

PAKISTAN MEDICAL & DENTAL COUNCIL
Medical University Requirements Inspectors Proforma (Grey 1)
For Medical/Health Sciences University



1. Name / address of the institute: _____
2. Date of establishment and authority _____
3. Teaching hospital (s) constituent and/or affiliated _____

5. Name and number of campuses and sub-campuses _____

PAKISTAN MEDICAL AND DENTAL COUNCIL
University Accreditation Criteria

Before filling this form please review the guidelines document. Before conducting site inspection please review mandatory and essential documents (particularly that were missing in the self-evaluation proforma). (see guidelines document for details on the process and mandatory requirements). The definition of mandatory and essential is given below:

* **Mandatory:** marked with the asterisk; these are documentary evidences that must be attached with the self evaluation proforma
Essential: these are documents that should have been preferably attached with the self evaluation proforma. If they are not attached ask the institution to provide those documents before starting the site inspection.

Standard number	Standard Title	Scoring rubric
1	Legalities, Organization And Governance	NIL
2	Institutional Resources	150
3	Mission Statement	200
4	Admission Process	50
5	Academic Programs	100
6	Assessment Systems	150
7	Faculty & Staff	200
8	Student Support Services	100
9	QEC & Quality Assurance	100
10	Research And Scholarship	110

STANDARD 1: LEGALITIES, ORGANIZATION AND GOVERNANCE (mandatory)

S. No	Areas	Evidence	COMMENTS
1	LEGAL REQUIREMENTS (mandatory)	<ul style="list-style-type: none"> • Society/Trust or a Foundation registered/constituted under the relevant regulations of Companies Ordinance/Trust Act/Societies Registration Act (for private universities only) See annex 1 PM&DC guidelines • Memorandum of Association • A brief profile of each member of management 	
2	GOVERNANCE STRUCTURE AND MEETINGS (mandatory)	<ul style="list-style-type: none"> • Organograms * • Report with the names of offices responsible and the systems used for meetings of the Senate; the Syndicate; the Board of Governors, Finance & Planning Committee, Academic Council, Board of Faculty, Board of Studies and Advance Study & Research Board. * • Minutes of all Meetings for last one year. • Notifications of Decisions. Approval of SOPs/ToRs for compliance of minutes. • Notification of responsible officers * • Name of Officials/Office responsible for conduction of each of the body's meetings 	
3	CONFLICT OF INTEREST	<ul style="list-style-type: none"> • Conflict of Interest Policy along with its approval 	
4	INSTITUTIONAL AUTONOMY	<ul style="list-style-type: none"> • Policy and approval of policy document showing that constituent and/or affiliated institutions have autonomy as per PM&DC guidelines for undergraduate and postgraduate 	

		standards	
5	COMMUNICATION STRATEGY/ PROCESSES	<ul style="list-style-type: none"> Document showing mechanisms for dissemination of all policies and procedures related to governance, services and resources (including vision and mission statement, regulations, notices and announcements) 	
6	LEADERSHIP INITIATIVES	<ul style="list-style-type: none"> Report on the leadership initiatives taken by the Head of Institutions 	

STANDARD 2 INSTITUTIONAL RESOURCES

	Areas	Evidence	Numbers	COMMENTS
	FUNDS & ASSETS (mandatory)	<ul style="list-style-type: none"> Documents showing Endowment funds, working capital and tangible assets i.e. land/buildings etc. as per annex 1 PM&DC guidelines for accreditation (For a new university). 		
	INFRASTRUCTURE	<ul style="list-style-type: none"> Structural plans, covered areas campuses and Sub – Campuses (As per PM&DC guidelines) * (15) Date of preparation/approval of Master Plan * (5) Lists of physical resources according to sections within each institution and in the main administrative building of the 	60	

	<ul style="list-style-type: none"> university (5) • No of library(ies) (5) • Map of student residential facilities (5) • Document showing recreational area(s) for students and faculty (5) • Document showing that the constituent and/or affiliated tertiary care hospital with laboratory, radiology, pharmacy and allocated beds free as per PM&DC guidelines. * (10) • Document showing number of beds for student training* (10) 		
PHYSICAL RESOURCES	<ul style="list-style-type: none"> • Department-wise Number of books in library (4) • List of department-wise Laboratories with detail and number of equipment (4) • List of department-wise Computer Labs with number of computers, Printers and other facilities. (4) • List of Journals subscribed for (hard copy or digital Library). (4) • Month-wise usage report of Digital Library (for the last one year). (4) 	20	

	HUMAN RESOURCE MANAGEMENT	<ul style="list-style-type: none"> • Covered area for the HR offices (12) • Number of staff for HR (5) • HR policy (13) 	30	
	BUDGETING PROCESS	<ul style="list-style-type: none"> • Document showing budget and the process of its allocation and approval (5) • Last year's approved budget and audited accounts with an analysis to show percentages: (5) <ul style="list-style-type: none"> *revenue from: tuition, grants and government funding, *expenses for: salaries, financial aid; benefits; capital expenditures, etc. 	10	
	PROCUREMENT	<ul style="list-style-type: none"> • Name of Approving authority Constitution of Purchase Committee (5) • Approval and notification of Purchase policies/Regulations/ Standard Operating Procedures (5) 	10	

STANDARD 3: MISSION STATEMENT

S. No	Areas	Evidence	Number	COMMENTS
1	MISSION STATEMENT DEVELOPMENT	<ul style="list-style-type: none"> • Date of Preparation: _____ (1) • Date of Approval: _____ (1) • The mission statement is realistic and feasible, review statement and website (1) • Minutes of the meeting/approving body (include all stakeholders) (1) • Approval of Committee & ToRs (if committee constituted) (1) 	20 (5)	
2	MISSION STATEMENT REVIEW	<ul style="list-style-type: none"> • _____ Date of Revision: _____ (2) • _____ Date of Approval: _____ (1) • Minutes of the meeting/approving body (2) 	5	
3	MISSION STATEMENT ALIGNMENT	<ul style="list-style-type: none"> • Document showing mission statement of the constituent institutions (check alignment) (5) • Alignment of mission statement with ethos and values stipulated by the government of Pakistan (use your best judgment) (2) • Mission statement is addressing social accountability of the university. (review policy document) (3) 	10	

STANDARD 4 ADMISSION PROCESS

S. No	Areas	Evidence	Number	Comments
1	ADMISSION POLICIES IMPLEMENTATION	<ul style="list-style-type: none"> Document showing policy of monitoring constituent and/or affiliated institution for student selections as per respective council guidelines (PM&DC/CPSP/PNC/PCP/others) 	50	

STANDARD 5 ACADEMIC PROGRAMS

S. No	Areas	Evidence	Number	Comments
1	PROGRAMS OFFERED	<ul style="list-style-type: none"> • List of academic programs approved by syndicate/senate of the university (10) • Sites of individual programs offered (10) 	20	
2	DEVELOPMENT, APPROVAL AND REVIEW OF ACADEMIC PROGRAMS	<ul style="list-style-type: none"> • Notification of academic courses and programs designed and approved by Respective councils (PMDC/PCP/PNC/CPSP/others). * (15) • Minutes of relevant committee/council of the university for approval of review of academic programs if applicable. (10) • Curricular documents of the approved academic programs (incorporating contemporary educational methodologies). * (10) • Minutes of approval of programs by the respective forums (eg: Board of Studies) of these programs. (8) • Summary document showing process of review of academic programs. (7) 	50	

3	CREDIT TRANSFER	<ul style="list-style-type: none"> • Credit transfer policy of the university (5) • Details of students transferred into and out of this institution in last one year (5) • Name of approving body of the university (2) • Notification/letter of Credit Transfer case(s) in the last one year. (3) 	15	
4	DROP OUTS & EXPULSIONS	Program wise, department wise and semester wise list of dropout/ expelled students with reasons in the last one year	10	

STANDARD 6 ASSESSMENT SYSTEMS

S. No	Areas	Evidence	Number 150	Comments
1	Space (mandatory)	<ul style="list-style-type: none"> • Covered area of the offices for control room, Q-bank, result analysis and finalization, personnel office 		
2	Physical resources (mandatory)	<ul style="list-style-type: none"> • Computers (2 per each institution) • Optical readers (1 per each institution) 		
3	Human resources	<ul style="list-style-type: none"> • Trained head of assessment unit (medical educationist with MHPE) (5) • Examination department headed by full time trained person(5) • Data entry operators(at least one for each computer (3) • Statistician (one minimum) (2) • policies for recruitment and placing of personnel in assessment system(5) • evidence showing involvement of qualified medical educationist in the assessment systems (office orders, minutes of meetings) (5) <p>Job descriptions of full time and part time personnel(5)</p>	30	
4	Establishment of Assessment system (Mandatory)	<ul style="list-style-type: none"> • Notification of establishment of Examination Unit/ Department & Q-bank • TOR for various sections/ units etc within the assessment system 		

		<ul style="list-style-type: none"> • Minutes of meeting of concerned body/ committee that approved this assessment system • university policy for giving permission for holding examinations to its constituent and affiliated institutions (where applicable) 		
5	Pre-examination processes	<ul style="list-style-type: none"> • Minutes of meetings of how tables of specifications were developed(5) • Samples of tables of specifications(5) • Evidence of faculty development sessions held for training faculty in how to develop items(5) • Policies for selection of examiners and examination (theory, practical, clinical) development(5) • Documented procedures for ensuring quality of theory and practical/ clinical exams before administration(5) 	25	
6	Intra-examination processes	<ul style="list-style-type: none"> • Policies for examination secrecy before implementation (5) • Procedures for invigilation and exam monitoring(5) • Policies & procedures for dealing with breach of secrecy(5) • Policies and procedures for dealing with student and personnel improper behavior (including cheating and violence) (5) • Policies and procedures for allowing students in the examination area(5) • Policies and procedures for dealing with absence of invigilators and examiners (in case of practical/ clinical exams) (5) 	35	

		<ul style="list-style-type: none"> • Procedures for safe handing over of examination material to examination dept/ unit(5) 		
7	Post-examination processes	<ul style="list-style-type: none"> • Policies and procedures of marking the examination material(5) • Policies and procedures of result analysis(5) • Evidence of post examination data analysis*(5) • Documented result reports developed by Department of Medical Education for higher authorities*(5) • Policies and procedures for result announcement(5) • Evidence of announced results*(5) • Policies for dealing with failures, grievances, re-checking and appeals(5) • Policies and procedures for giving feedback to students and concerned faculty (5) <p>Statements with (*) are not required for universities during zero inspection</p>	40	

8	Communication processes	<ul style="list-style-type: none">• Policies and procedures for how the university will interact with its constituent and affiliated institutions regarding examination processes (20)	20	
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STANDARD 7 FACULTY & STAFF

S. No	Areas	Evidence	Number200	Comments
1	RECRUITMENT POLICY	<ul style="list-style-type: none"> • Policy document ensuring that faculty appointment criteria is in line with the relevant councils (e.g: PMDC/CPSP/PCP/PNC/others). (7) • Criteria and process of selection/appointment of university staff e.g: registrar, chief accountant etc. (7) • Notification/memorandum of staff inducted in the last one year. (3) • Notification/memorandum of faculty inducted in the last one year. (3) 	40	
2	FACULTY & STAFF DEVELOPMENT	<ul style="list-style-type: none"> • Policies and SOPs for faculty development. (4) • Document showing budgetary allocations for faculty development including allocations for sending faculty nationally and/ or internationally for training sessions (workshops, conferences etc.). (4) • List the department-wise names of faculty members who have gone to foreign countries for higher studies during their employment in your institution. (2) • Document showing policy for academic leave and evidence that faculty availed it and were paid fully or partly by the 	30	

		<p>institution. (3)</p> <ul style="list-style-type: none"> • Department-wise list for workshops/ trainings attended and/ or made a presentation by each faculty member (for last 1 year). (2) 		
3	INTEGRITY & TERMINATION	<ul style="list-style-type: none"> • Policy and SOPs for termination of Faculty and staff. (5) • Notification of the APPROVAL and termination process. (2) • Policy and SOPs for how the university deals with issues of plagiarism by staff & faculty. (5) • Process of dealing with Biased grading in examination (5) • List by department faculty in each of the following categories: (3) <ul style="list-style-type: none"> ○ Those who have resigned and list the reasons for each. ○ Those who have been deputed and list the reasons for each. ○ Those who have been terminated and list the reasons for each 	40	

4	Financial Benefits	<ul style="list-style-type: none"> • Document showing comparable salaries and benefits at other institutions that you believe compete with you. (5) • Designation Wise detail of salaries (5) • Details of Merit Pay (if applicable) (2) • Details of any other remuneration offered to Faculty members for their progresses (i.e. Publication of Research Paper, M.Phil & Ph.D. thesis Supervision. (4) • Notification of Approval for Merit Pay Policy. (2)_ • List of Faculty Members along with the financial benefits received (eg: PhD/M.phil remunerations other than salaries). (2) 	40	
5	FACULTY & STAFF EVALUATION	<ul style="list-style-type: none"> • Sample of faculty appraisal report. (2) • Evidence of teacher Evaluation by students and its process. (3) • Evidence of use of evaluation reports to improve the Teaching? (3) • Minutes of the meetings where faculty evaluation criteria was approved. (2) 	20	
6	FACULTY & STAFF SATISFACTION	<ul style="list-style-type: none"> • Copies of the faculty satisfaction surveys conducted in last one year. (2) • Use of results of Staff Satisfaction Surveys in last year. (3) 	10	

7	FACULTY & STAFF GRIEVANCES	<ul style="list-style-type: none"> • Document outlining the Procedure for grievance and redressal. (2) • Details of committees for the purpose Approval of Procedures. (2) • List of Cases that were dealt for grievances in the last one year. (1) 	10	
8	PERSONNEL FILES	<ul style="list-style-type: none"> • Policies and SOPs for safe keeping and access to personnel files. (3) • Sample of personal files of Faculty Members. (2) 	10	

STANDARD 8 STUDENT SUPPORT SERVICES

S. No	Areas	Evidence	Number	Comments
1	STUDENT GUIDELINE/ HANDBOOK	<ul style="list-style-type: none"> • Evidence of Student Guideline/ handbook prepared by the university which includes policies and procedures related to students professional, efficient and smooth educational experiences. (can be online as well) <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> • If student handbook is unavailable, evidence of how students know about university's Rules & Regulations (attach Web address, printed guidelines etc as evidence). 	20	
2	SCHOLARSHIPS/ FINANCIAL SUPPORT	<ul style="list-style-type: none"> • Policy and SOP for awarding the scholarship/ financial aid to the students. (10) • Notification of approval for scholarship Policy. (5) • List of awardee students with amounts in the last one year. (5) 	20	
3	SUPPORT SERVICES	<ul style="list-style-type: none"> • Evidence of support services offered by the university to students (e.g. Hostel, health coverage, counseling, recreational facilities, career counseling, mentorship program, on-site jobs etc.). (15) • Relevant policy and SOP documents showing all the support services approval 	35	

		<p>and process of their management. (10)</p> <ul style="list-style-type: none"> • Proof of facilities for disabled and handicapped student (pictures of ramps, special restrooms, etc). (5) • List of staff/faculty deputed for counselling including career counseling for the students. (5) 		
4	STUDENT SERVICE EVALUATION	<ul style="list-style-type: none"> • Process of feedback about these facilities from students. (5) • Copies of feedback forms and reports. (2) • Evidence of usage of this feedback. (3) 	10	
5	STUDENT GRIEVANCES, DISPUTES AND APPEALS	<ul style="list-style-type: none"> • Document outlining the Procedure for grievance and redressal. (6) • Details of committees for the purpose of approval of procedures, (6) • List of Cases that were dealt with in the last one year. (3) 	15	

STANDARD 9: QEC & QUALITY ASSURANCE

S. No	Areas	Evidence		
1	Establishment of Quality Enhancement Cell (QEC) (Mandatory)	<ul style="list-style-type: none"> • Notification of establishment of QEC (5) • Covered area of the offices of QEC (10) • Job description of dedicated staff (15) • TOR of QEC. (10) • Minutes of meeting of concerned statutory body that approved the department. (10) 	50	
2	QEC surveys	<ul style="list-style-type: none"> • Name of Surveys • Template of all Surveys forms with summaries. Attach 1-2 filled survey forms as example • Document showing usage and implementation of the surveys done for quality enhancement 	20	
3	BUDGET ALLOCATED TO QEC	<ul style="list-style-type: none"> • Budget allocation for the last or current year • Actual utilization (Budget report of QEC) • Copies of Budget Notifications of allocations 	30	

STANDARD
RESEARCH AND SCHOLARSHIP

S. No	Areas	Evidence	Number	Comments
1	<p>RESEARCH DEPARTMENT/CELL/UNIT /ORIC (Mandatory)</p>	<ul style="list-style-type: none"> • Notification of establishment of a research department/unit/cell. (5) • Document of research policy and its approval from the competent forum. (6) • Qualification of the director of Research dept./cell/unit as per PM&DC guidelines. (should be a professor with major qualification in public health/health professions education/epidemiology/biostatistics). (4) • List of staff manning the department including: statistician, epidemiologist, data entry operators (1/250 students) and preferably one scientific writer and or skilled writer with proven ability in editing and proof reading. (5) • Covered area (minimum 500 square feet) and facilities (including computers 1/50 students, Internet and analytical packages, and access to digital library) available in the department. (10) 	30	
2	<p>BUDGETARY EMPHASIS</p>	<ul style="list-style-type: none"> • Document showing approved Budget allocation and disbursement for research (10) • Documentary proof of research fund given to faculty/staff/student in the last 	20	

		one year. (10)		
3	AREA OF RESEARCH EMPHASIS	<ul style="list-style-type: none"> Meeting documents of how the university and its institutions decide on research areas and their priority 	10	
4	QUANTITY OF PUBLICATIONS	Department-wise list of research projects published (with their impact factor) by the faculty/staff/students in the last one year	15	
5	QUALITY OF PROPOSALS / PROJECTS/ PUBLICATIONS	<ul style="list-style-type: none"> Document showing processes governing approval of projects, proposals, thesis, publications, etc. (10) List of approved projects, proposals, thesis, publications in the last one year (5) 	15	

6	PLAGIARISM	<ul style="list-style-type: none"> • Plagiarism policy (4) • Minutes of meeting of approval of the plagiarism policy from the competent authority (2) • Constitution of Plagiarism Committee. (2) • Report of use Turn it in for last one year. (2) 	10	
7	INTELLECTUAL RIGHTS	<ul style="list-style-type: none"> • Policy regarding intellectual rights. (4) • Document showing implementation procedures (SOPs). (4) • Notification of approval of Policy (2) 	10	