The department of medical education of independent medical college is established for training of medical students for the course of MBBS. The main functions of Department of Medical Education is to develop and implement a strategy to achieve minimum standard of training for MBBS students. The department of Medical education also aims for development of innovative educational strategies, assessment methodology and evaluation plans.

The department of Medical Education has following components
Basic sciences section

- 1. One office
- 2. Support staff
- 3. Medical educationist

#### Clinical sciences section

- 1. One office
- 2. Support staff
- 3. Medical educationist

#### **Assessment Unit**

- 1. Office
- 2. Support staff

#### **Committees**

- 1. Curriculum committee
- 2. Assessment committee
- 3. Program evaluation committee
- 4. Educational research committee
- 5. Ethical committee

All four committees are formed after approval of academic council for period of 3 years and these committees will function.

# **MISSION**

The mission is to achieve an equitable distribution of educational opportunities, and to integrate different aspects education, from strategy to evaluation.

# **GOAL**

The broad goal of medical education department is to produce graduates capable of delivering efficient and innovative medical graduate, along with development of capable medical teachers.

Structure of medical education department
The department of education has following officials

- 1. Director medical education
- 2. Co-coordinator for basic sciences
- 3. Co-coordinator for clinical sciences
- 4. Support staff (2 computer operators)

# **INFRASTRUCTURE**

- Basic sciences section: office equipped with computer and printer
- Clinical sciences section: office equipped with computer and printer
- Assessment unit: office equipped with computer and printer
- Conference room with AV facilities for training workshops

# **FUNCTION OF MEDICAL EDUCATION DEPARTMENT**

- Educational planning and implementation
- Faculty development
- Educational research
- Monitoring of educational programs
- Continuous professional development

# **DIRECTOR MEDICAL EDUCATION**

#### **Eligibility**

Qualified medical educationist as per PMDC rules, full time

#### Responsibilities

- Leadership for implementation of educational program
- Planning and implementation of program for faculty development
- Organizing regular committee meetings
- Supervision of assessment unit
- Production of annual academic report

## **BASIC SCIENCES CO-COORDINATOR**

#### **Eligibility**

Assistant professor or above from basic sciences subject and qualification in medical education as per PMDC rules

#### Responsibilities

- Co-ordination between departments and medical education department
- Communication of educational plans
- Organizing workshops and training opportunities
- Maintenance of academic records
- Creation of question bank in respective subjects

# **CLINICAL SCIENCES CO-COORDINATOR**

#### **Eligibility**

Assistant professor or above from clinical sciences subject and qualification in medical education as per PMDC rules

#### Responsibilities

- Co-ordination between departments and medical education department
- Communication of educational plans
- Organizing workshops and training opportunities
- Maintenance of academic records
- Creation of question bank in respective subjects
- In charge clinical skills Lab

# CURRICULUM COMMITTEE

CURRICULUM COMMITTEE www.imc.edu.pk

# **CURRICULUM COMMITTEE**

This committee will be formed with approval of academic council for 3 years

### Composition

- 1. Director medical education
- 2. Coordinator basic sciences
- 3. Coordinator clinical sciences
- 4. Professor of one of the clinical subjects
- 5. Professor of one of the basic sciences
- 6. Co-opt member (faculty member of any specialty)

#### Responsibilities

- To prepare curriculum for respective subjects in light of PMDC and university (UHS) requirements
- To regularly review the existing curriculum
- Curriculum committee will resolve issues pertaining to planning, implementation, timetable

CURRICULUM COMMITTEE www.imc.edu.pk

#### Standard operating procedures for assessment committee

After formation of committee, it will meet within a week to select secretary and chairman of committee.

75% attendance of members is mandatory for the meeting

Curriculum committee will meet on 6 monthly basis to review the existing curriculum.

Extra ordinary meeting can be held on request of academic council.

The committee will communicate any changes in curriculum to respective departments.

Curriculum committee will review each curriculum under following points

- Introduction
- Objective
- Content
- Learning objectives
- Teaching strategies
- Assessment strategies
- Evaluation of programme

#### **Assessment Committee**

This committee will be formed with approval of academic council for 3 years

#### **Composition**

- 1. Director medical education
- 2. Professor of one of the clinical subjects
- 3. Professor of one of the basic sciences
- 4. Co-opt member (faculty member of any specialty)

#### Responsibilities

To implement assessment activities (exams, in house tests, and others forms of assessment)

Standard operating Procedures

After formation of committee, it will meet within a week to select secretary and chairman of committee

Curriculum committee will meet on 3 monthly basis to review the assessment process of college

Extra ordinary meeting can be held on request of academic council

The committee will make uniform standards for internal assessment in all subjects

Detailed report of in house exam results will be prepared by committee members

The committee will review all tests and results in light of educational principles

This committee will supervise the assessment unit

# ASSESSMENT COMMITTEE

# **INTRODUCTION**

This manual of standard operating procedures applies to IMC examinations and assessments which follow regulations set by University of Health Sciences. (www.uhs.edu.pk/downloads/examinationregulations.pdf)

Assessment is an integrated process involving variety of procedures to obtain information about student learning and development. Assessment is necessarily ingrained term in the curriculum. Assessment when properly planned and carried out has a powerful steering effect on learning and curriculum. In medical education its importance cannot be overstated as the stakes are very high.

#### **Purpose**

All faculty and staff involved in issuing and/or supervising examinations and assessments are responsible for:

- Ensuring these procedures are followed
- Ensuring that examinations and assessments are conducted under standard conditions that are consistent and fair to students.

# **ASSESSMENT COMMITTEE**

This committee will be formed with approval of academic council for 3 years

#### **Composition**

- 1. Director medical education
- 2. Professor of one of the clinical subjects
- 3. Professor of one of the basic sciences
- 4. Co-opt member (faculty member of any specialty)

#### Responsibilities

To implement assessment activities (exams, in house tests, and others forms of assessment)

#### **Standard operating Procedures**

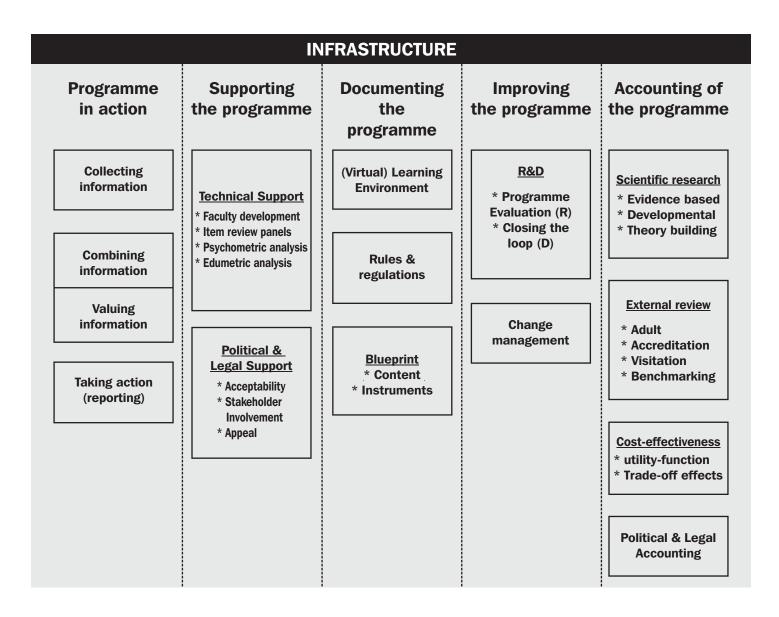
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- Extra ordinary meeting can be held on request of academic council
- The committee will make uniform standards for internal assessment in all subjects
- Detailed report of in house exam results will be prepared by committee members
- The committee will review all tests and results in light of educational principles
- This committee will supervise the assessment unit

# PRINCIPLES OF ASSESSMENT

Assessment is not an individual task to be implemented but it requires a programmatic approach for assessing competence as a whole. A programmatic approach with presupposed criteria to help design comprehensive assessment programmes with quality assurance is shown below.

Assessment is a guest for improvement, which follows certain principles which are summarized below:

- Purpose of assessment.
- Determine content to be assessed.
- Select relevant assessment procedures.
- Incorporate variety in assessment procedures.
- Beware of limitation of assessment procedures.
- Modify instructional plan according to feedback.
- Assessment is a means to an end, and not an end in itself.

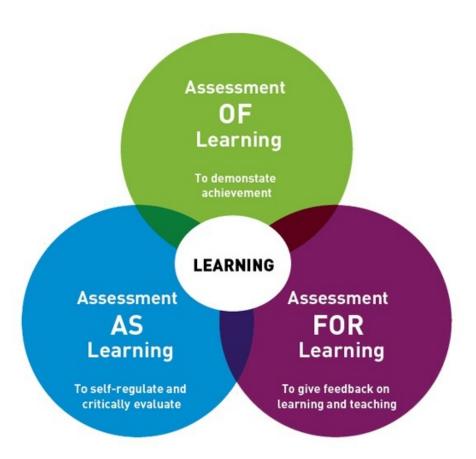


# **ASSESSEMENT POLICY**

With our college following traditional discipline based curriculum guidelines given by Pakistan Medical & Dental Council, University of Health Sciences, following assessment standard operating procedures have been formulated.

- The main purpose of assessing students is shown below
- Criterion Referenced Assessment (50% pass).
- Assessments will be at end of each term as well as end of year.
- The frequency, timing and weightage of assessments will be feasible, valid and reliable.
- Assessment criteria will be clear and available to students in a timely manner.
- Appropriate feedback from students and teachers after each term (formative as well as summative assessments) will be carried out.
- Assessment schedule once approved will not be changed without approval by the Assessment Committee and Academic Council.

# SUMMATIVE



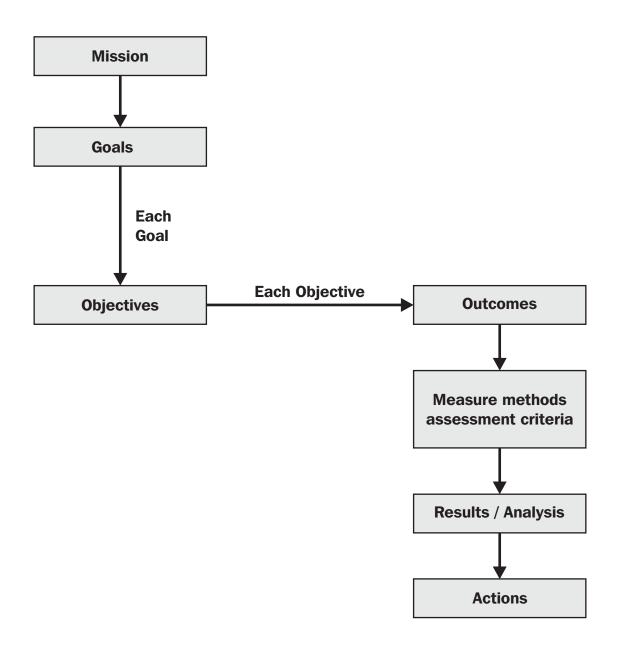
# **FORMATIVE**

# **ASSESSMENT PROCEDURES**

The simplified instructional model below summarizes the basic steps to be followed in the instructional process and illustrates the interrelated nature of teaching, learning and assessment.

#### **Instructional Goal**

Regarding the MBBS program our specific instructional goal is a competent physician that is the product. This will be the foundation of the assessment plan.



# TYPES OF ASSESSMENT PROCEDURES

Performance of students will be assessed as following:

#### **CONTINUOUS ASSESSMENT DURING ACADEMIC YEAR**

It will incorporate both formative and summative assessment for all academic years.

#### Formative:

Conducted throughout each term. Though low stake examinations but with feedback will improve student learning, leading to better performance in summative assessment.

#### **Summative:**

Conducted at end of each term, consisting of MCQ, SAQ, OSPE and structured viva. However, logbooks will be maintained during each academic year, according to the departmental requirements.

#### **END OF TERM ASSESSMENT**

This will be summative carried out at end of each academic year.

#### **Assessment Tools**

Various tools selected are as follows according to UHS guidelines.

#### I Written Assessment

#### **Multiple Choice Question**

MCQs are extremely flexible and assess knowledge, understanding, interpretation and application. These will be effective to test cognitive aspects of students, one best answer type MCQ are used.

#### **Short Answer Question**

Written assessment formats are the most well-known and most widely used assessment methods in medical education. Learning outcomes which are mainly based on cognitive domains can be assessed by written tools. We will use short answer question (SAQ).

#### ii. Assignments

Every month in various departments topics concerned with the term will be given for assignment. These will be a part of formative assessment. As well as Clinico- Basic and Pathologic Conferences are held for preclinical and clinical years, respectively.

#### iii. Practical/Clinical Assessment

#### **OBJECTIVE STRUCTURED PRACTICAL EXAM (OSPE)**

A formative OSPE will be held during terms and summative at the end of year. It will consist of laboratory-based and practical questions related to the learning objectives covered in the course. The students will be given feedback after formative assessment.

#### **OBJECTIVE STRUCTURED CLINICAL EXAM (OSCE):**

A formative OSCE will be held during the term and summative at the end of year. It will consist of clinical and practical questions related to the learning objectives covered in the course. The students will be given

feedback after formative assessment.

#### **LONG CASE**

At the end of fourth and final year each subject will be assessed by a long case. Daily encountered problems will be the case scenarios for which students will be trained during formative assessment in clinics.

#### STRUCTURED VIVA

At the end of examination an integrated viva will be taken in which relevant specialists will sit and ask questions. There will be guidelines for examiners to follow.

#### **LOG BOOKS**

In case of log books required entries will be countersigned by observer. It will be criterion referenced whereas the students will have to fulfill following criteria: for example assignments, case presentations in wards, departmental log books.

### iv. Observation

#### INTERNAL ASSESSMENT

The progress report from teachers will have separate column about behavior and attitude of students in each term in addition to academic record with minimum pass of 50%.

#### **Notification of Results**

Faculty Assessment Committee will display result on notice board as well as online on the college website http://www.imc.edu.pk.

Results as hard copy and e-mail will also be sent to parents of each term.

# **CONDUCTING EXAMINATIONS AND ASSESSMENTS**

Conducting Examinations and Assessments According to University of Health Sciences Guidelines. In all examinations and assessments, the conditions underpinning the examination or assessment shall be displayed on concerned department notice boards to students prior to the examination or assessment taking place.

Note: Any requests for special assistance example reader/writer are to be made prior to the examination or assessment.

#### **Examinations and Assessments conducted under 'Examination Conditions'**

- 1. Students may only enter the examination room under the instruction of the supervisor.
- 2. Students must display their IMC Student ID card on their desk throughout the examination. In the event that a student forgets their ID card, the supervisor may, at his/her discretion, allow the student to provide some other form of identification such as a NIC.
- 3. All bags and personal possessions must be left clear of the seating area, near the entrance/exit of the examination room.
- 4. Hats, caps and earplugs are not to be worn in the examination room and watch alarms must be turned off.
- 5. Cell phones are to be switched off and left with bags/personal possessions near the entrance/exit of the examination room. No other forms of electronic listening and/or receiving devices or digital/mobile technologies are permitted in the examination room.
- 6. Students may bring only the following equipment to the examination; pens, pencils, eraser, ruler. Pencil cases, wallets and purses are not permitted on desks.
  - Nothing edible may be brought into the examination room. Students may bring a clear, plastic water drink bottle.
  - Dictionaries, printed or electronic, are not permitted and other materials will be permitted as specified on the examination cover sheet.
- 7. Paper or answer booklets will be supplied. Any rough working notes are to be handed to the supervisor at the end of the examination.
- 8. Reading time may be specified in the 'Instructions to Candidates' and this will be conducted in silence prior to commencement of the examination.
  - During the reading time, students must not write in their answer books or make notes; the supervisor will announce when they may commence writing.
- 9. Students will be instructed to:
  - a) Write their name clearly on each sheet of writing paper used or on the answer sheet provided.
  - b) Number each answer and each page of that answer.
  - c) Answer all questions legibly in pen/ink.
  - d) Clearly cross out errors (white-out should not be used).
  - e) Read special instructions with care, and follow them.
- 10. A student may not enter the examination room after the first fifteen minutes.
- 11. A student may not leave the examination room in the first thirty minutes of the examination or during the last fifteen minutes.
- 12. If a student wishes to go to the toilet or becomes ill during an examination, they must raise their hand and will be escorted out by a supervisor. Students must not leave the room unaccompanied to go to the toilet.
- 13. The supervisor will tell students when there are thirty minutes remaining before the end of the

examination and again when there are fifteen minutes remaining.

- 14. Students will not continue writing or add anything to their answers after the supervisor has announced the end of the examination.
- 15. Students shall not communicate with each other in the examination room or copy from another's answers.
- 16. In the event of suspected cheating, the student(s) will be cautioned by the supervisor, any equipment found in the student(s)' possession will be confiscated, and the circumstance will be noted and reported to the lecturer.
- 17. If a fire alarm sounds during an examination, the supervisor will make a note of the time the examination stopped, and:
  - a) Instruct students to stop writing and turn their examination papers over;
  - b) Remind students that examination conditions still apply and that they must not talk with each other about the examination;
  - c) Ask the students to calmly and quickly evacuate the building;
  - d) Once permission has been given to re-enter the building the students will be seated and asked to draw a line under their work to indicate what was done before and after the disruption;
  - e) The examination will be restarted when everyone is settled; an additional 10 minutes grace period will be allowed in addition to the time lost during the disruption.

In the event of the examination being abandoned, a new examination will be prepared and an alternative date and time will be scheduled.

#### **B.** Practical Assessments

The regulations for the preparation and conduct of practical assessments vary between subject areas. Where regulations have not been specified they have to be put up to the academic committee.

#### C. Assignments

Different departments are autonomous to carryout according to their subject content and context.

# PROGRAM EVALUATION COMMITTEE

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**International Standards** 

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#### **Framework of Program Evaluation**

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- Continuous Monitoring
- Periodic Evaluation
- · Systematic Analysis and Feedback
- Performance of Students and Graduates
- Stakeholders
- Professional Accreditation

# **Standard Operating Procedures of Program Evaluation, 2017 Introduction:**

IMC has developed policy and procedures which sets the benchmarks as to what quality to expect and how to assure it. In this respect as part of quality assurance manual standard operating procedures have been developed for program evaluation. Program evaluation requires systematic monitoring with evaluation, stakeholder's confidence to ensure that standards of quality are being met.

#### **Program evaluation committee**

- The QAC overlooks the program evaluation.
- Meetings are convened as required to discuss and analyze issues pertaining to program evaluation.
- Assessment committee is a subcommittee of the Curricular Committee approved by the Principal.

This committee will be formed with approval of academic council for 3 years

#### Composition

- 1. Director medical education
- 2. Principal
- 3. Coordinator of basic sciences
- 4. Coordinator of clinical sciences
- 5. Professor of one of the clinical subjects
- 6. Professor of one of the basic sciences
- 7. Co-opt member (faculty member of any specialty)

#### Responsibilities

To evaluate the educational program in various disciplines

#### **Standard operating Procedures**

- After formation of committee, it will meet within a week to select secretary and chairman of committee.
- Curriculum committee will meet on 2 monthly basis to evaluate educational programs of each specialty.
- Extra ordinary meeting can be held on request of academic council
- The committee will devise feedback mechanism for teachers and students
- Detailed feedback report of students and faculty members will be assessed.
- The committee will prepare evaluation report at the end of each academic year

#### **International Standards**

Program evaluation is one of the international standards in the guidelines of WFME. (W FME, 2003).

#### **Types of Program Evaluation**

Evaluation is divided into two types, internal carried out by the institution and external by a certified authority. The SOP is applied to the internal program evaluation.

#### **Framework of Program Evaluation**

These SOP have been developed for local context of IMC. The basis is planning, implementing and with time reviewing. These include.

#### **Outline Plan**

Consistent with college mission, parameters will be in accordance with national and international standards. In addition it will incorporate:

Who: faculty concerned

What: the activities/ processes for evaluation

When: timelines to carryout evaluation How: planning and implementing

#### **Continuous Monitoring**

The program is continuously monitored with data from the internal assessments. Each academic year is divided into three terms. Each term has formative assessments and end of term tests. There by each year ends with annual professional exam.

Each department maintains record of all assessments and there by analyzes the results with feedback to students. In this regard the Department of Medical Education is in the shadows to provide facilitation in every aspect.

#### **Periodic Evaluation**

- The context of educational process is periodically evaluated with departmental input of their educational activities as well as monthly reports.
- The entire activities of faculty are evaluated as in teaching learning and performance for the educational programme.
- The HOD will submit annual performance report of all staff in their respective departments. All HOD's of departments will be evaluated for their performance by the Principal.

#### **Systematic Analysis and Feedback**

- Clear and explicit standards defined as points of reference to carry out reviews.
- Develop quality assurance processes and methods of evaluation to make sure teaching and learning practices are consistently carried out.
- DME undertakes analysis of results to evaluate process relating teaching and learning to assessment.

#### **Performance of Students and Graduates**

- Periodic feedback taken from students for the improvement of teaching and learning methodologies.
- Feedback includes student's reports and information about processes and products of the educational programme.
- Analysis of examination scores pass and failure rates, success and dropout rates and reasons.

#### **Stakeholders**

All Stakeholders are taken on board with open data source for accurate information accessibility.

#### **Professional Accreditation**

The External bodies' accreditations that IMC graduates meet the required professional standard.