

NATIONAL Accreditation Frame Work

FOR MEDICAL AND DENTAL SCHOOLS INPAKISTAN – 2019



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This document describes the different components of the accreditation framework for medical and dental colleges in Pakistan.

This document has various sections that not only help evaluate medical and dental colleges in Pakistan but also help the medical and dental colleges to improve the standard of education.

This accreditation framework reproduces the standards adopted and approved by Pakistan Medical and Dental Council (PM&DC), developed in line with the standards prescribed by World Federation of Medical Education (WFME).

This framework also highlights how the results of evaluation impact the functioning of medical and dental colleges in Pakistan. Evaluation tools shall be developed by the Evaluation Committee such that they ensure objectivity and transparency and are in line with the requirements of the standards.



Standards

Pakistan Standards for Accreditation of Medical and Dental Colleges

- Standard 1: Mission Statement
- Standard 2: Outcomes
- Standard 3: Institutional Autonomy and Academic Freedom
- Standard 4: Curricular Organisation
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Standard 1: Mission Statement

Essential Standards

A medical/dental college must have a written institutional mission statement, which: **1.1.** is aligned with the vision of the university with which it is affiliated or of which it is a constituent institution

1.2. demonstrates a clear institutional commitment to social accountability, achievement of competencies and addresses the health needs of Pakistan

1.3. is developed with stakeholders' participation (for example faculty members, staff, students, university, health ministry officials)

1.4. is known to all stakeholders

Quality Standards

A medical/dental college should have a written institutional mission statement, which: **1.1s** Aims at professional development and a commitment to life-long learning

Annotations

Mission

DEFINITION: Mission Statement: A characteristics of an ideal mission statement: Mission statement must be:

1. Brief

- 2. Focused (towards the main targets of the institution)
- 3. Realistic

SAMPLE:

ABC medical college's mission is to produce competent, research oriented doctors who can serve the local and global communities equally adeptly and professionally.

Social Accountability

Social accountability of healthcare institutions is their responsibility towards the community and their graduates. It is the responsibility of the medical/dental colleges and universities to meet the health care needs of the country through provision of quality education, research and service delivery. This service delivery is not restricted to the tertiary care teaching hospital but these institutions should take ownership of defined populations (especially marginalized populations) and improve the health status of those communities.



Standard 2: Outcomes

Essential Standards

The medical/dental college must develop outcomes that:
2.1 are in congruence with the mission of the institution
2.2 incorporate the knowledge, skills and professional behaviours that the students will demonstrate upon graduation
2.3 are contextually appropriate for health care delivery in Pakistan.
2.4 have been developed in consultation with all stakeholders
2.5 are known to all stakeholders
2.6 are reviewed and revised in the light of program evaluation

Quality Standards

The medical/dental college should:

2.1s define the outcomes of the program which differentiates the institution from other similar institutions

Annotation

Outcomes

- 1. Outcomes are statements of intention, just like objectives.
- 2. Outcomes provide a clear idea of what the learners are expected to do (perform) at the end of the entire learning period (e.g. at the end of the MBBS/ BDS program). Hence, they provide an overview (and not details) of what the learner is expected to do upon completion of the education program in which he/ she is enrolled.
- 3. The number of outcomes is far less than the number of objectives. Usually outcomes range between 5 to 7 for an extended program.

EXAMPLE: By the end of the (MBBS/ BDS) program, graduates will be able to:

- Manage common, non-critical conditions independently
- Assist in the management of critically ill patients
- Demonstrate professional, ethical and culturally-appropriate behaviour
- Advocate health promotion and disease prevention
- Work effectively in a health care team
- Demonstrate clear and efficient written and verbal communication abilities

Annotation for 2.2

Professionalism refers to ethical practices and behaviours as defined by the professions including but not restricted to honesty, integrity, fairness and demeanour befitting a medical/dental graduate.

Annotation for 2.1s

Outcomes are a set of statements which summarise the expected results at the end of the educational program (MBBS/ BDS). Every institution must have a reason for existence. This reason should be its unique feature which sets it apart from other institutions. An institution may wish to lay emphasis on training its graduates within the community, or on providing state-of-the-art high technology training via skills labs or aims at producing doctors' adept at practical research. Such unique features must be clear in the outcomes; such statements must be present which help provide an identity to the program and to the institution.



Standard 3: Institutional Autonomy and Academic Freedom

Essential Standards

The medical/dental college must have institutional autonomy to:

3.1 formulate and implement policies to ensure smooth execution of its educational outcomes

3.2 develop a system for ensuring that the policies are implemented

3.3 allocate and appropriately use resources for implementation of the curriculum

Quality Standards

The medical/dental college should have institutional autonomy to:

3.1s select, design and implement its curriculum that is based on best evidence, medical/dental education and meets the standards set by PM&DC.

Standard 4: Curricular Organisation

Essential Standards

The medical/dental college must:

4.1 have a curriculum aligned with the university vision, institutional mission and local and national needs, for contextual relevance

4.2 clearly document the sequence of courses along with their rationale for the sequence **4.3** develop and implement a curriculum which meets the standards of PM&DC

4.4 develop and implement a curriculum which is outcome-based, patient-centred, community-relevant, and promotes health and prevents diseases

4.5 encourage students to link concepts of basic and clinical disciplines

4.6 ensure that clinical sciences get at least half of the time of the undergraduate program

4.7 ensure systematic and organized learning in clinical settings

Quality Standards

The medical/dental college should:

4.1s incorporate a horizontally and vertically integrated curriculum.

4.2s incorporate innovative educational strategies such as self-directed learning, independent learning, inter-professional learning, use of e-technology and simulations.

4.3s have student-selected optional components (electives) as part of the curriculum

4.4s implement a curriculum which also incorporates active learning as an educational strategy

Annotations

- Active learning is any instructional strategy in which students are required to do meaningful activities and think about their learning during the class in order to achieve the session's objectives.
- Educational strategy means teaching method or instructional method, for example lecture or tutorial or small group discussion.
- Outcomes are statements describing what students can do at the end of the program
- Patient-centeredness keeps the curriculum focused around issues of the patient and not around diseases. It aims to produce doctors who deal with patients as humans and not as carriers of disease. It helps graduates provide holistic care to the patients.



Standard 5: Educational Contents

Essential Standards

The medical/dental college must:

5.1 ensure that educational content is decided in consensus by a group of relevant subject experts including faculties of basic, clinical, behavioural and community health sciences

5.2 ensure that the content and its delivery are aligned with the competencies and/ or outcomes agreed upon by the institution

5.3 ensure that the content that is taught and assessed is relevant to practice for a general practitioner

5.4 have a document describing the content, extent and sequencing of courses and other components of the curriculum (curricular map)

5.5 include the following along with the basic, clinical & community health sciences:

- a. Behavioural sciences
- b. Communication skills
- c. Forensic medicine and toxicology
- d. Islamiyat and Pakistan studies
- e. Patient safety
- f. Professionalism, medical and Islamic ethics
- g. Research
- h. Evidence-based medicine
- i. Infection control

5.6 ensure that the curriculum includes applied basic sciences relevant to general practice

5.7 ensure that the students spend sufficient time in planned contact with patients in relevant clinical settings

5.8 ensure that a representative from the department of medical education is present to facilitate the process of content agreement

Quality Standards

The medical/dental college should:

5.1s Include topics like study skills, leadership and principles of management in the program

5.2s Ensure that the students spend sufficient time in planned contact with patients and community in relevant clinical and community settings

Standard 6: Curricular Management

Essential Standards

The medical / dental college must:

6.1 have a curriculum committee duly represented on the institutional organogram 6.2 have process of:

defined terms of reference (TORs) for the curriculum committee including the

- a. planning, implementation and evaluation of the curriculum in order to ensure that educational outcomes are achieved.
- b. planning, implementation and evaluation of innovations in the curriculum
- c. ensuring representation of at least one member from the Department of Medical Education with a postgraduate qualification in medical education recognised by the PM&DC

6.3 ensure that adequate supervision of learning experiences is provided throughout required laboratory work, skills labs, chair-side teaching, clinical rotations and field visits

6.4 develop log book or study guides which clearly specify overall objectives of the course and terminal objectives for every teaching session.

6.5 disseminate log book or study guides to the students and faculty (preferably on-line as well)



Standard 7: Assessment

Assessment is an essential and integral part of educational process. Its outcome bears importance for both students as well as for the faculty and institution. For students, its importance lies in the fact that it affects the decisions of pass and fail, ranking, awards and distinctions, and issue of transcripts. For the faculty, assessment provides the grounds for substantiation of their teaching methodology and achievement of educational outcomes. For the institution, it provides the essential and sound grounds for program evaluation and brings forth important input for curriculum development and evolution.

Essential Standards

The medical / dental college must:

7.1 develop appropriate and contextual policies for assessment of students.

- 7.2 ensure that assessments cover knowledge, skills and attitudes
- 7.3 use a wide range of assessment methods

7.4 define a clear process of assessment

7.5 ensure that the assessment practices are compatible with educational outcomes and instructional methods.

7.6 implement pre-, per- and post- exam quality assurance procedures in assessment by the university with which the college if affiliated or is a constituent of

7.7 use external examiners to ensure fairness

7.8 use a system for appeal of results

7.9 ensure assessments are externally evaluated

Quality Standards

The medical / dental college should:

7.1s use standard setting methods for examination items

Standard 8: Student

As consumers of institutional services, students are the most important stakeholder group in higher education. The institutions must engage their students in the management, delivery and evaluation of their services. They should be consulted, given certain rights and responsibilities in all academic matters that concern them. This section provides a set of essential (must) and quality (should) standards for undergraduate medical/dental education in Pakistan.

Essential Standards

The medical/dental college must:

8.1 follow the admission policy in congruence with the national regulations/guidelines.

8.2 have student support programme addressing financial needs.

8.3 ensure that students have access to counselling to address their psychological, academic and/ or career needs.

8.4 ensure confidentiality of students' academic and medical records.

8.5 ensure student representation and appropriate participation in educational committees and any committee where they can provide meaningful input.

8.6 have access to their records and appeal's process in case of discrepancies.

8.7 have clear policies, funding, technical support and facilities regarding cocurricular opportunities for the students.

8.8 have a policy and practice to systematically seek, analyse and respond to student feedback about the processes and products of the educational programmes.

8.9 provide access to health services to all the students.

8.10 ensure a fair and formal process for taking any action that affects the status of a student.

8.11 have policies and code of conduct that is known to all students.

8.12 have clearly defined transfer policy in line with the PM&DC regulations

8.13 have documented policy on forbidding students from partaking in any political activity

Quality Standards

The medical/dental college should:

8.1s have infrastructure for disabled students.

8.2s provide scholarships/bursaries to students based on clearly defined criteria.

8.3s have student exchange mechanism regionally and internationally.

Annotations

Student support programme means loans schemes and debt management counselling to address their financial needs.



Needy students means students who are on merit and can provide an evidence that they do not have enough funds to continue their studies. The institutional academic council might define criteria and consider the cases on merit basis.

Academic counselling would include addressing questions related to the student's choice of selected components/electives

Career counselling would include guidance related to achieving their career goals and entry into postgraduate programs

Confidentiality means available only to members of the faculty and administration on a need to know basis. Laws concerning confidentiality of record need to be kept in view.

Committees include all educational, management and disciplinary committees. This includes development of the mission and vision, policy guidelines, curriculum committees, academic council and service delivery.

Areas of appeals include admission, attendance, assessment, promotion, demotion or dismissal processes and products of the educational programmes means curriculum, teaching and learning processes.

Fair and formal process includes timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the medical student to respond and an opportunity to appeal

Status of student means that can affect his/her educational progression for example admission, promotion, demotion, graduation or dismissal

Disability means any physical disability which may not affect his/her ability to actively contribute as a member of healthcare team. The institutional medical team should decide it on case to case basis.

Scholarships/bursaries mean reduction in fee or free education based on performance. The institutional academic council might define some criteria and select on merit.

Transfer policy and exchange mechanisms means policies devised by the affiliating university for transfer and student exchange in congruence with PM&DC guidelines.

Standard 9: Faculty

Essential Standards

The medical/dental college must:

9.1 ensure that the institution's leadership is qualified by education, training and experience 9.2 have documented job description

9.3 have faculty recruitment, selection, promotion and retention policies based on the policies/criteria's provided by the PM&DC and universities' statutory bodies.

9.4 have sufficient trained faculty to meet the medical educational needs as per PM&DC regulations.

9.5 have faculty fulfilling its various roles

9.6 have faculty development program (FDP) with clear goals aligned with faculty and program needs

9.7 have opportunities for national CME/CPD activities

9.8 have documented policy on forbidding faculty from partaking in any political activity

Quality Standards

The medical/dental college should:

9.1s have the program for training the trainers

9.2s have evidence-based educational innovation in faculty development approaches

9.3s link the annual appraisal/performance report (including research output) of faculty with their promotion

9.4s provide opportunities for international CME/CPD activities



Standard 10: Program Evaluation and Continuous renewal

The evaluation of programs overlaps with quality assurance requirements of the Higher Education Commission (HEC), that has mandated every higher education institute (HEI) to adopt the quality assurance standards and procedures.

The PM&DC encourages the universities for ensuring quality assurance and compliance with PM&DC and HEC standards.

Essential Standards

The medical/dental college must:

10.1 ensure processes and schedules for review and update of all academic activities through an established mechanism of program evaluation.

10.2 regularly review results of evaluation and student assessments to ensure that the gaps are adequately addressed in the curriculum in consultation with curricular committee.

10.3 allocate resources to address deficiencies and continuous renewal of programs.

10.4 have program evaluation in compliance with PM&DC accreditation standards

10.5 ensure that students, faculty and administration are involved in program evaluation.

10.6 have mechanism for curriculum monitoring and progressive improvements.

10.7 ensure that amendments based on results of program evaluation findings are implemented and documented.

Annotations

Program evaluation: Gathering, analysis and interpretation of information, using valid and reliable methods of data collection, from all components of the program. The process of evaluation should serve to make judgments about its effectiveness in relation to the mission, curriculum and intended educational outcomes.

Academic activities: These include all formal educational experiences of the learner during his enrolment in the institute.

Gaps: This refers to deficiencies in the fulfilment of curricular standards as defined in PM&DC standard 4.

Renewal of programs: This refers to modifications made in the program by incorporating results of program evaluation.

Curriculum Monitoring: This implies supervising and proctoring processes of curricular development and implementation.

Standard 11: Governance, Services and Resources

Essential Standards

The medical/dental college must:

11.1 have hierarchical system of academic governance.

11.2 have mechanisms for dissemination of all policies and procedures related to

governance, services and resources

11.3 have clear roles/authority of Dean and /or Principals and HOD's as per PM&DC rules

11.4 have adequate and safe buildings and structures for medical/dental college, teaching hospital and housing facilities as per PM&DC initial evaluation

11.5 have satisfactory and functional IT and library facilities

11.6 have adequate financial resources for institutional requirements

11.7 have fulfilled all legal requirements

11.8 have mechanisms for addressing disciplinary issues

11.9 have incorporated the principles of social accountability in the medical/dental college

11.10 have an established department of medical education

11.11 have health, fitness, and faculty support and cafeteria facilities

11.12 have documented policy ensuring clinical work or procedures and cost of any material used during training and studentship is not charged to the students

11.13 provide any information as an applicant or recognized institution to PMDC council as and when required

11.14 report dropout of students to PMDC council in the first two years for adjustments to maintain total admission strength

Quality Standards

The medical/dental college should:

11.1s Establish a nursing college within ten years of its recognition

11.2s Establish an institute for allied health professionals or paramedics within ten years of its recognition



Standard 12: Research and Scholarship

Essential standards

The medical/dental college must:

12.1 have a research advisory committee that can facilitate faculty and students on research.

12.2 have research as an integral part of the curriculum.

12.3 provide opportunities for research to the students and faculty.

Quality standards

The medical/dental college must:

12.1s have a research cell led by an appropriately qualified faculty member and with adequate support staff that can guide faculty and students on research.

12.2s demonstrate a commitment to continuing scholarly productivity.

12.3s provide opportunities for multi-disciplinary and applied research.

Annotations

Medical research and scholarship encompasses scientific research in basic, biomedical, clinical, behavioural, public health, social sciences and health professionals education.

Medical scholarship means the academic attainment of advanced medical knowledge and inquiry. It must meet these criteria: i) The work must be made public. Ii) The work must be available for peer review and critique according to accepted standards. Iii) The work must be able to be reproduced and built on by other scholars. The examples would include original papers, systematic reviews, scoping review, meta-analysis, literature reviews, concept and innovative papers, different publications such as short communications, teaching innovations, developing course documents, developing and maintaining the online curricular documents, and preparing teaching material and presenting it for peerreview.

The research component within the curriculum would be ensured by research activities within the medical school itself or its affiliated institutions, and by the scholarship and scientific competencies of the teaching staff.



The accreditation framework of PM&DC separates pre-requisites for establishing a medical and dental college from on-going evaluation of the quality of education being delivered. While the pre-requisites are evaluated once, where either a college meets the requirements or not – the performance evaluation is done at a frequency according to their category as defined in this section to ensure quality of delivery of education. For clarification, different evaluations terms are explained below:

Recognition Evaluation (Pre-requisite):

A mandatory evaluation carried out to determine whether the college meets the basic / minimum requirements to be recognized as a medical or dental college. Such evaluation is to be mandatorily carried out prior to granting an institution recognition for the first time and to be carried out any time by the Order of the Evaluation Committee pursuant to complaints or reports received against any existing college or by a general order of the Evaluation Committee.

Performance Evaluation:

An evaluation carried out on a recurring basis to determine the quality of education being imparted by the college and facilities offered to students towards improvement of quality of education. This evaluation is done on at a frequency determined by the category of the college or carried out any time by the Order of the Evaluation Committee pursuant to complaints or reports received against any existing college or by a general order of the Evaluation Committee.

Performance Category:

Categories defined by the Council for placement of each recognized college pursuant to a Performance Evaluation and the recommendation of the Evaluation Committee.

Categories shall be separately notified for Medical and Dental institutions and similarly for Public and Private institutions.

The following are Performance Categories:

A+ Category	Superb performance obtaining an evaluation score equal to or above 85%.
A Category	Excellent performance obtaining an evaluation score between 80% and 84%
B+ Category	Good performance obtaining an evaluation score between 75% and 79%



B Category	Upper Mid-level performance obtaining an evaluation score between 70% and 74%.
C Category	Mid-level performance obtaining an evaluation score between 60% and 69%.
D Category	All newly recognized or any existing colleges, obtaining performance evaluation score between 50% and 59%.
F Category	Performance evaluation score less than 50%

Evaluation Frequency

Colleges will be evaluated at the following frequency

Category	Evaluation Frequency
A+ Category	Every 3 years
A Category	Every 3 years
B+ Category	Every 2 years
B Category	Every 2 years
C Category	Every 1 year
D Category	Every 1 year
F Category	Upon Meeting the Requirements

Achievement & Upgradation System

Performance Evaluations shall be carried out as per the categorization of college. A college placed in a given Performance Category shall have the following prescribed method to upgrade to the next category and consequent penalties for failing to achieve improvement.

Category	Period	Penalty				
D Category	One year period granted to achieve Category C.	Failure to achieve results in stopping further admissions				

	Two consecutive year mandatory period to improve to Category C.	Failure to achieve results in de-recognition and transfer of students to a higher category college.
C Category	One year period granted to achieve Category B.	Failure to achieve results in pre-suspension warning and reduction in allocated seats by 20%.
	Two-year consecutive mandatory period to improve to Category B.	Failure to achieve results in stopping further admissions.
	Three-year consecutive mandatory period to improve to Category B.	Failure to achieve results in de-recognition and transfer of students to a higher category college.

Public colleges shall be correspondingly categorized based on performance for public knowledge and provincial governments advised to seek improvement.

Demotion

A college failing to achieve the minimum score for the category it was existing in would be demoted to the category below.

Incentive Plan

The incentives for the medical and dental colleges based on their categories are:

Category A+	Fee not to be regulated under maximum cap.	Permission to increase students by batches of 50 every three-year, subject to conduct of Recognition Evaluation to determine enhancement of capacity.
Category A	Fee not to be regulated under maximum cap.	Permission to increase students by batches of 50 every three years subject to conduct of Recognition Evaluation to determine enhancement of capacity.
Category B+	Fee capped to a maximum of 1,200,000 per year per student.	Permission to increase students by batches of 25 every three years subject to conduct of Recognition Evaluation to determine enhancement of capacity.



Category B	Fee capped to a maximum of 1,200,000 per year per student.	No increase of students allowed
Category C	Fee capped to a maximum of 1,050,000 per year per student.	No increase of students allowed.
Category D	Fee capped to a maximum of 950,000 per year per student.	No increase of students allowed.



Recognition Evaluation (Pre-requisite):

Recognition evaluation is performed to evaluate adherence of the college with the "PM&DC Initial Inspection Proforma" to ensure adequate and safe teaching facilities are available for the students of the college. Recognition evaluation is carried out by a team of inspectors. Details of evaluation methodology are described in the respective guides.

Performance Evaluation (On-Going)

The ongoing evaluation of a medical or dental college is carried out by a team comprising of inspectors from PM&DC of professional categories including health professional education expert, health institution management expert and a hospital management and safety expert.

Certificate of compliance with the pre-requisites on all aspects of the initial inspection is to be provided by the medical and dental college leadership. Inspection team will randomly check at least three items from any section of the initial inspection during the survey.

The process of evaluation is explained in detail as below:

Medical and Dental College's Responsibilities

For an evaluation survey, the university with which the medical college is a constituent of or affiliated with will conduct an evaluation on the same tool as prescribed in this accreditation framework and prepare the appropriate information required for the survey during the twelve-month period prior to the survey and submit the required copies to the Quality and Accreditation Cell at PM&DC at least one month prior to the survey. The medical college shall provide a certificate of compliance with the pre-requisites on all aspects of the initial inspection to be provided by the college leadership. The university or college can take help from the PMDC's Guidelines for Implementation of Accreditation Standards for Medical and Dental Colleges.

The Quality and Accreditation Cell of PMDC shall select surveyors for the performance evaluation survey at least two weeks prior to the survey. The profiles of the team members shall be sent to the dean's office at medical college one week before the survey.

Survey Coordinator

In preparation for the survey visit, the dean should select a person to coordinate the logistics of the visit. This person will serve as the liaison with the PMDC Quality and Accreditation Cell regarding preparations, scheduling and site visit arrangements.

Provision of a 'Surveyors Room' at the College

The team will require a dedicated room at the college. The room should have furniture suitable to accommodate the team. It should, preferably, be close to the dean's office, so that staff can control access and adjust the schedule as needed. The dean's office should provide any additional material the team may need in the room, including copies of self-evaluation reports and any other documents requested by the team, such as course evaluations, syllabi, etc.

Student Involvement in the Survey

Survey team will meet with students. Students shall be selected randomly so that they may provide truly representative student input. The survey team will seek student opinions about a variety of topics, including the quality and adequacy of the educational programme, student academic and personal counselling, health service, financial aid, and the role of students in academic policy and feedback. Students may also serve as guides in the visits to the library, classrooms, laboratories, learning centres, and clinical facilities. The confidentiality of the student feedback shall be maintained by the team to ensure no repercussions against the students involved.

The Visit Schedule

The PMDC Quality and Accreditation Cell in collaboration with the college and the team, shall finalise the schedule at least two weeks before the team arrives.

The administrators of clinical facilities should be advised that surveyors may be visiting patient care units. Student guides may conduct the tours.

Exit Conference/ Survey Report

Before departing, the team chair will give the dean and the executive (vice-chancellor, president, etc.) a printed summary report, which contains the score of the proforma, to be signed by the dean. In case of successful accreditation, PMDC shall issue certificate of accreditation after the approval of the Evaluation Committee and Council, the category that the college got classified into, and list the medical or dental college and its category on its website. In case of any dispute in the report, the dean's office may communicate with the PMDC's Quality and Accreditation Cell.

Typical Survey Plan

A typical survey of a medical or dental college/hospital shall consist of:

- 1. Leadership Session: All three surveyors meet the leadership to get an overview of the college, any changes from the last survey, get an overview by the college leadership on continued compliance with legal requirements, details of MoUs with any teaching hospitals, etc.
- 2. **Medical College Management Session:** A session conducted by the Institutional Management Expert with discussion on management and resources of the college

including organisational relationships of college with university and teaching hospital(s), organisation of staff, interaction of dean with college's governance organisation, councils, committees and academic departments, financial status and projections, research programmes and funding, and the status of facilities for education, research and patient care. Adequacy of finances for the achievement of the college's missions are discussed; recent financial trends and projections for various revenue sources, financial health of and market conditions for the clinical services are also reviewed with the leadership of the college.

3. Curricular Organization and Curricular Management Session: Session conducted by the Health Professional Education expert with the relevant leadership of the medical college to review educational objectives, outcome measures and how they are integrated throughout the curriculum. The session also focuses on curriculum design, content coverage, and methods of teaching and evaluation of student performance. Evidence of implementation of curriculum is also reviewed.

Next the Health Professional Education expert will discuss with the relevant leadership of the medical college that constitute the curriculum committee to review Curriculum management and programme evaluation. The session also focuses on discussion of the system for implementation and management of the curriculum; adequacy of resources and authority for the educational programme and its management; and methods for evaluating the effectiveness of the educational programme and evidence of success in achieving objectives. Evidence of effective management is reviewed.

- 4. **Infrastructure Tour:** This tour is conducted by the Architect. The focus of this tour is to evaluate adequacy of infrastructure in terms of space, seating requirements, hostel and other facilities for medical education. The architect will review the map (CAD) and will ensure that the infrastructure is in alignment with the drawings and its corroboration with PMDC requirements.
- 5. **Biomedical Equipment Tour:** This tour is conducted by the Biomedical Engineer. The focus of this tour is to evaluate adequacy of equipment and relevant material required for provision of appropriate medical education.
- 6. Medical College Safety Tour: This tour shall focus on the safety of systems in the medical education. The safety focus shall remain on fire safety, general safety, disaster preparedness, hazardous material, infection prevention and control and safety of water systems.
- 7. **Student Session:** This session is conducted with students by the Institutional Management Expert, Basic Sciences Faculty and Medical Education Faculty for discussion of students' personal, academic, career and financial counselling system in the college, financial aid; health services; infection control education and counselling; student perspective of curriculum, teaching, and evaluation/grading; students' role and perceived value of student input in academic planning,



implementation and evaluation. The session shall also review the effectiveness of academic counselling, policies and procedures for student advancement and graduation and for disciplinary actions; review standards of conduct and policies for addressing student mistreatment, career guidance strategies; advanced and subspecialty clerkships/clinical experiences and electives for rounding out clinical education of the students.

- 8. Faculty Session: This session focuses on interaction with faculty other than the leadership already interacted with. The session focuses on discussion of notable achievements and ongoing challenges in individual courses and clerkships/clinical experiences; contributions of individual courses and clerkships/clinical experiences in achieving institution's educational objectives; adequacy of resources for education, and availability of faculty to participate in teaching. There will also be a discussion on faculty appointment, promotion policies, and faculty development opportunities, effectiveness of faculty governance, faculty compensation and incentives, and opportunities for collegial interaction among faculty.
- 9. Medical College Facilities Tour: Tour conducted by the Institutional Management Expert Tour of clinical learning facilities including inspection of lecture halls, small group classrooms, labs and study areas used for pre-clinical education of the students. Visit of learning resource centre. Visit of basic sciences department to review successes and ongoing challenges in the administrative functioning of departments; adequacy of resources for research, scholarship, teaching; and departmental support for faculty and graduate programmes. Visiting and meetings with heads of those departments that offer the major required clerkships/clinical experiences. Discussions to include successes and ongoing challenges in administrative functioning of departments; adequacy of resources for all missions (clinical, research, scholarship, teaching); departmental support for faculty and students; balancing of clinical and academic demands on faculty. Institutional tour will include the hostel facilities and may be divided into multiple sessions throughout the survey.
- 10. Hospital Facilities and Safety Tour: This tour is conducted by the Hospital Management and Safety Expert. The focus of this tour is to evaluate adequacy and safety of hospital facilities for clinical training. The safety focus shall remain on fire safety, general safety, disaster preparedness, hazardous material, infection prevention and control and safety of water systems.
- 11. **Hospital Clinical Tour:** This tour is conducted by the Clinical Sciences Medical Expert. The focus of this tour is to evaluate adequacy and safety of hospital facilities for clinical training. The focus shall not be on the documentation in the medical record or the care provision in the hospital.

Day 1														
	0900	0930	1000	1030	1100	1130	1200	1230	1300	1330	1400	1430	1500	1530
	0930	1000	1030	1100	1130	1200	- 1230	1300	1330	1400	1430	1500	- 1530	1600
Architect			Icipai	Infrastructure Tour (College)						College infrastructure verification				
Biomedical	sity VC			Biomedical Equipment Tour (Hospital)							College equipment verification			
Medical Education	Univer		d Deal						Pra	iyer				
Clinical Sciences	g with	4		Curriculum, Curriculum Management				Break		Student Session				
Basic Sciences	Meeting with University VC	Presentation by the Dean / Principal			(College	<i>;</i>)							
Hospital Mgt				Medical College Management Session						Medical College Safety Tour				
						Day	/ 2							
	0900	0930	1000	1030	1100	1130	1200	1230	1300	1330	1400	1430	1500	1530
	0930	1000	1030	1100	1130	1200	1230	1300	1330	1400	1430	1500	1530	1600
Architect	Infrastructure Tour (Medical College)													
Biomedical		Biomedical Equipment Tour (Medical College)												
Medical Education	Medical College Facilities Tour						ties	Prayer Follow-ups as needed						
Clinical Sciences	Facu	Ity See	ssion	Hospital Clinical Tour			Break		& Closing Session					
Basic Sciences				Medical College Facilities Tour										
Hospital Mgt	Hospital Facilities and Safety Tour													

A typical agenda of the evaluation survey of medical or dental college/hospital is: