



**PROGRAM REVIEW REPORT**  
**MBBS degree program**  
**Faculty of Medical Sciences**  
**University of Sri Jayewardenepura**  
**3<sup>rd</sup> to 6<sup>th</sup> September 2019**



**Review Panel:**      **Prof. R Pallegama**  
                              **Dr. U Mampitiya**  
                              **Prof. S Sri Ranganathan**  
                              **Prof. MLMC Dissanayake**

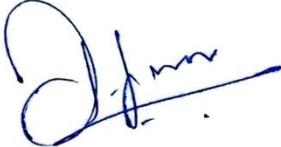
**The Quality Assurance Council**  
**University Grants Commission, Sri Lanka**

University: University of Sri Jayewardenepura

Faculty: Faculty of Medical Sciences

Program: MBBS

Review Panel:

Name	Signature
Prof. R. W. Pallegama	
DR. M. A. U. Mambitun	
Prof. MLM Chandrika Dissanayake	
PROFESSOR SHALINI SRI RANGANATHAN	

Date: 17/10/2019

## **Content Page**

### **Review Report on MBBS Program of the Faculty of Medical Sciences of the University of Sri Jaywardenepura**

Section 1 - Introduction to the program	1
Section 2 -Observations on the Self - Evaluation Report (SER)	4
Section 3 - Description of the Review Process	6
Section 4 - Faculty's Approach to Quality and Standards	10
Section 5 - Judgment on the eight criteria	11
Criteria 1: Program Management	12
Criteria 2: Human and Physical Resources	13
Criteria 3: Program Design and Development	13
Criteria 4: Course/ Module Design and Development	14
Criteria 5: Teaching and Learning	15
Criteria 6: Learning Environment, Student Support and Progression	16
Criteria 7: Student Assessment and Awards	17
Criteria 8: Innovative and Healthy Practices	18
Section 6 - Grading of Overall Performance of the Program	20
Section 7 - Commendations and Recommendations	21
Section 8 – Summary	23
Appendices	25

## **Section 1 - Introduction to the program**

The Faculty of Medical Sciences (FMS) of the University of Sri Jayewardenepura (USJP) has been established in 1993 as the sixth medical faculty in the country and currently is one of the ten faculties of the University. The Faculty of Medical Sciences offers five undergraduate study programs: Bachelor of Medicine and Bachelor of Surgery (MBBS) program and BSc Honours programmes in Human Biology (HB), Pharmacy, Nursing and Medical Laboratory Sciences through 16 academic departments of the Faculty. All departments contribute to the delivery of the MBBS program and further this program is heavily contributed by the extended faculty serving in the Colombo South Teaching Hospital (CSTH), Sri Jayewardenepura General Hospital (SJGH) and Base Hospital Homagama (BHH) which serve as the main teaching hospitals for the clinical training component of the MBBS study program. Out of these hospitals, CSTH and SJGH are major tertiary care centres with referrals from different parts of the country and are with adequate human resources with expertise in subjects relevant for undergraduate teaching and are equipped with adequate physical facilities. The Faculty enrolls students from all parts of the country; however, a large majority of present student generation seems to be from the Western Province based on the Z-score and the merit order considered in the selection process. A profile of students enrolled and available in the study program and numbers graduated within the last five years are illustrated in Tables 1.1-1.3.

The Faculty has recently received a major improvement in physical resources and has moved to a new building complex with adequate space for its academic and administrative functions. The addition of the Family Practice Center (FPC) and the newer academic Department of Family Medicine (the Department of Family Medicine, DFM) as the first of such kind in the country which is intended for training family physicians are noteworthy innovative developments of the Faculty. Apart from academic departments, the Faculty has an Information Technology Unit, a Clinical Skills Laboratory, Language and Communication Skills Unit, and an animal house to facilitate, teaching-learning and research activities. In addition to three major hospitals as training centres, the Faculty uses Apeksha Hospital Maharagama, National Hospital of Sri Lanka (NHSL), Lady Ridgeway Hospital (LRH) and The National Institute of Mental Health Angoda in order to expose its undergraduate students to other sub-specialties in medical sciences. A training on rural and community-oriented health is added through the Community Medicine programme conducted at the Boralesgamuwa MOH office and with a community based medical learning (CBML) program by sending students on residential training in rural areas of the country.

However, the reviewers feel that the curriculum should align more with the Sri Lanka Qualification Framework (SLQF) defining all qualification descriptors and mapping the

characteristics of the program against level descriptors of SLQF. It is highly recommended that the Faculty maps and constructively aligns the graduate profile, program ILOs, course/module ILOs, teaching and learning strategies and assessment strategies in an OBE model having a program structure with fully fledged all-inclusive courses with clear and explicit specifications at all five levels of the study program.

In 2004, the Faculty has revised its MBBS curriculum from a traditional subject-based one to a human system-based curriculum with horizontal and vertical integrations. Gradually from 2014 and 2016, this has been further revised to a hybrid system that include a human-body-system/function-based delivery in theory and some skills teaching and conventional subject-based assessment. Imparting clinical competencies predominantly happens in hospitals under extended staff (Consultants attached to the Ministry of Health serving in those hospitals) in 3rd and 4th years and under academic staff members attached to clinical departments of the Faculty assisted by hospital staff in the 5th year.

During the site visit, the review team learned that the SER is written with respect to the currently practiced curriculum of the study programme that was introduced in 2014 and observed that it has not yet completed at least one cycle or graduated at least one batch of students as required for a Programme Review.

**Table 1.1. Number of students in the Faculty at present- breakdown in years:**

Entrance Year	Academic Year	Number of Students
2017/2018	5 <sup>th</sup> Year	161
2016/2017	4 <sup>th</sup> Year	160
2015/2016	3 <sup>rd</sup> Year	150
2014/2015	2 <sup>nd</sup> Year	150
2013/2014	1 <sup>st</sup> Year	150

By 6<sup>th</sup> September

**Table 1.2. Maximum number of students enrolled in the last four years:**

Academic Year	Number of Students
2017/2018	161
2016/2017	160
2015/2016	150
2014/2015	150
2013/2014	150

**Table 1.3. Numbers graduated from the programme over the past five years:**

Academic Year	Number of Students
2011/2012	147
2010/2011	153
2009/2010	152
2008/2009	153
2007/2008	155

The faculty has experienced a negligible dropout rate in the past few years; however, the Faculty has a very ambitious fallback option of the BSc Honours programmes in Human Biology for such students and is a fact that has to be highly commended. SLQF requires all level 6 undergraduate programs to identify those as *honours* programs and provide an opportunity to identify sub-specialities within the programs and indicate it in the name of the degree. However, the MBBS program of the FMS of USJP, as in almost all other MBBS programs in the country, does not name it as an honours level program in the name (as MBBS honours) although it is implied as an honours program. At the same time, the Faculty claims the MBBS program is at SLQF level 7 although it was not convincingly illustrated with evidence by mapping characteristics of the study program to qualification descriptors and level descriptors of SLQF level 7.

The profile of the academic staff appears to be adequate with a considerable number of cadres being available in the Faculty to teach pre and para clinical sciences in first 4 years. Thirty-one of the academic staff members are associate professors or at a category above. The program is supported by a large number of extended faculty who are serving in the above hospitals at an honorary capacity and are consultants or post-graduate trainees of the Ministry of Health. Their academic input towards clinical training of undergraduate students is not under strict/ direct control of the Faculty but achieved to a certain degree by organizing some meetings with them and through student log-books.

With the new development in infrastructure, the students appear to enjoy adequate learning and support facilities in the faculty premises. In addition, the students of the MBBS program also enjoy the common facilities of the university such as sports, IT and library facilities. The students of the MBBS program also get engaged in common student activities, competitions and functions of the University. Such activities appear to be well facilitated by the higher administration of the University at large. However, while understanding the constrained space availability at hospitals, an organized mechanism for closer monitoring and an engagement by the Faculty with a systematized program would enhance the quality of their learning experience in hospitals while the Faculty maintaining the full academic control of the study programme.

## Section 2 – Observations on the Self - Evaluation Report (SER)

The SER has been compiled by a team of academic staff members with each standard being assigned to a team comprising academic, non-academic and demonstrators. Then a three-member committee led by the Dean has finalised the report. The incumbent Dean had been the overall coordinator. Contribution of the sub-committees and the report writing committee have been indicated in the report under the SER preparation process. However, during the site-visit and the document review, the review team identified some gaps such as unavailability of evidence listed in the SER and lack of adequate evidence for internalisation. On many occasions, the standards, claims and evidence documents did not match.

The Review Team was unable to count the number of words in the SER since it was not stated and as the softcopy of document is given in PDF format. During the site visit, upon inquiry, we were informed that the word count is 14623, but the Team was unable to confirm its accuracy. The MBBS program being a 5-year study program, the QAC requirement is to have a maximum of 16000 words in the SER and therefore it can be accepted as within limit.

The SER included a well-written introduction which gave a bird's-eye view of the study programme to the reviewers. Even though the vision of the Faculty was stated, the alignment of it with the vision of the University was not shown in the SER. The introduction included details such as graduate profile, administrative structure, academic structure, structure of study programme, description of student enrolment and available services for both academic and student support. However, a detailed blueprint linking the graduate profile and the academic programme was not available as evidence or as an annexure to the SER. In addition, details of a participatory process in developing the graduate profile had not been provided. Similarly, evidence for internalisation of some of the practices described in the introduction was not convincingly provided.

The Manual for Review of Undergraduate Study Programmes defines a Programme of Study as a stand-alone approved curriculum followed by a student, which leads to the award of a degree/qualification. Further, it states that a Programme Review is applicable to all undergraduate degree programmes which have completed at least one cycle or graduated at least one batch of students. Thus the SER should have clearly indicated the structure of the study programme with the volume of learning required for each module and other associated components, and the effective academic year of the currently practiced curriculum. However, both information was not available in the SER and the reviewers had to wait till the site visit to get these clarified.

The SWOT analysis presented in the SER appears to have realistic deficiencies such as self-perceived strengths and missing some opportunities. However, it was evident that the Faculty

has taken some efforts in analysing the SWOT. Introduction also included major changes since the last programme review and impact and recommendations suggested at the previous programme review and actions taken. However, an inclusive approach was lacking in the programme revision as well as for the actions taken after the last programme review.

Large number of abbreviations had been used in SER, most probably to save words. A list of abbreviations was also available; however, some abbreviations were missing in the list. Some of the claims in SER had to be assumed that they are internalised considering the nature of the programme, though supportive documentary evidence was lacking. Illustration of the structure of the programme was not accurately representative of the actual study program or the real-life experience of students: an idea could not be obtained in relation to volumes of learning in different modules/levels as it was not numerically presented and as the cells were not proportionate to real volumes of learning, and the assessment structure was not categorically represented. The reviewers had to wait for the site-visit and several meetings in the process to fully comprehend the nature of the program structure that the students of the Faculty virtually undergo. The student enrolments of male and female in the study Programme was incorrectly given as a ratio in the Table 2.

## **Section 3 - Description of the Review Process**

### **3.1 Review Panel**

The program review (PR) panel was appointed by the University Grants Commission (UGC) in July 2019, and consisted of four members: Prof. Ranjith W. Pallegama, (Chairperson, Faculty of Dental Sciences, University of Peradeniya), Prof. Shalini Sri Ranganathan (Faculty of Medicine, University of Colombo), Dr. Upali Mampitiya (Faculty of Natural Sciences, Open University of Sri Lanka) and Prof. MLM Chandrika Dissanayake (Faculty of Agricultural Sciences, Sabaragamuwa University of Sri Lanka).

### **3.2 Pre-Site Visit Evaluation**

Self-Evaluation Report (SER) prepared by the Faculty of Medical Sciences of the University of Sri Jayewardenepura was handed over to the individual members of the Review Team one month before the pre-site visit meeting and that allowed ample time for the team members to read it and do the desk review before the site visit. The Review Team perused the SER and individual assessments were reported to the QAC (Quality Assurance Council) of UGC after a thorough desk evaluation of the SER. Members of the Review Team met at the pre-visit workshop held on 2nd of August 2019, at the Postgraduate Institute of Management in Colombo. After having scrutinised the documentary evidence presented in the SER, the Team identified further clarifications and additional evidence that are needed for careful inspection at the site visit before arriving at corresponding scores. A tentative schedule was prepared for a 4-day site visit by the Chairperson in collaboration with the Dean of the Faculty Medical sciences and the QAC of the UGC. The schedule of the site visit that took place at the FMS from 3rd to 6th September 2019 is provided in the Annexure I.

### **3.3 Site Visit Evaluation**

#### **3.3.1 Meetings**

The site visit of the programme review was commenced on Tuesday 3rd of September, 2019 with the arrival of the review team at the Internal Quality Assurance Unit (IQAU) of the University of Sri Jayewardenepura by 8.00 am. Review team was welcomed by Director/IQAU and she briefly explained the institutional approach and commitment to institutionalize a quality culture, organizational arrangement of internal quality assurance system of the University, the activities carried by the IQAU and reporting procedures. The PR Team met the Dean and SER preparation team of the Faculty. During presentation on “self-evaluation of the programme under review”, Dean of the FMS elaborated the academic and administrative

activities of the Faculty, SER writing process and key findings of self-evaluation. At the meeting with the Vice Chancellor, he emphasized the importance of research culture in higher education institutes and elaborated on the commitment made by the University towards quality enhancement via research culture within the University. At the meeting with the Heads of Departments they elaborated on the activities of departmental level quality enhancement and best practices adopted within those. The meeting with the senior academic staff members of the Faculty provided a better clarification to the structure of the study program. Review team appreciated the participation of a wide cross-section of academics ranging from senior professors to junior academics. At the meeting with the administrative staff of the Faculty the issues related to administrative matters were discussed and clarifications were sought. The technical officers and other support staff highlighted the lack of certain facilities and some difficulties encountered in providing required quality in services. The meeting with the probationary and temporary lectures was to understand the performances and quality practices at that level. The module coordinators explained scheduling process of timetables, arranging clinical rotation and maintaining students' log-books for skills training.

The Review Team also had an opportunity to meet the extended academic staff, who are medical consultants attached to the Colombo South Teaching Hospital, who provide clinical training for 3rd and 4th year students during their visit to the hospital. The discussion was very interesting and took the form of a brain storming session that proposed solutions to already identified gaps especially in the clinical training of 3rd and 4th academic years of the study program. Many conflicting and interesting ideas were exchanged during this discussion. The extended faculty representing a variety of disciplines including surgery, medicine, orthopaedics, paediatrics and anaesthesia expressed the satisfaction with the training programme, although concerns were raised regarding large student groups and the order of clinical rotations. During the same visit the reviewers had an opportunity to meet and have a fruitful discussion with a sample of final-year students who were following professorial appointments at the hospital (CSTH).

The review team had separate discussions with the Student Union representatives and a large group of students of the Faculty, that represented academic years from 1st to 4th. In general, students expressed their satisfaction with the conduct of academic activities conducted in the Faculty, (theory and skills in Phase I and II) to a larger extent. However, some students showed their concern over the presence of students of International Elective Programmes and students who come to prepare for Examination for Registration to Practise Medicine (ERPM), saying that the already limited clinical training opportunities available to them is hindered by having more students in the same clinical settings. And also, students felt that groups are too large for a good clinical exposure. The review team found that the students are well aware of assessments tools and procedures, and they are satisfied with the fairness and accuracy of assessments at

examinations. They also elaborated their involvement in social, cultural and sports events within the FMS and at the university level. A meeting with the alumni of the Faculty and a few stakeholders, mostly working/living at/closeto the Universitywas also held as per the schedule and provided information regarding pros and cons in the present learning experience of students in the study program.

During the meetings with the Student Counsellors, Director and Career Advisor of the Career Guidance Unit, and the Director SDC the issues related to student welfare and counselling and staff development training conducted in relation to curriculum development and revision and outcome based and student-cantered learning were discussed. A special unscheduled meeting was held with the Dean and the clinical coordinator on request for reviewers to understand the program structure together with the assessment structure and the nature of clinical training carried out in the hospitals which are under the Ministry of Health. All meetings helped the reviewers getclarifications on deficiencies/ambiguous areas in the SER.

### **3.3.2 Observations on facilities**

Review team had an opportunity to observe a few lecture sessions and gained some exposure to thenature of teaching and learning approaches adopted in the FMS. Visits to the library and computer unit gave an opportunity to witness the new developments in the library and the degree of students' engagements in ICT and e-learning process. During the visit to examination branch, Director Examination, who is a senior academic member, explained the confidential procedures followed in handling examination matters in the MBBS study program.

The University has a well-established Family Practice Centre in the FMS which has its own registered service recipients, academics who provide services, investigation facilities and a pharmacy. The centre has facilities to provide both undergraduate and postgraduate training, and the staff appears to be very enthusiastic and engaged with the centre. The creation of the Department of Family Medicine is an innovative development of the FMS of the USJP.

The review team visited the surgery and psychiatry professorial units in the Csth and had an opportunity to observe bed-side teaching/ learning, tutorial sessions and available facilities for students during the visit.

The review team also visitedlaboratories, library, IT laboratories, student canteens and one hostel and obtained some useful first-hand information on the resources available and functioning of respective facilities to enhance the effectiveness of teaching and learning process.

### **3.3.3 Observing Documentary Evidence**

Observing the documents as evidences was a strenuous task and a considerable time was allocated for this task as per the annexed site-visit schedule (Annexure I). The evidence documents relating to the claims in the SER were made available to the review team at the

spacious Faculty Board Room. The documents were filed under each standard and were arranged according to criteria. Each file was labelled under criterion and standard numbers. The review team cross-checked the provided and available evidence documents with the list of evidence provided under each standard in the SER in order to verify the claim made within each standard. The adjustments to the marks given previously at the desk review were made when and where necessary. Any issues arising from this activity were discussed at length by all Team members at the end of each day and consensus was reached.

The Faculty claims that it currently practices a hybrid curriculum with horizontally and vertically integrated modular delivery with a subject based assessment system. Also, the Faculty is of the view that the terminology they use to identify the basic units of taught component of the study programme as 'modules' is in line with the definition given in the PR Manual: "A module is a separate and coherent block of learning; a self-contained, formally structured unit of a programme of study".

However, the Review team found, especially in Criterion 4, that the design of these modules does not sufficiently address the requirements specified in a large number of standards in the PR Manual, in terms of the compliance with SLQF credit definition; the manner that contents, learning activities and assessment tasks are systematically aligned with the module outcomes; providing a description of assessment strategies accessible to students; module breaking down into different types of learning; and evaluation of modules at the end of each module.

The process of the site evaluation lasted for three and half days from 3rd to 6th September 2019; at the end of the fourth day, during the debriefing session, the Review Chair highlighted the findings by emphasising strengths and weaknesses of the MBBStudy program of the Faculty to the Dean and Heads of the Departments and other senior members of the academic staff who were present at the meeting.

Review team appreciates the cooperation, logistical support and the hospitality extended by the faculty staff and administration to the reviewers during the site visit.

Although the documents of evidence provided in support of the claims made in the SER were arranged separately under each standard, the reviewers feel that the compilation could have been better. Some commonly cited documents were difficult to track. There were many instances where the reviewers had to ask for the cited evidence documents which were not in the right file. In addition, certain cited evidence documents were not made available during the site-visit. In many instances, the duration of adoption of good practice as claimed in the SER could not be judged as only some evidence of isolated events/actions/adoptions were provided.

## **Section 4 - Faculty's Approach to Quality and Standards**

The University of Sri Jayewardenepura has a well-established Internal Quality Assurance Unit (IQAU) and Prof. Samanthi Senaratne, a senior academic staff member of the University as the Director on part-time basis from January 2014, steers the quality assurance (QA) activities of the University. The Director of the IQAU is supported by a Deputy Director. Each faculty of the University has established an Internal Quality Assurance Cell (IQAC) to guide and manage the quality assurance activities of faculties with a coordinator to lead each faculty under the IQAU. The Director of IQAU liaise with the University Grants Commission (UGC) through the Quality Assurance Council (QAC) as a member of the Standing Committee on Quality Assurance of the UGC.

The Vice-Chancellor of the University as a visionary leader appears to be very keen on quality enhancement of all aspects within the University and the initiatives taken at the level of the University are commendable. The Director of the IQAU has taken many steps to improve the quality of processes, practices and study programmes of the university under supervision of the Vice-Chancellor. IQAU has established by-laws, operating guidelines and a policy manual and 18 policies covering almost all aspects of the administrative and academic functions of the university.

Dr.R.B. Marasinghe has been appointed as the Coordinator of Internal Quality Assurance Cell (IQAC) of the Faculty of Medical Sciences, who is also the Head of the Department of Medical Education of the Faculty. The same department houses the IQAC as well. IQAC alone appears to have not brought a significant or noteworthy impact on the quality enhancement of the faculty administrative or academic functions. However, the Coordinator of the IQAC, being the Head of the Department of Medical Education, has got involved in activities such as curriculum development and revision and evaluation of program and the teaching-learning process in the Faculty. It is recommended that the Faculty strengthens the IQAC and makes sure that influences and guidance of IQAC reaches the departments, all academic and non-academic staff members and students as a whole so that the FMS of USJP stays at a leading position among the institutions that train medical personnel in the country. The IQAC should introduce QA policies and improve its functions to monitor module and program design and development, implementation and administration, and use the findings of such monitoring to improve the program structure, module content, delivery and assessment processes at a higher efficiency and effectiveness. The reviewers suggest that the Faculty takes more assertive measures to enhance the quality of all core-functions in managing and delivering the study program through standard operation procedures developed by IQAC.

## Section 5 - Judgment on the Eight Criteria

Judgment on compliance with the eight criteria of the Programme Review is based on the 156 standards listed in the manual. The standards are defined as “exactly how a task should be carried out or completed or what the level of attainment or performance or what the desired outputs and outcomes should be”. In the SER, the FMS was expected to describe the level of compliance with, and internalization of best practices and the degree of attainment of the corresponding ‘standards’ with supporting evidence.

The Review Team having first scrutinized the documentary evidence presented in the SER at the desk review, then continued the verification of evidence provided during the site visit. When allocating marks 0, 1, 2 or 3, the Review Panel first carefully studied the claim of the degree of internalization of best practices and level of achievements of standards stated in the SER with respect to each standard and then observed if the documentary evidence made available to support the claim was sufficient.

But the task of Review Panel was made difficult by some deficiencies in the SER; several standards were misunderstood by the SER writers and responded to them inaccurately, irrelevant evidence was provided in many instances, and evidence provided did not cover the 3 to 4-year period as required. During the site visit, Review Panel also found occasions that the SER has failed to cite relevant evidence even though they are available in the Faculty. Further, the Panel found it difficult to assess some standards since the SER provided scattered evidence without showing their alignment with that particular standard.

Table 5.1 illustrates the raw criterion-wise scores for the study programme based on the judgments made by the review panel

Criterion No.	Assessment Criteria	Raw Score
1	Programme Management	67/81
2	Human and Physical Resources	31/36
3	Programme Design and Development	60/72
4	Course/ Module Design and Development	27/57
5	Teaching and Learning	40/57
6	Learning Environment, Student Support and Progression	47/72
7	Student Assessment and Awards	33/51
8	Innovative and Healthy Practices	37/42

**Table 5.1**

Observations made by the Review team on the strengths and weaknesses of each criterion are stated below along with the recommendations for enhancement of quality in the study programmes.

### **Criteria 1: Program Management**

Among the 27 standards, 15 scored 3 indicating good adoption, 10 scored 2 indicating adequate adoption with a few issues and 2 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided. The study program achieved a raw criterion-wise score of 67 and hence an actual criterion-wise score of 124 out of 150.

#### **Strengths**

- Adhering to an annual academic calendar that enables the students to complete the study programme and graduate at the specified time.
- Distribution of a well compiled student handbook to all incoming students.
- Having an up to date website.
- University developing a policy document on academic work norms recently.
- Establishment of collaborative partnerships with foreign universities for academic and research cooperation.
- Establishment by the Faculty of an Internal Quality Assurance Cell (IQAC).

#### **Weaknesses**

- Not having evidence to support that the implementation and monitoring of Faculty's Action Plan have taken place.
- Not having student representation on student welfare committees.
- Not documenting the handling procedures of confidential permanent records of students.
- The Faculty ICT platform and applications are not linked to the university Management Information System (MIS).
- Not having a performance appraisal system prescribed by the University.
- Curriculum is not mapped with the SLQF qualifications descriptors and level descriptors.
- No TORs for academic mentors and student counsellors.
- Clinical group formation not being transparent to students.

#### **Recommendations**

- Inclusion of a regular agenda item in the Faculty Board meeting to monitor the implementation of the Faculty's Action Plan.
- Enhance the participatory approach by accommodating student representation on faculty student welfare committees.

- Strengthen the ICT platform and its applications of the Faculty by linking it to the University MIS and by developing the handling procedures of confidential permanent records of students.
- Prepare TORs for academic mentors (personal tutors) and student counsellors and make them available to stakeholders.

## **Criteria 2: Human and Physical Resources**

Among the 12 standards, 8 scored 3 indicating good adoption, 3 scored 2 indicating adequate adoption with a few issues and 1 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided. The study program achieved a raw criterion-wise score of 31 and hence an actual criterion-wise score of 86 out of 100.

### **Strengths**

- Having filled 87% of faculty staff cadre.
- Induction programme conducted by the SDC for all probationary lecturers as per UGC guidelines.
- Passing the English Language Competency Test (ELCT) is compulsory for graduation.

### **Weaknesses**

- Inadequate continuing professional development on OBE-SCL and curriculum development and revision.
- Not benchmarking ELCT with UTEL 6 level as claimed in the SER.

### **Recommendation**

- Take steps to upgrade the outdated laboratory equipment.
- Consider obtaining Institutional subscription for journals.

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

Among the 24 standards, 14 scored 3 indicating good adoption, 8 scored 2 indicating adequate adoption with a few issues and 2 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided. The study program achieved a raw criterion-wise score of 60 and hence an actual criterion-wise score of 125 out of 150.

### **Strengths**

- Having a strong support from the Ministry of Health to conduct the Clinical Training in Phases II& III of the study program in several hospitals.

- Taking periodic feedback from external stakeholders about the study programme.
- Availability of Module Books for Phase I and Phase II and Log Books for the Phase III.
- Recently introduced University Policy on Programme/Curricular Approval, Implementation, Monitoring, Review, and Discontinuation.
- Availability of a well-structured qualification as a fallback option.

#### **Weaknesses**

- Not showing the study programme conforms to the vision and mission of the University.
- Not having evidence of adopting and aligning with SLQF and SBS requirements.
- Alignment of module outcomes with the program outcomes is not developed.
- The flexibility in students' choices of modules is limited.
- A curriculum matrix showing that the modules at different phases are designed according to demands in the skills is not available.

#### **Recommendations**

- Prepare a comprehensive document showing how the study programme meets all the SLQF requirements.
- Develop a stronger academic collaboration between the Faculty of Medical Sciences and the Consultant Doctors who are involved in Clinical Training at Phases II of the study programme.

### **Criteria 4: Course/ Module Design and Development**

Among the 19 standards, 2 scored 3 indicating good adoption, 5 scored 2 indicating adequate adoption with a few issues, 11 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided and 1 scored 0 indicating inadequate adoption or irrelevant evidence being provided. The study program achieved a raw criterion-wise score of 27 and hence an actual criterion-wise score of 71 out of 150.

#### **Strength**

- Some modules have undergone periodic revisions to enhance the effectiveness of them.
- IQAU has recently developed some policies to strengthen the module design and development process in the University.

#### **Weaknesses**

- All-inclusive curriculum document that is both comprehensive and cohesive was not available.
- Sufficient evidence to show the regular involvement of external experts in designing and development of modules was not available.
- Evidence to support the claims made on alignment with SLQF is not satisfactory.

- University or Faculty approved standard formats, templates or guidelines for module/course design were not available.
- Evidence provided was not sufficient to show the constructive alignment within the modules.
- Course specifications do not follow the SLQF guidelines.
- No adequate mechanism to collect information, data or feedback in order to monitor and take actions on progress with respect to breadth, depth, rigor and balance of content in different modules in relation to the respective volumes of learning and allow incremental learning through advancing levels of the study program.
- Inadequate evidence to support the use of appropriate media and technology during design, development and delivery of modules.
- No evidence to support that the relevant members of the Faculty, specifically being trained in course design and development.
- Inadequate evidence on relevant staff (those who are responsible for design and development of modules) being aware of criteria against which course approval decisions are taken, or such criteria not being widely circulated
- IQAC involvement in the process of module design and development, and module approval processes has not been shown clearly.

#### **Recommendations**

- Design a Faculty/University approved template for taught modules and Clinical work that specifies the required volume of learning (broken down into different types of learning such as direct contact hours, self-learning time, assignments, assessments, laboratory studies, field studies, clinical work etc.,) and shows how the appropriate level descriptor requirements of SLQF are met.
- Introduce Faculty QA policies and strengthen IQAC functions to monitor module evaluation and to use the findings to improve the module content, delivery and assessment processes.

#### **Criteria 5: Teaching and Learning**

Among the 19 standards, 7 scored 3 indicating good adoption, 8 scored 2 indicating adequate adoption with a few issues, 3 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided and 1 scored 0 indicating inadequate adoption or irrelevant evidence being provided. The study program achieved a raw criterion-wise score of 40 and hence an actual criterion-wise score of 105 out of 150.

#### **Strengths:**

- Obtaining regular feedback on the effectiveness and quality of teaching from students over a considerable period of time.

- Availability of log - books for Clinical Training.
- Availability of Personal and Professional Development Stream
- Availability of resources of the Ministry of Health for training even though it was not highlighted in the SER.

#### **Weaknesses**

- Absence of appraisal system for Teaching & Learning in the Faculty.
- No evidence of integrating the academics' own research work into teaching.
- Duration of adoption could not be judged under many standards as evidence provided had not been for 3-4 year period
- Inadequate evidence to show the fairness in workload distribution among the staff.
- Inadequate evidence for constructive alignment, especially Phase II; Even for other phases reviewers had to struggle to understand the close alignment of, learning outcomes, content, teaching and learning strategies, and assessment.
- Absence of a mechanism to identify and reward champions of teaching excellence in the Faculty.
- Certain standards are misunderstood by the SER writers and irrelevant evidence are provided in many instances.

#### **Recommendations**

- Ensure via documentation that the module ILOs, teaching learning strategies and assessment strategies are methodically planned and are closely aligned with each other by incorporating all the SLQF requirements.
- Develop a mechanism to monitor and report to the Faculty Board on the teaching and learning process across each level of the study programme, including Clinical Training in Phases II& III.
- Introduce a mechanism to identify and reward excellence in teaching by the academic staff of the FMS.

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

Among the 24 standards, 10 scored 3 indicating good adoption, 5 scored 2 indicating adequate adoption with a few issues, 7 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided and 2 scored 0 indicating inadequate adoption or irrelevant evidence being provided. The study program achieved a raw criterion-wise score of 47 and hence an actual criterion-wise score of 65 out of 100.

#### **Strengths**

- Availability of a fallback option for the students who do not complete the MBBS study programme successfully.

- PPD stream for professional development and career guidance.
- Inherent advantage of MBBS study programme having a clinical training in the facilities of the Ministry of Health.
- Availability of indirect evidence such as the final year merit list that could replace tracer studies.

### **Weaknesses**

- Inadequate evidence on monitoring/evaluating student support system for further improvements.
- Students do not seem to have got actively engaged in to achieving the relevant ILOs in modules through IT related learning activities.
- Feedback that goes back to students in relation to their progress is not satisfactory.
- Faculty level attention on promoting GEE and deterring SGBV is not adequate.
- Student satisfaction surveys on support services is not conducted in a systematic manner.
- Inadequacy of monitoring, evaluating, analyzing and taking actions based on the available/collected information
- The evidence provided suggest that only the physical disabilities are considered and supported with respect to the needs of differently abled students.
- FMS does not have by-laws for student grievance redressal mechanism
- Certain standards are misunderstood by the SER writers and irrelevant evidence are provided in many instances.

### **Recommendations**

- Develop a formal mechanism to regularly and systematically collect information about student satisfaction with the support services and to use them for continuous improvement of the services
- Introduce a system to document the student performance in each module offered during the years first four years of the study programme and make them available to students along with the results of 1st Examination for MBBS (Bar Exam), 2nd Examination for MBBS Part 1, and 2nd Examination for MBBS Part 2.

### **Criteria 7: Student Assessment and Awards**

Among the 17 standards, 06 scored 3 indicating good adoption, 5 scored 2 indicating adequate adoption with a few issues, 5 scored 1 indicating barely adequate adoption with major issues either in the degree of adoption or the strength of evidence provided and 1 scored 0 indicating inadequate adoption or irrelevant evidence being provided. The study program achieved a raw criterion-wise score of 33 and hence an actual criterion-wise score of 97 out of 150.

### **Strength**

- Assessment strategies have been appropriately revised periodically based on the expectations of the FMS.
- Assessment strategies are specified to a certain extent in module books.
- Releasing the examination results in a timely manner.
- The Faculty ensures the weightage relating to different components of assessments are specified in the handbook to a certain level in terms of (based on) the Faculty's own definitions.
- Staff of the FMS involved in academic assessment work are competent, including the extended staff.
- Using marking schemes in evaluating student assessment.
- Graduation requirements are ensured in the degree certification process.
- Availability of updated examination by-laws and regulations for students.
- Holding pre-results and results board within the stipulated period

### **Weaknesses**

- It was difficult to judge the claims made on several standards due to either some scattered evidence provided or not showing the alignment with the evidence provided.
- Assessment strategy is not an integral part of the program design with clear relationship with assessment task and ILOs
- Evidence of assessment strategy is being aligned to specified qualification and level descriptors of the SLQF and SBS were not shown.
- Not having Faculty guidelines in conducting examinations and appointing examiners. Even though, there is a recent University policy (2018) on this matter, no evidence found to support the adoption of the policy by the FMS.
- There was no clear evidence to show that the reports from external examiners are considered by the examination board in finalizing the results.
- Not issuing a complete transcript indicating the modules followed and grades obtained by students.

### **Recommendations**

- Introduce a complete transcript indicating the modules followed, their relative weightage, grades obtained for modules and class (if any) achieved and make it available to all students at graduation.

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

Among the 14 standards, 10 scored 3 indicating good adoption, 3 scored 2 indicating adequate adoption with a few issues and 1 scored 1 indicating barely adequate adoption with major

issues either in the degree of adoption or the strength of evidence provided. The study program achieved a raw criterion-wise score of 37 and hence an actual criterion-wise score of 44 out of 50.

### **Strengths**

- The Faculty has established and operates LMS to facilitate multimode teaching delivery and learning.
- Active contribution of FMS academics in the University Research Council.
- The recognition received by the academic staff of FMS at both the University and national levels is impressive.
- FMS having a properly structured fallback option.

### **Weaknesses**

- No evidence of academic staff using Open Educational Resources (OER) to supplement teaching and learning or Faculty Board having an approved policy and guidelines on the use OER.
- Absence of a University approved policy regarding credit transfer.
- Not having external examiners for taught modules of the FMS.

### **Recommendation**

- Develop guidelines relating to the undergraduate research project.
- Develop a policy on the use of OER and encourage academic staff to use OER to supplement teaching and learning.

## Section 6 - Grading of Overall Performance of the Program

Based on the guidelines given in Chapter 3, Table 3.4 of Program Review Manual, grading of overall performance of the study Programme is as follows:

No	Assessment Criteria	Weight	Actual criterion-wise score	Weighted Minimum Score (WMS)	Above WMS (Y/N)
1	Programme Management	150	124	75	Yes
2	Human and Physical Resources	100	86	50	Yes
3	Programme Design and Development	150	125	75	Yes
4	Course/ Module Design and Development	150	71	75	No
5	Teaching and Learning	150	105	75	Yes
6	Learning Environment, Student Support and Progression	100	65	50	Yes
7	Student Assessment and Awards	150	97	75	Yes
8	Innovative and Healthy Practices	50	44	25	Yes
Total Score		<b>1000</b>	<b>717</b>		
Total Score (%)			<b>72</b>		
Grade		<b>B</b>			
Performance descriptor		<i>Good</i>			
Interpretation of descriptor		<i>Satisfactory level of accomplishment of quality expected of a programme of study; requires improvement in a few aspects</i>			

**Table 6.1**

## Section 7 - Commendations and Recommendations

Since Section 5 details the strengths, weaknesses and recommendations at great length, in order to avoid unnecessary repetition, we list below what we consider are the most important commendations and recommendations.

### Commendations

- Having several teaching hospitals affiliated to the FMS for undergraduate clinical training.
- Recognition of the MBBS degree by the General Medical Council (GMC) of United Kingdom as claimed in the SER.
- Availability of good infrastructure facilities at the FMS.
- Availability of University funding for undergraduate research.
- The opportunity that the students are having to mingle with international students who are coming for short term electives at the FMS.
- Accessibility to a properly structured fallback option (BSc Honours programmes in Human Biology) for those students who are unable to complete MBBS successfully.
- Holding Pre-results and results boards within six weeks of completing the exams.

### Recommendations

- Inclusion of a regular agenda item in the Faculty Board meeting to monitor the implementation of the Faculty's Action Plan.
- Introduce continuing professional development workshops for the Faculty staff on OBE-SCL, blended learning and curriculum design and development.
- Initiate a mechanism to develop a stronger academic collaboration between the FMS and the Consultants and staff of the Ministry of Health who are involved in Clinical Training at Phases II & III of the study programme.
- Develop a mechanism to calculate the notional learning hours for each of the taught modules and clinical work by taking into account the different types of learning such as direct contact hours, self-learning time, assignments, assessments, laboratory studies, field studies, clinical work etc.
- Ensure via documentation that the Graduate Profile of the study programme is mapped with the attributes of qualification holders listed in the SLQF, and the module ILOs are developed by taking into account the twelve specific learning outcomes listed under the respective level descriptor in the SLQF.

- Introduce a complete transcript indicating the modules followed, their relative weightages, grades obtained and class (if any) achieved and make it available to all students at graduation.
- The reviewers suggest that the Faculty takes more assertive measures to enhance the quality of all core-functions in managing and delivering the study program through standard operation procedures developed by IQAC.

## Section 8 - Summary

The site visit for Program Review of the Bachelor of Medicine and Bachelor of Surgery study program of the Faculty of Medical Sciences of the University of Sri Jayewardenepura, Sri Lanka was held from 3rd to 6th September 2019. A four-member review panel (Prof Ranjith W. Pallegama of the University of Peradeniya as the Chairperson, Dr.U. Mampitiya of the Open University of Sri Lanka, Prof S Sri Ranganathan of the University of Colombo and Prof MLMC Dissanayake of the Sabaragamuwa University of Sri Lanka) appointed by the UGC in July 2019 conducted the review. The pre-review workshop was held on 4th July 2019. The members of the review panel individually examined the SER during desk evaluation. The review panel had a pre-site visit meeting organized by the UGC on 2nd August 2019 at the Post-Graduate Institute of Management, Colombo. The panel discussed and agreed on a desk evaluation and agreed on the agenda for the site-evaluation (Annexure 1). During the site evaluation, the panel conducted a number of meetings, inspected many physical facilities and examined all documents provided in support of the SER by the Faculty of Medical Sciences. Evaluation was completely based on the criteria, standards and definitions provided in the Program Review Manual published by the QAC of the UGC. The Faculty of Medical Sciences of the University of Sri Jayewardenepura, having submitted their SER for review under the same review manual, is considered to have accepted those guidelines and definitions provided in the said PR review manual.

A participatory approach was quite evident in the preparation of the SER and for the preparation of the site visit. Academic and non-academic staff well guided by the Director of the Faculty Internal Quality Assurance Cell (IQAC) and the Dean of the Faculty appeared to have worked harder in this regard. Reviewers highly appreciate and commend the support extended by the Faculty staff members including the Dean, Director IQAC, the pre-intern officer who was at help and other staff during the site visit.

The IQAU of the University appeared well prepared. The IQAC is manned by a Medical Education expert and he appears to have begun developing the IQAC gradually. However, the IQAC has not yet been able to guide the faculty development to a significant level. In future, IQAC is expected to take firm measures towards ensuring quality and preparing the faculty and curriculum aligning with SLQF better. However, the commitment of the Faculty for further development must be appreciated.

The reviewers, following an exhaustive review task throughout three-and a half-day agreed on the final score that was calculated based on the prescribed formula of the Program Review Manual. The study program achieves a percentage score of 72 and does not achieve the Weighted Minimum Score of 75 for the criterion 4, and hence achieves a grade of B.

The reviewers would like to conclude that the overall experience of students appears to be relatively good. However, the Faculty may concentrate on developing fully fledged all-inclusive courses/modules as defined in the Program Review Manual and SLQF, align the MBBS program better with the SLQF and structure and formalize clinical training of students in line with the same definitions in addition to implementing other recommendations mentioned above.

## Appendix 1: Agenda of the Site Visit

**Program Review - Bachelor of Medicine and Bachelor of Surgery,**

**Faculty of Medical Sciences, University of Sri Jayewardenepura**

**03<sup>rd</sup> – 06<sup>th</sup> September 2019**

Time	Day 1: Tuesday 3rd September 2019	
8.00 am	Meeting with Director/IQAU and Coordinator and Members of FQAC	
8.30 am	Meeting with Dean	
9.00 am	Meeting with VC	
9.30 am	Presentation on <b>Self Evaluation of the Programme under Review:</b> Dean & SER preparation team	
10.30 am	Tea break	
11.00 am	Meeting with Heads of Departments	
11.45 am	Room 1: Discussion with academic staff SL II and above (excluding HoDs and SER preparation team) RP & CD	Room 2: Discussion with administrative officers (SAR/AR & SAB/AB) SR & UM
12.15 pm	Room 1: Discussion with T.O.s RP & CD	Room 2: Discussion with probationary and temporary lecturers SR & UM
1.00 pm	Lunch break	
1.30 pm	Observing teaching learning activities in the faculty	
3.00 pm	Scrutinizing documentary evidence	
	Return to Hotel	

Time	Day 2: Wednesday 4th September 2019	
8.00 am	Scrutinizing documentary evidence	
11.30 am	Observing physical resources/facilities within the Faculty	
1.00 pm	Lunch break	
1.30 pm	Open hour for any stakeholder to meet the Review Team	
2.30 pm	Room 1: Discussion with student counsellors and academic advisers RP & CD	Room 2: Meeting with Directors of Centres / Units / Cells of the Faculty SR & UM
3.00 pm	Room 1: Discussion with Alumni and External Stakeholders (including a sample of immediate past graduates) RP & CD	Room 2: Discussion with Stenographers and other support staff SR & UM
3.30 pm	Tea break	
3.45 pm	Discussion with the students' union	
4.15 pm	Discussion with students (excluding students' union): A sample of students from all batches	
5.00 pm	Scrutinizing documentary evidence	
	Return to Hotel	

Time	Day 3: Thursday 5th September 2019	
8.00 am	Observation of Clinical Teaching at (CSTH & BHH)	
9.00 am	Discussion with extended staff (Consultants and staff in hospitals involved in teaching)	
10.00 am	Meeting with final year students	
10.30 am	Tea break	
11.00 am	Observing teaching learning activities (in the Faculty)	
11.30 am	Discussion with Directors of University level centres/units (CGU,SDC,ELTU,Sports)	
12.30 pm	Discussion with Dean, Phase III coordinator and clinical coordinator	
1.00 pm	Lunch break	
1.30 pm	Observing common facilities - Hostel, Sports, Physical Education, SDC, GEEC	
3.00 pm	Scrutinizing documentary evidence	

	Return to Hotel
--	-----------------

<b>Time</b>	<b>Day 4: Friday 6th September 2019</b>
8.00 am	Scrutinizing documentary evidence
9.30 am	Meeting with Faculty Committees (Chairpersons and secretaries)
10.30 am	Tea break
10.45 am	Preparing key findings report for debriefing
12.30 pm	Debriefing session with the senior management of programme under review
1.30 pm	Lunch break
2.30 pm	Departure

## Appendix 2: Attendance at Meetings

Included in the pdf file