Annual Program Report

(Bachelor)

Program: **Bachelor degree of Medicine and Surgery**
Program Code (as per Saudi Standard Classification of Educational Levels and Specializations): **091201**
Qualification Level: **Bachelor's Degree (Undergraduate Program)**
Department: **N/A**
College: **Medicine**
Institution: **University of Jeddah**
Academic Year: **2023 - 2024**
Main Location: **Health specialties campus**
Branches offering the Program (if any): • …N/A…… • …….. • ……..

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A. Program Statistics

Item	Number
Number of students enrolled in the program	1293
Number of students who started the program (in reporting year)	226
Number of students who completed the program	323

B. Program Assessment

1. Program Learning Outcomes Assessment and analysis according to PLOs assessment plan *

#	Program Learning Outcomes	Assessment Methods (Direct and Indirect)	Targeted Performance (%)	Assessment Results
Knowledge and Understanding				
K1	State relevant details, based on scientific and clinical knowledge, of the healthy and diseased human body during different stages of human development.	Quiz Mid Term Exam Final Exam Focus Group	**75%**	**69.4**
Skills				
S1	Demonstrate basic, scientific and clinical skills relevant to the healthcare setting.	Objective Structured Clinical Examination (OSCE) Objective Structured Practical Examination (OSPE) Focus Group	**75%**	**76.1**
S2	Apply clinical reasoning, decision-making, critical-thinking and problem-solving skills to medical practice.	Objective Structured Clinical Examination (OSCE) Objective Structured Practical Examination (OSPE) Direct observation of procedural skills (DOPS) Focus Group	**75%**	**76.7**
S3	Design optimal clinical management plans for patients with common and life-threatening medical conditions.	Objective Structured Practical Examination (OSPE) Logbook and Portfolio Focus Group	**75%**	**83.4**
S4	Implement a patient-centered approach ensuring their needs and safety by adhering to national and international healthcare policies and regulations.	Objective Structured Clinical Examination (OSCE) Continuous Assessment Focus Group	**75%**	**77.1**

S5	Practice appropriate verbal and non-verbal communication with patients, their families, the care team, the interdisciplinary team, other healthcare professionals, and external authorities.	VIVA Voce (Oral exam) Performance-Based Assessment Objective Structured Clinical Examination (OSCE) Focus Group	**75%**	**83.4**
S6	Apply research skills, information technology and health informatics to healthcare.	Projects Logbook and Portfolio Critical Thinking Multiple-choice questions (MCQs) Focus Group	**75%**	**78.3**
S7	Integrate principles of healthcare promotion and disease prevention into clinical practice aimed at improving quality of life.	Projects Logbook and Portfolio Focus Group	**75%**	**81.8**
Values, autonomy, and responsibility				
V1	Combine Islamic, ethical, legal, and professional principles in healthcare practice and disease prevention.	OSCE Logbook and Portfolio Projects Focus Group	**75%**	**82.0**
V2	Illustrate ongoing professional development while working collaboratively and constructively within a team.	Performance-Based Assessment Projects Focus Group	**75%**	**83.8**

*Attach a separate report on the program learning outcomes assessment results for male and female sections and for each branch (**if any**).

For more detailed PLOs report

Strengths:

Enhanced Measurability

The transition from 17 to 10 PLOs has significantly improved the measurability of learning outcomes. This change addresses previous challenges where certain PLOs were difficult to assess consistently. The new PLOs have been designed to provide clear, quantifiable metrics that can be uniformly applied across all relevant courses.

Key Points:

- **Clarity and Focus:** Each new PLO is precise and focused, making it easier to measure specific competencies and skills.
- **Uniform Assessment:** The streamlined PLOs facilitate a more consistent evaluation process, ensuring that all students are assessed against the same clear standards.

Alignment with National Standards

The revised PLOs align well with both the Saudi Med standards and the National Qualifications Framework (NQF). This alignment ensures that the educational outcomes are not only relevant within the national context but also meet international benchmarks for medical education.

Stakeholder Support

The extensive stakeholder feedback process has been instrumental in shaping the new PLOs. With 92.3% approval from stakeholders, the new PLOs have strong backing from faculty, students, and industry professionals.

Key Points:

- **Broad Consensus:** High levels of stakeholder approval indicate broad consensus on the relevance and effectiveness of the new PLOs.
- **Informed Changes:** Stakeholder input has been critical in identifying areas of improvement and ensuring that the new PLOs address the needs and expectations of all parties involved.

Comprehensive Educational Framework

The new PLOs provide a more holistic approach to medical education, integrating knowledge, skills, and values in a coherent framework. This approach ensures that students develop not only the necessary clinical skills but also the professional attitudes and ethical standards required in medical practice.

Key Points:

- **Integrated Learning:** The new PLOs cover a comprehensive range of competencies, ensuring that students receive a well-rounded education.

- **Balanced Approach:** By incorporating knowledge, skills, and values, the PLOs ensure that graduates are prepared for all aspects of medical practice, from clinical skills to ethical decision-making.

Improved Curriculum Design

The transition to 10 PLOs has streamlined the curriculum, reducing redundancy and overlap. This change has made the curriculum more efficient and easier to navigate for both students and faculty.

Key Points:

- **Efficiency:** The new structure reduces unnecessary repetition, allowing for more focused and efficient teaching and learning.
- **Curriculum Coherence:** The streamlined PLOs ensure that all aspects of the curriculum are interconnected, providing a clear pathway for student development.

Positive Initial Outcomes

Early assessments and pilot evaluations of the new PLOs have shown significant improvements in both student performance and satisfaction. These positive outcomes suggest that the new PLOs are effectively enhancing the educational experience.

Key Points:

- **Improved Scores:** Initial data indicate improvements in student performance across several key areas.
- **Student Satisfaction:** Increased student satisfaction suggests that the new PLOs are meeting the needs and expectations of learners.

Comprehensive Data Collection in 23-24

For the academic year 23-24, the data collection process was thorough and included both direct and indirect measurements of PLOs. This comprehensive approach ensures a complete assessment of student competencies and the effectiveness of the educational program.

Key Points:

- **Direct Measurements:** These include objective assessments such as exams, practical tests, and observed clinical skills, providing clear evidence of student performance.
- **Indirect Measurements:** These include surveys, self-assessments, and feedback from stakeholders, offering additional insights into student learning and program effectiveness.
- **Complete Data:** The inclusion of both types of measurements provides a well-rounded view of student achievements and areas for improvement, ensuring that all aspects of the educational experience are evaluated.

Aspects that need improvement with priorities:
• Develop distinct Knowledge PLOs for basic and clinical years. • Integrate new teaching materials and resources.
• Train faculty on active learning techniques. • Incorporate interactive and practical sessions.
• Review and revise current assessment tools; Incorporate a mix of formative and summative assessments.
• Partner with hospitals and clinics and utilize simulation labs.
• Offer supplemental instruction and tutoring.

2. Students Evaluation of Courses

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDPH-214	Foundation Course	71	32%	4.14	1. Improve the clarity and detail of the course plan.
MDAN-214	General Anatomy	56	25%	4.22	1. Enhance Instructor-Student Interaction and Feedback Quality
MDAN-212	Cells and tissue	75	34%	4.31	1. Enhance knowledge of course plan and assessment methods from the start
MDAN-211	Embryology	74	34%	4.27	1.Enhance Instructor-Student Interaction and Feedback Quality
MDBM-215	Clinical Biochemistry	66	30%	4.2	1. Vigilant announcements of the course and assessments plans including grading distribution 2. Update and rearrange course content presentation and indicate content relevance to parallel courses

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDPT-225	General Pathology	118	54%	3.14	1. Revise assessment methods, clarity, and effectiveness, incorporating varied evaluation techniques and clear criteria
MDMB-224	Medical Microbiology	213	97%	4.07	1. Gather student feedback, offer targeted professional development, and enhance teaching methods. Increase availability for student support
MDPR-222	Medical Pharmacology	217	99%	3.91	1. Enhance Instructor-Student Interaction and Feedback Quality
MDBM-224	Nutrition and Metabolism	113	51%	3.73	1. Explain methodologies of assessments and questions to the students initially without aWecting the assessments' quality 2. Update and rearrange course content presentation
MDGN-222	Basics of Medical Genetics	112	51%	4.05	1. Revision of the grade distribution and methods of assessments 2. Frequent formative assessments 3. Introduce interactive elements, such as group discussions, CBL, or flipped classroom to make the course more engaging

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDPH-221	BLS	209	95%	4.01	1. Course guide improvement 2. Learning environment Improvement
MDMB-314	Blood and Lymph module	116	74 %	3.98	1. Educational Facilities Improvement 2. Revise assessment methods, clarity, and effectiveness, incorporating varied evaluation techniques and clear criteria
MDPH-315	Cardiovascular System Module	112	73 %	3.37	1. Improve time allocated for the course in order to increase student material retention
MDPR-314	Respiratory System Module	101	65 %	3.79	1. Balance the course workload with the number of credit hours This module needs at least 3 weeks 2.Enhance Teaching Environment and Methods 3. Revise Evaluation and assessment Methods

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDBM -315	**Musculoskeletal System Module**	**99**	**64 %**	**3.59**	1. Regular Assessments Implement regular formative assessments to monitor student progress and provide timely feedback. This helps identify areas where students may be struggling and allows for early intervention. 2. Assessment Variety Use a variety of assessment methods to evaluate student learning which can provide a more comprehensive evaluation of student performance. This can include quizzes, projects, written exams, practical exams, assignments, and presentations. 3. Alignment with Learning Objectives (outcomes) and national standards. 4. Peer Observations and Feedback 5. Recognition and Rewards 6. Foster a positive learning environment by ensuring that students feel supported and valued. This includes providing adequate resources, creating a welcoming atmosphere, and promoting a culture of respect and inclusivity.

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDAN-316	Nervous System Module	98	64 %	3.81	1. Enhance Instructor-Student Interaction and Feedback Quality
MDPT-324	Gastrointestinal Module	63	41 %	3.92	1. Modify the schedule to better align with the content requirements, allowing adequate time for each section. 2. Use a variety of assessment types to suit different learning styles, and continuously assess and refine the assessment approach based on feedback
MDPH-324	Endocrine Module	103	67 %	4.09	1. Review current assessment methods and alignment with course objectives
MDAN-324	Reproduction Module	65	45%	4.38	1. Enhance the depth and comprehensiveness of the course content by introducing more detailed and specialized topics
MDPT-325	Urinary System Module	102	66 %	3.99	1. Improve overall student experience through better engagement and communication and fair assesment

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDPH-322	ECE	43	28 %	3.82	1. Consistent classroom throughout the module. 2. Review the assessment criteria and evaluation forms and make sure the students know these forms at the beginning of the module
MDMS-471	Clinical Skills	80	46%	3.72	1.Educational Facilities Improvement 2.Separating the clinical skills course
MDMS-472	Elective 1	37	24%	4	1. Spreading awareness about course objectives and learning outcomes
MDBM-481	Laboratory Medicine	14	8 %	3.8	1. Increase the diversity of the lectures 2. PBL and case Discussion
MDBI-482	Basic imaging	94	54 %	4.23	1. Feedback Sessions 2. More Engaging Teaching Style
MDNT-483	ENT	153	88 %	4.24	1. Increase the course duration to allow more clinical exposure , better retention and comprehension of the course material 2. Educational Facilities Improvement

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDOP-484	Ophthalmology	72	42 %	4.03	1. Unify clinical exposure Opportunities 2.Implement assessment tool for skills
MDCM-485	Community M	107	62 %	3.94	1. Educational Facilities: Improve the adequacy of teaching and technological resources. 2. The effort required while studying the course is proportional to the number of credit hours it takes: Align the course workload with the number of credit hours
MDPT-486	Forensic Medicine	82	47 %	3.79	1. Request recruitment/ collaboration of teaching staff specialized in Forensic Medicine
MDSR-487	Professionalism	47	27 %	4.09	1. Consider providing clearer assessment criteria and offering more formative feedback. 2. Ensure that teaching activities and assessments are designed to support the achievement of the outcomes

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDSR-593	Elective 2	55	38 %	3.77	1. Spreading awareness about course objectives and learning outcomes
MDOG-591	OB/GYN	19	13 %	3.87	1. Adopt modern educational methods such as Problem-Based Learning (PBL) or Flipped Classroom to increase student interaction and participation. 2. Educational Facilities Improvement
MDCM-592	Pediatrics	67	47 %	3.75	1. Modify the continuous assessment methods and scores. It will be focused on hospital evaluation through case presentation and physical examination at the end of the course. 2. Review the course content and curriculum to be updated with common pediatrics problems.

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDPD-501	Psychiatry	56	45 %	3.5	1. Ensure timely release of exam results 2. Establish Course schedule and ensure timely and through delivery of lectures 3. Establish A regular Feedback Mechanisms 4. Improve transparency and fairness in grading 5. Visit to Al-Amal Hospital
MDMS-502	Anesthesia	80	56 %	4.08	1.Evaluate the existing assessment methods to ensure they are reflective of the course objectives. 2. Design and integrate activities focused on problem-solving, analytical, and critical thinking skills. 3. Identify gaps in recourses.
MDIC-503	Family Medicine	104	60 %	3.74	1.Evaluations forms Improvement 2. Educational Facilities Improvement
MDMS-611	Medicine	19	31%	4.04	1. Educational Facilities Improvement

Course Code	Course Title	Number of Students Who Evaluated the Course	Percentage of Participants	Evaluation Results	Developmental Recommendations
MDSR-621	Surgery	22	36 %	3.9	1. Convenient availability of an electronic version of the study guide for every student 2. Introducing additional rubric tools in the assessment and evaluation process 3. Converting non-rubric toot into rubric tool

For more detailed analysis

3. Students Evaluation of Program Quality

Evaluation Date: 23-24	Number of Participants: 32
Students Feedback	**Program Response**

• **Program Goals**
  • **Alignment with Market and Societal Needs**: The program goals align well with market demands, the development of necessary professional skills, and societal contributions. This strong alignment ensures that students are well-prepared for their careers and understand the broader impact of their education.
• **Program Content**
  • **Relevance and Modernity**: The content of the program is well-integrated with its goals, keeping pace with modern developments in the academic field and supporting continuous education and practical training. This ensures that students acquire relevant and up-to-date knowledge and skills necessary for their professional development.	

Areas of Improvement: • Students feel underprepared in research, indicating a need for more structured training and hands-on experience. • • **Teaching Staff** • **Need for Enhanced Interaction and Feedback**: The evaluation reveals a need for better interaction between faculty and students, as well as more consistent and constructive feedback. Improving these areas is crucial for enhancing the learning experience and ensuring that students feel supported throughout their studies. • • **Facilities and Equipment** • **Inadequacy of Physical Resources**: There are concerns about the adequacy and quality of the facilities, such as libraries, classrooms, and laboratories, as well as the availability of necessary electronic resources. This suggests that the current infrastructure may not be fully supporting the educational needs of the students, potentially hindering their academic progress.	1. The curriculum will be revised to incorporate more hands-on research opportunities and support. 2. A new feedback system will be implemented, ensuring that students receive timely and constructive feedback throughout their studies. 3. The program will strengthen its academic advising system, ensuring that each student receives regular, personalized support from faculty advisors. 4. An assessment of the facilities will be conducted, and necessary upgrades will be prioritized to enhance the learning environment.

Suggestions for improvement: • Introduce more research-focused courses and mentorship opportunities. • Implement a more systematic and frequent feedback process. • Provide dedicated academic advisors and regular check-ins. • Expand and update library and electronic resources. • Invest in upgrading classrooms, labs, and equipment.	5. The program guide will be made readily available at the beginning of the program, with additional resources provided to help students understand its content and requirements.

For more detailed analysis:

4. Scientific research and innovation during the reporting year

Activities Implemented	Number
Published scientific research	139
Current research projects	N/A
conferences organized by the program	N/A
Seminars held by the program	5
Conferences attendees	48
Seminars attendees	153

Discussion and analysis of scientific research and innovation activities:

1. Publication of Scientific Research

- **Research Output**: With 139 published scientific research papers, the program shows active engagement in research activities.
- **Improvement Plan**:
  - **Interdisciplinary Collaboration**: To further enhance research quality, the program plans to encourage collaboration with colleagues from fields like computer science and statistics.
  - **Funding Opportunities**: Announcing available funding sources will help researchers secure the necessary support for their projects.

2. Current Research Projects

- **Data Tracking**: The lack of available data on current research projects suggests a need for better tracking and reporting processes.
- **Improvement Plan**:
  - **Monitoring Plan**: Developing an action plan to monitor key performance indicators will ensure more accurate tracking of ongoing research activities.

3. Conferences and Seminars

- **Conferences**: No conferences were organized this year, but 48 participants attended external conferences, indicating active participation in the broader academic community.
- **Seminars**:
  - **Seminar Activities**: The program held 5 seminars with 153 attendees, reflecting active engagement within the institution.
- **Improvement Plan**:
  - **Enhancing Research Environment**: The program plans to introduce initiatives like "Research Day," lectures, workshops, and a Summer Research School to further develop research skills among students and faculty.
  - **Communication**: Updating the email list and improving announcements on the Faculty of Medicine's website will help keep everyone informed about opportunities and events.

4. Key Performance Indicators and Evaluation

- **Improvement Plan**:
  - **Regular Evaluations**: Conducting evaluations twice a year to assess metrics like citations, research funding, and publications will help track progress and guide future strategies.

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5. Community Partnership

Activities Implemented	Brief Description*
خفف دمك (Blood donation)	Timing of implementation: 19/09/2023 Number of Beneficiaries: 40 Number of Volunteers: 10
تصوير الرياضة العلاجية لمرضى التصلب المتعدد بالتعاون مع جمعية وسم(MS initiatives)	Timing of implementation: 26-29/10/2023 Number of Volunteers: 15 Number of Beneficiaries: 3000
يدان نظيفتان لمجتمع صحي (Clen Hands)	Timing of implementation: 15/10/2023 Number of Volunteers: 10 Number of Beneficiaries: 100
صحة أفضل(Better Health)	Timing of implementation: 16/10/2023 Number of Volunteers: 10 Number of Beneficiaries: 250
صفي دمك (Blood donation)	Timing of implementation: 15/10/2023 Number of Volunteers: 10 Number of Beneficiaries: 30
صحة الرجل(Men's Health)	Timing of implementation: 18/10/2023 Number of Volunteers: 20 Number of Beneficiaries: 150
مبادرة سلسلة لقاءات توعوية الطبية لكرسي الأمير خالد الفيصل للقدوة الحسنة (Participation in Prince Khalid AL Faisal Awareness meetings)	Timing of implementation: 29/12/2023 – 30/1/2024 Number of Volunteers: 10 Number of Beneficiaries: 100
المشاركة في مبادرة التطوع الصحي والتعاون المشترك بين تجمع جدة الصحي ثاني وكلية طب (PARTICIPATION IN THE HEALTH VOLUNTEERING INITIATIVE AND THE JOINT COOPERATION BETWEEN THE JEDDAH HEALTH ASSEMBLY II AND	Timing of implementation: 2/2024 Number of Volunteers: 10 Number of Beneficiaries: 100

THE COLLEGE OF MEDICINE AT THE UNIVERSITY OF JEDDAH (VOLUNTEERING IN THE 'A DOCTOR FOR EVERY FAMILY' PROGRAM)	
مبادرة مجتمعية بعنوان مشاء (Community Initiative titled 'Masha'a')	Timing of implementation: 10/5/2024 Number of Volunteers: 15 Number of Beneficiaries: 486
حملة توعوية بعنوان معا نحن حمل صحي (Pregnancy inititatives)	Timing of implementation: 8/5/2024 Number of Volunteers: 14 Number of Beneficiaries: 100
حملة توعوية عن مرض اضطراب طيف التوحد (Autisim inititatives)	Timing of implementation: 8/5/2024 Number of Volunteers: 14 Number of Beneficiaries: 100
حملة توعوية عن مرض التلاسيميا (Thalassemia initiatives)	Timing of implementation: 14/5/2024 Number of Volunteers: 15 Number of Beneficiaries: 40

*including timing of implementation, number of participants, and outcomes.

Comment on community partnership activities**

The program has been actively engaged in a variety of community service initiatives. These activities have involved a significant number of volunteers and have reached a wide range of beneficiaries, reflecting the program's commitment to community health and well-being.

Future Plans for 2024-2025

1. **Expanding Project Scope**:
   - The program plans to increase the number of community service projects by 25%, focusing on partnerships with local voluntary associations and organizations like the Red Crescent.
2. **Strengthening Community Engagement**:
   - New agreements will be established with local government and NGOs to support participation in major seasonal events such as Ramadan, sports gatherings, Hajj, and Umrah.
3. **Enhancing Faculty and Student Involvement**:
   - The program aims to boost faculty participation in volunteer programs by 25% and student participation by 35%. Initiatives include recognized volunteer hours, a community service award, and the establishment of a student-led community service committee.
4. **Implementing Feedback Mechanisms**:
   - Post-event surveys will be introduced to gather feedback and improve future community service activities, ensuring they remain relevant and impactful.
5. **Promoting Sustainability and Health Awareness**:
   - Efforts will be made to integrate sustainable development topics into student projects, supported by a dedicated fund. Additionally, the program will focus on specific health campaigns, such as raising awareness about the dangers of vaping and participating in WHO days.

**including overall evaluation of the program's performance in these activities (if any).

Community Services Unit report 23 -24

6. Other Evaluation (if any)

(e.g., independent reviewer, program advisory committee, and stakeholders (e.g., faculty members, alumni, and employers)

Evaluation method: program advisory committee	Date: 16/05/2024	Number of Participants: 12
Summary of Evaluator Review		**Program Response**
Strengths: • The program's mission received high scores for alignment with both the university's and the college's missions, indicating a strong coherence in the educational objectives across the institution. • The program's goals were highly rated for reflecting the needs of medical education, showing that the program is well-attuned to current educational demands in the medical field. • The program's learning outcomes were rated highly for their alignment with both the National Qualifications Framework and the SaudiMeds Framework, demonstrating adherence to recognized standards.		
Points for Improvements: • The committee suggested simplifying the program's mission statement by removing specific references like "accredited standards" to maintain focus on the core goals without being constrained by potentially changing standards.		• Efforts are underway to expand the knowledge-based learning outcomes to ensure they provide a more comprehensive educational experience. • The simulation lab is progressing with new technologies being

• There was a recommendation to expand the knowledge-based outcomes to provide a more comprehensive educational experience for students, particularly in integrating national and international healthcare policies.	introduced to enhance student training. • We are planning to increase faculty development opportunities, with more training sessions and workshops in the near future. • A request for additional computational labs has been submitted to the administration to support our teaching needs. • We have recently signed an agreement with the Ministry of Health, which will provide more practical training opportunities for our students.
Suggestions for development: • The committee recommended adopting the latest technologies in medical education, such as simulation and virtual reality, to enhance students' clinical and practical skills. This could also include integrating more interactive teaching methods. • The need to continuously develop faculty skills and improve the program's infrastructure was highlighted. This could involve regular training sessions for faculty and upgrades to the technical facilities used in teaching. • The committee suggested building strategic partnerships with governmental and private entities. Collaborations with major hospitals, research centers, and medical companies could provide additional training opportunities, support joint research initiatives, and offer educational resources.	

*Attach independent reviewer's report and stakeholders' survey reports (if any).

For Stakeholders Surveys Reports

C. Program Key Performance Indicators (KPIs)

Including the key performance indicators required by the NCAAA.

No	KPI	Targeted Value	Actual Value	Internal Benchmark	Analysis	New Target
1	Students' Evaluation of quality of learning experience in the program	*3.6*	**3.52**	*3.37*	**The actual average score (3.52) is slightly below the target of 3.6. This evaluation reflects the students' perception of several aspects, including student services, learning resources, program quality, and technical services. While the program is performing close to the target, there is room for improvement. The internal benchmark (3.37) provides context from the previous years, showing some progress. The new target has been set at 3.5, which aims for incremental enhancement in the overall learning experience across these areas.**	**3.5**
2	Students' evaluation of the quality of the courses	4.3	**3.88**	4.2	**The actual value (3.88) did not meet the target benchmark (4.3), indicating that course quality as perceived by students requires**	**3.9**

					attention. The new target has been adjusted to 3.9, aiming for gradual improvement.	
3	**Completion rate**	97%	**97%**	95%	**The actual completion rate (0.968) is very close to the target (0.97), showing strong performance in helping students complete their programs on time. The new target remains the same, reflecting continued commitment to maintaining high completion rates.**	**97%**
4	**First-year students retention rate**	100%	**94.7%**	99.70%	**The retention rate (0.9475) did not meet the perfect target (1), indicating that there is room for improvement in retaining first-year students. The new target has been slightly adjusted to 0.95, which may reflect a more realistic goal.**	**95%**
5	**Students' performance in the professional and/or national examinations**	90%	**634.14**	88%	**The significant discrepancy between the target (0.9) and actual value (634.14) is due to a change in how results are reported by the Saudi Commission for Health**	**638**

					Specialties. This change has affected the comparability of the performance metrics, leading to a misalignment in how the KPI is measured. Moving forward, the new target has been set at 638, reflecting this updated reporting method.	
6	**Graduates' employability and enrolment in postgraduate programs**	95%	**36.67%**	**0**	**The actual enrolment rate in postgraduate programs is 36.67%, well below the target of 95.00%. However, it is important to consider that this low rate may be due to the fact that the graduates completed their studies only a month ago, which might have influenced their decision or readiness to enroll in further studies. The new target of 40% reflects a strategic effort to gradually increase postgraduate enrolment as these graduates settle into their post-graduation plans.**	**40%**
7	**Employers' evaluation of the**	3.75	**4.39**	**0**	**he actual score (4.39) exceeded the target benchmark**	**4.3**

	program graduates proficiency				**(3.75), indicating that employers perceive graduates as highly competent. The new target has been set at 4.3, aiming to maintain or slightly improve this high level of competence.**	
8	**Ratio of students to teaching staff**	6:1	**6.5:1**	6.9:1	**The actual ratio (6:1) met the target exactly, reflecting a balanced and manageable student-to-teacher ratio. The new target remains unchanged, indicating satisfaction with the current ratio.**	**6.4:1**
9	**Percentage of publications of faculty members**	*20%*	**41%**	**17.35**	**The actual percentage (0.41) more than doubled the target (0.2), suggesting a strong focus on research and publication by the faculty. The new target has been set at the achieved level, aiming to sustain this productivity.**	**41%**
10	**Rate of published research per faculty member**	2.3	**2.4**	**2.1**	**The actual rate (1.0) fell short of the target (2.3), indicating that fewer research papers were published per faculty member than anticipated.**	**2.4**

					The new target has been adjusted to 1.3, suggesting a more realistic goal for future research output.	
11	Citations rate in refereed journals per faculty member	*33*	7.5	32.5	The actual citation rate (7.5) is significantly below the target (33), indicating challenges in gathering comprehensive citation data. The new target has been adjusted to match the current level, likely reflecting the difficulties in collecting and consolidating this information accurately.	7.5

Comments on the Program KPIs and Benchmarks results:

For KPI-P-01, Students' Evaluation of Quality of Learning Experience, the target level was set at 3.6, while the actual performance achieved was 3.52, slightly below the target. However, it still represented an improvement over the internal benchmark of 3.37. A new, more realistic target of 3.5 has been set to reflect these trends. This KPI shows positive progress in students' evaluation of the learning experience, although efforts are still needed to meet the original expectations.

In KPI-P-02, Students' Evaluation of the Quality of Courses, the target was set at 4.30, but the actual evaluation was lower at 3.88, which is also below the internal benchmark of 4.20. The new target benchmark has been adjusted to 3.9 to align

with current performance trends. The gap between the actual and target values suggests a need for improvement in course quality to better meet student expectations.

Moving to KPI-P-03, Completion Rate (On-Time Graduation), the target level was set at 97%, and the actual level achieved was 97%, meaning the target was successfully met. The internal benchmark for the previous period was set at 100%, indicating a slight decrease, but the program is still performing well in supporting students toward on-time graduation. The new target remains at 97% to maintain this success.

For KPI-P-04, First-Year Students Retention Rate, the target was 100%, but the actual retention rate was 94.75%, which was slightly below both the target and the internal benchmark of 99.71%. A new target of 95% has been set to reflect a more achievable goal moving forward. This KPI indicates solid retention rates, though efforts are needed to improve support for first-year students to reduce dropout rates further.

In KPI-P-05, Students' Performance in Professional and/or National Examinations, the target level was 90%, but the actual score was reported as 634.14 due to a change in reporting methods by the Saudi Commission for Health Specialties. This shift has led to a discrepancy between the target and actual values, so a new target of 638 has been set to reflect this updated reporting format.

For KPI-P-06 A, Graduates' Employability and Enrollment in Graduate Programs, the target was set at 95%, but the actual performance was significantly lower at 53%. This is also a marked improvement from the previous internal benchmark of 0%. A new target of 55% has been established, indicating a more achievable goal while addressing the gap between actual and desired graduate outcomes.

KPI-P-06 B, Enrollment in Postgraduate Programs, had a target level of 95%, but the actual result was only 36.67%. Similar to KPI-P-06 A, this shows a significant gap between expectations and current outcomes. A new target of 40% has been set to reflect a more realistic goal, acknowledging the challenges in postgraduate enrollment.

For KPI-P-07, Employers' Evaluation of Graduates' Proficiency, the target was 3.75, and the actual score achieved was 4.39, which exceeds both the target and the new target benchmark of 4.3. This KPI highlights strong employer satisfaction with the graduates' proficiency, reflecting the success of the program in preparing students for the workforce.

In KPI-P-08, Ratio of Students to Teaching Staff, the target was set at 6:1, and the actual ratio was also 6:1, meaning the program met its target. The internal benchmark was slightly higher at 6.9:1, showing an improvement in the student-to-staff ratio, which supports better teaching and learning experiences. The new target remains at 6:1 to maintain this balance.

For KPI-P-09, Percentage of Publications by Faculty Members, the target was 20%, and the actual performance significantly exceeded this, reaching 41%. This represents an impressive achievement, far surpassing both the target and the

internal benchmark of 17.35%. The new target has been set at 41% to maintain this high level of faculty research output.

In KPI-P-10, Rate of Published Research per Faculty Member, the target was 2.3, but the actual result was only 1, which is below both the target and the internal benchmark of 2.1. The new target has been adjusted to 1.3, reflecting current research productivity and setting a more achievable goal moving forward.

Lastly, KPI-P-11, Citations Rate in Refereed Journals per Faculty Member, had a target of 33 citations per faculty member, but the actual result was much lower at 7.5, which is also below the internal benchmark of 32.55. A new target of 7.5 has been set to reflect current citation trends and the need to improve research impact.

For more detailed analysis

D. Challenges and difficulties encountered by the program (if any)

Teaching	• Technology Utilization: The integration of technology in teaching is not fully optimized, requiring further development to improve the effectiveness of digital tools and resources in education.
Assessment	
Guidance and counseling	
Learning Resources	• Some courses reported having insufficient resources, impacting the learning experience. • Utilization of technology in teaching is not optimal, requiring further development
Faculty	
Research Activities	
Others	

E. Program development Plan

No.	Priorities for Improvement	Actions	Action Responsibility
1	Train faculty on active learning techniques	Conduct workshops and professional development programs on active learning strategies	Medical Education Committee
2	Incorporate interactive and practical sessions	Include more simulation-based learning, problem-based learning (PBL), and case studies	Faculty Members
3	Offer supplemental instruction and tutoring	Provide additional tutoring and support sessions for students struggling with key concepts	Faculty Members
4	Partner with hospitals and clinics and utilize simulation labs	Strengthen partnerships with clinical institutions for practical training and enhance the use of simulation labs	Vice Dean of Clinical Training

- Attach any unachieved improvement plans from previous report.
- The annual program report needs to be discussed in department council

F. Approval of Annual Program Report

COUNCIL / COMMITTEE	**COLLEGE COUNCIL**
REFERENCE NO.	**44435**
DATE:	**17/9/2024**