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T6

2020

Annual Program Report

Program Name:	Bachelor of Dental Surgery
Qualification Level:	7
Department:	College of Dentistry
College:	College of Dentistry
Institution:	Jazan University
Academic Year:	2021-2022
Main Location:	Al Shawajra Campus
Branches offering the Program:	NA

Table of Contents

A. Implementation of Previous Action Plan

Considering the recommendations of previous year annual report, list the planned actions and their status.

Planned Actions	Responsibility of Action	Planned Completion Date	Level of Completion		If Not Completed	
			Completed	Not Completed	Reasons	Proposed Actions
1. • Formulating detailed policies and procedures for program surveys (creation, conduction, collecting data, and analysis) with a great emphasis on the use of survey results in the improvement plan of the BDS program. • Inclusion of these policies in the program policies and procedures manual and quality management system manual. • Approval of these changes as a part of the program policies and procedures manual and quality manual system by the College Board. • Continuous sharing of emails describing the importance of that particular survey to all stakeholders, to increase awareness and motivate them to participate actively in these surveys, in an attempt to increase the quality and quantity of participation. Moreover, sharing the improvement that has occurred based on their participation.	Vice Deanship for Research and Development	Sep 2021	✔			

2.	• Review of strategic goals and align them with the operational goals of the new strategic plan 2020-2025 by relevant committees. • Approval of any changes in strategic goals and the operational goals of the new strategic plan 2020-2025 by the College Board.	Vice Deanship for Research and Development	May 2021	✔			

3.	• Activation of human resource unit. • Assigning duties and responsibilities of human resource unit while conserving institutional policies. • Approval of assigned duties and responsibilities of human resource unit from the College Board. • Adopting of guidelines for recruitment taking into consideration in the institutional policies and procedures. • Approval of guidelines by College Board. • Enlisting guidelines in policies and procedures manual. • Forecast a recruitment plan in collaboration with the college departments. • Prepare a five years program recruitment needs and communicate with the Deanship of Human Resources.	Vice Deanship for Research and Development	Sep 2021	✔			

4.	Monitor the reporting cycles of units and committees at CDJU.	Vice deanship of Research and Development	Sep 2021		✔	There was a dynamics process of the organogram in the last year making listing the final bodies within the college difficult and there was a plan that the reporting is to be digital through the E-just platform	The process started after the final organogram and now the Meetex platform will be integrated and implemented in the coming year for this purpose
5.	• Review of policies and procedures of the academic affairs. • Review of policies and procedures of the clinical affairs. • Review of policies and procedures of the graduate studies. • Updating the program policies and procedures manual. • Approval of the updated version by College Board. • Providing updated manual and all relevant documents to all stakeholders.	Head of Quality Assurance and Academic Accreditation Unit	October 2021	✔			

6.	• Formulate a clear policy for the involvement of stakeholders in developing, planning, and processes of the program and add it to the policies and procedures and quality management system manuals. • Approval of these changes as a part of the program policies and procedures, and to the quality management system manuals by the College Board. • Reviewing and updating (if required) Stakeholders list, to assure that all Stake holders are involved in developing and revising BDS program plans, policies, and procedures. • Motivating the stakeholders to actively participate in development of these plans and policies. • Involve stakeholders in the new strategic plan 2020-2025 and in the updated policies and procedures manual. • Proper archiving of all relevant documents by documentation and information unit.	Head of Quality Assurance and Academic Accreditation Unit	October 2021	✔				

| 7. | • Prepare a plan for the program review at both levels (internal and external), taking into consideration timing, responsible and accountable.
• Discuss the plan with the college leaders and the college advisory council.
• Reformulate the plan to have the final version.
• Add this schedule plan to the quality management system manual.
• Approval of this plan by the College Board. | Head of Self-Study Sub-unit | September 2021 | ✔ | | | |

8.	• Review the current learning outcomes of field experience and update them to align with the program learning outcomes. • Set a minimum number of case requirements in different disciplines to complete the field experience training. • Designing a rubric based assessment form to assess learning outcomes. • Involvement of all stakeholders in the final learning outcomes and the assessment form. • Approval of new learning outcomes and new assessment form by the College Board. • Inclusion of the new updates in the internship program manuals (if needed). • Finalize the field experience specifications for the next year and expand training centers by including private sector according to the program needs and approval. • Disseminate learning outcomes and assessment form to different field experience training centers.	Supervisor of Internship Program	May 2021	✔			

9.	• Review the current curriculum with other reputable programs in the Kingdom. • Modernize the curriculum based on the review results through the curricula and study plans committee. • Establishment of teaching and learning subunit. • Modernize the course content through teaching and learning subunit and the curricula and study plans committee. • Review the process of following the quality of teaching and assessment by teaching and learning subunit. • Formulating policies to standardize rubrics used for assessing students in written examinations, practical exams and continuous assessments. • Formulating policies to calibrate faculty members who assess practical and students' practical work. • Reviewing and improving the policies and procedures of the exam review committee. • Approval of changes and improvements by College Board.	Head of Quality Assurance and Academic Accreditation Unit	October 2021		✓	The transformation from the 2 into 3 semester make it difficult to finalize the plan within the time frame	Once the final study plan approved and become effective, the process will start

10.	• Conducting a TNA to get feedback from students, interns and alumni. • Develop an annual plan for conducting additional professional development activities. • Disseminating the schedule for such activities to all stakeholders. • Collecting feedback after each professional development activity. • Using feedback to improve such activities in the next year's plans.	Head of professional development Unit	September 2021		✔	The plan was shifted till approval of the final organogram as one committee be responsible for all developmental activities	TNA was done and analysis and final list of activities will be finalized during the first semester
11.	• Develop an effective system for monitoring current students' services (cafeteria, stationary center, gym, etc). • Follow up with contractors in both sections to provide better services. • Establish maintenance program to maintain services. • Improve wireless coverage in the college campus. • Collect regular feedback on yearly basis from students, faculty and staff.	Administrative Manager	September 2021		✔	The college is in the process of shifting to a new campus where high level of quality services will be provided	Prepare a plan for gradual transfer to the new campus

12.	• Make all plans of community programs to be conducted through and report to the community service unit based on programs approved by the University Counsel and initiatives from previous programs feedbacks. • Develop policies and procedures for the provided oral community services. • Sharing the policies and procedures with all stakeholders for their feedback for improvement. • Approval of policies and procedures by the College Board. • Include the policies and procedures for the provided community services in the program policies and procedures manual. • Prepare plan for the next academic year based on previous feedbacks from beneficiaries. • Link all community programs data to the program KPIs.	Head of Community Services unit	September 2021		✓	Some big programs stopped due to the pandemic	A new plan is in the preparation stage

13.	• Prepare a five year plan to hire more Saudi demonstrators based on department teaching capacity and the program needs. • Share annual needs with the university Vice President for Graduate Studies and Research. • Adopting of guidelines for recruitment of Saudi demonstrators taking into consideration the institutional policies and procedures and ensure proportional distribution per specialty and gender according to the curriculum's needs. • Approval by College Board as part of the overall recruitment guidelines.	Head of Human Resources Unit	September 2021	✔			

14.	• Conducting TNA by the faculty development committee specific for emerging technology to receive feedback from faculty. • Developing plans for conducting additional training programs in teaching and use of emerging technology, for both new & current faculty. • Disseminating the schedule for such activities. • Taking feedback after each professional development activity. • Using the feedback for improving such activities in the next plan.	Head of Faculty Development Committee	September 2021		✓	The transformation from 2 to 3 semester raised some challenges so once the study plan was finalized, a new development plan will be prepared	TNA was done and analysis and final list activities will be finalized during the first semester

| 15. | • Prepare comprehensive management plan for learning resources including class rooms, prosthetic labs, phantom labs, X-ray machines, other advanced equipment, college library and dental clinics.
• Open separate reading area in the female section.
• Update the references book list for the BDS program.
• Share the updated references with the Deanship of Libraries.
• Request to make BookMyne available for faculty and dental students.
• Set a list of key performance indicators with target benchmarks to measure the effectiveness of the management plans. | Clinical administration | October 2021 | ✓ | | | |

16.	• Prepare strategic research plan for the next two years. • Set criteria for funding students, interns and faculty research. • Prepare research manual including complete guidelines and policies for research. • Submit proposal to the Vice President for Graduate Studies and Research to establish a research facility at CDJU for basic experimental and clinical research to address the strategic research plan goals. • Submit a proposal for funding annual planned research activities. • Collaborate with other faculties within the university and with other national research centers. • Give priority to hire faculty members dedicated to research work within the curriculum teaching capacity.	Head of Scientific Research Unit	December 2023		✓	The university authority was requested to develop a research funds in different directions aligned with the strategic plan of the college	Follow up of the request
17.	Recruitment of more number of X-ray and laboratory technicians.	College Dean	June 2022		✓	This was compensated by reduce the number of students enrolled	

No.	Recommendation	Responsible	Date				
18.	Increase in annual special allowance for faculty members.	Department Heads, Dean , Vice deanship of research and development	June 2022		✓	Economical restriction prevent this action	To be followed next year
19.	Improvement in the standards of Multiple choice questions	Vice Dean of Academic Affairs	June 2022	✓			
20.	Improve students communication skills (English language)	Vice Dean of Academic Affairs, Head of Quality Assurance and Academic Accreditation	June 2022		✓	The college sent the comment to the English institute for further actions in the first years English courses	Follow up of the request
21.	Delay and frequent cancellation of appointments to be minimized	Clinical administration	June 2022	✓			
22.	Added emphasis should be given to improve the completion rate	Vice Dean of Academic Affairs	June 2022	✓			
23.	Students achievement in the PLOs should be reviewed	Head of Quality Assurance and Academic Accreditation	June 2022	✓			

24.	Implement strategies to improve the conduction of exams and review of assessment tools	Vice Dean of Academic Affairs	June 2022		✔	This is a continuous process that will not be completed unless a well-designed question bank for all courses is generated which will improve the variation between courses	In progress

| 25. | More program activities should be provided for student counseling & support, for professional development, for research & innovation and for community partnership | Vice Dean of Academic Affairs | June 2022 | | ✔ | Parts of the suggestions were completed which related to the academic counselling and the research direction too but for community related suggestion was limited to the participation of patients using the paper based rather than online feedback so the only incompleted section is the patients awareness program which will be done next year as well the community partnership | More focus will be placed on the incompleted sections |

B. Program Statistics

1. Students Statistics (in the year concerned)

No.	Item	Results
1	Number of students who started the program	**38**
2	Number of students who graduated	**85**
3	Number of students who completed major tracks within the program (if applicable)	
	a.	**NA**
	b.	**NA**
	c.	**NA**
4	**a.** Number of students who completed the program in the minimal time	**62**
5	**a.** Percentage of students who completed the program in the minimal time (Completion rate)	**70.45%**
6	Number of students who completed an intermediate award specified as an early exit point (if any)	**NA**
7	Percentage of students who completed an intermediate award specified as an early exit point (if any)	**NA**
Comment on any special or unusual factors that might have affected the completion rates: The main factors affecting the completion rate for the present academic year were the increased number of students who had withdrawn and/or not cleared their courses in the initial years and the number of students who were denied permission to appear for the exams due to their attendance shortage.		

2 . Cohort Analysis of Current Graduate Batch

Student Categories / Years		Total cohort enrollment	Withdrawn	Retained till year end	Not passed	Passed	Passing rate
Four Years Ago	M	42	1	41	7	34	82.93
	F	46	0	46	5	41	89.13
	Total	88	1	87	12	75	86.21
Three Years Ago	M	34	1	33	4	29	87.88
	F	41	4	37	0	34	91.89
	Total	75	5	70	4	63	90.00
Two Years Ago	M	29	0	29	0	29	100.00
	F	34	0	34	0	34	100.00
	Total	63	0	63	0	63	100.00
Last Year	M	29	0	29	0	29	100.00
	F	34	1	33	0	33	100.00
	Total	63	1	62	0	62	100.00
Current Year	M	29	0	29	0	29	100.00
	F	33	0	33	0	33	100.00
	Total	62	0	62	0	62	100.00

In the above cohort analysis table "not passed" students includes only the students who had failed to clear the course/s and it does not include the absent or denied students. The passing rate was calculated for the passing students out of the total number of students who appeared for the exam (denied/absent students were excluded).

Progression rate of the cohort
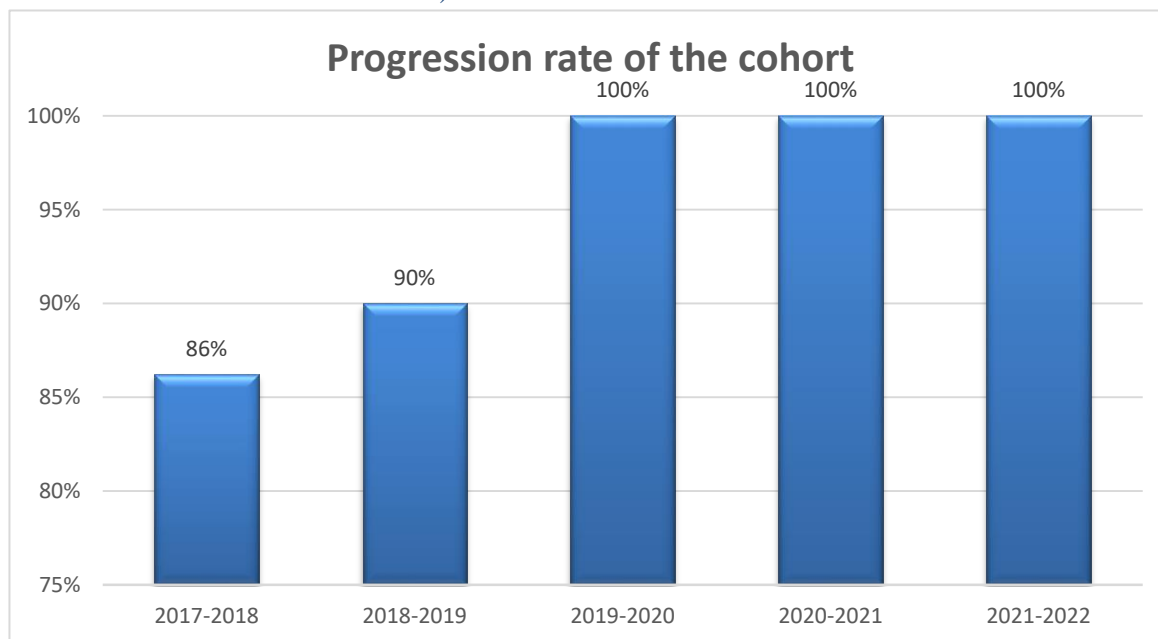
- Out of the total cohort enrollment of 88 students who joined the second year BDS program in the College of Dentistry in the academic year 2017-18, 62 students have successfully completed the program in 2021-22 with a completion rate of 70.45%. The completion rate is lower than desired. The main reason for this low completion rate was the failure of some students to complete their requirements for their transfer to the 2nd level of each year or due to their underperformance in their respective academic years. Other reason was due to the number of students who withdrew from the course in the intermediate years.

* add more rows for further years (if needed)
** attach separate cohort analysis report for each branch

3.Analysis of Program Statistics

(including strengths, areas for improvement, and priorities for improvement)

20221 Program Status Distribution

Legend: ■ Pass% ■ F% ■ Absent % ■ Denied% ■ withdrawn from course%
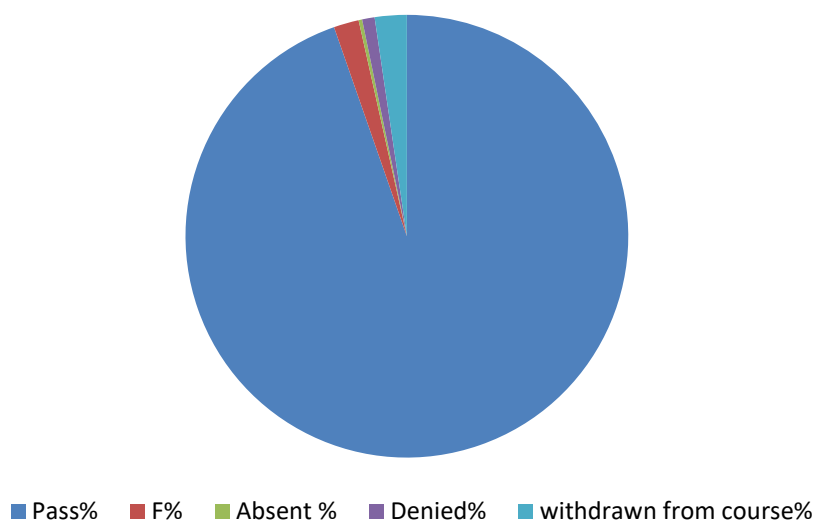
20211 Program Status Distribution

Legend: ■ Pass ■ Failed ■ Absent ■ Denied ■ Withdrawn from courses
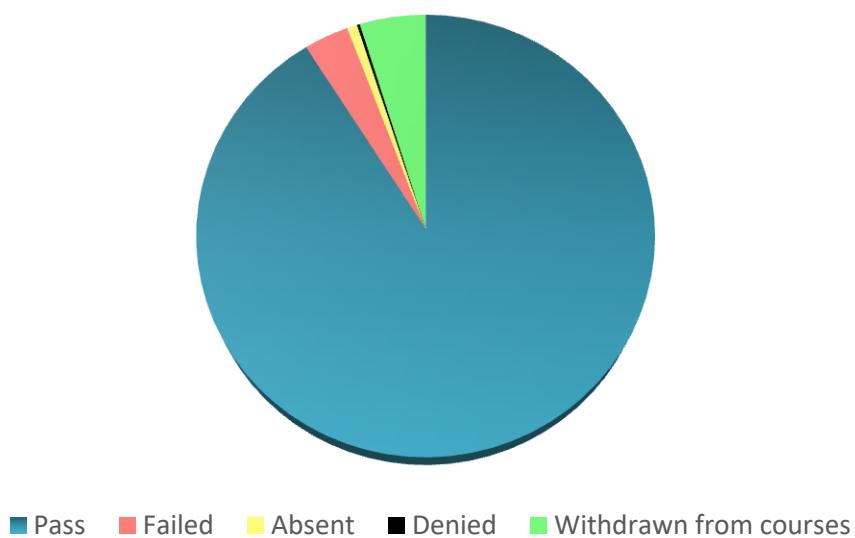
20221 Yearwise Status Distribution
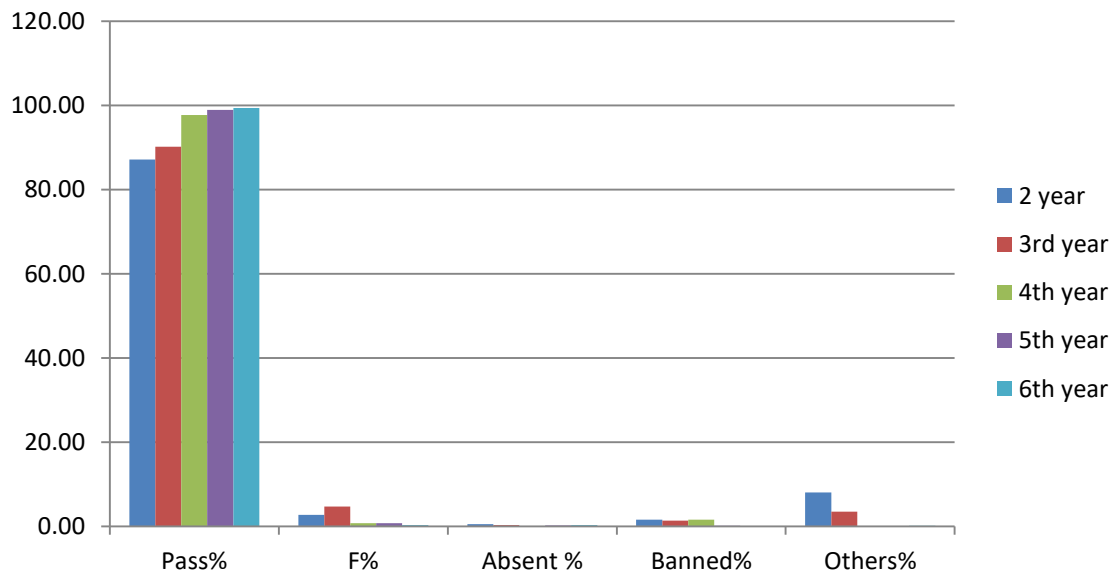
20211 Yearwise Status Distribution
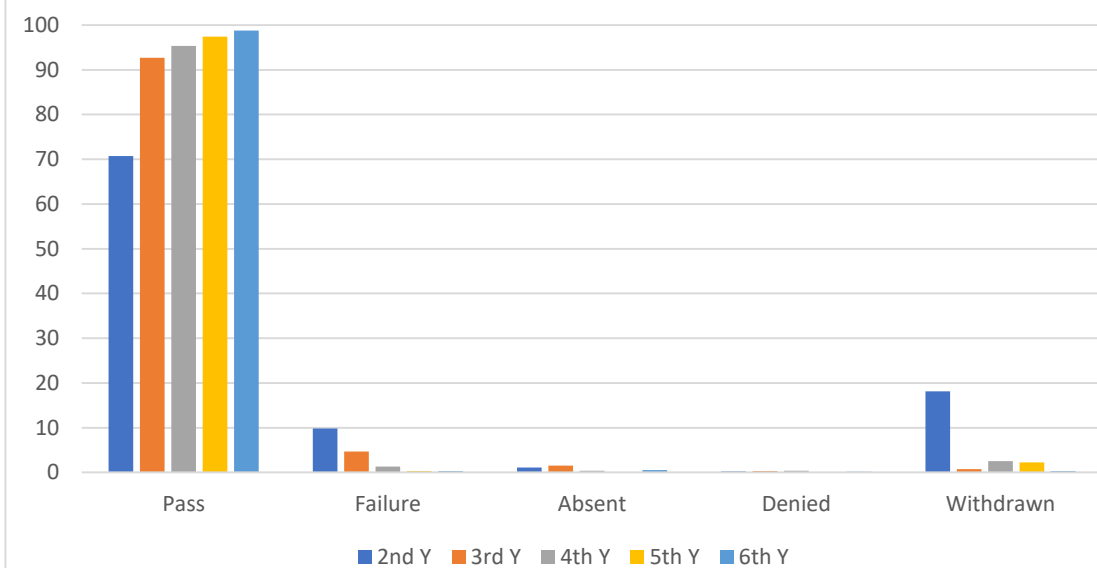
20222 Program Status Distribution
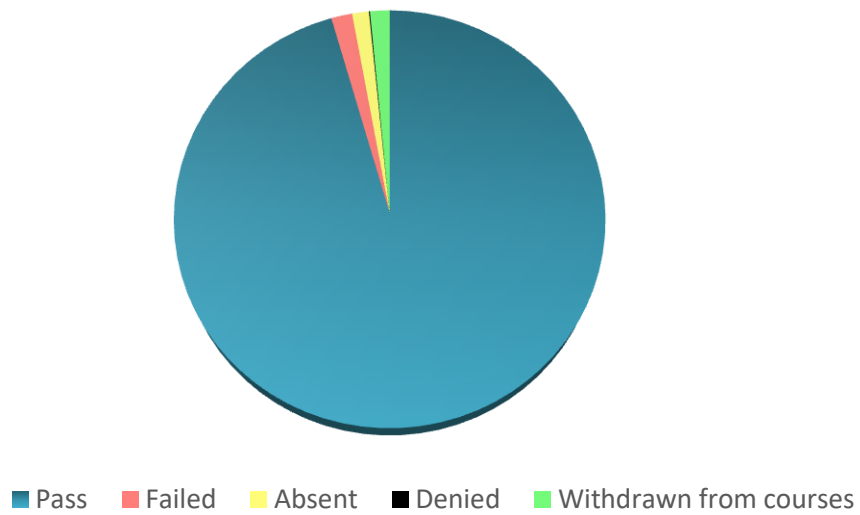
Pass% F% Absent % Denied% Withdrawn from courses%

20212 Program Status Distribution

Pass Failed Absent Denied Withdrawn from courses

20222 Yearwise Status Distribution

Legend: 2nd year, 3rd year, 4th year, 5th year, 6th year

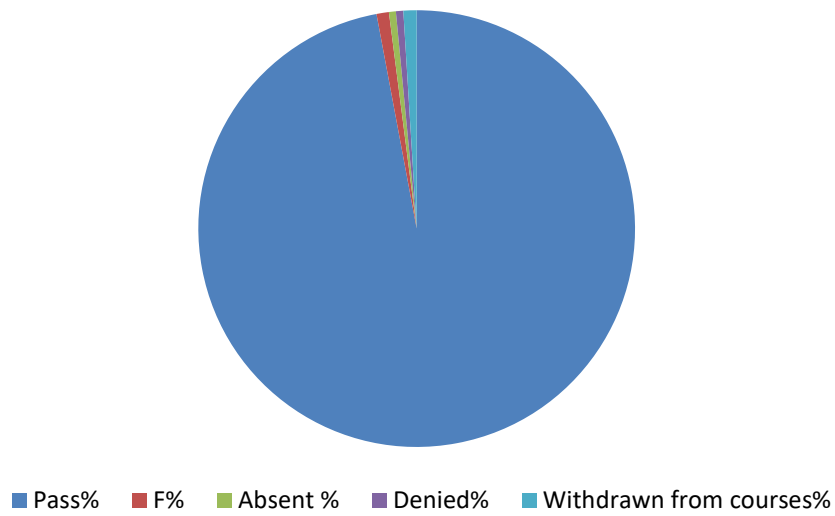Categories: Pass%, F%, Absent %, Denied%, Withdrawn form course%

20212 Yearwise Status Distribution

Legend: 2nd Y, 3rd Y, 4th Y, 5th Y, 6th Y
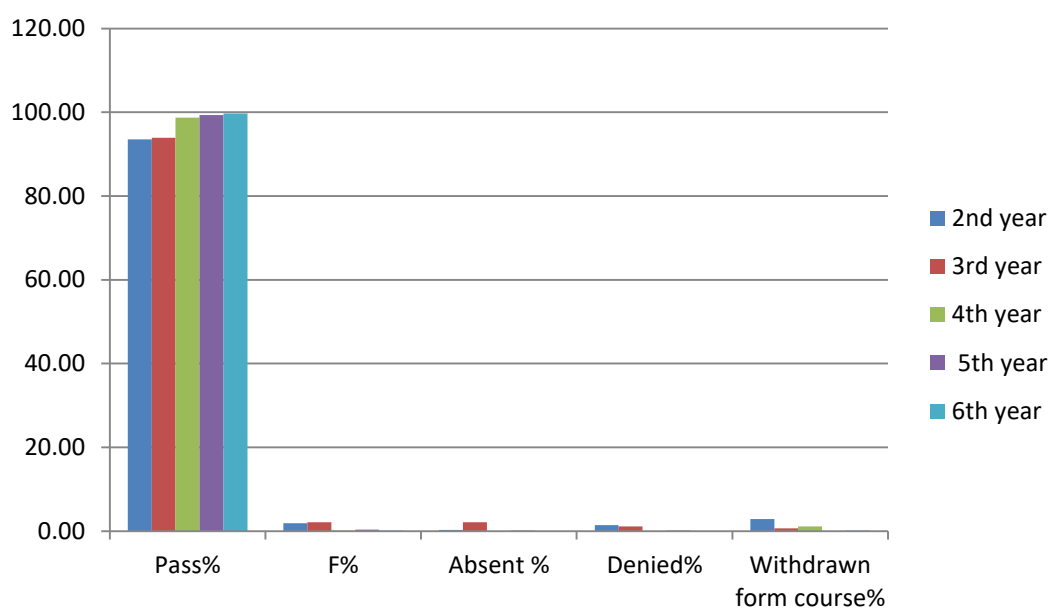
Categories: Pass, Failure, Absent, Denied, Withdrawn
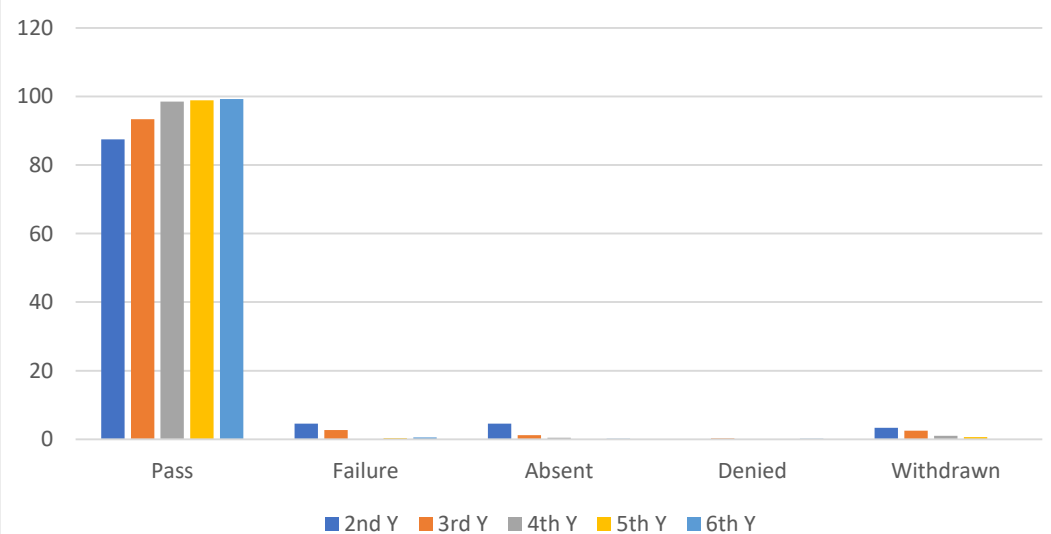
Comments on the results:

Strengths :

- Number of students who withdrew from the regular courses were less with the present cohort as compared with the previous cohort.
- The percentage of students who failed from this graduate cohort was less to the last year's cohort. Percentage of students (current graduate cohort) who completed the first year of this program was excellent.
- Number of student intake in the program was reduced which has helped in improving the faculty to student ratio.

- In the beginning of each semester, orientation programs for the students were conducted which emphasized the interdependency of the initial courses to the subsequent courses in the program.
- Periodic interactions with the students by the student coordinators and the faculty was emphasized upon.
- The number of academic advisors were increased to give more time and personal attention to the students' needs.
- Regular academic counseling and advice was provided by the academic advisors. Additional attention, following a specific academic advising plan was given for most of the students as the college was in the process of implementing the new study plan.
- The future prospects and opportunities of the dental profession was emphatically communicated with the students which encouraged them to continue in the program.

Areas for Improvement:
- Added emphasis should be given to improve the completion rate as the completion rate for the current graduate cohort was less when compared to the previous year's cohort 82.2% compared to 70.45%.

Priorities for Improvement:
- Added emphasis should be given to improve the completion rate.

C. Program Learning Outcomes Assessment

1. Program Learning Outcomes Assessment Results.

#	Program Learning Outcomes	Assessment Methods (Direct and Indirect)	Performance Target	Results
Knowledge and Understanding				
K1	Explain the essential knowledge of basic, clinical, behavioral and social sciences supporting their understanding of patient dental problem.	**Direct assessment:** - Written examination: objective Test items (Independent MCQs, True/false questions, fill-in the blank,…), short and structured essay questions **Rubric based assessment** - Assessment of seminars and topic presentation - Viva or oral exam - Long & short essay questions -Assessment of assignments - Open book exam **Indirect assessment:** - Exit students Survey	70%	**Direct assessment:** 81.45 of students answer an embedded test questions correctly. **Indirect assessment:** 4.39 out of 5 (87.8%) was the score based on the exit students' survey.
K2	Demonstrate an understanding of the fundamental of dental research and community health promotion and prevention.		70%	83.28% of students score 'very good' or higher on the different assessment measures.. **Indirect assessment:** 4.38 out of 5 (87.6%) was the score based on the exit students' survey.
K3	Demonstrate an understanding of ethical principles and medico-legal considerations together with infection control and radiation protection.		------	
Skills				
S1	Perform the essential clinical, dental and preventive skills and procedures efficiently.	**Direct assessment:** - Written examination: objective Test items, True/false	------	

S2	Analyze the findings of the history, clinical examination and investigations effectively to manage patients with medical and dental emergencies as well as patients with common health/dental problems.	questions, fill-in the blank,…), short and structured essay questions - Dependent MCQs **Rubric based assessment** - Assessment of seminars and topic presentation - Viva or oral exam	------	
S3	Communicate effectively at all levels using verbal, non-verbal, written and multimedia methods with patients, their family and other health professions.	- Long & short essay questions - Case presentations - OSCE or OSPE - Problem solving exercise - Structured viva - Continuous assessment in preclinical and clinical sessions. - Practical and clinical Exams - Assessment of group discussion - Assessment of assignments - Open book exam **Indirect assessment:** - Exit students Survey	80%	**Direct assessment:** 92.91% of students score 'very good' or higher on a particular rubric assessing their communication skill in different levels. **Indirect assessment:** 4.3 out of 5 (86%) was the score based on the exit students' survey.
S4	Practice the basic of research skills and evidence-based health care.		70%	**Direct assessment:** 90.1% of students score "good" or higher in all assessments related to this PLO. **Indirect assessment:** 3.84 out of 5 (76.8%) was the score based on the exit students' survey.
S5	Evaluate patients' needs and set the priority of safety at the center of the care process.		---------	

S6	Analyze community oral health needs appropriately and plan different preventive, interceptive and treatment measures.		80%	**Direct assessment:** 55.96% of students pass in an acceptable level in all assessments methods related to this learning outcome. **Indirect assessment:** 4.32 out of 5 (86.4%) was the score based on the exit students' survey.
S7	Apply dental informatics in healthcare system effectively.		75%	**Direct assessment:** 93.55% of students score „very good" or higher on a particular rubric assessing a treatment planning presentation. **Indirect assessment:** 4.38 out of 5 (87.6%) was the score based on the exit students' survey.
Value				
V1	Utilize clinical reasoning, decision making, and problem solving skills in dental practice	**Direct assessment:** **Rubric based assessment** - Assessment of seminars and topic presentation - Viva or oral exam - Case presentations - OSCE or OSPE - Problem solving exercise - Structured viva	------	
V2	Develop teamwork, leadership and inter-professional collaboration		80%	**Direct assessment:** 88.11% of the students scored very good or higher on a

|				
		- Continuous assessment in preclinical and clinical sessions. - Practical and clinical Exams - Assessment of group discussion - Assessment of assignments **Indirect assessment:** - Exit students Survey		particular rubric assessing professionalism, group clinical activity and group assignment. **Indirect assessment:** 4.17 out of 5 (83.4%) was the score based on the exit students' survey.
V3	Demonstrate professional attitudes, ethical behaviors and the capacity for self-reflection as well as independent life-long professional development.		------	

Comments on the Program Learning Outcome Assessment results.

According to NCAAA guidelines, the assessment of PLOs should take a cycle of 3 to 4 years. The previous academic year ten PLOs : K2, S1, S2, S3, S4, S5, S6, V1 and V3 were assessed directly and indirectly.

This year new cycle started by assessing: K1, K2, S3, S4, S6, S7, and V2. These achievements were assessed directly based on the selected capstone courses for each PLO and indirectly through exit students' survey.
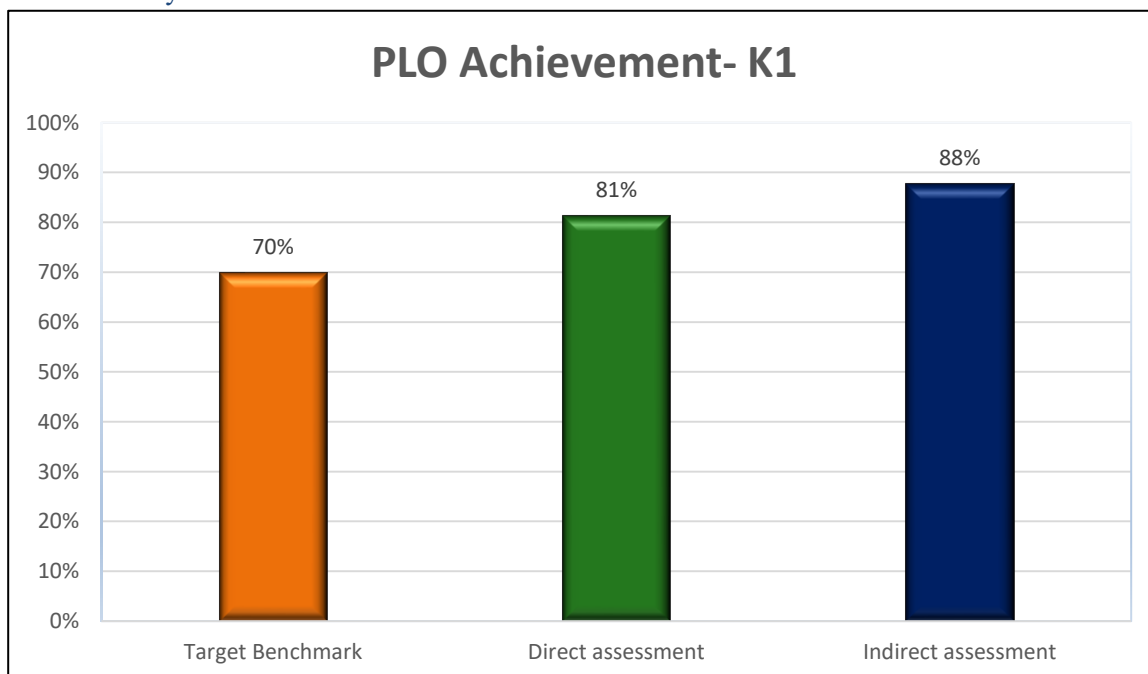
PLO Achievement- K1

- The achievement in the Knowledge and Understanding PLO (K1) was 81.45% which was more than the performance target of 70%.The students perceived their achievement as 87.8% in the exit students survey which was above the performance target too. Variations between the actual result (Direct) and the performance target was observed and also between direct and indirect assessments in K1.

- K1 PLO assessment was based on the percentage of students (70%) who answer an embedded test questions correctly. A significant variation in this PLO achievement was observed between the courses evaluated. Since the performance level exceeded but it was less in the last cycle so it kept for the next cycle same at 70% and can be evaluated in the next plan based on the average of both cycles.
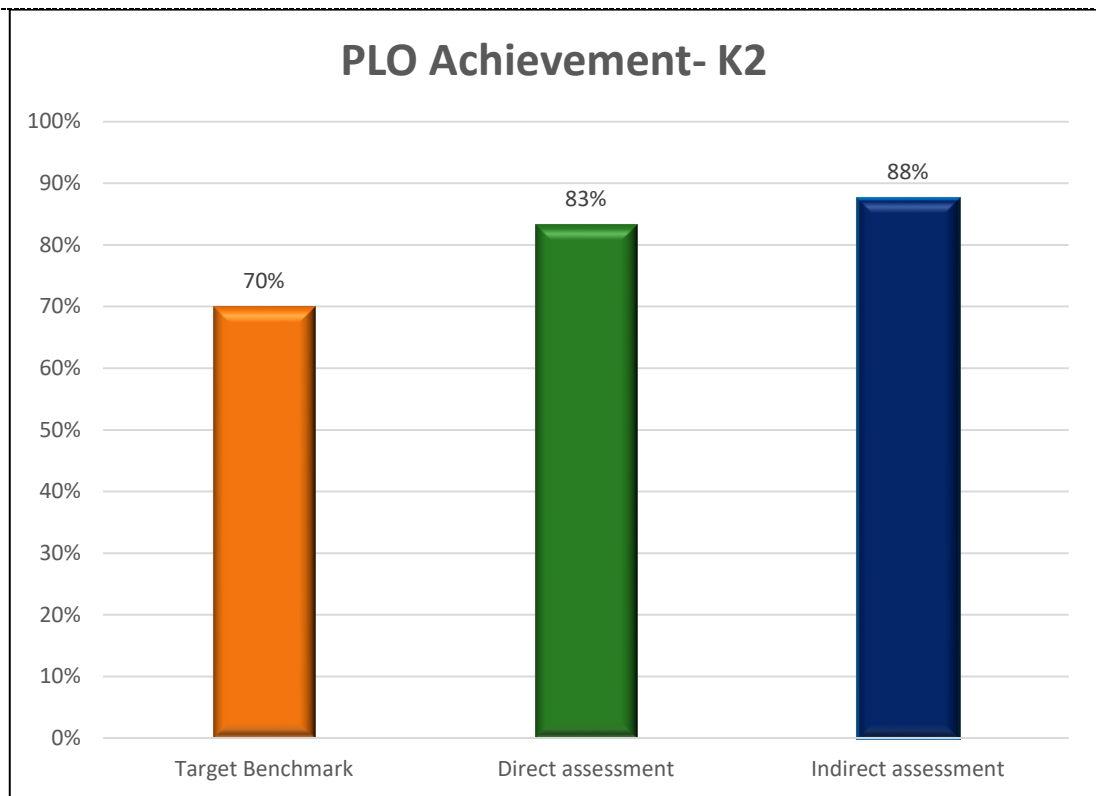
PLO Achievement- K2

- The achievement in the Knowledge and Understanding PLO (K2) was 83.28% which was more than the performance target of 70%.The students perceived their achievement as 87.6% in the exit students survey which was above the performance target. Variations between the actual result (Direct) and the performance target was observed and also between direct and indirect assessments in K2.

- K2 PLO assessment was based on the percentage of students (70%) who scored 'very good' or higher on the different assessment measures. Since the performance level exceeded but it was less in the last cycle so it kept for the next cycle same at 70% and can be evaluated in the next plan based on the average of both cycles.

PLO Achievement- S3

Chart showing PLO Achievement for S3:
- Target Benchmark: 80%
- Direct assessment: 93%
- Indirect assessment: 86%
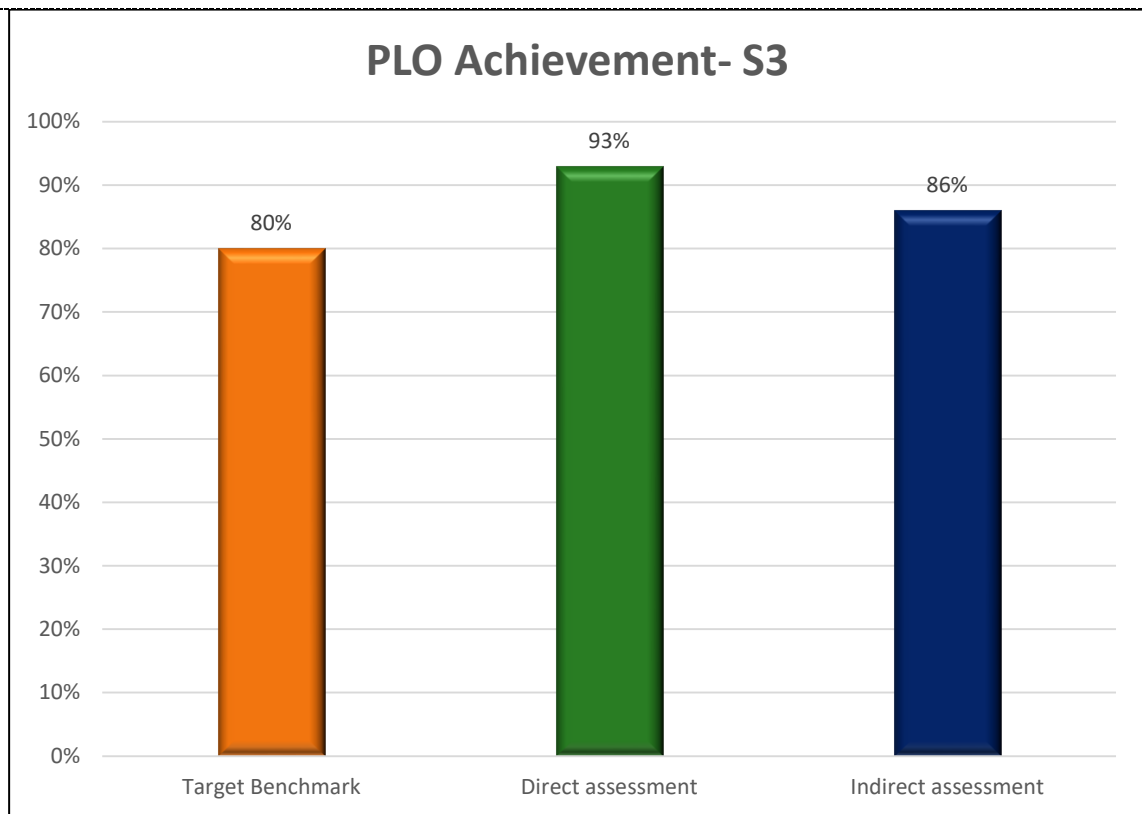
- The achievement in Skills PLO (S3) was 92.91% which was way higher than the performance target of 80%. The students perceived their achievement as 86% in the exit students survey which was also above the performance target. No variations between the actual result (Direct) and the performance target and also between direct and indirect assessments in S3 were observed.

- S3 PLO assessment was based on the percentage of students (80%) students who scored 'very good' or higher on a particular rubric assessing their communication skill in different levels. The direct and indirect achievements were beyond the target benchmark. It is recommended that the 2nd assessment cycle of this PLO should verify the setting of the performance target. Accordingly, the performance target for the next cycle was revised to 85%.

PLO Achievement- S4

Category	Value
Target Benchmark	70.0%
Direct assessment	90.1%
Indirect assessment	76.8%
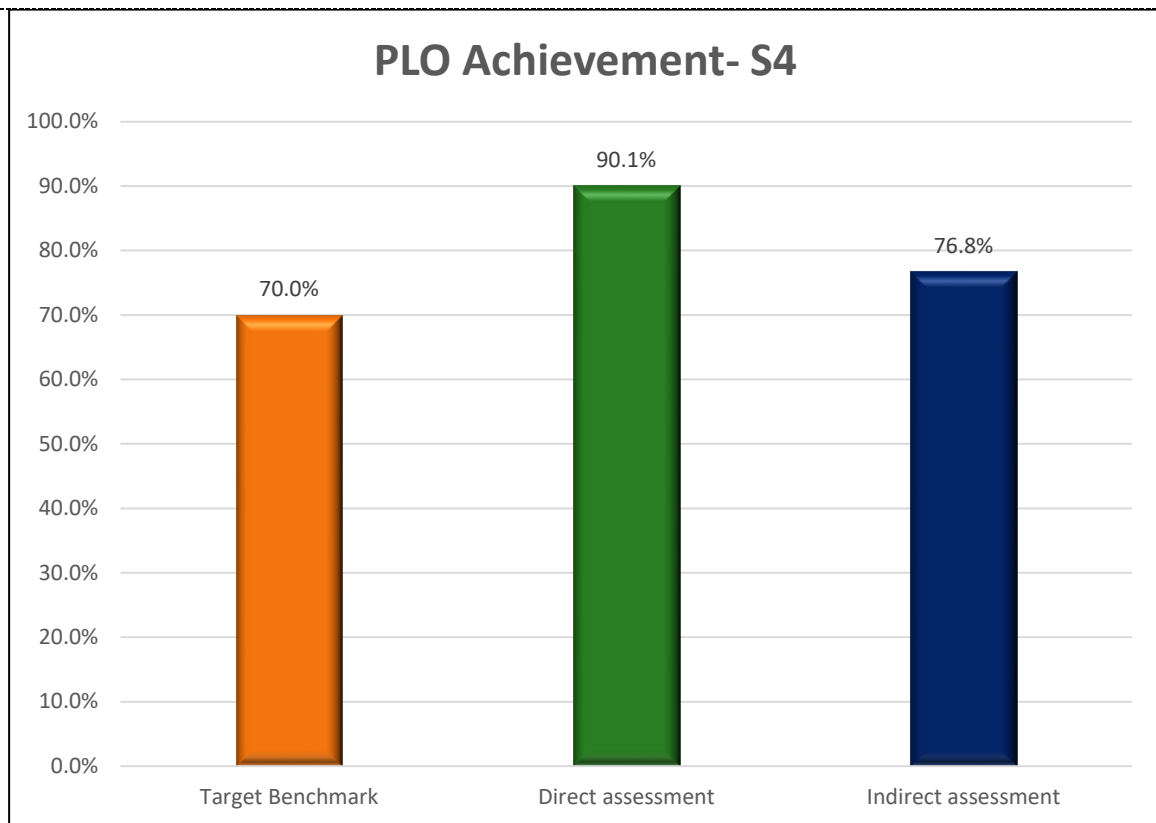
- The achievement in Skills PLO (S4) was 90.1% which was exceptionally more than the performance target of 70%.The students perceived their achievement as 76.8% in the exit students survey which was also well above the performance target. Variations between the actual result (Direct) and the performance target and also between direct and indirect assessments in S4 were observed.

- S4 PLO assessment was based on the percentage of students (70%) who scored "good" or higher in all assessments related to this PLO. The direct and indirect achievements were beyond the target benchmark. It is recommended that the 2nd assessment cycle of this PLO should verify the setting of the performance target. Accordingly, the performance target for the next cycle was revised to 80%.
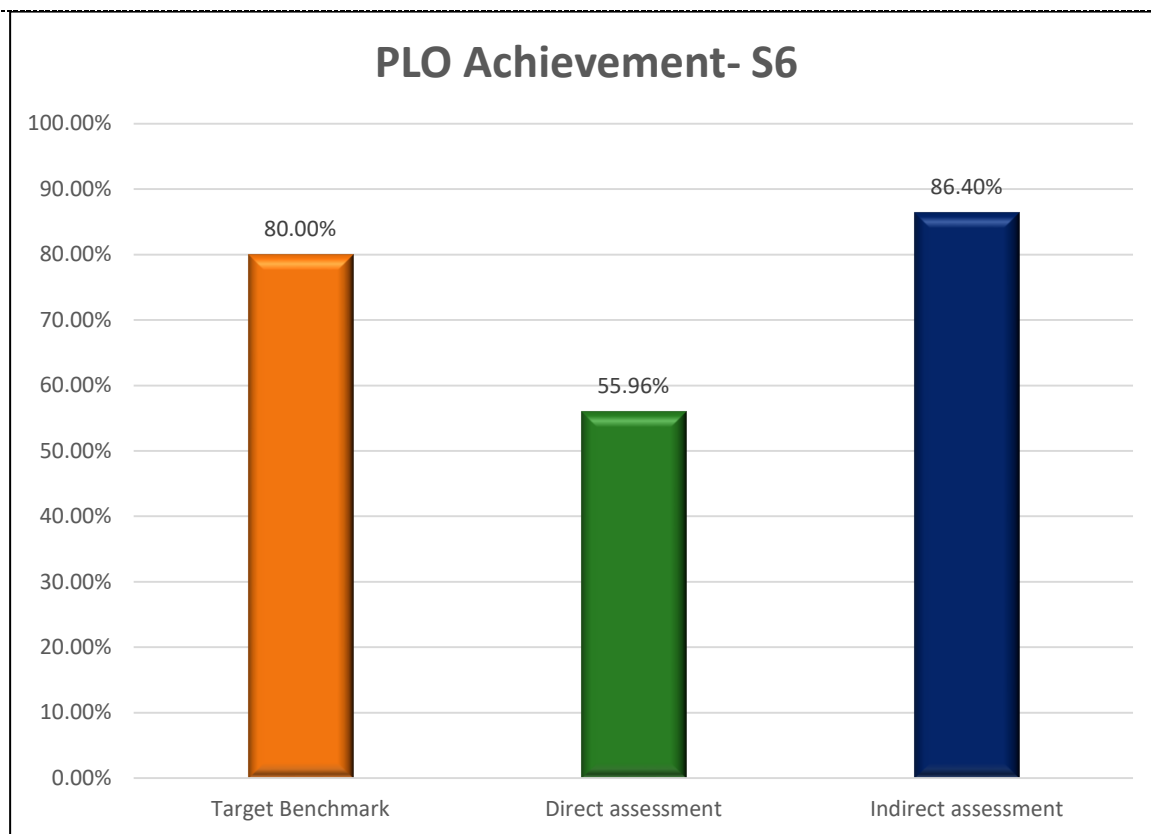
PLO Achievement- S6

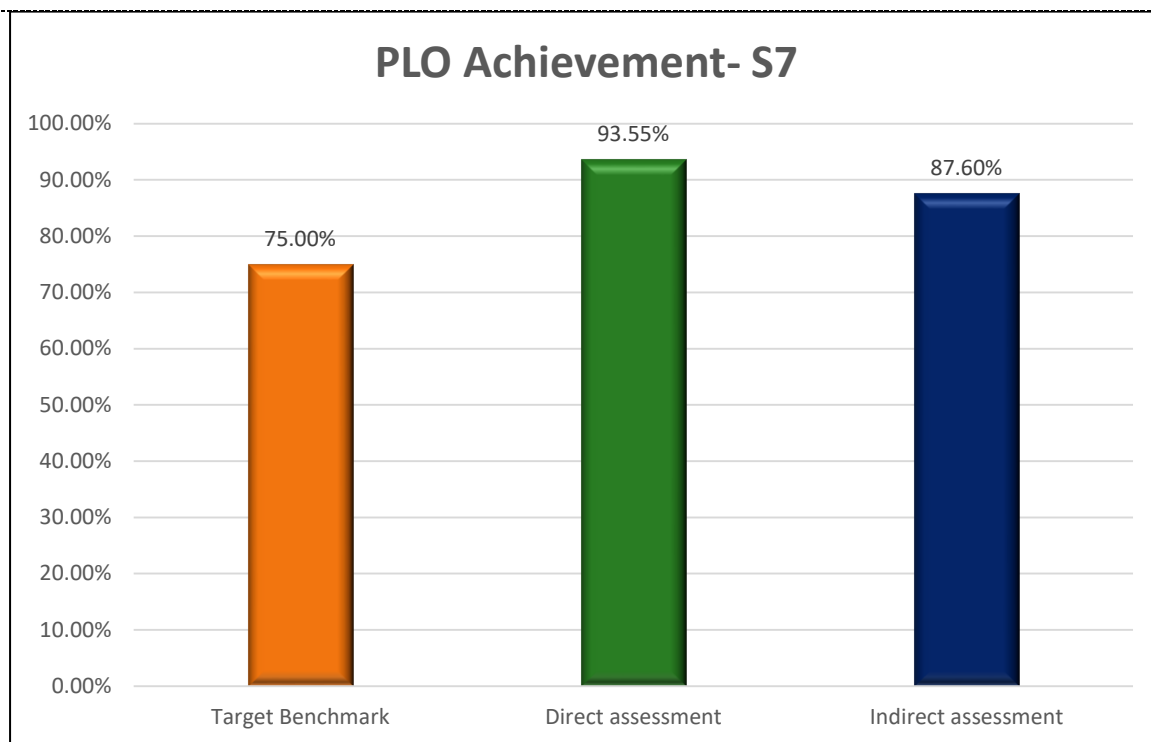- The achievement in Skills PLO (S6) was 55.96% which was much less than the performance target of 80%.The students perceived their achievement as 86.4% in the exit students survey which was also above the performance target. Variations between direct and indirect assessments in S5 were observed.

- S6 PLO assessment was based on the percentage of students (80%) who scored "good" or higher in all assessments related to this PLO. The direct achievements was not close to the target benchmark. No variation was found between male and female students in the average achievements. It is recommended that the 2nd assessment cycle of this PLO should verify the setting of the performance target. Accordingly, the performance target for the next cycle was kept at 80%.
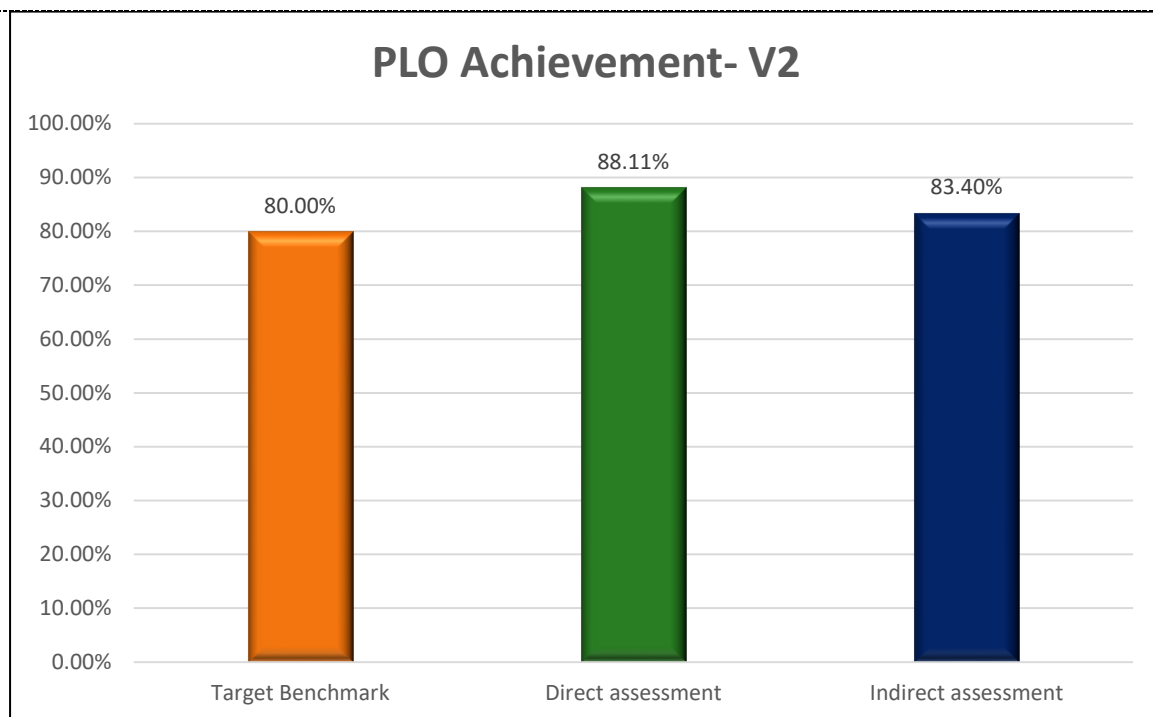
PLO Achievement- S7

- The achievement in Skills PLO (S7) was 93.55% which was higher than the performance target of 75%. The students perceived their achievement as 87.6% in the exit students survey which was also above the performance target. Variations between the actual result (Direct) and the performance target and also between direct and indirect assessments in S7 were observed.

- S7 PLO assessment was based on the percentage of students (75%) who score „very good" or higher on a particular rubric assessing a treatment planning presentation. The direct and indirect achievements were beyond the target benchmark. It is recommended that another course be added to the 2nd assessment cycle of this PLO and that cycle should verify the setting of the performance target. Accordingly, the performance target for the next cycle was revised to 90%.

PLO Achievement- V2

Bar chart titled "PLO Achievement- V2" with vertical axis from 0.00% to 100.00% in 10% increments. Three bars:
- Target Benchmark: 80.00%
- Direct assessment: 88.11%
- Indirect assessment: 83.40%

- The achievement in Value PLO (V2) was 88.11% which was exceptionally higher than the performance target of 80%. The students perceived their achievement as 83.4% in the exit students survey which was also above the performance target. Variations between the actual result (Direct) and the performance target and also between direct and indirect assessments in V2 were observed.

- V2 PLO assessment was based on the percentage of students (80%) who scored 'good' or higher on a particular rubric assessing professionalism, group clinical activity and group assignment.. The direct and indirect achievements were beyond the target benchmark. It is recommended that the 2nd assessment cycle of this PLO should verify the setting of the performance target. Accordingly, the performance target for the next cycle was revised to 80%.

* Include the results of measured learning outcomes during the year of the report according to the program plan for measuring learning outcomes
** Attach a separate report on the program learning outcomes assessment results for male and female sections and for each branch (if any)

2. Analysis of Program Learning Outcomes Assessment
(including strengths, Areas for Improvement:, and priorities for improvement)

Strengths :
- Students explain the essential knowledge of basic, clinical, behavioral and social sciences supporting their understanding of patient dental problem.
- Students demonstrated teamwork, leadership and inter-professional collaboration.
- Students demonstrated dental informatics in healthcare system effectively.
- Students practice the basic of research skills and evidence-based health care.
- Students communicate effectively at all levels using verbal, non-verbal, written and multimedia methods with patients, their family and other health professions.
- Students demonstrate an understanding of the fundamental of dental research and community health promotion and prevention.
-

Areas for Improvement:
- Achievement in certain PLOs should be improved.
- Analyze community oral health needs appropriately and plan different preventive, interceptive and treatment measures.
- More emphasis should be given on the validity of assessment methods used in all courses, specially the courses used in the assessment of PLOs.
- Review the list of courses included in the assessment and include more courses in the coming two cycles.

Priorities for Improvement:
- More emphasis should be given on the validity of assessment methods used in all courses, specially the courses used in the assessment of PLOs.
- Review the list of courses included in the assessment and include more courses in the coming two cycles.

D. Summary of Course Reports
1. Teaching of Planned Courses / Units
List the courses / units that were planned and not taught during the academic year, indicating the reasons and compensating actions.

Course	Units/Topics	Reasons	Compensating Actions
None	NA	NA	NA

2. Courses with Variations
List courses with marked variations in results that are stated in the course reports, including: (completion rate, grade distribution, student results, etc.), and giving reasons for these variations and actions taken for improvement.

Course Name &Code	variation	Reasons for variation	Actions taken
-212 PHYSIO/ Human Physiology I.	High A and B grades (28.6% and 40.8% respectively)	1.Implementation of continuous assessment which forced the student to study regularly. 2.Use of interactive lectures with discussion throughout the lectures. 3.Low percent of absence. 4.Simplicity of exam questions. 5.Deduction of midterm exam marks and adding one more quiz of 10 marks (most of students benefited from this action, unfortunately low performing students got low marks in the second quiz and consequently they failed. This explains the high gap (No D grade) between the failed students and the rest of the section.	1. Simplicity of exam questions should be reassessed. 2. Blueprint should be reviewed weight of midterm should be deducted.
-201HLT /Biochemistry II.	High A and B grades (47.4% and 21.1% respectively)	1.High simplicity of the exam questions (attachment 3). 2.Presentation of assignment with discussion of topics. 3.Use of interactive lecture rather than traditional lecture. 4.Having multiple revision sessions through the blackboard software	1.Reassessment of the blueprint and adding problems and short essay questions in the final exam. 2.Reassessment of simplicity of exam questions and including more moderately difficult questions

Course Name &Code	variation	Reasons for variation	Actions taken
		5.Type of final exam question as using MCQs in biochemistry hardly discriminates between students. Solving problems and short essay could be more proper in discrimination between students.	
-220 ANAT/Introduction to Human Anatomy.	High A and B grades (28.1 % and 43.9% respectively)	1. Low number of students. 2. Good English language. 3. Low percent of absence. 4. High simplicity of exam questions (attachment 3).	1. Improvement of exam simplicity by reviewing exam questions.
-251MED /Biochemistry II.	High A and B grades (63% and 16.7% respectively)	1.Online additional revision sessions through Blackboard software 2.Good attendance rate. 3.Enthusiasm of the students	1. Reassessment of simplicity of exam questions are highly recommended.
-254MED /Head & Neck Anatomy.	High A and B grades (34.5% and 37.9% respectively)	1.Simplicity of exam questions 2.The practical sessions were in site with direct contact with the students. 3.Being a practical course (2 credit hours for practical), the students were able to revise using anatomical models.	1. Reassessment of simplicity of exam questions. 2. Reassessment of the blueprint.
-255MED/ Human Physiology II.	High A and B grades (21.8% and 34.5% respectively)	1.Enthusiasm of the students. 2.Good attendance. 3.Improved simplicity of exam questions	1. Reassessment of the blueprint to include more dependent questions
-512 MDS Clinical Oral and Maxillofacial Surgery II	High A (35.8) and B (64.2) grades	1. Use of interactive lectures with discussion throughout the lectures. 2. Low percent of absence. 3. Simplicity of exam	1. Simplicity of exam questions should be reassessed. 2. Blueprint should be reviewed and increase the number of questions

Course Name &Code	variation	Reasons for variation	Actions taken
		questions. 4. Keeping less percentage of exam questions for final exam from chapters before midterm	from lectures taken before midterm
-513 MDS Advanced Oral and Maxillofacial Surgery I	High A (26.7) and B (48) grades	1. High simplicity of the exam questions 2. OSCE exam conducted online due to covid 19. 3. Use of interactive lecture rather than traditional lecture. 4. Having multiple revision sessions through the blackboard software 5. Percentage of short essay questions was very less.	1. Reassessment of the blueprint and adding more short essay questions in the final exam. 2. Reassessment of simplicity of exam questions and including more moderately difficult questions
-413 MDS Clinical Oral and Maxillofacial Surgery	High A (25.5) and B (53.5) grades	1. Most of the questions were simple and moderate. (Direct item analysis attachment 3) 2. Using MCQ as means of assessment of most ILO's 3. Level of difficulty and simplicity of the questions should be reviewed. 4. Reviewing the blueprint based on the domain and reassess regularly.	1. Reassessment of the blueprint and adding more short essay questions in the final exam. 2. Reassessment of simplicity of exam questions and including more moderately difficult questions
-412 DIG Clinical Oral and Maxillofacial Radiology	High A and B grades (40.00% and 40.00% respectively)	1. Most of the questions were very simple or moderately simple (Direct item analysis – Attachment - 3) 2. Using MCQ as a means of assessment tool for most ILO's.	1. Level of difficulty and simplicity of the questions should be reviewed. 2. To follow correct rubrics rules for continuous Assessment. 3. Review the blue print based on the domain and reassess regularly. 4. Weightage of type of question other than MCQ should be increased.
-414 DIG Oral	High A and B grades	1. Most of the questions were very simple or	1. Level of difficulty and simplicity of the questions

Course Name &Code	variation	Reasons for variation	Actions taken
Pathology II	(35.13% and 41.9% respectively)	moderately simple. (Direct Item Analysis-Attachment 3) 2. Using simple MCQs as a mean of assessment tool for most ILOs.	should be reviewed. 2. To follow correct rubrics rules for professionalism continuous Assessment. 3. Review the blue print based on the domain and reassess regularly. 4. Weightage of type of question other than MCQ should be increased.
-314 DIG Oral Pathology I	High A and B grades (22.6 % and 51.6% respectively)	1. Most of the questions were very simple or moderately simple for both major assessments. (Direct Item Analysis-Attachment 3) 2. Using simple MCQs as a mean of assessment tool for most ILOs.	1. Improvement of exam simplicity by reviewing exam questions and adding moderately difficult questions 2. To follow correct rubrics rules for log book and professionalism. 3. Review the blue print based on the domain and reassess regularly. 4. Weightage of type of question other than MCQ should be increased by adding more weightage to short assay
-532 PDS/ Periodontics III.	High A and B grades (20% and 50.5% respectively)	1. The A grades are high as the requirements were adjusted without affecting the learning outcome due to reduce in patient inflow due to vaccination and omicron onset.. 2. The marks for the mcqs were raised by reducing the number of mcqs.	1. The clinical/ practical portions of continuous assessments rubrics for evaluation must be analyzed and updated by calibration of the marks for accurate evaluation.
-634 PDS/Pedodontics IV	High A and B grades (29.1 % and 53.5% respectively)	High grades achieved by both male and female students since most of the MCQs used as tools in the assessment of ILOs were simple and moderately simple.	1. Level of difficulty and simplicity of the questions should be reviewed. 2. Reviewing the blueprint based on the domain

Course Name &Code	variation	Reasons for variation	Actions taken
			and reassess regularly.
-222 STA/ Fundamentals Of Biostatistics	High A and B grades (40.27% and 41.66%)	Most of the questions were either very simple or moderately simple. Review and Simplicity of questions will be addressed by using more robust rubrics.	1. The assessment methods will have more dependent questions and the rubrics for the assignments will be revised.
-431 PER/ Periodontics and Prevention	High A and B grades (31.94 % and 51.38% respectively)	Most of the questions are in simple category. Level of difficulty to be evaluated	1. Encourage students to do regular reading and also read textbooks, references. 2. Faculty should strictly follow the rubric for practical assessments.
-632PDS /Community dental practice	High A and B grades (82% and 15.5 %)	All students successfully completed their assigned tasks and scored well in their assessments.	1. MCQs assessment strategies be implemented
- 336 IPC/Infection Prevention Control	High A and B grades (69.2 % and 24.4% respectively)	High percentage allotted to assignments. High simplicity of exam questions. Nature of the course.	1. Improvement of exam simplicity by reviewing exam questions. 2. Review of blueprint
-432 PED/Preclinical Pediatric Dentistry	High A and B grades (39.72 % and 38.3% respectively)	As the course is knowledge based most of the questions were directly taken from the power point presentations and were moderately simple. Most of the MCQs used as tools in the assessment of ILOs were very simple and moderately simple	1. The difficulty level of the questions be reassessed. 2. Reviewing the blueprint and redistribution of MCQs to all domains. 3. Rubrics for the professionalism to be reassessed and refined.
-636 PDS/Clinical Orthodontics II	High A and B grades (39.6 % and 48.9% respectively)	The simplicity of MCQs and high marks in professionalism.	1. Level of difficulty and simplicity of the questions should be reviewed. 2. Reviewing the blueprint based on the domain and reassessed regularly.
-222 OPT/ Dental anatomy and	High A and B grades (38.3% and 51 %	Most of the questions of final exam were moderately simple or moderately	1. Increase number of dependent mcqs. 2. Level of difficulty and

Course Name &Code	variation	Reasons for variation	Actions taken
occlusion	respectively)	difficult	simplicity of the questions should be reviewed.
-421 OPT/ clinical operative dentistry	High A and B grades (29 % and 58 % respectively)	Higher grade achieved by students could be due to: 1. The difficulty level of the questions was very easy. 2. In relation to the case selection for evaluation and final exam, the students were given simple cases to perform the procedures. Reasons for no d grade could be due to: 1. The difficulty level of written examination was easy	1. The number of very easy questions should be decreased, and moderately difficult questions should be increased. 2. Level of difficulty and simplicity of the questions should be reviewed
-Clinical Fixed Prosthodontics I 543 SDS	High A and B grades (28.5% and 42.8% respectively)	1.Open book assignment was used as a tool of evaluation. 2.The clinical requirements were reduced to the minimum because of the limited number of patients and the students have two clinical sessions per weak 3.Number of short notes/essay questions were less as compared to MCQs in exams	1. Weightage of types of questions other than MCQs should be increased. 2. Reviewing the blueprint based on the domain and reassess regularly.
-Dental Implantology I 643 SDS	High A grades (47.4%)	1. Most of the MCQs given by faculty members were based on the power point presentations given by faculty members 2. Most of the MCQs used as tools for assessment of ILOs were simple	1. Reviewing the blueprint based on the domain and reassess regularly. 2.Level of difficulty and simplicity of the questions should be reviewed
-Pre-Clinical Removable Prosthodontics	High A and B grades (24.24% and 54.54%	1. Higher percentages of questions in the theory exams were simple or moderately simple,	1. Reviewing the blueprint based on the domain and reassess regularly. 2. Level of difficulty and

Course Name &Code	variation	Reasons for variation	Actions taken
341 PRO	respectively)	which helped them in achieving high grades.	simplicity of the questions should be reviewed.
-Pre-Clinical Fixed Prosthodontics 441 PRO	High A and B grades (45% and 40.08% respectively)	1. Most of the MCQs given by faculty members were based on the power point Presentations. 2. Most of the MCQs used as tools for assessment of ILOs were simple. 3. Number of short notes/ Essay questions were less as compared to MCQs in exam.	1. Level of difficulty and simplicity of questions should be reviewed. 2. Reviewing the blueprint based on the domain and reassess regularly.
-Clinical Fixed Prosthodontics II 544 SDS	High A and B grades (57.4% and 38.3% respectively)	1.The clinical requirements were reduced to the minimum because of the limited number of patients and the students have one clinical session per weak 2.Number of short notes/essay questions were less as compared to MCQs in exams 3.The MCQs were mostly simple and moderately simple 4.The Rubrics for the clinical assessment failed to differentiate the students effectively.	1. Weightage of types of questions other than MCQs should be increased. 2. Reviewing the blueprint based on the domain and reassess regularly. 3.Review the rubrics and assessment
- Dental Implantology 2 644 SDS	High A and B grades (29.16% and 47.91% respectively)	1. Most of the MCQs given by faculty members were based on the power point presentations given by faculty members 2.Most of the MCQs used as tools for assessment of ILOs were simple	1. Reviewing the blueprint based on the domain and reassess regularly. 2. Level of difficulty and simplicity of the questions should be reviewed.
-Clinical Removable Prosthodontics 442 PRO	High A and B grades (36.36% and 51.95% respectively)	Higher percentages of questions in the theory exams were simple or moderately simple, which	1. Reviewing the blueprint based on the domain and reassess regularly. 2. Level of difficulty and simplicity of the questions

Course Name &Code	variation	Reasons for variation	Actions taken
		helped them in achieving A grade.	should be reviewed.
-Clinical Removable Prosthodontics IV 542 SDS	High A and B grades (23% and 59.7% respectively)	Higher percentage of A & B grade could be attributed to the fact that most of the questions were direct and related to the lecture power point presentation.	1. Level of difficulty and simplicity of the questions should be reviewed. 2. Reviewing the blueprint based on the domain and reassess regularly.
-Advanced Prosthodontics II 642 SDS	High A and B grades (38.3% and 48.7% respectively)	Higher percentage of A & B grade could be attributed to the fact that most of the questions were direct and related to the lecture power point presentation.	1. Providing adequate and favorable time to apply rubrics in the lab sessions. 2.Rotation of students in continuous evaluation.
-Clinical Fixed Prosthodontics I 543 SDS	High A and B grades (28.5% and 42.8% respectively)	1. Open book assignment was used as a tool of evaluation. 2. The clinical requirements were reduced to the minimum because of the limited number of patients and the students have two clinical sessions per weak 3. Number of short notes/essay questions were less as compared to MCQs in exams	1. Weightage of types of questions other than MCQs should be increased. 2. Reviewing the blueprint based on the domain and reassess regularly.
-Dental Implantology I 643 SDS	High A grades (47.4%)	1. Most of the MCQs given by faculty members were based on the power point presentations given by faculty members 2. Most of the MCQs used as tools for assessment of ILOs were simple	1. Reviewing the blueprint based on the domain and reassess regularly. 2.Level of difficulty and simplicity of the questions should be reviewed
-Pre-Clinical Removable Prosthodontics 341 PRO	High A and B grades (24.24% and 54.54% respectively)	1.Higher percentages of questions in the theory exams were simple or moderately simple, which helped them in achieving high grades.	1. Reviewing the blueprint based on the domain and reassess regularly. 2. Level of difficulty and simplicity of the questions should be reviewed.

Course Name &Code	variation	Reasons for variation	Actions taken
-Pre-Clinical Fixed Prosthodontics 441 PRO	High A and B grades (45% and 40.08% respectively)	1. Most of the MCQs given by faculty members were based on the power point Presentations. 2. Most of the MCQs used as tools for assessment of ILOs were simple. 3. Number of short notes/ Essay questions were less as compared to MCQs in exam.	1. Level of difficulty and simplicity of questions should be reviewed. 2. Reviewing the blueprint based on the domain and reassess regularly.
- Clinical Fixed Prosthodontics II 544 SDS	High A and B grades (57.4% and 38.3% respectively)	1.The clinical requirements were reduced to the minimum because of the limited number of patients and the students have one clinical session per weak 2.Number of short notes/essay questions were less as compared to MCQs in exams 3.The MCQs were mostly simple and moderately simple 4. The Rubrics for the clinical assessment failed to differentiate the students effectively.	1. Weightage of types of questions other than MCQs should be increased. 2. Reviewing the blueprint based on the domain and reassess regularly. 3.Review the rubrics and assessment
-Dental Implantology 2 644 SDS	High A and B grades (29.16% and 47.91% respectively)	1. Most of the MCQs given by faculty members were based on the power point presentations given by faculty members 2.Most of the MCQs used as tools for assessment of ILOs were simple	1. Reviewing the blueprint based on the domain and reassess regularly. 2. Level of difficulty and simplicity of the questions should be reviewed.
-211 DIG / Oral Biology	High A and B grades (38.8 % and 48.8% respectively)	1. Most of the questions were simple or moderately simple 2. The level of English language is high.	Improvement of exam simplicity by reviewing various tools.
-311 DIG / Oral and Maxillofacial Radiology	High A and B grades (38.8 % and 48.8% respectively)	1.Higher percentages of questions in the theory exams were simple or moderately simple.	Level of difficulty and simplicity of the questions should be reviewed.

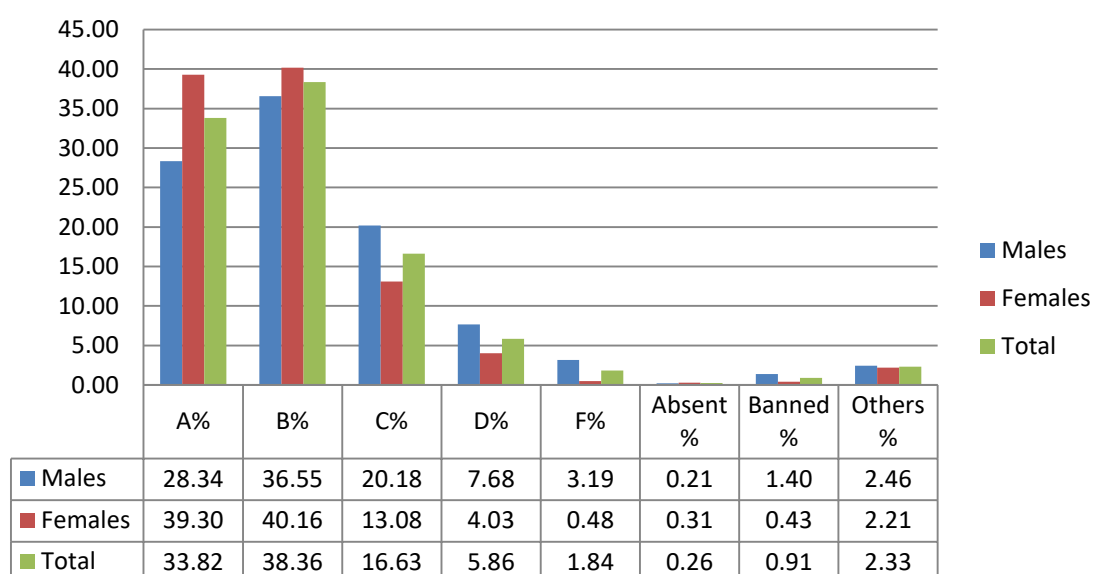| Course Name &Code	variation	Reasons for variation	Actions taken
-313 DIG / Oral Diagnosis	High A and B grades (71 % and 22.6% respectively)	1. Most of the questions were very simple or moderately simple. 2. Using MCQ as a means of assessment tool for most ILO's.	Level of difficulty and simplicity of the questions should be reviewed. 2. Review the blue print based on the domain and reassess regularly. 3. Weightage for assessment tools other than MCQ should be increased
-411 DIG/ Oral Medicine	High A and B grades (47 % and 30.14% respectively)	1. Most of the questions were simple for the students. 2. Using MCQ as a means of assessment tool for most ILOs	1. Level of difficulty and simplicity of the questions should be reviewed. 2. Review the blue print based on the domain and reassess regularly. 3. Weightage for assessment tools other than MCQ should be increased.
-511 MDS / Oral medicine and Diagnostic sciences III	High A and B grades (35.10% and 45.74% respectively)	1. Most of the questions were very simple and moderately simple. 2. Using MCQ as means of assessment of most ILO's	1.Weightage of question other than MCQs should be increased. 2. Level of difficulty and simplicity of the questions should be reviewed.
-412 DIG / Oral and Maxillofacial radiology	High A and B grades (40 % and 40 % respectively)	1. Most of the questions were very simple or moderately simple. 2. Using MCQ as a means of assessment tool for most ILO's	1. Level of difficulty and simplicity of the questions should be reviewed. 2. To follow correct rubrics rules for continuous Assessment. 3. Review the blue print based on the domain and reassess regularly. 4. Weightage of type of question other than MCQ should be increased.
-354 MED/ General Medicine	High D grades(32.7%)	1. The nature of the course. As the course does not contain clinical part, it should be delivered by more active methods. 2. Underestimation of the course by student.	1. Use group assignments and seminars. 2. More focus should be given to clinical scenarios. 3. Reassessment of the blueprint and simplicity of exam questions.

Course Name &Code	variation	Reasons for variation	Actions taken
		3. Virtual mode with lack of students' attention.	
-551DMS/ Dental Pharmacology	High A grades (33%)	1. The subject is taught by separate faculty in male and female sections.	1. Reassessment of the blueprint and simplicity of exam questions
-352 MED /Microbiology /Immunology	High A grades (41.2%)	1. High simplicity of exam questions	1. Reassessment of the blueprint and simplicity of exam questions 2. Students should be encouraged to study hard by giving them questions at the beginning of each lectures.
- 252 MED/ General Histology and Embryology	High A grades(38.2%)	1. Most of the questions were very simple or moderately simple 2. Using simple MCQs as a mean of assessment tool for most ILOs	1. Reviewing the blueprint based on the domain and reassess regularly. 2. Weightage of types of questions other than MCQs should be increased 3. Level of difficulty and simplicity of the questions should be reviewed.
-243 PHCL Introduction To Ethics And Health Profession	High A grades(45.3%)	High percentage of the result was allotted to assignments. Simplicity of exam questions is high it should be reassessed (attachment 3).	1.Reduce percentage allotted for assignment. 2.Reassessment of simplicity of exam questions.
- Comprehensive Care Clinics I / 661 DEN	High A grades (72.52%)	1. Most of the MCQs given by the faculty members, were based on the power point presentations. 2. Most of the MCQs, used as tools for the assessment of ILOs were simple. 3. Number of short notes/essay questions were less as compared to MCQs in exams. 4. Rubrics for different	1. Evaluation of clinical requirements should be discussed and modified. 2. Rubrics should be discussed with staff members in detail and should be strictly followed. 3. Reviewing the blueprint based on the

Course Name &Code	variation	Reasons for variation	Actions taken
		evaluations were not followed strictly. 5. Allotting higher percentage to requirements as one of the evaluations	domain and reassess regularly. 4. Weightage of types of questions other than MCQs should be increased 5. Level of difficulty and simplicity of the questions should be reviewed.
- Comprehensive Care Clinics II / 662 DEN	High A grades (48.3%)	1. Most of the MCQs given by the faculty members, were based on the power point presentations. 2. Most of the MCQs, used as tools for the assessment of ILOs were simple. 3. Number of short notes/essay questions were less as compared to MCQs in exams. 4. Rubrics for different evaluations were not followed strictly. 5. Allotting higher percentage to requirements as one of the evaluations	1. Evaluation of clinical requirements should be discussed and modified. 2. Rubrics should be discussed with staff members in detail and should be strictly followed. 3. Reviewing the blueprint based on the domain and reassess regularly. 4. Weightage of types of questions other than MCQs should be increased 5. Level of difficulty and simplicity of the questions should be reviewed.
-663 DEN / Practice Management and Professional Conduct	High A grades (73%)	1. This is advance course and most of the information and concepts already presented to students in previous years. 2. There was a project as part of assessment, most of students did the project as planned 3. Most of the MCQs were simple.	1. Level of difficulty and simplicity of the questions should be reviewed. 2. Weightage of types of questions other than MCQs should be increased. 3. Reviewing the blueprint based on the domain and reassess regularly.

3. Result Analysis of Course Reports

(including strengths, Areas for Improvement:, and priorities for improvement)

Comparison Between Male & Female Grades In 20221
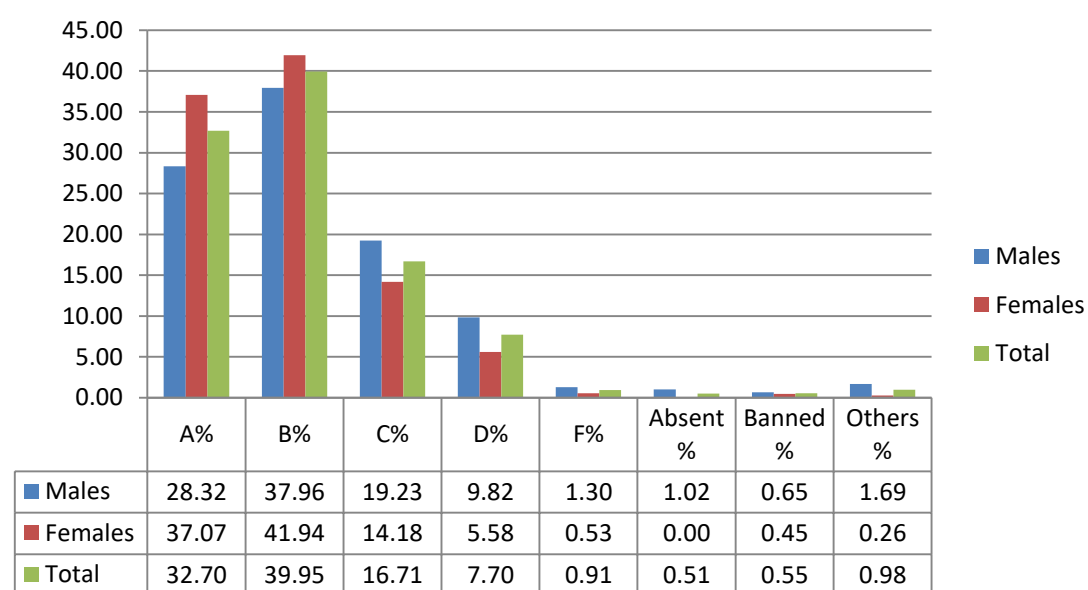
	A%	B%	C%	D%	F%	Absent %	Banned %	Others %
Males	28.34	36.55	20.18	7.68	3.19	0.21	1.40	2.46
Females	39.30	40.16	13.08	4.03	0.48	0.31	0.43	2.21
Total	33.82	38.36	16.63	5.86	1.84	0.26	0.91	2.33

Comparison Between Male & Female Grades In 20222

	A%	B%	C%	D%	F%	Absent %	Banned %	Others %
Males	28.32	37.96	19.23	9.82	1.30	1.02	0.65	1.69
Females	37.07	41.94	14.18	5.58	0.53	0.00	0.45	0.26
Total	32.70	39.95	16.71	7.70	0.91	0.51	0.55	0.98

20221 Yearwise Grade Distribution (Male)

Legend: A B C D F Others

20221 Yearwise Grade Distribution (Female)

Legend: A B C D F Others

20222 Yearwise Grade Distribution (Male)

Legend: A, B, C, D, F, Others

20222 Yearwise Grade Distribution (Female)

Legend: A, B, C, D, F, Others
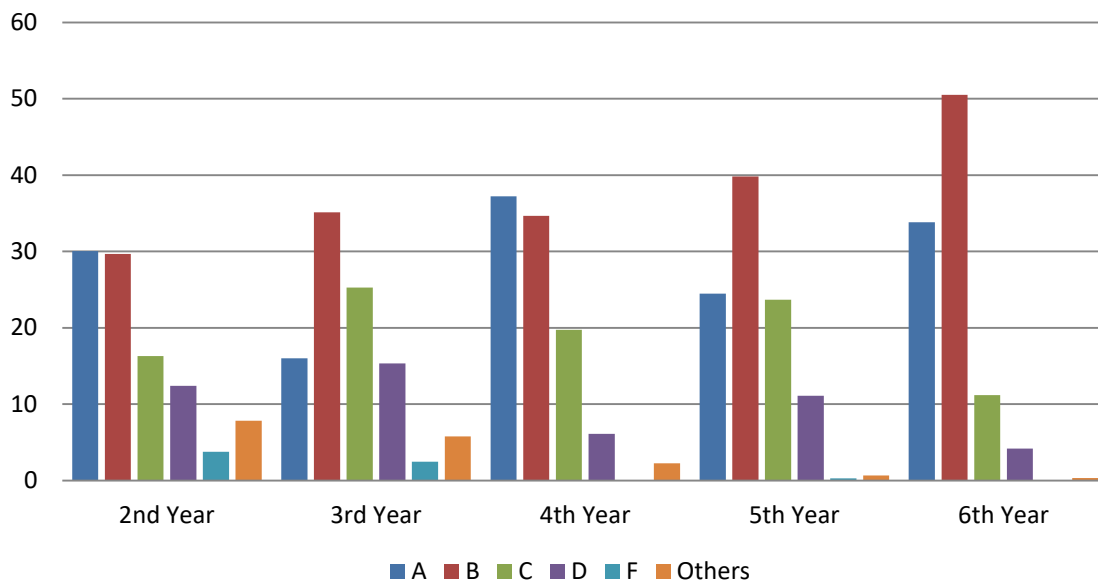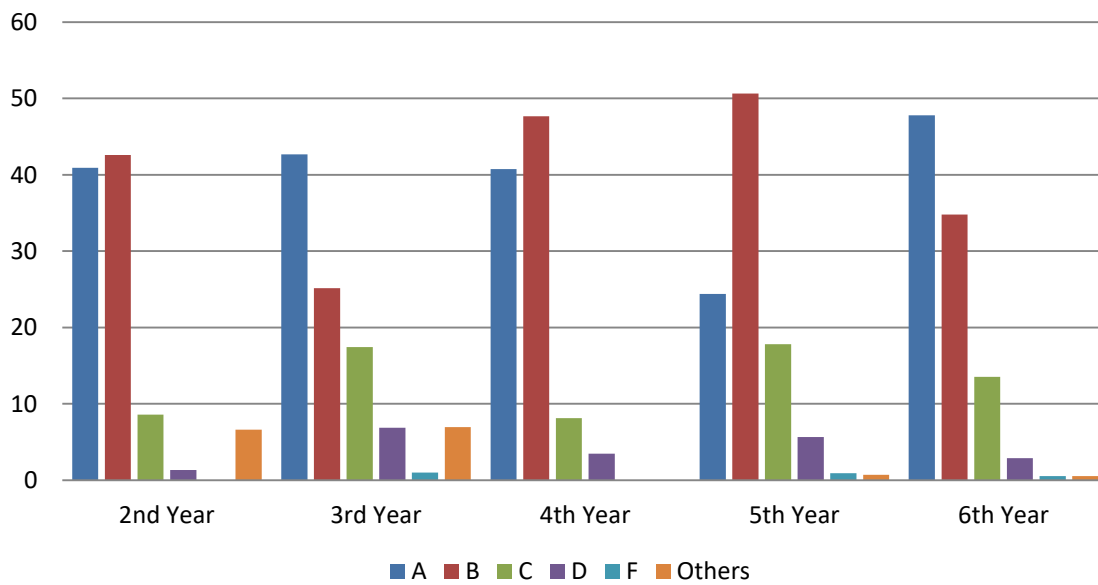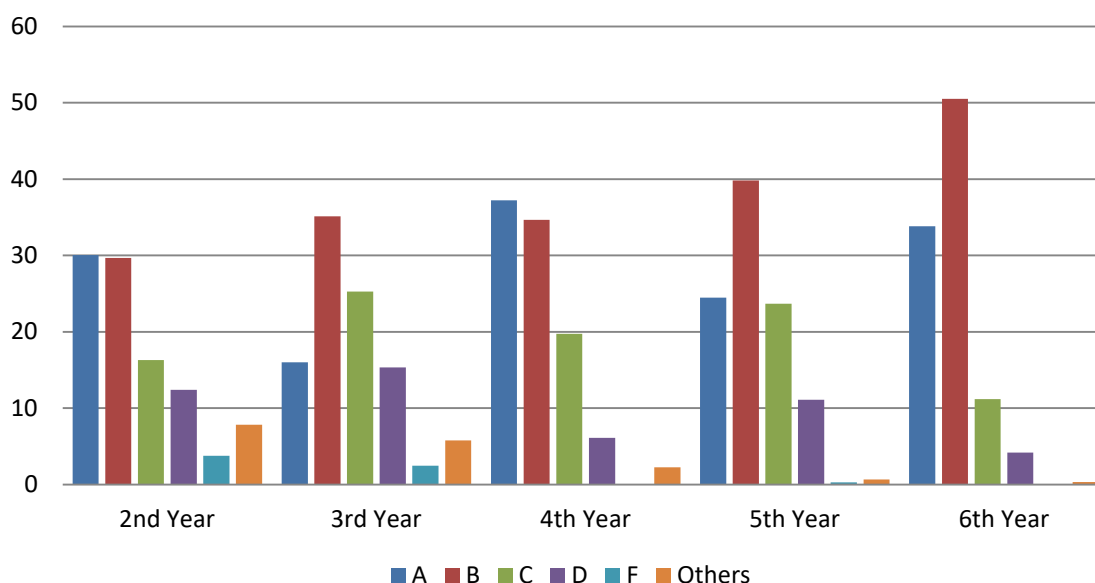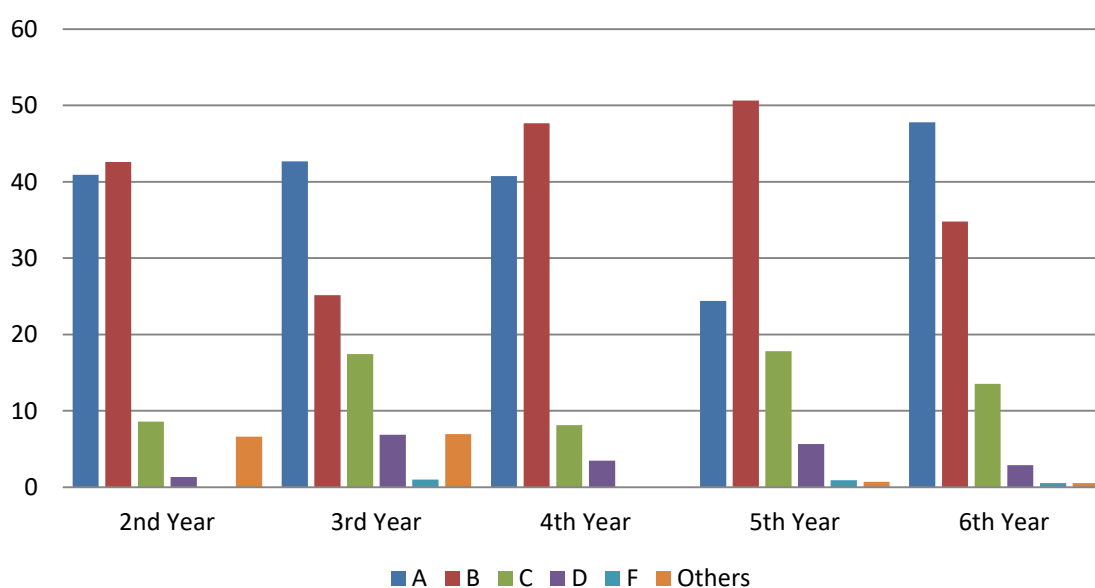
Strengths :

- All the planned courses were taught in both the semesters of 2021-22.
- All assessments were conducted according to the plan and schedule in both the semesters.
- Passing percentage is excellent in both the semesters.
- The assessment tools used were proven appropriate based on the result as it could differentiate students according to their performance, especially in the first semester.
- Acceptable number of failures, absentees and withdrawals were observed in the academic year

2021-22.
Areas for Improvement:
- Rubrics should be implemented effectively for all the assessments (regular or virtual) of all the courses.   - Level of difficulty and simplicity of the questions should be reviewed.   - Blue print should be revised.
Priorities for Improvement:
- Rubrics should be implemented effectively for all the assessments (regular or virtual) of all the courses.   - Blue print should be revised.

E. Program Activities

1. Student Counseling and Support

Activities Implemented	Brief Description[*]
Aiding students in adding and dropping courses	Academic advisors helped students facing difficulties with the Edugate portal for adding and dropping courses during the registration week.
Re-assure that all faculty are involved in the academic counseling	To minimize the ratio of the academic advisors to the students, most of the faculty except those with heavy administrative duties were included in the academic counseling and all students were distributed among them which was also reflected on the edugate system.
Preparation of academic plan for irregular students	This was needed to help students register for their courses without any difficulty and also to enable them to be integrated into the regular schedule.
Conduction of orientation programs for the new students	This was conducted virtually for the new students in the beginning of the year to welcome them and to give them information about the university, college, dental program and all details they may need.
Preparation of counseling reports for student's attendance every 4 weeks (4th , 8th and 12th week)	These reports were made during the 4th, 8th, and 12th week. The students who had three or more absences in both theory and practical sessions were of concern for the Academic Advisors who prepared the counseling reports. The students were contacted in the 1st and 2nd semesters by their respective Academic Advisors and were asked the reasons (98 students, and 137 students in the 1st and 2nd semesters, respectively). The Academic Advisors listened to all their problems and explained to them the importance of attendance and provided support and help to avoid any absence in the future.
Preparation of counseling reports and performing student counseling for under achievers in the midterm and Final examinations	After the midterm and final examinations results, Academic Advisors conducted student counseling (46 students and 10 in the 1st and 2nd semesters, respectively) to know the reasons behind their underperformance and give advice and support to students accordingly.
Training webinars for academic advisors	As usual every year the academic advisors got special training conducted by the University Deanship of students' affair. This year more than 5 virtual webinars were conducted during the year.
Individual student counseling sessions	Counselling sessions were conducted for few students jointly by the students' affair committee and the assigned student academic advisor.
Individual psychological counseling sessions	Multiple individual psychological counseling sessions were conducted for students in need (17 students). These sessions achieved the planned goals especially for underperforming students, irregular students, students who applied for drop of a semester, frequently and absent students.

Referral of few students to authorized psychological consultants.	Students (4 students) who needed further counselling were referred to the University deanship of student affair psychological counselling unit as their situation needed authorized professional consultants.

Comment on Student Counseling and Support **

The academic advisors provided regular counseling and encouragement to our students throughout this academic year.

Various activities and orientation programs were conducted for all the students as scheduled. The students were helped in equating their courses with the previous study plan along with adding and dropping courses. This eased the perplexity the students had and helped in their integration at various levels in the program.

This academic year, the number of advisors were increased. This facilitated in providing more one to one sessions with the students and individual efficient monitoring was feasible. Regular and post examination reports were prepared and counselling secessions were conducted for underachievers on an individual level.

These activities by the unit helped in avoiding any major impact of the current situation on the overall progress of the students and thereby aiding in their smooth transition throughout the program.

* including action time, number of participants, results and any other statistics.

** including performance evaluation on these activities

2. Professional Development Activities for Faculty and Other Staff

Activities Implemented	Brief Description[*]
Research ethics (09/10/2021)	The workshop was conducted to explain the different constituents in ethically conducting research. This workshop was targeted towards all faculties including heads of department, division, course coordinators and co coordinators. The basic purpose of undertaking this workshop is to make them understand the objectives of scientific morality and values of research practice and community. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The attendance percentage was 70.3% and there were 42 respondents of the workshop who provided their feedback via online survey at the end.
Tips and tricks of how to publish in ISI journals 13/11/2021	The workshop was conducted to discuss the various process involved in submitting the manuscript to indexed scientific journals. This workshop was arranged for all faculties including heads of department, division, course coordinators and co-coordinators. The rationale for this workshop was to expose them to different strategies and methods in ISI publication and enable them to apply the same. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The attendance percentage was 44.6% and there were 14 respondents of the workshop who provided their feedback via online survey at the end.
Effective teaching & learning 25/12/2021	This workshop was conducted to compare, evaluate and appreciate the different innovative methods of teaching and learning process. This workshop was arranged for all faculties including heads of department, division, course coordinators and co-coordinators. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The attendance percentage was 45.5% and there were 12 respondents of the workshop who provided their feedback via online survey at the end.
Process of curriculum and academic plan development 22/01/2022	The workshop was conducted to demonstrate a logical systematic approach to curriculum development. This workshop was arranged for all faculties including heads of department, division, course coordinators and co-coordinators. The basic purpose of undertaking this workshop is to investigate what material should be covered in dental school curricula and how the material should be developed as students' progress through their education. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The attendance percentage was 67.3% and there were 12 respondents for the workshop who provided their feedback via online survey at the end.
Designing exam blueprint 19/02/2022	The workshop was conducted to explain the different components in designing of exam blueprint. This workshop was arranged for all faculties including heads of department, division, course coordinators and co-coordinators. The basic purpose of undertaking this workshop is to make them understand the importance of preparing the blueprint in a systematic approach before the commencement of a course. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The

	attendance percentage was 47.5% and there were 7 respondents for the workshop who provided their feedback via online survey at the end.
Preparation of research proposal 26/03/2022	The workshop was conducted to explain the outlines, purpose and scope of a research project. This workshop was targeted towards all faculties including heads of department, division, course coordinators and co coordinators. The basic purpose of undertaking this workshop is to help faculty to identify title for project and define goals while outlining the research project from start to finish. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The attendance percentage was 66.3% and there were 29 respondents of the workshop.
Qualitative research approach in dentistry: as tool for assessment 22/05/2022	The workshop was conducted so that teaching staff will be able to gather in depth insights into a problem and generate new ideas for research. This workshop was targeted towards all faculties including heads of department, division, course coordinators and co-coordinators. The basic purpose of undertaking this workshop is to help researcher in describing either explicitly or implicitly, the purpose of the qualitative research, the role of researchers, The stages of research, and the method of data analysis. It was conducted based on the feedback obtained from training needed analysis conducted between 20th April and 26th April 2021. The attendance percentage was 28.7% and there were 8 respondents for the workshop who provided their feedback via online survey at the end.

Comment on Professional Development Activities for Faculty and Other Staff [**]

Strength:
1. The workshops has helped the participants to build their skills in conducting research and publish their articles.
2. Identifying many new teaching methods that exist taught faculty how to practically apply the new teaching methods.
3. Profession educators are made aware of their professional and ethical obligation to meet the needs of their learners and society.
4. helped the participants to improve their awareness in examination blueprints.

Recommendation:
1. Ethical guidelines, submission process, approval steps related to the Jazan University Ethical Committee should be given importance and reiterated.
2. The contents of the workshops have to be customized in a computer lab with practical training.
3. More examples relevant to statistical analysis and methods of graphical abstracts for ISI journal submission should be provided.
4. Application of blueprint in the online platform.
5. More research workshops with more examples relevant to different specialty of dentistry should be provided.
6. Qualitative research in dentistry should be ensured through a restructure and a refocus on an educational level.

* including action time, number of participants, results and any other statistics.
** including performance evaluation on these activities

3. Research and Innovation

Activities Implemented	Brief Description*
Faculty Publications and Citations	Total research published by Faculty ISI and Scopus- 264 Research Citations for the year 2021 according to the Google Scholar- 3598
Completed researches under publication process	• 32 researches
Ongoing researches	• 25 researches
Seventh Annual Research Day	Conducted on 30.05.2022 in college of Dentistry, Jazan University. Research Day was conducted in a grandeur opening by President- Jazan University. Posters evaluation was done in 2 phases: i. Phase 1: Blinded posters has been sent to Reviewer's for evaluation. ii. Phase 2: Posters have been presented by interns through an interactive session and assessed by internal evaluators. Top 3 winners from each Male and Female Groups were announced. All posters were archived and further been use as a scientific source to present in various national/ international conferences.
Faculty rewards	39 faculty members from the College of Dentistry were rewarded for their publications by the university.

Comment on Research and Innovation^{**}

Research unit continues to function as an engine of innovation and community development, with research programs that enrich the staff and students of our institution. This year comes up with accomplishment and achievements in terms of participation, dedication and promising growth in the Research unit. This current year researchers have proven that their research is crucial, influential and necessary on local, national and international levels. As an institution with primarily undergraduate focus, we need to remain strong advocates for increased research support for fundamental and applied research.

 The University announced rewards for publications in prestigious journals, funded highly standard researches and supported research groups if the proposal submitted falls under the priorities in the region.

The publications in the ISI journals were rewarded and this helped encourage the staff members to publish more of their researches in high standard ISI journals.

We hope that research unit and this institute will continue to grow with more advance research involving greater participation and enthusiasm for quality and substantial research.

* including action time, number of participants, results and any other statistics.
** including performance evaluation on these activities

4. Community Partnership

Activities Implemented	Brief Description*
World Mental Health Day 10/10/2021	World Mental Health Day is an international day for global mental health education, awareness and advocacy against social stigma. It was first celebrated in 1992 at the initiative of the World Federation for Mental Health, a global mental health organization with members and contacts in more than 150 countries.
International Children's Day 21/11/2021	Children's Day is a commemorative date celebrated annually in honor of children, whose date of observance varies by country. In 1925, International Children's Day was first proclaimed in Geneva during the World Conference on Child Welfare.
The 16 Days of Activism against Gender-Based Violence 12/01/2022	The 16 Days of Activism against Gender-Based Violence is an annual international campaign for the Elimination of Violence against Women, and runs until 10 December, Human Rights Day. It was started by activists at the inaugural Women's Global Leadership Institute in 1991 and continues to be coordinated each year by the Center for Women's Global Leadership. It is used as an organizing strategy by individuals and organizations around the world to call for the prevention and elimination of violence against women and girls.
World Cancer Day 5/02/2022	World Cancer Day is an international day marked on 4 February to raise awareness of cancer and to encourage its prevention, detection, and treatment. World Cancer Day is led by the Union for International Cancer Control to support the goals of the World Cancer Declaration, written in 2008.
Environment Week under the slogan Our Environment is Our Responsibility 24/03/2022	Saudi Arabia's Minister of Environment, Water and Agriculture, inaugurated on Sunday the activities and exhibition of the Environment Week under the slogan "Our Environment is Our Responsibility," the activities aim to raise awareness on the importance of preserving the environment, spreading environmental culture, consolidating quality of life goals, activating the role of individuals, institutions and various government agencies in preserving the environment and maintaining ecological balance in accordance with the objectives Vision 2030.
Activating the unified Gulf week to promote oral and dental health. 31/03/2022	The oral health is an integral part of public health, and the incidence of oral and dental diseases in the GCC is very high. Given the awareness of the members of the Ministers' Council of the Gulf Cooperation Council (GCC) for the significance of the oral and dental health, they issued the decision No. 4 at the 65th conference of the FCC'S Cabinet, held in Geneva on May 21, 2008. This decision provides a number of items, the most important of which is to approve the gulf plan of the oral and dental health care, submitted by the Gulf Committee for the Oral and Dental Health.

Comment on Community Partnership[**]

Community activities are essential to promote, provide and propagate oral health and general health services to the population that might not otherwise have access to it.

Collaboration for community activities is very important as the awareness among the general population is very less. Various partnerships had been undertaken from College of Dentistry program to ensure that the knowledge and awareness is spread regarding the oral and dental health.

More people benefited from numerous programs that were conducted in and around Jazan region this academic year. Oral hygiene habits are best inculcated in the formative years of life.

Some of the other programs targeted the general population and the employees of governmental organizations. These interactions benefited our faculty and students in understanding the level of awareness and the health needs of the population of the region. Moreover, the students developed a sense of community service which bolstered their commitment towards the society.

* including action time, number of participants, results and any other statistics.

** including performance evaluation on these activities

5. Analysis of Program Activities
(including strengths, Areas for Improvement:, and priorities for improvement)

Strengths :

- Increase in the number of advisors facilitated in providing additional one to one sessions with the students, and individual and more efficient monitoring was feasible.
- Periodic and post examination reports were prepared and counselling secessions were conducted for underachievers on an individual level.
- The psychological needs of the students were also taken into account and assistance was provided at college and institutional level.
- Workshops on professional development were open and interactive and gave faculty all necessary details and contributed to their expansion in knowledge.
- Professional development workshops also helped in selection of high quality topics for research and the ideal statistical test for their respective topic
- Researches by faculty and student were emphasized upon. Due to it many more staff and students were encouraged to do researches.
- The publications prestigious journals were rewarded and this helped encourage the staff members to publish more of their researches in high standard journals.
- Numerous community activities facilitated the impartment of the knowledge and understanding of dental and general health care. It also emphasized the importance of maintaining oral and general health and its follow- up.
- The regular academic counseling and support provided by the academic advisors helped the students significantly, especially those who underperformed

Areas for Improvement:

- More training should be given for the academic advisors.
- More activities should be provided for the students on academic counseling and support.
- More workshops with real time training for the participants would be more appropriate in professional activities.
- The workshops should be limited to smaller groups for focused discussion and better interaction and repeated for the benefit of participants.
- For the researchers with basic knowledge in biostatistics, an advanced version of the workshop with hands-on training would be helpful.
- Arranging funds to establish functional research lab to help students and faculty in their research proposals.
- Inspire and persuade students to engage with active faculty research.
- Encourage staff and students to apply for funds and patents.
- Establish and implement programs & seminars to ensure quality research for faculty and students.
- Increase in the number of faculty research grants should be explored and more number of faculty should be encouraged to apply for it.
- Increase the number of awareness and educational programs for patients treated in college.

Priorities for Improvement:

- More training should be given for the academic advisors.
- Increase in time allotted to faculty members for doing research and publishing in referred journals.
- Increase the number of awareness and educational programs for patients treated in college.

F. Program Evaluation

1. Evaluation of Courses

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
201HLT	Biochemistry I	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Use of an active teaching method.
220 ANAT	Head & Neck Anatomy	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Discussion of case scenarios with the students. • Request for more anatomical model.
212PHYSIO	Human Physiology I	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • Student evaluation of ILOs should be implemented. • A request is to be made to the division head to assign another evaluation of oral presentation. • Use of PBL as a teaching strategy. • Replace continuous assessment sessions by one more quiz.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
251MED	Biochemistry II	Yes	Faculty Evaluation	• Reviewing of the lectures should be started from next semester. • A request for continuous peer evaluation. • Use of an active teaching method. • Discussion of problems to enhance critical thinking and problem-solving.
254MED	Head & Neck Anatomy	Yes	Faculty Evaluation	• Reviewing of the lectures should be started from next semester. • A request for continuous peer evaluation. • Explain the course outlines and sources of help to the students. • Discussion of group assignment to improve communication and teamwork skills. • Proper use of rubric in assessment if value domain • Review of simplicity of exam.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
255MED	Human Physiology II	Yes	Faculty Evaluation	• Reviewing of the lectures should be started from next semester. • A request for continuous peer evaluation. • Student evaluation of ILOs should be implemented. • Improvement of Excel sheet given by the deanship of development. • Use of flipped classroom as a teaching strategy. • Discussion of case scenarios. • Determination of learning style using 8-item Honey and Mumford questionnaire.
611MDS	Advanced oral and maxillofacial surgery-II	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Use of an active teaching method. • Need of more faculty members in clinical sessions

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
513 MDS	Advanced oral and maxillofacial surgery-I	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Discussion of case scenarios with the students. • Need of more faculty members in clinical sessions
512 MDS	Clinical oral and maxillofacial surgery-II	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Use of an active teaching method. • Need of more faculty members in clinical sessions
413 MDS	Clinical oral and maxillofacial surgery-I	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Use of an active teaching method. • Need of more faculty members in clinical sessions

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
312 SUR	Anesthesia	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Use of an active teaching method. • Need of more faculty members
412 DIG	Clinical Oral and Maxillofacial Radiology	Yes	Faculty Evaluation	• The sessions should be made more interactive to stimulate the student's reasoning abilities. • The duration of time spent with the student for group discussion needs to be increased. • Lectures were updated at division level and this process should be continued. • **Necessary textbooks should be procured by the library** • A request for continuous peer evaluation

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
414 DIG	Oral Pathology II	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Active participation of students should be encouraged during lecture and practical sessions. • Incorporation of teaching strategies to enhance knowledge and skills amongst students.
314 DIG	Oral Pathology I	No	Faculty Evaluation	• Achievement should be improved at the individual tool level. • Lectures were updated at division level and this process should be continued. • The sessions should be made more interactive to stimulate the student's reasoning abilities. • Rubrics need to reviewed by the division and made more appropriate for the ILOs assessed. • Necessary textbooks should be procured by the library.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
531 PDS	Periodontics III	Yes	Faculty Evaluation	• The more number of students taking the evaluation should be encouraged so that the course can be properly analyzed and updated accordingly. • The study materials to be updated by additional supplements in the black board • The grading and assessments to be updated and tools to be re-evaluated.
222 SAT	Fundamentals Of Biostatistics	No	Faculty Evaluation	• More robust assessment method/rubric for assignments will be used. • The assessment method will have more dependent MCQs
331 DPH	Dental public health	No	Faculty Evaluation	• More concern should be given to case scenarios to improve skills domain. • Review of lectures at division level. • Implementation of peer evaluation.
431 PER	Periodontics and Prevention	No	Faculty Evaluation	• All lectures should be evaluated at Division level from next semester

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
535 PDS	Preclinical Orthodontics	No	Faculty Evaluation	• All lectures should be evaluated at division level from next semester.
632 PDS	Community dental practice	No	Faculty Evaluation	• Assessment methods will be further updated and sent to academic office for approval.
336 IPC	Infection Prevention Control	Yes	Faculty Evaluation	• Rubric is to be written and approved by the division head. • Reviewing lectures at division level.
533 PDS	Pedodontics I	Yes	Faculty Evaluation	• Contents and lectures to be reviewed at division level by the committee formed within the division • Dependent and Independent MCQs to be reviewed at division level by the committee to balance the questions between very simple, moderately simple, moderately difficult and very difficult.
432 PED	Preclinical Pediatric Dentistry	No	Faculty Evaluation	• Reassessing the content of lectures to include the latest information division level. • Continuous peer evaluation of the questions for all assessment tools.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
534 PDS	Pedodontics II	No	Faculty Evaluation	• Peer evaluation of lectures
636 PDS	Clinical Orthodontics II	No	Faculty Evaluation	• Assessment criteria for the value domain needs to be reviewed • All lectures should be evaluated at division level from next semester.
222 OPT	Dental anatomy and occlusion	No	Faculty Evaluation	• Updating and reviewing lectures must be continued. • Continuous peer evaluation to be done.
543 SDS	Clinical Fixed Prosthodontics I	Yes	Faculty Evaluation	• Students shall be encouraged to read the relevant literature and lecture content to inspire them to perform enthusiastically. • The library resources must be strengthened as they are presently poor and no reading textbooks are available. • Reviewing of the assessment tools should be done to incorporate group discussions to encourage them to ask questions and develop ideas.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
643SDS	Dental Implantology I	Yes	Faculty Evaluation	• Students shall be encouraged to read the relevant literature and lecture content to inspire them to perform enthusiastically. • The library resources must be strengthened as they are presently poor and no reading textbooks are available.
441 PRO	Pre-Clinical Fixed Prosthodontics	No	Faculty Evaluation	• Lectures should be updated continuously
341 PRO	Pre-Clinical Removable Prosthodontics	No	Faculty Evaluation	• Continuous update of the lectures should be done. • Special training of English can be given to some students if required.
544 SDS	Clinical Fixed Prosthodontics II	No	Faculty Evaluation	• Reviewing of the lectures should be continued. • More practice and emphasis for dependent MCQs should be given to them so that students can perform better.
644 SDS	Dental Implantology 2	No	Faculty Evaluation	• Continuous update of the lectures should be done.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
442 PRO	Clinical Removable Prosthodontics	No	Faculty Evaluation	• Due to long span of midterm exams, students are focusing less on lectures (specially topics of mid-year exams) which affected their achievement in knowledge & understanding domain and also affected the theoretical assessments in skill domain • Assessment criteria and marks distribution should be reviewed. • Working hours should be planned so the students get sufficient time to read
542 SDS	Clinical Removable Prosthodontics IV	No	Faculty Evaluation	• More emphasis should be given to dependent MCQ's and structured essay type of questions so that students can perform better. • Lecture should be reviewed every year at department level.
642 SDS	Advanced Prosthodontics II	No	Faculty Evaluation	• Continuous update of the lectures should be done.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
211 DIG	Oral Biology	Yes	Faculty Evaluation	• Reviewing of the lectures at division level. • A request for continuous peer evaluation. • Written assignments need to be reinforced within classes as homework in the coming semesters. • Increase number of dependent MCQs • Reassessment of the simplicity of various tools to be done.
411 MDS	Oral medicine	Yes	Faculty Evaluation	• The sessions should be made more interactive to stimulate the student's reasoning abilities. • The duration of time spent with the student for chair side discussion needs to be increased. • Rubrics for student's presentation need to reviewed by the division and made more appropriate for the ILOs assessed.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
313DIG	Oral Diagnosis	Yes	Faculty Evaluation	• As short essays, structured essays, OSCE were recently introduced and were new to the students, more practice and emphasis should be given to them. • Lectures to be updated regularly at individual level and by peer review system.
311 DIG	Oral and Maxillofacial radiology	Yes	Faculty Evaluation	• Lectures to be updated continuously at personal level. • Continuous internal verification to be done throughout the course.
511 MDS	Oral Medicine & Diagnostic Sciences III	Yes	Faculty Evaluation	• Lecture review at division level • Number of special clinical cases should be increased. • Faculty should be more enthusiastic about what they teach. • Faculty should regularly observe the students for their progress.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
412 DIG	Oral and Maxillofacial radiology	Yes	Faculty Evaluation	• Assessment of getting students familiarized with the course outline. • Availability of Course material (textbooks, library, computers etc.) when needed. • Lectures need to be updated further continuously at division level.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
321 OPT	Preclinical operative dentistry	No	Faculty Evaluation	• Emphasis should be given on assignments related to hand and rotary instruments used in operative dentistry • Teaching strategies should be improved to make understand the students to think and analyze the armamentarium and designing of simple and complex tooth preparations and restoring them with silver amalgam and composite resin materials based on rubrics • All lecture content should be reviewed at division level for the next academic year • continuous peer evaluation to be done • Division level meetings should be organized and reported to review the lecture content and peer evaluation
421 OPT	Clinical operative dentistry	No	Faculty Evaluation	• Clinical requirements should be increased. • Rubrics should be revised for continuous assessment and professionalism assessment

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
521 RDS	operative dentistry III	Yes	Faculty Evaluation	• Instructors have to be informed to follow up individual students' progress on a weekly basis. • Instructors should motivate the students so that they are interested in learning process • Instructors should be instructed to grade the assignments in fair and reasonable manner. • Course materials should be updated from the latest edition of textbooks. • Instructors should motivate the students to ask questions and develop their own ideas. • Short answers, short essays, Structured essays were introduced and were new to the students, more practice and emphasis should be given to them. • Lectures were updated continuously at division level.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
522 RDS	operative dentistry IV	No	Faculty Evaluation	• Students should be instructed to present case history in each and every clinical case and questions should be asked by the instructors • Mock viva and case presentations should be conducted in clinical hours.
543 SDS	Clinical Fixed Prosthodontics I	Yes	Faculty Evaluation	• Students shall be encouraged to read the relevant literature and lecture content to inspire them to perform enthusiastically. • The library resources must be strengthened as they are presently poor and no reading textbooks are available. • Reviewing of the assessment tools should be done to incorporate group discussions to encourage them to ask questions and develop ideas.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
643SDS	Dental Implantology I	Yes	Faculty Evaluation	• Students shall be encouraged to read the relevant literature and lecture content to inspire them to perform enthusiastically. • The library resources must be strengthened as they are presently poor and no reading textbooks are available.
441 PRO	Pre-Clinical Fixed Prosthodontics	No	Faculty Evaluation	• Lectures should be updated continuously
341 PRO	Pre-Clinical Removable Prosthodontics	No	Faculty Evaluation	• Continuous update of the lectures should be done. • Special training of English can be given to some students if required.
544 SDS	Clinical Fixed Prosthodontics II	No	Faculty Evaluation	• Reviewing of the lectures should be continued. • More practice and emphasis for dependent MCQs should be given to them so that students can perform better.
644 SDS	Dental Implantology II	No	Faculty Evaluation	• Continuous update of the lectures should be done.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
353 MED	Dental Pharmacology	No	Faculty Evaluation	• For improvement of skill and competence domains the students will be encouraged for critical thinking and solving the cases • Case based questions will be given to the students to search for their answers to stimulate active learning and for motivation.
354 MED	General Medicine	No	Faculty Evaluation	. • Use of multiple active teaching methods. . • Review of lectures at division level should be implemented to improve learning process.
452DMS	General Surgery	No	Faculty Evaluation	• Detailed rubric for assessment of attitude should be constructed. • Use of active learning methods should be enhanced to improve knowledge retention and motivate the students as well. • Review of lectures at division level should be implemented to improve learning process.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
551DMS	Dental Pharmacology	No	Faculty Evaluation	• For improvement of skill and competence domains the students will be encouraged for critical thinking and solving the cases • Apart from the introductory lecture, office hours will be mentioned to the students from time to time
352MED	Microbiology/Immunology	Yes	Yes	• The students should be trained to think and solve problems. • They should be encouraged to participate in the lectures to improve their communication skills. • Importance and usefulness of the course content should be made clear to the students. • Rubric should be reviewed and approved by the division head. • Review of lectures at division level will improve the quality of learning. • Peer evaluation is to be implemented

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
252 MED	General Histology and Embryology	Yes	• Yes	• More problem base learning exercises will be added as the assessment tools to improve the thinking and learning ability of students. • As power point presentation as assignment were recently introduced and were new to the students, more practice and emphasis should be given to them. • Review of lectures at division level will improve the quality of learning.
243PHC L	Introduction to Ethics and Health Profession	Yes	Faculty Evaluation	• Review of the lectures at division level. • Peer evaluation is to be implemented. • Lectures are to be more interactive. • Percentage allotted for assignment is to be reduced.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
261 DEN	Introduction to Dentistry	Yes	Faculty Evaluation	• Reviewing of the lectures should be started from the next semester. • Active participation of students should be encouraged during lecture and practical sessions. • Incorporation of teaching strategies to enhance knowledge and skills amongst students.
661 DEN	Comprehensive Care clinics I	Yes	Faculty Evaluation	• Flipped classroom to be introduced for the upcoming semester. • Inclusion of orthodontic faculty for the course. • Continuous orientation of rubrics for students and faculty members • Professionals rubric need to be modified. • Requirements for the course to be revisited • Grading of assessments should be strictly done according to the rubrics • The response rate for the survey was less from female students so the importance of the survey to the students should be stressed upon.

Course Code	Course Title	Student Evaluation (Yes-No)	Other Evaluations (specify)	Developmental Recommendations
662 DEN	Comprehensive Care clinics II	No	Faculty Evaluation	• Flipped classroom to be introduced for the upcoming semester. • Inclusion of orthodontic faculty for the course. • Continuous orientation of rubrics for students and faculty members • Professionals rubric need to be modified. • Requirements for the course to be revisited • Grading of assessments should be strictly done according to the rubrics
663 DEN	Practice Management and Professional Conduct	Yes	Faculty Evaluation	• Assessment tasks and the criteria should be explained in detail

Students Evaluation of Program Quality

This includes Program evaluation survey 2021-2022 and Student experience survey 2021-2022

Evaluation Date : May 17 2022/25 May 2022	**Number of Participants:** (24 / 90 [26.7%] and 10/78 [12.8%])
Students Feedback	**Program Response**
Strengths: • Most of the students felt they were very familiar with the vision, mission and goals of the college • Most of the students felt the vision of the college determines the ideal position it aspires to achieve • Most of the students felt the college's mission describes a basic objective that is unique and helps to achieve vision	• Faculty continuously discussed the mission, vision and goals of the college with the students. Moreover, these are also been displayed in the college premises and website which has helped the students to remember them.
• The students appreciated the availability of instructors for consultation and advice whenever they needed to speak with them. • The students appreciated that the instructors in the program inspired them to do their best • The students appreciated that the instructors in the program gave them helpful feedback on their work • The students appreciated that the instructors cared about the progress of their students	• Faculty office hours were provided to the students at the beginning of each semester, course specifications and were also displayed outside their offices. It was also mentioned clearly in the program handbook and were also displayed on the college website which helped them to discuss with the required staff members whenever they wanted and to clarify their doubts. The students could also make use of the email for communication and consultation with faculty. The faculty were also encouraged to participated in activities that inspired their students and encouraged to take care of all students.
• The students appreciated that the study materials in courses were up to date and useful • The students appreciated that library resources were adequate and available when they needed them • I am satisfied with the quality and extent of materials available for me in the library • Students mentioned that the library staff are helpful to me when I need assistance • The students appreciated that the students appreciated that the student computing facilities were sufficient for their needs • The students appreciated that the maintenance of IT is available and effective • The students appreciated that an adequate orientation and training for the effective use of resources and means of learning is conducted	• The college is highly keen and work hardly to offer and make all the learning resources and technical supports available and ready all the time.
• The students have realized that what they have learned in this program will be valuable for their future.	• The faculty made sure that the students were provided with continuous support throughout their entire educational process to encourage them to enhance their future prospects.
• Majority of the students felt that the program has	• The faculty ensured that the students had

- developed their ability to investigate and solve new problems.
- Majority of the students felt that they have developed the knowledge and skills required for their chosen career and had imbibed sufficient interest to want them to continue to keep up to date with new developments in their field of study
- Majority of the students felt that the program has developed their ability to investigate and solve new problems

- Majority of the students felt that the program has improved their ability to work effectively in groups
- Majority of the students felt that the program has improved their skills in communication.
- Majority of the students felt that the program has helped them to develop good basic skills in using technology to investigate issues and communicate results

- The students appreciated that they have developed the knowledge and skills required for their chosen career

- Students were satisfied with the quality of my learning experiences at this institution
- Students were satisfied with the efficiency of communication with the leaders
- Students were satisfied with college infrastructure

- Students admitted that it was easy to find information about the institution and its programs before they were enrolled at this institution for the first time
- Students admitted that when they first started at this institution the orientation program for new students was helpful for them
- Students stated that there is sufficient opportunity at this institution to obtain advice on their studies and their future career
- Students mentioned that the procedures for enrolling in courses are simple and efficient

- Students thought that their courses and assignments encourage them to investigate new ideas and express their own opinions
- Students thought that as a result of their studies, their abilities to investigate and solve new and unusual problems is increasing
- Students thought that their abilities to effectively communicate the results of investigations they undertake is improving as a result of their studies

enough opportunity to discuss and participate in problem based learning exercises which helped them to develop their ability to investigate and solve new problems. The overall teaching and learning improved their knowledge and skills, was at par with international standards and was appreciated by the students . This interested them enough to keep abreast with new developments in their field and will benefit them in their careers.

- Additional focus was emphasized on the development of communication skills among the students that had helped improve their interaction with their fellow students, their faculty members and patients. Furthermore, their communication system with the leaders was improved and this helped them to interact better and advance in their program with ease.

- The collage focus on improving the learning environment that ensures graduation of well knowledge, skilled, and competitive dentists

- The college does its best and keen to continue offering all services that keep and improve students satisfaction

- The college worked hard on these issues, so they have been improved. The administrative staff will keep working further in this regard.

- The college is keen to graduate highly competitive dentists, and it works in collaboration with the relevant authorities to improve all aspects of the learning environment

• Students stated that the program of studies is stimulating their interest in further learning • Students stressed that the knowledge and skills they are learning will be valuable for their future career • Students stated that they are learning to work effectively in group activities • Students are satisfied with the cleaning services	 • The college keep surveying the cleaning services
Areas for Improvement: • Ensure adequate academic and career counseling be available for students throughout the program • Ensure that the instructors are enthusiastic about the program • Establish good communication between students and the administrative staff.	• The collage with collaboration with the responsible authority in the university routinely held workshops that acknowledge the academic staff their responsibilities and enhance their enthusiasm and insure they will be role models for their students.
• Establish very high quality classroom facilities (for lectures, laboratories, tutorials, clinics etc).	• Although the classrooms were enlarged to accommodate all students comfortably, this is still unresolved issue from the male students point of view. The college will continue working on this issue. In addition, with shifting to the new building in the main university campus this will be solved radically.
• Make available adequate facilities for extra-curricular activities (including sporting and recreational activities). • Make sure that adequate facilities were available for religious observances • Ensure availability of an effective web-based electronic data management system or electronic resources	• The university supplied many sport equipment where two halls were equipped. However, extra-curricular activities and religious observances should be emphasized more in the coming years and adequate facilities should be provided to all the students. Requests has been made to the university to address these issues.
• Ensure that the field experience programs (internship, practicum, cooperative training) were effective in developing my skills	• The new organizational system ensure that the field experience will be helpful in developing graduates skills
• Ensure that the library is open at convenient times • Availability and accessibility of digital libraries	• All students and faculty staff have access to the Saudi digital library. More staff will be recruited to cover the administrative library work
• Establish good quality cafeteria services.	• Although a small cafeteria is available now, the services it provides are not adequate. Requests have been sent to university to improve the standards of the cafeteria.
• Ensure availability, appropriateness and adequacy of	• Periodic monitoring of facilities and

facilities and equipment, in addition to the availability, appropriateness and adequacy of provided services.	equipment should be done to maintain its adequacy.
• Establish an effective and interactive College website.	• The website has all the details pertaining to the college and has been improved and is up to date till the last academic year. Furthermore, all information related to the students, faculty and program are also displayed and updated regularly.
• Make sure that the assessment methods are fair	College established well known and fair examination and assessment methods which reviewed periodically at the levels of division, department and vice deanship and the college board.
Suggestions for improvement: • Make available adequate facilities for extra-curricular activities (including sporting and recreational activities). • Ensure availability of adequate facilities to the instructors to keep their enthusiasm high towards the program. Regular workshops and CMEs should be conducted to keep their knowledge updated. • Establish good quality cafeteria services which can cater to the needs of students, staff, and patients. • Improving the appropriateness and adequacy of facilities, equipment and infrastructure. • Continuing the practice of using rubrics for student evaluation and timely display of marks to keep the process transparent and avoid doubts related to fairness of assessment methods.	• Administration has been continuously working on these issues and are in contact with the relevant authorities in the university to improve the standards of these services. • The plan to shift to the new campus is in the final stage where there all required services and available with high quality.

* Attach report on the students evaluation of program quality

3. Other Evaluations

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

Evaluation method : Review Panel NCAAA Evaluation (External Evaluation)	Date: November 8-11, 2020	Number of Participants : Review Panel (3 reviewers)
Summary of Evaluator Review		**Program Response**
Strengths: • Commendation 1: The BDS program at CDJU is commended for actively providing a scope of community engagement activities. • Commendation 2: JU is commended for establishing an annual outstanding faculty award.		• The program appreciated the commendations reported by the respected review panel.
Points for Improvements: ▪ Recommendation 6: The Vice Deanship of Quality should monitor the reporting cycles of units and committees at CDJU. ▪ Recommendation 14: BDS program at CDJU should modernize its curriculum and monitor its teaching, learning, and assessment strategies. ▪ Recommendation 18: The BDS program at CDJU should plan additional professional development activities that expose and prepare students for developments in the labor market. ▪ Recommendation 19: The BDS program at CDJU should make plans to upgrade the adequacy and efficiency of services provided to students. ▪ Recommendation 20: The BDS program at CDJU should activate the community service unit and formulate annual plan to meet the targeted KPIs. ▪ Recommendation 22: The BDS program at CDJU should update its training program in teaching and use of emerging technology for new and current faculty. ▪ Recommendation 24: The BDS program at CDJU should develop research strategic plan, allocate research budget and facilities for research purposes.		Out of the 23 recommendation the following were followed and a plan was implemented to fulfill these recommendations: ▪ Recommendation 1: CDJU and the BDS program should add "oral" to its vision statement and utilize a single mission statement that includes oral community services. ▪ Recommendation 2: CDJU should use survey results in its improvement plans. ▪ Recommendation 3: The BDS program at CDJU should use CDJU's mission and goals as the main guidance for all of its operations and activities. ▪ Recommendation 4: The program should develop its own strategic plan with meaningful objectives to achieve its goals. ▪ Recommendation 5: CDJU should activate the human resources unit and establish guidelines to forecast a plan on its needs of qualified faculty. ▪ Recommendation 7: In collaboration with JU, the BDS program should create its curriculum changes/update policy with specified minor and major changes. ▪ Recommendation 9: CDJU should revise and update its policy and procedures manual. ▪ Recommendation 10: BDS program at CDJU should include its stakeholders in developing and revising its plans, policies, and procedures. ▪ Recommendation 11: The BDS program at CDJU should revise its KPIs and substantiate its targets'

	settings to be compared with reputable benchmark.
	- Recommendation 12: The BDS program at CDJU should create a mechanism for scheduled and effective program review. - Recommendation 13: The BDS program at CDJU should update its field experience objectives, assessments, and communications with external training sites. - Recommendation 15: The BDS program at CDJU should adopt a contemporary tool to confirm students' work authenticity and establish a solid policy and procedure for plagiarism. - Recommendation 17: The BDS program at CDJU should develop and disseminate its own policy for student grievances to suite the nature of the dental program. - Recommendation 21: CDJU should hire more Saudi demonstrators to build future faculty capacity and ensure proportional distribution of faculty per gender and per specialty according to the curriculum's needs. - Recommendation 23: CDJU should implement effective management plans for teaching and learning resources and improve library facilities through action plan with target KPI. - Recommendation 25: CDJU should establish its risk management unit to oversee existing and anticipated risks.
Priorities for improvements: - Recommendation 6: The Vice Deanship of Quality should monitor the reporting cycles of units and committees at CDJU. - Recommendation 14: BDS program at CDJU should modernize its curriculum and monitor its teaching, learning, and assessment strategies. - Recommendation 18: The BDS program at CDJU should plan additional professional development activities that expose and prepare students for developments in the labor market. - Recommendation 19: The BDS program at CDJU should make plans to upgrade the adequacy and efficiency of services provided to students. - Recommendation 20: The BDS program at CDJU should activate the community service unit and formulate annual plan to meet the targeted KPIs. - Recommendation 22: The BDS program at CDJU	

should update its training program in teaching and use of emerging technology for new and current faculty. ▪ Recommendation 24: The BDS program at CDJU should develop research strategic plan, allocate research budget and facilities for research purposes.	

Evaluation method : **Faculty satisfaction survey**	**Date:** May 16, 2022	**Number of Participants :** **(36/101 [35.6%])**
Summary of Evaluator Review		**Program Response**

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Strengths:
- Faculty reported they were involved in academic planning processes
- Faculty reported they participated in program development and course development and in decision making that interest them

- Faculty were fully aware of the vision, mission and goals of the University
- Faculty were very familiar with the vision, mission and goals of the college.

- Faculty reported that the college administration facilitates the work and development of the department and academic programs
- Faculty reported that the college provides the needs of the college and faculty members and defends about them
- Faculty reported that the college communicates effectively with his colleagues and students
- Faculty reported that they are satisfied with administrative staff
- Faculty admitted the adequacy of Policy Handbook, including administrative flow chart and job responsibilities

- The vision of the college determines the ideal position it aspires to achieve
- The college's mission describes a basic objective that is unique and helps to achieve vision
- The vision and mission of the college is effectively used in academic planning processes.

- Overall the faculty members were satisfied with their jobs.

- Faculty and staff are satisfied with the recruitment policies and procedures
- Faculty and staff are satisfied with the dissemination of information within the college
- Faculty and staff reported they participate in the college and the University activities

- Faculty and staff reported that the college encourages innovation in educational curricula
- Faculty and staff reported that teaching and learning activities are encouraged and stimulated
- An adequate orientation and training for the effective use of resources and means of learning is conducted

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- As part of the faculty duties, administrative makes sure that the faculty participated in all planning at different levels

- Faculty members were very much aware and familiar with the vision, mission and goals of the College and University because of the orientation programs with constant reminders.

- The administration does its job in providing the necessities of the college based on the feedback from the faculty and students. Departments and the college administration work together in the planning process and ensure the smooth execution.

- Right from the start the faculty were involved and were part of the process of framing of the mission and vision to the academic planning. So they could incorporate the three directions of the mission and vision into the planning process and aspires to provide outstanding education , research and community health care.

- Faculty members were content with their jobs as a result of the facilities provided and the teaching and learning environment.

- Administration applies high standards in recruiting the academic staff, and is keen that they are actively involved in all college and university activities

- Administration periodically held workshops that help academic staff

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• Faculty and staff reported that the classrooms and laboratories are equipped with the necessary means and techniques for the education processes	improve their education process
• Faculty and staff reported that students' attendances are regular and good.	• The classrooms in the male section were widened and well equipped.
• Faculty and staff reported that the students' grades achieve in the exams actually reflect their study level	• Administrative stresses on reporting the attendance daily and takes it into account in professionalism marks
• The faculty admitted the availability and accessibility of digital libraries	• The administrative adopted objective assessment systems that based mostly on rubrics
• The faculty mentioned that the annual performance evaluation of faculty members is transparent • The faculty mentioned that they are satisfied with the faculty evaluation system	• Jazan university has free access into the Saudi Digital Library
• The faculty admitted that there is sufficient number of computers are available to serve faculty members	• The performance evaluation is multilevel where the students, and divisions and departments' heads are involved
• The faculty admitted that they can track their transactions and communicate with administration through portal of faculty members available on the website	• The university provide a PC for each faculty member
• Facilities and offices of faculty members are appropriate	• It is an inherited features of the university system
• The faculty reported that they are satisfied with college infrastructure • The faculty expressed their high overall satisfaction rate on the appropriateness and adequacy of facilities and equipment • The faculty reported that all health, and general, and professional safety requirements are available in the facilities, equipment, and the educational and research activities • The faculty mentioned that an effective web-based electronic data management system or electronic resources are available • The faculty expressed their high overall satisfaction with the college website and IT services • Satisfaction rate on the adequacy, effectiveness and quality of the maintenance of all learning resources	• There is a specialized building partitioned as offices, and for recreational, and cafeteria purposes • The college is well built, equipped and supplemented, and the maintenance is emphasized to be a continuous process
Points for Improvements:: • Provide more reference books in the library. • Make sure to provide research hours for all faculty staff	• Library resources have been a concern in our program and has been continuously included in our program action plans. Request has been made to the university to increase the library

• Implement workshops on the process of getting research sources and funding. • Ensure availability of search sources.	resources. • The program has been encouraging its faculty to excel in research. Providing search resources and research grants would help a great deal in bringing out quality research.
Suggestions for improvement • Provide more reference books in the library. • Implement workshops on the process of getting research sources and funding.	• All the suggestions for improvement of the faculty member requirements should be given priority and actions need to be taken by the program to ensure fast response from the college administration and the university.

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

Evaluation method : **Alumni survey**	**Date:** May 16, 2022	**Number of Participants : (11/ 55 [20%])**

Summary of Evaluator Review	Program Response

Strengths:

Summary of Evaluator Review	Program Response
• Alumni reported that they were briefed about the program mission which is consistent with institution mission • Alumni reported that they are aware of the program policies • Alumni reported that the Information about the program and its courses were provided for the students.	• Orientation sessions were conducted for each semester by the student coordinators and also by the course coordinators. Additionally, orientation for the new students were conducted explaining the details of the program.
• Alumni admitted that the program takes the graduates feedback regarding program future plans • Alumni admitted that the field training programs for students and/or internships are consistent with the student major	• The college takes the alumni opinions and their feedback on regular basis, and share with them the its future plans.
• Alumni stated that the program emphasized the importance of continuous long-life learning	• The college main mission is to graduate well equipped and knowledgeable dentists able to self-learning thereafter
• Alumni mentioned that the program provided all students with a manual containing all conduct codes that determines the student rights and liabilities • Alumni mentioned that complaining students are not subject to punishment or injustice or discrimination against them because of their grievance	• It is the core policy of the college to provide all the relevant information to the enrolled students ahead of the commencing the study, and to fairly and positively deal with all students and to accept their criticism
• Alumni stated that the evaluation of the students by the staff members is fairly done • Alumni reported that the staff members allowed the students to discuss their exam performance	• The college stressed that the staff deal friendly and fairly with all the students and to keep their right to discuss all the exams' questions and the obtained marks, and to accept their objection in case of the same
• The program helped the students in developing the knowledge and skills necessary for their profession.	• All the necessary skills provided to the students were thorough and throughout their study period. Timely checking on their necessity by the faculty members helped them in achieving better knowledge and skills.
• The program had prepared them ethically for the job market.	• During the regular preclinical and clinical sessions emphasis was placed by the faculty members on the ethical and professional approach to their colleagues and the patients. That prepared the students ethically for the job market.
• Staff members manifested enthusiasm and interest in what they teach.	• Throughout their learning in the college

	, the students were enthusiastically encouraged and supported the faculty. Innovative ways of teaching were used by the faculty to increase the interest of the students in their courses.
Points for Improvements: • The appropriate facilities must be made available for extra-curricular activities (religious-cultural, social and sporting) • Update the devices and auxiliaries of the computer lab in order to be appropriate for the study of the students.	• Request has been made to the university to update the devices and auxiliaries in the computer lab and to prepare suitable areas for extra-curricular activities (religious-cultural, social and sporting, restaurant,….etc)
• Establish appropriate restaurants.	• Cafeteria/ restaurants facilities has to be improved and it has been brought to the notice of the university.
• Activate academic advising for the students ahead of their registration.	• Academic advising by the academic affairs office. always begins one week in advance to the starting of the semesters. Full attention is provided for the irregular students and the students in need.
• Ensure fair and unbiased evaluation for all students by the staff members.	• Faculty members has always strived to be fair and unbiased in their evaluation of the students. In case of any concern raised by the students, academic affairs office makes a committee to address the issue and to ensure fair evaluations.
• Provide health services that meet students' needs.	• Health service are now available in the University hospital for all students.
• Make sure of availability of the facilities for special needs.	• Facilities provided to the special needs students should be of immediate concern and this should be taken care of with the help of the university.
Suggestions for improvement • Establish appropriate restaurants.	• The suggestions for improvement of the cafeteria/ restaurant should be given priority and action need to be taken by the program to ensure fast response from the university.
• Classrooms should be equipped with facilities like smart boards, mic, speakers etc. • Update the computer lab as per the needs of the students	• Request has been made to the university to update the devices and auxiliaries in the computer lab and to prepare suitable areas for extra-curricular activities (religious-cultural, social and sporting, restaurant,….etc)

Evaluation method : **Employer survey**	**Date:** May 16 2022	**Number of Participants : 4**

Summary of Evaluator Review	Program Response
Strengths:	
• Employer stated that the graduates had good English language skills (if demanded by employment)	• Discussion was undertaken with the University to incorporate courses focusing on the English language so that it can help the students in their communication and overall learning experience.
• Employer stated that the graduate has high technical education level in the area of work	• The program is continuously revised to ensure graduation of dentist with high technical education level in the area of work
• Employer stated that the graduate comprehends the role and the impact of the discipline in the national context	• The administration keen to grow the loyalty aspects of its graduates through incorporating topics related to the impact of dental services on the community wealth
• Employer stated that the graduate understands the ethical and professional liabilities in the major • Employer admitted that the institution has prepared the graduate ethically for the job market	• Throughout the regular academic sessions emphasis was placed by the faculty members on the ethical and professional approach of the students to their faculty, colleagues and the patients. This prepared the students ethically for the job market.
• Employer recognized that the graduate can identify and describe the problems and recommend appropriate solutions to them • Employer recognized that the graduate has the ability to relate theory with application in the domain of work • Employer recognized that the graduate enjoys the capacity of independent thinking • Graduate has the capacity to grasp the nature of the institution work	• This is the main focus of the college and the university to graduate highly competitive, knowledgeable, and competent man power
• Employer recognized that the graduate is able to prepare reports in the field of work • Employer recognized that the graduate is able to participate in group discussions and work in a team • Graduate has the skills of understanding and grasping	• The interaction and discussion modes of education are implemented in all study levels
• Employer recognized that the graduates were briefed about the university mission that goes well with the nature of its activities • Employer recognized that the graduate showed that students' services and university resources are	• The college continuously implants the culture of its mission and vision among its students particularly through the services they provide to the community

consistent with the university mission	
• Employer recognized that the institution provides information about the programs, offered courses and its services to the students before registration	
• Institution provides academic advising to the students before registration	
• Employer recognized that the graduate has leadership skills	• The education process contains different activities that discover, and/or grow the leadership talent among students
• Employer recognized that the graduate has the drive to work and develop continuous learning in the domain of work	• The program has instilled the drive in the students to update themselves regularly and use the acquired and updated knowledge to provide the latest treatment.
• Employer admitted that the graduate can undertake efficiently the tasks assigned to him/her • Employer admitted that the graduate accepts the duty for overtimes • Employer admitted that the graduate respects the due dates and job discipline • Employer admitted that the graduate is able to manage time efficiently	• The tasks and study requirements given to students during their study prepare them to tough work environment
• Employer admitted that the graduate have the ability to relate theory with application in the domain of work.	• All the necessary knowledge and psychomotor skills provided to the students were thorough. Timely checking by the faculty members on their understanding and justification helped them in relating theory with application in the domain of work.
• Employer admitted that the graduate can adapt to modern technology.	• Graduates were taught how to use the latest technology in the clinics and also details of recent developments were discussed with them from time to time.
• Employer admitted that the institution emphasized the importance of continuous long-life learning	• Through its different teaching approaches, the college keen to teach the students the self-life-long learning ability
Points for Improvements: • Emphasis must be paid so that the graduate can gather and analyze information and give alternatives solutions to solve the problems	• More tasks and group discussion approaches will be implemented
• More attention must be practiced so that the graduate is able to orally communicate and converse in the field of work	• The college will implement and activate oral tasks and verbal exams
• Continuous contact with the graduates to ensure that	• The college will establish alumni day and similar activities (continuous

	education courses that target graduates) that ensure they will be in contact with the college
the graduate has loyalty to the institution	
• Establishing and activating tasks and education approaches that entail critical thinking and ensure that the graduate provide creative ideas that enhance the work must be emphasized	• More tasks and group discussion and problem-based case approaches will be implemented
• Make sure that the institution provides academic advising to the students before registration.	• Specific units and committees for that purpose were established.
• The students must be involved in courses where adequate knowledge of safety and security fundamentals in the area of work is ensured	• The college will incorporate topics on the safety and security fundamentals in the area of work
• Substantial emphasis has to be paid for teaching the medical and professional ethics so that the graduates will be prepared ethically for the job market.	• In the new study plan introduced two years back a new course has been added on ethics in dental profession which has already started addressing the concerns and queries related to ethics in the field of dentistry.
Suggestions for improvement • The institution should implement ways to take the graduate's feedback regarding university future plans. • Ensure a fair assessment for all students by the academic staff. • Expose the students to different clinical situations and extensive discussions with the academic staff in a way that develops their capacity of critical thinking, improve their ability to suggest creative ideas and practice creative skills, improve their communication skills, and develop abilities to give alternatives solutions to solve the problems.	• All the suggestions for improvement provided by the employers should be acted upon. The actions need to be taken by the program to ensure fast response and in turn it will help the graduates to adapt better in the outside market conditions.
• Integrate topics about security fundamentals in the area of work so that graduate will have adequate safety and security knowledge	• The college will incorporate topics on the safety and security fundamentals in the area of work

Evaluation method : **Auxiliary staff survey**	Date: May 16 2022	Number of Participants : (37/57 [64.5%])

Summary of Evaluator Review	Program Response
Strengths: • The auxiliary staff reported that they were very familiar with the vision, mission and goals of the college • The auxiliary staff reported that the college's mission describes a basic objective that is unique and helps to achieve vision • The auxiliary staff reported that the vision of the college determines the ideal position it aspires to achieve • The auxiliary staff reported that the vision of the college determines the ideal position it aspires to achieve • The auxiliary staff mentioned that the facilities at the reception area are sufficient for the handling of visitors • The auxiliary staff mentioned that the software used for the clinic management (patients files and appointments) is efficient and user friendly • The auxiliary staff mentioned that the hardware and stationary used in the patients' reception offices are always available • The maintenance of IT is available and effective • The auxiliary staff mentioned that the students, faculty members and auxiliary staff are aware of the clinical standards of infection control • The auxiliary staff mentioned that they are satisfied with college infrastructure. • Satisfaction rate of the Faculty on the dissemination of information within the college • Overall the auxiliary staff were satisfied with their job.	• The auxiliary staff members were very much aware of the vision, mission and goals of the college because of the orientation programs with constant reminders. The Development Affairs Office discussed the mission, vision and goals of the college regularly. Moreover, it has also been displayed in the college premises and website which has helped all stakeholders to remember them. • The college work efficiently to make all the supplies and logistic (materials, equipment, maintenance…etc) always available • A separate unit of Infection Control started working enthusiastically in the last couple of years. Continuous workshops were conducted for all the stakeholders and a mandatory exam was conducted every year on the basics of infection control. Infection control unit sends constant reminders about the protocols to be followed in the clinics and the college premises and regular monitoring was conducted by them. In case of any deviation from the standard protocol, warnings were given to the stakeholders and in the case of non-compliance the offender was suspended. Due to the Covid-19 Pandemic this year strict protocol was followed as per the Ministry of Health guidelines. Entry to the premises was limited to only those stakeholders whose Tawakkalna App status was updated. • The college was been established with very strong infrastructure which is

	checked and improved continually
	• The staff members were content with their jobs as a result of the facilities provided and the positive work environment.
Points for Improvements: • Patient flow should not exceed the capacity of the clinics	• The number of patients received daily must be arranged in accordance with the capacity of the college
• Provide more consumable material.	• Consumable materials are part of continuous workflow of the clinics and should be checked and monitored regularly for any deficit.
• Provide more dental instruments.	• For a seamless functioning of the clinics adequate number of dental instruments are required as there are simultaneous clinical sessions scheduled for different courses. More number of instruments are required so that a smooth functioning is possible.
• Sterilization process causes occasional shortage in the dental instruments • The flow of instruments into the central sterilization unit exceeds its capacity • The flow of instruments into the central sterilization unit does not exceed its capacity	• Plan to build more sterilizations units and recruitment of more skilled sterilization technicians
• Recruit more auxiliary and academic staff to accommodate the auxiliary and academic work required.	• In the last couple of years there was a reduction in the number of auxiliary staff and this has impacted the workflow drastically in the college. More recruitment of staff should be done to ensure smooth functioning of the clinics.
• Make sure to make the personal protective equipment always available in the workplace.	• Personal protective equipment is a basic part of the infection control protocol and should always be worn by healthcare providers when in clinics. Clinical Affairs Office should always keep a check on the availability of these equipment and provide them in advance.
• The diagnostic aids facilities (radiographic imaging) are not capable of accommodating the work required	• Plan to establish more radiographic units to accommodate the work required

• There is shortage in all health, and general, and professional safety requirements that must be available in the facilities, equipment, and the educational and research activities	• The college arrange with the university to provide all health, and general, and professional safety requirements that must be available in the facilities, equipment, and the educational and research activities
• Low satisfaction rate on the adequacy, effectiveness and quality of the maintenance of all learning resources • Low satisfaction rate on the adequacy of facilities and equipment	• Work efficiently to improve the quality of the maintenance of all learning resources and facilities and equipment
• The students must be more aware of the proper usage of instruments and equipment in the clinics and labs • Time management of the dental chairs usage by the students and doctors is not optimal	• The college stress to held more training workshops for students and staff on the proper usage of instruments and equipment in the clinics and labs, and on proper time management of the dental chairs usage by the students and doctors
• Low satisfaction rate regarding the recruitment policies and procedures	The university keen to apply robust recruitment procedure of all auxiliary and academic staff
• Improve the capacity of the dental laboratory in order to be capable of accommodating the work required by the clinics.	• Dental laboratory is a place where all the work flows from the clinics and should be capable of accommodating the requirements. In the last couple of years many of the trained technicians have left the college and no replacements have been made for them . University should take this into priority and recruit more laboratory personnel so that work required to be done in the laboratory is finished on time without overburdening the remaining technicians.
Suggestions for improvement • Provide more consumable material. • Increase number of auxiliary staff. • Make adequate personal protective equipment available. • Provide more dental instruments. • Hire more dental laboratory personnel	• All the suggestions for improvement provided by the auxiliary staff should be acted upon. The actions need to be taken by the program to ensure fast response.

Evaluation method : **Patient Satisfaction survey**	Date: Throughout 2022	Number of Participants : **494**

Summary of Evaluator Review	Program Response
Strengths: • The location of college clinics was convenient and access was easy • Parking is available and close to the clinics • Reception services were good • The patients did not have a problem with language when communicating with receptionists • There are introductory and guiding plates that facilitate mobility within clinics and between departments • Non-therapeutic services are available at a good standard (cafeteria, Bathrooms, chapel) • The waiting time was acceptable (based on a previous appointment) • Dentists and students deal with the patients professionally • It is made clear to the patient the disease process and the treatment plan • The patient's chief complaint was addressed and treated appropriately • The dates of subsequent reviews were within an acceptable time frame • Communication with the College for the purpose of inquiry or change of appointments was available • The patient reported that they were satisfied with the service provided by the college in general.	• The location of the college between Jazan and Sabya cities makes it suitable for attendance of most patients • Administration has made available and marked ample areas for the patients to park their vehicles with minimal walking distance to the clinics so that the patients are comfortable. • Reception of the patients when they enter the clinic premises for their appointments was done by the administrative staff. All the necessary details required for treatment and the requests of the patients were met without much delay. All the reception staff were cooperative and empathetic in dealing with patients. Moreover they were fluent in communicating with the patients in their local language. • The clinical services rendered in the college were comprehensive and were patient oriented. All the queries related to the patients were answered and acted upon promptly.
Points for Improvements: • Make the non-therapeutic services available and at good standards (cafeteria, Bathrooms, chapel). • Initial visit of the patients should be focused upon.	• Cafeteria and standards of other non-therapeutic facilities has to be improved and it should be brought to the notice of the University. • Priority should be given for the initial

• Organize appointments for follow-up in a reasonable time.	diagnosis for all the patients and to be followed by a scheduled appointment system. Recall system for the patients' appointments is the lifeline for any clinic and should be scheduled and monitored for any lapse. Moreover appointments scheduling should be done within limited time frame.
Suggestions for improvement • Make the non-therapeutic services available and at good standards (cafeteria, Bathrooms, chapel). • Patient appointment scheduling must be improved.	• The suggestions for improvement of the services provided and appointment scheduling should be given priority and action need to be taken by the program.

4. Key Performance Indicators (KPIs)

List the results of the program key performance indicators (including the key performance indicators required by the National Center for Academic Accreditation and evaluation)

No	KPI	Target Benchmark	Actual Value	Internal Benchmark	Analysis	New Target Benchmark
1	Percentage of achieved indicators of the program operational plan objectives	75%	65%	65%	The achievement in this program KPI was 65% which was lower than the target benchmark of 75% and is equal to the internal benchmark	75%
2	Students' Evaluation of quality of learning experience in the program	4.5	Overall: 3.84 Male: 4.18 Female: 3.5	3.92%	The achievement in this program KPI was 3.84 which was lower than the target benchmark of 4.5 and the internal benchmark of 3.92%	4.5
3	Students' evaluation of the quality of the courses	Overall: 4.0	Overall:3.86 Male:3.99 Female:3.73	3.45	The achievement in this program KPI was 3.45 which was lower than the target benchmark 4 and better than the internal benchmark of 3.45	Overall: 4.0
4	Completion rate	Overall: 93%	Overall:70.35 % Male:69% Female: 71.7%	Overall: 82.28% Male:82.05 % Female: 82.5%	The achievement in this program KPI was 70.3% which was lower than both the target benchmark of 93% and the internal benchmark of 82.28%	Overall: 93%
5	First-year students retention rate	100%	Overall: 100% Female: 100% Male: 100%	100%	The achievement in this program KPI was 100% and is equal to both the target and the internal benchmark of 100%	Overall : 100%

#	KPI					
6	Students' performance in the professional and/or national examinations	Passing rate: 96.7% Average score: 79%	Passing rate:98.5% M:98%, F:99% Average score: 78.1% M:77.9%, F:78.4%	Passing rate: 94% Average score: 78.5%	The achievement passing rate in this program KPI was 94% which was lower than the target benchmark of 96.7% and higher than the internal benchmark of 75% The achievement average score in this program KPI was 78.5% which was lower than the target benchmark of 79% and the internal benchmark of 95 %	Passing rate: 98% Averag e score: 79%
7	Graduates' employability and enrolment in postgraduate programs	80%	**Overall:** a. 63.55% b. 10.05% **Male:** a. 76.9% Gov.+23.1 % Priv.=69.2% b. 12.4% **Female:** a. 57.9% Gov.6.2% Priv.=93.8% b. 7.7%	**Overall:** A) Employed: 82.61% B) Enrolled in higher studies: 4.35% **Male:** A) Employed: 73.59% (14Govt. +25Priv.) B) Enrolled in higher studies: 5.67% (3) **A) Female:** A) Employed: 94.87% (23Gov. +14Priv.) B) Enrolled in higher studies: 2.57% (1).	The achievement in this program KPI for overall employability is lower than the target (80%) and internal benchmark (82.6%), Whereas for enrolment in postgraduate programs, actual benchmark is higher than internal benchmark of 4.35	80%

8	Average number of students in the class	Theory: 38 Practical: 18	**Overall:** Theory:34 Practical:17 **Male:** Theory:32 Practical:16 **Female:** Theory:37 Practical:19	Theory:41, practical:20	The achievement in this program KPI was Theory:34 Practical: 17 which was better than the target benchmark Theory: 38 Practical: 18 and the internal benchmark of Theory: 41 and Practical: 20	Theory: 32 Practical: 16
9	Employers' evaluation of the program graduates proficiency	4.2	3.93	3.83	The achievement in this program KPI was 3.93 which was lower than the target benchmark 4.2 and higher than the internal benchmark of 3.83	4.2
10	Students' satisfaction with the offered services	4	Overall:2.96 Male: 3.51 Female: 2.4	Overall:3.42 Male: 3.45 Female: 3.38	The achievement in this program KPI was 2.96 which was lower than both the target benchmark 4 and the internal benchmark of 3.4	Overall :4 Male: 4 Female:: 4
11	Ratio of students to teaching staff.	3.8:1	3.9:1(same teaching staff for both sections)	3.9:1	The achievement in this program KPI was 3.9:1 which was poorer than the target benchmark 3.8:1 and is equal to the internal benchmark of 3.9:1	3.8:1
12	Percentage of teaching staff distribution	Gender: Female: 28%, Male: 72% Sections : Same faculties for both	Gender: Female:20.84 %, Male:76.19% Sections: Same faculties for both sections. Academic ranking:	Female:23.81%, Male:76.19 % Academic Ranking Professor: 7.62 %, Associate	According to the gender distribution target benchmark was not achieved. Lower percentage of female teaching staff did not affect the learning process because both the female	Gender: Female: 28%, Male: 72% Sections: Same faculties for

		sections. Academic ranking: Professors: 11% Associate Professors: 11% Assistant professors:61% Lecturers: 10% Departmental distribution: MDS: 30% PDS: 25% RDS: 22% SDS: 22%	Professor: 7.29 %, Associate professor: 14.58%, Assistant professor: 67.70% Lecturer: 10.41% Departmental distribution: MDS:28.12% PDS:28.12% RDS:20.83% SDS:22.91%	professor: 12.38% Assistant professor: 63.81%, Lecturer: 10.48% Departmental distribution: MDS:27.62% PDS:30.48% RDS:21.9 % SDS:20.95 %	and male teaching staff teach both sections. Furthermore, the same ratio of students to teaching staff was maintained between both the male and female student sections. The departmental distribution results revealed good cross-department distribution according to the number of courses taught by each department except of MDS and RDS department which are lower compared to the internal (JCD) and target benchmarks. It seems difficult to compare our results with the external benchmark because they have more departments and broader distributions, however, it is comforting that our results are considered good compared with their results. The results showed a good academic ranking distribution, in which the highest percentages were assistant professors, followed by associate professors and professors. This distribution emphasizes that	both sections. Academic ranking: Professors: 11% Associate Professors: 15% Assistant professors:61% Lecturers: 11% Departmental distribution: MDS: 30% PDS: 25% RDS: 22% SDS: 22%

#	KPI	Target Benchmark	Actual	Internal Benchmark	Analysis	New Target
					the program has highly qualified teaching staff. The target benchmark was almost achieved. Accordingly, the committee decided to set the new target for some sections .	
13	Proportion of teaching staff leaving the program	0.02	Overall: 0.114 (proportion) Male: 0.83 Female:0.31	0.018	The achievement in this program KPI was .114 which was much higher than both the target benchmark of .02 and the internal benchmark of .018	0.02
14	Percentage of publications of faculty members	70%	87.36%	62.26%	The achievement in this program KPI was 87.36% which was higher than the target benchmark 70% and the internal benchmark of 62.26%	90%
15	Rate of published research per faculty member	4.2	2.89	2.9	The achievement in this program KPI was 2.89 which was almost equal to the internal benchmark of 2.9 and less than the target benchmark of 4.2.	4.2
16	Citations rate in refereed journals per faculty member	33	37.48	32.71	The achievement in this program KPI was 37.48 which was better than both the target benchmark of 33 and the internal benchmark of 32.71	34
17	The satisfaction of beneficiaries with the quality of community services	4.5	4.63	4.51	The achievement in this program KPI was 4.63 which was higher	4.65

					than both the target benchmark 4.5 and the internal benchmark of 4.51	
18	Faculty overall satisfaction with their job	4.7	4.53	4.63	The achievement in this program KPI was 4.53 which was lower than the target benchmark 4.7 and the internal benchmark of 4.63	4.7
19	Percentage of PLO achievement annually.	84%	Overall:84.13%	84.35%	The achievement in this program KPI was 84.13% which was higher than the target benchmark of 84% and lower than the internal benchmark of 84.35%	Overall: 84.5%
20	Percentage of students actively engaged in community service activities.	87%	84%	71.7%	The achievement in this program KPI was 84% which was lower than the target benchmark 87% and higher than the internal benchmark of 71.7%	87%
21	Satisfaction of beneficiaries with the learning resources	3.9	Overall:3.74 Faculty: 4.07 (M: 4 & F: 4.14) Students: 3.41 (M: 3.82, F: 3)	Overall:3.6 Faculty: 3.85 Students: 3.47 (M:3.43&F :3.51)	The achievement in this program KPI was 3.74 which was lower than the target benchmark 3.9 and the higher than the internal benchmark of 3.6	Overall: 3.9 Faculty: 3.9 Student s: 3.9 (M:3.9 & F:3.9)

Comments on the Program KPIs and Benchmarks results :

- The program has been successful in achieving higher standards and has been continuously striving to improve its targets. Many of the Program KPIs have achieved the target benchmark. Retention rate of the students was excellent similar to the previous year's. This can be attributed to the continuous counselling and support provided by the faculty throughout. Students' performance in the professional and/or national examinations has improved and the passing rate has increased for both male and female patients. This shows that the students have good knowledge of the subjects. The average number of students per class and the ratio of students to teaching staff were improved and attained the target. This helps in improving the quality of the education being provided to the students as staff members can pay attention to each student in a better way. The percentage of teaching staff distribution is almost as per the target benchmark. There is an increase in number of Associate professors which is good for the program. Also there is an increase in percentage of publications and citation rate in referred journals per faculty member, which shows that faculty is actively participating in research activities and good support provided by the administration and the leaders. The percentage of PLO achievement annually was better and so was the satisfaction of beneficiaries with the quality of community services.

- In certain KPIs, though the target benchmark wasn't achieved, they were close enough. However, in a few others the accomplishment was below the expected target. Percentage of achieved indicators of the program operational plan objectives, Students' Evaluation of quality of learning experience in the program, Graduates' employability and enrolment in postgraduate programs, Students' satisfaction with the offered services, Employers' evaluation of the program graduates proficiency, Rate of published research per faculty member did not achieve the target benchmark. Very high proportion of teaching staff left the program due to various reasons. Few KPIs were close to their target benchmark which includes Faculty overall satisfaction with their job, Students' evaluation of the quality of the courses, satisfaction of beneficiaries with the learning resources, and percentage of students actively engaged in community service activities.

5. Analysis of Program Evaluation
(including strengths, Areas for Improvement:, and priorities for improvement)

Strengths :

- The program has been fully accredited by the National Commission of Academic Accreditation and Assessment (NCAAA) which is the biggest achievement of the program since its establishment.
- The NCAAA review panel commended the program for actively providing a scope of community engagement activities and Jazan University for establishing an annual outstanding faculty award.
- Evaluation of all the courses was done systematically in a planned manner. All the courses have developmental recommendations for the improvement of the courses.
- Number of student intake in the program was reduced which has helped in improving the faculty to student ratio.
- The number of academic advisors were increased to give more time and personal attention to the students' needs.
- Students demonstrated teamwork, leadership and inter-professional collaboration.
- Passing percentage is excellent in both the semesters.
- The assessment tools used were proven appropriate based on the result as it could differentiate students according to their performance, especially in the first semester.
- Rubrics should be implemented effectively for all the assessments (regular or virtual) of all the courses.
- Blue print should be revised.
- Increase in the number of advisors facilitated in providing additional one to one sessions with the students, and individual and more efficient monitoring was feasible.
- The publications prestigious journals were rewarded and this helped encourage the staff members to publish more of their researches in high standard journals.
- The regular academic counseling and support provided by the academic advisors helped the students significantly, especially those who underperformed.
- Most of the students felt they were very familiar with the vision, mission and goals of the college
- The students appreciated the availability of their instructors for consultation and advice whenever they needed to speak with them.
- Majority of the students felt that the program has improved their ability to work effectively in groups
- Majority of the students felt that the program has helped them to develop good basic skills in using technology to investigate issues and communicate results
- Students admitted that when they first started at this institution the orientation program for new students was helpful for them
- Students thought that their courses and assignments encourage them to investigate new ideas and express their own opinions
- Faculty reported that the college administration facilitates the work and development of the department and academic programs
- Faculty reported that the college communicates effectively with his colleagues and students
- Overall the faculty members were satisfied with their jobs.
- The faculty admitted that they can track their transactions and communicate with administration through portal of faculty members available on the website
- Alumni reported that the Information about the program and its courses were provided for the students.
- Alumni stated that the program emphasized the importance of continuous long-life learning
- Alumni reported that the staff members allowed the students to discuss their exam performance
- Alumni stated that the program helped the students in developing the knowledge and skills

necessary for their profession.
- Employer admitted that the institution has prepared the graduate ethically for the job market
- Employer recognized that the graduate has the drive to work and develop continuous learning in the domain of work
- The auxiliary staff mentioned that the facilities at the reception area are sufficient for the handling of visitors
- The auxiliary staff mentioned that the hardware and stationary used in the patients' reception offices are always available
- The location of college clinics was convenient and access was easy
- The patient reported that they were satisfied with the service provided by the college in general.
- Retention rate of the students was excellent similar to the previous year's.
- Students' performance in the professional and/or national examinations has improved and the passing rate has increased for both male and female patients.
- There is an increase in number of Associate professors which is good for the program.
- There is an increase in percentage of publications and citation rate in referred journals per faculty member.

Areas for Improvement:
- The Vice Deanship of Quality should monitor the reporting cycles of units and committees at CDJU.
- The program should modernize its curriculum and monitor its teaching, learning, and assessment strategies.
- The program should plan additional professional development activities that expose and prepare students for developments in the labor market.
- Make plans to upgrade the adequacy and efficiency of services provided to students.
- Activate the community service unit and formulate annual plan to meet the targeted KPIs.
- The program should update its training program in teaching and use of emerging technology for new and current faculty.
- The program should develop research strategic plan, allocate research budget and facilities for research purposes.
- Added emphasis should be given to improve the completion rate.
- More emphasis should be given on the validity of assessment methods used in all courses, specially the courses used in the assessment of PLOs.
- Review the list of courses included in the assessment and include more courses in the coming two cycles.
- More training should be given for the academic advisors.
- Increase in time allotted to faculty members for doing research and publishing in referred journals.
- Increase the number of awareness and educational programs for patients treated in college.
- Most of the students felt they were very familiar with the vision, mission and goals of the college
- The students appreciated the availability of instructors for consultation and advice whenever they needed to speak with them.
- The students appreciated that the study materials in courses were up to date and useful
- Make available adequate facilities for extra-curricular activities (including sporting and recreational activities).
- Establish good quality cafeteria services which can cater to the needs of students, staff, and patients.
- Establish very high quality classroom facilities (for lectures, laboratories, tutorials, clinics etc).
- Ensure availability of an effective web-based electronic data management system or electronic resources

- Ensure availability, appropriateness and adequacy of facilities and equipment, in addition to the availability, appropriateness and adequacy of provided services.
- Provide more reference books in the library.
- Make sure to provide research hours for all faculty staff
- Implement workshops on the process of getting research sources and funding.
- Establish appropriate restaurants.
- Provide health services that meet students' needs.
- Classrooms should be equipped with facilities like smart boards, mic, speakers etc.
- Continuous contact with the graduates to ensure that the graduate has loyalty to the institution
- Establishing and activating tasks and education approaches that entail critical thinking and ensure that the graduate provide creative ideas that enhance the work must be emphasized
- Recruit more auxiliary and academic staff to accommodate the auxiliary and academic work required.
- The diagnostic aids facilities (radiographic imaging) are not capable of accommodating the work required
- Improve the capacity of the dental laboratory in order to be capable of accommodating the work required by the clinics.
- Fully trained lab technicians and latest laboratory technologies were not available.
- Make the non-therapeutic services available and at good standards (cafeteria, Bathrooms, chapel).
- Organize appointments for follow-up in a reasonable time.
- Faculty to student ratio should be increased as there is shortage of clinical staff in some divisions (like oral surgery and endodontics).
- Provide monetary funding for materials and equipment.
- Improve the process of extraction of the course evaluation survey from both edugate and e-register.

Priorities for Improvement:
- The Vice Deanship of Quality should monitor the reporting cycles of units and committees at CDJU.
- The program should modernize its curriculum and monitor its teaching, learning, and assessment strategies.
- The program should plan additional professional development activities that expose and prepare students for developments in the labor market.
- Activate the community service unit and formulate annual plan to meet the targeted KPIs.
- The program should update its training program in teaching and use of emerging technology for new and current faculty.
- The program should develop research strategic plan, allocate research budget and facilities for research purposes.
- Make plans to upgrade the adequacy and efficiency of services provided to students.
- Recruit more auxiliary staff, laboratory technicians and academic staff to accommodate the auxiliary and academic work required.
- Improve the quality and capacity of the dental laboratory in order to be capable of accommodating the work required by the clinics.
- Program should provide adequate facilities for extra-curricular activities (including sporting and recreational activities).
- Increase the number of awareness and educational programs for patients treated in college.
- Ensure availability of an effective web-based electronic data management system or electronic resources.
- Faculty should be provided adequate research hours to perform high quality research.

- Provide health services that meet students' needs.
- Classrooms should be equipped with facilities like smart boards, mic, speakers etc.
- Faculty to student ratio should be increased as there is shortage of clinical staff in some divisions (like oral surgery and endodontics).
- Provide monetary funding for materials and equipment.
- Improve the process of extraction of the course evaluation survey from both edugate and e-register.

G. Difficulties and Challenges Faced By Program Management

Difficulties and Challenges	Implications on the Program	Actions Taken
• Inadequate monetary funding for materials and equipment.	• Certain materials and instruments needed for the clinical and pre-clinical sessions were not in sufficient quantity	• Due to the ongoing financial crisis, the University was informed well in advance regarding the budget for instruments and materials. • Subsequent requests were made to make them aware of the need for instruments and materials.
• Insufficient books in the library	• Although many books were made available this academic year, they were not adequate in numbers to suffice the needs of all the students	• Students were asked to make use of the available books in the library and utilize the services of the Saudi Digital library. • Moreover, recommendations is to be made to adopt digital resources
• Inadequate IT services	• Lack of Internet in the female faculty section & teaching halls and connectivity issues in male faculty building led to frequent delays in communication with the students as well as difficulties in searching databases for faculty/ student researches. • Frequent internet/server connectivity issues led to disruptions in accessibility of R4 patient database. • Lack of updates and upgrades for C3 software caused problems in thorough implementation of clinical	• Faculty made use of their own personal internet connection for communication and research • Request has been made to the IT department to provide continuous and uninterrupted internet services. • Request has been made to the IT department to upgrade the C3 software

	assessment.	
• Inadequate infrastructure in the pre- clinical labs	• Shortage of working units, phantom heads and cameras in the pre-clinical laboratories has led to difficulty in demonstrations and teaching students.	• The students were divided into smaller groups in order to provide them with individualized attention. • Request regarding the infrastructural requirements has been made to the University.
• The course evaluation survey is not included and analyzed due to the technical error during data extraction from both edugate and e-register.	• Student evaluation of the courses were not recorded during the second semester of the year	• Methods should be adopted to obtain course evaluation survey at the earliest from the students as soon as the courses are finished . • IT department should be made aware of the situation in advance and necessary actions should be taken to prevent technical errors from happening.
• Some students had difficulty in understanding English language.	• They find it difficult to understand the lectures and text book in the initial years of the program.	• Special training / support of English can be provided to some students if required on personal basis from the University based on student and faculty input
• Delay and frequent cancellation of appointments.	• This could also have resulted in inconvenience for the patients	• Review the patient recall/ appointment procedure to minimize delay in appointment. • Recall system to be introduced for all the patients treated in the dental clinics. • Patient grievances were not addressed.
• Faculty to student ratio should be increased as there is shortage of clinical staff in some divisions (like oral surgery and endodontics).	• Difficult for attending staff to pay full attention on individual basis.	• Staff should be regulated in all the departments and additional qualified staff should be provided in case if the faculty number falls in a particular department , so that there is no effect on the learning outcomes. • A report should be sent to the

		university well in advance from every department so that University gets ample amount of time in recruiting new staff.
• Fully trained lab technicians and latest laboratory technologies were not available.	• Students clinical work has suffered due to improper work provided from the laboratory	• Laboratory outside the college were contacted to provide the necessary work for the patients at an additional cost by the students. • Better production lab with increase in number of fully trained technicians should be provided by the University so that the patients clinical work does not suffer.
• The unavailability of stationery and printer	• Difficulty faced by faculty in communicating with the students and doing administrative work	• Faculty made use of their own personal printers for providing course related documents and study materials to the students. • Also research related documents were printed on personal documents. • Administration in the University should be made aware of the situation and necessary actions should be taken to provide stationeries and printers for facilitating a smooth workflow.

*Internal and external difficulties and challenges

H. Program Improvement Plan

No.	Priorities for Improvement	Actions	Action Responsibility	Date		Achievement Indicators	Target Bench mark
				Start	End		
1.	The Vice Deanship of Quality should monitor the reporting cycles of units and committees at CDJU.	• List all the units and committees in the program with their activities. • Prepare a plan with deadline, for receiving and reviewing reports from all units and committees. • Expand the documentation and information unit within the vice deanship of development, which will be responsible for following up of the scheduled plan and receiving the reports. Then, the unit will send them to the relevant subcommittee for review. • Scheduled reminders are to be sent to various responsible, reminding them about the deadlines for complying with their respective initiatives and action plans. • Review all reports by the Self-study subunit, which will be more	Vice Deanship of Research and Development	30/10/2022	23/06/2023	Stakeholders evaluation on the monitoring the reporting cycles of units and committees at CDJU	4/5

		observant while analyzing the received reports. Each subcommittee will review the reports of their relevant standard. • Archive reviewed reports as evidence for program evaluation and improvement plans.				
2.	The program should modernize its curriculum and monitor its teaching, learning, and assessment strategies.	• Review the current curriculum with other reputable programs in the Kingdom. • Modernize the curriculum based on the review results through the curricula and study plans committee. • Establishment of teaching and learning subunit. • Modernize the course content through teaching and learning subunit and the curricula and study plans committee. • Review the process of following the quality of teaching and assessment by teaching and learning subunit. • Formulating policies to standardize	Deputy Head of Quality Assurance and Academic Accreditation Unit	15/09/2022	30/05/2023	Students' performance in the professional and/or national examinations. Graduates' employability and enrolment in postgraduate programs. Overall employer satisfaction in Employer survey	98% 80% 4.2/5

		rubrics used for assessing students in written examinations, practical exams and continuous assessments. • Formulating policies to calibrate faculty members who assess practical and students' practical work. • Reviewing and improving the policies and procedures of the exam review committee. • Approval of changes and improvements by College Board.					
3.	The program should plan additional professional development activities that expose and prepare students for developments in the labor market.	• Conducting a TNA to get feedback from students, interns and alumni. • Develop an annual plan for conducting additional professional development activities. • Disseminating the schedule for such activities to all stakeholders. • Collecting feedback after each professional development activity. • Using feedback to improve such activities in the next year's plans.	Head of Continuous Professional Development Unit	30/10/2022	30/05/2023	Number of professional development activities conducted per year to prepare students for developments in the labor market.	8

4.	The BDS program at CDJU should activate the community service unit and formulate annual plan to meet the targeted KPIs.	• Make all plans of community programs to be conducted through and report to the community service unit based on programs approved by the University Counsel and initiatives from previous programs feedbacks. • Develop policies and procedures for the provided oral community services. • Sharing the policies and procedures with all stakeholders for their feedback for improvement. • Approval of policies and procedures by the College Board. • Include the policies and procedures for the provided community services in the program policies and procedures manual. • Prepare plan for the next academic year based on previous feedbacks from beneficiaries. • Link all community	Head of Community Services	15/09/2022	30/05/2023	Percentage of completion of the community service manual and annual plan activities	100%

		programs data to the program KPIs.				
5.	The program should update its training program in teaching and use of emerging technology for new and current faculty.	• Conducting TNA by the faculty development committee specific for emerging technology to receive feedback from faculty. Developing plans for conducting additional training programs in teaching and use of emerging technology, for both new & current faculty. • Disseminating the schedule for such activities. • Taking feedback after each professional development activity • Using the feedback for improving such activities in the next plan.	Head of Faculty Development Committee	15/09/2022	30/05/2023	Number of workshops in teaching using emerging technology.	4.53/5
6.	The program should develop research strategic plan, allocate research budget and facilities for research purposes.	• Prepare strategic research plan for the next two years. • Set criteria for funding students, interns and faculty research. • Prepare research manual including complete guidelines and policies for research. • Submit proposal to the Vice	Head of Scientific Research Unit	15/09/2022	30/05/2023	Number of funded research projects. Percentage of publications of faculty members.	10 100%

		President for Graduate Studies and Research to establish a research facility at CDJU for basic experimental and clinical research to address the strategic research plan goals. • Submit a proposal for funding annual planned research activities. • Collaborate with other faculties within the university and with other national research centers. • Give priority to hire faculty members dedicated to research work within the curriculum teaching capacity.					
7.	The BDS program at CDJU should make plans to upgrade the adequacy and efficiency of services provided to students.	• Develop an effective system for monitoring current students' services (cafeteria, stationary, printers, center, gym, etc). • Follow up with contractors in both sections to provide better services. • Establish maintenance	Administrative Manager	30/09/2022	30/05/2023	Student experience	3.5/5

		program to maintain services. • Improve wireless coverage in the college campus. • Collect regular feedback on yearly basis from students, faculty and staff.					
8.	Recruit more auxiliary staff, and laboratory technicians to accommodate the auxiliary and academic work required	Recruitment of more Auxiliary staff and laboratory technicians.	College Dean	30/10/2022	30/05/2023	The number of auxiliary staff and laboratory technicians.	X-ray technicians:3 Laboratory technicians: 5
9.	Improve the capacity of the dental laboratory in order to be capable of accommodating the work required by the clinics.	• Arrange workshops and CDEs to improve the skills of technicians on regular basis. • Regular maintenance of lab machines and supply of consumable materials.	Head of Continuous Professional Development Unit Medical Director	30/10/2022	30/05/2023	The number of provided workshops for the laboratory technicians. Program evaluation survey (Classroom facilities (for lectures, laboratories, tutorials, clinics etc) were of good quality).	3 3.5
10.	Program should provide adequate facilities for extra-curricular activities (including	• Improve the standard of the equipment for sporting activities. • Periodic maintenance of	Administrative Manager	30/10/2022	30/05/2023	Student experience survey (Adequate facilities are available for extra-curricular activities (including	3.5

	sporting and recreational activities).	the sporting equipment. • Making a Yearly plan for conducting sporting and recreational events.				sporting and recreational activities)	
11.	Increase the number of awareness and educational programs for patients treated in college.	More awareness and educational programs for patients treated in college.	Medical Director	30/ 10/ 202 2	30/05 /2023	Number of awareness and educational programs for patients Patient satisfaction survey	3 4.5
12.	Ensure availability of an effective web-based electronic data management system or electronic resources	• Developing programs for digital logbooks for all the courses. • Providing full access to Saudi digital library services • Provide the library with sufficient number of books for each discipline. • Collect regular feedback on yearly basis from students, faculty and staff.	Vice Deanshi p of Academ ic Affairs Admini strative Manage r	30/ 10/ 202 2	30/05 /2023	Student experience survey (An effective web-based electronic data management system or electronic resources are available.) Faculty satisfaction (An effective web-based electronic data management system or electronic resources are available).	3.4 3.92
13.	Faculty should be provided adequate research hours to perform high quality research.	Modifying the workload to allow enough time for research activities.	Vice Deanshi p of Researc h and Develo pment	30/ 10/ 202 2	30/05 /2023	Faculty satisfaction (The time available for scientific research is sufficient)	3.5

			Vice Deanship of Academic Affairs				
14.	Provide health services that meet students' needs.	• Regular training of student /academic advisors for improving their skills to identify students in need of psychological counseling. • Providing professional psychological counseling to students in need. • Explaining the protocol for managing the prick injuries on a regular basis and reinforcing its importance.	Vice Dean of Academic Affairs Medical Director	30/ 10/ 202 2	30/05 /2023	Program evaluation survey (All health, and general, and professional safety requirements are available in the facilities, equipment, and the educational and research activities).	3.5
15.	Classrooms should be equipped with facilities like smart boards, mic, speakers etc.	Follow-up the progress of the plan of transfer to the main and new campus.	College Dean	30/ 10/ 202 2	30/05 /2023	Student experience survey (Classrooms (including lecture rooms, laboratories and clinics) are attractive and comfortable.)	3.4
16.	Faculty to student ratio should be increased as there is shortage of	• Calculate the required number of faculty in these two division based on the	College Dean	15/ 09/ 30/ 10/ 202 2	30/05 /2023	The percentage of improvement in the planed faculty to student ratio	50%

	clinical staff in some divisions (like oral surgery and endodontics).	available number, students number, taught courses and proper faculty to student ratio based on benchmarking. • Plane to recruit faculty members as early as applicable.					
17.	Provide monetary funding for materials and equipment.	• Specify the exact needs for materials and equipment. • Plan for purchased the required materials and equipment.	Medical Director	30/ 10/ 202 2	30/06 /2023	Percentage of course reports not mentioning the lack of materials	100%
18.	Improve the process of extraction of the course evaluation survey from both edugate and e-register.	• Make a request to the University about the exact problem. • Follow up with the request so that all course coordinators can access to the CES as early as applicable.	Vice Dean of Academ ic Affairs	30/ 10/ 202 2	30/05 /2023	Percentage of course reports not mentioning the lack of this technical problem	100%

I. Report Approving Authority

Council / Committee	Program Assessment Committee - Quality Assurance and Academic Accreditation Unit / Vice Deanship of Development
Reference No.	2021-2022
Date	30/10/2022

J. Attachments :

- **A separate cohort analysis report for male and female sections and for each branch**
- **A report on the program learning outcomes assessment results for male and female sections and for each branch (if any)**
- **A report on the students evaluation of program quality**
- **Independent reviewer's report and other survey reports (if any)**