

## 4. PROGRAMME EVALUATION

### 4.1 MECHANISMS FOR PROGRAMME MONITORING AND EVALUATION

**Basic standards:** The medical college **must**

- 4.1.1. have a program of routine curriculum monitoring of processes and outcomes.
- 4.1.2. establish and apply a mechanism for program evaluation that
  - 4.1.2.1. addresses the curriculum and its main components.
  - 4.1.2.2. addresses student progress.
  - 4.1.2.3. identifies and addresses concerns.
- 4.1.3. ensure that relevant results of evaluation influence the curriculum.

**Quality development standards:** The medical college **should**

- 4.1.4. periodically evaluate the program by comprehensively addressing
  - 4.1.4.1. the context of the educational process.
  - 4.1.4.2. the specific components of the curriculum.
  - 4.1.4.3. the long-term acquired outcomes.
  - 4.1.4.4. its social accountability

#### **Annotations:**

- ❖ *Program 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. The collection of data is often part of the administrative procedures in connection with admission of students, assessment and graduation.
- ❖ *Program evaluation* is the process of systematic gathering of information to judge the effectiveness and adequacy of the institution and its program. 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 program or core aspects of the program in relation to the mission and the curriculum, including the intended educational outcomes. 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.
- ❖ *Main components of the curriculum* would include the curriculum model (cf.2.1.1), curriculum structure, composition and duration (cf. 2.6) and the use of core and optional parts (cf. 2.6.4).
- ❖ *Identified concerns* would include insufficient fulfillment of intended educational outcomes. It would use measures of and information about educational outcomes, including identified weaknesses and problems, as feedback for interventions and plans for corrective action, program development and curricular improvements; this requires safe and supporting environment for feedback by teachers and students.
- ❖ *The context of the educational process* would include the organization and resources as well as the learning environment and culture of the medical college.
- ❖ *Specific components of the curriculum* would include course description, teaching and learning methods, clinical rotations and assessment methods.
- ❖ *Social accountability*, cf. 1.1, annotation.

### 4.2 TEACHER AND STUDENT FEEDBACK

**Basic standard:** The medical college **must**

4.2.1 systematically seek, analyze and respond to teacher and student feedback.

**Quality development standard:** The medical college **should**

4.2.2. use feedback results for program development.

**Annotation:**

- ❖ *Feedback* would include students' reports and other information about the processes and products of the educational programs. It would also include information about malpractice or inappropriate conduct by teachers or students with or without legal consequences.

## 4.3 PERFORMANCE OF STUDENTS AND GRADUATES

**Basic standards:** The medical college **must**

4.3.1 analyse performance of cohorts of students and graduates in relation to

4.3.1.1. mission and intended educational outcomes.

4.3.1.2. provision of resources.

**Quality development standards:** The medical college **should**

4.3.2. analyse performance of cohorts of students and graduates in relation to student

4.3.2.1. background and conditions.

4.3.2.2. entrance qualifications.

7.3.3. use the analysis of student performance to provide feedback to the committees responsible for

7.3.3.1. student selection.

7.3.3.2. curriculum planning.

7.3.3.3. student counseling.

**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. It would also include interviews of students frequently repeating courses, and exit interviews with students who leave the program.
- ❖ 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 program uniformity, provide a basis for curriculum improvement.
- ❖ *Student background and conditions* would include social, economic and cultural circumstances.

## 4.4 INVOLVEMENT OF STAKEHOLDERS

**Basic standard:** The medical college **must**

4.4.1. in its program monitoring and evaluation activities involve its principal stakeholders.

**Quality development standards:** The medical college **should**

4.4.2. for other stakeholders

4.4.2.1. allow access to results of course and program evaluation.

4.4.2.2. seek their feedback on the performance of graduates.

4.4.2.3. seek their feedback on the curriculum.

**Annotations:**

- ❖ *Principal stakeholders*, cf. 1.4, annotation.
- ❖ *Other stakeholders*, cf. 1.4, annotation.