

Standards for Recognition of Foreign Undergraduate Medical Degree

SECTION 3 Data Submission for Programme Recognition (MQA-02 Recognition)	SECTION 2 Criteria and Standards for Programme Recognition
AREA 1	
1. Statement of Objectives of Academic Programme and/ or Learning Outcomes	
1.1.1 Explain how the programme is in line with, and supportive of, the vision, mission, and goals of the medical school and university.	1.1.1. The medical school must: <ul style="list-style-type: none"> ▪ have its programme to be consistent with, and supportive of, the vision, mission, and goals of the medical school. ▪ in its mission, outline the aims and the educational strategy resulting in a competent medical doctor. ▪ have a mission that encompasses the health needs of the community, the needs of the health care delivery system, and other aspects of social accountability.
1.1.2 a) State the programme objectives, and/ or learning outcomes, learning, and teaching strategies, and assessment methods of the programme.	1.1.2 The medical school must: <ul style="list-style-type: none"> ▪ state its programme objectives, and/or outcomes, teaching and learning strategies, and assessment, and ensure alignment among them. ▪ define the programme objectives and/ or learning outcomes that students should exhibit upon graduation in relation to their achievements regarding knowledge, skills, and attitudes; the appropriate foundation for a future career in any branch of medicine; their future roles in the health sector; their commitment to life-long learning; the health needs of the community and the needs of the health care delivery system.
1.1.2 b) Describe the strategies for the attainment of programme objectives or learning outcomes in terms of learning and teaching strategies, and assessment methods.	
1.1.3 Explain how the medical programme fulfills the outcomes below: <ol style="list-style-type: none"> 1. Knowledge and understanding 2. Cognitive skills 3. Functional work skills with focus on: <ol style="list-style-type: none"> a. Practical Skills b. Interpersonal skills 	1.1.3 The programme is mainly connected to the learning outcomes outlined below: <ol style="list-style-type: none"> 1. Knowledge and understanding 2. Cognitive skills 3. Functional work skills with focus on: <ol style="list-style-type: none"> a. Practical Skills

<p>c. Communication skills d. Digital skills e. Numeracy skills f. Leadership, autonomy, and responsibility</p> <p>4. Personal and entrepreneurial skills. 5. Ethics and professionalism.</p>	<p>b. Interpersonal skills c. Communication skills d. Digital skills e. Numeracy skills f. Leadership, autonomy, and responsibility</p> <p>4. Personal and entrepreneurial skills. 5. Ethics and professionalism.</p>
<p>1.1.4 a) How are the programme objectives and/ or learning outcomes related to students' preparedness for housemanship/ internship and postgraduate medical education options upon completion of the programme?</p>	<p>1.1.4 Considering the stated programme objectives and/or learning outcome, the programme must prepare and ensure that the graduates are ready for housemanship/ internship and subsequent postgraduate medical education.</p>
<p>1.2 Programme Development: Process, Content, Structure, and Teaching Learning Methods</p>	
<p>1.2.1 Describe the provisions and practices that indicate the autonomy of the medical school in the design of the curriculum, and its utilisation of the allocated resources.</p>	<p>1.2.1 The medical school must have adequate institutional autonomy to formulate and implement policies for which its faculty/academic staff and administration are responsible, especially regarding the design of the curriculum and the use of the allocated resources necessary for implementation of the curriculum.</p>
<p>1.2.2 Describe the processes to develop and approve the curriculum by the highest academic authority of the medical school.</p>	<p>1.2.2 The medical school must have an appropriate process to develop the curriculum leading to approval by the highest academic authority in the medical school and the relevant regulatory bodies.</p>
<p>1.2.3 a) Who and how are the stakeholders consulted in the development of the curriculum?</p>	<p>1.2.3 The medical school must consult the stakeholders in the development of the curriculum, including educational experts as appropriate.</p>
<p>1.2.3 b) Explain the involvement of educational experts in this curriculum development.</p>	
<p>1.2.4 a) Describe how the curriculum fulfils the requirements of the programme standards and best practices in medical education.</p>	<p>1.2.4 The curriculum must:</p> <ul style="list-style-type: none"> ▪ apply the principles of scientific method, including analytical and critical thinking, medical research methods, and evidence-based medicine. ▪ identify and incorporate aspects of the basic biomedical sciences to create an understanding of scientific knowledge and concepts fundamental to acquiring and applying the clinical sciences. ▪ identify and incorporate aspects of the behavioural sciences, social sciences, medical ethics, and medical laws that are relevant to the practice of medicine.
<p>1.2.4 b) Explain how the following core competencies are achieved in the medical curriculum.</p> <p>Refer to Section 4 of the Standards for Undergraduate Medical Education</p>	
<p>1.2.4 c) Provide a brief description for each course offered in the programme. Please arrange the courses by year and semester as in Table 3.</p>	

No.	Semester/block Year Offered	Name And/ or Code of Course	Credit Value / weeks	Prerequisite/ co-requisite	Name(s) of Academic Staff

- identify and incorporate aspects of the professional skills and attitudes to ensure that students:
- acquires sufficient clinical competency to function effectively as medical house officers after graduation.
- spends a reasonable amount of time during the programme in planned contact with patients in relevant clinical settings.
- participates in health promotion and preventive medicine activities.
- specify the time spent in training across the major clinical disciplines.
- emphasise healthcare economics and include funding frameworks, cost of care, and clinical decisions.

1.2.4 d) Provide the information for each course in a separate document, using the table below where applicable

1.	Name of the course											
2.	Synopsis: (Kindly include details on when the course is conducted, its duration, the training hospitals, the teaching and learning strategies, and the assessment methods used)											
3.	Name(s) of academic staff											
4.	Semester/ block and year offered											
5.	Credit value/ weeks											
6.	Prerequisite/Co-requisite (if any)											
7.	<table border="1"> <thead> <tr> <th>Assessment method</th> <th>Weightage (%)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>		Assessment method	Weightage (%)								
	Assessment method	Weightage (%)										

		Total	100%	
8.	Identify special requirements or resources to deliver the course (e.g., software, nursery, computer lab, simulation room):			
9.	References (include required and further readings, and should be the most current):			
10.	Other additional information:			
1.2.5 Explain the appropriateness of teaching and learning methods applied to achieve the programme objectives and/ or learning outcomes of the programme.				1.2.5 The medical school must: <ul style="list-style-type: none"> ▪ have the appropriate learning and teaching methods relevant to the programme objectives and/or learning outcomes. ▪ ensure that the content, extent, and sequencing of courses and other curricular elements are relevant.
1.2.6 What are the co-curricular activities available to the students of this programme? How do these activities enrich student learning experience and foster personal development and responsibility?				1.2.6 There must be co-curricular activities to enrich student experience and to foster personal development and social responsibility.
1.3 Programme Delivery				
1.3.1 Provide evidence on how the curriculum committee has responsibility and authority for planning, implementing, and reviewing the curriculum with representation of relevant stakeholders.				1.3.1 The medical school must: <ul style="list-style-type: none"> ▪ have a curriculum committee responsible and authorized to plan, implement, and review the curriculum. ▪ in its curriculum committee, ensure representation of staff, students, and other stakeholders.
1.3.2 Show evidence (including those available in the learning management system) that the students are provided with, and briefed on, the current information about the programme, for example, the Student Study Guide, Student Handbook, and Student Project Handbook.				1.3.2 Students must be provided with, and briefed on, current information about (among others) the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies.
1.3.3 a) Provide details of the leadership and the management structure of the programme, including members of the team responsible for the programme (for example, Dean, head of				1.3.3 The medical school must have an appropriate programme leader, such as the Dean, Head of School, or any other suitable designation, and a

the departments, coordinators, etc.). State the manner in which the academic team manages the programme. What are their qualifications, authority, and responsibility?	team of academic staff with adequate qualifications and authority for the effective delivery of the programme.
1.3.3 b) Does the programme team have access to adequate resources? Provide evidence.	
1.3.4 Describe how the medical school ensures that its curriculum is designed based on recent advances in medical education and the availability of its educational resources.	1.3.4 The medical school must design the curriculum in accordance with recent advances in medical education and the availability of educational resources
1.3.5 Describe the medical school's initiatives to encourage innovations in teaching, learning, and assessment.	1.3.5 The medical school must encourage innovations in teaching, learning, and assessment.
1.3.6 State how the medical school obtains feedback to improve the delivery of the programme outcomes. Provide evidence.	1.3.6 The medical school must obtain regular feedback from stakeholders to improve the delivery of the programme outcomes.
AREA 2	
2.1 Relationship between Assessment and Learning Outcomes	
2.1.1 Explain how assessment principles, methods, and practices are aligned to the achievement of learning outcomes of the programme.	2.1.1 The medical school must define the assessment principles, methods, and practices used for assessment of its students, and they must be aligned to the learning outcomes of the programme.
2.1.2 Describe how the alignment between assessment and learning outcomes is regularly reviewed to ensure its effectiveness (please provide policy on the review, if any). Provide evidence.	2.1.2 The alignment between assessment and the learning outcomes in the programme must be systematically and regularly reviewed to ensure its effectiveness.
2.2 Assessment Methods	
2.2.1 a) Describe how a variety of assessment methods and tools are used in assessing programme learning outcomes and competencies.	2.2.1 The medical school must ensure: <ul style="list-style-type: none"> ▪ that there is a variety of methods and tools appropriate for assessing learning outcomes and competencies. ▪ It assesses medical students against the learning outcomes at appropriate points and makes sure they achieve all outcomes upon graduation. ▪ that students who graduate have demonstrated competence across all outcomes. ▪ that the assessments are open to external scrutiny using a structured format.
2.2.1 b) Show evidence that the variety of the assessment methods is valid to measure the learning outcomes and competencies. Provide an assessment blueprint.	
2.2.1 c) Show evidence of the utilisation of both summative and formative assessment methods within the programme.	
2.2.1 d) Show evidence of external review of assessment practices.	

	<p><i>Annotation: A variety of methods and tools: Medical schools must use valid and reliable assessment tools to assess different learning domains. It is best demonstrated by the assessment blueprint.</i></p> <p><i>Annotation: External expertise: Content expert in a particular field who is external to the medical school.</i></p>
2.2.2 a) Explain how the medical school ensures the validity, reliability, integrity, currency, and fairness of student assessment over time and across sites (if applicable).	2.2.2 There must be mechanisms to ensure and periodically review the assessment system and establish the validity, reliability, integrity, and fairness of the assessment methods and tools.
2.2.2 b) Indicate the authority and processes for verification and moderation of summative assessments.	
2.2.2 c) What guidelines and mechanisms are in place to address assessment misconduct among students (plagiarism, cheating, etc.)?	
2.2.2 d) Are the assessment methods reviewed periodically? Describe the review of the assessment methods in the programme conducted (e.g., the existence of a permanent review committee on assessment and consultation with external assessors and examiners, students, alumni, and other relevant stakeholders).	
2.2.3 a) Describe the documentation of assessment procedures, methods, and regulations, and how it is communicated to the students. It should include information on frequency, weightage, criteria, grading, and how appeals are dealt with.	2.2.3 The medical school must document and communicate to students the frequency, methods, and criteria of student assessment —including the grading system, the criteria for setting pass marks, grade boundaries, rules of progression, the number of allowed retakes, and appeal policies.
2.2.3 b) Explain how the department provides feedback to the students on their academic performance to ensure that they have sufficient time to undertake remedial measures.	
2.2.3 c) How are results made available to the students for purposes of feedback on performance, review, and corrective measures?	
2.2.3 d) Describe the progression criteria.	
2.2.4 Explain the processes in making changes to the assessment method. How are the changes made known to the students?	2.2.4 Changes to student assessment methods must follow established procedures and regulations and be communicated to students prior to their implementation.
2.3 Management of Student Assessment	
2.3.1 Explain the roles, rights, and autonomy of the medical school and the academic staff in the management of student assessment.	2.3.1 The medical school and its academic staff must have an adequate level of autonomy in the management of student assessment.

2.3.2 Describe how the integrity of student assessment documents, as well as academic records, is ensured. Procedures and the consequences of a security breach must also be documented and communicated.	2.3.2 There must be mechanisms to ensure the security of assessment documents and records.
2.3.3 Explain how and when continuous and final assessment results are made available to students.	2.3.3 The assessment results must be communicated to students before the commencement of a new academic session.
2.3.4 Provide information on the appeal procedure. What are the policies or guidelines on students' appeals against assessment results?	2.3.4 The HEP must have a policy or guidelines for students to appeal their results.
2.3.5 Explain how the medical school periodically reviews the management of student assessment and measures it takes to address the issues highlighted by the review.	2.3.5 The medical school must periodically review its student assessment system, act on the findings of the review, and incorporate new assessment methods where appropriate.
AREA 3	
3.1 Student Selection	
3.1.1 a) State the criteria and the mechanisms for student selection, including that of transfer students and any other additional requirements, for example, those in relation to students with special needs.	3.1.1 The programme must have clear criteria and processes for student selection (including that of transfer students), and these must adhere to prevailing guidelines on minimum entry requirements issued by the relevant regulatory bodies.
3.1.1 b) Provide evidence that the students selected fulfil the admission policies that are consistent with applicable requirements.	
3.1.1 c) Describe the admission mechanisms and criteria for students with other equivalent qualifications (where applicable). Provide entry criteria.	
3.1.2 a) Explain how the selection criteria are accessible to the public.	3.1.2 The criteria and processes of student selection must be transparent, objective, and comply with regulatory requirements.
3.1.2 b) If other additional selection criteria are utilised, describe them.	
3.1.2 c) Show evidence that the admission policy and mechanisms are free from unfair discrimination and bias.	
3.1.3 a) Provide information on student intake for each session since commencement and the ratio of the applicants to intake.	3.1.3 Student enrolment must comply with the requirements of the relevant regulatory bodies and within the capacity of the medical school to effectively deliver the programme.
3.1.3 b) Describe how the size of student intake is determined in relation to the capacity of the medical school and explain the mechanisms for adjustments, taking into account the admission of visiting, elective, exchange, and transfer students.	
3.1.4 Describe the policies, mechanisms, and practices for appeal on student selection, if applicable.	3.1.4 The medical school must:

	<ul style="list-style-type: none"> ▪ state the relationship between the selection of students and the mission of the school, the educational programme, and the desired qualities of graduates. ▪ periodically review the admission policy. ▪ have a system for appeal of admission decisions.
3.1.5 State the support provided for those who are selected but need additional developmental and remedial assistance.	3.1.5 The medical school must offer appropriate developmental or remedial support to assist students, including incoming transfer students who are in need.
3.2 Articulation and Transfer	
3.2.1 Describe how the medical school facilitates student mobility, exchanges, and transfers, nationally and internationally.	3.2.1 The medical school must have well-defined policies and mechanisms to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border.
3.2.2 Describe how students accepted for transfer demonstrate comparable achievements in their previous programme of study (Evidence can be in the form of mapping of learning outcomes and assessment of competencies of the transferring medical school).	3.2.2 The medical school must ensure that the incoming transfer students have the capacity to follow the programme and comply with all relevant regulations successfully.
3.3 Student Support Services	
3.3.1 What support services are available to students? What additional support arrangements are provided by different organisations that are accessible to students?	3.3.1 Students must have access to appropriate and adequate support services, such as physical, social, religious, financial, recreational, and online facilities, academic and non-academic counselling, and health services.
3.3.2 a) Describe the qualifications and experience, roles, and responsibilities of staff in charge of student support services.	3.3.2 There must be a designated administrative unit, with a distinct organisational structure in the HEP, responsible for planning and implementing student support services and adequately staffed by individuals who have the appropriate experience.
3.3.2 b) Describe the organisation and management of the student support services.	
3.3.3 Describe the induction process, focusing on orientation programmes for international students, students with special needs, and students requiring help.	3.3.3 An effective induction/orientation to the programme and HEP support services must be made available to new students, with appropriate support given to international students, students with special needs, and students requiring help.
3.3.4 a) Describe the provision of the academic, non-academic, and career counselling services to students.	3.3.4 Academic, non-academic, and career counselling must be provided by adequate and qualified staff.

3.3.4 b) How are the effectiveness of the academic, non-academic, and career counselling services measured, and the progress of those who seek their services monitored? What plans are there to improve services, including enhancing counsellors' skills and professionalism?	
3.3.5 Describe the mechanisms that exist to identify and assist students who require academic, spiritual, psychological, and social support.	3.3.5 There must be mechanisms that actively identify and assist students who require academic, spiritual, psychological, and social support.
3.3.6 Describe the processes and procedures in handling students' disciplinary cases in academic and non-academic settings.	3.3.6 The medical school must have clearly defined and documented processes and procedures in handling student disciplinary cases in academic and non-academic settings.
3.3.7 What mechanism is available for students to complain, voice grievances, seek counselling, and obtain resolution on academic and non-academic matters confidentially?	3.3.7 The medical school must: <ul style="list-style-type: none"> ▪ have an effective mechanism for students to voice their grievances and seek counselling and resolution on academic and non-academic matters. ▪ ensure confidentiality regarding counselling and support.
3.4 Student Representation and Participation	
3.4.1 Describe the communication of policy/ guideline and processes in place for active student engagement in areas that affect their interest and welfare?	3.4.1 There must be well-disseminated policies/ guidelines and processes for active student engagement, especially in areas that affect their interest and welfare.
3.4.2 Explain and show evidence of student representation and organisation at the institutional and medical school levels.	3.4.2 There must be adequate student representation and organisation at the institutional and medical school levels.
3.4.3 a) Describe the medical school facilitation for students to develop linkages with external stakeholders?	3.4.3 Students must be facilitated to develop linkages with external stakeholders and to participate in activities to gain managerial, entrepreneurial, and leadership skills in preparation for medical practice.
3.4.3 b) Explain how the medical school facilitates students to gain managerial, entrepreneurial, and leadership skills in preparation for the workplace?	
3.4.4 Explain how the medical school facilitates student activities and organisations that encourage character building, inculcate a sense of belonging and social responsibility, as a change advocate, and promote active citizenship?	3.4.4 Student activities and organisations must be facilitated to encourage character building, inculcate a sense of belonging and social responsibility, be a change advocate, and promote active citizenship.
3.5 Alumni	
3.5.1 a) Describe the linkages established by the Medical School with the alumni.	3.5.1 The medical school must foster active linkages with alumni to develop, review, and continuously improve the programme.
3.5.1 b) Describe the role of the alumni in the development, review, and continuous improvement of the programme.	
AREA 4	

4.1 Recruitment and Management	
4.1.1 a) Describe how the medical school's academic manpower planning is consistent with the medical school's policies and programme requirements.	<p>4.1.1 The medical school must have a clearly defined plan for its academic staffing needs consistent with institutional policies and programme requirements:</p> <ul style="list-style-type: none"> ▪ that outlines the type, responsibilities, and the balance of academic staff/faculty numbers between the basic biomedical sciences and the clinical sciences to ensure the effective delivery of the programme. There must be an appropriate balance between medical and non-medical academic staff, especially in the basic sciences. ▪ that addresses criteria for scientific, educational, and clinical merit, including the balance between teaching, research, and service functions. ▪ that specifies and monitors the responsibilities of its academic staff/faculty of the basic biomedical sciences and the clinical sciences.
4.1.1 b) Explain how the balance between the basic biomedical sciences and the clinical sciences ensures an appropriate balance between teaching, research, and service functions.	
4.1.2 a) State the policy, criteria, procedures, terms, and conditions of service for the recruitment of academic staff.	<p>4.1.2 The medical school must have a clear and documented academic staff selection and recruitment policy where the criteria for selection are based primarily on academic merit, clinical competence and/or relevant experience and bona fide qualification.</p> <p><i>Annotation: Appendix 7 can be used as a guide to estimate the adequacy of teaching staff.</i></p>
4.1.2 b) Explain the due diligence exercised by the department in ensuring that the qualifications of academic staff are from bona fide institutions.	
4.1.3 Provide data on the staff–student ratio appropriate to the teaching-learning methods and consistent with the programme requirements. (Kindly ensure the same table as 3.1.3)	<p>4.1.3 The staff-student ratio for the programme must be appropriate to the teaching-learning methods employed and relevant to the various curricular components.</p> <p><i>Annotation: Teaching load will be determined by respective institutions. The teacher-student ratio in Appendix 8 can be utilised as guidance.</i></p>
4.1.4 a) Provide summary information on every academic staff member involved in conducting the programme in Table 5.	4.1.4 The medical school must have adequate and qualified academic staff responsible for implementing the programme.

Table 5: Summary information on academic staff involved in the programme

No.	Name and designation of academic staff	Appointment status (full-time, part-time, contract, etc.)	Nationality	Courses taught in this programme	Courses taught in other programmes	Academic qualifications		Research focus areas (Bachelor's and above)	Past work experience		
						Qualifications, Field of Specialisation, Year of Award	Name of Awarding Institution and country		Positions held	Employer	Years of Service (Start and End)
1.											
2.											
3.											
4.											

Annotation: It is mandated that clinical staff be registered with the local medical regulatory body and practice in affiliated hospitals. The teacher-student ratio (1:8) can be used as guidance.

4.1.4 b) Provide Curriculum Vitae of each academic staff teaching in this programme containing the following:

- i. Name
- ii. Academic Qualifications
- iii. Full Registration number
- iv. Current Professional Membership
- v. Current Teaching and Administrative responsibilities
- vi. Previous Employment
- vii. Conferences and Training
- viii. Research and Publications
- ix. Consultancy
- x. Community Service

xi. Other Relevant Information	
4.1.4 c) Provide information on turnover of academic staff for the programme.	
4.1.5 Describe how the department ensures equitable distribution of duties and responsibilities among the academic staff.	4.1.5 The medical school must have a policy or document that ensures an equitable distribution of responsibilities and workload among the academic staff in terms of teaching, research, clinical service, and management roles.
4.1.6 Describe how the recruitment policy or document for the medical programme seeks diversity among the academic staff.	4.1.6 The recruitment policy or document for the medical programme must seek diversity among the academic staff in terms of qualifications, experience, and background.
4.1.7 a) State the policies, procedures, and criteria (including involvement in professional, academic, and other relevant activities, at national and international levels) for appraising and specialized academic staff.	4.1.7 The medical school must have policies and procedures for the recognition of staff performance through promotion, salary increment, or other incentives that are clear, transparent and based on merit. These policies and procedures must be communicated to staff.
4.1.7 b) How is the above information made known to the academic staff?	
4.1.8 Describe the nature and extent of the national and international linkages to enhance teaching and learning in the programme.	4.1.8 The medical school must establish national and international linkages for the exchange of ideas, experience, and best practices to enhance teaching and learning in the programme.
4.2. Service and Development	
4.2.1 Provide information on the departmental policy on service, development, and appraisal of the academic staff.	4.2.1 The medical school must have policies supporting the professional development of the academic staff that ensure a balance of capacity between teaching, research, and service functions.
4.2.2 How does the department ensure that the academic staff are given opportunities to focus on their respective areas of expertise, such as curriculum development, curriculum delivery, academic supervision of students, research and writing, scholarly and consultancy activities, community engagement, and academically related administrative duties?	4.2.2 The medical school must provide opportunities for academic staff to focus on their respective areas of expertise and specialization.
4.2.3 a) State the medical school policies on conflict of interest and professional conduct of academic staff.	4.2.3 The medical school must have clear policies on conflict of interest and professional conduct, including procedures for handling disciplinary cases among academic staff.
4.2.3 b) State the medical school procedures for handling disciplinary cases.	

4.2.4 Describe the mechanisms and processes for periodic student evaluation of the academic staff. Indicate the frequency of this evaluation exercise. Show how this evaluation is taken into account for quality improvement.	4.2.4 The medical school must implement mechanisms and processes for regular student evaluation of the academic staff for continuous quality improvement.
4.2.5 a) State the policies for training, professional development, and career advancement (e.g., study leave, sabbatical, advanced training, specialized courses, retooling, etc.) of the academic staff.	4.2.5 The medical school must have a continuous professional development programme for its staff.
4.2.5 b) Describe the mentoring system or formative guidance for new academic staff.	
4.2.6 Describe the opportunities available to academic staff to obtain professional qualifications and to participate in professional, academic, and other relevant activities at national and international levels. How does this participation enhance the teaching and learning experience?	4.2.6 The medical school must facilitate opportunities for academic staff to participate in professional, academic, and other relevant activities, at national and international levels, to obtain professional qualifications to enhance the teaching-learning experience.
4.2.7 Describe how the medical school encourages and facilitates academic staff in community and industry engagement activities. Describe how such activities are rewarded	4.2.7 The medical school must encourage and facilitate its academic staff to engage actively in community services.

AREA 5

5.1 Physical Facilities																								
5.1.1 a) List the physical facilities required for the programme in Table 6.	5.1.1 The medical school must have sufficient and appropriate physical facilities and educational resources to ensure that the curriculum can be delivered adequately, including facilities for practical and clinical training.																							
<p style="text-align: center;">Table 6: List of physical facilities required for the programme</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>No</th> <th>Facilities</th> <th>No.</th> <th>Capacity</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Lecture Halls</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>Tutorial Rooms</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>Discussion Rooms</td> <td></td> <td></td> </tr> <tr> <td rowspan="2">4</td> <td>Laboratories and Workshops</td> <td></td> <td></td> </tr> <tr> <td>- IT lab</td> <td></td> <td></td> </tr> </tbody> </table>		No	Facilities	No.	Capacity	1	Lecture Halls			2	Tutorial Rooms			3	Discussion Rooms			4	Laboratories and Workshops			- IT lab		
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<p><i>Annotation: The number of students who can be enrolled will be determined by the number of available teaching beds, at a ratio of 1 student to 5 beds. Hence, for a faculty that admits 150 students per year, the total number of teaching beds must be at least 750.</i></p>																								

	- Science lab		
	-Moot court		
	-Clinical lab		
	-Others		
5	Library and Information Centres		
	Learning Support Centres		
6	Learning Resources Support		
7	Student Social Spaces		
8	Other Facilities, including ICT-related facilities		

5.1.1 b) Describe and assess the adequacy of the physical facilities and equipment in accordance with student numbers and group sizes (e.g., clinical skill lab and laboratories) as well as human resources (e.g., laboratory professionals and technicians).

5.1.1 c) Provide information on the clinical and practical facilities for programmes that require such facilities. State the location and provide agreements if facilities are provided by other parties/hospital and clinics.																				
5.1.1 d) Provide information on scheduling/time tabling arrangement of clinical training if the hospital is used by more than one medical school.																				
5.1.1 e) How are these physical facilities user-friendly to those with special needs? Provide a copy of any technical standards that have been deployed for students with special needs.																				
5.1.2 Show that the physical facilities comply with the relevant laws and regulations, including issues of licensing. Provide information on how these processes are regularly monitored and audited.	5.1.2 The physical facilities must comply with the relevant laws and regulations and ensure a teaching-learning environment that is safe for staff, students, patients, and their relatives.																			
5.1.3 a) Explain the database system used in the library and resource centre.	5.1.3 The library or resource centre must have adequate and up-to-date reference materials and qualified staff that meet the needs of the programme and research amongst academic staff and students.																			
5.1.3 b) State the number of staff in the library and resource centre and their qualifications.																				
5.1.3 c) Describe resource sharing and access mechanisms that are available to extend the library's capabilities. Comment on the extent of use of these facilities by academic staff and students. Comment on the adequacy of the library to support the programme.																				
5.1.3 d) State the number of reference materials related to the programme in Table 7.																				
Table 7: Reference materials supporting the programme																				
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<p>5.1.4 a) Describe how the medical school maintains, reviews, and improves the adequacy, currency, and quality of its educational resources and the role of the medical school in these processes.</p>	<p>5.1.4 The educational resources, services, and facilities must be maintained and periodically reviewed to improve the quality and appropriateness.</p>												
<p>5.1.4 b) Provide the information on, and provision for, the maintenance of the physical learning facilities and educational resources.</p>													
<p>5.1.5 a) Describe the policy on ethical use of information and communication technology, including social media.</p>	<p>5.1.5 The medical school must:</p> <ul style="list-style-type: none"> ▪ have a clear policy on the ethical use of information and communication technology. 												
<p>5.1.5 b) Provide information on the availability and accessibility of web-based or other electronic media to students and staff.</p>	<ul style="list-style-type: none"> ▪ ensure access to web-based or other electronic media. 												
<p>5.2 Research and Development</p>													
<p>5.2.1 a) Describe the policies, facilities, and budget allocation available to support research.</p>	<p>5.2.1 The medical school must have a research policy with adequate facilities and resources to sustain it.</p>												
<p>5.2.1 b) Describe the research activities of the medical school and the academic staff involved in them.</p>													
<p>5.2.2 a) Describe how the medical school encourages interaction between research and learning. Show the link between the medical school's policy on research and the teaching-learning activities in the medical school.</p>	<p>5.2.2 The interaction between research and learning must be reflected in the curriculum, influence current teaching, and encourage and prepare students for engagement in research, scholarship, and development.</p>												
<p>5.2.2 b) State any initiatives taken by the medical school to engage students in research.</p>													
<p>5.2.3 Describe the processes by which the medical school reviews its research resources and facilities and the steps taken to enhance its research capabilities and environment.</p>	<p>5.2.3 The medical school must periodically review its research resources and facilities and take appropriate action to enhance its research capabilities and to promote a conducive research environment.</p>												

5.3 Financial Resources	
5.3.1 Explain the financial viability and sustainability for the last three consecutive years with certified supporting documents.	5.3.1 The medical school must demonstrate financial viability and sustainability for the programme.
5.3.2 Demonstrate that the medical school has clear procedures to ensure that its financial resources are sufficient and managed efficiently.	5.3.2 The medical school must have clear procedures to ensure that its financial resources are sufficient and managed efficiently.
5.3.3 a) Indicate the responsibilities and lines of authority in terms of budgeting and resource allocation in the medical school.	5.3.3 The medical school must have a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of the Medical School.
5.3.3 b) Describe the medical school's financial planning for the programme in the next two years.	
5.4 Educational Expertise	
5.4.1 a) Describe the clear policy on the use of educational expertise in curriculum development and development of teaching-learning and assessment methods.	5.4.1 The medical school must: <ul style="list-style-type: none"> ▪ have access to educational expertise. ▪ have a clear policy on the use of educational expertise in curriculum development and development of teaching-learning and assessment methods. ▪ demonstrate evidence of the use of in-house or external educational expertise in staff development.
5.4.1 b) Provide evidence on the use of in-house or external educational expertise in staff development.	
AREA 6: PROGRAMME MANAGEMENT	
6.1 Programme Management	
6.1.1 a) The medical school must define its management structure, functions, and decision-making components, including their relationships, and ensure these are clearly communicated to all stakeholders.	6.1.1 The medical school must define its management structure and functions, including its relationship with the Higher Education Provider (HEP), and ensure the transparency of its governance.
6.1.1 b) The medical school must establish major committees with defined Terms of Reference (TOR) and scheduled meetings.	
6.1.2 The medical school must have policies and procedures to ensure that accurate, relevant, and current information about the programme is publicly accessible, particularly to prospective students.	6.1.2 The medical school must provide accurate, relevant, and timely information about the programme that is publicly accessible, particularly to prospective students.
6.1.3 a) The medical school must implement policies and mechanisms for the regular review of its structures, functions, and core activities to ensure Continuous Quality Improvement (CQI), under the oversight of designated responsible personnel.	6.1.3 The medical school must have policies, procedures, and mechanisms for the regular review and updating of its management structures,

6.1.3 b) The medical school must demonstrate substantial improvements resulting from these mechanisms.	functions, strategies, and core activities to ensure continuous quality improvement.
6.1.4 The medical school must demonstrate, through formal documentation (such as terms of reference and minutes), that its academic board functions as an effective decision-making body with adequate autonomy to implement the curriculum.	6.1.4 The medical school must have an effective decision-making body with sufficient autonomy to implement the curriculum.
6.1.5 The medical school must have formalized agreements between the HEP and its different campuses or partner institutions to ensure functional integration and the comparability of educational quality.	6.1.5 For programmes conducted across different campuses or with partner institutions, the medical school must establish mechanisms to ensure functional integration and the comparability of educational quality.
6.1.6 The medical school must:	6.1.6 The medical school must:
a) demonstrate constructive interaction with the health sector, government, and relevant societal sectors;	<ul style="list-style-type: none"> ▪ maintain constructive interaction with the health sector, government, and related societal sectors; and ▪ conduct internal and external consultations, including market needs analysis (for new programmes) and graduate employability analysis.
b) provide evidence of internal and external consultations; and	
c) for new programmes, substantiate the market need.	
6.2 Program Leadership	
6.2.1 The medical school must clearly define the appointment criteria and scope of duties for the programme leader.	6.2.1 The medical school must clearly state the appointment criteria and the responsibilities of the programme leader.
6.2.2 The medical school must have a designated programme leader and clearly specify the required qualifications, experience, tenure, and responsibilities of the position.	<p>6.2.2 The programme leader must preferably be a medical practitioner, qualified by education and experience to provide leadership in medical education, scholarly activity, and research.</p> <p><i>Annotation:</i> <i>The programme leader acts as the chief executive of the medical school. To fulfil their responsibilities, the leader must have direct access to the highest institutional authority (e.g., Vice Chancellor or President) and other key university officials. This position typically corresponds to the Dean or Head of School.</i></p>
6.2.3 The medical school must establish clear mechanisms for communication and decision-making between the programme leader, the medical school, and the HEP regarding staff recruitment, student admission, resource allocation, and strategic planning.	6.2.3 The medical school must establish mechanisms for communication between the programme leader, the medical school, and the HEP regarding staff recruitment, student admission, resource allocation, and decision-making processes.

6.3 Administrative Staff	
6.3.1 a) The medical school must have a defined administrative staffing structure that supports the programme.	6.3.1 The medical school must have a sufficient number of qualified administrative staff to support the implementation of the programme and to ensure effective management and resource deployment.
6.3.1 b) The number of administrative staff must be determined by the operational needs of the programme, based on clear recruitment policies and terms of service.	
6.3.1 c) The medical school must document that the available administrative staff are sufficient in number and appropriately qualified. (Table 8)	
6.3.2 The medical school must implement mechanisms for the regular monitoring and performance appraisal of administrative staff.	6.3.2 The medical school must conduct regular performance reviews of the administrative staff.
6.3.3 The medical school must have a professional development scheme for administrative staff that addresses the current and future needs of the programme.	6.3.3 The medical school must have an appropriate training scheme for the professional advancement of administrative staff and to meet the specific needs of the programme.
6.4 Academic Records	
6.4.1 a) The medical school must have established policies regarding the nature, content, and security of student and academic staff records, ensuring alignment with HEP policies.	6.4.1 The medical school must have appropriate policies and practices regarding the nature, content, and security of student and academic staff records.
6.4.1 b) The medical school must implement protocols for the retention, preservation, and disposal of these records.	
6.4.2 The medical school must maintain student records regarding admission, performance, completion, and graduation in a systematic manner that ensures their preservation for future verification.	6.4.2 The medical school must maintain and preserve student records relating to admission, performance, completion, and graduation systematically and practically.
6.4.3 The medical school must ensure the protection of individual privacy and the confidentiality of records in compliance with applicable laws.	6.4.3 The medical school must implement policies on the protection of individual privacy and the confidentiality of records and comply with relevant national laws.
6.4.4 The medical school must regularly review its record security policies and safety systems to address technological changes and implement continuous improvements.	6.4.4 The medical school must continually review its policies on the security and confidentiality of records, including those related to the use of electronic technologies and safety systems.
AREA 7	
7.1 Mechanisms for Programme Monitoring, Review and Continual Quality Improvement	

7.1.1 The medical school must describe the policies and mechanisms for the regular monitoring and review of the programme	7.1.1 The medical school must have established policies and appropriate mechanisms for regular programme monitoring and review
7.1.2 The medical school must describe the roles and responsibilities of the designated Quality Assurance (QA) unit responsible for internal quality assurance.	7.1.2 The medical school must have a designated Quality Assurance (QA) unit for internal quality assurance of the medical school to work collaboratively with the central QA unit of the Higher Education Provider (HEP).
7.1.3 a) The medical school must describe the structure and procedures of the internal programme monitoring and review committee	7.1.3 The medical school must have procedures for regularly reviewing and updating the programme's structure, content, outcomes, assessment, and learning environment.
7.1.3 b) The medical school must describe the frequency and mechanisms for monitoring	
7.1.3 c) The medical school must describe how feedback is utilized for continuous improvement	
7.1.3 d) The medical school must explain how the programme keeps abreast with scientific and technological developments.	
7.1.4 The medical school must describe the involvement of relevant stakeholders in the programme review and show how their views are taken into consideration.	7.1.4 The medical school's review system must systematically seek, analyse, and respond to academic staff, student, alumni, and other stakeholders' feedback in relation to the mission and intended educational outcomes, curriculum, and provision of resources.
7.1.5 The medical school must explain the mechanism to inform stakeholders of assessment results and how their views are considered for future programme development.	7.1.5 The medical school must communicate the programme review report to relevant stakeholders.
7.1.6 The medical school must explain how data on student performance, progression, attrition, graduation, and employability are analyzed for Continuous Quality Improvement (CQI) and provide evidence.	7.1.6 The medical school must: <ul style="list-style-type: none"> ▪ implement Continuous Quality Improvement (CQI) based on the analysis of various aspects of student performance, progression, attrition, graduation, and employability. ▪ adapt student admission policies, selection methods, and student intake to changing expectations and circumstances, institutional resources, and the requirements of the educational programme.

<p>7.1.7 The medical school must describe how the findings of the review are presented to the Higher Education Provider (HEP) and the subsequent actions taken.</p>	<p>7.1.7 The findings of a programme review must be reported to the highest institutional authority for decision- making and further action.</p>
<p>7.1.8 The medical school must explain the integral link between quality assurance processes and the achievement of the institutional purpose.</p>	<p>7.1.8 The medical school must ensure that its quality assurance processes are integrally linked to the achievement of the institutional goals and purpose.</p>