Yekatit 12 Hospital Medical College

Educational Program Guideline

March, 2023

Addis Ababa

Ethiopia

Educational Program Guideline

Approval
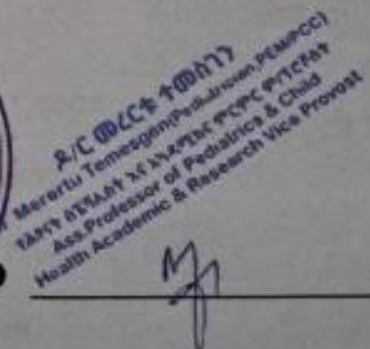
Approval Authority 1:   Y-12 HMC PROVOST

Approval Authority 2:   Y-12HMC ARVP

Commencement Date: March - 2023

SIGNED_____   SIGNED_____

ACKNOWLEDGMENTS

LIST OF ABBREVIATIONS

AC   **Academic Commission**

ARVP   **Academic and research Vice Provost**

ASQAC   **academic standard and Quality Assurance standing Committee**

EDC   **Educational Development Center**

HEI   **higher education institution**

ICT   **Information Communication Technology**

SED   **Self-Evaluation Document**

Y-12HMC   **Yekatit 12 hospital medical college**

ECTS   **European Credit Transfer System**

GPO   **Graduate Programs Office**

UGPO   **Undergraduate Programs Office**

GPA   **Graduate profile admission**

CONTENTS

1. INTRODUCTION

1.1. BACKGROUND.

Yekatit12 Hospital was established in 1923 as one of modern medical health care service delivery centres in the country. After many decades of medical service delivery, in 2011, it became a medical College by a decision of the City Government of Addis Ababa. The City Government, recognizing the long aged service that the Hospital has been rendering to the residents of Addis Ababa and the neighbouring societies taking in to account its present status decided to upgraded and re-established as centre for training medical professionals combining with medical service delivery. The proclamation (proc.no.31/2011) renames the Hospital as Yekatit 12 Hospital Medical College.

The college is devoted for undergraduate and postgraduate training programs in medium and higher level of health professionals in amalgamation with health service delivery through applying new method of training that combines theoretical training with practical application. The Hospital redesigned to be used as a research centre for the college in addition to its medical service.

Yekatit12 Hospital Medical College is now a centre for both high quality health service and academic excellence. (YHMC Legislation, 2011 G.C)

The college graduates six rounds of qualified and competent general practitioners, two batches of masters in general public health and reproductive health, one batch of paediatrics and child health specialist and internal medicine specialist.

In addition to the above mentioned disciplines the college is running speciality program in general surgery, speciality in Obstetrics and Gynecology, speciality in oral and maxillofacial surgery, speciality in Anaesthesiology and critical care, speciality in emergency and critical care, Sub speciality in uro-gyneccology and reconstructive surgery and feto-maternal medicine and masters in health care quality.

MISSION, VISION AND VALUE OF THE COLLEGE

MISSION:

Creating healthy and productive community by ensuring accessible quality health services, producing competent healthcare professionals, pursue innovative knowledge expanding research and community engagement.

VISION:

To be one of the premier university hospitals in Ethiopia recognized for excellence in medical and health science education, health services and research by 2034.

VALUE:

- Excellence
- Confidentiality
- Customer centeredness
- Teamwork
- Innovation
- Compassionate
- Responsiveness

1.2. PURPOSE OF THE GUIDELINE

The purpose of this document is to provide guidance to senior managers, academic staff, admin staff and external stakeholders on the development of new educational program and Present procedures and instructions for efficient implementation of program designing, approval and reviewing the effectiveness with the set of specifications and standard criteria.

1.2.1 Objectives of the educational program guideline

- To guide program designing process in the college
- To guide new program introduction process in the college
- To guide the program approval process in the college
- To guide program, phase out process in the college.

1.2.2. Scope of the educational program guideline

This guideline will serve as a framework to all academic units whether in designing a new a program, or reviewing an existing one.

2. PROGRAM DESIGN

This part of the guideline presents the major issues and procedures to be considered in designing new programs of study in the College. For the purpose of this document, an academic program is described as an approved curriculum and a structured learning or a standard route that is followed by a student, and its completion leads to the award of a specified degree/certificate. This part begins with a brief description of the importance of the program design, the key issues to be considered in designing new programs, and an outline of the steps of program design. The program specification and template are also discussed.

Below are key issues to be considered in designing new programs

- ✳ Relevance and demand by the market
- ✳ Sustainability in the long run.
- ✳ Availability of adequate resources and infrastructure.
- ✳ Feasibility with regard to the institute vision and mission.

2.1. IMPORTANCE OF THE PROGRAM DESIGN PHASE

The program design phase is crucial in ensuring the relevance, quality and sustainability of a program and its successful delivery. It aims at ensuring that new programs are of an appropriate standard, viable and enhance the college's mission, vision and goal. The program design phase is a rigorous and comprehensive step wise process to ensure that the program meets predetermined academic standards.

2.2. KEY ISSUES TO BE CONSIDERED IN DESIGNING NEW PROGRAMS

The following reference points should be considered in designing new programs.

2.2.1. **Relevance**: this refers to the extent to which the intended program aims and learning outcomes are aligned with the College's mission, goals and strategic plans as well as national development agendas. This requires presenting indicators that

- The program will provide a high quality and relevant curricula that emphasizes on competencies, student learning and engagement.

- Teaching, learning and assessment strategies are appropriate to attain program goals and learning outcomes. This should be supported by evidences of need assessment.

2.2.2. **Sustainability**: this refers to the market demand of the program in terms of meeting the requirements of industry, the profession or other market niches. This requires examining recent trends in student intake and survey results on employment of graduates or conducting need assessment. Evidences of market surveys undertaken to establish demand of the program or needs assessment conducted to identify target groups and ensure the support for the program from industry are necessary.

2.2.3. **Faculty resources**: this refers to the availability of core academic staff in quantity and quality to run the program. This requires presenting evidence about qualification mix and specialty of teaching staff necessary to support the goals of the program.

2.2.4. **Availability of adequate resources and infrastructure**: this requires evidences on adequacy of budget; facilities and laboratories; instructional technology; research fund; space; support staff; equipment and library resources required to support the mission and goals of the college and sustain high quality academic program and research activities.

2.3. STEPS IN PROGRAM DESIGN

Program design team should ensure that there are consultations and input from significant number of academic staff and relevant stakeholders. The program team leader should be a senior and well experienced member within the College/Department and participating in the program. The EDC office, program coordinators and committee members at all levels of the college shall provide guidance and advice to program team when required.

- **Forming program design team**. Members of the team are usually drawn from those full time academic staff that teach and participate in the department. The hosting department of the program is responsible to form the program team.

- **Gathering relevant information and developing preliminary concepts for new program based on need assessment**. Discussions on the concepts should be held at department and College levels including EDC office and Academic Commission. If the outcome of the discussions is positive, then the program team members will start the development of the new program proposal and specifications.

- **Drafting the proposal and program specification**. The proposal should contain the rationale and justifications for introducing the new program and the series of steps followed to develop the program including supporting documentation such as module descriptors and program structure. Program specification is a document that describes the key features of the program including the rationale; program duration; aims and intended learning outcome; teaching learning strategies/methods and activities; entry requirements, and module descriptors.

- **Involve external and internal assessors/reviewers:** this enables to ensure objectivity of decisions, quality and confirmation of standards by an independent advice. External reviewers may be selected from professionals working outside the college. The purpose of external assessment is to provide a perspective not available in the College. External assessors/reviewers may provide relevant information and suggestions concerning the current developments in the discipline and identify issues of concern for improvement. The External reviewers should be selected based on their records of experience and thoughts relative to broad issues of education within their respective discipline.

- **Organizing consultation forums/workshop with key stakeholders**: this may include students, employers, professional associations, external assessors, licensing authorities, and other concerned potential stakeholders to get feedback about the design of the new

program. Prior to approval, the new program document should be improved based on the comments and feedback from stakeholders and assessors.

- **Documentation:** the whole program design and approval processes and procedures shall be recorded, compiled and archived properly.

2.4.   PROGRAM SPECIFICATION

A program specification is a brief description of the learning outcomes of the new program, the knowledge and skills that graduating students are expected to achieve and this means by which these outcomes are achieved and demonstrated. This includes outcomes related directly to the curriculum, study and assessment methods, and criteria to assess performance as well as how syllabus outline and modules are organized and combined into whole qualification.

Program specification may be used to provide information to students, staff, external examiners and employers about the program offered by a department or a college. More specifically, a program specification shall contain the following major components.

- **Program title**: this refers to the name of the specific program. The program title should reflect name of the academic subject, and endpoint degree to be awarded.

- **Program description and rationale**: The description may cover the subject area, unique features about the program; the way the curriculum is structured, taught and assessed and the specific skills to be acquired by students and career opportunities after graduation. The rationale should indicate the reasons for introducing the program and planned benefits to the department as well as the College.

- **Overall credit value and equivalent European Credit Transfer System (ECTS)**: This refers to the duration of the program. The total credit hours and the ECTS equivalent required to complete the program should be stated clearly. This may include the credit value required at each stage of progression and/or module as well as the minimum credit and the equivalent ECTS required for graduation.

- **Intended learning outcomes:** refer to the essential knowledge, abilities (skills), and attitudes (values and dispositions) that constitute the integrated learning needed by a graduate of a program. Make sure that learning outcomes are related closely to the overall program aims and take account of the following areas.

- **Knowledge and understanding:** this is related to what students should know   and/or understand on successful completion of the program. This may include knowledge and

understanding of the subject content, paradigms, concepts, limitations and boundaries as well as the context in which the subject is used.

- **Intellectual skills:** this refers to the higher order cognitive skills including understanding of methodologies, critical thinking, analysis, synthesis and evaluation

- **Practical skills:** these are skills specific to the profession/discipline that may include the ability to conduct laboratory work; research on a topic or problem; ability to observe, describe or report accurately and conduct contextual analysis. This requires creating opportunities for learners to practice in an appropriate learning context.

- **Generic skills:** refer to those skills that are not discipline specific. These include personal and social skills that are readily transferable to employment and other contexts. Examples of generic skills include: communication, numeracy; effective use of IT; ability to work in teams, manage and evaluate one's own learning.

- **Module descriptors including prerequisites:** this refers to the list of modules associated with the program. Module descriptors should include a brief description of the general subject of each module; statements about how the module is structured into knowledge, know-how and skill and competence (context, role); learning outcomes; credit values and equivalent ECTS and indicative syllabus. The description should also include schedule and sequence of delivery, indicative learning materials and planned use of student time related to the number of credits/hours allocated to a module. The module structure should map onto program learning outcomes and allow their attainment.

- **Teaching and learning approaches:** refer to the broad approaches to learning and teaching and their underlying rationale. This may include a brief description of the range of teaching and learning methods employed and other innovative features of the program related to teaching and advising students. The teaching and learning methods may include self-directed learning such as problem based learning, small group teaching, mini projects, group work, lectures, tutorial sessions, supervised study, student presentations, seminars, work-based learning, readings and discussion, role-play, case study, dissertation, computer based learning, invited speakers, practical classes and demonstrations or a combination of these. Evidences of the extent to which the teaching and learning approaches are student centered and aligned with the program learning outcomes should be indicated.

- **Modes of delivery:** this refers to whether the program is delivered in full time or part-time or distance learning mode or both. The appropriateness and effectiveness of the

mode of delivery to meet program objectives and award expectations; and the minimum and maximum length of the program for each mode of delivery should be clearly stated**.**

- **Assessment strategies:** the range and variety of assessment methods (written and practical exams, projects, problem solving assignments, peer assessments of oral presentations, interactive computer and simulation assignments and group presentations, thesis and dissertations), the assessment pattern and marking criteria should be clearly indicated. This requires evidences that the program employs continuous assessment that enables students with a range of learning styles and experiences to demonstrate their performance and learning achievement with the program learning outcomes.

- **Entry requirements:** the appropriateness of the admission requirements and criteria to the attainment of program aims and goals should be stated. This should include explanations on the extent to which the admission criteria including alternative requirements are fair and transparent. The academic and non-academic criteria including interviews and entrance exams should be clarified in the entry profile.

- **Availability of adequate and qualified faculty:** whether the program has core academic staff with the appropriate credentials and experience required to meet its mission and goals. This requires evidences on the adequacy of proportion of academic staff with degree or the rank of assistant professor and above to run masters program.

- **Governance and management of programs:** indicate how the department's governance and management system supports the attainment of program goals and objectives. This may include a brief description of responsibilities, accountability and the extent to which the existing governance structure and learning environment of the college or department support student learning achievement.

- **Resources:** presenting evidences on whether the program has adequate resources and facilities to meet its goals and objectives. These may include libraries, laboratories, equipment, infrastructure, accommodation, ICT and access to electronic resources.

- **Indicators of quality and standards:** the reference points used to assess quality and standard of the program should be indicated. These may include standards and indicators in terms of the breadth and depth of academic content, innovations in teaching and learning, success and track record of graduates in employment, and program accreditation etc.

- **Mechanisms to evaluate and improve quality and standards**: the program monitoring mechanisms should be clearly indicated. The mechanisms may include student, staff and

stakeholder feedback schemes; procedures for innovation and improvement of the curriculum, standards and quality of teaching, learning and student performance.

- **Risk assessment and management** are crucial processes in various fields, including business, finance, healthcare, and academic institutions. By understanding and addressing risks proactively, organizations can make informed decisions, improve resilience, and protect their assets and stakeholders.

Risk assessment in an academic program involves identifying, evaluating, and managing potential risks or hazards that may impact the successful implementation and outcomes of the program. Similarly, risk management is a critical aspect of any academic program as it aims to identify, assess, and mitigate risks that can impact patient care, student learning, research integrity, and overall program effectiveness. Specially, in a medicine programs, the stakes are high, and the potential consequences of errors or failures can be significant. Therefore, implementing a robust risk management strategy is essential to ensure the safety, quality, and ethical conduct of healthcare services and education.

The primary objective of risk management in academic program is to proactively identify potential risks, evaluate their potential impact and likelihood, and develop strategies to minimize or eliminate them. By doing so, the program can enhance patient safety, optimize educational outcomes, and safeguard the reputation and compliance of the institution. Risk assessment and management plan should be prepared at least once in a year with annual plan of the college then it will submit to academic and research Vise provost and Educational development centre (EDC) for the follow up and monitoring of the effectiveness of the mitigation plan. If the mitigation plan is found to be ineffective discussion will be done with the stakeholders and college higher officials for better solution.

Components of risk management

A comprehensive risk management strategy involves several key components.

1. **Risk identification** involves systematically identifying potential risks specific to the program, such as clinical errors, research misconduct, patient safety concerns, and regulatory compliance issues. This may involve conducting regular risk assessments, engaging stakeholders, and leveraging collective expertise to identify both known and emerging risks.

2. **Assessment and prioritization:** based on their severity, potential consequences, and likelihood of occurrence. This allows the program to allocate resources and attention to the most critical risks that require immediate attention. Risk assessment also helps in developing a risk matrix or scoring system to determine the priority of each risk and inform decision-making.

3. **Risk mitigation strategies** are then developed and implemented to address the identified risks. These strategies may include establishing protocols, guidelines, and best practices, providing training and education to faculty, staff, and students, and ensuring compliance with regulatory requirements. Patient safety measures, research integrity initiatives, and ethical conduct guidelines are all part of the risk mitigation efforts within a medicine program.

4. **Continuous monitoring and evaluation** are essential in risk management. This involves regularly reviewing the effectiveness of risk mitigation strategies, analysing incident data and feedback, conducting internal audits, and identifying areas for improvement. By continuously monitoring and evaluating risks, the program can make necessary adjustments, implement corrective actions, and enhance risk management practices over time.

5. **Collaboration and communication** are crucial in a risk management strategy. It involves fostering a culture of open communication, where individuals feel comfortable reporting incidents or potential risks without fear of retribution. Collaboration among faculty, staff, students, and stakeholders helps in identifying and addressing risks that may span multiple areas within the medicine program.

6. **Documentation and Reporting:** Throughout the risk assessment process, it is important to maintain comprehensive documentation of the identified risks, evaluation findings, mitigation strategies, and actions taken. Regular reports are prepared to update relevant stakeholders and ensure transparency in risk management efforts.

2.5. PROGRAM SPECIFICATION TEMPLATE

The table below provides a template to be followed by all program proposers in preparing program specification.

Yekatit 12 Hospital Medical College Program Specification Template

1. Program title:
2. Program description and rationale:
3. Credits and the equivalent ECTS:
4. Program duration (in years):
5. Mode of program delivery:
6. Program governance structures in the College/Institution:
7. Department/School/Center:
8. program Admission requirements:
9. Program Aims
10. Graduate Profile/Competencies
11. Intended learning outcomes of the program:
12. Teaching and learning approaches:
13. The Learning Outcomes Assessment Strategies:
14. Program content and structure: details of the structure, distinctive features, timescale, composition, and exit points; modules sequences
15. The Program Modules descriptors:
16. Availability Of Adequate and Qualified Faculty:
17. Governance and management of programs:
18. Resources Profile and Adequate Availability:
20. Indicators of quality and standards; Graduation Requirements
21. Mechanisms to evaluate and improve quality and standards:
22. Degree Award/Nomenclature:
23. The proposed date the program will start and Signature: _____

3. Program Approval phase.

This part of the guideline presents the procedures, responsibilities, stages and criteria required for the approval of new programs. Each Department or Teaching school dean should follow the guidelines set in this section in approving and validating their new programs. The

approval processes and decisions at all levels should be informed by full consideration of the standards, specifications and procedures indicated in the program design section of this guide.

3.1. PURPOSE OF PROGRAM APPROVAL

Program approval phase is a process of validating and reassuring that all new programs are carefully planned as per the program design guidelines and specifications set by the College. More specifically, the program approval process aims at ensuring that:

- the program being proposed is robust, viable and deliverable
- the minimum academic standards and management arrangements required to provide a high quality educational programs are in place,
- there is no overlap or duplication between the new and existing programs,
- there is a market demand or niche for the new program, and its learning outcomes address the requirement of stakeholders (industry and employers need) and professions,
- there are sufficient resources (physical, human and financial) to run and sustain the program,
- The academic standards of the program are appropriate to the proposed level and title of award.
- The quality monitoring strategies and mechanisms are clearly set.

3.2. RESPONSIBLE BODY FOR PROGRAM APPROVAL

The final approval of proposals relating to new or modified programs is the responsibility of the senate. Prior to senate final approval, college academic council (AC) and departments council, schools or centers council are responsible for considering and making detailed review of new or modified program proposals and make decisions or endorse the program at respective academic council and committee, then send the program document and minutes of the council /committee requesting for approval to Academic and Research Vice Provost Office.

At department level, the Department Academic Council is responsible for detailed review and initial approval of new or modified program(s) and then making its recommendations to the respective school dean or college. At school dean or college level, the school dean or collage

Academic Council (AC) shall be in charge of reviewing and considering new programs and making recommendations to the Senate.

On behalf of the senate, the Academic Commission shall be in charge of reviewing new or modified programs and then presenting its recommendations to the senate for final approval.

Academic standards and quality assurance standing committee (ASQAC) in collaboration with program coordinators, educational development center (EDC) Office and departments hosting the program shall monitor the program design and approval process and the Academic Council will review and recommend the Senate for final approval.

3.3. ROUTES AND CRITERIA FOR PROGRAM APPROVAL

The academic training program approval process shall involve three stages: department, school or college and senate approval. The routes and criteria to be considered at each stage in approving new programs are discussed in the sub-sections that follow.

3.3.1. DEPARTMENT APPROVAL

Before the commencement of academic program approval, the program committee must complete the proposal for new program including program specification and submit it to the department chair/school head for initial approval by Department academic committee. Initial approval is required from the department/school before new or modified program is sent to college and senate for approval. For new undergraduate or postgraduate programs, the DC shall establish a program approval panel that comprises full time academic staff members that are independent of the proposed new program. The Department Council (DC) shall be in charge of reviewing new graduate programs. The approval panel or DC should undertake a rigorous review of new program by involving external reviewers for new programs. Each department shall identify and recommend internal and external assessors and the respective college makes final approval. The assessors/ reviewers should be independent of the proposed program, and they are expected to provide objective comments and judgment about the appropriateness and quality of programs.

The DC makes initial approval of programs based on the recommendations of the program approval panel and assessors. Program committees may be requested to revise their proposal based on the feedback. At this stage, the following criteria should be considered in approving new program proposals:

- Clarity and consistency of the proposal,

- Consistency of the new program with the college's mission and the college's strategic goals and plans.

- The new program is independent of existing programs within the college in terms of aims and curricula,

- There is anticipated market demand and need for the program,

- The academic rationale, standards and aims of the program are appropriate to the title and level of the award,

- The intended learning outcomes of the program are clearly stated

- The nature of learning opportunities to be offered by the program are clearly stated,

- The credit values and equivalent ECTS are appropriate to the duration and level of the award,

- The teaching, learning and assessment strategies are appropriate to attain program aims,

- The list of module descriptors, which add up to the coherent program are indicated,

- Staffing and the necessary resources to support the program are identified to standards acceptable to the college,

- Evidences of appropriate and adequate consultations with staff, students (present and past), stakeholders and potential employers, professional bodies and external assessors are presented,

- Quality monitoring and reviewing mechanisms are clearly indicated,

- Overall, the program specification is prepared in accordance with the program design guideline and template indicated in this document.

Once review of the new proposal is completed, the approved proposal should be signed by the department head, chair of the DC or program approval panel and external assessors. The department should send the approved and signed proposal together with the reports of the assessors and approval minutes to its respective college. The department approval minutes may include results of consultations, considerations of comments from external assessors and stakeholders.

3.3.2. COLLEGE APPROVAL STEP.

The college academic council shall undertake review of new or modified programs recommended by departments. The academic standards and quality assurance standing committee in collaboration with EDC Office, program coordinators and other represented from the college may organize an event with department representatives to discuss in detail any issues that arise from the proposed program. The following criteria should be considered in approval process of new or modified programs at college level:

- The approval minutes contain adequate evidences about stakeholder consultations and results of external assessors,
- The proposal for the new program is clear and consistent in terms of academic rationale and scope for introducing the new program,
- The proposed new program is robust, viable and deliverable,
- The new program is in alignment with the college' strategic goals and priorities,
- External assessors are participated and their comments and judgments are incorporated,
- evidences of market demand and needs assessment results are indicated,
- Evidences on the availability and adequacy of resources and facilities (staffing, library, laboratory and equipment, accommodation etc… are indicated,
- Program specification is prepared and submitted as per the college's program design guideline and template,

Following review of the proposal based on the criteria indicated above it will be presented and reports and recommendations will be prepared to the college academic council for approval. Considering the recommendations and suggestions of Academic standards and quality assurance standing committee, the academic council may approve or refer back the proposal to the proposing department for revision. If the proposal is approved by the college academic council, it should be signed by the college dean/director and chair of (ASQAC) then presented to the senate for final approval.

3.3.3. SENATE APPROVAL

The college senate is wholly in charge of the final approval of all new or modified programs. On behalf of the senate, the Academic Standards and Quality assurance standing Committee shall review new or modified proposals presented by colleges. The ASQAC shall convene a meeting to check whether the proposed program satisfies the criteria, procedures and specifications outlined in the college's guideline for program

design and approval. ASQAC plays an auditing role and it may consider the following major criteria in reviewing new or modified programs.

- The proposed title and degree award conforms to the requirements of the senate legislation and other supporting policies, regulations and guidelines,

- The new program is alignment with college's mission, strategic goals and priorities,

- The extent to which the program approval at department and college levels follows rigorous processes and procedures indicated in this guideline,

- input of stakeholders, external assessors and their reports,

- The development and approval of program specification is based on procedures and requirements of the educational program guidelines stipulated in this document,

- Overall, the proposed program is independent, comprehensive, viable and relevant to the attainment of the college's mission, vision and goals.

ASQAC has the power to take any of the three actions: to accept; to refer back to colleges for minor or major revisions, or to reject the proposal. ASQAC presents its recommendations of the accepted proposals to the senate through the Academic Vice provost of the college for final Approval. The senate shall focus on strategic issues in reviewing new or modified programs. The criteria may include relevance of the new program to the college's mission and strategic plan as well as national priorities, uniqueness of the proposed program with the existing programs, resource implications to run the program, and market niche.

The senate has the ultimate power to approve or reject proposed new or modified program. The official decision of the senate shall be communicated in official letter to colleges within five working days through the college provost with a copy to the college Registrar and other concerned offices and ASQAC. Any college/institute or school or center or department cannot launch new programs without the official approval of the college senate or its standing committee. Admission of students to the program shall be announced by the registrar after program approval is made by the college Senate.

3.4. SELECTION AND RESPONSIBILITIES OF REVIEWERS

In approving new or modified programs, departments should make use two external and two internal reviewers. This enables departments to get independent and objective comments that are essential to provide confidence about the standard and quality of programs. Reviewers shall be selected by departments and their appointment shall be approved by colleges. The role of reviewers is to provide objective comments and judgments about the quality of

academic programs in terms of the appropriateness of the teaching and learning methods; program characteristics; centrality of the program to college mission; program support and resources; program administration; the articulation of the aims and learning outcomes; arrangements for assessment; the academic content and structure of the program; development of appropriate transferable skills and arrangements for quality assurance. Reviewers are expected to report their overall assessment, program strengths and weaknesses, and comments for improvement. The criteria for the selection of the reviewers include that the academic and professional qualifications and experiences should be appropriate to the discipline; the reviewers are required to be independent of the proposed program in terms of teaching or research affiliation to the department.

3.5. PROGRAM APPROVAL TEMPLATE

Below are some of the major considerations during program approval.

1. Title of the program:
2. Duration of the program (in Years):
3. Proposing department:
4. Program descriptions:
5. Collaborating institutions and areas of collaboration:
6.Admission/ Entrance requirements :
7. Attached documents: ✓ Program proposal   ✓ Program specification   ✓ Internal and External assessors' report   ✓ Approval minutes
8. The proposed date:
9. Initial approval by department: • Signature: department/center chair/school head   Date: _____
10. College approval: • Signature: College dean/institute director   Date: _____

11. Senate approval:	
ure: Chair,	Date: _____

4. PROGRAM REVIEW

Program review is a process of comprehensive analysis of program quality that helps to ensure the effective operation and managements of an academic program and its continuing relevance and validity. Program review is a cyclical process of scrutiny by which an approved program is critically evaluated at a predetermined time interval (usually five to seven years, 5-7yrs). It provides critical information for internal actors about the relevance, quality, strengths and weaknesses, opportunities and threats, student learning outcomes, and educational resources.

4.1. PURPOSE OF PROGRAM REVIEW

The purpose of a program review process is to improve the quality and standards of academic provisions and make significant change to the program, if necessary. It provides an opportunity for departments and colleges to reflect on their strengths and weaknesses; enhance the resource and quality of their program and make decision on strategic directions and long-term planning based on solid information and priorities.

More specifically, the objectives of an academic program review are to,

A. Maintain the educational quality,

B. Ensure program improvement by highlighting strengths and identifying opportunities for strategic change,

C. Ascertain the currency and validity of program aims and learning outcomes in light of the developing knowledge and practice in the discipline, and in meeting the changing needs of stakeholders,

D. Determine whether programs should be enhanced or maintained or eliminated.

4.2. SCOPE AND FOCUS AREAS OF PROGRAM REVIEW

Quality of a program can refer to the inputs (students, staff, educational resources and facilities to support the program, administration and governance of the program), the

transformation process (curricula, teaching learning, assessments and, research), or outputs/outcome (graduates competencies, research publications, quality of services rendered, acquired knowledge and skills of graduates). The scope of program review includes analyses of data pertaining to the following focus areas:

4.2.1. CURRICULUM AND ITS IMPACT ON STUDENTS

The extent to which the program provides a high quality curriculum that emphasizes on attainment of program mission, particularly student learning outcome and engagement is a major area of program review. This may include analysis of data on currency and appropriateness of curricular contents and structure (breadth, coherence and depth) and intended learning outcomes to the level of the discipline; the program's curricular strengths and weaknesses; unique aspects; trends in the discipline that might have an impact on the program, and alignment of curricula to program aims and goals.

4.2.2. TEACHING, LEARNING AND ASSESSMENT

The extent to which the educational process is related to student learning and outcomes and goals is another focus area of program review. This requires analysis of data on the appropriateness and effectiveness of the range of teaching, learning and assessment strategies and methods employed to determine student achievement and program goal attainment. This may include data on the quality and relevance of student advising, teaching and learning activities, assessment/examination systems to the standard of the award, and the transformational learning opportunities (development of knowledge, understanding and intellectual skills) provided to students.

4.2.3. FACULTY AND STAFF

The adequacy and appropriateness of faculty and staff resources to meet program's mission and goals is a major focus area of program review. This involves analysis of data on availability, adequacy and professional competence of staff resources to the program as well as presence of conducive and productive work environment for all staff. This may include analysis of information concerning the proportion of staff with terminal degrees; fulltime staff (by number, qualification, rank, specialty, age, gender, teaching or research experience and diversity); appropriateness of scholarship and teaching credentials of staff; records of

professional practice (student and peer evaluation); staff engagement and commitment; teaching load; program's dependency on part-time staff; recruitment and staff renewal policies; coherence of performance standards for faculty review and promotion, and professional and pedagogical development opportunities for staff.

4.2.4. STUDENTS' PROGRESSION AND ACHIEVEMENT

This refers to whether the program attracts, retains and graduates high quality students. It may require data analysis on students' profile (by gender, age, GPA) and learning experience; the appropriateness of student size and graduate profile to the mission and goals of the program; enrolment patterns; academic qualification of admitted students; students' engagement; the retention and graduation rates of students; qualification awarded; mechanisms to monitor students' progress and achievement; adequacy and consistency of student advising; intellectual and social climate for learning; academic expectations and development, and student performance and graduate employment.

4.2.5. FINANCIAL, INFRASTRUCTURAL AND HUMAN RESOURCES

This focus area refers to the sufficiency and effective utilization of financial, infrastructure/facilities and human resources to meet program goals and objectives. This requires analysis of data on the adequacy of budget to support and sustain program mission and goals; adequacy and proper utilization of teaching and learning resources and infrastructure including classrooms, laboratories, equipment, library resources, instructional technology, technical and support staff as well as student support services and guidance.

4.2.6. RESEARCH AND SCHOLARLY ACTIVITIES

In this area, the extent to which teaching and learning is linked to research and practical attachment shall be reviewed. This includes analysis of information on whether there is program's research agenda and enhance the teaching learning process; level of faculty engagement in research and publications; quality and appropriateness of students' research to the degree award; links or partnerships with industries and other external stakeholders; adequacy and utilization of research grants and facilities; impact of faculty research on teaching learning improvement; the overall research strengths and weakness.

4.3. THE PROGRAM REVIEW PROCESS

Program review process includes both internal self-audit and external review, followed by written report. This requires forming internal and external review teams. The internal review team is primarily responsible to assess relevance and quality, strengths and weaknesses, opportunities and threats of programs within the college. External reviewers focus on assessing quality of the program in relation to its mission and in comparison to standards of similar programs that are external to the college.

4.4. RESPONSIBILITIES OF THE DIFFERENT COMMITTEES AND OFFICES

Academic program review cannot be successful without the active participation of all concerned individuals, committees and offices. It requires that all involved in the review process understand and carry out their duties and responsibilities in a timely manner.

4.5. THE SELF-AUDIT STUDY TEAM.

The Academic standards and quality assurance standing committee (ASQAC) and education development center office (EDC) in collaboration with departments and program coordinators are responsible to undertake the self-audit study for their respective programs. In this regard, the entire faculty and staff of each program within a department are required to actively participate in all phases of the academic program review process. ASQAC, EDC and Program Coordinators need to establish self-audit study team and organize orientation to the program review team, faculty and staff. And also recommend a list of possible external evaluators and reviewers; arrange space and tentative schedule for the site visit. More specifically, the specific responsibilities or TOR for the self-audit study team include the following.

- Carry out review of academic programs within the department,
- Identify strengths, weakness and duplication of programs within the department,
- Produce self-audit evaluation report as per the set schedule and submitting it to the concerned bodies,
- Actively participate in the site visit including in entry and exit interviews by external examiners,
- Reviewing the external examiners' report, incorporating their comments and produce the final report,
- Documenting, compiling and archiving all the reviewed process in accordance.
- Responding to the external reviewers' comments by developing action plan for improvement.

- Prepare a workshop or review meeting conference with the college and stakeholders
- Report further recommendations and future strategic plans

4.6.   EDC OFFICE

EDC shall participate throughout the entire program review process in providing facilitation, continuity and guidance to colleges, departments and different review committees. More specifically, EDC is responsible in:

- Providing program review guidelines to colleges and departments,
- Facilitating schedules for program review,
- Arranging orientation with different review teams,
- Scheduling external review in consultation with college deans,
- Monitoring the program review process conducted at all levels,
- Maintaining all official review files including communications, self-study and external review reports,
- Presenting program review final results to AC,
- Participating in post review action planning

4.7. PROGRAM PHASE OUT

4.7.1. ACTIONS DURING CLOSING (PHASE OUT) OF A PROGRAM

A decision to close an educational program, branch campus, or the entire institution requires thoughtful planning and careful consultation with all affected constituencies.

Every effort should be devoted to informing each constituency as fully as possible about the conditions compelling consideration of a decision of such importance, and all available information should be shared.

As much as possible, the determination to close a program, branch campus, or the institution should be made through a consultative process and only after alternatives have been considered, but responsibility for the final decision to close rests with the institution's governing board. Because the immediate interests of current students and faculty are most directly affected, their present and future prospects require especially sensitive and timely

The possible cause to close	
Internal factors	**External factors**
fund problem	Customer availability
institute capacity	Increment of payment
unsustainability of organizational support	absence of work opportunity(vacancy)

attention and involvement. If an institution decides to close an educational program, branch campus, or the entire institution, it must consider the following options:

1. The institution teaches out currently enrolled students; no longer admits students to programs; and terminates the program, the operations of a site or a branch campus, or the

operations of an institution after students have graduated. The institution must submit to teach-out plan for approval.

2. If the institution enters into a contractual teach-out agreement for another institution to teach out the educational programs or program, the teach-out agreement requires approval in advance.

4.7.2. TEACH-OUT PLANS

A teach out-plan is a written plan developed by an institution that provides for the equitable treatment of students if an institution, or an institutional location that provides 50 percent of at least one program, ceases to operate before all students have completed their program of study, and may include a teach-out agreement between institutions.

4.7.3. TEACH-OUT AGREEMENTS

The institution may include a teach-out agreement as part of its teach-out plan. A teach-out agreement is a written agreement between institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if an institution, or an institutional location that provides 50 percent of at least one program offered, ceases to operate before all enrolled students have completed their program of study. If an institution includes a teach-out agreement as part of its teach-out plan, the agreement should be submitted to the Commission office for approval prior to its implementation.

4.7.4. CLOSING A PROGRAM

When the decision is made to close an educational program, the institution must make a good faith effort to assist affected students, faculty, administrative and support staff so that they Experience a minimal amount of disruption in the pursuit of their course of study or professional careers. In all cases, individuals should be notified of the decision to close a program as soon as possible so that they can make appropriate plans.

Students who have not completed their programs should be advised by faculty or professional counsellors regarding suitable options including transfer to comparable programs. Arrangements should be made to reassign faculty and staff or assist them in locating other employment.

The Academic Commission on Colleges will work with ministry of Education to the extent feasible, to ensure that students are given reasonable opportunities to complete their education .

An off-campus instructional site is a location geographically apart from the main campus at which 50 percent or more of the credit for at least one program is offered. Such sites must be approved in advance by the Commission on Colleges.

4.7.5. CLOSING BRANCH CAMPUS

As stated in the Commission's policy "Substantive Change for Accredited Institutions of the Commission on Colleges," a branch campus is defined as a location of an institution that is geographically apart and independent of the main campus of the institution. A location is independent of the main campus if the location is

1) Permanent in nature,

2) Offers courses in educational programs leading to a degree, certificate, or other

3) Recognized educational credential,

4) Has its own faculty and administrative or supervisory organization, and

5) Has its own budgetary and hiring authority.

After the decision has been made to close a branch campus, or an additional site that is less permanent than that of the branch campus, all affected constituencies should be notified promptly including students, faculty, and support staff. The chief executive officer should notify the Commission in writing as soon as possible. Every effort should be made to assist current students to continue their education without disruption.

Faculty and staff either should be reassigned or assisted in locating other employment without additional charge.

4.7.6. CLOSING AN INSTITUTION

A decision to close an institution requires specific plans that provide for the students, the faculty, and the administrative and support staff, and the disposition of the institution's assets.

Many considerations bear upon closing an educational institution and each situation will be unique. Nevertheless, the guidelines will be helpful to each institution considering closing.

A. The Students: -Students who have not completed their degrees should be provided for according to their needs. Arrangements for transfer to other institutions will require complete academic records and all other related information gathered in dossiers which can be transmitted promptly to receiving institutions.

Arrangements for the teach-out of programs should be in line with the requirements of the Commission's Substantive Change policy.

Agreements made with other institutions to receive transferring students and to accept their records should be in writing and in accord with Academic Commission policy.

Where financial aid is concerned, particularly federal arrangements should be made with the appropriate agencies to transfer the grants to the receiving institution. Where such arrangements cannot be completed, students should be informed.

In cases where students have held institutional scholarships appropriate agreements should be negotiated if there are available funds which can be legally used to support students while completing degrees at other institutions.

B. Academic Records and Financial Aid Transcripts: - Arrangements should be made with board of higher education or another appropriate agency for filing of student records.

-If there is no agency which can receive records, arrangements should be made with other university, with a private organization to preserve the records.

-Notification should be sent to every current and past student indicating where the records are being stored and what the accessibility to those records will be. Where possible, a copy of a student's record should also be forwarded to the individual student. The institution must notify the Academic Commission regarding the final filing of student records.

C. Provision for Faculty and Staff: - In every possible case, the institution should arrange for continuation of those faculty and staff who will be necessary for the completion of the institution's work pending the closing date.

In those cases, where faculty and staff will no longer be needed, the institution should make every effort to assist them in finding other employment. It should be understood that the institution can make no guarantees, but genuinely good faith efforts to assist in relocation and reassignment are essential.

D. Final Determinations: - Determinations must be made to allocate whatever financial resources and assets remain after the institution provides for the basic needs of current students, faculty, and staff. When the financial resources of the institution are inadequate to

honor commitments, the board should investigate prior to its decision to close what alternatives and protection are available under applicable bankruptcy laws.

-Every effort should be made to develop defensible policies for dividing the resources equitably among those with claims against the institution.

-One of the most effective ways of achieving this goal is to involve potential claimants in the process of developing the policies. Time and effort devoted to carrying the

process to a judicious conclusion may considerably reduce the likelihood of lawsuits or other forms of confrontation. It is impossible to anticipate the many claims that might be made against the remaining resources of an institution, but institutions should give attention to the following three concerns:

- Students have the right to expect basic minimal services during the final semester not only in the academic division, but also in the business office, financial aid office, registrar's office, counseling, and other essential support services. Staff should be retained long enough to provide these services.

- Staff should be willing to accept the possibility of early termination of their contracts, provided that reasonable notice is given to all employees and that the reasons for retaining some personnel longer than others are based on satisfying the minimal needs of students and the legal requirements for closing.

E. The Closing Date: - The final action of the institution's governing board should be a formal vote to terminate the institution on a specified date. That date will depend on a number of factors including the decision to file or not to file for bankruptcy. Another key factor is whether or not all obligations to students will have been satisfactorily discharged.

F. Disposition of Assets: - In the case of a not-for-profit institution, the legal requirements of a state must be carefully examined with respect to the disposition of institutional assets.

- Arrangements for the sale of the physical plant, equipment, the library, special collections, other essential holdings, and for the disposition of any endowments or special funds must be explored. In case of wills, endowments, or special grants, institutions should discuss with the donors, and other providers of special funds, arrangements to accommodate their wishes.

-All pertinent federal and other agencies need to be apprised of the institution's situation and any obligations relating federal funds cleared with the proper authorities.

G. Other Considerations: - An institution has the obligation to inform the academic Commission of its plans for closing and of its final closing date. The institution should establish a clear understanding with other agencies involved with its activities to assure that

their claims and interests will be properly processed. Insofar as possible, the institution should assure that its final arrangements will not be subject to later legal proceedings which might jeopardize the records of its students or faculty.

4.8. EFFECTIVE DATE

This program guideline becomes effective upon approval by the yekatit - 12 HMC academic standards and quality assurance senate standing committee (ASQAC).

4.9. REVIEW OF THE PROGRAM GUIDELINE

This educational program guideline shall be reviewed from time to time but not later than five (5) years or when demanding needs are arising.

5. REFERENCES

1. Yekatit 12 HMC Educational Quality Assurance Policy manual 2016 E.C
2. DORSET COLLEGE DUBLIN, Quality Assurance Manual 2020,
3. Makerere University, Quality Assurance Policy Framework, April 2007
4. Kenya medical Training college, Quality Assurance Policy, May 2019 KMTC IS ISO 9001:2015 CERTIFIED
5. FDRE Education and Training Authority, Medicine Program Accreditation Data Collection Toll (DCT), July, 2023
6. Yekatit 12 HMC program design, approval and review guideline, June, 2010.

6. ANNEX.
6.1. Y-12 HMC Questioner for Graduating Students (To Be Filled By Graduating Students Before Awarding Of Degree)

The survey seeks graduating students' input on the quality of education they received in their program and the level of preparation they had at university. The purpose of this survey is to assess the quality of the academic programs. We seek your help in completing this survey.

A: Very satisfied   B: Satisfied   C: Uncertain   D: Dissatisfied   E: Very dissatisfied

No	Survey questioner	A	B	C	D	E
1.	The work in the programme is too heavy and induces a lot of pressure	☐	☐	☐	☐	☐
2.	The program is effective in enhancing team-working abilities	☐	☐	☐	☐	☐
3.	The programme administration is effective in supporting learning.	☐	☐	☐	☐	☐
4.	The programme is effective in developing analytical and problem solving skills	☐	☐	☐	☐	☐
5.	The programme is effective in developing independent thinking	☐	☐	☐	☐	☐
6.	The programme is effective in developing written communication skills	☐	☐	☐	☐	☐
7.	The programme is effective in developing planning abilities	☐	☐	☐	☐	☐
8.	The objectives of the program have been fully achieved	☐	☐	☐	☐	☐
9.	Whether the contents of curriculum are advanced and meet programme objectives	☐	☐	☐	☐	☐
10.	Faculty was able to meet the programme objectives	☐	☐	☐	☐	☐
11.	Environment was conducive for learning.	☐	☐	☐	☐	☐
12.	Whether the Infrastructure of the department was good	☐	☐	☐	☐	☐
13.	Whether the programme was comprised of Co-curricular and extra-curricular activities.	☐	☐	☐	☐	☐
14.	Whether scholarships/ grants were available to students in case of hardship	☐	☐	☐	☐	☐
15.	The internship experience is effective in enhancing my ability to work in teams, critical thinking, professional development, time management skills, discipline & to link theory and practice	☐	☐	☐	☐	☐

What are the best aspects of your programme?

_____

_____

_____

What aspects of your programme could be improved?

_____

6.2. ETA Modified Standard Checklists for Internal Audit.

Table 3: Medicine and Health Sciences		
Standards	**Sub-standard**	**Weightings**
1. Program outcome	1.1. Alignment with institutional mission/vision/goals 1.2. Program Development and relevance	**5**
2. Curriculum	2.1. Curriculum Design and Organization 2.2. Teaching-Learning Methods 2.3. Curriculum evaluation and review process	**9**
3. Learning, teaching and Assessment	3.1. Assessment Policy and system 3.2. Assessment for learning experience 3.3. Assessment for decision making 3.4. Assessment Methods	**20**
4. Students	4.1 Student Selection and Admission policy 4.2 Student counselling and support services 4.3 Students progression 4.4 Alumni	**12**
5. Academic Staff	5.1 Staff recruitment and management 5.2 Staff support and retention 5.3 Staff Development and code of ethics (policy)	**15**
6. Educational Resources	6.1. Classroom 6.2 Office for staff 6.3 Practice center (Skill lab./workshop/demonstration) 6.4 Library and IT resources	**20**
7. Research, and Community Engagement	7.1.Research 7.2.Community engagement 7.3.Collaboration	**7**
8. Program Management	8.1 Organization structure 8.2 Leadership and decision making 8.3 Allocation of resources 8.4 Academic Records	**5**
9. Continual Quality Improvement	9.1 Quality Assurance System 9.2 Implementation of quality assurance 9.3 Monitoring and evaluation of quality assurance 9.4 Documentation and dissemination	**7**

6.3. Eta Accreditation Awarding System, Type & Duration of Accreditation

Range of Total Weighted Average Score	**Accreditation status**	**Duration of Accreditation**
80-100	Full Accredited	For Five years
70-79.99	Accredited with condition	For Three years
Less than 70%	Not Accredited	Denied