

**Guidelines on**

**Writing a Progress Report**

Post Accreditation Period

# By NCAMC

# Feb 2024

# Definition

A progress report is a document that an accredited (full or conditional) medical college should submit to the National Council for Accreditation of Medical Colleges within a defined time after the accreditation decision.

# Timeline for submitting the Progress Report

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Accreditation decision | 1st  year | First Follow-up  progress Report | 2nd  Year | 3rd  Year | 4th  Year | Second  Progress Report | 5th  year | **6th**  **year** | **Resubmit for Accreditation process** |

## **First Report (follow-up Progress Report)**

Submitted at the end of the first year following the accreditation decision (full or conditional) and include.

* First Report Follow-up Template I (Standards Checklist form)

## **Second Progress Report**

It should be submitted Before the end of 4th year for a fully accredited medical college from the first accreditation decision.

* Progress Report Template I (Standards Checklist form)
* Progress Report Template II (Program Major Changes)

The standards checklist includes all the standards, whether achieved or not achieved, in the accreditation decision report.

Progress Report Template I

Medical College Logo

1st/4th-year Progress Report

Post Accreditation Period

# Checklist Form\*

|  |  |
| --- | --- |
| University Name |  |
| College Name |  |
| Report Date |  |

|  |  |  |
| --- | --- | --- |
| **Area** |  | |
| **Standards** |  | |
|  | Evidence  "Describe in brief the type of Evidence you provide." | Annex No. |
| **Present** |  |  |
|  |  |  |
| **Applied** |  |  |
|  |  |  |
| **Effective** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

\*This checklist based on the report to the college by NCAMC at time of accreditation decision

This report was approved by the College Council of "College Name" and "University Name".

Medical College Stamp

Dean Name

Signature

Date

Progress Report Template II

Medical College Logo

4th-year Progress Report

Post Accreditation Period

# Program Major Changes

|  |  |
| --- | --- |
| University Name |  |
| College Name |  |
| Report Date |  |

|  |  |
| --- | --- |
| Section 1 |  |
| Criteria | **The medical college must state any change in the length or format of the program.** |
| Guidance | The medical college must provide an old and updated version of the curriculum stating the program's format and length. |
| Answer |  |
| List of Evidence |  |

|  |  |
| --- | --- |
| Section 2 |  |
| Criteria | **The medical college must state any significant change in educational outcomes and mission.** |
| Guidance | The medical college must provide an updated mission and outcome in addition to the old, stated mission and outcome at the time of decision. |
| Answer |  |
| List of Evidence |  |

|  |  |
| --- | --- |
| Section 3 |  |
| Criteria | **The medical college must state any change in student numbers relative to resources.** |
| Guidance | the medical college must support old and new student intake strategies and how the resources will fit with new intake, if any. |
| Answer |  |
| List of Evidence |  |

|  |  |
| --- | --- |
| Section 4 |  |
| Criteria | **The medical college must state that any significant resource reduction leads to an inability to achieve the program's purpose and/or outcomes.** |
| Guidance | **The medical college must support evidence of maintenance and enrichment of its resources to support achieving its program (including Staff, infrastructure, laboratories, libraries, clinical teaching facilities and others)** |
| Answer |  |
| List of Evidence |  |

This report was approved by the College Council of "College Name" and "University Name".

Medical College Stamp

Dean Name

Signature

Date