

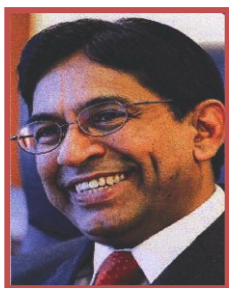


# MINISTRY OF HEALTH, MALAYSIA

## STANDARDS AND GUIDELINES FOR MEDICAL ASSISTANT EDUCATION PROGRAMME

Medical Assistant Board  
Medical Practice Division  
Ministry of Health Malaysia

2010



## FOREWORD

The Ministry of Health Malaysia has always placed great importance and emphasis on the quality of the services that it provides in line with the noble aspirations of our government to serve the people of Malaysia. “People First, Performance Now” continues to be the shining beacon that guides our effort to become a world class health care system. One of the key component of an excellent service is the development of competent professionals who will be able to provide high quality health care.

The assistants medical officer (AMO) popularly known as “medical assistant” continue to contribute a great deal to the provision of higher quality health care. Previously, the training of medical assistant was conducted solely by the MOH until 2006, when private colleges were allowed to train Medical Assistants guided by Standards and Guidelines for Approval of Medical Assistants Training Programme. This document was developed to facilitate the private colleges in preparing and developing their facilities and documentations for the Medical Assistant Diploma Programme which will meet the stringent requirements of the Medical Assistant Board (MAB). Because quality is a never ending endeavour, the above mentioned guidelines were reviewed and improved upon by the MAB to ensure their relevance, reliability, adaptability, and effectiveness to address the needs of the ever-changing services requirements for assistant medical officers. Thus, these efforts culminated in the development of a new edition of the Standards and Guidelines for Medical Assistant Education Programme. This guideline is intended to provide guidance for medical assistant colleges, MAB, MQA auditors, policy makers as well as other stake holders engaged in the Medical Assistant Education Programme in ensuring that quality continues to be given top priority. It also provides useful guidance on internal quality audit conducted by the institutions and external audit by the MQA’s panel of assessors.

The MAB hopes that this guideline will assist the relevant institutions to enhance the quality of educations provided through the self-review and internal assessment processes as well as external audit for accreditation of the education programme. In the spirit of teamwork and shared responsibility and balancing the demands of autonomy, flexibility and accountability,

the MAB is confident that quality of Medical Assistant Education Programme in Malaysia will continue to improve substantially.

On behalf of the MAB, I would like to extend my sincere appreciation and thanks to all who have contributed towards the preparation of this document. It is our hope that this document will achieved its intended purpose of developing a high quality of Medical Assistant Education Programme.



**Tan Sri Dato' Seri Dr. Hj. Mohd Ismail Merican**  
**Director General of Health, Malaysia**  
**Chairman**  
**Medical Assistant Board**  
**Ministry of Health, Malaysia**




## FOREWORD

I would like to extend my compliment to all members of Medical Assistant Board Education Committee and Committee of Guideline Development for Medical Assistant Education Programme. The Development of this guideline has been initiated since 2009 and the final review of has been tabled at the 51<sup>st</sup> Medical Assistant Board Meeting before it was approved during the 52<sup>nd</sup> Medical Assistant Board Meeting on 16<sup>th</sup> July 2010.

This guideline outlines the important elements that need to be conducted by the medical assistant colleges both in the private and the government sectors. All disputed issue appeared in the last guideline has been explained and made simplified. Quality is indeed a fundamental part of education. High quality of education and training are the main concern in order to produce knowledgeable and skillful graduates to meet the current needs of the healthcare services in the country as well as to achieve the vision, mission and the objectives of the Ministry of Health.

This Guideline focuses on the programme evaluation, approval and implementation. Nine areas of standard are used to evaluate the readiness of the HEP to take up the Medical Assistant Education Programme comprises of vision, mission, educational goals learning outcomes; curriculum design and delivery; assessment of students; student selection and support services; academic staff; educational resources; programme monitoring and review; leadership, governance and administration; and continual quality improvement. Meanwhile the programme standards define the expected level of attainment for each criterion and serve as a performance indicator.

I hope this new guideline will serve the stake holders and client of the Medical Assistant Education Programme as it intended to be. I would like to thank, those who have involved or contributed to this document including the drafting team, the reviewers and any other parties who involved directly or indirectly in the development of this guideline.

  
**Dr. Hjh. Nooraini binti Baba**  
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# STANDARDS AND GUIDELINES FOR MEDICAL ASSISTANT EDUCATION PROGRAMME

## INTRODUCTION

Higher Education Providers (HEP) are responsible for designing and implementing programmes that are appropriate to their missions and goals. Standards And Guidelines for Medical Assistant Education Programme guides the HEP and the Medical Assistant Board (MAB) in quality assuring programmes offered by both government and private colleges in Malaysia. This Guideline is dedicated to programme evaluation, approval and implementation. Nine areas of standard are used to evaluate the readiness of the HEP to take up Medical Assistant Education Programme.

However, these nine areas will be adjusted accordingly to fit their distinct purposes. For example, while the item on vision is crucial at the institutional level, its fit at the programme level is more directed to see how a specific programme supports the larger institutional vision. Similarly, when talking about curriculum design its perspective is largely about institutional policies, structures, processes and practices related to curriculum development across the institution. This chapter discusses guidelines on criteria and standards for programme accreditation. It recommends practices that are in line with recognized good practices. They are aimed at assisting HEP's attain at least benchmarked standards in each of the nine areas of evaluation for approval and to stimulate the HEP to continuously improve the quality of their programmes. All these are in support of the aspiration to make Malaysia the centre for educational excellence.

The guidelines are designed to encourage diversity of approach that is compatible with national human resource requirements. The guidelines define standards for higher education in broad terms, within which an individual HEP can creatively design its programme of study and to appropriately allocate resources in accordance with its stated educational goals and learning outcomes.

The guidelines are divided into the following nine areas of evaluation:

1. Vision, mission, educational goals and learning outcomes;
2. Curriculum design and delivery;
3. Assessment of students;
4. Student selection and support services;
5. Academic staff;
6. Educational resources;
7. Programme monitoring and review;
8. Leadership, governance and administration; and
9. Continual quality improvement.

The programme standards define the expected level of attainment for each criterion and serve as a performance indicator. They are specified at two levels of attainment: benchmarked standards and enhanced standards. Benchmarked standards are standards that must be met and its compliance demonstrated during a programme evaluation exercise. Benchmarked standards are expressed as a **“must”**.

Enhanced standards are standards that should be met as the institution strives to continuously improve itself. Enhanced standards reflect national consensus on good practices in medical assistant education programme. HEPs should be able to demonstrate achievement of some or all of these or that initiatives toward the achievement of these programme standards are underway. Achievement of these standards will vary with the stage of development of the HEPs, their resources and policies. Enhanced standards are expressed by a **“should”**.

The development and implementation of this Programme Standards is to ensure that the graduates produced would meet the professional requirements and expectations in their respective fields. Graduates may enter employment in the following areas:

- hospitals and healthcare facilities
- community and health services
- higher educational institutions
- industrial and plantation health sectors
- research institutions
- Other health related agencies.

The use of the two levels recognises the fact that HEPs are at different stages of development and that quality improvement is a continual process. Thus, these levels are utilised by the Medical Assistant Board for the purposes of evaluating applications to start the medical assistant education programme. In principle, an HEP must demonstrate that it has met all the benchmarked standards for its programme to be fully approved, but nevertheless taking into account flexibility and recognition of diversity to facilitate the creative growth of education.

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The vision, mission and goals of the HEP guides academic planning and implementation in bringing together its members to strive towards a tradition of excellence. The general goals of higher education is to produce graduates through:

- a) Provision of knowledge and clinical skills based on scientific principles;
- b) Inculcation of attitudes, ethics and professionalism for societal advancement within the framework of the national vision;
- c) Nurturing leadership, critical thinking and problem solving skills through evidence based practice;
- d) Development of lifelong learning for continuous upgrading of knowledge and skills in line with the rapid advancement and global knowledge; and
- e) Consideration of other health issues that is relevant to the local, national and international context.

Academic programmes are the building blocks that support the larger vision and mission of the HEP. Hence, one must take into consideration these larger institutional goals when designing programme to ensure that one compliment the other.

The quality of the HEP and the programme that it offers is ultimately assessed by the ability of its graduates to carry out their expected roles and responsibilities in society. This requires a clear statement of the competencies, i.e. the practical, intellectual and soft skills that are expected to be achieved by the student at the end of the programme. The main domains of learning outcomes cover knowledge, practical and social skills, critical and analytical thinking, values, ethics and professionalism. The levels of competency of these learning outcomes are defined in the Malaysian Qualifications Framework (MQF),” (COPPA, pp. 10).

## 1. Statement of Programme Aims, Objectives and Learning Outcomes

A programme’s stated aims, objectives and learning outcomes reflect what it wants the learner to achieve. It is crucial for these aims, objectives and learning outcomes to be expressed explicitly and be made known to learners and other stakeholders alike.

### 1.1. Programme Aims

The programme aims are as stipulated in **Appendix 1 (Programme Aims for Medical Assistant Education Programme)**.

#### 1.1.1 Benchmarked Standards

- 1.1.1.1 The programme **must** define its aims, objectives and learning outcomes and make them known to its internal and external stakeholders.

**1.1.1.2** The programme's objectives **must** reflect the key elements of the outcome of higher education that are in line with national and global developments.

**1.1.1.3** The programme's aims, objectives and learning outcomes **must** be developed in consultation with principal stakeholders which should include the academic staff.

**1.1.1.4** The programme's aims, objectives and learning outcomes must be consistent with, and supportive of, the HEP's vision and mission which must be endorsed by the MAB.

### **1.1.2 Enhanced Standards**

**1.1.2.1** The aims, objectives and learning outcomes of the programme should encompass the elements of social responsibilities, participation in research, community involvement and continuing medical assistants' education activities.

**1.1.2.2** The HEP shall consult MAB when formulating and designing the curriculum.

## **1.2 Learning Outcomes**

The quality of a programme is ultimately assessed by the ability of the learner to carry out their expected roles and responsibilities in society. This requires the programme to have a clear statement of the learning outcomes to be achieved by the learner. The programme learning outcomes **must** be according to the level of study based on the following eight *Malaysian Qualifications Framework* (MQF) learning outcomes domains. **(Appendix 2 - Learning Outcomes for Medical Assistant Education Programme):**

- (i) Knowledge
- (ii) Practical skills
- (iii) Social skills and responsibilities
- (iv) Ethics, professionalism and humanities
- (v) Communication, leadership and team skills
- (vi) Scientific methods, critical thinking and problem solving skills
- (vii) Lifelong learning and information management skills
- (viii) Entrepreneurship and managerial skills

### **1.2.1 Benchmarked Standards**

The programme **must** define the competencies that the student should demonstrate on completion of the programme that cover mastery of body of knowledge; clinical skills; social skills and responsibilities; values, attitudes and professionalism; problem solving and scientific skills; communication, leadership and team skills; information management and lifelong learning skills; and managerial and entrepreneurial skills.

**1.2.1.1** The programme must demonstrate how the component modules contribute to the fulfillment of the programme's learning outcomes.

**1.2.1.2** The programme must show how the student is able to demonstrate the learning outcomes, for example, through continuous and summative assessments.

### **1.2.2 Enhanced Standards**

The programme **should** specify the link between competencies expected at completion of studies and those required during career undertakings and continuous professional developments.

“This section of the Programme Standards contains benchmarked statements pertaining to the structure and delivery of a programme within the field of medical and health sciences. For the purposes of this code of practice for accreditation of programmes offered by higher education providers, the term ‘curriculum design and delivery’ is used interchangeably with the term ‘programme design and delivery’. “Programme” means an arrangement of courses that are structured for a specified duration and learning volume to achieve the stated learning outcomes and usually leading to an award of a qualification,” (COPPA, pp. 12). The following matrices are proposed specific benchmark requirements for proposed structure.

## 2. Academic Autonomy, Programme Design and Teaching-Learning Methods, Curriculum Content and Structure, Management of the Programme, Linkages with External Stakeholders

A programme’s statement of academic autonomy, programme design and teaching-learning methods, curriculum content and structure, management of the programme, linkages with external stakeholders reflect what the programme should achieve. The proposed structures are only samples, HEPs are encouraged to develop the programme to reflect current best practices, achieve higher standards and develop specialisations.

### 2.1 Academic Autonomy

An academic institution is expected to have guided autonomy over academic matters. Such autonomy should be reflected at the departmental level where the programme is being offered.

#### 2.1.1 Benchmarked Standards

- 2.1.1.1 The department **must** have guided autonomy to design the curriculum and to allocate the resources necessary for its implementation to ensure the achievement of learning outcomes. MAB **must** endorse the design to meet the requirement of the scope of professional practice as stipulated in the Medical Assistant Regulations (Registration) 1979.
- 2.1.1.2 Where applicable, the above provision **must** also cover programmes franchised to, or from, other HEPs in accordance with national policies.
- 2.1.1.3 The academic staff **must** be given autonomy to focus on areas of expertise, such as curriculum development and implementation, supervision of students, research and writing, scholarly activities, and academically-related administrative duties and community engagement.

#### 2.1.2 Enhanced Standards

- 2.1.2.1 The HEP should have a clearly stated policy on conflict of interest, particularly in the area of part-time employment, whereby time frame

needs to be stipulated on agreed hours of part-time employment.

- 2.1.2.2 The boundaries of academic autonomy for the department and the academic staff should continue to expand reflecting the intellectual maturity of the HEP.

## 2.2 Programme Design and Teaching-Learning Methods

Programme design and teaching–learning method **should** provide flexibility in opting various methodology that enhances intellectual development, competency enhancement, and lifelong learning.

### 2.2.1 Benchmarked Standards

- 2.2.1.1 The department **must** have a defined process by which the curriculum is established, reviewed and evaluated. The curriculum must be tailored to the need and capability of each individual organisation.
- 2.2.1.2 The process **must** involve the academic and administrative staff of the department with consultation from the MAB.
- 2.2.1.3 The programme **must** be considered only after a need assessment has indicated that there is a need for the programme to be conducted.
- 2.2.1.4 The programme **must** be considered only after the resources to support the programme have been ascertained.
- 2.2.1.5 The programme content, approach, and teaching-learning methods **must** be appropriate and consistent, and supports the achievement of the programme learning outcomes.
- 2.2.1.6 There **must** be a variety of teaching-learning methods in order to achieve the eight domains of the learning outcomes and to ensure that students take responsibility for their own learning.
- 2.2.1.7 Course duration **must not** be less than 3 years (156 weeks) but **should** not exceeding 4 years (208 weeks)

### 2.2.2 Enhanced Standards

- 2.2.2.1 The curriculum **should** encourage multi-disciplinary approaches to enhance the personal and professional development of the student through electives, study pathways and other means, which should be monitored and appraised.
- 2.2.2.2 The needs analysis for the programme **should** involve feedback from external sources including MAB, stakeholders, experts, market, alumni, peers and students whose commentaries should be considered for

curriculum improvement.

- 2.2.2.3** There **should** be co-curricular activities that will enrich and foster personal and professional development.

## **2.3 Curriculum Content and Structure**

A teaching-learning environment can only be effective when the curriculum content and structure of a programme continually keep abreast with the current development in the field of study.

### **2.3.1 Benchmarked Standards**

- 2.3.1.1** The programme must incorporate the core subjects, compulsory and elective modules essential for the understanding and application of the concepts, principles and methods that support the programme outcomes as stipulated in **Appendix 3 (Course Content for Medical Assistant Education Programme)**

- 2.3.1.2** The programme **must** fulfill the requirements of the discipline taking into account the appropriate standards and best practices for the field. The content of the curriculum shall be designed to prepare the students to :

- a) Assume the responsibility and accountability as stipulated in the Act 180, Medical Assistant (Registration) 1977, Medical Assistant (Registration) Regulation 1979 and Act 50, Medical Act, 1971 Medical (Instrument) (Exemption) Regulation 1986\*.
- b) Achieved the programmed aims as stipulated in **Appendix 1 (Programme Aims for Medical Assistant Education Programme)**.
- c) Apply knowledge, skills and demonstrate the right attitudes to meet the health care needs of individuals and families in wellness/sickness in the area of practice.
- d) Be a competent and safe practitioner.

- 2.3.1.3** The content of the programme **must** be periodically reviewed to keep abreast with scientific, technological and knowledge development of the discipline, and the needs of society.

### **2.3.2 Enhanced Standards**

The department **should** establish mechanisms - through the use of the latest technology and through networking - to access to real time information and to identify up-to-date topics of importance for inclusion in the curriculum and its delivery.

## 2.4 Management of the Programme

Effective nurturing and naturing of learners requires a planned management strategy that enhances utilization of resources to meet programme outcomes.

### 2.4.1 Benchmarked Standards

- 2.4.1.1 Students **must** be provided with the current information about the aims, course outline, learning outcomes, and assessment methods of the programme.
- 2.4.1.2 The programme **must** have a Program Head and team of academic staff responsible for the planning, implementation, evaluation and improvement of the programme as stipulated in **Appendix 8 (Academic Staff Qualifications for Medical Assistant Education Programme)**.
- 2.4.1.3 The programme team **must** have authority and established procedures for planning and monitoring the programme.
- 2.4.1.4 The programme team **must** have adequate resources to implement the teaching and learning activities, and conduct programme evaluation for quality improvement.
- 2.4.1.5 The programme, especially its content and delivery, **must** be regularly reviewed and evaluated and the results utilised to assure quality.
- 2.4.1.6 The learning environment **must** be conducive for scholarly and creative achievements.

### 2.4.2 Enhanced Standards

- 2.4.2.1 Innovations to improve teaching and learning **should** be developed, supported and evaluated.
- 2.4.2.2 Innovations on improving teaching and learning **should** be done in consultation with principal stakeholders and experts, internally and externally.
- 2.4.2.3 The review and evaluation of the programme **should** involve stakeholders as well as external expertise.

## 2.5 Linkages with External Stakeholders

Linkages with stakeholders outside of the department, particularly at the operational level, are crucial for identifying, clarifying and improving key aspects of the programme and their interrelationships in the planning and implementation processes. The linkages are best developed and maintained at local, national, regional and global levels.

### 2.5.1 Benchmarked Standards

The department **must** have linkages with all levels of stakeholders outside of the department for the purposes of curriculum planning, implementation and review.

### 2.5.2 Enhanced Standards

**2.5.2.1** The programme team **should** obtain feedback from employers and use the information for curriculum improvement, including for purposes of student placement, training and workplace exposure.

**2.5.2.2** Students **should** be given the opportunity to develop linkages with external stakeholders.

“Student assessment is a crucial aspect of quality assurance because it drives student learning. It is one of the most important measures to show the achievement of learning outcomes. The result of assessment is also the basis in awarding qualifications. Hence, methods of student assessment have to be clear, consistent, effective, reliable and in line with current practices and must clearly support the achievement of learning outcomes,” (COPPA, pp. 15). Specific method of assessment will depend on the specific requirement of each subject. However, as a general guide, the following must be considered:

- Both summative and formative assessments must be used;
- All cognitive domain should be tested through written, oral or other suitable means but practical skills should be tested by practical examinations;
- Pass in practical examination is compulsory (a pass implies that the examiner is satisfied with the candidates competency to practice safely, meeting the expectations of the professions); and

The types of assessments indicated below are merely examples. HEP’s are encouraged to use a variety of methods and tools appropriate for the learning outcomes and competencies. HEP’s also are encouraged to make reference to *Garispanduan Pengurusan Sistem Penilaian Bagi Kursus Diploma Pembantu Perubatan Di Kolej-Kolej Pembantu Perubatan Malaysia*.

### 3. Relationship between Assessment and Learning, Assessment Methods, Management of Student Assessment

#### 3.1 Relationship between Assessment and Learning

Assessment is a process of making informed and valued judgment on the performance of a learner to adjudge if he/she has achieved competence or require professional standards. It includes assessing cognitive skills, transferable core skills, competencies and capabilities, attribute, values and ethics, and personal development. Assessment provides immediate feedback on student’s performance and teacher’s teaching and the primary goal is to determine the extent of acquisition of learning, developing them to become a safe and competent practitioners.

##### 3.1.1 Benchmarked Standards

**3.1.1.1** Assessment principles, methods and practices **must** be aligned with learning outcomes, programme content and the needs of the profession.

**3.1.1.2** The assessment **must** be consistent with the levels defined in the Malaysian Qualification Framework (MQF), the eight domains of learning outcomes and the programme standards.

##### 3.1.2 Enhanced Standards

The link between assessment and learning outcomes in the programme **should**

be reviewed periodically to ensure its effectiveness.

## 3.2 Assessment Methods

Assessment methods require the use of test instrument that assess all 8 domains to gauge student's learning for understanding.

### 3.2.1 Benchmarked Standards

**3.2.1.1** All examination must comply with the MAB requirement. The frequency, methods, and criteria of student assessment including the grading criteria as stipulated in **Appendix 4 (Guidelines for Implementation of Assessment in Medical Assistant Education Programme)** must be documented and communicated to students on the commencement of the programme.

### 3.2.2 Enhanced Standards

**3.2.2.1** The methods of assessing should be comparable to best practices.

**3.2.2.2** The review of the assessment system should be done in consultation with experts and MAB.

## 3.3 Management of Student Assessment

Management of student assessment system shall be directly linked to the Examination Syndicate or HEP that confers the qualification. The confidentiality and security pertaining to examination protocol and procedures important in assuring integrity in the quality of the qualifications awarded.

### 3.3.1 Benchmarked Standards

**3.3.1.1** The Examination Syndicate or HEP **must** have its own examination policy to govern the management of student assessment.

**3.3.1.2** Student assessment results **must** be communicated to the student within reasonable time.

**3.3.1.3** Changes to student assessment methods **must** follow established procedures and regulations and communicated to the student prior to their implementation.

**3.3.1.4** There **must** be mechanisms to ensure the security of assessment documents and records.

**3.3.1.5** The programme grading, assessment, appeal policies and practices **must** be publicised.

**3.3.1.6** There **must** be involvement of MAB in the student assessment including;

- a) Endorsement of student qualification to sit for the examinations as stipulated in **Appendix 5 (Qualification For Medical Assistant Board Examination)**
- b) Selection of examinations questions
- c) Monitoring of the examinations as stipulated in **Appendix 6 (Appointment and Term of Reference of Head Examiner/External Examiner/Internal Examiner/Examination Monitoring Officer for the Medical Assistant Board Examination (Medical Assistant Education Programme))**
- d) Moderation of examinations scripts marking
- e) Endorsement of examination results

### **3.3.2 Enhanced Standards**

**3.3.2.1** The department and its academic staff **should** have autonomy in the management of student assessment.

**3.3.2.2** There **should** be independent **external audit** to evaluate and improve the management of student assessment, including formal certification of the processes.

Admission policies of the programme need to comply with the prevailing policies of the Ministry of Higher Education and MAB. There are varying views on the best method of student selection. Whatever the method used, the HEP must be able to defend its consistency. The number of students to be admitted to the programme is determined by the capacity approved by the MAB. HEP's admission and retention policies must not be compromised for the sole purpose of maintaining a desired enrolment. If any HEP operates in separate campuses or if the programme is a collaborative one, the selection and assignment of all students must be consistent with policies set by the MAB. All candidates shall meet the minimum entry requirement as stipulated by the MAB in **Appendix 7 (Entry Qualification for Selection of student in Medical Assistant Education Programme)**.

#### 4. Admission and Selection, Articulation Regulations, Credit Transfer and Credit Exemption, Transfer of Students, Student Support Services and Co-curricular Activities, Student Representation and Participation

##### 4.1 Admission And Selection

###### 4.1.1 Benchmarked Standards

- 4.1.1.1 The programme **must** have a clear protocol on student selection and transfer.
- 4.1.1.2 Student intake **must** be stated and related to the capacity of the department.
- 4.1.1.3 The criteria of student selection **must** be made known to the public.
- 4.1.1.4 The selection of students **must** be through a structured interview process. There **must** be an involvement of head of programme in the interview process.
- 4.1.1.5 The student selection **must** be free from all forms of discrimination and biasness.
- 4.1.1.6 Applicant's status need to be duly notified.
- 4.1.1.7 There **must** be a clear policy and appropriate mechanisms for appeal.
- 4.1.1.8 The department **must** offer appropriate support systems during the programme.
- 4.1.1.9 Visiting, exchange and transfer students **must** be accounted for, to ensure the adequacy of the department's resources to accommodate the additional students.
- 4.1.1.10 The admission policy for the programme **must** be monitored and

reviewed periodically to continuously improve the selection processes.

#### **4.1.2 Enhanced Standards**

**4.1.2.1** Review of the admission policy and processes **should** be in consultation with MAB and relevant authorities.

**4.1.2.2** There **should** be a relationship between student selection, the programme, and the desired learning outcomes.

#### **4.1.3 Selection criteria for diploma/degree programme:**

The candidate **must** comply with the criteria stipulated in **Appendix 7 (Entry Qualification for Selection of student in Medical Assistant Education Programme)**

### **4.2 Articulation Regulations, Credit Transfer and Credit Exemption**

#### **4.2.1 Benchmarked Standards**

The department **must** have well-defined and effectively disseminated policies, regulations and processes concerning articulation practices, credit transfers and credit exemptions.

#### **4.2.2 Enhanced Standards**

The department **should** always be in touch with the latest development and thinking about the processes of articulation, credit transfer and credit exemptions, including cross-border collaborative provisions.

### **4.3 Transfer of Students**

In view of cross-border education and student mobility, nationally and globally, attention must be given to ensure that student transfers are smoothly assimilated into the institution without undue disruption to his studies.

#### **4.3.1 Benchmarked Standards**

**4.3.1.1** The department **must** have a well disseminated policy with clear criteria, mechanisms and processes, both academic and non-academic, to enable qualified students to be transferred to another programme.

**4.3.1.2** Transfer in students **must** have comparable achievement in their previous institution of study.

#### **4.3.2 Enhanced Standards**

The department **should** have in place policies and mechanisms that facilitate student mobility between programmes and institutions, within the country or

cross-border, through articulation arrangements, joint degrees, exchange semesters, advanced standing arrangements, and the like.

#### 4.4 Student Support Services and Co-curricular Activities

Student support services and co-curricular activities facilitate learning and wholesome personal development and contribute to the achievement of the learning outcomes. It includes physical amenities and services such as recreation, arts and culture, accommodation, transport, safety, food, health, finance, academic advice and counseling. Students with special needs and those facing personal, relationship or identity problems can be helped through special-purpose facilities and professional counseling. Career counseling can help students make more informed programme and career choices by examining students' approach to career planning and suggesting appropriate resources to guide them. *(Many of the components below apply at the institutional level and the students at the department level have access to these central services and facilities.)*

##### 4.4.1 Benchmarked Standards

- 4.4.1.1 Students **must** have access to appropriate and adequate support services, such as physical, social, financial, recreational facilities, counselling and health services.
- 4.4.1.2 Student support services **must** be evaluated regularly to ensure their adequacy, effectiveness and safety.
- 4.4.1.3 There must be a mechanism for students to air grievances and make appeals relating to student support services.
- 4.4.1.4 There **must** be a designated administrative unit responsible for planning and implementing student support services staffed by individuals who have appropriate experience consistent with their assignments.
- 4.4.1.5 Academic and career counselling **must** be provided by adequate and qualified staff and issues pertaining to counselling must remain confidential.
- 4.4.1.6 An effective induction to the programme **must** be made available to students and evaluated regularly with special attention given to out of state and international students as well as students with special needs.

##### 4.4.2 Enhanced Standards

- 4.4.2.1 Student support services **should** be given prominent organisational status in the HEP and a dominant role in supplementing programme learning outcomes.

**4.4.2.2** Student academic and non-academic counselling **should** include ongoing monitoring of the student's progress to measure the effectiveness of, and to improve, the counselling services.

**4.4.2.3** There **should** be a structured training and development plan to enhance the skills and professionalism of the academic and non-academic counsellors.

## **4.5 Student Representation and Participation**

The participation of students in various departmental activities inculcates self-confidence for leadership and provides experience in education and related matters. By involving students, it will also be easier for the department to obtain their feedback. Student publications can also contribute to an atmosphere of responsible intellectual discourse.

### **4.5.1 Benchmarked Standards**

**4.5.1.1** The department **must** adhere to the HEP's policy on student participation and representation as and when they apply to the departmental level.

**4.5.1.2** There **must** be a policy and programmes for active student participation in areas that affect their welfare, for example, peer counselling, co-curricular activities, and community engagement.

### **4.5.2 Enhanced Standards**

**4.5.2.1** At the department level, student activities and student organisations **should** be facilitated to gain basic managerial and leadership experience, to encourage character building, to inculcate a sense of belonging and responsibility, and to promote active citizenship.

**4.5.2.2** Where student publications or other media exist, the HEP **should** provide a clear, formal and well publicised policy regarding such publications.

**4.5.2.3** The department **should** have adequate facilities to encourage students to be involved in publication activities.

“The quality of the academic staff is one of the most important components in assuring the quality of higher education and thus every effort must be made to establish proper and effective recruitment, service, development and appraisal policies that are conducive to staff productivity. It is important that every programme has appropriately qualified and sufficient number of academic staff, in an environment that is conducive to encourages recruitment and retention.

Teaching, research, consultancy services and community engagement are the core interrelated academic activities. Nevertheless, it must be acknowledged that the degree of involvement in these areas varies between academic staff and between academic institutions.

Work and its equitable distribution is one of the ways the HEP recognises meritorious contribution for the purpose of promotion, salary determination or other incentives. It is crucial for the HEP to provide training for its academic staff. The equitable distribution of work helps ensure that such training can be done systematically and fairly.” (COPPA, pp. 21).

## 5. Recruitment and Management and Service and Development

It is a requirement of this Programme Standards that all academic staff members are required to undergo continuous professional development from time to time. Medical assistant lecturer should accumulate a minimum of 30 CPD point (or as required by the governing body) in a year in order to renew their **Annual Registration Certificate (ARC)**.

### 5.1 Recruitment and Management

#### 5.1.1 Benchmarked Standards

- 5.1.1.1 The HEP **must** have a clear and documented academic staff recruitment policy where the criteria for selection are based on academic merit.
- 5.1.1.2 The staff–student ratio for the programme **must** be appropriate to the teaching-learning methods and comply with the programme discipline standards.
- 5.1.1.3 The department **must** determine the core academic staff responsible for implementing the programme, as well as those teaching the core subjects.
- 5.1.1.4 The department **must** have an adequate number of full-time academic staff for the programme.
- 5.1.1.5 The department **must** clarify the roles of the academic staff in teaching, research and scholarly activities, consultancy, community services and administrative functions.

- 5.1.1.6 The policy of the department **must** reflect an equitable distribution of responsibilities among the academic staff.
- 5.1.1.7 Recognition and reward through promotion, salary increment or other remuneration **must** be based on equitable work distribution and meritorious academic roles using clear and transparent policies and procedures.
- 5.1.1.8 In playing a role in the HEP's academic appointment and promotion exercise - for example, that of Professors and Associate Professors - the department **must** be guided by considerations which are in line with national policy and international best practices.

## 5.1.2 Enhanced Standards

- 5.1.2.1 The recruitment policy for a particular programme **should** seek a balance between senior and junior academic staff, between academic and non-academic staff, between academic staff with different approaches to the subject, and preferably between local and international academic staff with multi-disciplinary backgrounds.
- 5.1.2.2 The department **should** have national and international linkages to provide for the involvement of well renowned academics and professionals in order to enhance teaching and learning of the programme.

## 5.2 Service and Development

### 5.2.1 Benchmarked Standards

- 5.2.1.1 The institutional and departmental policy on the academic staff **must** complement each other and address matters related to service, development and appraisal.
- 5.2.1.2 The department **must** provide mentoring and formative guidance for new academic staff as part of its staff development programme.
- 5.2.1.3 Head of Programme **must** possess the Diploma of Medical Assistant or equivalent with Bachelors Degree in related field OR other degrees approved by MAB preferably with working experience **in** Medical Assistant Training Institution. Preference should be given to candidate with experience as head of training institution.
- 5.2.1.4 The academic staff **must** be provided with the necessary training, tools and technology for self-learning, access to information and for communication.

**5.2.1.5** Number of academic staff with Diploma of Medical Assistant and registered with MAB **must** not be less than 2 (two) at the commencement of the program. The qualifications of academic staff for Diploma Programme are as stipulated in **Appendix 8 (Academic Staff Qualifications for Medical Assistant Education Programme)**.

## **5.2.2 Enhanced Standards**

**5.2.2.1** The HEP **should** provide opportunities - including funding - for academic staff participation in professional, academic and other relevant activities, national and international. It **should** appraise this participation and demonstrate that it utilises the results of this appraisal for improvement of the student experience.

**5.2.2.2** The HEP **should** have appropriate provision to allow for advance enhancement for its academic staff through research leave, sabbatical, and sponsored participation in, and organising of conferences.

"Adequate educational resources are necessary to support the teaching-learning activities of the programme. These resources include finance, expertise, physical infrastructure, information and communication technology, and research facilities. The physical facilities of a program are largely guided by the needs of the specific field of study. These facilities include the space and the necessary equipment and facilities for administration, for large and small group learning (e.g. libraries, resource centres, lecture halls, auditoriums, tutorial rooms), for practical classes (e.g. science and computer laboratories, workshops/skill Lab, studios), and for clinical learning (e.g. hospitals, clinics).

Where appropriate, research facilities are included as part of educational resources because a research-active environment improves the quality of higher education. A research culture attracts high calibre academics that engender critical thinking and enquiring mind, contributing further to knowledge advancement. Active researchers are best suited to interpret and apply current knowledge for the benefit of academic programs and the community. Active researchers also attract grants that increase the number of staff and their morale. Interdisciplinary research has positive effects on academic programs.

A research-active environment provides opportunities for students to observe and participate in research through electives or core courses. Exposure to an environment of curiosity and inquiry encourages students to develop lasting skills in problem-solving, data analysis and continuous updating of knowledge. Some students may develop interest in research as a career choice. Educational experts are specialized staff from various disciplines who have been trained or who have considerable experience in effective teaching-learning methodologies and related matters of higher education. They would deal with problems and provide training as well as advice on teaching-learning processes and practices. The expertise can be provided by an education unit or division at the HEP or acquired from an external source. Other facilities, which are essential for supporting teaching-learning activities such as dormitories, transport, security, recreation and counseling, are equally important. A balanced and proportional increase in the direct and indirect educational resources supports effective teaching-learning.

Adequate quantity of physical and financial resources and services are crucial. Equally important, if not more so, is the quality, relevance, accessibility, availability and delivery of such resources and services, and their actual utilization by students. These considerations must be taken into account in evaluating the effectiveness of educational resources. (*COPPA*, pp. 23-24).

## **6. Physical Facilities, Research and Development, Educational Expertise, Educational Exchanges and Financial Allocation**

### **6.1 Physical Facilities**

The physical facilities **must** comply with the relevant laws, and with health and safety regulations.

#### **6.1.1 Benchmarked Standards**

The program **must** have sufficient and appropriate physical facilities and

educational resources to ensure its effective delivery. The requirements are as in **Appendix 9 (Programme Resources For Medical Assistant Education Programme)**

### 6.1.2 Enhanced Standards

- 6.1.2.1 The learning environment **should** be regularly improved through renovations, building new facilities and the acquisition of the latest and appropriate equipment to keep up with the development in educational practices and changes.
- 6.1.2.2 The educational resources, services and facilities **should** be periodically reviewed to assess the quality and appropriateness for current education and training.
- 6.1.2.3 Students **should** be provided with opportunities to learn how to access information in different mediums and formats.
- 6.1.2.4 The facilities **should** be user friendly to those with special needs.

## 6.2 Research and Development

### 6.2.1 Benchmarked Standards

For research-based programs and programs with a substantial research component, the department **must** provide adequate and suitable research facilities and environment. *(These standards are largely directed to universities offering degree level program and above.)*

- 6.2.1.1 The department **must** have a policy and a program on research and development, and adequate facilities to sustain them.
- 6.2.1.2 The interaction between research and education **must** be reflected in the curriculum, influence current teaching, and encourage and prepare students for engagement in research, scholarship and development.

### 6.2.2 Enhanced Standards

- 6.2.2.1 There **should** be a link between research, development and commercialisation.
- 6.2.2.2 The department **should** periodically review research resources and facilities and take appropriate action to enhance its research capabilities and to keep up with latest technology.

## 6.3 Educational Expertise

### 6.3.1 Benchmarked Standards

**6.3.1.1** The department **must** have a policy on the use of educational expertise in the planning of educational program and in the development of new teaching and assessment methods.

**6.3.1.2** There **must** be access to educational experts and the department should utilize such expertise for staff development and educational research.

### **6.3.2 Enhanced Standards**

There **should** be access to educational expertise, both internal and external, and its utilisation for staff development and research.

## **6.4 Educational Exchanges**

### **6.4.1 Benchmarked Standards**

The department **must** comply with the HEP policy on educational exchanges and disseminate it to students and faculty members.

### **6.4.2 Enhanced Standards**

**6.4.2.1** The department **should** have collaboration with other relevant institutions, nationally and internationally, and a clear policy and future planning on such collaborative activities.

**6.4.2.2** The department **should** provide appropriate facilities and adequate financial allocation for exchanges of academic staff, students, and resources.

## **6.5 Financial Allocation**

### **6.5.1 Benchmarked Standards**

**6.5.1.1** The HEP **must** have a clear line of responsibility and authority for budgeting and resource allocation that take into account the specific needs of the department.

**6.5.1.2** The department **must** have budgetary and procurement procedures to ensure that its resources are sufficient and capable of utilizing its finances efficiently and responsibly to achieve its objectives and maintain high standards of quality.

### **6.5.2 Enhanced Standards**

Those responsible for a program **should** be given sufficient autonomy to appropriately allocate resources to achieve the program goals and to maintain high educational standards.

Quality enhancement calls for programme to be regularly monitored, reviewed and evaluated. This includes the monitoring, reviewing and evaluating of institutional structures and processes (administrative structure, leadership and governance, planning and review mechanisms), curriculum components (syllabi, teaching methodologies, learning outcomes) as well as student progress, employability and performance.

Feedback from multiple sources - students, alumni, academic staff, employers, professional bodies, parents - assist in enhancing the quality of the programme. Feedback can also be obtained from an analysis of student performance and from longitudinal studies. Student feedback, for example, through questionnaires and representation in programme committees, is useful for identifying specific problems and for continual improvement of the programme.

Measures of student performance would include the average study duration, assessment scores, passing rate at examinations, success and dropout rates, students' and alumni's report about their learning experience, as well as time spent by students in areas of special interest. Evaluation of student performance in examinations can reveal very useful information. If student selection has been correctly done, a high failure rate in a programme indicates something amiss in the curriculum content, teaching-learning activities or assessment system. The programme committees need to monitor the performance rate in each course and investigate if the rate is too high or too low.

One method to evaluate programme effectiveness is a longitudinal study of the graduates. The department should have mechanisms for monitoring the performance of its graduates and for obtaining the perceptions of society and employers on the strengths and weaknesses of the graduates and to respond appropriately. (COPPA, pp 32-33).

## **7. Mechanisms for Programme Monitoring and Review and Involvement of Stakeholders**

### **7.1 Mechanisms for Programme Monitoring and Review**

#### **7.1.1 Benchmarked Standards**

- 7.1.1.1** Various aspects of student performance and progression **must** be analysed in relation to the objectives, the curriculum and the learning outcomes of the programme.
- 7.1.1.2** There **must** be a programme evaluation, done periodically, using proper mechanisms and resources, including benchmark data, teaching-learning methods and technologies, administration and related educational services, as well as feedback from principal stakeholders.
- 7.1.1.3** There **must** be a programme review committee in the department headed by a designated coordinator.
- 7.1.1.4** In collaborative arrangements, the partners involved **must** share the

responsibilities of the programme monitoring and review.

### 7.1.2 Enhanced Standards

The department's self-review processes **should** be able to identify areas of concerns and demonstrate ways to improve the programme.

## 7.2 Involvement of Stakeholders

### 7.2.1 Benchmarked Standards

Programme evaluation **must** involve the relevant stakeholders such as parent, professional's body and employers

### 7.2.2 Enhanced Standards

**7.2.2.1** Stakeholders **should** have access to the report on programme review, and their views considered.

**7.2.2.2** Stakeholder feedback - particularly that of the alumni and employers – **should** be incorporated into a programme review exercise.

**7.2.2.3** For a professional programme, the department **should** engage the relevant professional body in its programme evaluation exercise.

"There are many ways of administering an educational institution and the methods of management differ between HEPs. Nevertheless, governance that reflects the leadership of an academic organisation must emphasise excellence and scholarship. At the departmental level, it is crucial that the leadership provides clear guidelines and direction, builds relationships amongst the different constituents based on collegiality and transparency, manages finances and other resources with accountability, forge partnership with significant stakeholders in educational delivery, research and consultancy and dedicates itself to academic and scholarly endeavours. Whilst formalised arrangements can protect these relationships, they are best developed by a culture of reciprocity, mutuality and open communication," (COPPA, pp. 28).

## 8. Governance, Academic Leadership of The Programme, Administrative and Management Staff and Academic Records.

### 8.1 Governance

#### 8.1.1 Benchmarked Standards

- 8.1.1.1 The policies and practices of the department **must** be consistent with the larger purpose of the HEP.
- 8.1.1.2 The department **must** have the governance structure and functions, and the main decision-making components of the department, as well as the relationships between them.
- 8.1.1.3 The department **must** indicate the type and frequency of meetings per academic year.

#### 8.1.2 Enhanced Standards

- 8.1.2.1 The department **should** have the committee system and how it utilises consultation and feedback, and considers market needs analysis.
- 8.1.2.2 The department **should** have the representation and role of the academic staff, students and other stakeholders in the various governance structures and committees of the department.
- 8.1.2.3 The department **should** show evidence that the department board is an effective policy making body with adequate autonomy.
- 8.1.2.4 The department **should** have the extent of autonomy and responsibilities agreed upon by the HEP and its campuses **or** partner institutions to assure functional integration and educational quality.

### 8.2 Academic Leadership of The Programme

Academic leadership of the programme must have the qualification in related field

according to the level of programme offered by the institutions. Qualification of the academic leader as in **Appendix 6**

### **8.2.1 Benchmarked Standards**

- 8.2.1.1** The department **must** explain the selection process and job description of the academic leader of the programme. State his name, qualification and experience.
- 8.2.1.2** The department **must** have the management structure of the academic programme by showing the responsibilities of each individual involved in the structure.
- 8.2.1.3** The department **must** have the procedures and criteria for selection, appointment and evaluation of academic leadership in the programme.
- 8.2.1.4** The department **must** have the relationship between the programme and the HEP leadership in matters such as recruitment and training, student admission, and allocation of resources and decision-making processes.

### **8.2.2 Enhanced Standards.**

- 8.2.2.1** The department **should** evaluate the performance of the programme leader periodically.
- 8.2.2.2** The programme leader **should** create a conducive environment to generate innovation and creativity in the department

## **8.3 Administrative and Management Staff**

### **8.3.1 Benchmarked Standards**

- 8.3.1.1** The department **must** have the structure of the administrative staff which supports the programme.
- 8.3.1.2** The department **must** explain how the number of the administrative staff is determined in accordance to the needs of the programme and other activities.
- 8.3.1.3** The department **must** have the recruitment processes and procedures. State the terms and conditions of service.
- 8.3.1.4** The department **must** state the numbers required and available, job category and minimum qualification of non-academic staff for this programme. (See table 7.)

**Table 7. Non-academic staff for the programme**

No.	Job Category	Numbers required	Current numbers	Minimum Qualification
1.				

**8.3.1.5** The department **must** provide details of each staff assisting in this programme containing their name, academic qualifications, current responsibilities and other relevant information.

**8.3.1.6** The department **must** state the mechanisms and procedures for monitoring and appraising staff performance, for ensuring equitable distribution of duties and responsibilities among the staff, and for determining the distribution of rewards.

**8.3.1.7** The department **must** have the processes and procedures in managing the **discipline** of the staff.

**8.3.1.8** The department **must** state the mechanisms for training and career advancement that are available in the department.

**8.3.1.9** The department **must** conduct regular performance review of the programme's administrative and management staff.

### **8.3.2 Enhanced Standards**

The department **should** have the training scheme for the administrative and management staff and show how this scheme fulfils the specific and future needs of the programme.

## **8.4 Academic Records**

### **8.4.1 Benchmarked Standards**

**8.4.1.1** The department **must** state the policies on secure retention and disposal of student academic records at the departmental level and show it is consistent with that of the HEP.

**8.4.1.2** The department **must** have policies and procedure how to ensure the rights of individual privacy and the confidentiality of records.

### **8.4.2 Enhanced Standards**

The department **should** have the department's review policies on security of records and its plans

“Increasingly, society demands greater accountability from the Higher Education Providers (HEPs). Needs are constantly changing because of the advancements in science and technology, and the explosive growth in global knowledge, which are rapidly and widely disseminated. In facing these challenges, HEPs have little choice but to become dynamic learning organisations that need to continually and systematically review and monitor the various issues so as to meet the demands of the constantly changing environment,” (COPPA, pp. 30-31).

## **9. Continual Quality Assurance and Quality Improvement**

### **9.1 Continual Quality Assurance**

The HEPs are expected to provide evidence of ability to keep pace with changes in the field and requirements of stakeholders. These may be demonstrated by, but not limited to:

- (a) Curriculum review conducted at least once every three (3) to five (5) years; and need to continually and systematically monitor the curriculum.
- (b) Appointment of external reviewer for quality assessment processes;
- (c) Linkages with relevant and related industry;
- (d) Continuous review of industrial/clinical attachment/posting practices and records;
- (e) Dialogue sessions with stakeholders at least once every **two** (2) years;
- (f) Active participation of academic staff at relevant conferences, seminars, workshops and short courses;
- (g) Presentations by invited speakers, local or international; and
- (h) Organisation of conferences, seminars and workshops.

#### **9.1.1 Benchmarked Standards**

##### **9.1.1.1 Implementation**

- (a) The diploma of medical assistant programme must be implemented based on the curriculum created.
- (b) The implementation and related activities must be evaluated from time to time.

##### **9.1.1.2 Assessment**

- (a) All reports and feedback submitted by the monitoring officer **must** be evaluated by the higher college authorities/ programme evaluation committee and action for improvement shall be

proposed.

- (b) The proposal must be assessed to ascertain implementation possibility.
- (c) The programme head should be given the responsibility to implement the suitable proposal and initiate action for improvement.

#### 9.1.1.3 Action

The programme head and staff concerned **shall** act upon the proposal for improvement within the stipulated period.

#### 9.1.1.4 Reassessment –

The monitoring officer shall conduct an evaluation on the action for improvement carried out and forward a report to the higher management authorities of the institutions.

#### 9.1.1.5 Feedback -

The higher management institutions authorities/ programme evaluation committee **must** study the reports forwarded and give feedback to the programme head for further action

#### 9.1.1.6 Student Progress Monitoring

- (a) The student performance progress **must** be monitored and remedial action for improvement must be taken from time to time by the tutor/ team coordinator.
- (b) Students facing learning problems **must** be assisted and referred to the counsellor.
- (c) Student with **discipline** problem must be managed according to **institutions policy and procedure.**

### 9.1.2 Enhanced Standards

Training audit **shall** be carried out by the department with cooperation from the Malaysian Medical Assistant Board (MAB) periodically to ensure all students who graduate are of high quality.

## 9.2 Quality Improvement

### 9.2.1 Benchmarked Standards

- 9.2.1.1 The department **must** supports and compliments the HEP's policies, procedures and mechanisms for regular reviewing and updating its

structures, functions, strategies and core activities to ensure continuous quality improvement. Identify those responsible for continual quality improvement within the department.

- 9.2.1.1 The department **must** supports and compliments the HEP's policies, procedures and mechanisms for regular reviewing and updating its structures, functions, strategies and core activities to ensure continuous quality improvement. Identify those responsible for continual quality improvement within the department.
- 9.2.1.2 The department **must** have the contribution and participation of MAB towards improvement of the programme.
- 9.2.1.3 The department **must** have policies, strategies, plans, procedures and mechanisms to review and update its mission, structures and activities.
- 9.2.1.4 The department **must** explain the frequency of reviews undertaken and the result of improvements
- 9.2.1.5 The department **must** have the recent and projected activities undertaken with the purpose to ensure that the department remains responsive to its changing environment.

## 9.2.2 Enhanced Standards

- 9.2.2.1 The department **should** describe the role, the effectiveness and status of the person or unit responsible for internal quality assurance of the department. He/she must monitor the development of the quality management in the college from time to time, and he will report and discuss with the higher management.
- 9.2.2.2 The department **should** have a plan of action to build a culture of quality and rectify short fall /outlier status.
- 9.2.2.3 The department **should** have the training road map of the academic staff
- 9.2.2.4 The department **should** have continuous professional development activity.
- 9.2.2.5 The department **should** have quality unit to facilitate all quality improvement activities and plan for implementation of all new quality initiative.
- 9.2.2.6 The department **should** have succession planning for academic and management staff development.

**PROGRAMME AIMS FOR MEDICAL ASSISTANT EDUCATION PROGRAMME****DIPLOMA IN MEDICAL ASSISTANT**

Diploma level education comprises of theory and practical, and stresses on the instillation of values, ethics and attitudes as well as aims to:

- (i)** prepare knowledgeable, safe and competent practitioners in medical and health sciences;
- (ii)** generate graduates who are able to contribute effectively in the community;
- (iii)** inculcate professional attitudes, ethical conducts and social responsibilities;
- (iv)** prepare graduates who are creative, innovative, sensitive and responsive towards the community, culture and environment;
- (v)** develop graduates with coordination, teamwork, communication and social skills;
- (vi)** equip graduates with most recent clinical, technical, scientific and problem-solving skills;
- (vii)** equip graduates with Information and Communication Technology (ICT) and entrepreneurial skills; and
- (viii)** instill awareness of lifelong learning in graduates.

## LEARNING OUTCOMES FOR MEDICAL ASSISTANT EDUCATION PROGRAMME

This particular section of the Programme Standards provides the benchmark learning outcomes for the field of study in medical and health sciences. Where possible, distinctions are made in the larger subgroup at the varying levels of qualification.

At the end of the programme, graduates should be able to:

### 1. SAFETY

- (a) Conduct a holistic, safe, competent and comprehensive care intervention according to patient safety requirements and regulations.
- (b) Apply knowledge and skills to ensure safety and health in workplaces and community.
- (c) Plan and recommend preventive and corrective measures in patient and staff safety and health.

### 2. LEGAL, ETHICS AND CODE OF CONDUCT

Comply to the legal, ethical principles and professional code of conduct of the medical assistant.

### 3. CULTURAL AND RELIGIOUS

Demonstrate sensitivity, respect and responsibility towards religion, community, culture and environment.

### 4. PLAN OF CARE

- (a) Identify health problems and needs at individual, group and community based on relevant epidemiological, environmental, behavioural and socio-cultural perspectives.
- (b) Develop plan of care intervention, patient education, promotion, prevention and rehabilitation incorporating critical and lateral thinking to prevent undue health problems.
- (c) Demonstrate appropriate assessment techniques and interpret findings.
- (d) Formulate, prescribe, monitor and re-evaluate patient assessment and treatment plans throughout the course of treatment.
- (e) Recognise emergency events, complications and refer appropriately.

## **5. COMMUNICATION**

- (a) Communicate, collaborate and disseminate information effectively with peers, other healthcare professionals, scholarly community, stakeholders and the society at large.
- (b) Present information or findings coherently either in verbal or written forms with patients, their family and care provider.

## **6. RESEARCH AND EVIDENCE BASED PRACTICES**

- (a) Inculcate evidence-based scientific principles in discussing ideas of improvement in patient care, safety and health.
- (b) Participate in research activities related to medical and health sciences and present the information and findings coherently.
- (c) Recognise health care problems to assist in providing solutions.
- (d) Implement policies, regulations and guidelines and make recommendations for improvement where necessary.

## **7. LIFELONG LEARNING**

Apply skills and principles of lifelong learning in academic and career development.

## **8. TECHNICAL AND SCIENTIFIC KNOWLEDGE**

- (a) Describe, interpret, demonstrate and apply technical and scientific knowledge and skills in enhancing patient care, prompt and accurate documentation.
- (b) Demonstrate problem solving, critical thinking and clinical reasoning skills.
- (c) Perform extended and expanded role, validate and refer findings competently.
- (d) Provide progressive, innovative and creative ideas and strategies to address challenges and concerns within the profession.

## **9. TECHNICAL COMPETENCIES**

- (a) Assist in advance medical and health care procedures.
- (b) Continuous updating of latest technical competencies

## **10. MANAGEMENT**

Coordinate and manage health care activities effectively

## **11. HEALTH PROMOTION**

- (a)** Conduct, evaluate and implement health promotion programmes and activities related to medical and health sciences.
- (b)** Collaborate and communicate effectively with other healthcare professionals and the community on medical and health care in sustaining optimum health.

## **12. COUNSELING**

Counsel patients in a caring, empathic and culturally-sensitive manner.

## **13. QUALITY ASSURANCE**

- (a)** Demonstrate capacity building through excellent leadership and teamwork.
- (b)** Plan, manage and execute quality management system and Best Practices.

## **14. PROBLEM SOLVING**

- (a)** Identify technical errors, perform troubleshooting and execute problem solving protocol.
- (b)** Incorporate problem-solving principles and evidence-based practice in decision making of patient/client management.

## COURSE CONTENT FOR MEDICAL ASSISTANT EDUCATION PROGRAMME

### 1. DIPLOMA OF MEDICAL ASSISTANT COURSE CONTENT

This section of the Programme Standards contains specific benchmarked requirement pertaining to the structure and delivery of a programme for Medical Assistants. For the purposes of this Guidelines for accreditation of programmes offered by HEP's, the term 'curriculum design and delivery' is used interchangeably with the term 'programme design and delivery'. 'Programme ' means an arrangement of courses that are structured for a specified duration and learning volume to achieve the stated learning outcomes and usually leading to an award of a qualification. (COPPA, pp.12)

#### 1.1 CRITERIA

a)	<b>Credit System</b>	
The organization <b>must</b> use <b>Notional Credit Hours (NC)</b> in line with the MQA requirement. The Notional Credit is proposed as the standard unit and takes into account all academic related activities performed by the student regardless of the teaching mode. Student independence learning should not be more than 65% of the total guided and independence learning		
(i)	Minimum Graduating Credit	<b>90 credits</b>
(ii)	Range of Credit	<b>90 – 110 credits</b>
(iii)	Theory and practical	<b>1 NC = 40 hours of Student Learning Time (SLT)</b>
(iv)	Clinical	<b>1 NC practical skills = 60-80 hours of Student Learning Time (SLT)</b>
*6-8 hours of active learning x 5 days x 2 weeks Example: (6-8 x (5 x 2) = 60-80 SLT = 1 NC for clinical practice only) *minimum 6 hours and maximum 8 hours		
b)	<b>Breakdown of Programme</b>	
The programme shall comprises of 5 modules as follows:		
	<b>Field</b>	<b>Percentage</b>
1.	Compulsory Modules	10-13
2.	Basic Medical Sciences (Core Modules)	10-15

3.	Professional Modules (Core Modules)	45-50
4.	Clinical Placement (Core Modules)	20-30
5.	Elective modules	1-4
		100%

## 1.2 PROGRAMME STRUCTURES

Theoretical teaching is classroom based delivery of theory whilst practical teaching includes lab based teaching, demonstration, site visits/field trips, simulated clinical teaching, but does not include posting, industrial attachment, clinical placement and professional development training.

No.	Levels		Subject	Theory Credit (Minimum)
1.	Basic Medical Sciences	1.1	Anatomy & Physiology	6
		1.2	Bioscience	2
		1.3	Microbiology/Parasitology	2
2.	Professional Module	2.1	Medical	10
		2.2	Emergency Medicine	8
		2.3	Surgical	8
		2.4	Public Health	8
		2.5	Orthopedic	4
		2.6	Nursing	4
		2.7	Pharmacology	4
		2.8	Behaviour Science	2
3.	Clinical Placement	3.1.	Medical Placement	3
		3.2.	Surgical Placement	2
		3.3.	Community Health Placement	4
		3.4.	Psychiatry Placement	2
		3.5.	Emergency Placement	6

		3.6.	Labour Room Placement	1
		3.7.	Operation Theatre Placement	1
		3.8.	Orthopedic Placement	2
		3.9.	Paediatric Placement	1
		3.10.	Otorhinolaryngology Placement	1
		3.11.	Ophthalmology Placement	1
4.	<b>Compulsory Module</b>	4.1	Bahasa Kebangsaan	3
		4.2	Pengajian Islam/Moral	3
		4.3	Pengajian Malaysia	3
		4.4	In accordance to the HEP's requirement	1-4
5.	<b>Elective modules</b>	5.1	In accordance to the programme requirement	1-3
			TOTAL	95

## 2. NON-EXHAUSTIVE LIST OF ELECTIVE SUBJECT

### 2.1 Elective Subject group A

No.	Subject	Credit
1.	Government and Organizational Behaviour	2
2.	Health Legislation	3
3.	Human Relation and Behaviour	2
4.	Occupational Health and Safety	3
5.	Plantation Social and Health Issues	3
6.	Legal Procedures	2
7.	Information and Report Writing	2
8.	Computer Skills – Application Packages	2
9.	Career Development in Health Department	2
10.	Health Education	2

11.	Ethics and Law for Health Professionals	2
12.	Quality Management & Hospital Accreditation System	2
13.	Health Care Programme Planning and Evaluation	3
14.	Organisational Development and Transformation	2
15.	Quality Assurance and Improvement	2
16.	Health Safety, Emergency and Crisis Management	2
17.	Health Education and Promotion	3
18.	Health Communications Skills	3
19.	ICT and Information Management Skills	3
<b>2.1</b>	<b>Elective Subject group B - Electives including Humanities Group B (to choose 1 only)</b>	
<b>No.</b>	<b>Subject</b>	<b>Credit</b>
1.	<b>Community Services (Medical Care Project)</b>	<b>1</b>
2.	Swimming	1
3.	Cultural Studies	1
4.	Public Speaking	1
5.	Professional Morals and Ethics	1
6.	Non-governmental Organizations associated to health	1
7.	Time Management	1
8.	Corporate Culture	1
9.	Islamic Studies	1
10.	Inventory Management	1
11.	Human Resource Management	1
12.	Filing Systems	1

## GUIDELINES FOR IMPLEMENTATION OF ASSESSMENT IN MEDICAL ASSISTANT EDUCATION PROGRAMME

### DIPLOMA IN MEDICAL ASSISTANT

#### 1.1 Minimum passing CGPA of 2.00

- (a) Assessment **must** be of continuous and summative assessment. Student therefore must achieve:
- (b) Ratio of assessment should be divided as below:
  - (i) Continuous/formative assessment: 20-30% (with minimum passing mark of 50% from total percentage)
  - (i) Final assessment (Summative): 70-80% (with minimum passing mark of 45% from total percentage)
  - (ii) Minimum cumulative marks of both (continuous/formative and summative assessment) must not be less than 50% (Grade C)
- (c) Methods and tools must be used appropriately to assess the learning outcomes and competencies.
- (d) Assessments modes should include:
  - (i) Theory – Multiple Choice Questions (MCQ), Short Essay Questions (SEQ), Mixed/Modified Essay Questions (MEQ).
  - (ii) Project Report, Case Study or Case Presentation.
  - (iii) Skill – clinical examination, case clerking, Objective Structured Clinical Examination (OSCE) or Objective Structured Practical Examination (OSPE) or other means which may be introduced by the institutions or MAB from time to time.
  - (iv) Selection of question must strictly adhere to Test Specifications Schedule (JSU) / Questions Specification Schedule (JSS) as stipulated by each learning institution and approved by MAB.
- (e) There must be a mechanism to ensure validity, reliability, consistency and fairness of the assessment methods according to Assessment Guidelines of the Institution.
- (f) There must be a mechanism to qualify the student to sit for the examination and must be consistent with MAB requirement as stipulated in **Appendix 5**.

- (g) The assessment system must be reviewed at appropriate scheduled intervals.
- (h) The final examination must be conducted by examiners appointed by MAB and shall be held in such time and place, subject to such condition as may be determined by MAB from time to time as stipulated in **Appendix 9**.
- (i) Final written examination **should be** examined by MAB appointed examiners among academic staff with at least one external examiner.
- (j) Final clinical examination must be examined by MAB appointed examiners with one external examiner.

## QUALIFICATION FOR MEDICAL ASSISTANT BOARD EXAMINATION

Diploma in Medical assistant course student shall meet the eligibility requirements to sit for the examination. The requirements are as follows:

### 1. ELIGIBILITY REQUIREMENTS

The requirements are:

- 1.1 Satisfactorily complete not less than 80% of clinical work schedule (subjected to the related disciplines)
- 1.2 Took all the formative assessment specified by the discipline except permitted otherwise by head of programme.
  - a) Complete all assignments (either project or written) scheduled by the subject lecturer.  
(Candidates who fail to complete the tasks are required to complete the task within 1 (one) week from the date of the meeting of qualifications. Student who fail to do so will be barred from the examination)
  - b) Sit for all tests (written/oral) that is scheduled as a formative assessment.  
(Candidates who fail to sit for all tests (written / oral) that is scheduled as a formative evaluation **must** be barred from the examination)
- 1.3
  - a) Achieve 100% attendance during the period of study for each course code for each semester unless with permission /approval from the Director of College/ Principal /Program Director/Head of Programme/Programme Coordinator. Authorization/ approval are required to be verified by the MAB (LPP).
  - b) Students who fail to achieve 100% attendance without permission /approval from the Director of College/Principal/Program Director/Head of Programme /Programme Coordinator shall replace the number of hours that the student is lacked. Candidates who fail to fulfill the number of hours will be barred from the examination.
- 1.4 Achieved good performance reports with at least on a scale of 3-5 for each monitoring aspect at the end of the semester / clinical placement / practical session. Performance report should covers;
  - a) Attendance
  - b) Discipline
  - c) Participation in class or activity
  - d) Personality

Performance Scale

1 – Weak

2 – Average

3 – Satisfactory

4 – Good

5 – Excellent

**1.5** Free of any disciplinary action

**1.6** Approved by the examination committee and endorsed by the Malaysian Medical Assistant Board.

## **2. FAILURE TO MEET REQUIREMENTS**

**2.1** Candidates who fail to meet the requirements of summative examinations for the related subjects need to repeat the semester or the entire semester if involving more than two subjects.

## **3 DEFERMENT OF EXAMINATIONS**

Consideration for the postponement of the examination can be done with the following conditions

**3.1** Candidates who are unable to sit summative examination due to health reasons or other emergency on the day he/she was scheduled to sit for examination with consent/permission /approval from the Director of College / Principal / Program Director / Head of Programme / Programme Coordinator. Consent /permission / approval must be endorsed by the MAB. Candidates should be scheduled for a repeat examination at the appropriate time with the academic calendar / schedule of study.

**3.2** Adjournment on medical grounds must be supported by certification from a government registered medical practitioner who treats the candidate.

**3.3** If the candidate is not in the permissible health condition to sit for the repeat examination, the candidates are allowed to repeat the semester with the consent/permission /approval from the Director of College / Principal / Program Director/ Head of Programme / Programme Coordinator. Consent/permission /approval must be endorsed by the MAB.

**3.4** Delay cause by other reasons must obtain the consent / permission / approval from the Director of College / Principal /Program Director / Head of Programme / Programme Coordinator. Consent / permission / approval must be endorsed by the MAB.

#### **4. CONFIRMATION OF ELIGIBILITY**

Endorsement of qualifications for candidates to sit for summative examinations should be conducted at least seven days from the date of first examination.

- 4.1** Candidates who meet the eligibility requirements to sit for the examination should be listed and submitted to the MAB for final review.
- 4.2** Candidates who do not meet the eligibility requirements to sit for the examination should be listed and submitted to the MAB for verification
- 4.3** List of candidates who are eligible and not eligible to sit for the examination should be displayed for at least seven days from the date of first examination

**APPOINTMENT AND TERM OF REFERENCE OF HEAD EXAMINER/EXTERNAL EXAMINER/INTERNAL EXAMINER/EXAMINATION MONITORING OFFICER FOR THE MEDICAL ASSISTANT BOARD EXAMINATION (MEDICAL ASSISTANT EDUCATION PROGRAMME)**

All Medical Assistant Board Examination shall be conducted with the cooperation and monitoring by the Medical Assistants Board. Appointment of Head of Examiner / External Examiner / Internal Examiner / Examination Monitoring Officer for the Medical Assistant Board Examination must be consented by the Medical Assistants Board. Terms of Reference of the elected officers are as follows:

**1. HEAD EXAMINER / EXTERNAL EXAMINER**

- 1.1** Appointed by the Secretary of the Medical Assistants Board or by the authorised proxy among the lecturers/ Ministry of Health officials who is qualified and experienced in the affairs of Medical Assistant Board Examination.
- 1.2** Lecturer/officer appointed as Head of Examiner is automatically appointed as External Examiner.
- 1.3** Head of Examiner is responsible to lead the OSCE/OSPE examination or any other examination considered equivalent.
- 1.4** Head of Examiner is also responsible to lead and coordinate the marking of examination answer scripts.
- 1.5** To facilitate the Examination Monitoring Officer from MAB during the examination and moderation of the examination answer scripts
- 1.6** External examiners are responsible to check the validity of the examinations carried out, especially when there are disputes about the process of examination and marking of examination answer scripts.
- 1.7** External examiners are responsible to review the answer scripts of candidates who score above 90%, and the answer scripts of candidates who fail the paper.
- 1.8** External examiners are responsible to provide comments and make necessary marks corrections on the answer scripts.
- 1.9** External examiners are required to submit a report to the MAB regarding examinations process conducted by the college
- 1.10** College may recommend suitable external examiner names to the MAB, however, MAB decision is final.

**2. EXAMINER**

- 2.1** Appointed by the Secretary of the Medical Assistants Board or by the authorised proxy among the lecturers/ Ministry of Health officials who is qualified and experienced in the affairs of Medical Assistant Board Examination.

- 2.2** Examiners are responsible for carrying out the OSCE/OSPE examination or any other examination considered equivalent as directed by the Head of Examiner
- 2.3** Examiners are responsible to mark the examination answer scripts as directed by the Head of Examiner.
- 2.4** To cooperate with the Examination Monitoring Officer from MAB during marking and moderation of the examination answer scripts
- 2.5** Colleges are required to suggest suitable names to the MAB to be selected and confirmed. However, MAB decision is final.

### **3. EXAMINATION MONITORING OFFICER**

- 3.1** Appointed by the Secretary of the Medical Assistants Board or by the authorised proxy among the Medical Assistant Board officials who is qualified and experienced in the affairs of Medical Assistant Board Examination.
- 3.2** Names of the officials should be proposed by the Deputy Head of Assistant Medical Officer or the Head of Assistant Medical Officer Education Unit.
- 3.3** Monitoring the written/practical examination conducted by medical assistant colleges.
- 3.4** Review of examination questions and direct the Head of Examiner/Head of Invigilator to make an announcement if there is a need for correction.
- 3.5** Responsible for monitoring the implementation of OSCE/OSPE examination or any other examination considered equivalent.
- 3.6** Review the questions and the checklist provided and inform head of examiner to take action if there is a need for corrective.
- 3.7** Give suggestions or make a comment related to the implementation of examination to MAB
- 3.8** Conduct moderation of examination answer scripts and make comments or marks corrections if necessary.
- 3.9** Direct the head of examiner to review the answer scripts if there is doubt about the marks given.
- 3.10** Prepare a report of moderation for Secretary of Medical Assistant Board.

## ENTRY QUALIFICATION FOR SELECTION OF STUDENT IN MEDICAL ASSISTANT EDUCATION PROGRAMME

1. Passed Sijil Pelajaran Malaysia or its equivalent with a minimum of 5 (five) credits in the following subjects:
  - 1.1 Bahasa Malaysia
  - 1.2 2 (two) from either Science or Mathematics subject (Biology/Chemistry, General Science/Applied Sciences, Mathematics/Additional Mathematics) preference 1 from each category of subject and;
  - 1.3 2 (two) from any other subjects
  - 1.4 Pass in English (preference to be given to those with credit in English); **OR;**
2. Passed Sijil Pelajaran Malaysia or its equivalent with a minimum of 3 (three) credits in the following subjects:
  - 2.1 Bahasa Malaysia
  - 2.2 1 (one) from Mathematics or Science subjects (Biology/Chemistry, General Science/Applied Sciences, Mathematics/Additional Mathematics)
  - 2.3 1 (one) from any other subjects
  - 2.4 Posses a certificate in related field from a recognised programme by government of Malaysia (Community Nurse, Dental Surgery Assistant, Public Health Assistant, Health Sciences Certificate) and;
  - 2.5 Pass in English (preference to be given to those with credit in English). **OR;**
3. GCE O Level or equivalent with 5 (five) credits in the following subjects:
  - 3.1 2 (two) from science or Mathematics subject (Biology/Physics/Chemistry/General Science);
  - 3.2 3 (three) from any other subjects ; and
  - 3.3 Pass in English.
  - 3.4 Malaysian citizen are required to pass in Bahasa Malaysia at Sijil Pelajaran Malaysia level for the purpose of registration with MAB.
4. Students shall be certified medically fit by a registered medical practitioner recognized by the recruiting institution and free from:

- 4.1** Mental illness
- 4.2** Physical and sensory disability
- 4.3** Infectious diseases (HIV-AIDS, Hepatitis B and C, etc.)
- 4.4** Epilepsy
- 4.5** Genetic diseases
- 4.6** Drug abuse

## ACADEMIC STAFF QUALIFICATIONS FOR MEDICAL ASSISTANT EDUCATION PROGRAMME

The qualifications of academic staff for Diploma Programme are as follows

### 1.1 HEAD OF PROGRAMME/PROGRAMME COORDINATOR

Program Head and team of academic staff responsible for the planning, implementation, evaluation and improvement of the programme. Head of Programme **must** possess

- a) Diploma of Medical Assistant or equivalent **with** Bachelors Degree in related field **OR** other degrees approved by MAB with minimum of 3 (three) years working experience as an Assistant Medical Officer.
- b) Preference should be given to those with working experience **in** Medical Assistant Training Institution or other learning institutions.
- c) Preference should be given to candidate with experience as head of training institution.

### 1.2 TEACHING:

- a) Diploma of Medical Assistant or equivalent with Bachelors Degree in related field OR other degree approved by the MAB with minimum of 3 (three) years working experience; **OR**
- b) Diploma of Medical Assistant with minimum 6 years working experience as an Assistant Medical Officer and posses post-basic certificate in related field. Number of academic staff appointed under these criteria should not be more than 30% from the total number of teaching staff appointed. (Academic staff appointed under this criteria should proceed for bachelor degree within 3 years of appointment): OR
- c) Recognised Degree in Related field such as;
  - (i) Bachelor of Emergency Medical Sciences,
  - (ii) Bachelor in Emergency Paramedic Sciences,
  - (iii) Bachelor in Clinical Medical Care (Anaesthesiology, Nephrology, Peri-Operative, Orthopaedic, Forensic, Quality Management, Psychiatry, etc)
  - (iv) Bachelor in Primary Healthcare,
  - (v) Bachelor in Biomedicine,
  - (vi) Bachelor of Pharmacy,

- (vii) Bachelor of Radiography/therapy
- (viii) Bachelor in Medical Sciences,
- (ix) Bachelor of Occupational Therapy
- (x) Bachelor of Occupational Safety and Health
- (xi) Bachelor of Physiotherapy
- (xii) Bachelor in Sport Sciences,
- (xiii) Bachelor in Forensic Sciences
- (xiv) Bachelor of Nursing Sciences, OR
- (xv) Other recognised degree approved by the Medical Assistants Board.

**Number of academic staff appointed under this criteria is 1 (one) for each discipline but not exceeding total number of 3 (three) for the whole program (6 semesters) OR with ratio 3:1 between category (a), (b) and (c) and this category.**

- d) The ratio between full time and part time teaching faculty is 3:2 (for core subject only)
- e) Guest lecturer in areas of specialties in professional modules  $\pm 10\%$ .
- f) Full time academic staff – student ratio is 1:25
- g) Part time academic staff with minimum contract of 1 year - student ratio is 1:25

### **1.3 CLINICAL INSTRUCTOR (CI)**

- a) Diploma in Medical Assistant or equivalent with at least 3 years working experience as Assistant Medical Officer preferably with a Post Basic Certificate in related field. OR;
- b) Diploma in Medical Assistant with less than 1 year experience can be appointed on probation basis as Trainee CI on condition HEP have a structured 3 years training program approved by the MAB to ensure competencies. OR;
- c) Diploma in Nursing with a least 3 years working experience as a nurse preference with post basic. (for nursing practices only)
- d) The ratio CI to student for full time is 1:15.

### **1.4 LOCAL PRECEPTORS (LP)**

- a) Diploma in Medical Assistant with minimum 3 years experience.

- b) Diploma in Environmental Health with minimum 3 years experience
- c) Diploma in Nursing with minimum 3 years experience
- d) The ratio between LP to student is 1:10. All LP must be oriented to the programme and given prior training on the role and responsibility of LP.

#### **1.5 MENTORING.**

For purpose of mentoring, the ratio of mentor student **1:20**.

#### **1.6 COUNSELLOR**

Full/part time registered counsellor or academic staff to be properly trained as counsellor

## PROGRAMME RESOURCES FOR MEDICAL ASSISTANT EDUCATION PROGRAMME

### PHYSICAL FACILITIES AND EDUCATIONAL RESOURCES

#### 1.1 Lecture Room

Lecture room **should** be able to accommodate not more than 150 students/room and must be conducive for teaching and learning activities.

Facilities of Lecture Room:

- a) Appropriate furniture.
- b) IT facilities(Notebooks/PC's, Projector and screen)
- c) Audio visual facilities
- d) White Board and Notice Board
- e) Appropriate ventilation - Air-condition/fan/exhaust fan
- f) Lighting – Well lighted for learning purpose.

#### 1.2 Tutorial Room

Tutorial room **should** be able to accommodate 20 students per room and should be conducive for tutorial activities.

Facilities of Lecture Room:

- a) Table And Chair
- b) IT facilities (Notebooks/PC's, Projector and screen)
- c) Audio visual facilities
- d) White Board and Notice Board
- e) Appropriate ventilation - Air-condition/fan/exhaust fan
- f) Lighting – well lighted for learning purpose.

#### 1.3 Skill/Clinical laboratory

Equipments and facilities for training **must** be adequately provided for in practical-based programs. Clinical Laboratories should be able to accommodate 60 students with basic teaching aids facilities.

Facilities of Clinical Lab:

- a) IT facilities
- b) Audio visual facilities
- c) Model and **Teaching Aids** base on the programme requirement.  
(Teaching Aids are inclusive of all equipment/set to be use by AMO in clinical area)
- d) White Board and Notice Board.

- e) Flip Chart and Stand.
- f) Appropriate ventilation - Air-condition/fan/exhaust fan.
- g) Video camera and projector.
- h) Well lighted for learning purpose.

#### **1.4 Examination Unit Room**

Room **must** be suitable and secure with essential facilities. Facilities for Examination Unit:

- a) Question Bank room (well secured)
- b) Photocopy machine and Collator
- c) Paper Shredder
- d) IT Facilities
- e) Printer & Scanner
- f) Locked Metal Filing Cabinet
- g) Optic Mark Reader Machine
- h) White Board and Notice Board
- i) Appropriate ventilation - Air-condition/fan/exhaust fan

#### **1.5 Examination Hall**

Preferably able to accommodate minimum 70 students, OR class room to be converted to as Examination hall.

#### **1.6 Counseling Room**

- a) Counseling room at suitable location
- b) Appropriate furniture.
- c) Conducive environment with privacy, harmony and cheerful environment

#### **1.7 Computer Laboratory / Linguistic Laboratory**

The HEP **must** have a policy regarding the selection and effective use of electronic devices, internal and external networks, and other effective Means of using information and communication technology in the program. This includes coordination with the library services.

- a) Room which can accommodate 30-40 students
- b) Computer – One (1) computer for 10-15 students
- c) Computer table and chair
- d) Monitor should be ergonomically positioned
- e) One unit scanner
- f) Headphone

- g) Linguistic computer software
- h) LAN & WAN Computer line
- i) Compliance to OSHA requirement
- j) Air-conditioning room

### 1.8 Library

The library or resource centre **must** have adequate and up-to-date reference materials and qualified staff that meet the needs of the program and research amongst academic staff and students. This would include provisions for appropriate computer and information and communication technology-mediated reference materials.

- a) Should be able to accommodate 30% of the student at one time
- b) Number of books – 1 student to 10 books (1:10)
- c) Multimedia room – can accommodate 5-10 students
- d) Sufficient Computer engine search base on requirement
- e) Photocopy Machine
- f) Cubicle reading room
- g) Open Cubicle Rack - 30% of Library capacity
- h) Appropriate ventilation and should be air-conditioned
- i) Lighting – well lighted for learning purpose

### 1.9 Clinical Practice Areas

- a) Placements area should be audited to ensure suitability and cover the intended disciplines.
- b) The provision of supervised practice should meet the demand of the programme.
- c) Students should be provided with comprehensive and coordinated program information for placements.
- d) Adequate number of patients and sufficient placements are available to meet the programme outcomes and cover the range of the placements required.
- e) Hospital must have;
  - i) Enough disciplines to meet the student's learning objectives.
  - ii) Ratio of student to patients should be 1:2. Level of patient care must correspond with the students' required learning experience.
  - iii) Male students must at all times must be chaperoned by the female students or staff
  - iv) At all times consent from the patient should be sought on doing or observing the procedures
- f) Clinical Placement should include the following disciplines:

- i) Medicine
- ii) Surgery
- iii) Orthopedic
- iv) Emergency and Trauma
- v) Paediatrics
- vi) Obstetrics and Gynecology
- vii) Ophthalmology
- viii) Otorhinolaryngology (Ear, Nose and Throat)
- ix) Psychiatry
- x) Operation Theatre
- xi) Haemodialysis
- xii) Community Health Clinic
- xiii) **Optional Discipline**
  - Cardiac Care Unit
  - Intensive Care Unit
  - Geriatrics
  - Urology
  - Oncology
  - Nephrology
  - Cardiology / Cardiothoracic

#### **1.10 Transportation**

Number of vehicle – sufficient to provide transportation of small group of students

#### **1.11 Audio Visual Aid Room**

- a) College to have one own Resource Room.
- b) Room to be suitable for the storage of electronic teaching aids.

#### **1.12 Prayer Room for Muslim student**

To be made available to Muslim students.

#### **1.13 Hostel For Students**

In house accommodation to be made available to students.

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