



هيئة جودة التعليم والتدريب
Education & Training Quality Authority
Kingdom of Bahrain - مملكة البحرين

Directorate of Higher Education Reviews Programme Review Report

**Royal College of Surgeons in Ireland –
Medical University of Bahrain
School of Medicine
Bachelor of Medicine, Bachelor of Surgery, and
Bachelor of the Art of Obstetrics
Kingdom of Bahrain**

Site Visit Date: 6-10 March 2022

HA023-C3-R023

Table of Contents

Acronyms	3
I. Introduction.....	5
II. The Programme’s Profile	7
III. Judgment Summary.....	10
IV. Standards and Indicators	12
Standard 1.....	12
Standard 2.....	21
Standard 3.....	30
Standard 4.....	37
V. Conclusion	43

Acronyms

AB	Academic Board
APA	Annual Programme Analysis
APR	Academic Programme Review
BQA	Education & Training Quality Authority
CILO	Course Intended Learning Outcome
CSS	Centre for Student Success
CPD	Continuing Professional Development
DHR	Directorate of Higher Education Reviews
ECTS	European Credit Transfer and Accumulation System
GCC	Gulf Cooperative Council
HEC	Higher Education Council
HEI	Higher Education Institution
IC	Intermediate Cycle
IMC	Irish Medical Council
IT	Information Technology
JC	Junior Cycle
LLRC	Library and Learning Resource Centre
MB, BCh, BAO	Bachelor of Medicine, Bachelor of Surgery & Bachelor of the Art of Obstetrics
MCP	Medical Commencement Programme
MCQ	Multiple-Choice Questions
MHSB	Medicine and Health Sciences Board
MLO	Module Learning Outcome
MMR	Module Monitoring Report
MoH	Ministry of Health
MoU	Memorandum of Understanding

NFQ	National Framework of Qualifications-Ireland
NQF	National Qualifications Framework
OSCE	Objective Structured Clinical Examination
PAB	Programme Advisory Board
PDU	Professional Development Unit
PDP	Professional Development Plan
PILO	Programme Intended Learning Outcome
QA	Quality Assurance
QEO	Quality Enhancement Office
QEC	Quality Enhancement Committee
QIP	Quality Improvement Plan
QMS	Quality Management System
RCSI	Royal College of Surgeons in Ireland
RPL	Recognition of Prior Learning
SARA	Student Academic & Regulatory Affairs
SC	Senior Cycle
SIS	Student Information System
SNQ	Short Notes Question
SoM	School of Medicine
SSP	Student Select Project
T&L	Teaching and Learning
THEP	Transforming Healthcare Education Project
ToR	Terms of Reference
TOSBA	Team-Observed Structured Bed-side Assessment
VLE	Virtual Learning Environment
WFME	World Federation for Medical Education

I. Introduction

In keeping with its mandate, the Education & Training Quality Authority (BQA), through the Directorate of Higher Education Reviews (DHR), carries out two types of reviews that are complementary. These are: Institutional Reviews, where the whole institution is assessed; and the Academic Programme Reviews (APRs), where the quality of teaching, learning and academic standards are assessed in academic programmes within various colleges according to specific standards and indicators as reflected in its Framework.

Following the revision of the APR Framework at the end of Cycle 1 in accordance with the BQA procedure, the revised APR Framework (Cycle 2) was endorsed as per the Council of Ministers' Resolution No.17 of 2019. Thereof, in the academic year (2019-2020), the DHR commenced its second cycle of programme reviews.

The Cycle 2 APR Review Framework is based on four main Standards and 21 Indicators, which form the basis of the APR Reports of the Higher Education Institutions (HEIs).

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

Standard 1: The Learning Programme

Standard 2: Efficiency of the Programme

Standard 3: Academic Standards of Students and Graduates

Standard 4: Effectiveness of Quality Management and Assurance

The Review Panel (hereinafter referred to as 'the Panel') decides whether each indicator, within a standard, is 'addressed', 'partially addressed' or 'not addressed'. From these judgments on the indicators, the Panel additionally determines whether each of the four standards is 'Satisfied' or 'Not Satisfied', thus leading to the Programme's overall judgment, as shown in Table 1 below.

Table 1: Criteria for Judgements

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

The APR Review Report begins with providing the profile of the Programme under review, followed by a brief outline of the judgment received for each indicator, standard, and the overall judgement.

The main section of the report is an analysis of the status of the programme, at the time of its actual review, in relation to the review standards, indicators and their underlying expectations.

The report ends with a Conclusion and a list of Appreciations and Recommendations.

II. The Programme's Profile

Institution Name*	Royal College of Surgeons in Ireland – Medical University of Bahrain (RCSI-Bahrain)
College/ Department*	School of Medicine
Programme/ Qualification Title*	Bachelor of Medicine, Bachelor of Surgery and Bachelor of the Art of Obstetrics/ MB BCh BAO
Qualification Approval Number	Cabinet of Ministers' Decision No. (DRM/22/413) of 2004
NQF Level	Level 8 according to the NFQ in Ireland
Validity Period on NQF	-
Number of Units*	37 Modules
NQF Credit	360 ECTS credits for the 5 years and the foundation year
Programme Aims*	The Medical School aims to produce medical graduates with the knowledge, skills and attitudes expected of graduates of a centre of excellence. They will be expected to pursue postgraduate training and to assume a leadership role in their chosen area of practice in either the hospital or community health care environment.
Programme Intended Learning Outcomes*	<p><u>Knowledge and Understanding</u></p> <ul style="list-style-type: none"> ▪ Explain the scientific basis of health and disease. ▪ Explain the relevance of basic science to the clinical setting. ▪ Examine the role of technology in medicine. ▪ Explain the pathogenesis of disease. ▪ Integrate the principles of healthcare management to practice. ▪ Discuss the legal and ethical responsibilities of a medical practitioner. ▪ Perform and respect the patient-doctor relationship.

- Discuss– at a national and global level – the distribution of disease, the factors that determine health and disease, and the major population health responses.
- Appraise risk and can apply epidemiological principles and public health approaches so as to reduce and prevent disease and improve the health of populations.
- Explain the characteristics of a range of health systems and population health responses and the merits and problems associated with each.
- Appraise the value of therapeutic intervention in health care.
- Determine the various roles of the doctor in health promotion, health maintenance & disease prevention.
- Recognise the psychological, social, political, economic, environmental, cultural and spiritual factors that impact upon the health of individuals.

Subject-Specific Skills

- Systematically elicit and interpret clinical symptoms and signs.
- Perform clinical procedures, especially those required in life saving situations.
- Perform core clinical procedures.
- Develop appropriate communication skills for groups with different communication requirements including colleagues & other medical professionals, patients & their families, carers, advocates and interpreters.
- Develop the ability in consultation, an age-appropriate patient-centred management plan in primary, secondary and tertiary care settings
- Prioritise care effectively

Critical Thinking Skills

- Evaluate the quantitative and qualitative methods that underlie Biological and Translational Research, Evidence-based Clinical Research, and Health Service Research.
- Discuss the limitations to scientific knowledge.

	<p><u>Transferable Skills</u></p> <ul style="list-style-type: none">▪ Work collaboratively with colleagues in the healthcare team setting.▪ Recognise ones' own strengths and weaknesses and to be open to assistance from others when needed.▪ Develop personal, organisational and time management skills.▪ Commit to lifelong learning, self-appraisal and reflection.▪ Employ information literacy skills.
--	---

* Mandatory fields

III. Judgment Summary

The Programme's Judgment: Confidence

Standard/ Indicator	Title	Judgement
Standard 1	The Learning Programme	Satisfied
Indicator 1.1	The Academic Planning Framework	Addressed
Indicator 1.2	Graduate Attributes & Intended Learning Outcomes	Addressed
Indicator 1.3	The Curriculum Content	Addressed
Indicator 1.4	Teaching and Learning	Partially Addressed
Indicator 1.5	Assessment Arrangements	Addressed
Standard 2	Efficiency of the Programme	Satisfied
Indicator 2.1	Admitted Students	Addressed
Indicator 2.2	Academic Staff	Addressed
Indicator 2.3	Physical and Material Resources	Addressed
Indicator 2.4	Management Information Systems	Addressed
Indicator 2.5	Student Support	Addressed
Standard 3	Academic Standards of Students and Graduates	Satisfied
Indicator 3.1	Efficiency of the Assessment	Addressed
Indicator 3.2	Academic Integrity	Addressed
Indicator 3.3	Internal and External Moderation of Assessment	Addressed
Indicator 3.4	Work-based Learning	Addressed

Indicator 3.5	Capstone Project or Thesis/Dissertation Component	Not Applicable
Indicator 3.6	Achievements of the Graduates	Addressed
Standard 4	Effectiveness of Quality Management and Assurance	Satisfied
Indicator 4.1	Quality Assurance Management	Addressed
Indicator 4.2	Programme Management and Leadership	Addressed
Indicator 4.3	Annual and Periodic Review of the Programme	Addressed
Indicator 4.4	Benchmarking and Surveys	Addressed
Indicator 4.5	Relevance to Labour market and Societal Needs	Addressed

IV. Standards and Indicators

Standard 1

The Learning Programme

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

Indicator 1.1: The Academic Planning Framework

There is a clear academic planning framework for the programme, reflected in clear aims which relate to the mission and strategic goals of the institution and the college.

Judgment: Addressed

- The Bachelor of Medicine, Bachelor of Surgery, and Bachelor of the Art of Obstetrics (MB, BCh, BAO) programme offered by the Royal College of Surgeons in Ireland (RCSI) – Medical University of Bahrain (RCSI-Bahrain) is planned by the RCSI-Ireland/Dublin, and the School of Medicine (SoM) applies several actions to ensure its proper implementation, such as establishing a clear governance structure that includes monitoring committees for each phase in the programme, which have regular communication with their similar committees in RCSI-Dublin. Also, there is an internal Quality Assurance (QA) system that reports the quality of implementation. The programme complies with the national QA requirements of the Education & Training Quality Authority (BQA) and is licensed by the Higher Education Council (HEC) of the Kingdom of Bahrain. It was also accredited by the Irish Medical Council (IMC) in 2014 and re-accredited in November 2021 based on a virtual visit in March 2021 and is subject to a confirmatory site-inspection, which is scheduled for October 2022.
- The internal quality system regularly collects feedback from students, faculty, clinical teachers, and external examiners/moderators and guides the preparation of the Module Monitoring Reports (MMRs) and the Annual Programme Analysis (APA). Based on this, Quality Improvement Plans (QIPs) are formulated, and their execution is monitored. The APA is reviewed and approved by the School of Medicine Academic Committee and the Academic Board (AB). The Panel finds that these measures have the potential to effectively identify and deal with potential academic risks.
- While other programmes of RCSI-Bahrain have been listed on the National Qualifications Framework (NQF) of the Kingdom of Bahrain, the Medicine programme has not been

listed yet and is still awaiting instructions from the NQF Directorate. However, the programme curriculum is based on the European Credit Transfer and Accumulation System (ECTS) and is a level 8, Honours Bachelor's Degree on the National Framework of Qualifications (NFQ) in Ireland.

- The title of the final award from the SoM programme is 'Bachelor of Medicine, Bachelor of Surgery & Bachelor of the Art of Obstetrics' or MB, BCh, BAO. The title is concise and reflects the programme content. It is documented on programme documents, graduation certificates and the university website.
- There are programme aims for the new curriculum included in the Medical Graduate Profile (MGP) 2018 document, which have been developed as a part of the Transforming Healthcare Education Project (THEP) curriculum transformation. Stakeholders from the Ministry of Health (MoH) and the hospitals affiliated with the University- by being represented in the Programme Advisory Board (PAB), Board of Governors, joint steering committees and boards- share in regularly reviewing the programme and its strategic plan and aims.
- The programme aims emphasize excellence of the graduates in knowledge, skills and attitudes, and are well aligned with the programme and university mission and strategic goals, which highlight the training of competent and caring graduates. Also, the aims, mission statement and strategic goals all stress the development of leadership skills in the programme graduates.
- The Government of the Kingdom of Bahrain and the RCSI-Dublin signed a Memorandum of Understanding (MoU) in October 2003 to set up a medical university in Bahrain. The MB, BCh, BAO programme is regularly supervised by RCSI-Dublin and, as mentioned earlier, has been recurrently accredited by the IMC.
- According to the MoU agreement, the RCSI programme in Bahrain is a branch campus of the one in Dublin and, thus, the same courses and written examinations are administered in both campuses. Therefore, the graduates of RCSI-Bahrain obtain a certificate from both institutions. As per the MoU agreement, the title of the degree is Bachelor of Medicine, Bachelor of Surgery, and Bachelor of the Art of Obstetrics, and graduates obtain a certificate and a license from RCSI-Bahrain and RCSI-Dublin.
- The agreement indicates that the RCSI-Dublin rules and policies will be followed while emphasizing that the programme will function under the authority of the Government of the Kingdom of Bahrain. Therefore, Teaching and Learning (T&L), assessment, faculty and staff recruitment, student support and the QA system are all based on the RCSI-Dublin model. Nevertheless, the local context is still being considered in some respects, for

example through the university's delivery of courses that are national requirements in the Kingdom, such as 'Modern History of Bahrain' and 'Human Rights'.

- The agreement indicates the joint responsibility of the leaders in the two campuses for running all academic and administrative aspects. Both the Head of SoM, RCSI-Bahrain in conjunction with the Head of the SoM, RCSI-Dublin are jointly responsible for overseeing the educational and faculty development activities, to ensure that the programme implementation is of comparable quality in the two campuses. As for the curriculum content and activities, they are agreed upon and signed off through the cycle committees, the Cycle/Year Directors and the Head of SoM in RCSI-Dublin on the 1st of March each year. This is followed by submission of marks and standards documents which include details of pass marks, grade boundaries and supplemental examinations on the 1st of May each year for approval by the Academic Council and the Medicine and Health Sciences Board. The RCSI-Bahrain staff are also members of the joint cycle committees with RCSI-Dublin.
- Both RCSI-Dublin and RCSI-Bahrain have the programme characteristics and courses posted on their respective websites. The RCSI-Bahrain provides extensive and updated programme details, such as the teaching methods, assessment tools and timetable for each semester. The website also enables live chat with current faculty and students to answer queries of the applicants.

Indicator 1.2: Graduate Attributes & Intended Learning Outcomes

Graduate attributes are clearly stated in terms of intended learning outcomes for the programme and for each course and these are appropriate for the level of the degree and meet the NQF requirements.

Judgment: Addressed

- Graduate attributes of the programme are documented in the MGP, which was issued by the RCSI in 2008 and updated in 2018. Both versions include themes that represent the generic attributes, and each theme is detailed into more specific learning outcomes or enabling competencies in the updated version.
- The Programme Intended Learning Outcomes (PILOs) are formulated as graduate competencies that address key competencies, with each one including several specific sub-competencies, and all are consistent with the programme aims. The phasing out programme also has outcomes, which are categorized in five main themes and then according to the learning domains. The detailed learning outcomes in the MGP 2008, or enabling competencies in the MGP 2018, are stated in a clear and specific way that can

guide instruction and inform assessment in line with the programme aims. In general, they are appropriate for the general medical graduate.

- All the PILOs are formulated in a way that they can be assessed. The updated version in 2018 was developed according to the Royal College of Physicians and Surgeons of Canada Competency Framework, which was modeled in various countries. Although not officially placed on the NQF as explained earlier, the programme's qualification meets level 8, which is the Bachelor's degree level.
- By reviewing a sample of module descriptors, which are exactly the same as the parallel module descriptors in RCSI-Dublin, the Panel finds the Course Intended Learning Outcomes (CILOs) or Module Learning Outcomes (MLOs) (as they are called by RCSI), generally appropriate for the level and content of the courses/modules in the different programme years and cycles. The programme ensures their appropriateness *via* the end-of-semester MMRs which, along with the external examiner reports, feed into the regular annual reviews known as the APA.
- The programme ensures that its learning outcomes are achieved by mapping the courses/modules of the curriculum and each MLO to the programme exit outcomes specified in the MGP. Additionally, each MLO is constructively aligned with appropriate learning activities and activity learning outcomes and assessments. The Panel finds this mapping appropriate.
- Although not research-based *per se*, the programme includes several modules where students can acquire and apply the basic concepts of scientific research. Every student has to conduct research during the Student Selected Project (SSP) module where they can develop and apply research skills acquired in the previous Evidence Based Healthcare module. Like all modules in the programme, these two modules and their research components are constructively aligned with the PILOs.

Indicator 1.3: The Curriculum Content

The curriculum is organised to provide academic progression of learning complexity guided by the NQF levels and credits, and it illustrates a balance between knowledge and skills, as well as theory and practice, and meets the norms and standards of the particular academic discipline.

Judgment: Addressed

- The study plan starts with the foundation year, where students take introductory and premedical modules. In the first and second years, students study basic medical sciences, which are integrated in organ system modules. In the third year in the phasing out curriculum, students take pre-clinical subjects, such as pathology, pharmacology, and microbiology as separate disciplines. In the new curriculum, the content of the third year

has become a continuation of the integrated organ system format. In the fourth and fifth years, students study the clinical subjects as separate disciplines. The total workload in each semester is equivalent to 60 credits. The description of each module indicates the pre-requisite modules where needed. The Panel is of the view that the study plan is well organized in terms of progression, as it develops first the basic medical knowledge that is necessary for acquiring the essential clinical skills in the last years of the programme.

- In 2018, the RCSI began implementing the comprehensive curriculum reform project 'THEP', which involved updating the MGP. The benchmark of this update is the competency-based framework of the Royal Society of Physicians and Surgeons in Canada-CanMeds, which defines key roles, core and enabling competencies of the medical graduates. To achieve the updated MGP, the programme's plan has been to rely more on case-based learning as students progress through the curriculum. Also, the project aims at more standardized assessment and more opportunities for constructive feedback to both students and faculty. Phase II, which is the main phase of this project, will start in September 2022. The project is directed by a joint steering committee from RCSI-Dublin and RCSI-Bahrain and is indicative of the regular update of the programme's curriculum.
- Deriving the learning outcomes from the medical graduate attributes ensures the required balance between theory and practice in the curriculum. This is also evident in the curriculum structure, where theory is relatively more in the pre-clinical years and the practice is more in the clinical years. As regards the depth and breadth of the module contents, the Panel notes from the module descriptors that the contents generally offer the required learning material appropriately in terms of depth and breadth.
- The recommended references of modules are appropriate; however, in some cases, they are not quite up to date. More specifically, some of the recommended references in the module descriptors provided as examples from the academic year 2020-2021 contain references dated to 2006 despite the presence of newer versions of these references. Additionally, in some module descriptors, the details of references, such as the edition, year and publisher are not written (e.g., Module descriptor Intermediate Cycle 2 (IC2) CNSLF). Also, the Panel notes that recommended readings seldom include recently published articles, if any. The Panel, thus, recommends that RCSI-Bahrain should ensure that the recommended readings are updated and written in sufficient details in all the programme's modules.
- As referred to earlier in this report, despite that research is not the main focus of this programme, scholarship is one of its intended graduate roles. Consequently, research outcomes are covered and assessed in it through the provision of the theoretical aspect of research competence in the Evidence Based Healthcare module and the students' completion of an actual research project in the SSP module of the third year, under the supervision of one of the faculty members. Based on the students' interview, students are

also encouraged to apply for travel funds to present their research results in international conferences and to take the Epigeum's online course in research ethics, which is available on the Virtual Learning Environment (VLE).

- As already mentioned, the MB BCh BAO programme adheres to the NFQ-Ireland requirements and its qualification is placed on NFQ Level 8. Nevertheless, and although the programmes in both Bahrain and Ireland are almost identical in the medical aspects, RCSI-Bahrain students are obliged to take a few mandatory courses required by the HEC, such as 'Arabic', 'Modern History of Bahrain', and 'Human Rights', with also a couple of Arabic language courses for non-Arabic speaking students being offered in the programme, as clarified during Interviews.

Indicator 1.4: Teaching and Learning

The principles and methods used for teaching in the programme support the attainment of programme aims and intended learning outcomes.

Judgment: Partially Addressed

- The RCSI-Bahrain has a T&L strategy which emphasizes the development of quality student experience and the enabling of an inspiring learning environment. However, this strategy does not include the recommended teaching methods at each level of the programme, in order to guide the cycle, year, and module coordinators as well as the teaching staff to select the most appropriate of them. Reviewing a sample of programme modules and interviewing the students revealed that active teaching methods are implemented in different modules. Nonetheless, the Panel recommends that RCSI-Bahrain should include in its T&L strategy in specific a set of recommended T&L methods that guide the SoM faculty in selecting the most appropriate combination of these methods for their modules.
- The teaching philosophy of the programme is to develop graduates who are knowledgeable, highly skilled, competitive, and fit for practice in a variety of healthcare settings. The T&L methods that are in line with this philosophy are included in the module descriptors and in the SER (e.g., lectures, tutorials, small group learning, weekly questions and answers sessions, practical classes, online learning) but not in the programme specification, although the SER claims that 'a variety of pedagogical approaches is outlined in the programme specification'. The Panel thus advises that the teaching methods be included in the programme specifications as well. The SER also states that the T&L methods are included in the regular review of the module descriptors, through which revisions can be made to them in line with new research findings.
- The T&L strategy of the programme includes expanding opportunities to support online learning. Students in the programme use an effective virtual learning system *via* the

Moodle platform, in which they can access information related to the learning outcomes, recorded learning material, learning resources, assignments and quizzes. Because e-learning is an integral part of the curriculum, all students are provided with a pre-configured personal computer after admission. Besides, as was evident from interviews and during the site visit tour, there are computers available to the students in the library and in the Centre for Student Success.

- The teaching methods used in each module, as included in the module descriptors, rely mainly on clinical tutorials and shadowing in the clinical years, and on lectures in most of the modules of the pre-clinical years. This finding was also corroborated by students during the Panel's interview with them. If properly implemented as planned in September 2022, THEP II is supposed to ensure more active learning methods and practice during the pre-clinical years. Accordingly, the Panel recommends that RCSI-Bahrain should ensure that the programme works on the appropriate implementation of active learning methods in all modules of the pre-clinical years.
- The Panel notes that RCSI-Bahrain has good physical and virtual learning facilities, which facilitate research and access to resources and information. Also, as a part of the THEP project, students are given the opportunity of collaborative learning with senior peers and supervisors. In addition, the research modules throughout the programme provide an opportunity for the students to innovate.
- During the site visit, the Panel noted that the programme offers a learning environment that promotes self-learning *via* several means, mainly through the efficient VLE system. Also, the library is well-equipped with study rooms and has long working hours, seven days a week. The students can access a number of electronic resources and databases, such as UpToDate to support evidence-based clinical decision-making. During the meeting with the students, they confirmed the central role of the VLE in their learning process. The Panel, consequently, appreciates the efficient role of the VLE and the other e-tools in supporting independent learning. The programme also allows the students the opportunity to develop their self-initiated clubs. Besides satisfying their extracurricular interests, the themes of some clubs can informally help support the learning process. Additionally, the SER refers to the establishment of 'Learning Communities', which seem to be a modified student mentoring approach, where students from various levels are placed in small groups with tutors and academic leaders. Each group is supposed to have a monthly meeting to discuss and deliberate on a pre-determined theme. However, during the students' interview, it was evident that this practice is not yet regular or properly monitored. The Panel thus advises the programme leaders to pursue the proper implementation of this potentially good practice.

Indicator 1.5: Assessment Arrangements

Suitable assessment arrangements, which include policies and procedures for assessing students' achievements, are in place and are known to all relevant stakeholders.

Judgment: Addressed

- The programme follows the policy of 'Fair and Consistent Assessment, and Evaluation of Student Progress', which emphasizes that assessment should be valid, reliable, transparent, and fit for purpose. This is implemented by several mechanisms, notably, the examination blueprint, pre-examination review, and post-examination internal and external moderation. Also, the programme has an assessment strategy in place that details the percentage assigned to continuous and summative assessment by year and module. Blueprints are used to ensure the alignment of the learning outcomes and the assessments and to ensure balanced coverage of the content.
- The programme publishes the Examinations and Assessment Regulations on the VLE, and these are therefore available for the students and faculty. They include an overview of the principles and types of assessment. As for marks and standards of each module, these are announced annually and posted on the VLE.
- As stated in the SER, most assessments carried out in the programme are summative in nature. Although the module descriptors refer to formative assessment, all are assigned marks. During the interview with faculty, it became evident that there is a confusion between continuous and formative assessment and that the programme does not have typical formative assessment. Hence, the Panel recommends that RCSI-Bahrain should include typical formative assessment in the programme's modules. As for feedback on examinations, the results are communicated to the students after being reviewed and checked (i.e., moderated) for quality and for clarity of marking criteria. This is done within a week if the examination is composed of Multiple-Choice Questions (MCQs) only and takes a varying longer time if it also includes Short Essay Questions. During faculty interviews, the Panel learned that, in some instances, the examination moderation could take a relatively long time and thus delay providing students with prompt feedback on their performance. The Panel recommends that the RCSI-Bahrain should ensure that the programme sets reasonable time limits for issuing examination results and communicating them with the students.
- The Research Ethics Committee of RCSI-Bahrain, which is primarily operating within the School of Postgraduate Studies & Research, is responsible for the evaluation of ethics and principles of scientific research, and for granting ethical approval of all research projects including the students' research. The purpose of the Committee is to ensure the safety of patients, students, and staff. In addition to the work of this Committee, students are exposed to the ethics process and the ethical consideration of research through the several

modules mentioned previously in this report as incorporating research components (e.g., Evidence-Based Healthcare, SSP).

- Whenever feasible, assessment in the programme is done anonymously to avoid any personal bias. Examiners with potential conflicts of interest are mandated to declare that especially in clinical examinations. Additionally, assessment is subject to internal moderation according to the procedure explained in the RCSI Moderation Policy. Also, external moderation is done by examiners who are jointly appointed by the Medicine and Health Sciences Board (MHSB) of RCSI and the National University of Ireland. The Panel had the chance to verify through the review of the programme that all final exams are subjected to internal and external moderation.
- For addressing academic misconduct, RCSI-Bahrain has in place a Plagiarism Policy which governs academic integrity related issues. Additionally, the Panel learned during interviews that RCSI has an online plagiarism resource as an awareness tool for how to avoid plagiarism, which all students must complete early on in the programme. As for appeals, students have the right to appeal the Exam Board decisions or decisions affecting their progression through the programme according to the regulations of the RCSI Appeal Regulations, which are available on the VLE. Student complaints and grievances are managed under the Student Complaints Policy, which allows the Head of Student Development and Wellbeing to attempt informal resolutions of complaints before they are sent to the AB.

Standard 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 2.1: Admitted Students

There are clear admission requirements, which are appropriate for the level and type of the programme, ensuring equal opportunities for both genders, and the profile of admitted students matches the programme aims and available resources.

Judgment: Addressed

- Admission to the RCSI-Bahrain is governed by the SoM Admission Policy, which specifies and provides an outline of the admission process and the specificities of entrance to the MB, BCh, BAO programme on an equal basis. The entrance requirements are communicated to stakeholders and published on the RCSI-Bahrain website. The Admissions Committee, supported by the Student Recruitment and Admissions Department, communicates admissions information to prospective students, and relevant stakeholders through activities including international school visits, campus tours for schools within Bahrain, career fairs, and RCSI-Bahrain initiatives, such as the annual 'Future Doctors' event and the 'Healthcare Matters' newsletter.
- RCSI-Bahrain benchmarks against RCSI-Dublin's and other international universities' entry requirements. There are three different routes for admission: The Medical Commencement Programme (MCP) facilitates students who are lacking prior experience in the necessary scientific disciplines or possess insufficient levels of English language proficiency. Inclusion of the MCP encompasses a seven-year programme for graduation. The six-year Medicine Programme entry point accepts high achieving students from both local government and private international schools dependent on their academic achievement. This programme encompasses a foundation year and the full Medicine Programme of five years. The five-year Medicine Programme entry point accepts students with high level standardised international educational qualifications or applicants who have already completed a university degree, as outlined in the entrance criteria document.
- All new students attend an orientation programme prior to commencing their studies. The orientation programme is delivered by the Student Services Department and students are provided with an orientation handbook. Upon registration, and prior to orientation, all

new students are also assigned a Buddy, who is a student from a higher year of study to provide them the needed guidance. The Panel appreciates this good practice of establishing well-planned student guidance to their new peers. Additionally, the programme has a Reasonable Accommodation Policy that governs the access to education for students with special educational and physical needs. The support of these students is managed in collaboration with the Department of Student Development and Wellbeing. The Panel during the interviews with faculty and students concluded that non-Arabic speaking students experience challenges with the communication especially in the clinical environment. The challenges are currently addressed by the SoM through pairing Arabic with non-Arabic speaking students and in rare cases providing a translator. However, the Panel is of the view that this might hinder the non-Arabic speakers' learning and negatively affect their study experience. Having identified this matter as an area of improvement, the programme has put in place several initiatives including an optional language module in Year 1 and is planning to add another medical language terminology module before the clinical phase as well as a training module using Virtual Reality. While the Panel acknowledges these initiatives taken by the programme, the Panel advises the programme to take a more structured approach to evaluating students' experience in relation to this matter and to expedite these additional planned initiatives.

- The programme generally does not accept transfer students from other programmes, including transfer from one RCSI institution to another. But the programme has in place Regulations for the Recognition of Prior Learning (RPL) for use in admissions processes relating to applicants seeking assessment of their prior learning for the purposes of admission, or advanced entry. However, as RPL is still not recognized in Bahrain, the programme does not have any RPL students. The programme also provides the option of external credit transfer. In the third year, students can transfer 10 ECTS credit SSP module completed in other national or international institutions with whom RCSI has signed agreements. Students have also the opportunity to transfer credits by studying four-week electives abroad during the final year of the programme.
- The programme reviews the admissions policy annually. In addition, every two to three years, it collects feedback from applicants of previous years in relation to the admissions policy and process, and benchmarks them, in light of the overall students' progression results, with those of RCSI-Dublin, with the most recent benchmarking having taken place in 2021.

Indicator 2.2: Academic Staff

There are clear procedures for the recruitment, induction, appraisal, promotion, and professional development of academic staff, which ensure that staff members are fit-for-purpose and that help in staff retention.

Judgment: Addressed

- RCSI-Bahrain has in place a clear staff recruitment and selection policy, which is applied for full-time faculty. Requirements for or changes in additional academic and support staff are documented in electronic format. During interviews with the full-time faculty and staff, the Panel confirmed that this policy is implemented in a transparent way. However, during the site visit interviews with the part-time clinical faculty and the programme graduates, the Panel learned that the annual recruitment process for the part-time clinical faculty/supervisors, in the affiliated hospitals, is not following the same transparent procedures as that of the full-time faculty. Since, the announcements for the opportunities to engage with the clinical teaching are usually only shared verbally. Thus, the Panel recommends that RCSI-Bahrain should develop a clear policy for the recruitment of clinical part-time instructors to the programme.
- Once recruited, every new member of staff goes through a mandatory induction process in the form of a workshop that includes presentations from various departments of SoM, such as the Professional Development Unit, Marketing & Communications, Health & Safety, Finance, Information Technology (IT) and HR departments. As explained during interviews, other workshops in addition to professional development events are organized throughout the academic year for faculty and staff based on the results of their yearly appraisal which takes place through the Professional Development Plan (PDP) process. The PDP involves goals identified individually by the staff members for their own professional development and in consultation with their line manager, and then their evaluation based on the achievement of their set goals. In the case of faculty members, they are also evaluated on their teaching by their peers and also by their students through the Student Feedback Reports. Their PDP is linked to their academic promotion, which follows the same policy and guidelines as that of RCSI-Dublin and other RCSI sites, although adjusted to the local Bahraini context. Promotion applications are independently evaluated by a panel of experts/examiners on the basis of the applicants' activities in education, research and service.
- The research pillars in the 2018-2022 strategic plan of the RCSI-Bahrain, include four main objectives that guide the research activities of the programme. In parallel, the operational plan 2019-2020 details appropriate actions to be taken to achieve these goals. According to the SER, RCSI-Bahrain demonstrates an increasing rate of publications in indexed journals, reflecting enhanced quality of support for research activities. This support includes services such as an online research/academic integrity course, which is available for both faculty and students, and a manuscript advisory service, which provides editing and journal selection services. While acknowledging the presence of a Research Grant and Research and Audit System, the Panel did not identify a documented and publicized research policies and procedures that describe the obligations and expectations for the faculty members in relation to their activities and outputs. Therefore, the Panel

recommends that RCSI-Bahrain should develop research-related policies and procedures to guide in detail the expected research activities of the faculty in the programme in line with the institutional research goals and plans.

- According to the SER, a new workload model is being co-produced with the faculty, and during interviews, the Panel was informed that at the time of the site visit, the new model was not fully implemented yet. Though the SER also states that there is a number of mechanisms in place to help achieve balance between education, research and community service, which the Panel was informed about during the interviews with the faculty, the faculty at the same time confirmed that their engagement in research and community activities could further increase if the teaching load can be lowered than the current level. The Panel advises the programme to expedite the implementation of the new workload model and to evaluate its impact on the satisfaction of the academic staff and their research output. During interviews, the Panel learned that the workload, however, does take into consideration the special needs of women by implementing several measures to cater to their specific needs and to those of their families, such as flexible working hours, working from home (when possible), and additional maternity leave.
- According to the SER, the programme has 51 full time and seven part-time faculty members in all the required specialties. The programme is also supported by 156 part-time clinicians in the associated teaching hospitals. In addition, the SER and the accompanying evidence indicate that the academic qualifications of the staff are varied in terms of specializations and are in line with the HEC requirements. Considering the number and qualifications of both full and part-time faculty, the Panel finds that the programme has an adequate range of academic staff to fulfil its teaching needs and activities.
- Staff development is governed and supported by the Professional Development Unit (PDU), which provides relevant resources and organises Continuing Professional Development (CPD) workshops. The Panel identified evidence confirming the adequate provision of CPD opportunities and motivating incentives to engage in them, including the Conference Participation Funding Policy, Staff Training Funding Policy, General Competency Framework, Academic Development Framework (ADF), and the CPD programme activities provided among the submitted evidence. The CPD activities are all immediately evaluated at the end of each activity through an evaluation survey form, and the results of this survey along with other sources of data are used to feedback data about the effectiveness of the CPD in the programme and to develop improvement plans accordingly.
- According to the SER, the programme utilises mechanisms to support and retain highly qualified faculty, including the Dean's Award scheme which was established in 2018, the Excellence in Research annual award, the Research Grant Award, and the Clinical Lecturer Award. The statistical information submitted by the programme as evidence in relation to

the number of faculty members in the last five years (from 2016-2017 till 2021-2022) indicates no issues with the retention of faculty members in the programme. Actually, if anything, there is a clear and obvious growth in the number of faculty members over the years and at all academic ranks.

Indicator 2.3: Physical and Material Resources

Physical and material resources are adequate in number, space, style and equipment; these include classrooms, teaching halls, laboratories and other study spaces; Information Technology facilities, library and learning resources.

Judgment: Addressed

- The programme has over 30 teaching spaces including lecture halls, tutorial rooms and laboratories. The automated timetabling system of the programme ensures that the space meets the teaching requirements in terms of the class size and equipment. The Panel had the opportunity to visit the Clinical Simulation Centre which was refurbished and upgraded in 2016, and concluded that the simulation provision is of high standards. The Centre includes 14 electronically controlled bed stations across four simulated wards. Based on the submitted evidence and the site visit tour, the Panel concludes that the provided facilities are adequate. Regarding the provision of clinical sites for student training, this is provided by major public and private hospitals in Bahrain, with whom the programme has signed MoUs. The Panel visited the three main hospitals which provide the main venues of clinical training to the students, and can confirm that the programme is capable of ensuring a good variety of well-equipped training sites for clinical training. The Panel appreciates the excellent learning facilities inside the campus and in the well-equipped affiliated hospitals, where students have their clinical training.
- During Covid-19, the programme took rapid and effective measures to mitigate the challenges of restricted access to the clinical training sites, by setting-up simulated ward facilities next to the main building on its campus, in order to increase the capacity for simulated training and minimize the impact of the pandemic on clinical teaching. Additionally, the Panel was presented during the site visit with the RCSI plans for building new facilities hosting simulation laboratories, thus, confirming the programme's investment in improving the T&L student experience. The Panel appreciates the programme for its robust and systematic response to address the challenges, in terms of facilities, posed by Covid-19.
- The IT Department supports the T&L activities through the provision of relevant technologies, such as 'Blackboard Collaborate', 'Teach Me Anatomy', 'Visible Body', and 'Labster', which is an online virtual laboratory simulation software. The Panel confirmed from the interviews and demo presentations, as well as from the accompanying evidence

that the provision of these services is adequate. In addition, the Panel was informed during the site visit tour of the clinical areas that the SoM has developed with the clinical partners, a mobile application to help students easily identify the timetable of their clinical supervisors and receive instant announcements and updates regarding their clinical training. All this is in addition to the well-equipped technology laboratories and smart classrooms that are all linked to a high-speed Wi-Fi network connecting the whole campus, as was evident during the site visit. The Panel appreciates the programme for the development of a mobile application utilized by students and clinical faculty to facilitate their communication during their clinical training.

- According to the SER, the Library and Learning Resource Centre (LLRC) was established in 2004, modelled and benchmarked against the Library in RCSI-Dublin. The LLRC provides group study rooms, teaching rooms, a postgraduate room, and flexible user study spaces both for individual and shared studying. During the site visit, the Panel was informed that the library has recently added 16 opening hours during the weekends in addition to its regular opening hours during the weekdays. The Panel is confident that the services and resources provided by the library in addition to the RCSI e-library meet the students' needs.
- The programme adopts a Planned Preventative Maintenance (PPM) approach of its resources to ensure their fitness for purpose, implemented by an in-house maintenance team, while the maintenance of highly sophisticated systems is outsourced to external specialised and authorised agents.
- The programme has a Health, Safety, Environmental and Quality Integrated Management System, which is overseen by the Health and Safety Committee. The system aims to maintain a safe, healthy learning and working environment. In addition, all staff are required to take an online induction course which includes a section on health and safety, before entering the university campus. As for laboratories, each has a specific booklet that includes a relevant Health and Safety section depending on the laboratory's type and purpose. As for the management of hazardous substances, the Panel learned during the site visit tour that this is the responsibility of a dedicated Health and Safety officer who supports departments throughout the University that are wishing to transport dangerous substances including specimens and organisms.

Indicator 2.4: Management Information Systems

There are functioning management information and tracking systems that support the decision-making processes and evaluate the utilisation of laboratories, e-learning and e-resources, along with policies and procedures that ensure security of learners' records and accuracy of results.

Judgment: Addressed

- The programme is supported by several systems and databases for the management and related decision-making processes of its different sectors, such as the admission and registration, student records, facilities, human resources, T&L activities, as well as research. Additionally, the programme has a newly introduced automated system, the Quality Management System (QMS), which the Panel attended a demo presentation of, the purpose of which is the monitoring, recording and tracking of the execution of quality improvement and action plans, with specific features that inform the responsible parties/persons(s) of the progress in their implementation and any required further actions.
- The utilisation and requirements related to laboratories, e-learning and resources are monitored and recorded by each concerned department, which prepares annual utilisation reports and statistics for its own usage and also to be forwarded to higher levels for decision-making and planning purposes. For e-learning, specifically, the utilisation and efficiency of the e-resources are monitored by additional metrics including Bandwidth Monitoring, utilisation reports, and e-learning and systems upgrades sample reports. During interviews with the senior management, the Panel confirmed the utilisation of tracking reports in decision-making processes.
- The SER clearly describes the procedures in place for ensuring the security of learner's records and the accuracy of results. Student records are physically kept safely locked in the Student Records filing cabinet by the Records and Regulations Manager who holds the only key and hard copies are also maintained by the Records and Regulations Department within the Student Academic & Regulatory Affairs (SARA) office. There is also an electronic system in place, the Quercus Student Information System (SIS), in which student records including information of personal, financial, academic, and academic support data are stored.
- RCSI-Bahrain has in place appropriate mechanisms to ensure timely and accurate documentation of students' awards. Transcripts can only be accessed by a certain number of staff from the Records and Regulations Department. The graduation transcript is signed by the Vice President for Academic Affairs and imprinted with the University seal which is kept securely locked by the Records and Regulations Manager. These procedures are reviewed annually to ensure the accuracy and safety of certificates and transcripts and their timely issuance.

Indicator 2.5: Student Support

There is appropriate student support available in terms of guidance, and care for students including students with special needs, newly admitted and transferred students, and students at risk of academic failure.

Judgment: Addressed

- The Panel recognized, from the examination of the evidence and the visit to the library, laboratories, and other facilities as well as from the demo presentations by the relevant staff, that the students have an appropriate level of support in terms of facilities, care and guidance. The Panel notes with appreciation, in particular, the strong social support and effective encouragement of the students' initiatives, which is evident through the presence of more than 40 active student clubs in the University that are initiated and run by the students.
- The University has a dedicated Careers and Alumni Office, which was opened in 2018 in response to student feedback. The Office helps students apply for, and make use of, Question Banks and practice tests for UK, US, Canadian, Australian and Saudi Arabian Board Examinations. In addition, the Office organises regular seminars, workshops and networking events to guide the students in applying for jobs, preparing their CV and having successful interviews. Moreover, the Careers and Alumni Office links students with RCSI's global network of alumni, providing them further opportunities to conduct research internationally.
- The Panel notes from the submitted evidence and the interviews with students that the programme provides a rich student orientation programme, which was referred to earlier in Indicator 2.1. In addition to it, upon admission, students, including transfer and international ones, are placed in mixed learning groups and they are supported throughout their studies by the Student Development and Wellbeing Department. The Department has developed various supportive initiatives such as the Buddy Programme, PathWay Programme, International Citizenship Award, Personal Tutor Programme, and the PAL Programme from which the students benefit.
- The programme provides a variety of services to support the student, including an Academic Lead, a Student Engagement Lead, a Buddy, and a Personal Tutor. Faculty members act as Academic Leads and/or Personal Tutors with the duty to monitor and support student's academic progress. Student progress is continuously monitored from the first semester and those identified as not performing as expected are monitored closely and supported by their Year Lead through individual meetings. In interviews, the Panel learned that if a student continues to struggle with their studies, they are referred to the Centre for Student Success (CSS), where a learning needs analysis is undertaken by the Learning Tutors and a remedial support plan is drawn up for the student, followed by a continuous progress monitoring process and follow-up on the student's performance. The Panel confirmed through the interviews with faculty and students that this type of academic advising and support is adequate and satisfactory.
- The Student Health and Wellbeing Department supports female students through several policies and procedures, such as the Maternity Policy for those expecting a baby and the

support of the academic progress of female students who must also manage a family. Students with disabilities (whether temporary or permanent) are supported through the Reasonable Accommodation Policy, as mentioned earlier in Indicator 2.1. Overall, the Panel is of the view that the provisions in place for integrating the needs of women, special needs students, and the different genders are adequate and provide equal access to education and support services.

- As described in the SER, at-risk students receive individual tutorial support, or they may be referred to the CSS for help. During interviews, the Panel learned that the support for at-risk students includes the unit of Student Health & Wellbeing, which provides pastoral support, confidential counselling services and health and lifestyle guidance to students. There is also a new designated confidential counselling/meeting space and a treatment room. The unit works closely with several external counsellors, psychiatrists, psychologists, and therapists. In addition, poorly performing students in their first semester may be enrolled in the Personal and Academic Student Support programme, which addresses individual students' personal and academic issues and supports students' improvement for the second semester. Overall, the Panel is satisfied with the type of support provided for at-risk students.
- The Quality Enhancement Office (QEO) conducts regular surveys for evaluating the available support services and analyses their results, while the department that was surveyed has the task of addressing weaknesses and implementing improvements. The two key surveys in this context are the Student Satisfaction Survey and the Alumni Survey. Students are also supported by the SARA and the cycle/year coordinators who also communicate any student input back to the QEO for improvement purposes.

Standard 3

Academic Standards of Students and Graduates

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

Indicator 3.1: Efficiency of the Assessment

The assessment is effective and aligned with learning outcomes, to ensure attainment of the graduate attributes and academic standards of the programme.

Judgment: Addressed

- The listed assessment tools in the module descriptors confirm that there are various assessment tools to assess the different competencies. These include written assessments involving Short Notes Questions (SNQs), Data Interpretation and MCQs, Clinical Examinations involving Direct Observed History-Taking, Physical Examination, Objective Structured Clinical Examination (OSCE) and Team-Observed Structured Bed-side Assessment (TOSBA). The senior students are subjected to more complex assessments that enable them to demonstrate clinical skills expected from a medical graduate (graduate attributes). The Panel verified the appropriateness of such varied tools with the students and clinical tutors during the visits to the three affiliated hospitals. As for the validity and reliability of the examinations, the SoM ensures this by using several procedures, such as examination blueprint, standard setting, and examination moderation. For setting of performance standards, the SoM uses 'Modified Angoff' approach for MCQs and Extended Matching Questions, and 'Borderline Regression' for performance-based assessment formats.
- The SoM's MGP (2018) specifies the roles of Professional, Communicator, Scholar, Collaborator, Leader and Global Practitioner as necessary for graduation. The different outcomes and enabling competencies to achieve these MGP roles are also described. While, the module descriptors list learning outcomes at module level that span the competencies at programme level and also link the module learning outcomes to the different assessment tools. The Panel is of the view that the assessment tools are well aligned with the learning outcomes and the MGP competencies.
- The Curriculum Skills Map in the programme specification matches the different modules of the programme with its competencies, as a mechanism of ensuring that graduates' achievements in the modules meet the PILOs. Using appropriate blueprinting helps ensure proper assessments in terms of their validity and ensure students achieving what

they are supposed to achieve as intended learning outcomes upon graduation. Moreover, the programme subjects assessments to internal and external moderation processes, as a mechanism to further ensure that graduate achievements meet the PILOs, as will be elaborated on in Indicator 3.3.

- There is good monitoring of the implementation of the assessment policy with clear responsibilities for all members involved in assessment and a plan for improvement of the assessment process by the QEO. The SoM has a system in place to select, produce, and implement adequate assessment methods. The team members involved in the delivery of each module, within the programme, play a role in assessment items' creation and review, along with the external moderators. They are also engaged in standard setting and review of the assessment post-hoc statistical analysis of assessment tools, using actual performance data from students. With the Covid-19 pandemic, RCSI implemented regulations related to the conduct of assessment and management of irregularity, through a new policy to regulate and control online assessment following the emergency shift to virtual teaching and assessment. Also, in response to the limitations of direct patient contact in the context of assessment during lockdown of the pandemic, the SoM increased simulation opportunities for teaching and assessment. The Panel notes from the site visit that the simulation laboratories in SoM and in one of the affiliated hospitals indicate adequate resources, and students reported a positive impact of such resources on their learning and assessment.

Indicator 3.2: Academic Integrity

Academic integrity is ensured through the consistent implementation of relevant policies and procedures that deter plagiarism and other forms of academic misconduct [e.g. cheating, forging of results, and commissioning others to do the work].

Judgment: Addressed

- The SoM has policies that monitor compliance with the Academic Integrity Policy and regulations, and all stakeholders have access to these policies. In addition, professionalism and ethics are integrated throughout the programme's curriculum and a new RCSI Academic Integrity Working Group has been recently formed to strengthen the adherence to academic integrity principles across academic programmes and by all those involved, faculty and staff alike. As for the students, in specific, they are all required to attend a plagiarism module upon enrolment and to use the plagiarism-detection software Turnitin before submitting assignments. This is in addition to the Foundation Year Orientation Session (2020-2021) which covers the SoM practices for ensuring and maintaining academic integrity. Also, the SoM reserves the right to avail of plagiarism detection mechanisms on any work submitted for assessment and there is a clearly stated procedure to be followed when an examiner/marker or research supervisor suspect plagiarism. The

RCSI Professional Conduct Committee is the party responsible for dealing with referred cases.

- Serious cases of academic misconduct are reported and then investigated by the SARA Office using the related policies and regulations, and accordingly sanctions are applied. Students have the right to appeal any judgement and/or sanction to a local appeals committee and ultimately to RCSI-Dublin. The Panel reviewed samples of the handling of some academic misconduct cases, which indicate proper implementation of these policies and procedures.

Indicator 3.3: Internal and External Moderation of Assessment

There are mechanisms in place to measure the effectiveness of the programme's internal and external moderation systems for setting assessment instruments and grading students' achievements.

Judgment: Addressed

- The SoM has internal moderation policies and procedures to evaluate assessment tools and monitor marking and grading by staff in Bahrain and Dublin. The Panel noted the adequate implementation of the policies during the site visit *via* reviewing documents of internal moderation, such as review of item analysis reports, course moderation and monitoring reports. Also, interactions with the academic staff during interviews all pointed to the appropriate implementation of internal moderation measures and the utilisation of their outcomes and related analysis for improvement.
- The SoM has a system of reviewing samples of students' marked works with reference to the model answers, to check that the marking is consistent with the assessment standards. Similarly, second marking is exercised to ensure fairness of grades and marking and to take actions based on the moderation outcomes. This process is implemented in all modules including the clinical rotations, as was evident during the site visit.
- Auditing and reviewing the moderation process is conducted to identify anomalous results so that corrective measures could be implemented. To begin with, setting and revising assessment instruments and reviewing the students' grades is done in collaboration with staff in Dublin, to assure fairness of grading and to ensure the effectiveness of the internal moderation process. Once the moderation process is completed, the Module Leader receives the moderator's comments sheets and based on them produces MMRs as part of the internal quality monitoring system of the programme and the evaluation of the internal moderation process.
- The SoM implements structured external moderation policies and guidelines, which start with the selection and appointment of external examiners according to set criteria, and

then defining their roles and responsibilities. The Panel had the opportunity to note the satisfactory implementation of these policies during the site visit *via* reviewing external moderation and monitoring reports of several modules. Also, interviews with the academic staff and some external examiners confirmed the effective utilisation of the external moderation outcomes for improvement.

- The MMRs provided to the Panel as evidence indicate proper review of the assessment tools and grading process, along with relevant recommended actions for improvement. The SoM annual review includes a summary of the external examiner reports with a suggested quality improvement plan. The Panel reviewed examples of improvements achieved as a result of the external moderation. For example, Year 1 Module Monitoring Reports 2018-2019 detailed an issue raised by an external examiner: ‘feedback on SNQs could be improved by providing the students with some examples of marked questions with examiner comments’. During the interview sessions with the students, they reported that they started to receive such feedback. Despite this, during the site visit interviews, a concern was raised by a few academicians and tutors in the senior clinical years about delays in receiving external examiners’ reports. The Panel thus suggests that a mini-report could possibly be shared with the module coordinators in the middle of the academic year to resolve this issue.
- The report of the external examiner includes a section that asks for feedback of the external examiners on the moderation process and their suggestions to improve it. Additionally, the external examiner reports are reviewed either through the work of the Year Committee or the Programme Board as part of the annual reviews of the programme. The National University of Ireland also receives all external examiners suggestions for improvement with associated improvement plans, to evaluate the effectiveness of the external moderation process.

Indicator 3.4: Work-based Learning

Where assessed work-based learning takes place, there is a policy and procedures to manage the process and its assessment, to assure that the learning experience is appropriate in terms of content and level for meeting the intended learning outcomes.

Judgment: Addressed

- Students start hospital-based teaching through clinical rotations in Year 3, Senior Cycle (SC)1 and SC2. The provided teaching timetable in clinical attachments shows that all student groups are exposed to appropriate and equivalent clinical experience opportunities. This was confirmed by students and clinical tutors during the site visit. However, the Panel could not identify an explicit regulatory policy that ensures standardized implementation of this practice, especially since the Arabic language is a

possible barrier for some of the international students, as was mentioned earlier in this report. Thus, the Panel recommends that the programme should formulate a specific policy to ensure equivalent experience in clinical training amongst all students.

- During interviews with the leaders and clinical instructors in the three affiliated hospitals, they all indicated that they receive a written description of the students' learning outcomes of the relevant rotations. Clinical teaching staff also have yearly renewable contracts of employment setting out their roles and responsibilities to RCSI and the students. The Panel members were assured during the site visit that meetings between clinical instructors in the hospitals and their peer academicians in the SoM are being conducted on a regular basis in order to assure adequate preparation and conduct of clinical training and assessment. Moreover, many of them are members of key committees in the programme, which presents an effective way of communication with their peers in the SoM.
- The clinical training is conducted in three main affiliated hospitals: Bahrain Defence Force Royal Medical Services, King Hamad University Hospital, and Salmaniya Medical Complex in addition to two other hospitals: the American Mission Hospital and the Psychiatric Hospital, with also some MoH health centers. The Panel had the opportunity to visit the first three hospitals and it was evident that the clinical set up is appropriate for teaching and assessment, providing many opportunities for students to achieve the intended learning outcomes from the programme. This is through self-directed learning and matched assessment opportunities that enforce the importance of lifelong learning skills, such as written or online case reports, in addition to online MCQs and quizzes that allow students self-assessment of their core knowledge and monitoring of their progress.
- Assessment during clinical rotations is done in line with clinical attachment assessment guidelines. The Panel notes from the interviews and the provided evidence that the clinical tutors in the affiliated hospitals do follow RCSI assessment regulations. Interviews with students, clinical tutors, and directors of the courses indicate that clinical examinations are appropriately organized, and the students expressed their satisfaction with the conduct and outcome of clinical assessments.
- Internal and external moderation of the clinical examinations are practiced with a complete cycle of review ending with action plans for suggestions and improvement. Feedback from students about clinical teaching and examinations is also obtained and utilized for the purpose of evaluating the effectiveness of work-based learning and for improvement.

Indicator 3.5: Capstone Project or Thesis/Dissertation Component

Where there is a capstone project or thesis/dissertation component, there are clear policies and procedures for supervision and evaluation which state the responsibilities and duties of both the supervisor and students, and there is a mechanism to monitor the related implementations and improvements.

Judgment: Not Applicable

Indicator 3.6: Achievements of the Graduates

The achievements of the graduates are consonant with those achieved on equivalent programmes as expressed in their assessed work, rates of progression and first destinations.

Judgment: Addressed

- The programme mandates that it is a must for a student to achieve a minimum of 50% overall mark and a minimum of 45% in both continuous assessment and summative assessment (separately) to pass each module and progress. Additionally, RCSI is in the process of redesigning the Medicine programme (THEP) and introducing new Progress Testing by which students who fail to achieve the required standards at defined decision points might be required to sit additional tests so that they could progress in the programme. All these measures, along with the internal and external moderation processes of assessments in place, help ensure the appropriateness of the level of students' assessments and achievements. This was further confirmed by the Panel's review of evidence that documents satisfactory students' performance (e.g., Step 1 USMLE exam pass rate, pass rate for the UK PLAB 1, NHRA BMLE exam pass rate).
- Progression and attrition rates are monitored annually and benchmarked with RCSI-Dublin students' performance. Dublin's cohorts have higher median scores in 91.43% of the modules. This difference is more evident in the first two years of the programme (Foundation Year and Year 1). The Panel is of the view that the progression of the students in the programme is acceptable with relatively high CGPAs. The withdraw and discontinuation rates are relatively high also but only during the first two years of study and the failure rate is higher than Dublin School but comparable in the senior years and improving over the years. SoM has managed to improve the performance and retention rate in the first two years of the programme. One of the measures to achieve this was by changing admission criteria and initiating more support services.
- In 2021, RCSI-Bahrain received approval from the General Medical Council in the United Kingdom allowing RCSI-Bahrain medical graduates to apply for registration to practice in the United Kingdom without having to undertake the Professional and Linguistic

Assessments Board licensing examinations. This is an indication to the programme that academic standards are being met. Additionally, as confirmed by the Careers and Alumni Office at RCSI-Bahrain during interviews, alumni of the programme are accepted into prestigious internship and postgraduate training posts in 38 countries around the world, which again is further validation of the meeting of the academic standards in the programme.

- The feedback of employers, and alumni is regularly obtained and analyzed for the development of improvement plans and the Alumni Office has been registering, collecting and storing data about all graduates in the Careers and Alumni Customer Relations Management software from 2010. The regular feedback from employers and alumni indicates employer and alumni satisfaction with the graduates' profile.

Standard 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.

Indicator 4.1: Quality Assurance Management

There is a clear quality assurance management system, in relation to the programme that ensures the institution's policies, procedures and regulations are applied effectively and consistently.

Judgment: Addressed

- The programme has a set of eight main academic policies to regulate different aspects of T&L, such as QA of Staff Policy, Fair and Consistent Assessment and Evaluation of Student Progress Policy, Monitoring and Periodic Review of Curricula Programmes and Awards Policy, Information Collection and Analysis Policy and Procedure, Information Dissemination and Reporting Policy and Procedure, and RCSI-Bahrain Quality Policy. In addition, the programme has another set of general policies which are related to administrative operations, such as student records and regulations, student support and wellbeing, professional development, finance, human resources, research, careers and alumni, events and recreation. All policies are communicated to the staff *via* the staff portal, while the ones related to staff and students are accessible on the VLE. The Panel verified this during the site visit interviews. Moreover, the University adopts a two-year cycle to review and update all the policies and procedures, through which the Academic Policies are approved by the AB while the General Policies are approved by the Executive Committee.
- As mentioned earlier in this report (Indicator 2.4), RCSI-Bahrain has a well-established QMS that is managed by the QEO and the Quality Enhancement Committee (QEC), which reports to the Boards of Governors. In support of the QEC's work, the University established in 2018 the Quality Monitoring Sub-Committee. The sub-committee's main role is to monitor the development and achievement of QIPs as well as managing students and staff surveys. The QEC's procedures are governed by the Quality Policy and the Quality E-Handbook. In 2019 the QEO started the development of its own automated QMS system. The Panel had the opportunity during the visit to be presented with the functions and abilities of the system, thus, confirming its high-level performance. These quality structures are all supported by the RCSI-Dublin Quality Committee, which maintains a two-way communication process with RCSI-Bahrain ensuring alignment of

quality processes. In addition, the President of RCSI-Bahrain, Director of Quality and Academic Development, and Quality Enhancement Manager have seats on the Dublin Quality Committee.

- One mechanism that the SoM uses to ensure consistent implementation of policies and procedures is the utilisation of uniform templates, forms, and guidelines across the University. Another mechanism is the QIP which is currently being actioned and through which actions are set for any identified inconsistencies in policy implementation. The Panel confirmed during the interviews with senior administrators that the QIP is progressing according to the schedule.
- All new staff in the programme are required to attend a half day induction seminar which includes subjects on QA. Furthermore, all staff throughout their induction period are introduced to current policies and procedures which are included in the Staff Handbook. The Executive Committee regularly shares with all staff through email, decisions made at the committee meetings. Additionally, in order to enhance the staff members' understanding of QA and to increase their engagement, the Operations Management Group, shares all updates across departments. The Panel noted in interviews that academics and support staff have a good understanding of the programme's QA system and their role in ensuring effectiveness of provision.
- RCSI-Bahrain implements internal quality reviews for all its academic and administrative support units among them the QEO and the QMS it adopts. This is in addition to undergoing several external periodic reviews and accreditations by different bodies (e.g., HEC, BQA, IMC), to ensure that its practices, mechanisms, and standards, including those related to QA, are appropriate and fit for purpose. All of these reviews feed into the development of related QIPs, which are timely reported on through the automated QMS.

Indicator 4.2: Programme Management and Leadership

The programme is managed in a way that demonstrates effective and responsible leadership and there are clear lines of accountability.

Judgment: Addressed

- The SoM organizational chart describes both the administrative and academic functions. The Head of SoM is part of the Executive Team of RCSI-Bahrain and has overall responsibility for the Medicine programme. The Head is supported by a team of Cycle/Year Directors for each year/cycle of the programme and Heads of Departments, who manage their respective specialist area. The Head of Academic & Regulatory Affairs is also part of this team and collectively they are responsible for overseeing and managing the delivery of the medicine curriculum. The Panel confirms that such organizational

structure is appropriate for SoM's size and demonstrates effective leadership with clear lines of accountability.

- Reporting lines reflect clear and effective communication and decision-making processes. This was confirmed by the provided evidence, and it was also confirmed by the Panel during the interviews with both senior administrators, faculty and support staff. The management of the curriculum is conducted by the relevant committees. The relationship between RCSI-Bahrain and RCSI-Dublin committees is outlined in the governance document. Any changes to the curriculum are brought for final approval to the RCSI-Dublin School of Medicine Executive and then to the Academic Council where decision making is based on supporting evidence, including student feedback, module monitoring and internal reviews.
- The academic and administrative committees have clear Terms of Reference (ToR) and membership. These are reviewed annually ensuring effectiveness and functionality. The Panel confirmed through the submitted evidence that minutes are being kept for all meetings and these are available for academic staff in a shared folder on the staff portal. The Panel is satisfied with the number and function of academic committees and their positive impact on reporting and decision making.
- The governance document clearly defines the responsibilities of maintaining the academic standards on the committee, departmental, and university levels. Also, the set of academic policies and procedures of the programme specifies the responsibilities in different academic processes. During interviews, the Panel confirmed the clarity of the academic responsibilities.
- The leadership hierarchy is clearly described in the SER and the supporting evidence, where the programme is led by the Head of the SoM, who is responsible for its overall management. Also, during the site visit effective leadership was evident by the Panel verifying that both academic and administrative processes are run according to documented, publicised, and appropriately implemented policies and procedures.

Indicator 4.3: Annual and Periodic Review of the Programme

There are arrangements for annual internal evaluation and periodic reviews of the programme that incorporate both internal and external feedback and mechanisms are in place to implement recommendations for improvement.

Judgment: Addressed

- RCSI-Bahrain has a policy and procedure that describe module and programme monitoring and review on an annual basis, according to which the module coordinators produce MMRs every semester, to be used in the APA, along with other data collected

and analyzed by the QEO in RCSI-Dublin and the SoM in Bahrain (such as students' survey feedback, external examiner reports, statistical data on student performance, and faculty views and feedback). The outcome of the analysis is then sent to the QEO in RCSI-Bahrain for dissemination and discussion of the recommendations for the purpose of identifying areas of improvement and the production of the APA report. The QEO is the body responsible for monitoring the implementation of the QIP generated. Moreover, such monitoring has been recently automated *via* the QMS.

- The QEO manages a rolling schedule for reviews which includes a periodic internal review cycle duration of five years. For the periodic review, the University abides by the Procedural Guidelines for the Review of an Accredited Programme leading to a Major Award and the National University of Ireland Guidelines, Procedures, and Regulations for the approval of New Programmes and Programme Changes, to ensure continuous improvement to the programmes and their outcomes. The Panel verified that these policies are actually implemented by reviewing the last periodic review report of the programme dated 2019 submitted as evidence.
- The periodic review process is comprehensive, involving a SWOT analysis of the programme through which feedback from different internal and external stakeholders is collected through surveys, in addition to the appointment of a Peer Review Group of external and internal members, thus, enabling exposure to good practices on both levels. This was confirmed during interviews.
- Actions for improvement resulting from reviews, on modular, programmatic and school levels, are documented in the QIP and implementation is monitored by the QEO team, which is recently facilitated by the newly introduced automated QMS. The Panel had the opportunity to explore the system and evaluate its effectiveness in ensuring proper and timely implementation of improvement plans. The Panel appreciates the implementation of the automated quality assurance management system that will ensure proper follow-up of implementation of improvement plans resulting from annual and periodic reviews of the programme.

Indicator 4.4: Benchmarking and Surveys

Benchmarking studies and the structured comments collected from stakeholders' surveys are analysed and the outcomes are used to inform decisions on programmes and are made available to the stakeholders.

Judgment: Addressed

- There is more than one strategy that the SoM uses for benchmarking. The end of semester assessment in RCSI-Bahrain is regularly benchmarked with the RCSI in Dublin. External

examiners reports are used for benchmarking with international medical schools. Additionally, the SoM conducted international accreditation benchmarking of the programme in 2014 with the IMC using the World Federation for Medical Education (WFME) standards. It was then renewed in 2021 for another term. Before that, the programme was regionally accredited against medical standards of the Gulf Cooperative Council (GCC) Dean's Committee. The SoM is also now collecting data about students and graduates' performance in international and local examinations to use it for further benchmarking. Nevertheless, the Panel advises that RCSI-Bahrain expand its benchmarking exercises to include parallel programmes in regional and international institutions.

- The benchmarking activities/reviews result in a QIP with specific actions decided on, which are all presented and discussed in meetings of relevant academic and executive committees and ultimately at the AB level, to monitor and evaluate progress on the implementation of the QIP.
- There are regular surveys conducted to collect feedback from stakeholders at the end of each semester as regulated by the institution's review procedures. Some stakeholders are members of specific committees and boards in the SoM and their opinions are explored through such platforms. Also, the Careers and Alumni Office regularly conduct Alumni and Employer surveys for improvement purposes. During the site visit, most stakeholders including students and faculty confirmed participating in regular structured surveys.
- By reviewing samples of the survey data collected, its analysis and the consequent action plans, the Panel ensured that the stakeholders' feedback collected is appropriately used for improvement. The collected data after analysis is reported to the Head of SoM through reports such as the Annual Report. It was noted during the site visit that those reports are shared through different meetings and by several committees so that decisions about action plans are agreed on and responsibilities for implementation are assigned. During the site visit, however, students, specifically those of the first three years acknowledged that they are regularly asked to provide their feedback, but they were not informed of the collective analysis and the consequent actions to be taken. Also, students in the clinical years indicated that they are not formally informed of the actions taken based on their comments regarding clinical training in the hospitals. The Panel, thus, recommends that RCSI-Bahrain should enhance the process of communicating to students the action plans and decisions resulting from their feedback, so that they are formally oriented to the outcomes of the surveys they fill.
- During the site visit, it was evident that stakeholders, with the exception of some students, are generally satisfied with the changes implemented based on their feedback. The Panel interviewed a number of full-time faculty, clinical teachers, alumni, and PAB members and most of them were satisfied with the level of their engagement in the action plans of

the SoM and were being regularly updated about the implementation of their recommendations.

Indicator 4.5: Relevance to Labour market and Societal Needs

The programme has a functioning advisory board and there is continuous scoping of the labour market and the national and societal needs, where appropriate for the programme type, to ensure the relevancy and currency of the programme.

Judgment: Addressed

- There is a functioning PAB that regularly meets twice a year. It has clear ToR and includes discipline experts and employers. The PAB members are oriented by the current strategic plan of the SoM and the future intended programme transformation (THEP). The Panel notes that the alumni are represented in this board.
- The Head of SoM is the Chair of the PAB and this facilitates the implementation of its recommendations. During the meeting with members of the PAB, the Panel noted that they were satisfied with their role in programme evaluation and improvement. They also recalled some examples of suggestions they had made and which were implemented by the University, such as their suggestion of engaging the students in health education activities of the MoH.
- The programme has formal agreements with the three main affiliated hospitals as well as other hospitals and primary health care centers in the Kingdom of Bahrain. In addition, the programme contributes to the outreach activities of the MoH, such as the clinical rotations, community outreach mobile diabetes unit, healthy eating and active lifestyles in school children through interactive educational games and activities. These collaborations enable the programme to identify and prioritize national labour market and societal needs. Alumni and employer feedback as well as feedback from the PAB constitute another source of information for identifying and addressing labour market and societal needs.
- In 2016, RCSI-Bahrain conducted a market analysis involving 710 respondents (including students, school leavers, schools' career counsellors, parents of students) to identify labour market and societal needs and prepare its strategic plan accordingly (2018-2022). A second study was conducted in 2021 for market scoping and involved 756 respondents of the same groups. The documentation provided about the programme review and the programme's annual report includes action plans for suggested recommendations based on the labour market scoping and the feedback from external stakeholders, with achieved key performance indicators.

V. Conclusion

Taking into account the institution's own self-evaluation report, the evidence gathered from the interviews and documentation made available during the virtual site visit, the Panel draws the following conclusion in accordance with the DHR/BQA Academic Programme Reviews (Cycle 2) Handbook, 2020:

There is Confidence in the Bachelor of Medicine, Bachelor of Surgery, and Bachelor of the Art of Obstetrics of the School of Medicine offered by the Royal College of Surgeons in Ireland - Medical University of Bahrain.

In coming to its conclusion regarding the four Standards, the Panel notes, with appreciation, the following:

1. The efficient role of the Virtual Learning Environment and the other e-tools in supporting independent learning.
2. The excellent learning facilities inside the campus and in the well-equipped affiliated hospitals, where students have their clinical training.
3. The programme's robust and systematic response to address the challenges, in terms of facilities, posed by Covid-19.
4. The programme's development of a mobile application utilized by students and clinical faculty to facilitate their communication during their clinical training.
5. The good practice of establishing the Buddy system as a well-planned form of student guidance to their new peers.
6. The strong social support and effective encouragement of the students' initiatives, which is evident through the presence of more than 40 active student clubs in the University that are initiated and run by the students.
7. The implementation of the automated quality assurance management system that will ensure proper follow-up of implementation of improvement plans resulting from annual and periodic reviews of the programme.

In terms of improvement, the Panel recommends that the RCSI-Bahrain and/or the School of Medicine should:

1. Ensure that the recommended readings are updated and written in sufficient details in all the programme's modules.
2. Include in its Teaching and Learning strategy in specific a set of recommended teaching and learning methods that guide the School of Medicine faculty in selecting the most appropriate combination of these methods for their modules.
3. Ensure that the programme works on the appropriate implementation of active learning methods in all modules of the pre-clinical years.

4. Include typical formative assessment in the programme's modules.
5. Ensure that the programme sets reasonable time limits for issuing examination results and communicating them with the students.
6. Develop a policy for the recruitment of clinical part-time instructors to the programme.
7. Develop research-related policies and procedures to guide in detail the expected research activities and outputs of the faculty in the programme in line with the institutional research goals and plans.
8. Formulate a specific policy to ensure equivalent experience in clinical training amongst all students.
9. Enhance the process of communicating to students the action plans and decisions resulting from their feedback, so that they are formally oriented to the outcomes of the surveys they fill.