MIU
A Chartered University

FEEDBACK
MECHANISM GUIDEBOOK

FOR

MBBS PROGRAM

Outcome–Based • Integrated • Student–Centered • Community–Oriented • Value–Driven

MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE

MIRPUR (AJK), PAKISTAN

SERVING HUMANITY THROUGH EXCELLENCE IN MEDICAL EDUCATION

Rooted in Islamic Values

Approved by the Academic Council

Aligned with PMDC MBBS Curriculum 2024 & HEC Standards

Prepared by Department of Medical Education

VERSION 3.0

JANUARY 2026

MOHI-UD-DIN ISLAMIC UNIVERSITY
A Chartered University

CONTENTS

Preface: 3

Copyright Statement: 4

Introduction 5

FEEDBACK AND CURRICULUM REVIEW POLICY 5

- Purpose 5
- Scope 5
- Policy Principles 5
- Roles and Responsibilities 6
- Review and Revision 6

Key Objectives of Feedback Mechanisms 6

ROLE OF FEEDBACK IN CURRICULUM REVIEW 7

FEEDBACK GOVERNANCE STRUCTURE 7

- Feedback Governance Pathway 8
- Description of the Governance Pathway 9

FEEDBACK AND CURRICULUM REVIEW CYCLE 9

FEEDBACK COLLECTION AND REVIEW SCHEDULE 10

- Principles for Scheduling Feedback 10
- Institutional Feedback Schedule 11
- Utilization of Feedback 11

FEEDBACK TOOLS AND SOURCES OF EVIDENCE 11

- Standard Feedback Instruments 11
- Additional Sources of Curriculum Review Evidence 12
- Evidence Integration 12

Digital Platform and Feedback Collection 12

CONFIDENTIALITY, ETHICS, AND DATA MANAGEMENT 12

IMPLEMENTATION, MONITORING, AND CONTINUOUS IMPROVEMENT 13

STANDARD OPERATING PROCEDURES (SOPs) FOR FEEDBACK MANAGEMENT 14

Questionnaires 18

MOHI-UD-DIN MEDICAL COLLEGE, MIRPUR (AJK)			
DEPARTMENT OF MEDICAL EDUCATION	**POLICY DOCUMENT**	**DOC. NO: MIMC-DME-XXX**	**VERSION: 01**
EFFECTIVE DATE: 01-JAN-2026	**REVISION DATE:**	**PAGE: 1 OF 14**	**CLASSIFICATION: INTERNAL**
APPROVED BY:			
ENDORSED BY:			
COMPILED BY			

PREFACE:

Mohi-ud-Din Medical College (MIMC), Mirpur (AJK), is committed to maintaining excellence in undergraduate medical education through continuous quality assurance and evidence-informed educational practices. Recognizing that meaningful feedback is a cornerstone of curriculum development and educational improvement, the Department of Medical Education has developed this **Feedback Mechanism Guidebook** to provide a structured framework for the systematic collection, analysis, and utilization of feedback from students, faculty, and other stakeholders.

The purpose of this guidebook is to promote a culture of reflective practice, accountability, and continuous enhancement across all components of the MBBS program. By establishing standardized procedures for feedback collection and follow-up, the College aims to identify strengths, address areas requiring improvement, and ensure that teaching, learning, assessment, and clinical training remain aligned with institutional goals and contemporary medical education standards.

This guidebook outlines the policies, procedures, timelines, roles, and responsibilities governing the feedback process at MIMC. It emphasizes confidentiality, transparency, ethical conduct, and the effective use of evaluation findings to support informed decision-making and sustainable curriculum improvement.

The success of this feedback system depends upon the active participation of students, faculty members, administrators, and clinical supervisors. Their constructive contributions enable the College to strengthen its educational environment and foster a learner-centered culture dedicated to academic excellence and professional development.
The Department of Medical Education expresses its sincere appreciation to all stakeholders whose continued commitment to quality improvement contributes to the advancement of medical education at Mohi-ud-Din Medical College, Mirpur (AJK). Through this collaborative approach, MIMC remains committed to producing competent, compassionate, and socially accountable medical graduates.

INTRODUCTION

Mohi-ud-Din Medical College (MIMC), Mirpur (AJK), recognizes that continuous evaluation is essential for maintaining the quality and effectiveness of undergraduate medical education. A structured feedback system enables the institution to evaluate educational processes, monitor curriculum implementation, and identify opportunities for improvement through evidence-based decision-making.

The Department of Medical Education has developed the Feedback Mechanism Guidebook to establish a standardized institutional process for collecting, analyzing, reporting, and utilizing feedback from students, faculty, and other stakeholders. The guidebook supports continuous quality enhancement by ensuring that feedback is translated into practical actions that improve teaching, learning, assessment, clinical training, and the overall educational environment.

The feedback process at MIMC is guided by the principles of transparency, confidentiality, fairness, accountability, and continuous improvement. It promotes active participation from all stakeholders and encourages a culture where constructive feedback contributes to curriculum development, faculty growth, and institutional excellence.

Term	Definition
Feedback	Information collected from stakeholders regarding the effectiveness of educational processes.
Curriculum Review	A systematic examination of curriculum design, implementation, assessment and outcomes to improve educational quality.
Stakeholder	Students, faculty, administrators, clinical supervisors, graduates and employers participating in curriculum evaluation.
Action Plan	A documented improvement strategy developed in response to evaluation findings.
Block Evaluation	Review of a specific Block using feedback and performance indicators.

FEEDBACK AND CURRICULUM REVIEW POLICY

Purpose

This policy establishes a structured framework for collecting, analyzing, and utilizing feedback to support continuous curriculum review and quality enhancement within the MBBS program. It ensures that evidence obtained from students, faculty, graduates, and other stakeholders is systematically used to improve curriculum design, teaching practices, assessment strategies, learning resources, and the overall educational experience.

Scope

This policy applies to all curricular activities of the MBBS program, including module delivery, classroom teaching, laboratory sessions, clinical training, assessment practices, learning resources, and educational support services. It covers feedback obtained from students, faculty members, clinical supervisors, and other relevant stakeholders involved in curriculum implementation.

Policy Principles

The feedback and curriculum review process shall be guided by the following principles:

1. **Continuous Quality Improvement:** Feedback shall serve as a primary source of evidence for ongoing curriculum review and educational enhancement.
2. **Standardized Evaluation:** Approved institutional tools and procedures shall be used to ensure consistency, reliability, and comparability of feedback data.
3. **Transparency and Accountability:** Evaluation findings and subsequent improvement initiatives shall be communicated to relevant stakeholders whenever appropriate.
4. **Confidentiality:** Individual responses shall remain confidential and shall be used exclusively for educational quality improvement.
5. **Timely Review:** Feedback shall be collected, analyzed, and acted upon according to the institutional academic calendar.
6. **Evidence-Informed Decision Making:** Curriculum revisions and educational decisions shall be based on analyzed feedback together with assessment outcomes, program performance indicators, and accreditation requirements.
7. **Ethical Practice:** All feedback activities shall uphold fairness, professionalism, respect, and academic integrity.

Roles and Responsibilities

- **Academic Council:** Approves institutional policies and major curriculum revisions.
- **Curriculum Committee:** Reviews feedback reports and recommends curriculum improvements.
- **Basic Coordination Committees:** Review module-level feedback and implement recommendations at the block/module level.
- **Department of Medical Education:** Coordinates feedback collection, data analysis, report preparation, and supports evidence-based curriculum review.
- **Information Technology Unit:** Manages the digital feedback system and ensures secure handling of evaluation data.
- **Faculty Members:** Participate in feedback activities and implement approved curricular improvements.
- **Students:** Provide constructive and professional feedback to support curriculum enhancement.

Review and Revision

This policy shall be reviewed periodically by the Department of Medical Education and the Curriculum Committee to ensure alignment with PMDC standards, Mohi-ud-Din University regulations, and institutional quality assurance requirements. Revisions shall be submitted to the Academic Council for approval before implementation.

KEY OBJECTIVES OF FEEDBACK MECHANISMS

The Feedback System at Mohi-ud-Din Medical College is designed to promote continuous quality enhancement by generating reliable evidence for informed academic decision-making. The primary objectives are to:

1. Establish a standardized and transparent mechanism for collecting feedback from students, faculty, and other stakeholders.
2. Monitor the effectiveness of curriculum implementation, teaching practices, assessment methods, and learning resources.

3. Identify strengths and areas requiring improvement within modules, courses, and clinical rotations.
4. Support evidence-informed curriculum review and educational planning through systematic analysis of stakeholder feedback.
5. Promote faculty development by providing constructive information regarding teaching effectiveness and educational practices.
6. Enhance student engagement by encouraging active participation in institutional quality assurance processes.
7. Facilitate timely corrective actions and monitor the effectiveness of implemented improvements.
8. Ensure continuous alignment of the curriculum with PMDC standards, Mohi-ud-Din University regulations, institutional objectives, and evolving healthcare nee

---

ROLE OF FEEDBACK IN CURRICULUM REVIEW

Feedback is an essential component of continuous curriculum improvement. It provides direct insight into the effectiveness of educational activities and enables the institution to evaluate whether the intended learning experiences are being achieved.

A systematic feedback process helps the College to:

- Evaluate the quality and relevance of teaching and learning activities.
- Assess the effectiveness of curriculum delivery across different phases of the MBBS program.
- Identify challenges related to teaching methods, assessment strategies, learning resources, and clinical training.
- Review student workload, curriculum integration, and sequencing of learning experiences.
- Support evidence-based curriculum modifications rather than decisions based solely on individual opinions.
- Promote reflective teaching practices and continuous faculty development.
- Strengthen collaboration among students, faculty members, module coordinators, and academic committees.
- Monitor the impact of curriculum changes through regular follow-up evaluations.

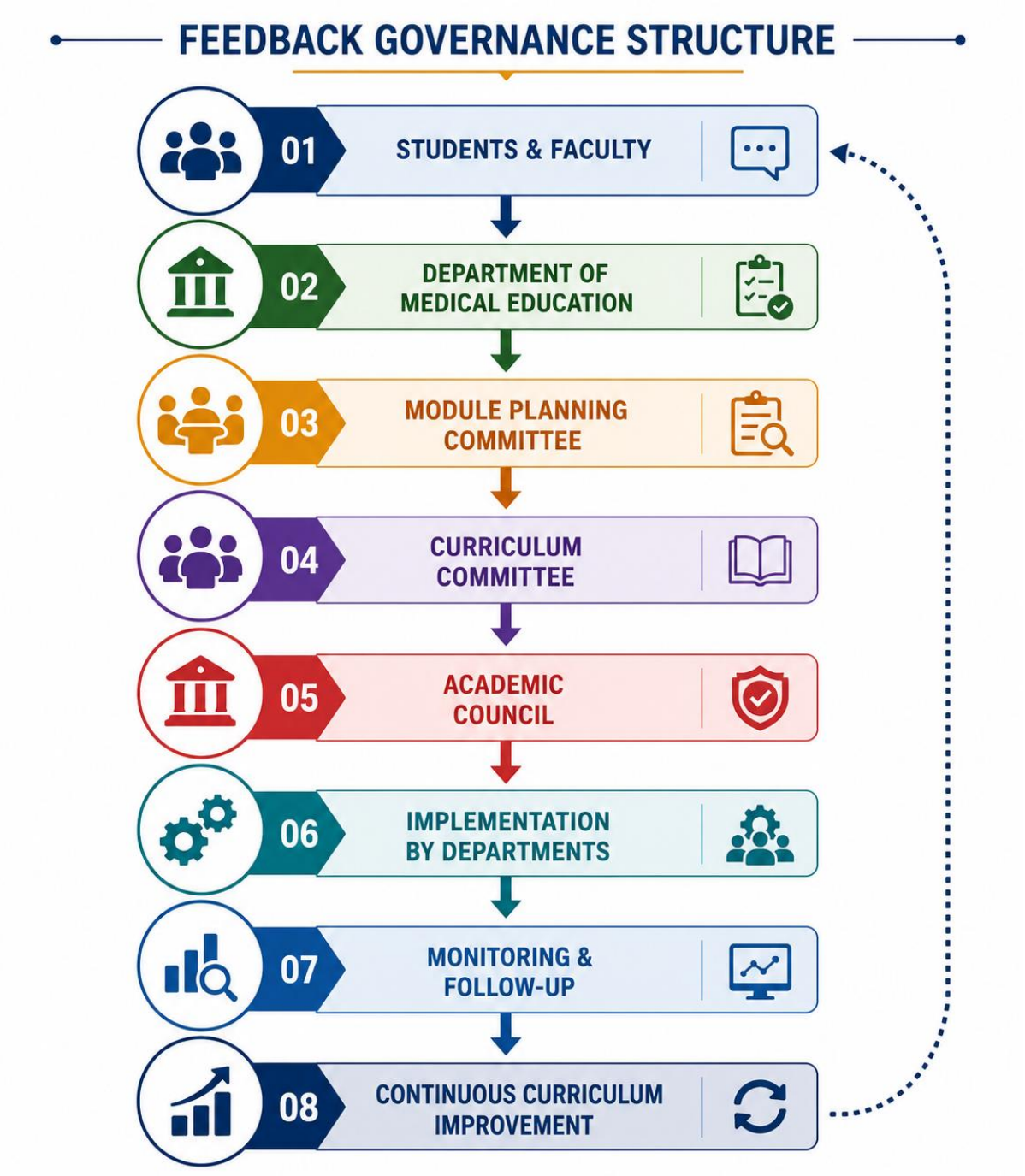
Feedback should not be viewed as an isolated evaluation activity but as a continuous quality improvement process. Information collected from multiple stakeholders contributes to periodic curriculum review, enabling the institution to make informed decisions that improve educational quality and student learning outcomes.

FEEDBACK GOVERNANCE STRUCTURE

Effective feedback management requires a clearly defined governance structure that establishes accountability, facilitates timely decision-making, and ensures that stakeholder feedback is translated into meaningful curriculum improvements. At Mohi-ud-Din Medical College, the feedback system operates through a structured reporting mechanism involving the Department of Medical Education, academic committees, and institutional leadership. The Department of Medical Education serves as the central coordinating body for the collection, analysis, interpretation, and reporting of feedback. Evaluation findings are initially reviewed at the module level, followed by curriculum-level deliberations before

recommendations are submitted to the Academic Council for approval. Approved actions are subsequently implemented by the relevant departments and monitored through subsequent feedback cycles to assess their effectiveness.
This governance framework ensures that curriculum decisions are evidence-informed, transparent, and aligned with institutional priorities while promoting continuous quality improvement across the MBBS program.

Feedback Governance Pathway



Description of the Governance Pathway

- **Students and Faculty** provide feedback through approved institutional evaluation instruments.
- The **Department of Medical Education** collects, validates, analyzes, and summarizes the feedback into structured reports.
- The **Basic Coordination Committee** reviews module-specific findings and recommends operational improvements.
- The **Curriculum Committee** evaluates broader curricular issues and recommends curriculum modifications based on accumulated evidence.
- The **Academic Council** reviews and approves major policy decisions and curriculum revisions.
- Following approval, the relevant academic departments implement the recommended changes.
- The **Department of Medical Education** monitors implementation and evaluates the impact of improvements during subsequent feedback cycles, thereby completing the quality improvement cycle.

FEEDBACK AND CURRICULUM REVIEW CYCLE

Feedback collection and curriculum review at MIMC follow a continuous improvement cycle that ensures evaluation findings are translated into meaningful educational enhancements. The process consists of the following stages:

Step 1 – Feedback Collection

Feedback is obtained from students, faculty members, clinical supervisors, and other stakeholders using standardized institutional instruments at predefined stages of the academic year.

Step 2 – Data Analysis

The Department of Medical Education compiles, analyzes, and summarizes quantitative and qualitative feedback to identify trends, strengths, concerns, and priority areas for improvement.

Step 3 – Report Preparation

Comprehensive feedback reports are prepared for individual modules, courses, assessments, clinical rotations, and faculty teaching. These reports include recommendations supported by evidence.

Step 4 – Curriculum Review

The Curriculum Committee and Module Planning Committees review the findings alongside assessment outcomes, curriculum maps, and other academic indicators to determine whether curricular modifications are required.

Step 5 – Action Planning

Specific recommendations are translated into measurable action plans with clearly defined responsibilities, implementation timelines, and monitoring indicators.

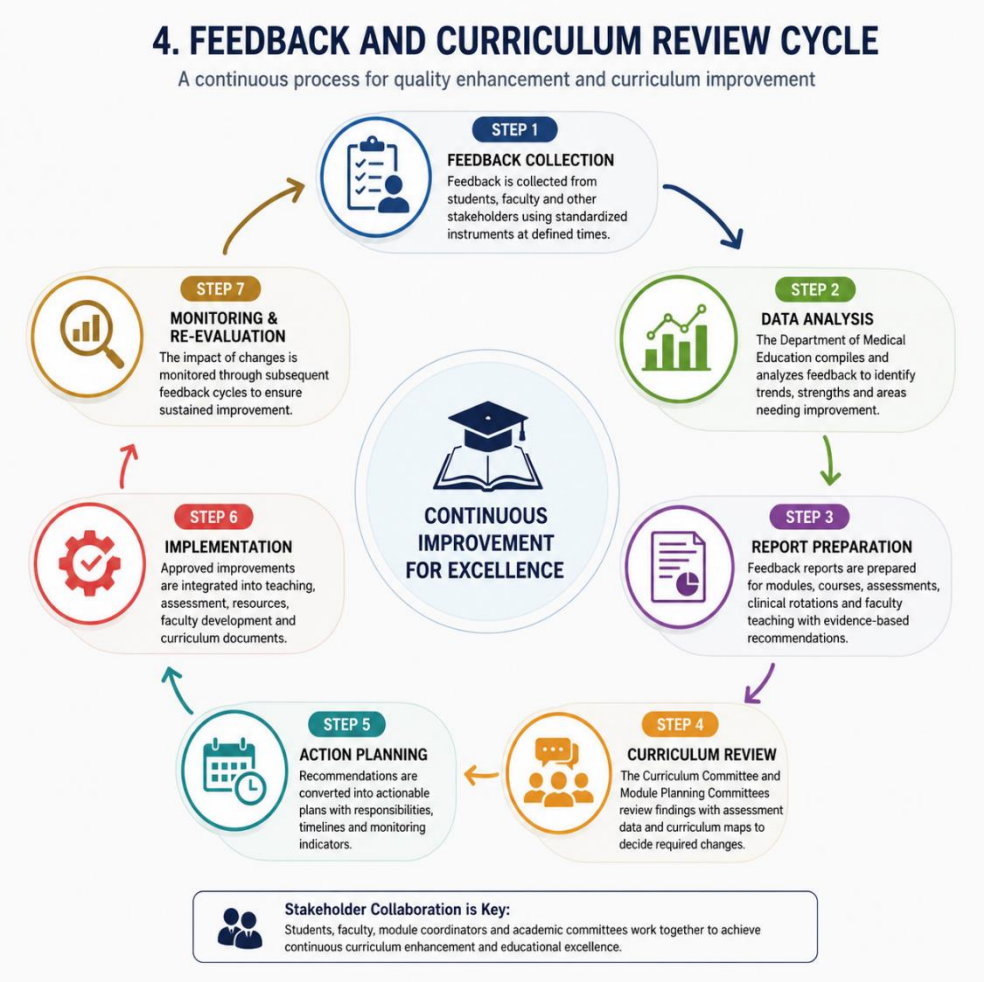
Step 6 – Implementation

Approved improvements are incorporated into subsequent module planning, teaching schedules, assessment strategies, learning resources, faculty development activities, and curriculum documents.

Step 7 – Monitoring and Re-evaluation

The effectiveness of implemented changes is monitored through subsequent feedback cycles, ensuring that curriculum improvements remain responsive to stakeholder needs and institutional goals.

This continuous cycle reinforces a culture of quality assurance, accountability, and evidence-based curriculum development across the MBBS program.



The timing of evaluation depends on resources, the novelty of the curriculum, and areas needing evaluation. For a modular curriculum, it is advised to start broadly and narrow down to specific areas. Mid-module evaluation is impactful as it addresses student concerns and suggests improvements. End-of-module evaluation provides valuable data for teachers to reflect on the entire module and plan future iterations. Combining mid and end-of-module evaluations is also effective, though end-module evaluation is strongly recommended here.

FEEDBACK COLLECTION AND REVIEW SCHEDULE

To ensure consistency and timely quality improvement, feedback shall be collected at predefined intervals throughout the academic year. The feedback schedule shall be incorporated into the institutional academic calendar and implemented under the supervision of the Department of Medical Education in coordination with the Curriculum Committee and Module Planning Committees.

The timing of feedback collection is intended to provide meaningful information that can be utilized for immediate corrective actions where feasible and for long-term curriculum enhancement during subsequent curriculum review cycles.

Principles for Scheduling Feedback

The institutional feedback schedule shall be based on the following principles:

- Feedback shall be collected immediately after the completion of the relevant educational activity.
- Evaluation activities shall not interfere with teaching, learning, or assessment schedules.
- Adequate time shall be provided for analysis before curriculum review meetings.
- Multiple sources of feedback shall be integrated to improve the reliability of findings.
- Feedback reports shall be generated within reasonable timelines to facilitate timely decision-making.

Institutional Feedback Schedule

Feedback Activity	Respondents	Frequency	Responsible Unit
Block Evaluation	**Students**	**End of each Block**	**DME**
Faculty Teaching Evaluation	**Students**	**End of each Block**	**DME**
Assessment Feedback	**Students**	**After each Block Assessment**	**DME**
Clinical Rotation Feedback	**Students**	**End of each Clinical Rotation**	**DME**
Faculty Block Feedback	**Faculty Members**	**End of each Block**	**Module Planning Committee**
Curriculum Review Summary	**Curriculum Committee**	**Annually**	**DME**
Comprehensive Curriculum Review	**Curriculum Committee**	**Every Five Years or as Required**	**Academic Council**

Utilization of Feedback

Feedback collected through these activities shall be consolidated into institutional reports and presented to the relevant academic committees. Recommendations arising from the analysis shall be prioritized, documented, and incorporated into curriculum planning and future academic sessions.

FEEDBACK TOOLS AND SOURCES OF EVIDENCE

Curriculum review requires information from multiple sources rather than relying on a single feedback instrument. MIMC employs a combination of quantitative and qualitative evaluation methods to ensure that curriculum decisions are evidence-based, balanced, and representative of stakeholder perspectives.

The standardized institutional feedback tools are developed, reviewed, and maintained by the Department of Medical Education and are periodically updated to reflect curricular changes and accreditation requirements.

Standard Feedback Instruments

The following feedback instruments form part of the institutional evaluation system:

- **Block Evaluation Form**
- **Faculty Teaching Evaluation Form**
- **Block Assessment Feedback Form**
- **Faculty Block Feedback Form**
- **Clinical Rotation Feedback Form**

Standardized versions of these instruments are provided as annexures to this guidebook.

Additional Sources of Curriculum Review Evidence

In addition to structured feedback questionnaires, curriculum review may utilize the following sources of evidence:

- Student academic performance and assessment analysis
- Module evaluation reports
- Curriculum mapping reports
- Assessment blueprint analysis
- External examiner reports
- PMDC accreditation observations
- Internal quality assurance reports
- Faculty reflections and departmental reviews
- Student representative meetings
- Graduate and employer feedback, where applicable

Evidence Integration

The Department of Medical Education shall compile and synthesize information from all available sources before preparing curriculum review reports. Decisions regarding curriculum modification shall be based on cumulative evidence rather than isolated observations, ensuring fairness, validity, and sustainability of educational improvements.

DIGITAL PLATFORM AND FEEDBACK COLLECTION

The College will utilize its official Campus Management System (CMS) for online feedback collection. Feedback forms will be triggered after each module/block, with results from previous modules displayed upon submission. The standardized feedback form will be available on the official website and CMS, with QR codes displayed in the college. Additionally, links to feedback forms will be shared by the IT Expert at the prescribed times.

CONFIDENTIALITY, ETHICS, AND DATA MANAGEMENT

The integrity of the feedback process depends upon maintaining confidentiality, protecting stakeholder privacy, and ensuring that information is used solely for educational quality enhancement. Mohi-ud-Din Medical College is committed to managing all feedback data in accordance with institutional policies, ethical principles, and applicable regulatory requirements.

Confidentiality

All feedback received through institutional evaluation activities shall be treated as confidential. Individual responses shall not be disclosed to unauthorized persons, and feedback reports shall present aggregated findings rather than identifying individual respondents.

Anonymous Participation

Students and faculty members may submit feedback anonymously whenever appropriate. Anonymous participation encourages honest, constructive, and unbiased responses while minimizing the possibility of undue influence or retaliation.

Data Security
The Department of Medical Education shall maintain secure electronic and physical records of all feedback data. Access to raw data shall be restricted to authorized personnel responsible for analysis and reporting.

Ethical Use of Feedback
Feedback shall be used exclusively for educational improvement, curriculum review, faculty development, and institutional quality assurance. Under no circumstances shall feedback be used to intimidate, discriminate against, or unfairly evaluate any individual.
All participants are expected to:

- Provide objective, respectful, and constructive feedback.
- Avoid abusive, defamatory, or discriminatory language.
- Maintain professionalism throughout the evaluation process.

Reporting and Record Retention
Feedback reports shall be maintained by the Department of Medical Education as institutional quality assurance records. These reports shall support curriculum review, accreditation activities, and educational planning while maintaining respondent confidentiality.

IMPLEMENTATION, MONITORING, AND CONTINUOUS IMPROVEMENT

The effectiveness of the feedback system depends not only on collecting information but also on translating findings into measurable improvements. MIMC is committed to ensuring that feedback results are systematically reviewed, appropriate actions are implemented, and their impact is monitored over time.

Implementation of Recommendations
Recommendations arising from feedback analysis shall be reviewed by the relevant academic committees before implementation. Improvement initiatives may include modifications to:

- Learning outcomes
- Module organization
- Teaching methodologies
- Assessment strategies
- Clinical training activities
- Learning resources
- Faculty development programs
- Student academic support services

Monitoring of Action Plans
The Department of Medical Education shall maintain an action tracker documenting:

- Identified issues
- Recommended actions
- Responsible committee or department
- Expected completion timeline
- Current implementation status
- Evidence of completion

Progress shall be reviewed periodically (annually) to ensure that approved recommendations are implemented effectively.

Evaluation of Improvement Measures
Following implementation, subsequent feedback cycles shall determine whether corrective measures have improved the educational experience. Comparative analysis between successive feedback reports shall be used to monitor trends and evaluate the effectiveness of implemented interventions.

Annual Review of the Feedback System
The feedback process itself shall undergo annual review to evaluate its effectiveness, response rates, reliability of instruments, quality of reports, and usefulness for curriculum decision-making. Necessary revisions to feedback tools, procedures, or timelines shall be approved before the commencement of the next academic session.

Commitment to Quality Enhancement
Mohi-ud-Din Medical College recognizes feedback as an integral component of institutional quality assurance. Through continuous monitoring, systematic curriculum review, and evidence-informed decision-making, the College remains committed to maintaining a responsive, student-centered, and academically robust MBBS curriculum that meets national standards and addresses the evolving needs of healthcare and society.

STANDARD OPERATING PROCEDURES (SOPS) FOR FEEDBACK MANAGEMENT

The Feedback Management System at Mohi-ud-Din Medical College is designed to ensure that stakeholder feedback is systematically collected, analyzed, communicated, and translated into measurable curriculum improvements. The Department of Medical Education shall coordinate the implementation of these procedures in collaboration with the Curriculum Committee, Module Planning Committees, academic departments, and other institutional stakeholders.

The following Standard Operating Procedures define the responsibilities of each stakeholder involved in the institutional feedback system.

Department of Medical Education (DME)

The Department of Medical Education shall serve as the central coordinating body for institutional feedback management and curriculum review activities. It shall ensure that feedback processes are implemented consistently across the MBBS program and that evaluation findings are used to support evidence-based educational improvements.

Standard Operating Procedures

The Department of Medical Education shall:

- Develop, validate, and periodically review institutional feedback instruments to ensure alignment with PMDC standards and institutional needs.
- Prepare and circulate the annual feedback calendar in consultation with the Curriculum Committee and academic departments.
- Coordinate the administration of all approved feedback activities throughout the academic year.

- Ensure that feedback instruments remain standardized across all modules and clinical rotations.
- Monitor response rates and encourage adequate stakeholder participation.
- Compile quantitative and qualitative feedback received from students, faculty members, and other stakeholders.
- Analyze institutional feedback using appropriate statistical and thematic methods.
- Prepare block evaluation reports, faculty evaluation reports, assessment evaluation reports, and annual curriculum review summaries.
- Present evaluation findings to the Module Planning Committee, Curriculum Committee, and Academic Council for review and appropriate action.
- Maintain a secure repository of institutional feedback reports and supporting documentation.
- Monitor the implementation of recommendations arising from curriculum review meetings.
- Conduct periodic audits of the feedback system to ensure its effectiveness and continuous improvement.

Curriculum Committee

The Curriculum Committee shall utilize feedback findings as one of the primary sources of evidence during curriculum review. The Committee shall ensure that curriculum modifications are evidence-based and aligned with institutional objectives and regulatory requirements.

Standard Operating Procedures

The Curriculum Committee shall:

- Review institutional feedback reports submitted by the Department of Medical Education.
- Evaluate trends in student learning experiences, faculty feedback, assessment outcomes, and curriculum implementation.
- Identify curricular strengths, deficiencies, redundancies, and opportunities for enhancement.
- Recommend revisions in learning outcomes, curriculum sequencing, integration, teaching methodologies, assessment strategies, and educational resources.
- Prioritize curriculum improvements based on educational impact and available evidence.
- Forward major curriculum revisions to the Academic Council for approval.
- Review the effectiveness of previously implemented curriculum changes during subsequent meetings.

Basic Coordination Committee

The Basic Coordination Committee shall be responsible for reviewing module-specific feedback and ensuring continuous improvement at the operational level.

Standard Operating Procedures

The Committee shall:

- Review student and faculty feedback following completion of each module.
- Examine concerns related to teaching schedules, workload, assessment, learning resources, and curriculum integration.
- Discuss evaluation findings with concerned departments.
- Recommend immediate corrective measures where appropriate.
- Incorporate approved recommendations into future module planning.
- Submit module evaluation summaries and recommendations to the Curriculum Committee through the Department of Medical Education.
- Monitor the effectiveness of implemented improvements during subsequent module offerings.

Information Technology (IT) Unit

The Information Technology Unit shall provide technical support for the digital feedback system and ensure secure management of institutional evaluation data.

Standard Operating Procedures

The IT Unit shall:

- Develop, maintain, and periodically update the institutional online feedback platform.
- Activate feedback forms according to the approved academic calendar.
- Ensure uninterrupted access to the feedback system during designated evaluation periods.
- Protect institutional data through appropriate security protocols and regular system backups.
- Generate response reports as requested by the Department of Medical Education.
- Resolve technical issues affecting feedback collection within the shortest possible time.
- Maintain confidentiality of all institutional evaluation data.

Faculty Members

Faculty members shall actively participate in institutional quality assurance by encouraging constructive feedback and utilizing evaluation findings to improve teaching and learning.

Standard Operating Procedures

Faculty members shall:

- Inform students about the purpose and importance of institutional feedback.
- Encourage honest, professional, and constructive participation.
- Review individual and departmental feedback reports shared by the Department of Medical Education.
- Reflect upon evaluation findings to improve teaching practices.
- Participate in curriculum review discussions whenever required.
- Implement approved recommendations related to teaching, assessment, and learning resources.
- Participate in faculty development activities identified through feedback analysis.

Students

Students are essential partners in curriculum quality assurance and are expected to contribute responsibly to institutional evaluation activities.

Standard Operating Procedures

Students shall:

- Complete institutional feedback forms within the prescribed timelines.
- Evaluate educational activities objectively based on their learning experiences.
- Provide constructive comments that contribute to educational improvement.
- Maintain professional conduct while submitting written feedback.
- Avoid inappropriate, defamatory, discriminatory, or abusive remarks.
- Participate honestly without external influence or coercion.
- Respect the confidentiality and integrity of the institutional feedback process.

QUESTIONNAIRES

A.1: BLOCK EVALUATION PROFORMA

(To be filled by each student at the end of each block)

Block Name: _____ Year: _____ Date: _____

Instructions: Please read each statement carefully and tick (✓) the box that best reflects your experience during this block. This evaluation focuses on the overall block structure, resources, and organization.

Scale: 1 = Strongly Disagree | 2 = Disagree | 3 = Neutral | 4 = Agree | 5 = Strongly Agree

S.No.	Question	1	2	3	4	5
SECTION A: COURSE CONTENT AND DESIGN						
1	The topics covered in this block were relevant to our overall understanding of the subject.					
2	The depth of content was appropriate for our current year of study.					
3	The sequence in which topics were presented made logical sense and helped build understanding step by step.					
4	There was good integration between different subjects taught in this block.					
5	The workload during this block was manageable and well-distributed throughout.					
SECTION B: LEARNING RESOURCES AND MATERIALS						
6	The study guide provided was useful in navigating the block.					
7	Recommended textbooks and reading materials were easily accessible.					
8	Online resources (videos, links, LMS content) were useful for learning.					
9	Laboratory facilities and equipment were adequate and well-maintained.					
10	Additional learning resources (supplementary readings, SGDs, tutorials) enhanced my understanding.					
SECTION C: LEARNING ENVIRONMENT						
11	The learning environment was respectful and inclusive for all students.					
12	Teaching methods accommodated different learning styles.					
13	The overall atmosphere in the block was conducive to learning.					
SECTION D: OVERALL BLOCK FEEDBACK						
14	Overall, I am satisfied with the content and organization of this block.					
15	I feel that I have gained a good understanding of the subjects covered in this block.					
16	On a scale of 1=best to 5=poor, I would rate this block overall as:					

SECTION E: YOUR SUGGESTIONS FOR IMPROVEMENT

Q 1. What were the strengths of this block? What did you find most helpful for your learning?

_____

_____

Q 2. What changes or improvements would you suggest to make this block better?

_____

_____

Q 3. Were there any specific topics that were not covered well or need more attention?

_____

_____

Q 4. Any other comments or feedback you would like to share?

_____

A.2: STUDENT EVALUATION OF TEACHING EFFECTIVENESS

(To be filled by the student at the nearly completion of each Block)

MBBS Year: _____Block: _____Module:_____Date: _____

For each statement, please select the response that best matches your experience in this instructor's sessions.

Name of Instructor: _____

Scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

	Question					
A. INSTRUCTOR PREPARATION & CONTENT DELIVERY (*These questions assess if the teaching is focused and well-prepared*)	The instructor was consistently well-prepared for the teaching sessions.					
	The instructor clearly stated the LOs at the beginning of the session(s).					
	The content covered was directly aligned with the stated LOs and study guide.					
	The instructor demonstrated expert knowledge of the subject matter.					
	The instructor completed the planned syllabus/content for this block/module.					
B. CLARITY OF TEACHING & REDUCING COGNITIVE LOAD (*These questions assess if the teaching style helped or hindered your learning*)	The instructor explained concepts clearly and in an understandable manner.					
	Visual aids (e.g., PowerPoint slides) were clear, well-organized, and aided understanding (not text-heavy or confusing).					
	The instructor connected theoretical concepts to real-world clinical applications.					
	The instructor effectively simplified complex topics and built understanding step-by-step.					
	The teaching pace was appropriate, allowing time for thinking and note-taking.					
C. INTERACTION & RESPONSIVENESS (*These questions assess if the session was interactive as intended.*)	The instructor encouraged questions and interaction during the session.					
	The instructor was responsive and helpful when answering student questions.					
	The instructor was available for consultation outside of scheduled class times (e.g., office hours).					
	The teaching methods used (e.g., lectures, discussions) were engaging and held my attention.					
D. ASSESSMENT & FEEDBACK *(these questions assess if the teaching were aligned with assessment and feedback or not)*	The instructor provided clear criteria for assignments, presentations, and quizzes.					
	Assessments (quizzes, exams) fairly covered the material that was taught.					
	The instructor provided timely and constructive feedback on assessments that helped me improve.					
E. OVERALL IMPACT	This instructor's teaching increased my interest in the subject.					
	This instructor's teaching was effective in helping me learn and understand the course material.					
	Overall, I would recommend this instructor to other students.					

OPEN-ENDED FEEDBACK

Please provide specific examples. This feedback is used for faculty development.

What did this instructor do that was MOST EFFECTIVE for your learning? (e.g., specific examples, methods, or resources)

What is/are specific change(s) this instructor could make to SIGNIFICANTLY IMPROVE the learning experience? (e.g., "Follow the study guide LOs more closely," "Improve slide organization," "Incorporate pauses for questions," "Slow down during complex explanations")

Anything Else you want to share with us? Please feel free to comment

---

A.3: BLOCK ASSESSMENT FEEDBACK FORM

(To be filled by students at the end of each block assessment)

MBBS Year: _____ **Block:** _____ **Date:** _____

Instructions: Please carefully evaluate each question and tick (✓) the box that best reflects your experience with the **assessments** in this block.

S.N	Question	Option 1	Option 2	Option 3	Option 4	Option 5
ASSESSMENT ALIGNMENT AND QUALITY						
1	Overall, how satisfied are you with the assessments in this block?	☐ Very Dissatisfied	☐ Dissatisfied	☐ Neutral	☐ Satisfied	☐ Very Satisfied
2	How well did the assessments align with what was taught in this block?	☐ Not Aligned	☐ Slightly Aligned	☐ Moderately Aligned	☐ Well Aligned	☐ Perfectly Aligned
3	Was the difficulty level of the assessments appropriate for this block?	☐ Too Easy	☐ Slightly Easy	☐ Just Right	☐ Slightly Difficult	☐ Too Difficult
4	Were the assessment methods (MCQs, SAQs, OSCEs, etc.) fair and effective in testing your knowledge?	☐ Very Poor	☐ Poor	☐ Fair	☐ Good	☐ Excellent
ASSESSMENT ADMINISTRATION						
5	Were the instructions for the assessments clear and easy to understand?	☐ Not Clear	☐ Slightly Clear	☐ Moderately Clear	☐ Clear	☐ Very Clear
6	Was the time provided for completing the assessments sufficient?	☐ Highly Insufficient	☐ Insufficient	☐ Adequate	☐ Sufficient	☐ More than Sufficient
FEEDBACK ON ASSESSMENTS						
7	Did you receive timely feedback on your assessment performance?	☐ Not at All	☐ Delayed	☐ Acceptable	☐ Timely	☐ Very Timely
8	Was the feedback helpful in identifying your mistakes and areas for improvement?	☐ Not Helpful	☐ Slightly Helpful	☐ Moderately Helpful	☐ Helpful	☐ Very Helpful
EFFECTIVENESS OF ASSESSMENT METHODS						
9	How effective were **MCQs** in this block?	☐ Ineffective	☐ Somewhat Effective	☐ Effective	☐ Very Effective	☐ Extremely Effective
10	How effective were **SAQs** in this block?	☐ Ineffective	☐ Somewhat Effective	☐ Effective	☐ Very Effective	☐ Extremely Effective
11	How effective were **OSPE/OSCE stations** in this block?	☐ Ineffective	☐ Somewhat Effective	☐ Effective	☐ Very Effective	☐ Extremely Effective

SECTION B: YOUR SUGGESTIONS FOR IMPROVEMENT

12 What specific changes would improve future assessments?

_____

13 Any other comments or concerns regarding assessments?

_____

A.4: Hospital Training/Clinical Rotation Feedback Form

A.5: FACULTY BLOCK FEEDBACK FORM

(To be filled by teacher/faculty at the end of each block)

Block: _____ | Department: _____ | Date: _____

Role in this Block: ☐ Module Coordinator ☐ Lecturer ☐ Small Group Facilitator ☐ Clinical Instructor ☐ Lab Instructor

Instructions: Please rate the following aspects of this block based on your teaching experience. Your honest feedback is essential for continuous quality improvement.

Scale: 1 = Strongly Disagree | 2 = Disagree | 3 = Neutral | 4 = Agree | 5 = Strongly Agree

S.N	Question	1	2	3	4	5
CURRICULUM AND CONTENT						
1	The learning objectives for this block were clearly defined.	☐	☐	☐	☐	☐
2	The content I taught was appropriate for the students' year of study.	☐	☐	☐	☐	☐
3	The sequencing of topics was logical and helped students learn progressively.	☐	☐	☐	☐	☐
4	The allocated teaching hours were sufficient to cover the assigned content.	☐	☐	☐	☐	☐
TEACHING EXPERIENCE						
5	Students were attentive and actively participated during my sessions.	☐	☐	☐	☐	☐
6	I felt adequately prepared and supported to teach my assigned topics.	☐	☐	☐	☐	☐
7	There was good coordination among faculty teaching in this block.	☐	☐	☐	☐	☐
ASSESSMENT						
8	The assessment methods aligned well with the learning objectives.	☐	☐	☐	☐	☐
9	The difficulty level of assessments was appropriate for students.	☐	☐	☐	☐	☐
10	Students received timely feedback on their assessment performance.	☐	☐	☐	☐	☐
RESOURCES AND ENVIRONMENT						
11	Teaching resources (AV aids, lab equipment, etc.) were adequate and functional.	☐	☐	☐	☐	☐
12	Administrative support for teaching activities was timely and effective.	☐	☐	☐	☐	☐
OVERALL ASSESSMENT						
13	Overall, I am satisfied with how this block was organized and delivered.	☐	☐	☐	☐	☐
14	I feel that students achieved the intended learning outcomes of this block.	☐	☐	☐	☐	☐

YOUR FEEDBACK FOR IMPROVEMENT

What worked well in this block from a teaching perspective?

_____

What challenges did you face during this block?

_____

What specific changes would improve future blocks?

_____

A.6: HOSPITAL ROTATION FEEDBACK FORM

(To be filled by students at end of hospital training)

MBBS Year: _____Block: _____Module: _____

Date: _____

Rating Key : 1 = Unsatisfactory, , 2 = Good , 3 = Very Good, 4 = Excellent						
S.No	**Description**	**Rating Circle)**				**Comments (if any)**
1.	Students properly distributed in various batches	1	2	3	4	
2.	Timetable is circulated well in time	1	2	3	4	
3.	Transport facility available at proper timings	1	2	3	4	
4.	Teachers available in Ward	1	2	3	4	
5.	Teacher available in OPD	1	2	3	4	
6.	Patients available in ward /OPD	1	2	3	4	
7.	Clinical demonstration held regularly	1	2	3	4	
8.	Ward timing is sufficient	1	2	3	4	
9.	Overall satisfaction with hospital work	1	2	3	4	

ADDITIONAL COMMENTS:(IF ANY)

_____

_____

_____

_____

_____

_____

_____