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# **Program Evaluation Policies**

Program Evaluation is an essential component of any program. It helps to find the gaps in the program and suggest changes for its improvement. This all will lead to betterment of Program.

#### 1. Purpose

**Ref: QMC/DME/20/2025** 

The purpose of the Program Evaluation Policy is to establish a structured, systematic process for assessing the effectiveness, relevance, and outcomes of the MBBS curriculum. It aims to ensure continuous improvement in teaching, learning, and student success by gathering data, reviewing performance, and making evidence-based recommendations.

## 2. Scope

This policy applies to the evaluation of all educational programs within the medical college, including but not limited to MBBS and other undergraduate or graduate programs. The Program Evaluation Committee (PEC) is responsible for implementing and overseeing this policy.

## 3. Principles of Program Evaluation

- **Continuous Improvement**: Program evaluation is an ongoing process aimed at improving the quality of medical education.
- **Stakeholder Involvement**: Input is sought from students, faculty, staff, and external stakeholders, including alumni and employers.
- **Evidence-Based**: Evaluation is based on data collected from multiple sources, including student assessments, course feedback, faculty evaluations, and performance metrics.
- **Transparency**: Evaluation methods, outcomes, and actions taken are communicated openly to stakeholders.

- **Relevance**: The evaluation will focus on whether the curriculum meets the needs of students, the medical profession, and society.
- Accountability: The results of program evaluation are used to make informed decisions, ensuring accountability to accrediting bodies, faculty, students, and the healthcare community.

## 4. Roles and Responsibilities

## • Program Evaluation Committee (PEC):

- o Oversee the evaluation process.
- o Define the evaluation criteria and indicators.
- Ensure that all programs are regularly and thoroughly evaluated.
- Review data and recommend curriculum improvements based on evaluation results.
- Ensure compliance with accreditation standards and national/international benchmarks.

## • Faculty and Course Coordinators:

- o Participate in providing feedback.
- o Implement recommendations for course and curriculum improvements.

#### • Students:

o Participate in surveys and feedback mechanisms designed to evaluate course content, teaching quality, and overall program satisfaction.

## 5. Evaluation Methods

The following methods will be employed to evaluate the curriculum and program effectiveness:

## • Student Feedback:

- o Course evaluations at the end of each semester/academic year.
- Feedback on teaching effectiveness, relevance of content, and overall satisfaction.

## Assessment Data:

- Analysis of student performance on internal assessments, including MCQs,
   OSCEs, and workplace-based assessments.
- o Review of progression data, pass rates, and failure rates.

## Graduate Feedback:

- Alumni surveys assessing how well the program prepared them for professional practice.
- Feedback on employment outcomes and readiness for postgraduate training.

## Faculty Feedback:

• Faculty evaluations of the curriculum, course design, and student preparedness.

#### • Review of Skills Lab activities:

 The Program Evaluation committee will look after the activities of the skills lab. It will take feedback regarding the working of skills lab and then this report will be shared with relevant persons.

## • External Reviews:

 Input from external stakeholders such as accreditation bodies (PMDC), employers, and clinical partners.

## 6. Frequency of Evaluation

- **Annual Review**: The PEC will conduct an annual review of the MBBS program, focusing on:
  - The achievement of program learning outcomes.
  - o The adequacy of instructional methods.
  - o Student performance and progression data.
- **Continuous Monitoring**: Evaluation will be continuous, with data collected after each major assessment or learning activity. Besides the activities of the Skills Lab will also be monitored regularly.
- Comprehensive Review: Every 3-5 years, the PEC will conduct a comprehensive program evaluation to ensure the curriculum remains current and aligned with the needs of the medical profession.

## 7. Reporting and Recommendations

- The PEC will generate an annual report summarizing the findings of the program evaluation, including:
  - o Areas of strength.
  - o Areas needing improvement.
  - Recommendations for curriculum revisions or improvements.
- The report will be submitted to the Principal and Vice Principal for review and approval.
- The report will be shared with other stake holders. Actions based on the recommendations will be documented and implemented within the next academic cycle.

## 8. Confidentiality

- All data collected during the program evaluation process will be handled with confidentiality.
- Individual responses to surveys and feedback forms will be anonymized to protect the privacy of students and faculty.

## 9. Compliance and Accountability

- The program evaluation policy complies with national accreditation standards and best practices in medical education.
- The PEC is accountable for ensuring that program evaluation processes are followed and that recommendations are acted upon.

## 10: Compliance with UHS and PMDC

The policies developed will be complied with the PMDC and UHS Guidelines.

## 11. Review of Policies

This policy will be reviewed every 3 years to ensure its relevance and effectiveness in improving the quality of medical education programs. In case of any pressing need this may be done earlier.

# **Plan of Program Evaluation Activities**

## Annexure A

SR#	ITEM	Monitoring Frequency	Report Submission Frequency	QAC member responsible	Collaboration	Deadline
1	Curriculum Implementation	Ongoing	Once a year		<ul><li>Year committee</li><li>curriculum committee</li></ul>	End of each academic year
2	Feedback a) Lectures b) Clinical Rotations c) PBLs	a) ongoing b) after every rotation c)after every Module	<ul><li>a) Twice a year</li><li>b) Once a year</li><li>c) Once a year</li></ul>		<ul><li>Assessment Cell UCMD</li><li>DME</li></ul>	April & august End of the academic year End of the academic year
3	E-Learning	Ongoing	Twice a year		Department of Medical Education	End of each academic year
4	Mentorship Program	After every session	Twice a year		Mentor oversight committee	End of each academic year
5	Assessments	Ongoing	Twice a year		<ul><li>Year Committee</li><li>Assessment Cell UCMD</li></ul>	End of each block assessment
6	Self-evaluation and monitoring	Ongoing	Once a year		All Basic and Clinical Science Departments	End of each academic year
7	Faculty Development Program	Ongoing	Once a year		Department of Medical Education	End of each academic year
8	Research	Ongoing	Need based		Need based	Ongoing
9	Innovations in Teaching & Learning	Ongoing	Once a year		• All Basic and Clinical Science Departments	Ongoing

Sr. No	Name of members	Department	Members	Signature
1	Prof. Dr. Ghazala Hanif	Pathology Department	Member	
2	Dr. Naeem Shahzad	Anatomy Department	Member	
3	Dr. Sara Ashfaq	Medicine Department	Member	
4	Dr. Fozia Perveen	Pharmacology Department	Member	

Dr. Syed Hasan Shoaib **Director Medical Education**Queens Medical College, Kasur

Prof. Dr. Shireen Khawar

Principal

Queens Medical College, Kasur