

College of Pharmacy

Periodic Program Review Handbook

PharmD Program

v 2023





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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.

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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

Name of Survey	Timeline of Survey	Respondents		
Student's evaluation of	At the end of every	Students of all		
the quality of the	semester	levels		
course				
Students' satisfaction	At the beginning of the	Level 5 or 6	1	
with the offered	Second Semester	Students		
services				
Students' evaluation of	At the beginning of the	Level 12 Students	Internal	
quality of learning	first Semester		internal	
experience in the				
program				
(Final Level Survey)				
Graduate employability	At the end of the third	Level 12 Exit		
and enrolment on post-	semester	Students		
graduate programs				
Employer's evaluation	During the first	Employers		
of the program	semester			
graduate's proficiency				
Graduate employability	During the first	Alumni	External	
and enrolment on post-	semester		LACCITIO	
graduate programs				
Self-satisfaction rate of	At the end of the	Employees		
faculty	second Semester			

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

Activity Name	Start of Semester	End of Semester	Annually	Every 5 years			
Programs level Activities							
Strategic Plan Development				√			
Self-Scale Evaluation Report				٧			
Program Specification Review				٧			
Student's evaluation of the quality of the		٧					
course		_					
Course Report Preparation		٧					
Course Recommendation	V		V				
Reporting/Action Plan							
Course File Preparation and Submission		V					
Program mission and goals SWOT				٧			
Analysis Reparation and Reporting							
Program KPI Report Preparations and			٧				
Analysis							
Annual Program Report Preparation/			٧				
Revision							
Program Self- Study Report Development				٧			
KPI Execution Follow-up		٧					
Advisory committee report			٧				
External reviewer report				٧			

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

Preparation of all external and internal reports (KPIs,PLOs,External reviewer, Course and program report, etc)

Due date: accoding to tables 1/2.

Action plan implementation and monitoring by QA committee

Send to the Vice Dean of educational affairs and development

Due date: accoding to tables 1/2.

Send to the Dean for approval

Final Program review Report prepared by the QA committee and send to Qulaity and Development committee

Figure 2: Periodic review process cycle

The End