



# **TERMS OF REFERENCE (ToR) AND STANDARD OPERATING PROCEDURES (SOP)**

**OF THE  
FACULTY OF MEDICAL SCIENCES  
UNIVERSITY OF SRI JAYEWARDENEPURA**

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## **INTRODUCTION**

A Terms of Reference (TOR) document authorizes a particular committee or a position and details the specific authority that committee or position has to oversee, and a Standard Operating Procedure (SOP) is a set of step-by-step instructions compiled by a committee to help the members carry out routine operations. A SOP aims to achieve efficiency, quality output and uniformity of performance, while reducing miscommunication and failure to comply with regulations.

To enable the different committees in the faculty of Medical Sciences, University of Sri Jayewardenepura to function smoothly and fulfill the responsibilities, TORs and SOPs were set up by each committee and approved by the Internal Quality Assurance Cell (IQAC) of the faculty and by the faculty board, Senate and the Council. These documents explain the objectives of each committee, its scope, membership composition and responsibilities.

This document will fulfill the requirements of the programme reviews of the Faculty of Medical Sciences, USJ, under the Quality Assurance Cell. It is the responsibility of the chairperson of each committee/unit to inform the chairperson of the IQAC/FMS of any revisions to the TOR or the SOP and obtain approval of the IQAC/FMS prior to their implementation. Each committee shall revise and modify the TORs when deemed necessary and send for approval of the faculty board.

This document is prepared in five sections viz., TOR's related to academic matters, administrative matters, exam related, student related and others.

This is the second version of the document.

# **1. ACADEMIC**

## **1.1 DEANS ADVISORY COMMITTEE (DAC)**

### **1. OBJECTIVE**

To entertain new ideas, monitor and evaluate the progress of the curriculum, research and discuss issues with regard to development of the Faculty.

### **2. SCOPE**

- Develop and monitor degree programmes
- Physical and human resources
- Curriculum development
- Teaching, learning and assessment activities/ resources/ environment
- Research activities and excellence
- Postgraduate education
- Innovative practices
- Organizational and operational considerations including IT enabled systems and human resource development
- Communication and outreach services
- Performance review with monitoring of positioning /ranking
- Development of expertise and specialized services.

### **3. MEMBERSHIP**

The committee is headed by a Chairperson, who is the Dean of the Faculty.

The committee consists of the,

- All Heads of Departments
- Cadre chair Professors or nominee
- Phase I, II, III coordinators
- Clinical coordinator
- Coordinator-Human Biology
- Director-Examinations
- Coordinator-Diploma in Counseling
- Senior Assistant Registrar/Assistant Registrar(Secretary)
- Any other academic staff member can be requested to be present on invitation.

When members wish to resign from committee or when the designated positions are changed, staff member should inform the chairperson in writing.

### **4. MEETINGS**

- The committee meets once a month on the last Wednesday of each month, in case the meeting cannot be held on the stipulated date an alternate date is communicated to the membership via e-mail in advance.
- The minutes and agenda are circulated via e-mail prior to the meeting.
- The venue is the Board room of the Faculty of Medical Sciences.
- Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the secretary.
- Minutes will be taken by the Secretary of the committee.

### **5. REPORTING**

The extracts of the minutes are tabled and discussed at the Faculty Board meeting and sent to the Senate for approval.

## **1.2 CURRICULUM DEVELOPMENT COMMITTEE (CDC)**

### **1. OBJECTIVES/SCOPE**

- To streamline the activities related to the curriculum of medical undergraduates of the Faculty of Medical Sciences, University of Sri Jayewardenepura, to align with the graduate profile, vision and mission of the faculty and the university.
- To streamline the activities related to the curriculum of Human Biology undergraduates of the faculty of Medical Sciences, university of Sri Jayewardenepura to align with vision, mission of the faculty and University.
- To facilitate and monitor curricular revision activities, teaching learning activities and to discuss problems encountered during the process of introducing curricular revision at all phases of training to align with the medical Subject Benchmark Statement and SLQF statement.
- To review and revise the curriculum periodically according to university and faculty policies and national needs considering feedback from external stakeholders such as ministry of health, extended faculty staff, and professional bodies including professional colleges.

### **2. MEMBERSHIP**

The committee is headed by the Dean who is the chairperson, and the committee consists of all heads of departments, all professors, phase I, II and II coordinators and human biology coordinator, Clinical coordinator and Director Examinations. The secretary is appointed by the Dean from the membership which is approved by the faculty board.

### **3. MEETINGS**

- The committee meets on the 2<sup>nd</sup> Wednesday of each month. The agenda of the meeting and the minutes of the previous meeting are communicated to the membership via email each month one week prior to the meeting.
- In case the meeting cannot be held on the stipulated date an alternate date is communicated to the membership via e-mail in advance
- The meeting is held in the board room of the Faculty of Medical Sciences at 11.30 a.m.
- It is the responsibility of the secretary to maintain the records of the confirmed minutes.

### **4. REPORTING**

The extracts of the minutes are tabled and discussed at the next month's Faculty Board meeting and sent to the Senate approval after Faculty Board approval.

## **1.3 CURRICULUM REVIEW SUB-COMMITTEE (CRSC)**

### **1. OBJECTIVES**

The objectives of the Curriculum Review Sub Committee (CRSC) are,

- To align the programme learning outcomes with the Sri Lanka Qualification Framework outcomes and make necessary changes when needed.
- To streamline the programme learning outcomes with the vision, mission and goals of the faculty and the university.
- To align the intended learning outcomes of subjects, modules or streams with the programme learning outcomes of the Faculty of Medical Sciences University of Sri Jayewardenepura.
- To align the lesson outcomes with the respective intended learning outcomes of subjects, modules or streams of the Faculty of Medical Sciences, University of Sri Jayewardenepura.
- To align the methods of assessment with the respective intended learning outcomes of subjects, modules or streams of the Faculty of Medical Sciences University of Sri Jayewardenepura.
- To facilitate, monitor and evaluate the intended learning outcomes, lesson outcomes and assessment of subjects, modules or streams of the Faculty of Medical Sciences, University of Sri Jayewardenepura.
- To facilitate the inclusion of advancements in medical field into the curriculum in a timely manner in par with the national and international standards

### **2. SCOPE**

This CRSC's scope is to,

- Align the programme learning outcomes with the Sri Lanka Quality Framework indicators.
- Streamline the programme learning outcomes with the vision, mission and goals of the faculty and the university.
- align the intended learning outcomes with the lesson outcomes and with the
- Assessments of subjects, modules or streams with the programme learning outcomes of the Faculty of Medical Sciences University of Sri Jayewardenepura.
- Continuously monitor and evaluate the curriculum of the Faculty of Medical Sciences, University of Sri Jayewardenepura.
- Organize workshops with eminent national and international medical educators for continuous medical education.

### **3. MEMBERSHIP**

- Membership is called for via online applications, among the Faculty members who are senior lecturers and above, with the announcement at the Faculty Board
- Applications are directly submitted via email to the Dean of the Faculty
- The membership composition is six to seven members from the Faculty
- The Dean appoints the six to seven members to the CRSC at the Faculty Board
- The Head or the Chair of the department of medical education will be a member of the CRSC without nomination

The following membership will be co-opted:

- Coordinators of all 3 phases
- Convener or a nominee from each phase
- Director of Examination
- Chairperson, Quality Assurance Cell (IQAC-FMS)
- Coordinator, Human Biology
- The Dean convenes a CRSC meeting, and the Chairperson and the Convener are nominated by the CRSC.
- The names of the Chairperson and the Convener is sent for approval to the faculty board and senate.
- The meetings are chaired by the Chairperson, or a nominated Chairperson if the



Chairperson is excused for that particular meeting.

- When members wish to resign from CRSC or when the designated positions are changed, the staff member should inform the Chairperson in writing two months in advance.
- If a committee member is absent for more than 3 consecutive meetings in a year, without a valid excuse, this member will be removed from the CRSC.

#### **4. MEETINGS**

- The CRSC meets monthly on first Wednesday at 1.00pm and this meeting is communicated to the membership through email or at the previous meeting.
- Urgent CRSC meetings can be convened if and when required. The meeting to be convened should be communicated to the membership through WhatsApp group at least 24 hours before the meeting.
- The minutes and agenda are circulated via email one week prior to the meeting by the convener.
- The venue is the board room of the Faculty of Medical Sciences or virtual.
- Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the convener.
- Minutes will be taken by the convener of the CRSC

#### **Quorum**

- The quorum for a CRSC shall be 50% of the membership, plus one.
- Where a loss of quorum is identified, the meeting may be adjourned until a time the Chairperson determines
- Any matters for decision considered when the meeting is inquorate must be subsequently ratified by the Executive Committee or at the next CRSC meeting before those decisions can be actioned.

#### **5. REPORTING**

The extracts of the minutes are tabled and discussed at the next curriculum development Committee meeting, and extracts will be ratified at the Faculty Board of the Faculty of Medical Sciences and consequently at the Senate of the University of Sri Jayewardenepura

## **1.4 CURRICULAR MONITORING, EVALUATION & REVISION COMMITTEE**

### **1. SCOPE**

To monitor and review the teaching learning activities and assessments and address the concerns related to the MBBS curriculum and to ensure that all phases of teaching/training align with the Subject Benchmark Statement and SLQF statement.

- To monitor and review the teaching learning activities and assessments of the existing MBBS curriculum and to address the issues to ensure its implementation.
- To ensure that all phases of teaching/training align with the mission, goals and objectives of the institution, national needs, and global trends and practices
- To review the curriculum when needed in order to comply with the Sri Lanka Qualification Framework (SLQF), other reference points such as Subject Benchmark Statement (SBS), requirements of relevant professional bodies including Sri Lanka Medical Council (SLMC) and World Federation for Medical Education (WFME).

### **2. MEMBERSHIP**

The committee shall comprise of the following members appointed by the faculty board and approved by the senate, USJ.

- Two members each from Phase I/ II/ III
- Member nominated from the curriculum revision subcommittee (CRSC)
- Member nominated from the core cases development committee
- Coordinator Internal Quality Assurance Cell (IQAC)
- Head/Department of Medical Education
- Director/Department of Examination
- Chief examination coordinator for Phase I/ II (will be appointed by the members of the committee from among the members.
- appointed when examinations are held)
- Chairperson and secretary will be appointed by the members of the committee from among the members

### **3. MEETINGS**

- The committee will meet monthly
- The agenda of the meeting and the minutes of the previous meeting will be communicated to the members via email one week prior to the meeting.
- In case the meeting cannot be held on the scheduled date an alternate date is communicated to the membership via e-mail in advance
- The meeting will be held in the board room of the Faculty of Medical Sciences
- It is the responsibility of the secretary to maintain the records of the confirmed minutes.

#### **Quorum**

- The quorum for the committee shall be 50% of the membership, plus one.
- The meeting will be adjourned if the quorum is inadequate and the Chairperson of the committee will decide the new date and the time.

### **4. REPORTING**

The extracts of the minutes will be tabled and discussed at the curriculum development committee, and will be ratified at the Faculty Board of the FMS and subsequently at the Senate of the USJ.

## **1.5 PHASE 1 ACADEMIC COMMITTEE**

### **1. OBJECTIVES**

The objectives of the phase 1 academic committee are to streamline the academic activities of the 1<sup>st</sup> and 2<sup>nd</sup> year medical undergraduates delivered under different Departments and Streams.

### **2. SCOPE**

To discuss teaching learning activities in the Modules, problems encountered student feedback and coordinate periodic review & revision of the curriculum and assessments in the Phase 1.

### **3. COMMITTEE**

- The committee is headed by a Chairperson, and the committee consists of the Dean of the Faculty, Chair professors, Chairpersons, Conveners of the modules/streams conducted in phase 1, Heads of the departments that are involved in phase 1 academic activities, Head/Medical Education, Director examination and Coordinator- orientation programme and Coordinator IQAC, Coordinator Human Biology programme, academic staff member representing Phase 3, academic staff member representing Faculty of Dental Sciences and co-opted members as necessary and two students from first and second year. All members including the chairperson and the secretary are appointed by the Dean at the Faculty Board and approved at the Senate for a period of three years. The chairperson is a senior member from a department that conducts academic work in Phase 1.
- When members wish to resign from committee or when the designated positions are changed, they inform the chairperson in writing and the new member appointed by the module is nominated to the faculty board and confirmed at the Senate.
- In the event of the resignation of the chairperson or the secretary, the committee members will appoint them during a committee meeting.

### **4. MEETINGS**

- The committee meets once a month on the 1<sup>st</sup> Thursday of each month, in case the meeting cannot be held on the stipulated date an alternate date is communicated via e-mail to the membership.
- The meeting is held in the board room of the Faculty of Medical Sciences, and if the board room is not available an alternate venue is informed via e-mail
- Minutes are taken by the secretary of the committee and the minutes and agenda are circulated one week prior to the meeting.
- All communication regarding meetings and the minutes and agenda are circulated via e-mail.
- Once the minutes are confirmed, they will be filed and maintained by the secretary.

### **5. REPORTING**

The extracts of the minutes are tabled and discussed at the Curriculum Development Committee (CDC) and at the Faculty Board meetings and then sent to the Senate.

## **1.5.1 CHAIRPERSON PHASE 1 ACADEMIC COMMITTEE**

### **1. OBJECTIVES**

The objectives of the chairperson are to conduct the phase 1 academic committee, to streamline the academic activities of the 1<sup>st</sup> and 2<sup>nd</sup> year medical undergraduates.

### **2. RESPONSIBILITY**

- Liaise with the chairpersons, conveners of the modules conducted in the 1<sup>st</sup> and 2<sup>nd</sup> years and the heads of the departments that are involved in phase 1 for the smooth running of the Phase 1 academic activities.
- Preparation of the academic calendar in consultation with phase 1 academic committee, the director examinations and the clinical coordinator.
- Preparation of the exam time tables for the continuous assessments conducted during the 1<sup>st</sup> and 2<sup>nd</sup> year of the undergraduate curriculum according to the dates stipulated in the academic calendar
- Preparation of the exam time tables for the 1<sup>st</sup> Examination for MBBS Degree (main and repeat) according to the dates stipulated in the academic calendar
- To fix dates for the scrutiny and pre-results/results board meetings of the 1<sup>st</sup> MBBS Examination (main and repeat) in consultation with heads of the departments, Dean and the Director-examination
- Table and discuss any issues/information/notices communicated from the Vice Chancellor, Dean, academic staff or students that are related to Phase 1 academic activities
- To discuss with the Dean of the Faculty any problems that the chairperson may encounter that needs the intervention by the Dean

### **3. MEETINGS**

Meetings are held monthly on the 1<sup>st</sup> Thursday of each month, in the event the chairperson is unable to attend an alternate chairperson is appointed from among the senior members of the committee prior to the meeting.

### **4. REPORTING**

- The chairperson reports the salient points of the minutes to the curriculum development committee and to the faculty board meetings and matters discussed at the academic committee are discussed at these two forums.
- The chairperson submits the academic calendar in consultation with the Phase 2 and 3 coordinators and the clinical coordinator before the end of the preceding year.
- The Phase 1 examination timetables are submitted to the Faculty Board for approval before the scheduled examinations

## **1.6 PHASE 2 ACADEMIC COMMITTEE**

### **1. OBJECTIVES**

The objectives of the phase 2 academic committee are to streamline the academic activities of the 3<sup>rd</sup> and 4<sup>th</sup> year medical undergraduates delivered under different Departments and Streams.

### **2. SCOPE**

To discuss teaching learning activities in the modules, problems encountered in student feedback at the end of each module and coordinate periodic review and revision of the curriculum and assessments in the Phase 2.

### **3. COMMITTEE**

- The committee is headed by
  - a Chairperson
- The committee consists of
  - the Dean of the Faculty
  - chair professors and professors
  - heads of the departments that are involved in phase 2 academic activities
  - chairpersons, conveners of the modules/streams conducted in the 3<sup>rd</sup> and 4<sup>th</sup> years
  - director examination
  - clinical coordinator
  - coordinator IQQA,
  - coordinator Human Biology programme\as necessary students from the 3<sup>rd</sup> and 4<sup>th</sup> years
- All members including the chairperson and the secretary are appointed by the Dean at the faculty board and approved at the senate. The chairperson is a senior member from a department that conducts academic work in the 3<sup>rd</sup> and 4<sup>th</sup> year.
- When members wish to resign from committee or when the designated positions are changed, they inform the chairperson in writing and the new member appointed by the module is nominated to the faculty board and confirmed at the senate.
- In the event of the resignation of the chairperson or the secretary, the committee members will appoint them during a committee meeting.

### **4. MEETINGS**

- The committee meets once a month on the 1<sup>st</sup> Thursday of each month, in case the meeting cannot be held on the stipulated date an alternate date is communicated via e-mail to the membership.
- The meeting is held in the board room of the Faculty of Medical Sciences, and if the board room is not available an alternate venue is informed via e-mail
- Minutes are taken by the secretary of the committee and the minutes and agenda are circulated one week prior to the meeting.
- All communication regarding meetings and the minutes and agenda are circulated via e-mail
- Once the minutes are confirmed, they will be filed and maintained by the secretary

### **5. REPORTING**

The extracts of the minutes are tabled and discussed at the Curriculum Development Committee (CDC) and at the Faculty Board meetings and then sent to the senate.

## **1.6.1 CHAIRPERSON PHASE 2 ACADEMIC COMMITTEE**

### **1. OBJECTIVES**

The objectives of the chairperson are to conduct the phase 2 academic committee, to streamline the academic activities of the 3<sup>rd</sup> and 4<sup>th</sup> year medical undergraduates.

### **2. RESPONSIBILITY**

- The chairperson's responsibility is to liaise with the chairpersons, conveners of the modules conducted in the 3<sup>rd</sup> and 4<sup>th</sup> years and the heads of the departments that are involved in phase 2 for the smooth running of the Phase 2 academic activities.
- Preparation of the academic calendar in consultation with the chairperson phase 1 academic committee, the director examinations and the clinical coordinator.
- Preparation of the exam time tables for the continuous assessments conducted during the 3<sup>rd</sup> and 4<sup>th</sup> year of the undergraduate curriculum according to the dates stipulated in the academic calendar
- Preparation of the exam time tables for the 2<sup>nd</sup> Examination for MBBS Degree Part 1 main and repeat examination (held at the end of the 3<sup>rd</sup> year) and 2<sup>nd</sup> Examination for MBBS Degree Part 2 main and repeat examination (held at the end of the 4<sup>th</sup> year) according to the dates stipulated in the academic calendar
- To fix dates for the scrutiny and pre-results/results board meetings of the 2<sup>nd</sup> Examination for MBBS Degree Part 1 (main and repeat) and 2<sup>nd</sup> Examination for MBBS Degree Part 2 (main and repeat) in consultation with heads of the departments, Dean and the Director-Examinations
- Table and discuss any issues/information/notices communicated from the Vice Chancellor, Dean, academic staff or students that are related to Phase 2 academic activities
- To discuss with the dean of the Faculty any problems that the chairperson may encounter that needs the intervention by the dean

### **3. MEETINGS**

Meeting are held monthly on the 1<sup>st</sup> Thursday of each month, in the event the chairperson is unable to attend an alternate chairperson is appointed from among the senior members of the committee prior to the meeting.

### **4. REPORTING**

- The chairperson reports the salient points of the minutes that are submitted to the curriculum development committee and to the faculty board meetings and matters discussed at the academic committee are discussed at these two forums.
- The chairperson submits the academic calendar in consultation with the Phase 1 and 3 coordinators, the clinical coordinator before the end of the preceding year.
- The Phase 2 examination timetables are submitted to the Faculty Board for approval

## **1.7 PHASE 3 ACADEMIC COMMITTEE**

### **1. OBJECTIVES**

The objectives of the phase 3 academic committee are to streamline the academic and clinical activities of the 3<sup>rd</sup>, 4<sup>th</sup> years and final year medical undergraduates delivered under clinical departments and three training hospitals viz., Colombo South Teaching Hospital (CSTH), Sri Jayewardenepura General Hospital (SJGH) and Base Hospital Homagama (BHH), to discuss teaching learning activities and problems encountered during clinical training and to review and revise clinical training and teaching and learning activities depending on problems encountered by students and extended faculty trainer feedback.

### **3. COMMITTEE**

- The committee is headed by a Chairperson, and the committee consists of the Dean of the Faculty, all members of the clinical departments, director examination and clinical coordinator. Chairperson and the secretary are appointed by the Dean at the faculty board meeting and approved at the senate. The chairperson is a member from a clinical department that conducts clinical training in the final year.
- When members wish to resign from committee or when the designated positions are changed, they inform the chairperson in writing and the new member appointed by the module is nominated to the faculty board and confirmed at the senate.
- In the event of the resignation of the chairperson or the secretary, the committee members will appoint them during a committee meeting.

### **4. MEETINGS**

- The committee meets once in two months on the 3<sup>rd</sup> Thursday of every other month. If there is an urgent or important matter to discuss during the month when there is no phase 3 meeting an emergency meeting will be called. This will be communicated via e-mail to the membership.
- The meeting is held in the seminar room of the ward 23 of the Colombo South Teaching Hospital and if the seminar room is not available an alternate venue is informed via e-mail
- Minutes are taken by the secretary of the committee appointed by the committee members and the minutes and agenda are circulated one week prior to the meeting.
- All communication regarding meetings and the minutes and agenda are circulated via e-mail
- The minutes are confirmed and the conformed minutes are filed and are the responsibility of the secretary

### **5. REPORTING**

The extracts of the minutes are tabled and discussed at the Curriculum Development Committee (CDC) and the faculty board meetings and then sent to the senate.

## **1.7.1 CHAIRPERSON PHASE 3 ACADEMIC COMMITTEE**

### **1. OBJECTIVES**

The objectives of the chairperson to conduct the phase 3 academic committee is to streamline the academic activities and clinical training of the 3<sup>rd</sup>, 4<sup>th</sup> and final year medical undergraduates.

### **2. RESPONSIBILITY**

- The chairperson's responsibility is to liaise with the heads of the clinical departments and trainers of the extended faculty who are involved in teaching and training during 3<sup>rd</sup>, 4<sup>th</sup> years and final year regarding teaching learning activities and assessments.
- Preparation of the academic calendar and training schedule in consultation with the Dean, chairperson phase 2, phase 3 academic committee, the director examinations and the clinical coordinator to make final year students eligible for the earliest possible common MCQ papers scheduled by the medical and dental standing committee, University Grant Commission (UGC).
- Preparation of the examination time tables for the Final Examination for MBBS Degree (main and repeat) according to the dates stipulated by the UGC medical and dental Standing committee.
- To fix dates for scrutiny, results and pre results board meetings of the main and repeat final MBBS exam in consultation with heads of clinical departments, Dean and Director – Examination.
- To table and discuss any issues /information/notices communicated from the Vice chancellor, Dean, academic staff or students that are related to the phase 3 academic activities.
- To discuss with the dean of the Faculty any problems that the chairperson may encounter that needs the intervention by the dean

### **3. MEETINGS**

Meetings are held two monthly on the 3<sup>rd</sup> Thursday of every other month, in the event the chairperson is unable to attend an alternate chairperson is appointed from among the senior members of the committee prior to the meeting.

### **4. REPORTING**

- The chairperson reports the salient points of the minutes of the meeting that are submitted to the curriculum development committee and to the faculty board meetings. The confirmed minutes are tabled at the senate meeting.
- The chairperson submits final MBBS examination time table to the faculty board for approval



## **1.8 CLINICAL COORDINATOR**

### **1. OBJECTIVE**

The objective of the clinical coordinator is to coordinate and supervise all processes relevant to clinical training of 3<sup>rd</sup>, 4<sup>th</sup> and final year medical undergraduates.

### **2. SCOPE**

Supervise and guide the preparation of clinical schedules of 3<sup>rd</sup>, 4<sup>th</sup> and final year medical students, adhering to the minimum standards of clinical training recommended by Sri Lanka Medical council

### **3. RESPONSIBILITIES**

- Ensure that all the students get equal opportunities regarding their main and short appointments when preparing the clinical schedules.
- Plan and schedule the clinical orientation program before the commencement of clinical training and inform it to the phase III coordinator and other responsible personnel.
- Check that the extended faculty members are officially informed about the relevant appointment 1-2 weeks prior to sending the students.
- Coordinate and participate in meetings with the extended faculty whenever necessary as directed by the Dean.
- Coordinate with the Phase II chairperson when scheduling the examinations and CBML programme and allow provision for them in between the clinical appointments.
- Interact with the extended faculty wherever necessary to address their queries and issues.
- Take the assistance of the deputy clinical coordinator when carrying out responsibilities.
- To ensure that each student completes the recommended pre professorial appointments before starting their final year by checking the clinical cards.

### **4. APPOINTMENT OF THE CLINICAL COORDINATOR**

The clinical coordinator is appointed by the Dean. The Dean calls for interested applicants via e-mail. If there are more than one applicant a committee is appointed by the faculty board to select the most suitable candidate.

### **5. REPORTING**

The clinical coordinator discusses any important matter at the Curriculum Development Committee (CDC) and at the Faculty Board meetings.

## **1.9 COORDINATOR ORIENTATION PROGRAMME**

### **1. OBJECTIVES**

The objectives of the coordinator are to prepare the orientation timetable in consultation with Coordinator IT and Language and communication to familiarize the new entrants to the faculty of medical sciences, University of Sri Jayewardenepura as well as organize the commencement lecture for the new entrants.

### **2. RESPONSIBILITIES**

- Fix dates for student enrollment and orientation programme in consultation with the Dean and Phase 1 Coordinator
- Coordinate the activities including official communication with students, required document preparation with regard to student enrollment with the Dean and Senior Assistant Registrar (SAR)
- Coordinate assigning the sjp email to the new students and facilitate the issuing of login username and password for LMS for each student
- Arrange the special lectures and assign and inform the resource persons with the consultation of the Dean and Phase 1 coordinator
- Prepare and coordinate the administration of feedback questionnaire on different activities of the orientation programme

### **3. REPORTING**

Report to the phase 1 and faculty board the summary of feedback and recommendations to the Phase 1 academic committee.

## **1.10 COORDINATOR CLINICAL ORIENTATION PROGRAMME**

### **1. OBJECTIVES**

The objectives of the chairperson are to organize an orientation program to give an adequate overview about the clinical appointments for the students who have successfully completed the 1<sup>st</sup> MBBS examination.

### **2. RESPONSIBILITIES**

- Prepare the timetables and schedule the lectures and skills sessions of the orientation program.
- Communicate with the clinical departments and the lecturers about the program schedule and inform the students of the timetable.
- Reservation of the lecture halls and skills lab for the program.
- Forward the program schedule once finalized to the Phase II academic committee and the faculty board for approval.

### **3. REPORTING**

Coordinator should report to the phase 2 academic committee and the faculty board regarding the schedules and the summary of feedback and recommendations.

## **1.11 MODULE COMMITTEES AND STREAMS**

### **1. OBJECTIVES**

To prepare the objectives and the course content of sections of a given subject in consultation with the relevant academic staff members for the medical undergraduate from years 1-4.

### **2. SCOPE**

- To discuss teaching and learning activities among the members of the committees and relevant Heads of Department
- Discuss the problems encountered from student feedback at the end of module/stream at the phase committee meeting and find solutions

### **3. COMPOSITION**

The module committee comprises of academic staff members (senior lecturer and above) representing each department contributing to that particular module. A chairperson and a convener will be selected with the consensus of the committee. The committee will be appointed for a period of three years.

### **3. RESPONSIBILITY**

#### **Chairperson of the committee**

The chairperson's responsibilities are to;

- liaise with the members of the committee and other academic staff for the smooth functioning of the academic activities of the module/stream
- prepare the module time table and circulate it among the Heads of Departments to assign staff members for the relevant topics in the time table and re-circulate for confirmation
- submit the module time table to the respective academic committees and to the Faculty Board for approval
- circulate the approved module time table among the students
- regularly monitor and evaluate the contents and delivery of the teaching learning activities via end of the module feedback, identify interventions to be taken and submit the summary report to the relevant academic committees
- assist and coordinate periodic review and revision of the curriculum and assessments when necessary

#### **Convener of the committee**

The convener's responsibilities are to;

- convene a committee meeting to discuss the student feedback received at the end of the module
- take notes during meetings of the committee and submitting meeting minutes and extracts of the minutes to relevant committees/bodies.
- assist the chairperson in conducting meetings and activities of the module/stream committee
- assist the chairperson in preparing the module time table and circulate it among the Heads of Departments, respective academic committees and students
- maintain all documents relevant to the module/stream

#### **Members of the committee**

Each committee member's responsibilities are to;

- participate in meetings of the module/stream committee
- provide inputs to achieve objectives of the module/stream committee
- assist the chairperson and secretary in achieving objectives of the module/stream committee by performing tasks allocated by the chairperson or the convener

### **3. MEETINGS**

- Meetings will be held after the completion of the module

#### **4. REPORTING**

Meeting minutes will be forwarded to the relevant phase committees, Curriculum Development Committee and to the Faculty Board for approval.

## **1.12 ACADEMIC COMMITTEE ON LANGUAGE AND COMMUNICATION SKILLS**

### **1. OBJECTIVES**

The objectives of the Academic Committee on Language and Communication Skills are to provide guidance and assistance to medical undergraduates to achieve desired levels of competencies in language and communication skills.

### **2. SCOPE**

To improve English language proficiency of medical undergraduates in order to complete the degree course without English language being a barrier for their performance and to improve communicative skills of medical undergraduates to facilitate effective interaction with relevant stakeholders.

### **3. MEMBERSHIP**

- The committee is headed by a Chairperson and assisted by a secretary. It consists of volunteer members from Departments in the Faculty of Medical Sciences and includes a Senior Lecturer/Lecturer or another representative of the Language and Communications Skills Unit. All members including the chairperson and the secretary are appointed by the Faculty Board and approved at the Senate for a period of three years.
- If a member wishes to resign from the committee that member should inform the chairperson in writing. The vacant position is then advertised among the Faculty staff, a new staff member is chosen and appointed by the Faculty Board and confirmed at the Senate.
- In the event of the resignation of the chairperson or the secretary from those posts, the committee members will appoint them during a committee meeting.
- The committee may opt to include the technical officer/s of the Language and Communication Skills Unit in the meetings when necessary.

### **4. RESPONSIBILITY**

#### **Chairperson of the committee**

The chairperson's responsibilities are

- Liaising with the committee members and other relevant stakeholders to achieve the objectives of the Academic Committee on Language and Communication Skills.
- Coordinating the examinations that assess language and communication skills and submitting the results to the Examinations Unit of the Faculty.
- Tabling and discussing any issues/information/notices communicated from the Vice Chancellor, Dean, academic staff or students that are related to the Academic Committee on Language and Communication Skills and the Language and Communication Skills Unit.

#### **Secretary of the committee**

The secretary's responsibilities are

- Taking notes during meetings of the Academic Committee on Language and Communication Skills, conducting all communications relevant to the Academic Committee on Language and Communication Skills and submitting meeting minutes and extracts of the minutes to relevant committees/bodies.
- Assisting the chairperson in conducting meetings and coordinating the examinations that assess language and communication skills and submitting the results to the Examinations Unit of the Faculty.
- Assisting the chairperson in tabling and discuss any issues/information/notices communicated from the Vice Chancellor, Dean, academic staff or students that are related to the Academic Committee on Language and Communication Skills and the Language and Communication Skills Unit.
- Maintaining all documents relevant to the Academic Committee on Language and Communication Skills

### **Members of the committee**

Each committee member's responsibilities are

- Participating in meetings of the Academic Committee on Language and Communication Skills
- Providing inputs to achieve objectives of the Academic Committee on Language and Communication Skills
- Assisting the chairperson and secretary in achieving objectives of the Academic Committee on Language and Communication Skills by performing tasks allocated by the chairperson or the secretary
- Participating in supervision and invigilation of examinations conducted by the Language and Communication Skills Unit

### **5. MEETINGS**

- The committee meets once in three months or more frequently if required.
- The meeting is held in the Language and Communication Skills Unit of the Faculty of Medical Sciences, and if this venue is not available an alternate venue is informed via e-mail. If face-to-face meetings are not possible due to any reason, the meetings are held online.
- The Chairperson of the committee chairs meetings. In the event the chairperson is unable to attend, an alternate chairperson is appointed from among the senior members of the committee prior to the meeting.
- Minutes are taken by the secretary of the committee and the minutes and agenda are circulated one week prior to the meeting. In the event the secretary is unable to attend, an alternate secretary is appointed from among the senior members of the committee prior to the meeting.
- In the event a committee member is unable to attend a meeting, this must be communicated to the secretary in advance.
- All communication regarding meetings and the minutes and agenda are circulated via e-mail.
- Once the minutes are confirmed, they will be filed and maintained by the secretary. A duplicate office copy must be maintained at the Language and Communication Skills Unit.

### **6. REPORTING**

- The secretary reports the salient points of the minutes to the Curriculum Development Committee and to the Faculty Board meetings as extracts of the meeting minutes.
- The extracts of the minutes are tabled and discussed at the Curriculum Development Committee and at the Faculty Board meetings and then sent to the Senate.

## **1.13 FAMILY PRACTICE CENTER MANAGEMENT COMMITTEE**

### **1. OBJECTIVE**

The aim of the Management committee of the Family Practice Centre of University of Sri Jayewardenepura (FPC-USJP) is to ensure quality patient care through continuous improvement of facilities and services.

### **2. SCOPE**

This committee's scope is to,

- Monitor the facilities and services provided.
- Decide on fees/charges for services and laboratory investigations.
- Make decisions relevant to:
  - Expanding the infrastructure and services
  - Acquisition and maintenance of equipment
  - Recruitment of additional staff
  - Payments of staff
  - Clinical waste management
- Ensure quality assurance of laboratory investigations.
- Decide on the management of generated funds.

### **3. MEMBERSHIP**

The membership composition is as follows-

- Chairperson – Head, department of Family Medicine
- Convener – Coordinator, FPC USJP
- Dean, Faculty of Medical sciences
- Bursar, Faculty of Medical sciences
- All academic members of the department of Family Medicine
- Director or a nominee from National Center for Primary care and Allergy Research.
- Senior MLT of the department of Family Medicine
- Four academic members of the Sri Jayewardenepura University nominated by the relevant Faculty as sated below for a period of three years -
  - Specialist Chemical pathologist or a person in equivalent capacity
  - Academic member from the Faculty of Management studies and Commerce
  - Academic member from the Faculty of Information and Technology
  - Academic member from the Faculty of Allied Health Sciences/Applied sciences
- Honorary members – Past members who have significantly contributed to the development of the FPC-USJP will be co-opted with the approval of the committee.
- The meetings are chaired by the Chairperson or a nominated Chairperson if the Chairperson is excused for that particular meeting.
- When members wish to resign from committee or when the designated positions are changed, the staff member should inform the chairperson in writing two months in advance.

### **4. MEETINGS**

- The committee meets twice a year and this meeting is communicated to the membership through email or a letter.
- Urgent committee meetings can be convened if and when required. The meeting to be convened should be communicated to membership through e mail/letter at least 72 hours prior.



- The minutes will be circulated via email one week after to the meeting by the Convener for confirmation. In the absence of objections/clarifications the minutes will be submitted to the Faculty Board.
- The agenda will be circulated by the Convener one week before the scheduled date for the meeting.
- The venue is Conference room, Department of Family Medicine or virtual.
- Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the Convener.
- Minutes will be taken by the officially appointed Convener of the committee

**Quorum**

- The quorum for a management committee – FPC-USJP meeting shall be 50% of the membership, plus one.
- Where a loss of quorum is identified, the meeting may be adjourned until a time the Chairperson determines. Any matters for decision considered when the meeting is inquorate must be subsequently ratified by committee or at the next committee meeting before those decisions can be actioned.

**5. REPORTING**

The extracts of the minutes are tabled at the Faculty board meeting of the Faculty of Medical Sciences University of Sri Jayewardenepura. Extract of the relevant sections of the minutes will be sent to the Finance committee for approval.

## **1.14 LEARNING MANAGEMENT SYSTEM (LMS) & INFORMATION TECHNOLOGY (IT) COMMITTEE**

### **1. OBJECTIVE**

Objective of the committee is to enhance the knowledge and skills on information technology among staff and students of Faculty of Medical Sciences and provide solutions for improving IT facilities in the faculty.

### **2. SCOPE**

- To discuss and provide solutions for problems encountered by staff and students when using IT facilities in the faculty.
- To enhance the IT knowledge and skills among staff and students in the faculty.
- To provide solutions in the usage, maintenance and upgrading of the Learning Management System of the faculty and other IT-related infrastructure facilities/services.

### **3. COMPOSITION**

- Chairperson: Academic staff member appointed and selected by the committee
- Convener: Academic staff member appointed and selected by the committee
- Members of academic staff
- IT unit co-ordinator
- IT and Network administrators (IT unit)
- Web developer/computer programmer attached to the faculty
- Technical officer responsible for maintenance of IT services
- Technical officer responsible for audio-visual services
- Any other academic or non-academic member on invitation
- Student representatives

Chairperson and convener will be selected and appointed by the LMS and IT committee members. The term of the chairperson and selected members will be 3 years after which they will continue ex-officio for at least one year, unless unavailable due to unavoidable circumstances. They can be re-appointed at the end of 3 years if there is no other applicant for the post.

New members will be appointed by the committee from interested applicants. The term of office of a member will be 3 years, at the end of which they can re-apply to continue if interested.

Student representatives will be nominated by students to represent each batch or at least each phase.

### **4. MEETINGS**

- Meetings will be conducted once a month in the faculty board room and/or via Zoom.
- Meeting minutes will be filed and maintained by the convener once confirmed at the meeting.
- Any member who does not attend 3 consecutive meetings without excusing themselves, will be asked in writing whether they wish to continue.

### **5. REPORTING**

Extracts of the minutes of the meeting minutes will be forwarded to the faculty board.

## **1.15 PERSONAL AND PROFESSIONAL DEVELOPMENT STREAM (PPD)**

### **1. OBJECTIVES**

The objectives of the PPD Stream are to help students

- identify, critically discuss and appraise their personal and professional skills
- demonstrate increased self-awareness and reflective thinking
- demonstrate effective interpersonal and leadership skills
- engage effectively in teamwork
- effectively communicate with patients, colleagues, other health professionals and public
- identify the ethical issues in medicine and health care and provide rational justifications for ethical decisions
- demonstrate ethical decision making and professional behaviour in professional settings
- demonstrate skills to engage in life-long learning
- recognize and appropriately address gender and cultural biases in themselves and others, and in the process of health care delivery
- demonstrate awareness, knowledge, and skills to effectively care for patients from diverse social and cultural backgrounds

### **2. MEMBERSHIP**

- The committee will comprise of academics from Phase 1, 2 and 3.
- The minimum number of members should be 15.
- Membership should be approved by the Faculty Board.
- Term of a committee to be three years.
- The new committee to constitute of at least 50% of the previous committee
- The chairperson shall be selected from the previous committee.
- The term of a chairperson to be 3 years and will serve for another term as some ex-officio.
- Coordinators to be appointed for the different activities conducted by the PPD Stream
- Terms of reference to be made for different subcommittees if deemed necessary
- The committee reserves the right to co-opt members whenever necessary subject to approval by the faculty board

### **3. MEETINGS**

- The meeting will be notified to the committee via email
- Meetings will be held on the 2<sup>nd</sup> Monday of the month at 11am at the Board Room of Faculty of Medical Sciences or via zoom
- The meeting quorum will be 4 of the committee members
- Minutes are taken by the appointed coordinator and the minutes and agenda are circulated along with the notice of the meeting at least a week prior to the scheduled date of the meeting
- It is the responsibility of the coordinator to maintain the records of the confirmed minutes.
- If required subgroup meetings will be arranged outside of these times at a time convenient to subgroup members.

### **4. REPORTING**

The extracts of the confirmed minutes are tabled and discussed at the following month's Faculty Board meeting and sent to the Senate after Faculty Board approval.

### **5. AMENDMENT, MODIFICATION OR VARIATION**

This Terms of Reference may be amended, varied or modified in writing after consultation and agreement by the committee members

## **1.16 PORTFOLIO SUPERVISOR**

### **1. OBJECTIVES**

To supervise and offer support to improve the student portfolios conducted under Personal and professional (PPD) stream of Faculty of Medical Sciences

### **2. SCOPE**

- A student portfolio is given to all the students to record their presentations, reflective writings and extracurricular activities/achievements during the first four years in the Faculty of Medical Sciences.
- This process will enable the students to improve their presentation skills, reflect on their personal and professional life events, scenarios, seek opportunities to develop their extracurricular activities, team work and leadership qualities.

### **3. APPOINTMENT OF A PORTFOLIO SUPERVISOR**

Any academic staff member in the Faculty of Medical Sciences shall be appointed by the Coordinator/Portfolio of the PPD committee.

### **4. DUTIES OF THE PORTFOLIO SUPERVISOR**

- Meet the assigned students in each batch twice a year to complete the reviews.
- Students are expected to complete three successful presentations and three successful reflective writings, and a certain number of extracurricular activities before they sit for the 2<sup>nd</sup> MBBs Examination – Part 2. Supervisors should facilitate and guide students to complete these activities.
- Identify the strengths and weaknesses of the students and guide them to improve both personally and professionally.
- Attending review meetings are the sole responsibility of the students, and if they do not attend a particular review without a valid excuse supervisor should not conduct the same review again as students should learn to be responsible for their actions.
- Supervisors are free to praise their good conduct as well as complain bad conduct in the portfolio.

## **1.17 PERSONAL TUTOR SCHEME**

### **1. OBJECTIVES**

The objective of the Personal Tutor Scheme is to foster academic performance and overall personal wellbeing of medical undergraduates.

### **2. SCOPE OF THE PERSONAL TUTOR SCHEME**

- Personal Tutor Scheme mainly focuses on supporting students in transition from school to university environment, promoting successful graduation, and nurturing satisfying practice as a medical officer. It ensures engagement and ongoing development of the student.
- Personal tutors actively listen to medical undergraduates and provide constructive feedback, support them learn new skills, provide guidance in academic activities, act as collaborators in the problem-solving process, and refer them to other resources/services as and when required.
- Medical undergraduates may decide upon the amount of help and guidance they need in developing their skills and competencies in academic and in personal life matters.

### **3. MEMBERSHIP**

Membership consists of an appointed Coordinator and personal tutors.

- The Coordinator of the Personal Tutor Scheme is appointed by calling applications from the senior academic members of the Faculty, through an announcement made at the Faculty Board meeting.
- If there is more than one applicant for the Coordinator position, a selection committee appointed by the Dean of the Faculty will nominate the prospective candidate.
- The Coordinator of the Personal Tutor Scheme is appointed by the Faculty Board for a period of three years.
- A Personal Tutor is a permanent academic member of the Faculty.
- Personal Tutor appointment will be effective from the date of appointment until the allocated students successfully graduate from the Faculty of Medical Sciences.

### **4. RESPONSIBILITIES OF THE COORDINATOR – PERSONAL TUTOR SCHEME**

- Allocate students of a new intake to permanent academic members.  
Students from the new intake will be grouped and each group will be allocated to three Personal Tutors, each from Phase 1, Phase 2 and Phase 3. Number of students allocated to Personal Tutors in each Phase may vary, according to the number of academics in that Phase and the total number of students in each batch.
- Inform the allocations to both parties - students and the Personal Tutors by email indicating the names, email addresses and telephone numbers of students and Personal Tutors. This information shall be received by the relevant parties at the commencement of the orientation programme.
- Schedule and inform students and Personal Tutors, the date and time of the first meeting (usually during the first week of the orientation programme with the Phase 1 academic) and the second meeting (usually during the last week of the orientation programme with the Phase 1 academic).
- Schedule and inform students and Personal Tutors the date and time for the meeting during the clinical orientation program at the beginning of Phase 2 (usually with the Phase 2 academic).
- Allocate an alternative Personal Tutor as cover-up in instances where the designated tutor is on leave for more than three months.
- Conduct an awareness session/lecture at the Phase 1 orientation program.
- Send periodical reminders to students and Personal Tutors to meet at least once in four months.
- Provide the allocation lists of students and Personal Tutors to the Examination Unit, to help conduct the follow-up by Personal Tutors for students who perform poorly in examinations.

- Obtain feedback regarding the Personal Tutor Scheme from students annually.
- Keep records of the allocation details and feedback obtained from each batch.
- Prepare an annual report based on feedback, submit to the Faculty Board and make necessary adjustments to improve the Personal Tutor Scheme with the agreement of the Faculty Board.

## **5. RESPONSIBILITIES OF THE PERSONAL TUTOR**

- Meet allocated students on designated days as indicated in the Timetable of the orientation program/clinical orientation program and on subsequent days as and when required.
- Arrange meetings with individual students as and when required.
- Initiate meetings/communications with students at least once in four months.
- Spend time with students and support them setting up goals, assist in developing self-awareness and self-confidence, provide guidance in academic activities, facilitate solving personal issues, refer students to relevant resources and services when needed and respect the privacy and confidentiality of the relationship.
- Help in preparing a study plan and follow-up for students who repeat examinations, according to guidelines directed by the Examination Unit, when required.
- Provide personal mobile phone number and email address to the Coordinator – Personal Tutor Scheme to be made available to allocated students.
- When on leave for more than three months, nominate an alternative Personal Tutor as cover-up.
- Keep records of meeting sessions confidentially.
- Provide feedback (through the online form that will be made available) annually to the Coordinator – Personal Tutor Scheme for the purposes of making the annual report and further improvement to the scheme.

## **1.18 COMMITTEE TO REVIEW DOCUMENTS FOR PROMOTION TO ASSOCIATE PROFESSOR/PROFESSOR**

### **1. OBJECTIVE**

The objective of this committee is to review documents submitted for section 1 and 3 by the academic staff for promotion to associate professor/professor of the Faculty of Medical Sciences, University of Sri Jayewardenepura.

### **2. SCOPE**

To ensure the documents submitted are relevant for promotion according to the UGC criteria

### **3. MEMBERSHIP**

- The committee consists of three members, one each from the pre-clinical, para-clinical and clinical departments appointed by the faculty board.
- The committee will appoint a chairperson from among the three members, whose name will be ratified at the faculty board.

### **4. MEETINGS**

- Meetings will be held as necessary when academic staff submit their documents to the faculty board.
- The meeting is held in the board room of the Faculty of Medical Sciences, and if the board room is not available an alternate venue is informed via e-mail
- If expert opinion is needed, the committee will refer those documents to a subject expert

### **5. REPORTING**

- If the committee feels that the documents are irrelevant, they will inform the relevant staff member of the same.

## **2. ADMINISTRATIVE**



## 2.1 STUDENT ENROLLMENT

*Enrollment of students for the course of study in Medicine at the Faculty of Medical Sciences, University of Sri Jayewardenepura*

### 1. SCOPE AND PURPOSE

All enrollment activities of the medical students are done by the Faculty of Medical Sciences. When the lists of names of the students who have been selected and registered by the UGC for the Faculty of Medical Sciences are received, Faculty will take following steps regarding their enrollment.

From the time of enrollment for the relevant course up to the time of graduation the Faculty of Medical Sciences will be responsible for the maintenance of students' personal files together with taking necessary actions for all their activities done during the said period.

### 2. TASK - STUDENT ENROLLMENT

Enrollment of the students to the Faculty of Medical Sciences is carried out at the beginning of every academic year by the Faculty.

#### PROCEDURE

The procedure of the student enrollment and the needed documentations are given below;

Every year, after finalizing the university admission process, UGC informs the Faculty of the list of selected students for the MBBS course. Then the Faculty informs each student regarding the required documents and the date of enrollment via online & post. Following are the required documents sent by the Faculty;

- Letter from the Dean of the Faculty of Medical Sciences
- Instruction for the enrollment
- Application form for enrollment of new entrants
- Full registration – Good character form
- Declaration by the student and the guardian on student discipline
- Declaration by the student on prohibition of ragging and other forms of violence
- Application for student health service
- Application for hostel facilities
- Application for student record card

Students should present themselves on the relevant date at the Faculty premises with the following documents. They should fill **Application Form for “Enrollment of New Entrants”** and submit with following documents at the date of their enrollment to the faculty.

- Payment slip of enrollment fee and other fees for Rs. 1750.00 (The fees should be paid through online payment system)
- Originals of the following certificates together with a photocopy certified by Principal of the approved school, Grama Seva Niladhari of the Division, Justice of Peace, Commissioner of Oaths, Attorney-at-Law, or Notary Public
  - G.C.E. (O/L) Examination Certificate
  - G.C.E. (A/L) Examination Certificate
  - Certificate of Birth
  - School Leaving Certificate
  - National Identity Card
  - If there is any change of name in addition to the birth certificate an affidavit.

(The originals of certificates which are submitted at the time of first registration will be returned back to students)

- Six (06) copies of a recent photograph

- Duly completed Student Record Card
- Duly completed and signed Declaration on Student Discipline
- Four (04) self-addressed stamped envelopes of the size 9”x4”
- Certificate of the vaccination for Hepatitis B
- Duly Completed Hostel Form

### **Registration Renewal**

Renewal of registration of the students is carried out by the Dean’s Office of the Faculty of Medical Sciences. All students should get their registration renewed within the prescribed period of time as indicated by notices.

### **Student Record Books**

A Student Record Book is issued to all the registered students by the Dean’s Office of the Faculty of Medical Sciences.

### **Student Identity Cards**

Every student should have a student identity card as long as he/she is an undergraduate registered at the Faculty of Medical Sciences. Accordingly, an identity card is issued to all registered students by the Academic Branch of the University. In case, the student identity card is lost, a copy should be obtained paying an extra fee of Rs. 250/-. The new identity card will be issued to the candidate upon submission of a police statement on the loss of the identity card.

### **Difference in the name**

If there is a difference in name in the educational certificate and the certificate of birth or current name differs from the name given in the certificate of birth, student should submit an affidavit to the effect that all the names refer to one and the same person. The registration will be done according to the name given in the Birth Certificate.

## **2.2 MANAGING STUDENTS' CONFIDENTIAL DOCUMENTS**

### **1. SCOPE AND PURPOSE**

Student information maintained in the Dean's Office of the Faculty of Medical Sciences may include student's personal information such as home address, contact numbers, parents name and their contact numbers, birth certificates, educational certificates, school leaving certificates and all the other documents submitted with their University Application Form.

### **2. RESPONSIBILITY**

- It is the responsibility of the SAR to ensure that all Students Personal Files are prepared, maintained and kept securely under a proper system that ensures confidentiality for the specified period of time until such batch passed out from the university.
- All records of students including application form, full registration - good character form, declaration by the student and the guardian on student discipline, declaration by the student on prohibition of ragging and other forms of violence, student's personal address, contact numbers, email address, parents/guardian's contact details etc. will be kept as confidential files.
- The minimum retention period of student's personal files is 10 years from the date of their enrollment for a particular course of study.
- Heads of Academic Departments are responsible for ensuring that student's marks (CA tests, year-end exams, final exams), examination papers, answer sheets which are maintained in their departments are kept securely and retained or disposed of according to the university's approved policies and procedures.

### **3. PRIVACY**

All other personally identifiable information about a student must be kept confidential according to the requirements of university policies. Confidential information includes;

- Biographical information, such as home address, contact numbers, personal email address, parents contact numbers etc.
- Educational history [G.C.E. (A/L), G.C.E. (O/L)]
- Results, Assessment marks, Medical Certificates

### **4. SECURITY**

Student information and results must be kept in secure facilities and equipment (e.g. locked rooms and filing cabinets) accessible only to relevant staff members.

### **5. ACCESS TO STUDENT INFORMATION**

Access to student information should be limited to the Faculty staff who need the information to do their job. Information regarding accommodation for medical reasons, information related to disciplinary procedures, and needs-based financial information is considered particularly sensitive and should be accessible strictly on a need-to-know basis.

### **6. RETENTION AND DISPOSAL OF STUDENT INFORMATION**

Faculty of Medical Sciences is required to keep personal information about students for minimum of 10 years from the date of their enrollment of a particular course of study.

Beyond the ten years minimum, student information must be kept only as long as necessary to complete the contractual obligations between the university and the student, to provide information on the academic achievements (such as transcripts) of the student to employers, educational institutions, licensing/regulatory bodies, and to the student him/herself, and to provide the student with appropriate support and other services.

## **3. EXAMINATIONS**

## **3.1 EXAMINATIONS UNIT**

### **1. OBJECTIVES**

The objectives of the Examinations Unit of the Faculty of Medical Sciences are,

- To facilitate the proper conduct of examinations in the Faculty by coordinating and supervising all the relevant processes and procedures
- To ensure adherence to the examinations by-laws and regulations
- To ensure accurate and timely release of examination results and other student records, reports etc.
- To ensure secure storage and maintenance of confidential information related to examinations centrally

### **2. STAFF**

The Examinations Unit is under the purview of the Dean of the Faculty and is headed by the Director of Examinations who should be a senior academic staff member of the Faculty (Senior Lecture Grade II or above). The Director of Examinations is supported in his/her work by the Deputy Director of Examinations who should be a senior academic staff member (Senior Lecture Grade II or above) of the Faculty, a Senior Assistant Registrar/Assistant Registrar and several dedicated non-academic staff members. The Director and Deputy Director of Examinations are appointed for a period of three years by the Vice Chancellor of the University on the recommendations of the Dean.

### **3. FUNCTIONS**

The main function of the Examination Unit is to coordinate all examinations held by the Faculty. The unit also performs other functions such as processing of final and non-final year results and awards for Vice-Chancellor's and Senate approval, notification of results and issuance of certificates to graduates of the Faculty. The Examination Unit is the custodian of rules and regulations concerning the conduct of examinations in the Faculty.

## **3.2 DIRECTOR OF EXAMINATIONS**

### **1. OBJECTIVES**

The objectives of the Director of Examinations are to coordinate and supervise all processes and procedures relevant to the examinations conducted in the Faculty and ensure examination by-laws and regulations are adhered to.

### **2. RESPONSIBILITY**

Responsibilities of the Director of Examinations are as follows:

- Ensure confidentiality of the marks (security strategies, secrets passwords etc.) at all times
- Assist the Dean in drawing up the examination schedules and the academic calendar.
- Circulate examination schedules including the dates to all relevant activities (scrutiny board dates, pre-results and results board dates) to all Heads of Departments, Professors and Chairpersons of modules.
- Establish and maintain a computerized system for entering and finalizing marks.
- Circulate the format of the marks in a pre-prepared excel table to the Heads of Departments /Chairpersons of modules.
- Ensure accuracy and correct entry of marks received from the Heads of Departments/Chairpersons of modules to the central computer.
- Submit the final marks to the pre-results and results boards.
- Participate at the pre-results and results boards of all examinations of the Faculty.
- Ensure adherence of the staff and students to the examinations by-laws and regulations.
- Guide the Faculty of Medical Sciences in the interpretation of examination by-laws where necessary.
- Ensure processing of results of final and non-final year examinations and awards for Vice-Chancellor's and Senate approval.
- Coordinate processing of Faculty awards (Dean's list and most improved student) for Vice-Chancellor's and Senate approval.
- Coordinate the process of follow-up and academic support for students with poor performance at main examinations (First MBBS, Second MBBS and Final MBBS)
- Supervise accurate preparation and submission of final examination marks to the University Grant Commission for preparation of the common merit list for MBBS graduates.

### **3.3 DEPUTY DIRECTOR OF EXAMINATIONS**

#### **1. OBJECTIVES**

The objective of the Deputy Director of Examinations is to support the Director of Examinations in carrying out the duties and responsibilities pertaining to the examinations of the Faculty of Medical Sciences.

#### **2. RESPONSIBILITY**

Responsibilities of the Deputy Director of Examinations are as follows:

- Ensure confidentiality of the marks (security strategies, secrets passwords etc.) at all times
- Submit the final marks to the pre-results and final results boards.
- Participate at the pre-results and final results boards of all examinations of the Faculty.
- Ensure adherence of the staff and students to the examinations by-laws and regulations.
- Guide the Faculty of Medical Sciences in the interpretation of examination by-laws where necessary.
- Support the Director of Examinations in carrying out duties and responsibilities as applicable.
- Carry out the responsibilities of the Director of Examinations in the absence of the person holding the position



## 3.4 BOARD OF SCRUTINY

### 1. OBJECTIVES

Scrutiny of question papers of an examination is done by a Board of Scrutiny. The Board of Scrutiny has the power to examine all question papers which include theory questions (MCQ, SEQ) and practical examinations (OSCE, OSPE etc.), marking schemes and model answers in all main examinations of the Faculty of Medical Sciences (FMS).

This Board meets to discuss draft papers and considers the following:

- Correct rubric, time and date of assessment
- Level and scope of exam paper
- Appropriateness of assessment to learning outcomes and accordance with the blueprint
- Depth and appropriateness of marking scheme (Should be submitted with the paper)

### 2. MEMBERSHIP

- Chair – Dean of the FMS
- Chair professors of the relevant Departments
- Heads of the relevant Departments
- Chairpersons of the Streams
- Coordinators of the relevant subjects when necessary
- Scrutiny expert – Usually the relevant phase coordinator acts as the scrutiny expert. Otherwise, a suitable academic member with below requirements is appointed by the Dean subjected to approval by the Faculty Board.
  - Members of the permanent academic staff of the FMS
  - Senior Lecturer (Grade 1) or above
  - Have at least 5 years' experience in examinations
  - Should have knowledge of the subject (content area) but need not be a specialist in the subject
  - Without any conflicts of interest

### 3. MEETINGS

- SAR/AR arranges the meeting and informs the members by email/letter at least two weeks prior to the date of the meeting.
- The meeting should be held 5-7 working days before the date of the examination.
- The Board of Scrutiny should meet in a confidential room.
- Only the identified members can attend the meeting and they should sign an attendance sheet.
- The Head of Department (HoD)/Chair of the Stream should bring a soft copy of the draft SEQ paper moderated by the subject expert (i.e., Chair Professor or nominee) along with marking schemes, model answers and any other relevant documents in a secure manner (encrypted file in a flash drive).
- It is important that editorial matters and issues of the technical accuracy of the content are sorted out at the Department/Stream level before the scrutiny board meeting.
- All MCQ papers and OSPE/OSCE questions must have been scrutinized at the Department/Stream level pre-scrutiny meeting.
- An academic staff member from a clinical department should participate at the pre-scrutiny of the MCQ paper for scrutinization of the MCQs with a clinical background. A signed report by the clinical staff member should be handed over to the HoD/Stream Coordinator and this document should be presented at the Scrutiny Board meeting. (See Annexure 1 for the template of the report)

#### **4. RESPONSIBILITIES**

The Board of Scrutiny should specifically pay attention to following points:

- Compliance with a prescribed standard format of the question paper(See Annexure 2 for the examination paper templates)
  - Examinations must be prepared using the currently approved templates and formatted consistently
- Clear instructions to the candidates in the rubric
- Correct and appropriate time allocation against the number of questions
- Appropriate mark allocation for questions and distribution of marks within sections and sub sections of a main question
- Adequacy of space provided for the answers in SEQ papers
- No overlap or duplication of content areas tested within the subject and between subjects(the HoD should confirm that there is no overlap in the different components of the examination for the subject)
- Appropriate use of terms (e.g. List, Outline, Discuss, Describe, etc.) according to the cognitive level of the expected answer
- Clarity of the question and simplicity of the language
- Justification for bold or underlined words/phrases/question items etc.
- Grammatically correct and worded in a way that will be unambiguous to the candidates
- Free from typographical errors and British English language is used
- Availability of a detailed marking scheme - A detailed set of marking criteria (marking schemes) for SEQs indicating how marks are to be awarded must be submitted with each paper
- The name list of the examiners

The Board of Scrutiny has the power to modify any question in respect of language or appear to them to be ambiguous, unsuitable or unsatisfactory and to refer back where necessary to the examiners with suggestions.

The Board of Scrutiny may make recommendations for consideration of the Department or Stream regarding future examinations.

The transactions of the meeting should be cordial and not confrontational.

HoD/Stream Coordinator makes edits/corrections indicated by the scrutiny board and modified paper shall be approved by the Board of Scrutiny. Proof reading and preparation of the final question paper is the responsibility of the HoD/Stream Coordinator.

Final question papers approved by the Board of Scrutiny should be submitted to the SAR for printing.

It is the responsibility of the HoD/Stream Coordinator to see that all drafts of question papers are destroyed.

Under no circumstances must the contents of examinations be revealed to any person who is not a member of the Board of Examiners or an approved member of the University Staff.

Examination papers must be prepared and stored only on computers which have physical and software security measures that are fit for purpose. Shared and/or networked computers must not be used.

### **3.5 GUIDELINES FOR EXTERNAL EXAMINER APPOINTMENTS AND RESPONSIBILITIES**

#### **1. PRIOR TO EXAMINATION**

##### **1.1 Appointment of external examiners**

- a) Name list of external examiners will be provided by the relevant department for approval of the faculty board and senate. Upon senate approval persons will be appointed as external examiners by the Dean.

##### **1.2 Qualifications of external examiners**

- a) The person to be appointed as external examiner should be Board certified by the PGIM with experience in the particular field or possess a post graduate qualification such as MPhil/PhD and post qualification experience appropriate to the level of the examination.

##### **1.3 Eligibility of external examiners**

- a) Persons to be considered as external examiners should be participating in undergraduate teaching and training in the state and/or non – state institutions. Eligibility to be a member of the exam panel as an external examination will cease after two years following resignation or **retirement\*** from active service of the above-mentioned institutions.  
(\* age of retirement- a Consultant in the Ministry of Health shall be 63 years. In Universities, Family Medicine and General Practice and Sri Jayewardenepura General Hospital it shall be 65 years)

##### **1.4 Confidentiality**

- a) On appointment, all examiners shall be required to sign a conflict of interest and confidentiality declaration form.

##### **1.5 Responsibilities of each department when appointing external examiners**

- a) Each department should have a document which clearly spells out the exact role of external examiner in the relevant exam.
  - a. Eg: whether she /he should examine every candidate during clinical examinations
  - b. Whether she/he is expected to correct exam papers
- b) This document should be mailed to the external examiners together with the appointment letter and the guideline and format of the examination well in advanced of the examination.
- c) Each department should ensure that there is uniform exposure of all the candidates to external examiners
- d) An objective marking grid including all aspects to be tested should be provided to the external examiners to maintain uniformity and objectivity. External examiners should be briefed about the necessity of testing these aspects during the examination.
- e) The confidentiality of the examination material and patients used in the exam shall be a collective responsibility of both internal and external examiners of the said exam.

## **2. DURING EXAMINATION**

### **a. Written examination**

1. External examiner should receive the model answer script in order to make the marks as objective as possible
2. When double marking is practiced external examiner should enter marks on the mark sheet and not in the answer script. Average of the two should be the final mark.
3. If there is significant discrepancy of >15% after double marking two examiners should meet and discuss and should attempt to reduce the difference to 15% or less. If this is not possible 3<sup>rd</sup> examiner will mark the script and final mark will be the average of 3 sets of marks.

### **b. Clinical /oral/practical examination**

1. When candidates are marked by two examiners (internal & external), the agreed optimum mark for each case completed by the candidate should be agreed upon immediately after the candidate has been examined. The marks shall be entered in ink in the mark sheet.
2. Clinical material used during examination should not be discussed with the candidate after the examination until results are released.

### **c. Entering of marks**

1. Entry of marks is the sole responsibility of the examiners and should be done carefully.
2. Marks should be entered in ink in the relevant mark sheets.
3. If any mark is corrected it should be struck off completely and new entry made. Such entry should be initiated by the relevant examiners

## **3. POST EXAMINATION**

- External examiners shall submit a feedback about the examination to the relevant Department Heads.
- Relevant Department should discuss and consider the comments made by external examiners during discussion on the examination and examination results.

## 3.6 CHIEF EXAMINER

### Responsibilities of the Chief Examiner

A Board of Examiners is appointed for conducting examinations in the Phase I and Phase II in the following manner. The list of examiners should be approved by the Faculty Board and the Senate.

#### Phase I

- For each subject of the Continuous Assessments (CA) and the 1<sup>st</sup> Examination for MBBS

#### Phase II

- For each Continuous Assessment (CA) and each Unit examination of the 2<sup>nd</sup> Examination for MBBS Part I and Part II.

A Board of Examiners is headed by one of the appointed examiners, identified as the Chief Examiner.

### 1. OBJECTIVES/SCOPE

- To oversee and be responsible for the conduct of the said examination.
- To maintain confidentiality and ensure standards are maintained.

### 2. BOARD OF EXAMINERS

#### Phase I

The respective Head of the Department as the Chief Examiner will appoint the Board of Examiners for Continuous Assessments (CA) and First Examination for the MBBS degree, at least 3 months prior to the examination.

#### Phase II

##### ● Continuous Assessments

- At the beginning of the academic year the Phase II committee will appoint the Board of Examiners and the Chief Examiner for each CA
- The members of the Board of Examiners are the eligible academics from the relevant departments that are involved in teaching the relevant modules (usually the module committee members and additional academics if necessary). Also Heads of Departments of the relevant departments involved in the exam should be included in the Board of Examiners.
- The Chief Examiner is usually one of the Heads of the Departments of Phase II or the Chairperson of the respective module (if the chairperson is from Phase III a nominee will be appointed from Phase II)
- In the examinations of the 'Forensic Medicine, Toxicology and Medical Ethics stream', the Head of the Department of Forensic Medicine is the Chief Examiner.
- Scrutiny of questions is done by Heads of Departments with the Chief Examiner.

- **Second Examination (Part I & Part II) for the MBBS degree**

- At the beginning of the academic year the Phase II committee will appoint the Board of Examiners and Chief Examiners for each Unit of the main examinations.
- The members of the Board of Examiners are the eligible academics from the relevant departments that are involved in teaching the relevant modules in that Unit (usually the module committee members and additional academics if necessary). Also Heads of Departments of the relevant departments involved in the exam should be included in the Board of Examiners.
- The Chief Examiner will be selected from the members of the above Board of Examiners (Usually one of the Chairpersons of the modules involved in the particular Unit examination or one of the Heads of Department)
- Blue printing will be checked by the Chief Examiner in consultation with Heads of Departments.

### **3. THE CHIEF EXAMINER**

- The chief examiner should be an academic of the Senior Lecturer post or above

- **Responsibilities of the Chief Examiner**

- Confirm the tentative timetable prepared by the Phase I and Phase II coordinators
- Coordinate with the SAR/Exams regarding examination halls etc. Exam halls will be reserved by the SAR/exams
- Prepare the list of examiners after discussing with relevant heads (preferably from the phase of study)
- Confirm if there are any members with a conflict of interest and exclude them from the said examination
- Once the list of examiners is finalized by the Chief Examiner, the chief examiner should send the list of names for Faculty Board and Senate approval.
- Be familiar with the format/template of the relevant examination
- Have regular examination meetings with the relevant academic staff members who have been appointed for the said examination (The Board of Examiners)
- Instruct examiners appropriately regarding the format of the examination, the method of allocation of marks at each component of the examination, the requirements to pass the examination and functions of the results board
- Arrange for scrutiny experts to be present at department/ module level as and when required
- Formulate and print the examination papers and handover the examination papers to the SAR examinations
- Attend the scrutiny boards, pre-results and results boards, re-scrutiny meetings etc.
- Chief examiners of Phase I will appoint the supervisors and invigilators for the respective examinations.
- In the Phase II, the examination unit will appoint the supervisor and invigilators for the relevant examination from the pool of examiners submitted by the relevant departments.

- Prepare a schedule for the order of marking the papers and hand it over to the SAR/exam at the scrutiny board. The first person to do the marking will collect the scripts from the SAR/exams and once marking is completed hand over to the next on the list.
- Obtain marks from the examiners responsible for marking, check and finalize the marks before forwarding to the examination unit prior to the pre-results board
- Standardization of the examination paper as and when required
- The chief examiner for Forensic Medicine and Community Medicine will be the Head of the Department.

#### **4. MEETINGS**

- The Chief Examiner is responsible for scheduling the meetings (a minimum of at least 4 meetings) to discuss the allocation of questions as stipulated in the by-laws, and preparation and discussion of questions.
- The meetings should be conducted in a confidential room.
- All meeting should be held in person. There should be no online discussions with regard to examination matters.
- The times and dates of the meeting should be communicated to the members of the Board of Examiners

## **4. STUDENT MATTERS**



## **4.1 LIBRARY COMMITTEE**

### **1. OBJECTIVES**

The objective of the library committee is to provide maximum benefits to the undergraduates, postgraduates, academic and non-academic staff members keeping on par with the international standards to provide a user friendly library facilities with maximum resources.

### **2. SCOPE**

The library committee of FMS is a branch library of the main library of USJ and the scope is basically in line with the main library. The members of the library committee help the medical library to function smoothly. Purchasing of text books/e-books in each year according to the available budget, scrutinizing of donations, persistent discussion of the upcoming issues, conducting workshops regarding usage of the databases, improvement of infrastructure and providing up to date reference material are a few key activities among many.

### **3. MEMBERSHIP**

- The librarian and deputy librarians are the members of the committee.
- There are sixteen departments under the Faculty of Medical Sciences. One member from each department should represent the library committee in order to provide the input from the respective discipline for the advancement of the library as a whole.
- In addition to above as there is no separate branch library for the faculty of allied health sciences, the staff members from the three departments of this faculty should also represent the committee as committee members.
- Out of the above members two would be the chairperson and the secretary. The committee is headed by the chairperson.
- When a member wishes in resigning the committee, the chairperson is informed by the member in writing. The chairperson writes about the resignation to the particular department and a new member from the same department is to be appointed by the head of the department. The suggested name is approved in the faculty board.
- The chairperson and the secretary are to be appointed by the committee members and approved by the faculty board.
- The duration for a membership and being an office-bearer is maximally three years. Re-appointing is allowed after another year.
- Committee is responsible for scrutinizing the donations and deciding the acceptability.
- Purchase of books and periodicals based on annual department recommendation.

### **4. MEETINGS**

- The committee meets once in two months on the first Tuesday, 10.00 am onwards at a suitable venue within the premises of FMS. The date and the place of the meeting is circulated through the library committee email to the members in advance along with the minutes taken by the secretary and the agenda. If the meeting is unable to be held on the speculated date the date is to be adjusted so as not to interfere with the other meetings of the faculty.
- The confirmed minutes are filled by the secretary.

### **5. REPORTING**

- If an important message/decision is to be passed among the faculty board members, the secretary sends an extract to the faculty board under the guidance of the chairperson.
- Similarly, if an important point is to be mentioned at the main library meeting held on the second Monday of each month, an extract is forwarded (under the guidance of the chairperson) to the librarian to be taken up.

## **4.2 STUDENT GRIEVANCES COMMITTEE**

### **1. OBJECTIVES**

To investigate, offer support and redress to all student complaints/grievances lodged at the student grievances online platform at the Faculty of Medical Sciences web site.

### **2. SCOPE**

1. An online platform is set up on the web site of the Faculty of Medical Sciences, University of Sri Jayewardenepura, for any student of the Faculty to inform/complain their grievances or staff member of the faculty to inform issues related to student grievances.
2. Any physical, psychological, academic or any other problems related to the university life if considered a grievance, to be informed to the student grievances committee for action.
3. The student grievances committee will coordinate the arrangements to redress the issue with the relevant committees or individuals in the faculty.

### **3. COMPOSITION OF THE COMMITTEE**

It consists of following members;

1. Coordinator- Orientation programme
2. Coordinator- Student Mentorship programme
3. Nominee- Personal and Professional Development (PPD) Committee
4. Nominee- Department of Psychiatry
5. Nominee- Student counsellor of the University

The committee members will be appointed by the Faculty Board following nominations for 2, 3 and 4 from the respective committees/departments. A coordinator will be appointed by the members for a period of three years.

#### **Receiving the complaint and processing**

- Students need to give at least a contact number or an email to contact them while the other information requested in the system are optional.
- An academic member of Faculty of Medical Sciences, USJ can also inform about a student grievance via the online platform for reporting purpose or for follow up by the committee.
- Once the complaint is received at the online platform, it will be informed to all the members via an email (system generated method) then and there.
- If the coordinator does not communicate with the members within an hour or two of reporting, the members should contact the coordinator and should attend to it according to the urgency as follows.
  - Need urgent attention (within 24 hours or as quickly as possible)
  - Intermediate (within week)
  - Need longer duration to redress the issue (more than a week)
- The committee should carefully go through the complaint and decide regarding the nature of the complaint and should refer it to the relevant staff member of the faculty to redress it (Dean, student welfare committee, proctor, Director examinations, HoD, student mentor etc)
- The committee must ensure that the time period from receipt of the complaint and the solution of the faculty to redress the issue must not exceed two weeks.
- The committee should obtain feedback from the students on the solution offered protecting the privacy of the student.

- If a student is not satisfied about the action taken, the student should inform the student grievances committee through the online platform. It should be discussed again within the committee and should convey this to the relevant member of the faculty to look for further options.
- All complaints will be investigated and cannot be withdrawn. The complaints which are found to be false or malicious, will be subjected to disciplinary actions against the individual/s who made such complaints.

#### **4. REPORTING**

- The committee should record the initial receipt, whom it was referred to, type of categorization of the issue, and the solution given to the student with date and time.
- The summary of complaints and their remedial measures has to be sent to the internal quality assurance committee (IQAC) once in every three months keeping the student's privacy.

## **4.3 STUDENT COUNSELLORS**

### **1. OBJECTIVE**

To provide counselling services to students of the Faculty of Medical Sciences, University of Sri Jayewardenepura

### **2. SCOPE**

To support medical students to improve their well-being and quality of education when they experience stress associated with demanding features of education, psycho-social and economic issues.

### **3. RESPONSIBILITIES**

- Offer a responsive, counseling and referral service to all students of the FMS experiencing a wide range and degree of emotional and psychological difficulty thus ensuring student retention, academic achievement and progression
- Providing front-line assessment, support and referral for students with acute and chronic mental health difficulties
- Raise awareness on availability of student counseling services amongst students
- Be accessible and available for students needing counseling services
- Maintain records of all counselling encounters using a structured format
- Ensure confidentiality and privacy of clients
- Organize training sessions for student counselors
- Represent and actively contribute to the activities of Student Grievances Committee

### **4. REPORTING:**

- The counsellor is expected to work independently and be responsible for her/ his management decisions. The student could be referred to the department of psychiatry, or an external psychiatrist when there is a need for a psychiatrist's assessment and treatment. Counsellor is permitted to refer the student to another counsellor/ psychologist for a second opinion or specialized management
- Submit a quarterly summary of services provided to the student counsellor lead/Student Grievances Committee

## 4.4 STUDENT REMEDIAL ACTION COMMITTEE

### Suggested procedure for remedial actions for students with poor performance at main examinations

- ❖ Identification of students with poor performance at main examinations
- Main examinations considered are 1<sup>st</sup> Examination for MBBS, 2<sup>nd</sup> Examination for MBBS Part I, 2<sup>nd</sup> Examination for MBBS Part II and Final Examination for MBBS.
- Poor performance is considered as being referred in  $\geq 50$  % of the subjects in the particular examination
- Students with poor performance will be identified at the Results Board of the particular examination.
- ❖ Director/ Deputy Director of the Examinations Unit will prepare a list of students with poor performance at each main examination after results varication board which also includes the names of respective personal tutors and contact details of the students [if available] Personal tutor (in the relevant academic phase) of each student will be identified based on the information provided by the coordinator of the moral tutor scheme.
- ❖ Simultaneously, the list of students and the personal tutor assigned to each student will be sent to the Chairperson of the relevant academic phase committee.
- ❖ Director/ Deputy Director of Examinations Unit will organize a face-to-face group meeting with the identified students with the participation of the relevant academic phase coordinator and the allocated academic student counselor. The procedure and the importance of this activity will be briefed by the Deputy Director of the Examination unit and the Phase coordinator.
- ❖ Thereafter the Part A of the format for “Reporting poor performance of a student at main examinations” will be handed over to the students. Students will fill Part A of the form and schedule a meeting with the respective personal tutor within two weeks. If the student wishes to contact another academic member other than their personal tutor, the student may do so after informing the Director/ Deputy Director of Examinations Unit.
- ❖ If the allocated personal tutor is on leave, the student may choose an academic member, or the Phase coordinator may allocate a suitable academic member for this purpose.
- ❖ Director/ Deputy Director of Examinations Unit will send an email (annex 3) to the personal tutors/chosen academic member informing the process and the need to schedule a meeting within two weeks with the respective student, once they have contacted them.
- ❖ A guidance on the process will be included in the email with the timeline. The Part B of the “Reporting poor performance of a student at main examinations” relevant to each student will be shared in a google folder.
- ❖ If the personal tutor is on leave, the student should meet an academic student counselor relevant to the phase or a preferred academic member and follow the same process. In this case, all responsibilities vested to personal tutor will be vested upon the academic student counselor/chosen academic member.
- ❖ At the meeting, the personal tutor is expected to peruse the Part A and carry out a discussion based on the information provided to identify issues and remedies to be implemented by student/faculty to improve student performance. The personal tutor is expected to guide the student on improving performance at examinations. As required, the student could be referred to any of the following for assistance.
  - Student counsellor

- Department of Psychiatry
  - Student welfare committee
- 
- ❖ After the meeting, the personal tutor should fill Part B of the report in the google folder within one week of meeting the student. Sending Part A to the examinations Unit is not required.
  - ❖ The follow up of a particular student should continue until the personal tutor/chosen academic is satisfied that the remedial actions have been effective, and / or the performance of the particular student has improved at a subsequent examination. Director/ Deputy Director of the Examinations Unit will provide the details of the performance of the students at the subsequent examination on request.
  - ❖ The google folder will be shared with the relevant student counselor. [There will be a designated student counsellor for each phase]
  - ❖ The relevant student counselor shall compile a summary of the Part B completed by the personal tutors/chosen academics and send it to the Director/ Deputy Director of the Examinations Unit within one week of the deadline for submitting Part B given for personal tutor/chosen academic. This report will be sent to relevant Phase coordinators.
  - ❖ The relevant student Counsellor shall actively follow-up the submission of Part B by the relevant persons to ensure timely completion of the summary of Part B
  - ❖ Director/ Deputy Director of the Examinations Unit will forward the summary to the Chairperson of the relevant academic phase committee.
  - ❖ The summary of the reports should be discussed at the next meeting of the academic phase committee to take necessary actions.
  - ❖ If further follow up is required when a student with poor performance progresses from one Phase to another (i.e. from Phase I to Phase 2 or from Phase 2 to Phase 3) the relevant personal tutor and the relevant student counsellor should inform the next personal tutor and the student counsellor to whom the student will be allocated.
  - ❖ Examination Unit, student counsellors and the Phase committees need to maintain the records and regularly discuss with Dean, Faculty of Medical Sciences for further improvements of the programme.

## **4.5 PERSONAL TUTOR SCHEME**

### **1. Objectives**

The objectives of the Personal Tutor Scheme are to foster academic performance and overall personal wellbeing of medical/human biology undergraduates.

### **2. Scope of the Personal Tutor Scheme**

Personal Tutor Scheme mainly focuses on supporting students in transition from school to university environment, promoting successful graduation, and nurturing satisfying practice as a medical officer. It ensures engagement and ongoing development of the student.

Personal tutors actively listen to medical/human biology undergraduates and provide constructive feedback, support them learn new skills, provide guidance in academic activities, act as collaborators in the problem-solving process, and refer them to other resources/services as and when required.

Medical/human biology undergraduates may decide upon the amount of help and guidance they need in developing their skills and competencies in academic and in personal life matters.

### **3. Membership**

Membership consists of an appointed Coordinator and personal tutors.

- The Coordinator of the Personal Tutor Scheme is appointed by calling applications from the senior academic members of the Faculty, through an announcement made at the Faculty Board meeting.
- If there are more than one applicant for the Coordinator position, a selection committee appointed by the Dean of the Faculty will nominate the prospective candidate.
- The Coordinator of the Personal Tutor Scheme is appointed by the Faculty Board for a period of three years.
- A Personal Tutor is a permanent academic member of the Faculty.
- Personal Tutor appointment will be effective from the date of appointment until the allocated students successfully graduate from the Faculty of Medical Sciences.

### **4. Responsibilities of the Coordinator – Personal Tutor Scheme**

- Allocate students of a new intake to permanent academic members.

Students from the new intake will be grouped and each group will be allocated to three Personal Tutors, each from Phase 1, Phase 2 and Phase 3. Number of students allocated to Personal Tutors in each Phase may vary, according to the number of academics in that Phase and the total number of students in each batch.

- Inform the allocations to both parties - students and the Personal Tutors by email indicating the names, email addresses and telephone numbers of students and Personal Tutors. This information shall receive by the relevant parties at the commencement of the orientation programme.

- Schedule and inform students and Personal Tutors, the date and time of the first meeting (usually during the first week of the orientation programme with the Phase 1 academic) and the second meeting (usually during the last week of the orientation programme and with the Phase 1 academic).
- Schedule and inform students and Personal Tutors the date and time for the meeting during the clinical orientation program at the beginning of Phase 2 (usually with the Phase 2 academic).
- Allocate an alternative Personal Tutor as cover-up in instances where the designated tutor is on leave for more than three months.
- Conduct an awareness session/lecture at the Phase 1 orientation program
- Send periodical reminders to students and Personal Tutors to meet at least once in four months.
- Provide the allocation lists of students and Personal Tutors to the Examination Unit, to help conduct the follow-up by Personal Tutors for students who repeat examinations.
- Obtain feedback regarding the Personal Tutor Scheme from students (Annexure 1) and Personal Tutors (Annexure 2) annually.
- Keep records of the allocation details and feedback obtained from each batch.
- Prepare an annual report based on feedback, submit to the Faculty Board and make necessary adjustments to improve the Personal Tutor Scheme with the agreement of the Faculty Board.

## **5. Responsibilities of the Personal Tutor**

- Meet allocated students on designated days as indicated in the Timetable of the orientation program/clinical orientation program and on subsequent days as and when required.
- Arrange meetings with individual students as and when required.
- Initiate meetings/communications with students at least once in four months.
- Spend time with students and support them setting up goals, assist in developing self-awareness and self-confidence, provide guidance in academic activities, facilitate solving personal issues, refer students to relevant resources and services when needed and respect the privacy and confidentiality of the relationship.
- Help in preparing a study plan and follow-up for students who repeat examinations, according to guidelines directed by the Examination Unit, when required.
- Provide personal mobile phone number and email address to the Coordinator – Personal Tutor Scheme to be made available to allocated students.
- When on leave for more than three months, nominate an alternative Personal Tutor as cover-up.
- Keep records of meeting sessions confidentially.
- Provide feedback (through the online form that will be made available) annually to the Coordinator – Personal Tutor Scheme for the purposes of making the annual report and further improvement to the scheme.



## 4.6. INTERNATIONAL ELECTIVE PROGRAMME

### 1. OBJECTIVES/SCOPE

The Faculty of Medical Sciences, University of Sri Jayewardenepura offers a fee-levying elective programme to international students to learn in a truly exotic setting which offers the opportunity to observe a vast range of common & rare medical conditions in South Asia.

**Duration of course** - maximum 8 weeks per academic year per student. Priority of selection of electives is given to the choice of the student. However, this will depend on the number of vacancies available at a given time-point in each discipline. Maximum period for a clinical/laboratory based elective appointment in one discipline is 4 weeks and the minimum is 1 week. In order to do a clinical elective, a minimum of 6 months of clinical exposure in the relevant Medical Faculty that the student is registered and studying has to be completed. For a research elective, a fixed 8-week period is necessary.

**Fees:** To be paid in US\$ only and will be revised annually. 5–8-week fee will be 37.5% higher than the 1-4 week fee (ie: 1-4 weeks US\$ 400, 5-8 weeks US\$ 550). The fees are non-refundable. However, the option to postpone the elective appointment by one year will be offered if a valid reason is provided.

Airfare, accommodation, transport and food will **not be provided**.

Clinical disciplines available for training include Internal Medicine, Surgery, Paediatrics, Gynaecology & Obstetrics, Psychiatry, General Practice/Family Practice, Forensic Medicine, and Community Medicine (Public Health/Preventive Medicine). Training of the clinical disciplines will be made available at the training centres affiliated to the university (including Colombo South Teaching Hospital, Family Practice Centre at FMS/USJ and Medical Officer of Health Boralesgamuwa) and Disease Control Programmes of the Ministry of Health.

Laboratory based disciplines (diagnostic and or research) available at the Faculty of Medical Sciences include: Clinical Biochemistry, Haematology, Histopathology, Medical Microbiology, Medical Parasitology, Allergy, Immunology & Cell Biology, and Molecular Medicine.

### 2. MEMBERSHIP

The committee is headed by the Dean/FMS, and the committee consists of the Elective Coordinator, a Technical Officer (TO)/Management Assistant (MA) to assist the Elective Coordinator, Senior Assistant Registrar (SAR) appointed by the Faculty Board, a MA from the Dean's Office, Senior Assistant Bursar (SAB) & a MA from the Finance Division FMS, USJ.

### 3. MEETINGS

No regular meetings will be held. Necessary communications with the membership would be made via emails/soft or hard copies.

### 4. REPORTING

Academic communication with the elective students will be conducted by the Elective Coordinator who is an academic staff member appointed by the Faculty Board. He/She will be assisted with documentation by a TO/MA. **Offer letter** will be issued by the Dean once documents of the elective student (student confirmation letter issued by the relevant University

authorities and giving permission to do an elective, Curriculum Vitae (CV), cover letter from the student and filled online application form) are checked and approved by the Elective Coordinator.

**Payment receipt** will be confirmed by the SAB of FMS. Once the student arrives with all relevant documents (Confirmation of the studentship from the University, CV, Proof for Identity i.e., Passport, Proof for Payment, offer letter from FMS, USJ, two passport size photographs) the Deputy Registrar

(DR)/SAR/AR will issue the **commencement letter** signed by the **Dean** to the relevant Heads of the Departments as per requested by the applicant in the application form and offer letter.

If the appointment/s is/are in the Colombo South Teaching Hospital (CSTH), the commencement letter will be addressed to the Director CSTH with a copy to relevant Head/s of Department/s. Permission from the Director General Health Services (DGHS) of the Ministry of Health will be taken for each elective student to carryout clinical appointments at CSTH & other institutions that come under the per view of the Ministry of Health.

**The Elective Coordinator & TO/MA** to the Elective Coordinator would maintain the **soft copies** of the following documents:

1) Application form, 2) CV, 3) Letter confirming the studentship from the relevant Medical Faculty with permission to do the elective, 4) Cover letter submitted by the student, 5) Copy of the Offer Letter. The TO/MA will maintain an excel data sheet with the name of the student, duration of the Elective appointment (start & end dates), total weeks of the appointment, department, Departments of the Elective Appointment, email address of the student, sent date of the offer letter to the student (see annexure 1). TO/MA will send the following documents to the student: 1) Offer letter with Dean's Signature (PDF), 2) Finding your way to FMS/USJ, 3) Finding your way to CSTH, 4) Information about CSTH, 5) Dress code & currency information sheet 6) Welcome letter (See annexures 2-7).

**The Dean's Office (SAR & MA)** will maintain a file containing the following documents as **hard copies** once the student arrives:

1) Copy of the Offer letter, 2) Original letter confirming the studentship of the relevant student with permission to do the elective, 3) copy of the payment slip, 4) copy of the passport, 5) a passport size photograph, 6) A copy of the Commencement Letter.

**The finance division (SAB & MA)** will maintain the following documents: 1) Payment confirmed receipts, 2) copy of the offer letter and the commencement letter of the individual Elective student, **all in hard copies**.

**Supervisor/s** will fill the relevant forms submitted by the student upon completion of the Elective appointment. In addition, the Dean may issue a letter confirming the completion of the elective/s is the student requests one (see annexure 8).

A monthly report should be submitted to the Faculty Board for approval by the Elective Coordinator through SAB confirming receipt of funds and stating the number of Elective **students who have payed and started electives in each preceding month**.

**4.7 STUDENT WELFARE SOP AS A SEPARATE ATTACHMENT**

**4.8 UNDERGRADUATE STUDENT SOP AS A SEPARATE ATTACHMENT**

**4.9 PRE UNIVERSITY WORK EXPERIENCE SOP AS A SEPARATE ATTACHMENT**

## **5. OTHER**

## **5.1 INTERNAL QUALITY ASSURANCE CELL COMMITTEE**

### **1. BACKGROUND**

The Quality Assurance Cell of the Faculty of Medical Sciences (IQAC-FMS) has to liaise with the different departments of Faculty of Medical Sciences herein after referred to as the Faculty, to initiate, plan and supervise various activities that are necessary to uplift the quality of the MBBS programme of the Faculty in line with the National Quality Assurance Framework of Sri Lanka under the directions of the Center for Quality Assurance (CQA), University of Sri Jayewardenepura.

The IQAC-FMS should operate based on the following broad principles:

- Adoption of a holistic approach and integrate academic, academic support and administrative activities of the Faculty to ensure fulfillment of the required academic and professional standards.
- Recognition and appreciation of the diversity of disciplines and/or subject areas offered by the Faculty.
- Promotion of open-minded discussion among the academic, academic support and administrative staff to enhance confidence on Quality Assurance (QA) and create team-spirit in carrying out QA related activities.
- Rely on multiple methods and perspectives to improve quality, thus diversity within the faculty is not affected.
- Adoption of an evidence-based approach to QA with a focus on continuous improvement of academic and administrative activities of the Faculty

### **2. OBJECTIVES**

The IQAC-FMS is responsible for developing guidelines related to the QA activities of the Faculty and overseeing the implementation of such activities. The activities overseen by the IQAC FMS will comprise of, but not restricted to, the following eight aspects relating to the Faculty:

1. Management and review of degree programmes
2. Development of human and physical resources
3. Design and development of curriculum
4. Design and development of course/modules
5. Improvement of teaching and learning mechanisms
6. Provision of student support services and facilitating their progression
7. Review of student assessment mechanism and awards
8. Promotion of innovative and healthy practices

### **3. SCOPE**

- Guide all QA related activities within the Faculty
- Conduct Faculty level awareness programmes on QA among staff members, with the support of the CQA
- Ensure the necessary academic regulations/By-laws are in place, within the Faculty, and if not make recommendation for remedial action.
- Assist the Dean of the Faculty, Director/CQA, Deputy Director/CQA to coordinate the inclusion of QA aspects in the Faculty Corporate Plan and to implement QA reviews/audits and follow up action.
- Support the Faculty and programme offering entities within the Faculty (i.e. Departments of Study) in preparation for external quality assurance assessments and accreditation requirements.
- Offer guidance and assistance to programmes offering entities in defining programme objectives and outcomes, graduate profiles and course curricula which are in accordance with national reference points such as the SLQF

- Facilitate identification and sharing of good practices between academic departments under the Faculty.
- Prepare an Annual Work Plan for the IQAC-FMS, and a three-year Strategic Development Plan for QA activities for the Faculty.
- Direct the relevant stakeholders to administer student surveys/feedback, stakeholder meeting proceedings and other surveys.
- Maintain a repository of evidence at faculty level for the Institutional Reviews (IRs) and Programme Reviews (PRs).

### **3. COMPOSITION**

Dean of the Faculty or nominee will be the Chair of the IQAC-FMS. Heads of Departments or their nominees from each Department, Chairpersons of Phase I, II & III, Director Examinations, Clinical Coordinator, Coordinator of the Human Biology Programme and the Senior Assistant Registrar should make up the IQAC committee. The Coordinator will be appointed by the Vice-Chancellor, University of Sri Jayewardenepura, on the recommendation of the Dean based on consensus of the membership. The approval of the Faculty Board shall be obtained for the IQAC-FMS committee.

#### **Co-option**

Members will be co-opted depending on the need after obtaining approval of the Faculty Board.

#### **Duration of the membership**

Duration of the membership will be for a period of three (03) years. Members are eligible for re-appointment. At the end of three (03) years the committee will be reconstituted and the new committee should be comprised of at least half of its members with a minimum of one (01) years' experience as a member from the previous IQAC-FMS to retain the expertise.

#### **Replacement of members**

A member can be replaced in the event of death or due to continuing absence for more than two (02) consecutive IQAC meetings without a valid excuse. In case a nominee wishes to resign, the Head of the Department should nominate another academic. The effective date of resignation and the replacement will be the date the Faculty Board approval was obtained for the changes.

#### **Offices**

- The chairperson will conduct all the meetings of IQAC. In the event the chairperson is unable to attend, an alternate chairperson will be appointed from among the senior members of the committee present, prior to the meeting.
- The coordinator shall liaise regularly and closely with the Dean of the Faculty, and Director/ CQA and responsible for organizing the meetings and workshops, maintaining records, communicating with all concerned including the CQA on QA related activities. In addition, coordinator is to coordinate the preparation of Faculty Self Evaluation Report (SER) for Programme Reviews (PRs), assist the Director/CQA in the preparation of QA related guidelines and manuals for use within the Faculty and to attend the monthly CQA meetings representing the IQAC FMS.

#### **Administrative support**

The required administrative and secretarial assistance for the IQAC FMS should be made available by the Dean of the Faculty.

### **4. MEETINGS**

- The committee meets once a month on the first Wednesday of each month. In case the meeting cannot be held on the stipulated date an alternate date is communicated via e-mail to the membership

- The meeting is held in the board room of the Faculty of Medical Sciences. If the board room is not available an alternate venue is informed via e-mail
- Minutes are taken by the administrative secretary (who shall be a management assistant in the Faculty) of the committee and finalized by the coordinator. The minutes and agenda shall be circulated one week prior to the meeting via e-mail by the coordinator.

### **Meeting attendance**

In the event a member is unable to attend a scheduled meeting, IQAC should be informed via email prior to the commencement of the meeting and a representative to be sent with anything to be discussed/work that was done in writing to be tabled and discussed.

## **5. REPORTING**

The IQAC is required to report every month to the Faculty Board regarding the progress of its activities under the eight criteria identified in the programme review. A copy of the report on IQAC activities should be sent to the CQA based on guidelines to keep aware of the developments taking place at Faculty level.

## **5.2 RESEARCH COMMITTEE**

### **1. OBJECTIVES**

- To facilitate, monitor and evaluate research at the Faculty of Medical Sciences, University of Sri Jayewardenepura
- To facilitate, monitor and evaluate University Research Grants at the Faculty of Medical Sciences, University of Sri Jayewardenepura
- To enhance research communications, presentation skills and soft skills of academic staff, undergraduates, and postgraduates
- To facilitate advancement in health-related research
- To streamline research in keeping with the vision of the University of Sri Jayewardenepura and the mission and goals of the faculty of Medical Sciences

### **2. SCOPE**

- support the faculty in facilitating research
- facilitate monitoring and evaluating research
- support the faculty in facilitating post-graduate research
- support the faculty in facilitating, monitoring, and evaluating research grants
- organize research conferences and create opportunities for cooperation and collaboration with eminent researchers internationally and nationally
- enhance presentation skills and soft skills of presenters

### **3. MEMBERSHIP**

- The committee membership is appointed for a period of 3 years.
- Membership is called for via online applications, among the faculty members who are senior lecturers and above, with the announcement at the Faculty Board.
- Applications are directly sent to the Dean of the Faculty by email.
- Based on department representativeness, the Dean appoints the committee at the next Faculty Board.
- The Dean convenes the 1<sup>st</sup> committee meeting, and the Chairperson and the Secretary are nominated by the committee.
- The appointments of the chairperson and the secretary are sent for approval to the Faculty Board and the Senate.
- The committee meetings are chaired by the Chairperson, or a nominated Chairperson if the Chairperson is excused for that meeting.
- When members wish to resign from committee or when the designated positions are changed, the staff member should inform the Chairperson in writing two months in advance.
- If a committee member is absent for more than 3 consecutive meetings in a year, without a valid excuse, this member will be removed from the committee.
- An appointed position becomes vacant automatically if the appointed member loses his/her original qualification for appointment.

### **4. MEETINGS**

- The committee meets monthly on 1<sup>st</sup> Thursday of the month at 12.00 noon and this meeting is communicated to membership through email one week in advance.
- The minutes and agenda are circulated via email one week prior to the meeting by the Secretary.
- The venue is the board room of the Faculty of Medical Sciences.
- Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the Secretary.
- The research correspondence received by the committee from the previous meeting date up to the 20<sup>th</sup> day of the month, will be discussed, approved and forwarded or returned to authors for necessary amendments at a particular committee meeting.



- Minutes will be taken by the officially appointed Secretary of the committee.
- The Secretary will send the extracts of the minutes to the next Faculty Board.

**Quorum**

- The quorum for a research committee meeting shall be 50% of the membership, plus one.
- Where a loss of quorum is identified, the meeting may be adjourned until a time the Chairperson determines. Any matters for decision considered when the meeting is inquorate must be subsequently ratified by the Executive Committee or at the next committee meeting before those decisions can be actioned.

**5. REPORTING**

- The extracts of the minutes are tabled and discussed at the next Faculty Board meeting.
- The research correspondence that was approved by the committee will be tabled and forwarded to the Research Council through the Dean of the Faculty, within a week.

## **5.3 AWARDS AND SCHOLARSHIPS COMMITTEE**

### **1. OBJECTIVES**

- To facilitate, monitor and evaluate awards and scholarships at the Faculty of Medical Sciences, University of Sri Jayewardenepura
- To formulate and update guidelines for the awards and scholarships

The awards and scholarships to be considered for the following categories;

- a) Students of the Faculty of Medical Sciences
- b) Academic staff of the Faculty of Medical Sciences
- c) Non-academic staff of the Faculty of Medical Sciences

### **2. SCOPE**

- serve as an advisory body to the faculty regarding the scholarships and awards
- formulate and update guidelines for awards and scholarships
- facilitate in monitoring and evaluating scholarships and awards to students, academic staff, and non-academic staff
- determine the eligibility of applicants for scholarships and awards based on the TOR for awards and scholarships
- recommend to the faculty board criteria for all new awards or scholarships given to undergraduates

### **3. COMPOSITION OF THE COMMITTEE**

- The committee is appointed for a period of 3 years
- Membership is nominated and ratified by the Faculty Board
- Membership will consist of one representative (a senior academic) each from phase I, II and III, the Director Examinations (ex-officio), Dean (ex-officio) and Senior Assistant registrar (ex-officio)
- The members of the committee determine the chair of the committee SAR would function as the coordinator of the committee

### **4. ADMINISTRATIVE MATTERS**

- The committee would meet at least once in 3 months or when necessary and the meeting is communicated to the membership through email one week in advance. Dates would coincide with the results board meetings of the major examinations (1st MBBS, 2nd MBBS and Final MBBS examinations)
- The minutes and agenda are circulated via email one week prior to the meeting by the coordinator
- Minutes will be taken by the coordinator of the committee. Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the coordinator
- An extract of the minutes will be sent to the next Faculty Board
- Hard copies and soft copies of all guidelines and applications will be maintained in the Deans office and will be available on the faculty website.
- Details of all scholarships and awards of the faculty will be maintained by the scholarship committee

### **5. REPORTING**

- The extracts of the minutes and the names of awardees to be tabled at the Faculty Board meetings

### **6. EXCLUSIONS**

- Selection of candidates for gold medals and awards to be presented at the convocation will not be under the purview of this committee and will remain with the examination unit.

## **5.4 CANTEEN COMMITTEE**

### **1. OBJECTIVE**

- To ensure the availability of good quality food for a reasonable cost.
- Regular monitoring of the quality of food.
- To make sure that the environment of the canteen is clean and conducive for staff and students.

### **2. SCOPE**

- To make sure there's a good supply of healthy food at a reasonable price
- To oversee the food preparation, handling and storage to ensure food hygiene
- To review the logistics of the canteen and advices on facilities needed in the canteen
- To ensure the canteen premises is clean
- To assess the quality of the food periodically
- To obtain student feedback on the quality of food as well as the environment periodically
- To coordinate with the relevant authorities regarding issues related to water and electricity supply
- To ensure that canteen management complies with all relevant legislation of the University
- To coordinate with the relevant authorities regarding disposal of garbage in and around the canteen
- To address the issues related to food hygiene, pests, and cleanliness in the premises and reports to the Public Health Inspector in University of Sri Jayewardenepura
- To review the tenure of the canteen authorities annually and make arrangements to call tenders and award according to procurement guidelines. Also take in to consideration the quality of the food and student feedback

### **3. COMPOSITION OF THE COMMITTEE**

- The committee is appointed for a period of 3 years
- Membership is nominated and ratified by the Faculty Board
- Membership will consist of a chairperson, secretary and treasurer, 6 committee members, 1 student representative from each batch, Assistant bursar (ex-officio), and representative from the Maintenance Unit (ex-officio).
- The members of the committee determine the chair, secretary and treasurer of the committee.

### **5. MEETINGS**

- Meetings will be chaired by the chairperson. Meetings will be held on the first Tuesday of once in 2 months at 12.30 at the Board Room of the faculty of Medical Sciences
- The agenda and minutes of the meetings will be circulated to the membership of the committee via email one week prior to the scheduled meeting date
- A quorum will be 1/3 the regular membership

### **6. REPORTING**

- Minutes of each meeting are provided to the Faculty Board, of Faculty of Medical Sciences.
- Annual report of the committee's activities is presented to the Faculty Board, of the Faculty of Medical Sciences

## **5.5 STAFF DEVELOPMENT COMMITTEE**

### **1. OBJECTIVE**

- Provide opportunities for both academic and non-academic staff in their personal and professional development

### **2. SCOPE**

- To encourage academic staff to develop their teaching learning and assessment skills by organising activities with relevant expertise
- To empower academic and non-academic staff with necessary competencies in facing new challenges in their academic, research and administrative functions
- To create opportunities for both academic and non-academic staff in team building and recreational activities.
- To inspire academic and non-academic staff on healthy life style by organizing activities on mindfulness, physical activity, yoga and healthy eating behaviour etc.
- To facilitate the effectiveness of the non-academic staff in order to enhance their working efficiency by organizing activities related to improving English language competencies, statistics, Information and communication technologies etc.
- To function in collaboration with other partners in achieving staff development goals.

### **3. MEMBERSHIP**

- Chairperson, Secretary, Treasurer and 4 committee members from the academic staff appointed by the Faculty Board and 2 non-academic staff members (one of them being an assistant bursar of the FMS).

### **4. MEETINGS**

- All the meetings will be chaired by the Chairperson or a nominee
- Meetings will be held once in 2 months' time on the second Tuesday of the month at 12.30pm.
- Meeting agendas and minutes will be provided by the secretary of staff Development Committee. A quorum should be more than half the regular membership.

### **5. REPORTING**

- Minutes of each meeting are provided to the Faculty Board, Faculty of Medical Sciences.
- Report of the committee's activities is presented to the Faculty Board, Faculty of Medical Sciences annually.

## **5.6 COMMITTEE FOR BEAUTIFICATION OF COMMON AREAS (COBCA)**

### **1. PURPOSE/ SCOPE**

To identify, suggest and oversee the beautification of common areas of the Faculty of Medicine (FMS), University of Sri Jayewardenepura (USJ)

### **1. MEMBERSHIP**

- Composition:
  - Academic staff members of the FMS, USJ
  - Any others co-opted as the need arises
  - Maximum numbers of members is limited to 10
  - A Chairperson will be selected by the Dean from among the members
  - A Secretary will be elected from among the members by the committee
- Applications will be called from interested academic staff members to join COBCA and selection will be made by the Dean, FMS and the Chairperson, COBCA
- The members to COBCA will be appointed by Dean, FMS, subjected to the approval of the Faculty Board, FMS, USJ
- Period of membership will be 3 years with the option of reapplying for a second term.

### **2. FUNCTIONS**

- To identify common areas in the Faculty
- To advice and support Dean, FMS in
  - a. obtaining relevant expertise in beautification of these areas
  - b. evaluating the proposals relevant for beautification and use of these areas
  - c. supervising the maintenance work related to common areas

### **3. MEETINGS**

- COBCA will meet as required to evaluate
  - new proposals that are submitted
  - the ongoing activities
- Minutes of the meetings will be maintained by the Secretary, COBCA and will be submitted to the Faculty Board for information and necessary action
- Decision making will be by consensus.

### **4. REPORTING**

COBCA will report to the Faculty Board and Dean, FMS, USJ

## **5.7 ANIMAL HOUSE COMMITTEE**

### **1. OBJECTIVES**

- To promote the 3R principle (replacement, reduction, refinement) at the highest level with regards to the use of animals in research
- To promote research and development while safeguarding the welfare of research animals
- To improve the facilities of the Animal House to make it a centre of excellence for training and conducting animal-based research

### **2. MEMBERSHIP**

- The membership shall comprise five academic members from the Faculty of Medical Sciences and two from the Faculty of Allied Health Sciences, University of Sri Jayewardenepura
- Applications shall be called for membership and the committee shall select the suitable members for the approval of the respective faculty boards.
- The Chairperson shall be a member from FMS, USJ and shall be selected by the committee and approved by the faculty board, FMS, USJ.
- The Coordinator of Animal House shall be a member of the committee.
- Term of a committee shall be three years.
- The new committee shall retain 50% of the previous committee members.

#### **Chairperson**

- Shall chair the meetings and be responsible for the overall activities of the committee.
- Shall execute the decisions taken by the committee.
- Shall attend meetings regularly. When unable to do so, shall inform the secretary. The committee shall appoint a member to chair that meeting.

#### **Secretary**

- Shall convene the meetings and be responsible for the secretarial work of the committee.
- Shall take down the minutes and maintain the minutes file, with one being kept in the Animal House with the Technical Officer.
- Shall attend meetings regularly and when unable to do so, will inform the Chairperson. The committee shall appoint a member to act as secretary for that meeting.

#### **Member**

- Shall actively contribute to the activities of the committee.
- Shall attend meetings regularly and inform the secretary in advance if unable to attend.
- Members who shall be absent for 3 consecutive meetings shall be sent a letter inquiring for their willingness to continue.

### **3. MEETINGS**

- The committee shall convene once in two months and also in between as and if needed.
- The meeting shall be notified to the committee via email
- The meeting quorum shall be a minimum of 4 committee members
- Minutes of the previous meeting and the agenda shall be circulated along with the notice of the meeting at least one week prior to the scheduled date of the meeting
- The Technical Officer of the Animal House shall attend the meetings.

### **4. REPORTING**

- The Animal House committee shall come under the purview of the Dean, FMS, USJ and shall report to the Faculty Board through Dean.
- Following approval by the faculty board, the minutes shall be sent for approval by the senate.

## **5.8 COVID-19 COMMITTEE**

### **1. OBJECTIVES**

- To prevent COVID-19 at the Faculty of Medical Sciences University of Sri Jayewardenepura
- To make aware of the current control and prevention techniques to the staff and students of the Faculty of Medical Sciences, University of Sri Jayewardenepura
- To risk assess and control COVID-19 among the staff and students of the Faculty of Medical Sciences, University of Sri Jayewardenepura

### **2. SCOPE**

- ensure that preventive actions are in place
- support the faculty in improving awareness of COVID-19
- risk assess the staff and students, when there is an exposure
- control the spread by recommending self-isolation of primary and secondary contacts
- improve the mental wellbeing of a positive patient

### **3. MEMBERSHIP**

- The present membership was recruited urgently by the Vice Chancellor with the COVID-19 cluster in Sri Lanka.
- The committee shall consist of ten members (minimum).
- In future, membership will be called for, among the Faculty members who are either a lecturer or a senior lecturers and above, with the announcement at the Faculty Board or via emails
- Applications are directly sent via email to the Dean of the Faculty
- Representativeness, will be as per the three phases in the faculty and the Dean would appoint the committee at the next Faculty Board
- The two Co-Chairpersons and the Secretary is sent for approval to the faculty board and the senate.
- The meetings are chaired by the Co-Chairpersons or a Co-Chairperson if one of the Co-Chairpersons is excused for that particular meeting.
- When members wish to resign from the committee or when the designated positions are changed, the staff member should inform the Co-chairpersons in writing two months in advance.
- If a committee member is absent for more than 3 consecutive meetings in a year, without a valid excuse, this member will cease to be in the committee.

### **4. MEETINGS**

- The committee will not be meeting on a weekly or monthly basis.
- As per the COVID-19 control, prevention and exposure needs, the meeting would be convened through email or WhatsApp group within few hours.
- The minutes will be circulated via email one week after the meeting by the secretary.
- The meeting will be convened via a virtual platform.
- Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the secretary.
- Minutes will be taken by the officially appointed secretary of the committee

### **5. REPORTING**

- The extracts of the minutes are tabled and discussed at the next Faculty Board meeting.



## **5.9 DENGUE CONTROL COMMITTEE**

### **1. OBJECTIVES**

- To eliminate dengue mosquito breeding sites at the Faculty of Medical Sciences, University of Sri Jayewardenepura
- To actively involve the staff and students of the Faculty of Medical Sciences, University of Sri Jayewardenepura in reporting mosquito breeding sites

### **2. SCOPE**

- Actively find dengue mosquito breeding sites through weekly inspections by the committee members
- Take necessary actions to eliminate the identified dengue mosquito breeding sites
- Encourage staff and students to report dengue mosquito breeding sites to the committee

### **3. MEMBERSHIP**

- The committee was set up at the request of the Dean, FMS, USJ
- The committee shall consist of at least ten members.
- The committee comprises four academic staff members who volunteered to the Committee and will supervise, advise and coordinate activities.
- Two academic staff members will be appointed as the Chairperson & convener by the Dean of FMS
- At least one non-academic staff member from each department will be appointed to the committee.
- The Heads of the Departments will be informed by the Committee through the Dean/FMS to nominate a non-academic staff member for the Committee.
- When members wish to resign from the committee, the committee member should inform the Chairperson of the Committee in writing.
- A committee member should have at least 60% attendance in a year, to be eligible for a letter of commendation at the end of the year.

### **4. MEETINGS**

- The frequency of the committee meetings will be decided by the Chairperson based on the requirement.
- Meetings will be convened through WhatsApp messages.
- Minutes will be taken by the officially appointed convener of the committee
- Once the minutes are confirmed, a soft copy and a hard copy will be filed and maintained by the convener

### **5. REPORTING**

- The extracts of the minutes are tabled and discussed at the upcoming Faculty Board meeting