



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

# **Directorate of Higher Education Reviews Institutional Review Report**

**Royal College of Surgeons in Ireland-  
Medical University of Bahrain  
Kingdom of Bahrain**

**Date Reviewed: 11-15 November 2018**

HI006-C2-R002

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## Acronyms

A&QC	Awards and Qualifications Committee
APA	Annual Programme Analysis Reports
BDF	Bahrain Defence Forces Hospital
BoG	Board of Governors
BQA	Education & Training Quality Authority
CILOs	Course Intended Learning Outcomes
COO	Chief Operating Officer
CSS	Centre for Student Success
DHR	Directorate of Higher Education Reviews
GCC	Gulf Cooperating Council
HEC	Higher Education Council
HR	Human Resources
HRIS	Human Resources Information System
ICE	International Community Engagement
ICT	Information and Communication Technology
ILOs	Intended Learning Outcomes
IMC	Irish Medical Council
ISSE	International Survey of Student Engagement
KHUH	King Hamad University Hospital
KPI	Key Performance Indicator
L&D	Learning and Development
MCP	Medical Commencement Programme
MoE	Ministry of Education
MoH	Ministry of Health
MoU	Memorandum of Understanding
NQF	National Qualifications Framework
PASS	Personal and Academic Student Support

PD	Professional Development
PDP	Professional Development Plan
PDU	Professional Development Unit
PILOs	Programme Intended Learning Outcomes
QA	Quality Assurance
QEC	Quality Enhancement Committee
QEO	Quality Enhancement Office
QIP	Quality Improvement Plan
QMC	Quality Monitoring Sub-Committee
RCSI- BAH	Royal College of Surgeons in Ireland - Medical University of Bahrain
RCSI - Dublin	Royal College of Surgeons in Ireland - Dublin
RPL	Recognition of Prior Learning
SARA	Student Academic & Regulatory Affairs
SCAR	Student Clinical Assessment Reports
SER	Self-Evaluation Report
SH&WU	Student Health and Wellbeing Unit
SPGS&R	School of Postgraduate Studies and Research
TEL	Technology-Enhanced Learning
ToR	Terms of Reference
VLE	Virtual Learning Environment
WFME	World Federation for Medical Education

## 1. 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 Programme Reviews where the quality of learning and academic standards is judged in specific programmes. The DHR completed the first cycle of institutional reviews in 2013, and the second cycle is scheduled for 2018-2019, in accordance with the Institutional Quality Reviews Framework (Cycle 2) approved by the Cabinet (Resolution No. 38 of 2015). The main objectives of the institutional reviews are:

1. To enhance the quality of higher education in the Kingdom of Bahrain by conducting reviews to assess the performance of the HEIs operating in the Kingdom, against a predefined set of Indicators and provide a summative judgment while identifying areas of strength and areas in need of improvement.
2. To ensure that there is public accountability of higher education providers through the provision of an objective assessment of the quality of each provider, which produces published reports and summative judgements for the use of parents, students, and the Higher Education Council (HEC), and other relevant bodies.
3. To identify good practice where it exists and disseminate it throughout the Bahraini higher education sector.

The institutional review process will assess the effectiveness of an institution's quality assurance arrangements against a pre-defined set of standards and indicators, and identify areas of strength and areas of improvement. Each Indicator will have a judgement; i.e. 'addressed' or 'not addressed', which collectively will lead to a Standard's judgement. A Standard will be given a judgement of 'addressed', 'partially addressed' or 'not addressed' depending on the number of indicators 'addressed' within a Standard, as detailed in the Institutional Quality Reviews Framework (Cycle 2). The aggregate of Standards' judgements will lead to an overarching judgement – 'meets quality assurance requirements', 'emerging quality assurance requirements', 'does not meet quality assurance requirements', as shown in Table 1 below.

**Table 1: The Overall Judgements**

Judgement	Description
<b>Meets quality assurance requirements</b>	The institution must address all eight Standards
<b>Emerging quality assurance requirements</b>	The institution must address a minimum of five Standards including Standards 1, 4 and 6 with the remaining Standards being at least partially satisfied.
<b>Does not meet quality assurance requirements</b>	The institution does not address any of the above two overall judgements

## 2. The Institution's Profile

Institution Name	Royal College of Surgeons in Ireland-Medical University of Bahrain
Type of the Institution	Private University
Year of Establishment	2004, Opened in October 2004 [Temporary Campus]
Location	Busaiteen, Kingdom of Bahrain
Number of Colleges/Schools	3
Names of Colleges/Schools	1. School of Medicine [opened in 2004] 2. School of Nursing and Midwifery [opened in 2006] 3. School of Postgraduate Studies & Research [opened in 2009]
Number of Bachelor Qualifications	6 (plus 2 other exit awards in medicine for those who do not complete the degree)
Number of Postgraduate Qualifications	2 hosted programmes from the Institute of Leadership in RCSI-Dublin, which are: -MSc Quality & Safety in Health Care Management - MSc Health Care Management
Number of Enrolled Current Students	1260
Number of Graduates since inception	1800 [at the time of SER submission]
Number of Academic Staff Members	53
Number of Administrative Staff Members	94
Previous Institutional Review Date	20-22 May 2012
Date of SER submission	31 July 2018
Date of Site Visit	11-15 November 2018

### 3. Judgment Summary

**The Institution's Judgement: Meets QA Requirements**

Standard/ Indicator	Title	Judgment
<b>Standard 1</b>	<b>Mission, Governance and Management</b>	<b>Addressed</b>
Indicator 1	Mission	Addressed
Indicator 2	Governance and Management	Addressed
Indicator 3	Strategic Plan	Addressed
Indicator 4	Organizational Structure	Addressed
Indicator 5	Management of Academic Standards:	Addressed
Indicator 6	Partnerships, Memoranda and Cross Border Education	Addressed
<b>Standard 2</b>	<b>Quality Assurance and Enhancement</b>	<b>Addressed</b>
Indicator 7	Quality Assurance	Addressed
Indicator 8	Benchmarking and Surveys	Addressed
Indicator 9	Security of Learner Records and Certification	Addressed
<b>Standard 3</b>	<b>Learning Resources, ICT and Infrastructure</b>	<b>Addressed</b>
Indicator 10	Learning Resources	Addressed
Indicator 11	ICT	Addressed
Indicator 12	Infrastructure	Addressed
<b>Standard 4</b>	<b>The Quality of Teaching and Learning</b>	<b>Addressed</b>
Indicator 13	Management of Teaching and Learning Programmes	Addressed
Indicator 14	Admissions	Addressed
Indicator 15	Introduction and Review of Programmes	Addressed

Indicator 16	Student Assessment and Moderation	Addressed
Indicator 17	The Learning Outcomes	Addressed
Indicator 18	Recognition of Prior Learning	Addressed
Indicator 19	Short courses	Not Applicable
<b>Standard 5</b>	<b>Student Support Services</b>	<b>Addressed</b>
Indicator 20	Student Support	Addressed
<b>Standard 6</b>	<b>Human Resources Management</b>	<b>Addressed</b>
Indicator 21	Human Resources	Addressed
Indicator 22	Staff Development	Addressed
<b>Standard 7</b>	<b>Research</b>	<b>Addressed</b>
Indicator 23	Research	Addressed
Indicator 24	Higher degrees with research	Addressed
<b>Standard 8</b>	<b>Community Engagement</b>	<b>Addressed</b>
Indicator 25	Community Engagement	Addressed

## 4. Standards and Indicators

### Standard 1

#### Mission, Governance and Management

*The institution has an appropriate mission statement that is translated into strategic and operational plans and has a well-established, effective governance and management system that enables structures to carry out their different responsibilities to achieve the mission.*

#### **Indicator 1: Mission**

*The institution has a clearly stated mission that reflects the three core functions of teaching and learning, research and community engagement of a higher education institution that is appropriate for the institutional type and the programme qualifications offered.*

**Judgement:** Addressed

The Royal College of Surgeons in Ireland-Dublin (RCSI-Dublin) and the Royal College of Surgeons in Ireland- Medical University of Bahrain (RCSI-BAH) have between them an operating agreement in place, signed March 2018. RCSI-BAH is a constituent university of RCSI-Dublin and has a clear mission statement, the core of which is displayed on its website. This is derived from the main purpose of RCSI-Dublin/RCSI-BAH and seems appropriate for the institution type and the programmes offered. National strategies have been identified through having representation from Bahrain on the Board of Governors (BoG), and through stakeholder involvement such as an annual external stakeholder engagement day and an extensive market insight survey carried out in 2016. The Self-Evaluation Report (SER) [p.13] clarifies that the main purpose of RCSI-BAH is to build on the heritage of RCSI-Dublin to “enhance health in Bahrain, the other GCC countries and beyond” in areas of “education, research and service”.

According to RCSI-BAH SER [p.14], the mission is reviewed every five years as part of the institution’s strategic planning process. The latest version of the mission statement was approved in 2016 by the RCSI-BAH Executive Committee (EXCO) alongside the recent Strategic Plan 2018-2022, which included extensive stakeholder involvement during its development. The Panel was informed during site visit interviews and from the meeting minutes of the BoG that the mission and the strategic plan have been reviewed by both the BoG and the Senior Management Team in RCSI-Dublin. RCSI-BAH is currently awaiting final approval of the revised mission statement and strategic plan from the HEC in Bahrain. In the meantime, these documents are providing the roadmap for the Institution and will continue to do so over the next five years. With respect to the mission, it is publicly displayed throughout the RCSI-BAH campus and was found by the Panel to be well-understood by staff and students. In addition, the recent revision of the mission and strategic plan is evidence of a regular review process, which also included extensive engagement

with internal and external stakeholders. The Panel finds that the RCSI-BAH mission is appropriate for the institution type and programme offerings.

### **Recommendation(s)**

None

### **Indicator 2: Governance and Management**

*The institution exhibits sound governance and management practices and financial management is linked with institutional planning in respect of its operations and the three core functions.*

### **Judgement: Addressed**

RCSI-BAH has a BoG with clear Terms of Reference (ToR) where the roles and responsibilities are briefly defined. According to the ToR, the BoG is primarily responsible for providing strategic guidance and direction for RCSI-BAH. The Board is expected to receive reports from the Academic Board and provide advice on all new courses, programmes and matters concerning academic quality and assessment; explore research opportunities as well as approve university annual reports; and consult and advise on aspects of campus development. The BoG includes senior representation from RCSI-Dublin and RCSI-BAH. However, according to the SER and the ToR, there are ten members of the BoG; while, the membership register (2014-2017) includes nine members only. The Panel was informed that this discrepancy is due to the HEC in Bahrain having the final say on the BoG members and rejecting the proposed MoE and MoH representatives due to potential conflicts of interest. The list of BoG members includes non-academic representation from the Bahraini business community; nevertheless, as advised in Indicator 25, RCSI-BAH can benefit from reviewing the BoG's membership to include wider representation from the community, so as to ensure that local perspectives are considered at the highest level of the organisation, in line with the institution's commitment to establishing a collaborative partnership with the local and wider community set out in the Strategic Plan 2018-2022. Minutes of meetings indicate that the BoG is fulfilling its mandate and that records of attendance are regularly maintained. The BoG membership and its ToR are reviewed on an annual basis; however, while the BoG is well-established, there are no implemented procedures in place for the appointment or induction of its members. Thus, the Panel is of the view that this is an area that RCSI-BAH needs to address, along with the development and implementation of mechanisms to monitor the effectiveness of its governing body in line with good practice.

In addition to the BoG, the Institution has a number of committees operating at different levels and with detailed terms of reference and clear reporting lines between them, as evidenced in the ToR, minutes of meetings, and in the governance document. Of these committees, some are administrative and are overseen by the EXCO; while, others are academic and report to the Academic Board. The Academic Board oversees all academic programmes and feeds information to, and receives information from, the Quality Enhancement Committee (QEC), which along with

the Board report to both the BoG and the Academic Council in Dublin. As for the EXCO, it reports to the BoG and is responsible for the oversight of the strategic and operational management of RCSI-BAH. This committee provides the link between strategic planning, resource and financial allocation. RCSI-BAH has a sound financial management system in place and states in its SER [p.15] that the requirements of the strategic plan are incorporated into the budgeting process, which was evidenced in the financial planning documents viewed on site. Additionally, there is a clear link between the strategic plan and programme offerings, with a high-level financial planning projected for the next five years, which is complemented by regular annual financial planning. There are also related approved delegations of authority for financial and management decisions.

RCSI-BAH is subject to an external financial audit carried out on an annual basis by a professional service company, the results of which are submitted to the HEC and Ministry of Industry and Commerce (MOIC) and RCSI-BAH is included in the internal audit of the RCSI Group. Annual audits are also carried out by the HEC and as was confirmed to the Panel during interviews, operating budgets are reviewed by heads of schools on a monthly basis and there is flexibility to make adjustments accordingly. Consequently, the Panel finds that the EXCO reviews of the university finances along with all the internal and external audits conducted indicate the existence of processes for ensuring transparency and credibility of financial monitoring and conduct.

RCSI-BAH also has a Risk Register, Business Continuity and Recovery Plan and a Crisis Management Plan, which are all administered and monitored by the EXCO. As per the SER and as explained in interviews, the benefit of these plans is that they help with the early identification and management of risks (whether strategic, operational, financial, or reputational) and with the recovery from major crises or events; thus, helping ensure that university strategic objectives will be achieved. In light of the above, the Panel finds that with respect to its operations and core functions, RCSI-BAH has sound governance and management practices in place, including appropriate fiscal management arrangements.

### **Recommendation(s)**

- Develop and implement procedures for the appointment and induction of the members of the Board of Governors, as well as, mechanisms to monitor the effectiveness of the Board.

### **Indicator 3: Strategic Plan**

*There is a strategic plan, showing how the mission will be pursued, which is translated into operational plans that include key performance indicators and annual targets with respect to the three core functions with evidence that the plan is implemented and monitored.*

### **Judgement: Addressed**

The RCSI-BAH Strategic Plan 2018-2022 was built on the previous Strategic Plan 2012-2017 and through involvement of multiple stakeholders. A market insight study which included a wide range

of stakeholders was carried out in 2016 with 720 respondents, and the recommendations arising from this extensive consultation process are clearly reflected in the current Strategic Plan. Strategic planning at RCSI-BAH is also discussed with stakeholders during stakeholder engagement days. The Panel finds that the staff survey results indicate good familiarity with the previous Strategic Plan and, during interviews with staff, the Panel detected clear engagement with the strategic planning process as well as general awareness of the latest version of the Strategic Plan. This Plan is clearly linked to the institution's mission and purpose and shows that 80% of the Key Performance Indicators (KPIs) from the previous strategic plan was met and that there is a clear sense of continuity in the institution's approach to strategic planning. The current Strategic Plan covers the three core functions in its three pillars: developing teaching and learning; building research; and community engagement and service. The Plan also includes KPIs and quantifiable measures of success.

Responsibility for monitoring the implementation of the Strategic Plan, as well as for its periodic review, is under the Strategic Implementation Group (SIG), which is chaired by the President and includes heads of schools and other key roles. The SIG meets once a semester and minutes of meetings reflect that there is a comprehensive process in place for the monitoring and review of achievements against strategic objectives. Processes are clearly being implemented for the annual monitoring of progress. In addition, the Panel was able to review the latest department-level Operational Plans, which are clearly linked to the overarching Strategic Plan 2018-2022, its KPIs and measures of success. However, the Panel was informed during interviews that not all areas under the Chief Operating Officer (COO) had prepared up-to-date operational plans in line with the latest Strategic Plan, as the focus of these departments has been on fulfilling their day-to-day obligations. Accordingly, while there was clear awareness of operational objectives during the site visit, particularly in the areas of marketing and community engagement, the Panel agrees that operational plans need to be developed for all areas in order to monitor achievements in line with current strategic expectations. Other than this, the Panel is generally satisfied with the institution's strategic planning, implementation, and monitoring in relation to its core functions and activities.

#### **Recommendation(s)**

- Ensure that all the areas under the Chief Operating Officer have up-to-date operational plans in line with the latest Strategic Plan.

#### **Indicator 4: Organizational Structure**

*The institution has a clear organizational and management structure and there is student participation in decision-making where appropriate.*

**Judgement:** Addressed

There is a clear organisational structure revised and approved February 2018, which is available for staff, students and all stakeholders, and is posted on the RCSI-BAH website. As confirmed through interviews, this organizational structure assists staff members in knowing their roles and chain of command in the Institution, especially with the availability of specific and clear job descriptions for all staff. In addition, as was confirmed in interviews, this structure is dynamic and the Institution is capable through it to respond to changes as they arise. The organizational structure is approved as a part of the university's Governance document, which includes all terms of reference of committees, membership information, reporting lines, and governance structure.

Within the institution's governance structure, the President chairs a number of key bodies, which facilitates coordination and leadership. There are also regular meetings held at a senior level, as well as at the level of departments and committees, leading to the establishment of a sense of effective coordination and leadership. With respect to committees, there is a review system for them, which has resulted in Quality Improvement Plans (QIPs) that are submitted to the Quality Monitoring sub-committee. This is in addition to resulting in a recent reduction in the number of committees, with 12 being the maximum number of committees in the Institution. The Panel notes with appreciation this review process and its associated monitoring of quality, and considers it to be very thorough and an example of good practice. Nonetheless, despite the aforementioned organizational structures, processes, and job descriptions, it was evident from interviews with part-time faculty that some of them were not aware of their job descriptions, which signals according to the Panel a communication issue. Communication was in fact raised as a concern in the staff survey and it is an area that RCSI-BAH is addressing, as was explained during site interviews.

Finally, in terms of formal decision-making bodies, external representatives are included on the Programme Advisory Boards and there is external representation on the BoG. As for students, they are represented on a number of committees such as the Student Affairs Committee and the school academic committees which their classroom representatives attend. Additionally, they are present in other meetings and events such as the annual stakeholders' engagement day and participate on a regular basis in some surveys, such as the 'Graduate Readiness for Workforce Survey'. As a result, the Panel finds that RCSI-BAH has a clear organizational and management structure, with opportunities for considering stakeholders' viewpoints in decision-making where appropriate.

### **Recommendation(s)**

- Ensure that all faculty, in particular the part-timers, are informed about their job descriptions.

### ***Indicator 5: Management of Academic Standards***

*The institution demonstrates a strong concern for the maintenance of academic standards and emphasizes academic integrity throughout its teaching and research activities.*

**Judgement:** Addressed

To ensure academic standards, RCSI-BAH has a number of policies and processes in place, among them is the 'single marker' approach, where examination questions from all RCSI sites (Bahrain, Dublin, and Perdana) are marked by one individual, and then subjected to a process of internal moderation as well as an external examiner review. This is despite the fact that the overseeing of academic standards is not specifically mentioned in the BoG's ToR. Nevertheless, there is overseeing of annual reporting, which results in a number of reports, such as the Annual Programme Analysis Reports, Module Monitoring Reports and the National University of Ireland (NUI) External Examiner Reports. With respect to internal moderation, it is implemented only in the programmes offered by the School of Nursing and Midwifery (SONM), since these programmes are developed in-house and have no directly-equivalent programmes of them in RCSI-Dublin. In contrast, the programmes offered by the School of Medicine (SOM) benefit from examinations and examination results that are all considered and approved by a joint board of examiners in Dublin. The SONM, however, like the SOM extensively makes use of external examiners nominated by the NUI, who pre-moderate written examination papers and make recommendations for improvement, and who also have representation on a Bahrain-based board of examiners responsible for reviewing and approving all SONM examination results.

In addition, RCSI-BAH has stringent security processes and procedures in place to ensure the integrity of all assessment documents and tools. Among these policies is one related to plagiarism, which is complemented with the plagiarism-detection software Turnitin and an online course to support students in avoiding plagiarism, which all students have to take and for which a certificate is provided at the end of the course. Interviews with students confirmed to the Panel their awareness of the plagiarism policy and their utilization of Turnitin; a reference to the plagiarism policy is also included in the Student Handbook and students have access to that policy through the Virtual Learning Environment (VLE) link. Furthermore, all students are expected to access-through the VLE- and sign the Student Code of Conduct, which makes specific reference to the Plagiarism Policy. Nevertheless, the Panel did not find any reference to the penalties for cheating either in the Student Handbook or the Student Disciplinary Regulations. Similarly, no reference to plagiarism or academic integrity is made in the Staff Handbook nor any specific reference in the staff disciplinary procedures. However, plagiarism is clearly covered in the research misconduct statement.

In terms of complaints, appeals, and grievances of students, RCSI-BAH has a Student Complaint Policy managed by the Department of Student Development and Wellbeing; however, RCSI-BAH usually aims for an informal approach initially. In addition, interviewed students reported that they tend to rely mainly on the class representative system as an effective channel for communicating and addressing student complaints. There is also an appeals' process for results and other related decisions. Interviews with students confirmed to the Panel that they are informed about the appeals' procedure during induction and through the Appeals Regulations document accessible through the VLE. A main point highlighted by the students is that they are not allowed to appeal an 'academic judgement', for which the University adopts the definition of the UK Higher Education Act 2004 as being 'the professional and scholarly knowledge and expertise which members of University staff and external examiners draw upon in reaching an academic decision'. The Panel finds the adoption of this specific definition to be a sufficient justification for student appeals being restricted only to cases of calculation mistakes or lack of validity in examination questions, as will be

explained in Indicator 16. The Panel also agrees that RCSI-BAH has sufficient mechanisms in place for ensuring academic standards and integrity in teaching and research activities.

### **Recommendation(s)**

- Improve dissemination, and awareness, of penalties for cheating and other forms of academic misconduct.
- Ensure that formal policies to handle staff academic integrity are developed and disseminated.

### **Indicator 6: Partnerships, Memoranda and Cross-Border Education (where applicable)**

*The relationship between the institution operating in Bahrain and other higher education institutions is formalized and explained clearly, so that there is no possibility of students or other stakeholders being misled.*

### **Judgement: Addressed**

The rules of engagement between RCSI-Dublin and RCSI-BAH are clearly set out and cover the areas of governance, qualification, strategy and Quality Assurance (QA). As RCSI-Dublin is on the BoG of RCSI-BAH and as RCSI-BAH is a constituent university, there are mechanisms to ensure that both bodies meet their obligations. One finds, as a result, extensive liaison between the RCSI campuses at committee level, delivery of the curriculum and through external examiners' visits. In addition, there are cross-site cycle director meetings and in practice clear liaison between the directors of the different RCSI sites.

The operating agreement clearly states that graduates from the Bahrain campus are awarded degrees from both RCSI-BAH and/or RCSI-Dublin, depending on the ownership of the programme, and that these degrees get attested by the HEC. The resulting qualifications from RCSI-BAH are recognised internationally and in the home-country, as RCSI-BAH is a campus of the RCSI Group. From site visit interviews, it was evident to the Panel that there is a clear understanding among stakeholders regarding who grants the award. QA arrangements are also covered in the operating agreement but there is no specific reference to teaching commitments; yet, it is clear that this is understood in practice. In addition, with respect to QA, the SER states that no changes or updates to the curriculum of a programme based in more than one site can happen unless they are implemented in all RCSI sites at the same time, and that curriculum consistency is ensured through the Cycle Committee. A review of the committee's meetings' minutes confirmed to the Panel the institution's efforts in this respect and thus its commitment of ensuring the quality of its offerings. Finally, with respect to strategy, the operating agreement states that RCSI-BAH will both participate in, and benefit from, the setting of the strategic direction and plans of RCSI, through having an opportunity to contextualize RCSI-BAH's needs, gaining value from generated research, and receiving training and development required to underpin the implementation of the RCSI strategic direction. Accordingly, the Panel finds that there is a clear and formal relationship between RCSI-BAH and RCSI-Dublin that is well-understood by relevant stakeholders.

**Recommendation(s)**

None

**Standard Judgement:** The Institution **addresses** Standard 1: Mission, Governance and Management

## Standard 2

### Quality Assurance and Enhancement

*There is a robust quality assurance system that ensures the effectiveness of the quality assurance arrangements of the institution as well as the integrity of the institution in all aspects of its academic and administrative operations.*

#### **Indicator 7: Quality Assurance**

*The institution has defined its approach to quality assurance and effectiveness thereof and has quality assurance arrangements in place for managing the quality of all aspects of education provision and administration across the institution.*

**Judgement:** Addressed

RCSI-BAH has a Quality Assurance Policy, a Quality Enhancement Office (QEO) with quality operational plans, a Quality Enhancement Committee (QEC) and a Quality Monitoring Sub-Committee (QMC) with clear TOR, which together render a well-established and sound quality system at RCSI. The QEO, which was established in 2012, and the QEC, chaired by the President, oversee quality issues at the University and report through the Academic Board to the Dublin Quality Committee, on which the RCSI-BAH President, Head of Quality Enhancement, and the Quality Officer all serve as members. The Dublin Committee plays an effective role in overseeing quality issues, as in it, there is multi-dimensional communication in terms of academia and research between all RCSI sites/campuses. Similarly, the QEC in RCSI-BAH plays a pivotal role in having standing items on different committees' meetings, where representatives on these committees can provide feedback to their groups on matters discussed and agreed. It must be noted that the QEC also has on it student representatives who, as internal stakeholders, share their feedback with the committee. The QEC works in collaboration with the QEO, which serves as the overarching link on quality issues addressed in different committees, among them the Quality Monitoring Sub-Committee (QMC). The responsibility of the QEO, as explained during interviews with QA senior management, is to facilitate communication and disseminate information related to QA and it does so in several ways, such as by sending out highlights/insights of committee meetings after each meeting and also by establishing a Committees' Shared Folder Access Process.

RCSI-BAH has an array of both academic and general policies that cover the three core functions of a higher education institution. These policies are available on, and accessible through, the staff portal or the VLE in the case of academic policies, as was confirmed during the site visit tour. The general policies are organized by the respective non-academic departments and approved by the EXCO. With respect to the Quality Policy, which was developed by members from the quality enhancement offices of both RCSI-BAH and Dublin, the Panel finds that it is well-written and clear. According to this policy, the QEC is responsible for creating policies and implementing

QA or improvement processes and activities in all academic and administrative areas; while, the QEO's main role is that of supporting the implementation of the QA policy by coordinating activities and collecting data of relevance. The Panel found sufficient evidence indicating that RCSI-BAH ensures that policies are implemented and issues are addressed through regular monitoring, evaluation, and implementation. Moreover, ToR of academic committees, as well as committee minutes of the QEC and other QA documents and reports provide evidence of ongoing reviews and auditing for quality improvement.

The Panel also noticed an institutional review schedule for policies/TOR and key documents in place and that most of the policies and procedures had been either developed or updated recently, or finalized/updated only one year earlier. Furthermore, there was sufficient evidence in terms of documentation (e.g. QMC meeting minutes and QMC policies) to indicate that RCSI-BAH implements an effective mechanism for disseminating quality enhancement information and updates through its network of academic and general committees, which the Panel notes, with appreciation, helps keep internal and external stakeholders aware of quality assurance issues and developments. Finally, with respect to complying with HEC licensing regulations, RCSI-BAH has a system in place for monitoring such compliance, which is the responsibility of a designated staff member. This is in addition to RCSI's ongoing implementation of a variety of monitoring methods to ensure the quality of its offerings and practices. These include methods for the systematic collection of data, among them the generation of regular surveys; implementation of systematic reviews; and the completion of the HEC's Monthly Institutional Reporting Form and the preparation of an annual report for the HEC, with the last one having been sent in December 2017. As a result, the Panel is satisfied with the RCSI-BAH quality assurance arrangements for managing quality of its educational provision and various institutional activities.

### **Recommendation(s)**

None

### ***Indicator 8: Benchmarking and Surveys***

*Benchmarking and surveys take place on a regular basis; the results of which inform planning, decision-making and enhancement.*

**Judgement:** Addressed

RCSI-BAH has undergone reviews and accreditation processes by several national and international bodies, and as an institution, has utilized a number of internal and external reference points to determine and verify its academic standards. Nevertheless, RCSI-BAH has not conducted at the institutional level any comprehensive benchmarking process with other institutions of a similar profile, whether national, regional, or international. This was confirmed to the Panel through interviews with senior management, who clarified the numerous external

reference points and standards relied on to ensure academic standards, such as: the Irish Medical Council (IMC), the World Federation for Medical Education (WFME), and the Gulf Cooperating Council (GCC) Medical Schools' Dean Committee, when it comes to its medical programmes; the Nurse Registration Programmes Standards & Requirements Nursing and Midwifery Board of Ireland (NMBI), the European Directives Requirements, the World Health Organization (WHO) Global Standards for Initial Education of Professional Nurses and Midwives, and the GCC standards for Nurse Education and Nursing Programmes, in the case of its nursing curricula. This is in addition to some mapping exercises conducted against the requirements of the NUI and the National Qualifications Framework of Bahrain (NQF) in relation to assessment methods, and comparative analyses of students' results and achievements, as well as of other programme-related data, regularly carried out by RCSI-Dublin across the three RCSI campuses. RCSI-BAH, however, did formally benchmark its Library & Learning Resource Centre with LibQual, the result of which was a library benchmarking report that was issued in 2014, and was utilized for development and enhancement. From interviews, the Panel also learned that the Institution likewise benchmarks its library provision against the RCSI-Dublin library. Similarly, the University also benchmarks its entry requirements against RCSI Dublin's and those of other international universities, as will be further explained in Indicator 14. Overall, the Panel is satisfied with the diverse self-learning mechanisms (i.e., external reference points; mapping exercises; comparative analyses) adopted by the Institution; nonetheless, the Panel finds that RCSI-BAH can benefit from a more comprehensive and systematic benchmarking process at the institutional level that can lead to further enhancement in informed decision-making and the assurance of academic standards.

With respect to gathering data through conducting surveys at the Institution, this is the responsibility of the QMC, which is also responsible for ensuring that appropriate decisions and actions are taken on the basis of analyses of the surveys. RCSI-BAH conducts a variety of surveys to solicit stakeholders' opinions, feedback, and satisfaction on all aspects of RCSI provision. There is evidence that these surveys are carried out and that related QIPs are developed for staff, students, alumni, and employers -to address issues/needs identified through them. The surveys' feedback is also used for the generation of a number of reports, such as: The LibQual Survey Report, Module Monitoring Reports (MMR), Annual Programme Analysis Reports (APA), the Annual Report on Monitoring, Quality Assurance and Enhancement of Programmes. The Panel viewed the completed surveys with their analyses and reports on the VLE and verified the use of surveys by triangulating the related information with different stakeholders. Among the important surveys conducted by RCSI-BAH are the International Survey of Student Engagement (ISSE) and the Market Study 2016. The Panel also found evidence that results from surveys are being utilized to bring about improvements at the institutional level. For example, the analysis of the RCSI-BAH Staff Survey of 2016 indicated that the overall satisfaction rate with communications at the Institution improved to 62% after having been only 41% in 2013. Similarly, responding to the market study feedback has led to improvements in support for careers, such as the creation of a full-time alumni liaison role and the establishment of a new career office space, which was validated in the site tour. In interviews, various stakeholders confirmed to the Panel their satisfaction with, and awareness of, the various improvements that have been made

as a result of the feedback obtained from surveys. Despite this, however, the Panel notes that historically RCSI-BAH has had a very low students' response rate on surveys and this was confirmed during interviews with senior management, who explained measures that have been taken to address this issue. The Panel appreciates that RCSI-BAH has in place a clear policy and process for survey administration that lead to quality improvements, which is considered by the Panel as an example of good practice. The Panel also suggests that RCSI-BAH continues in its efforts to further develop mechanisms that ensure effective oversight of substantial data collection and analysis at the institutional level.

### **Recommendation(s)**

- Ensure that benchmarking at the institutional level is conducted in a more comprehensive and systematic manner.

### **Indicator 9: Security of Learner Records and Certification**

*Formalized arrangements are in place to ensure the integrity of learner records and certification which are monitored and reviewed on a regular basis.*

### **Judgement: Addressed**

RCSI-BAH has an updated Student Records Policy and Procedure document that governs rules supporting the electronic student information and records system called Quercus. Information on the Quercus system is kept secured on the cloud by a hosting company in London. This system consists of a number of modules, including students' academic records and fees, and ensures profile access that is appropriate for each of the functions and areas of responsibility. For example, the Student Academic & Regulatory Affairs (SARA) Coordinators have access to the academic records of students but not to their financial information. The system also has an internal audit tool, which tracks any activity on a student record. In addition, a review of all users' access of the system is conducted by the Associate Director for Academic Affairs on an annual basis, as explained in the SER and during interviews. Furthermore, RCSI-BAH keeps hard copies of all student records in separate locked rooms according to its policies and regulations. During the site tour, the Panel verified the availability of these secure spaces and noted the fireproof cabinets, where students' hard copy files are stored for up to seven years. All this is coupled with data security mechanisms provided by the Information and Communication Technology (ICT) infrastructure of the Institution, as indicated in the 'ICT Backup and Retention Policy'. The Panel was informed during interviews that one such security mechanism is that of a data backup system on campus, with RCSI-BAH currently exploring the addition of a remote external backup location.

With respect to academic transcripts, these can be issued by only a few members of staff from the Records and Regulations Department. RCSI-BAH provides two types of transcripts: one upon

graduation and the other upon request. The first is printed on special paper, signed by the Vice President for Academic Affairs, and sealed. The latter type is printed on ordinary paper, stamped by the department stamp, and signed by the manager of Records and Regulations. With respect to award certificates, conferring meetings are jointly held by the RCSI-BAH and RCSI-Dublin Exam Board for Medicine graduates and are preceded by clear and systematic steps and details. There is also a NUI-RCSI approval requirement for all awards, including those of SONM. In addition, all policies and procedures relating to student records are reviewed annually by the Records and Regulations manager and approved by the Vice President of Academic Affairs, with the purpose of ensuring their continuous effectiveness. As a result, the Panel finds that RCSI-BAH effectively preserves the integrity and confidentiality of its students' records.

#### Recommendation(s)

None

**Standard Judgement:** The Institution **addresses** Standard 2: Quality Assurance and Enhancement

## Standard 3

### Learning Resources, ICT and Infrastructure

*The institution has appropriate and sufficient learning resources, ICT and physical infrastructure to function effectively as a HEI, and which support the academic and administrative operations of the institution.*

#### **Indicator 10: Learning Resources**

*The institution provides sustained access to sufficient information and learning resources to achieve its mission and fully support all of its academic programmes.*

**Judgement:** Addressed

As explained in the SER and confirmed in interviews, RCSI-BAH has a library modelled and benchmarked against that of RCSI-Dublin, with the aim of ensuring uniformity of resources and services across RCSI campuses. The operational goals of the Library Annual Plan are to identify the service areas and ensure sustainability and accessibility of resources that meet the requirements of the academic programmes and the institution's mission. In order to do so, the library is represented on the three schools' academic committees and on the Academic Board. In addition, interviews with staff confirmed that they and the students are represented on several committees including the academic committees and that this practice has helped ensure the availability of required resources by providing them with a platform to sound their needs. Staff also reported that the heads of schools ensure through their department's Core Collection Development Plan that the learning resources for each module are identified and included within the module descriptor. This has resulted in staff and student satisfaction with the sufficiency of the resources needed to deliver programmes effectively. Furthermore, interviews with students confirmed accessibility of learning resources both in-house and remotely. Coupled with this, the library itself has several policies to govern its functions, among them the Information Resources Management Policy and the Library Borrow and Return Policy. The first policy helps ensure that all academic programmes and curricular needs of each cycle and year are supported with adequate resources, through proper mapping between them; while, the latter defines the library loan items and their loan periods. These policies are disseminated to students and staff as part of the induction sessions, as explained in the SER and reported during interviews.

The Avicenna Library with Learning Resource Centre at RCSI-BAH opens 14 -16 hours daily throughout the week. The library has its own electronic platform (Libguides), which enables self-access to information and resources for all areas, on which users are trained by library staff to use. This is in addition to several other training sessions conducted for medical and nursing students including those in the Foundation Year, which include training on referencing styles and tools, literature reviews, systematic reviews and search strategies. In addition to Libguides,

students rely heavily also on the VLE in relation to teaching and learning activities, including forum discussions, as well as access to e-databases, which have been lately increased. However, interview sessions suggest that the VLE could be a more user-friendly system or that at least users (including external examiners) should be provided with adequate training on it. Despite this, the Institution has various tools to disseminate to users' information related to its learning resources and to keep them updated with the latest library services' news.

The University utilizes diverse tools to elicit users' views, to ensure that quality service is provided for them. For example, in 2014, the Library participated in a LibQual+ survey, and areas for improvements were identified and an improvement plan was developed accordingly. Furthermore, face-to-face feedback has been regularly collected as qualitative data and in response to the low participation rate in the conducted surveys. Additionally, regular meetings have been conducted with student representatives from all cycles of the different academic programmes and librarians work closely with the Student Council in order to enhance students' experiences. All meetings are recorded and minutes are sent to all students, as was reported to the Panel during student interviews. This is in addition to confirming to the Panel that the library is very supportive of their needs and that based on their feedback, new learning spaces have been created in the facility, which affirms the university's claim in the SER that the expansion of study spaces was in response to the students' requests. Based on the aforementioned, the Panel confirms the availability and sufficiency of information and learning resources needed for the achievement of the institution's mission and for the support of its academic programmes.

#### **Recommendation(s)**

- Ensure that all VLE users are well supported and provided with necessary training on its use.

#### **Indicator 11: ICT**

*The institution provides coordinated ICT resources for the effective support of student learning.*

#### **Judgement:** Addressed

According to the SER, RCSI-BAH has an ICT Department that is responsible for providing all ICT-related applications, services, support, and infrastructure across the Institution, and the scope of its services includes Academic and Administrative Systems, as well as Teaching and Learning Technologies and Web Services. The Institution also has an ICT Organisational Chart in which the roles of key staff are set out and which has been communicated to RCSI staff and students through the induction programmes. The ICT Department is a part of the university's Operations Team and is responsible for the tactical and operational ICT-related decisions; whereas, other strategic and long-term decisions are dealt with at a higher-level in the organizational hierarchy. The Institution also has a number of ICT-related policies, such as: ICT

Acceptable Usage Policy, ICT Backup and Retention Policy, Staff Device Replacement Policy, and ICT Helpdesk Service Level Agreement; which the ICT Department adheres to in its operations and through which it tries to fulfil its objectives. These objectives are submitted by the Head of the ICT Department to the Chief Operating Officer (COO) and they get reviewed on a quarterly basis. These objectives relate to maintenance, replacement, and enhancement of the physical ICT environment. As confirmed to the Panel through the site tour, a system is also in place at the ICT Department level for recording, tracking, classifying, analysing, and closing problems; this system is called the Managed Engine Helpdesk System, which is also used by students and staff members for providing feedback to the Department on ICT-related services. Other ways of providing feedback to the Department include informal face-to-face communication, committee and feedback meetings, the ICT Department Online Staff Survey, and the internal quality review. Collectively, these have resulted in the ICT Quality Improvement Plan and the ICT Peer Review Report that include recommendations and information leading to informed decision-making and improvements. Based on interviews with students and staff, ICT issues raised as a part of their feedback are responded to effectively and efficiently.

With respect to information systems, RCSI-BAH has a number of them, which are all relatively synchronized together. These are: The Quercus Student Information System; the university's Financial System; the Attendance Management System; and the Ungerboeck Timetabling and Scheduling System. As was confirmed to the Panel during the site tour, the ICT Department manages and operates the Quercus to monitor student data and learning progress. The ICT Department has also conducted for both students and staff several orientation and training sessions on its various systems, as reported in interviews with both groups. In the case of staff members, training is provided to them based on their level and needs and there is one-on-one mentoring carried out as well. As for the students, the ICT Department runs demonstrations on the student information system and on the e-learning platform right after the orientation day; there is also a monthly security awareness session carried out to inform students of possible IT dangers/risks. Staff interviews affirmed the e-learning platform as the students' gateway to discuss (through forum discussions) ICT challenges and areas for improvement; while, student interviews clarified that most e-learning is conducted through the VLE. Nonetheless, RCSI-BAH is aiming through its Digital Strategy to provide a unified online experience for students and staff through developing a Microsoft Ecosystem for Digital Learning platform, which will be a single platform across all RCSI campuses. Interviews with senior management confirmed to the Panel that the establishment of this platform is still in its planning stages and student interviews affirmed the trend to make more services available online through automated systems and e-forms; just like they affirmed continuous work on strengthening the on-campus WiFi service, which had been reported in the students' survey of 2017 as being weak.

In light of the above, the Panel finds that RCSI-BAH has well-coordinated ICT resources in place that help support student learning. The Institution is also supported in this by RCSI-Dublin's ICT Department, which provides technical and management support to the Bahrain campus through shared resources and biweekly infrastructure and advisory board meetings between both ICT departments. This was confirmed during interviews, where the collaboration between

the two departments was reported as resulting in the maintenance of the same standards across all campuses.

### Recommendation(s)

None

### Indicator 12: Infrastructure

*The institution provides physical infrastructure that is safe and demonstrably adequate for the conduct of its academic programmes.*

### Judgement: Addressed

As per the SER and as confirmed during the site visit, the RCSI-BAH buildings are built and owned by RCSI on leased land. All facilities are structured and modified in line with the HEC Bylaws, and a report on the status of the facilities is submitted to the HEC annually, where in turn the HEC conducts a regular facilities' inspection. The access to the buildings is controlled by a permanently staffed security gatehouse and monitored by security surveillance systems. The access is regulated by the Campus Access Policy. The site tour confirmed to the Panel the many physical facilities listed in the SER and supporting evidence, which are managed through a timetabling system that is guided by published guidelines. The Learning Resource Centre, the teaching laboratories, IT express portals, lounge space and the Centre for Student Success (CSS), as examples, offer a range of learning environments. From the staff side, the University provides offices that cater to the nature and seniority of individual staff. All offices are furnished and supplied with the required resources to enable the staff to work safely and comfortably. In addition, the University has memoranda of understanding with major hospitals and health centres in the Kingdom, through which it exposes students to clinical experience. Interviews with students, revealed that they appreciate the opportunity to rotate to, and take advantage of, three major hospitals and utilize their facilities in the learning process in addition to the RCSI-BAH campus. With respect to student accommodation, RCSI-BAH provides residences through a ten-year lease in an adjacent building and priority is given to first year international students. As per the SER, a plan is in place to build on-site accommodation; however, this is not included in the RCSI Strategic Plan 2018-2022.

In terms of Health and Safety (HS) aspects, these are managed by the HS manager. RCSI-BAH implements the Health, Safety, Environmental and Quality (HSEQ) Integrated Management System (IMS), for which detailed documents exist, such as a policy, manual and employee handbook. HSEQ information is communicated across the campus through notice boards and touring spots, staff portal and students' VLE, as claimed in the SER and confirmed in interview sessions. In addition, several HSEQ induction programmes for staff and students have been conducted in areas of particular risk, specifically the laboratories and gyms. During the site visit to laboratories, the staff affirmed these measures and the Panel noticed some safety measures

available in these laboratories, such as emergency showers, anti-static floors and vacuum cabinets. Also, staff and students confirmed that there are fire alarm tests every Thursday and drills carried out once every semester. Any safety issue or incident is reported to the Health and Safety Committee, with there being a procedure for each type of incident based on its level and type. Additionally, the University has a Planned Preventative Maintenance Scheme to cover all its facilities, by which an in-house maintenance team is assigned for non-sophisticated systems and works; while, outsourcing is in place for maintenance of highly-sophisticated issues. Related quality audits are also in place and carried out by an external contracting company with the RCSI Head of Estates and Support Services, to ensure health, safety, and cleanliness of facilities.

Finally, the University elicits staff and students' feedback on its facilities and resources through the role played by the class representatives as well as through a series of less formal feedback meetings with senior management. As a result of the collected feedback, senior management is of the view that the university's building space has reached the maximum capacity to accommodate teaching and other related activities and that there is a need to expand the facilities to align with planned growth in student enrolment. Similarly, in terms of resources, although RCSI-BAH has adequate resources, staff still consider this as an area in need of expansion, as expressed in interviews with the Panel. Consequently, the Panel finds that the issue of expansion of facilities and resources is one in need of addressing. However, the Panel is satisfied that, overall, the RCSI-BAH physical infrastructure is currently safe and adequate for the delivery of its academic programmes.

#### **Recommendation(s)**

- Ensure that the growth of the infrastructure provision aligns with the expected growth of the student-body.

**Standard Judgement:** The Institution **addresses** Standard 3: Learning Resources, ICT and Infrastructure

## Standard 4

### The Quality of Teaching and Learning

*The institution has a comprehensive academic planning system with a clear management structure and processes in place to ensure the quality of the teaching and learning programmes and their delivery.*

#### **Indicator 13: Management of Teaching and Learning Programmes**

*There are effective mechanisms to ensure the quality of teaching and learning provision across the institution.*

**Judgement:** Addressed

RCSI-BAH has a teaching and learning strategy, which is appropriate for the type and mission of the Institution. This strategy is guided by the Bahrain National Strategy, RCSI-Dublin, and by input from various stakeholders. As indicated in the SER, this strategy is supported by the strategic aims and objectives of the teaching and learning pillar of the University Strategic Plan (2018-2022), and the University Strategic Implementation Group is responsible for monitoring the implementation of the strategic goals related to the teaching and learning pillar. However, the Panel notes from interviews with different stakeholders that there is a limited awareness of the teaching and learning strategy and of the process of its implementation and review; although there is evidence of its implementation in practice. In terms of management of academic programmes, there are academic committees responsible for this area, under the supervision of the Vice President for Academic Affairs. Thus, medical programmes are managed by the SOM Academic Committee, the nursing programmes by the SOMN Academic Committee, and the postgraduate programmes by the School of Postgraduate Studies and Research (SPGS&R) Academic Committee. The Panel is of the view that the committee structure clearly displays the different levels of supervision and that the roles and responsibilities are also clearly specified. However, the Panel noticed -through reviewing the submitted evidence and from interviews- that there is no documented policy for teaching and learning at RCSI-BAH. Nevertheless, there is a quality policy for monitoring and reviewing the programmes through module monitoring and annual programme analysis, the result of which is the development of QIPs related to module improvements including enhancement of teaching and learning.

In terms of work-based learning, it is carried out at RCSI-BAH through various activities both in the practical, community and clinical settings. According to the SER, medical and nursing students spend more than 50% of their programme's contact hours in practice-based learning in the affiliated teaching hospitals and community settings. This was confirmed in meetings conducted with different stakeholders, through examining modules' Intended Learning Outcomes (ILOs), and the panel's visits to clinical teaching sites. To enhance work-based learning, RCSI-BAH established a technology-enhanced learning (TEL) interest group in 2017, with defined responsibilities. This group is also responsible for setting learning agreements between the University and external

stakeholders. One example is the Memorandum of Understanding (MOU) with the Ministry of Health (MOH) for using its facilities by the RCSI-BAH students. The Panel was informed through interviews with senior management that this MOU is at a high level and RCSI-BAH, provides through it, services to the MOH on demand. In addition, a committee is in place for Clinical Teaching & Learning, which is responsible for monitoring and reporting on work-based learning and clinical teaching through reviewing medical students' logbooks, and Student Clinical Assessment Reports (SCAR) for nursing students. From interviews with students regarding their work-based learning, the Panel noticed that one common concern expressed by them is the lack of opportunities for them to learn together as medical and nursing students. Despite expressing an interest in this regard, no action has yet been taken from the side of the Institution. Rather, their schedules as medicine and nursing students remain totally different, thus hindering any type of inter-professional collaboration between them, whether in learning, research, or community engagement. In light of this, the Panel encourages RCSI-BAH to provide medical and nursing students in clinical settings with opportunities for inter-professional-learning, to help prepare them for future team-based practice.

With respect to evaluation of the quality of teaching and learning, peer observations in both the medicine and nursing schools are in effect, although the Institution admits that this type of evaluation is still in need of more structuring. Other forms of evaluation at the University include student feedback processes and mechanisms, such as student representatives on academic committees and an annual forum between Student Council representatives and senior management, where students have a chance to sound their views on the quality of teaching and learning conducted. In both fora, major points and feedback are discussed and then actions are taken accordingly. However, the Panel was informed through interview sessions that responses to student feedback could be more consistently communicated to students. Students also participate in the International Survey of Student Engagement (ISSE), which is based on the Irish ISSE. However, the provided analysis of this survey indicates a low response rate (12.41%) and the Panel was informed by senior management that students do not like to participate in international surveys without a special reason. Nonetheless, the Quality Enhancement Unit is currently working on ways to encourage greater student survey participation, as was explained previously in this Report (Indicator 8).

### **Recommendation(s)**

- Disseminate the teaching and learning strategy among all stakeholders and ensure their awareness and understanding of the process of its implementation, monitoring, and evaluation.
- Ensure greater consistency in reporting to the student body responses to student feedback related to the evaluation of teaching and learning.

### **Indicator 14: Admissions**

*The institution has appropriate and rigorously enforced admission criteria for all its programmes.*

**Judgement:** Addressed

RCSI-BAH communicates information about the University and its programmes and services through its printed publications and the university website. RCSI also produces a printed prospectus annually, with comprehensive information on its programmes, as well as on the status of the qualifications offered, including the awarding body and the level of award. According to the SER, the Institution has developed a new prospectus, which includes an overview of the programme curricula and is supplemented by individual prospectuses per school. Additionally, the Student Recruitment Department communicates all information to prospective students, their parents, schools, career counsellors, through international school visits, campus tours for schools, etc. The Panel finds from the university website and supporting materials that there are clear admission criteria for every programme, which include both academic and English-language entry requirements (IELTS certificate or TOEFL equivalent); there is also a process of appealing negative admission/application decisions. The Panel is of the view that the admission criteria match the international academic norms for the disciplines, and was informed during interviews with staff that all applicants who meet the required minimum entry requirements are interviewed to assess their motivation, insights on medicine/nursing as a career, and knowledge and understanding of healthcare issues, in order to ensure their suitability for the discipline. The interview conducted also helps in assessing applicants' language capabilities. In addition to the above listed requirements, and as explained in the SER and in interview sessions, to enable students to meet the admission criteria needed for the Medicine programme, RCSI-BAH has in place two types of foundation programmes: the Medical Commencement programme (MCP) and the Foundation Year. This being said, entry requirements for the postgraduate programmes do not include an interview, and as suggested by the postgraduate students during their meeting with the Panel, an interview at the application stage, to assess applicants' motivation as well as readiness for taking on a major research project similar to the one included in some of their programmes, could be useful.

With respect to the university's printed publications, the Panel notes that they have no information about the expected standards of academic integrity; although, there are some instructions about such standards included in the Student Code of Conduct, which is available on the VLE *via* the university website, but to which only enrolled students (in comparison to prospective students) would have access. As for the RCSI-BAH attendance regulations, they are referred to in the Student Handbook. The University also has Regulations for Recognition of Prior Learning (RPL) for students who transfer between programmes and for those entering from other institutions based on an assessment of their RPL, to be granted exemptions in line with HEC regulations and bylaws.

However, the Institution generally does not accept students who transfer from one institution to another.

The SER states that RCSI-BAH reviews its entry requirements on a yearly basis and ensures that they are in line with, or higher than, other universities in the region. The University also benchmarks against RCSI Dublin's and other international universities' entry requirements, for the recognition and comparison of international qualifications, to ensure that its requirements are set at an appropriate level. This is in addition to ensuring its compliance with the Ministry of Education (MOE) and HEC regulations for secondary-school equivalency and entry into Medicine. Furthermore, according to the SER, RCSI-BAH conducts an annual review/analysis of students' grades in reference to their points of entry into the Foundation Year of the Medicine programme and entrance qualifications, and issues related reports. There is evidence that this information is then used to inform the entry requirements. Another way of ensuring the improvement of the admission process is through the process of periodic review, which is undertaken every two to three years, where previous applicants are asked for their feedback on the process and their recommendations for improvements. Information is then transferred to the Admissions Committee to take decisions and actions accordingly. Conclusively, the Panel is satisfied with the appropriateness and rigour of the institution's admission criteria for all its programmes.

#### **Recommendation(s)**

- Ensure that information related to the expected standards of academic integrity is made available at the admission stage for prospective students and other stakeholders.

#### **Indicator 15: Introduction and Review of Programmes**

*The institution has rigorous systems and processes for the development and approval of new programmes - that includes appropriate infrastructure - and for the review of existing programmes to ensure sound academic standards are met. These requirements are applied consistently, regularly monitored and reviewed.*

**Judgement:** Addressed

As indicated in the SER, the University has developed and follows several policies and guidelines for developing and approving programmes. The Design, Approval and Verification of Awards Policy aims to guide staff in the development of programmes and provides all the details that are required for their delivery. In 2017, the University also developed a policy on Monitoring and Periodic Review of curricula, programmes and awards in addition to following NUI Procedural Guidelines for Review of Programmes. Collectively, these policies help ensure that the programmes and curricula of RCSI-BAH are fit for purpose. This is in addition to a number of documents that are used to support programme approval, such as: the programme specification document, which includes the description of learning outcomes, with Course Intended Learning Outcomes (CILOs)

being mapped to the Programme Intended Learning Outcomes (PILOs); the module descriptors; and the academic proposal document, which aims to ensure that all RCSI programmes and their respective learning outcomes, credits and assessments are designed in accordance with best practice. Market needs' analysis - including stakeholders' feedback collected through Advisory Boards and Steering Committee meetings with RCSI affiliated hospitals - is also conducted prior to the development and review of any programme. According to the SER, the university's programmes are closely aligned with the university's mission and vision, which are published in the Strategic Plan. The institution's focus is on delivering higher education to the highest international standards in the healthcare field. This is achieved through a variety of mechanisms, among them: reliance on external reference points and international standards, which is reflected in the university's belief that its graduates are of international standing; accreditation; mapping exercises; and internal and external reviews. With respect to the RCSI-BAH medical education programme, it is internationally accredited and recognised. This has resulted in listing of the programme in the World Directory of Medical Schools. As for the Nursing programmes, they are benchmarked against Irish standards. Also, all RCSI-BAH programmes are mapped for level and credit against both the National Qualifications Framework (NQF) of Bahrain and the National Framework of Qualifications European Credit Transfer System (NQF/ECTS) of Ireland. Interviews with staff revealed to the Panel the mapping practice within the University and the satisfaction with resources to meet the programmes' needs. However, although the ECTS credit is stated on each student's transcript, as is obvious from the transcript sample provided with the evidence; till now, Bahrain NQF credit is not. Nonetheless, as mentioned in the SER and confirmed in interviews, the University has plans to add the NQF credit to the transcript.

With respect to programme reviews, they are carried out internally by the Awards and Qualifications Committee (A&QC) and externally by assessors appointed by RCSI and/or the NUI. This is followed with formal ratification by the Academic Council, the RCSI Medicine and Health Sciences Board and the NUI Senate. The University also has a five-year review plan to continuously monitor the effectiveness of curricula, which includes reviews of academic units and the programmes offered. This leads to the development of annual QIPs that are assessed and monitored by a number of committees and boards. According to the interviews with staff, there is hospital representation on RCSI-BAH committees, in whose meetings decisions about review of curriculum and related assessments are made. Examples of some meetings include: Surgical Wrap-Up Session Meeting and Steering Committees' Meetings. The Panel was informed during interviews that the Steering Committees hold meetings every three months, in which anything that requires mutual agreement or cooperation between the hospitals and the University is discussed. Also, if any critical incidents take place, they are reported directly to the Steering Committee concerned. Tele-lectures from the hospital transmitted to students at the University is an example of something that was recently reactivated due to Steering Committee meetings. In addition to all this, staff also repeatedly mentioned a yearly conference for programme representatives from the three RCSI campuses, in which discussions around programme curricula take place, with a focus

on reviewing every module taught to assess what worked in it and what is still in need of improvement.

The Panel is of the view that the aforementioned policies and strategies assert the institution's aims for its programmes to be internationally accepted and to sustain international standards. On the same lines, interview sessions with RCSI-BAH and Dublin staff confirm that comparative standards between medical students in Bahrain and those in Dublin are monitored and that at the time of graduation, they are the same. This is also mentioned in the SER as a fact that 'consistently the RCSI-BAH graduates complete with the same grade distribution', which is an indication that the standards of the students at RCSI-BAH are similar to those internationally. As a result, the Panel is satisfied with the institution's systems and processes for developing, approving, and reviewing academic programmes.

#### **Recommendation(s)**

None

#### **Indicator 16: Student Assessment and Moderation**

*There are implemented transparent assessment policies and procedures including moderation. Assessment of student learning is appropriate and accurately reflects the learning outcomes and academic standards achieved by students.*

#### **Judgement: Addressed**

RCSI-BAH has policies and procedures for student assessment available on the VLE and accessible to all students and staff. This is in addition to the Marks and Standards documents, which provide information about structure, format, and assessment for each module and also data on specific rules associated with individual assessment components. According to the SER and based on interviews with different RCSI-BAH stakeholders, there is an annual review and update of assessment-related documents that is carried out based on feedback from external examiners, student feedback and analysis of performance.

In relation to this, and as stated in the SER, RCSI-BAH provides staff with opportunities for Professional Development (PD) through giving them access to the continuous PD course offered by RCSI-Dublin, which helps them learn about alternative assessment instruments and methodologies, constructive alignment and outcomes-based curricula and their associated assessment. However, it was not made evident to the Panel from meetings with the teaching staff that they attend this course; although, it was clearly reported that they attended student assessment workshops as a part of their PD. The Panel, however, did not find an apparent mechanism that

RCSI-BAH is following to ensure that the teaching staff achieve the required outcomes from this type of training.

With respect to internal and external moderation of assessment, RCSI-BAH applies this according to the RCSI Moderation Guidelines. Internal moderation is conducted for the medicine programme by a Dublin academic who is not involved in the original question-marking. In the nursing programme, it is conducted within the school and is guided by the Handling Assignments Standard Operating Procedure and also by the Preparation and Administration of Examinations and Assessments Process. Whereas, external moderation for all programmes is conducted by NUI-appointed external examiners. Based on meetings with senior management, the grades of students who fail are discussed in the examiners' meetings and an annual report is passed to the NUI and also to RCSI-Dublin in the case of medicine students. According to the SER, RCSI-BAH appoints external examiners who are proposed by the RCSI Academic Council and Medicine and Health Sciences Board and then submitted to the NUI for approval. Despite this, and although the roles and responsibilities of the external examiners are defined, the Panel noticed that there is no formal documented mechanism for their selection.

RCSI-BAH also has clear Appeals Regulations that are available on the VLE. However, according to the SER, appeal of grades is not permitted. From interviews with staff, the Panel learned that the Institution justifies this practice by the extensive internal and external moderation processes that are undertaken to ensure that all students are appropriately and validly assessed. The Panel was also informed that an appeal is considered only if the published grade is incorrect due to an error in calculation or if the examination questions were not part of the course.

Finally, as stated in the SER and confirmed through the meetings with stakeholders, RCSI-BAH has a Plagiarism Policy that describes plagiarism and how to avoid it. In addition, students take an obligatory online course that helps them understand, check for, and avoid plagiarism in written assignments. The Turnitin software tool is also available for faculty and students' use, to check for and detect plagiarism, and any student found to have plagiarized is subject to the RCSI Student Disciplinary Regulations. The same is applicable to other forms of student academic misconduct, such as cheating/copying in examinations, which are closely invigilated to monitor for any attempt of misconduct. Based on the above, the Panel finds the assessment and moderation policies and procedures at RCSI-BAH appropriate, consistently implemented, and well-aligned with student learning outcomes and academic standards.

### **Recommendation(s)**

- Develop a mechanism to measure the effectiveness of faculty training workshops on assessment.
- Clearly and formally document the criteria for selecting external examiners.

### **Indicator 17: The Learning Outcomes**

*The institution ensures that all programmes and courses have clearly formulated learning outcomes and there are effective mechanisms to ensure that graduates achieve the learning outcomes of the programmes.*

**Judgement:** Addressed

Based on information provided in the SER and in the programme specification documents of undergraduate Medicine and Nursing, and the postgraduate programmes; the Panel finds that RCSI-BAH has clearly formulated learning outcomes for its programmes. These PILOs are made available for students in the Student Handbook and on the VLE. The medicine and nursing curricula are also based on the Medical & Nursing Graduate Profiles respectively. These profiles identify the key knowledge, skills and competencies required of medical and nursing graduates, and an annual revision is carried out for their associated curricula and learning outcomes.

According to the SER, there is a major curriculum review now in progress in both the schools of medicine and nursing, with the expectation that the new curricula will be put into effect in the academic year 2019-2020. For this review, feedback on achievements of learning outcomes and graduates' success is obtained through various mechanisms, including stakeholders' formal engagement, programme advisory boards' comments, and student and alumni feedback. At the same time, examined documents and meetings with different stakeholders, theoretical examination and practice-based learning procedures are used to measure and assess the achievement of learning outcomes in the educational process. As explained in staff interviews, RCSI-BAH provides opportunities for students to exit some programmes at a certain level and according to specific set criteria for exit, type of award, and time of exit. In the SOM, there are two exit awards, where the students can receive either a Diploma or a Bachelor degree in Medical Sciences according to specified criteria. In contrast, there is no exit award in the SON&M other than the undergraduate BSc or the postgraduate MSc in Nursing. While, in the postgraduate Institute of Leadership, there are two exit awards where a student can receive either a NUI certificate or NUI Diploma.

As noted in the SER, the student assessment marks and standards are approved by the University each academic year. Furthermore, examination grading, moderation and external examiner validation are conducted in accordance with the agreed upon procedures and regulations. The results of the final medical examinations require joint NUI-RCSI Board approval, based on the RCSI-BAH Graduation Policy. After graduation, RCSI-BAH keeps track of its medical and nursing alumni through a special tracking system managed and monitored by the institution's Career and Alumni office, which the Panel had a chance to visit during the site tour. A review of this tracking system, along with information in the SER, indicated that RCSI-BAH medical graduates have been accepted into internship training programmes in Bahrain and other GCC countries, as well as Jordan, Egypt, India, Trinidad and Tobago, Malaysia, US, UK, and Canada. Graduates have also been accepted into postgraduate residency training posts in 24 countries around the world. The

Panel was additionally informed that RCSI-BAH offers support for graduates who apply for local and international licensing examinations, through the provision of question banks, books, live lectures and simulated examinations. RCSI-BAH also tracks information on its graduates through seeking employers' feedback *via* an employer survey, which was last analysed in 2014 and included both international and national employers. As for the 2017 employers' survey, the Panel came to find out that it was not analysed due to the very low response rate it received. Nevertheless, there is a good representation of employers on different university committees at RCSI-BAH which provides opportunities to solicit their feedback, and interviews confirmed to the Panel that the employers' voice is heard.

According to the SER and as confirmed through interviews, the education programmes of RCSI-BAH are based on the Bahrain, International, and Irish systems of medical and nursing education. The programmes also satisfy the requirements of the HEC, BQA, National Health Regulatory Authority and the RCSI Medical and Nursing Graduate Profiles. Additionally, RCSI-BAH has benchmarked its medical programme against the World Federation for Medical Education (WFME) standards and the Irish Medical Council (IMC) eight domains of good clinical practice. The RCSI-BAH nursing curricula is in adherence with the NUI regulations. As indicated in the SER, and as repeatedly confirmed in interview sessions, the common medicine curriculum between RCSI-BAH and RCSI-Dublin facilitates a quality measure of academic standards. Accordingly, the equivalence of learning outcomes and graduate performance between Bahrain and Dublin is consistently demonstrated. Nonetheless, the Panel found no evidence of benchmarking of the equivalence of learning outcomes of the nursing programme nor of the programmes offered by the Institute of Leadership. Generally, however, the Panel finds that programme and course intended learning outcomes are clearly formulated and that there are effective mechanisms to ensure their achievement by RCSI-BAH students.

### **Recommendation(s)**

- Ensure that the School of Nursing and Midwifery as well as the Postgraduate Institute of Leadership benchmark the equivalence of the learning outcomes of their programmes against other similar standards.

### ***Indicator 18: Recognition of Prior Learning (where applicable and legislation permits)***

*The institution has a recognition of prior learning policy, and effective procedures for recognizing prior learning and assessing current competencies.*

**Judgement:** Addressed

The RCSI-BAH has a clearly developed policy on Recognition of Prior Learning (RPL), which is aligned with HEC resolutions, despite the fact that there are only a few applications for RPL submitted to the Institution. RCSI-BAH Regulations for RPL define the process of the assessment of RPL applications. An inspection of these regulations by the Panel revealed that this process applies only to modules that are mandatory in HEIs in Bahrain, such as Arabic Language, which have identical content and learning outcomes across all institutions of higher learning.

The RPL Regulations at RCSI-BAH and the associated policy involve the use of a credit-transfer form that is used for enrolling students in the medicine programme: Either Year 1 of the six-year medicine programme or Year 1 of the five-year medicine programme. Any RPL application to entry at a higher level is not accepted and this has been clearly communicated to stakeholders through the admission requirement policy. Despite this, the Panel notes that there have been no applications for transfer or module level exemptions since the establishment of the RPL committee, and is generally satisfied with the available RPL policy and procedures.

#### **Recommendation(s)**

None

#### **Indicator 19: Short courses**

*The institution has effective systems in place for the management of its short courses (where applicable).*

Not Applicable

#### **Standard Judgement**

The Institution **addresses** Standard 4: The Quality of Teaching and Learning

## Standard 5

### Student Support Services

*The institution has an efficient and effective student administration and academic support services.*

#### **Indicator 20: Student Support**

*The institution provides efficient and effective student administration and academic support services and encourages the personal development of students.*

**Judgement:** Addressed

As mentioned in the SER, RCSI-BAH has a variety of student support services run mainly by the Student Development and Wellbeing Department. This Department is comprised of two units: the Centre for Student Success (CSS) and the Student Health and Wellbeing Unit (SH&WU). The Panel was informed by different stakeholders that the CSS provides individualised academic and learning support in different ways, and tutors and administrators are available to provide student support in this Centre. The CSS also conducts revision classes for medical students for the summer repeat examination period. The tour of the campus during the site visit confirmed to the Panel the appropriateness of the CSS facilities for its function and services.

As for the SH&WU, and as per the policy for student counselling services, this unit provides health advice, confidential counselling services and pastoral support for the students. Student vaccinations, medical screenings, and health awareness campaigns are also among the unit's responsibilities. This was confirmed to the Panel during interview sessions with different groups of stakeholders. In addition, qualified personnel are available in the Unit at specific times to help students. A confidential counselling space and a treatment room are also there, with several external counsellors such as a dietician, psychiatrists, psychologists and a therapist working with the SH&WU. The Panel notes that students can receive up to ten free external counselling sessions, through the referral system organized by the SH&WU.

The Careers and Alumni Office is another source of support for students since it provides them with opportunities to use question banks and practice different international examinations. Also, regularly scheduled PD activities in the form of seminars, workshops and networking events are conducted to help students prepare for the next phase of their career. Several topics are covered in these PD activities, such as: future career pathways, targeted CV writing, personal statement writing, interview preparation, clinical elective opportunities, local and international research opportunities, licensing examinations, career and training pathways in other countries, applying to international residency programmes, employability, etc. Information about different PD events is available on the VLE, along with some other useful links, articles and updated documents, which

the Panel members came to know of through their visit to the Careers and Alumni Office during the site tour and from interviews with alumni and staff.

In addition, the SH&WU offers support to students with disabilities through the university's policy of reasonable accommodation. In line with this policy, students have the right to apply for consideration of an illness or disability that has an effect on their academic performance, as per the University's Exceptional Circumstances policy. Accordingly, students with disabilities get accommodated based on their particular needs. For example, in the case of students in a wheelchair, the Department of Estates ensures their access to different places in the Institution. To keep track of disabled students and their needs, the SH&WU has a disability register, which along with accommodations, are reviewed on a yearly basis, and the results of that review are communicated to the necessary departments to take suitable action.

RCSI-BAH also has in place academic advising services for students, managed by the SARA Department, and these services are mainly carried out by SARA cycle coordinators who offer their advice and guidance to students in a timely fashion. Interviews with students indicated a general satisfaction with the role played by the coordinators and with the work of the Student Records and Regulations Department, which manages the Quercus Student Records System, to which all registered students have online access for viewing their grades and completing their module registration tasks.

With respect to extracurricular activities, RCSI-BAH provides students with opportunities to participate in over 30 different clubs and societies. This is organised by the Student Council and is supported by the Student Services, where students themselves are responsible for planning, organizing and setting the budget for their activities. Additionally, the Hub Sports and Recreation Centre at the University organizes regular sports events for students, staff and alumni. These include several activities such as football, basketball, volleyball and running competitions and tournaments. To help participation in physical activities, the Hub provides free health and fitness classes and a variety of social and recreational events to RCSI students. The Panel was informed that students and teaching staff are satisfied with the Hub sports and recreation centre activities. Moreover, RCSI-BAH encourages students to participate in community engagement initiatives, managed by the Community Outreach Office, which are further explained in Indicator 25.

In relation to students at risk of academic failure, RCSI-BAH has a Personal and Academic Student Support (PASS) programme that is run by the SH&WU. The students, who have failed modules in the first semester, are enrolled in this programme. These students receive regular learning support and monitoring of their progress from the tutors in the CSS, as was confirmed to the Panel during interview sessions with students and staff. An individualized Learning Commitment Programme is also designed by the CSS for students who are repeating a year. As explained in the SER, in order to track students at risk of academic failure, RCSI-BAH monitors students' attendance through a swipe card system used by students. As a result, SARA coordinators are able to identify poor attendance at an early stage. Thus, students with poor attendance records meet with their cycle

director and then may be referred to the CSS or SH&WU for support. RCSI-BAH also assigns personal tutors to struggling students through the CSS, to provide academic advice and guidance, and notify the Department of Student Development Wellbeing of any at-risk cases where action needs to be taken. Although RCSI-BAH uses several means for identifying at-risk students, such as keeping attendance, following up on examination scores, following up with the cycle directors to identify cut-off marks for students at risk, the Panel did not find a clear and structured policy for identifying students at risk of academic failure that is consistently implemented across the University.

Finally, in terms of academic advising, RCSI-BAH has two programmes managed by the CSS: the first is the Buddy Programme, which helps newly enrolled students through the support provided by older students; and the second is the Peer Assisted Learning (PAL) Programme, which includes academic, personal, and professional development for both pre-clinical and clinical year medical students. PAL also provides a platform for peer learning opportunities in a friendly learning environment. All this is provided for the students in addition to the services offered by the special tutors available in the CSS in specified times daily for students' academic support. Accordingly, the Panel appreciates the comprehensive academic support services provided by the Institution through its CSS, which are in line with international good practice.

As noted in the SER, RCSI-BAH and in particular through the departments involved in the provision of support services, conducts regular surveys (Buddy feedback, Student Exchange feedback, and PAL feedback) to assess students' satisfaction with such services, and action plans for improvement are prepared according to feedback results. In addition, and as confirmed through interviews, a suggestion box is also available for students' comments, which are reviewed regularly and action taken if possible in response to them. An annual survey about support services is also conducted, feedback is analysed, reviewed and an improvement action plan is prepared accordingly. The SER mentions also monthly meetings that are conducted with student representatives and in which problems and main issues are discussed and responded to. As a result, the Panel finds that the Institution provides administrative and academic support services provided by RCSI-BAH are efficient, effective, and contribute to the overall development of students.

### **Recommendation(s)**

- Develop a formal and structured policy for identifying academically at-risk students that is consistently implemented across all programmes.

**Standard Judgement:** The Institution **addresses** Standard 5: Student Support Services

## Standard 6

### Human Resources Management

*The institution has appropriate human resource policies and procedures including staff development in place that demonstrably support and enhance the various operational activities of the institution.*

#### **Indicator 21: Human Resources**

*The institution employs human resources that are sufficient in number and appropriately qualified to achieve the mission and to provide good quality higher education.*

**Judgement:** Addressed

The 2018-2022 Strategic Plan of the University includes an emphasis on ‘people’; yet, RCSI-BAH does not have a stand-alone Human Resources (HR) strategic plan. However, as explained in the SER, the institution’s HR Team has undertaken a strategic planning session at a local level to help prepare for an independent HR plan. In the process, feedback was collected from RCSI-BAH staff through an anonymous study conducted in October 2017 by an external consultant. The study focused among other things on staff Learning and Development (L&D) and PD, and the study outputs were immediately communicated to staff members in a university-wide event. The end result of the collected feedback, and of the key priorities identified in the study, was the development of a related 12-month action plan, to be carried out by the HR Team with the support of line managers at the Institution. As a unit, the HR Team is responsible for all employee-related processes, such as: recruitment, employee relations, L&D, performance management and employee engagement. The Team is supported by a Human Resources Information System (HRIS) called ‘Zoho People’, which has recently been adopted by the University and in which all HR-related data is recorded and stored, to inform recruitment-related and L&D decision-making. Evidence submitted to the Panel indicates that this HR system maintains staff profiles, statistics on recruitment, promotions, and leavers, staff numbers at the different schools, as well as other related data on staff qualifications. An examination of this system during the site visit proved to the Panel its fitness for purpose and effectiveness; it also confirmed the appropriateness of the institution’s academic staff in terms of qualifications and experience, in relevance to the programmes of study offered.

RCSI-BAH has a Staff Induction Policy that regulates the process of induction. As per the SER, all new RCSI-BAH staff are provided with an induction and a staff handbook at recruitment. While this was confirmed by full-time staff during interview sessions with the Panel, some of them nevertheless reported that there is no formal or consistent induction given to someone who joins the University in the middle of the academic year. In the case of the part-time staff, only some confirmed receiving an induction upon hire. Generally, however, all staff members who had been

inducted reported an evaluation of induction having been carried out at completion of the event; and some expressed the need for more teacher-training and career-guidance sessions to be organized during induction for newly-recruited staff members; which apparently RCSI-BAH has started to work on.

The Staff Handbook covers a variety of topics that help facilitate employees' work at the Institution, among them those related to staff services and benefits, rules and regulations, and recognition and development. With regards to recognition and development, the Handbook includes a brief section on academic promotion, which refers faculty to the university's promotion policy that links the promotion of a faculty member to the three pillars: teaching, research, and service. As explained in the SER, an annual meeting is held between the academic staff member and the head of the concerned school to discuss- in light of their performance on the three pillars- what development opportunities and advancements are still needed prior to applying for promotion. Despite this process being in place, interviews with staff revealed to the Panel a lack of satisfaction with the implementation of the promotion policy and process, which they believe has led to a low promotion rate among faculty members in the last three years. Consequently, the Panel advises the Institution to look into the reasons behind the low satisfaction level of some staff members with academic promotion, and to develop a relevant mitigation plan if necessary.

As per the organizational model for RCSI-BAH, all academic staff have responsibilities for teaching, research and service in accordance with their job descriptions. Although the University had previously been working on developing a distinct workload allocation model, the Panel was informed that a consensus was reached to not have a rigid model because there is no need for it in the Institution. Senior management clarified that RCSI-BAH simply adopts the one-third (teaching), one-third (research), one-third (service) rule, and that faculty are encouraged as much as possible to abide by the one-third research percentage in their work, as research links to promotion. However, faculty, on the other hand, expressed their concern with this; since, as they stated, they are responsible for all three pillars with no clear workload system. Also, research is a must for promotion, without them having enough time for it, despite the availability of funds. The solution, from their point of view, is to have more staff hired especially in medicine (i.e. three staff per medical discipline rather than two). The Panel is of the view that the Institution should investigate new ways of providing non-monetary resources for faculty research and related activities.

With respect to complaints and grievances by staff, RCSI-BAH has a related policy and procedure in place, which has been reviewed recently (January 2018). The Panel found that the grievance procedures are published in several places and can be accessed by staff. In addition, interviews with staff confirmed that the grievance policy is documented step-by-step in a simple manner for staff to understand easily. The Panel verified this information, as well as the fairness of the related process of grievance investigation, by reviewing some old anonymous employee grievance/complaint forms, analysis, and results in terms of decisions taken on their basis. Nonetheless, it was noted that no grievances had been submitted in the last three years.

Finally, RCSI-BAH has a process in place for assessing progress on its goals. This process is carried out through feedback obtained from an organizational staff survey conducted every two years, in addition to feedback gathered by HR staff attendance on committees, such as: Learning & Development Committee, Business Operations Committee, Operational Management Group, etc. Upon analysis of the organizational staff survey, a related QIP is developed to trace recurring themes, which is then followed up by audits of the HR Team by the QEO every two-three years. With respect to disseminating information to staff about the survey results and about the institution's progress on related goals, RCSI-BAH relies among other things on meetings and workshops that include information on all its pillars. An example of this is the Annual Review & Planning Workshop Presentation. Based on the aforementioned, the Panel finds that the Institution has sufficient and appropriately-qualified human resources for the delivery and support of its academic programmes.

### **Recommendation(s)**

- Ensure that formal induction mechanisms are consistently implemented for all staff, including part-timers.
- Ensure sufficient time for staff to engage in research and other non-teaching activities.

### **Indicator 22: Staff Development**

*The institution has a systematic approach to staff development and provides opportunities for all staff to remain up-to-date in their areas of teaching, research and administration.*

### **Judgement: Addressed**

RCSI-BAH has a Professional Development Unit (PDU) that oversees the process of developing a Professional Development Plan (PDP) for each staff member, which helps in the identification and monitoring of staff development needs. There is also a PDP policy, which provides guidance on the identification of staff members' development needs, as well as, on the measuring of their performance. Staff are kept aware of the PDP policy through the VLE as well through survey results and reporting. Furthermore, other related policies are in existence, such as the policy for Staff Learning and Development Funding, Conference Participation Funding, and Staff Training Funding. While on site and through interviews, the Panel verified that these policies are in effect and are dedicated solely for supporting identified staff development needs.

Every staff member is mandated to engage in the PDP process with their direct manager, who assesses their professional goals and benchmarks their performance against RCSI's competencies, as per the Professional Development Planning Document. As reported in interviews, these PDP meetings and discussions seem to be carried out more informally than formally and seem to vary

from one school to another with a similar variation in terms of consistency of implementation in monitoring staff performance. Nonetheless, the Panel concluded from interviews with senior management that alternative -yet informal- methods of performance assessment are being utilized in different schools and departments of the University. Accordingly, although staff performance is somehow being assessed at RCSI-BAH, and although there is an academic development framework in progress at the University, as was explained in interviews and as viewed by the Panel on site; the Panel is of the view that lack of consistency in performance appraisal is an issue in need of addressing.

Based on the assessment feedback of the direct managers, an L&D committee from the PDU decides whether or not to approve staff to attend training workshops/conferences/courses, etc. in different areas and at different levels, including PhD level. With respect to staff development opportunities supported by RCSI-BAH, the SER lists numerous activities in a variety of areas, such as: L&D, conference participation, staff training, QEO training on the NQF requirements, in addition to regular courses and workshops within RCSI-BAH, which are in line with NQF Compliance Procedures. Both academic staff and clinical tutors confirmed in interviews that they receive directed training in areas of relevance. Monitoring of these staff development opportunities at the University is regularly implemented by the PDU, with tracking of staff members' submitted PD applications and participation carried out and documented in related reports.

As for evaluating effectiveness of PD opportunities, the Panel was informed during interviews that staff are requested to provide their feedback after each workshop or training session attended and the collected feedback is analysed and presented in a report to be utilized for future improvements. Moreover, feedback from staff is collected on an annual basis through a satisfaction survey administered by the PDU. The results of this survey are compiled in a feedback report that gets submitted to the L&D Committee for decisions and action if necessary, which are then forwarded to the ExCo for approval and afterward posted for the staff on Zoho. This is all in addition to the yearly academic and administrative internal reviews, which provide information pertinent to staff development provision and effectiveness at the Institution, and which result in relevant review reports and associated QIPs. For example, the Self-Evaluation/Review Report in April 2018 led to revising the L&D Funding policy by increasing L&D funding (to reflect 80% of the cost of the L&D initiative), based on collected feedback from committees and staff reporting inadequacy of funding provided; which indicates the institution's responsiveness to staff members' feedback and suggestions. Similarly, related issues raised by staff members in various committee meetings (e.g. L&D Committee) are considered in the university's evaluation of staff development effectiveness. As a result, the Panel is of the view that there are appropriate and relevant staff development policies and opportunities in place that help staff members in the Institution remain up-to-date in their areas of teaching, research and administration.

**Recommendation(s):**

- Formalize and consistently implement across the University staff performance appraisal that is linked to professional development and to a specific academic development framework.

**Standard Judgement:** The Institution **addresses** Standard 6: Human Resource Management

## Standard 7

### Research

*The institution has a strategic research plan appropriate for its mission that is translated into a well-resourced operational plan, which is implemented and monitored.*

#### **Indicator 23: Research**

*The institution has implemented a plan for the development of research (e.g. disciplinary specific, scholarship of teaching and learning) appropriate for its institutional type that includes monitoring its research output, together with policies and processes to ensure the ethical and effective conduct of research.*

#### **Judgement: Addressed**

As stated in the SER, considerable progress has been made in the area of research in the last five years. An examination of the research pillar of the 2018-2022 Strategic Plan reveals a build-up on the research themes from the 2012-2017 Plan, as well as links with the research priorities identified in the National Research Strategy 2014-2024. A Research Committee is also in place at RCSI-BAH, to coordinate research activities across the Institution and in liaison with RCSI-Dublin, focusing on local and regional health needs. The Research Committee is also involved with the School of Postgraduate Studies and Research (SPGS&R) and with the Academic Committee in the monitoring of the goals and key performance indicators on research.

From interviews and review of evidence, the Panel found that the funding for research has increased to 3% of gross income and this has been welcomed by the senior leadership as a mechanism for increasing research capacity in a region where they consider external funding opportunities are a challenge. Students and staff also reported high levels of satisfaction with internal funding opportunities such as summer scholarships. As for internal funding opportunities, there are clear guidelines for them. In addition, collaboration agreements for funding and research are in place with local academic partners, such as the University of Bahrain and the Arabian Gulf University. During interviews, the Panel was informed that permission had been recently granted from the HEC to allow the use of internal research monies to fund research assistant positions, which the Panel considers as a positive step in the right direction. This has also been welcomed by the staff. In addition, staff reported that at this stage, the infrastructure for recruiting postdoctoral research staff is not in place, but that there is a strong will from the university's leadership team to develop this capacity over the period of the current Strategic Plan.

RCSI-BAH has a Research Ethics Committee, which meets on a monthly basis and comprises membership from a wide range of stakeholders. This committee is responsible for overseeing all

research (human and animal, laboratory and clinical) at the Institution and for ensuring adherence to ethical and safe conduct of research. Related instructions and guidance are available on the university website and include- for both students and staff- clear information on the policy and process of submitting research applications. Interviewed students and staff reported satisfaction with the research application and decision-making processes.

During interviews, staff at RCSI-BAH and the affiliated King Hamad University Hospital (KHUH) and the Bahrain Defence Force Hospital (BDF) reported an active culture of research, with collaboration to agree on research priorities that feed into student research and quality improvement projects. There was also a mention of a Nursing Research Committee at KHUH that reviews research proposals to ensure they align with agreed priorities and adhere to best practice and ethical principles of research. The Panel appreciates that several RCSI-BAH student projects have led to changes in practice in one of the affiliated hospitals and, in particular, in the areas of health and safety at work and care pathways. The Panel was also satisfied with the ongoing discussions taking place between RCSI-BAH, on the one hand, and King Hamad Oncology Centre, on the other, to develop capacity in the areas of stem cell research and clinical trials, in collaboration with regional academic partners.

With respect to monitoring its research outputs, RCSI-BAH does so through staff publications in peer-reviewed journals and conference presentations. The Institution itself also hosts research conferences and regular internal research symposia. In addition, the Institution covers/supports costs for open-access journal publications through a clear policy. Despite this support, however, academic staff reported that time for research often was displaced by teaching and service requirements. Accordingly, the Panel is of the view that the University could benefit from the senior leadership considering- through workload discussions with direct line managers- ways of maximising staff opportunities to engage in impactful research.

Finally, support for building effective research capacity at RCSI-BAH is provided in a variety of forms, among them the funding of presentations of accepted scientific papers at conferences and the funding of training in scientific areas. This is in addition to the provision of a number of internal and regional grants for researchers at RCSI-BAH to benefit from. In light of this, the Panel affirms the commitment of RCSI-BAH to engage in research in collaboration with local and regional academic and health service partners, to respond to the health needs of the population.

#### **Recommendation(s)**

None

#### ***Indicator 24: Higher degrees with research (where applicable)***

*Where the institution offers higher degrees that include a research component, it provides effective supervision and resources for research students and ensures that its research degrees are of an appropriate level for the programme.*

**Judgement:** Addressed

The Masters programmes offered at RCSI-BAH (Quality and Safety in Healthcare, Healthcare Management, and Nursing) all have research or quality improvement project dissertations, linked to local health service needs. There are also available appropriately qualified research supervisors at the Doctoral level for guiding the students and monitoring and reviewing their research progress, with clear role descriptors for research staff at the University. Interviewed students reported high levels of satisfaction with orientation research training and with their supervisors, whom they described as being fit-for-purpose, available and mostly responsive to students' needs, providing appropriate levels of formative feedback on project progress and comments on dissertation drafts. The Panel was informed that some supervisors are based outside Bahrain and that this can lead to challenges in coordinating supervision; however, students reported that overall they were satisfied with their international supervisors although they would prefer more face-to-face supervision where possible. As RCSI-BAH builds its research capacity over the period of the next Strategic Plan, the Panel will be interested to see how this progresses. In addition, students reported feeling able to raise concerns regarding any aspect of supervision and stated clear support of the "panic clinics" organised by faculty to deal with postgraduate student research project issues. Additionally, through interviews, the Panel came to know that students are satisfied with the resources provided by the library and with the ease of access of appropriate paper and online sources for their research purposes.

Assessment and marking guidelines for postgraduate degrees are clear and understood by students, as indicated in submitted evidence and from interviews. There is also a process in place for internal and external moderation of dissertations. A sample of dissertations reviewed by the Panel demonstrated consistency in marking and the depth and amount of feedback given was appropriate. Accordingly, the Panel is satisfied with the quality of work and marking at the postgraduate level at RCSI-BAH and finds it comparable with good practice internationally.

Finally, the Panel notes that further Masters programmes are planned at RCSI-BAH, and an application submitted in this respect is currently awaiting approval from the HEC. However, RCSI-BAH is not at this stage yet able to enrol PhD students; although, there is a PhD model of enrolment at RCSI-Dublin with a primary supervisor located there, and a co-supervisor present locally in Bahrain for potentially interested students.

In light of the above, the Panel affirms the commitment of RCSI-BAH to provide research opportunities within its current postgraduate coursework offerings, which are of the appropriate academic standard and linked to health-service needs. The Panel is also satisfied with the

opportunities provided for academic staff to enhance their capacity as supervisors, mainly the orientation programme for supervisors and the peer observations and discussions among faculty.

**Recommendation(s)**

None

**Standard Judgement:** The Institution **addresses** Standard 7: Research

## Standard 8

### Community Engagement

*The institution has a clear community engagement plan that is aligned with its mission and which is operational.*

#### **Indicator 25: Community Engagement**

*The institution has conceptualized and defined the ways in which it will serve and engage with local communities in order to discharge its social responsibilities.*

#### **Judgement: Addressed**

Community Engagement is a Pillar of the RCSI-BAH 2018-2022 Strategic Plan, which built on the previous strategic plan and has become linked more explicitly with other Pillars by having local and international objectives to improve health and well-being. An example of this, which was repeated in a number of interview sessions with the Panel, is related to the area of prostate cancer, where staff and student information sessions were conducted and then followed by engaging the community through increasing knowledge and awareness of the condition.

In addition to the community engagement Pillar and associated set objectives and key performance indicators, RCSI-BAH has a Community Engagement Office to encourage and support participation in related initiatives, locally and internationally. This office, along with a committed group of staff leading community engagement, managed to develop and organize a wide scope of activities over the last few years. According to the SER, these involve: health awareness promotion; volunteering at community and charity events fundraising; and helping the environment. The Panel was informed that these activities help students to build interpersonal skills and develop themselves personally and professionally. In terms of global community engagement, this is being overseen by the Global Health Initiative Committee, and encompasses activities in the International Community Engagement (ICE) space, where students work with communities in Ireland, Asia and Africa. Usually, students are offered the opportunity to apply for the ICE programme in return for volunteering in local community engagement. The Panel notes that about 13 students travelled abroad last academic year as a part of this programme and, thus, acknowledges the work of RCSI-BAH in this area, and looks forward to seeing future related developments. However, as mentioned earlier in Indicator 2, the Panel noticed that there is no member from the community (i.e. lay member) on the BoG and, thus, advises that this be reviewed to see how the wider community can be best represented in senior level governance.

Nonetheless, the Panel is generally satisfied with the community engagement activities at RCSI-BAH and notes with appreciation the Mobile Diabetes Unit initiative in collaboration with the Bahrain Diabetes Society, which was also praised by the nursing students during interviews as being highly successful. As for staff, they reported their desire to evaluate the impact of this community

engagement intervention through research; thus, demonstrating integration of the Strategic Plan Pillars. Furthermore, this initiative has now been embedded in the BSc Nursing curriculum, and other initiatives are now being embedded in some of the undergraduate medical curricula. In relation to this, the Panel notes that community engagement is compulsory for nursing students but voluntary for medical students and, therefore, encourages the Institution to increase its efforts in expediting and increasing medical students' engagement as part of the medicine curricula. On the same lines, RCSI-BAH is encouraged to explore ways of developing medical academic staff champions to lead this important pillar of the Strategic Plan; especially since, as was reported in interviews, there is generally more involvement of nursing academic staff in community engagement than medical staff.

Monetary donations to charities and organizations also constitute a part of community engagement at RCSI-BAH and these are all governed and guided by the institution's Donations and Fundraising Policy, which ensures that all monies raised are done so appropriately and ethically.

As for evaluation and improvement of community engagement, a confidential annual student and staff survey was noted as being a useful evaluation of current perceptions, which has led to increased communication with staff and the student body about the promotion of community engagement activities. As per the SER, there is also a plan to collect feedback from external stakeholders to assess their satisfaction with the level of support they receive from RCSI-BAH. In addition, as mentioned in the SER and as confirmed through interviews, feedback is collected from students and staff in the end of every initiative; however, it is done so more informally than formally. Accordingly, the Panel is of the view that a more formal and systematic mechanism of collecting stakeholders' feedback on community engagement activities is necessary.

Generally, the Panel is satisfied with the institution's online tool Hubspot, which serves as a database for tracking the community engagement activities taking place, with their participants, the number of hours dedicated for each, and other related details and data. The Panel also notes with appreciation the institution's commitment to engaging with the community through the Strategic Plan and the scope and success of its activities, led by a committed staff and student body.

### **Recommendation(s)**

- Develop and implement a formal and systematic mechanism for collecting stakeholders' feedback on community engagement activities.

**Standard Judgement:** The Institution **addresses** Standard 8: Community Engagement