



PROGRAMME REVIEW REPORT
Bachelor of Dental Surgery (BDS)
Faculty of Dental Sciences
University of Peradeniya
6th – 9th January 2020



Review Panel: Prof WTPSK Senarath
Prof CA Gnanathanan
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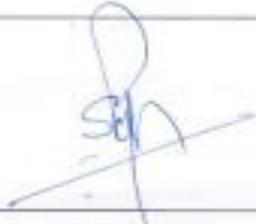
Quality Assurance Council,
University Grants Commission, Sri Lanka

University: University of Peradeniya

Faculty: Faculty of Dental Sciences

Program: Bachelor of Dental Surgery

Review Panel:

Name	Signature
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Section 1. Introduction to programme

The Faculty of Dental Sciences (FDS), University of Peradeniya (UoP) is the only institution in Sri Lanka which conducts a study programme leading to the award of a professional degree in Dentistry. Dental education in Sri Lanka commenced in 1943 with the establishment of the 'Dental School' as the Department of Dental Surgery in the Faculty of Medicine of University of Ceylon, Colombo. The clinical component of the training was moved to Augusta Hill, Peradeniya in 1953. The Dental School continued to be part of the Faculty of Medical, Dental and Veterinary Science of Peradeniya campus until 1986, when it attained faculty status.

BDS was a 4-year programme until 2016. Upon review of the programme based on discussions with all stakeholders, the FDS proposed to revise the programme and to offer it as a 5-year programme, in line with similar programmes worldwide. Further, key revisions were made to the curriculum in order to meet the UGC-stipulated Benchmark Statement in Dentistry (QAAC-UGC, 2010). The faculty conducts only one undergraduate programme, and the 4-year study programme was revised thrice until the new BDS curriculum was approved and implemented in 2015/2016.

FDS hosts seven departments of study, namely Basic Sciences, Community Dental Health, Oral and Maxillofacial Surgery, Oral Medicine and Periodontology, Restorative Dentistry, Prosthetic Dentistry and Oral Pathology. Although a subject-based teaching programme was conducted by different Departments/Divisions under the 4-year curriculum, the teaching programme in the new 5-year curriculum is delivered via courses which require integration of allied Departments/Divisions. The 5-year programme has added an extra year of clinical training for students and to facilitate this, initiatives have been taken to establish a new Department of Comprehensive Oral Health Care (COHC) and a Unit for Dental Implants.

The Faculty has established a Dental E-Learning Unit, Unit for Development of Dental Education (UDDE), English Language Teaching Unit (ELTU), Printing and Photography Unit and a fully-fledged Dental Library to complement different aspects of teaching and learning. Further, the Faculty discharges its core functions of the study programme under several established Divisions/Committees: Division for Undergraduate Studies, Division for Examinations, Faculty Quality Assurance Cell (FQAC), Curriculum Committee and Research Committee.

Additionally, the Dental Auxiliary Training School (DATS) undertakes training of clinical and technical support staff, which strengthens the effective delivery of the teaching programme. Faculty has established a Centre for Research in Oral Cancer (CROC) which supports the staff and students to conduct research. It is compulsory for students to offer all courses of the programme. However, for the research project, students are allowed to select a topic of their choice.

About 80 students are admitted to the Faculty each year. Selection is done by the UGC, based on performance and ranking at the GCE A/L examination. The student intake in the last four years is given in Table 1.1, and the number of students graduating in the last five years is given in Table 1.2.

Table 1.1: Number of students in Faculty/programme at present and the maximum number of students enrolled in the last four years

Academic Year	Male	Female	Total
2014/2015	27	53	80
2015/2016	26	55	78
2016/2017	23	51	77
2017/2018	25	46	71

Table 1.2: Number of students graduated from the programme over the past five years

Year of Graduation	No. of Students Graduated
2014	79
2015	66
2016	91
2017	114
2018	79

The number of permanent academic staff currently stands at 56 for a total of 312 students. All staff members are well qualified, and 41 members have obtained postgraduate qualifications. Staff: Student ratio is maintained favourably around 1:7. This ratio is important since they perform clinical procedures on patients and the training of dental graduates require close supervision. The Faculty has two academic-support staff members, two administrative staff members and 154 non-academic staff members who support the teaching programme and service functions.

Section 2. Observations on SER

The review team observed that the SER has been prepared according to the guideline given in the Program Review (PR) manual using a participatory approach involving all constituents of the faculty. The references for the evidence have been provided alongside the standards and criteria according to the template provided. It was observed that most of the documents have been submitted and in some cases the documents required had to be requested by the review team since they were not provided. However, they were made readily available to the review team on request. For example, the student feedback on mentoring program, and peer observation records etc., were already available but only the formats have been incorporated as evidence.

The study program was designed in a way to reflect the mission, goals and objectives set out in the corporate plan. Student-centred learning and outcome based educational approaches have been adopted along with a clearly laid down graduate profile. The study program is in accordance with the SLQF guidelines except for research component.

As this was the first program review under QAC, no previous records were available. However, subject reviews have been conducted over ten years ago on several Departments, as shown in Table 2.1.

Table 2.1: Previous Subject Reviews

Department	Dates of previous site visit
Basic Sciences	16 th – 18 th February 2003
Oral Medicine	4 th – 6 th April 2006
Prosthetic Dentistry	24 th -26 th July 2006
Restorative Dentistry	6 th – 8 th March 2007
Oral Pathology	25 th – 27 th August 2008

There was a report on subject review conducted in 2009 and the review team considered the recommendations of that report. It was observed that some of the recommendations have been implemented in order to enhance the quality of the study programs. However, it was found that some of them have not been fully implemented yet.

Section 3. Description of review process

Programme review evaluates the quality of education within a specific subject or discipline. This review evaluates the quality of education leading to the Bachelor of Dental Surgery (BDS) offered by the Faculty of Dental Sciences at University of Peradeniya, Sri Lanka. The review process focused on the student learning experience, given by study program and students achievements.

The review process started with the independent individual desk evaluation by panel members, followed by a meeting of the review panel organized by the QAC before the site visit. At this meeting, all the reviewers shared their observations on the SER and marks allocated for each section in each criterion, with their justification of the marks given. At the end of the session, the team reached preliminary agreement upon marks to be awarded for each criterion, but some of the additional documentary evidence needed to support the marks allocated was listed (Annex 2) and sent to the Dean of the Faculty, so that they could be made available before or at the time of the site visit. The team prepared the agenda for each day of the site visit and forwarded it to the Dean for the Faculty's comments or modifications. The final schedule for the site visit is shown in Annex 1. Time management was a key factor and strictly followed to align with the agenda for each day.

The review focused on the eight criteria described in the Manual for Reviewing Undergraduate Study Programs of Sri Lankan Universities and Higher Education Institutes, published by the University Grant Commission, Sri Lanka. The eight criteria were:

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

Evaluation of the above eight aspects was done using the information obtained from the following sources:

1. SER submitted by the Faculty of Dental Sciences.
2. Meeting with Director IQAU
3. Meetings with Vice Chancellor, Dean, Heads of Departments, cross section of academic and non-academic staff members, administrative staff, cross section of undergraduate students representing all study programs to cover all academic years and representing both gender, stakeholders (alumni and industry)

4. Observing teaching, laboratory and clinical sessions.
5. Observing all documentary evidence (examined by at least two members of reviewing panel and initialed).
6. Observing the physical facilities available within the university and the faculty that could be used by study program under review.

Each of the quality standards of the eight criteria were carefully assessed using the 0-3 scale as per the marking scheme set out in the Manual and the final overall judgment was made using the observations made by all members of the panel.

Section 4. Faculty's approach to quality and standards

The University Internal Quality Assurance Unit (IQAU) is seen to maintain good standards, although with minimum physical facilities and human resources. All the documents are maintained in order. Necessary documentary evidence for future assessments in either institutional review or subject review are maintained and the process continues.

The Faculty's Internal Quality Assurance Cell (FQAC) is in initial stages of establishment yet maintained in good standards. Quality assurance plays a pivotal role in the Faculty and QA is taken up as a compulsory agenda item at meetings of the Faculty Board (FB). The FQAC functions in line with the guidelines of IQAU. The team spirit and the devotion of the existing IQAU Coordinator and the team are highly appreciated. The Dean of the Faculty and the academic/ non-academic staff play a vital role in maintaining quality standards.

Section 5. Judgment on each of the 8 criteria

Criterion 1. Programme Management

The organizational structure facilitates smooth functioning of the degree programme. The IQAC has committed and motivated leadership. A comprehensive student handbook including the code of conduct is provided to students at the time of registration and is also available online. The program also complies with the Subject Benchmark Statement (SBS).

There is a lack of a comprehensive information system to manage and process student information from initial registration to graduation and beyond. The process for securing confidential documentation, especially in examination matters, including maintenance of answer scripts, monitoring of system backups (register maintenance) are inadequate. Some processes such as draft documents for QA processes (i.e. peer review, student feedback forms etc) have not been approved by the University Senate, yet tabled at FB. Review team identified that there is a lack of full-time staff at the FQAC to assist in implementation and monitoring of the processes (i.e. student feedback, peer review etc.). The Faculty has no policy with regard to handling students with disability.

Criterion 2. Human and Physical Resources

All academic staff members are qualified, competent, committed and motivated with a supportive leadership. Physical resources, including their own teaching hospital, training Centre are well equipped and maintained. The Faculty adopts Outcome Based Education – Student Centered Learning (OBE – SCL) approach to learning. There is a separate English Language Teaching Unit (ELTU) to enhance skill level of students.

Many of the approved cadre positions are unfilled at academic and non-academic levels and this makes high workloads for individuals. Chair Professor positions need to be filled. While sufficient emphasis has been laid on zero tolerance on ragging, monitoring outside faculty premises is also required.

Criterion 3. Programme design and development

This is the only degree programme offering the BDS in the country. There is a strong network of dental professionals in various sectors spread across the country and globally. The Faculty ensures external stakeholder participation at key stages of programme planning, design, development and review. The Faculty uses the outcomes of programme monitoring and review to foster ongoing design and development of the curriculum. Programme conforms to the mission, goals and objectives of the faculty; it addresses the national needs; reflects global trends; and uses current knowledge and practice in teaching. The program is guided by other reference points such as SBS, and requirements of relevant professional bodies.

The Faculty adopts an OBE where programme outcomes are clearly aligned with the course/module outcomes. Teaching and learning activities and assessment strategy are aligned with the learning outcomes of each course (constructive alignment).

The credit component is not fully compliant with the SLQF 6. All modules are core courses and students do not have any flexibility in choosing electives, even in their final year of study. There is no process to capture information on student placements. While admission to the programme is restricted for those with major disabilities, there is inadequate attention given to students within the programme, who may experience difficulties, such as visual impairment, left-handed students, etc.

Criterion 4. Course/ Module Design and Development

The course design and development followed an OB approach. It has been carried out at regular intervals by the internal experts and external subject experts, FB appointed Curriculum Development Committee (CDC) and Unit for Development of Dental Education committee (UDDE) while considering the views of students, and stakeholders. Course design has been developed with specified program and course Intended Learning Outcomes (ILOs), detailed course contents, credit value, assessment methods and references using standard formats. The required guidelines in course design have been followed. Approval has been obtained from relevant bodies such as FB and Senate.

The course has ten semesters including clinical clerkship and a research component, designed to meet the programme objectives and ILOs. The courses are designed in compliance with SBS and SLQF, except for the research component, and professional bodies such as the Sri Lanka Medical Council (SLMC). The new five-year study program requires graduates to complete one year of internship in the Ministry of Health (MOH) before they obtain full registration with the SLMC.

Each course / module is designed with contents, learning activities and assignment tasks are systematically aligned with course outcomes, CILOs are aligned with programme outcomes in order to ensure constructive alignment. All courses are constructively aligned to Graduate Profile (GP) and designed with adequate breadth, depth and rigor in the contents. Teaching and learning activities and assessment tasks are aligned with course ILOs and the assessment blueprint ensure this. Students are able to achieve the set graduate profile PLOs at the exit level. The course design incorporates different types of learning such as direct contact hours, self-learning, laboratory studies, dissection of cadavers, field community studies, clinical work etc.

The students are informed of the course specifications and detailed curriculum matrix well in advance via Faculty Handbook, faculty webpage, lecture schedule and detailed timetable and introductory lecture. Timetable consists of the lecture topic as well with timeline which

is a good practice. The course is structured and scheduled to allow students to complete the course within the stipulated period of time.

Course design and development incorporates appropriate Information Communication Technology (ICT) facility. Staff undergoes Continuous Professional Development (CPD) programs, staff development workshops, training workshops etc regularly. Since the bulk of the teaching is clinical and based on procedures performed on patients according to their treatment needs, it is mainly Student-Centered Learning under direct supervision. A Clinical Skills Laboratory is established for students to master their skills before they practice on patients. Clinical training is done in the dedicated Dental Teaching Hospital of the Faculty, where students treat patients more independently, making the entire programme truly an outcome based programme. Students also learn in the community setting by participating in community outreach programmes.

There is a research module which has a two-credit course on ethics and statistics and a second course on research methodology. The proper research project constitutes only four credits. The review team recommends that the research component to be increased up to six credits instead of four. Extensive feedback has been obtained during design of courses. Courses are evaluated by students, external stakeholders, Course Coordinators and Semester Coordinators in relation to the content, implementation and minor corrective measures have already been taken. Courses are regularly monitored and reviewed by the UDDE. The FQAC was established in 2014 and the Chairman was appointed in 2015. It has an office functioning with limited facilities since 2016, and a management assistant. The FQAC Chairman is a member of Curriculum committee and provides input in matters related to curriculum development. FQAC need permanent cadre for non-academic staff.

Issues relating to differently abled students are considered on a case by case, ad hoc, basis and concerns have been addressed, but there is no policy document on it as yet. For example, left-handers do not have a proper dental chair to do their work comfortably; some buildings do not have elevators or even railings along the stairway which is necessary for easy access to facilities.

Although the faculty has a functioning FQAU, it is not directly involved in monitoring, remedial action etc. The functional activities of FQAU are overlapping with UDDE, which regularly monitoring, evaluating and improving the courses and modules of the programme.

Criterion 5. Teaching and Learning

The Faculty has teaching and learning strategies that are based on the Faculty's mission and curriculum requirements. The Faculty has been developing and adopting its corporate plan and the action plan. The Faculty provides course specifications in its Student Handbook and time tables with daily topics are prepared well in advance before the commencement of the course and displayed on the faculty website and notice boards. Unexpected changes are

notified promptly through emails. The Faculty regularly updates its website. Course specifications, ILOs and the details on student assessments are clearly presented in the course books. They also have a student Handbook, which is given to the students during registration. Teaching and learning strategies and assessment tasks are clearly constructively aligned with ILOs of all courses. All the courses have the blueprints. Substantial numbers of clinical appointments have log books to monitor the student progress.

The faculty encourages blended learning (mixture of diverse delivery methods such as seminars, small group discussions, court room studies, clinical training) at different levels to maximize student engagement with the program. Technology is being used as instructional aid. The study materials are available in LMS. Teachers engage students in self-directed learning and collaborative learning through skill laboratories using simulated manikins. There was evidence for adoption of teacher-directed and student-centered teaching-learning methodologies, confirmed by personal observations during the site visit. Teachers integrate appropriate research and scholarly activities of their own and current knowledge and skills demonstrations by videos in the public domain into their teaching. Teaching learning strategies include self-directed learning, group work, collaborative learning and use of technology D-Moodle, LMS etc. Teachers engage students in research as part of teaching and learning activity and encourage them to present in forums, research symposium, publish in journals while giving due credit to the student. Teaching learning strategies are assessed by collecting the student feedback at mid semester and end of semester. They analyze it and address the concerns as well. Faculty considers fair and transparent allocation of work for staff. Non-academic staff appraisal is taking place and appreciated which is a good practice. The students provide evidence that there is no gender discrimination.

Although feedback is collected from students, analysis is done by UDDE instead of FQAC which should monitor these activities. Peer observation and review of teaching is not currently in practice although it has been planned and formats have been prepared.

Criterion 6. Learning Environment, Student Support and Progression

The Faculty adopts a student-friendly administrative, academic and technical support system that ensures a conducive and caring environment, and there is a great interaction among students and staff. There is dedicated staff for student affairs. Faculty identifies learning support needs for its programmes and provides effective learning environment through appropriate services and training programmes. Learner support is provided through appropriate online systems, tutor support, library, laboratories, skills lab and clinical training in their own dental teaching hospital with excellent facilities.

Faculty offers all incoming students an orientation programme and provides information regarding the rules and regulations of the faculty, OBE-SCL, and technology-based learning.

The Faculty guides its students to comply with the code of conduct for students (Student Charter), discharge their rights and responsibilities and utilize services available in the faculty. The Student Handbook provides all the information adequately. Student led activities are monitored by academic staff and provides a platform for students to voice their concerns. The Faculty's library and e-library use ICT-led tools to facilitate the students to access and use information effectively. On-going training programmes conducted by DELU, SDC and ELTU provide ample training for students and staff on use of common learning resources.

An academic mentor programme for students as they come into the faculty as new entrants is in place. Academic mentors provide advice and support to poor performers. Only three students are assigned to each mentor, allowing dedicated time for meetings. Medical exhibition, student research sessions and academic sessions promote the academic staff-student interaction. Co-curricular activities such as sports and aesthetic programmes to social and cultural dimensions are encouraged and facilitated to enhance the educational experience in keeping with the mission of producing responsible compassionate dental surgeons. It is recommended to further strengthen those social interactions between the faculty and students.

The Faculty regularly monitors retention, progression, completion/ graduation rates. The dropout rate is low and negligible. As of now, all graduates are guaranteed employment by the Ministry of Health. The Faculty promptly deals with students' complaints and grievances and delivers timely responses. Student's complaints are addressed by Student Welfare Advisory Committee (SWAC), academic mentors, student counselors and individual teachers. The Faculty networks with its Alumni and encourages alumni to assist students in preparing for their professional future. There is evidence that the Peradeniya Dental School Alumni Association (PeDSAA) provides support, morally as well as financially, to the faculty and students.

The Faculty needs to improve its academic support services and guidance to meet the needs of differently abled students. The faculty needs to have a proper counseling centre with professionally qualified counselors. The Faculty also needs to do tracer survey of graduates who have passed out from the faculty.

Criterion 7. Student Assessments and Awards

The strategy for assessment of student learning is considered as an integral part of programme design, with a clear relationship between assessment tasks and programme outcomes. These are aligned to specified qualification/level descriptors of the SLQF requirements. The Faculty has procedures for designing, approving, monitoring and reviewing the assessment strategies for programmes. ILO's are provided for each and every course unit. Hands-on skills are developed with clinical training in well equipped wards.

Students' performances are appreciated with awards. The Faculty has reviewed the program as appropriate and remains fit for purpose. The four-year degree course was revised to a five-year program so that students have the facility to undergo an internship before registering as a practitioner. Students are assessed using published criteria, regulations, and procedures by the staff and communicated to students at the time of enrollment through handbook and the course book provided. The Faculty adopts a defined marking scheme. Moderation reports for examination papers are available. Scrutiny meetings are reported and the minutes are recorded. Examination results are documented accurately and communicated to students within the stipulated time.

Graduation requirements are ensured in the degree certification process and the transcript accurately reflects the stages of progression and student attainments. A complete transcript indicating the courses followed, grades obtained and the aggregate GPA/grades, and class (where appropriate) is made available to all students at graduation. The Faculty ensures that the degree awarded and the name of the degree complies with the guidelines (qualification descriptor), credit requirements and competency levels (level descriptor) detailed in the SLQF. Well-designed master timetable is in practice. All the semester coordinators and the course coordinators are provided with a duty list.

Policies and regulations governing the appointment of external examiners are well documented and given in the programme manual. Duties and responsibilities of the external examiners are also clearly documented in the manual. They have been adopted mostly during the past two years but can be further strengthened in the next few years, to get their feedback regularly. However, the external examiners' reports have not been regularly obtained or considered for improvements. Second marking system has been recently adopted, but the process needs to be improved. Faculty does not ensure the reports from external examiners are considered by the examination board in finalizing the results and in many cases reports from external examiners were not provided. Only randomly selected 15% of the answer scripts are sent for second marking which cannot be considered as a healthy practice. System of second marking and procedures for recording and verifying marks etc, needed to be improved to ensure transparency, fairness and consistency. The Faculty does not ensure that staff involved has no conflict of interest. Faculty has approved a format for declaration of conflict of interest only in the year 2019 and hopes to adopt it from 2020.

Academic members were not fully aware of the exact date of awarding the degree and the procedure adopted if misconduct is reported at examinations. The Faculty ensures the weightage relating to different components of assessments are specified in course specifications. However, there are no optional courses provided. Although there are limited facilities available for left-handed students in lecture rooms, these considerations have to be extended to clinical area as well. No facilities are made available regarding examination requirements for students with disabilities wherever needed.

Criterion 8. Innovative and Healthy Practices

The program is designed in a manner that addresses national needs. The Faculty has established and operates an ICT-based platform (i.e. VLE/ LMS) to facilitate multi-mode teaching delivery and learning. The Faculty implements a reward system to encourage academics for achieving excellence in research and outreach activities. There is an active policy on OER and copyright, and a MOODLE-based LMS is provided for student centered learning.

The Faculty has established and operationalized strong links with various international, national, governmental and non-governmental agencies. Faculty uses such linkages to build the reputation of the institution, expose students to the 'world of work' and to promote staff and student exchange. Some of the academics pursued their PhD qualifications through opportunities governed by Memorandums of Understanding (MoUs), which is an indication of well-functioning MoUs.

The Faculty has diversified its sources of income to complement the grants received through government by engaging in income-generating activities. Dental Auxiliary Training School not only provides opportunities for the training of technical grade personnel, it also provides revenue to the Faculty. Moreover, the income generated has been utilized for the improvement of the faculty resources.

The Faculty promotes students and staff engagement in a wide variety of co-curricular activities such as aesthetic pursuits, while ELTU is also addressing this aspect. The students appreciate this endeavor since it provides not only a harmonious environment but also improves soft skills.

The study programme contains an undergraduate research project as a part of the teaching and learning strategy and encourages students to disseminate the findings. However, the weightage given is needed to be increased. Faculty does not offer a credit transfer mechanism or fall back options.

Section 6. Grading of overall performance

No	Criterion	Weighted minimum score*	Actual criterion-wise score
1	Programme Management	75	120
2	Human and Physical Resources	50	78
3	Programme Design and Development	75	119
4	Course / Module Design and Development	75	129
5	Teaching and Learning	75	134
6	Learning Environment, Student Support and Progression	50	89
7	Student Assessment and Awards	75	135
8	Innovative and Healthy Practices	25	43
	Total score (out of 1000)		847
	Total score (out of 100)		84.71

Final Grade: A

Section 7. Commendations and recommendations

The study program reviewed during 6th to 9th January 2020 could be considered as a well-designed quality program offered by the Faculty of Dental Sciences, University of Peradeniya, Sri Lanka. Programme design and development has been done satisfying many of the quality standards as per PR manual for review of undergraduate study programmes and updated with revisions whenever necessary. Course design and development has been conducted through a participatory approach satisfying many quality standards as indicated in PR manual. There is a considerable amount of evidence that stakeholders are involved in curriculum revision, which is an excellent effort. The teaching and learning process is being conducted quite well focusing more on student-centred learning. The degree offered has very high demand in the job market, both locally and globally.

Students graduate in a timely manner. Except for minor deviations and a few dropouts, this could be considered as a result of healthy practices within the faculty. MoUs with foreign universities, experts and local organizations have enhanced academic and research collaboration and it was evident that all signed MoUs are active and functioning well. The Study Programme is designed using OBE, SCL and multi-disciplinary approach to broaden the outlook and enrich the generic skills of the students. Students are aware of program ILO's and provided with Moodle and LMS facility although Wifi coverage is not fully established.

The faculty library is well organized and has many new books related to its study programs. Maintenance of a museum within the faculty is appreciated. The project on preserving bones and other parts of human bodies (whose age and gender are known) after dissection by students will provide a strong support in other fields of medicine as well. There is a well-organized record keeping system for patients who seek treatments. Although continuous professional development is encouraged within the faculty, it is recommended to have/design a scheme for promotion of nursing officers as they are recruited and trained in a different manner to government nursing officers.

The IQAC maintains high standards even though it has little human and physical facilities. FQAC was established recently and is in the initial level of development. Yet the effort is highly appreciated, as minimum resources are available and is dependent on the commitments of a full time academic to manage the operations. Thus, it is recommended to strengthen and encourage the FQAC, through recruitment of full-time staff to the unit, to play its due role in monitoring and review of implementation and management of study programme curriculum.

The CGU of the university conduct courses which create entrepreneurship, employability opportunities for students. Yet the coordination with FDS need to be improved. There is a need for a Counseling unit and for obtaining the service of professional counselors especially where students need to release the stresses encountered during study period. Maintaining strict confidentiality of the students who obtain such services is paramount.

The faculty provides a comprehensive student pre-orientation programme, including an intensive English language programme that helps new students to manage their “new life” in the university. Faculty ensures that all students meet 80% compulsory attendance requirement even for intensive English program, without which the students cannot sit for the exam and proceed to follow the academic program. It was observed that there is some evidence for possible ragging within the campus.

The review team observed a friendly working environment for both academic and non academic staff as well as students. There is an appraisal scheme operating in some of the departments and it is recommended to implement that for other departments as well. Classroom facilities and laboratory facilities are at a high standard. There is a newly constructed auditorium and clinical area which has advanced and novel equipment. There is a fully equipped computer centre for students use, though IT usage could be improved. There is no online mark entering system or a record room. Developing a comprehensive and integrated student information system which would facilitate monitoring of student from time of enrollment to graduation and even the alumni network would be beneficial. Procedures and systems relating to the examination process need to be reviewed. Due consideration is needed to be given to maintenance and security of answer scripts, systems backups, etc. Although the appointment of second examiners in a formal manner with the approval of Senate, is appreciated, marking of randomly selected 15% of scripts cannot be considered as a healthy practice. Thus, it is recommended to formalize the second marking process.

There is evidence for regular curriculum revision, however, the process of external validation of the programmes has not been done or not properly documented; therefore, it is recommended to do the external validation following an accepted procedure. The process of documentation of the views of stakeholders, follow-up discussion on views of stakeholders are insufficient and incorporation of the ideas into the curricula have not been apparent; hence, it is recommended to incorporate the stakeholder views in a clear and transparent way in all key stages of curriculum development in the next curriculum revision. Peer review process has to be re-implemented with due regard to keeping the process fair and confidential. It is necessary to ensure that outcomes of student feedback and peer review conducted are analyzed, and information disseminated to respective academics for corrective action, where necessary.

Introducing defined exit criteria together with fall-back options is needed. There is no option for students if any student wanted or has to leave the course. Thus, it is suggested to introduce courses placed at a lower SLQF level, such as Diploma courses on Health Economics, Geriatric Dental Care or other suitable subjects, so that such students will have better opportunities in the future. The possibility of looking at alignment with a Bachelor of Science degree programme from the biological stream is also an option. As there is a demand from the armed forces too for the course, it is recommended to have at least 3% of

intake dedicated to them, subject to the students meeting the criteria set by the programme including the minimum university entry Z-score. Faculty board had recently approved five positions within the annual intake to armed forces for the course, subject to the students meeting the criteria set by the programme including the minimum university entry Z-score which is appreciated.

It is suggested to maintain the flexibility of the programme introducing adequate number of optional/elective courses; introduce adequate number of supplementary and complimentary courses to improve generic skills; establish a well defined programme monitoring process to enhance the quality of courses of the study programs reviewed. Define the course credit value considering both theory, clinical and tutorial/practical or any other course activities; identify the independent learning activities in the lesson sequence of the course; consider the needs of differently-abled students and identify the activities in the curriculum if differently-abled students are registered is recommended.

With respect to the teaching and learning, there is a master timetable with descriptive weekly headings in each course, yet in some cases it was observed that the lecturers do not attend to lectures on time. Students are given opportunities to develop transferable skills not only on communication and proficiency in English etc., but also on patient handling through learning activities. It is recommended to pay attention on the following aspects: further improve the student engagement in learning activities; integration of research/scholarly activities into teaching appropriately; introduce a well-defined procedure to improve teaching and learning, based on data gathered during course/teacher evaluation. Further, incorporate/ use data from student feed-back in teaching is recommended.

It was observed that large number of cadre positions have not been filled. Immediate steps need to be taken to advertise, recruit and fill the academic and non-academic positions within the faculty. Faculty has taken possible steps to advertise, recruit and fill academic and non-academic positions annually. However, due to several reasons there was a difficulty to find suitably qualified applicants.

A faculty career guidance unit/cell needs to be established. Holding the annual conferences and publishing book of abstracts is regular but there is no journal published yet. It is desirable that initiatives be taken to publish a journal from the faculty. Access to upper floors of the buildings is not user friendly for older, relatively unfit or differently abled people. An installation of a lift is recommended to be considered. The canteen is in hygienic condition and caters well for both students and patients who visit the premises for treatments. Steps could however, be taken to enhance the appearance further.

Section 8. Summary

The Faculty of Dental Sciences, University of Peradeniya, Sri Lanka currently offers the Bachelor of Dental Surgery study Programme in compliance with SLQF guidelines (Level 6). The existing administrative structure of the faculty enables the effective implementation of its core functions. The IQAC, in collaboration with SDC and CGU, organizes workshops/ training regarding the use of learning resources such as ICT, data analysis, career development, soft skills and personality development. Synchronizing of activities conducted by faculty and CGU appears minimal and needs careful implementation.

The BDS curriculum is revised once in every five years incorporating latest developments in every subject discipline to cater not only national, but also global demand. A participatory approach has been adopted in curriculum development and design including subject lecturers and relevant academic/ industry experts to an extent addressing needy areas. Effectiveness of teaching and learning strategies are evaluated through students' feedback and peer evaluation forms yet the implementation, and monitoring process need to be improved.

The capacity of the academic staff is excellent, with a high number of PhD holders and Professors. Newly recruited staff members are encouraged to follow the CTHE programme, yet some gray areas were also observed. Not all young staff members were guided/made aware of the need to obtain their qualifications in a timely manner. Allocation of work for staff is fair, transparent and equitable yet workload is high due to unfilled cadre positions.

Diverse student-centred teaching and learning strategies are incorporated in each course module to encourage students' engagement and collaborative learning. The research component is incorporated in the curriculum to support students' ability in applying knowledge and skills in their career in future. In addition, students are provided an opportunity to obtain exposure to the world of work through internship in new curriculum.

Innovative and healthy practices play a pivotal role in teaching and learning strategies. Lecturers utilize ICT-based platforms such as LMS; however, facilities such as Wi-Fi for students to access LMS regularly is lacking. English is incorporated within the orientation, yet incorporation of more subject matter is needed. In order to improve the skill levels, consideration could be done to shifting English from non-credit courses to credit courses. More importantly, a healthy working, teaching and learning environment is provided for academic, administrative, non-academic staff as well as for students.

An orientation programme for newly enrolled students which includes essential information on the faculty history and induction to departments, aims and objectives and contents of courses of the study programmes, examination by-laws etc. is conducted. Feedback from students on the orientation program was regularly taken, although no zero-ragging policy is implemented. Mentors are allocated for students to guide and empower them but

interactions are not continued throughout the study period. There is a need to establish a welfare system to provide counseling service with strict maintenance of confidentiality.

The faculty adopts well defined marking schemes and practical training evaluation guidelines. Second examiners are appointed in a formal manner, but the second marking process is not acceptable. Only few of the moderators and second examiners reports are maintained. The confidentiality of the record room and the maintenance of past answer scripts need to be improved. Faculty does not provide fallback options for students.

Collaborative research is encouraged by the faculty and an annual conference to present students' research findings is organized. Some of the findings have been published in locally and internationally reputed journals and received national and international awards by a few academic members. The research culture within the study program needs to be strengthened. There is no policy on differently abled students and necessary facilities for such individuals need to be included in the future.

Annex 1. Schedule for the site visit

Insert scanned copy of programme

Annex 2. Additional documents requested before site visit

No	Remarks
1.10	Records related to access to data, log details, backups etc
1.14	Information on other faculty performance assessments, if any., Performance appraisal at departmental level
1.18	Evidence for fall back options
1.19	evidence for remedial actions taken student feedback
1.25	Policies / Procedures for handling students with disabilities
1.27	As ragging still continuing even with zero ragging policy actions taken to minimize it, if there is any Statistics on ragging related problems of each year among new students admitted to the faculty Documents to show preventive actions / strategies taken up by the faculty Evidence to show that they have implemented these measures
2.1	Evidence to prove all approved cadre is filled or taken action for that
2.3	Evidence to show the academic staff undergo CTHE program
2.4	Records of training of technical staff, if any
2.11	Need students feedback on softskill development program and records on the participation
3.6	Evidence for Fall back options if available
3.7	Details on when GP mapping process commenced
3.11	Details on at what period in their studies are they being implemented.
3.18	How internship is embedded with course? Is there any evidence?
3.19	Is student feed back is considered in program development? If so any available evidence Evidence to show integration of these aspects into courses, how it is done etc Fall back option for students who are unable to complete the course. Documents with intended learning outcomes (ILO) of the modalities of teaching such as lectures, practical on skills etc
3.21	Documents related to time periods where revisions to courses have been done
3.23	Any other information used to assist in continuous improvement of the programme
	Is there any preparations to introduce different exit levels even the drop out rates are very low?
3.24	Policies / Procedures for handling students with disabilities
4.14	Peer evaluation and student feed back on teaching
4.18	IQA policy, IQA minutes and if there is any, previous reports on to see the feedback and suggesions
4.19	Course evaluation by peers
5.6	Evidence for having research component within the course
5.14	Information on SCL methods used, monitoring etc
5.16	Evidence to show that the remedial actions for student feed back is monitored /regulated by IQAU

6.9	Policies / Procedures for handling students with disabilities
6.21	Details on the fall back options introduced.
6.22	Evidence to show all passed out graduates are employed
7.9	Procedures if any, for handling conflict of interest
7.12	Details on the implementation of 2nd marking, when, process etc
7.14	Is the final grade sheet is issued to students by the time of graduation or the degree certificate is provided to students at convocation?
8.10	Details on planned credit transfer programme
8.11	Is there any extracurricular activities other than subject oriented ones for staff and students?