



Dubai Medical College for Girls

**Program Title: The Doctor of Medicine
(MD Program)**

**Program Code and Number DMCG-MD-102
Program Specifications**

**Date of initial accreditation: May 1st, 1996
Dates of renewal of the program January 2022**

Introduction	4
Program Vision.....	4
Program Principles	4
Program Aims.....	5
Program Learning Outcomes	5
Completion requirements.....	6
Program Description	6
Program Structure	6
Course Domains of the MD Program	7
MD Program Domains.....	8
MD Program: Figure representation of Course Domains	8
General Education.....	9
Aims.....	9
Objectives of General Education.....	9
General Education outcomes.....	9
Electives	9
Study Plan for MD Program	11
Schedule for program delivery	14
Support for Student learning	15
Career Guidance	15
Student Counselling	17
Student Advising and Mentoring Services	17
Advisee Role and Responsibilities	17
Criteria for Admission	18
MD – 6 year Program Entry to Year 1	18
Admission Requirements	18
Admission Criteria Per Curriculum.....	18
Additional Information for Secondary School Qualifications Obtained Outside UAE	20
MD – 6 year program (Entry to Year Three)	20
Credit Transfer and recognition of Prior Learning	21
Academic Units delivering the program	22
Duties of the Progression Committee (Competency Assessment Committee).....	22
Duties of Course Coordinator	22
Duties of Phase Coordinator	24
Delivery support Partner.....	24

Teaching and Educational Facilities	25
Teaching and Learning strategy	26
Delivery Mode.....	26
Teaching and learning Methods.	27
Description of Teaching Methods.....	27
Students Assessment Strategies	30
Assessment Methods to be used in the curriculum.	31
Feedback (to Students) on the Assessment Process	32
Description of the Assessment Methods.....	32
Grading Scale	34
Scheme of pedagogy and assessment	34
Progression requirements and check points	34
Annual progression	34
Phase progression.....	35
Grace Decisions.....	35
Mapping CLOs, Program learning outcomes against the Emirates MEDs and EPAs	35
Program Learning outcomes mapping against courses.....	36
Percentage of CLOs addressing Each PLO.....	36
Number of Courses and Credit Hours Addressing Each PLO	36
Number of Courses and Credit Hours Addressing Each PLO Diagrammatic representation.....	37
Evaluation of Teaching and learning.....	37
1. Program Review and Evaluation	37
1.1 Course Delivery Review and Evaluation.....	37
1.2 Program Review	39
2. PLO enabling Competency Mapping.....	41
3. PLO- QF emirates Mapping	41
4. Assessment plan for program learning outcomes and KPIs	41
Program design review and external evaluation	42
External Evaluators	42
Evaluation Process	42
Course syllabi review scope	43
Curriculum Review	43
Curriculum Assessment Criteria Used.....	43
Decisions Made Based on Assessment Criteria	43
Authoring Team and Date of Document Issue, Revision and Approval.....	44

Introduction

Dubai Medical College for Girls was founded in 1986 with a vision to “To serve the healthcare community by nurturing competent healthcare professionals while promoting a learning environment that fosters innovation, leadership, continued professional development and quality assurance, making DMCG one of the leading medical schools in the world.” This vision reflected the vision of its owner Haj Saeed bin Ahmed Al Lootah.

Three decades of academic distinction have made DMCG a truly dynamic center of higher education par excellence.

With over 1500 graduates practicing medicine across the world and a campus that includes professors and students from over 50 different countries, DMCG has earned a reputation as one of the best institutions for medical education and a beacon of academic excellence.

phases. The curriculum has been redesigned in compliance with CAA requirement for the implementation of 2+6 years of education for the, Doctor of Medicine (MD) program.

The program is a six-year program graduating physicians with a capacity to practice in a global community. The program consists of three phases each of which ends with a progression check point before transitioning to the next phase. This program accommodates graduate entry at year 3. It is built of a number of domains each of which has its own focus.

The new program is competency based built in alignment with the Emirates Meds approved competency framework.

Program Vision

The curriculum with all its components is the core of the college’s daily functions. It translates and transcribes our core values and dedication to excellence. The college, being a women’s college, sets its priorities on the curriculum structure. The vision of our curriculum sets priorities that feed into building personalities, and social and emotional development of women leaders.

The value of educational attainment comes at the core of our curricular vision but assessment for learning is the main objective of any assessment activities in the curriculum.

Our curricular vision seeks to find harmony between the four broad philosophies of what education is for: personal empowerment; cultural transmission; preparation for citizenship; and preparation for work. This comes with a focus on cultural acceptance and integration.

Program Principles

The curriculum is guided by the following principles:

- Balanced – Promotes intellectual, moral, spiritual, aesthetic, creative, emotional, and physical development.
- Horizontally integrated - revolving around a set of clinical presentations that integrate early clinical relevance.
- Coherent – Makes explicit connections and links between basic science knowledge and clinical practice.
- Vertically Integrated competency based– utilizing competency progression as a framework guiding student learning.

- Relevant – Seeks to connect the valued outcomes of a curriculum to the pupils being taught it; provides opportunities for pupils to make informed choices.
- Student centered - with a modality that allows for students to track their own learning and identify their own learning gaps.
- Spiral – where there are longitudinal threads running throughout the curriculum where outcomes are revisited at monitored intervals.

Program Aims

This program aims at graduating a physician with the following attributes that are extracted from the thematic roles of Emirates Meds Competency framework and core competencies enlisted in Emirates MEDS

- Medical Expert
- Evidence based practitioner and scholar.
- Patient care provider and health advocate
- Communicator
- Collaborator, innovator and leader
- Professional
- System based healthcare advocate.
- Self and profession enhancer
- Socially accountable

Program Learning Outcomes

1. Demonstrate knowledge and comprehension with substantive depth in areas of core biomedical, psychosocial, and clinical sciences.
2. Apply biomedical, psychosocial, and clinical sciences knowledge in the clinical context for promotion of health, prevention of disease, and the management of common clinical conditions within the framework of ethical and legal regulations as an undifferentiated general medical practitioner and in preparation for future specialist training.
3. Utilize interpersonal, communication and clinical reasoning skills to interview and elicit a patient's medical history and to communicate effectively with patients in contexts other than information gathering, caregivers, and the other members of healthcare team, within the context of cultural awareness.
4. Apply clinical and technical skills to perform physical examination and basic clinical procedures.
5. Deliver patient care that is patient-centered, compassionate, appropriate, and effective for health promotion and health problems management.
6. Engage in research and other scholarly activities, and critically analyze existing literature to apply it for the practice of evidence-based medicine.
7. Demonstrate continuous self-improvement, innovation, entrepreneurship, and lifelong learning abilities.
8. Demonstrate an awareness of the system-based practice approach to patient care considering healthcare contexts locally and globally.
9. Demonstrate the ability to meet the health needs of patients and UAE society, through the promotion of community engagement and social accountability values.

Completion requirements

The student will be commended for the award of the Doctor of Medicine degree upon:

- Satisfying all conditions of his / her admission
- Successful completion of all General Education requirements
- Having successfully completed 226 credits of course work with a GPA minimum of 2.
- Passing two elective Summer Courses
- Sitting for IFOM 1 and 2 examination
- Passing a comprehensive Exit Exam with not less than 65% marks

Program Description

The Doctor of Medicine (MD Program): It is a six-year competency-based program with a total of 226 credit equivalence, organized in three inter-related phases - each is two years with three critical points "Gates" at the end of each phase. The eligibility of students' progression to the next phase will be checked at the gates.

The Doctor of Medicine (MD Program) will be accredited by the Commission for Academic Accreditation (CAA), Ministry of Education, Higher Education Affairs, United Arab Emirates. The outcome competencies of the program are benchmarked with the Emirates MEDs competency framework.

Program Structure

The MD curriculum comprises of three phases that reflect the philosophy and vision of the college.

Phase I: Pre-Medical

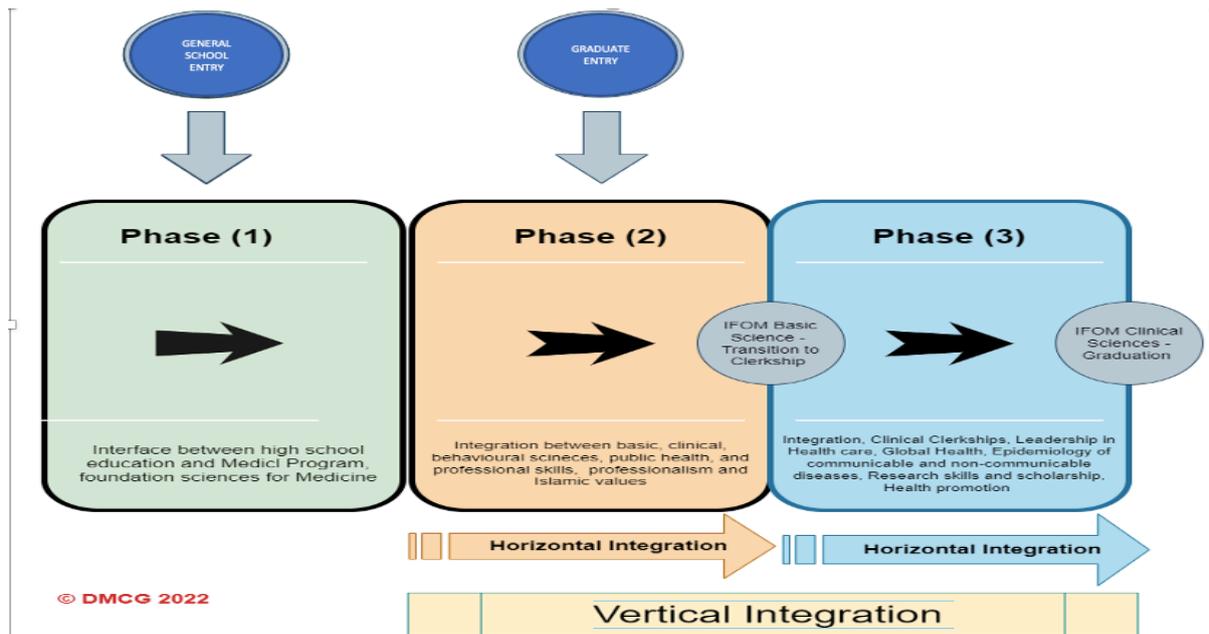
This phase is the interface between secondary education and the Doctor of Medicine's 4-years Program. In this phase, the students will be prepared to study Medicine academically, mentally, and emotionally. Introduction to the concept of the health and health system and the role of the doctor as a professional will take place during this phase.

Phase II: Pre-Clerkship

In this phase, the students will study Organ System Modules (using Clinical Presentation Curriculum), Professional and Clinical Skills, Epidemiology and biostatistics, Health System Studies, and Research and Knowledge Synthesis Skills will be integrated and longitudinally through this phase. Students will sit for IFOM Basic Sciences at the end of this phase.

Phase III: Clerkship

In the clerkship phase, students will study family medicine and geriatrics, and Emergency Medicine in addition to medical and surgical clerkships, psychiatry and mental Health, Pediatrics, and Obstetrics and gynecology with more focus on woman's health. Professional Development, Evidence-Based, Patient-Centered Practice, Health System Studies, communicable and non-communicable diseases will be integrated longitudinally in this phase considering the social determinants of health in the country and emerging trends in Medical Education.



The duration of the program is 6 years, and the curriculum is organized in a clinical presentation-based sequence integrating biomedical sciences, clinical sciences, social/behavioral sciences and patient-care skills. The curriculum is designed to develop a culture of teamwork, scientific enquiry and lifelong learning in the students which are essential for the effective practice of Medicine.

Clinical presentations that constitute the thematic core of integration were based on the identified clinical presentations in the Emirates MEDs.

The curriculum is delivered in a number of different healthcare settings including ambulatory and inpatient care, primary health care, emergency, and community settings providing wide experience. Additional hands-on training is provided during the pre-clinical years in a state-of-art simulation set-up.

Assessments are of high standard and benchmarked internationally by the Medicine students taking the International Federation of Medicine (IFOM) Examination (Basic and Clinical Sciences) conducted by the National Board of Medical Examiners (NBME), USA.

Graduates are awarded the Medicine degree on successful completion of the 6-year program and passing a comprehensive Exit Examination. The Medicine degree awarded by DMCG is recognized by the Ministry of Health, UAE and all graduates are eligible to take the licensing exam in the country to be evaluated for independent practice.

COURSE DOMAINS OF THE MD PROGRAM

The program contains a mix of courses from general, introductory, and advanced courses to conform with the requirements of international norms and the national guidelines of UAE.

The 51 courses are categorized into four Domains. The Domains and the codes of the courses in those domains are listed below:

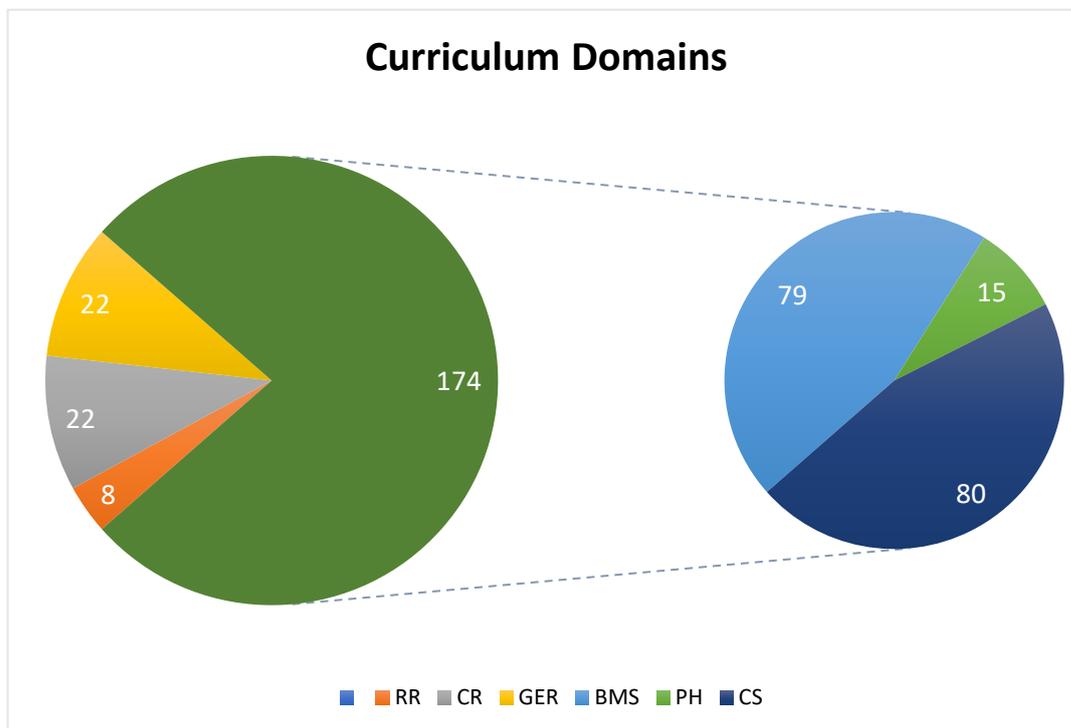
1. **Major Requirements:** (174 CH)
 - **BMS:** Basic biomedical Sciences includes 16 courses. (79 CH)
 - **PH:** Public Health includes 5 courses. (15 CH)

- **CS:** Clinical Science includes 9 clerkships. (80 CH)
- 2. Research Requirements (RR):**
RR includes 4 Courses -RKT308, BIS404, RKT409, EBM603 (8Credit hours)
 - 3. College Requirements (CR):**
CR includes 8 courses -THE108, EOM206, IFM207, PAE209, CIP210, PQH504, HLE507, GIH606 (22 credit hours)
 - 4. General Education Requirements (GER):** (mandated by the CAA Standards)
GER includes 7 courses- 21CS101, EMS103, UES104, ILS107, ARA201, CIE204, ENS208 (22Credit hours).

MD PROGRAM DOMAINS

	Domains	Courses	Credits
Major Requirements (MR) (174 CH)	BMS Basic biomedical Sciences	16 courses	(79 CH)
	PH Public Health	5 courses	(15 CH)
	CS Clinical Science	9 clerkships	(80 CH)
Research Requirements (RR)		4 courses	(8 CH)
College Requirements (CR)		8 courses	(22 CH)
General Education Requirements (GER): CAA mandatory		7 courses	(22 CH)

MD PROGRAM: FIGURE REPRESENTATION OF COURSE DOMAINS



GENERAL EDUCATION

General Education forms one of the domains of the MD Program. The general education component adds breadth to the student's academic experience.

Aims

The general education course aims at creating well-rounded individuals with knowledge, values, ethics and skills to be productive global citizens.

Objectives of General Education

To enable students to be lifelong learners who will acquire knowledge from different sources and cultural movements to make logical judgement. This course will motivate them to engage in critical reflection and intellectual discovery which they will effectively communicate while contributing positively to society.

- **Knowledge**
On completion of each course, the student will be able to apply an introductory concept of the principles in the specific discipline and the ability to think about these concepts in relation to real-life issues.
- **Skills**
On completion of each course, the student will be able to demonstrate an increased level of proficiency in performing core competencies such as written communication, oral communication, electronic communication, critical thinking, quantitative reasoning, project management, decision-making (informed, sensible, and ethical), logical reasoning, language skills and problem-solving skills.
- **Affective**
On completion of each course, the student will be able to recognize solutions and solve ethical dilemmas using altruistic values and ethical standards.

General Education outcomes

At the end of the GE program, the student will be able.

1. Demonstrate leadership, teamwork, project management, critical thinking skills and entrepreneurship skills.
2. Apply knowledge and analytical skills to understand a variety of perspectives and experiences.
3. Apply logical and clinical reasoning to discipline-specific problems and decision making.
4. Assess and weigh moral beliefs and practices and their applications to ethical dilemmas.
5. Interchange ideas and information effectively using verbal, listening, electronic and writing skills for general and discipline-specific communication.
6. Explore how to generate creative ideas using mindsets and practices exhibited by successful innovators.
7. Recognize cultural movements that have shaped values and behavior with reference to UAE Society

ELECTIVES

In addition to the credit courses there are student selected components in the curriculum. Students are required to take one of a selected list of electives that are predefined based on a needs assessment performed at the end of phase two. These electives are studied over 4 weeks in the summer semester.

After year 4 the students will select one elective from a research elective pool and after year 5 the students will be expected to finalize a clinical elective in any acceptable health provider inside or outside UAE after prior permission from the college.

The research summer elective course is offered to undergraduate students in the MD Program in year 4 in summer break. The course is a noncredit course to be covered over 4 weeks. This is a “0” credit hour course for students who want to learn how to publish their work, write a scientific paper, apply what they learned in research and knowledge translation. The course aims to provide students with the necessary knowledge and skills to prepare and submit their research manuscripts in scientific journals. The course will cover the key components of scientific writing, including manuscript structure, writing style, data presentation, and referencing. The course will also provide students with an opportunity to apply these concepts in practice by developing their own research manuscript. A basket of courses will be provided to students, and they will get the opportunity to go through the journey of the preparation of a systematic review from inception & conception to actualization. The course will cover the key components of the preparation of writing a scientific paper, conducting systematic review and publishing. The course will be delivered through lectures, group work, assignments, computer lab sessions, and presentations

Research electives could include any course from a basket that is not limited to the following courses:

- Qualitative research methods
- Statistics advanced course
- Scientific presentation skills
- Publishing your work
- Clinical research methods
- Introduction to systematic review
- Proposal writing

The Clinical electives course is offered to undergraduate students in the MD Program in year 5 in summer break-. The course is a noncredit course to be covered over 4 weeks. Courses are designed to provide students with opportunities to gain hands-on experience in clinical settings and develop their practical skills and knowledge in various medical specialties. Students can take the electives in their home countries or international institutes.

The general learning outcomes of clinical electives for MD students include:

- Enhancing clinical knowledge and skills: Clinical electives offer students an opportunity to apply theoretical knowledge learned in the classroom to practical situations. This allows them to develop a deeper understanding of pathophysiology, diagnosis, and treatment of various medical conditions.
- Improving patient care: Clinical electives provide students with the opportunity to interact with patients and understand their needs. This helps students to develop empathy, communication, and interpersonal skills that are essential for providing quality patient care.
- Developing critical thinking and problem-solving skills: Clinical electives challenge students to think critically and solve problems in real-time. This helps them to develop their analytical and decision-making skills, which are essential for providing effective medical care.
- Developing professionalism: Clinical electives provide students with opportunities to develop professionalism, including ethical conduct, time management, and teamwork skills. This helps students to become well-rounded healthcare professionals.
- Exposure to different medical specialties: Clinical electives expose students to different medical specialties, allowing them to explore their interests and gain exposure to various fields of medicine. This helps students to make informed career choices and better understand the diverse nature of medical practice.
- Overall, clinical electives play a crucial role in the education and training of MD students, helping them to develop the skills and knowledge necessary to become competent and compassionate healthcare professionals. The assessment modalities are Portfolios, students’ presentations and projects.

Study Plan for MD Program

Year	Semester	Course Name	Course Code	Credit Hours	No. of Weeks	Domain	Maximum percentage of online teaching	
Phase One								
Year One	First Semester	21 st Century Skills	21CS101	4	CC	GE	10	
		Introduction to Human Biology	IHB102	6	CC	BMS	20	
		English for Medical Sciences	EMS103	3	CC	GE	20	
		UAE Society	UES104	3	CC	GE	30	
	Semester Credit Hours & Weeks				16	16		
	Second Semester	Women and Health	WAH105	4	CC	PH	20	
		Principles of Psychology and Sociology	PPS106	4	CC	PH	20	
		Islamic Studies	ILS107	3	CC	GE	30	
		Technology in Health and E Health	THE108	5	CC	CR	30	
	Semester Credit Hours & Weeks				16	16		
Year Two	First Semester	Arabic Studies	ARA201	3	CC	GE	20	
		Biochemistry	BIO202	6	9	BMS	10	
		Molecular Biology and Genetics	MBG203	5	7	BMS	10	
		Creativity, Innovation and Entrepreneurship	CIE204	3	CC	GE	10	
	Semester Credit Hours & Weeks				17	16		
	Second Semester	Medical Physics	MPH205	3	CC	BMS	10	
		Evolution of Medicine	EOM206	3	CC	CR	30	
		Islamic Fiqh in Medicine	IFM207	3	CC	CR	30	
		Environmental sustainability	ENS208	3	CC	GE	30	
		Professionalism and Ethics	PAE209	2	CC	CR	10	
Communication Skills for Interprofessional Practice		CIP210	3	CC	CR	10		
Semester Credit Hours & Weeks				17	16			
Phase Two (Integrated)								

Year Three	First Semester	Human Body Structure & Function	HSF301	5	6	BMS	20
		Nutrition and Metabolism	NAM302	4	CC	BMS	20
		Principles of Health and Disease	PHD303	5	5	BMS	20
		Haemopoietic and Immune System	HIS304	4	5	BMS	20
		Semester Credit Hours & Weeks		18	16		
	Second Semester	Public Health & Health Promotion	PHP305	3	CC	PH	20
		Musculoskeletal and Integumentary System	MIS306	7	8	BMS	20
		Cardiopulmonary System	CPS307	6	8	BMS	20
		Research and Knowledge Translation - I	RKT308	2	CC	RB	20
		Semester Credit Hours & Weeks		18	16		
Year Four	First Semester	Gastro-Intestinal System	GIS401	6	6	BMS	20
		Head and Neck	HAN402	4	5	BMS	20
		Endocrine System	ENS403	4	5	BMS	20
		Biostatistics	BIS404	2	CC	RB	20
		Epidemiology and Prevention of Non-Communicable Diseases	EPN405	2	CC	PH	20
		Semester Credit Hours & Weeks		18	16		
	Second Semester	Urinary System	UNS406	4	5	BMS	20
		Genital and Reproductive System	GPS407	4	4	BMS	20
		Nervous System	NES408	6	7	BMS	20
		Research and Knowledge Translation - II	RKT409	2	CC	RB	20
		Occupational and Industrial Health	OIH410	2	CC	PH	20
		Semester Credit Hours & Weeks		18	16		
Research Summer Elective		RSE411	0	4			
IFOM Basic Sciences							
Phase Three (Clerkship)							
Year Five	First Semester	Family Medicine and Geriatrics	FMG501	10	10	CS	10
		Emergency Medicine	EMM502	5	5	CS	10

		Psychiatry and Mental Health	PMH503	5	5	CS	10	
		Patient Safety and Quality of Healthcare	PQH504	2	CC	CR	20	
		Semester Credit Hours & Weeks		22	20			
	Second Semester	Internal Medicine Clerkship	IMC505	10	10	CS	10	
		Medical Specialties Clerkships	MSC506	10	10	CS	10	
		Healthcare Leadership and Economics	HLE507	2	CC	CR	10	
		Semester Credit Hours & Weeks		22	20			
		Clinical Summer Elective	CSE508	0	4			
	Year Six	First Semester	Obstetrics, Gynecology and Women's Health	OGW601	10	10	CS	10
			Pediatrics and Child Health	PCH602	10	10	CS	10
Evidence-Based Medicine and Practice			EBM603	2	CC	RB	20	
Semester Credit Hours & Weeks			22	20				
Second Semester		General Surgery Clerkship	GSC604	10	10	CS	10	
		Surgical Specialties Clerkships	SSC605	10	10	CS	10	
		Global and International Health	GIH606	2	CC	CR	10	
		Semester Credit Hours & Weeks		22	20			
Total Credit Hours				226				
IFOM Clinical Sciences								

*CC for Continuous Course "Longitudinal"

SCHEDULE FOR PROGRAM DELIVERY

Year	Semester 1 16 weeks			Semester 2 16 weeks		
1	21 st Century Skills 21CS101			Technology in Health and E Health THE108		
	Introduction to Human Biology IHB102			Women and Health WAH105		
	English for Medical Sciences EMS103			Principles of Psychology and Sociology PPS106		
	UAE Society UES104			Islamic Studies ILS107		
Summer semester						
2	Arabic Studies ARA201			Medical Physics MPH205		
	Creativity, Innovation and Entrepreneurship CIE204			Evolution of Medicine EOM206		
	Biochemistry BIO202 9wks	Molecular Biology and Genetics MBG203		Environmental sustainability IFM207		
				Communication Skills for Interprofessional Practice		
				Environmental sustainability PAE209		
Professionalism and Ethics ENS208						
Summer semester						
3	Nutrition and Metabolism NAM302			Public Health & Health Promotion PHP305		
	Human Body Structure & Function HSF301	Principles of Health and Disease PHD303	Haemopoietic and Immune System HIS304	Research and Knowledge Translation - I RKT308		
				Musculoskeletal and Integumentary System MIS306	Cardiopulmonary System CPS307	
Summer Semester						
4	Biostatistics BIS404			Research and Knowledge Translation - II RKT409		
	Epidemiology and Prevention of Non- Communicable Diseases EPN405			Occupational and Industrial Health OIH410		
	Gastro-Intestinal System GIS401	Head and Neck HAN402	Endocrine System ENS403	Urinary System UNS406	Genital and Reproductive System GPS407	Nervous System NES408
Summer Semester						

Year	Semester 1 (20 weeks)				Semester 2 (20 Weeks)		
5	Groups	Patient Safety and Quality of Healthcare PQH504			Healthcare Leadership and Economics HLE507		
	Group 1	Family Medicine FMG501		Internal Medicine IMC505	Medical Specialties MSC506	Emergency Medicine EMM502	Psychiatry and mental health PMH503
	Group 2	Emergency Medicine EMM502	Psychiatry and mental health PMH503	Family Medicine FMG501	Internal Medicine IMC505	Medical Specialties MSC506	
	Group 3	Medical Specialties MSC506		Emergency Medicine EMM502	Psychiatry and mental health PMH503	Family Medicine FMG501	Internal Medicine IMC505
	Group 4	Internal Medicine IMC505	Medical Specialties MSC506		Psychiatry and mental health PMH503	Emergency Medicine EMM502	Family Medicine FMG501
Summer Semester (Clinical Elective)							
6	Groups	Evidence-Based Medicine and Practice EBM603			Global and International Health GIH606		
	Group 1	Obstetrics, Gynecology and Women's Health OGW601		Pediatrics and Child Health PCH602	General Surgery Clerkship GSC604	Surgical Specialties Clerkships SSC605	
	Group 2	Pediatrics and Child Health PCH602		General Surgery Clerkship GSC604	Surgical Specialties Clerkships SSC605	Obstetrics, Gynecology and Women's Health OGW601	
	Group 3	General Surgery Clerkship GSC604	Surgical Specialties Clerkships SSC605		Obstetrics, Gynecology and Women's Health OGW601	Pediatrics and Child Health PCH602	
	Group 4	Surgical Specialties Clerkships SSC605		Obstetrics, Gynecology and Women's Health OGW601	Pediatrics and Child Health PCH602	General Surgery Clerkship GSC604	

Support for Student learning

The focus of this structure is to provide timely registrar services whilst keeping student wellbeing and happiness in mind. This will be achieved through current and accurate admission, registration, and graduate services. Career guidance highlighting preparation for further medical education programs as well as personal counselling services will be available through specialized personnel. The voice of students will be heard and acted upon through the student elected Student Union. Dedicated staff will work on alumni engagement initiatives to promote successful DMCG ambassadors, new student recruitment and seek scholarship opportunities.

CAREER GUIDANCE

The purpose of Career Guidance is to equip the students with information about their prospects post-graduation. They must be competent to determine their future career and professional choices. They must be able to assess critically the future practice of medicine and develop the skills required for their success.

Functions

- Obtaining information about various local, regional, and international opportunities for specialization including:
 - The bodies regulating these opportunities.

- Necessary requirements including exams and licensing requirements for the above.
- Organize the information obtained from various sources as soft copy material made available for students.
- develop a series of practical sessions for the students that integrate the information collected.
- invite specialists from the identified opportunities to speak to the students.
- communicate with, and if possible, visit, organizations, and associations outside the institution to explore opportunities.
- Conduct career conferences, forums, days, panels discussions, focus group discussions, online career programs and discussions.
- Utilize the alumni unit to get alumni input and provide plans for engaging them in college activities specifically those related to current student career planning, Job fairs, meet a "success story", meet the expert.
- Assist students in planning their careers by helping them navigate through a process of self-awareness, opportunity awareness, action planning, and necessary skill development.
- Work closely with the Health and Community Services on helping students choose necessary electives and placements.
- Maintain positive relationships with various postgraduate places for any opportunities that will be made available for the students.

STUDENT COUNSELLING

Student counselling aims to support DMCG students with psychological support throughout their study period, it aims to provide a safe climate of empathy, understanding, and unconditional acceptance. Counselling provides all students with an opportunity to share their thoughts and feelings in an accepting, - non-judgmental environment throughout their personal journey of self-awareness and self-acceptance. The aim is to help all students improve their wellbeing, become more resilient and to cope with life's challenges effectively.

Functions

- Raising mental health awareness between DMCG community members including warning signs for mental health challenges displayed by students and clarifying appropriate related communication channels for reporting/referrals and for getting support on campus.
- Providing students with individual counselling services, group counselling, and group guidance in topics that foster students' wellbeing and academic engagement.
- Referral of severe cases to psychiatry services off campus. In campus support continues for existing students.
- The design and implementation of community related events and activities that enhance students' community engagement and leadership skills.

STUDENT ADVISING AND MENTORING SERVICES

Advisor and Mentor support at DMCG is available to students across the years. During the orientation session at the beginning of each academic year, students are informed of the resources and availability of the support services at the college. Students are allotted per faculty member for academic advising and mentorship services. The faculty member serves to establish good rapport with the assigned student(s). Advisors and mentors are required to meet with their advisees / mentees at least three times per semester, extra sessions can be arranged if required. Advising notes are maintained for future reference if required.

Advising sessions can be one on one, or it can be a small group of students depending upon the nature of assistance that is required. The academic advisor / mentor will be your first point of contact in case of any query. As a role model, they will be able to clarify your concerns or refer you to the right personnel at the college or hospital if needed. Areas of guidance will include MBCh program requirements, learning needs and opportunities for career advancement.

Topics of discussion could include the following:

- Personal, academic or health matters.
- Grievances
- Study skills
- Attendance: absences and excuses
- Performance in exams and class assessments
- Goal setting

Advisee Role and Responsibilities

Students are active responsible participants that contribute to the success of the advising process. Accordingly, to ensure an effective advising relationship, students are expected to:

- Attend the advising sessions, which may be conducted via Teams, telephone or one on one, depending on the schedule of the student and faculty advisor / mentor.

- Clarify personal values, abilities, interests and goals.
- Become familiar with all course and graduation requirements and adhere to institutional policies, procedures, and deadlines.
- Prepare for each advising session and follow through on actions identified during each advising session.
- Become familiar with and successfully utilize campus resources.

Criteria for Admission

MD – 6 YEAR PROGRAM ENTRY TO YEAR 1

Admission Requirements

- Attested High School Certificate and transcript (Grade 12 or Equivalent in each curriculum)
- Attested School certificate and transcript for Grade 10 and 11
- The applicant must complete 12 years of education in school and provide proof thereof.
- Equivalency Certificate from the Ministry of Education (MOE) for High School curriculums other than UAE system
<https://www.moe.gov.ae/En/EServices/ServiceCard/pages/CertEquivalent.aspx>
- OR
- Equivalency Certificate from the Ministry of Education (MOE) for international applicants with certificates issued outside the UAE
<https://www.moe.gov.ae/en/eservices/servicecard/pages/certequivalent-out.aspx>

English Language Requirements: applicant is required to submit one of the below:

- Standardized English Examination: EmSAT– English with a minimum grade of 1100.
- TOEFL iBT with minimum score 61 or CBT minimum score of 173 (Institutional TOEFL is not acceptable)
- Academic IELTS with minimum Band 5
- **Successfully passing the DMCG Admission Exam** (includes Biology, Chemistry, Physics and Mathematics)
- **OR**
- **EmSAT** score of 900 in Mathematics EmSAT and two of the three science subjects (Chemistry, Biology or Physics)
- **OR**
- For UAE, British or IB curriculum; applicants who successfully acquired the required score as per DMCG admission criteria outlined below can be exempted from The EMSAT and admission exam requirement.
- Successfully completing the DMCG Interview (Multiple Mini Interviews)

Admission Criteria Per Curriculum

The UAE Curriculum

- Applicant must achieve: Advanced Stream: minimum average 90% or Elite Stream: minimum average 85% in grade 12.
- Applicant must achieve a minimum average of 90% in at least two science subjects in Grade 10, 11 & 12

The British Curriculum

- Applicant must complete a minimum of 12 years of education in school and must provide proof thereof.

- A minimum grade of A or 7 in five O-Level subjects including Biology, Chemistry, Mathematics and English, **and**
- A minimum grade of B or 5 in two AS-Level subjects, one of which must be Biology.
OR
- A minimum grade of B or 5 in one A-level subject including Biology or Chemistry
- Attested transcript and certificate from local relevant authority.
- Result of Arabic (MOE Exam) for grade 10, 11 and 12 for Arabic passport holders who completed High School in UAE
- Result of Islamic Studies (MOE Exam) for grade 10, 11 and 12 for Muslims who completed High School in UAE
- An Equivalency Certificate from MOE is mandatory.

The American Curriculum

- Applicant must pass successfully in Grade 12 with minimum average 90% overall or CGPA 3.5 on a scale of 4 or equivalent.
- Applicant must pass successfully in Grade 10 and/ or 11 with minimum average 90% overall or CGPA 3.5 on a scale of 4 or equivalent
- Applicant must achieve a minimum average of 90% in at least two science subjects in Grade 10, 11 & 12
- Applicant should take the following subjects in high school: Biology, Chemistry, Physics, Mathematics and English.
- Attested transcript and certificate from local relevant authority.
- Applicant to complete SAT1 Mathematics with a minimum score of 450
- Result of Arabic (MOE Exam) for grade 10, 11 and 12 for Arabic passport holders who completed High School in UAE
- Result of Islamic Studies (MOE Exam) for grade 10, 11 and 12 for Muslims who completed High School in UAE
- An Equivalency Certificate from MOE is mandatory.

The International Baccalaureate Curriculum (IB Diploma)

- Applicant must achieve a minimum of twenty-eight points.
- Applicant must complete three science subjects including Biology and Chemistry
- Applicant must achieve five points in two high level subjects.
- Attested transcript and certificate from local relevant authority.
- Result of Arabic (MOE Exam) for grade 10, 11 and 12 for Arabic passport holders who completed High School in UAE
- Result of Islamic Studies (MOE Exam) for grade 10, 11 and 12 for Muslims who completed High School in UAE
- Equivalency Certificate from MOE is mandatory.

Indian Curriculum

CBSE

- Applicant must achieve a minimum average of 85% in grade 12.
- Applicant must achieve a minimum average of 85% in at least two science subjects in Grade 10, 11 & 12
- Result of Arabic (MOE Exam) for grade 10, 11 and 12 for Arabic passport holders who completed High School in UAE
- Result of Islamic Studies (MOE Exam) for grade 10, 11 and 12 for Muslims who completed High School in UAE
- Equivalency Certificate from MOE is mandatory.

State Board

- Applicant must achieve a minimum average of 90% in grade 12.
- Applicant must achieve a minimum average of 90% in at least two science subjects in Grade 10, 11 & 12
- Result of Arabic (MOE Exam) for grade 10, 11 and 12 for Arabic passport holders who completed High School in UAE
- Result of Islamic Studies (MOE Exam) for grade 10, 11 and 12 for Muslims who completed High School in UAE
- Equivalency Certificate from MOE is mandatory.

Pakistani Federal Board

- Applicant must achieve a minimum average of 85% in grade 12.
- Applicant must achieve a minimum average of 85% in at least two science subjects in Grade 10, 11 & 12
- Result of Arabic (MOE Exam) for grade 10, 11 and 12 for Arabic passport holders who completed High School in UAE
- Result of Islamic Studies (MOE Exam) for grade 10, 11 and 12 for Muslims who completed High School in UAE
- Equivalency Certificate from MOE is mandatory.

Additional Information for Secondary School Qualifications Obtained Outside UAE

Applicants with high school certificate obtained outside the UAE – other than the qualifications listed above, are required to submit an Educational Credential Evaluators (ECE) course-by-course evaluation when applying to evaluate the transcripts and have a standard GPA - <http://www.ece.org>

- Applicant should be a graduate from a school recognized by the official education authority in the country of study.
- Must meet the requirements for admission into university in the country of origin.
- The applicant must complete 12 years of education in school and provide proof thereof.
- Certificates submitted need to be attested from:
 - Education Authority (Home Country)
 - Ministry of Foreign Affairs (Home Country).
 - Embassy of the United Arab Emirates or the Embassy of the Country in the UAE
 - Ministry of Foreign Affairs of the United Arab Emirates
- Applicants must submit Equivalency Certificate from Ministry of Education in UAE <https://www.moe.gov.ae/en/eservices/servicecard/pages/certequivalent-out.aspx>

MD – 6 YEAR PROGRAM (ENTRY TO YEAR THREE)

- Bachelor's degree (Biomedical / Health / Life Sciences or equivalent) from an accredited college or university with:
 - Attested Degree and Official Transcripts from the relevant authorities.
 - Equivalency Certificate of the Bachelor degree from the Ministry of Education, UAE
 - An Educational Credential Evaluators (ECE) course-by-course evaluation for degrees completed outside UAE.
 - Cumulative GPA of 3.0 on a 4.0- scale or equivalent on non-GPA grading systems
 - Core CGPA (Science courses) 3.0 on a 4.0-point scale or equivalent on non-GPA grading systems.
 - Courses taken during the undergraduate degree program should include elements of:
 - Chemistry and Biochemistry

- Human Anatomy and Physiology
- Microbiology, Immunology, and Basic Pathophysiology
- Cell Biology, Genetics and Molecular Biology
- Social, Behavioral Sciences and Public Health
- Statistics and Logical Reasoning
- **English Proficiency Requirements:** applicant is required to submit one of the below:
 - EmSAT: Score of 1550 and above
 - TOEFL iBT with minimum score 91
 - Academic IELTS with minimum Band 6.5
- **Medical College Admission Test® (MCAT®)** with minimum score of 500
- Meeting the DMCG **Personal Interview** requirements
- Preference shall be given to applicants with Healthcare / Research / Community service experience.

CREDIT TRANSFER AND RECOGNITION OF PRIOR LEARNING

Recognition of prior learning for the MD program will abide to CAA standard 2019 Annex 20 considering the following guidelines:

- All RPL applications are studied through a committee approved and headed by the associate dean academic affairs.
- The MD program will accept credit transfer of up to 25% (no more than 55 credits)
- All RPL processes will be concluded prior to student enrollment.
- The evidence provided by the student seeking RPL credit must directly relate to the competency, unit, module, course, or qualification for which credit is sought.
- The evidence must show that the student has the knowledge, skill or competency for which recognition and credit is sought.
- The evidence must demonstrate that the student has achieved all of the learning outcomes of the course/module/unit for which credit is sought. Partial recognition is not acceptable.
- The RPL process must be transparent, provide students with time and support to assemble sufficient evidence and complete an application, and be consistently applied for all students and across all programs, disciplines, units, courses and competencies.
- Approval of RPL credit must occur prior to the student's enrolment in the program.
- No grades may be assigned for RPL credit granted, nor can RPL credit be used in the calculation of cumulative grade point average (CGPA).
- All RPL processes are followed by an assessment procedure including:
 - Direct observation of demonstrations of the skill or competence **(Challenge exam designed and approved by the Associate Dean Academic Affairs)**

In addition to any of the following:

- Examinations or tests that are used to assess the achievement of learning outcomes or qualifications of the program, modules, courses, or units.
- A portfolio of evidence which includes documents such as qualification certificates, official transcripts of previous study, official job descriptions or statements of duties and responsibilities, letters of reference from employers detailing a student's relevant skills and experience, or samples or statements of work performed.
- Reflective papers, journal articles or similar documents that relate past learning to the learning or competency outcomes of the course or qualification in which the student is enrolling.

- Reviews of courses/units/modules taken at another provider, to demonstrate achievement of learning outcomes or qualifications Of the provider's own programs, modules, courses, or units.
- combinations of any of the above.
- The applicant may appeal to the decision regarding awarding RPL credits within 5 days of receipt of the decision.
- Response to appeal will be issued within a maximum of 14 days of receipt of the appeal.
- Assessment process and appeal process will all be published on the website.

Academic Units delivering the program

The program will be taught by faculty provided by three main departments: Department of biomedical sciences, Departments Clinical sciences, Department of Public health and behavioral sciences.

All courses are run through course committees and report to phase coordinators who in turn report to the Associate dean academic affairs.

Training will be done in the simulation center, the DHA hospitals and other partner hospitals.

DUTIES OF THE PROGRESSION COMMITTEE (COMPETENCY ASSESSMENT COMMITTEE)

1. The committee is responsible for designing an assessment plan for the Emirates meds competency area.
2. The committee is involved in studying data collected within the competency assessment.
3. The committee is responsible for student progression decisions across the curriculum.
4. The committee is to set its meeting timeline and agendas and approve its decisions in the college council.
5. The committee receives student portfolio information through the student affairs before each progression meeting.
6. The committee is chaired by the associate dean academic affairs.

DUTIES OF COURSE COORDINATOR

1. Coordination of course delivery

The course coordinators are requested to conduct meetings with the faculty members teaching the course before the beginning of the course and in the middle of the course.

The objectives of course meetings are:

- To make sure that all the topics are covered as scheduled
- To ensure that the time allotted for each topic is sufficient and if not, make necessary suggestions for change
- To make sure that the topics are covered in a timely and sequential manner, so that the prerequisite of every topic is covered prior to the topic
- To rearrange the schedule according to the above criteria and balance the teaching hours of different departments

The faculty members fix the date of the next meeting before they disperse. The course coordinator prepares a report for the phase coordinator. If approved, the phase coordinator gives

a copy of the report to the Associate Dean of Academic Affairs and assists in making necessary adjustments in the weekly timetable.

2. Preparation of clinical problems:

The course coordinator prepares several clinical problems or cases related to the particular course. These cases may be given to the different departments for use in the classes for problem solving. Some cases may be put on the forum as problems for the students to solve. The course coordinator keeps track of the student responses and oversees that the student responses are addressed adequately by the concerned departments. The course coordinator keeps the records of such activity in a course file for that particular year and reports to the Phase coordinator who then submits it to the Associate dean of Academic affairs.

Objectives of Clinical problems

- enhance students' reasoning skills.
- encourage students to apply previously learnt information to a novel case.
- Enable students to identify gaps in their knowledge and define their learning issues.
- Prompt students to realize the need for a grasp of the basic sciences to better understand a clinical context.

3. Problem based panel discussion

The course coordinators should conduct a panel discussion using a clinical scenario related to the system using the following steps.

- The problem to be discussed in the panel should be prepared to include many disciplines.
- The problem may be put on the students' forum at least one week in advance, to give a chance for the students to understand the scenario and to find out the answers on their own.
- The coordinator collects the response of the students to be distributed to the faculty members.
- The time of Panel discussion should be fixed one week in advance and all faculty members should be intimated.
- The coordinator does a students' opinion survey regarding the conduct of the panel discussion using the forum.

Objectives of the problem-based panel discussion:

- encourage the students to integrate knowledge across various disciplines
- inculcate problem solving skills
- encourage students to reflect on the scientific basis of signs, symptoms and laboratory changes
- assess the level of understanding of the students regarding the course
- give an opportunity for the students to voice their doubts

4. Preparation of Comprehensive examination

The course coordinator prepares the scenario for the comprehensive exam conducted at the end of the course. A meeting with the different members teaching the same course along with the Phase Coordinators required for finalizing the question paper of the comprehensive exam.

5. Evaluation of effectiveness of course delivery

Evaluate the effectiveness of course delivery by getting feedback from the students. The questionnaire is distributed and analyzed. The results are submitted to the Phase coordinator who will submit it to ADAA

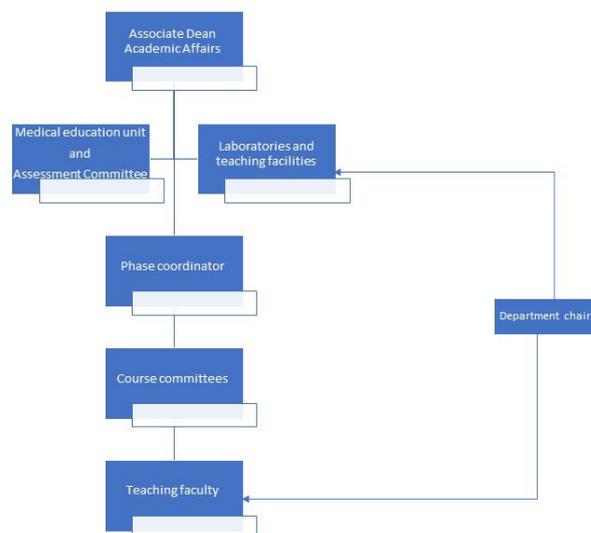
6. Maintain records of Course coordination

All the activities regarding the course are filed and submitted to the Phase coordinators at the completion of the course.

DUTIES OF PHASE COORDINATOR

The phase coordinator is responsible for:

1. Approval of all educational decisions at the course level within the phase
2. Compilation of course documentation for all phase courses
3. Review of all course evaluation reports and action plans
4. Conducting review of semester planning before it starts
5. Designing and approval of phase timetables
6. Reviewing student attendance
7. Approving and compilation of student examinations and results
8. Sitting as a member of all progression committee meetings.
9. Evaluation of collective faculty feedback and student feedback for the phase.
10. Evaluation of integration of courses annually
11. Evaluation of phase progression, teaching, assessment after end of phase and developing action plan
12. Follow up of implementation of the action plan for the phase.



Delivery support Partner

The Dubai Health authority and its affiliated hospitals and Primary healthcare centers are the delivery partner for this program reference agreement signed dated: 13 April 2022

The college is in the process of signing an agreement with a sister college for Teach out and with a number of private hospitals to expand the training capacity for undergraduate students.

Teaching and Educational Facilities

1. Lecture halls: There are eight lecture halls all of which are duly equipped with MAX -Hub audio-visual aids and wireless network access.
2. Laboratories:
 - i. Biochemistry Lab: It is fitted with equipment for training in laboratory diagnostics such as balances, centrifuge machines, ovens, water baths, a pH meter, a thermal cycler, an electrophoresis, a UV camera, spectrophotometers and so forth. Along with necessary reagents, chemicals, glassware, and pipettes that are necessary for biochemical and molecular tests and experiments. It is also well equipped with sterilization devices, incubators, ovens, centrifuges, microbe culturing plates, culturing media, light microscopes, explanatory slides, and videos for practical sessions.
 - ii. Pharmacology Lab: It is equipped with a power lab, electrical pressure calibrator, a mammalian heart perfusion isolator, and hot plates. It is also equipped with 16 desktop computers with the latest computer assisted learning software for simulated practical teaching; one of the computers is connected to a wide screen LED TV for projecting to the whole class on a big screen.
 - iii. Microbiology Lab: It is equipped with sterilization devices, incubators, ovens, centrifuges, microbe culturing plates, culturing media, light microscopes, explanatory slides, and videos for practical sessions.
 - iv. Pathology Lab: It is equipped with Camera connected to microscope and LED TV screen for teaching, as well as par-focal, illuminated, binocular microscopes for each student. It is also stocked with binocular teaching microscopes and explanatory slides on various body systems for the study of diseases. Microtome has also been made available for the preparation of slides.
 - v. Physiology Lab: It is equipped with state-of-the-art teaching facilities like Power Lab software, a Bio Pack System, ECG apparatus, Stethoscopes, Hemocytometer, Respirometer, Sphygmomanometer, Oscillograph, Wester green tubes, Korr system, cardiac monitor, Life form with a speaker to auscultate heart and lung sounds, Coagulometer, Snellen chart, Treadmills, Ishihara chart, and Kymographs, sports lab. And Huawei Idea Hub
 - vi. Anatomy Lab: This facility has a dissection room equipped with cadavers and organs preserved in formalin in addition to platinated bodies and organs. It is also stocked with platinated sections, plastic models, human bones, skeletons, X-rays, CT scans & MRI's which are stored in a well labelled storeroom. The lab also has Huawei Idea hub installed with 3D Anatomy by Elsevier and interactive audiovisual aids.
 - vii. Histology lab: This is another laboratory which is equipped with a screen connected to microscope for teaching, par-focal, illuminated, binocular microscopes for each student, accompanied by explanatory slide packages.
3. Research Lab
4. Simulation center: which is fully equipped with a cutting-edge audiovisual system, specially designed for healthcare education purposes. This system allows the instructor and the simulation team to schedule simulation sessions, monitor student performance/practice, record simulation/scenarios, control all the simulation spaces, store and export all students'

data for assessment and grading. Designed to help and support the training of all healthcare professionals, the new technical simulation laboratory offers a wide range of high-fidelity patient simulators that covers most healthcare specialties alongside several task trainers that will help students practice repeatedly.

5. Library and electronic resources:

Items	Base Collection 2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028
Print Book Titles	3703	3745	3822	3822	3998	4098	4208	4328	4458	4598	4748
Print Titles Added	42	77	0	0	176	100	110	120	130	140	150
E-books	63	63	110	134	4134	4179	4229	4284	4339	4399	4459
Ebooks added to the library	0	0	47	24	4000	45	50	55	55	60	60
Print / Online Journals Annual Subscription	19	E-journals T & F = 63 Medline complete = 2300+	E Journals = 2300+								
Electronic Databases	3	5	5	6	7	9	9	10	10	11	11
Electronic Databases added		2	0	1	1	2	0	1	0	1	0
Computers for library users	32	30	30	30	30	30	30	30	30	30	30
Items added to the library are in yellow											
Figures in blue are expected											

Teaching and Learning strategy

The pedagogy used in the Medicine program includes diverse teaching/learning methods to cater to different learning styles of a culturally diverse group of students. More small-group and active learning strategies like Student-led Seminars (SLS), Problem-based Learning (PBL), Team-based Learning (TBL), Virtual-patient Learning (VPL) etc. are used with less number of lectures. Early clinical exposure starting from the third year is planned to follow after students have had enough capacity building for their professional identity.

Delivery Mode

The program is full time enrollment program. This program is taught through blended learning in a combination of online to face to face learning with a virtual component that does not exceed 30%

Teaching and learning Methods.

Instructional Methods to be used in the curriculum.

Several instructional methods will be used in DMCG curriculum delivery including.

- Lectures (L)
- Problem-Based learning (PBL)
- Team-Based Learning (TBL)
- Small Group Discussion (SGD)
- Tutorial (TUT)
- Student-Led Seminar (SLS)
- Case-Based Learning (CBL)
- Case-Study / Clinical Presentations (CP)
- Simulation (SIM)
- Debate (DB)
- On-line instruction and learning (OL)
- Role Play (RP)
- Practical (PR)
- Bedside teaching (BST)
- Project work (PW)
- Student Independent learning (SDL)
- Field visits (FV)
- Virtual Patient Learning (VPL)

Description of Teaching Methods

Lectures (L) are a form of training in which a speech is read or delivered before an audience or class, especially for instruction, presentation of information, or to set forth a particular subject.

Problem-based learning (PBL) is a teaching method in which complex real-world problems are used as the vehicle to promote student learning of concepts and principles as opposed to direct presentation of facts and concepts. In addition to course content, PBL can promote the development of critical thinking skills, problem-solving skills, and communication skills. It can also provide opportunities to work in groups, find and evaluate research materials, and lifelong learning.

Team-Based Learning (TBL) is a structured form of small-group learning that emphasizes student preparation outside of class and application of knowledge in class. It is a pedagogical strategy that engages student knowledge through individual testing and group collaboration. Following individual responses, the students are strategically organized into diverse teams of 5-7 students that work together throughout the class. Before each unit or module of the course, students prepare by reading before class.

Small Group Discussion (SGD) is a form of discussion in which students are divided into groups of 3-5 members to discuss the assigned discussion topic. SGD is student-centered methodology, which allows students to actively involve and be partners in the teaching-learning process. Students interact with peers and instructors, discuss and share ideas. They develop the ability to build consensus in a group. This strategy requires active participation on the part of the learners to work together in a small group to explore, investigate, make connections, participate in discussion, and reach conclusions. SGD

tends to be informal, brief, and can be used multiple times throughout a class session. By using this strategy, discussion stimulates deep thinking, and learners are expected to articulate their ideas within their group.

Tutorial (TUT) is a small class of one or only a few students, in which the tutor, a lecturer, or other academic staff member, gives individual attention to the students. It is a method of transferring knowledge and may be used as a part of a learning process. More interactive and specific than a book or a lecture, a tutorial seeks to teach by example and supply the information to complete a certain task. A tutorial can be taken in many forms, ranging from a set of instructions to complete a task to an interactive problem-solving session.

Student-Led Seminar (SLS) is an interactive peer-led teaching learning method that offers several advantages for both the student learners and the student tutors, including helping the learners develop self-directed learning skills. SLS is a form of student-centered teaching where the responsibility for the educational activity shifts from the educator to the students. The teacher is mainly a supervising tutor.

Case-Based Learning (CBL) is an established approach used across disciplines where students apply their knowledge to real-world scenarios, promoting higher levels of cognition. In CBL classrooms, students typically work in groups on case studies, stories involving one or more characters, and/or scenarios. Cases present a disciplinary problem or problems for which students devise solutions under the guidance of the instructor. This method involves guided enquiry and is grounded in constructivism in which students form new meanings by interacting with their knowledge and the environment. CBL utilizes collaborative learning, facilitates the integration of learning, develops students' intrinsic and extrinsic motivation to learn, encourages learner self-reflection and critical reflection, allows for scientific enquiry, integrates knowledge and practice, and supports the development of a variety of learning skills.

Case-Study is a comprehensive integrated in-depth study of a complex issue, phenomenon, event, situation, case, programme, person, or group of people. This study must be conducted in a specific context (real life, authentic conditions), where the boundary between context and problem is not obvious. One of the objectives of using the case method is to increase motivation and thus achieve a deep understanding of complex processes and phenomena. The case study method is considered to be the link between theory and practice in medical education.

Clinical presentations (CP) is a relatively new and innovative approach to teaching medicine. CP engages medical students in their understanding of the disease process from clinical feature to diagnosis. Students begin studying abnormalities of complaints, examination, and laboratory findings; that is, signs, symptoms, and laboratory investigations which a patient presents to the doctor. Students then progress towards diagnosis.

Simulation (SIM) is a teaching method that tests participants' knowledge and skill levels by placing them in scenarios where they must actively solve problems. The instructor defines the parameters to create a safe environment for hands-on learning experiences. When participating in a scenario,

students must quickly evaluate the situation, decide on the best course of action, and perform the correct procedural steps. Educators can then assess whether students understand the material and translate their learnt knowledge into skills. Students experience the realism of the scenario and gather meaning from it. A simulation is a form of experiential learning. It is a strategy that fits well with the principles of student-centered and constructivist learning and teaching; that is, learning and teaching that gives students power over what they learn and how they learn it, and that allows students to build their understanding of what they are learning through their experiences and interactions, rather than just passively receiving information.

Debate (DB) is an instructional method, that involves students in expressing their opinions from two competing perspectives with the goal of contradicting each other's arguments. Using debates in the classroom provides students with the opportunity to work in a collaborative and cooperative group setting. By having students discuss and organize their points of view for one side of an argument, they are able to discover new information and put knowledge into action. The debate is a prominent tool for involving students and people to bring a bit of life to the classroom or the workplace. The importance of debate for students in the classroom can improve their ability to learn basic critical thinking and presentation skills in a way that other forms of skills cannot match. Classroom debates can train students and people in general about rational thought, community and cultural understanding, customs and manners, set of thoughts, influencing ability, and the main element of it public speaking. Student debate has the ability to genuinely involve students in appropriate learning and to encourage them to be profound thinkers. The debate is more than just quarreling about a topic; the composition and practices of a debate are meant to hold both sides calm and render them capable of thinking.

On-line instruction and learning (OL) is an educational model where students and instructors connect via technology to review lectures, submit assignments, and communicate with one another. No face-to-face learning occurs since lectures, assignments, and readings are delivered online. **Online instruction** refers to a course that is rendered virtually. Professors may hold virtual lectures, use discussion boards to pose questions via a learning management system, and hold office hours using chat room software.

Role play (RP) is a form of experiential learning. Students take on assigned roles and act out those roles through a scripted play. The role-play can be carried out one-to-one (individual role play) or as a group role-play with each member in the group taking on a role/character. The roles and rules for a role play are clearly defined in the script. Role plays can provide very powerful learning experiences for students by immersing them in simulated real-world situations in which students act out a particular role/character in a safe environment.

Practical (PR) is an examination or lesson in which the theories and procedures learnt are applied to the actual making or doing of something.

Beside teaching (BST) is the process of active learning in the presence of a patient. BST is an essential didactic format with a long-standing tradition in medical education. At the bedside, clinical learners can acquire a broad spectrum of competencies, including history taking, physical examination, clinical reasoning, bedside procedural skills, and a humanistic and holistic approach to patient care. Through

observation of seasoned clinician role models, learners can enhance their skills in clinical expertise, communication, collaboration, health advocacy, scholarship, and professionalism.

Project work (PW) is a planned and definitely formulated piece of study involving a task or problem taken up by the learner, either individually or in a group, to supplement and apply classroom and laboratory transactions. It follows the approach of Learning by Doing and Learning by Living. PW is an attempt to promote creativity and the spirit of enquiry in learners.

Student-Independent learning (SDL) is a method or learning process where learners have ownership and control of their learning – they learn by their own actions and direct, regulate, and assess their own learning. The independent learner is able to set goals, make choices, and decisions about how to meet his learning needs, take responsibility for constructing and carrying out his own learning, monitor his progress toward achieving his learning goals, and self-assess the learning outcomes.

Field visits (FV) is an educational procedure by which each student gains or learns information by observing the objects, places, natural events, and other real-life information. The main objective of the field visit is to reinforce experiential and contextual learning.

Virtual Patient learning (VPL) is an educational method where students used simulated patients to be exposed to different case presentations.

STUDENTS ASSESSMENT STRATEGIES

Assessment is the process of establishing a judgment on the quality and scope of student success or performance, and, by extension, a judgment regarding the learning itself. Assessment apparently influences the learning that occurs.; that is, what students learn and how they learn it should reflect closely the purposes and aims of the course of study.

Assessments are both continuous and final. The methods of assessment used will be dictated by the purpose of the assessment.

- **Formative Assessment:** is any form of assessment that will not contribute to the final grade of a student. Can be performed at any time, course, planned by the teachers; its main aim is to monitor the progress of student's learning. Feedback to the students about their performance is very crucial.
- **Summative assessment:** is any form of assessment that will contribute to the final grade of a student.

Students are assessed as per competency attainment in all courses with an emphasis on continuous evaluation throughout the course providing frequent feedback to the student.

Two fundamentals in assessment essentially different rationales are assessment of learning and assessment for learning.

Assessment in Clinical Presentation Curriculum environment requires attention to ensure that it provides feedback for and of learning. That mandated systemic multiple assessments on an ongoing basis.

DMCG will adopt the IFOM exam in accordance with the CAA requirements and will comply with all the standards and accreditation stipulations.

Assessment in DMCG is done under the following principles:

- Enhancing the quality of the curriculum (courses and programs)

- Evaluating the efficacy of the teaching process and encouraging its ongoing enhancement
- Assessing the effectiveness of the teaching method and enabling continuing improvement
- Improving and encouraging further learning through clear, insightful, timely, and pertinent feedback
- Provide faculty with the opportunity to obtain feedback on their teaching in order to improve - quality assurance and enhancement.
- Formally confirming achievements
- Accountability to the college, accrediting organizations, employers, and the community at large

Assessment Methods to be used in the curriculum.

Students Assessment methods take a variety of forms according to the curriculum phase. DMCG builds clear requirements for learner success and develops overall strategies that could successfully measure student's ability to assess the quality of their own work and to prepare students to function as doctors with life-long learning commitment.

The following are the guiding principles underpin the student's assessment strategy and Procedures at DMCG:

- Adoption of assessment blueprint that is agreed on in the course committee and to be documented within the course specification documents.
- The use of different assessment methods in the course the course committee should inform students about the assessment criteria, methods and marking grades and weights at the beginning of each course.
- Students receipt of timely, meaningful, and helpful feedback.
- Following the quality assurance processes at DMCG.
- Reflection of integration of basic, clinical and behavioral sciences and clinical relevance.
- provision of a meaningful and comprehensive reflection of competence as judged by experts. In that regard, scoring systems that ensure reliability should be used. Judgment of clinical competence should be established after multiple observations of clinical performance over a range of clinical situations.

Assessment Methods used in the MD program are classified into four categories.

1. Written examination.

For all written examinations assessment is done through the use of:

- Multiple choice questions
- extended matching questions.

2. Practical examinations

All Practical examinations for the MD program are done through the use of:

- Spotter examinations
- OSPE

3. Clinical examinations

All clinical examinations done for the MD program are done through:

- OSCE
- DOCEE

4. Workplace based assessment.

Workplace based assessment is used in assessment of competencies with reference to the EPA attainment levels identified by the Emirates MEDs through the use of:

- Portfolio
 - Patient logs
 - case-based discussion
 - directly observed practical skills
 - mini clinical evaluation exercise
 - evaluation of clinical events
 - multi-source feedback
5. Student projects and assignments
 6. In-class assessment: Including all in class work that feeds into student assessment e.g. class worksheets, peer evaluation etc.
 7. Student participation

The managing and ongoing development and implementation of the assessment strategy will be the responsibility of the student's Assessment committee reporting to the Medical Education Unit under the Associate Dean Academic affairs.

Feedback (to Students) on the Assessment Process

Feedback on Formative and mid-course assessment is given to students within a maximum of 1 week of the assessment. Feedback sessions are structured and done with the aim to generate student individualized learning objectives.

Description of the Assessment Methods

- **Multiple choice questions** are a form of an objective assessment in which respondents are asked to select only correct answers from the choices offered as a list. Multiple choice question is an assessment item consisting of a stem which poses the question or problem, followed by a list of possible responses, also known as options or alternatives.
- **Extended matching questions** are a written examination format similar to multiple choice questions but with one key difference that they test knowledge in a far more applied, in depth, sense. Extended matching questions consist of lettered options followed by a list of numbered problems/ questions. For each numbered problem/ question, one lettered option that most closely answers the question to be selected. Lettered options can be used once, more than once, or not at all.
- **Spotter examinations** - a formative assessment that requires students to interpret visual artefacts (*e.g.*, images, specimens) – typically in relation to anatomical structures, pathological conditions, or diseases.
- **OSCE (Objective Structured Clinical Examination)** 'An assessment tool based on the principles of objectivity and standardization, in which the candidates move through a series of time-limited stations in a circuit for the purposes of assessment of professional performance in a simulated environment. At each station, candidates are assessed and marked against standardized scoring rubrics by trained assessors'' (Khan et al, 2013)

- **OSPE (Objective structured practical examination)** is an objective instrument for assessment of laboratory exercises in preclinical sciences, particularly physiology adapted from the objective structured clinical examination (OSCE). OSPE is a specified set of tasks that assess what students can do in a structured pattern objectively under direct observation and is able to assign the ability of integration, usage, and linkage of knowledge.
- **Portfolio** It can be better defined as portfolio for student growth. It is a gathering of assessment tasks realized by the student, who narrates the “backstage” and reflects on his learning process. Student portfolio offers the opportunity to document a certain range of student attitudes, skills, and learning over the school year.
- **Patient logs** are the means of recording detailed information about the encounter with patients, such as case and visit information, medical procedures, and medications prescribed. Patient logging is a key component of clinical education.
- **Case-based discussion (CBD)** is a supervised learning event tool. The CBD process is a structured, in-depth discussion between the trainee and the trainee’s assessor about how a clinical case was managed by the trainee, talking through what occurred, considerations and reasons for actions. Its strength is the investigation of and feedback on clinical reasoning. The method is particularly designed to test higher order thinking and synthesis, as it allows assessors to explore deeper understanding of how trainees compile, prioritize and apply knowledge. Case-based discussions are primarily a form of formative assessment in clinical training.
- **Mini clinical evaluation exercise (miniCEX)** is a tool for workplace-based assessment, assuming that a faculty member watches a trainee–patient encounter in any healthcare setting. The encounters are intended to be relatively short, about 15 minutes, and the trainee is expected to perform a focused history and/or physical examination during this time. Afterwards, he or she provides the assessor with a diagnosis and treatment plan, the performance is scored using a structured form, and then educational feedback is provided.
- **Directly observed practical skills (DOPS)** - is a variation on the miniCEX in which the assessor observes the trainee while he or she is performing a procedure (e.g., giving an injection, drawing blood, inserting a tube), rates the performance, and then provides feedback.
- **Evaluation of clinical events (ECE)** is a tool used to assess the trainee in the performance of his or her duties in complex tasks, often involving teamwork or interacting with other professional staff. Examples include clinicopathological evaluation and reporting of diagnostic material, presentation of a case at a multidisciplinary team meeting, or contribution to quality assurance and audit processes in clinical and laboratory settings. The assessment takes place whilst the trainee undertakes the activity, then the assessor will then spend 5-10 minutes providing immediate feedback. The assessor will complete the assessment form as soon as possible after the assessment takes place with the trainee present. The assessment is performed against the standard expected at the end of the trainee’s current stage of training.
- **Multi-source feedback (MSF)**, or 360-degree evaluation, is a formal questionnaire-based assessment method that relies on workplace-based direct observation of performance by

multiple raters (peers, patients, and coworkers) on key performance behaviors from different perspectives.

- **Student Project Presentations:** is the description and explanation of the project, including the product, new skills, and/or knowledge and the process, by the students to the evaluators. The presentation complements the project documentation and the product demo (if any). It gives evaluators a chance to clear up doubts by asking questions on the spot. Presentations are vital components of student-led project-based learning.
- **In-Class assessment:** is any type of assessment that is performed in the class to assess student learning within an individual session.

GRADING SCALE

Letter Grade	A	A-	B+	B	B-	C+	C	C-	D+	D	F
Numerical Grade	95-100	90-94	87-89	83-86	80-82	75-79	70-74	67-69	63-66	60-62	< 60
Quality Points	4.0	3.7	3.3	3	2.7	2.3	2	1.7	1.3	1	0

Students may also receive the following grades:

- *V is given for an Academic Violation marks 0.
- *AV (Withdraw Fail) is given for an attendance violation marks 0.
- *W is given for a withdrawal before week 6 and does not count as a grade.
- *T is given for transfer grades

SCHEME OF PEDAGOGY AND ASSESSMENT



Object 1.xlsx

PROGRESSION REQUIREMENTS AND CHECK POINTS

Annual progression

Phase 1 and 2:

Students are expected to pass all courses provided annually based on individual pass criteria of each course (at least 70% of the total grade achieved). Students who fail in a course first sit exam are given the opportunity to re-sit the examination once. If the student does not pass the re-sit, they are given an opportunity to re-enroll in the specific course a maximum of two times during the conventional times of course offering.

In the case of summer offering, a maximum of 9 credit hours are allowed for enrollment of students for the summer Semester. Students who carry more than 9 credit hours of unpassed courses will be reenrolled with the next cohort for an additional attempt on only the courses the credits of which have not been attained.

Decisions on summer courses offerings are made annually and announced to students two weeks before the summer semester starts.

Phase 3:

Students who fail to achieve the minimum requirement of a clinical clerkship are given the opportunity to sit for a retake examination and appear in front of a progression committee at the end of the year for re-evaluation. Students will be allowed to continue enrolment in other clinical clerkships provided that they are in the same academic year.

Students who fail in the re-sit will be required to re-enroll with the following batch only in the clerkships that they have failed.

Students will be allowed to enroll in year 6 clerkships during the second semester if they pass the year 5 clerkship requirements.

Students who want to raise their GPA will be allowed to re-sit the examination of the specific subject provided that they have attained less than a B grade and this will be allowed for a maximum of two re-sits. If the student achieves a higher grade their original grade is substituted with the higher grade. If the student achieves a lower grade the grade is not substituted. If the student fails, they receive the higher grade they attained previously.

Phase progression

For progression across the checkpoints of the phase the students should have passed all courses offered in any preceding phase.

Decisions on progression are made by a progression committee assigned by the associate dean academic affairs and making decisions based on student collective attainment in the preceding phase. Student attainment is a calculation of student grades in high and low stakes examinations conducted in a summative or continuous manner based on the identified approved competency assessment plan.

For progression from phase 2 to phase 3 students will sit for IFOM 1 examination and the best score will be added to the student portfolio and assessed by the progression committee.

Students who do not maintain a GPA of 2 or above will be deferred from progression to the upcoming phase and will have the opportunity to register in supplementary courses as per the academic advisor recommendation to all for the GPA to be raised. Students will be allowed a total of two semesters to bring the GPA above the cutoff. If students fail to bring the GPA to above 2 in two given semesters, they will be unenrolled. An opportunity will be given to students to defer to other programs.

Grace Decisions

A student who does not attend the first sit of the exam due to an accepted excuse will be given the opportunity to take one substitute examination. If this student fails, they will be given an exceptional re-sit examination. Results of this re-sit and decision on progression will follow regulation in the section above.

In exceptional situations students are allowed a total grace based on the calculated standard error of measurement in any given course provided that the student situation will change with the given marks. A student can receive grace in a total of 2 courses per semester.

MAPPING CLOs, PROGRAM LEARNING OUTCOMES AGAINST THE EMIRATES MEDs AND EPAs

The Course learning outcomes are mapped against the Program learning outcomes, the enabling competencies and the EPAs



Object2.xlsx

PROGRAM LEARNING OUTCOMES MAPPING AGAINST COURSES



Object 3.xlsx

I: Introductory, R: revisit, M: Mastery

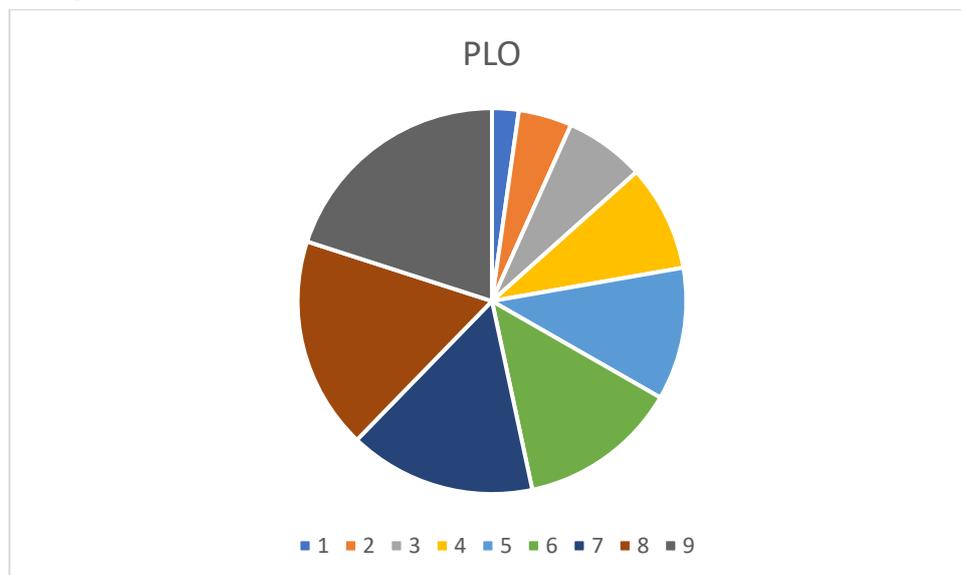
PERCENTAGE OF CLOs ADDRESSING EACH PLO

PLO	Number of CLOs that address the PLO in the program	Percentage
1	112	30.9
2	102	28.2
3	33	9.1
4	27	7.5
5	43	11.9
6	25	6.9
7	26	7.2
8	37	10.2
9	34	9.4

NUMBER OF COURSES AND CREDIT HOURS ADDRESSING EACH PLO

Course Code	PLO1	PLO2	PLO3	PLO4	PLO5	PLO6	PLO7	PLO8	PLO9
Percentage of courses addressing the PLO	80.3	72.5	51	31.4	35	21.6	19.6	15.7	23.5
Percentage of Credit Hours addressing the PLO	89.8	86.7	63.3	50.0	49.6	16.8	11.9	18.6	22.6

NUMBER OF COURSES AND CREDIT HOURS ADDRESSING EACH PLO DIAGRAMMATIC REPRESENTATION



Evaluation of Teaching and learning

1. PROGRAM REVIEW AND EVALUATION

The academic program curriculum at DMCG undergoes rigorous reviews to ensure the continuous enhancement of its academic program. The review includes internal auditing and reporting as well as compliance with CAA standards and requirements.

Internal reviews and reports are conducted at both the course level and program Level. The documentation is guided by the external review accreditation requirements to facilitate the effective re-accreditation process of the medical program at DMCG.

The curriculum review process is essential for academic program improvements and ensures that students are prepared to embark on their career journey and develop the relevant competencies and skills for their medical profession.

The outcome of the process will guide decision-making and curriculum improvement to ensure that students achieve the required knowledge, skills and competencies to progress in their medical careers.

The review and evaluation process is conducted at the course level and program level as described below:

1.1 COURSE DELIVERY REVIEW AND EVALUATION

Course components are evaluated every semester to guide program and course quality improvements through an annual program review and planning cycle. Course/module reviews are conducted during and at the end of each semester/term and includes the following:

1.1.1 Course Learning Outcomes Review and Evaluation

Course learning outcomes (CLOs) are reviewed by the faculty member and Associate Dean of Academic Affairs (ADAA). The reviews are done during the Academic Affairs Meetings for aligning CLOs with course assessment tools.

The instructor documents the attainment of the CLOs in the Course Review Report for further review and follow up.

The CLO review evaluates the effectiveness of the course in facilitating students' achievement of the course learning outcomes. The instructor reviews the suitability of the assessment tools to measure the relevant CLOs and also assesses the relevancy of the CLOs to the learning topics.

The instructor's recommendations are reviewed by the ADAA and included in the Course Review Report. At the end of each semester, the reviews and the recommendations are identified, and an improvement action plan is developed.

Course Syllabus Review and Evaluation

The course syllabus is reviewed to include Course Description, Course Learning Activities, Learning and Teaching Strategy, Course Assessment Plan, and Course Learning Resources.

The instructor records his/her recommendations in the Course Review Report. The ADAA reviews recommendations for change (if any) and submits changes to the College Council for approval and change implementation. QA & IE Unit follows up on all changes and implementation.

1.1.2 Course Assessment Review and Evaluation

Course assessment plans and tools are developed to plan and map all assessments to the course learning outcomes. Before the commencement of the semester, the course assessment plan and tools are reviewed by the instructor and ADAA, for validation of allocated marks and timeline. The CLO matrix that maps the CLOs to the assessment tools in the course assessment plan is reviewed to ensure alignment and balance of weighted assessment tools to each CLO.

At the end of each semester, assessment tools and results are reviewed by the instructors to comment on their suitability to measure course learning outcomes. Findings are documented in the Course Review Report. Instructor's comments regarding course assessment are reviewed by the ADAA for final approval.

The QA&IE Unit conducts an audit on course assessment plan and issues findings to course instructors and ADAA for corrective action, if required.

1.1.3 Course Teaching Review and Evaluation

At the course level, teaching is evaluated by the ADAA through the faculty performance appraisal conducted annually.

The ADAA utilizes the audit reports of the course file and class observation reports to assess the teaching practice of each faculty. Class observations are introduced as a tool to improve and share teaching best practices. The class observer is appointed by the ADAA in recognition of teaching excellence. Written feedback is provided to the instructor and a copy is sent to the QA & IE, for follow-up sessions.

At the college level, teaching is reviewed against pre-established KPIs. QA & IE records the progress against established KPIs to ensure the quality of teaching. The KPIs are measured annually and recorded in the Annual Report.

The Academic KPIs issued to ADAA and the College Council to review the performance achieved against established KPIs and a corrective / Improvement action plan is then developed as required.

1.1.4 Course Evaluation by Students

At the end of each semester, the QA & IE Unit administers the Course Evaluation Survey and issues survey results reports to be reviewed by the Dean, ADAA and faculty, to comment and develop improvement plans wherever required.

1.1.5 Course File Administration Review

The course file content is reviewed during the semester and at the end of each semester by the QA & IE Unit for compliance with course file documentation requirements.

The QA & IE Unit conducts an audit at the end of the semester to ensure course file compliance with CAA standards and DMCG policy requirements. Noncompliance statements are issued with required corrective action to faculty who did not meet the required compliance indicators.

1.2 PROGRAM REVIEW

Program reviews are comprehensive and guide the future development of academic programs at DMCG.

Program effectiveness is judged on the following dimensions: how well students achieved the program learning outcomes; the program's success in retaining and progressing students; students' satisfaction with the process; the ability of graduates to gain employment and employers' satisfaction with the performance of DMCG graduates.

At the beginning of each academic year, ADAA will review the annual program report prepared by Academic Affairs Department. The program effectiveness results are reviewed and approved, and Program Improvement Plans are prepared to be implemented the following year. The outcome of the review will be carefully considered by course instructors, ADAA, Dean and the QA & IE Unit to ensure that all issues and concerns have been satisfactorily addressed to close the loop.

1.2.1 Student Retention and Progression Review

Cohort analyses of student retention and progression will be prepared annually by the Student Affairs and Admission Unit. Reports will be shared with the QA & IE Unit and ADAA. These reports will be reviewed, and improvement plans will be developed as required.

1.2.2 Student Experience Review

The student experience is measured annually through student experience surveys conducted by the QA&IE Unit. Students will evaluate all teaching and learning facilities and related services at DMCG. Results will be shared with the ADAA, academic heads and student services to develop improvement plans, follow up and close the loop as per the requirement.

1.2.3 Program Learning Outcomes Review

Program learning outcomes (* PLOs) are mapped with the Course learning outcomes of each course. At the end of each academic year, the College Council reviews PLOs of the program through the achievement of CLOs of taught courses with the relevant PLO of the program.

The committee takes into consideration the comments/recommendations outlined in the Course Review Report for the program. The information is recorded in the annual program review report and the matrix of the Program PLOs is updated based on the PLOs review and calculated values.

Revision to program matrices is conducted to ensure alignment between PLOs and CLOs and National Qualification Framework.

1.2.4 Program Competency Review

Program competency alignment is a vital component of the curriculum alignment to ensure DMCG delivers knowledge, skills and competency focused education. The alignment measures the competency and skills that students acquired as they progress through the 6-year program, duration.

The first phase of the alignment is to collect performance data from the assessment of the relevant courses mapped to the Program learning outcomes and aligned with NQF descriptors.

The mapped competency chart is reviewed by the ADAA and College Council and correlated with PLOs/CLOs/NQF matrices to ensure optimization of the assessment alignment across the program.

The program learning outcomes are also aligned with Emirates Med Competency descriptors.

The competency achievement results are included in the annual program review for further analysis and discussions. Recommendations for improvements are presented to ensure DMCG graduates' readiness as a medical professional.

1.2.5 Student Employment Review

DMCG developed the following indices to measure the Employability effectiveness during internship and after graduation. Employability Effectiveness is measured by GDS survey conducted by the Ministry of Education and also QA & IE Unit at DMCG

- a) Student Internship Satisfaction Survey: During the internship, QA & IE Unit will assess student satisfaction with the internship.
- b) Employer Satisfaction with Intern Student: During the internship, employers will be asked to provide feedback on DMCG internship performance. The evaluation is based on employability skills.
- c) Employment in Field of Study: One year after graduation, graduates are contacted by the QA & IE Unit to follow up on their employment status.

The process is done over the phone and information about their employment is recorded in the Employment Survey. The results are issued to the Academic Affairs and the Dean, to incorporate in the program annual review report.

1.2.6 Alumni Engagement Review

QA & IE Unit will conduct an alumni satisfaction survey. The survey is focused on measuring the Alumni communication and engagement of the College. The survey results are sent to the Communication office and Academic heads for further analysis and devised improvement plan as required.

2. PLO ENABLING COMPETENCY MAPPING

The program learning outcomes are mapped against the enabling competencies for ease of implementation of the PLO assessment plan



Object 4.xlsx

3. PLO- QF EMIRATES MAPPING

The program learning outcomes are mapped against the QF Emirates framework at level 9 and below is the mapping against the descriptors of the three domains, Knowledge, Skills and aspects of competence.



Object 5.xlsx

4. ASSESSMENT PLAN FOR PROGRAM LEARNING OUTCOMES AND KPIS

A plan to assess learning outcomes is placed based on set KPIS. Each Program learning outcome is addressed within a number of courses that have been identified and mapped. This was Done in relation to the mapped enabling competency as well. Data sources were identified for each enabling competency for every PLO (student grades or additional data collection methods in addition to classified achievement records in targeted subsets of the examinations).

Key performance indicators are set at a standard that allows for a bell curve distribution of students in attainment. Since the program is run for the first time and given the new nature of the competency framework, the lower scale of attainment was chosen as the KPI with an intention to shift the scale up 10 percent with the second run of the program.

Percentage of data source contribution to the KPI is calculated based on the number of enabling competency the KPI is mapped against. (1 enabling competency= 100%, 2=50% each etc.)

All data collected will be on the quality and Institutional effectiveness unit calendar and will abide to the policy unit 3 Chapter c4 concerned with PLO assessment.

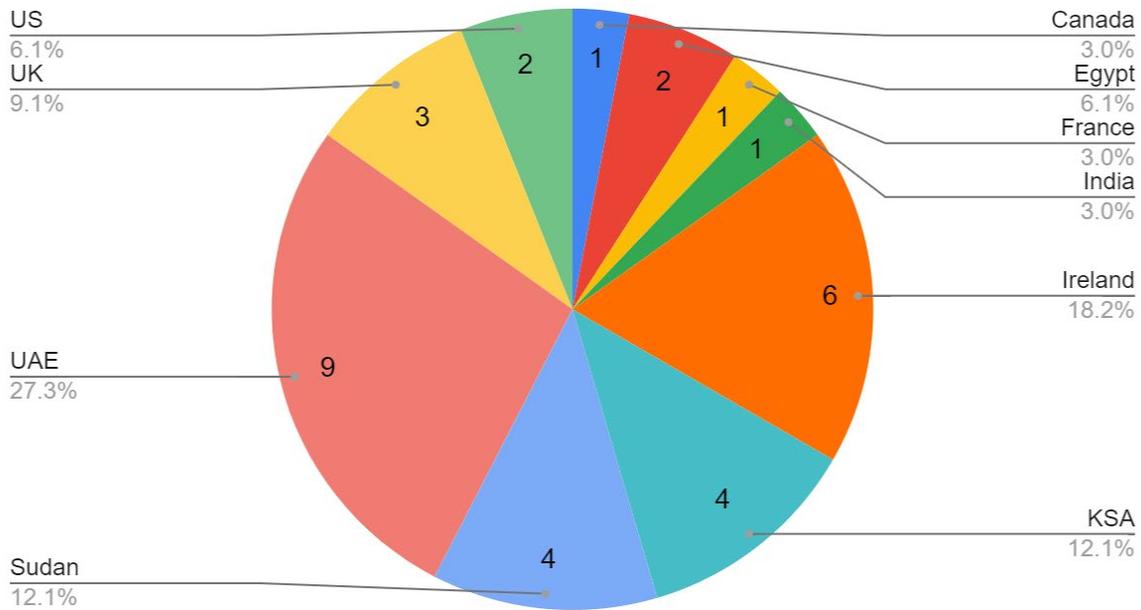


Object 6.xlsx

Program design review and external evaluation

EXTERNAL EVALUATORS

SMEs Country



EVALUATION PROCESS



Screening:

For completeness and eligibility for sharing with SMEs.



SMEs Review:

Pair of (at least) 2 SMEs revised each course for content and alignment within the course.



MHPE Experts Review:

Pair of 2 MHPE experts revised each course from educational perspective.



Core team Review:

Revised the curriculum as one unit for content and alignment with the curriculum philosophies.

COURSE SYLLABI REVIEW SCOPE

Course scope

Template Completeness and accuracy.

CLOs structure and integration

Content Review

Relations to curriculum BIG Picture.

Alignment between:

- a. Scope -----> CLOs
- b. CLOs -----> PLOs
- c. CLOs -----> Teaching methods
- d. CLOs -----> Assessment methods
- e. CLOs -----> Content

CURRICULUM REVIEW

- Adherence to CAA guidelines.
- Adherence to DMCG curriculum philosophy & Uniqueness
- Vertical horizontal, and Spiral integration.
- Alignment CLOs to enabling Competencies Emarites Meds
- Alignment of CLOs to PLOs and check the coverage and balance.
- Alignment of PLOs to NQF and thematic roles/Core competencies of Emirates MEDs.
- Curriculum integrity.
- Community orientation.

CURRICULUM ASSESSMENT CRITERIA USED

1. No. of CLOs are within the recommended range (5-10)
2. CLOs are aligned with students' level
3. CLOs are well written
4. Course design is aligned with the clinical presentation curriculum philosophy
5. Course design is aligned with the integration philosophy
6. Course design is aligned with the student-centered philosophy
7. CLOs are well-aligned with the PLOs
8. Teaching methods are aligned with the course description.
9. Teaching and learning methods reflects the curriculum philosophy
10. Assessment methods are aligned with the course description
11. Assessment methods are defined
12. Resources are appropriate and well written

DECISIONS MADE BASED ON ASSESSMENT CRITERIA

If Criteria/s is/are NOT true	then
2 or 4 or 5	Substantial course development efforts are needed
1 or 3 or 6	Some course development efforts are needed
7 or 8 or 9	Major editing is needed for the content, teaching and assessment methods.
10 or 11 or 12	Minor editing is needed the content, teaching and assessment methods
	No changes are needed

Authoring Team and Date of Document Issue, Revision and Approval

Authoring Team	<p>Prof. Yousif Eltayeb - Acting Dean Prof. Samar Ahmed - Associate Dean Academic Affairs Dr. Farzana Firdousi - Director of QA IE Unit Dr. Shifan Khanday - Chair of Curriculum Committee Dr. Eslam - Associate Director QA IE Dr. Fouzia Shersad - Director of Medical Education Prof. Abdelmoneim Elmardi -Chair of Biomedical Science Department Prof. Ali Elhouni - Head of Internal Medicine Division Prof. Samia Farghaly - Head of PHC Division Mrs. Dina Hegazy - Director of Student and Alumni Affairs Dr. Hajer Sheikh - Lecturer Dr. Mariam Shadan - Assistant Professor Dr. Sarah Safwat - Teaching Assistant</p>
Date of initial document preparation	March 3 rd 2023
Date of Document review	March 13 2023
Date of initial approval	<p>March 13th, 2023, Curriculum Committee approval March 14th, 2023, College Board Approval</p>
Date of receipt of External evaluation Report	March 31st
Date of Issuing of Final Corrected Version	April 17 2023