

# College of Pharmacy

## Periodic Program Review Handbook

### PharmD Program

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## Content

<b>1- Periodic Program Review</b>	<b>3</b>
<b>2- Scope of Periodic Program Review</b>	<b>3</b>
<b>3- Arrangements for planning and reviewing the quality of the program</b>	<b>5</b>
<b>4- Types of comprehensive review</b>	<b>5</b>
<b>5- Measurement Policy</b>	<b>6</b>
<b>6- Monitoring of Program Quality Assurance</b>	<b>7</b>
<b>7- Improvement Plan</b>	<b>8</b>
<b>8- Summary of Periodic review process cycle</b>	<b>9</b>

## **Periodic Program Review**

Collecting and analyzing information on a regular basis according to specific criteria to identify points of strength and weakness in order to improve performance represents the basis for the development and quality assurance of the program. A Periodic Program Review (PPR) guideline is designed to provide an opportunity for reflection on the academic experience of students, academic standards, and enhancement of the program progress over a period of time. This is undertaken through the measurement of student performance, the impact of change, the merits of curriculum design, and strategies for learning, teaching, and assessment beyond the annual program reporting cycle. The PPR examines the program in greater depth, re-evaluating the need for it, checking on how effectively it is achieving its mission and objectives, and considering any changes which need to be made. PPR will enable a program to reflect on its strengths and areas for improvement in order to improve the experience of the students. This PPR is to be implemented in accordance with King Khalid University standards and requirements, and also with the requirements of the NCAAA in the Kingdom of Saudi Arabia.

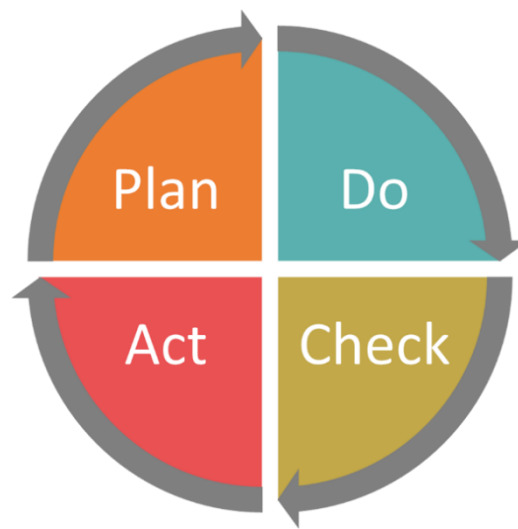
**Scope of Periodic Program Review** PPR should evaluate both quality and standards, considering the following aspects:

- Enhancement of the curriculum
- Enhancement of the student learning experience
- Enhancement of teaching and assessment
- Enhancement of the organization and management of the program
- Enhancement of teaching and learning resources

The reflection and evaluation will lead to the planning for the future operation of the program.

## The Deming Cycle

PPR through follow-up, evaluation, and period reports are crucial for corrective measures to improve the program performance and achievements. To ensure the quality of academic programs, a fixed system should be in place to regulate the sequence of different stages in the program's academic performance planning, implementation, and follow-up, as shown in the figure below. PPR will be carryout through the applying a simplified and comprehensive Deming Cycle model which is a most important model used to determine different stages of the quality system to ensure continuous quality assurance improvement.



*Figure 1: Deming Cycle*

The Deming Cycle consists of the following stages:

**Plan:** During this stage, plan what you want to change and make measurements. Diagnose what strength points that must be enhanced and the weak points that the plan will work to remedy.

**Do (Implementation):** Implement the planned activities and note the effectiveness of those activities in achieving the desired activities.

**Check (Evaluation):** It is the stage in which the measured results are evaluated and analyzed, solutions for improvement are proposed, and implementation methods are determined.

**Act (Correction):** Act on the study's findings. The end result should be more modifications and changes. In case the desired results and goals are not achieved, we go back to the planning step and try again.

## **Arrangements for planning and reviewing the quality of the program**

1. Preparation of program and course specifications according to the NCAAA guidelines and rules, as well as a variety of program reports that offer information bases for the planning of periodic program review.
2. Courses specifications are prepared to give a clear guide for the instructor in course topics, teaching strategies, and assessment methods.
3. Course report reports are prepared by the course coordinator/instructor at the end of each semester. The course report will be submitted to the college quality assurance committee after it is a review by the department board and/or the department quality representative.
4. The college quality assurance committee prepare the annual program report using the data and information provided in courses reports and prepare the action plans for noticed weakness and/or ameliorate the academic performance
5. Preparation of all other requirements for program periodic review such as survey reports, graduate attributes report, KPIs reports, PLOs measurement reports, Mission/vision achievement report, curriculum reviews update, annual program reports, and other internal or external review reports

## **Types of comprehensive review**

**A- Internal review:** done in two stages

### **First Stage:**

- All documents mentioned above related to the program will be sent by the quality assurance committee for checking by the faculty members.
- An annual meeting will be conducted with student representatives and faculty members.

### **Second Stage:**

- A comprehensive report will be submitted by the quality assurance committee to the quality and development committee, which includes strengths and weakness points and improvement recommendations.
- The report will be submitted to the College Board for further action.

## **B- External review and independent opinion**

- An annual meeting will be conducted with the college of pharmacy advisory committee and alumni representatives. In addition, an external reviewer will be invited every five years to review the program, facilities, and resources and a report will be provided.
- These review reports and meeting minutes will be done periodically in order to evaluate the college' academic processes, and activities. In addition, it will guide the college to improve its program mission, strategic goals, and its academic outcomes.

## **Measurement Policy**

Both performance measurement and program evaluation can be used to identify program weaknesses and assess whether the program is succeeding in its objectives. Performance measurement is a continuous procedure that uses pre-selected performance metrics to track and report on a program's accomplishments. However, program evaluation makes use of measurement and analysis to respond to detailed inquiries about how effectively a program is fulfilling its objectives and why. Consequently, program evaluation data explains why we get such results, and performance measurement data describes program achievement.

The program measurement policy is made up of two primary parts:

- **Learning outcome assessment:** Course and program learning outcome assessments are both included in learning outcome assessment. Two methods are used to assess program learning outcomes: direct (based on course learning outcome assessment) and indirect (based on surveys conducted from exit students, alumni, and employers).
- **Stakeholder Surveys:** Surveys are conducted by all the major stakeholders of the program (Table-1).

**Table 1: Stakeholder Surveys**

<b>Name of Survey</b>	<b>Timeline of Survey</b>	<b>Respondents</b>	
<b>Student's evaluation of the quality of the course</b>	At the end of every semester	Students of all levels	Internal
<b>Students' satisfaction with the offered services</b>	At the beginning of the Second Semester	Level 5 or 6 Students	
<b>Students' evaluation of quality of learning experience in the program (Final Level Survey)</b>	At the beginning of the first Semester	Level 12 Students	
<b>Graduate employability and enrolment on post-graduate programs</b>	At the end of the third semester	Level 12 Exit Students	
<b>Employer's evaluation of the program graduate's proficiency</b>	During the first semester	Employers	External
<b>Graduate employability and enrolment on post-graduate programs</b>	During the first semester	Alumni	
<b>Self-satisfaction rate of faculty</b>	At the end of the second Semester	Employees	

**Monitoring of Program Quality Assurance**

In order to maintain the quality of the PharmD program for a long term, a self-assessment should be carried out the program every five years to ensure that it remains in accordance with the reaccreditation requirements of the organization. The self-evaluation process involves a retraction from the continuous process and a revision of all areas of the program based on present developments during a specific period, and on the potential changes that have occurred in the environment in which the students are being prepared to work. The quality assurance activities at the program level are presented in table 2 below.

**Table 2: The Quality Assurance and Accreditation Procedures at Programs/Faculty levels**

<b>Activity Name</b>	<b>Start of Semester</b>	<b>End of Semester</b>	<b>Annually</b>	<b>Every 5 years</b>
<b>Programs level Activities</b>				
<b>Strategic Plan Development</b>				√
<b>PLOs report preparation and analysis / Reviewing PLOs at program level</b>			√	√
<b>Program Specification Review</b>				√
<b>Student's evaluation of the quality of the course</b>		√		
<b>Course Report Preparation</b>		√		
<b>Course Recommendation Reporting/Action Plan</b>	√		√	
<b>Course File Preparation and Submission</b>		√		
<b>College, Program mission and goals SWOT Analysis</b>				√
<b>Program KPI Report Preparations and Analysis</b>			√	
<b>Annual Program Report Preparation/ Revision</b>			√	
<b>Program Self- Study Report</b>				√
<b>KPI Execution Follow-up</b>		√		
<b>Advisory committee report</b>			√	
<b>External reviewer report (if any)</b>				√

### **Improvement Plan**

Based on the above-mentioned assessment mechanism, an annual improvement plan is developed while considering the 5 yearly strategic plan and action plan requirements. Specifically defined performance indicators are used to measure the progress and achievement of the improvement plan.



## Summary of Periodic review process cycle

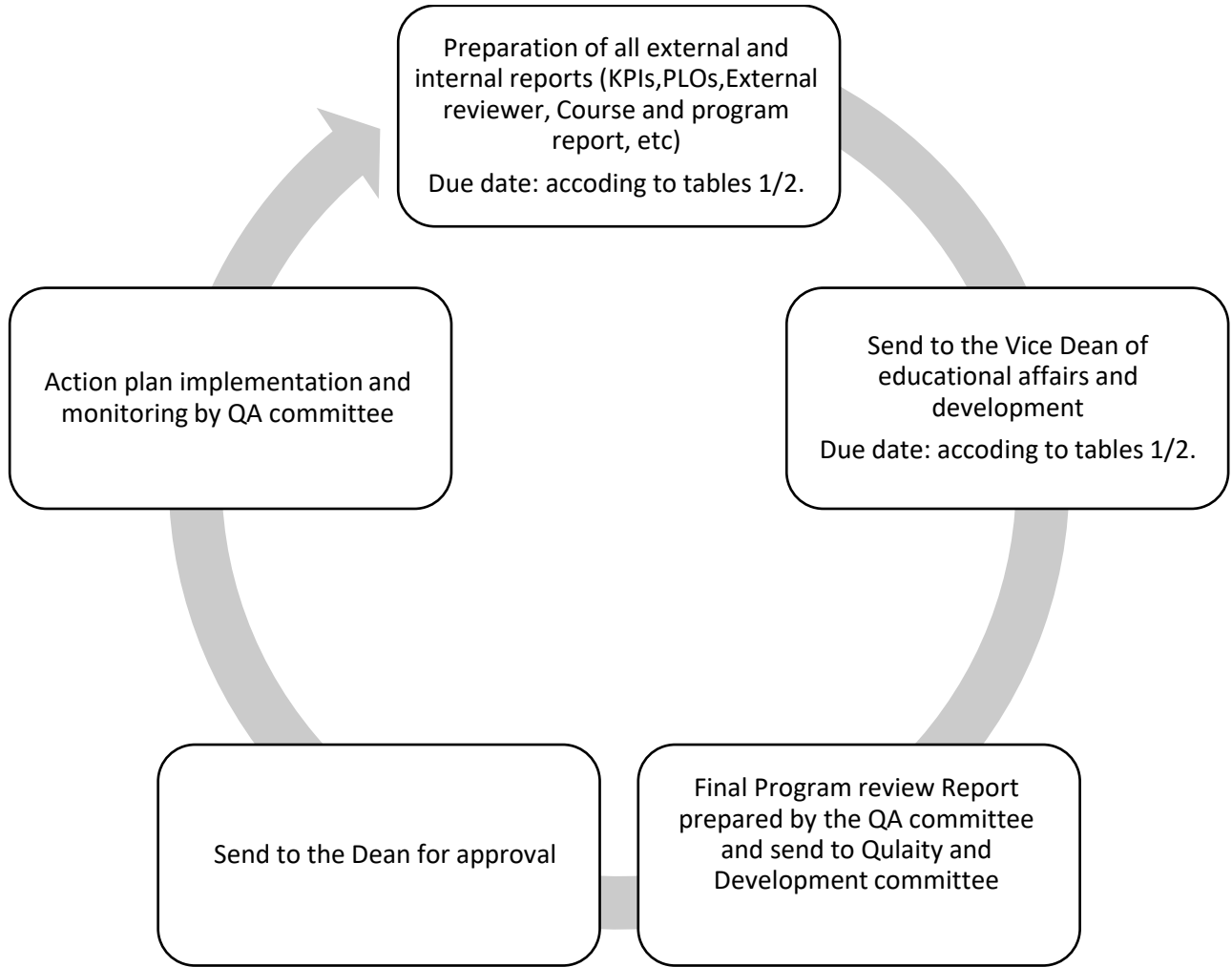


Figure 2: Periodic review process cycle

**The End**