Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions

(Second Edition)

University Grants Commission
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Foreword

Ensuring the quality of education provision and standards of awards is a primary responsibility of any higher education system. Quality has always been an important consideration in higher education in Sri Lanka. However, with the accelerated expansion of higher education opportunities, ensuring the quality of education provision has become a challenging task. Being cognizant of this, the Committee of Vice Chancellors and Directors (CVCD) of the University Grants Commission (UGC) took initiatives to formalize quality assurance activities in universities over two decades ago. *Quality Assurance Handbook for Sri Lankan Universities (2002)* was prepared with the assistance of the Quality Assurance Council of the UK, to serve as a guide in quality assessment of undergraduate education at institutional level and subject level. The Quality Assurance and Accreditation (QAA) unit was established under the UGC in 2004 to spearhead quality assurance activities in state universities. This unit was renamed the QAA Council in 2005, and QA Council (QAC) in 2016, to suit its scope. From 2004 to 2013 Institutional Reviews and Subject Reviews were conducted based on the guidelines in the *Quality Assurance Handbook (2002)*, with the financial assistance of the World Bank-funded Improving Relevance and Quality of Undergraduate Education (IRQUE) project and Higher Education for the Twenty-first Century (HETC) project.

Feedback received from the universities that participated in the first cycle of reviews indicated the need for enhancing the objectivity and transparency of the quality assessment process and widening its scope. Accordingly, two separate manuals for Institutional Review and Programme Review were developed in 2015 adopting a consultative approach. To enhance objectivity, transparency and comparability of the quality assurance process, a new quality assessment structure comprising Criteria, Best practices and Standards, along with a scoring system was introduced. Student-centred learning (SCL) and Outcome-Based Education (OBE) concepts were incorporated into best practices and standards. The second cycle of Programme Reviews was conducted from 2015 to 2023 based on the guidelines in the *Manual for Undergraduate Programme Review of Sri Lankan Universities and Higher Education Institutions (2015)* thus developed. Towards the completion of the second cycle of reviews, feedback was obtained from universities regarding the quality assessment structure and the review experience.

Comments and suggestions received indicated the need for reducing the repetition of certain best practices among several standards and reducing the number of standards. Taking these suggestions and comments into consideration, steps were taken to revise both the Institutional Review manual and the Programme Review manual formulated in 2015. A team of quality assurance experts were appointed by the UGC to revise the Programme Review manual. The expert team has scrutinized the quality assessment framework, reformulated/refined the statements to enhance clarity, and removed repetitions. A draft version of the revised manual has been subjected to pilot testing in undergraduate study programmes offered by state universities, and relevant feedback received has been incorporated to ensure applicability.

With pleasure, the UGC presents this *Manual for Undergraduate Programme Review of Sri Lankan Universities and Higher Education Institutions(2023)*, which provides useful guidance to academics and administrators of undergraduate study programmes in state universities and HEIs, reviewers and resource persons in training programmes on quality assurance in education provision.

This manual will be used to assess the quality of education provision of undergraduate study programmes offered by universities and HEIs that wish to get their programmes reviewed under the Quality Assurance Framework of the UGC. The UGC expects all undergraduate study programmes offered by the universities and HEIs under its purview to internalize the best practices to achieve the desired standards that are specified in this manual as an integral part of the quality assurance process. The third cycle of Programme Reviews will be conducted using this manual.

The World Bank-funded Accelerating Higher Education Expansion and Development (AHEAD) Operations of the Ministry of Education supported the revision and printing of the manual. The UGC is grateful to the AHEAD Operations for the assistance extended.

The UGC and AHEAD Operations wish to express sincere appreciation to the panel of authors of the manual for the valuable contribution made to enhance the quality of the higher education provision in Sri Lanka.

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List of Abbreviations / Acronyms

AHEAD	Accelerating Higher Education Expansion and Development
CEOs	Chief Executive Officers
CPD	Continuous Professional Development
CQA	Centre for Quality Assurance
CVCD	Committee of Vice Chancellors and Directors
DE	Distance Education
EDP	External Degree Programmes
ELTU	English Language Teaching Unit
EQA	External Quality Assurance
FQAC	Faculty Quality Assurance Cells
GEE	Gender Equity and Equality
HEIs	Higher Education Institutions
ICT	Information & Communication Technology
ILOs	Intended Learning Outcomes
IPR	Intellectual Property Rights
IQA	Internal Quality Assurance
MIS	Management Information System
MoE	Ministry of Education
MOUs	Memoranda of Understanding
OBE	Outcome-Based Education
OBE-SCL	Outcome-Based Education and Student-Centred Learning
ODL	Open and Distance Learning
OER	Open Educational Resources
PG	Post Graduate
PLOs	Programme Learning Outcomes
QA	Quality Assurance
QAC	Quality Assurance Council
R&D	Research and Development
SBS	Subject Benchmark Statements

SCL	Student-Centred Learning
SDC	Staff Development Centre
SER	Self-Evaluation Report
SGBV	Sexual and Gender-Based Violence
SLQF	Sri Lanka Qualifications Framework
SOP	Standard Operating Procedures
ToR	Terms of Reference
UGC	University Grants Commission
URL	Uniform Resource Locator
VLE	Virtual Learning Environment

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Introduction

Purpose of the Manual

The Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions - 2023 is the revised version of the Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions – 2015 published by the University Grants Commission (UGC). The revised version of the manual will effectively replace the original manual from the year 2024 onwards.

This manual has been formulated to provide guidance to state Universities and other Higher Education Institutions (HEIs), that wish to submit their undergraduate programmes of study for review under the Quality Assurance Framework of the UGC and the Ministry of Education (MoE) in Sri Lanka. A Programme of Study is defined as a stand-alone approved curriculum followed by a student, which leads to the award of a degree. Although this manual is meant to guide the Universities and other HEIs of the state sector, its content is sufficiently generic in nature to permit its use for non-state HEIs as well.

This revised version of the manual provides a brief overview of quality assurance in higher education and study programme review for the benefit of those interested in quality assurance in undergraduate education. It sets out important best practices to be adopted and respective standards to be achieved for quality assurance in undergraduate education provision, under six criteria. It is expected to serve as a guide for academics and administrators of Faculties/Institutes of Universities and HEIs to adopt and internalize these good practices and achieve the expected standards concerning quality assurance in undergraduate education. Furthermore, a comprehensive account of the use of standards to assess the performance of a programme of study has been incorporated to help in self- or peer-assessment of the quality of education provision of the undergraduate study programmes. Among the 124 best practices and standards, 20 standards relevant to Sri Lanka Qualification Framework (SLQF) requirements have been identified in this manual. These are expected to guide the study programme designers to design study programmes that comply with this nationally approved

reference point. These 20 standards will also enable assessment of compliance of the study programme with SLQF level as part of the Programme Review process.

Target Audience

This manual is primarily meant for academics and administrators involved in undergraduate education. It will help them to design study programmes in compliance with the SLQF and other best practices approved by the UGC, monitor the quality of undergraduate education provision and standard of awards made by their respective institutions, and take necessary action for continuous quality enhancement. Furthermore, it will serve as a practical guide for them to prepare a Self-Evaluation Report (SER) of the undergraduate study programme for external review.

The manual will be an essential tool for the members of the Faculty Boards, Faculty Quality Assurance Cells (FQACs), Centres for Quality Assurance (CQAs), Registrars, Directors, Vice Chancellors or Chief Executive Officers (CEOs) of the Universities/HEIs. It will enable them to adopt, internalize, monitor and upgrade the good practices and achieve desired standards in respect of quality assurance of the education provision at the undergraduate level.

The manual will be useful as a resource base for intensive training programmes and workshops organized at national/institutional/faculty level, to train self-evaluation report writers, potential reviewers and other staff of Universities and HEIs.

It will be a useful reference for other stakeholders such as students, parents, funding agencies in the state or private sector, international agencies, employers of graduates, professional bodies, professional accreditation agencies and policymakers.

This manual will provide a useful guide for the external reviewers to objectively and effectively assess the quality of education provision and standard of awards of the assigned undergraduate study programmes within the given time frame and prepare a well-focused Programme Review Report (PRR).

The PRRs thus prepared by external review teams will enter the public domain through the website of the Quality Assurance Council (QAC) of the UGC, following acceptance by the Review Team and the respective Faculty/Institute of the University/HEI. All stakeholders mentioned above will be able to access those reports and provide feedback to the UGC, QAC, or the specific Faculty/Institute/University or HEI on the findings in the report.

Manual Preparation Process

In preparation of this revised version of the manual, experiences gained from Programme Reviews conducted using the original manual during the 2015-2022 period by the QAC, as

well as the views of the university community were taken into consideration. Every standard, best practice and examples of evidence given in the original manual was scrutinized, repetitions were identified and minimized. Some standards and best practices were reworded. Certain examples of evidence were modified and certain standards were shifted to different criteria to make them more relevant. Standards identified under the criterion on Programme Design and Development and those identified under the criterion on Course Design and Development in the original manual were combined. Furthermore, the standards identified under the criterion Human and Physical Resources and those identified under the criterion Learning Environment and Student support in the original manual were combined under a new criterion Human and Physical Resources and Learner Support. Certain best practices and standards indicated under the criterion Innovative and Healthy Practices in the original manual were found to be widely practised among universities at present. Such best practices were included in other relevant criteria and some other best practices that promote quality of education provision but are not widely practised in the Universities and HEIs were included. Furthermore, scores assigned to the criteria were modified to result in near-equal weightage distribution among all standards.

The revised standards were cross-checked with those in the revised Manual for Institutional Review of Sri Lankan Universities and HEIs (2023), Manual for Review of Undergraduate Study Programmes of Sri Lankan Distance HEIs (2019) and the Manual for Review of Postgraduate Study Programmes of Sri Lankan Universities and HEIs (2021) published by the UGC, to minimize repetitions.

To enable readers to visualize the best practices, corresponding standards and examples of evidence relevant to each standard of a criterion at the same time, they are presented in alignment with each other in tabular format under the relevant criterion. This type of presentation is expected to help the reader to understand the relationship among these dimensions. It is also expected to help resource persons conduct awareness programmes and training programmes to make participants recognize the relationships. It is hoped to enable Faculties and Institutes to internalize the best practices and achieve expected standards, prepare ‘Self-Evaluation Reports’ with greater focus.

Furthermore, it is expected to help improve the objectivity and efficiency of external reviews.

The draft document containing the revised best practices, standards, examples of evidence, differential weightages, procedure for grading and rating SLQF compliance was circulated among all state universities through QAC/UGC for pilot testing the revised version of Criteria, Standards and Examples of evidence for the undergraduate programmes offered by their respective Faculties/Institutes and to obtain feedback. Received responses were closely scrutinized by the panel of authors and appropriate suggestions and comments were incorporated. The completed manual was submitted to the Standing Committee for Quality

Assurance of the UGC for approval. After obtaining approval, the manual was submitted to the QAC for publishing.

Organization of the Manual

This manual consists of three Parts and an Appendix.

Part I consists of a single chapter, Chapter One. It presents an overview of quality assurance in undergraduate education in Sri Lanka, quality assessment structure, the purpose and scope of undergraduate Programme Review (PR), prerequisites for PR, and the process and outcomes of PR.

Part II consists of two chapters, Chapter Two and Chapter Three. Chapter Two presents the 'Criteria', 'Best practices', and 'Standards' that provide the framework for determining the 'quality of a study programme' and 'Examples of relevant evidence'. These 'Criteria' are the key/core aspects that encompass the inputs, processes, outputs and outcomes of an undergraduate study programme that contribute to the quality of its education provision. These criteria were selected after careful consideration of the nature of the operation of undergraduate study programmes in Sri Lankan Universities, the 'criteria' specified in the Quality Assurance (QA) manuals previously published by the UGC in Sri Lanka.

Under each criterion, various education approaches, strategies and operational procedures which add value or contribute to enhancing the quality of the respective study programme are listed as 'Best Practices'. Universities and HEIs are expected to adopt and internalize these best practices to enhance the quality of the education provided through their undergraduate study programmes. For each best practice, one or more specific and measurable indicators were identified as 'Standards'. These standards describe the expected manner in which the specified 'best practice' should be implemented and completed or the expected level of internalization or achievement. Alongside each standard, a few 'Examples of relevant evidence' are indicated for the benefit of undergraduate programme providers and reviewers.

Chapter Three of Part II explains the procedure for using the standards to assess the performance of a study programme. A scoring guide, weightages of criteria, method of assessing the SLQF level compliance of the reviewed degree programme, computation of the final score and assigning a grade for the performance of the study programme are given. In addition, 20 Standard statements/ part of standard statements that represent the SLQF requirements and the step-wise procedure for assessing SLQF compliance of a study programme with an example are presented separately to help in the assessment of SLQF compliance of the study programme under review.

The Faculties/Institutes are expected to promote the internalization of best practices to reach the standards and express their degree of internalization of the best practices in the Self-Evaluation Report (SER).

The reviewers are expected to objectively scrutinize the evidence provided and assess the performance of the programme of study by capturing the degree of internalization of best practices and the level of achievement of respective standard/s and assign a score for each standard. The standards and the scoring system will make the evaluation transparent because both the Faculties/Institutes and the reviewers can determine the degree of internalization of best practices and the level of achievement of respective standard/s based on available evidence and assign each standard a score ranging from 0 to 3 in a four-point scale. In preparation of a SER and in assessing the performance of a study programme, the SER writers and the reviewers are expected to understand that evidence may vary among the study programmes, and the evidence stated in this manual are only examples, but not prescriptions.

Part III describes the practical aspects of the Programme Review process and Programme Review Report (PRR). It consists of three chapters; chapters Four, Five and Six.

Chapter Four provides detailed guidelines on preparation of the SER for the intended review of the programme of study, and the format to be used.

Chapter Five describes the procedure adopted in the selection of peer reviewers, composition of the Review Team, desired profile, attributes and conduct of reviewers, pre-review arrangements, review visit (site visit) and the review process.

Chapter Six provides guidelines for writing the PRR, which include its purpose, structure, and arriving at review judgments on the overall performance of the study programme including SLQF level compliance, observations and recommendations. It also describes the procedure for submission of the report.

Appendices consist of a Code of Conduct for Reviewers, a Declaration of Interest of External Reviewers, and the list of study programmes and stakeholders who provided feedback on the applicability of the revised manual.

Appendices are followed by a Bibliography, Glossary of Terms and Notes on Authors.

Part I

Quality Assurance in Undergraduate Education in Sri Lanka

Chapter One

Undergraduate Education in Sri Lanka and External Quality Assurance

Higher education in Sri Lanka has been based on the several prominent Pirivenas (Ancient Buddhist Monks Training Centers) during the local Kingdoms. The origins of the modern university system in Sri Lanka date back to 1921 when the Ceylon University College was established at the former premises of the Royal College Colombo affiliated with the University of London. However, the beginning of modern higher education in Ceylon was in 1870 when the Ceylon Medical School was established followed by Colombo Law College (1875), School of Agriculture (1884) and the Government Technical College (1893). The first university, the University of Ceylon was established in Colombo, on 1 July 1942, and there are 17 state universities in Sri Lanka at present. At university, a student can obtain a Bachelor's degree in 3 or 4 academic years, depending on the programme of study. Degree programmes in Medicine or Architecture last 5 to 6 academic years. The resources, organization and structure of undergraduate education programmes vary between different institutions in the country.

1.1 Quality Assurance in Undergraduate Education in Sri Lanka: A Brief Overview

Similar to any other industry, the education sector is administered and governed by certain policies, procedures and guidelines that lay out the minimum requirements of quality and performance for students, teachers and administrators. Being cognizant about the futility of any attempt to improve higher education quality in the absence of a universally accepted definition for quality in higher education, the Commonwealth of Learning (2006) defined quality as 'fitness for purpose with minimum cost to society'. The National Policy Framework on Higher Education and Technical & Vocational Education in Sri Lanka (2009)

adopted this definition and Article 11 of the World Declaration on Higher Education, which states 'Quality in higher education is a multi-dimensional concept which embraces all its functions and activities including teaching and academic programmes, research and scholarship, staffing, students, buildings, equipment, facilities, services provided to the community and academic environment' in its policy recommendations for higher education in Sri Lanka.

Since the higher education system of Sri Lanka has adopted the 'fitness for purpose' definition of quality, it is important to identify the purpose of undergraduate education in general and programmes of study, specifically. Hence, different degree programmes offered by universities are expected to strengthen intellectual capital and technology capable of accelerating national and international economic and social development to be fit for the emerging knowledge-based society. Furthermore, in a century characterized by globalization, it has become important for undergraduate education provision to be internationally recognized. As an initial step, several reference points and guidelines including Handbook for Quality Assurance (2002), Codes of Practice, Subject Benchmark Statements and Credit and Qualification Framework, were developed. These were used during the first cycle of Institutional Reviews and Subject/ Programme Reviews conducted during 2004 – 2015. Subsequently, to make the review process more transparent, objective and comparable, the current quality assessment structure was formulated in 2015. During this exercise, relevant rules, regulations, codes of practice and other national benchmarks and guidelines in higher education were incorporated into standards and best practices. This manual has been used for programme reviews conducted during the second cycle from 2015 to 2023.

Currently, The University Grants Commission in Sri Lanka acts as a policy maker at the national level, delegating its quality assurance administrative and monitoring role to the Quality Assurance Council (QAC), which prescribes standards and monitors educational institution performance of study programmes against them. In addition, the degree of compliance of the study programmes with the Sri Lanka Qualification Framework (SLQF) is assessed. Furthermore, the study programmes that require certification by professional bodies are further regulated and accredited by the respective professional bodies through a process of review against predetermined standards developed to ensure fitness for practice.

Formal quality assurance activities in higher education commenced more than two decades ago. In 2002, the Committee of Vice Chancellors and Directors in collaboration with the UGC formulated a comprehensive futuristic quality assurance framework for undergraduate education based on the model of the quality assurance framework of the United Kingdom, under the guidance of a team of international QA experts. The main objectives of this QA framework were to support academic standards and furtherance and dissemination of good practices in Universities in Sri Lanka (CVCD/UGC, 2002).

External Quality Assurance (EQA) or review is an important component of the Quality Assurance (QA) framework of any higher education system. Its main objectives are to ensure the quality of education provision and standards of awards. This is to be achieved by inculcating a quality culture within the institutions and promoting continuous quality improvement in all spheres of higher education, facilitated through periodic review and feedback.

1.2 Quality Assessment Structure

At present the quality assurance framework for undergraduate education in Sri Lanka comprises the following:

(a). Administrative entity for overall administration and guidance of QA activities in state universities:

The Quality Assurance Council (QAC) of the UGC guided by the Standing Committee on Quality Assurance of the UGC.

(b). Dual-arm quality assurance system for internal and external Quality Assessment:

Internal QA: Centres for Quality Assurance (CQAs) in universities supported by Faculty Quality Assurance Cells (FQACs) for monitoring routine operations and ensuring compliance with the national policy framework and guidelines on Internal quality assurance of the university and of the study programmes.

External QA: The External Quality Assurance unit comprises a pool of trained reviewers for periodic assessment of the quality of education provision of universities and study programmes.

(c). National Policy Framework of Higher Education:

Universities Act No. 16 of 1978 and its subsequent amendments; Relevant Statutes and Ordinances made under the Universities Act to make provision for the establishment of HEIs; Government Establishments Code; Financial regulations.

Progressive legislation or circular instructions issued by the regulatory agencies such as the Ministry of Education, UGC, and QAC of the UGC to ensure compliance by the universities and HEIs.

(d). UGC approved nationally developed reference points that stipulate the best practices and standards to be complied with by the universities and study programmes for quality assurance in education provision:

Sri Lanka Qualification Framework (2015),

Codes of Practice published in Academic Procedures Handbook (2003 onwards),

Subject Benchmark Statements (2004 onwards).

(e). UGC-approved nationally developed Quality Assurance Manuals to guide quality assessment activities pertaining to undergraduate education:

Manual for Quality Assurance of External Degree Programmes and Extension Courses offered by Universities (Coomaraswamy et al., 2014)

Manual of Good Practices, Standards and Guidelines for External Training Institutions (State and Non-State) (Abeygunawardena and Coomaraswamy, 2014)

Manual for Review of Undergraduate Study Programmes of Sri Lankan Distance Higher Education Institutions (Coomaraswamy, 2019)

Manual for Review of Undergraduate Study Programmes of Sri Lankan Distance Higher Education Institutions (Warnasuriya et al., 2021)

Manual for Review of Postgraduate Study Programmes of Sri Lankan Distance Higher Education Institutions (Perera et al., 2021)

Manual for Institutional Review of Sri Lankan Universities and Higher Education Institutions (Perera et al., 2023)

1.3. Revision of the Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions

This *Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions* focuses on Programme Review. It will primarily guide the administrators and academics of the universities on the best practices to be adopted and internalized to improve and ensure the quality of undergraduate education, and the members of review teams to evaluate degree programmes in an objective manner.

After completion of the undergraduate programme reviews conducted using the newly formulated assessment structure from 2015 to 2021 in the state universities, the views of all stakeholders were invited about the criteria, standards and processes used during the reviews. The revised manual incorporated most of these suggestions in this second edition. The duplication of criteria and standards was minimized after careful scrutiny. Some of the healthy and innovative practices in the first edition have become norms of practice over the

last few years. Hence, such practices were incorporated under respective criteria and new desirable practices were included under innovative and healthy practices. An attempt was made to assign near-equal scores for every standard being assessed and improve the final grading of the overall performance of a programme of study.

1.4. Programme Review – Purpose

External quality assurance by peer review, commissioned by a national quality assurance system has now gained worldwide acceptance as an effective method to ensure quality and standards of education. Programme review is concerned with how a Faculty/ Institute assures itself and the wider public that the quality and standards of its programmes of study are being achieved and maintained. Programme review is distinct from Institutional review. Institutional review is concerned with university-wide processes, which maintain an appropriate environment for the delivery of quality programmes of study. Programme review on the other hand evaluates the quality of student learning at the programme level in greater depth focusing on curriculum, course and module planning, delivery, student support and assessment in finer detail. Programme review evaluates the effectiveness of the Faculty's or Institute's processes for managing and assuring the quality of study programmes, student learning experience and standards of awards within a programme of study. It is about management and assurance of the quality of education at the programme level.

Therefore, the overall purpose of programme review is to achieve accountability for quality and standards, and to use a peer review process to promote the adoption and internalization of good practices, inculcate quality culture and facilitate continuous improvement of the study programme. It is also meant to instill confidence, achieve accountability, provide information, promote improvement and showcase innovation in respect of the undergraduate programme of study that is being reviewed.

1.5 Programme Review – Scope

The scope of the programme review has been carefully determined. The criteria prescribed for scrutiny of programmes of study in this manual have been selected by giving due consideration to the feedback received from the academia based on their experience from the previous cycle of external reviews. Repetition of some standards under different criteria was one of the main criticisms of the previous programme review manual. Such repetitions were minimized. Further, the innovative practices that were previously thought to be novel approaches have been adopted by many programmes and new standards were developed for recognition of innovations in higher education. As courses/ modules comprise the programme of study, the standards that were used for determining the quality of a degree programme and courses, which were considered under two separate criteria were combined to form a single

criterion to avoid repetition and rationalize the review. Similarly, the standards and best practices under the criteria Human and Physical Resources, and Learning Environment, Student Support and Progression were combined under a single criterion Learning resources, Learner support and Progression.

Accordingly, the scope of the programme review in the revised manual has been incorporated in the six criteria listed below;

Programme Management

Learning Resources, Learner Support and Progression

Programme and Course/Module Design and Development

Teaching and Learning

Student Assessment and Awards

Innovative and Healthy Practices

In designing the criteria and standards for study programme review, due consideration was given to the different permutations prevailing in the university system for the design and delivery of different study programmes. For example, there are some Faculties/ Institutes which offer Bachelor's degrees as well as Bachelors (Honours) degrees which were previously referred to as General degrees and Special degrees, respectively. A single department or multiple departments may contribute substantially to deliver these programmes.

In addition, there are Faculties/Institutes which offer only Bachelors (Honours) degrees including professional degrees where all departments contribute to one programme of study. In such Faculties/ Institutes, there may be instances where few departments collectively offer one or several programmes of study. In addition, there may be instances where compulsory core modules are offered by all departments of study in the first part of the study programme while the specializations/ advanced modules in subject areas are handled by relevant departments of study during the latter part of the programme.

Rarely a Bachelors (Honours) degree may be delivered jointly by more than one Faculty. Even in this instance one Faculty usually plays the dominant role.

Therefore, in planning a programme review, it is necessary to identify the organizational structure for delivery of study programmes within the Faculty/ Institute. The Self Evaluation Report may focus on a single programme or a cluster of several programmes, that have more than 60% of the standards common to the programmes that are clustered.

The complexity of the combinations of Faculties/Departments which may be involved in the delivery of programme/s of study is not a deterrent to the concept of Programme Review. It would be up to the Faculty/ Institute which hosts the programme to identify the delivering departments/units in conjunction with the FQAC and manage the logistics of the review accordingly.

During the first cycle of Subject / Programme review, the focus has been on introducing the concept of quality assurance, relevant principles and good practices. During the second cycle of Programme reviews the scope has been expanded by introducing an assessment structure comprised of several core aspects or criteria, under which a wide range of best practices and standards have been prescribed. Assessing the degree of adaptation/ internalization of those best practices and the level of attainment of the respective standards were used to recognize the quality assurance in educational provision. In this manual, which will be used in the third cycle of programme reviews, the best practices have been refined further, and those pertaining to SLQF compliance have been incorporated to make programme reviews more cohesive and comprehensive.

1.6. Programme Review – Requirements

Programme review is offered to all undergraduate (Bachelors/Bachelors Honours) degree programmes which have completed at least one cycle or graduated at least one batch of students. The programmes need to be aligned to Level 5 or 6 of the Sri Lanka Qualification Framework (SLQF). Further, there has to be a willingness by programme staff to critically self-evaluate their programme under the given criteria and gather evidence of achieving the required standards. The Faculty Quality Assurance Cell (FQAC) has a major role to play in facilitating the process.

1.7 Preparation for Programme Review

1.7.1 Preparation by the Faculty/Institute

Three to six months before the intended Programme Review, the Faculty/Institute responsible for delivering the programme of study should begin to compile the Self-Evaluation Report (SER) in liaison with the FQAC of the Faculty/ Institute. Details of SER preparation and the format are given in Chapter Four of this manual.

1.7.2 Preparation by the QAC, CQA, FQAC and the Review Team

The QAC shall schedule annual programme reviews to be conducted, and liaise all activities through CQAs concerning external review of study programmes.

The Faculty/ Institute which offers the study programme/s has to intimate to the QAC through the FQAC/CQA regarding their intention and readiness for programme review. This request should preferably accompany the Self-Evaluation Report (SER).

The QAC will select the review team from the pool of trained reviewers and identify one of them as the Review Chair. The details of the review team will be forwarded to the

Faculty/ Institute for their concurrence through the FQAC/ CQA. About four to six weeks before the intended review, the dates for the review visit are decided upon by mutual agreement of the team and the Faculty/Institute. Upon finalizing the logistics and dates, at least four weeks before the review visit, a pre-review workshop will be conducted by the QAC for the potential reviewers, and the SER will be sent to the relevant review team members.

Upon receipt of the SER, individual members of the review panel will conduct a desk review and make notes on any further information that may be required prior to/during the review visit (more details in Chapter Four).

A pre-site visit meeting among the review panel, the CQA Director, the FQAC Coordinator, and the QAC representative will be organized by the QAC about one to two weeks before the scheduled visit. The broad scope of the review process, including the range of documentation to be made available and the timetable for the visit will be intimated to the Faculty/Institute by the QAC.

At this meeting, the review team will collectively agree on the assessments made, the lines of inquiry and any further information they need to see in advance. They will also identify individuals and groups that they wish to meet during their visit.

Prior to the site visit the Chair of the review panel delegates specific areas/ criteria to be reviewed to individual reviewers as decided by consensus. An attempt will be made to assign one criterion to two members to enhance the accuracy and fairness of assessments.

1.8. The Review Visit

The FQAC in liaison with the CQA and the QAC should make necessary arrangements to receive the review team and facilitate the review process. Details are given in Chapter Four of this manual.

The Review Team upon completion of the preliminaries during the visit, will

- examine and verify (as far as possible) the claims in the SER of the programme/s of study with the Faculty/ Institute of any specific concerns arising from previously conducted programme reviews and/or reviews conducted by professional bodies.

• gather any further evidence necessary to enable them to form a view on the quality of educational provision, the learning experience of the students, and the degree of achievement of the intended learning outcomes; and

• assess to what extent the recommendations and criticisms made by the previous programme reviews have been addressed.

The review team will also consult the documentation provided by the Faculty/ Institute. It will endeavour to keep to a minimum the amount of documentation it requests during the visit. The aim is to consider evidence provided by the Faculty/Institute and to focus on discussions with staff and students to get a clear picture of the processes in operation. The review team should always seek to read and use all information provided.

The programme review is evidence-based. The judgments made by the review team emerge from consideration of the evidence and collective discussions. They should not rest on unsupported views or prejudice. Most evidence for review will come from information and documentation provided by the Faculty/ Institute itself. In addition, and as available, review teams will draw on other relevant material such as (professional body quality assessment/accreditation reports, UGC standing committee directives etc.) where appropriate.

All reviews will draw upon the following principal sources of evidence:

The SER submitted for review,

Evidence referenced in the SER,

Degree of internalization of best practices as prescribed in the Programme Review Manual,

Information gathered by the review team during the review visit.

The visit should conclude with a meeting with the Dean of the Faculty/Director of the Institute, Director of the CQA, Coordinator of the FQAC, Heads of Departments and other relevant senior academic and administrative staff. The review team will give a general indication of its conclusions based on the review including strengths and weaknesses identified. The Faculty/ Institute will be given an opportunity to seek clarifications and correct any obvious errors of facts or misinterpretations at this point.

1.9. The Review Report and Process Prior to Publication

The outcome of the programme review is a published report. Its purpose is to inform the Faculty/ Institute and external parties of the findings of the review and to provide a reference point to support and guide staff in their continuing quality enhancement activities. In

particular, the report will give an overall judgment on the reviewer's assessment of the quality of education provision and student learning experience within the programme and the standard of the award, supported by a commentary on its strengths and weaknesses.

There will be a statement on the level of performance of the programme under the grades of A, B, C, D, or E based on the Study Programme Score expressed as a percentage and the number of criteria exceeding respective threshold scores (refer Chapter Three). The commentary will include commendations on excellence and recommendations on aspects which need further improvement based on the scores achieved on different criteria and respective standards.

The review team will submit a preliminary report on key findings within two weeks of the site visit to the QAC. The final draft report will be submitted to the QAC by the review team within six weeks of the site visit. The QAC will send a copy of the draft report to the Faculty/ Institute for their perusal. This will provide an opportunity for the Faculty/ Institute to peruse the draft report and if there are concerns to make it known to the QAC within three weeks. QAC will facilitate communication between the review team and the Faculty/ Institute to resolve the concerns by discussion before finalizing the report.

1.10. Outcome of Programme Review

After the Faculty/ Institute accepts the programme review report, it will enter the public domain through the QAC website so that all stakeholders including students, graduates, prospective employers, grant-providing agencies, educationists and policymakers have access to it. The UGC and MoE will receive a copy through the QAC. The outcome of this report especially the recommendations will be of value to the UGC and MoE in allocating resources, particularly in the context of rectifying the identified shortcomings/ deficiencies.

The most important follow-up actions have to be undertaken at the Faculty/ Institute itself. Upon receipt of the Programme Review Report (PRR), it should be discussed in-depth at the Faculty Board and relevant standing committees including FQAC and the Curriculum Development & Evaluation Committee. The PRR should also be sent to the Senate and Council for perusal along with the outcome of these discussions.

Along with that, a comprehensive follow-up action plan for quality enhancement has to be drawn up and integrated into the Internal Quality Enhancement action plan which shall be implemented by the Faculty/Institute. The CQA/ FQAC and other relevant committees should continue to monitor the progress in implementing remedial measures/activity plans. Internal quality enhancement activities should take place on a continuous basis until the next cycle of programme review.

Part II

Quality Assessment Framework and Performance Assessment

Chapter Two

Criteria, Best Practices, Standards and Evidence

The desired attributes of quality assessment in higher education are objectivity, transparency and comparability. As detailed in the *Manual for Institutional Review of Sri Lankan Universities and Higher Education Institutions - 2023*, these attributes are assured by defining a quality assessment framework or assessment structure comprising dimensions for quality (criteria, best practices and standards) against which a judgment on quality could be made. Part II of this *Manual for Review of Undergraduate Study Programmes – 2023* describes a quality framework and an assessment structure developed adopting the same principle and approach, for the review of study programmes offered by Universities/HEIs in Sri Lanka. The quality framework thus defined, consists of six 'Criteria' for study programmes, and corresponding 'Standards', 'Best Practices' and 'Examples of Sources of Evidence' for each Standard.

This chapter presents the quality framework, of which six 'Criteria' present the key aspects that contribute to the quality of an undergraduate study programme. Under each criterion, the 'Best Practices' or the actions and procedures that would improve the quality of education provision, and the 'Standards' or the desired level of internalization of the Best Practices by the undergraduate programme are presented. In addition, some examples of evidence that could demonstrate the degree of internalization of the best practice or achievement of the respective standard are provided.

The Self-Evaluation Report (SER) of the undergraduate study programme should be structured in line with the 'Criteria' and 'Standards' provided in this chapter. The 'Standards' are to be used by reviewers to measure the degree of internalization of the Best Practices and the level of attainment of the relevant Standard. More details on the Procedure for using

Standards for the Assessment of the Performance of a Study Programme are given in Chapter Three.

2.1. Criterion 1: Programme Management

Scope: The following aspects directly related to study programme management are assessed: Organizational structure, governance and management; Strategic/action plan, implementation & monitoring; Administrative and financial management; Website; Annual Academic Calendar; Permanent Records of Students in Document Management System; Student Handbook & Programme Prospectus; Students' Charter; Duty lists and Codes of Conduct for staff; Allocation of workload; Internal Quality Assurance System, Curriculum Development, Review Committee; SLQF compliance and Programme approval criteria; Programme commencement and termination (discontinuation); Programme Monitoring, Evaluation and Revision; Performance appraisal; Research Excellence; Collaborative partnerships; Gender Equity and Equality, Deterring Sexual and Gender-Based Violence; Zero-tolerance to ragging.

The scope of this criterion is captured in the following 'Standards':

1.1.Organizational Structure and/ or Programme Management Structure:

Standard: The organizational structure and/ or Programme management structure of the Faculty/Institute is adequate for efficient administration and effective execution of core functions related to programme management.

Best Practice: Organizational structure and/ or Programme management structure is adequate for efficient administration and effective execution of core functions such as programme design, development and delivery, learner support, research, and outreach.

Examples of Evidence: Comprehensive Organogram showing all units and committees involved in programme design, development and delivery, student learning support, research and outreach activities; ToRs of Standing and ad-hoc Committees.

1.2. Strategic/ Action Plan:

Standard: The Strategic/Action Plan of the Faculty/ Institute is up-to-date, aligned with the Corporate/Strategic plan of the university, and demonstrates the adoption of innovative initiatives for improving the education provision of the programme/s of study. It has been prepared using a participatory approach.

Best Practice: The action plan concerning the programmes of study is up to date, demonstrates readiness to adopt new trends in higher education with due emphasis on improving the education provision of the programmes of study and is in line with the respective sections of the University/ Institute's Corporate/ Strategic plan. The strategic plan has been prepared using a participatory approach.

Examples of Evidence: Faculty Strategic/ Action Plan highlighting section on the programmes of study; Composition of the Faculty Strategic/ Action plan committee; Alignment of Faculty strategic/action plan with University's /HEI's Corporate/Strategic Plan; Annual Plans concerning study programme; List of new initiatives implemented for improving education provision through the Action Plan.

1.3. Action Plan Implementation and Monitoring:

Standard: The Faculty / Institute ensures that the Strategic/ Action plan is implemented as planned and progress is monitored regularly.

Best Practice: Action Plan is implemented as planned and the progress is regularly monitored.

Examples of Evidence: Faculty Board minutes on the appointment of Action plan monitoring committee; Letters of appointment and ToRs of action Plan monitoring committee; Minutes of Action Plan Implementation and Monitoring Committee; Progress of achieving KPIs; Faculty Board minutes on progress of action plan implementation.

1.4. Administrative and Financial Management Procedures:

Standard: The administrative and financial management procedures of the Faculty/Institute comply with the approved University/ institutional administrative and financial management procedures. Those are documented as Standard Operational Procedures (SOPs)/ Management Guide and circulated among all relevant stakeholders.

Best Practice: In effecting general administration and financial management, full compliance with institutional administrative and financial regulations and guidelines that are documented as Standard Operational Procedures/Manual of Procedures/ Management Guide is ensured. These documents are circulated among all relevant stakeholders to ensure compliance.

Examples of Evidence: Relevant sections in Standard Operational Procedures (SoPs)/ Management Guide; Faculty circulars on adoption of university-approved SOPs/ management procedures for Faculty administration and financial management; Faculty website link to relevant circulars; Comparison of adopted administrative and financial

procedures including timelines with SoPs; Annual report of the Faculty/Institute; Relevant sections of the Annual (Internal or External) Audit reports.

1.5. Website:

Standard: The Faculty/Institute has an updated website which provides essential information about the Faculty/ Institute, study programme specification/s and links to all communications, publications, learning resources and support services related to the Faculty/ Institute and the study programme.

Best Practice: A website which provides up-to-date information about the study programme provider, and study programme specification with links to all communications publications, learning resources, support systems and services to interested public is maintained.

Examples of Evidence: Presence of Information on the Faculty/ Institute, study programme specification/s and links to Faculty communications, publications and programme-related learning resources/ support services for staff and students on the Faculty website; Website updating procedure; Website updating committee; Website updating committee minutes/ records.

1.6. Student Handbook:

Standard: The Faculty/ Institute makes available a comprehensive Handbook, which provides information on the history and current status of the Faculty/Institute, a brief account of the study programme(s) offered, learning resources, learner support services, disciplinary procedures, welfare measures, students' rights and responsibilities including medical leave/ leave of absence, and grievance redressal mechanisms, to all new entrants at the time of enrolment.

Best Practice: At the time of enrolment, new entrants are provided with a handbook which provides information on the Faculty/Institute, the study programme(s) offered, learning resources, learner support services, disciplinary procedures, welfare measures, students' rights and responsibilities, and grievance redressal mechanisms.

Examples of Evidence: The comprehensiveness of the content of the Faculty/Institute Handbook; Relevant URL of Faculty website; Years of updating or revising Handbook issued to new entrants; Feedback from students regarding the Handbook.

1.7. Prospectus:

Standard: Before the commencement of the study programme, the Faculty/institute provides the new entrants with an updated prospectus in print / electronic forms. The Prospectus clearly indicates the entry requirements, programme structure, graduate profile, programme

learning outcomes, course contents, credit values, teaching-learning assessment strategies, learning resources, support services, examination regulations, grading, graduating requirements, and progression opportunities and progression pathways upon successful completion of the study programme.

Best Practice: An updated and comprehensive programme information package or study Programme Prospectus which contains information regarding the study programme provider and the study programme including progression opportunities and pathways upon successful completion of the study programme is made available to all incoming students in print/ electronic form, before the commencement of the study programme.

Examples of Evidence: The comprehensiveness of the Study Programme Prospectus (presence of entry requirements, programme structure, graduate profile, programme learning outcomes, compulsory/optional courses, contents and credit values, teaching-learning assessment strategies, learning resources and support services, examination regulations and procedures, grading, graduating requirements, progression opportunities and progression pathways upon successful completion of the study programme); Relevant URL of Faculty Website; Date/s of uploading the Prospectus to the LMS or issuing Prospectus to newly admitted students.

1.8. University Student Charter:

Standard: The Faculty/Institute issues a copy of the Student Code of Conduct/ Student Charter prescribed by the University, By-laws on student discipline, and guidelines on student union to incoming students; it is clearly communicated to all incoming students. Adherence to the prescribed code of conduct is closely monitored and violators are promptly dealt with.

Best Practice: At the point of enrolment, the students are conveyed the desired conduct for successfully completing the programme through the Student Charter/ Code of Conduct, by-laws on student discipline, and guidelines on student unions. Adherence is ensured while violators are promptly dealt with.

Examples of Evidence: Approved Student Code of Conduct/Student Charter; By-laws on student discipline; Guidelines on student unions; Modes of communication to students; Samples of communications issued; Methods used to monitor or ensure compliance or deter violations of student charter, student discipline and student union guidelines (other than ragging, GEE, SGBV and exam offences); Actions taken against violators; Student feedback.

1.9. Staff Codes of Practice/ Duty lists:

Standard: The Faculty/Institute has established duty lists, work norms and Codes of Conduct for all categories of staff in compliance with institutional guidelines, communicated those to

respective staff, adherence is monitored regularly and remedial measures taken as and when required.

Best Practice: Implemented codes of practice, work norms and duty lists of all categories of staff are in compliance with the institutional guidelines and those are communicated, monitored and remedial measures taken as and when required.

Examples of Evidence: Codes of Conduct of different categories of staff; Approved Work norms or Duty lists/ job descriptions of different categories of staff given at the time of appointment; Mechanisms used for communicating and monitoring; Summary reports of workloads of academic staff; remedial measures taken (if any) with regard to violation of codes of conduct.

1.10. Equitable and Transparent Allocation of Workload:

Standard: Allocation of work for all categories of staff is fair, transparent, and equitable within the category as far as possible.

Best Practice: Workloads of each category of staff are equally distributed within the category. Allocation of work to every category of staff is transparent and fair.

Examples of Evidence: Individual workload documents of different categories of staff in different departments/ units contributing to the programme of study; Minutes of relevant meetings; Staff feedback; Measures taken to achieve an equitable allocation of workload.

1.11. Internal Quality Assurance System:

Standard: The Faculty/Institute has established a Faculty Quality Assurance Cell (FQAC) with well-defined functions as per University Grants Commission (UGC) guidelines, and operational procedures approved by the University. The FQAC implements an internal quality assurance system in liaison with the Center for Quality Assurance (CQA) of the University/HEI.

Best Practice: A well-defined internal quality assurance system undertakes regular monitoring of all aspects of the study programme and regularly reports to the board of administration. The internal quality assurance body liaises with the Center for Quality Assurance (CQA) of the University/HEI in executing its functions.

Examples of Evidence: Documents related to establishment of Faculty Quality Assurance cell (FQAC); ToR of FQAC members; FQAC by-laws and operational procedures manual; List of QA activities undertaken by the Department and the FQAC; Department meeting agenda; Faculty Board Agenda; Reports submitted to the Faculty Board on activities conducted (including implementation of the recommendations of previously conducted

programme review) by the Department and FQAC; Minutes of the Department, FQAC, Faculty Board, CQA and/ or Senate Standing Committee on Quality Assurance.

1.12. Curriculum Development/ Review Committee:

Standard: The Faculty/Institute has established a Curriculum Development/ Review committee or equivalent body comprising qualified members representing all departments that contribute to the study programme, for planning, designing, regular monitoring, reviewing and updating/ improving the curriculum.

Best Practice: A curriculum development/review committee and/or an equivalent body responsible for the planning, design, organization, monitoring and improvement of the programme/ curriculum is in place. The committee consists of qualified members of the faculty and/or other relevant stakeholders including representatives from key employers/ industry/ profession.

Examples of Evidence: Minutes of the Faculty Board on appointing members to curriculum development/review committee (CDC); Composition of the Curriculum Development Committee with designations and qualifications; Letters of appointment and ToRs of curriculum development committee members; Minutes of Curriculum Development Committee meetings; Relevant minutes of the Faculty board.

1.13.Training on SLQF Compliance and Awareness on Programme/ Course Approval Criteria:

Standard: The Faculty/Institute provides training on SLQF compliance and makes aware the staff of the principles/ guidelines to be adopted in designing study programmes and courses as well as criteria used in programme/ course approval, to those involved in programme/ course design and development.

Best Practice: Staff involved in programme design and development are trained on achieving SLQF compliance (title of the award, volume of learning, balance of theory, practical and independent learning within the programme, level descriptors and qualification descriptors) and made aware of the principles/ guidelines to be considered when programmes/ courses are designed and developed as well as criteria used in programme/ course approval (which include outcome-based and student-centred learning approach, teaching/ learning and assessment strategies, learning resources and learner support, monitoring, evaluation and review arrangements).

Examples of Evidence: Faculty-approved principles/ guidelines on programme/ course design and Development; University criteria on programme/ course approval; Letters/ circulars issued informing the CDC members regarding those principle/ guidelines and approval criteria; Relevant minutes of the Faculty Board and CDC; Records of training and

Awareness programmes/ Workshops on curriculum design and development and Programme / Course approval criteria; List of participants.

1.14. Programme/ Course Approval, Commencement and Termination (discontinuation):

Standard: The Faculty/Institute ensures that programme and course approval decisions are taken after full consideration of adherence to approved design principles/ guidelines and desired academic/ professional standards, and appropriateness of the learning opportunities available, course content and assessment strategies. Furthermore, the Faculty/Institute adopts university-approved procedures on new programme commencement, and termination (discontinuation) of an ongoing programme, and ensures that students enrolled into a programme will complete their education without any disruption.

Best Practice: The programme offered is approved by Faculty/Senate/Council /UGC or relevant regulatory agencies taking into consideration programme approval criteria indicated in Best practices of standard 1.14. The university-approved procedure for new programme commencement and termination (discontinuation) is adhered to ensuring the students enrolled on the programme complete their education without any disruption. The introduction of revised/updated curricula commences only after giving adequate notice and with a new batch of students; similarly, a programme is terminated after giving adequate notice.

Examples of Evidence: University approved procedure for programme and course approval, commencement and termination (discontinuation); Relevant minutes of Curriculum/course Development committees; Minutes of programme/course approval committee/s of the Faculty/ Department/ Faculty Board; Procedures adopted in introducing a new programme and/ or termination (discontinuation) of an ongoing programme (if relevant); Relevant minutes of the Faculty Board and the Senate; Relevant Examination Timetables for discontinued courses/ programmes; Notices issued.

1.15. Making Resources Available:

Standard: Appropriate and adequate physical, financial and human resources for Programme and course design, development, monitoring and review processes are made available by the Faculty/Institute.

Best Practice: Adequate physical, financial and human resources are provided for programme and course design, development, monitoring and review processes.

Examples of Evidence: Relevant minutes of the Faculty Board and the Curriculum Committee on required physical, financial and human resources for course design, development, monitoring and review; Faculty budget estimates with records of requests;

Responses received from relevant authorities; Minutes of the finance committee meetings indicating allocations; Records of Faculty using its generated funds (if applicable) for these purposes; Records of disbursement and use of funds for programme and course design, development, monitoring and review.

1.16.Permanent Records of Students in Document Management System, linked with University MIS:

Standard: For Programme Management, the Faculty/Institute securely maintains, updates and ensures the confidentiality of permanent records of all registered students in a Faculty-based document management system (DMS), which is accessible only to authorized personnel with provision for secure backups of all files. The Faculty/ Institute uses the Information and Communication Technology (ICT) platform to maintain the Faculty-based DMS and to link with the university Management Information System (MIS).

Best Practice: Permanent records of all enrolled students are securely maintained and regularly updated in a Faculty-based document management system (DMS), with provision for security backups and accessibility only to authorized personnel. for programme management. Information and Communication Technology (ICT) based platform is used for maintaining DMS and to link with the University Management Information System (MIS).

Examples of Evidence: Components of the Faculty DMS/ MIS; A comprehensive, and up-to-date records of staff and registered students in DMS/ MIS; Records of staff training relevant to MIS; Measures used for maintaining security and confidentiality of records; Screenshots of DMS; URL to the University MIS; Relevant records of the system administrator; Job description of the System Administrator/s and signed confidentiality statement/s.

1.17. Participatory Approach and Student Representation in Programme Management:

Standard: The Faculty/Institute adopts a participatory approach in its governance and management of the study programme and accommodates student representation in relevant faculty committees.

Best Practice: A participatory approach is used in the governance and management of the study programme through a mix of formal and informal mechanisms (standing and ad hoc committees) with student and stakeholder participation where relevant.

Examples of Evidence: List of members (including students, where relevant) in Standing Committees and Ad hoc committees; Samples of Minutes of Standing Committee and Ad hoc Committee meetings pertaining to study programme management; Improvements made in study programme management in response to student requests.

1.18. Collaborative Partnerships for Academic and Research Cooperation:

Standard: The Faculty/Institute has established collaborative partnerships with local and overseas universities/ HEIs/ organizations for academic and research cooperation.

Best Practice: In recognition of the value of collaboration with national and international partners for academic and research cooperation, collaborative partnerships with local and overseas universities/ HEIs/ organizations have been established.

Examples of Evidence: List of academic and research collaborations established with local and overseas universities/ institutes/ organizations; National and international collaborative research projects; Copies of MOUs/Agreements reached; List of activities conducted; Outcomes/ benefits received from collaborations; List of publications with partner institutions.

1.19. Adherence to Annual Academic Calendar:

Standard: The Faculty/Institute adheres to the annual academic calendar that enables the students to complete the programme and graduate at the stipulated time.

Best Practice: Adherence to the annual academic calendar is ensured enabling the students to complete the programme and graduate at the stipulated time.

Examples of Evidence: Proposed annual academic calendars for the past five years; Actual dates of commencement of semesters, examinations and release of results; Approaches used to compensate for deviation from the approved calendar (if any); Number of amended calendars with reasons; Records of entry and graduation dates of batches of students over the minimum of past 3 years.

1.20.Monitoring, Evaluation and Revision of Curriculum:

Standard: The Faculty/ Institute/ Department/ Curriculum Development / Review Committee along with the Faculty Quality Assurance Cell/Center for Quality Assurance of the university annually monitors the quality of education provision of the programme through process indicators and outcome indicators and uses the findings to periodically update and improve the programme in the light of developing knowledge and practices in the discipline and the quality of education provision, in an agreed cycle.

Best Practice: Quality of education provision of the programme is monitored and evaluated annually through process indicators (student retention, progression, completion/ graduation rates, graduate/student satisfaction with the programme) and outcome indicators (cost-

effectiveness of the programme, employability of graduates, employer feedback, admission rates to advanced degree programmes and scholarship/fellowship awards) and uses the findings to periodically update the programme in the light of developing knowledge and practices in the discipline and the quality of education provision, in an agreed cycle.

Examples of Evidence: Senate approved guidelines on programme evaluation; List of indicators used for annual programme evaluation; Samples of data collection tools used; Annual analytical reports (findings and recommended actions) on Student retention, progression, completion/ graduation rates, Graduate satisfaction surveys, Tracer studies; Employment records, Numbers of scholarships/ fellowships/ internships recipients; Numbers embarked on/ pursuing postgraduate studies; Employer feedback surveys report, Feedback from Internal/external reviewers; Major revisions/improvements made (with dates) based on these reports including the last programme review and/ or accreditation report; Relevant curriculum documents; Minutes of relevant meetings.

1.21.Indicators and Reward System on Research Excellence:

Standard: The Faculty/Institute uses a defined set of indicators to identify research excellence and implements a reward system.

Best Practice: Key performance indicators are used for evaluating the research performance of staff and identify champions for rewarding research excellence.

Examples of Evidence: Key performance indicators used; Minutes/ Recommendations of relevant committees; Records of past rewards conferred; Research contribution to the regional, and provincial development.

1.22.Performance appraisal of Administrative, Academic support & Nonacademic Staff:

Standard: The Faculty/Institute implements a performance appraisal system prescribed by the University/HEI for administrative, academic support and nonacademic staff; rewards high performers and remediates underperformers.

Best Practice: Performance appraisal systems for administration, technical and other nonacademic categories of staff prescribed by the University/HEI are implemented and the appraisal outcomes are considered for recognizing high performers and assisting underperformers.

Examples of Evidence: University-approved Guidelines and formats of performance appraisal systems of administration, academic support and nonacademic staff; Samples of

Annual Appraisal Reports (during site visit); Criteria for outstanding performance; Reward schemes; List of Awardees; Actions taken to address underperformers.

1.23. Ensuring GEE and deterring SGBV:

Standard: The Faculty/Institute has a policy and practices measures to ensure gender equity and equality (GEE) and deter any form of sexual and gender-based violence (SGBV) amongst all categories of staff and students.

Best Practice: Appropriate policies, strategies and activities are in place to comply with the institutional policy on promoting gender equity and equality (GEE) and deter any form of sexual and gender-based violence (SGBV) amongst all categories of staff and students.

Examples of Evidence: Policy, strategies and action plans for GEE & anti-SGBV; Gender distribution of administrative positions and office-bearers of staff and student associations/ unions/ committees; Recognition schemes for Champions of GEE and anti-SGBV; Planned and implemented measures and activities; Complaints on GEE and SGBV; Actions taken; Feedback from staff and students on GEE and anti-SGBV.

1.24. Zero-tolerance to Ragging:

Standard: The Faculty/Institute implements the University policy on zero-tolerance to ragging; it adopts strategies and implements preventive and deterrent measures through coordinated efforts of all stakeholders to prevent ragging, harassment and intimidation.

Best Practice: In adherence to the institutional policy of zero-tolerance to ragging, coordinated efforts involving academics, Faculty-student counsellors, proctors, marshals and security staff, are taken to prevent and deter ragging, intimidation/harassment among students.

Examples of Evidence: Strategies and Action plans on anti-ragging/harassment; Student orientation agenda item on rag prevention; Appointment of members to rag prevention committees; Meeting minutes; Faculty staff roster on rag prevention; Inquiry reports; Reports on the past activities geared to prevent ragging and punishments meted out.

2.2. Criterion 2: Learning Resources, Learner Support and Progression

Scope: The following aspects are reviewed and assessed under this criterion:

Common infrastructure facilities and Programme specific training facilities for OBE-SCL; Strength and quality of staff; Induction/Certificate programme for staff; Postgraduate training of academic staff; Continuous Professional Development of staff; Training on the use of learning resources; Student-friendly administrative system; Orientation programme for new entrants; English Language teaching-learning and ICT resources and services; Library resources, services and usage; Career guidance services; Academic advisory/ mentoring/counselling and welfare services, Extra-/ Co-curricular & Multicultural activities; Networking with alumni; Security, safety and health care; Facilities, resources and services for students with special needs; Staff-student interactions; Grievance redressal.

The scope of this criterion is captured in the following standards:

2.1. Common Infrastructure Facilities for OBE-SCL:

Standard: The Faculty ensures the availability of adequate, well-maintained and updated infrastructure facilities for the administration, and implementation of outcome-based education and student-centred learning (OBE-SCL) for staff and students.

Best Practice: Staff and students are provided with adequate, updated and well-maintained infrastructure facilities such as an administrative unit, appropriately modified common

lecture rooms, ICT resources, laboratories, libraries and reading rooms, studios, field stations/practice areas etc. to adopt outcome-based education and student-centered learning (OBE-SCL) approach in education provision.

Examples of Evidence: Inventory of common infrastructure facilities (to be verified at site visit) such as administrative unit, appropriately modified common lecture rooms, ICT laboratories, Other laboratories, libraries and reading rooms, studios, field stations/practice areas etc. to adopt outcome-based education and student-centred learning (OBE-SCL) approach in education provision; Records of upgrading; Results of analysis of Staff and Students' feedback; Improvements made in response to feedback.

2.2. Programme-specific Training Facilities for OBE-SCL:

Standard: The Faculty/Institute has put in place the required programme-specific teaching/training facilities for the implementation of outcome-based education (OBE) and student-centred learning (SCL)approaches, which are upgraded as required.

Best Practice: Appropriate and adequate training facilities for implementing OBE-SCL approaches specific to the degree programme are available.

Examples of Evidence: List of available OBE-SCL oriented programme specific teaching/training facilities and laboratories such as clinical training facilities, engineering workshops, teaching laboratories, field stations/camps/ training stations, etc.; Guidelines/Manuals on the use of such teaching/ training facilities; Time tables showing periods using OBE-SCL facilities; User records/ attendance lists; Results of analysis of Staff and Students' feedback; Improvements made in response to feedback.

2.3 Strength and Quality of Academic and Academic Support Staff:

Standard: The academic and academic support staff of the Faculty/ Institute, in terms of the number, qualifications and competencies is adequate for designing, developing and delivery of academic programmes, research and outreach. The Faculty/Institute takes timely measures to ensure that its staff profile is compatible with its teaching, research and outreach needs and comparable with programme-specific national or international norms, with a high percentage of academics having doctoral degrees, research grants and publications in national and international referred/indexed journals.

Best Practice: Adequate academic resources with the required qualifications and competencies are available to design, development and delivery of academic programme(s) and courses, and to undertake associated functions such as research, innovations, counselling and outreach activities. Timely steps are taken to make the staff profile comparable with the teaching, research and outreach requirements, and programme-specific national or

international norms with a high percentage of academics having doctoral degrees, research grants and publications in national and international referred/indexed journals.

Examples of Evidence: Faculty academic and academic support Staff Cadre; Staff profile; List of expertise required and available to design, development and delivery of the curriculum, research and outreach; compliance with national or international norm on staff: student ratio; Percentage of academic staff with doctoral degrees; Percentage of academic staff trained in higher education teaching; Percentage of academic staff with research grants and publications in indexed/ refereed journals; Records on requesting new cadres and filling of existing vacancies.

2.4. Strength and Quality of Administrative and Nonacademic Staff:

Standard: The administrative and nonacademic staff of the Faculty/Institute, in terms of the number, qualifications and competencies are adequate for effective administration and provide support for the conduct of academic programmes, research and outreach. The Faculty/ Institute takes timely measures to ensure that its administrative and nonacademic staff profile is compatible with its administrative and supportive functions for the conduct of academic programmes, research and outreach needs and compatible with national norms.

Best Practice: Adequate human resources with the required qualifications and competencies are available for administration and support the conduct of academic programme(s) research, and outreach activities. Timely steps are taken to make the administrative and nonacademic staff profile compatible with national norms.

Examples of Evidence: Faculty administrative and nonacademic Staff Cadre; administrative and nonacademic Staff profile; Requirement and availability of administrative and nonacademic staff (in the departments and laboratories separately); Compatibility with the norms for academic: non-academic staff ratio; nonacademic staff: student ratio; Records on requesting new cadres and filling of existing vacancies.

2.5. Compulsory Induction/ Certificate Programme:

Standard: Faculty/Institute ensures that, within a year of recruitment, every member of staff undergoes an induction programme and /or Certificate programme in higher education which provides an awareness of their defined roles and duties, and imparts knowledge and competencies required to function satisfactorily; effectiveness of the programme is monitored and actions taken to improve.

Best Practice: All newly recruited staff are required to undergo an induction programme/ certificate programme which helps them to acquire competencies required to perform

satisfactorily in their assigned roles; the effectiveness of the programme is monitored and actions are taken to improve.

Examples of Evidence: Letters of appointment; Notices issued to new recruits requiring to undergo induction training within a year and consideration for confirmation; List of new recruits who completed the induction/ certificate programme; Letters of confirmation; Period from recruitment to the completion of induction/ certificate programme of the new recruits; Curriculum of the induction/ certificate programmes offered by the University/HEI; Results of analysis of feedback from participants; Actions taken to improve.

2.6. Acquisition of Postgraduate Qualifications:

Standard: The Faculty/ Institute ensures all academic staff acquire relevant postgraduate qualifications within eight years of recruitment, and progress into higher grades at the prescribed points of time in their service without stagnation.

Best Practice: All newly recruited academic staff are proactively encouraged to acquire required post-recruitment qualifications and competencies as early as possible to perform their core duties, and to work towards progressing into higher grades at the prescribed points of time in their service without stagnation.

Examples of Evidence: Records on circulating information on postgraduate opportunities among academic staff; Duration taken to complete postgraduate qualifications by academic staff; Percentage of academic staff completed postgraduate qualifications within 8 years of recruitment; Percentage of staff achieved relevant promotion grades within stipulated time periods.

2.7. Continuous Professional Development of Academic Staff:

Standard: The Faculty/Institute ensures that the capacity of academic and academic support staff (with special emphasis on teaching-learning, assessment strategies, research and outreach) is continuously upgraded and enhanced through the provision of in-service, continuing professional development (CPD) programmes; the impact of CPD programmes are monitored, and remedial action taken as and when required.

Best Practice: The capacity of academic and academic support staff is continuously upgraded and enhanced through the provision of in-service, continuing professional development (CPD) programmes of which the impact is monitored, and remedial actions are taken as and when required.

Examples of Evidence: Human Resource Development plan for academic and academic support staff; University approved criteria used to select academic and academic support staff

to undergo CPD programmes; List of staff selected based on the criteria; Records of CPD programmes offered; Lists of attendees to different CPD programmes; List of staff obtained professional qualifications / completed professional exams, Results of analysis of Feedback from attendees of CPD programmes; Actions taken to improve.

2.8. Continuous Professional Development of Administrative and Nonacademic Staff:

Standard: The faculty/Institute ensures that the capacity of administrative and nonacademic staff is continuously upgraded and enhanced through the provision of in-service, continuing professional development (CPD) programmes; the impact of CPD programmes are monitored, and remedial action taken as and when required.

Best Practice: The capacity of administrative and nonacademic staff is continuously upgraded and enhanced through the provision of in-service, continuing professional development (CPD) programmes of which the impact is monitored, and remedial actions are taken as and when required.

Examples of Evidence: Human Resource Development plan for administrative and nonacademic staff; University-approved criteria used to select different categories of staff to undergo CPD programmes; List of staff selected based on the criteria; Records of CPD programmes offered; Lists of attendees to different CPD programmes; List of administrative and nonacademic staff promoted for higher grades based on UGC approved criteria; Results of analysis of Feedback from attendees; Actions taken to improve.

2.9. Training on the use of Common Learning Resources:

Standard: The Faculty/Institute provides ongoing training for users (students and staff) of common learning resources such as libraries, ICT facilities, language laboratory facilities etc. with regular upgrading.

Best Practice: Ongoing training programmes are conducted for users (students and relevant staff) on common learning resources with regular upgrading.

Examples of Evidence: List of annual/ semester-based training programmes offered on common learning resources; List of attendees (students /staff), Samples of Training materials issued; Training evaluation reports; Student/staff feedback analysis reports; Actions taken to improve based on feedback (if any).

2.10. Training on the use of Programme-specific Learning Resources:

Standard: The Faculty/Institute which offers professional/ honours degree programmes, provides ongoing training for users (students and staff) of programme-specific learning resources with regular upgrading.

Best Practice: Ongoing training programmes are conducted for users (students and relevant staff) on programme-specific learning resources with regular upgrading.

Examples of Evidence: List of annual/ semester-based training programmes offered on programme-specific learning resources such as skills training laboratories, clinical facilities, subject-specific laboratories, engineering workshops, workstations etc.; List of attendees (students /staff), Samples of Training materials issued; Training evaluation reports; Student/staff feedback analysis reports; Actions taken to improve based on feedback (if any).

2.11. Student-friendly Administrative System:

Standard: The Faculty/ Institute ensures maintaining a student-friendly administrative system which promptly responds to student needs.

Best Practice: A student-friendly administrative system which promptly responds to student needs is in place.

Examples of Evidence: Student Help desk; Number of staff allocated to Help desk; Job description of the Help desk staff; Website with FAQs; Chat box facility/ Blogs for interaction between students and staff; Analysis of students' feedback/ student satisfaction survey reports; Actions taken to improve.

2.12. Orientation Programme for New Entrants:

Standard: The Faculty/Institute offers all incoming students an appropriately structured induction (orientation) programme to make them aware of the rules and regulations of the institution, student-centred learning, outcome-based education and technology-based learning, facilities and resources available etc., to integrate them into the university life; Effectiveness of the programme is monitored and actions are taken to improve.

Best Practice: A comprehensive and well-structured orientation programme is offered for all new students to facilitate their transition from school to university environment, and to provide information on the University and Faculty, facilities and resources available, support services and the study programme.

Examples of Evidence: Agenda of the induction or orientation programmes of the Faculty for students; Records of students attending the programme; Results of analysis of Feedback from new entrants; improvements made based on feedback.

2.13. English Language Teaching-Learning Resources and Services:

Standard: The Faculty/ Institute ensures that the students of the programme are provided with instructional training and practical guidance in learning and use of English as a second

language (ESL) in their academic activities from a well-resourced Department of English Language Teaching (DELT; effectiveness of the resources and services are monitored and reported.

Best Practice: Students are provided with instructional training and practical guidance in learning and use of English as a second language (ESL) in their academic activities through a well-resourced Department of English Language Teaching (DELT).

Examples of Evidence: List of available ELT facilities and learning resources (including learning materials) at the DELT; ELT staff strength and qualifications; List of training provided to students; Samples of Instructions issued to students; Attendance lists; Results of the analysis of stakeholder (staff and student) feedback/ satisfaction survey data; Monitoring reports submitted and improvements made.

2.14. ICT Resources and Services:

Standard: The Faculty/Institute ensures the availability of functional ICT facilities and user-friendly technical assistance to provide adequate opportunities for students to acquire ICT skills for success in academic work. The quality of the resources and services is monitored and upgraded.

Best Practice: Sufficient ICT facilities including access to computer terminals, internet connectivity and technical guidance are available as and when required for students to acquire ICT skills for success in academic work.

Examples of Evidence: List of ICT facilities available; ICT staff list with their qualifications and experience; List of services provided; Samples of Instructions issued to students; Usage reports; Results of analysis of stakeholder feedback on facilities and services; Actions taken to improve.

2.15. Library Resources, Services and Usage:

Standard: The Faculty/ Institute ensures student access to a well- resourced state-of-the-art library facility, which enables students to use information effectively for academic success and lifelong learning via a user-friendly service through appropriately qualified and trained staff, and the teachers in partnership with the library and its staff facilitate the use of library and information resources by integrating those into the learning process.

Best Practice: Students have access to a well-resourced library facility which is networked and holds up-to-date print and electronic forms of titles, and electronic databases and provides other facilities such as reprography, internet, inter-library loan mechanism, and ICT-led tools to facilitate the students to access and use information effectively for academic

success and lifelong learning along with a user-friendly service through appropriately qualified staff. The teachers in partnership with the library and its staff ensure that the use of library and information resources are integrated into the learning process.

Examples of Evidence: List of inventory of library resources; List of library staff with qualifications and training; List of services provided (reprography, internet, inter-library loan etc.); Relevant Instructions given to teachers; Course specifications (lists of references/ suggested readings); Lesson Plans highlighting the learning activities/assignments requiring library information resources; Requests made to library on required learning resources; On-line and in house library usage reports; Minutes of library committee meetings, Results of analysis of stakeholder feedback; Improvements made in response to feedback.

2.16. Career Guidance Resources and Services:

Standard: The Faculty/Institute ensures the students are provided with adequate training on ‘soft skills’/’life skills ‘required to succeed in the 'world of work', as well as career selection, and career management skills for enhancing employability through tailor-made programmes developed in collaboration with and offered by the Career Guidance Unit (CGU) of the University; effectiveness of the programmes are monitored and reported.

Best Practice: Students are provided with training opportunities to acquire ‘soft skills’/’life skills ‘required to succeed in the 'world of work', as well as career selection, and career management for enhancing employability through tailor-made programmes conducted by the Career Guidance Unit (CGU) of the University.

Examples of Evidence: Faculty Coordinator/ unit for CGU; List of programmes developed in collaboration with and offered by the CGU to students following the study programme; Samples of Instructions issued to students; List of attendees; Results of the analysis of student feedback and Alumni on the programmes offered; Monitoring reports submitted; Actions taken by CGU to improve.

2.17. Academic Advisory/ Mentoring/ Counselling Services:

Standard: The Faculty/Institute operates academic advisory/ mentoring and student counselling programmes, monitors their effectiveness, and ensures that the personnel responsible for the tasks are adequately trained to fulfil their roles and to maintain confidentiality of information.

Best Practice: Mechanisms are in place to optimize the learning environment through the provision of student support services such as academic advisory/ mentoring and a student counselling system ensuring that confidentiality is maintained to protect the rights of individuals.

Examples of Evidence: List of Student advisory/academic mentoring/ counselling services in the Faculty; List of training programmes offered to staff undertaking advisory/ mentoring/counselling activities; Letters of appointments and TORs for academic mentors, advisors and student counsellors; Activities undertaken/ services offered (provide details during the site visit); Samples of Instructions issued to students; Results of analysis of student feedback on advisory/ mentoring/ counselling programmes; Actions taken to improve effectiveness.

2.18. Welfare Mechanisms:

Standard: To facilitate uninterrupted education, the Faculty/ Institute has established welfare mechanisms that are monitored and improved as required, and the students are made aware of them.

Best Practice: Welfare mechanisms are in place, they are monitored and improved as necessary, and students are made aware of those to facilitate uninterrupted education.

Examples of Evidence: List of welfare mechanisms (accommodation/ transport/ cafeteria facilities/ Mahapola/ Bursaries/ Hardship funds/ needy student funds/ private donations or scholarships etc./ Donation of Books and related educational materials etc.); Procedures and Criteria used for selection of welfare recipients; Faculty website/notices issued to students; Samples of Instructions issued to students; Records of selections; Results of the analysis of Student feedback on welfare mechanisms; Actions taken to improve.

2.19. Extra- and Co-curricular Activities:

Standard: The Faculty/ Institute promotes student participation at the regional/ national level in extra-/co-curricular activities/ competitions (sports, Toastmasters, Gavel club, debate clubs, IQ, Innovations, General knowledge etc.) that conform to the mission of the Faculty/ Institute, and contribute to social and cultural dimensions of the educational experience. Outstanding performers are rewarded.

Best Practice: Student participation at regional/ national level extra-/co-curricular activities/ competitions (sports, toastmaster, Gavel club, debate clubs, IQ, Innovations, General knowledge etc.) that conform to the mission of the Faculty/ Institute, and contribute to social and cultural dimensions of the educational experience are promoted. Outstanding performers are rewarded.

Examples of Evidence: List of extra- and Co-curricular activities; Samples of Instructions issued to students; Facilities offered; Financial allocations made; Lists of participants; Lists of Awardees; Results of analysis of Student feedback.

2.20. Multicultural Programmes:

Standard: The Faculty/ Institute has a coordinating structure (body) and mechanisms (physical, financial and human resource allocation) to encourage and facilitate students to engage in multicultural and aesthetic programmes to promote social harmony and ethnic and cultural cohesion among students of diverse backgrounds; monitors their effectiveness and takes action to improve.

Best Practice: Students are encouraged and facilitated to engage in multicultural and aesthetic programmes to promote harmony and cohesion among students of diverse ethnic and cultural backgrounds.

Examples of Evidence: Coordinating structure (body) and mechanisms (physical, financial and human resource allocation)in the faculty to promote multicultural and aesthetic activities; Letters of appointment issued to Activity Coordinators/ Office bearers; Records of past events conducted/ Activities coordinated; Agendas of the events; Invitation cards; Samples of Instructions issued to students; Photographs; Results of the analysis of Student feedback; Actions taken to improve.

2.21. Networking with Alumni:

Standard: The Faculty/Institute networks with alumni and encourages them to assist students in preparing for their professional future; monitors the effectiveness of activities and takes actions to improve further.

Best Practice: There is a commitment to networking with alumni for information and guidance on career development and management skills along with soft skills to prepare students for their future careers.

Examples of Evidence: Composition and constitution of Faculty/Institute/ study programme alumni/ association/society; Minutes of alumni association; Records of interactions and active participation of alumni in Faculty activities; Samples of Instructions issued to students; Results of the analysis of Staff and student feedback; Actions taken to improve/ improvements made.

2.22. Safety and Security Measures:

Standard: The Faculty/Institute has put in place mechanisms to ensure the safety and security of students and staff. Those mechanisms are monitored, evaluated and improved as required.

Best Practice: The security and safety of all students and staff are ensured, monitored, evaluated and improved as required.

Examples of Evidence: Safety and security measures that are in operation within the Faculty/Institute; Safety and security guidelines issued to students and staff; Safety drills, Training programs and workshops; Samples of Instructions issued to students; Minutes of meetings of safety and security bodies; Results of analysis of feedback from staff and students; Improvements made based on feedback/ emerging situations.

2.23. Access to Healthcare Services:

Standard: The Faculty/Institute has put in place mechanisms to ensure that all its students and staff have access to basic healthcare services. These services are monitored and necessary improvements are made based on feedback or emerging situations.

Best Practice: Access to basic health care services is provided to all students and staff. These services are monitored and necessary improvements are made based on feedback or emerging situations.

Examples of Evidence: Available healthcare facilities for the faculty staff and students; Instructions given to staff and students; Relevant sections in student Handbook/ website; Letters of appointments and ToRs of Health Center staff; Log entries of Health centre; Samples of Instructions issued to students; Results of analysis of Staff and student feedback; Improvements made based on feedback or emerging situations.

2.24. Appropriate Infrastructure, Learning Resources and Services for Students with Special Needs:

Standard: The Faculty/Institute provides appropriate infrastructure, learning resources and dedicated learner support services for students with special needs; monitors and evaluates their effectiveness and takes necessary steps for improvement.

Best Practice: Students with special needs are provided with improved appropriate infrastructure, learning resources and dedicated learner support services which are monitored and improved as necessary.

Examples of Evidence: Infrastructure facilities available for students with special needs; Learning resources (brail machines/ computer keyboards, relevant software, audiobooks, special needs units etc.,) offered for students with special needs; Dedicated service personnel for special needs students; Samples of Instructions issued to students; Analyzed results of student and staff feedback on effectiveness; Improvements made based on feedback.

2.25. Promoting Staff-Student Interaction:

Standard: The Faculty/Institute promotes active academic/social interaction between the faculty and students; monitors effectiveness and takes actions to improve.

Best Practice: Active academic/social interaction between the faculty and students is promoted.

Examples of Evidence: List of scheduled social events (Faculty Day, Going Down, Teachers' Day etc.) in the Faculty academic calendar to facilitate interaction between staff and students; Positions/ responsibilities held by academic staff in these events; Faculty communications made to staff on events; Agendas of the events held; Photographs; Results of the analysis of student feedback; Actions taken to improve interaction.

2.26. Monitoring and Facilitating Student Progress:

Standard: The Faculty/Institute maintains up-to-date records on student progress throughout a programme of study and provides prompt and constructive feedback/ counselling about their performance to ensure progression from one level to the next for successful completion of the programme and for qualifying for an award and employment/ advanced study.

Best Practice: Student performance is monitored on a continuous basis and feedback is provided to ensure progression from one level to the next for successful completion of the programme.

Examples of Evidence: Database of students with up-to-date records of student examination / assessment results; Records of feedback / counselling given to ensure progression; Results of student satisfaction survey on remediation/ counselling; Actions taken to improve.

2.27. Directing to Fallback Options:

Standard: The Faculty/ Institute directs and encourages the students who do not complete the programme successfully to opt for available fallback options.

Best Practice: The students who do not complete the programme successfully are directed/ encouraged to select the available fallback options.

Examples of Evidence: Available Fallback options; Records of communication to relevant students; List of students who used fallback options; Feedback from relevant students.

2.28. Grievance Redressal:

Standard: The Faculty/ Institute has a committee comprising independent members not currently serving in the Faculty, to implement fair and effective procedures for handling staff and student grievances, and delivering timely responses.

Best Practice: Student/ staff grievances are addressed in a fair and effective manner and deliver timely responses by a committee comprising independent members not currently

serving in the Faculty, thus ensuring the opportunity to raise matters of concern without risk of disadvantage.

Examples of Evidence: Guidelines/ By-laws on Grievance redressal; Records of creating awareness among students and staff; Faculty Board minutes on appointing Grievance redressal committee members; Letters of appointment and ToRs; Minutes of grievance redressal committee meetings; Grievances received and Actions taken (to be shown during the site visit); Feedback from aggrieved parties.

2.3. Criterion 03: Programme and Course/Module Design and Development

Scope: The following aspects are reviewed and assessed under this criterion:

Participatory approach for Programme/Course/ module design and development; Use of and training on OBE-SCL; Officially approved standard formats/ templates/ guidelines; Compliance with Sri Lanka Qualification Framework (SLQF), University mission and national needs; Use of reference points and previous review recommendations; Graduate profile; Programme Learning Outcomes (PLOs) development in compliance with SLQF; Course/ module learning outcomes; Mapping course/module outcomes with PLOs; Using student-centred teaching learning and assessment strategies; Constructive alignment; Integrating social, ethical, gender, cultural and social diversity, equity, social justice, ethical values and sustainability; Promoting soft skills; Incorporating work-based placement/internship; Courses to broaden outlook; Compliance of Volume of learning with SLQF; Course sequence and credit distribution; Optional/ elective courses; Compliance with SLQF on taught courses and research/ independent study; Entry and exit pathways including fallback option.

The Scope of this criterion is captured in the following standards:

3.1 Participatory Approach for Programme Design and Development: Standard: The Faculty/ Institute ensures that the study programme is designed, developed and revised collaboratively through a curriculum revision and development committee or equivalent body with the participation of relevant stakeholders, who have been made aware of their respective roles and giving due consideration to their views.

Best Practice: A participatory approach inclusive of academic staff, non-academic/ technical staff, students, alumni and external stakeholders (e.g., industry and professional bodies) is adopted at key stages of the design and development of the study programme. Stakeholders are made aware of their respective roles and due consideration is given to their views.

Examples of Evidence: Relevant instructions/ circulars issued by the Faculty/ Institute; Relevant minutes and attendance of Curriculum Development committee and internal/external stakeholders (students, graduates, employers/professional bodies); Samples of letters of invitation sent to stakeholders; Feedback reports from stakeholders; List of suggestions incorporated into programme design and development.

3.2. Course/ Module/ Subject Teams:

Standard: The Faculty/ Institute ensures that the courses/ modules/ subjects are designed and developed by a committee of the department/s (course/ module/ subject teams) comprising internal and external subject experts who have been made aware of their respective roles by the relevant authorities.

Best Practice: A participatory (course/ module/ subject team) approach inclusive of relevant internal and external subject experts is adopted at key stages of the design and development of courses; each member is made aware of their respective roles and responsibilities.

Examples of Evidence: Relevant instructions/ circulars issued by the Faculty; Lists course/ module/ subject teams and positions; ToR of course/ module/ subject design and development committees; Samples of Letters of invitation sent to subject experts; Relevant Minutes and Attendance sheets of course/ module/ subject development committee meetings.

3.3. Use of OBE-SCL in Curriculum Design and Development:

Standard: The Faculty/ Institute uses outcome-based education (OBE) approach and student-centred learning(SCL) practices for curriculum design and development, and provides prior training on OBE-SCL and necessary inputs to the staff involved in instructional design and development.

Best Practice: Outcome-based education approach and student-centred learning procedures are used in curriculum design and development. The staff involved in curriculum design and development have been trained on the use of the OBE-SCL approach for such purposes.

Examples of Evidence: Training schedules of staff development centre/ Faculty/ Department on the use of OBE-SCL approaches for curriculum design and development; Lists of trained staff; Samples of instructional materials; Programme specification; Feedback from staff on training.

3.4. Use of Officially- approved SLQF-conformed Formats:

Standard: The Faculty/ Institute uses publicly available, university-approved, SLQF-conformed standard formats/ templates/ guidelines for programme/course/ module design and development.

Best Practice: Publicly available, SLQF-conformed, officially approved standard formats/ templates/ guidelines are used during the programme, course/module design and development phases.

Examples of Evidence: Comparison of Publicly available, SLQF conformed formats/ templates and guidelines for course/programme design and development with University approved standard format/templates and guidelines used for programme/ course/ module design and development; Relevant minutes of curriculum development committee; Programme/ Course curricula of the study programme in the approved format.

3.5. Compliance of Qualification Nomenclature with SLQF:

Standard: The Faculty/ Institute ensures the name of the qualification awarded for the programme complies with the SLQF guidelines with respect to the Type, Designator, Qualifier, and Abbreviation.

Best Practice: The name of the qualification awarded for the programme complies with the SLQF with respect to the Type, Designator, Qualifier, and Abbreviation.

Examples of Evidence: Approved name of the qualification; Proof of compliance with SLQF with respect to the Type, Designator, Qualifier, and Abbreviation.

3.6. Compliance with SLQF on Purpose and Scope:

Standard: The Faculty/ Institute ensures that the programme is designed to conform to the "Purpose and Scope of Qualification" requirement of the relevant SLQF Level.

Best Practice: The purpose and scope of the programme are consistent with the SLQF requirements.

Examples of Evidence: Relevant section of the Curriculum development guidelines of the Faculty/ Institute; Minutes of the Curriculum development committee on designing the 'purpose and scope' of the programme; Compliance of purpose and scope of the qualification indicated in programme specification/ prospectus with the relevant SLQF level.

3.7. Conformity with University Mission and National Needs:

Standard: The Faculty/ Institute ensures that the aims of the programme conform to the mission, goals and objectives of the institution; and national needs, and reflect global trends and current knowledge and practice.

Best Practice: The programme is consistent with the mission, goals and objectives of the University/ HEI. It is designed to meet the needs of all stakeholders, national, regional and global requirements, and to reflect the latest developments and practices in the field of study.

Examples of Evidence: Relevant Curriculum Development and Review Guidelines; Needs assessment documents; Table showing conformity of programme aims with the mission, goals and objectives of the institution, national needs and global trends; Minutes of the Curriculum Development/ Review committee on developing aims of the programme.

3.8. Use of Reference Points and Previous Internal and External Review Recommendations:

Standard: The Faculty/ Institute ensures that programme design is guided by external reference points such as Subject Benchmark Statements (SBS), and requirements of relevant professional bodies while incorporating relevant previous internal and external programme review recommendations.

Best Practice: Programme design is guided by external reference points such as Subject Benchmark Statements and requirements of relevant professional bodies and relevant previous programme review recommendations.

Examples of Evidence: Senate approved curriculum design policy/ Relevant Faculty guidelines; Requirements of relevant Subject Benchmark Statements or professional bodies; Previous internal and external programme review recommendation; Relevant Minutes of the curriculum development committee, Internal quality assurance cell; Programme specification highlighting relevant Subject Benchmark Statements and professional requirements and relevant previous programme review recommendations.

3.9. Graduate Profile:

Standard: The Faculty/ Institute ensures that the desired graduate profile is developed considering the goals and values of the institute, requirements of the stakeholders, accreditation bodies, and aligned with 'attributes of qualification holders' specified in SLQF at the relevant level and those indicated in relevant benchmark statements.

Best Practice: The desired graduate profile is developed taking the goals and values of the institute, requirements of the stakeholders, accreditation bodies, 'attributes of qualification holders' specified in SLQF at the relevant level and those indicated in relevant benchmark statements into consideration.

Examples of Evidence: Graduate profile of the study programme in Faculty Handbook/Prospectus/ website; Mapping/alignment of graduate profile with goals and values of the institute, requirements of the stakeholders, accreditation bodies, 'attributes of qualification holders' specified in SLQF at relevant level and those indicated in relevant benchmark statements; Minutes of the Curriculum Development Committee on Graduate Profile formulation.

3.10. Programme Learning Outcomes (PLOs):

Standard: The Faculty/ Institute ensures that the programme learning outcomes are designed to achieve the graduate profile of the study programme.

Best Practice: The programme learing outcomes are developed in alignment with the desired graduate profile of the programme.

Examples of Evidence: Mapping/alignment of programme learning outcomes with the graduate profile of the study programme; Minutes of the Faculty Quality Assurance Cell and Curriculum Committee on Programme Learning Outcomes formulation.

3.11. Realistic, Deliverable and Achievable PLOs:

Standard: The Faculty/ Institute ensures that the Programme Learning Outcomes (PLOs) are realistic, deliverable and feasible to achieve.

Best Practice: Programme Learning Outcomes (PLOs) are realistic, deliverable and feasible to achieve.

Examples of Evidence: List of Programme Learning Outcomes; Student feedback on PLOs, Graduate feedback on rate of achievement of PLOs; Employer feedback on level of knowledge, skills and attitudes of graduates against PLOs.

3.12. Programme Learning Outcomes Aligned with 12 SLQF Learning Outcomes:

Standard: The Faculty/ Institute ensures that Programme Learning Outcomes (PLOs) are aligned with and comprehensively address all 12 SLQF learning outcomes specified under Level descriptors for the relevant level.

Best Practice: Programme Learning Outcomes (PLOs) are aligned with and comprehensively address all 12 SLQF learning outcomes (Level descriptors).

Examples of Evidence: Relevant Faculty/ Institute guidelines on curriculum design; Relevant minutes of Curriculum development committee, FQAC and The Faculty/ Institute Board; Mapping of PLOs with 12 SLQF Learning outcomes for the relevant level.

3.13. Courses/ Modules Outcomes and Contents:

Standard: The Faculty/ Institute ensures that the programme is organized into focused core courses/ modules of which the intended learning outcomes are aligned with Programme Learning Outcomes, which in turn are aligned with 12 SLQF learning outcomes at the relevant level, and the contents of each course/ module have appropriate breadth, depth, rigour, and balance of theoretical, practical, and experiential knowledge.

Best Practice: Study programme content is organized into focused core courses/ modules with appropriate breadth, depth, rigour, and balance of theoretical, practical, and experiential knowledge, and the intended learning outcomes that are aligned with the programme learning outcomes.

Examples of Evidence: Relevant guidelines on curriculum development; Relevant minutes of the Course Teams and Curriculum Development Committee; Mapping of core course/ module intended learning outcomes with Programme Learning Outcomes which are aligned with 12 SLQF learning Outcomes at relevant level; Summary of course/ module content evaluation (peer) reports on the breadth, depth and balance of course module contents.

3.14. Incorporating Emerging Knowledge/Technologies:

Standard: The Faculty/ Institute ensures that during course development and revision, emerging knowledge and current developments in the relevant field of study/ subject areas, and/or appropriate and up-to-date technologies relevant to the discipline are incorporated into the course contents.

Best Practice: Emerging knowledge and current developments in the relevant field of study/ subject areas and appropriate and updated technology are integrated into the course design.

Examples of Evidence: Relevant Faculty guidelines, Relevant minutes of course development committees; Course specifications highlighting relevant contents; Student feedback; Course evaluation reports.

3.15. Integration of Social and Ethical Values:

Standard: The Faculty/ Institute ensures integrating Issues of gender, cultural and social diversity, equity, social justice, ethical values and sustainability into the courses of the study programme, where relevant.

Best Practice: Issues of gender, cultural and social diversity, equity, social justice, ethical values and sustainability are integrated into the study programme, where relevant.

Examples of Evidence: Relevant faculty guidelines on curriculum development; List of relevant courses/ sessions indicated in the Programme Specification; Relevant minutes of the curriculum committee, Faculty quality assurance cell, and Faculty board.

3.16. Using Student-centered Teaching-Learning and Assessment Principles:

Standard: The Faculty/ Institute ensures that during course design and development appropriate student-centred teaching-learning and assessment principles are used.

Best Practice: Courses are designed using student-centred teaching-learning and assessment principles.

Examples of Evidence: Relevant guidelines of the Faculty/ Institute / Professional bodies; Course/ module/ subject specifications; Minutes of course teams/ module teams/ course or module development committees; Feedback from course evaluation.

3.17. Promoting Creative and Critical thinking, Independent learning, Interpersonal and Communication Skills:

Standard: The Faculty/Institute ensures teaching learning strategies (self-directed learning, collaborative learning, creative and critical thinking, life-long learning, interpersonal communication and teamwork) that promote soft skill development are incorporated into courses during course design and development.

Best Practice: The curriculum of the programme encourages creative and critical thinking, independent and lifelong learning, and interpersonal and communication skills; appropriate strategies such as experiential and reflective practice, collaborative learning, and self-learning are incorporated into the courses/modules.

Examples of Evidence: Course specifications highlighting integrated learning strategies for soft skill development; Relevant minutes of course/ module development committees; Student feedback; Course evaluation reports.

3.18. Constructive Alignment:

Standard: The Faculty/ Institute ensures that the teaching and learning activities and assessment strategies of each course/ module are aligned with the intended learning outcomes of the respective course (constructive alignment).

Best Practice: Teaching learning activities and assessment strategies are constructively aligned with course Intended Learning Outcomes, to enable achievement of Intended Learning Outcomes.

Examples of Evidence: Relevant Guidelines; Relevant minutes of Course Teams and Curriculum Development Committee; Constructive alignment of course Intended Learning Outcomes with respective Teaching Learning strategies and assessment strategies.

3.19. Work-based/Industrial training/ Internship:

Standard: The Faculty/ Institute ensures that the learning experience is enhanced through work-based placement/Industrial Training/ Internship with defined Intended Learning Outcomes, and operationalized through formal partnerships with relevant institutes/ organizations. Both the organizations and students are made aware of the Intended Learning Outcomes and their respective responsibilities prior to the commencement.

Best Practice: The learning experience is enhanced through incorporating work-based placement/ internship as a part of a programme of study and identifying relevant Intended Learning Outcomes which contribute to the overall and coherent aims of the programme. Relevant organizations and students are informed of the Intended Learning Outcomes and specific responsibilities relating to the work-based placement/ internship prior to the commencement.

Examples of Evidence: Relevant minutes of the Curriculum/ course development committee/ Faculty board; Intended Learning Outcomes of work-based placement/ industrial training/ Internship; MoU/ letters of agreement between the Faculty and the Institution providing such training/placements; Samples of letters issued to students and Institutions regarding work-based placement/internship; List of students undergone training; Training programme schedules/rosters; Feedback from providers; Student feedback.

3.20. Mandatory Courses to Broaden Outlook:

Standard: The Faculty/ Institute ensures that programme design accommodates supplementary, mandatory courses such as vocational, professional, semiprofessional, inter-disciplinary & multi-disciplinary to broaden the outlook of students.

Best Practice: The curriculum is enriched by incorporating vocational, professional/ semi-professional, interdisciplinary, and multidisciplinary courses as compulsory components.

Examples of Evidence: Relevant faculty guidelines on curriculum design; Relevant minutes of the curriculum committee, Faculty quality assurance cell, Faculty board; List of relevant courses and their specifications; Relevant sections of Handbook/Guidebook/ Prospectus.

3.21.Compliance of Volume of learning with SLQF:

Standard: The Faculty/ Institute ensures that student workload in each course/ module is computed based on time (notional hour) requirement to complete all teaching-learning and assessment activities of the course/ module, and each course specifies its credit value and designated number of learning hours (notional hours) as per SLQF, and the total volume of learning (credit weight) of the programme conforms with the SLQF requirements at relevant Level and per academic year.

Best Practice: Student workload of each course/ module is computed based on the time (notional hours) requirement to complete all teaching-learning (and assessment) activities of the course by a student. Each course/module specifies a credit value, and designated number of learning hours (notional hours) in compliance with the SLQF, and the programme fulfils the required total volume of learning (credit weight) at the relevant SLQF Level and per academic year.

Examples of Evidence: Relevant Faculty guidelines; Relevant minutes of the Course teams/ Curriculum Committee; Course specifications; Credit and notional hours calculation table for each module/course and the entire programme; Timetables of past academic years; Student feedback on workload/ time allocated for learning activities; Conformity of total Volume of Learning of the Programme with relevant SLQF level and per academic year.

3.22 Course Sequence and Credit distribution:

Standard: The Faculty/ Institute ensures that the courses are logically sequenced/ arranged in a manner that they progressively increase the challenges on students intellectually in terms of knowledge, skill, conceptualization and autonomy of learning, enabling achievement of Programme Learning Outcomes relevant to 12 SLQF learning outcomes over the duration of the programme, while having an approximately equal credit distribution among the semesters without over-loading with compulsory non-GPA courses/modules.

Best Practice: The courses are logically sequenced in a manner that they progressively increase the challenges on students intellectually in terms of knowledge, skill, conceptualization and autonomy of learning, and are scheduled to result in an approximately equal credit distribution among the semesters without over-loading with compulsory non-GPA courses/modules.

Examples of Evidence: Relevant Faculty guidelines; Relevant Minutes of the Curriculum Committee/ Faculty Board; Sequence of courses highlighting progressive advancement in knowledge, skills and attitudes, autonomy of learning and achievement of Programme Learning Outcomes relevant to 12 SLQF outcomes over the programme; Semester-based distribution of GPA courses and compulsory non-GPA courses of the study programme; Student feedback on credit distribution among semesters.

3.23. Optional/ Elective Courses/ Modules:

Standard: The Faculty/ Institute ensures that the programme consists of sets of courses which provide flexibility for students in the selection of courses/ modules.

Best Practice: The programme comprises elective/optional components.

Examples of Evidence: Faculty guidelines on optional/ elective courses/ modules; Relevant minutes of the Course teams/module teams, Curriculum Committee; List of optional/ elective courses/ modules in the curriculum; Student feedback on choice of course/ modules.

3.24. Compliance with SLQF on Proportion of Taught Courses and Research/ Independent study components:

Standard: The Faculty/ Institute ensures that the programme has the appropriate proportions of taught courses and a research component (SLQF Level 6 programmes) or guided independent study component (SLQF Level 5 programmes), in compliance with the SLQF at the relevant level.

Best Practice: The programme has the appropriate proportions of taught courses and a research component or guided independent study component, in compliance with the SLQF.

Examples of Evidence: Relevant Faculty guidelines; Relevant minutes of the Course teams/ Curriculum Committee/ Faculty Board; Programme Specification; Proportion of taught causes, research component or guided independent study component of the programme of study; Conformity with relevant SLQF level requirements.

3.25. Entry Pathways and Fallback Options:

Standard: The Faculty/ Institute ensures that entry of the students to the programme through any UGC-approved pathway other than the direct intake by the UGC complies with the

"Minimum Admission Requirement" for the appropriate SLQF Level, and the programme provides specific details relating to lateral entry (if relevant) and fallback options.

Best Practice: Only those applicants fulfilling the relevant minimum admission requirements specified in the relevant SLQF level are admitted to the programme. Programme design takes into consideration entry and exit pathways including fallback options.

Examples of Evidence: Faculty guidelines relevant to minimum admission requirements and fallback options with respect to programme design and development; Minutes of relevant meetings of the Curriculum Development Committee and any other subcommittee, Faculty Board and Senate; Available approved foreign admission / lateral entry pathways and fallback options; Minimum requirements for foreign admission /lateral entry and for awarding fallback qualifications; Prospectus; Website; Compliance of the minimum foreign admission/ lateral entry requirement with admission requirements and fallback qualifications with requirements of relevant SLQF level programmes; List of foreign or local students admitted through UGC approved pathways other than the direct intake by the UGC (if relevant); Faculty guidelines on admission of foreign applicants (if relevant); Faculty guidelines on aptitude tests (if relevant); Report of the Faculty internal admission committee (if relevant).; List of students admitted through lateral entry/ credit transfer; List of students who used fallback options.

2.4. Criterion 4: Teaching- Learning

Scope: The following aspects are reviewed and assessed under this criterion:

Provision of course specification; Teaching learning activities consistent with course specifications; Active learning; Use of OER and Blended learning; Integrating current knowledge; Guided self-directed learning and use of technology; Promoting creativity, reflective practice, real-life applications and collaborative learning; Making information literate/ developing research capacity; Using innovative pedagogy, technology and gender non-discriminatory teaching-learning; Teaching and Course evaluation; Teaching excellence.

The Scope of this criterion is captured in the following Standards:

4.1. Provision of Course Specifications and Lesson Plans:

Standard: The Faculty/Institute ensures the provision of relevant timetables and approved course specifications (specifying course objectives, intended learning outcomes, course content, teaching-learning and assessment details including volume of learning and constructive alignment, grading system, recommended readings, compulsory or optional status of the course, and prior-learning requirements), lesson plans to staff and students before the commencement of courses.

Best Practices: Timetables, course specifications and lesson plans are provided before the commencement of courses.

Examples of Evidence: Approved academic calendar and semester Timetables; Introductory lecture of courses; LMS records; Relevant Handouts; Lesson plans; Analysis of staff and student feedback on the provision of relevant timetables, course specifications and lesson plans.

4.2. Teaching-Learning Activities Consistent with Course Specifications:
Standard: The Faculty/ institute ensures that the teaching-learning activities used are consistent with detailed course specifications.

Best Practices: Teaching-learning activities used are consistent with detailed course specifications and facilitate the achievement of specified course outcomes.

Examples of Evidence: Relevant Faculty instructions/ guidelines; Senate-approved course specifications/ course books/ module books; Learning support materials distributed to students/ uploaded to LMS; Weekly lecture/ practical records; Analysis of student feedback on the consistency of teaching-learning activities with course specifications.

4.3. Promoting the Use of Facilities for Active Learning:

Standard: The Faculty/ Institute ensures that teaching learning strategies promote the use of appropriate facilities, amenities and activities to engage in active/deep learning, academic development and personal well-being.

Best Practices: Teaching learning strategies promote the use of appropriate facilities, amenities and activities to engage in active/deep learning, academic development and personal well-being.

Examples of Evidence: Faculty guidelines/ instructions promoting the use of facilities for active learning; Teaching learning strategies that require the use of available facilities and resources for active learning; Records of using the facilities and resources for active learning; Flipped classrooms etc.; Timetables (case-based discussions, small group activities, skills labs, practical etc.); Analysis of student feedback on the use of available facilities and resources for active learning.

4.4. Use of OER to Supplement Teaching-Learning:

Standard: The Faculty /Institute ensures the use of OER by staff and students to supplement teaching and learning.

Best Practices: Staff and students to use Open Educational Resources (OER) to complement teaching and learning resources.

Examples of Evidence: Faculty Board instructions/guidelines on the use of authentic OER to supplement Teaching-learning resources; Records of using OER by teachers and students; Analysis of student feedback.

4.5. Use of Blended learning:

Standard: The Faculty/Institute ensures blended learning (a mixture of traditional and e-learning to create a more flexible learning experience) as a way to maximize student engagement with the content of courses.

Best Practices: Teachers use blended learning (a mixture of traditional and e-learning to create a more flexible learning experience) to maximize student engagement with the curriculum.

Examples of Evidence: Relevant Faculty instructions; Lesson plans highlighting blended learning methods; Relevant LMS activity records; Analysis of student feedback on blended learning.

4.6. Integration of Current Knowledge:

Standard: In recognition of the complementarity between teaching-learning with research, the Faculty/ Institute ensures that teachers draw upon current knowledge based on research, scholarship, or professional activities in the public domain and their own to strengthen their teaching.

Best Practices: Teachers draw upon current knowledge based on research, scholarship, or professional activities in the public domain as well as their own to enhance teaching.

Examples of Evidence: Faculty guidelines on teaching-learning; Course/ Module books; Course specifications/ Lesson Plans; Lecture notes, references, and reading material uploaded to LMS; Analysis of Teacher evaluation reports by peers and by students on integration of current knowledge.

4.7. Engaging Students in Guided Self-directed Learning and Use of Technology:

Standard: The Faculty/ Institute ensures that teachers engage students in guided self-directed learning and use technology while monitoring progress.

Best Practices: Guided self-directed learning is encouraged through assignments which require students to refer to books, journals, the internet and other resources; by incorporating investigative methodology into the learning processes through activities such as literature review, research projects, collaborative project work and work-based placements. Progress in self-directed learning is monitored.

Examples of Evidence: Course specifications; Timetables; Student self-directed learning engagement records of LMS; Analysis of student feedback on self-directed learning activities and use of technology.

4.8. Contribution to Scholarship, Creative work, Reflective practice and Application to Real life:

Standard: The Faculty/ Institute ensures that teachers encourage students to contribute to scholarship, creative work, and reflective practice and relate theory and practice to real-life situations appropriate to their programmes.

Best Practices: The teaching approach encourages students to contribute to scholarly and creative work, reflective practice and relate theory and practice to real-life situations through reflection.

Examples of Evidence: Relevant Faculty instructions/guidelines to teachers; Student journals/ newsletters, photographs/ videos etc. of students' creative work; Records of creative activities by students/ student societies; Student reflective diaries/portfolios; Reports on reflective practices on application of knowledge and skills into real-life situations; Analysis of student feedback on relevant activities/ opportunities.

4.9. Promoting Collaborative Learning:

Standard: The Faculty/Institute ensures that teaching learning strategies include opportunities for students to work in study groups to promote collaborative learning.

Best Practices: Collaborative learning is promoted through appropriate teaching-learning strategies.

Examples of Evidence: Course specifications highlighting collaborative learning activities; Timetables highlighting time slots allocated for collaborative activities; Records on collaborative learning activities; Records on faculty support for formal and informal peer study groups; Analysis of student feedback on collaborative learning.

4.10 a is applicable for SLQF Level 5 programmes only

4.10 a. Making Students Information Literate, Analytical and Problem Solving:

Standard: The Faculty/ Institute ensures that teachers engage students in teaching-learning activities that make them information literate, and undertake analysis of information to identify problems and find solutions.

Best Practices: Teachers engage students in teaching-learning activities that make them information literate and undertake analysis of information to identify problems and find solutions.

Examples of Evidence: Relevant Faculty instructions; Course specifications highlighting information seeking, analysis and problem-solving activities; Relevant reports; Analysis of student feedback on relevant activities/ opportunities.

4.10 b is applicable for SLQF level 6 programmes only.

4.10 b Developing Research Capacity:

Standard: The Faculty/ Institute ensures that teachers engage students in research as part of the teaching and learning strategy to develop their research capacity and encourage/ support the students to publish their research giving due credit to the student.

Best Practices: Teachers engage students in research as a part of a teaching-learning strategy to develop their research capacity and support students to publish their research.

Examples of Evidence: Relevant Faculty instructions; Programme specifications highlighting research component; Details of research course/ module; Records of development/ provision of research facilities; Records of Student scientific/ research sessions; Research reports/ Dissertations; Students engagement in collaborative research with relevant academic/ researchers/ students; Students' research publications and awards; Analysis of student feedback on research engagement; Analysis of staff feedback on engaging students in research.

4.11. Gender Non-discriminatory Teaching-Learning Strategies:

Standard: The Faculty/ Institute ensures that teaching learning strategies used are not gender discriminative or abusive.

Best Practices: Teachers use teaching-learning activities that are not gender discriminatory and avoid making derogatory comments.

Examples of Evidence: Faculty instructions on the use of gender nondiscriminatory teaching-learning activities; List of students grouped for learning activities showing the inclusion of both genders in the same group; Attendance sheets; Relevant Photographs/ Videos; Grievances of students on gender discrimination/ abuse in teaching-learning activities and actions taken; Analysis of student feedback on relevant aspects.

4.12. Use of Innovative Pedagogy and Technology:

Standard: The Faculty/ Institute promotes the teachers to adopt innovative pedagogy and relevant technology into outcome-based (OBE) teaching-learning processes and assess their effectiveness in achieving the Intended Learning Outcomes.

Best Practices: Teachers are encouraged to use innovative pedagogy (ex. simulations, use of mannequins) and introduce appropriate technology into teaching-learning practices and to assess their effectiveness.

Examples of Evidence: Relevant Faculty instructions; Relevant course specifications; Records of teachers using innovative practices in outcome-based teaching and using appropriate technology (VLE, LMS, Moodle etc.); Analysis of student feedback on effectiveness of innovative pedagogy and use of technology in achieving intended outcomes.

4.13. Teaching and Course Evaluation (Peer and Student):

Standard: The Faculty's /Institute's CDC along with the FQAC monitors and evaluates Courses/modules at each level with regard to the content, appropriateness and effectiveness of teaching-learning and assessment methods, involving peer staff and students, and the results are used for minor improvements of the course content and delivery.

Best Practices: Regular course evaluation is undertaken through internal monitoring by the CDC along with the FQAC, and the findings are used to improve the course content and delivery.

Examples of Evidence: Faculty-approved guidelines on peer/ student evaluation of course content, delivery and assessment; Samples of Teaching / Course evaluation instruments used; Reports of analysis of feedback of students, teaching staff (peer evaluation), external and internal examiners; Relevant minutes of the department/ Faculty board/ CDC/FQAC meetings; Improvements in course content and teaching-learning and assessment made based on feedback.

4.14. Use of Indicators of Teaching Excellence:

Standard: The Faculty/Institute uses a defined set of indicators of excellence in teaching to evaluate the performance of teachers, identify and reward teaching excellence, and promote the adoption of innovative practices.

Best Practices: Key performance indicators such as the adoption of the outcome-based approach in teaching and learning, innovative teaching practices, and degree of teacher-student interaction obtained through self-appraisal, peer evaluation and student feedback, are used for evaluating the performance of teachers for excellence in teaching.

Examples of Evidence: Senate/Faculty approved indicators for evaluating teachers for excellence in teaching; Records of using the indicators for evaluation; Awards scheme for excellence in teaching; Records of awardees.

2.5. Criterion 5: Student Assessment and Awards

Scope: The following aspects are reviewed and assessed under this criterion:

Integrating assessment with teaching and learning; Assessment strategies addressing all intended learning outcomes; Alignment of assessment strategies with level descriptors of SLQF, Subject Benchmark Statements, and requirements of professional bodies; Use of valid, reliable, and appropriately weighted assessments; Properly distributed continuous assessments; Use of formative assessments; Accessibility and enforcing Examination By-laws and Regulations; Assessment using communicated criteria; Arrangements for students with special needs; Appointing internal and external examiners; Using marking schemes, second marking, reconciliation and documentation of marks; External examiner reports; Examination and Results Boards; Marks verification; Standards for awards; Using assessment

outcomes; Monitoring and reviewing of assessment strategies and regulations; Examination unit; Degree certification ad transcript.

The scope of this criterion is captured in the following standards:

5.1. Integrating Assessment with Teaching-Learning:

Standard: The Faculty/ Institute ensures that assessment methods are integrated into teaching-learning strategies, throughout the semester.

Best Practices: The assessment strategy of student learning is considered an integral part of the programme/ course design and assessment strategies are integrated into teaching learning activities.

Examples of Evidence: Relevant Faculty/ Institute guidelines on designing assessment strategies; Relevant minutes of curriculum committee; Course specifications showing the integration of assessment into teaching-learning activities.

5.2. Assessment Strategies addressing all Intended Outcomes:

Standard: The Faculty/Institute ensures that assessment strategies are designed to measure all intended learning outcomes of the courses.

Best Practices: All intended learning outcomes (including enterprising skills, innovation, and creative thinking) and all aspects of training including industrial training, clinical training etc. of the programme/ courses are assessed. A clear relation between assessment tasks and the programme/ course outcomes is evident.

Examples of Evidence: Relevant Guidelines on designing assessment strategies; Mapping of Assessment strategies with Intended learning outcomes; Assessment blueprints; Minutes of relevant committees on designing assessment strategies.

5.3. Alignment of Assessment Strategies with SLQF Level Descriptors, Benchmark Statements, and Professional Body Requirements:

Standard: The Faculty/ Institute ensures alignment of assessment strategies with relevant level descriptors of the SLQF, graduate attributes of Subject Benchmark Statements (national/ international) and requirements of professional bodies (if applicable).

Best Practices: Assessment strategies are aligned with relevant level descriptors of the SLQF, graduate attributes of Subject Benchmark Statements (national/international) and requirements of professional bodies, where applicable.

Examples of Evidence: Relevant Faculty guidelines; Programme/course specifications showing alignment of assessment strategies with relevant level descriptors of the SLQF, graduate attributes of Subject Benchmark Statements (national/ international) and requirements of professional bodies (if applicable).

5.4 . Validity and Weightage of all Assessments, Progression and Distribution of Continuous Assessments:

Standard: The Faculty/Institute ensures that all assessments used in course units/ modules are valid, reliable, and appropriately weighted to measure the level of achievement of the desired learning outcomes. Continuous assessments are of progressive nature and distributed to have a reasonable spread throughout the course unit/ module, and marks obtained at continuous assessments contribute to the summative (final) mark/ grade of the course unit/ module.

Best Practices: All assessment tasks are valid and appropriately weighted. Continuous assessments are of progressive nature and distributed to provide a reasonable spread of assessment items throughout the course enabling students to monitor and progressively improve their capabilities. Marks obtained at continuous assessments contribute to the final mark/ grade of the course/ module.

Examples of Evidence: Relevant section of Examination By-laws; Faculty approved guidelines on assessment tasks, distribution and marks allocation for continuous assessments; Time slots allocated in the timetable for continuous assessments; Sample course/ module information sheets indicating weightages and distribution of continuous assessments; Assessment blueprints.

5.5. Use of Formative Assessments:

Standard: Faculty/Institute ensures that formative assessments are used to provide timely feedback to students to promote effective learning and academic development, and teachers to improve ongoing teaching-learning practices.

Best Practices: Formative assessments are used to provide timely feedback to students to promote effective learning and teachers to improve ongoing teaching-learning practices.

Examples of Evidence: Relevant section of Examination By-laws; Faculty approved guidelines on formative assessments; Time slots allocated in the timetable for formative assessments and feedback sessions; Analysis of student feedback on formative assessment.

5.6. Accessibility of Examination By-laws, Regulations and Guidelines:

Standard: The Faculty/Institute ensures that by-laws, rules and regulations as well as guidelines relating to assessments are clear and accessible to all stakeholders (students, academic staff, administrative staff, and internal and external examiners).

Best Practices: By-laws, regulations and guidelines relating to assessments are clearly specified and made accessible to all stakeholders.

Examples of Evidence: Relevant section in Manual of Examination Procedures; Examination by-laws, SOPs, rules and regulations and guidelines; Relevant sections in Student Handbook/ Prospectus, Faculty website; Analysis of feedback from stakeholders on accessibility of Examination By-laws, regulations and guidelines.

5.7. Enforcing Examination By-laws and Regulations:

Standard: The Faculty/Institute strictly enforces examination by-laws and regulations according to the institutional policies and procedures, and breaches of by-laws and regulations including examination offences by staff and students are promptly dealt with and effective remedial, punitive and deterrent measures are taken in a timely manner.

Best Practices: Assessment regulations are strictly enforced and disciplinary procedures are in place for handling breaches of examination regulations by staff and students (malpractices such as plagiarism etc. and violation of codes of conduct), violators are promptly dealt with and effective remedial, punitive and deterrent measures are taken in a timely manner.

Examples of Evidence: Manual of Examination procedures; Regulations on Examination offences; SOPs on reporting examination offences; Samples of incident reports; Records of examinations offence committee; Time gap between committing examination offence and implementation of the senate approved decision of Exam offences board/ committee.

5.8. Assessment using Published and Communicated Criteria:

Standard: Students are assessed using published criteria, procedures, tools, and weightages that are communicated to them at the time of course enrollment and adhered to by the staff.

Best Practices: Students are informed before the commencement of the course about the types of assessment, their alignment with the course Intended Learning Outcomes, weightages; timelines for assessment and releasing results; Code of conduct for preparation and submission of assignments, project work, attending examinations; Issue of results sheets.

Examples of Evidence: Introductory lecture of courses; Assessment rubrics; Time tables; Analysis of student feedback.

5.9. Arrangements for Students with Special Needs (or temporarily disabled):

Standard: Faculty/ Institute ensures that appropriate arrangements/ adjustments/ facilities are made available regarding examination requirements for students with special needs, whenever relevant.

Best Practices: Appropriate adjustments are made during assessment to provide students with special needs (or temporary disabled) the same opportunity as their peers to demonstrate the achievement of learning outcomes.

Examples of Evidence: Faculty approved guidelines on dealing with students with special needs (or temporary disabled) during assessments; Records of making arrangements; Analysis of feedback from relevant students and staff.

5.10. Appointing Internal and External Examiners with ToRs:

Standard: The Faculty/Institute adopts university regulations governing the appointment of both internal and external examiners and provides them with clear ToRs which specify relevant SOPs including the need for adopting blind marking or alternative methods for quality control and maintenance of standards.

Best Practices: The Faculty /Institute considers the involvement of an external/second examiner as an essential part of the process of quality control and maintenance of standards. The external/second examiner is provided with clear ToRs and SOPs including the adoption of blind marking or alternative method.

Examples of Evidence: Approved faculty guidelines on the appointment of internal and external examiners; Examination by-laws; Examination SOPs including Scrutiny Board/ Paper setter/ moderator appointments and respective functions; Senate minutes; Letters of appointment and ToRs of internal/ external examiners.

5.11. Using a Well-defined Marking scheme, Second marking, Reconciliation, and Accurate Documentation of Marks:

Standard: The Faculty/Institute adopts a well-defined marking scheme/ assessment rubrics, and various forms of second marking (open marking/ conference marking, blind marking) to ensure transparency and fairness in assessments. Pre--results board uses approved guidelines for reconciling the marks when there is a major discrepancy between two sets of marks submitted by examiners, and to check the accuracy of entered marks in results sheets.

Best Practices: Well-defined marking scale/ marking scheme, various forms of internal second marking to ensure transparency and fairness in assessments, and approved procedures

for reconciliation of marks, documentation and checking the accuracy of entered marks are adopted.

Examples of Evidence: Relevant section of Manual of examination procedures/ Examination regulations/ SOPs; Marking schemes/ assessment rubrics used in courses/ modules; Records of second marking; Sample answer scripts and mark sheets; Approved procedure and guidelines (and criteria defining discrepancy) for reconciling marks; Records of reconciling marks (if any); Records of using a third examiner (if relevant); Composition of the Pre-results Board; Minutes of pre-results board; Attendance sheet of pre-results board.

5.12. External Examiner's Reports:

Standard: The Faculty/Institute ensures that the results and reports from external examiners are received through official channels within a specific time period and considered by the examination board for finalizing the results, and external examiners' recommendations are implemented by the Department/ course committees.

Best Practices: External examiners' reports, reporting channels and time frame are specified, and the results and reports are considered in finalizing the results and changes recommended in the examiners' reports are implemented.

Examples of Evidence: Relevant section in Manual of examination procedures/ examination by-laws; Samples of External examiners' reports; Records of results submitted by external examiners; Minutes of Results board/ Post-examination meetings; Minutes of Department/ Course Committees on implementing external examiners' recommendations.

5.13. Boards/ Panels of Examiners:

Standard: The Faculty/ Institute ensures that the boards/ panels of examiners appointed are in compliance with the University/ Faculty recommended composition, members have required qualifications, and no conflict of interest. They are responsible for setting and moderation/ scrutiny of question papers, marking of answer scripts ensuring academic integrity of standards, maintaining confidentiality, and timely submission of marks.

Best Practices: Boards/ Panels of Examiners are of recommended composition and are competent to undertake their roles and responsibilities, and have no conflict of interest and maintain confidentiality. They are made responsible for setting and moderation/ scrutiny of question papers, marking of answer scripts and timely submission of marks.

Examples of Evidence: Relevant guidelines issued by the Faculty; Relevant examination regulations and By-laws/ Manual of examination procedures; Relevant SDC training programme schedule and content; Senate-approved list of examiners; Compliance of

approved boards/ panels of examiners with the recommended composition and qualifications; Samples of Conflict of interest/ Confidentiality forms signed by the boards/ panels of examiners; Lists of members of Boards/ Panels of examiners; Dates of conducting examinations and submission of marks.

5.14. Results Boards:

Standard: The Faculty/ Institute ensures that the results boards/ panels are of the recommended compositions, assign grades adhering to approved regulations and criteria, and record assessment decisions accurately.

Best Practices: Results boards/ panels are of recommended compositions and are responsible for assigning grades adhering to regulations and criteria, and accurate recording of assessment decisions.

Examples of Evidence: Relevant section in Manual of Examination Procedures/ By-Laws/ SOPs on Results Board; Compliance of Results board composition with recommendations; Compliance of Results board decisions made on grades and borderline students with by-laws/ rules and regulation.

5.15. Marks Verification:

Standard: The Faculty/ Institute adopts an approved procedure and guidelines for the verification of marks when there is a request from the student/s.

Best Practices: An established procedure (senate/relevant academic body approved) for verification of marks is adopted in response to student request/s.

Examples of Evidence: Approved procedure and guidelines for verification of marks; Composition of verification/ Precorrection Board; Records of Student requests (if any); Records of changes in final marks/grades due to verifications (if relevant); Reports of results verification/ re-correction board.

5.16. Standards and Granting of Awards:

Standard: The Faculty/ Institute ensures that established criteria (standards), examination results and all relevant Faculty regulations are considered for granting awards to students.

Best Practices: Examination results and all relevant regulations are considered to ensure the fulfilment of standards for granting awards to students.

Examples of Evidence: Established criteria (standards) of awards; Faculty regulations for Granting awards; List of awards; Relevant minutes of the Results Board/ committees on

granting awards; List of awardees; Matching of Examination results of awardees with established criteria for awards granted.

5.17. Using Assessment Outcomes (results):

Standard: The Faculty/ Institute ensures that the assessment outcomes (results) are used to improve teaching-learning and assessment methods.

Best Practices: Assessment outcomes (results) are used to improve teaching-learning and assessment methods.

Examples of Evidence: Relevant faculty guidelines/ professional body guidelines; Relevant minutes of the Department/ Faculty Board; Records of using assessment outcomes (results) to improve teaching-learning assessments; Improvements made.

5.18. Monitoring and Reviewing of Assessment Strategies and Regulations:

Standard: The Faculty/Institute regularly monitors the implementation of assessment strategies and regulations, and reviews those periodically as appropriate to ensure those remain fit for purpose.

Best Practices: The implementation of assessment strategies and regulations are regularly monitored and periodically reviewed as appropriate to ensure that they remain fit for purpose.

Examples of Evidence: Faculty guidelines on monitoring and reviewing assessment strategies and regulations; Reports of the monitoring committee; Relevant minutes of curriculum review committee meetings; Amended strategies and regulations.

5.19. Examination Unit:

Standard: The Faculty/ Institute ensures that the Examination unit is responsible for the timely registration of eligible candidates, conducting examinations, accurately documenting and timely communicating exam results, maintaining examination databases and records securely and confidentially for a specific period of time, degree certification and issue of graduation certificates and transcripts upon request following graduation.

Best Practices: The examination unit is responsible for the registration of eligible candidates, Conducting examinations, Accurately documenting and timely communicating of exam results; maintaining confidentially of results; Degree certification; issuing of graduation certificate and complete transcript on request following graduation.

Examples of Evidence: SOP of Examination Unit and ToRs of officials; Records of registration, issuance of admission cards, conduct of examinations, Documentation of results,

degree certification, issue of transcripts; Staff, student and graduate feedback on Exam unit functions.

5.20. Degree Certification and Transcript:

Standard: Faculty ensures that graduation requirements are ensured in the degree certification process and the transcript accurately indicates the courses followed, grades obtained and the aggregate GPA, and class (where appropriate).

Best Practices: Graduation requirements are ensured in the degree certification process and the transcript accurately indicates the stages of progression and student attainments.

Examples of Evidence: Regulations/ Guidelines on degree certification, transcript content and issue of transcripts; Compliance of degree certification process with regulations; Sample transcript; Records of requests and issuing transcripts.

2.6. Criterion 6: Innovative and Healthy Practices

Scope: The following aspects are reviewed and assessed under this criterion:

Internal monitoring framework/ mechanism; Income Generation and Disbursement; Credit Transfer mechanism; Use of ICT-based platform for interactive teaching-learning and assessment in all courses; Peer student academic interaction; Use of novel/emerging technologies, tools and software; Online and automated system for examination outcomes; Ensuring Student Attainment Levels of CLO & PLOs; Coordinating structures for Industry and Business linkages; Sharing innovations and research findings with community;

Recognition of community services; Open day for public; Any other innovative and healthy practices

The scope of this criterion is captured in the following standards:

6.1. Internal Monitoring Framework/Mechanism for Programme Related Activities:

Standard: The Faculty/ Institute has established a comprehensive internal monitoring framework/mechanism to review and evaluate the activities related to programme management, learning environment, programme design and development, teaching- learning and assessment.

Best Practices: An internal monitoring and evaluation framework/ mechanism is in place to ensure the effectiveness of the programme and associated structures and services.

Examples of Evidence: Availability of an internal monitoring framework/ mechanism for programme related activities; Comprehensiveness of the framework/ mechanism (whether it addresses activities related to all criteria); Monitoring guidelines/checklists.

6.2. Income Generation and Disbursement:

Standard: Adhering to University financial guidelines, the Faculty/Institute has diversified its sources of income to complement the grants received through the Government by engaging in income-generating activities, which partly contributes to the improvement of programme-related activities.

Best Practices: Staff is encouraged and facilitated to engage in diverse income-generating activities such as fee-levying programmes/ courses for external students/ student exchange/foreign student admission/ consultancy and advisory services; it commercializes research and innovations, provides advanced laboratory and testing services, and uses such income to compliment the grants received from the Treasury.

Examples of Evidence: UGC and University Financial regulations/ circulars on income-generating activities and disbursement of funds; Relevant minutes of the Faculty Board; List of income-generating activities conducted (fee-levying programmes/ courses, student exchange; foreign student admission; consultancy and advisory services; commercialized research and innovations, laboratory and testing services; exhibitions, fundraising projects etc.); Records of income generated through such activities; Financial statements; Improvements made to teaching-learning assessment/learning resources of the programme through generated funds.

6.3. Credit-transfer Mechanism:

Standard: The Faculty/Institute practices a credit-transfer mechanism that conforms with relevant UGC circular, and institutional/ professional guidelines to allow students to transfer credits between study programmes/ Faculty/ Institute (national/ international), provided that the Intended Learning Outcomes of transferred credits are comparable.

Best Practices: Procedures and Guidelines for credit transfer between study programmes in conformity with relevant UGC circulars, and institutional/professional guidelines are in place.

Examples of Evidence: Faculty/ Institute approved guidelines/by-laws on credit transfer; Relevant section of the approved Programme specification and prospectus; Records of students making use of this option; Minutes of relevant meetings.

6.4. Use of ICT-based Platform for Interactive Teaching-Learning and Assessment in All Courses/ Modules:

Standard: The Faculty/Institute ensures the use of an ICT-based platform (i.e. VLE/ LMS) for interactive multi-mode teaching-learning and assessment in all courses/modules of study programmes.

Best Practices: ICT-based platform (i.e.VLE/ LMS etc.) is used for interactive multi-mode teaching-learning and assessments in all courses.

Examples of Evidence: Relevant Faculty instructions/ guidelines; Inventory of ICT-based interactive teaching and learning and assessment methods adopted across courses/modules; VLE/LMS records of interactive teaching-learning assessments; Student feedback.

6.5. Facilitating Peer student Academic Interactions:

Standard: The Faculty/Institute facilitates academic interaction between students in peer study groups with officially appointed peers or senior students (junior mentors/ guides).

Best Practices: Academic interaction between students in peer study groups with officially appointed peers or senior students (junior mentors/ guides) is facilitated.

Examples of Evidence: Faculty guidelines of peer study group activities; Guidelines on appointment of peers or senior students as junior mentors/ guides/ peer study groups; List of facilities provided for peer learning; Lists of peers or senior students appointed as junior mentors/ guides for different subjects; Records of peer study group activities; Student feedback on peer group academic activities.

6.6. Novel/emerging Technologies, Tools and Software:

Standard: The Faculty/ Institute facilitates the adoption of relevant novel/emerging technologies, tools and software for teaching-learning, research and outreach activities of the programme.

Best Practices: Relevant novel/ emerging technologies, tools and software are used for teaching, learning, research and outreach.

Examples of Evidence: Relevant Faculty Board Minutes; List of adopted novel/ emerging technologies, tools and software; Records of usage; Staff and student feedback.

6.7. Online and Automated System for Examination Results

Standard: The Faculty/ institute operates a user-friendly online automated system for uploading examination results, and for Issuing respective results sheets in response to individual online student requests.

Best Practices: Staff uploads and students retrieve examination results through an online automated system.

Examples of Evidence: Presence of an automated examination results uploading and retrieving system; List of courses using the system; Records of usage by staff and students; Staff and student feedback on automated system.

6.8. Ensuring Student Attainment Levels of CLO & PLOs:

Standard: Faculty/ Institute ensures the attainment of pre-determined satisfactory levels of Course/Module Intended Learning Outcomes and Programme Learning Outcomes by each student at the end of each course/ module and Programme, by mapping the student's performance in courses/ modules against the satisfactory level of respective Course/ module Intended Learning Outcomes and Programme Learning Outcomes.

Best Practices: Student achievements are monitored in all courses/ modules to ensure that they achieve pre-determined levels of the course/ module Intended Learning Outcomes and Programme Learning Outcomes for successful completion of the programme.

Examples of Evidence: Relevant faculty guidelines/Professional requirements in the mapping of assessment results with Course/module Intended Learning Outcomes and Programme Learning Outcomes; Samples of recorded Assessment results mapped with Course/Module Intended Learning Outcomes and Programme Learning Outcomes; ; Analysis reports, Relevant meeting minutes, Remedial action taken to overcome the issues that arose.

6.9. Functional Coordinating Structures to facilitate Industry and Business Linkage:

Standard: The Faculty/Institute has functional coordinating structures, procedures and guidelines for industry and business engagement by staff and students for R&D and outreach activities.

Best Practices: Functional coordinating structures and/or mechanisms to facilitate staff and student engagement in industry and business are in place.

Examples of Evidence: List of relevant coordinating structure/s or mechanisms; Manual of procedures/ guidelines on establishing linkages and conducting R&D and outreach activities; Action Plan of the Coordinating structure/s; Relevant records of activities of the Coordinating structure/s; Relevant Faculty Board minutes; Industry/ business feedback/ correspondence; Outcomes achieved/ Benefits received.

6.10. Sharing relevant Research findings and Innovations with the Community:

Standard: The Faculty/ Institute ensures the involvement of staff and students in updating and educating the community with relevant findings of research and innovations.

Best Practices: The community is made aware of research findings and innovations.

Examples of Evidence: Relevant faculty guidelines; List of activities conducted for community awareness/ training on research findings and innovations; Records on recognitions received from the community/ university.

6.11. Community Services:

Standard: The Faculty/ Institute endorses, facilitates and recognizes the outreach activities conducted by students and staff for the benefit of the community.

Best Practices: Outreach activities conducted by students and staff for the benefit of the community are promoted and recognized.

Examples of Evidence: Relevant Faculty guidelines; Relevant Faculty Board minutes on approval; Finance committee minutes (if relevant); Records of CSR activities (e.g.,photographs, videos, social media highlights etc.)conducted; Appreciations received from the Faculty and the Community.

6.12. Open day for the public:

Standard: The Faculty/ Institute organizes an Open Day for the public to make them aware of the study programmes and learning environment.

Best Practices: The public is provided opportunities to become aware of the Learning Environment and study programmes offered through an open day.

Examples of Evidence: Relevant Faculty Board minutes; Website/ brochures/ advertisements for publicity; Letters of invitation; Organizing Committee; Agenda of the Open day; Registration logs; Photographs, Souvenirs etc. of the open day; Analysis of feedback from participants (if available).

6.13. Any other Innovative and Healthy practices adopted by the Faculty to improve the quality of education (Bonus point)

Standard: The Faculty/ Institute has implemented several innovative practices which are not indicated in the manual, and those practices have improved the quality of education provision.

Best Practices: Innovative/ Healthy practice/s adopted and effects on education quality

Examples of Evidence: List of other innovative and healthy practices adopted; Records on implementing the mentioned innovative/ healthy practice/s; Improvements in education quality attributed to adoption of the specified practice/s.

Chapter Three

Use of Standards to Assess the Performance of a Programme of Study

3.1. Procedure for Using Standards for Assessing the Performance of a Programme

This procedure will describe how the standards of the Six criteria based on the evidence given against each standard by the Faculty/ Institute and the Score Guide are used by the external peer review team in arriving at the final assessment of the performance of a study programme offered by the Faculty/ Institute. The Faculty/ Institute may also use this procedure in self-assessment of the performance of their study programme. The terms mentioned below will be used in the validation and the subsequent judgement on the assessment of the performance of the study programme.

Standard-wise judgement giving 'Standard-wise Score'

Criterion-wise judgement giving 'Raw Criterion-wise Score'

Application of weightages to obtain 'Actual Criterion-wise Score'

Calculation of 'Overall Study Programme Score'

Grading of Overall Performance of the Programme of Study

The procedure is described in a series of steps.

Step 1 *- Careful scrutiny of the Claim of the degree of achievement by each Standard' and noting down the required relevant evidence.*

Step 2 *- Objective and judicious analysis and assessment of the supporting 'Evidence' on compliance with each 'Standard' as listed in the Self-Evaluation Report.*

Step 3 *- Based on the evidence, assessment of the extent to which each 'Standard' has been achieved by the Programme of Study and assigning and recording a Score with respect to each 'Standard' based on the 'Score Guide' given in Table 3.1*

Each standard will receive a score from 0-3. This will be the 'Standard-wise Score'.

Note:

In a clustered programme review, There will be common standards for all study programmes in Part I, while the other programme-specific standards will be in Part II.

For each of the common standards in Part I, assign the same score ('Standard-wise Score') for the respective standard in all study programmes in the cluster.

Assign justifiable individual Standard-wise Scores for the Programme-specific Standards in Part II.

Table 3.1 – Score Guide for Each Standard

Score	Descriptor	Explanation of the Descriptor
3	Good	No issues/concerns about the strengths and quality of the evidence provided
2	Adequate	Few issues/concerns about the strengths and quality of the evidence provided
1	Barely Adequate	Major issues/concerns about the strengths and quality of the evidence provided
0	Inadequate	No relevant evidence provided

Step 4 *- Derive the Performance of each Criterion by using the sum total of the scores gained in all the standards with respect to the Criterion.*

The value obtained is the 'Raw Criterion-wise Score'.

The following example shows the procedure adopted to calculate the Raw Criterion-wise Score in a clustered programme review:

Criterion #. Title

		Study Programme 1	Study Programme 2	Study Programme 3
Part I (Common Standards)	Std #	2	2	2
	Std #	3	3	3
	Std #	1	1	1
Part II (Programme-specific Standards)	Std #	3	2	3
	Std #	1	3	2
	Std #	2	3	3
Raw Criterion-wise Score				

3.2. Weightages of Criteria

Six main criteria were assigned differential weightages on a thousand scale. An attempt was made to assign near equal weightage to each standard to avoid unfair advantage to a specific criterion. The weightages given in Table 3.2 will be used for calculating the 'Actual Criterion-wise Score'.

Table 3.2 – Differential Weightages of Criteria and Weighted Minimum Scores

Criterion No.	Assessment Criteria	Number of Standards	Weightage on a Thousand Scale	Weighted Minimum Score*
1	Programme Management	24	195	97.5
2	Learning Resources, Learner Support and Progression	28	225	112.5
3	Programme and Course/Module Design and Development	25	200	100
4	Teaching- Learning	14	115	67.5
5	Student Assessment and Awards	20	160	80
6	Innovative and Healthy Practices	13	105	52.5
		124	1000	

*Represents 50% of the values given weightage on a thousand scale.

Step 5 – Convert the Raw Criterion-wise Score' into an 'Actual Criterion-wise Score' based on the weightages listed in Table 3.2 and the formula given in Box 1.

In a clustered programme review, convert the Raw Criterion-wise Scores of each study programme to "Actual Criterion-wise Scores" using the same formula.

Example: Taking Criterion 3 which has 25 standards as an example, and a fictitious value of 46 for the raw criterion score given by the review team, the actual criterion-wise score for Programme and Course/Module Design and Development (Criterion 3) is estimated as 122.67 (Box 1)

Box 1 - Formula for converting 'Raw score' to 'Actual score' on the weighted scale

Maximum Raw score for each criterion = Total number of standards for the respective criterion x 3 which is the maximum score for any criterion.

'Actual Criterion-wise Score'= Raw Criterion-wise Score x Weightage in a 1000-point scale

Example: Criterion 3 with a weightage of 200 (Table 3.2) and 25 standards

Raw criterion-wise score (given by the peer team) = 46

Maximum Score = (25 standards x 3) = 75

Weightage on a 1000 scale = 200 (as in Table 3.2)

Actual Criterion-wise Score = (46/75)* 200 = 122.67

Step 6 – Derive the **Overall Programme of Study Score** by totalling all the 'Actual Criterion-wise Scores' of the six criteria and converting the total sum to a percentage as exemplified in the following formula.

$$\textbf{Overall Programme of Study Score \%} = \frac{\textbf{Total sum of Actual Criterion-wise Scores}}{\textbf{1000}} \textbf{ x 100}$$

In a clustered programme review, derive the individual Overall Programme of Study Score % using the above formula for each of the study programmes in the cluster.

Step 7 - **Grade** the **Overall Performance of a Study Programme** based on the number of Criteria with Actual Criterion-wise Scores equal to or greater than the respective weighted minimum score and the Overall Programme of Study Score percentage, as shown in Table 3.3.

In a clustered programme review, separately Grade the Overall Performance of each of the study programmes in the cluster, based on the number of Criteria with Actual Criterion-wise Scores equal to or greater than the respective weighted minimum score and the Overall Programme of Study Score percentage of the respective programme as shown in Table 3.4.

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Table 3.3 Grading of Overall Performance of a Study Programme

Number of Criteria with Weighted Minimum Score	Overall Programme of Study Score %	Grade
6 (Six)	90 - 100	**A+**
	80 -89	**A**
	70 – 79	**B**
	60 – 69	**C**
	< 60	**D**
5 (Five)	≥ 70	**B**
	60 – 69	**C**
	< 60	**D**
4 (Four)	≥ 60	**C**
	< 60	**D**
3 (Three) or less	≥ 50	**D**
	< 50 %	**E**

Table 3.4 Description of the Grades Assigned for Performance of a Programme of Study

Grade	Performance Descriptor
A+	Excellent
A	Very Good
B	Good
C	Satisfactory
D	Unsatisfactory
E	Poor

3.3. Assessment of SLQF Level Compliance or SLQF Level Equivalence of Qualification/s

This procedure will be adopted in instances where the Faculty/ Institute requests a formal assessment of the compliance of the programme with SLQF Level requirements (or attestation of SLQF Level equivalence) together with the Programme Review. The Faculty/ Institute may also choose to apply directly to the UGC, at some later time, for SLQF Level Certification (or attestation of SLQF Level equivalence) from the SLQF Certification Committee of the UGC.

The SLQF Level certification process does not apply to qualifications awarded for programmes of study designed and approved prior to the publication of SLQF 2015, or to programmes that are no longer offered. Such programmes may be considered for attestation of SLQF Level equivalency in terms of minimum admission requirements, duration of programme, major components of contents, mode of delivery and assessment. This attestation will confirm that such qualifications are academically equivalent to comparable SLQF-compliant qualifications.

3.3.1. Assessment of SLQF Level Compliance

Twenty standards that capture the SLQF requirements are included to assess the compliance of a programme of study with SLQF requirements. The standard numbers and the SLQF requirement for which the degree of compliance is to be assessed are indicated in Table 3.5. In a clustered programme review, assess the SLQF level compliance of each study programme separately using these 20 standards.

Table 3.5 Standards and SLQF Requirements Considered for SLQF Level Compliance

Std No.	SLQF Requirement	Score (0-3)
1.5	The study programme specification is accessible through the website.	
1.7	Progression opportunities and progression pathways upon successful completion of the study programme are specified in the prospectus.	
1.20	The study programme is revised periodically.	
3.3	Curriculum design, development and delivery use outcome-based education (OBE) approach and student-centred learning(SCL) practices.	
3.4	Programme, course/module design and development uses publicly available, university-approved, SLQF-conformed standard formats/ templates/ guidelines.	
3.5	The name of the qualification awarded for the programme complies with	

	the SLQF guidelines with respect to the Type, Designator, Qualifier, and Abbreviation.	
3.6	The 'Purpose and Scope of Qualification' of the programme complies with the requirements of SLQF at the relevant level.	
3.9	The graduate profile is aligned with the 'attributes of qualification holders' specified in the SLQF at the relevant level.	
3.12	Programme Learning Outcomes (PLOs) are aligned with and comprehensively address all 12 SLQF learning outcomes at the relevant level.	
3.13	Intended Learning Outcomes of core courses/ modules are aligned with Programme Learning Outcomes.	
3.16	Appropriate student-centred teaching-learning and assessment strategies are incorporated into courses/ modules.	
3.18	Teaching learning activities and assessment strategies of each course/ module are aligned with the intended learning outcomes of the respective course/ module.	
3.21	Each course/ module specifies its credit value and designated number of learning hours (notional hours) as per SLQF, and the total volume of learning (credit weight) of the programme conforms with the SLQF requirements at the relevant Level.	
3.22	Programme Learning Outcomes relevant to 12 SLQF learning outcomes are distributed over the duration of the programme.	
3.24	Proportions of taught courses and research components **(SLQF Level 6 programmes)** or taught courses and guided independent study components (**SLQF Level 5 programmes**), comply with SLQF requirements at respective levels.	
3.25	Any UGC-approved admission pathway other than the direct intake by the UGC complies with the "Minimum Admission Requirement" for the appropriate SLQF Level, and specific details relating to lateral entry (if relevant) and fallback options are indicated in the Programme specification.	
4.2	Teaching-Learning activities used are consistent with course specifications.	
4.10 a	**SLQF level 5 programmes**: Students are engaged in teaching-learning activities that make them information literate, analyze information to identify problems and find solutions.	
4.10 b	**SLQF level 6 programmes**: Students are engaged in research as part of the teaching and learning strategy to develop their research capacity.	
5.3	Assessment strategies are aligned with the level descriptors of SLQF.	

5.4	Valid and appropriately weighted assessments are used in courses/ modules.	

The procedure is described in a series of steps.

Step 1 – Assign a score of 0-3 for each standard depending on the degree of compliance with relevant SLQF requirements.

Step 2 – Convert the total sum of scores of 20 standards into a percentage (unweighted) as indicated in the following example.

Example: Consider the following hypothetical case of a review of a study programme at SLQF Level 5 or 6

Criterion No.	**Scores Earned for Each Relevant Standard in the Criterion**													**Score Earned for the Criterion**
1	3	3	3											9
3	2	3	2	3	2	3	2	3	2	3	2	3	2	32
4	2	3												5
5	3	2												5
Total score earned														51

Total maximum potential score = 20 x 3 = 60

Total score earned = 9 + 32 + 5 + 5= 51

Total earned score as a percentage of the maximum potential score =

(51/60) x 100 = 85%

Step 3 - Assign one of the following for the programme of study on its compliance with SLQF requirements.

1. Recommend SLQF Level certification if the total score is not less than 80%, provided that no standard has a score of 0, and not more than **three** standards have a score of 1.
2. Programmes of study that do not meet the above conditions will be required to correct all identified shortcomings within a specified time period before being considered again for certification.

In the case of 2 above, the QAC will follow up about corrective action at the end of the period specified by the review panel, so that full certification can be awarded to a programme of study well ahead of the next review cycle.

3.3.2. Assessment of SLQF level Equivalence

Assessment of SLQF level equivalence applies only to those qualifications awarded by programmes of study designed and approved prior to the publication of SLQF 2015, or to programmes that are no longer offered. For this purpose, compliance/ equivalence of the study programme with the following SLQF qualification descriptors should be considered:

Minimum admission requirements

Duration of the study programme

Major components of the study programme

Mode of delivery and Assessment

This assessment will determine whether the qualification awarded is academically equivalent to a relevant SLQF Level (5 or 6). The review team will indicate their decision on SLQF Level equivalence of the qualification awarded by the reviewed study programme in the review report.

The final Certification of SLQF Level Compliance or Attestation of Level Equivalence of the qualification will be issued by the SLQF Certification Committee of the UGC.

Part III
Programme Review process and Programme Review Report

Chapter Four

Self-Evaluation Report

The Self-Evaluation Report (SER) for a Study Programme Review is a document prepared by a Faculty/ Institute with regard to each of the study programmes it offers. When a Faculty/ Institute offers more than one qualification at the undergraduate level, or more than one specialization within a given qualification, the Faculty/ Institute may opt to request approval from the QAC for one or more clustered review(s). To be eligible for 'clustering' several study programmes in a single 'Self-Evaluation Report', the below-indicated requirements should be fulfilled:

i). **At least 60%** of the standards considered in the Programme Review Manual is common to the programmes of study so clustered;

ii). The maximum number of programmes that can be clustered is three (3) in accordance with the UGC directives.

The cluster may consist of programmes with different windows of intake in the admission process, and/or different SLQF levels in the award of the qualification.

The Self-Evaluation Report reflects the self-assessment of the study programme by the Faculty/ Institute, about the effectiveness of the means employed to safeguard the quality of the education provision of the study programme. In addition, the strengths, weaknesses, and areas for improvement of the study programme should be highlighted. The SER is prepared by a team appointed by the Faculty/ Institute in liaison with the Faculty Quality Assurance Cell (FQAC), in consultation with relevant stakeholders. The SER becomes a key document that provides the point of reference for the review team to understand the status of the Faculty/ Institute, the programme of study which is under review, and the ways in which the quality of its education provision is ensured.

This chapter provides guidance on the preparation of the SER of a programme of study, with the aim of ensuring comprehensiveness and maintaining uniformity in SERs prepared by all Faculties/ Institutes.

4.1. Purpose of the Self-Evaluation Report

The purpose of the SER is to provide the review team with an account of the performance of the programme of study with respect to the six (6) criteria and the standards thereof. The SER should describe the degree of internalization of best practices and the levels of achievement of standards, substantiated with relevant evidence. This would reflect the effectiveness of the ways in which the Faculty/ Institute discharges its responsibility for maintaining the quality of academic provision and standards of awards.

4.2. Scope of the Self-Evaluation Report

The SER reflects the following aspects pertaining to the programme of study.

Degree of internalization of best practices and the levels of achievement of Standards

Degree to which the claims are supported by recorded evidence

Accurate information regarding ongoing/ recently made changes for which complete evidence may not be available.

4.2.1. Degree of Internalization of Best Practices and Levels of Achievement of Standards

The SER accomplishes the above-mentioned purpose by describing the degree of internalization of best practices by the Faculty/ Institute and the levels of achievement of standards set out under the six criteria mentioned in Chapter Two of this Manual. In doing so, the SER would demonstrate the commitment of the Faculty/ Institute to uphold its mission of producing graduates with desired attributes. Where relevant, the SER should also reflect its commitment to the promotion of student-centred and outcome-based teaching-learning. This would also include the ways in which the study programme has responded to national policy and guidelines, human resource needs, and requirements of professional bodies, where relevant. Furthermore, the SER should also indicate how the study programme has responded to the recommendations of previous programme reviews.

4.2.2. Degree to which the Claims are Supported by Recorded Evidence

Every claim of compliance and level of attainment with respect to each standard must be supported with multiple sources of recorded evidence which may include paper-based or electronic records, databases, and management systems. Citation of all pertinent evidence is a major requirement of the SER. Therefore, it is the responsibility of the Faculty/ Institute to furnish all relevant documents. Claims not supported by evidence will not be considered by the review team. Chapter Two of this Manual provides examples of sources of evidence relevant to each standard. It should be noted that the given examples of evidence are not prescriptive, and it is possible to support the claims of internalization with other appropriate

evidence. Each recorded evidence must be suitably coded for the convenience of using them during review visits.

4.2.3. Information regarding Ongoing/ recently made Changes

It is imperative that the claims of compliance and evidence mentioned in the SER are comprehensive, accurate and verifiable. In instances where changes within the institutional set-up or in the study programme are in progress and evidence is not yet available, the Faculty/ Institute should state so in the introduction section of the SER. In such situations, the Faculty/ Institute should indicate why the changes were necessary, how it is managing the process of change, and the expected outcome/s of the changes.

4.3. Guidelines for Preparation of the Self-Evaluation Report

The SER should be concise and analytical, with reference to all relevant evidence. It should be self-explanatory and readily understandable, minimizing the need for the review team to request further clarification.

Programmes of study are expected to prepare the SER that includes the following sections:

Section 1. Introduction to the Programme of Study

Section 2. Process of Compilation of the Self-Evaluation Report

Section 3. Compliance with the Criteria and Standards

Section 4. Summary

The contents of each section are outlined below.

4.3.1. Section 1. Introduction to the Programme of Study

The Introduction section begins with an overview of the Faculty/ Institute and an outline of the establishment and major milestones in the development of the programme of study. This will be followed by a description of the following topics arranged under separate sub-headings:

Organizational structure of the Faculty/ Institute

Structure of the programme of study being reviewed including areas of specialization, if any

Graduate Profile and Programme Learning Outcomes

Departments contributing to the programme of study

Number of students enrolled and their choices of subject combinations

Numbers and profiles of the academic, administrative, academic support and non-academic staff contributing to the programme of study

Physical learning resources (library, laboratories, computer facilities etc.)

Learner support systems and management (Counselling, Mentoring, LMS etc.)

Context in which the Faculty/ Institute operates (e.g., SWOT analysis pertaining to the programme of study)

Major changes initiated/ implemented since the last programme review

Impact of such changes on the quality of education provision

This information will help the review team to contextualize the study programme and plan the review process.

4.3.2. Section 2. Process of Compilation of the Self-Evaluation Report

This section should contain an account of the process followed by the Faculty/ Institute to prepare the SER and may include the following:

Familiarization of the Programme Review Manual and the review process

Appointment of SER writing team with the Terms of Reference (ToR)

Composition and responsibilities of working teams

Activity schedules of the working teams and methods of collection of information

Collation of data and recorded evidence

Analysis and synthesis of the draft report by the working groups

Compilation into a draft SER by the Chairperson of the writing team

Forum to discuss the draft SER

Finalizing the SER and submission

4.3.3. Section 3. Compliance with the Criteria and Standards

In this section, the SER should describe the extent to which the programme of study complies with the standards of the six criteria described in Chapter Two of this manual. This section

should be structured as six sub-sections under the six criteria in the same order given in the manual.

It is advised to prepare each sub-section in tabular form using the template given in Table 4.1. Column 01 of the Table should mention the number of the standard as stated in the same order given in the manual. Column 02 should clearly describe the level of internalization of the best practice and achievement of the relevant standard by the programme of study. Column 03 should list the evidence that supports the claim, and Column 04 should indicate the relevant code number of each evidence. It will be more convenient to use the landscape layout for this section. At the end of each sub-section, a summary statement on how the programme of study has complied with the standards of the respective criterion should be made in the appropriate space in the Table.

Table 4.1. Template to be used to Describe Compliance with the Standards

Criterion #: Title of the Criterion ……			
Col. 01 **Standard Number**	***Col. 02*** **Claim of the Degree of Internalization of Best Practice/s and Level of Achievement of the Standard**	***Col. 03*** **List of Recorded Evidence to Support the Claim**	***Col. 04*** **Code Number of the Evidence**
Summary Statement of Compliance: …… ……			

Table 4.2 provides an example for describing compliance with Standard 4.1 of Criterion 04.

Table 4.2. Example of Describing Compliance

Criterion 4 – Teaching-Learning			
Std. No.	**Claim of the Degree of Internalization of Best Practice/s and Level of Achievement of the Standard**	**List of Recorded Evidence to Support the Claim**	**Code Number of the Evidence**
4.1	Before the commencement of a semester, teachers are provided with an approved timetable and instructions to obtain relevant course specifications (CSs) from the HoD office and make students aware of CS at the commencement of the course. Teachers present CS specifying the	Courses in the semester Semester Timetables Faculty instructions Introductory lectures Relevant Handouts Lesson plans LMS records	Uni/Faculty/ SP/ 4.1.1 Uni/Faculty/ SP/ 4.1.2 Uni/Faculty/ SP/ 4.1.3 Uni/Faculty/ SP/ 4.1.4 Uni/Faculty/ SP/ 4.1.5 Uni/Faculty/ SP/ 4.1.6 Uni/Faculty/ SP/ 4.1.7

	content, ILOs and constructively aligned lesson plans, assessment methods and recommended readings to students at the introductory lecture.	Staff feedback analysis Student feedback analysis	Uni/Faculty/ SP/ 4.1.8 Uni/Faculty/ SP/ 4.1.9
Summary Statement of Compliance: As substantiated by evidence, the SP has internalized best practices relevant to standards ……. and achieved desired standards during the period under review, while indicators of teaching excellence have been in use only after obtaining official approval in …….			

4.3.3.1. SER for Clustered Programmes

Study programmes that have a minimum of 60% of the standards considered for the programme review in common could be considered for 'clustering' for the purpose of submitting a SER. The maximum number of programmes that can be clustered is three (3) in accordance with the UGC directives. Clustering should be done with prior approval of the QAC.

When preparing a SER for 'clustered programmes', it is necessary to clearly distinguish the standards common to clustered programmes / specializations from those that are specific to individual programmes, and describe the degree of internalization of relevant best practices. This can be accomplished by presenting compliance in two parts, Part I and Part II under section 3. Part I should present the standards common to all programmes /specializations in the cluster. Part II should present the standards that are specific to individual programmes (programme-specific standards).

Part 1: Common Standards

Part II: Programme-specific Standards

Study Programme 1

Study Programme 2

Study Programme ..

In Part 1, the level of internalization of best practices and degree of compliance with respect to each of the 'common standards' should be presented.

In Part II, the level of internalization of best practices and degree of compliance with respect to each of the 'programme-specific standards' should be presented separately under each

named programme/ specialization. **This is required because grades will be assigned to individual programmes of study, and not to the cluster.**

Section 3: Part I –Common Standards

Criterion #: Title of the Criterion ……			
Standard Number	**Claim of the Degree of Internalization of Best Practice/s and Level of Achievement of the Standard**	**List of Recorded Evidence to Support the Claim**	**Code Number of the Evidence**
Summary Statement of Compliance: …… …… …….			

Section 3: Part II –Programme-specific Standards

Name of the Study Programme 1 …….

Criterion #: Title of the Criterion ……			
Standard Number	**Claim of the Degree of Internalization of Best Practice/s and Level of Achievement of the Standard**	**List of Recorded Evidence to Support the Claim**	**Code Number of the Evidence**
Summary Statement of Compliance: …… ……			

Name of the Study Programme 2 ……

Criterion #: Title of the Criterion ……			
Standard Number	**Claim of the Degree of Internalization of Best Practice/s and Level of Achievement of the Standard**	**List of Recorded Evidence to Support the Claim**	**Code Number of the Evidence**
Summary Statement of Compliance: …… ……			

4.3.4. Section 4. Summary

The summary of the SER should convey to the review team the effectiveness of the ways in which the Faculty/ Institute discharges its responsibility for maintaining academic standards prescribed in the Programme Review Manual. Furthermore, it should inform regarding the quality of education provided through the SP and the standard of the qualification awarded by the University. This section should reflect the degree to which the Faculty/ Institute has internalized the best practices stated in the manual and the internal monitoring mechanism employed by the FQAC for continuous quality enhancement of the SP. It should also indicate the deficiencies or gaps and the actions taken or planned to address those.

4.4 Length (Word limit and Format) of the SER

The SER should be concise and easily readable. Below given are the approved word limits and format for SERs.

4.4.1 Word limit

The word limits for the main text of a self-evaluation report (excluding appendices) are as follows:

For a single study programme of 3-year duration, the SER should not exceed 8,000 words;

For a single study programme of 4-year duration, the SER should not exceed 12,000 words;

For a single study programme of a 5-year duration, the SER should not exceed 16,000 words.

The maximum number of study programmes that could be clustered for an SER is three (3)

The SER for a clustered study programme should not exceed 16,000 words.

Above mentioned word limits are applicable to the main text of the SER excluding appendices. Appendices should be kept to a minimum and contain illustrative or statistical information essential to the main text.

4.4.2. Format

The SER should be typed in A 4 size pages, using Times New Roman in 12-point font size with 1.5-line space on A 4 size pages.

4.5. Need for Adherence to Guidelines

It is essential that SER writers follow the guidelines provided in this chapter. It must be noted that **SERs prepared in contravention of these guidelines will be rejected** and returned to the Faculty/ Institute for re-submission.

Chapter Five

Review Team and the Review Visit

The knowledge, experience and professional standards of the members of the review team are crucial to the conduct of an objective and candid Programme Review. It is also of equal importance that the reviewers and the Faculties/Institutes are aware of each other's roles and responsibilities in order to ensure that the review process takes place in a timely manner with no obstacle or conflict. This chapter provides guidelines on the selection of reviewers, composition of the review team, profile of reviewers, profile and role of review chair, conduct of reviewers, pre-review arrangements, and the review visit.

5.1. Selection of Reviewers

The QAC will maintain a pool of trained study programme reviewers from which it will select and appoint reviewers for each review. The reviewers will be senior academics in the relevant discipline. The panel may include retired academics who have had exemplary careers and are still active in academic activities and nominees from relevant professional bodies.

The following criteria will be considered in the selection of study programme reviewers:

Qualifications and experience.

Active involvement in study programme development and programme administration.

Involvement in internal quality monitoring.

Broad vision of higher education and expectations of the world of work.

Acceptability to the Faculty/ Institute being reviewed.

Prior training as a reviewer.

Has no conflict of interest with the study programme/s to be reviewed.

In addition, each reviewer should sign a self-declaration of non-involvement with the particular Faculty/Institute to avoid any conflict of interest.

5.2. Composition of the Review Team

The review team should be composed of a minimum of three members with adequate discipline representation. In respect of professional programmes, it is desirable to have one member from outside of academia to look at issues from a more industry-related or professional perspective. Adequate gender representation should be ensured. The QAC will appoint the review chair from among the members selected for the review team.

5.3. Profile of Reviewers

The credibility of the entire review process depends on the attributes and conduct of the reviewers. Their qualities as individuals in maintaining the highest standards of professionalism and integrity of review teams are vital to the success of an external review process. Reviewers should be well-informed and constructive, and act as ambassadors for promoting quality culture in the Faculty/ Institute.

The 'reviewer profile' below, describes the attributes expected of study programme reviewers:

High level of academic achievement in the respective discipline.

High degree of professional integrity.

Awareness and acceptance of nationally approved reference points such as SLQF and Subject Benchmark Statements, and manuals on quality assurance.

An enquiring disposition.

Personal authority and an amicable personality.

Ability to function as an effective team member.

Good individual time management skills.

Ability to readily assimilate a large amount of disparate information.

Good command of data analysis, reasoning and sound judgment.

Ability to make appropriate unbiased, impartial judgments without prejudice.

Experience in academic management and quality assurance.

High standard of oral and written communication, preferably with experience in drafting formal reports.

In addition, the QAC expects reviewers outside academia should have:

broad knowledge of higher education institutions and educational practices in Sri Lanka and abroad;

experience in academic management and quality assurance;

knowledge and understanding of the review process;

detailed working knowledge of, and commitment to, the principles, national guidelines, and other aspects of quality assurance in higher education.

5.4. Review Chair – Profile and Role

The review chair should be a senior academic with high professional standing. In addition to possessing the attributes stated in 5.3, the review chair is expected to have extensive experience in higher education, in-depth knowledge in all aspects of higher education including standards and assurance of quality, and managerial skills to lead a team of experts effectively and efficiently. He/she should be able to communicate effectively in face-to-face interaction; manage teamwork within given time scales adhering to deadlines; delegate responsibilities to team members; resolve conflicts, should the need arise; facilitate the writing of the relevant sections; and compile and edit to produce clear and succinct reports.

The essential qualities outlined above may be reinforced by experience in teaching at Universities/HEIs; experience in programme accreditation by professional or statutory bodies; programme approval or validation events; and experience in conducting internal reviews.

5.5. Conduct of Reviewers

Reviewers are expected to always comply with the Code of Conduct for Reviewers, provided in Appendix 01.

They should strive to uphold the highest standards of professional practice throughout the review process, exemplified by

respectful, professional conduct towards staff and students at all times;

application of good practices learnt during reviewer training;

honour privacy of the review process;

acceptance of individual responsibility for assigned tasks within the review team; and

acceptance of collective responsibility for the review team's judgments.

Each reviewer should complete and submit to the QAC, a signed Declaration of Conflict of Interests Form shown in Appendix 02.

5.6. Review Visit Arrangements

The requirements for the review visit and the responsibilities of the respective parties to facilitate clarity, consistency and effectiveness of the review process are outlined below.

5.6.1. Quality Assurance Council (QAC)/ University Grants Commission

Selection of the potential review team.

Inform the respective Faculty/Institute.

Finalize the composition of the review team in consultation with the Faculty/ Institute.

Designate the Review Chair as the team's focal point of contact with the Faculty/ Institute for the purpose of the review;

Inform the Vice Chancellor, Dean or Head of the Faculty/ Institute, Director/ CQA of the University and the Coordinator/ FQAC, of the review team members and their contact information naming the Review Chair as the focal point of contact.

Inform the UGC of the composition of the review team enabling the UGC Chairman to appoint the review team.

Send copies of the SER to the members of the review team.

Collect desk evaluation reports from members of the review team.

Organize a pre-review meeting among the panel of reviewers to discuss the findings of the desk review and to plan the review visit. (Director/ CQA should not participate in the desk-review discussion, but should be available to discuss the plan and logistics of the visit).

Inform the Faculty/ Institute of the dates of the site visit.

Following the site visit, send the draft review report submitted by the review team to the Faculty/ Institute for their observation.

Communicate the response of the Faculty/ Institute on the draft review report to the review team for consideration and finalizing the review report.

Facilitate resolution of disagreements, if any, between the review team and the reviewees.

Send the finalized programme review report for editorial corrections.

Submit the edited finalized programme review report for the approval of the UGC.

Publish the programme review report and the grades on the QAC website.

5.6.2. Faculty/ Institute

Inform the QAC/ UGC regarding the intention to be reviewed.

Designation of the Coordinator/ FQAC of the respective Faculty/ Institute as the focal point of contact to coordinate communications between the Faculty/ Institute and the review team and to provide logistical support.

Inform the QAC/UGC of the contact information of the focal point of contact.

Finalize the date of the review visit, the review visit schedule, and logistics in consultation with the Review Chair, Coordinator/ FQAC and the Director/CQA.

Make arrangements to allocate a room with adequate space and privacy, and equipped with a computer, printer, and multimedia facility for team members to hold discussions and meetings.

Arrange for secretarial assistance, meetings with different stakeholders, and refreshments and meals by the Coordinator/FQAC.

Provision of internal transport by the Dean of the Faculty/ Institute.

5.6.3. Review Team

Each member of the review team is expected to carefully scrutinize the SER and any supporting evidence that was made available to them during the desk evaluation. The review team should identify those aspects of the SER which need further clarification during the site visit.

The review team may reject the SER if it has not been written adhering to the guidelines given in this manual and recommends to the QAC to request resubmission.

Review team members shall arrive for the pre-review meeting after submitting the desk evaluation report of the SER to the QAC, with notes on required additional information, and the tentative outcomes of desk evaluation.

The members shall discuss the findings of the desk review during the meeting, and share, the impressions gained from the information given in the SER.

After the meeting, the review chair shall assign individual responsibilities to the team members, make a list of additional inputs required by the review team for the review visit and inform the Faculty/Institute through the focal point of the Faculty/ Institute.

5.7. Review Visit

The objectives of the review visit are to

ascertain the authenticity of the information provided in the SER;

explore in meetings and interviews with the key stakeholders regarding the programme under review; and

explore through additional documentation/ records or more information.

The review team shall arrive at the Faculty/ Institute on the pre-determined date and time. The first meeting of the Review team will be with the Vice-Chancellor of the University / Head of the Institute, Dean of the relevant Faculty, Head/ Department or Coordinator of the study programme, Director/ CQA, and the Coordinator/ FQAC of the relevant faculty. This would be followed by a meeting at the Faculty/ Institute with the Dean, Heads and all relevant academic and administrative staff involved in programme management. Following this meeting, the review should proceed according to the agreed schedule. The review team needs to manage time efficiently and effectively during the review visit.

5.8. Review Process

The review process will involve the following activities:

Scrutinizing documentary evidence

Conducting meetings/ discussions with staff, students, alumni and other stakeholders

Observation of teaching-learning sessions, learning resources and facilities

Debriefing

5.8.1. Scrutinizing documentary/ recorded evidence

The review team will also carefully read and scrutinize the documentation and sources of information provided by the Faculty/Institute as evidence. The aim is to consider evidence furnished by the Faculty/Institute and to focus on discussions with staff and students to get a clear picture of the programme's processes in operation. It will endeavour to keep to a minimum the amount of documentation/ recorded evidence it requests during the site visit. The review team should always seek to use all information requested in arriving at a judgment.

The reviewers should bear in mind that the evidence may vary among the Faculties/Institutions, and that the evidences indicated in this manual are only examples, but not prescriptions.

5.8.2. Meetings and Discussions with Staff, Students, Alumni and other Stakeholders

The aim is to get a clear picture of the programme's processes in operation and to clarify the claims made in the SER. The review team should ensure having meetings with individuals/ small groups of the following stakeholders along with scrutinizing documented/ recorded evidence and observing facilities and teaching learning sessions.

Academic staff of the Faculty/Institute/Department/Unit/Division;

Administrative staff;

Members of the FQAC;

SER writing team;

Members of the academic support staff and non-academic staff;

Selected groups of students and student representatives;

Representatives of alumni;

Moderators/ external examiners, extended faculty, visiting staff;

Employers, industry, and community representatives involved with the Faculty activities, where relevant.

At the beginning of each meeting, the Review Chair should:

Introduce the panel members and ask for introductions from those present.

Outline the areas to be covered and the order in which they should be covered.

Agree on the finishing time for the meeting.

5.8.3. Observation of teaching-learning sessions, learning resources, and facilities

Direct observation of selected ongoing teaching-learning activities and field/ laboratory work should be arranged in conjunction with the FQAC coordinator. The team may also request a visit to the learning facilities and learner support services within and outside the Faculty premises.

The review team needs to ensure the availability of adequate and well-maintained learning facilities such as ICT laboratories, language laboratory, skill laboratory, science laboratories, museums, library facilities etc., for the support of student learning and effective execution of study programme/s.

Additionally, the review team needs to ensure that the Faculty/Institute provides and maintains adequate learner support services including counselling, ELTU, career guidance, residential facilities, welfare services, health and medical facilities, sports and recreation facilities, and facilities for cultural and other creative activities.

5.8.3.1. Final Panel Meeting

Before the conclusion of the site visit, the panel needs to meet, to draw together its findings, based on the information gathered from meetings, documentary evidence, and observation of resources and facilities. At this point, it is useful to take the time to work through each standard of the criteria to confirm the panel's key findings and any areas of concern.

5.8.4. Debriefing

At the conclusion of the visit, an interactive meeting will be held between the review team and the following:

Dean of the Faculty

Heads of the Departments

Programme/ Academic Coordinators

Senior members of the academic staff

Director CQA, Coordinator and members of the FQAC

Chair/representatives of the SER writing team

Student representatives of the Faculty Board.

Representatives from Academic support staff and non-academic staff.

At this meeting, the review chair will outline the panel's opinion on the strengths and weaknesses of the study programme with respect to each criterion, the commendations and recommendations for the study programme, and may give a general indication of its overall

findings facilitating an interactive discussion. This will present an opportunity for the reviewees to correct any misjudgments that may have been made by the review team.

Within two weeks of the site visit, the review chair, along with the team members, is expected to prepare and submit a preliminary review report to the QAC/UGC. The details of this process are given in Chapter Six.

Chapter Six

Programme Review Report

The Programme Review Report (PRR) is the final outcome of an external peer review of a programme of study. The PRR, following acceptance by the Faculty/Institute concerned and final approval of the QAC, will enter the public domain through the UGC website.

The PRR is expected to provide a concise account of the peer review process, the findings of the review, documents perused, analysis of the evidence provided, facilities available, teaching-learning processes observed, issues identified, and discussions held. The report will conclude with the review team's reflections and conclusions on the level of accomplishment by the Faculty/Institute with regard to the quality and standard of the programme that has been reviewed. In addition, the report may indicate the degree of compliance of the study programme with SLQF guidelines at the relevant level. The report will also include commendations on the accomplishments of the Faculty/Institute and recommendations for quality enhancement.

6.1. Purpose of the Programme Review Report

The purposes of the PRR are

to inform the Faculty/Institute and other stakeholders, of the findings of the external peer review about the quality of the training and learning experiences provided to students by the programme and the standard of the award/s;

to provide a reference point to support and guide the Faculty/Institute in continuing quality assurance activities towards quality enhancement and excellence.

6.2. Scope of the Report

The PRR will cover the following aspects pertaining to the particular programme that has undergone the external peer review.

A brief introduction of the University/ HEI, Faculty/Institute and the programme of study.

A brief description of the review process (with the review visit programme or schedule of meetings as an appendix).

The review team's observations on the Self-Evaluation Report (SER).

Commentary on the actual criterion-wise scores achieved by the programme of study under the six criteria of the programme review

Overview of the approach to quality assurance by the Faculty/Institute.

Assessment of performance of the programme of study based on the standard-wise scores and the actual criteria-wise scores.

Final judgment of performance of the programme of study based on the overall score.

SLQF level compliance or SLQF level equivalence of the study programme

Commendations and recommendations

Summary

6.3. Review Judgments

The Programme Review Manual prescribes six core areas (criteria) that will be scrutinized during the external peer review process that all study programmes in universities and other HEIs in Sri Lanka will be subjected to, at regular intervals of time (5-year cycle in general). Programme review involves analysis of claims made in the SER and validation of the evidence presented during the site visit with respect to the programme of study. Based on an objective analysis of the claims made on the degree of compliance with the six criteria and

respective standards, the review team will arrive at a collective judgment on the performance of the study programme under review.

Following reflection on the findings of the review visit, the review team will arrive at firm judgments and recommendations. Judgments should not be negative but constructive and supported by evidence. Recommendations should not be prescriptive but stated in a manner whereby the Faculty/Institute will be able to build upon what is already in place and strive towards quality improvement.

Furthermore, if requested by the reviewee at the time of submitting the SER, the review team will assess the SLQF level compliance or SLQF level equivalence of the study programme, based on the guidelines provided in Chapter 3.3, and indicate its findings in the Programme review report. SLQF level equivalence is applicable to only those study programmes that have been designed and approved prior to the publication of SLQF 2015, or to programmes that are no longer offered. The final Certification of Compliance or Attestation of Equivalence will be issued by the SLQF Certification Committee of the UGC.

6.4. Format of the Programme Review Report (PRR)

The PRR will be structured under nine broad sections as given below.

Section 1 - Brief introduction to the programme of study

Section 2 – Review team's observations on the Self - Evaluation Report (SER)

Section 3 - A brief description of the Review Process

Section 4 - Overview of the Faculty's/Institute's approach to quality and standards

Section 5 - Judgment on the degree of internalization of the best practices of the six (6) criteria considered in the undergraduate programme review

Section 6 - Grading of Overall Performance of the Programme

Section 7 –SLQF Level compliance or SLQF Level equivalence of the Qualification

Section 8 - Commendations and Recommendations

Section 9 – Summary

Section 1 –Brief introduction to the programme

This section will start with a brief introduction to the programme and its relevance in the local/ international context. It will describe the history of the Faculty/Institute offering the programme, the strength, qualifications and experience of academic staff, the number of

students enrolled, the staff-student ratio, infrastructure, learning facilities and student support services available based on the information given in the SER, and the observations made by the review team during the review visit. This would enable the reader to understand the context of the Faculty/Institute, its strengths and weaknesses, and any constraints faced by the Faculty/Institute with regard to the delivery and sustainability of the programme.

This section will include a comment on the response of the Faculty/Institute to the recommendations made at the previous programme review/s. It will mention any key issues within the six criteria of programme review that the team has identified for particular scrutiny, or as requiring improvement/ rectification.

Section 2 - Review team's observations on the Self-Evaluation Report (SER)

This section will indicate whether the SER has been prepared according to the guidelines given in this manual, using a participatory approach involving all constituents of the Faculty/Institute. The review team will comment on whether the evidence has been presented alongside the standards and criteria as shown in the template provided in the Appendix. ?

The review team could comment on the analysis of the strengths, weaknesses, opportunities and threats (SWOT) as given in the SER and whether all relevant documents had been submitted alongside the SER. The team will make its observations on the extent to which the programme reflects the mission, goals and learning outcomes specified in the programme description and whether student-centred learning and outcome-based education approaches have been adopted along with a clearly laid down graduate profile. The team will see whether the programme complies with the requirements specified in reference points such as the Sri Lanka Qualifications Framework (SLQF) and relevant Subject Benchmark Statements (SBS).

The review team will comment on whether remedial measures have been implemented to rectify deficiencies identified at previous programme reviews and if not, what actions the Faculty/Institute is taking towards implementation of the recommendations. Any obstacles encountered in the implementation of previous recommendations, and constraints under which the programme is currently functioning could be mentioned in this section.

Section 3 – A brief description of the Review Process

This section will describe the steps involved in preparation for the programme review by the review team and by the Faculty/Institute/Department. It will outline details of the review visit such as the schedule of meetings with different constituents of the Faculty/Institute (which could be provided as an appendix), the personnel interviewed, teaching-learning processes

observed, evidence examined and meetings of the review team during the review visit. It will also mention the review team's satisfaction or dissatisfaction with the arrangements made to facilitate the conduct of the review visit in a cost-effective manner. The degree of commitment of the Faculty/Institute to openness and transparency in communications, and logistical support provided could be reported in this section.

Section 4 - Overview of the Faculty's/Institute's approach to Quality and Standards

This section will present the review team's observations on the overall approach of the Faculty/ Institute to quality assurance and improvement. It should state whether the Faculty/Institute has a well-established Faculty Quality Assurance Cell (FQAC) that works in liaison with the University's/HEIs Centre for Quality Assurance (CQA) in accordance with the Internal Quality Assurance Manual (2013) and the IQA circulars of 2015 and 2019 of the UGC.

Comments will be made as to whether internal quality assurance is an ongoing process with best practices built into the day-to-day routine activities, thus ensuring that the quality culture is well entrenched within the Faculty/Institute.

This section will describe the key features of the Faculty's/Institute's approach to quality assurance and its capacity to implement measures to remedy weaknesses and seek quality improvement. This section will include the review team's impression of the Faculty's/Institute's commitment towards quality enhancement and excellence.

Section 5 - Judgment on the six Criteria of Programme Review

This section will present the review team's judgment of the level of attainment of quality under each of the six criteria of the study programme review. Standard-wise scores and raw criterion-wise scores will be calculated based on the scoring method given in Chapter 3. Actual criterion-wise scores for each criterion based on the allocated weightage will be calculated using the formula given in Box 1 in Chapter 3. The sum of the six actual criterion-wise scores will be converted to a percentage score for the study programme. In this section of the report, the above values should be presented in tabulated form using Table 3.4. The review team should provide its observations on the strengths and weaknesses of each criterion and make recommendations for the enhancement of quality.

Section 6 - Grading of Overall Performance of the Study Programme

This will set out the review team's assessment of the level of accomplishment of quality expected of the academic programme under review, based on the grading of overall performance under the categories of Grades A+, A, B, C, D or E as indicated in Chapter 3

under Procedure for Use of Standards for Assessment of Performance of the Programme of Study.

Section 7- SLQF Level Compliance or Level Equivalence of the Qualification

In addition, based on the instructions given in Chapter 3 under 3.6 - Procedure for Use of Standards for Certification of the SLQF Level and the score guide, the review team would assess the SLQF Level compliance or SLQF level equivalence of the qualification offered by Faulty/Institute for the study programmes.

Section 8 - Commendations and Recommendations

This section will list the commendations on excellence such as the Faculty's/Institute's policy and procedures in Programme Management; Learning Resources, Learner Support and Progression; Programme and Course/Module Design and Development; Teaching and Learning; Student Assessment and Awards; and Innovative and Healthy Practices. This list is not all-inclusive and any comments on quality pertaining to excellence in programme development and delivery could be included under commendations. In addition, this section will make recommendations for remedial actions needed to bring about quality enhancement leading to excellence.

Section 9 – Summary

This will be a summary of the review team's main findings as given under the different sections of the report and will be no longer than 1000 words.

6.5. Compilation of the PRR

Review team members will take responsibility for each section of the report. The Chair of the review team will assemble the different sections and compile and edit the final comprehensive draft report agreed upon by the team. The final draft report should not exceed 6000 words.

6.6. Procedure for Submission of the Report

The chair of the review team will submit the draft final report to the QAC within six weeks of the visit. The QAC will send a copy of the draft report to the Faculty/Institute concerned for observations and comments.

6.6.1 Request for Discussion

The review team would have given an indication about its conclusions at the Debriefing session held at the end of the review visit, with the Dean of the Faculty/ Director of the Institute, Director of the CQA, coordinator of FQAC, Heads of Departments and other

relevant senior academic staff responsible for the programme. This meeting would have given the Faculty/Institute/ Department an opportunity to sort out any factual errors and misinterpretations made by the review team. However, upon receiving the draft report from the QAC, the Faculty/ Institute may ask for a further discussion with the review team about the contents of the report, before publication. The Faculty/ Institute through the VC should notify the QAC of its wish to take up this opportunity within two weeks of receipt of the first draft of the report, highlighting the particular areas it wishes to discuss.

The meeting to discuss any clarifications should take place within six weeks of the university making the request. The meeting should be chaired by the Director/ QAC or a nominee (if there is a conflict of interest). The chair of the meeting should not be a member of the university concerned, nor should he or she have any other close links with it. Detailed notes of the meeting should be taken by a representative of the QAC. Others present at the meeting will be members of the review team (all if possible, but at least two including the chairperson), and representatives chosen by the university, who are likely to be staff who prepared the SER and those who are involved in the review visit. The discussion will be for the purpose of clarifying the veracity of the draft report and deciding on the need to make necessary changes.

Based on the outcome of the discussions and decisions arrived at during the meeting, the final draft report will be prepared by the Chair of the review team and submitted to the QAC.

The QAC sends the amended report prepared by the review team chair to the Faculty/Institution.

6.7. Editing and Publication of the Report

After acceptance of the report by the Faculty/Institution, it will be edited by a panel of experienced editors to ensure clarity, adherence to guidelines, and consistent formatting. The final edited version will be submitted to the UGC Standing Committee on Quality Assurance and the UGC for approval.

The final version of the Programme Review Report, approved by the Standing Committee on Quality Assurance and the UGC, will be published on the official website of the QAC/ UGC.

Appendices

Appendix 01

CODE OF CONDUCT FOR INSTITUTIONAL AND PROGRAM REVIEWERS

PREAMBLE

This Code of Conduct ("the Code") describes rules of good behaviour for reviewers engaged in the external reviews conducted by the Quality Assurance Council of the University Grants Commission (QAC-UGC) and covers the entire task from accepting the assignment to submission of the final report to the QAC. The Code gives the basic principles and guidelines with which all members of review panels should comply, and reviewers are expected to conduct reviews within the spirit of the Code. Upon signature of their review contracts, all reviewers consent to comply and respect the principles, rules and guidelines stipulated in this Code. In case of any doubt concerning the applicability of a particular section of the Code, the reviewer should contact the Director QAC of the UGC for clarifications.

Verifiable evidence concerning a breach of the Code by a reviewer, or evidence of any other unprofessional conduct not covered in this Code, may result in termination of the reviewer's

contract by the QAC and/or listing of the reviewer as ineligible for future contracts, and/or reporting to the Council of the reviewer's University.

An external quality assurance (EQA) review analyses the fitness of an institution's/Faculty's processes for managing and assuring the expected outcomes of academic activities including study programs undertaken by the institution/faculty and the quality of student learning experience and standards of awards. It evaluates the extent to which internal quality assurance (IQA) mechanisms adopted by the institution/ faculty can be relied upon to maintain the quality of the provision of educational programmes over time.

The reviewer is expected to perform EQA reviews under the guidance of QAC. The reviewer is expected to exercise maximum objectivity in weighing ground realities and hard and soft evidence provided in support of the claims made in the SER by the reviewee against the standards stipulated in the prescribed Review Manuals by the QAC. Therefore, the reviewer must have a complete understanding of the procedures detailed in the relevant review manual.

DEFINITIONS

1. **Confidential information:**

   Information that was obtained as a consequence of conducting the review and that is not publicly available

2. Conflict of Interest:

   a. Real Conflict of Interest: The reviewer has personal or organizational interests which might influence the performance of his/her duties and responsibilities as a reviewer

   b. Apparent conflict of interest: A situation where it can be reasonably perceived that the reviewer's private interests might influence the performance of his / her duties and responsibilities as a reviewer

3. Impartial: Absence of prejudice towards any party

4. Independent: Free of external pressure and staying neutral

5. Integrity: Acting honestly and ethically in the process, being objective and independent

6. Misconduct: Intentional or negligent failure to observe the rules of conduct set by this Code

CORE VALUES

Core values that should be upheld by all involved parties include:

A. Persistent effort to achieve the highest level of standards

B. Conscientious and continuous pursuit of excellence in one's work

C. Honesty, integrity and objectivity in all involved procedures

D. Responsibility for one's actions and conduct

E. Respect for rights, differences and dignity of stakeholders of the process

F. Accountability to the public

G. Transparency in all dealings

H. Impartiality and independence in all dealings

CODE OF CONDUCT

In the conduct of all external reviews, all reviewers are at all times required to uphold the above core values and following guidelines, and conduct themselves in a manner that does not bring the UGC or academia into disrepute, and be cognizant of the fact that their contribution is of national interest and they represent the UGC.

1. Objectivity: The reviewer shall at all times make a maximum effort to be objective:

1.1. Make sure that decisions are always based on first-hand evidence;

1.2. Go by the definitions provided in the review manual. On matters where definitions are not provided in the manual, the reviewers as a team may arrive at interpretations and are expected to include those in the report to be transparent;

1.3. Not use personal/subjective ideas/interpretations or interpretations used in their own study programs/institutions to assess practices adopted by the program/institution under review;

1.4. Judgements must be robust and fully supported by evidence so that they can be defended, if required;

1.5. Weigh and test the evidence presented by the institution with claims made in the SER and the requirements in the review manual in making judgements;

1.6. Be an informed observer before contributing to decision-making by the panel.

2. Confidentiality: the reviewer shall protect the confidentiality of all proceedings and information:

2.1. Safeguard in strict confidence, all information made available to him/her especially communications containing sensitive information, information of a personal nature and may lead to defamations if disclosed, and information already contested at Courts of Law;

2.2. Not disclose any confidential information acquired during the review process to anyone external to the panel (excluding the confidential feedback provided to the Director, QAC following the review task for the continuous improvement of the review process);

2.3. Not disclose any information concerning the evaluation procedure to any other party (in addition to the information given in the final full report and the feedback provided to the Director, QAC);

2.4. From the date of accepting the assignment, the reviewer shall not contact any colleague or another individual of the institution or program under review and communicate whatsoever matters pertinent to the review with such individual/individuals, except through the QAC. The Review Chair may communicate with the Dean of a study program or the Director of the IQAU regarding site-visit arrangements with the awareness of the Director of the QAC on the matter.

3. Conflict of Interest: The reviewer shall act with strict impartiality**:**

3.1. Identify and declare any real or apparent conflict between personal interest (direct or indirect) and interests of QAC and reviewee, that will undermine objectivity;

3.2. Inform the QAC immediately of any change in interest that may conflict with that of the QAC;

3.3. Consider that all parties/groups that they discuss/meet with are equally important stakeholders in the process of the review;

3.4. No reviewer shall use their encounter with reviewee for his/her personal advantage.

4. Integrity: The reviewer shall act honestly and ethically:

4.1. Conduct of the reviewer should not foster any suspicion that he/she is behaving in a particular manner of personal interest or advantage;

4.2. Reviewer shall exercise maximum honesty during the entire review process;

4.3. Reviewer shall not accept any direct or indirect gift, reward or hospitality or undue extra attention which may appear to place them under obligation and compromise

impartiality. The reviewer shall discuss in the team or contact the Director, QAC immediately, if he/she feels that the situation/offer is not under his/her control

4.4. Reviewer shall not offer any favour or undue extra attention to any party/individual of the program or the institution under review.

4.5. Reviewer shall refrain from any behaviour that could be interpreted as dishonest, unethical and unprofessional

4.6. The reviewer is expected to reflect on his/her own conduct, and question and analyze the integrity and underlying motives

CONDUCT DURING SITE VISIT

1. Evaluation during site visit

1.1. The evaluation on site shall be based on claims made in the SER

1.2. The reviewer shall be aware that the task during the site visit is to weigh the evidence (soft or hard) provided/ witnessed/ received in support of the claims made in the SER against the standards stipulated in the review manual

1.3. The reviewers shall not demand or insist on further evidence or any other requirement during the site visit, but report on the evidence witnessed and the review experience. However, the reviewer may seek clarifications on ambiguous matters with documents or verbal explanations.

2. Relationship with the reviewee

2.1. The reviewer should bear in mind that the site visit is a full-time assignment.

2.2. The reviewer should behave, and be perceived to behave, as a peer (equal) of the academics of the institution or the program under review, and refrain from adopting a position of ‘superiority’ over the reviewee.

2.3. The reviewer should not assume another role during the site visit other than being a reviewer. The reviewer should refrain from attempting to teach or advocating a particular view or practice to the reviewee by indicating that such practice is already being adopted

by the institution/program of the reviewer etc. (i.e., revealing “I have done it but you have not”; “I have it but you don’t” attitude). A reviewer may, however, make suggestions by way of sharing good practices.

2.4. The reviewer should be polite and courteous to all stakeholders.

2.5. The reviewer should be tolerant, and show respect for the rights, differences and dignity of all stakeholders.

2.6. The reviewer should strive to create a pleasant and productive working environment for all parties

3. Commitment to competency and professionalism

3.1. The reviewer should exercise and maintain professional competence at all times

3.2. The reviewer should be prepared and pay full attention in the task

3.3. The reviewer should participate in the full schedule

3.4. The reviewer should keep careful records of observed supporting evidence, facilities and teaching practice, and discussions during stakeholder meetings.

3.5. The reviewer shall strive to be punctual, and adhere to the site visit schedule as much as possible, especially with regard to meetings with stakeholders.

3.6. The reviewer shall dress appropriately.

3.7. Communication

3.7.1. The reviewer should maintain purposeful dialogues focused on the program or institution under review

3.7.2. The reviewer should be open and clear as much as possible in the discussions

3.7.3. The reviewer should ask questions in a friendly and constructive manner, creating a conducive environment that minimizes stress and builds trust and respect

3.7.4. The reviewer should refrain from being sarcastic and intimidating

3.7.5. The reviewer should avoid personal questions and deal carefully with any sensitive information that may be divulged by stakeholders

3.7.6. The reviewer should ensure that views of all are entertained, valued and listened to, and foster exchange of opinions

3.7.7. The reviewer should not use prescriptive language, but instead make suggestions for change where appropriate.

4. Providing feedback

4.1. The reviewer should ensure that feedback on findings is given in a constructive and qualitative manner

4.2. The review panel must report honestly and fairly on their findings during the site visit, with regard to strengths and weaknesses under each review criterion

4.3. The review panel should keep the specific outcomes (grade, scores etc.) confidential during the site visit and declare those only through the report

4.4. The review panel must ensure that judgements are accurate and reliable and reflect ground level operations of the institution/program

5. Conduct within the Review Panel

5.1. Reviewers must ensure that each panel member is an equal partner and cooperate in taking specific responsibility under the guidance of the Chair of the panel

5.2. All reviewers should attend private meetings of the panel when convened by the Chair

5.3. All reviewers should ensure that the final outcomes are decided collectively and by consensus. If there is a significant difference of opinion among members of the review panel, the opinion of the majority should be final.

6. Review Chair

6.1. should conduct, command and exercise authority in a fair and responsible manner

6.2. should oversee the review process in an all-inclusive manner

6.3. is expected to make and keep the schedules

6.4. is expected to be responsible for communications with the QAC and the reviewee

6.5. should ensure that the views of all participants are valued and taken into account, and foster open exchange of opinions

6.6. should ensure that everyone in the meeting feels comfortable with the review panel

6.7. at the end of each meeting, should recapitulate the main topics covered in the discussion in order to make sure that all issues have been brought to debate

6.8. should strive to ensure that there are no unsettled issues or concerns by the end of every meeting

REPORT WRITING

1. The reviewer should remain in regular contact with the Review Chair and other members of the Review Panel until the Review Report has been finalized and submitted to the QAC.

2. All members of the Review Panel should share their contributions to the review report by email in a timely fashion, so that the Review Chair is able to produce a single, comprehensive review report that is consistent with the guidance set out in the relevant review manual.

3. Each member of the Review Panel should carefully read those sections of the Review Report written by other members of the panel and ensure that they are in agreement with the views expressed therein. Ultimately, every reviewer is responsible for the full content of the final report.

4. Each reviewer should strive to meet deadlines set collectively by the Review Panel, in order to meet the QAC deadlines for submission of the preliminary report, followed by the draft Review Report and the finalized Review Report.

MATERIAL REFERENCED

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https://www.eurosai.org/handle404?exporturi=/export/sites/eurosai/.content/documents/materials/Quality-Assurance-Review-Handbook-2012.pdf

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Manual for Review of Undergraduate Study Programmes of Sri Lankan Universities and Higher Education Institutions. UGC, 2015

Manual for Institutional Review of Sri Lankan Universities and Higher Education Institutions. UGC, 2015.

Appendix 02

DECLARATION OF INTERESTS FOR EXTERNAL REVIEWERS

External reviews conducted by the Quality Assurance Council (QAC) of the University Grants Commission (UGC) on programmes of study and higher education institutes requires the involvement of large numbers of university academics, who may have interests related to the institution under review. To ensure the highest integrity and public confidence in such reviews, the QAC requires those serving as reviewers to disclose any circumstances that could give rise to, or be reasonably perceived to give rise to conflict of interest, as it may affect or appear to influence the reviewer's objectivity and independence. A perceived conflict of interest exists when an interest would not necessarily influence the individual, but could result in the individual's objectivity being questioned by others.

You must disclose on this Declaration of Interests form, any financial, professional, employment or other interest relevant to the institution or programme under review that could

influence the outcome of the decision made by the QAC regarding the final grading. You must also declare relevant interests of your immediate family members in relation to the same study program or the institution.

Please note that failure to fully complete and disclose all relevant information on this form may, depending on the circumstances, lead the QAC to decide not to appoint you to a similar assignment in the future.

Upon your declaration, the QAC holds the right to make the decision reading the service expected from you in relation to a particular study program or institution. Answering 'yes' to a question on the form printed on the next page does not automatically disqualify you from undertaking a review. Your answers will be reviewed by the QAC to determine whether you have a conflict of interest relevant to the review at hand. Based on your declaration, the QAC may conclude that no potential conflict exists or that the interest is irrelevant or insignificant. If, however, a declared interest is determined to be potentially or clearly significant, the QAC may conclude that you should not be part of the respective Review Team. If you are unable or unwilling to disclose the details of an interest that may pose a real or perceived conflict, you must disclose that a conflict of interest may exist, and in that event the QAC may decide that you be totally recused from the review, after consulting with you.

Please complete this form and submit it to the Director QAC as soon as you are notified of your appointment as a reviewer to a particular study program or institution, so that the QAC has adequate time to make a decision and manage the situation to prevent any delays in the review process.

Name of university under review:

……

Name of faculty and degree programme under review (for program review only):

……

Name of reviewer:

……

NIC no

…….

A., Please answer each of the questions below. If the answer to any of the questions is 'yes', briefly describe the circumstances in the following table.

1. Within the past five years, have you or a member of your immediate family*, been an employee of the university under review? Yes ☐ No ☐
2. Within the past five years, has any member of your immediate family* been a student in the university under review? Yes ☐ No ☐
3. Do you have an undergraduate or postgraduate degree from the university under review? Yes ☐ No ☐
4. Do you have any other relationship[§] with the university under review that may lead to conflict of interest? Yes ☐ No ☐

**The term 'immediate family' refers to your spouse, parents, siblings and children.*

[§] This includes close acquaintance with the Head of Department, Dean or Vice-Chancellor of the relevant university; and research collaborations within the past five years, with staff in the Department under review

B. Explanation of 'yes' responses: If the answer to any of the above questions is 'yes', briefly describe the circumstances below.

Type of interest (Question no)	If it is relevant to a family member, specify relationship	Describe other relevant details including the nature and dates and duration of the circumstance/s of interest or the value of it, if financial

Declaration: I hereby declare on my honour that the disclosed information is true and complete to the best of my knowledge. Should there be any change to the above information,

I will promptly notify the Director / QAC and complete a new declaration of interest form that describes the changes.

Date: ……. Signature ……

Appendix 03

List of Study Programmes and Staff Members/ Divisions that Provided Feedback on Applicability of the Draft Manual

University	Faculty	Study Programme	Name of the Staff Member/ Division
University of Peradeniya	Arts	Sociology	Prof. Shanti Nandana Wijesinghe
	Agriculture	Agricultural Technology and Management	Prof. Suranga Kodithuwakku
	Medicine	Bachelor of Medicine, Bachelor of Surgery	Prof. Kosala Marambe
	Allied Health Sciences	All Study programmes	Dr. Nilupa Amarasinghe,

			Coordinator(IQAC/FAHS)
	Arts	Bachelor of Arts in Greek and Roman Studies, BA in Sanskrit	Dr. KMRN Kulatunga
University of Sri Jayewardenepura	Faculty of Medical Sciences	Bachelor of Medicine, Bachelor of Surgery	Prof. KLMD Seneviwickrama
	Faculty of Management Studies and Commerce	All Study Programmes	Dr. Dushan Jayawickrama, Dean, Faculty of Management Studies and Commerce
University of Moratuwa	Engineering	Electronics	Dr. MKA Gunawardena
University of Jaffna	Faculty of Management Studies & Commerce	Bachelor of Business Administration	Prof. Shivany Shanmugathas
South Eastern University of Sri Lanka	Management and Commerce	Bachelor of Business Administration Hons Bachelor of Commerce Hons	Prof. Athambawa Jahfer
Sabaragamuwa University of Sri Lanka	Faculty of Agricultural Sciences	BSc Agricultural Sciences and Management	Dr. Darshanee Ruwandeepika
	Social Sciences & Languages	Bachelor of Arts	Dr. Rohan Abeywickrama
Wayamba University of Sri Lanka	Livestock and Fisheries and Nutrition	All Study programmes	Faculty Quality Assurance Cell
University of Visual and Performing Arts	Music	BPA(Music)	Prof. Saman Panapitiya
Gampaha Wickramarachchi University of Indigenous Medicine	Faculty of Indigenous Health Sciences and Technology	BHSc Hons in Health Information and Communication Technology	Ms. RPGS Maleesha
	Faculty of Indigenous Health Sciences	Study Programmes offered by the Department of	Ms. NAPSR Nanayakkara

	and Technology	Indigenous Health Sciences	
	Faculty of Indigenous Health Sciences and Technology	BHSc Hons in Biomedical Technology	M. BL Kasuri Balasooriya
	Faculty of Indigenous Health Sciences and Technology	Bachelor of Health Science Honors in Indigenous Pharmaceutical Technology	Dr. Sucharitha Udahapuvida
	Indigenous Health Sciences and Technology	Bachelor of Science Honours in Health Tourism and Hospitality Management	Ms. Piumie Suraweera
University of Vavuniya	Faculty of Business Studies	Bachelor of Business Management	Prof. A. Pushpanathan
	Faculty of Applied Science	BSc in Applied Mathematics and Computing, BSc Hons in Environmental Science, BSc in Information Technology	Dr. Mrs. J. Nimalan

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Glossary of Terms

Academic Advisor	Academic members who guide students through an educational process that facilitates the learner's understanding of the meaning and purpose of higher education. Academic advising fosters and encourages both intellectual and personal development and academic success.
Academic Calendar	The schedule of planned events of an institution for the academic year giving details such as scheduled dates of opening for the academic year, commencement of semesters, holidays, examinations, release of results, convocation, etc.
Academic Mentoring	An active process by which faculty establish and foster relationships with students by offering guidance, support, and encouragement aimed at developing their competence and character. Mentors listen actively to mentee's concerns and care about their personal and professional well-being. Mentors help students develop their strengths, work through challenges,

	achieve academic excellence, and advance professionally in career paths of the student's choosing.
Academic Transcript	Official document on a student's permanent academic record, which includes the duration of the study programme, courses completed, grades received, classes and/or honours awarded, and degree conferred etc.
Accreditation	A formal process of enquiry against a set of agreed criteria (or standards), undertaken by a formally constituted body that will lead, if successful, to a formal status (as an accredited institution or accredited programme or accredited degree).
Action Plan	Description of specific activities related to short and long term strategic objectives including outcomes and outputs with a detailed roadmap, key performance indicators, details of resource commitments, persons responsible, and timelines.
Active Learning	Interactive instructional techniques that engage students in higher-order thinking tasks and in-depth comprehension of the subject. Active learning involves designing, implementing, maintaining and promoting, within and outside the classroom, an environment for learning, through creating opportunities for active engagement with the subject matter. It also helps students strengthen problem-solving and critical thinking skills.
Assessment	The measurement of aspects of a learner's performance in terms of knowledge, skills, and attitudes. It can be formal or informal and formative or summative.
Assessment Blueprint	Mapping of the individual assessment items against Intended Learning Outcomes of a course and allocating appropriate weightages to each assessment item ensuring coverage of all aspects of the course content and educational domains.
Blended learning	A process where more traditional methods for training (in-class, instructor-led) are combined with eLearning content to create a more flexible user experience.
Clustering Study Programmes	For study programme review, a Faculty/ Institute that offers more than one qualification or more than one specialization of a qualification at undergraduate level may opt to cluster several study programmes for a clustered review with the approval of the QAC.; To be eligible for 'clustering' several study programmes in

	a single 'Self-Evaluation Report', the below indicated requirements should be fulfilled: i). **at least 60%** of the standards considered in the Programme Review Manual is common to the programmes of study so clustered; ii). The maximum number of programmes that can be clustered is three (3) in accordance with the UGC directives. The cluster may consist of programmes with different windows of intake in the admission process, and/or different SLQF levels in the award of the qualification.
Co-curricular activities	Activities that are integrated into the academic curriculum and are considered an extension of the classroom. They are designed to enhance the academic learning experience and provide students with practical opportunities to apply their knowledge and skills. Examples of co-curricular activities include internships, practicums, research projects, and community service programs etc.
Corporate plan	Plan that focuses on setting the overarching strategic direction to ensure that institutions achieve the most important goals.
Course unit/module	A planned series of learning experiences in a particular subject /discipline offered by an institution during a defined period of time; a self-contained, formally structured unit of a programme of study.
Course specification	An officially approved concise description of a course of study which specifies course objectives, intended learning outcomes, course content, teaching-learning and assessment details including volume of learning (credits) and constructive alignment, grading system, recommended readings, compulsory or optional status for the programme to which the course is prescribed, the department responsible for offering it, and prior-learning requirements.
Creative work	A manifestation of creative effort including fine artwork (sculpture, paintings, drawing, sketching, performance art), dance, writing (literature), filmmaking, and composition.
Differently-abled students	Learners who require additional support or specialized services due to long- or short-term physical or mental impairment(s) that affect their ability to perform normal day-to-day activities.

Distance Education	An educational process and system in which all or a significant proportion of the teaching is carried out by someone, or something removed in space and time from the learner. Requires structured planning, well-designed courses, special instructional techniques, and methods of communication by electronic and other technology, as well as specific organizational and administrative arrangements.
Distance learning	A system and a process that connects learners to distributed learning resources. All distance learning, however, is characterized by separation/ distance of place and/or time between instructor and learner, amongst learners, and/or between learners and learning resources conducted through one or more media.
Document Management System (DMS)	Document management systems capture, store and retain documents and include functions such as document intake, drafting, generation templates, versioning, collaboration, security, metadata, access rights, approvals, distribution, search, repository organization, archiving and retention policy management, along with reporting and auditing on these functions.
Double-blind marking	Marking or grading answer scripts while being blinded to the co-examiner's marks or grades or comments.
Educational Technology	The study and application of techniques, systems, tools, and media used in education and training.
Extracurricular activities	Activities that are not part of the academic curriculum but are offered to provide students with opportunities for personal growth and development. These activities are usually voluntary and are designed to allow students to explore their interests and develop skills. Examples of extra-curricular activities include sports teams, music and drama clubs, and student organizations etc.
Ethics	The practice of applying a mutually agreed code of conduct based on moral principles to the day-to-day actions of individuals or groups within any organization.
Fallback option	A pathway for students registered for a programme of study leading to a particular qualification, to leave with a different qualification at a lower level at completion of the specified student registration period.

Formative Assessment	Formative assessment refers to the practice of using multiple assessments throughout a unit of study in order to gauge student achievement for the purpose of providing feedback and planning future instructions. It is useful for students for self-assessment of their progress and marks allocated will not be considered for the final grade. This is not synonymous with continuous assessment where marks are considered for the final grade.
Graduate Profile	Description of the threshold (minimum) levels of knowledge, skills, and attitudes that every graduate should achieve because of successful completion of a study programme. Graduate profiles are written at institutional and qualification levels.
Instructional Design and Development	The systematic and reflective process of translating principles of learning and instruction into plans for instructional materials, activities, information resources, and evaluation.
Learning Environment	The place and setting (infrastructure facilities, resources, and services) where learning occurs. A virtual learning environment is one in which a student is provided with tools and resources to learn both autonomously and with a virtual cohort of learners.
Learning Resources	The resources (physical, human and financial) available for the learning process which may be used by a learner (in isolation or with other learners) to facilitate learning.
Lifelong Learning	A philosophical concept in which learning is viewed as a long-term process beginning at birth and lasting throughout life; a process of accomplishing personal, social, and professional development throughout the lifespan of individuals to enhance the quality of life.
Management Information System (MIS)	A computerized integrated information collection, collation, analysis, and reporting system to support institutional management and decision-making processes.
Module	A formal learning experience encapsulated into a unit of study, usually linked to other modules to create a programme of study.
Non-formal Learning	A structured or semi-structured learning environment which does not lead to formalized certification.
Open Educational Resources (OER)	Educational resources are offered freely and openly for anyone to use and under some licenses to adapt, improve and re-distribute.

Outcome-based Approach	A comprehensive approach to organizing and operating an education system that is focused on and defined by the successful demonstrations of learning sought from each student (Spady, 1994). Approach in planning, delivering and assessing instruction focusing on desired outcomes students should display by the end of the course. programme. It specifies in advance what the student should be able to do at the culmination of a programme of study.
Peer Review	The process of evaluating the work process, or output of an individual or collective who are of the same professional category and function at the same milieu as the reviewer(s).
Policy	A statement of principles or intentions which serve as continuing guidelines for management in accomplishing the institution's mission, goals, and objectives.
Portfolio	A systematic collection of students' work that represents students' reflections, accomplishments, and achievements of goals over a specific period of time in one or more areas of the curriculum.
Prior Learning	Knowledge and skills or competencies acquired through previous formal or informal education or experience gained from a workplace.
Programme Learning Outcomes (PLOs)	Statements that describe the essential knowledge, skills, and attitudes that the graduates of a programme should be able to demonstrate upon successful completion of the programme.
Programme Management Structure	Consist of levels to effectively manage a programme in a way to attain the intended learning outcomes and successful completion of the programme.
Programme of Study	A stand-alone, officially approved curriculum (which includes coursework or research) followed by a student, to accomplish a pre-determined set of intended learning outcomes to become eligible to receive a recognized qualification awarded by a higher education institution.
Programme Specification	An officially approved document which provides a concise description of the entry requirements, graduate profile, programme learning outcomes, programme structure, compulsory and optional courses, the volume of learning (credit values), teaching-learning assessment strategies, examination regulations, grading mechanisms, exit pathways (fallback option), graduating requirements, progression opportunities and progression pathways upon successful completion of the study programme.

Progression	Vertical movement of learners from one level of education to the next higher level successfully or towards gainful employment.
Qualification	The award to which a formal programme of study contributes.
Qualifications Framework	A qualifications framework sets out all qualifications covered by the range of the framework as a hierarchy with qualification and level descriptors of the required achievement to attain the qualification.
Quality	The fitness for the purpose of a product or service according to a set of required standards with minimum cost to society (Commonwealth of Learning, 2006).
Quality Assessment	A process of evaluation of the performance of an institution or a programme based on certain established criteria.
Quality Assurance	The policies and procedures by which the universities/study programmes can guarantee with confidence and certainty that the standard of its awards and quality of its education provision and knowledge generation are being maintained. It also refers to the process of maintaining standards reliably and consistently by applying criteria of success in a programme, or institution.
Quality Enhancement	The continuous institutional effort to achieve a higher level of performance and quality that is better than what prevailed earlier. It is also defined as enhancing the performance efficiency of a HEI/system.
Reflective Practice	Methods and techniques that help individuals or groups reflect on their real-life experiences and actions in order to engage in a process of continuous learning.
Research	Rigorous intellectual activity which involves systematic investigation to generate new knowledge.
Review	A formal assessment of an entity (i.e. institution, programme, course, book etc.) with the intention of instituting change if necessary.
Review Judgement	The conclusion arrived at by a reviewer/review team of a study programme or university's overall effectiveness regarding quality of education provision.
Review Team	Group of trained professionals undertaking a quality monitoring or evaluation process.
Self-Assessment	Process of critically evaluating the past activities undertaken by self/organization to determine whether the expected standards have been achieved.

Self-Evaluation Report (SER)	A document prepared by an organization providing a description and analysis with supporting evidence of the effectiveness with which the organization discharges its responsibility for maintaining and improving standards while adhering to good practices.
Site Visit	Visit by an officially appointed review team to verify the information in the SER through the use of verbal, written and visual evidence.
Skill	The ability to perform a task adeptly, using experience and professional knowledge.
Sri Lanka Qualification Framework (SLQF)	A nationally consistent framework for all higher education qualifications offered in Sri Lanka, which identifies ten broad levels based on the volume of learning and learning outcomes expected from the holders of different qualifications..
Staff Development	Skills development, refresher programmes or other training provided for staff within or outside the institution to enable them to continuously update their knowledge and skills for effective and efficient performance and career advancement.
Standards	Measurable indicators that provide the basis of comparison for making judgements concerning the performance of an instructional activity, programme, or institution.
Statistical Analysis	The use of statistical data including varying variables, entities, and events to determine probabilistic or statistical relationships in a quantitative manner.
Strategic Plan	A specific and action-oriented, medium, or long-term plan of an institution to progress towards achieving a set of institutional goals as dictated by its vision and mission.
Student Engagement	The degree of attention, curiosity, interest, optimism, and passion that students show when they are learning or being taught, which extends to the level of motivation they have to learn and progress in their education.
Student Evaluation	Student evaluation can take two forms: 1. an assessment by learners of the service provided by the institution, be it solely of the classroom experience or of all aspects of the learning experience; 2. an assessment of students' learning by teachers.
Student Experience	The nature of the engagement of students with learning and teaching which may also include other aspects that facilitate learning.

Student Feedback	Gathering response/criticism from students at the end of a study program or an individual course unit for improving and refining the education that the HEI provides.
Student-Centred Learning (SCL)	Methods of teaching that shift the focus of instruction from teacher to student.
Subject Benchmark Statement (SBS)	Description of the key features of a study programme, intended learning outcomes and standards expected of graduates in a subject area, as deemed appropriate by the subject community. SBSs serve as reference points for developing study programmes.
Summative Assessment	Assessment of learning that takes place on completion of the learning activity or activities of an instructional unit..
Survey	The method of collecting information from a selected sample of individuals/documents to understand about a process, product, or service.
Teaching Portfolio	A professional document that summarizes a teacher's beliefs about teaching and provides evidence of the teacher's teaching experiences and abilities.
Transparency	An attribute characterized by openness, communication and assigned accountability.
Validation	Process of confirming the appropriateness of an entity; determination of the effectiveness of instructional materials or system.
Verification	The process used to prevent or rectify misstatements, whether done intentionally or unintentionally

Notes on Authors

Professor Emeritus E.R. Kalyani Perera, BSc Hons. Agric (Ceylon); MS Dairy Sci & PhD. Animal Sci (VPI&SU, USA); is a former Senior Professor in Animal Science at the University of Peradeniya. During 40 years of academic career with 34 years of postgraduate teaching and research experience, she has published ~150 research articles and authored 10 book chapters, textbooks and a dictionary. Presently, she is a member of the Governing Council of the University of Kelaniya and an Advisor to the QA Standing Committee of the UGC. She served as the Acting Director, QA Council of the UGC (2020-2021); National QA Consultant for Universities (2012-2016); QA Consultant, University of Sri Jayewardenepura (2017-2018, 2023); member of the Governing Councils of University of Moratuwa (2021-2022) and Uva Wellassa University (2019-2020); Senior Consultant, Matale City University Project (2020-2021) and Academic Consultant, Gampaha Wickramarachchi University

(2020-2021). She has been actively involved in quality assurance activities since 2002 and trained a large number of academics on quality assurance and curriculum development. She coordinated the formulation of Manuals for Institutional Review (2015) and Programme Review (2015), and contributed to formulating External Degree Review Manual (2014), Subject Benchmark Statements (2004 onwards) and Sri Lanka Qualification Framework (2015). She is the Lead Author of Postgraduate Programme Review Manual (2021), Institutional Review Manual (2023), and SLQF Level Certification Manual (2023).

Professor Emeritus Jennifer Perera MBBS, MD(Microbiology)(Col), MBA(Wales), PgDMedEd(Dundee), PgDWomen'sStu(Col), FNASSL, FSLCM is a former Senior Professor at the University of Colombo. She served as the Dean, Faculty of Medicine (2015-2020), Chair Professor Microbiology (2008-2021); Chairperson, Medicine Subject Benchmark Committee (2020); Chairperson Board of Study in Microbiology, PGIM (2010-2014); Member Board of Study in Medical Education, PGIM (2011-2018); Member, Sri Lanka Medical Council (2015-2020); Member National Research Council (2013-2016); Chairperson, Steering Committee on Biotechnology, National Science Foundation (2016-2018); Council member, National Academy of Sciences of Sri Lanka (2020-21); Member, Technical Committee of Sri Lanka Accreditation Board (2009 to date); Member National Committee on Women (2005-2006, 2012-2014); Board Member, Centre for Womens' Research; President, Sri Lanka Medical Association (2015), SLAAS Section A,(2000), Sri Lanka College of Microbiologists (2001), Vaccine and Infectious Diseases Forum of Sri Lanka (2010-2012). She has trained and examined undergraduates and postgraduates for over four decades and served in numerous committees related to curriculum and examinations. She has reviewed medical curricula of over ten countries for the Sri Lanka Medical Council and conducted several institutional and programme reviews for the UGC. She has received many presidential awards for research and continues to conduct research in clinical sciences and medical education and currently serves the University of Wayamba.

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Professor Sudhira De Silva is a Chair Professor of the Department of Civil and Environmental Engineering, Faculty of Engineering, University of Ruhuna (UoR). He obtained his PhD and MEng from the Saitama University, Japan and a PG Dip in Structural Engineering and BSc Eng from the University of Moratuwa, Sri Lanka. He served in several administrative positions including Head, Department of Civil and Environmental Engineering, Chairman, Faculty Quality Assurance Cell, Coordinator, Engineering Education Centre of the Faculty of Engineering, and Chair/Member of Technical Evaluation Committees at the University of Ruhuna. He is a Fellow of the Institution of Engineers Sri Lanka (IESL) and a Member of the Structural Engineering Society of Sri Lanka. Professor De Silva served as a Program Reviewer appointed by QAC / UGC since 2014 and he contributed as a Chair / Panel member in several Universities and also as an evaluation panel member of Accreditation of Engineering Programmes by the Institution of Engineers Sri Lanka (IESL). Professor De Silva has published more than 150 research articles and supervised several postgraduate students in PhD, MPhil and MSc degrees. He was awarded the Fulbright Advanced Research and Lecturing Award for his academic and research excellence. Also, Professor De Silva served as Co-chair in several international conferences and symposia.