

Sree Gokulam Medical College & Research Foundation  
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Content: Program quality assurance

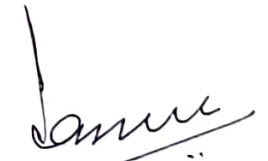
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Signed by:

  
Director

  
Dean Emeritus

  
Principal



## Program Quality Assurance

### Statement of Purpose

To provide a standardised mechanism to constantly improve the quality of our programs through regular, cyclical evaluation.

### Policy

Sree Gokulam Medical College and Research Foundation assures program quality through:

- a. Aligning the curriculum with the vision and objectives of our institution
- b. Aligning the program with the guidelines from the regulatory bodies and University
- c. Regular evaluation and review to guide the actions related to program refocusing
- d. Constant improvement through evidence-based decision making
- e. Upgradation and staying cutting-edge through subjecting ourselves to accreditation processes.

Three components of Program quality assurance:

#### A. Annual Curriculum Review:

- Each year, the Institutional Academics Committee along with the Medical Education Unit shall review the curriculum and submit its report by 10th of June.
- Each department shall submit to the Institutional Academics Committee before 15th of May every year, a concise report based on the decisions taken during
  - (i) the Post examination Evaluation Meetings within the department and
  - (ii) Bi-annual Departmental Curriculum Committee meetings
- Institutional Academics Committee shall review based on:
  - The existing annual program plan
  - Inputs from all the concerned departments regarding departmental evaluation and reports from biannual Departmental Curriculum Committee Meetings
  - Requirements for renewal of recognition from the regulatory bodies
  - Accreditation requirements
  - Amended program requirements or standards as released by the regulatory body or the Kerala University of Health Sciences.
  - Recommendations from the Program Advisory Committee
  - Students' course feedback and
  - Results of various assessment activities of the previous academic year.
- Post-review, the committee shall suggest the curriculum for the next academic year, along with changes if any.
- Faculty of different departments shall incorporate these changes and submit the curriculum revisions to Principal/Dean for approval before 10th of July.

- Before 1st of August, the final, approved and revised curriculum shall be ready and shall be adopted for the next academic year.

## **B. Annual Program Review**

- Development or revision of a program plan by the Program Advisory Committee in collaboration with the medical Education Unit shall be based on program specific information (e.g. the introduction of new Competency Based Undergraduate Curriculum - 2019). The Program Advisory Committee shall involve departmental representatives when reviewing postgraduate programs.
- Program planning and revision shall also take into account
  - The student enrolment
  - Retention rate
  - Graduation rate
  - Student satisfaction
  - Faculty satisfaction
  - Feasibility
  - Desired quality of the graduates
  - Graduate acceptance into higher studies or employment
  - Any new program specific information
- The Medical Education Unit shall contribute through conducting Curriculum Implementation Support Programs.

The Program Advisory Committee shall review the program annually and the review process shall critically analyse and ensure effective, relevant and sustainable programs by:

- Defining the criteria by which the programs are evaluated.
- Stating the process to evaluate the program performance.
- Stating the process of developing and implementing improvement strategies.
- Suggesting the process to guide the actions helping in program refocusing.

The program review process involves program plan and performance scorecard. Faculty shall engage in program planning and review as needed. Recommendations by the program review committee shall be reviewed by the Dean and Principal, and the approved review shall be made available to all the faculty.

- The planning shall also include resource planning, equipment, delivery options, etc.

## **C. Program Quality Review**

- Based on the curriculum review, program planning / review, and the outcomes, program quality shall be reviewed once every five years jointly by Director, Dean, Principal, Program Advisory Committee, representatives from Medical Education Unit & Institutional Academics Committee.

- This process shall:
  - Evaluate whether the program meets with the expected program learning outcomes
  - Undertake extensive curriculum mapping for various programs
  - Identify potential gaps and misalignments.
- The process shall include the assessments of program advisory committee, inputs from the focused group discussion with faculty, students and graduates.
- A summative report shall be formulated including the recommendations and the proposed plan of action. The report shall be integrated in the program planning.

## **Definitions**

Program Plan: Educational Program needs to deliver targeted and measurable outcomes. A program plan is a document used to assist in program planning, development and reporting of performance goals, renewal strategies, and achievements in alignment with strategic priorities.

Performance scorecard: Assesses program performance and and assists in planning and developing renewal strategies.

## **Applies to:**

Director, Dean, Principal, Institutional Program Advisory Committee, Institutional Academics Committee, Medical Education Unit and all the faculty.