

PAKISTAN MEDICAL & DENTAL COUNCIL



Orange proforma for Academic Ranking of medical colleges

Section 1.1:

Academic Ranking of medical colleges (ARMC):

Ranking Criteria and Weights

Medical Colleges can be ranked by several indicators of academic or research performance, including alumni and staff winning Nobel Prizes, foreign faculty positions, highly cited research papers published in NEJM, BMJ, papers indexed in major citation indices for calculated impact factor on research gate, and the per capita academic performance of an institution. If the distribution of data for any indicator is found to have significant distortion or skew; standard statistical techniques will be used to adjust the indicator as required. The maximum score an institution can have is 250.

Indicators and Weights for ARMC

| Criteria | Indicator | Code | Weight (Marks) | Score/ Marks obtained |
|----------------------|--|--------|----------------|-----------------------|
| Quality of Education | Alumni of an institution working as Professor, Associate professor/Assistant professor at an internationally accredited medical school of USA , Canada, Western Europe or Australia/Newzealand | Alumni | 20%(50) | |
| Quality of Faculty | Staff with visiting faculty position at an internationally accredited medical school of USA, Canada, Western Europe or Australia/Newzealand | Award | 10%(25) | |
| | Highly cited researchers -Research gate impact factor of the each faculty member | HiCi | 20%(50) | |
| Research | Papers published in NEJM, BMJ | N&B | 20%(50) | |

| | | | | |
|------------------------|---|-----|-----------|--|
| Output | Papers indexed in Science Citation Index-expanded, PubMed | PUB | 20%(50) | |
| Per Capita Performance | Per capita academic performance of an institution | PCP | 10%(25) | |
| Total | | | 100%(250) | |

Definition of Indicators

| Indicator | Definition |
|-----------------------|---|
| Alumni 50 | This parameter takes into account the total number of the alumni of an institution working as a Professor or Assistant/Associate professors at any internationally accredited medical school of USA, Canada, Western Europe or Australia/Newzealand. Alumni are defined as those who obtain bachelor's, master's or doctoral degrees from the institution. Different weights are set according to the position held. For each alumnus holding Professorial title at medical school of USA, Canada, Western Europe or Australia/Newzealand, the institution will obtain Five (5) points and (2.5) for the post of Assistant/Associate Professor. If a person has obtains more than one degrees from an institution, he is considered as a single alumnus and scored for the institution once only. |
| Award 25 | The total number of the staff who have “active” verified foreign faculty/visiting faculty position at any internationally accredited medical school of USA, Canada, Western Europe or Australia/Newzealand. The institution will obtain Five (5) points for each such position. If a single faculty member holds more than one faculty/visiting faculty position, each additional position will be credited Two (2) points in addition to his original five points to a maximum of 9 points. |
| HiCi 50 | The number of Highly Cited Researchers in medical field only. The impact factor of each “FULL TIME” faculty member is taken from his/her research gate index. FULL time faculty is defined as a faculty member that has put in at least six hours teaching per day for 35 weeks (245 days) a year. Visiting faculty or part-time faculty score is not included in here. Impact factor as shown at the Research gate, of all the members of the Full Time Faculty is added up and divided by 12.5 to calculate the score to the maximum of 50 |
| N&B 50 | The number of papers published in NEJM or BMJ during last five years. Each publication will carry 5 marks. It will be weighted to distinguish the order of author affiliation, a weight of 100% is assigned for corresponding author affiliation, 50% for first author affiliation (second author affiliation if the first author affiliation is the same as corresponding author affiliation), 25% for the next author affiliation, and 10% for other author affiliations. Only publications of 'Original Article' are considered. |

| | |
|------------------------|--|
| PUB 50 | <p>Total number of papers indexed in PubMed under “affiliation” subsection for that particular medical institution during last five years. Only publications of 'Original Article' are considered. Each citation will carry 0.25 marks. It will be weighted to distinguish the order of author affiliation, a weight of 100% is assigned for corresponding author affiliation, 50% for first author affiliation (second author affiliation if the first author affiliation is the same as corresponding author affiliation), 25% for the next author affiliation, and 10% for other author affiliations. Only publications of 'Original Article' are considered.</p> |
| PCP 25 | <p>It is a measure of out-put per faculty member to compensate for a small faculty producing high impact papers and vice versa. The weighted scores of the above five indicators divided by the number of full-time equivalent academic staff (Professor+Associateprofessor+Assistantprofessor+Demonstrator). Calculation = (Alumni + Award + HiCi + N&B + PUB) marks added together divided by the total numbers of full time (Professor+Associateprofessor+Assistantprofessor+Demonstrator) number. The output of this calculation (X) will be multiplied with (10) to achieve the final score of PCP upto the maximum of 25.</p> |
| Total Score | <p>Alumni + Award + HiCi + N&B + PUB + PCP = _____/250</p> |



Section 1.2:

PROCESS EVALUATION REPORT

Table 2: 6-point Rating scale for Evaluation of Standards

| GRADES | Adequate | Borderline | Deficient |
|--------------------|---|---|--|
| KEY | 4-5 | 2-3 | 0-1 |
| DESCRIPTION | Majority of the criteria/ conditions stated in the sub-standard are present and fulfilled. There is ample evidence that the impact of this will be positive and will hopefully result in the production of a competent doctor | Only some of the criteria/ conditions stated in the sub-standard are present and fulfilled. There is evidence that supports the notion that learners will obtain knowledge/ skills which will ensure his being a minimally competent doctor. | The standard/s does/ do not apply to this situation OR The sub-standard/s is/ are entirely not addressed |



Standard 1: Mission Statement

| Standard | Evidence | Rating Scale | | | | | |
|--|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 1.1 Is aligned with the vision of the university with which it is affiliated or of which it is a constituent institution | <input type="checkbox"/> Curricular Document <input type="checkbox"/> Prospectus <input type="checkbox"/> Website | | | | | | |
| 1.2 Demonstrates a clear institutional commitment to social accountability, achievement of competencies and addresses the health needs of Pakistan | <input type="checkbox"/> Curricular Document <input type="checkbox"/> Prospectus <input type="checkbox"/> Website | | | | | | |
| 1.3 Is developed with stakeholders' participation (for example faculty members, staff, students, university, health ministry officials) | <input type="checkbox"/> Minutes of the meeting <input type="checkbox"/> Composition of the committee | | | | | | |
| 1.4 Is known to all stakeholders* | <input type="checkbox"/> Prospectus/ Brochures <input type="checkbox"/> Website | | | | | | |
| 1.1s Aims at professional development and a commitment to life-long learning | <input type="checkbox"/> Mission document <input type="checkbox"/> Time tables <input type="checkbox"/> Proof of faculty development program | | | | | | |
| Total Rating Scores | | | | | | | |

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|----------|
| Comments |
|----------|

Standard 2: Outcomes

| Standard | Evidence | Rating Scale | | | | | |
|----------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 2.1 | are in congruence with the mission of the institution | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Prospectus Website | | | | | | |
| 2.2 | incorporate the knowledge, skills and professional behaviours that the students will demonstrate upon graduation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Curricular Document Prospectus Website | | | | | | |
| 2.3 | are contextually appropriate for health care delivery in Pakistan. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Curricular Document Prospectus Website | | | | | | |
| 2.4 | incorporate competencies of a medical/dental graduate outlined by the PMDC | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Curricular Document Prospectus Website | | | | | | |



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|---------------------|---|---|--|--|--|--|--|--|
| 2.5 | have been developed in consultation with all stakeholders* | <input type="checkbox"/> Minutes of the meeting <input type="checkbox"/> Composition of the committee and onsite meeting* | | | | | | |
| 2.6 | are known to all stakeholders* | <input type="checkbox"/> Prospectus/Brochures <input type="checkbox"/> Website <input type="checkbox"/> Onsite meeting with stakeholders | | | | | | |
| 2.7 | are reviewed and revised in the light of program evaluation (NA1) (Only for medical/dental college with a batch that has graduated) | <input type="checkbox"/> Program evaluation committee meeting <input type="checkbox"/> Evaluation process <input type="checkbox"/> Changes made | | | | | | |
| 2.1s | Define the outcomes of the program which differentiates the institution from other similar institutions | <input type="checkbox"/> Documentary evidence of the claim | | | | | | |
| Total rating Scores | | | | | | | | |
| Comments | | | | | | | | |

Standard 3: Institutional Autonomy and Academic Freedom

| Standard | Evidence | Rating Scale | | | | | |
|---|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 3.1. formulate policies to ensure smooth implementation of its educational outcomes | <input type="checkbox"/> Policy document | | | | | | |



| | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| 3.2. develop a system for ensuring that the policies are implemented | <input type="checkbox"/> Strategic plan | | | | | | | |
| 3.3. select, design and implement its curriculum that is contextually appropriate for Pakistan | <input type="checkbox"/> Curricular document (contextual curricular content) | | | | | | | |
| 3.4. allocate and appropriately use resources for implementation of the curriculum | <input type="checkbox"/> Filled PMDC's proforma for departmental review(<i>this is to be done by the Dean or principal of the institution</i>) | | | | | | | |
| 3.5. appoint, promote and terminate academic and administrative staff based on policies laid down by the affiliating university | <input type="checkbox"/> Human resource policies | | | | | | | |
| 3.1s the curriculum should be based on evidence-based educational pedagogy | <input type="checkbox"/> Curricular document <input type="checkbox"/> Time tables <input type="checkbox"/> Minutes of Academic Council /Curriculum committee minutes <input type="checkbox"/> Scientific evience | | | | | | | |
| Total rating Scores | | | | | | | | |
| Comments | | | | | | | | |



Standard 4: Curriculum Design

| Standard | Evidence | Rating Scale | | | | | |
|--|---|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 4.1 have a curriculum aligned with the university vision, institutional mission and local and national needs | <input type="checkbox"/> Curricular document <input type="checkbox"/> University Vision Statement <input type="checkbox"/> Medical/Dental College Mission Statement | | | | | | |
| 4.2 develop and implement a curriculum according to resources stipulated by accrediting agency/ies | <input type="checkbox"/> PMDC's proforma for departmental review | | | | | | |
| 4.3 implement a curriculum that has early exposure to patients* | <input type="checkbox"/> Curricular Document <input type="checkbox"/> Time tables <input type="checkbox"/> Student's Log book <input type="checkbox"/> Clinical Skill centre Program <input type="checkbox"/> Onsite inquiry* | | | | | | |
| 4.4 encourage students to link concepts of basic and clinical disciplines* | <input type="checkbox"/> curriculum document(Evidence of applied clinical aspects) <input type="checkbox"/> Onsite inquiry* | | | | | | |
| 4.5 emphasize knowledge, skills and attitudes required by a general practitioner | <input type="checkbox"/> Course objectives in Curricular document | | | | | | |
| 4.6. ensure that clinical sciences get at least half of the time of the undergraduate program | <input type="checkbox"/> Time tables | | | | | | |

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|--|---|--|--|--|--|--|--|
| 4.7 develop and implement a curriculum which is outcome-based, patient-centered, community-relevant & promotes health and prevents disease | <input type="checkbox"/> Curricular document <input type="checkbox"/> Minutes of Curricular committee meeting and its composition | | | | | | |
| 4.8 implement a curriculum which incorporates active learning as a major educational strategy | <input type="checkbox"/> Time tables <input type="checkbox"/> Curriculum document (Teaching and learning strategies) | | | | | | |
| 4.9 ensure systematic and organized learning in clinical settings*(NA1) | <input type="checkbox"/> Clinical rotations process document <input type="checkbox"/> Clinical rotations time table <input type="checkbox"/> Log book <input type="checkbox"/> Onsite inquiry* | | | | | | |
| 4.1s progressively Integrate a curriculum horizontally and/or vertically | <input type="checkbox"/> Curricular document <input type="checkbox"/> Time tables | | | | | | |
| 4.2s incorporate innovative educational strategies such as self-directed learning, independent learning, inter-professional learning, use of e-technology and simulations. | <input type="checkbox"/> Curricular document | | | | | | |
| 4.3 have student-selected components (electives) as part of the curriculum | <input type="checkbox"/> Curricular document <input type="checkbox"/> Study Guides/Block books of selected components | | | | | | |
| Total rating Scores | | | | | | | |
| Comments | | | | | | | |



Standard 5: Educational Content

| Standard | Evidence | Rating Scale | | | | | |
|---|---|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 5.1 ensure that educational content is decided in consensus by a group of <u>relevant subject experts</u> including faculties of basic, clinical, behavioural and community health sciences | <input type="checkbox"/> Minutes of Curriculum Committee/ Academic Council <input type="checkbox"/> Curriculum Committee/ Academic Council composition | | | | | | |
| 5.2 ensure that the content and its delivery are <u>aligned with the competencies and/ or outcomes</u> agreed upon by the institution | <input type="checkbox"/> Curricular Document | | | | | | |
| 5.3 ensure that the content that is taught and assessed is <u>relevant to practice</u> for a general practitioner | <input type="checkbox"/> Curricular Document <input type="checkbox"/> Proof of involvement of GP's (Preferably Family Medicine Practitioner) in curricular development | | | | | | |
| 5.4 include the following along with the <u>Basic, Clinical & Community Health sciences</u> : a. Behavioural Sciences b. Communication skills c. Forensic Medicine d. Islamiyat and Pakistan Studies e. Patient Safety f. Professionalism & Medical | <input type="checkbox"/> Curricular Document | | | | | | |



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|---|---|--|--|--|--|--|--|
| <p>Ethics g. Research h. Evidence based medicine i. Lifesaving skills</p> | | | | | | | |
| <p>5.5 ensure that the content includes applied basic sciences relevant to general practice</p> | <input type="checkbox"/> Curricular document showing common diseases taught as applied aspect in basic sciences | | | | | | |
| <p>5.6 ensure that the content includes relevant content to produce safe health care providers</p> | <input type="checkbox"/> Curricular document ensuring inclusion of patient safety and student safety measures | | | | | | |
| <p>5.7 ensure that the students spend sufficient time in planned contact with patients and community in relevant clinical and community settings*</p> | <input type="checkbox"/> Time tables | | | | | | |
| <p>5.1s include social sciences in their implemented curriculum</p> | <input type="checkbox"/> Curricular Document | | | | | | |
| <p>5.2s have a document describing the content, extent and sequencing of courses and other components of the curriculum (curricular map)</p> | <input type="checkbox"/> Curriculum Map | | | | | | |
| <p>5.3s topics like study skills, leadership, principles of management and medical education/ teaching strategies may be included in the program</p> | <input type="checkbox"/> Curricular Document | | | | | | |



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| Total rating Scores | | | | | | | |
| Comments | | | | | | | |



Standard 6: Curricular Management*

| Standard | Evidence | Rating Scale | | | | | |
|---|---|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 6.1 have a functional curriculum committee duly represented on the institutional organogram* | <input type="checkbox"/> Institutional Organogram <input type="checkbox"/> Onsite discussion with curriculum committee* <input type="checkbox"/> TOR's of Curriculum Committee | | | | | | |
| 6.2 ensure that adequate supervision of learning experiences is provided throughout clinical rotations and field visits* | <input type="checkbox"/> Study Guides / Implementation plan for clinical rotations <input type="checkbox"/> Student Log book with written feedback <input type="checkbox"/> Discussion with clinical supervisors* | | | | | | |
| 6.1s develop study guides which clearly specify overall objectives (of the course) and terminal objectives (for every teaching session) | <input type="checkbox"/> Study guides | | | | | | |
| 6.2s disseminate <u>study guides</u> to the students and faculty | <input type="checkbox"/> Evidence of dissemination of study guides electronically or hard copies | | | | | | |
| Total rating Scores | | | | | | | |
| Comments | | | | | | | |



Standard 7: Assessment

| Standard | Evidence | Rating Scale | | | | | |
|---|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 7.1 develop appropriate policies for assessment of students. | <input type="checkbox"/> Assessment policy and procedures document | | | | | | |
| 7.2 ensure that assessment covers knowledge, skills and attitudes | <input type="checkbox"/> Blue printing document/Table of Specifications | | | | | | |
| 7.3 use a wide range of assessment methods | <input type="checkbox"/> Blueprinting/Assessment plan | | | | | | |
| 7.4 ensure that there is an appropriate balance of formative and summative assessment. | <input type="checkbox"/> Assessment plan | | | | | | |
| 7.5 define a clear process of assessment | <input type="checkbox"/> Procedures of Assessment | | | | | | |
| 7.6 ensure that the assessment practices are compatible with educational outcomes and instructional methods | <input type="checkbox"/> Blue printing <input type="checkbox"/> Document showing alignment between assessment practices are compatible with educational outcomes and instructional methods (Assessment Map) | | | | | | |
| 7.7 implement pre-, per- and post-exam quality assurance procedures in assessment * | <input type="checkbox"/> Minutes of pre per and post exam analysis meetings <input type="checkbox"/> Document of practices <input type="checkbox"/> Item Analysis | | | | | | |

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|--|---|--|--|--|--|--|--|
| | reports (NA1) <input type="checkbox"/> Meeting with assessment committee* | | | | | | |
| 7.1s Examination items should go through a standard setting process* | <input type="checkbox"/> Documents showing process of standard setting <input type="checkbox"/> Meeting with assessment committee* | | | | | | |
| 7.2s Assessment should be integrated wherever relevant | <input type="checkbox"/> Assessment plan, Examination papers /OSCE etc. | | | | | | |
| Total rating Scores | | | | | | | |
| Comments | | | | | | | |

Standard 8: Student

| Standard | Evidence | Rating Scale | | | | | |
|---|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 8.1. The institutions must follow the admission policy devised by the affiliating university in congruence with the national regulations/guidelines | <input type="checkbox"/> Admission policy <input type="checkbox"/> Website <input type="checkbox"/> Prospectus | | | | | | |



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| <p>8.2. The institutions must have student support programme addressing financial needs.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Institutional policy <input type="checkbox"/> Proof through documents in which support offered is evident (NA1) | | | | | | |
| <p>8.3. ensure that students have access to counselling to address their psychological, academic and/ or career needs*</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Counselling department Structure <input type="checkbox"/> Counselling department Composition <input type="checkbox"/> Counselling department Function | | | | | | |
| <p>8.4. ensure confidentiality of student's academic and medical records.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Institutional policy <input type="checkbox"/> Proof through documents/forms in which this process is explained | | | | | | |
| <p>8.5. Have access to their records and appeals process in case of discrepancies</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Institutional policy document | | | | | | |
| <p>8.6. have clear policies, funding, technical support and facilities regarding co-curricular opportunities for the students</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Institutional policy document <input type="checkbox"/> Documents showing students co-curricular activities (NA1) <input type="checkbox"/> Allocation of funds | | | | | | |
| <p>8.7. have a policy and practice to systematically seek, analyse and respond to student feedback</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Documents showing response to feedback of students | | | | | | |



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|---|--|--|--|--|--|--|--|
| about the processes and products of the educational programmes. | (NA1) | | | | | | |
| 8.8. provide access to preventive and therapeutic health services to all the students. * | <input type="checkbox"/> Policy document regarding health coverage <input type="checkbox"/> Onsite inspection* | | | | | | |
| 8.9. ensure a fair and formal process for taking any action that affects the status of a student. | <input type="checkbox"/> Documented clear policy for disciplinary actions <input type="checkbox"/> Disciplinary action reports (NA1) | | | | | | |
| 8.10. Policies and code of conduct must be known to all students* | <input type="checkbox"/> Student handbook <input type="checkbox"/> Policy document <input type="checkbox"/> Onsite visit* <input type="checkbox"/> Website <input type="checkbox"/> prospectus | | | | | | |
| 8.1s have infrastructure for disabled students. * | <input type="checkbox"/> Building Map <input type="checkbox"/> Onsite visit* | | | | | | |
| 8.2s provide scholarships/bursaries to students based on clearly defined criteria | <input type="checkbox"/> Institutional policy document <input type="checkbox"/> Documents showing proof of awards/scholarships (NA1) | | | | | | |
| 8.3s clearly defined credit transfer policy | <input type="checkbox"/> Credit transfer policy | | | | | | |
| 8.4s have student exchange mechanism | <input type="checkbox"/> Policy document | | | | | | |



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|-------------------------------|-----|---|--|--|--|--|--|--|
| regionally internationally | and | <input type="checkbox"/> Allocation of funds <input type="checkbox"/> Evidence of student exchange (NA1) | | | | | | |
| Total rating Scores | | | | | | | | |
| Comments | | | | | | | | |

Standard 9: Faculty

| Standards | Evidence | Rating Scale | | | | | |
|---|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 9.1. ensure that the institution's leadership is qualified by education, training, and experience | <input type="checkbox"/> Documents showing proof as per PMDC / University policy | | | | | | |
| 9.2 have documented job description | <input type="checkbox"/> Approved job description document | | | | | | |
| 9.3 have faculty recruitment, selection, promotion and retention policies based on the policies/criteria provided by the PMDC and universities' statutory bodies. | <input type="checkbox"/> Policy document <input type="checkbox"/> Faculty recruitment advertisement | | | | | | |
| 9.4 have sufficient trained faculty to meet the medical educational needs. | <input type="checkbox"/> Faculty details <input type="checkbox"/> Faculty registration certificates | | | | | | |
| 9.5 Faculty fulfilling | <input type="checkbox"/> Document showing calculated workload of | | | | | | |

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|--|--|--|--|--|--|--|--|
| its various roles | the faculty based on their various emerging roles (Leader, Researcher, mentor, teacher, curriculum planner, Assessor, evaluator, administrator, clinician, etc.) | | | | | | |
| 9.6 Faculty development program(FDP) must have clear goals aligned with faculty and program needs | <input type="checkbox"/> Documents showing Faculty Development Programme <input type="checkbox"/> Documents showing Faculty needs assessment | | | | | | |
| 9.7 must have opportunities for national and international CME/CPD activities | <input type="checkbox"/> Policy for CME/CPD <input type="checkbox"/> Document showing allocation of resources for CME/CPD <input type="checkbox"/> Evidence of CME/CPD completed by faculty (NA1) | | | | | | |
| 9.1s have the program for training the trainers | <input type="checkbox"/> Documents showing FDP <input type="checkbox"/> Document showing allocation of resources for training <input type="checkbox"/> Evidence of trainings completed by faculty (NA1) | | | | | | |
| 9.2s have evidence based educational innovation in faculty development approaches | <input type="checkbox"/> Documents showing innovative training approaches (NA1) <input type="checkbox"/> Publications (NA1) | | | | | | |
| 9.3s Link the Annual Appraisal/Performance Report (including research output) of faculty with their promotion* | <input type="checkbox"/> Documents (ACR , Promotion letters, Faculty evaluations, Publications, etc.) (NA1) <input type="checkbox"/> Onsite visit of HR Dept. Confidential reports and promotion process & letters* | | | | | | |
| Total rating Scores | | | | | | | |
| Comments | | | | | | | |



Standard 10: Program Evaluation and Continuous renewal

| Standard | Evidence | Rating Scale | | | | | |
|--|---|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 10.1. ensure processes and schedules for review and update of all academic activities through an established mechanism of program evaluation. | <input type="checkbox"/> Documentary evidence of program evaluation | | | | | | |
| 10.2. regularly review results of evaluation and student assessments to ensure that the gaps are adequately addressed in the curriculum in consultation with curricular committee. (NA1) | <input type="checkbox"/> Evidence of changes made as a result of programme evaluation (NA1) | | | | | | |
| 10.3 allocate resources to address deficiencies and continuous renewal of programs. (NA1) | <input type="checkbox"/> Documents showing allocation of resources based on strategic plan/ Program evaluation report (NA1) | | | | | | |
| 10.4 have program evaluation in compliance with PMDC accreditation standards (NA1) | <input type="checkbox"/> Minutes of meeting of program evaluation and curriculum renewal (NA1) | | | | | | |
| 10.5 ensure that Students, faculty and administration are involved in program evaluation. (NA1) | <input type="checkbox"/> Feedback forms <input type="checkbox"/> Survey reports (NA1) | | | | | | |

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|---|--|--|--|--|--|--|--|
| <p>10.6 ensure that amendments based on results of program evaluation findings are implemented and documented (NA1)</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Minutes of meeting of program evaluation findings (NA1) <input type="checkbox"/> Evidence of implemented change (NA1) | | | | | | |
| <p>10.7 have mechanism for curriculum monitoring and progressive improvements.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes of Curriculum Committee <input type="checkbox"/> Academic Council <input type="checkbox"/> Program evaluation committee | | | | | | |
| <p>Total rating Scores</p> | | | | | | | |
| <p>Comments</p> | | | | | | | |



Standard 11: Governance, Services and Resources

| Standard | Evidence | Rating Scale | | | | | |
|---|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 11.1 have hierarchical system of academic governance | <input type="checkbox"/> Documents showing composition, <input type="checkbox"/> Documents showing Terms of references (TORS) <input type="checkbox"/> Meeting minutes of Academic council <input type="checkbox"/> Meeting minutes of Board of studies/faculty | | | | | | |
| 11.2 have mechanisms for dissemination of all policies and procedures related to governance, services and resources | <input type="checkbox"/> Website <input type="checkbox"/> Annual Reports (NA1) <input type="checkbox"/> Newsletter/Bulletin | | | | | | |
| 11.3 have satisfactory and functional IT and Library Facilities* | <input type="checkbox"/> Documentary evidence of infrastructure and resources <input type="checkbox"/> Onsite visit* | | | | | | |
| 11.4 have mechanisms for addressing Disciplinary issues | <input type="checkbox"/> Disciplinary committee Composition and <input type="checkbox"/> Disciplinary committee Terms of reference Policies for Disciplinary actions | | | | | | |



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|--|---|--|--|--|--|--|--|
| 11.5 have incorporated the principles of social accountability in the medical/dental college | <input type="checkbox"/> Partnership deeds/MOUs with basic and rural healthcare facilities | | | | | | |
| 11.6 have an established Department of Medical Education | <input type="checkbox"/> Documents showing composition, hierarchy and structure of DME <input type="checkbox"/> Faculty registrations | | | | | | |
| 11.7 have health, fitness, faculty support and cafeteria facilities* | <input type="checkbox"/> Map of the facility <input type="checkbox"/> Onsite visit* <input type="checkbox"/> Memoranda of Understanding | | | | | | |
| 11.8 have clear roles/authority of Dean and /or Principals and HOD's as per PMDC rules | <input type="checkbox"/> Agreement/Affidavit showing roles/authority <input type="checkbox"/> Evidence of use of this authority | | | | | | |
| Total rating Scores | | | | | | | |
| Comments | | | | | | | |



Standard 12: Research and Scholarship

| Standard | Evidence | Rating Scale | | | | | |
|--|--|--------------|---|------------|---|-----------|---|
| | | Adequate | | Borderline | | Deficient | |
| | | 5 | 4 | 3 | 2 | 1 | 0 |
| 12.1 have a research advisory committee that can facilitate faculty and students on research. | <input type="checkbox"/> Terms of reference <input type="checkbox"/> Committee composition | | | | | | |
| 12.2 have research as an integral part of the curriculum | <input type="checkbox"/> Curricular document | | | | | | |
| 12.3. provide opportunities for research to the students and faculty | <input type="checkbox"/> Policy Document <input type="checkbox"/> Evidence of scholarly activities (Journal club/Seminars/Symposium/publications) (NA1) | | | | | | |
| 12.1.s have a Research Cell led by an appropriately qualified faculty member and with adequate support staff that can guide faculty and students on research | <input type="checkbox"/> Institutional organogram <input type="checkbox"/> Composition of medical research department | | | | | | |
| 12.2.s demonstrate a commitment to continuing scholarly productivity | <input type="checkbox"/> Evidence of scholarly activities (Journal club/Seminars/Symposium/publications) (NA1) | | | | | | |
| 12.3.s provide opportunities for multi-disciplinary and applied research | <input type="checkbox"/> Evidence of multidisciplinary scholarly activities (Research groups/consortiums) (NA1) | | | | | | |
| Total rating Scores | | | | | | | |
| Comments | | | | | | | |

| | |
|---|----------------|
| Total Rating score | |
| Weightage points = Total Rating score/5 | _____/5= _____ |

| | |
|--|-----------|
| Total Score of Section 1.1 + Section 1.2 | _____/350 |
| Passing Score | 315/350 |



Section 2:

Appropriate PM&DC Purple Inspection Report proforma :

**Commensurate to the number of students and type of the institution
(medical/dental)**

| | |
|--------------------------|--------------|
| Total Score of Section 2 | _____ / 1000 |
| Passing Score | 900 / 1000 |

