FQAC, Dean and the departments. In addition, there is no faculty policy on establishing faculty units. English Language Teaching Unit (ELTU) is a department at the main campus with a unit at the Medical Faculty. They conduct programs only for students and are conducting interfaculty speech competitions and written competitions.

The review team had a meeting with Student Councilors (SCs). There is no TOR in operation for SCs, but they have developed a new one which will be put into action soon. Details and responsibilities were given to the senior student councilors together with the appointment letter. They are regular meetings among them as well as with students. There is a separate room for counselling but there is no proper mechanism for follow-ups and referrals. Some student councilors keep records whereas some are not. There had been many training workshops. There is no faculty policy on student welfare, and welfare activities come under different subcommittees like security, scholarship. There is student participation in these sub committees. A compulsory mentoring scheme has been started recently with the aim of helping and guiding the students throughout 5 years.

The review team had a meeting with the Librarian as well. According to her the main limitation is the inadequate number of computers in the library. Only 10 computers available and they are more than 3 years old. Although the IT center has more computers, it opens only till 4.30pm. As the library is open till 10.00pm, students request the use of computers at the library. Action plans have been done annually but no KPIs are identified. There is no mechanism to monitor the library activity properly and is not knowledgeable about QA in library.

The review team had a meeting with the technical officers. They are involved in preparation of laboratory classes according to the schedule given by the academic staff, and also in maintenance of equipment and inventory. They do not involve in quotation process. They do help students in the practical classes when requested. They had training in laboratory safety and safety guidelines are available in the laboratory. Opportunities and facilities available for them to do higher

studies. They have a good relationship with students and academic staff. Enough local training opportunities are available for them, but they request to have overseas opportunities as well. There is no proper appraisal system. They requested to have more subject related training.

Research and Higher Degree Committee of the faculty conducts CME activities monthly. Foreign travel grants are awarded one per year worth \$2000. Deans' awards for research are granted based on a categorization. If an academic staff member publishes 2 or more articles per year in an index journal, \$3000 are granted for participation in an international conference for presenting or participating in a workshop. If an academic staff member publishes one articles per year in an index journal, \$1000 are granted for participation in an international conference for presenting or participating in a workshop. An undergraduate research group is given SLR 10,000 for their expenses. For presenting their research findings, the faculty bears the expenses for registration and travelling for all the students in the group.

An interesting discussion was taken place with stakeholders which was represented by few alumni, and extended staff i.e., the Hospital Consultants. The learning objectives are communicated to the consultants. There are more students per group especially for the short appointments. Some consultants claimed that the objectives are too broad and difficult to address during the short appointment. The log books are signed. Students are assessed by giving short cases at the end of the appointment by some consultants. According to them the short appointments should be scheduled during the 4th year after completion of the major specialties during the 3rd year. There was no formal communication for the design of the curriculum. Number of students allocated per consultant in some areas are too high. According to them, the behavior of the students is good. Being young consultants in the hospital and academic staff in the faculty, it is easy to have cordial relationships of them. Alumni association has contributed to award 50 scholarships to needy students. They conduct Health Camps with the students. There was no formal communication with the faculty. Their services have not been utilized properly.

The review team had a lengthy discussion with the students. All students are satisfied with the academic programs, welfare and sports facilities provided by the university. The review team also had a separate meeting with the Medical Faculty Students' Union. Facts presented by both parties were the same. There is good female representation in the students' union. According to them, there are 12 rented houses for boys as hostels. They requested to build a hostel for boys in the faculty premises. They also mentioned that the study area is not adequate for the students. There is no water filter for the girls' hostel in the faculty premises. The space of the library in the Professorial Units should be improved. Air condition facilities are not available for some lecture halls. One lecture hall has wooden chairs and it is uncomfortable. They are satisfied about the seminars and the LMS of the faculty. They also mentioned that faculty staff provide about 25 stethoscopes for needy students in each year. As a policy they are against ragging and keep zero ragging situation in the faculty. They have requested more study rooms, a canteen at the hostels

which are located closer to the professorial unit, more space at the library in the professorial unit and better organization in the peripheral appointment. The main deficiency highlighted by the students is also the inadequate number of academic staff.

Meeting with Mentors and Career Guidance Unit was held on the last day of the visit. All academic staff members serve as mentors for the 1st year and final year students. Time slots were given for each student. First years should meet at least once a month and others for once per semester. The faculty hopes to extend this service to all the batches. Some clinical departments have their own mentoring mechanisms in place for the appointments. TOR was given to all the mentors. Training program was conducted for them. However, the mentoring program has not been assessed formally and the views of the mentors had not been taken in formulating the system. They are in the view that regular meetings with the mentors and student councilors are important as the work conducted by both groups are similar to some extent. Career Guidance Unit conducts a seminar for the final year students after their exams. This seminar was not formally evaluated.

Members of the welfare activities met the review team at the board room. They provide *Saubhagya* scholarships to the students. There are several committees responsible for welfare activities in the faculty. The faculty has an auto-starting generator. No interruption of water supply to the faculty as there is an underground well for use at an emergency. The study area for the students are not adequate in the faculty. There are 4 students per room in the hostels. For the final years only 2 students are allocated for a room. Even though the faculty has not much facilities for sports activities, the university organizes an inter-faculty tournament and some more sports activities.

The review team had a meeting with the members of the ELTU as well. The faculty has a cell of the ELTD. A temporary staff member is attached to this unit. The coordinator is placed in the main university. The curriculum was designed in 2006 and has not undergone any major change since then. There is no proper dialogue with the faculty administration regarding the curriculum. Time allocation for 1st and the 2nd years is 120 hours for each year. Even though they had 4 hrs. a week for English earlier that has been reduced to 2 hrs. recently. Feedback from the students are obtained but has not been used for the improvement of the program. According to them the administrative support is very good.

Observation of relevant facilities and verification of facts

The review team had a visit to different places in the faculty to see the available facilities and practices. Initially, the review team went around the para-clinical building which is relatively a new one with better facilities and space. Team observed that there is no proper disabled access in

this building. There were several research laboratories located within the building with better facilities but with minimum student involvement.

Computer unit attached to the faculty has adequate facilities. They do not conduct extra courses and students' requirements were not taken and used for improvement but student satisfaction surveys have been done. Internet facility is available with good speed.

The review team went to the faculty library and observed that there is adequate number of books and facilities including study and discussion rooms. Environment within the library is not very reader friendly. It keeps open till 10pm. Library committee meetings are held only once a year but decisions have been taken by the librarian when necessary. There is no proper mechanism in library fund allocations. The review team observed that there is no proper mechanism in getting the students requests even though feedbacks are taken from the students and data was analyzed. There is a good system to find the books using an online system. There is an adjacent reading room which is open for 24 hours.

Examination unit is a well establish unit with good security and confidentiality. They do have recently developed good practices like proper record keeping and results books. There is only one staff member trained in the examination process and if she takes long leave, there is no one to take the responsibility. Paper bundles are not handed over to the examination unit together with results. They were kept at the departments and handover to the stores on and off. Storage of paper bundles is not systematic at all. There is a TOR available.

There are only 4 lecture halls and few tutorial rooms situated within the faculty. Some lecture halls were not in very good condition. There is a good examination hall which can be converted into two tutorial rooms. Multidisciplinary lab with adequate facilities was observed. Histology lab is old type and space and facilities are not adequate. There is a large dissection room with good facilities. Histopathology lab is only used for research purposes. No slide class for the students. Histopathology classes are conducted with computer images. There is a Pathology museum with well-prepared specimens. There is a well-trained technical person to prepare the specimens. The review team observed that the space is not adequate for the purpose. Forensic department has only one permanent academic staff member attached to it. Batch is divided into two and conduct tutorials on forensic medicine. Therefore, there are 90 students in a tutorial group. There are only few specimens available for students.

The review team observed the canteen and the students' area and noted that there is a serious lack of space and facilities in them.

Observation of teaching sessions

The review team observed two tutorial classes. There were 5 students' groups with 6 students per group. Even though a PA system and multimedia facility were available in the room, they were not used. Tutorial was conducted using a wide board. One tutorial was conducted in a lecture hall and was not an ideal setup for a tutorial class. Observers who sat on the back of the class could not see the writing in the board nor hear the discussion clearly. Tutorial started on time and lecturer was well prepared. Another tutorial class was conducted inside the lab even though the tutorial rooms are available. The review team observed an active student participation in tutorial classes.

Section 4: Faculty's Approach to Quality and Standards

Rajarata University of Sri Lanka ensures quality and standards of degree programmes by having well established Internal Quality Assurance Unit (IQAU) with recognition of the importance of quality enhancement of the University in a formal, transparent and accountable manner. This IQAU is now governed by by-laws approved by the Senate of the University on February 2017. The objectives of the IQAU are to setup an internal quality assurance mechanism and to continuously improve the quality of all academic programs, research and services.

Under IQAU, there are Internal Quality Assurance Cells (IQAC) established at each faculty. All quality related aspects of academic programmes, research and services of the University come under the wings of IQAU. The organizational structure is set to achieve this by including the Director of IQAU, the Deans of all Faculties, Director of Staff Development Center, Director of Distance and Continuing Education Unit, Director of Computer Centre, Faculty coordinator of IQAC of each Faculty, Registrar, SAR of Centre for Distance and Continuing Education (CDCE), Bursar and Librarian in its Management Committee (MC-IQAU) and a SAR/AR serving as the Convener. The MC-IQAU meets regularly and is chaired by the Vice Chancellor or the Director IQAU.

IQAC of the faculty is headed by the Dean and it consists of all Heads of the Departments, Assistant Registrar, and a representative each from the Students' Union and subject committees.

As overall observation, the review team appreciates the initiatives taken by the faculty for having proper approaches to ensure the quality standards through IQAC. Some practices have been started only in the recent past and they have not been practicing for the last 3 years. Further, IQAC has taken all responsibilities to work on the SER preparation with collaboration with others and has realized some importance activities related quality standards are missing and they have taken steps to initiate them.

Section5: Judgment on Each of the 8 Criteria

5.1 Criteria 1- Program Management

Strengths

- Faculty makes available a Handbook and a study programme prospectus to all incoming students. The faculty website is up to date with current information.
- Faculty offers an induction/orientation programme for all new students.
- Faculty takes into consideration the SLQF and SBS as reference points and Outcome-based Education and Student-Centred Learning (OBE-SCL).
- Faculty has established collaborative partnerships with foreign universities for academic and research cooperation.
- Faculty operates academic mentoring, student counselling and welfare.
- Faculty practices the policy of zero-tolerance to ragging; it adopts strategies and implements preventive and deterrent measures through coordinated efforts to prevent ragging.

Areas for Improvement

- Action Plan is available for 2014 & 2020. Minutes of some committees are available. No evidence of monitoring.
- No policy on establishment of new units/ departments in the faculty.
- No evidence to show monitoring of the departmental activities and work output of the staff.
- Students' participation only for few committees. Some recently published reports are available.
- Student files are maintained only as a hard copy and no electronic documentation/system is available.
- Performance appraisal system is not available.
- TOR of the Curriculum Development Committee (CDC) is formulated in 2019. Feedbacks are not available.
- There is no uniform mechanism of obtaining feedback from all the departments.

- Security and safety plan is not available.
- Differently abled Policy was formulated in 2019.

5.2 Criteria 2- Human and Physical Resources

Strength

- Faculty offers adequate clinical training facilities.
- Separate building and required facilities in the hospital premises for clinical teaching is commendable.
- Staff is well committed.
- Staff is provided with required training in OBE-SCL
- Faculty has ensured student access to a well- resourced library facility.
- Faculty ensures that the students are provided with guidance in learning and use of English.
- All students are accommodated in university hostels.

Areas for Improvement

- To achieve the competencies required for a doctor, MD with Board certification is preferable for most of the academics in the departments. Only about 50% of the carder positions are filled.
- There is no policy on recruitment of academic staff members. Report on recent recruitments is not available.
- There is a delay in new staff undergoing the induction programme.
- No evidence of formal comprehensive ICT programme for students.
- No evidence of implementation of Personal Professional Development stream.
- Guidelines for promoting harmony and cohesion among students of diverse ethnic and cultural backgrounds are formulated recently. No evidence of promotion of ethnic harmony.

5.3 Criterion 3- Program Design and Development

Strengths

- Faculty policy document on management of MBBS program was developed only in 2019.
- Many curriculum workshops conducted for planning and revision of curriculum.
- One tracer study was conducted.
- An internal review was conducted only in 2019.

Areas for Improvement

- Curriculum was revised in 2016, however there was no evidence of external expert participation.
- There are no employer or stakeholder survey reports.
- Proper graduate profile is not given.
- No evidence to show the Senate approval for the faculty policy. No evidence to show fully adaptation of SLQF.
- No measurable process indicators and outcome-based performance indicators which are used to monitor the implementation and evaluation of the programme, are available.
- There is no fall-back option even though one is under discussion.
- There are no elective courses offered except one in Public Health.
- No evidence for routinely monitoring the program.
- No evidence of uses the outcomes of programme monitoring and review to foster ongoing design and development of the curriculum.
- Even though there is a separate department for Family Medicine, the contents of the curriculum on Family Medicine are lacking.

5.4 Criteria 4- Course/Module design and development

Strength

- Course design and development is done by a course team with the involvement of internal and external experts in medical education.
- Standard formats/templates are used.
- Course design and development takes into account student-centred teaching strategies.

- Course design specifies the workload (notional learning hours) as per SLQF.
- Course design, development and delivery incorporate appropriate media and technology.
- Faculty IQAC has conducted an Internal Review.

Areas for Improvement

- Course design and development is done by a course team with the involvement of internal and external experts in medical education only and there is no participation from other important stakeholders.
- Integrated seminars and integrated ward classes are not conducted.
- Credit values and valid module systems (integrated) are not available.
- Appropriate and adequate course monitoring and review processes are not functioning.

5.5 Criterion 5- Teaching and Learning

Strengths

- Curriculum blue print is available.
- Good LMS is in operation.
- There are opportunities for students to work in study groups to promote collaborative learning.
- Student participation in research presentation and publication is good.
- Student group activities are conducted and encouraged.

Areas for Improvement

- Facilities for disabled students in the preclinical building are not adequate.
- No faculty policy on gender equity.
- Need more infrastructure facilities for learning.
- No scheme to evaluate performance of teachers on teaching.
- No set of indicators of excellence in teaching to evaluate performance of teachers and promote adoption of excellent practices.

5.6 Criteria 6- Learning Environment, Student Support and Progression

Strength

- Faculty offers all incoming students an induction programme.
- Faculty library and its branches use ICT-led tools to facilitate the students to access and use information effectively for academic success.
- Faculty recognizes and facilitates academic interaction between the staff and students.
- Faculty regularly and systematically gathers relevant information about the satisfaction of students with the teaching programmes.
- Faculty/institute promptly deals with students' complaints and grievances, and deliver timely responses.

Areas for Improvement

- Faculty dose not gather relevant information about the satisfaction of students on support services.
- Facilities of the canteen and some lecture halls are not up to the standard.
- No fall-back options are available.

5.7 Criteria 7- Student Assessment and Awards

Strengths

- Examinationby-laws, exam rules and regulations are available.
- Examination requirements of students with disabilities have been addressed.
- Transcripts are given but not detailed enough specially the research component.

Areas for Improvement

- There is no policy and details of continuous assessment weightage for the final examination.
- No evidence of considering external examiners reports.
- Recently adopted policies and regulations governing the appointment of both internal and external examiners.

- Examination by-laws are given but needs improvements. Manual of examination procedures is recent. There are differences in the handbook and the by-laws.
- Inadequate evidence of providing regular, and timely feedback on formative assessments to promote effective learning.
- No second marking/ moderation system is practiced.
- No evidence of item analysis of the MCQs is available.
- Transcripts are issued only on request and not for every student.

5.8 Criteria 8- Innovative and Healthy Practices

Strengths

- Good LMS.
- Research activities are recognized well and encouraged.
- Research component for students.
- Strong link with other agencies and institutions.

Areas for Improvement

- No faculty policy on Open Educational Recourses usage and Research and Development.
- Minimum fund raising activities other than foreign students.
- No credit transfer policy.
- No fall-back option even though one is under discussion.

Section 6: Grading of Overall Performance

No	Criterion	Weighted minimum score*	Actual criterion-wise score
1	Programme Management	75	122
2	Human and Physical Resources	50	75
3	Programme Design and Development	75	85
4	Course / Module Design and Development	75	129
5	Teaching and Learning	75	111
6	Learning Environment, Student Support and Progression	50	81
7	Student Assessment and Awards	75	109
8	Innovative and Healthy Practices	25	37
	Total score (out of 1000)		748
	Total score (out of 100)		74.84

Final Grade: Grade B

Section 7: Commendations and Recommendations

7.1 Commendations

The review panel members were very impressive to note that number of attributes and practices are in operation at the Faculty of Medicine and Allied Sciences of the Rajarata University of Sri Lanka. Faculty has its own action plan which is aligned with the University's strategic plan. The action plan is implemented by the faculty. The Students' Handbook is issued to all incoming students which contains all necessary information including curriculum and students support services. Faculty offers induction programme for all new students. Academic mentoring and student counselling are in practice at the faculty in a well-organized manner. Faculty practices the zero-ragging policy by adopting well developed plans and policies and implements preventive measures through coordinated efforts.

Faculty has qualified and competent staff to develop and deliver the programme. Even though, most of the staff members are young and overburdened with work due to limited number of staff, commitment and dedication shown by them in improving the quality of the program is commendable. In addition to this, number of visiting academics have also involved in the development and delivery of the programme. The academic staff have undergone number of CPD programmes. The MBBS curriculum of the faculty was revised with the inputs from experts in the relevant fields under the guidance of CDC of the faculty. Faculty has taken into consideration the SLQF and SBS as reference points for the courses design and development process. The programme adopts the Outcome-Based Education (OBE) approach and the Intended Learning Outcomes (ILOs) for the course modules have been developed to align with the programme outcomes of the MBBS degree. A well-developed Curriculum blue print is available in the faculty. The Student-Centered Learning (SCL) strategies are in practice for the delivery of modules. IQAC of the faculty conducts programme evaluation through the internal monitoring and review process.

The modules have been updated to reflect knowledge and current developments in the relevant field of study areas. All modules have clear specifications and these are available to all students via electronic and printed media. The teaching and learning activities and the assessments of different modules are conducted according to the MAT by preparing the teaching and learning strategies for each semester. A wide range of teaching and learning strategies are encouraged to the students in the curriculum of the faculty.

Faculty has developed a good learning environment for all students and staff by creating student and staff interactions such as group works, LMS discussions, clinical case discussions and field

works. A well-established LMS is in operation in the faculty and the faculty should be commended for this. The usages of LMS by students are also commendable. The library facilities and the reading room facilities are good in the faculty. Clinical departments are located in the hospital premises which are owned by the faculty. An auditorium with all the facilities, several tutorial rooms, skills laboratory and a library are established there.

Faculty encourages the co-curricular activities to promote multi-cultural environment. Learning opportunities of the students are enhanced by foreign exchange programmes. Research in Medicine module and the Annual Undergraduate Research Symposium conducted for medical undergraduates is a commendable initiative of the faculty. Through these activities, the undergraduates have given chances to enhance their research abilities and communication skills. The undergraduates are encouraged to participate at the national and international research symposia to present their research findings. Faculty has strong links with other agencies and institutions.

Review panel observed that the faculty has a well-established ICT platform for teaching and learning process. LMS is used by the academics for teaching, assessments and feedback activities.

7.2 Recommendations

The Review team observed some areas that can be improved further during their visit and recommends the following for improvements.

The Action plan is available for the years 2014 and 2020; it is recommended to prepare the action plan in regular basis and conduct action plan monitoring committee meetings regularly. It was noted that the faculty do not have any policy on the establishment of new units and departments; so, it is highly recommended by the review team to develop and approve a policy for the establishment of new units and departments in the faculty. The review team again strongly recommends maintaining the students' files in electronic form in addition to the printed materials for easy access and future references for both staff and students. Some policies are recently formulated such as TOR for CDC and differentlyabled students' policy; so, the IQAC should take steps to implement these policies effectively in the faculty. The security and safety plans for the faculty are to be developed in order to maintain the quality of the programme and the safety of the students.

It is preferable that the academics would get MD with Board certification in each of the disciplines. Faculty has filled only 50% of the approved academic cadres' vacancies; it is recommended to fill all vacancies as early as possible since the faculty needs more human

resources to run the programme effectively. In addition to this, it is recommended to develop a policy on recruitment of academic staff for the faculty; as there is no such policy exists in the faculty at present.

It is recommended to conduct employer and stakeholder surveys in regular periods for the improvement and the quality of the degree programme. It is also very important to develop a proper graduate profile for the MBBS degree programme by the faculty. The review team recommends preparing one. The fall-back option is a need at present in all degree programmes but that is not available at present at the faculty. The review team recommends developing a fall-back option for the programme and implement it when and where necessary. It was noted that there were no elective courses available in the programme except one in Public Health. It is recommended to introduce some elective courses, if possible, for the programme.

The course design and development need to be done with the participation of all stakeholders, but the review team noted that only the Medical Education Unit involved in this process and the participation of others was not notable. It is strongly recommended by the review team that all stakeholders including all departments should involve in the curriculum design and development process for a quality programme. It is also recommended to conduct integrated seminars and integrated ward classes for the programme. The faculty seriously looks into the integrated credit value module system for its programme. It is recommended to consider this suggestion and to implement it. It is also recommended to implement an appropriate and adequate course monitoring and review processes at the faculty.

Faculty needs more infrastructure facilities for the smooth implementation of the programme. Facilities for disabled students in the preclinical building are also need to be developed. The scheme to evaluate performance of teachers on teaching should be developed in order to encourage and recognize good teachers in the faculty. This can be applied to the nonacademic staff as well. The facilities of canteen and some lecture halls are not with the required standard; so, the faculty should address these issues in priority basis. Faculty should conduct students' satisfactory survey on student support services and address the issues in a systematic manner to improve the students' satisfaction.

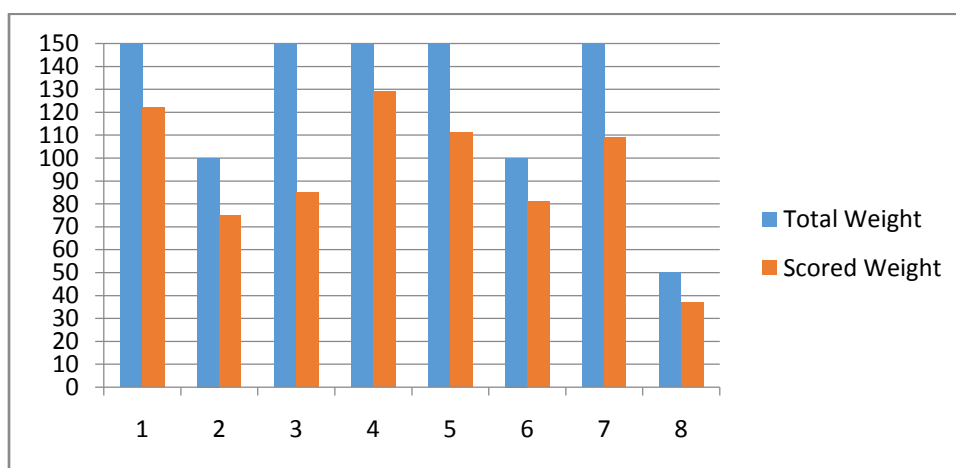
The Faculty should prepare and approve the policy for the weightage of the continuous assessments at the end semester examinations. The second marking and the moderation should be initiated at the faculty to improve the quality of the programme. Faculty also should consider the external examiners' report for the evaluation.

Section 8: Summary

The desk review of the Self Evaluation Report submitted by the Faculty of Medicine and Allied Sciences for the Bachelor of Medicine and Bachelor of Surgery of the Rajarata University of Sri Lanka was carried out and subsequently, the site-visit was conducted for a period of four days from 27th to 30th January 2020. During the site-visit, the review team members were able to peruse documented evidence, observed facilities as well as hold discussions with key stakeholders.

SER has been written in the required format and the evidences were presented with the appropriate labeling. The documentary evidences were presented with suitable manner during the site-visit. All the staff of the departments should be commended and congratulated for their commitment to maintain high quality and standards in most of the activities observed. However, there were a few shortcomings that are mentioned in the section on “Commendations and Recommendations” and these can be easily addressed by the faculty and the departments.

The Faculty scored above the weighted minimum score on the eight criteria and obtained the overall score of **74.84** with the final grade **B** for its MBBS programme. This indicates that the programmes is at a good level of accomplishment but need to be improved to reach an excellent level which the review team felt can be easily achieved by the faculty. The final scores for each criterion are given in the following figure:



This clearly indicates that the faculty has taken each and every measure to maintain the quality in this programme. Faculty needs to concentrate especially on Criterion 3: Programme Design and Development.

The review team wishes to thank the Vice Chancellor of the Rajarata University of Sri Lanka, Dean of the Medicine and Allied Sciences, Director/ IQAU, Faculty Coordinator IQAC, the administrative staff and the Heads of Departments and staff of the faculty for the hospitality and support rendered in making the review process a success.

We wish for continued success in all the future activities of the faculty and the University.

Annexure 1: Schedule for Site Visit

Faculty of Medicine and Allied Sciences - Rajarata University of Sri Lanka

27th January to 30th January 2020

Day 1

Time	Activity	Participants
8.30 AM – 9.00 AM	Meeting with the Director - IQAU	Director – IQAU
9.00 AM – 9.30 AM	Meeting with the Vice Chancellor	Vice Chancellor/ Dean, Director – IQAU/ Coordinator – FQAC, Chair – SER Preparation
9.45 AM – 10.00 AM	Meeting with the Dean	Dean/FMS
10.00 AM – 11.00AM	Presentation about the Faculty and respective study programs <i>Working Tea</i>	Dean FMS/ Director-IQAU/Coordinator FQAC/ All HODs of the Faculty/ Cluster Chair and SER Team/ Study program coordinators
11.00 AM -11:45 AM	Meeting with academic staff in permanent cadre (excluding HOD)	Teaching panel of respective programs (excluding HODs) Senate representatives

11:45 AM -12:15 PM	Meeting with temporary academic staff	Temporary Demonstrators, Tutors etc
12:15 PM -1:00 PM	Meeting with Administrative Staff	Registrar/Bursar/SARs/AB/SAB/Work Engineer/DR Examination
1:00 PM -1:30 PM	<i>Lunch</i>	
1:30 PM -2:15 PM	Meeting with Directors of Centres / Units / Cells	All Directors of Centres/ Units/ Cell Coordinators
2:15PM-2:45PM	Meeting with Student Counselors	Senior Student Counselors and student counselors
2:45 PM -4:00 PM	Observing, Physical Facilities, Hostels and <i>Tea</i>	Review Team/ Facilitators

Day 2

Time	Activity	Participants
8.00 AM – 9.30 AM	Observing documentation	Review Team/ Facilitators
9.30 AM – 10.30 AM	Observing teaching sessions and facilities	Review Team
10.30 AM –11.00 AM	Meeting with Librarian/Senior Assistant Librarians [Library Visit]	Librarian/Senior Assistant Librarian/ Library Staff
11.00 AM -11:30 AM	Meeting with Technical Officers	All Technical officers
11:30 AM -12:30 AM	Observing Documentation	Review Team
12:30 PM -1:30 PM	<i>Lunch</i>	
1:30 PM -4:00 PM	Observing Documentation <i>Working Tea</i>	Review Team
4.00 PM – 5.00 PM	Open hour for any stakeholder to meet review panel	An individual or group or association of any stakeholder

Day 3

Time	Activity	Participants

8.00 AM – 9.00 AM	Observing Documentation	Review Team
9.00 AM – 9.30 AM	Meeting on research activities	Chairman / Research committee, members of research committee
9.30 AM – 10.00 AM	Meeting with a cross section of academic support staff and non- academic staff Working Tea	Representative group of academic support staff and non-academic staff (10)
10.00 AM –11.00 AM	Observing Documentation	Review Team
11.00 AM – 12.15 PM	Observing clinical training activities	
12:15 PM -12:45 PM	Meeting with external stakeholders	Clinicians
12:45 PM -1:15 PM	Meeting with alumni members	
1:30 PM -2:15 PM	Lunch	
2.15 PM – 2.45 PM	Meeting on support for student welfare	Director/Physical Education, University Medical Officer
2.45 PM -3:45 PM	Meeting with Students	Group of students (30) representative of gender, ethnicity, academic year

3. 45 PM – 4.15 PM	Meeting with the Students' Union	Union members
4.15 PM – 5.00 PM	Open hour for any stakeholder to meet Review Team	An individual or group or association of any stakeholder

Day 4

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

Annexure 2: Attendance Sheets of the Meetings

Meeting with the Director - IQAU










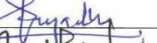
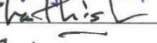

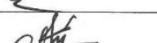
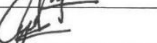
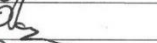
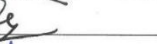






27/01/2020

Attendance Sheet

- Meeting with the Director IQAU

Venue:- IQAU

27.01.2020
8.15 AM

S/No	Name	Signature
1	Prof. Christantha Keesari	
2	Prof. Ruwan Jayasinghe	
3	Dr. P. Elango	
4	Dr. P. K. Dissanayake	
5	Dr. Dms Deeminda	
6	Dr. Nishan Lokunasinghe	
7	Dr. S. Srishankar	
8	Dr. S.P.B. Thalagapitiya	
9	Dr. D.M.A. Kumar	
10	Dr. A. B. Seneviratne	
11	Dr. Y.A.S.W. Jayarathne	
12	Dr. D. Rathish	
13	Dr. R.M.S.Z. Rajapakse	
14	Dr. P.N. Wangerana	
15	Dr. H.N.I.U. Jayasinghe	
16	Dr. D.A.U. Hettiarachchi	
17	Dr. D.M.P.L.K. Abeyratne	
18	Dr. D.A.A.S. Jayaweera	
19	Mrs. Thushara Wanasinghe	
20	Dr. M.G.R.S.S. Gunathilake	
21	Dr. H.T.W. Weerakoon	
22	Dr. A.M.V. Kumari	

Meeting with HODs

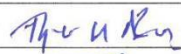




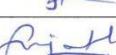
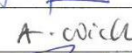


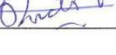
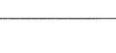
27/01/2020

Attendance Sheet

Date - 27.01.2020

Time - 10.00 - 11.00 AM

Venue:- Board Room

S/No	Name	Signature
1	Prof. Chandanika Kespene	
2	Prof. Ruvan Jayasinghe	
3	Dr. P. E. Lange	
4	Dr. P. K. Dissanayake	
5	Prof. Anjama Sihan	
6	Dr. P. H. G. Janaka Pushpakumara	
7	Dr. Sujanthi Wickramage	
8	Dr. Anupratna Wickramasinghe	
9	Dr. W. A. N. D. Wickramasinghe	
10	Dr. K. G. D. D. Klerakoon	
11	Dr. P. R. S. J. Bandula	
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Meeting with Academic staff

27/01/2020

Attendance Sheet

Venue: - Board Room

S/No	Name	Signature
1	Dr. D. Rethil	[Signature]
2	Dr. H.T.W. Weerakoon	[Signature]
3	Dr. R.M.S.I. Rajapaksa	[Signature]
4	Dr. H.E.C.S. Kumara	[Signature]
5	Dr. S. Suresh Kumar	[Signature]
6	Dr. K.G.A.D. Weerakoon	[Signature]
7	Dr. D.M. Hettiarachchi	[Signature]
8	Dr. Asantha Jayasinghe	[Signature]
9	Dr. Kumara Kaluarachchi	[Signature]
10	Dr. Y.P.N. Wimalakuma	[Signature]
11	Dr. D.M.P.L.K. Abeyaratne	[Signature]
12	Dr. H.M.I.U. Jayasinghe	[Signature]
13	Dr. M.G.R.S.S. Gunathilaka	[Signature]
14	Dr. AMMV Kumari	[Signature]
15	R.M. S.K. Senarathne	[Signature]
16	Dr. R.D.K. Medonsa	[Signature]
17	Dr. J. Senarathne	[Signature]
18	Dr. Prasanna Weeraratne	[Signature]
19	Dr. N.P. Hettikuma	[Signature]
20	Dr. W.R.S.S. Waidyanatha	[Signature]
21	Dr. P.R.S.R. Perera	[Signature]
22	Dr. C.S. Amarasinghe	[Signature]

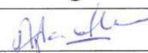
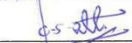


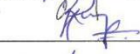

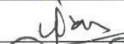
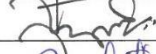

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Continuation of Previous sheet.
Meeting with the Vice Chancellor

27/01/2020

Attendance Sheet

Venue:-

S/No	Name	Signature
1	Dr S.P.A.S. Senadheera	
2	Dr. Sampath Pathirana	
3	R.M.E.S.K. Senaviratana	
4	D. Asantha Jayatilaka	
5	Dr. Prasanna Weerawansa	
6	Dr. R.D.K. Medonsa.	
7	Mi. G.W. Kumarakuru	
8	Dr. Janitha Chandrakumar	
9	Dr. W.A.S.S. Wimalakumbura	
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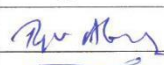


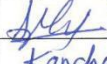


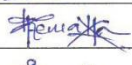

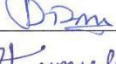
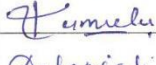
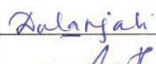
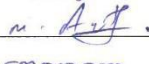
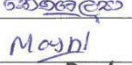
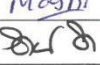
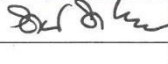
Temporary Lecturers
Meeting with the Director - IQAU

Attendance Sheet

Date:- 27-01-2020

Venue:- Board Room

Meeting with Temp. Lecturers




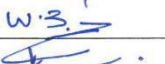

S/No	Name	Designation	Signature
1	Prof. Chandra Renuka		
2	Prof. Rusan Jayasinghe		
3	Dr. P. K. Dissanayake		
4	Dr. P. Elangy	Member of Prog. Review Team	P. O. S. M.
5	Dr. H. M. A. K. Aberathna	Temporary lecturer	
6	Dr. W. M. K. R. Wijesinghe	Temporary lecturer	Kanchana
7	Dr. A. P. Wimalawathana	Temporary lecturer	
8	Mr. H. P. M. Madusambha	Temporary Lecturer	
9	Miss. H. S. B. T. M. P. M. Thennakoon	Temporary lecturer	
10	Miss. D. M. S. N. Dissanayake	Temporary lecturer	
11	Dr. Dinoshan Dissanayake	Demonstrator	
12	Ms. D. M. K. N. Senarath	Temporary lecturer	
13	W. P. L. D. Wijayalath	Temporary demonstrator	
14	M. Achchuthan	Temporary lecturer	
15	A. A. K. Sandamali	Temporary Lecturer	
16	W. M. M. V. Wijekoon	Temporary lecturer	
17	SISIRA SIRIBADDANA	Prof of medicine	
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Meeting with Administrative Staff

Attendance Sheet

Date:- 27/01/2020

Venue:- Board Room
meeting with administrative staff.





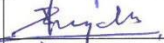


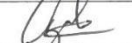




S/No	Name	Designation	Signature
1	Prof christantha Jayasinghe		
2	Prof Ruwan Jayasinghe		
3	Dr. P. K. Dissanayake		
4	Dr. P. Elango		
5	wijitha Dissanayake	SAR / FMA	W.B.
6	R.M.S. Rathnayake	AB	
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Meeting with Directors of Centres/ Units/ Cells

Attendance Sheet

Date:- 29/01/2020

Venue:- Board Room
meeting with Directors

S/No	Name	Designation	Signature
1	Prof. Chandana Benera		
2	Prof. Ruman Jayasinghe		
3	Dr. P. K. Disanayake		
4	Dr. P. Elango		
5	Dr. Y. A. S. W. Jayarathne		
6	A. W. Irugalbandara	Instructor in Com. Tech	
7	D. A. Wehella	Lecturer ELI	
8	Dr. D. A. U. Hethorachchi	Coordinator Lecturer Commed	
9	Dr. K. A. D. L. P. Kariyawasan	senior Lecturer Archaeology	
10	Prof. Angana Silva	2nd charge - Animal Hous	
11	Dr. S. D. Pilapitiya	Dean / Director - career centre	
12	Dr. P. H. G. J. Pushpa Kumara	Director / Examination	
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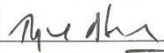


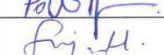
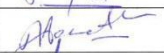
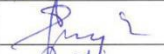
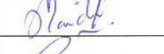

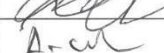
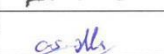


Meeting with Student Counselors

Attendance Sheet

Date:- 27/01/2020

Venue:- Board Room

Meeting with ^{Student} Counselors. 2.15 - 2.25

S/No	Name	Designation	Signature
1	Prof. christantha Alenxani		
2	Prof. Ruwan Jayasinghe		
3	Dr. P. K. Dissanayake		
4	Dr. P. Elango		
5	Dr. Sujanthi Wickramage	S. lecturer	
6	Dr. Subhashinie Senadheera	S. lecturer	
7	Dr. Wasana Jayarathna	S. lecturer - MEU	
8	Dr. Sachithra Bandula	Lecturer	
9	Dr. M. G. R. S. S. Gunathilaka	Lecturer	
10	Dr. S. Sri Shanaka	S. Lecturer	
11	Dr. A. Wickramasinghe	S. Lecturer	
12	Dr. Sampath Pathirana	S. Lecturer	
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Meeting with Technical Officers

Attendance Sheet

Date:- 28/01/2020

Venue:- Faculty Board Room

S/No	Name	Designation	Signature
1	Prof. Christantha Kumara		Thur Kum
2	Prof. Ruwan Jayasinghe		
3	Dr. P. Elango		POST
4	Dr. P. K. Dissanayake		
5	R. D. Nimal Pathirana		
6	F. N. Liyanage		
7	H. M. E. A. Jayatissa		
8	A. H. A. K. Priyadarshana		
9	P. M. A. Perera		
10	N. M. B. S. Gunathilaka	Biochem	
11	H. T. Wickramasinghe	Biochem.	
12	L. V. K. Seneviratne	TO	
13	W. L. G. Vipul	TO	
14	C. S. Seneviratne	TO	
15	D. M. M. D. Seneviratna	TO	
16	I. N. M. M. D. Seneviratna	TO	
17	H. A. J. P. Herath	TO	
18	A. A. S. Hettiarachchi	TO	
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Meeting with Academic Support Staff/ Non Academic Staff

Attendance Sheet

Date:- 28/01/2020

Venue:- Board Room

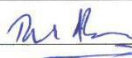

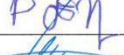





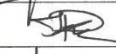
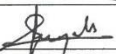
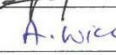
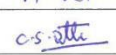

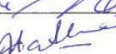





S/No	Name	Designation	Signature
1	Prof. Krishantha Klenya		Prof. Klenya
2	Prof. Raman Jayasinghe		Prof. Jayasinghe
3	Dr. P. Elango		Dr. P. Elango
4	Dr. P. K. Dissanayake		Dr. P. K. Dissanayake
5	L.A.D.H.R. Wijayaratne	staff management Asst.	L.A.D.H.R. Wijayaratne
6	H.G.S. Pasipala	Lab Attendant	H.G.S. Pasipala
7	S.N.M. Siri Sena	Lab Attendant	S.N.M. Siri Sena
8	M.C. Padmaraja	Management Assistant	M.C. Padmaraja
9	H.M.S. Nawarathna	Management Asst.	H.M.S. Nawarathna
10	D. Z. Jayarathna	Lab Attendant	D. Z. Jayarathna
11	W.D.T.N. Senarathna	Management Assistant	W.D.T.N. Senarathna
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Meeting on Research Activities

Attendance Sheet

Date:- 28/01/2020

Venue:- Board Room





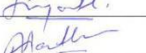


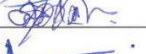

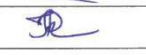
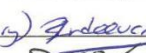







S/No	Name	Designation	Signature
1	Prof christantha Bepko		
2	Prof Ruwan Jayasinghe		
3	Dr. P. Elango		
4	Dr. P. K. Dissanayake		
5	Dr. A. Jayawardane	Senior Lecturer	
6	Dr Kumara Mahawachchi		
7	Dr. J. A. S. Jayaweera	Senior Lecturer	
8	M. W. W. Kumbukgolla	Head / Senior Lecturer	
9	Dr P. H. A. S. Pushp Kumara	Head / Sr. Lect, FM	
10	Dr. Y. A. S. W. Jayaratne	Head / MEN	
11	Dr A. Wickramasinghe	Head / psychiatrist	
12	Dr. C. S. Pathirige	Head / Anatomy	
13	Dr. W. A. N. D. Wickramasinghe	Head / Community Medicine	
14	Dr. S. P. A. S. Senadheera	Senior Lecturer	
15	Dr. H. T. W. Weerakoon	Senior Lecturer	
16	Dr. K. G. A. D. Weerakoon	Senior Lecturer	
17	M. A. B. Seneviratne	Senior Lecturer	
18	Prof. Anura Silva	Seny / HDEPL	
19	Dr. S. D. Pilapitiya	Dean	
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Meeting on "Support for student welfare"

Attendance Sheet

Date:- 28/01/2020

Venue:- Board Room

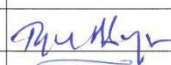




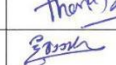

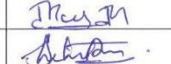
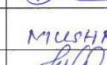
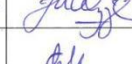
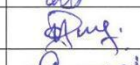
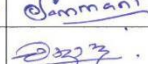
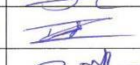







S/No	Name	Designation	Signature
1	Prof. Chandantha Mayen		
2	Prof. Ruwan Jayasinghe		
3	Dr. P. Elango		
4	Dr. P. K. Dissanayake		
5	Dr. Sujanthi Wickramage		
6	Dr. S. P. A. S. Senathirera		
7	Dr. H. T. W. Weerakoon		
8	Wijitha Dissanayake	SAR/FMAS	
9	S. U. Wijesinghe	DPE	
10	R. M. S. Rathnayaka	AB	
11	R. N. W. Ranajetara	Lecturer	
12	Dr. P. H. J. Pushpakumara	Head / Sr. Lect. FM	
13	Dr. R. M. S. I. Rajapakse	Lecturer (probationary)	
14	SISIRA SIRIBODDANA	Prattig. medicine	
15	Kumara Kaluarachchi	Deputy Proctor	
16	Dr. K. S. A. D. Klerakoon	Alcaden (FMAS)	
17	Prof. N. K. Anjane Sulu	Senior Tutor / FMSH	
18	Dr. Mr. R. Prabhawa Weerawansa	Senior Lecturer / FMAS	
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Meeting with Students

Attendance Sheet

Date:- 29/01/2020

Venue:- Board Room

S/No	Name	Designation	Signature
1	Prof. Chirshantha Keneke		
2	Prof. Ruwan Jayasinghe		
3	Dr. P. Elango		
4	Dr. P. K. Dissanayake		
5	H.D.S.N.C. Halahakoon	Medical Student	
6	M.N.D. Wijesathna	Medical student	
7	B.A.B.T. Basnayaka	Medical student	
8	H.D.M.T.H. Dissanayake	Medical student	
9	S.A.D. Subasinghe	Medical student	
10	D. D. Fernando	Medical student	
11	M.M. Munshi Mohammed	Medical student	
12	J.S.L. Perera	Medical student	
13	M.M.F. Mushrifz	Medical student	MUSHRIFA
14	U.K.I.U. Wijesinghe	Medical student	
15	T.D.B. Mapa	medical student	
16	S. Pravanan	Medical student	
17	T.D. Sammani	Medical student	
18	W.M.D.N. Chandrananda	Medical student	
19	W.A.D.T. Wijenayake	Medical student	
20	J. N. Herath	"	
21	I.N. Senerirathne	medical student	

25	M. N. M. Hazmi	Medical student	Chief
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Meeting with the Students' Union

Attendance Sheet

Date:- 29/01/2020

Venue:- Board Room

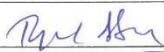




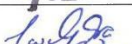
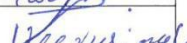







S/ No	Name	Designation	Signature
1	Prof. Chandana K. Jayasinghe		Prof. K. S.
2	Prof. Ruwan Jayasinghe		
3	Dr. P. Elango		P. Elango
4	Dr. P. K. Dissanayake		
5	C. U. Rathnayake	President	
6	A. P. Imesh Sangeetha		Sangeetha
7	S. A. I. Lakshana	Vice President	
8	P. H. M. Gayan Bandara Herath	Secretary	
9	D. P. M. S. Madhura Jayasingha	Committee member	
10	K. M. G. Madhusana	" "	
11	R. M. C. M. Bandara	Junior Treasurer	
12	M. N. M. Nazmi	Committee member	
13	U. G. C. D. S. UPUNUWARA	COMMITTEE MEMBER	
14	Y. E. Weeramanthri	Committee member	
15	W. M. R. H. Weerasinghe	Committee member	
16	S. A. R. S. Perera	Committee member	
17	L. D. Gunawardana	Committee member	
18	R. M. R. B. Ranatunga	Committee member	
19	J. L. P. A. Randika	Committee member	
20	P. K. L. Dharmarathna	Committee member	
21	P. S. Sivabalan	Committee member	
22	I. M. M. S. T. W. Jesooriya	Committee member	

Meeting with the Academic Staff

Attendance Sheet

Date:- 29/01/2020

Venue:- Consultant Lounge

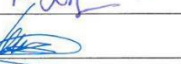


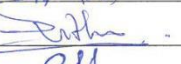







S/No	Name	Designation	Signature
1	Prof. Chiranjit Kumar Ray		
2	Prof. Ruman Sanyal		
3	Dr. P. Elango		
4	Dr. P. K. Dissanayake		
5	A. Manjula Calan	Neurologist	
6	Dr. Lakshmi Weerasinghe	Consultant Physician	
7	Dr. Mindu Weerasinghe	General Physician	
8	Dr. SAJITHA WEERASINGHE	CONSULTANT NEUROLOGIST	
9	Dr. Saranga Sumathipala	Consultant Virologist	
10	Dr. Himanthi Athure	Consultant Rheumatologist	
11	Dr. Resha Bulathsinghala	Consultant Oesophagologist	
12	Dr. V. N. Harischandra	Cons. Pulmonologist	
13	Dr. Vathsala Bandaranayake	Gen. Onc. Surgeon	
14	Dr. MIM Rifath	Gen. Physician	
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Meeting with Students

Attendance Sheet

Date:- 29/02/2020





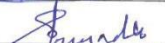



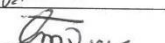




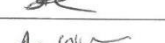
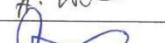








Venue:- Banil Room

S/No	Name	Designation	Signature
1	Prof. Christl. Kusen		
2	Prof. Ruwan Jayasinghe		
3	Dr. P. Elango		
4	Dr. P. K. Dissanayake		
5	Dr. G. S. Amarasinghe		
6	Dr. Zumbra		
7	Dr. Sajith Rajakaruna		
8	Dr. M. U. D. S. P. Uthman	Medical Officer	
9	Dr. D. U. K. J. Uthman	Medical Officer	
10	Dr. H. M. I. U. Jayasinghe	Lecturer, FMA	
11	Dr. D. M. P. K. Abeyaratne	Lecturer FMA	
12	Dr. D. S. Y. K. K. Dissanayake	Intern medical officer	
13	Dr. B. M. S. J. Rajapakse	Lecturer	
14	Dr. Pongu Hewagamage	MO - Ophthalmology	
15	Dr. Anesh H. H. H. H. H.	Lecturer	
16	Dr. Chandana Hewawasam	Lecturer	
17	Dr. W. A. S. N. Wedasingha	Lecturer	
18	Dr. Y. P. J. A. W. W. W.	11	
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Meeting with Mentors and Career Guidance staff
Attendance Sheet

Date:- 30/01/2020

Venue:- Board Room

S/No	Name	Designation	Signature
1	Prof christhina Kelyem		
2	Prof Ruwan Jayasinghe		
3	Dr. P. Elango		
4	Dr. P. K. Dissanayake		
5	Dr. Y. G. S. W. Jayaratne	S. lecturer, MEU	
6	Dr. Sujanthi Wickramage	Head, Physiology	
7	Dr. Kumara Kularatne	S. Lec. Pharmacology	
8	Dr. S. P. A. S. Senadheera	Senior Lecturer	
9	Dr. M. A. R. S. S. Gunathilaka	Lecturer	
10	Dr. Chandana Hewanagama	Lecturer	
11	Dr. Manori Vijaya Kumari	Lecturer	
12	Dr. P. R. S. R. J. Bandara	Lecturer.	
13	Dr. P. H. A. J. Pushpakumara	Head/Sw. Lect FM	
14	Dr. B. A. M. Wickramasirigun	Head / Psychiatry	
15	Dr. N. Lokanaranga	Head (Medicine)	
16	Dr. W. A. N. D. Wickramasinghe	Head / Community Medicine	
17	Dr. D. M. A. Kumara	Head / Obstetrics	
18	Prof. Anura Kumara	Head / Pathology	
19	Dr. Kosali Klerukachchi	Senior Lecturer	
20	Dr. Chamara Sarathchandra	"	
21	Dr. S. P. B. Thalagapitiya	Head / Surgery	
22	Dr. S. D. Pilapitiya	Dean	
23	Dr. J. A. U. Hettiarachchi	Lecturer / Counsellor	

PTO

Dr. W.G.S.S. Waidchyandha

Dr. H.M.F. U. Jayasinghe

Dr. U.P.S. Wanselara

Dr. R.M.S.I. Rispala

Dr. G.S. Amarasinghe

Lecturer (Parasitology) Dr. D. S. Jayasinghe

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Dr. D. S. Jayasinghe

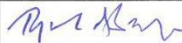


Dr. D. S. Jayasinghe

Dr. D. S. Jayasinghe

Meeting with English Teaching Unit
Attendance Sheet

Date:- 30/01/2020

Venue:- Board Room

S/No	Name	Designation	Signature
1	Prof. Christopher Benson		
2	Prof. Ruwan Jayasinghe		
3	Dr. P. Elango.		
4	Dr. P. K. Dissanayake		
5	D. A. Welhelc	Lecturer	
6	N. D. Jayasinghe	Sen. Instructor	
7	RMLC Kumari	Instructor (Gr. II)	
8	Dr. Leelanwasam	Instructor (Ass. basis)	
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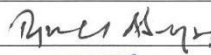




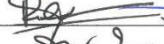
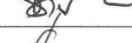








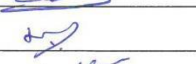
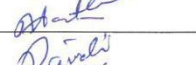
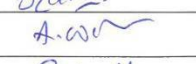




Closing Meeting for debriefing

Attendance Sheet

Date:- 30.01.2020

Venue:- Board Room

Debriefing meeting

S/No	Name	Designation	Signature
1	Prof. Chandantha Abeysena		
2	Prof Ruwan Jayasinghe		
3	Dr. P. Elango		
4	Dr. P.K. Dissanayake		
5	Dr. B.A. Karunaratne	Vice Chancellor	
6	Dr. S.D. Pilapitiya	Dean	
7	Prof SISIRA SRIBADANA	Prof & medicine	
8	Dr. Chamara Sarathchandra	S. Lecturer	
9	Dr. Kosala Weerakoon	S. Lecturer	
10	Dr. S. Srisankar	S. Lecturer	
11	Dr. D.M.A. Kumara	Head - gyn obs.	
12	Dr. W.A.N.D. Wickramasinghe	Head / Community Medicine	
13	Dr. N. Lokunasinghe	Head / Medicine	
14	Professor Anjana Gun	Head / Parasitology	
15	S.P.B. Thalagapitiya	Head / surgery	
16	P.H.G. Janka Pushpalekman	Head / Family Med	
17	Dr. J.A.A.S. Jayaweera	Head / Microbiology	
18	Dr. H.T.W. Weerakoon	Senior Lecturer/Biochem	
19	Dr. S.P.A.S. Senadheera	Senior Lecturer/Biochem	
20	Dr. P.R.S.R.J. Bandara	Lecturer (Prob.)	
21	Dr A. Wickramasinghe	Head Biochem	
22	Dr S.P. Wickramage	Head / Physiology	

23	Dr. D.M.E. Kuminda	Director / Lect	
24	Dr. D. Rathish	Cell / Pharam	
25	Dr. R.D.K. Medonsa	Lecturer / Pathology	
26	Dr. W.A.S.N. Wedasingha	Lecturer / Phym	supan.
27	R.M.B.S.K. Senaviratna	Senior Lecturer / Biochem	
28	A.W. Irigatbandara	Instructor	
29	Thushara Wanasinghe	Senior Ass. Librarian	
30	Dr. Kumara Mahipala	Senior Lecturer	
31	Dr. P.N. Wansureka	Lecturer	
32	R.M.S.T. Rajapakse	Lecturer	
33	AMMV Kumari	Lecturer	
34	Dr. Chandana Hewawage	Lecturer	
35	Dr. M.A.R.S.S. Gunathilaka	Lecturer	
36	Dr. A. Wehells	Lecturer	
37	N.D. Jayasinghe	Senior Instructor	N.D.
38	D.K. Lecamwasam	Instructor (Ass. basis)	
39	Dr. W.S.S. Waidyanathas	Lecturer	
40	Dr. D.M.P.C.K. Abeyaratne	Lecturer	
41	Dr. H.M.I.U. Jayasinghe	Lecturer	
42	Dr. G.G. Amarasinghe	Lecturer (Part-time)	
43	Dr. D.A.H. Heffernan	Lecturer / Pathology	
44	Dr. C.S. Pamthirige	Senior Lecturer / Anatomy	C.S.
45	Dr. S.M.A. Jayatilaka	Senior Lecturer / Anatomy	
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Annexure 3: Photographs Taken During the Site Visit



Meeting with the Heads of the departments



Meeting with the Directors of the Units



Histology laboratory



Main Library



Computer Centre



Lecture Hall in the Faculty



Girls Hostel



Students facilities in the teaching hospital



Auditorium of the Clinical building



Clinical skills laboratory in the clinical building



Debriefing meeting