POLICIES RELATED TO MANAGEMENT OF THE MBBS PROGRAM

2018

FACULTY OF MEDICINE
UNIVERSITY OF PERADENIYA
Policies related to management of the MBBS program at the Faculty of Medicine, University of Peradeniya

Preamble

The Faculty of Medicine, University of Peradeniya in keeping with its stated mission, strives to produce highly competent, socially responsible and compassionate doctors, who would demonstrate a spirit of inquiry, enabling them to contribute to the expanding body of research as well as be capable of serving the health care needs of the society.

In order to accomplish its mission, as well as to provide an enriching educational experience to its undergraduates, the Faculty of Medicine will adopt the following policy framework.
1. Policies in relation to Program management and human resource development

Ensure,

- that an organizational plan (organogram) is put in place to facilitate efficient management of the undergraduate program and make it available through web to all stakeholders
- adoption of a participatory approach to decision making - academic development, staff development, research and welfare activities
- that the faculty action plan is reviewed bi-annually
- that a system is in place to identify students with special needs in order to develop a support mechanism while constantly reviewing facilities available for them and taking remedial measures (this would apply to those students suffering temporary disability due to accidents, surgery etc.)
- that the code of conduct for academic staff of the University of Peradeniya and policy and regulations related to sexual harassment and violence at University of Peradeniya is enforced at Faculty level
- adoption and implementation of the university policy on prevention of discrimination
- zero tolerance to ragging and adequate safeguards are taken to prevent ragging.
- that a sustainable system is in place for continuing professional development of academic and non-academic staff (Strive to obtain necessary funds for above activities during budgetary allocations)
• development of standard operational procedures (SOP) for procurements, leave, promotions, organizing activities etc., making it accessible to staff through faculty website/hard copies etc.
• that the Faculty handbook include in addition to general information of available services, information on the overall course, learning outcomes of the different modules, examination regulations, code of conduct and general regulations including attendance policy. The handbook should be distributed to students at entry and should be available on the web. The students should be briefed on how to find information in the Handbook during the orientation period.
• New students go through an orientation program which discuss the roles and responsibilities of university students
• Ensure enhancement of English language skills among students and staff as the medium of instruction and that official correspondence is in English
• Ensure development of native language skills among students
• that every department of study, at its department meetings, include an agenda item on ‘Quality assurance’ with documentation of progress in relation to quality assurance activities.
• that a mechanism is in place for regular updating of faculty website and dissemination of information to stakeholders through this website
Work ethics

Ensure that every department has a document which is transparent, which outlines the distribution of teaching, administrative work, service commitments and research work of each staff member in order to ensure fair distribution of work among staff members.

Have in place duty lists for non academic staff in relation to the teaching program.
2. **Policy on Curriculum development**

Ensure,

- that the curriculum development committee (CDC) of the Faculty is composed of representatives from all academic departments and Units and is responsible for reviewing the program outcomes (graduate profile) periodically, setting direction for curriculum revision as per changing needs, new knowledge and standards recommended by national and international regulatory bodies.

- consideration of input from all stakeholders during design and development of the academic program. (which include, but not limited to clinicians, Ministry of Health, students, university officials, patients, alumni and the public)

- That the MBBS curriculum (FoM, UPDN) is aligned with the vision of the University, mission of the Faculty of medicine, the latest Subject Benchmark Statements (SBS) in medicine, the competency descriptors of the Sri Lanka Qualification Framework (SLQF), as well as the standards /criteria set out by the Sri Lanka Medical Council (SLMC).

- That the curriculum of the MBBS programme at the University of Peradeniya is an outcome-based curriculum designed based on the graduate profile/graduate competencies specified to be achieved at the end of each year and formulated at SLQF level 7.

- that CDC meetings are held regularly and that CDC and its subcommittees (CCDC) sets direction for periodic curriculum review by reviewing the graduate outcomes in the light of changing societal and practice needs.

- active participation of all teachers during planning of the academic program and courses/modules.
that the Faculty action plan is considered during subsequent planning.
• fallback options for those who are not progressing as expected.
• that intended learning outcomes of the study programs are realistic, deliverable, feasible and achievable within the stipulated period
• that the curriculum is designed based on faculty principles
• that program design and development integrate strategies to promote self-directed learning, critical thinking and collaborative learning
• that a process is in place for the Faculty quality assurance cell to evaluate and monitor curriculum and improve the program design
• that the program is designed to accommodate supplementary courses such as professional, interdisciplinary programs through electives to broaden the capabilities of graduates
• that issues of gender, equity, ethics, cultural and social diversity are integrated into the curriculum
• that the program is structured with a coherent set of courses/modules promoting progression, which demand mastery of skills, knowledge conceptualization from students and ensures greater learning autonomy with progression.
• that intended learning outcomes to be achieved are clearly stated for work based placements

3. Course module design and development

• Design and development of a course/module would be by a team of experts. The team will include all permanent staff of the relevant department/s who will be the internal subject
experts. Internal subject experts would be formally invited to contribute to the process. Inputs from all stakeholders (which include but not limited to clinicians, alumni, university officials and students) should be considered during design and development of a course. Previous course/module evaluation reports will be taken into consideration during the process.

- The curriculum would be outcome-based. The designing and development of all courses will be guided by the graduate profile and outcomes specified to be achieved at the end of each year. Collectively, the courses intend to deliver a comprehensive understanding of the basic sciences, applied sciences and a sound knowledge of common and important health problems encountered in the wards and in the community. Current and emerging health problems, novel developments in the field of medicine and areas of potential future research will be considered as important aspects of course design and development.

- The design and development of the courses would be at SLQF level 7. The Subject Benchmark Statement in Medicine, recommendations of SLMC, and relevant guidelines by professional bodies in Sri Lanka will be used to guide the process. The course team may identify additional international recommendations/guidelines for this purpose.

- The ADPC format approved by the Senate of the University of Peradeniya would be used as a template.

- The course contents, teaching/learning activities and the assessment methods will be systematically aligned with intended learning outcomes. The intended learning outcomes
of the course will be mapped against the same of the MBBS programme.

- A sufficient number of student-centered teaching/learning activities will be included in each course to promote active learning.

- The student handbook which is provided to each student at the beginning of the MBBS programme will contain specifications of each course in the ADPC format. It will contain the course code, course title, the number of credits, pre-requisites, whether compulsory or optional, intended learning outcomes, time allocation for teaching/learning activities, contents, assessment strategies and recommended learning resources.

- The workload of a course comprises of direct contact hours such as lectures and guided group discussions, self-learning time, practical sessions, field visits, clinical training, assignments, etc. The composition of the workload of each course will be clearly mapped to show the contribution from each component to the credit value.

- Learning activities will be included to develop competencies such as self-motivation, the ability to initiate and continue self-directed learning, collaborative learning with seniors, colleagues and junior staff, creative and critical thinking for problem solving, a passion for lifelong learning, a tact for responsible communication with patients, colleagues, officials and community and the spirit to be a good team player, both as a team leader and a team member.

- Adoption of strategies to cater to a diverse student population with minimization of potential disadvantages for the students with special needs/differently-abled students
• As the MBBS programme will have multiple courses in each semester, the teaching/learning activities will be distributed fairly equally throughout the semester. These strategies are intended to ensure that the volume of learning for each semester is achievable by every student, and that they are not overburdened at any point of the course.

• Each course will deal with a particular aspect in medicine, within one subject area or pertaining to multiple subject areas. In selection of content for each course, the course team will ensure that the course delivers a broad overview of the particular aspect in medicine by the diversity of topics and resource persons involved. While doing so, relatively more important areas will be identified, and will have more number of timetabled hours and teaching/learning activities to render a more comprehensive and deeper understanding of them. The course team will ensure that the amount of content in each course is neither meager nor excessive, and can be realistically achieved within the planned time by the staff and students.

• Encourage incorporation of diverse/appropriate media/technology for teaching/learning by the academics and the students. The faculty will maintain a virtual learning environment to which each Department will contribute.

• Regular training of academic and non-academic staff of the Faculty. Staff will undergo training - induction and at regular intervals afterwards, of which the design and development of courses will be one component.

• Continuous professional development will be identified as an important aspect of the annual action plan of every department. The staff members who undergo training will
disseminate that knowledge within the respective department.

- The Faculty and the University will ensure provision of adequate resources to carry out course/module design and development.

- The responsible bodies for approval/introduction of new courses and revision of existing courses will be the FQAC, CDC, the Faculty Board and the Senate. All decisions within the Faculty with regard to approval of courses will be in accordance with the policy on course design and development.

- All members of the academic staff are made aware of the Faculty policy and principles of course design, development, monitoring and approval, which include the process of approval of new courses and revisions of existing courses through Faculty Board, CDC and faculty development workshops.

- Internal monitoring of course design and development would be by the FQAC/CDC. Such monitoring will be done by a regular system with the intention of improving and updating of courses.

- Each course/module, will be evaluated by the course team with regard to effective delivery, timely completion and achievement of learning outcomes. Feedback from all relevant stakeholders will be taken into consideration during this process. The process will be completed within 2 months of releasing of results of the end-semester/final examination for the module and a report will be forwarded to the FQAC. Conclusions and suggestions in this report will be taken into consideration during planning of the same course for the
subsequent batch. (Context, input, process and product model (CIPP) strategy to be adopted during regular program evaluation)

- course/ module review and revision to occur based on a protocol developed for this purpose. Ensure availability of curriculum blueprints for the existing modules and courses in order to ensure alignment with subject Benchmark statements (SBS) and SLQF level outcomes.
- Encourage development of lesson plans by staff members for practical sessions, SGDs and lectures.

4. Teaching/Learning

In order to facilitate smooth implementation of the academic program, ensure that the Program schedules are notified to staff and students at least one week prior to the commencement of the respective module/course. Notification will be done through standard notices and faculty website.

Ensure

- implementation of an orientation program geared at introducing the MBBS program, code of conduct, language skills (English, Sinhala and Tamil) and personal and professional development.
- provision of an overview of the course/appointment to students at the commencement as a means of orientation.
- alignment of all teaching learning activities, as far as possible, with trends in higher education.
- a student-centred learning approach in delivering content.
• reference to research findings during undergraduate teaching encouraging the practice of evidence based medicine.
• implementation of a reward system teachers for teaching excellence (faculty to devise criteria for such an award).
• use of modern technology to enhance learning (videos, online sessions, use of manikins)
• incorporation of elective courses/appointments in the MBBS program
• provision of opportunities for group work, collaborative learning, learning in real world settings, as far as possible,
• availability of infrastructure facilities for small group learning among students.
• the use of innovative teaching methods by staff by providing required assistance (human and infrastructure)
• implementation of an ICT policy (proportion of web based teaching per semester or per module, plagiarism policy).

5. Policy on feedback (student, staff, extended staff, examiners)

Ensure that feedback from the stakeholders is obtained on a regular basis and considered during decision making as a means to enhance quality

• Prepare and update faculty approved documents to obtain feedback on satisfaction regarding a course ensuring inclusion of essential components such as ‘perceptions on discrimination based on gender, ethnicity, disability’ and support available for students with special needs, timely availability of time-tables and course details (all areas mentioned in standards of PR manual).
• Obtain student feedback of the program/ clinical appointment at the end of each module/ appointment by the responsible department, using the documents prepared for this purpose. (However, these documents may be modified according to the needs of each module/course/appointment).

6. Learning environment, Student support and progress
Faculty shall adopt the following good practices

• Ensure that the physical infrastructure meets the increasing demands of staff and students
• Ensure the adoption of a green environment policy

• Establish a functioning help desk. (It will provide information to students, alumni and others, who seek services at FoM, UPDN). Update the web to provide above information. Display Organogram, sign posts within faculty premises.
• Conduct career guidance seminars on a regular basis following final year examination
• Inform students on whom to meet for particular official needs.
• Establish a system to monitor student progression.
• Track performances of recent graduates
• Establish a grievances committee/ombudsman/counseling service for examination related grievances.
• Ensure a system of Counselling and extra coaching for those who are underperforming (Through SAC, HoDs)
• Create a fall back option/ alternate exit qualification for students who are not progressing well.
• Develop a mechanism to evaluate the effectiveness of the student support programs on a regular basis.
7. Make Transcript/results sheet of the MBBS program available to students at the point of graduation

Policy on Student Assessment and awards

‘Assessment is a tool to promote learning. The faculty will ensure regular assessments and release of results in timely manner’

- align student assessments with stated graduate competencies/outcomes in the Faculty handbook, Subject Benchmark Statement (SBS)
- develop an assessment blueprint using graduate competencies listed out in the Handbook and the assessment tools used from Year 1 to 5
- demonstrate that the Graduate exit competencies fall within SLQF outcomes and descriptors.
- Discuss student examination matters as an agenda item at departmental meeting
- conduct examination planning meetings at department level, developing and using examination blueprints (subject or module specific) in designing different components of the examination. (Such an act will demonstrate the alignment of assessment with ILOs and that examiner biases are minimum.)
- Use a variety of examination tools as relevant to expected outcomes.
- students to be provided with information regarding assessment types, procedures, weight age of components by module coordinator at the beginning of the course
- Conduct formative examinations and mock tests regularly and provide feedback to individual students
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- Plan examination calendar in advance and adhere to it while making it available to staff and students through the faculty website.

‘An important principle in student Assessment is to be fair and just, in this regard, Being fair and just calls for ensuring validity and Reliability of assessments’

Ensure
- Provision of necessary examination related information (examination regulations, tools, duration, weight age of components at the beginning of the semester – Through website, Handbook or introductory lectures)
- Examination unit provide guidelines to Chief examiners and other examiners on procedures to be followed in relation to examinations.
- Appointment of qualified and experienced examiners (internal and external) declaring conflicts of interest in advance at department level prior to nomination of examiners.
- Examiner training
- Conduct of examination planning meetings and include external examiners
- Scrutiny of questions at dept. level and faculty level in order to ensure standardisation
- that marking schemes are submitted along with the questions to the scrutiny board
- that a mechanism is in place to support students with special needs/differently-abled students at examinations(within certain regulations, in order to be fair by all), as per faculty policy
that a procedure is in place, at faculty level, to handle individual students’ grievances in relation to examinations, within a specified time limit after the examination.

written instructions on examination process is sent to examiners

Criteria for awards are clearly defined and are accessible to students

That Multiple methods of assessments are used in all subjects/ modules - essay, MCQ, viva voce, OSPE, research, report writing

maintenance of examination blue prints in relevant departments

confidentiality and- password protection of examination data

Fairness at examinations and assessments by close invigilation and plagiarism checks

Assessment by external examiners and External examiners reports are considered

double marking for essay questions (blind marking),

Moderation of answers

That question papers are archived in the examination unit under the Senior Assistant Registrar (The chief examiner is instructed to hand over a copy of the question paper to the Senior Assistant Registrar (SAR) on conclusion of the examination)

Student access to past papers other than MCQ in the library.

Identification of excellence

Identify and reward high achieving students based on criteria which are accessible to students
Assessment methods are continuously reviewed and actions taken

Ensure,

- Regular review of examination results with provision for appropriate follow up activities
- Conduct overall analysis of student results to obtain feedback for improvement
- Post-validation of examination questions (discrimination power, difficulty index and moderation of questions for face validity)
- Obtain feedback from external examiners, students and other staff at the end of every examination
- Decisions by Z committee and CDC on corrective actions to be implemented through Dean and Faculty board

8. Research and outreach activities among staff and students

The faculty shall adopt following good practices

- Faculty is mindful of the fact that research exposure enables the development of professional competencies such as critical thinking, disciplined inquiry, practice of evidence based medicine, teamwork, collaborations, writing skills and ethical practice and hence provides training to undergraduate students on research through coursework and providing an opportunity to implement a small scale group project
- All staff members are encouraged to pursue their research interests. Within the university regulations, available funds will be allocated, collaborations are encouraged. Use of faculty facilities for research and
outreach work is permitted, Faculty encourages collaborations with industry and partnerships in research.

- collaborative work by UG students and staff is encouraged these could lead to innovations/publications
- International collaborations are encouraged both staff and student exchange and research work
- Electives and opportunities for staff and students to obtain experiences in different work places are made possible through MOUs
- Research and development Unit - oversee capacity building for research and publishing by organizing workshops, research forums, talks by visiting researchers and writing clubs.
- Faculty encourages the development and use of Open Educational Resources (OER). Use ICT based modules for continuing professional development of different categories of staff.
- A system to obtain feedback from academic and non-academic staff about the working environment (regular employee satisfaction surveys to be initiated)
- A reward system for excellence in research - students and staff (Faculty policy on research and development - undergraduates, staff, reward system to be worked out)

(Please note, subsequent to the endorsement of the policies by the faculty, the operational mechanisms will have to be documented.)
Abbreviations

SLMC: Sri Lanka Medical Council
SLQF: Sri Lanka Qualification Framework
SBS: Subject Benchmark Statement
MBBS: Bachelor of Medicine and Bachelor of Surgery
ADPC: Academic Development and Planning Committee
FoM: Faculty of Medicine, Peradeniya
UPDN: University of Peradeniya
FQAC: Faculty Quality Assurance Cell
CDC: Curriculum Development Committee
CCDC: Clinical curriculum development committee

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