

Higher Education Review Unit Programmes-within-College Reviews Report

Bachelor of Science in Nursing Programme
School of Nursing & Midwifery
RCSI- Medical University of Bahrain
Kingdom of Bahrain

Date Reviewed: 15 -18 October 2012

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Acronyms

ABN	An Bord Altranis
BDF	Bahrain Defence Force
BSc Nursing	Bachelor of Science in Nursing
BSN Bridging	Bachelor of Science in Nursing Bridging
ECTS	European Credit Transfer System
GCC	Gulf Cooperation Council
HEC	Higher Education Council
HERU	Higher Education Review Unit
HR	Human Resource
ILO	Intended Learning Outcome
MSc Nursing	Masters of Science in Nursing
NGP	Nursing Graduate Profile
NUI	National University of Ireland
OSPE	Objective Structured Practical Examination
PDR	Performance and Development Review
QA/QI	Quality Assurance/Quality Implementation
NAQQAET	National Authority for Qualification and Quality Assurance of Education and Training
QAC	Quality Assurance Committee
QEO	Quality Enhancement Officer
RCSI Dublin	Royal College of Surgeons in Ireland
RCSI-MUB	Royal College of Surgeons in Ireland - Medical University of Bahrain
SCARs	Student Clinical Assessment Records
SER	Self-Evaluation Report
SMC	Salmaniya Medical Complex
SNAC	School of Nursing Academic Committee
SON&M	School of Nursing & Midwifery
VLE	Virtual Learning Environment
WHO	World Health Organization

1. The Programmes-within-College Reviews Process

1.1 The Programmes-within-College Reviews Framework

To meet the need to have a robust external quality assurance system in the Kingdom of Bahrain, the Higher Education Review Unit (HERU) of the National Authority for Qualification and Quality Assurance of Education and Training (NAQQAET) has developed and is implementing two external quality review processes, namely: Institutional Reviews and Programmes-within-College Reviews which together will give confidence in Bahrain's higher education system nationally, regionally and internationally.

Programmes-within-College Reviews have three main objectives:

- to provide decision-makers (in the higher education institutions, the NAQQAET, the Higher Education Council (HEC), students and their families, prospective employers of graduates and other stakeholders) with evidence-based judgements on the quality of learning programmes
- to support the development of internal quality assurance processes with information on emerging good practices and challenges, evaluative comments and continuing improvement
- to enhance the reputation of Bahrain's higher education regionally and internationally.

The *four* indicators that are used to measure whether or not a programme meets international standards are as follows:

Indicator 1: The Learning Programme

The programme demonstrates fitness for purpose in terms of mission, relevance, curriculum, pedagogy, intended learning outcomes and assessment.

Indicator 2: Efficiency of the Programme

The programme is efficient in terms of the admitted students, the use of available resources - staffing, infrastructure and student support.

Indicator 3: Academic Standards of the Graduates

The graduates of the programme meet academic standards compatible with equivalent programmes in Bahrain, regionally and internationally.

Indicator 4: Effectiveness of Quality Management and Assurance

The arrangements in place for managing the programme, including quality assurance, give confidence in the programme.

The Review Panel (hereinafter referred to as 'the Panel') states in the Review Report whether the programme satisfies each Indicator. If the programme satisfies all four Indicators, the concluding statement will say that there is 'confidence' in the programme.

If two or three Indicators are satisfied, including Indicator 1, the programme will receive a 'limited confidence' judgement. If one or no Indicator is satisfied, or if Indicator 1 is not satisfied, the judgement will be 'no confidence', as shown in Table 1 below.

Table 1: Criteria for Judgements

Criteria	Judgement
All four Indicators satisfied	Confidence
Two or three Indicators satisfied, including Indicator 1	Limited Confidence
One or no Indicator satisfied	No Confidence
All cases where Indicator 1 is not satisfied	No Confidence

1.2 The Programmes-within-College Reviews Process at the Royal College of Surgeons in Ireland – Medical University of Bahrain

Programmes-within-College Reviews are specialized exercises, that focus on the academic standards of each programme and its delivery and the quality assurance arrangements within all learning programmes at Bachelor and Master levels within a college in a particular major disciplinary area. For the purposes of this Framework, while the term 'College' is used, it includes the terms 'Faculty', 'School', (or any other equivalent term) which offers a higher education programme. All programmes leading to a qualification at Bachelor or Master level are in scope and are subject to review with the exception of Masters that are done only by research. Foundation provision may also be reviewed depending on how it has been conceptualized by the institution, for example, if it functions as an extended curriculum rather than a standalone programme.

A Programmes-within-College Review of the School of Nursing & Midwifery at the Royal College of Surgeons in Ireland – Medical University of Bahrain (RCSI-MUB) was conducted by HERU of the NAQQAET in terms of its mandate to review the quality of higher education in Bahrain. The site visit took place on 15-18 October 2012 for the academic programmes offered by the school which are: Bachelor of Science in Nursing (BSc Nursing); Bachelor of Science in Nursing Bridging (BSN Bridging). The Master of Science in Nursing programme (MSc Nursing) which is under the School

of Postgraduates Studies and Research but is managed by the School of Nursing & Midwifery was also reviewed during the same period.

This Report provides an account of the review process and the findings of the Panel for the BSc Nursing programme based on the Self-Evaluation Report (SER) and appendices submitted by RSCI-MUB, the supplementary documentation made available during the site visit, as well as interviews and observations made during the review site visit.

RCSI-MUB was notified by the HERU/NAQQAET in March 2012 that it would be subject to a Programmes-within-College Review of its School of Nursing & Midwifery and School of Postgraduates Studies and Research with the site visit taking place in October 2012. In preparation for the review, RSCI-MUB conducted its self-evaluation of all its programmes and submitted the SERs with appendices on the agreed date in June 2012 and resubmitted updated statistics of the BSc Nursing programme in August 2012.

HERU constituted a panel consisting of experts in the academic field of Nursing and in higher education who have experience of external programme quality reviews. The Panel comprised three external reviewers.

This Report records the evidence-based conclusions reached by the Panel based on:

- (i) analysis of the Self-Evaluation Report and supporting materials submitted by the institution prior to the external peer-review visit
- (ii) analysis derived from discussions with various stakeholders (faculty members, students, graduates and employers)
- (iii) analysis based on additional documentation requested and presented to the Panel during the site visit.

It is expected that the RCSI-MUB will use the findings presented in this report to strengthen its BSc Nursing programme. HERU recognizes that quality assurance is the responsibility of the higher education institution itself. Hence it is the right of RCSI-MUB to decide how it will address the recommendations contained in the Review Report. Nevertheless, three months after the publication of this report, RCSI-MUB is required to submit to HERU an improvement plan in response to the recommendations.

HERU would like to extend its thanks to RCSI-MUB for the co-operative manner in which it has participated in the Programmes-within-College review process. It also wishes to express its appreciation for the open discussions held in the course of the review and the professional conduct of the faculty in the RCSI-MUB.

1.3 Overview of the School of Nursing and Midwifery

RCSI-MUB was established in 2003 under license from the Government of the Kingdom of Bahrain. RCSI-MUB is a constituent university of the Royal College of Surgeons in Ireland (RCSI Dublin). It comprises three schools, namely: Medicine; Nursing & Midwifery; and Postgraduate Studies and Research. The School of Nursing & Midwifery (SON&M) at RCSI-MUB was founded in 2006. It is an international centre serving primarily the Gulf Cooperation Council (GCC) countries but open to applicants from outside this region. The School is responsible for managing three programmes, namely: the BSc Nursing programme; the BSN Bridging programme; and the MSc Nursing programme which is placed under the School of Postgraduates Studies and Research but is managed by SON&M.

1.4 Overview of the BSc Nursing Programme

The BSc Nursing was developed collaboratively with members from the GCC countries, RCSI Dublin and with Bahraini nurse experts. The curriculum was developed in accordance with nursing regulations for Ireland and Europe. The programme is delivered with the assistance and support of the School of Nursing & Midwifery RCSI Dublin. The first intake of 32 students commenced studies for a BSc undergraduate nurse registration in October 2006. The programme graduated its first cohort of 31 graduates in May 2010, and a second cohort of 73 graduates in May 2011.

There are 389 students currently registered in the programme. The School has three cohorts of BSc Nursing graduates. Currently, there are 12 full-time teaching staff (4 PhD, 8 Master holders) attached to the programme. Five part-time teaching staff and five in the Language Culture Unit share the teaching responsibility of the nursing programmes at the SON&M.

The programme aims to produce nursing graduates with the knowledge, skills and attitudes of graduates of a centre of excellence. The graduates are expected to practice safely and effectively as professional nurses, to pursue further training and development, and to assume a leadership role in their area of practice. The SON&M has adopted an outcome-based approach in the curriculum and the developed Nursing Graduate Profile (NGP) in which a set of defined 'exit outcomes' have been agreed through consultation.

1.5 Summary of Review Judgements

Table 2: Summary of Review Judgements for the BSc Nursing Programme

Indicator	Judgement
1: The Learning Programme	Satisfies
2: Efficiency of the Programme	Satisfies
3: Academic Standards of the Graduates	Satisfies
4: Effectiveness of Quality Management and Assurance	Satisfies
Overall Judgement	Confidence

2. Indicator 1: The Learning Programme

The programme demonstrates fitness for purpose in terms of mission, relevance, curriculum, pedagogy, intended learning outcomes and assessment.

- 2.1 The aims of the programme are clearly stated and are in line with the stated mission of RCSI–MUB. The Panel examined the curriculum structure and the NGP and found them appropriate to ensure that students develop a balanced perspective of primary, secondary and tertiary care focusing on individuals, families and the community, as stated in the programme's aims and objectives. The curriculum elements and arrangements facilitate students' acquisition of a comprehensive knowledge of the principles of both the science and the art of nursing.
- 2.2 The BSc Nursing programme is a full-time nursing degree which comprises eight semesters; 18 weeks each including revision and examination weeks. The programme is delivered over a minimum of four academic years and a maximum of six academic years. The programme is semesterized and modularized; each module is a self-contained unit of learning with specific content. There are designated weeks for clinical practice based on the year of the study, the nature of the module, and the clinical requirement of the *An Bord Altranis* (ABN). 50% of students learning takes place in the primary, secondary and tertiary clinical setups which aim at the integration of knowledge and practice which one would expect to find in a BSc in nursing programme. Clinical learning experiences, starting in year one, are delivered on site in a virtual clinical ward environment and are allocated progressively to ensure integration of theory into practice.
- 2.3 There is a sequential curriculum plan; there are modules in humanities, language and sciences in year one, which provide the foundation needed to learn nursing modules. The Panel examined the submitted documents and found the curriculum document comprehensive and well prepared. The submitted documents and interviews with administrators, faculty members, personnel from clinical areas and officials indicated that the curriculum conforms to international norms and standards of professional nursing education and satisfies the requirements of the Office of Licensure and Registration in the Ministry of Health of Bahrain.
- 2.4 The programme curriculum and the modules are planned in such a manner for students to progress from nursing care and management of healthy individuals and families to nursing care of sick individuals and their families within the context of their environment. However, the Panel is of the view that the BSc Nursing needs to be well versed in the use of advanced technology in caring for critically ill patients and for incorporating electronic medical records as part of their documentation

charting of nursing interventions and this aspect should be explicitly addressed in the 'exit outcomes'.

- 2.5 The programme uses the European Credit Transfer System (ECTS) to direct the students' learning activities and workload required to achieve the programme objectives and learning outcomes. Under ECTS, learning can take place anywhere that can be measured and can be given a credit value; the credits can be accumulated as the student progresses through the programme. The programme carries 240 credits, divided into 60 per year, and 30 credits per semester. In terms of clock hours, the programme comprises a total of 6557, approximately 10-11 hours per working day. The credit hours for each module are recorded in the Marks and Standards document. The Panel notes that the curriculum structure reflects an appropriate balance between knowledge and skills, and between theory and practice.
- In examining samples of timetables of year three, the Panel found that the number of daily face-to-face teaching hours ranges between four to seven for four days. Although the SON&M adjusted the learning load in response to students' dissatisfaction by allocating one full day for students' activities, the Panel learned from students that the learning load required by year three modules is still high. The Panel suggests that RCSI-MUB set up a plan to promote students' learning with ease particularly in year three.
- 2.7 The SON&M has adopted an outcome-based approach in the curriculum which focuses on the end product of nursing education. The NGP, referred to as the 'exit outcomes', is a set of defined learning outcomes that have been agreed through consultation and is benchmarked against the ABN and standards for nurse registration. The NGP defines the professional knowledge, skills, values and attitudes expected of nurses upon graduation and also provides a definite framework for the organization, delivery, evaluation and assessment of the nursing curriculum. The Panel appreciates the process of developing the NGP, and acknowledges its appropriateness to prepare graduates who are competent to provide safe and effective nursing care to individuals, families and to the community.
- 2.8 The programme Intended Learning Outcomes (ILOs) and their linkages to the programme's aims, mission and objectives are clearly outlined in the submitted documents. The learning outcomes are represented in the five NGP themes, which provide a framework for learning, curriculum organization, assessment and mapping the learning input and outcomes at a modular level. The Panel finds that the ILOs are appropriate for the level of the BSc Nursing degree.
- 2.9 The module ILOs are mapped to the programme ILOs, and aligned with assessment strategies which are available on the Virtual Learning Environment (VLE). Through

the examination of the submitted documents and interviewing faculty members and students, the Panel saw evidence that module ILOs guide appropriately the learning experiences and assessment tasks.

- 2.10 Over the four years of the programme, the students are introduced to the following clinical areas: Surgical, Medical, Maternity, Paediatrics, Psychiatry, Critical Care and Primary Health settings. Work-based learning begins in semester two of year one students. The number of weeks allocated for clinical practice differs from year to year according to the credits and the requirements of the clinical module. The specific work-based learning outcomes are achieved through student rotations in the clinical training areas. The achievements of programme competencies depend on the collaborative role of nurses and other health team members as clinical mentors in the different health care settings. The Panel finds that students work-based learning and assessment modalities contribute to achievement of learning outcomes, however the Panel notes that it would be useful to increase the work-based learning hours for Paediatrics, Mental Health, Maternal Health and Community Health.
- 2.11 Clinical teaching and assessment are carried out by clinical tutors. The faculty members take up the role of monitoring and facilitating the students' clinical experience. The Panel acknowledges the effort and the commitment of clinical coordinators and clinical teachers in facilitating students clinical experiences. However, it notes that the School needs to ensure that there is a more detailed formal coordination and dissemination of information among the people involved in clinical teaching to ensure equivalence of students' experiences and sharing of good practice.
- 2.12 A variety of teaching and learning strategies are employed to deliver the curriculum, such as lectures, small group tutorials, practical and small group project work, online case uploads, bedside tutorials, and self-directed learning. These strategies aim to enhance the professional development of the students and support the attainment of skills of reflection, critical thinking, reasoning, analysis, decision-making and self-directed learning. During interviews with faculty members, students, clinical coordinators, and clinical teachers, the Panel found that the teaching practices support the attainment of the ILOs and enforce students' responsibility and accountability towards attainment of learning outcomes.
- 2.13 The Assessment Working Group produces the RCSI-MUB assessment strategy that serves as a central guidance document for all policies and procedures related to assessment within the SON&M. The RCSI-MUB Examination & Assessment and Marks and Standards documents clearly define assessment practices and set out the principles and procedures that underpin assessment and the criteria for passing an examination. The Marks and Standards document and all assessment policies and procedures are revised annually and published on the VLE. Module assessment

includes formative and continuous summative assessment with high value for final summative assessment. Methods of continuous and summative assessment include a variety of approaches, such as written, oral, individual and group project, practical and clinical assessments.

- All written assessments are marked by the internal examiners and are then internally moderated. Marks are approved by the Examination Board Committee and are then ratified by the School of Nursing Academic Committee (SNAC) and the Academic Board. Students' clinical performance is monitored and assessed by their clinical tutors using Student Clinical Academic Records (SCARs) and multiple methods of clinical assessment. The whole students' assessment and evaluation process is overseen by an external examiner from the National University of Ireland. After extensive discussion with the programme team, students and cross-referencing with the submitted documentation and international experiences, the Panel found evidence that the assessment practices and modalities are appropriate and linked to the module and programme ILOs. The Panel concludes that the assessment and grading processes are transparent, fair and rigorous. Provision is made for all students to receive constructive feedback, review their examination papers and appeal their results.
- 2.15 In coming to its conclusion regarding The Learning Programme, the Panel notes, *with appreciation*, the following:
 - There is a sequential curriculum plan, where module ILOs increase in difficulty and complexity.
 - The adoption of an outcome-based curriculum delineates clearly the professional knowledge, skills and attitudes, and guides teaching and assessment practices.
 - The principles and methods used for teaching and learning facilitate students learning and ensure their responsibility and accountability towards attainment of learning outcomes.
 - The assessment and grading processes are transparent, fair and rigorous.
 - There is a systematized process of preparation and moderation of examination papers internally and externally.
- 2.16 In terms of improvement the Panel **recommends** that the School of Nursing & Midwifery should:
 - consider increasing the clinical hours for Paediatrics, Mental Health, Maternal Health and Community Health to provide students with further exposure in these areas
 - ensure that there is a more detailed formal coordination and dissemination of information among the people involved in clinical teaching.

Judgement 2.17 On balance, the Panel concludes that the programme satisfies the Indicator on The Learning Programme.

3. Indicator 2: Efficiency of the Programme

The programme is efficient in terms of the admitted students, the use of available resources - staffing, infrastructure and student support.

- 3.1 The admission requirements and admission policy of the SON&M are clearly outlined, and documentation in relation to the admission policy is satisfactory. The programme is efficient in terms of admitted students, the use of available resources, staffing, infrastructure and student support. During interviews, the Panel learned that the admission criteria are reviewed annually and revised as needed.
- 3.2 There are 389 students currently registered in the programme. There is no evidence of a formal capacity figure set by the SON&M, however, the Panel was informed during interviews, that the School can accommodate up to 500 students in total. Although the current staff-to-student ratio appears in theoretical modules to be appropriate; about 1:23, the Panel is of the view that this ratio would not be maintained with the available number of teaching staff (12 full-time and five-part-time teaching staff) if additional staff are not recruited. The Panel also notes that the staff-to-student ratio in clinical areas is about 1:4-6 and finds this to be appropriate.
- 3.3 There are clear lines of accountability in the region of management of the programme. This is evident in the organogram of the SON&M. There is also evidence of active involvement of SNAC in discussing academic issues. This is reflected in the minutes of the monthly SNAC meetings.
- There are currently 12 full-time teaching staff (4 PhD, 8 Master holders) attached to the programme, in addition to five part-time teachers and five from the Language Culture Unit within the institution. The qualifications of the teaching staff are in line with the programme's requirements and the staff members have the required qualifications and the specializations for the modules they teach. However, the teaching staff members are generally overloaded, which gives them less time to focus on research. The Panel learned that there is a plan for recruitment of additional staff members to fill the staff vacancies. However, the Panel noted that there is little evidence of an active recruitment plan, and it encourages the SON&M to give attention to this issue. Human Resource (HR) policies need to be discussed with senior management, including national recruitment and retention patterns and the place of nursing in the national work profile. It is also noted that staff members involved in teaching clinical modules do not have a formal system of ensuring that they maintain their clinical expertise.
- 3.5 Clinical tutors are identified and the necessary training is provided for them. The clinical placements are organized jointly by the Clinical Placement Officer who is

located in the RCSI-MUB campus and by the Clinical Placement Coordinators who are senior nurses in the affiliated hospitals. The Panel toured the clinical affiliation facilities in both the Salmaniya Medical Complex (SMC) and the Bahrain Defence Force (BDF) Hospital, and conducted interviews with students, clinical coordinators, and clinical teachers. The Panel acknowledges the clinical facilities and expertise at SMC, and BDF Hospital, and the highly interactive academic staff & committed clinical tutors and coordinators. Students also expressed their satisfaction with the clinical training.

- 3.6 There are clear procedures for the recruitment, appraisal, promotion and retention of academic staff as outlined in the SER. During interview sessions, staff members expressed their satisfaction with these procedures. There is also evidence of the induction programme of new staff which is consistently implemented.
- 3.7 There is a functional management information system that is stored in the Quercus data management system to enable informed decision-making. The Panel learned through interviews that all students and teaching staff have been trained and are using the system. The staff reported benefits of the system with regard to storing, exchange, and retrieval of information. The information is secured and a daily back-up in a separate disc is maintained. The Panel acknowledges the effective usage of the information and communication technology in the management of the programme.
- 3.8 There are effective policies and procedures for ensuring safe keeping of students' records and accuracy of the data and examination results. There is an implemented examination policy and procedure manual which is comprehensive and detailed and that regulates the conduct of examinations, and the management of students records and examination results.
- 3.9 The Panel toured the facilities and found that there are adequate classrooms, halls, well-equipped laboratories including a simulation laboratory, anatomy laboratory and biochemistry and microbiology laboratory. The clinical skill laboratory is well-coordinated. The Panel was impressed with the library space and its layout. There are adequate study areas and discussion rooms. The library stock of books, journals, IT infrastructure and access to e-resources are adequate. There is evidence of students' involvement in planning and designing learning spaces. There is a tracking system to determine the usage of the learning resource centre. Hourly statistics are taken on a daily basis. The Learning Resource Centre uses Athens Access Management System to determine the usage of e-resources. There is evidence of effective use of the VLE for various learning activities which includes, but is not limited to, the uploading of lecture notes.

- 3.10 There is evidence of functional and comprehensive student support services. The learning environment is conducive to expanding the students' experiences and knowledge through informal learning. All new students receive guidance and support from the welfare office, and are linked to a 'Buddy' for guidance and assistance for the first-year students to settle into university life. This was confirmed during the interviews with students. Students expressed that they are made to feel that they are part of the university community. There is evidence of adequate support and facilities to support students who have challenges with English language. Students reported a positive impact of the pre-sessional English language proficiency courses on their studies; the same was confirmed by faculty members.
- 3.11 There are arrangements in place for orienting newly admitted students. They receive a student handbook and attend orientation sessions in the first week of the academic year. Moreover, all students receive a laptop and are given special training in study skills and the use of the VLE. During interviews with students, the Panel learned that they are satisfied with the orientation programme and after examining it found it to be effective.
- 3.12 There is an administrative procedure in place to track student progress through the module coordinator, year coordinator and through the Student Welfare Office. There are systems in place for identification of students at risk and follow-up with them as detailed in the 'Professional and Academic Support Procedure' and the 'Guidelines for Contact with Nursing Students Related to Academic and Professional Issues' documents. Any student identified with academic weakness, professional misconduct during clinical placement, disciplinary issues or with personal difficulties is requested to attend a meeting with the concerned staff and agree on specific actions to be taken by the concerned staff and/or the student to resolve the identified problems and the follow-up needed. These actions are logged in a student contact form. When needed students are referred to the Student Welfare Office for tracking of students' progress and suggesting the appropriate remedies. As a next stage within the process, students are referred to the Student Progress Committee who will interview the student and study his/her complete case upon which a remedial course of action will be agreed, logged, and signed by the student. At the end of each semester, the Students' Progress Committee submits a report summarizing the students' cases referred to it and the outcome of these cases. Students can also benefit from a maximum of ten counselling sessions, free of charge, in provisional clinics if needed. Moreover, there is evidence of adequate support and facilities to support students who have English language problems. This is reflected in an excellent retention/progression rate of students for which the SON&M is commended.

- 3.13 There are systems in place for ensuring active involvement of students in extracurricular activities. There is evidence of an established Nursing Student Society and the active involvement of this society within the SON&M.
- 3.14 In coming to its conclusion regarding the Efficiency of the Programme, the Panel notes, *with appreciation*, the following:
 - There is an effective admission policy that is continuously revised and improved.
 - There is evidence of an effective support given to students who have English language difficulties.
 - Administrative procedures are in place and implemented to track student progress – through the module coordinator, year coordinator and through the Student Welfare Office.
 - Academic staff and clinical tutors and coordinators are highly interactive and committed.
 - Appropriate arrangements are in place for the induction of newly admitted students and for ensuring that all students receive continuing guidance and support.
 - There is an effective use of VLE for various learning activities.
 - The learning environment is conducive to expanding the student experiences and knowledge through informal learning and the use of VLE.
- 3.15 In terms of improvement, the Panel **recommends** that the School of Nursing & Midwifery should:
 - expedite the implementation of the recruitment plan
 - develop a plan to ensure that teaching staff maintain their clinical expertise.

3.16 **Judgement**

On balance, the Panel concludes that the programme **satisfies** the Indicator on **Efficiency of the Programme.**

4. Indicator 3: Academic Standards of the Graduates

The graduates of the programme meet academic standards compatible with equivalent programmes in Bahrain, regionally and internationally.

- 4.1 The graduate attributes and 'exit outcomes' are clearly outlined in the NGP, these are articulated with ILOs of modules and aligned with assessment approaches. After reviewing the Marks and Assessment document and a sample of module files and during discussion with the programme team, the Panel learned that reliability is achieved through using test methods that are appropriate to the mix of knowledge, skills and attitudes in assessing each examination.
- 4.2 The nursing curriculum is modelled on nursing education requirements for Bahrain, the GCC, the Irish nursing education and World Health Organization (WHO) standards. The programme is benchmarked against the nursing programmes within the National University of Ireland (NUI) to ensure its standards are comparable to international programmes. The Panel also notes that all graduates receive their licensure for practice from the Office of Licensure and Registration in Bahrain. This demonstrates that the programme is comparable to international standards.
- 4.3 The Assessment Strategy document describes the mechanism to ensure the alignment of assessment to learning outcomes. During the site visit, the Panel examined a sample of assessment blueprints and found the process of matching the assessment to the module and to individual unit learning outcomes to be appropriate.
- 4.4 The SON&M has a system of internal moderation whereby a sample of marked students' scripts is moderated by a second marker who ensures grades awarded are appropriate and consistent with the model answer. The School also has a mechanism for moderation of question papers and model answers through a team approach to prepare them and subject them to external moderation. The Panel appreciates the use of the team approach and the VLE examination forum in preparing assessment tasks which ensure that the process is monitored by the Nursing Examination Committee and external examiners.
- 4.5 RCSI-MUB has developed and approved a formal plagiarism policy that was adopted by the SON&M on 18 September 2012. The Panel notes the commitment of faculty members to address issues related to plagiarism. The institution is encouraged to develop a mechanism to disseminate its recently adopted formal policy, monitor its implementation and evaluates its effectiveness.
- 4.6 The SON&M has a mechanism for external moderation in the form of external examiners. The process of recruitment of external examiners is described in the RCSI

Appointment of External Examiners document. External examiners are involved in all aspects of assessment, including commenting on the overall assessment strategy and reviewing and commenting on examination scripts. There is evidence of external examiners' involvement in reviewing all aspects of the programme including moderation of assessment papers. During interview sessions, the Panel confirmed that the process of external moderation is effective.

- 4.7 The SON&M uses external examiners to assure high standards in the administration of examinations. Feedback reports of external examiners indicate equivalence in the quality of student achievement between students of RCSI-MUB and those of other international nursing schools with which the external examiners are familiar. The Panel is of the view that the graduates' achievements, as demonstrated in the final results, meet the programme aims and ILOs.
- 4.8 The Panel examined a sample of students' assessed work and found the level of students' achievements to be appropriate. However, third and fourth year students need to demonstrate further critical thinking in written assessments. The Panel suggests that more attention be given to this issue.
- 4.9 The examination results of the graduates of the last two years (2010, 2011) were examined. There is no evidence to compare the rates of progression, retention and destination of graduates with those achieved nationally, regionally and internationally. However, the Panel found the results to reflect an exceptionally good completion time.
- 4.10 There is a clinical handbook which guides the programme team in the management and planning of work-based learning. All students receive the clinical handbook during an orientation session; students are informed of ILOs, expected learning, assessments, and clinical rotations. The ILOs for each clinical attachment are described clearly in the clinical handbook and are used to monitor students' achievement of clinical skills, knowledge and attitude. Workplace learning is managed by clinical coordinators and clinical tutors who had met the criteria of selection and had received training and orientation. During the meeting with the clinical tutors and students at the SMC and BDF clinical facility, the Panel noted that the most common clinical assessment modalities employed are SCARs and Objective Structured Practical Examination (OSPE); through direct observation of students' professional behaviour and skill performance. The Panel appreciates the development of a Clinical Audit tool to assess the suitability of the current and the new proposed clinical placements.
- 4.11 The SON&M has not yet established an advisory board, however, during the site visit the Panel interviewed representatives from affiliated clinical institutions and other stakeholders who participate in programme-related activities, such as part-time

teaching, clinical placements and assessment, licensing of the graduates and tracking their employability. The Panel noted the continuous involvement of key partners in the development of the programme, however, this involvement needs to be formalized. The Panel recommends that the SON&M formalize a programme advisory board.

- 4.12 Three cohorts have graduated from the programme. The data available on employment shows that all graduates of the first cohort and 72% of the second cohort were employed; data of the third cohort was not available to the Panel. The Panel met with representatives from employers who expressed satisfaction with the graduates' competencies. There are plans to obtain feedback from the nursing graduates on the perceived effectiveness of the BSc Nursing programme and from the hospitals through surveys. The Panel encourages the School to expedite the implementation of graduates and employer surveys. RCSI-MUB has established an alumni portal for the graduates. During discussion, the Panel learned that graduates are not aware of the Alumni Office and are generally not aware of activities with alumni. The Panel notes that there is a need to establish a formal relationship with alumni and to expedite the implementation of a graduate survey.
- 4.13 In coming to its conclusion regarding the Academic Standards of the Graduates, the Panel notes, *with appreciation*, the following:
 - The graduates' attributes are clearly stated and are comparable with similar programmes and meets the professional expectations.
 - There are clear and focussed clinical guidelines for students and clinical teachers, enabling students to pursue their own responsibilities.
 - There is a quality audit tool that is developed and applied to assess the suitability of clinical placement, in particular private hospitals.
 - There are exceptionally good completion times.
 - Employers and other stakeholders have expressed satisfaction with graduates' achievements.
 - There is evidence that the assessment practices and modalities are appropriate and linked to the module and programme ILOs.
- 4.14 In terms of improvement, the Panel **recommends** that the School of Nursing & Midwifery should:
 - formalize a programme advisory board
 - establish a formal relationship with alumni, and expedite the implementation of graduate and employer surveys
 - ensure that third and fourth year assessment further evaluates students' ability in higher order critical thinking.

4.15	Judgement
	On balance, the Panel concludes that the programme satisfies the Indicator on Academic Standards of the Graduates.

5. Indicator 4: Effectiveness of Quality Management and Assurance

The arrangements in place for managing the programme, including quality assurance and continuous improvement, contribute to giving confidence in the programme.

- In 2010, RCSI-MUB underwent a review of all its policies and procedures to ensure their relevance to Bahraini students, as many had been originally developed for RCSI Dublin. Policies, regulations and guidelines published on the VLE relating to students are comprehensive and contextualized for Bahraini students. For staff, there remain some policies and guidelines which require contextualization (for example the Quality *e*-Handbook), but in interviews the Panel learned that staff are aware of this and are liaising with RCSI Dublin, as Dublin reviews its policies and procedures, to ensure they retain relevance to the Bahrain environment. The Panel concludes that there is a comprehensive suite of student policies and procedures readily accessible on the VLE. The Panel acknowledges RCSI-MUB's proactive approach to revising these policies, procedures and guidelines to ensure their suite remains current and relevant to Bahrain.
- 5.2 The reclassification of some of the committees and dissolution of others, the Panel learned, resulted in the rationalization of some of the institution's committees, the establishment of a separate nursing structure; and the representation of nursing on all key committees. The Panel confirmed that nursing staff were represented on such committees. Moreover, the positions of Head of School of Medicine and the Vice President: Academic Affairs were separated recently to ensure that there is equity amongst the three schools within RCSI-MUB.
- 5.3 SNAC is the key academic nursing committee, which is well attended with teaching staff from all programmes as members. Programmes issues, including clinical placement are discussed at each meeting with programme or module modifications approved by SNAC or forwarded to the Academic Board for approval depending on the magnitude of the revision. Whilst there is range and diversity in the SNAC meetings, the Panel encourages SNAC to introduce standing agenda item/s or periodic reporting requirements that ensure regular discussion and systematic follow-up of issues pertaining to the programme, processes of implementation and assessment, students, and stakeholders.
- 5.4 The Quality Enhancement Office (QEO) is newly established with the Director recently recruited with the mandate to promote a quality culture and enhancement of the academic programmes. The Quality Assurance Committee (QAC), a newly developed committee reporting to RCSI Dublin, is responsible for the creation of the Quality Assurance/Quality Implementation (QA/QI) policy and for the

implementation of quality processes and quality improvement activities across academic and administrative areas of RCSI-MUB. The QEO has developed its quality enhancement strategy that is built around the European standards for internal and external quality assurance in higher education. The strategy aims at collecting data that enables QAC to assure the quality of all aspects of the academic programmes, including the validation of new programmes, courses and modules.

- 5.5 After careful examination of all related documents and interviewing of staff, the Panel concludes that there is a commitment to quality assurance and improvement by staff. However, there is a range of structures, committees, positions and strategies newly established or developed, the impact on the quality of which the Panel cannot yet assess. The Panel encourages RCSI-MUB to expedite the communication and the implementation of the institution's Quality Enhancement Strategy and to ensure that the Programme Enhancement and Improvement Plan is integrated into this. The Panel encourages RCSI-MUB to continue to implement these changes as planned to take forward the quality agenda.
- There is a quality enhancement strategy which is available to all staff on the institution's webpage. During interviews, the Panel heard evidence from a range of academic and administrative staff of their understanding of how they contribute to the quality of the nursing programmes. The Panel heard evidence that administrative staff understood their role in ensuring effectiveness of provision of services through feedback from students and staff. The Panel recommends that RCSI-MUB consider how to formalize some of the feedback mechanisms and ensure that there is a systematic approach to data collection, review, monitoring and follow-up coupled with accountability at all levels for 'closing the loop' i.e. follow-up and evaluation.
- 5.7 There is a mechanism for the development of new programmes to ensure the programmes are relevant, fit for purpose, and comply with existing regulations. The Panel was informed that there is no formal policy for the approval of new programmes. However the programme team is clear on the process. The Panel recommends that both a policy and procedures are developed for the establishment of new programmes. Further, the policy should include the requirement that key stakeholders be involved explicitly at the stage of development and thereafter at regular and stated intervals, thus formalizing this vital mechanism of feedback from stakeholders.
- 5.8 Currently the programme is evaluated through external examiners' reports, stakeholder, employer and student feedback. A programme analysis report was sent to SNAC earlier this year, with an action plan developed. The intention is to conduct these annually. There have been no formalized annual internal programme evaluations to date, which in part is understandable given that the programme is

comparatively new. A five-year rolling calendar of internal/external reviews (administrative and academic) has been developed with the QEO responsible for coordinating these reviews. These reviews will commence in 2013. The Panel acknowledges this intention, and encourages RCSI-MUB to formalize the conduct and follow-up of the annual performance analysis reports.

- 5.9 There are mechanisms for communicating programme review reports and students information to SNAC and the Academic Board. The Panel recommends that reporting of the resultant action plan along with the improvement and enhancement plan developed as a result of the submitted programme evaluations to the NAQQAET are monitored by the QEO to ensure completion.
- 5.10 The quality of the programme is maintained through annual reports to SNAC that includes issues related to external examiner reports, curriculum, progression and retention. SNAC considers and approves, for example, recommendations of external examiners and ensures any changes are made accordingly; improvements and changes are forwarded to the Academic Committee. There is a draft policy on student's feedback which is available on the VLE and accessible by students. There is evidence that improvements had been made as a result of their feedback. This was also confirmed through students' interview sessions. The Panel acknowledges the commitment of staff to improving the standard and quality of students, particularly in responding to feedback from students, external examiners and stakeholders. The Panel commends the students for their commitment to their studies and the commitment of teaching staff to their institution, RCSI-MUB. Though the Panel saw evidence of student feedback noted in SNAC, it encourages a more thorough recording of actions taken as a result of recommendations, with progress and timelines recorded so that SNAC can identify any action, which has not progressed and assess the impact of changes as a result of actions.
- 5.11 There is a Performance and Development Review (PDR) document which states that staff should be given the opportunity to share career aspirations and growth and an individual plan developed accordingly. There is a staff Learning and Development Policy, which encourages and outlines financial support for staff who wish to apply and study as part of their on-going professional development. Interviewed staff confirmed that they have had a PDR during the past year and staff development had been discussed with them. Staff also indicated that peer evaluation is an important informal process, which can be conducted by colleagues at their request to improve their teaching and delivery of lectures. Staff interviewed were not aware of any calendar of professional development activities throughout the year. The Panel appreciates RCSI-MUB's commitment to ensuring an annual PDR review is conducted for all staff. The Panel also acknowledges RCSI-MUB for their commitment to upgrading academic qualifications through making funds for this

available. The Panel recommends that a staff training needs analysis be conducted and an annual schedule of professional training for academic and administrative staff be developed and integrated into the current workshops with RCSI Dublin and funded opportunities in order to enhance professional development for RCSI-MUB staff.

- 5.12 RCSI-MUB realizes the valuable input of its stakeholders in its strategic plan. The stakeholders are also represented in the Board of Governance. Although the SON&M has not conducted any survey to scope the market need, the School relies on Bahrain Labour Fund's (Tamkeen's) conducted analysis of the labour market needs, and future gaps. Tamkeen also provides sponsorships to support the BSc Nursing programme among others. All of the nursing programmes were offered as a result of labour market gaps as identified by Tamkeen. RCSI-MUB continues to monitor new opportunities, again as identified by Tamkeen and has plans to explore developing regional priorities.
- 5.13 In coming to its conclusion regarding the Effectiveness of Quality Management and Assurance, the Panel notes, with appreciation, the following:
 - There is a comprehensive suite of student policies and procedures contextualized to the needs of Bahrain and readily accessible on the VLE.
 - There is a quality enhancement strategy which is available to all staff on the website.
 - There is an effective feedback system from students with responses and identified actions published on the VLE.
 - There is evidence of follow-up on recommendations made by external examiners, students and employers.
 - Staff development and conference funds are available to, and are used by, full-time and part-time staff.
- 5.14 In terms of improvement, the Panel *recommends* that the School of Nursing & Midwifery should:
 - develop a mechanism through which the Quality Enhancement Office and School of Nursing Academic Committee communicate and coordinate enhancement activities to ensure follow-up of actions within a timeframe
 - develop a formal policy and procedures for programme development and reviews which includes stakeholder involvement
 - conduct needs analysis for staff development for both administrative and academic staff which results in a calendar of regular staff development activities
 - formalize a clear mechanism to ensure that recommendations from all internal and external stakeholders are addressed within a specified timeframe.

Judgement 5.15 On balance, the Panel concludes that the programme satisfies the Indicator on Effectiveness of Quality Management and Assurance.

6. Conclusion

Taking into account the institution's own self-evaluation report, the evidence gathered from the interviews and documentation made available during the site visit, the Panel draws the following conclusion in accordance with the HERU/NAQQAET Programmes-within-College Reviews Handbook, 2012:

There is confidence in the Bachelor of Science of Nursing Programme of School of Nursing & Midwifery offered by the Royal College of Surgeons in Ireland - Medical University of Bahrain.