

Area 4

Program Evaluation

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Program Evaluation

This area has four sub-areas

1. MECHANISMS FOR PROGRAM MONITORING AND EVALUATION.
2. TEACHER AND STUDENT FEEDBACK.
3. PERFORMANCE OF STUDENTS AND GRADUATES.
4. INVOLVEMENT OF STAKEHOLDERS.

Sub-area 1

MECHANISMS FOR PROGRAM MONITORING AND EVALUATION

MECHANISMS FOR PROGRAM MONITORING AND EVALUATION

Basic standards:

The medical school must

- Have a program of routine monitoring of processes and outcomes.
- Establish and apply a mechanism for program evaluation that
 - addresses the curriculum and its main components.
 - addresses student progress.
 - identifies and addresses concerns.
- Ensure that relevant results of evaluation influence the curriculum.

DOCUMENTS

- Reports that show routine program monitoring activities of the college from
- Registration unit that document students' attendance of different educational activities in statistical approach (lectures, practical sessions, field visits, primary health care center sessions or visits, clinical sessions....etc.) on monthly basis or otherwise to the body or person(s) in charge. Those in charge may be college council, dean and associated dean for scientific affairs, curriculum committee, or program evaluation committee. These reports must include details about students attendance rates as related to subjects/modules and grades (or even teachers if feasible).

DOCUMENTS

- Reports that show routine program monitoring activities of the college from
- Examination committee must report, to those in charge, about numbers of students who defer examination and explain causes in a statistical approach. Students pass rates must also be reported as related to marks and subjects. Failure rates must be reported as correlated with non-attendance, with subjects/modules, and with teachers.

DOCUMENTS

- Reports that show routine program monitoring activities of the college from
- Curriculum committee to those in charge that document monitoring of processes and outcomes. Reports of curriculum committee must be prepared carefully by extracting most relevant points from meeting minutes, staff/student surveys, or any other method related to program monitoring.

DOCUMENTS

- The curriculum of the college that must be properly written, and that must include a description of the college mechanism for systematic gathering of information that helps the college to judge the effectiveness and adequacy of it and its educational program. The written curriculum must also include its main components like model, structure, composition, the use of core and optional parts, and duration.

DOCUMENTS

- Examination committee and registration unit joined reports that address student progress. Information for these reports can be obtained from the routine reports for monitoring (which are mentioned above) along with analysis and relevant conclusions.

DOCUMENTS

- Curriculum committee report that addresses concerns. Concerns are elicited from students and teacher feedback through direct reporting or through surveys, and from plans for corrective actions. Insufficient fulfillment of intended educational outcomes is an important concern that needs good analysis to reach to points of weaknesses and problems.

Annotation

- Programme monitoring would imply the routine collection of data about key aspects of the curriculum for the purpose of ensuring that the educational process is on track and for identifying any areas in need of intervention.

Annotation

- The collection of data is often part of the administrative procedures in connection with admission of students, assessment and graduation.

Quality development standards

The medical school should

- periodically evaluate the programme by comprehensively addressing
 - the context of the educational process.
 - the specific components of the curriculum.
 - the long-term acquired outcomes.
 - its social accountability.

Annotation

- The context of the educational process would include the organisation and resources as well as the learning environment and culture of the medical school.

Annotation

- Programme evaluation is the process of systematic gathering of information to judge the effectiveness and adequacy of the institution and its programme.

Annotation

- It would imply the use of reliable and valid methods of data collection and analysis for the purpose of demonstrating the qualities of the educational programme or core aspects of the programme in relation to the mission and the curriculum, including the intended educational outcomes.

Annotation

- Involvement of external reviewers from other institutions and experts in medical education would further broaden the base of experience for quality improvement of medical education at the institution.

Annotation

- Main components of the curriculum would include the curriculum model, curriculum structure, composition and duration and the use of core and optional parts.

Annotation

- Identified concerns would include insufficient fulfillment of intended educational outcomes.

Annotation

- It would use measures of and information about educational outcomes, including identified weaknesses and problems, as feedback for interventions and plans for corrective action, programme development and curricular improvements; this requires safe and supporting environment for feedback by teachers and students.

Annotation

- Specific components of the curriculum would include course description, teaching and learning methods, clinical rotations and assessment methods.

Annotation

- Social accountability would include willingness and ability to respond to the needs of society, of patients and the health and health related sectors and to contribute to the national and international development of medicine by fostering competencies in health care, medical education and medical research.

Annotation

- This would be based on the school's own principles and in respect of the autonomy of universities.

Annotation

- Social accountability is sometimes used synonymously with social responsibility and social responsiveness.

Annotation

- In matters outside its control, the medical school would still demonstrate social accountability through advocacy and by explaining relationships and drawing attention to consequences of the policy.

WFME QUESTIONS ON STANDARDS

Standard 1 question

- ❖ How does the medical school evaluate its programme?

Thank You



Sub-area 2

TEACHER AND STUDENT FEEDBACK.

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Basic standards:

The medical school must

- systematically seek, analyse and respond to teacher and student feedback.

Quality development standard

The medical school should

- use feedback results for programme development.

Annotation

- Feedback would include students' reports and other information about the processes and products of the educational programmes.

Annotation

- It would also include information about malpractice or inappropriate conduct by teachers or students with or without legal consequences.

DOCUMENTS

- Students' reports (the college must allow students to report verbally or in a written format about processes and outcomes of educational program).
- Teachers' reports.
- Surveys may also provide relevant information.

DOCUMENTS

- Reports of curriculum/program evaluation committees, or meeting minutes describing the use of FB results (student and teacher reports as well as survey results) for program development.

Sub-area 3

PERFORMANCE OF STUDENTS AND GRADUATES

PERFORMANCE OF STUDENTS AND GRADUATES

Basic standards:

The medical school must

- analyse performance of cohorts of students and graduates in relation to
 - mission and intended educational outcomes.
 - curriculum.
 - provision of resources.

Quality development standards

The medical school should

- analyse performance of cohorts of students and graduates in relation to student
 - background and conditions.
 - entrance qualifications.
- use the analysis of student performance to provide feedback to the committees responsible for
 - student selection.
 - curriculum planning.
 - student counselling.

Annotations

- Measures and analysis of performance of cohorts of students would include information about actual study duration, examination scores, pass and failure rates, success and dropout rates and reasons, student reports about conditions in their courses, as well as time spent by them on areas of special interest, including optional components.

Annotations

- It would also include interviews of students frequently repeating courses, and exit interviews with students who leave the programme.

Annotations

- Measures of performance of cohorts of graduates would include information on results at national license examinations, career choice and postgraduate performance, and would, while avoiding the risk of programme uniformity, provide a basis for curriculum improvement.

Annotations

- Student background and conditions would include social, economic and cultural circumstances.

Documents

- Performance of cohorts of students is available from reports of examination committee and registration unit, the curriculum /program evaluation committee.

Documents

- Performance of graduates must be obtained from graduates themselves and from health institutions they serve and this must be done by graduate unit.

Documents

- Curriculum committee must analyze performance and correlate it with mission, intended educational outcomes, and provision of resources.
- The document here will be report(s) from curriculum/program evaluation committees documenting college activities in the above points.

WFME
QUESTIONS ON STANDARDS

Standard 2 and 3 question

- ❖ How does the medical school analyse and use the opinions of staff and students about its educational programme and what is the result of this analysis?

Sub-area 4

INVOLVEMENT OF STAKEHOLDERS

INVOLVEMENT OF STAKEHOLDERS

Basic standard:

The medical school must

- in its programme monitoring and evaluation activities involve its principal stakeholders.

Quality development standards

The medical school should

- for other stakeholders
 - allow access to results of course and programme evaluation.
 - seek their feedback on the performance of graduates.
 - seek their feedback on the curriculum.

Annotations

- Principal stakeholders would include the dean, the faculty board/council, the curriculum committee, representatives of staff and students, the university leadership and administration, relevant governmental authorities and regulatory bodies.

Annotations

- Other stakeholders would include representatives of other health professions, patients, the community and public (e.g. users of the health care delivery systems, including patient organisations).
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Annotations

- Other stakeholders would also include other representatives of academic and administrative staff, education and health care authorities, professional organisations, medical scientific societies and postgraduate medical educators.

Documents

- This will be documented through all the above reports and meeting minutes, that document the attendance of routine meetings and any other activity by principal stakeholders.

Documents

- Official letters and meeting minutes that document communications about allowing access to results of course and program evaluation, feedback from other stakeholders about graduate performance and on the curriculum.

WFME
QUESTIONS ON STANDARDS

Standard 4 questions

- ❖ How are the principle stakeholders within the medical school involved in programme evaluation?
- ❖ To what extent is a wider range of stakeholders involved in the evaluation and development of the programme?

Thank you

