



Oman Academic
Accreditation Authority

**Report of an Audit of the
Ministry of Health
Educational Institutes**

December 2013

Audit Report Number 37

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OVERVIEW OF THE QUALITY AUDIT PROCESS

This Quality Audit Report (the ‘Report’) documents the findings of a Quality Audit by the Oman Academic Accreditation Authority (OAAA – formerly the Oman Accreditation Council) of the Ministry of Health Educational Institutes (MOHEIs or “the Institutes”). It comments on the MOHEIs’ Mission and Vision, and the appropriateness and effectiveness of their systems for achieving that Mission and Vision. Quality Audit is the first stage in Oman’s institutional accreditation process. It is designed to provide a level of assurance to the public about the quality of the MOHEIs’ activities, and constructive feedback to the MOHEIs to assist with their ongoing improvement efforts.

Originally, all the MOHEIs were scheduled to undergo separate Quality Audits. However, it was agreed in 2008 that the Institutes would submit a single *Quality Audit Portfolio* (the ‘Portfolio’) which would include data from all 13 MOHEIs and the audit would involve a visit to each institution. This was based on the premises that:

- the MOHEIs have many elements in common such as the governance structure, the strategic plan, recruitment protocols, and industry liaison systems with local hospitals;
- the Nursing Institutes have only one program and follow the same curricula;
- some MOHEIs have too few resources (particularly in terms of staffing) to produce their own Portfolio.

Despite the number of Institutes involved in the audit, the OAAA aimed to maintain the integrity of the audit process as presented in the *Quality Audit Manual*. At the time of the audit, there were 13 MOHEIs, five based on the Wattaya campus in Muscat and eight Nursing Institutes based in the regions. The Muscat-based Institutes included the Institute of Health Sciences (IHS); Oman Specialised Nursing Institute (OSNI); Oman Nursing Institute (ONI); Oman Assistant Pharmacy Institute (OAPI); and Oman Health Information Management Institute (OHIMI). The eight Nursing Institutes included Salalah; Al Dhakliya; Ibra; Sur; North Al Batinah; Sohar; Al Rustaq; and Al Dhahira.

The Quality Audit commenced with the MOHEIs undertaking a self study of their shared Mission, Vision and systems. The results were summarised in their Portfolio. This Portfolio encompasses a compilation of self-reports from the 13 MOHEIs under the governance of the Ministry of Health’s Directorate General of Education and Training in Oman. This document was submitted to the OAAA by the due date of 16 January 2013.

The OAAA appointed an external Audit Panel (the ‘Panel’), comprising suitably qualified and experienced local and international reviewers, to conduct the Quality Audit. For membership of the Panel, see Appendix A. For the purposes of this multi-site audit, it was decided to form a Panel of nine external reviewers, comprising six international and three locally-based members.

The Panel met (international members by telephone) on 4 and 6 March 2013 to consider the Portfolio of the MOHEIs. Following this, the Audit Panel Chairperson’s representative and the Executive Officers undertook a Planning Visit on behalf of the Panel to the MOHEIs on 26 March 2013 to clarify certain matters, request additional information and make arrangements for the Panel’s audit visits.

Prior to the audit visits, the Panel invited submissions from the public about the quality of the MOHEIs’ activities. No submission was received.

The Panel was divided into three sub-Panels of three reviewers, each served by an Executive Officer. Sub-Panel 1 visited OAPI, OHIMI, Al Rustaq and Salalah Nursing Institutes. Sub-Panel 2 visited ONI, OSNI, Sur, Ibra and Al Dhakliya Nursing Institutes. Sub-Panel 3 visited IHS, Sohar, Al Batinah and Al Dhahira Nursing Institutes. The audit visits took place from 27 April until 8 May 2013. During this time,

the Panel spoke with over 600 people, including representatives of the governing authorities, staff, students and external stakeholders. The sub-Panels also visited a number of facilities and reviewed a range of additional materials.

No information provided after 8 May (being the last day of the audit visits) was taken into consideration for the purposes of this audit.

The Report contains a summary of the Panel's findings, together with formal Commendations where good practices have been confirmed, Affirmations where the MOHEIs' ongoing quality improvement efforts merit support, and Recommendations where there are significant opportunities or improvement not yet being adequately addressed. The Report aims to provide a balanced set of observations, but does not comment on every system in place at the MOHEIs.

The Panel's audit activities and preparation of this Report were governed by regulations set by the OAAA Board. This Report was approved for release by the OAAA Board on 15 December 2013.

The OAAA was established by Royal Decree No. 54/2010 to replace the Oman Accreditation Council. Its responsibilities include conducting quality audits of higher education institutions (HEIs) in the Sultanate of Oman. For further information, visit the OAAA website (<http://www.oaaa.gov.om>). Full details of the quality audit process are available in OAAA's *HEI Quality Audit Manual* (available from http://www.oaaa.gov.om/Institution.aspx#Inst_Quality).

HOW TO READ THIS REPORT

Each OAAA Audit Report is written primarily for the institution being audited. This Report is specifically designed to provide feedback to help the MOHEIs better understand their own strengths and opportunities for improvement. The feedback is structured according to nine broad areas of activity and presented as formal Commendations, Affirmations and Recommendations, or as informal suggestions, each accompanied with explanatory paragraphs. It is expected that the Institutes will act upon this feedback as part of their continuous efforts to provide the best possible education to students.

The Report is made public because it also may be of interest to current and prospective students, their families, employers, Government, other higher education institutions in Oman and abroad, and other audiences. Students, in particular, may find this Report interesting because it provides some independent comment on the learning environment at these Institutes (particularly Chapters 2, 6 and 7). However, prospective students should still undertake their own investigations when deciding which higher education institution will best serve their particular learning needs.

Quality Audit is the first stage in Oman's two-stage process for institutional accreditation. Its focus is formative (developmental) rather than summative. In other words, although the audit addresses nine areas of activity which are common to all institutions, it does not measure the institutions against externally set standards of performance in those nine areas. Instead, it considers how well the Institutes are attending to those areas in accordance with their Mission and Vision and in the context of relevant legal regulations.

For these reasons, a Quality Audit does not result in a pass or fail; nor does it provide any sort of grade or score. It should also be noted that the precise number of Commendations, Affirmations and Recommendations that an institution receives in its Audit Report is not as important as the substance of those conclusions. For example, some Recommendations may focus on critical issues such as assessment of student learning, whereas others may focus on issues such as the maintenance of teaching equipment in classrooms which, while important, is clearly less critical. Therefore, it is neither significant nor appropriate to compare the Audit Reports of different HEIs solely on the numbers of Commendations, Affirmations and Recommendations.

The second stage in the institutional accreditation process is Standards Assessment. This stage, which takes place about four years after the Quality Audit, provides a summative assessment against external standards in the same nine areas of activity. It should be noted that Oman also operates a system of accreditation/recognition for academic programs, separately from the institutional accreditation process. For more information on Oman's System of Quality Assurance in Higher Education please visit www.oaaa.gov.om.

This Report contains a number of references to source evidence considered by the Audit Panel. These references are for the MOHEIs' benefit in further addressing the issues raised. In most cases this evidence is not in the public domain.

CONCLUSIONS

This section summarises the main findings and lists the Commendations, Affirmations and Recommendations. They are listed in the order in which they appear in the Report, and are not prioritised. It should be noted that other favourable comments and suggestions for improvement are mentioned throughout the text of the Report.

Executive Summary of Findings

The Ministry of Health Educational Institutes (MOHEIs) consist of eight Nursing Institutes (Oman Nursing Institute, Salalah Nursing Institute, Sur Nursing Institute, Sohar Nursing Institute, Ibra Nursing Institute, Al Dharira Nursing Institute, Rustaq Nursing Institute, North Batinah Nursing Institute, Al Dhakliya Nursing Institute) and the Institute of Health Sciences (IHS); the Oman Specialised Nursing Institute (OSNI); the Oman Assistant Pharmacy Institute; the Oman Health Information Management Institute; and the Foundation Centre which serves the MOHEIs based on the central Wattaya campus in Muscat. In 2012, there were over 6000 students enrolled in the MOHEIs' programs which include Diplomas awarded by the Ministry of Health in Nursing; Medical Laboratory Sciences; Physiotherapy; Diagnostic Radiography; Dental Surgery Assisting; Assistant Pharmacy; and Health Information Management. Post-basic Diplomas are offered in Midwifery; Nephrology; Critical Care Nursing in Paediatrics and Neonatology; Adult Critical Care Nursing; Mental Health Nursing; Nursing Administration; and Infection Prevention and Control Nursing. The IHS offers BSc top-up programs in Physiotherapy; Medical Laboratory Sciences and Diagnostic Radiography in collaboration with Glasgow Caledonian University, UK. OSNI offers a BSc in Nursing Studies and Community Health Nursing through Cardiff University, UK. A Foundation Program is offered through the Muscat-based Foundation Centre and in the regional Nursing Institutes. At the time of the audit, plans were in discussion to introduce degree level programs in the various disciplines offered by the MOHEIs.

The first MOHEIs were established in 1982, to satisfy the urgent needs of the MOH for paramedical staff. This has been done successfully over the past three decades. However, in response to local demand and international standards, the MOH is planning a shift in the philosophy of education in its Institutes. The audit, therefore, took place while the future plans for the MOHEIs were in a state of transition. The Panel was informed that a plan is being advanced to convert the Institutes into a College by improving facilities, staffing and curricula and granting BSc level awards rather than Diplomas. This was approved in principle by Oman's overarching Education Council during the course of the audit. However, the present governance, policies, facilities and staffing need to be radically changed before this can be achieved.

As the audit has been based on the MOHEI Portfolio, which provides a system-level compilation of the findings of the MOHEIs self-review, the Panel conclusions in this Report are focused on an overall level, rather than at the level of a specific MOHEI. This is in order to help and support the Institutes as they continue to carry forward the Ministry's Mission to produce "reflective Omani health care professionals who provide effective, safe, competent and culturally relevant care to the community." The Panel recognised the extensive, collective effort that the development of the MOHEIs' Portfolio involved, and was impressed with the standard of the resulting Portfolio. It is clear that the self review was undertaken in a genuine spirit of reflection and with a commitment to honest self-evaluation and, where appropriate, self-criticism. The Panel encourages the MOHEIs to continue to incorporate this process of self-reflection and improvement. Clearly, the process of the self-study has led the MOHEIs to begin work on improving many of the areas that the Portfolio identified as needing attention. The Panel recognises the MOHEIs' commitment to improvement and the collective desire for change which were encountered at both the central and local level.

The Panel found that the Quality Audit process confirmed that the MOHEIs are collectively doing a sound job in educating future health professionals. In this, they benefit from the fact that they are small in

size and the staff and students are highly committed. However, the audit visits also confirmed that the Institutes are operating at the edge of their own capabilities and capacities and that the strengths which make this possible are not likely to be scalable or sustainable in future without significantly improved support.

In terms of governance and management, the Panel acknowledged the appropriateness of the Mission, Vision and Values for the MOHEIs. These were found to be widely understood and embraced by staff, students and external stakeholders. During the audit, the Panel became aware of the emerging vision for the transformation of both the structure of the system and the level of its academic programs, with Oman's Education Council approving, in principle, a merger of the Institutes. The mixture of support and confusion which was found during the interviews was noted as details are still under development. This Report does not comment specifically on this situation as the transformation is still very much a work in progress and details of plans and decisions were not available for the Panel to consider.

The Panel recognised the unique, multi-level governance and management structure which characterises the MOHEIs, and found that these have created areas of strength such as the shared arrangements enjoyed by the Nursing Institutes. The Panel also identified a number of areas requiring improvement. Foremost among these areas is the need to find systematic and transparent strategies to improve communication and responsiveness between the Ministry and the Institutes thus ensuring that the core activities of the Institutes are well supported in a timely manner.

The Panel noted the commitment of the MOHEIs to continuous quality improvement but also some of the barriers to enacting this, particularly the differences in the resources available to the Institutes and the delays involved in current financial management processes. In the context of quality assurance, more work is needed to ensure the deployment, review and improvement aspects of the quality assurance cycle and to embed a system of mutual accountability between the centre and the Institutes. Inconsistencies were found in policy management, the need for further development of activity and entity reviews, and the lack of prominence given to health and safety concerns on the campuses. However, the over-riding needs at present are in the area of planning for the implementation of change. This will call for the development of change management processes if the MOHEIs are to realise the longer term vision for change of the system and its programs.

With regard to student learning by coursework, it was confirmed that the Institutes are indeed producing graduates reflective of their Mission. Opportunities for on the job training, in collaboration with local and regional hospitals and health care centres are provided successfully although it was found that this collaboration with the industry sector needs to be strengthened. There were concerns that the Ministry's workforce planning practices appeared not to be optimally aligned to neither regional needs nor the educational standards nor, in some cases, to international good practice in specific fields. The MOHEIs are also encouraged to reconsider the present criteria guiding the admission of students and the current policies on graduate attributes and exit standards.

The Panel heard that students on all campuses were satisfied, overall, with the quality of teaching and education they receive, including their experience of the restructured Foundation Program. While the Foundation Program is still too young in its present form for an evidence-based judgment of its performance to be made, there were early positive comments from the campuses. The MOHEIs are urged to undertake a proper longitudinal evaluation once more data becomes available.

There were notable differences in the level of learning resources and facilities available to support the educational programs across the Institutes. Engaging in a more systematic and focused development of teachers' pedagogical skills within a contemporary context is desirable. There is a need to ensure mutually supportive two-way communication between the Institutes and the clinical preceptors and supervisors. With a few exceptions, policies on academic integrity including plagiarism and cheating are being appropriately implemented. Staff appraisal is being conducted within the limits imposed by Civil Service rules, although some positive examples of additional review and feedback strategies more supportive to staff development were found.

While staff and student research are not part of the formal Mission of the MOHEIs, it is the MOHEIs' intention to embark on the development of a research capability. The MOHEIs are urged to revisit their plans for doing so within the larger context of other changes, and to ensure that a strategic and realistic approach to clarifying what is meant by the term "research" is adopted. The MOHEIs will also need to consider how this agenda will be pursued and how staff capability will be developed, together with a sensible timeline for progressing this area.

The Panel found a strong commitment across the MOHEIs to engagement with both industry and local communities. The success of the community health exposure and activities built into the curriculum were especially impressive. External stakeholders, for example those from local disability services, indicated that these outreach initiatives are making a significant contribution to their own work as well as to the education of the students. The MOHEIs, in line with the findings of their Portfolio, are encouraged to engage in formal planning, documentation and evaluation in this area, and also to consider widening this outreach to a broader range of stakeholders. Initiatives taken by staff of two of the specialist fields to establish professional bodies at national level were found to be exemplary in this regard.

In terms of academic support services, the Panel agrees with the MOHEIs that the establishment of a central student information system to support registry functions and the management of system information and cross-campus analysis of key performance statistics generally is a high priority. The Panel found that planning in the academic support area is, at best, inconsistent. Support for the area as a whole needs to be revisited, with clearer planning cycles, transparent budgetary processes and a strenuous effort to improve the time taken to process resource requests. There was evidence to indicate that academic advising is being implemented by staff on all campuses, although effective training to support them in doing so is needed. Library provision, although to some extent being addressed by the re-organisation of library services on the Wattaya campus is, at present, barely adequate to support current Diploma level programs. Substantial improvements to collections, electronic resources and the provision of qualified staff are essential to underpin the development of degree level delivery.

Information technology and internet services are widely seen to be quite inadequate to meet present needs throughout most of the Institutes, and significant investment to upgrade this area is called for. The Panel was aware of and supports the current tender for the upgrading of IT services which were widely considered to be well below international standards and quite inadequate for present needs. The availability and standard of specialist learning resources vary considerably among the Institutes and improved planning, evaluation and resourcing are needed to ensure that students have access to contemporary equipment and specialist facilities to prepare them for their future careers.

In the area of student support services, there was a lack of priority being given to this central aspect of the student experience. The gap in central planning and evaluation of service provision and delivery and the need for a fundamental re-evaluation of the approach to be adopted was again noted. This is especially important if the Institutes are to deliver the "student centred" approach to learning which the MOHEIs put forward in their Portfolio. Nevertheless, the student voice is being heard on a number of campuses. Student Councils, staff-student liaison committees and student representatives are present on some but not all campuses and this approach should be consistently implemented. Priority needs to be given to the evaluation and monitoring of accommodation, catering and transport services, to address the widespread student dissatisfaction with present provision. The availability and appropriateness of medical and counseling services and of suitable social and recreational activities need to be assessed. Provision needs to be effectively supported to ensure a positive environment for students and minimise associated risk issues.

The Panel was impressed by the commitment, hard work and team spirit of the teaching and administrative staff it met. The initiatives to further support the Ministry's success in the Omanisation of its staffing profile, including in particular the scholarship program to support Omani staff in upgrading their academic qualifications are supported. There are several areas relating to human resources where the Institutes, with the support of the Ministry, are encouraged to focus efforts for improvement, while

recognising the current constraints on human resource management imposed by the need to work within Civil Service regulations. A key need here is to find ways to ensure that the MOHEIs have a greater say in the selection and appointment of suitably qualified academic staff and in ensuring the appropriateness and transparency of the reward structure which supports them.

Other areas requiring attention include the development of a more planned and systematic approach to professional development, with longer cycle times and better prioritisation. The targeting of skills development in specific areas, such as training in the use of new teaching equipment and technologies is required. Areas such as performance management and the improved use of periodic staff satisfaction surveys require attention. More consistent implementation of induction programs for new staff, including the provision of appropriate job descriptions and staff handbooks, will supplement existing good practices such as the mentoring programs established in a number of the Institutes. The establishment of mechanisms for the cross-Institute sharing of good practice in this and other areas is strongly encouraged.

In terms of general support and facilities, it was evident that this is a further area in which a consistent, standard and active approach to planning and management of some of the Institute facilities is needed. A number of campus buildings visited were in need of refurbishment. Although they were as clean and well-maintained as they could be, given their length of service, it is clear that substantial upgrading of the existing facilities at least on some campuses cannot await the longer term development of a new college structure. The Institutes would also benefit from developing and implementing a marketing strategy to promote the contributions of the MOHEIs to the provision of health services in Oman, supported by the necessary human and financial resources.

Summary of Commendations

A formal Commendation recognises an instance of particularly good practice.

1. The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for developing clear Vision, Mission and Values that are shared and that support the development of human resources for health care in Oman. 16
2. The Oman Academic Accreditation Authority commends the Ministry of Health Nursing Institutes on the effective development, implementation and ongoing evaluation of a consortium model of nursing education which provides a common shared framework for the Institutes. 17
3. The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for developing and implementing affiliation agreements that advance the learning opportunities for students and support an effective student learning experience. 18
4. The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for developing and implementing a comprehensive process for the development of curriculum. 26
5. The Oman Academic Accreditation Authority commends the Ministry of Health Nursing Institutes for developing and implementing a robust approach to the development and moderation of examinations. 31
6. The Oman Academic Accreditation Authority commends the Ministry of Health Institute of Health Sciences for its role in establishing professional associations for Physiotherapy, Radiography and Biomedical Science. 40
7. The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes in the regions on the positive engagement and provision of a wide range of health services to their community aimed at increasing their communities' awareness of the value of a professional healthcare workforce. 41

8. The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for the successful implementation of their Omanisation policy..... 58

Summary of Affirmations

A formal Affirmation recognises an instance in which the MOHEIs have accurately identified a significant opportunity for improvement and has demonstrated appropriate commitment to addressing the matter.

1. The Oman Academic Accreditation Authority agrees with the Ministry of Health Educational Institutes that they need to continue work to embed a consistent and systematic approach to risk management and supports the efforts of the Directorate General in Education and Training to create an understanding and implementation of risk management at an individual Institute level. 22
2. The Oman Academic Accreditation Authority supports the activities of the Ministry of Health Educational Institutes to evaluate the effectiveness of the Foundation curriculum, particularly in providing students with program-specific Foundation skills. 28
3. The Oman Academic Accreditation Authority supports the Ministry of Health Educational Institutes' approach to supporting their Omani staff to participate in the program of PhD scholarships towards developing a more highly qualified staff profile and strengthened research capability. 37
4. The Oman Academic Accreditation Authority agrees with the Ministry of Health Educational Institutes that the establishment of Student Councils should be supported at all Institutes, and supports its efforts in this area..... 52
5. The Oman Academic Accreditation Authority supports the Ministry of Health Educational Institutes' efforts to carry out comprehensive staff satisfaction surveys and encourages the Institutes to ensure that the results are evaluated and acted on at both aggregate and individual Institute level, and that staff are informed of actions taken..... 57
6. The Oman Academic Accreditation Authority agrees with the Ministry of Health Educational Institutes that they need to take steps, in conjunction with the Ministry of Health, to ensure that a functional campus-wide intranet system exists in all Institutes coupled and strengthened with high speed internet connectivity accessible to all staff and students..... 61

Summary of Recommendations

A Recommendation draws attention to a significant opportunity for improvement that the MOHEIs have either not yet accurately identified or to which they are not yet adequately attending.

1. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, improve the structure, function and human resource capability of governing bodies, and improve the communication within and across the governing bodies as well as from the governing bodies to staff and stakeholders. 17
2. The Oman Academic Accreditation Authority recommends the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, adopt a more structured approach to transparent performance review for the Institute Deans and a more structured program to improve their leadership and management skills to advance the Ministry of Health Educational Institutes..... 17

3. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review their current approach to planning at the central and institutional level in order to facilitate the alignment of strategic and operational planning and ensure that resources are provided to support this. 19
4. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, resolve the model for the future of health education as soon as possible, including the determination and communication of a realistic timeframe for the implementation of that model. 20
5. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, urgently develop a plan for transformational change management that will facilitate a move to the next level of health education, with such a plan including leadership development for change management, effective strategies for change management, and the provision of aligned and additional resources to support and sustain transformational change. 20
6. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, consider ways to effectively align the Strategic Plan, the Operational Plan, and individual Institute action plans, including the provision of more autonomy to the Institutes for decision making and for planning and resource allocation over a period longer than one calendar year. 21
7. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review the financial management policy and procedures to ensure they more effectively and efficiently support the delivery of educational programs and related services in the Institutes. 21
8. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review their policy management system to ensure that policies are fit for purpose, consistent with the academic and professional environment, regularly reviewed, and that they are clearly communicated to the relevant stakeholders. 22
9. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, establish a consistent set of principles and processes for the undertaking of reviews, the provision of reports, and the provision of responses to reports in timely and transparent ways. 23
10. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes undertake an urgent and broad review of health and safety matters across the Ministry of Health Educational Institutes as a whole, and, in conjunction with the Ministry of Health, work to rectify identified problems that could affect the health and safety of staff and students. 24
11. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review the emerging inconsistencies in curricula (including teaching resource materials) across the Institutes offering the Diploma in Nursing and Post-basic Diploma in Midwifery in order to evaluate their impact on the student learning experience. 27
12. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes evaluate student entry standards to ensure students are adequately qualified to undertake their programs of study while admitting sufficient number of students to align with the Ministry of Health workforce planning requirements. 27
13. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a common instrument for student and peer evaluation of teachers and courses. 28

14. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a formal mechanism for developing teachers' pedagogical skills across all Institutes and include the needs of both Institute-based teachers and clinic-based preceptors/mentors..... 28
15. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement enhanced systems for communication and professional interactions between individual Institute staff and hospital clinical preceptors in order to ensure the effectiveness and teaching/learning quality of clinical placements. 29
16. The Oman Academic Accreditation Authority recommends the Ministry of Health Educational Institutes develop and implement a more systematic approach to detecting plagiarism and academic dishonesty and appropriate corrective actions. 30
17. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes evaluate the impact of recent modifications to passing grades on the academic standards of courses and the overall achievement of student learning objectives by graduates..... 31
18. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review and monitor the effective implementation of policies, procedures and develop facilities to improve the security of examination papers and student results..... 31
19. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes work with the Ministry of Health to ensure better alignment between the career paths open to graduates and the skills and knowledge these graduates bring to the workplace. 32
20. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review their approach and understanding of their research agenda and their intentions in this area..... 35
21. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a systematic approach to planning and implementing industry and community engagement activity and that the outcomes be evaluated..... 38
22. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review the communication channels with industry and employers to ensure that these channels enable broad input to curriculum development and review, evaluation of achievement graduate attributes, and feedback systems regarding improvements. 39
23. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, establish an alumni association, preferably linked to each Institute, and expedites the development of an alumni database. 40
24. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, establish a clear planning cycle for managing academic support services with transparent budgetary processes and an awareness of the need for active and timely response when needs arise in order to better assure the quality of the student learning experience. 42
25. The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes establish, as a matter of urgency, an integrated electronic student

	information system to provide data security and a reporting mechanism for analysis of trends and performance both within and across Institutes.	43
26.	The Oman Academic Accreditation Authority recommends that Ministry of Health Sciences Institutes develop and adopt their own copyright policy consistent with Omani Copyright Law and implement a process for ensuring full awareness of, and compliance with, this policy amongst staff and students.....	43
27.	The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes improve, as a matter of urgency, the libraries in all Institutes in line with contemporary standards in order to meet current and future student learning needs, including the appropriate provision of books and periodicals, both hard copy and electronic format as well as trained staff and systems to evaluate the effectiveness of this provision.	44
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1 GOVERNANCE AND MANAGEMENT

The Ministry of Health Educational Institutes (MOHEIs) include Nursing Institutes (Oman Nursing Institute, Salalah Nursing Institute, Sur Nursing Institute, Sohar Nursing Institute, Ibra Nursing Institute, Al Dhahira Nursing Institute, Rustaq Nursing Institute, North Batinah Nursing Institute Al Dhakliya Nursing Institute), the Institute of Health Sciences (IHS), the Oman Specialised Nursing Institute (OSNI), the Oman Assistant Pharmacy Institute (OAPI), the Oman Health Information Management Institute (OHIMI), and the Foundation Centre. The Institutes and their predecessors have pioneered the provision of health studies in the Sultanate since the 1980's.

The overarching objective of the MOHEIs is:

...to meet the human resource requirements of the MOH health care delivery system ensuring safe and effective care to Oman's people and also to ensure the educational needs of students of the nation. (Portfolio, p.12)

This Chapter covers the Panel's findings about the governance and management of the MOHEIs including their Vision, Mission and Values; governance; management; institutional affiliations for programs and quality assurance; strategic plan; operational planning; financial management; risk management; policy management; entity and activity review systems; student grievance process; and, health and safety.

1.1 *Vision, Mission and Values*

The Vision, Mission and Values of the MOHEIs were developed in 2007 through a range of consultative and reflective activities and are set out in the MOHEIs' Strategic Plan (2011-2015). They are common to all Institutes and are:

Vision: To aspire to produce graduates committed to life-long learning who can influence the health care subsystem and provide quality health services for the people of Oman.

Mission: The MOHEIs are committed to producing reflective Omani health care professionals who provide effective, safe, competent and culturally relevant care to the community. The Institutes will provide quality education in a conducive learning environment to meet the health care needs and the expectations of the society. They are committed to ensuring continuous professional development in collaboration with related stakeholders.

Values: The organisational culture of the Institutes is founded on the values, standards and ethical principles which are reflected in all affairs of the Institutes. They are enunciated clearly in the strategic plan and are: professionalism; innovation; active learning; caring; quality. (Portfolio, p.12)

The Panel found that the Vision, Mission and Values were appropriate for the MOHEIs and confirmed that reflective Omani health care professionals have been produced with graduates ably fulfilling roles in meeting the human resource needs of the Ministry of Health (MOH) health care system. The MOHEIs' process to develop effective communication and dissemination of the Vision, Mission and Values through a wide range of materials provided to staff and students as well as materials displayed on notice boards in the individual Institutes was impressive. The Panel also found clear awareness and understanding of the Vision, Mission and Values amongst

staff and students, and that the Vision, Mission and Values into the teaching and learning had been integrated in the activities conducted in the MOHEIs.

Commendation 1

The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for developing clear Vision, Mission and Values that are shared and that support the development of human resources for health care in Oman.

1.2 Governance

The governance of the MOHEIs is complex and occurs at multiple levels and in various ways. The MOHEIs are governed by the MOH under the Minister of Health, and the Undersecretary for Planning Affairs. Institutes in Muscat report to the MoH Director General of Education and Training and in the regions, MOHEIs report to both the MoH Director General of Education and Training and the regional Director General of Health Services (DGHS) for administrative and financial aspects.

At the MOH level, the Higher Council of Educational Institutes and the Technical Committee are the two main governing bodies (Portfolio, p.14). The Higher Council meets at various times to consider major issues, but as indicated in the Portfolio, and noted by the Panel, the follow-up to these deliberations is limited in clarity, time and effectiveness (Portfolio, p.14). The Technical Committee also meets at various times, but again the follow-up to these deliberations, as indicated in the Portfolio and noted by the Panel, is also limited in clarity, time and effectiveness (Portfolio, p.15). The Panel found substantial uncertainty and concern about the Higher Council's and the Technical Committee's roles and responsibilities, the meaningfulness and value of their deliberations, and the timeliness and effectiveness of the information coming from these governing bodies.

The MOHEIs appear to be at a critical point in their evolution. Although the Panel saw little written evidence, it heard substantial comments about aspirations for the MOHEIs (such as the creation of a college and the awarding of degrees), for health care in Oman, and for the advancement of relevant staff and the education of health care students in Oman. Also, as well as the notable areas of strength identified, there are very many opportunities for improvement and many of these require immediate attention for the MOHEIs to function effectively in the future.

However, as already indicated, the Higher Council and the Technical Committee do not appear to be either functioning or communicating effectively, particularly with respect to strategic planning and decisions affecting the future directions of the MOHEIs. High levels of uncertainty and ambiguity about the roles and deliberations of these governing bodies was observed. This uncertainty was also noted in the Portfolio (e.g. p.16). There are examples of apparent inconsistency in decisions made and actions taken and of delays in actions taken thus rendering meaningless the decisions taken (for example, development, approval and implementation of the college model noted in the Portfolio, p.21). There are many instances of asymmetrical upward communication, or one way upward communication, for example, review results and reports from the Institutes communicated to the Directorate General of Education and Training (DGET) with no response or action communicated back to the Institute where the review was conducted.

At the DGET level, there are governance and management committees in the areas of quality assurance, research, continuing professional development, resources, and information technology. The Panel found a level of scepticism about whether these committees are facilitating or inhibiting the effective governance and management of their areas of responsibility. Evidence indicated that they appear to engage in an inconsistent and ambiguous mix of providing advice and making decisions as well as engaging in reactive discussion and some short-term planning. In

the context of an overall improvement of the governance of the MOHEIs, the role and responsibilities of the committees of the DGET will need to be considered, clarified and revised.

The Panel concluded that at this time in the MOHEIs' evolution, the guidance provided by governing bodies at the highest level needs to be much clearer, more timely and communicated much better. A more effective structural arrangement of governing bodies as well as a clearer definition of their responsibilities and improved implementation of decisions taken is required. Improved training, guidance and support of those involved in the governing bodies in their roles as senior leaders and managers is needed. Much improved communication within and across the governing bodies and effective and timely communication from the governing bodies to the staff working in the Institutes and the stakeholders associated with the MOHEIs is necessary.

Recommendation 1

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, improve the structure, function and human resource capability of governing bodies, and improve the communication within and across the governing bodies as well as from the governing bodies to staff and stakeholders.

Separate from the central MOH governance structures, there is a Council of Nursing Institutes that covers the Nursing Institutes. The other health Institutes have their own Institute Councils, such as the OSNI and OHIMI Councils (Portfolio, pp.22-23). These governing bodies meet at least three times a year to consider a range of academic and management matters, and also make recommendations, when appropriate, to the Technical Committee. Documentation from Council meetings and interviews with individual Deans confirmed that the Council of Nursing Institutes is working well in terms of core academic activities, such as overseeing the consortium model of nursing education and curriculum review and development. The Council also facilitates communication among the Deans of the relevant Nursing Institutes.

Commendation 2

The Oman Academic Accreditation Authority commends the Ministry of Health Nursing Institutes on the effective development, implementation and ongoing evaluation of a consortium model of nursing education which provides a common shared framework for the Institutes.

1.3 Management

As indicated in the Ministerial decision 167/2008, a Dean manages each Institute, with support from a Director of Administration and Finance. All Institutes are linked to their DGET and the Institutes in the regions are also linked to their regional Director General of Health Services (Portfolio, p.17).

Deans are responsible for the oversight of their individual Institutes. The Panel found that the performance of Deans is rarely, if ever, discussed with them formally by the DGET and that the Deans only informally discuss the issues they face in their roles with the other Deans across the MOHEIs. There is no formal or consistent approach to improving the leadership and management skills of the Deans of the MOHEIs. Although some Deans are meeting their responsibilities very well and are advancing their Institutes, the MOHEIs would benefit from improving the leadership and management skills of their Deans in a planned way.

Recommendation 2

The Oman Academic Accreditation Authority recommends the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health,

adopt a more structured approach to transparent performance review for the Institute Deans and a more structured program to improve their leadership and management skills to advance the Ministry of Health Educational Institutes.

The Institutes themselves have a number of committees relevant to the academic and administrative purposes that assist with shared management of the Institutes. The number, size and type of these committees varies widely across the Institutes and do not necessarily reflect the size and complexity of an individual institution. The committees typically include those associated with health and safety, curriculum review, quality assurance, student affairs, and research. The majority of staff members involved in such committees were interested in the issues being considered and were eager to work in the best interests of the Institutes.

Nevertheless, the Panel noted evidence that the committees often discussed the same matters at meetings over many years without reaching a resolution. Committees were often composed of the same people meeting at different times either formally or informally as different committees. It appeared to the Panel these committees often provided a function, which in a larger institution, might be the responsibility of a designated officer of department. The Panel was informed that some members of committees have no particular knowledge of or training in the areas for which the committees are responsible.

Staff in the Institutes indicated that they were overworked and that their involvement in committees and related activities was detracting from their core responsibilities in teaching and learning. Although there is a need for some committees within the Institutes to provide a level of shared management, it appears that a climate of creating and perpetuating committees has emerged and that this is interfering not only with the effective management of the individual Institutes, but also with the capacity of staff to engage in their core responsibilities. Therefore, each Institute is encouraged to assess whether the committees in place are necessary to the effective and efficient management of their particular institution. It may be that the creation of a single, large college may provide opportunity to centralise some of these committee structures to enable a more effective and efficient model of shared management.

1.4 Institutional Affiliations for Programs and Quality Assurance

Three of the Institutes (IHS, OAPI, OSNI) have affiliations with universities in the United Kingdom. The Institute of Health Sciences has an MoU with Glasgow Caledonian University to offer a top-up BSc (Hons) degree in the areas of Physiotherapy, Medical Laboratory Science, and Diagnostic Radiography. OAPI has agreements with John Moores University Liverpool, Robert Gordon (Aberdeen), and Strathclyde University in the UK to engage in certain quality assurance activities, such as evaluating final year students and reviewing annual activities. OSNI has an affiliation with Cardiff University for a top-up BSc (Hons) in Nursing Studies and BSc (Hons) in Community Health Nursing.

The value of these international affiliations was clear, and the Panel noted the provision of quality assurance by the international representatives as well as the provision of examination reports by examiners external to the MOHEIs. It was also noted that students in the relevant degrees have access to the electronic library resources of the affiliated universities, and that there are positive impacts of the visits by, and reports of, the affiliated universities on the teaching practice of Institute staff.

Commendation 3

The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for developing and implementing affiliation

agreements that advance the learning opportunities for students and support an effective student learning experience.

1.5 Strategic Plan

The MOHEIs state that the revised MOHEIs' Strategic Plan (2011-2015) is now aligned with the MOH Strategic Plan (2011-2015) Domain: Health Educational Institutes which has the following goals:

- 1. To improve and implement quality assurance schemes in health education institutions.*
- 2. To improve academic programs to conform with the national frameworks, standards and trends of higher education and professional practice.*
- 3. To improve the infrastructure of education institutions, so as to meet the demands of higher education.*
- 4. To continue developing the capabilities and skills of the teaching staff and the administrative staff and retain the quality staff.*
- 5. To enhance the capabilities of staff and students with regard to approach and methodology of scientific research.*
- 6. To promote academic and student relationships with other universities and colleges nationally and internationally. (Portfolio, p.21)*

Whilst there is a broad level of awareness and understanding of the goals of the formal MOHEIs' Strategic Plan (2011-2015) as listed above, there are three major issues that are preventing its realisation, in quality assurance (see Section 1.10), planning systems, and ambiguity of the future of the college model. Although the individual Institutes seek to put the Strategic Plan in place through their own plans (Portfolio, p.21), the Panel found that this is often done in a way that is random, linked to annual activities that are more reactive to problems than longer term strategic goals, and limited by the resources provided. Individual Institutes lack the ability to advance the Strategic Plan either because there was little or no appropriate local planning or little or no adequate resources. Requests for such resources made to the DGET or the DGHS are not always responded to positively or in a timely way. Such requests include the provision of library materials, the updating or replacement of laboratory items, and the provision of educational technology hardware and software.

The Panel considered that there is a significant disconnect between the MOHEIs' Strategic Plan and the plans, priorities, activities, and the amount and flexibility of the resource allocations of the individual Institutes. The individual Institute's planning is very focused on current activities. To ensure relevance of the longer term MOHEIs' Strategic Plan, a concerted effort is required to align the action planning and operational activities within the individual Institutes with this plan.

Recommendation 3

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review their current approach to planning at the central and institutional level in order to facilitate the alignment of strategic and operational planning and ensure that resources are provided to support this.

The Panel was informed of an overarching plan to merge the Institutes into a single college and introduce degree level programs. The merger of the MOHEIs was approved by Oman's Education Council during the MOHEIs' audit although no written details of the plan were made available to the Panel through the MOHEIs. However, the Panel found that there was uncertainty and ambiguity about the implementation of the merger amongst staff, particularly the nature and timing of the strategic objective of moving the Institutes into a college model as noted in the

MOHEIs' Strategic Plan 2011-2015. Although the Panel heard various and differential statements of aspiration about the future of health education in Oman, it also heard much speculation based on various information sources, and found that the detailed plans and planning processes behind these had not yet been formalised at governance level and formally communicated to the Institutes. This situation appears to impact on the timeliness of decision making at various levels of the MOHEIs and the uncertainty about the future is being used as a reason not to make decisions in the present. Whilst some good progress is being made on designing new programs for future offerings, for example, the BSc programs, there are also instances of failure to upgrade teaching resources due to lack of certainty of future program offerings. Indeed, while speculation about the future is under discussion, the MOHEIs may be limited in their capacity to provide improved health education until there is a well-understood and agreed future for health education.

Recommendation 4

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, resolve the model for the future of health education as soon as possible, including the determination and communication of a realistic timeframe for the implementation of that model.

In this context, the MOHEIs state that there are “ongoing developments at ministerial level, in anticipation of transition of individual Institutes to college level by the year 2013” (Portfolio p.21). The Panel formed the view that a move from ‘institute’ to ‘college’ and from ‘diploma’ to ‘degree’ will require transformational rather than incremental change. Although the MOHEIs appear to be alert to varying levels to the issues involved in such change, they may have neither the capacity nor resources to manage such change in an effective and sustainable way. Although some assurances were given and beliefs were expressed that such change would ‘just happen’, much more active planning and a more informed approach to transformational change management will be required.

Recommendation 5

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, urgently develop a plan for transformational change management that will facilitate a move to the next level of health education, with such a plan including leadership development for change management, effective strategies for change management, and the provision of aligned and additional resources to support and sustain transformational change.

1.6 Operational Planning

An Operation Plan for the MOHEIs has been developed based on the MOHEIs' Strategic Plan (2011-2015), and individual Institutes develop their own annual action plans specific to their context (Portfolio, p.21). However, the Panel found that the ability of MOHEIs to implement these operational and action plans was challenged by uncertainty about the future; administrative delays; and lack of resources leading to instances of administrative confusion and less than optimal outcomes at the Institute level and/or the wider MOHEI system. The Panel was informed that operational and action plans were often essentially put to one side while relevant staff worked around the unresponsive processes of the MOH in order to deal with challenges either within their own Institute or within the DGET and the DGHS.

The two approaches of letter writing and using personal contacts are utilised as work-arounds to get things done, especially when decisions or resources are needed from a “higher authorities” (Portfolio, p.18). The Panel was advised that the letter writing approach was almost uniformly

unsuccessful, while the use of personal contacts was sometimes successful depending on the capacity of the relevant person from the individual Institute to access relevant MOH personnel. While it is understandable how and why these approaches occur, they are evidence of operational and action planning that is simply not working.

The Panel saw evidence of inadequate library materials; information technology hardware and software; teaching and learning materials and equipment; and clinical demonstration and training equipment. In the context of operational and action planning that is demonstrably absent or ineffective, it is only the ingenuity and commitment of the staff that is allowing the students to receive anything like the education set out in the Mission, Vision and Values of the MOHEIs. Irrespective of the options for the future, operational and action planning needs to improve as a matter of urgency and this is likely dependent on a significant change in the level of resources provided and on where the authority to allocate those resources sits.

The individual Institutes have little or no discretion with the historically-based expenditure budgets they are given and are required to operate on an annual cycle. The individual Institutes may be more effective in their planning and prioritising if they had not only more resources but also more delegated authority in the alignment of those resources with their action plans.

Recommendation 6

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, consider ways to effectively align the Strategic Plan, the Operational Plan, and individual Institute action plans, including the provision of more autonomy to the Institutes for decision making and for planning and resource allocation over a period longer than one calendar year.

1.7 Financial Management

The MOHEIs' budget comes from within the budget allocated to the MOH by the Ministry of Finance (MOF), and for a range of historical and locational reasons, there are various levels of decision making in the expenditure of the budget across the DGET, the DGHS and the individual Institutes. The processes involved in financial management are complex and convoluted, and the MOHEIs state that "the process of purchase and delivery of items from the original request can be lengthy and a considerable amount of time is spent by Deans and administrators following up with the MOH finance and procurement departments" (Portfolio, pp.22-23). The Panel saw much evidence of this, included multiple requests for teaching and learning materials over many years that receive neither acknowledgement nor positive response. The MOHEIs also note "planned teaching and learning requirements have been delayed due to administrative constraints ..." (Portfolio, p.23). Again, the Panel saw much evidence of this, and adds that this level of delay is bringing many of the individual Institutes to a point where they can no longer teach effectively. The individual Institutes are at the edge of their staffing capacity in large part because of the ineffectiveness and inefficiency of the broader recruitment processes within the MOH.

The MOHEIs note "a formal evaluation of the budgetary processes and control for effective utilisation for meeting (strategic/operational) objectives could be one of the future plans ..." (Portfolio, p.23). The Panel agrees and considers that an urgent review of financial management is critical to the future of the MOHEIs.

Recommendation 7

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review the financial management policy and procedures to ensure

they more effectively and efficiently support the delivery of educational programs and related services in the Institutes.

1.8 Risk Management

The MOHEIs note the emerging recognition by the Institutes of the “concept and systems of risk management” (Portfolio, p.23), and also notes “some of the Institutes have risk management plans and a documented risk registry whereas most of the Institutes are yet to establish them” (Portfolio, p.23). There is a growing understanding of risk management, of the importance of training staff in assessing and monitoring risk, and of the prevention of risk. This is, however, inconsistent across the MOHEIs. A broader understanding of risk management is needed by a number of people in leadership and management positions, as well as by teaching and administrative staff. In addition to an awareness of risk management and the training of staff, significant resources may need to be allocated to manage some identified risks, especially those associated with health and safety, information technology infrastructure and teaching and learning resources.

Affirmation 1

The Oman Academic Accreditation Authority agrees with the Ministry of Health Educational Institutes that they need to continue work to embed a consistent and systematic approach to risk management and supports the efforts of the Directorate General in Education and Training to create an understanding and implementation of risk management at an individual Institute level.

1.9 Policy Management

The management of policy is linked to the roles and responsibilities of various governing bodies of the MOHEIs and for individual Institutes, and is expressed also in the Policies and Procedures Manual which is based on the Ministerial decision 167/2008 and on the Civil Service Regulations (Portfolio, p.24). These policies include: general assessment, assessment for special circumstance, setting and review of internal examination, safety and security of examination; invigilation, marking, moderation of answer scripts and record keeping, external examiner, unfair practice and plagiarism, review of graded written assessment, assessment related risk; grade appeal, academic advising and counseling, student attendance, and, student grievance.

There is a good understanding and application of some of these policies (e.g., unfair practice and plagiarism) across the MOHEIs, but also limited and inconsistent understanding of other policies (e.g. external examiners). Although the Panel noted that not all policies apply to all individual Institutes because of differences in their activities, it noted that, as indicated by the MOHEIs (Portfolio, p.25), there is no uniform compliance with policies when they do apply. Furthermore, there is little investigation or understanding of why policies are not applied or complied with. Not all the policies may be fit for purpose within a contemporary higher education organisation, for example Civil Service regulations applying to the appointment and advancement of academic staff. This may be one reason for the limited understanding and inconsistent implementation of some policies. If a policy is not fit for purpose in an academic environment, then the difficulty sits with the nature of the policy rather than with its implementation.

Recommendation 8

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review their policy management system to ensure that policies are fit for purpose, consistent with the academic and professional environment,

regularly reviewed, and that they are clearly communicated to the relevant stakeholders.

1.10 Entity and Activity Review Systems

A comprehensive and participatory self-study process was conducted by the MOHEIs in order to prepare the Portfolio for the quality audit process. The MOHEIs state that the Portfolio encompassed a compilation of self-reports [*sic*] from the 13 operational MOHEIs (Portfolio, p.7). Training workshops were conducted and systems to ensure consistent information provision from individual Institutes were established. The Panel was impressed with the level of critical self-reflection contained in the Portfolio as well as with the level of insight into the positive and negative aspects of the MOHEIs as a system as well as the positive and negative aspects of individual Institutes that were conveyed in discussions with staff, students and stakeholders of the MOHEIs.

There is a wide range of review systems in place across the MOHEIs, including the individual Institute's annual reports, staff and student satisfaction surveys, evaluation of library and other facilities, and curriculum review. As the MOHEIs noted (Portfolio, p.25), there are no consistent principles or processes in the conduct of these reviews and no consistent approach to dealing with their outcomes. The Panel saw many instances including library evaluations, staff satisfaction surveys, and annual reports of Institutes, where information was collected and analysed and reports provided to relevant people, such as Deans or DGET, but no acknowledgement of the reports was provided or any obvious action taken on the basis of the report findings. In addition, staff are often faced with an unplanned request to undertake a review and provide a report, and then little or no reaction occurs when the report is provided. There was no evidence found of active coordination or monitoring of such requests, reports, and actions through, for instance, the quality assurance area of the MOHEIs.

Such a situation is indicative of the asymmetrical upward communication that the Panel often heard occurs within the MOHEIs and the MOH, and this understandably leads not only to a reduction in the morale of staff, but also to a cynicism about the value of undertaking reviews and providing reports.

Recommendation 9

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, establish a consistent set of principles and processes for the undertaking of reviews, the provision of reports, and the provision of responses to reports in timely and transparent ways.

As already noted in Section 1.5, issues with quality assurance are one contributing factor preventing the realisation of the MOHEIs' strategic planning objectives. The approach to, and implementation of, quality assurance is one of fixing problems when they occur rather than improving all practices in a planned way and this approach is largely resource driven. Issues and opportunities for improvement (e.g. Portfolio, p.28) are not addressed in a timely manner. The approach to quality assurance is relatively under-developed and unsophisticated and will not facilitate the MOHEIs moving to the next level of health education provision. Whilst the Panel acknowledges that the MOHEIs are developing and implementing quality assurance systems, it believes that a much more quality enhancement and improvement approach than is currently adopted needs to be taken.

1.11 Student Grievance Process

In addition to noting the formal policy on student grievance, the Panel was informed of many ways in which the student voice could be heard, including Student Councils, Student Representatives and Staff-Student Liaison Committees. These methods are inconsistent, however, across the MOHEIs, and are only effective because of the relatively small size of most of the Institutes and the relatively informal and open-door approach to resolving student concerns. The MOHEIs noted that “the need for maintaining more stringent data related to grievances and the process of resolving them requires more attention and enhanced record keeping by the Institutes” (Portfolio, p.26), and the Panel strongly agrees with this observation. More generally, the absence of a student information and management system is a major impediment to the operation of the MOHEIs as contemporary higher education organisations (see Recommendation 25).

1.12 Health and Safety

There is a clear recognition by the MOHEIs as a whole, and by the individual Institutes, of the importance of health and safety issues in areas such as transportation, fire, chemical handling, infections, etc. (Portfolio, p.27). However, this recognition is not matched in practice in the form of relevant policies. The Panel noted a number of instances of health and safety risks including the absence of fire extinguishers, staff not knowing where first aid kits were kept, and the absence of a body shower in a laboratory where chemicals were handled. In addition, the Panel heard and was greatly concerned by instances where the health, well-being and safety of female students in hostels appeared to be at risk because of inadequate safety and security.

The MOHEIs reported various requests to “higher authorities” in the MOH to improve health and safety in various ways (Portfolio, p.27), but the Panel was informed of lengthy delays between a request being submitted and a response being received. Although acknowledgement is made of the importance of health and safety, much more needs to be done to ensure the health and safety of staff and students across the MOHEIs, through for instance, a system-wide approach to identifying and addressing the health and safety issues in a way that is practical and sustainable.

Recommendation 10

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes undertake an urgent and broad review of health and safety matters across the Ministry of Health Educational Institutes as a whole, and, in conjunction with the Ministry of Health, work to rectify identified problems that could affect the health and safety of staff and students.

2 STUDENT LEARNING BY COURSEWORK PROGRAMMES

The MOHEIs offer health profession programs in Nursing and Allied Health across the thirteen Institutes. The programs are designed to meet the Ministry of Health (MOH) workforce needs and the awards offered by the MOHEIs include Diplomas and Post Basic Diplomas (for those undertaking specialised training). The Institute of Health Sciences (IHS) has an MoU with Glasgow Caledonian University to offer a top-up BSc (Hons) degree in the areas of Physiotherapy, Medical Laboratory Science, and Diagnostic Radiography. Oman Specialised Nursing Institute (OSNI) has an affiliation with Cardiff University for a top-up BSc (Hons) in Nursing Studies. The MOHEIs offer a Foundation Program (FP) to prepare students for entry into these programs which includes English Language, Mathematics and Statistics, Information Technology courses, First Aid, and an Introduction to Oman's Health System. Specifically, the programs on offer across the Institutes include:

- Foundation Program (Foundation Centre, Muscat and regional Nursing Institutes)
- Diploma in Nursing at the Oman Nursing Institute and eight regional Nursing Institutes (Salalah, Sur, Sohar, Ibra, Al Dhahira, Rustaq, North Batinah, Al Dhakliya)
- Diploma in Medical Laboratory Sciences at the Institute of Health Sciences (IHS)
- Diploma in Physiotherapy at IHS
- Diploma in Diagnostic Radiography at IHS
- Diploma in Dental Surgery Assisting at IHS
- BSc in Physiotherapy at IHS, in collaboration with Glasgow Caledonian University
- BSc in Medical Laboratory Sciences at IHS, in collaboration with Glasgow Caledonian University
- BSc in Diagnostic Radiography at IHS, in collaboration with Glasgow Caledonian University
- Post-basic Diploma in Midwifery at Oman Specialised Nursing Institute (OSNI) and 3 regional Nursing Institutes (Al Dhahira, North Batinah, Al Dhakliya)
- Post-basic Diploma in Nephrology Nursing at OSNI
- Post-basic Diploma in Critical Care Nursing in Paediatrics and Neonatology at OSNI
- Post-basic Diploma in Adult Critical Care Nursing at OSNI
- Post-basic Diploma in Mental Health Nursing at OSNI
- Post-basic Diploma in Nursing Administration at OSNI
- Post-basic Diploma in Infection Prevention and Control Nursing at OSNI
- BSc in Nursing Studies at OSNI, awarded by Cardiff University
- BSc in Community Health Nursing at OSNI, awarded by Cardiff University
- Assistant Pharmacy Diploma at Oman Assistant Pharmacy Institute (OAPI)
- Diploma in Health Information Management at Oman Health Information Management Institute (OHIMI)

All the Diploma awards are conferred by the MOH, with the degree level awards offered as top-up programs by offshore partners. However, at the time of the audit, plans were under discussion to introduce degree level programs in the various disciplines offered by the MOHEIs.

This Chapter reports on the Panel's findings in relation to the following: graduate attributes and student learning objectives; curriculum; student entry standards; teaching quality; plagiarism; student placements; assessment methods, standards and moderation; academic security and invigilation; student retention and progression; graduate destinations and employability.

2.1 *Graduate Attributes and Student Learning Objectives*

Graduates of the MOHEIs' programs are expected to possess both discipline skills-based and generic graduate attributes which align to the overarching Mission, Vision, and Values (Portfolio,

p.29). The graduate attributes were formulated through consultative processes by institutional curriculum committees, at a variety of levels (within an Institute, within a program, and between programs). Moreover, the attributes are benchmarked to national recommendations (such as the Oman Nursing and Midwifery Council) or international recommendations (such as the World Health Organisation). In addition, there are program-specific graduate attributes for individual programs. The MOHEIs state that graduate attributes are implicit in the student learning objectives (Portfolio, p.29).

Stakeholders at some Institutes indicated that general nursing graduates do not consistently possess the necessary knowledge, skills, and attitudes. This was confirmed during interviews with graduates, some of whom felt inadequately prepared upon graduation for employment in clinical settings. The Panel heard that student learning objectives were not communicated consistently to clinical preceptors used in the programs with a clinical placement component. This issue was also raised by Nursing students at a number of Institutes and verified during interviews with clinical preceptors. Further, students stated that, on occasion, Institute teaching staff were unfamiliar with the student learning objectives, specifically after changes had been made to the curriculum. While the MOHEIs recognise the need to enhance clinical preceptor knowledge of the curriculum (Portfolio, p.43) and to evaluate graduate attributes in relation to society's needs for health care (Portfolio, p.43), they are encouraged to make progress in these areas.

2.2 *Curriculum*

The MOHEIs indicate that curriculum development and review at the Institutes is an active process of interactions and reflection and that these development and review processes ensure curriculum is benchmarked to national and international standards (Portfolio, p.32). The MOHEIs have undertaken a comprehensive and robust process to develop the curriculum for the planned BSc offerings. This process has been iterative, committee driven for development of Nursing curriculum in particular, and has involved external stakeholders and international affiliates and institutions. In several fields, external consultants from the World Health Organisation or from overseas universities had been involved. The Panel was impressed with this curriculum development process.

Commendation 4

The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for developing and implementing a comprehensive process for the development of curriculum.

The Panel found evidence of review activity in committee work at multiple levels (within Institutes, programs, and across programs). The MOHEIs acknowledge that curriculum review should be improved by developing standardised criteria for monitoring and reviewing the process to assess its effectiveness, relevance, and constructiveness (Portfolio, p.43) and the Panel agrees with this.

The MOHEIs state there is a “common nursing curriculum, standardised for all the nursing Institutes (including textbooks and resource material)” (Portfolio, p.32). While true at the time the Portfolio was written (current to December 2011), during the audit visits the Panel found that this was no longer the case in some Institutes. Specifically, there are now some differences in approach and mode of delivery of teaching material to general Nursing students across the Nursing Institutes, specifically between the ONI and regional Nursing Institutes. Moreover, the Panel found there are significant disparities in teaching resource materials and clinical practical experiences (e.g. Psychiatry) among the Nursing Institutes. Disparities in teaching resource materials were also found across the Institutes offering the Post-basic Diploma in Midwifery. Clearly, students of the Diploma in Nursing and Post-basic Diploma in Midwifery programs at

different Institutes are not receiving common, standardised curricula which may have an impact on the consistency in the delivery of the same programs. Students, graduates, teachers and external stakeholders at a number of Institutes commented on the need for additional clinical training to be included in the basic and post-basic nursing curricula.

Recommendation 11

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review the emerging inconsistencies in curricula (including teaching resource materials) across the Institutes offering the Diploma in Nursing and Post-basic Diploma in Midwifery in order to evaluate their impact on the student learning experience.

2.3 *Student Entry Standards*

The criteria for student entry into MOHEIs' programs are set by the Technical Committee, based on the projected human resource needs of the Omani health care sector. The MOHEIs acknowledge a need to review the entry standards into Foundation Studies (Portfolio, p.43). Graduates, teaching staff in particular, and external stakeholders also expressed concerns about student entry standards. The Panel heard that entry standards, in the form of admissions criteria, were lowered to accommodate quota requirements, for example, balance of gender and sufficient numbers of students to meet workforce planning needs in the regions. Institutes indicated this led to the admission of less qualified students and the need to develop strategies to deal with the lack of preparedness of some students admitted into programs.

At the same time, Institute administrators and stakeholders expressed concerns about the number of enrolled students relative to the projected needs of the health care sector. Specific concerns were voiced about the need to increase the number of male nursing students and students who eventually would work in remote parts of the country. The Panel noted these concerns and concluded that the current approach to determining admissions criteria may indeed result in students being admitted without the appropriate academic preparedness to undertake their programs, and in insufficient numbers to meet health workforce needs in certain areas and the MOHEIs needs to address this.

Recommendation 12

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes evaluate student entry standards to ensure students are adequately qualified to undertake their programs of study while admitting sufficient number of students to align with the Ministry of Health workforce planning requirements.

2.4 *Foundation Program*

The MOHEIs state that the FP has been expanded and consolidated in line with the Oman Academic Standards for General Foundation Programs, under the umbrella of a Common Foundation Program (Portfolio, p.29). The FP is centrally delivered for Muscat-based students entering all programs taught at the Wattayah campus, while students in other locations take the FP at the appropriate regional Institute. The Foundation Centre at the Wattayah campus coordinates and supports staff to offer the FP in the regional Institutes. The Panel was informed by stakeholders including students, Institute staff, and staff in the regional Directorate General for Health Services, that overall, the FP is working well, particularly in providing a "soft landing" to students prior to their undertaking formal discipline related studies. Teaching staff at some Institutes did, however, express concerns about the effectiveness of the new FP curriculum, specifically in teaching discipline-specific English language skills and to IELTS training. The

MOHEI plans to evaluate the implementation of the FP with a view to revising the curriculum to better meet student and program entry requirements. The Panel agrees that a timely evaluation of the implementation of the FP, after the first two or three cohorts have completed them, will ensure that it is meeting the needs of students and the MOHEIs as a preparation to course study.

Affirmation 2

The Oman Academic Accreditation Authority supports the activities of the Ministry of Health Educational Institutes to evaluate the effectiveness of the Foundation curriculum, particularly in providing students with program-specific Foundation skills.

2.5 Teaching Quality

Policies, procedures, and activities in the arena of teaching quality are directed by the MOHEIs' Strategic Goal "to continue developing the capabilities and skills of the teaching staff and administrative staff and retain qualified staff", (Strategic Plan, p.2). The MOHEIs state that teaching quality is part of a larger system of social, classroom, and clinical practice experiences (Portfolio, p.36). Teachers are encouraged to keep teaching portfolios, which include teaching staff's reflections on improving teaching quality. Whilst the quality of teaching and teaching effectiveness is formally measured in most Institutes, the MOHEIs acknowledge that the tools for evaluating the teaching/learning process are particularly limited in scope (Portfolio, p.36). The primary challenges identified by the MOHEIs for maintaining the quality of teaching include the need for adequate numbers of qualified and experienced faculty to implement the curriculum, limited resources, leadership and mentoring support for novice teachers, and the lack of organised systems and standardised tools, policies and procedures for measuring teaching quality (Portfolio, p.36 and p.43).

Nonetheless, in general, the Panel found that students were satisfied with the quality of teaching. At most Institutes, systems were in place for evaluating student satisfaction with teachers and courses. Section 1.10 has already discussed how review findings are not used to improve systems within the MOHEIs. However, there was evidence that data collected via student evaluation surveys were used to improve teaching quality. Beyond student surveys, the MOHEIs activities related to monitoring and addressing teaching quality were patchy across the Institutes. For example, some staff members had outdated portfolios or no portfolio at all. For those teachers who kept an up-to-date portfolio, not all of them understood the utility and value of the activity. In part, this reflected the lack of an official mechanism for evaluating the teacher portfolios and providing feedback to the staff members. Peer review of teachers and courses has yet to be institutionalised across the MOHEIs, although some good practice was encountered in individual Institutes. Whilst the MOHEIs acknowledges the need to develop further tools for measuring teaching quality, the Panel found little evidence that this was being progressed.

Recommendation 13

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a common instrument for student and peer evaluation of teachers and courses.

The MOHEIs state that teaching quality across the Institutes should be improved by enhancing the teaching skills of faculty (Portfolio, p.43). The Panel found that there were robust systems in place to support new staff. However, on the whole, there was little evidence of systems or activities that focused specifically on developing the pedagogic skills of teaching staff.

Recommendation 14

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a formal

mechanism for developing teachers' pedagogical skills across all Institutes and include the needs of both Institute-based teachers and clinic-based preceptors/mentors.

The MOHEIs acknowledge the importance of robust systems for improved collaboration with clinical sites and staff (Portfolio, p.43) to ensure, amongst other aspects, a linking of theory and clinical learning objectives. This view was supported by students, graduates, and clinical preceptors but there was evidence of some gaps in teaching/learning during student clinical placements. For example, clinical preceptors were not consistently provided with the student learning objectives. Furthermore, students and clinical preceptors commented on differences between clinical knowledge and skills taught in the Institutes and those practiced in actual clinical settings. Whilst the teaching staff in some Institutes are actively encouraged to engage in clinical practice for a least several weeks each year, overall, there is a general lack of professional interaction between Institute faculty and hospital clinical staff. For example, Institute faculty do not participate uniformly or regularly in hospital Continuing Medical Education or hospital-organised conferences. The Panel concluded that quality of teaching/learning taking place during clinical placements could be enhanced if the MOHEIs improved communication and professional interactions between the clinical sites and staff.

Recommendation 15

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement enhanced systems for communication and professional interactions between individual Institute staff and hospital clinical preceptors in order to ensure the effectiveness and teaching/learning quality of clinical placements.

The Panel was informed that the MOHEIs recognise that teaching quality in the clinical practical experiences is compromised by the current clinical teacher-to-student ratio. The Panel heard similar comments from students, graduates, external stakeholders and teaching staff at a number of Institutes. The MOHEIs would benefit from benchmarking the clinical teacher-to-student ratio of the Nursing Institutes (basic and post-basic programs) to Best Practice Standards, such as those recommended by the Oman Nursing and Midwifery Council, and working more closely with the hospitals and other clinical setting to achieve this.

2.6 Plagiarism

The MOHEIs have clear policies regarding academic dishonesty, including plagiarism (Portfolio, p.36) and these policies are communicated to students. The MOHEIs recognise the need to detect academic dishonesty and to take appropriate corrective action (including disciplinary actions as warranted). However, the MOHEIs acknowledge that there is no formalised, uniform procedure for detecting plagiarism, that teaching staff are left largely on their own without system-wide support in terms of plagiarism detection, and that documentation of plagiarism incidents is not maintained uniformly across all Institutes (Portfolio, p.36).

The MOHEIs' strong recommendations to the Directorate General of Education and Training (DGET) for a standard plagiarism detection system had not yet been acted upon. The Panel heard about explicit examples of academic dishonesty (including plagiarism and cheating in examinations) from students, graduates, and teaching staff at a number of Institutes. Students have been penalised for academic dishonesty but consistent, uniform documentation of incidents (plagiarism, cheating, and other forms of dishonest activities) is not kept nor standard plagiarism software detection system installed. The Panel concluded that the MOHEIs should develop and implement a more systematic approach to addressing this matter.

Recommendation 16

The Oman Academic Accreditation Authority recommends the Ministry of Health Educational Institutes develop and implement a more systematic approach to detecting plagiarism and academic dishonesty and appropriate corrective actions.

2.7 *Student Placements*

Placements of MOHEIs' students are driven primarily by the clinical experiences required to satisfy the student learning objectives of specific academic programs: General Nursing, Specialised Nursing, or allied health disciplines. Clinical placements occur in MOH hospitals, polyclinics, and health centres. Placements in clinical settings outside of the MOH (such as Sultan Qaboos University Hospital, Armed Forces Hospital, Royal Oman Police Hospital, and private hospitals and health agencies) are negotiated by individual Institutes. In keeping with accepted practice, for OSNI and allied health disciplines, hospital clinical staff serve as preceptors and mentors for students during the students' clinical placements. There are challenges of release time for preceptors from regular clinical service assignments and limited formal evaluation of the effectiveness and teaching/learning quality of the placements which the MOHEIs may wish to address in the future (see Section 2.5).

The Panel concluded that students are supported in their learning through the on-the-job training provided by placements in hospitals, health centres, and community care facilities such as the Al Wafa Centres. The MOHEIs' relationship with these health care providers enables systematic planning, scheduling and rotations of suitable student placements. The MOHEIs make efforts to include student placements experiences in regional areas to expose students to clinical situations and cultural practices that they would encounter in their professional practice, for example, Salalah Nursing Institute schedules student placements in rural areas.

Students, graduates, teaching staff, and clinical preceptors expressed satisfaction with the clinical teaching/learning opportunities. The Panel concluded that overall the MOHEIs' approach to organising clinical placements are well-planned and are working well.

2.8 *Assessment Methods, Standards and Moderation*

The MOHEIs' approach to assessment and moderation is described in the MOH Policies and Procedures Manual in accordance with Ministerial decision 167/2008. The assessments include theory and clinical examinations (either norm-referenced or criterion-referenced) and are linked to student learning objectives which include generic skills development. Some programs also include research assignments and projects as part of the overall assessment strategy. Programs that are taught across multiple Institutes (i.e. general Nursing and post-basic Midwifery) utilise a centralised system of examinations. The MOHEIs use a grade point system (GPA) as a grading matrix for decisions related to pass/fail, re-sit opportunities, remedial/retake opportunities, student progression, and student dismissal. The current pass level is a cumulative GPA of 1.50 (equivalent to an overall grade of 60%). Whilst staff members are satisfied with the assessment policies and procedures, the MOHEIs acknowledge a need to explore student satisfaction of the same (Portfolio, p.39).

Overall, the Panel found that the MOHEIs' assessment system was working well. Affiliate institutions play an important role in the MOHEIs assessment systems, where such partnerships exist. For example, one of OAPI's affiliates, John Moores University Liverpool, provides advice on assessment procedures, examination scripts, student content knowledge and awarding of grade categories for areas of assessment. This advice contributes to external moderation/benchmarking of assessment standards. The Panel also found that the Nursing Institutes have robust mechanisms

in place for developing, moderating and remarking examinations that are effectively implemented.

Commendation 5

The Oman Academic Accreditation Authority commends the Ministry of Health Nursing Institutes for developing and implementing a robust approach to the development and moderation of examinations.

Sharing these good practice systems across the MOHEIs and programs would be beneficial.

The Panel learned that the pass level was lowered recently from the former level (cumulative GPA of 1.75, equivalent to an overall grade of 65%) to the present level of 1.50 (equivalent to an overall grade of 60%). However, differing explanations were offered for the reason behind this change, including the need to respond to workforce requirements and to pressure from students. Administrators, teaching staff, students, graduates, and stakeholders, informed the Panel of their concerns about the possible negative effects of this decision on the quality of graduates. The MOHEIs acknowledge that recent modifications to academic standards have not yet been fully evaluated (Portfolio, p.38). Such evaluations need to be undertaken in a comprehensive and transparent fashion to ensure that this change in GPA pass level is not adversely impacting on academic standards.

Recommendation 17

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes evaluate the impact of recent modifications to passing grades on the academic standards of courses and the overall achievement of student learning objectives by graduates.

2.9 Academic Security and Invigilation

The MOHEIs have clear policies for academic security and invigilation of assessments. The MOHEIs presented some positive evidence related to the compliance, consistency, and effectiveness of these policies, while simultaneously noting that barriers to compliance are observed in some Institutes (Portfolio, p.40). Moreover, the MOHEIs acknowledged that general problems exist in relation to the handling of examination papers and prevention of student cheating during examinations as well as the need for adequate facilities and systems to handling examination papers (Portfolio, p.41 and p.43).

With regard to students cheating in examinations, the MOHEIs have appropriate policies and procedures for detecting and dealing with such student misconduct. However, the Panel confirmed that the MOHEIs had no system-wide policies or procedures for handling of examination papers as individual Institutes handle examination papers in their own way. The need for a centralised electronic student registry is discussed Section 6.2. The implications of this are that student files and examination results are held in a variety of ways, including paper-based filing systems, and on staff personal computers. There appears to be a lack of backup systems in the event of fire or theft. The Panel had concerns regarding the security of this student information and the risk posed by these rudimentary systems.

Recommendation 18

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review and monitor the effective implementation of policies, procedures and develop facilities to improve the security of examination papers and student results.

2.10 Student Retention and Progression

The evaluation system and study progression criteria are established by Ministerial decision 167/2008. The MOHEIs provided data indicating an average retention rate across all programs of 86-93% from 2007 to 2011 (Portfolio, p.42). However, the MOHEIs acknowledged that there is no well-established common system for tracking student information. Individual Institutes document student results in their own way and pass the details onto the DGET. The MOHEIs recognise that acquisition of a student information management system and registry is vitally important (Portfolio, p.43).

The Panel confirmed that no Institute has an electronic student information management system, Registrar Office, or dedicated registry personnel. Individual Institutes record and file student information, including assessment results, in their own way. During interviews with Institute administrators, the Panel learned that requests for an electronic student information management system and dedicated registry personnel have been made repeatedly to the DGET. The issues caused by the absence of an electronic student information system are discussed more fully in Section 6.2. of this Report.

2.11 Graduate Destinations and Employability

The MOH Strategic Plan (2011-2015) refers specifically to the Health Educational Institutes in relation to the “Availability of Qualified Human Resources to Work in the Health Institutions” (Strategic Plan, p.1) with the overarching goal is to ensure “adequate numbers of suitably qualified, trained and efficient” members of the workforce. The suitability of the MOHEIs’ own Mission, Vision and Values has already been discussed in Section 1.1 of this Report.

Many of the interviewed hospital clinical staff (stakeholders and clinical preceptors) were the MOHEIs’ graduates. Students found the MOHEIs’ programs attractive and chose to enroll as they would, upon graduation, be assured of employment in meeting the health workforce needs in Oman. Many of the MOHEIs are staffed by their own graduates. In several instances, the graduates had completed higher studies outside Oman and then returned to the same Institute. In other instances, the graduates had entered clinical service with the MOH, risen through the service ranks, and then moved back to the Institute.

However, not all graduates are able to gain employment in an area of their choice or interest or which utilised their newly acquired skills. For example, some Nursing graduates told the Panel of their job dissatisfaction and, hence, requests for transfer. Post-basic Nursing graduates and OHIMI graduates told the Panel that, upon graduation, they were often transferred back to their original job position with no change in their original duties and responsibilities. These comments were verified during interviews with representatives of government healthcare facilities. At the same time, stakeholders at a number of Institutes voiced concerns about an inability to attract and retain nurses in remote areas of the Sultanate and in specialties with demanding workloads.

Together, these findings point to challenges for the MOHEIs to fully realise their mandate to develop appropriately qualified Omani nationals in adequate numbers to support the human resource requirements in every spectrum of healthcare delivery. While, overall, the Panel found the MOHEIs to be fulfilling their mission at a broad level, the MOHEIs could explore ways to better prepare students for employment positions in the less attractive areas of health care, whether those areas are geographically remote or are in specialties with demanding workloads. As part of this process, the MOHEIs and the MOH could establish career paths more aligned with the graduate’s training and level of expertise.

Recommendation 19

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes work with the Ministry of Health

to ensure better alignment between the career paths open to graduates and the skills and knowledge these graduates bring to the workplace.

3 STUDENT LEARNING BY RESEARCH PROGRAMMES

Whilst some Institutes do have research assignments and project work as part of undergraduate coursework programs, the MOHEIs do not offer research programs *per se* and therefore this section is not included in this Report.

4 STAFF RESEARCH AND CONSULTANCY

Both the MOH Strategic Plan (2011-2015) Domain: Health Educational Institutes and the MOHEIs Strategic Plan have an objective or goal related to research. Specifically, and respectively, they are:

To enhance the capability and skills of teaching staff and students on approach and methodology of scientific research (Strategic Plan, p.2)

We will develop research capabilities of staff to strengthen the quality of educational programs and health care services (Strategic Plan, p.9)

This Chapter reports on how these strategic objectives are implemented and the systems in place to plan and manage research activities across the MOHEIs and within the individual Institutes.

4.1 Research Planning and Management

Research planning and management is undertaken by several committees centrally located at the Ministry of Health (MOH) and Directorate General of Education and Training (DGET) and within the individual Institutes. The DGET Research Committee established in 2008 is yet to align roles and functions with the MOH Research Committee or develop research policies and procedures for the Institutes. Whilst several Institutes have Research Committees, the MOHEIs acknowledge that the planning and management of staff research is in the process of being formalised and that currently there is no research-enabled environment at the individual Institutes.

The Panel was informed that for the last four years there have been ongoing research aspirations at DGET level and a Director of Research has been appointed with a mandate to provide leadership and improve research output. The intent is to develop research capability and capacity which enhances the education programs run by the MOHEIs as well as research to improve the health systems in the Sultanate. It is not intended at this stage of development for staff members to engage in scientific research activities, for example stem cell research.

The Panel confirmed that the MOHEIs are at an early stage of development in research planning and developing the policy and procedures to support staff research. Individual Institutes are undertaking a variety of development activities to prepare the Institutes and staff members to conduct research including conducting research needs assessment and utilising research and ethics committees to focus any survey activity. They are also finalising Mission, Vision and objectives and terms of reference of the Research Committees, identifying projects for health systems research, and a focus on the process of research.

Whilst staff members were keen to undertake research, they also recognised that there were limited capabilities, resources, capacity and time to undertake such activity, and the Panel concurred with this view. The enhancement of staff member's research capability is shown by an ongoing commitment by DGET for developing Omani faculty with doctoral degrees. This commitment will be further discussed in Section 4.7. The Panel concluded that whilst there has been a commitment to increase the research qualifications of Omani faculty, there appears to be a lack of understanding of what is required to centrally plan, resource and implement research activity across the MOHEIs.

Recommendation 20

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review their approach and understanding of their research agenda and their intentions in this area.

At this stage of development, the focus of the MOHEIs' research agenda should be to clarify strategic objectives and reexamine the approach, target areas of focus, as well as consider a staged implementation with adequate resources within the parameters of research plans. It is perhaps premature for the Institutes, in the first instance, to move into developing staff research programs and capacities beyond what is presently being done. The Panel agrees with the MOHEIs that the development of staff research capacity should be treated as a long-term goal rather than being given priority at this stage.

4.2 *Research Performance*

The MOHEIs do not have an environment supportive of research and there are few staff publications or systems to support individual staff research. The Institutes do, however, engage in some basic institutional research, such as the analysis of staff and student surveys.

4.3 *Research Funding Schemes*

There is no policy at MOH level for research and as a result there is no budget allocation at the individual institutional level for research activity. Whilst the Panel was aware of a scholarship system to support staff to undertake PhD study overseas, it did not identify any local Institute-level systems for funding research. However, the MOH does have a central Research Department which is heavily engaged in research related to health systems which they fund.

4.4 *Consultancy Activities*

There is no policy or system for consultancy activities. The Panel did not explore this area of the Report.

4.5 *Ethics and Biosafety*

When conducting surveys and data collection, the individual Institutes follow the MOH and profession guidelines for medical ethics. This is particularly relevant to the Institutes as currently this is the main form of health systems research activity. The Panel's concerns regarding areas of the implementation of health and safety policy have already been discussed in Section 1.12; however, at this stage the Institutes do not conduct scientific research which requires attention to biosafety issues such as ensuring safe disposal of bio waste and secure harmful chemical storage facilities.

4.6 *Intellectual Property*

The MOHEIs state that staff are subject to the National Copyright and Intellectual Property Laws (Portfolio, p.48); however, as research activity develops, the MOHEIs will require their own policy and procedures governing this area, relevant to the MOHEIs context, and aligned to these national policies.

4.7 *Professional Development for Research*

The MOHEIs recognise the need to support staff to develop their research capability through professional development activity and undertaking formal research qualifications. Section 4.1 discussed the desire of the MOHEIs staff to undertake research whilst recognising the need to develop their research skills, amongst other enabling factors. Individual Institutes are undertaking needs analyses to better determine the focus of the professional development activity.

The Panel was informed that the DGET is focused on developing a more highly qualified staff profile in the Institutes to enable the delivery of the MOH's strategy to improve Oman's health

sector. A scholarship scheme enables staff to undertake PhD studies in overseas universities, with fourteen staff undertaking such studies in 2012, and fifteen staff in 2013. The Panel met with Deans who were in acting capacities whilst several Institutes' Deans were undertaking PhD studies overseas. They noted that the PhD topics included areas of research of health systems directly applicable to the Oman environment. The Panel believes that this approach will contribute to developing the research capability of the MOHEIs.

Affirmation 3

The Oman Academic Accreditation Authority supports the Ministry of Health Educational Institutes' approach to supporting their Omani staff to participate in the program of PhD scholarships towards developing a more highly qualified staff profile and strengthened research capability.

4.8 *Research Commercialisation*

This area of the quality audit scope is not relevant to the MOHEIs.

4.9 *Research-Teaching Nexus*

The MOHEIs' Strategic Plan (2011-2015) refers to the intent to develop Evidence Based Practice skills of staff and students along with targeting research ethnology (Strategic Plan, p.7). The Panel found that this intent was realised through student projects; courses that develop students understanding of the research methodologies; staff professional development workshops; staff research pre-proposals; staff conference presentations and seminars on topics related, for example, to evidence-based learning. The Panel noted that a number of research proposals considered by Institute-level Research Committees put forward research projects related to aspects of teaching practice and student performance.

5 INDUSTRY AND COMMUNITY ENGAGEMENT

The MOHEIs have aims and strategic objectives related to industry and community engagement stated in Ministerial decision 167/2008, the MOH Strategic Plan (2011-2015) Domain: Health Educational Institutes MOH and the MOHEIs' Strategic Plan (2011-2015). They are:

To participate in activities aimed at the development and support of health in the community (Ministerial decision 167/2008, p. 3),

We will promote the development of community outreach programs to enhance health awareness and promotion (MOH Strategic Plan, p.9),

To promote the academic and student relationships with other universities and Colleges, nationally and internationally (MOHEI Strategic Plan, p.2).

This Chapter reports on the MOHEIs' efforts in the area of industry and community engagement and addresses planning and management; relationships with industry and employers, the professions, other education providers, alumni, and the community at large.

5.1 *Industry and Community Engagement Planning and Management*

The MOHEIs acknowledged that whilst there is an established engagement with industry and the community, this does not take place in an overall planned or systematic manner (Portfolio, p.50). The MOHEIs have taken the step to define terms related to industry and community engagement, with the term "industry" specifically related to the health facilities for clinical placement and hence employment of graduates. The MOHEIs indicated that at the Institute level there are committees that engage with industry and community in planning and participating in activities but the Institute committees referred to by the MOHEIs (Portfolio, p.50) were found to be internal meetings held to organise community events or schedule clinical placements, rather than committees that developed a planned approach to the engagement. As there was no plan to guide industry and community engagement activities at either the strategic or operational level, there was no evaluation of whether the outcomes of engagement were effective in meeting MOHEIs' aims and objectives.

There are clearly significant levels of engagement between the MOHEIs and their associated industries and communities and the Panel found that this was valued, particularly by community stakeholders. The Panel concluded that a more systematic approach to the planning and management of industry and community engagement, with a clearer understanding of the purpose of outreach activities with the professional community, employers, and the general public, would ensure that engagement is focused and delivering the desired outcomes against the MOHEIs' strategic objectives in this area.

Recommendation 21

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a systematic approach to planning and implementing industry and community engagement activity and that the outcomes be evaluated.

5.2 *Relationships with Industry and Employers*

The MOHEIs state that they have a genuine commitment and desire to build relationships with industry and the community. Most of the MOHEIs' graduates are employed by the MOH and the MOH staff are involved in various planning committees, the development of new programs and

curriculum revisions (Portfolio, p.50). Graduate and employer satisfaction surveys provide input and meetings are held at senior level between the MOHEI staff and employers.

A reciprocally beneficial, though variable, relationship occurs with employers and individual Institutes not only with regard to curriculum matters, but also in relation to clinical placements, assessments, professional development activities. The MOHEIs acknowledge, however, that there is a lack of policy formation and formal documentation guiding this relationship (Portfolio, p.51). The nature of the clinical placements and the employment arrangements for the majority of students means that many aspects of industry engagement happen in an unplanned way, without formal systems.

The Panel found that there was a variation between individual Institutes in their relationship with the various health care industries. Industry representatives are involved in a range of varying activities including committee work, student selection interviews, employer surveys and feedback on curriculum. In the regional area, for example, at Ibra Nursing Institute, the Panel was informed that the local community was willing to invest heavily in providing teaching/learning resources including nursing skills lab with advanced models for clinical teaching.

Overall, the Panel was able to verify that the relationships with industry were as described by the MOHEIs and the lack of formal systems in this area was confirmed by stakeholder representatives and employers during interviews. Although surveys had been conducted by some regional Institutes, stakeholders identified an overall lack of systematic liaison and opportunities to provide feedback about the curriculum and the achievement of graduate attributes to the Institutes. The MOHEIs needs to address these areas.

Recommendation 22

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, review the communication channels with industry and employers to ensure that these channels enable broad input to curriculum development and review, evaluation of achievement graduate attributes, and feedback systems regarding improvements.

5.3 Relationships with Professions

The MOH functions as the supervising professional body for each health profession. The national professional body within the MOH for Nursing and Midwifery is the Oman Nursing and Midwifery Council (ONMC) and the service section for Nursing and Midwifery is the Directorate of Nursing and Midwifery Affairs (DNMA). The Code of Professional Conduct for Nurses and Midwives was developed by the ONMC, endorsed by the DNMA and is taught in all Nursing and Midwifery Programs as a guide for professional practice (Portfolio, p.51). Nursing staff at different Institutes have also participated in developing national standards for Nursing and Midwifery. Furthermore, employers told the Panel about the MOHEIs' collegial relationship and collaboration with other professions including reciprocal lecturing or workshops within and outside some of the MOHEIs (for example, Oman Specialised Nursing Institute (OSNI)). The Nursing Institutes are clearly making a valuable contribution to establishing and maintaining the standards of nursing education in the Sultanate.

The Panel was particularly impressed with the way the MOHEIs, through the Institute of Health Sciences (IHS), have contributed to establishing allied health associations and societies of related professions such as Oman Association for Radiographers, Oman Physiotherapy and Rehabilitation Association, and Oman Biomedical Scientist Society.

Commendation 6

The Oman Academic Accreditation Authority commends the Ministry of Health Institute of Health Sciences for its role in establishing professional associations for Physiotherapy, Radiography and Biomedical Science.

5.4 *Relationships with Other Education Providers*

At national level, the MOHEIs have a number of formal and informal relationships with other higher education institutions including Sultan Qaboos, Nizwa, Al-Sharqiya and Sohar Universities, plus various Colleges of Technology and Colleges of Applied Sciences. Internationally, IHS, Oman Assistant Pharmacy Institute (OAPI) and OSNI offer programs through affiliations with Glasgow Caledonian and Cardiff Universities (see Section 1.4); OAPI has long established relationships with John Moores (Liverpool), Robert Gordon (Aberdeen) and Strathclyde Universities in the UK (Portfolio, p.52).

Some students indicated that the affiliation agreements with some of the MOHEIs were a motive for seeking admission to specific Institutes and that these relationships enriched the curriculum and supported staff and students for visits to overseas institutions. The MOHEIs use of international affiliations to enhance opportunities for students has already been noted (see Commendation 3).

5.5 *Relationships with Alumni*

The MOHEIs indicate that although there is no central database, planned interactions or formal feedback systems from alumni, they have a very strong commitment to strengthening contact with graduates (Portfolio, p.53). The Panel found that the only centralised system to trace alumni was through the MOH personnel records, and that currently the development of a central alumni database was not being progressed.

Although there is no centrally planned alumni interaction, some alumni engagement activities occur at individual Institute level, for example, Ibra Nursing Institute, OSNI and Oman Health Information Management Institute (OHIMI). Efforts were being made to reach out to graduates, for example through continuing education activities. North Batinah Nursing Institute has conducted its first alumni homecoming and has started tracking its graduates, developed a database and updated it periodically.

Whilst these individual initiatives are important they are not consistent across the Institutes. Opportunities to involve alumni in contributing to and supporting the MOHEIs are being missed due to the lack of an alumni association structure and a centralised readily accessible database of alumni. The MOHEIs are urged to work together with the MOH to establish an infrastructure to support contact with the graduates.

Recommendation 23

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, establish an alumni association, preferably linked to each Institute, and expedites the development of an alumni database.

5.6 *Relationships with the Community at Large*

The MOHEIs emphasise the importance of a relationship for staff and students with the community particularly regarding community programs, health promotion and educational activities (Portfolio, p.53). The Panel found that the MOHEIs conducted a range of valued activities including Open Days to familiarise the community with its services, visits to schools for

the disabled, community health courses and services, and health education orientation programs. The regional Institutes were found to play an important role in educating their communities about the value of a professional healthcare workforce. For example, in Salalah the Directorate General of Health Services and the MOHEIs staff joined to conduct very successful community education programs to ensure both male and female students enrolled in the Institute's programs in sufficient numbers. Whilst, as acknowledged by the MOHEIs, there is currently no formal system to evaluate the success of these activities, the Panel was provided with sufficient community stakeholder feedback on the value of their relationship to conclude that this aspect of the MOHEIs activity was working well.

Commendation 7

The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes in the regions on the positive engagement and provision of a wide range of health services to their community aimed at increasing their communities' awareness of the value of a professional healthcare workforce.

6 ACADEMIC SUPPORT SERVICES

The MOHEIs state that the Directorate General for Education and Training (DGET) is responsible for ensuring the required educational resources to maximise learning potential and enable student to successfully graduate (Portfolio, p.55). This is in line with the MOHEIs' Strategic Plan (2011-2015), Goal 3:

MOH Educational Institutes will ensure that the MOH will provide all the required education resources to promote innovative teaching learning environment (Strategic Plan, p.)

This Chapter covers the implementation of academic support services in the registry, Library, information and learning technology services, academic advising, student learning support and teaching resources as well as considering how these services are planned and managed.

6.1 Academic Support Services Planning and Management

The MOHEIs indicate that the various Institute councils, headed by the Deans, are responsible for academic support services (Portfolio, p.55). Planning and management of Library and learning support is shared with the DGET and, in the regions, the individual Institutes coordinate with the Directorate General of Health Services (DGHS) which provides funding for learning resources. There is currently no system to evaluate the effectiveness of planning and managing in this area (Portfolio, p.55).

The Panel confirmed that different Institutes had different committee structures, so there was some variation in the manner in which resources were sought and planned. It also found that there was inadequate provision in the important areas of resources for academic support services in particular. While the Panel was informed that there was an attempt at equivalence of provision that was driven in the Nursing Institutes by the Nursing Council, it was clear from the audit visits to the various Institutes that such equivalence was not achieved. Different Institutes had different forms of provision but the great majority were poorly equipped in terms of Library provision, IT facilities and laboratory equipment. The MOHEIs state that the annual reports usually submitted by the Institutes provide feedback on the status and outcome of the academic support services (Portfolio, p.55). However, there is no feedback in response to these reports, so the loop is not closed and therefore there is no obvious follow-up in a timely manner.

It became clear was that the goal to “provide...education resources to promote innovative teaching learning environment” (Strategic Plan, p.9) is not being attained. The lack of operational planning hampers the provision of adequate academic support services and this in turn is a considerable impediment to the quality of the education that can be delivered and is undermining the quality of the student experience. The MOHEIs will need to undertake clear planning, transparent budgetary processes and a regular needs assessment and analysis in this area of their activity.

Recommendation 24

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, establish a clear planning cycle for managing academic support services with transparent budgetary processes and an awareness of the need for active and timely response when needs arise in order to better assure the quality of the student learning experience.

6.2 *Registry (Enrolment and Student Records)*

The MOHEIs state there is a clear plan in the 8th Strategic Plan, Objective 3.2 “to establish a unified database for student information” (Portfolio, p.55). There is an intention to establish a centralised admission and registration unit at the DGET. At the time of the audit, there were various ways in which student records were kept: paper folders, Excel spreadsheets with some kept on a personal computer and backed up, others on a server. The need to develop a more appropriate system was recognised by MOHEIs in the Portfolio (p.56) and confirmed by the Panel during the audit visits to the Institutes. The present system allows little analysis of entry data, trends, performance or demographic background. The Institutes acknowledge that there are no guarantees about data integrity and state “the lack of a registry and computerised student information management system impacts severely on the ability of the Institutes to handle the data records safely and efficiently” (Portfolio, p.56). Moreover, the lack of a unified system means the DGET cannot carry out comparative surveys about the performance of the various Institutes.

Recommendation 25

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes establish, as a matter of urgency, an integrated electronic student information system to provide data security and a reporting mechanism for analysis of trends and performance both within and across Institutes.

A comprehensive training program on the new system will be required for staff accessing the system.

6.3 *Library*

The libraries and their staff are centrally managed from the DGET’s Directorate of Continuing Professional Development by the Section Head for Library and Educational Resources with the help of an advisory committee and a specialist medical librarian (Portfolio, p.56). The Panel was told that books were purchased and provided by the DGET. Annual reports from the individual Institutes suggest that provision of books is inconsistent and that some years go by without any books being provided.

At the regional Institutes, staff and students complained about Library provision and the Library at many of these Institutes was nothing more than a large room with a limited number of books, many of which were outdated, duplicate photocopies of basic texts, and incomplete runs of specialist journals. The MOHEIs are urged to verify that they are not in breach of the Oman Copyright and Related Rights Law (Royal Decree No. 65/2008) which does not permit multiple copying of texts. The Panel was concerned that the lack of proper resourcing in this area meant that Institutes appeared to be infringing copyright in order to have access to the materials required for conducting the courses of study.

Recommendation 26

The Oman Academic Accreditation Authority recommends that Ministry of Health Sciences Institutes develop and adopt their own copyright policy consistent with Omani Copyright Law and implement a process for ensuring full awareness of, and compliance with, this policy amongst staff and students.

Libraries were staffed in variety of ways, some with librarianship qualifications but others by teaching staff working within the limits of their knowledge but without the specialist training that

a modern librarian requires. Provision of electronic journals and books was limited, often because the libraries had no internet access and no provision of modern computers.

Clearly, any move towards the offering of Bachelor degrees and any movement towards college status will require considerable updating and significant resource allocation in this area of activity. Provision at the Wattayah campus where the individual Institute libraries have been merged is significantly better. The Library Advisory Committee for the Institutes is located at the Wattayah Campus and has specific terms of reference, intended to effectively and efficiently improve coordination, management and utilisation of the Library facilities and its resources within the campus area (Portfolio, p.56). This may provide a model for all MOHEIs in the future. Whilst there are systems to count the number of people entering the Library, there is little evidence that Library users' views are being collected. Of particular note, and perhaps as an indication of how the future might be planned, the Institutes with overseas affiliates gave their students a particular advantage as these students had access to the affiliates' high quality electronic library resources.

While moves to upgrade library resources at the central Wattayah campus are to be welcomed, it is clear that much remains to be done with respect to libraries in the regions. Libraries should be staffed by specialist staff, appropriately trained, and user surveys and evaluations should be carried out at regular intervals to assess usage and service delivery.

Recommendation 27

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes improve, as a matter of urgency, the libraries in all Institutes in line with contemporary standards in order to meet current and future student learning needs, including the appropriate provision of books and periodicals, both hard copy and electronic format as well as trained staff and systems to evaluate the effectiveness of this provision.

6.4 Information and Learning Technology Services

The MOHEIs state:

The MOHEIs are dedicated to providing learning support and believe that information technology (IT) is a vital component of higher education. Human and physical resources for IT and learning are present in each of the MOHEIs under the direction of the DGET. (Portfolio, p.59)

There was evidence of IT hardware and software in every Institute visited by the Panel and dedicated staff to IT related work. However, a very mixed picture was found. Equipment was sometimes old and sometimes broken and there were many long delays in the process of procuring suitable replacement hardware. There were on occasion insufficient numbers of work stations for the number of students on the courses. In many of the Institutes, there was little or no WiFi availability, no satisfactory broadband connection, and inadequate bandwidth for speed of access. In a number of Institutes, there was just one member of staff who attempted to cover all areas and who in some cases lacked the depth technical knowledge to run the system efficiently. Hostels currently do not have adequate provision of IT facilities so that students can study in their own time. With very few exceptions, the Panel found that resources were not suitable for a modern learning environment.

It is clear from information provided by the MOHEIs (Portfolio, p.59) that the number of staff who have benefitted from IT training varies considerably from one Institute to another. Staff throughout the system lack appropriate training; both faculty and administrative staff require

skills development, and each Institute requires an appropriate number of specialist IT staff to manage upgrades and to serve as local advisors and instructors. The MOHEIs state that an IT Committee has been established by the Undersecretary for Planning Affairs and an online training workshop was conducted in 2012 to explore Blackboard, the e-learning managing system. It is recognised that such a system cannot function in the present IT environment (Portfolio, p.60). The MOHEIs needs to address, as a matter of urgency, the whole area of information and learning technology services, to ensure effective provision of hardware and software to meet student and staff needs and services provision is supported by trained staff.

Recommendation 28

The Oman Academic Accreditation Authority recommends that, as a matter of urgency, the Ministry of Health Educational Institutes information technology environment be upgraded to ensure effective provision for contemporary student learning needs and that it be supported by trained staff.

6.5 Academic Advising

Article 26 of Ministerial decision 167/2008 is quoted by the MOHEIs: “an academic advisor shall be appointed for each student from amongst the Institute’s faculty” (Portfolio, p.61). The Panel found that throughout the network of Institutes the role of the advisor was undertaken by teaching staff and students had access to these advisors. However, the MOHEIs provided information that suggests the system is not functioning as well as it might be (Portfolio, p.61). Student survey results show that well over half of students surveyed had not met their advisor at least twice in a semester and over 30% said they had not received sufficient advice and support with their studies.

While considerable efforts have been made with respect to this area of activity, there is still much room for progress and improvement. Although there have been occasional workshops on academic advising organised by a member of the teaching staff, the great majority of staff had received no formal training for their role as advisors. The Panel took the view that such training may lead to staff being more effective advisors for their students. This view is indeed expressed by the MOHEIs (Portfolio, p.63); however, there is no evidence that such training had been undertaken and encourages the MOHEIs to initiate such a scheme.

Recommendation 29

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review their academic advising provision in order to ensure it is effective and where necessary, that appropriate specialised training is offered to support staff in this role.

6.6 Student Learning Support

The MOHEIs state that “systems are in place within the individual Institutes for student learning support” (Portfolio, p.61). This is only partly true as the provision is not consistent. The MOHEIs also acknowledge “the student learning support system is still developing and will require further evaluation” (Portfolio, p.62). Throughout the network, the Panel found groups of committed teachers striving to ensure that their students succeeded in their various forms of study. Across the MOHEIs, the student evaluations of teaching were delivered in a variety of forms that would often lead to a discussion between faculty, a Head of Department and/or a Dean. Feedback to students did not follow a consistent pattern or was non-existent, so a formal agreed upon process for this would be beneficial. In some Institutes, remedial classes had been set up in order to assist students who were struggling to achieve the desired outcomes, but for a number of reasons such as resources and time availability, the classes did not form part of an organised system.

The MOHEIs express the hope that the “new Foundation Program (FP) will address the current concerns about the low English standard on entry to various programs and the amount of time and workload faculty incur in offering remedial classes due to perceived language problems” (Portfolio, p.62). Staff and students (including recent graduates) indicated that the problems were real and not simply perceptions and recognised that the common FP was providing important and appreciated support to students. The planned evaluation of the FP has already been discussed in Section 2.4 with the Panel supporting the MOHEIs’ plans in this regard.

6.7 Teaching Resources

The MOHEIs state they are committed to “effective and efficient use of educational resources” for a “quality education in a conducive learning environment”. The MOHEIs further state that all of the Institutes review their resources annually so they can function properly and manage their procurements as required (Portfolio, p.62). While it may be true that Institutes operate an annual review, the Panel found that provision was uneven and where a needs analysis had been undertaken and communicated the various requests for provision had not succeeded.

While some of the Institutes had buildings and equipment that were fit for purpose and were sufficient for the preparation of students for their future employment roles, there were a number of instances where there was a clear lack of modern pedagogic teaching resources and equipment as mentioned above. There was also insufficient space for some of the groups. In many Institutes, the equipment used to train the students was outdated or broken and not useable. With few exceptions, the Institutes were not provided with the modern resources needed to train health care professionals. Laboratory material, in particular the mannequins, were broken or too old to be of value. Such materials cannot prepare students for their future roles when they will find instruments and equipment in the hospitals, clinics or laboratories bear no resemblance to the material on which they had been trained. This needs to be addressed so that the MOHEIs can deliver the quality educational experience central to their Mission.

Recommendation 30

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes urgently develop and implement a clear plan to ensure that every Institute is regularly provided with the equipment and resources required to train contemporary healthcare professionals.

7 STUDENTS AND STUDENT SUPPORT SERVICES

The MOHEIs are committed to producing efficient healthcare workers by providing them with opportunities to practice in an environment that supports their growth and development (Portfolio, p.64). Effective and constructive use of support services is considered by the MOHEIs to be vital to achieving their mission and goals (Portfolio, p.64).

In this Chapter, the Panel reports on student support services and their management; student profile; student satisfaction and behaviour at the Institutes; and student financing. It also reports on career and employment services; accommodation and catering services; medical and counseling facilities; and social and recreational services and facilities.

7.1 *Students and Student Support Services Planning and Management*

According to the MOHEIs, responsibility for student support services is assigned to the individual Institutes which are expected to provide a range of support services. A Student Affairs Officer or the Director of Administration takes charge of these services. Student support needs are said to be followed up and managed by the Directorate General of Health Services (DGHS) in the regions and Directorate General of Education and Training (DGET) for Institutes in Muscat (Portfolio, p.64).

The Panel noted the variety of support services offered at the different sites, including student finances, accommodation, catering and transportation, medical and counseling facilities, and social and recreational services and facilities. While the provision of student support services can be seen to underpin some of the strategic goals of the MOHEIs, there is no specific mention of the management of student support services in the Strategic Plan and thus no objectives, targets or indicators tied to student support services. This, in conjunction with the review of other evidence, led the Panel to conclude that there was little strategic or operational planning of student support services. It was also noted that responsibility for student services varied across the individual Institutes as suggested above. For example, situations were encountered where the Director of Administration and Finance, or a Student Affairs Officer was in charge; where responsibility was distributed across several job-holders; and in one place, where no-one was in overall charge.

A number of Institutes have committees with remits which include aspects of the oversight of student support services (Staff-Student Liaison Committee, Health and Safety Committee, Extra Curricular Activities Committee). However, there is no consistency across the MOHEIs with respect to how student services are managed on a day-to-day basis, and as noted in Section 7.3, little evidence of a clear feedback loop being used to improve the quality of services. Students have some opportunities for input into the oversight of some of the services through Student Councils, membership of some committees, or through evaluation surveys (see Section 7.3). The students whom the Panel met were generally very dissatisfied with the quality of student support services across all Institutes, and the response of students to the MOHEIs' surveys also reinforced this.

The MOHEIs have identified opportunities for improvement in student services in the Portfolio (p.71) and are, therefore, aware that improvement is needed. However, the absence of any clear central objectives for student support services, together with lack of consistency of day-to-day management across the individual Institutes, and the varying input of students to the management of services has led to provision of services which are of inadequate and inconsistent quality, with no clear plan for monitoring performance towards improvement.

Recommendation 31

The Oman Academic Accreditation Authority recommends that to improve the appropriateness and effectiveness of student support services, the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, carry out an evaluation of their approach to planning and management of student support services, including needs analyses at the Institute level and response times from the centre; and introduce regular monitoring of the delivery of student support services.

7.2 *Student Profile*

The MOHEIs indicate that the student intake is comprised of school-leavers apart from two Institutes where the intake also includes MOH employees and graduates. According to figures submitted in the Portfolio, in 2012 there were over 6000 students enrolled across the 13 MOHEIs (Portfolio, p.87). The number and distribution of students at the Institutes is determined by the planning authorities at the MOH. Female students make up approximately 80% of the nursing students; at some of the specialised Institutes the female: male ratio is 50:50 (Portfolio, p.65). The students are predominantly Omanis with only a few international students enrolled via special arrangements with their home country. As discussed in Section 2.3, the Panel heard concerns at a number of Institutes about the quality of the student intake and the impact of quotas relating to regional and male students on academic performance.

There was some attempt at the Institute level to gather and analyse information about the local student profile. For example, some Institutes had informal processes for identifying students at risk and low achieving groups. There were instances where this led to extra support being given to students at risk, although in some Institutes this was through the personal efforts of teachers, rather than being a planned part of the support system.

However, there are no central guidelines to assist the Institutes in the analysis of their student profile, nor any system wide analysis of the student profile. The Panel concurred with the MOHEIs (Portfolio, p.65) that the analysis of student profile is hampered by the inadequate local student records systems. The lack of a centralised student management information systems means that analysis taking place at individual Institutes is not done in a consistent way, and there is no cross-campus analysis. An important opportunity for encouraging consistency of student achievement across the MOHEIs is not possible in the current context (see Recommendation 25).

7.3 *Student Satisfaction and Climate*

The MOHEIs strive to build a positive and constructive climate for their students, aiming to support and nurture the non-academic aspects of student life (Portfolio, p. 65). Despite this intention, the Panel found no overall, systematic analysis of the student climate across the Institutes, and a varying understanding within Institutes concerning what the 'student climate' was, or how it could be enhanced. There was little collective understanding of the need to underpin students' academic study activities with personal support in order to provide an integrated approach to the student experience. This integrated, holistic student experience characterises the student-focused approach to higher education which is implicit in the MOHEIs intentions, but not borne out in practice.

There was awareness of the MOHEIs values in the Institutes and instances of the values being integrated into the behaviour of teachers and students. For example, it was obvious in all Institutes that both students and staff practiced a caring and supportive approach. In some instances, peer-to-peer care was the main mechanism of personal support for students. The Panel also saw evidence of student surveys, both at the local level, and in the 2012 DGET Student Experience Survey. While the latter survey was carried out to establish a baseline for the

provision currently being delivered, it was not disaggregated to Institute level and there was little evidence of detailed analysis of results, action planning, or feedback to students about their suggestions. Ibra Nursing Institute's thorough action report on students' views on Institute climate 2011 and 2013 was an exception to this finding.

It was also noted that there were no clear plans for the survey to be regularly repeated. To be of maximum use to the Institutes, surveys need to be carried out on a regular cycle and should provide Institute-specific information. The Panel heard that there were open door policies for students to contact staff with complaints or suggestions and saw the provision of suggestion boxes although students made little use of them. Student spaces for private study and relaxation are not available in all Institutes, or are not big enough to accommodate all students; students told the Panel that this had an adverse impact on their learning experience.

There was good practice in some Institutes (for example, Oman Assistant Pharmacy Institute, Al Rustaq Nursing Institute, Sohar Nursing Institute, Oman Health Information Management Institute) where teaching staff were striving to produce positive student support services which was appreciated by students. Many Institutes foster a positive climate for the student experience through a student support system based on the commitment and hard work of staff, rather than through a planned approach. This outcome may well be facilitated by the small size of these Institutes and the informal communication possible between the students and staff. Students were very appreciative of the efforts and support of their teaching staff.

While student climate is at present largely positive in some Institutes, student satisfaction with aspects of student support services is not high. Since it is possible that the current positive climate depends on the personal efforts of teaching staff, reliance on this will not be adequate for student support if student numbers increase.

Recommendation 32

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes carry out a review and analysis of the student climate which exists at each Institute in order to generate a system-wide understanding of what is required to enhance student satisfaction.

7.4 Student Behaviour

The MOHEIs explain that student behaviour is specified in Ministerial decision 167/2008 and the organisational policies and procedures have sections related to attendance and misconduct. Individual Institutes also address these matters in student handbooks. Modules related to professional behaviour and ethics are also available (Portfolio, p.65). On the whole, adequate guidance on their behaviour was provided for students in student handbooks and codes of conduct. The Panel heard from both students and staff that briefings on exam conduct were given, and students were aware that there were the penalties for misconduct. The students clearly knew the expectations on them to behave ethically and professionally. In the Panel's view, those students exhibited the values of the Institutes and behaved in a professional manner.

No evidence was found that the Institutes had student disciplinary committees and incidents were often being referred to the Dean for action, or dealt with by assessment committees. The MOHEIs presented evidence of the reporting of incidents of misconduct (Portfolio, p.66) and the Panel heard further evidence of these reports during its visits. However, there was no evidence that any systematic analysis of misconduct is carried out with a view to preventing or guarding against it. While the behaviour of students was appropriate, even exemplary, the Panel found no evidence that the MOHEIs evaluated whether the system for governing student behaviour is appropriately effective and constructive.

7.5 *Career and Employment Services*

The MOHEIs explained that Institutes have a limited focus on long-term career development and future prospects. Employment in the health system is normally assured after graduation. Nevertheless, some career-related activities are provided in the Institutes: open days, community events, workshops, guidance on matters relating to employment. The employment process is managed by the Institute administrations and the MOH Personnel Department (Portfolio, p.66). There is an internship period after graduation which helps student make the transition to (or return to) the world of work.

The Panel concluded that, given the specialised remit of the MOHEIs in providing trained professionals for the health system, the informal system of career guidance in place was probably appropriate in the circumstances. However, there was no evidence that the MOHEIs had assessed the approach to determine whether it continued to be appropriate and effective. Such assessment would be a timely development given that, as reported in Section 2.11, not all graduates are able to gain employment in an area of their choice or interest or which utilises the skills that they acquire during their programs.

7.6 *Student Finances*

The MOHEIs provide free full internal scholarships and financial support for all Omani students on basic programs. This includes transportation costs for those living over a certain distance from the campus, as well as uniforms, and books. Accommodation allowances are also available although there is some lack of clarity as to how these are applied. Special allowances are available for those in financial need. Some post-basic students also receive allowances also (Portfolio, p.67).

The Panel found that students were aware of the financial aid opportunities available. While students often felt that the allowances were not adequate for their costs, on the whole, they thought that they were distributed fairly, according to obvious categories of need. There was some indication that the allowances were not always paid in a timely way and students had to seek temporary help elsewhere. The Panel concluded that the financial system was perceived by students to operate fairly and transparently, but encourages the MOHEIs to investigate whether their student financial services are adequately and efficiently administered.

7.7 *Accommodation, Catering and Transportation*

The MOHEIs provide various accommodation, catering and transportation services which are contracted out by the MOH. Contracts are reviewed annually and apparently modified depending on the needs of the Institutes. Despite the provision of accommodation, financial support and catering services being identified as a strength in the Portfolio (p.71), little local or central evaluation of the adequacy of these services is carried out. Student surveys show widespread dissatisfaction with accommodation and catering services (Portfolio, pp.67-68). The Panel found little evidence to show how information from the student surveys was being carried forward into improvement of these services, and how the needs of students in the Institutes were being met in this respect. The Panel heard in some Institutes that staff would like to make improvements or changes to the services but that this was not always possible within the contractual agreements.

Students indicated not only that quality of accommodation is unsatisfactory in places, but that sometimes there is inadequate security for students, especially female students. The lack of internet access in hostels has already been discussed in Section 6.4. Catering services varied from non-existent to inadequate in quality or were located distant from the campus. At Wattayah campus, students from some Institutes had difficulty accessing catering services as their classrooms were some distance from the central catering services. Not only do these circumstances have a negative effect on the experience of students and have an adverse impact on

the student-focused approach, but they also represent a significant reputational risk to the MOHEIs. The Panel notes that the MOHEIs identify these services as an opportunity for improvement in the Portfolio but do not yet have planning in place to deal with this.

Recommendation 33

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes carry out a systematic evaluation of accommodation, catering, and transportation needs at Institute level and ensure that timely and effective action is taken to improve the services. .

7.8 *Medical and Counseling Facilities*

All MOHEI students receive free medical care at MOH health centres and clinics. Student handbooks contain information about medical services available and Health and Safety Committees follow up matters to do with medical services (Portfolio, p.69). The Panel found evidence in the terms of reference of Health and Safety Committees that medical (as opposed to occupational) health matters came within the Committee remit.

Students find that medical and counseling services are adequate on the whole, although they also consider that much of their support comes from friends, fellow students or staff. However, students who require psychological counseling may be referred to the hospital where they will subsequently undertake a placement, and this may inhibit their willingness to seek help since they are not confident that confidentiality will be maintained. Female students may also be compelled to visit a male doctor which the students feel is inappropriate. Most Institutes do not have access to specialised personal counseling and students normally approach their academic adviser if they have personal problems. Advisers may refer students to the Dean if they cannot deal with problems. The MOHEIs recognise the need for trained counseling expertise and the Panel agrees with this (Portfolio, p.71), but found no evidence that this opportunity for improvement was being progressed in a structured way across the Institutes.

Recommendation 34

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review their approach to medical and counselling services provided by individual Institutes with a view to improving appropriateness, effectiveness and consistency; in particular, in conjunction with the Ministry of Health, they should address the need for trained counseling staff within the Institutes.

7.9 *International Student Services*

The MOHEIs explain that they are focused on educating Omani students for the health service, funded by the government, and only one Institute takes a small number of international students from Yemen and Bahrain (Portfolio, p.70). The Panel did not explore this area.

7.10 *Social and Recreational Services and Facilities*

The MOHEIs state that they try to ensure that a quality education takes place in a conducive learning environment and believe that students' motivation is an integral part of the learning environment. The MOHEIs point to certain committees and the provision of various facilities as ways of involving students in social and recreational activities (Portfolio, p.70). The Panel found extremely limited social and recreational activities held on the campus sites or in student hostels, mainly owing to the absence of recreational facilities. Student Councils and Extra Curricular Activities Committees were active in arranging some off-campus events. The Panel heard repeated complaints about these services from students and graduates.

Not all Institute administrations recognise the need to support social and recreational facilities as part of the student environment. This indicates that the MOHEIs lack an understanding that motivating students is an important part of the learning environment is not universally understood. There is, nonetheless, much good practice evident in the work of Extra Curricular Activities committees (for example at Al Dharira Nursing Institute, Rustaq Nursing Institute, Sohar Nursing Institute, Salalah Nursing Institute) which appear to be well organised and arrange various events off campus. They also publicise on-site facilities where these exist. However, the Panel was not able to find evidence to show that the activities of such committees are monitored or whether any planning of activities takes place at an Institute level. It was not clear that the MOHEIs know whether the range and quality of social and recreational services and facilities are appropriately effective and constructive in meeting the needs of students. Another case of good practice is evident in the work of Student Councils (for example at Al Rustaq Nursing Institute, Ibra Nursing Institute, ONI, OSNI, Sohar Nursing Institute), which play an active part in motivating the student body. Although, Student Councils are not present in all Institutes, the need for Student Councils generally was recognised, and that some Institutes had either recently reinstated Student Councils or had committees which provided opportunities for the student voice to be heard.

Affirmation 4

The Oman Academic Accreditation Authority agrees with the Ministry of Health Educational Institutes that the establishment of Student Councils should be supported at all Institutes, and supports its efforts in this area.

The Panel concluded that the range of social and recreational services and facilities on offer at the Institute campuses is not sufficient to contribute to the motivation of students or to enhance the student learning environment. The lack of such facilities presents a risk to the current largely positive student climate and this needs to be addressed with some urgency.

Recommendation 35

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes review the approach to and evaluation of social and recreational facilities at campuses to ensure that they are appropriate and adequately supported.

8 STAFF AND STAFF SUPPORT SERVICES

The overall Mission of the MOHEIs is to train the workforce for the MOH institutions (see Section 1.1). The MOHEIs' overall human resource (HR) system is based on Civil Service rules and regulations (Portfolio, p.72). Within the Institutes, the Strategic Plan Objective 5 clearly states a commitment to “developing the capabilities and skills” of both teaching and administrative staff and “retaining” qualified staff. In their Portfolio, however, the MOHEIs do not explicitly relate discussions of their activity in this area to that strategic objective, rather focusing on developing staff research capability and skills only.

This Chapter covers HR planning and management; the MOHEIs' staff profile; their recruitment, selection and severance processes; staff induction and professional development activities; incentives and opportunities for advancement; processes for planning and review of performance; the organisational climate at the MOHEIs; and their progress towards Omanisation.

8.1 *Staff and Staff Support Services Planning and Management*

The MOHEIs state that HR planning and management is largely centrally directed; the Directorate General of Education and Training (DGET) determines the staffing process with staffing budget centrally managed but allocated to each Institute (Portfolio, p.72). Staffing plans for each Institute are developed centrally with some consultation with program faculty at the individual Institutes. Institutes do not have their own HR Departments and all staffing matters are under the central MOH HR Department (Portfolio, p.72). However, the Panel heard that the Civil Service rules and regulations that govern appraisals, leave applications, recruitment and termination of service were not fulfilling the Institutes' needs.

The Panel found that no real workforce planning was taking place at institutional level, and that the centrally managed planning was not effective or adequate and at times posed a risk to the operation of the Institutes. Individual Institutes were understaffed and both teaching and administrative staff had very high workloads. Teaching staff were dealing with teaching, advising and other activities such as multiple committee membership. Some administrative staff were doing multiple jobs due to understaffing and delays in appointments. Staff felt overworked and there was increasing frustration with the system. Deans and Directors of Administration had very little scope to tackle these issues effectively and there was evidence of significant delays in finding suitable staff or filling vacant positions.

There was some inconsistency across the MOHEIs in the ratio of academic staff to students and in the balance between academic and administrative staff. The Panel found a number of cases where the Institutes were not appropriately staffed, for example, committee members fulfilling the role of the librarian. In some Institutes, lack of clear information about the planned merger of Institutes (as discussed in Section 1.5) was causing some uncertainty amongst staff.

In the regions, the Panel was informed that the Directorate General of Health Services (DGHS) was responsible for funding administrative staff positions and that this led to differences in staffing practice and inconsistencies in staffing levels between the Institutes in Muscat and those in the regions. There was little evidence that the MOHEIs, through the DGET and the DGHS, were able to progress improvements to the planning and management of their HR. The Panel was also concerned to find a lack of awareness of how complex and challenging the future changes to degree offerings and the proposed unified college structure will be with respect to the planning and management of staffing for these endeavours. Whilst at a senior level within MOH, there is a strong desire for change, barriers to this change in terms of Civil Service rules, procedures, structures, personal attitude and ability to be overcome, and strategies to deal with these barriers must be put in place, particularly in the areas of leadership and change management (see

Recommendation 5). There is a lack of a suitable HR policy and procedures framework that would focus on the needs of the MOHEIs and their staff for the future, and a lack of a systematic central and local HR management and workforce planning system. The Panel has concerns that this is a crucial area of increasing risk to the fulfillment of the Mission of the MOHEIs and of impacting adversely on student, staff and external stakeholder satisfaction.

Recommendation 36

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes, in conjunction with the Ministry of Health, introduce a dedicated human resource management capability to develop and implement appropriate policy and procedures to address their staffing needs and, based on this, develop and implement an integrated plan for the efficient and effective utilisation of human resources in the Institutes which addresses current and future needs both centrally and locally.

8.2 Staff Profile

According to data submitted in the MOHEIs' Portfolio, there were over 310 teaching faculty employed across the MOHEIs, with around 130 administration and support staff (Portfolio, p.86). At DGET level, there is no specific policy for the planning and management of staff profiles (Portfolio, p.72). The Panel found significant variations in the staff profiles at individual Institutes particularly with respect to qualification levels. It appeared that in some Institutes improved staff profiles were as a result of more effective negotiating efforts of individual Deans and Directors of Administration.

Omani staff mainly hold degrees at Bachelor and Masters level with few PhDs. In some non-nursing specialised Institutes, there were more expatriate staff, many of whom had PhDs. The Panel heard that up-skilling Omani teaching staff was a priority to support the development of capability to teach BSc level programs and to conduct research (as already discussed in Section 4.1). Evidence submitted indicated that from 2007 to 2011, 18 members of staff had enrolled for PhD study and that two had completed. The impact of this initiative on staffing and workload needs be under kept under regular review. Whilst the up-skilling initiative is to be applauded, the Panel had concerns that remaining staff would also require training in readiness for the new programs and new teaching methods.

Recommendation 37

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes urgently review the current initiatives to enhance the staff profile of the Institutes to ensure that they will deliver the required balance of staffing in terms of qualifications, skills and capabilities and meet the current and the future needs of the individual Institutes.

8.3 Recruitment and Selection

The MOH is responsible for the recruitment of staff with the policies related to staff recruitment applied by the Directorate of Administrative Affairs and aligned with the Civil Service rules and regulations (Portfolio, p.73). The Panel found that recruitment was handled centrally and confirmed, as indicated by the MOHEIs, that Institutes had little control over recruitment (Portfolio, p.74). Not all Deans were involved in the selection process for teaching staff and the Panel heard contradictory reports regarding the right of Deans to refuse acceptance of a teaching appointee. The Panel also heard that if an inappropriate appointment was made centrally, the only recourse that a Dean had was to not renew the staff member's contract at the end of the year.

There was evidence of problems with filling long and short term vacancies, and of delays in senior administrative appointments.

There are inconsistent practices regarding job descriptions. Some staff did have a job description, others did not, and some staff had job descriptions but that did not reflect what they did on a day-to-day basis in their roles. New staff in particular would benefit from the consistent provision of up-to-date and relevant job descriptions and the MOHEIs are encouraged to develop these through the DGET. The Panel concluded that the centrally managed process used for recruitment and selection of staff for was neither efficient nor effective in meeting the staffing needs of the individual Institutes and this needs to be reviewed and improved.

Recommendation 38

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes be fully engaged in all aspects of the selection and appointment of staff to ensure local requirements are fully met and that all staff are provided with an up-to-date and accurate job description.

8.4 Induction

The MOHEIs claim that there is no centrally organised or common induction program induction manual and that each Institute conducts its own program (Portfolio, p74). Whilst some Institutes have staff handbooks which are provided to new staff as part of this process, the MOHEIs indicate that many Institutes feel the need for a common staff induction manual which includes, amongst other areas, information on staff responsibilities, grading systems, job descriptions and promotions policy, as well as other information specific to academic and administrative staff (Portfolio, p.74).

The Panel found that although the process did indeed vary across the MOHEIs, most had some form of orientation system in place for new staff. There was evidence of some good practice in the mentoring process for new academic staff which was helpful for them in settling into their roles. As already discussed in Section 8.3, the Panel confirmed that there were variations in the extent to which staff had up to date and relevant job descriptions across the Institutes. As the MOHEIs develop HR policies and procedures (see Recommendation 36), the Panel encourages the MOHEIs to pay attention to the consistency in implementation of the induction program across the Institutes and progress the development of a common comprehensive staff induction manual to assist that process.

8.5 Professional Development

The Panel noted that that the Directorate of Continuing Professional Development (CPD) was responsible for professional development of academic staff within the MOHEIs. For the individual Institutes where staff development committees existed, professional development activities focus on areas identified in staff performance planning and review (Portfolio, p.75).

The Panel noted that there were staff development committees in most Institutes and in some Institutes there was a staff development coordinator. The Panel found that the main focus for CPD activities was workshops with few alternatives provided and little evaluation of their effectiveness. The Panel found that systems to identify training needs based on performance reviews were not in place. Whilst some Institutes have conducted needs assessment to identify where to focus professional development activities, the Panel found that there was not, in general, provision for staff to say how they wanted to be supported in this area. In some Institutes, it was found that staff members were not fully trained in the use of specialised equipment which meant that the full potential of the equipment for teaching was not being realised. The need to

professionally develop or train the MOHEIs staff in specific areas has been earlier in this Report (see Recommendation 2). Some of the focus of this training will be important and urgent as the MOHEIs begin to act upon plans for the future (see Recommendation 2, Recommendation 14 and Recommendation 29). Whilst training in these specific areas is necessary, the Panel urges the MOHEIs to revisit their approach to staff professional development more generally, especially planning to ensure it is aligned with the system-wide strategic objectives.

Recommendation 39

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes adopt a more planned and systematic approach to professional development in line with strategic objectives and with longer cycle times to ensure better prioritisation and targeting of skills in specific areas.

8.6 *Performance Planning and Review*

The MOHEIs state that the Ministry of Civil Service criteria and process for appraising staff performance is followed and that reviewing staff performance is essential to support staff development and retention (Portfolio, p.76). The MOHEIs acknowledge that there is no standardised system for performance planning and review and indicate that there is a need for more comprehensive staff performance appraisal tool and improved transparency regarding promotion (Portfolio, p.79).

Performance review is carried out by line managers in accordance with Civil Service rules. The Panel found that there is no consistently implemented performance planning and feedback system in the MOHEIs and the Civil Service rules mean that in most cases staff received feedback only if their performance is poor.

The Panel did find examples of good practice where Deans were providing regular feedback on a person to person basis to teaching staff. The lack of systems to link training programs to performance reviews has already been discussed in Section 8.5. The Panel concluded that the Civil Service regulations for performance planning and review were not appropriate in order for the MOHEIs to meet their objectives. The Panel supports the development of a comprehensive performance appraisal system which includes collecting a consistent set of data to review staff performance, providing feedback on the review findings to individual staff, and linking review findings to individual professional development plans.

Recommendation 40

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes introduce a standardised and comprehensive performance management system that enables all staff to receive feedback that is then linked to providing them with professional development opportunities.

8.7 *Promotion and Other Incentives*

The MOHEIs indicate that the Civil Services regulations are followed to promote staff to higher grades and provide incentives. Theoretically, all staff members have access to promotion if they meet the criteria (Portfolio, p.77). However, there are concerns with implementation of these regulations due to a lack of transparency in processes for promotion and incentive payments (Portfolio, p.77).

The Panel heard that there is an intention to include research performance in promotion criteria. Deans are appointed to their jobs from lower level positions, and that this system is not based on

a merit based selection criteria process. Bonuses and incentives are given to some staff for exceptional performance but there is no transparency in this process either. The Panel encourages the MOHEIs to redress these inconsistencies and lack of transparency in the promotion and incentive policies to improve staff satisfaction and promote retention of qualified staff.

Recommendation 41

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes adopt promotion and incentive policies that are fair, appropriate and transparent to all.

8.8 Severance

The MOHEIs state that the Ministry of Civil Services rules and regulations are used for the severance of academic and administrative staff (Portfolio, p.77). The Panel did not explore this area.

8.9 Staff Organisational Climate and Retention

The MOHEIs claim that individual Institutes aim to provide a “positive and conducive” climate for staff and that they do this through extra-curricular activities, financial incentives, staff awards, committee and workshop participation, open door management policies, and surveys to identify improvements (Portfolio, p.78).

At the individual Institutes visited, there was a clear sense of institutional identity and commitment, and staff collegiality. Overall, there was evidence of good team work, staff committed to doing their best to educate students in an often challenging and under-resourced environment. Students praised the efforts of staff and indicated they were the MOHEIs’ greatest strength. The Panel was told of a number of examples where staff members were willing to put in extra effort to support student learning and this was appreciated by students.

With regard to the move to offer BSc programs and the establishment of a College model, there was a sense of uncertainty about the future and staff believed that these changes could mean an improved future with additional resources and support. However, the Panel did observe that staff had no sense of the change management required to move to what was perhaps an unclear future.

A staff satisfaction survey, initiated by the DGET, had been undertaken across all Institutes in 2012 (Portfolio, p.78) but action plans in response to this were not yet available at the time of the audit. Some Institutes had undertaken their own surveys and some action had been taken in response to the feedback. The Panel believes this work can be built on to develop a systematic approach to produce trend data and the potential for identifying improvement at strategic and local level.

Affirmation 5

The Oman Academic Accreditation Authority supports the Ministry of Health Educational Institutes’ efforts to carry out comprehensive staff satisfaction surveys and encourages the Institutes to ensure that the results are evaluated and acted on at both aggregate and individual Institute level, and that staff are informed of actions taken.

An MoU for cross Institute collaboration has been signed by three Nursing Institutes to “enhance performance and promote development” (MoU wording). This will allow cooperation and benchmarking in areas such as assessment practice, evaluation of teaching, academic advising, students council and risk management. The Panel encourages the MOHEIs to further develop

moves to enhance cross institutional awareness based on sharing and benchmarking good practice.

8.10 Omanisation

The MOHEIs indicate that the overall proportion of Omani faculty is 43% with a range between 18% - 71% depending on the nature of the *Institute*. For non-academic staff, the proportion is around 90% (Portfolio, pp.78-79). The Panel found that there were several initiatives in place to increase the number of Omanis in the individual Institutes, particularly academic staff, and that the MOHEIs were committed to the government's Omanisation policy. Scholarships and support are made available to academic staff to undertake study programs to attain higher degrees, particularly PhDs. Omani staff are given preferential treatment with professional development opportunities to support skills development.

For the Institutes with a low percentage of Omani academic staff, it was confirmed that this was more as a result of uncertainty as to the longer term future of that institution, rather than a desire to not implement the Omanisation policy, for example with Oman Assistant Pharmacy Institute. As the longer term future of these Institutes become apparent, then this imbalance will need to be addressed. The Panel also heard about aspirations from longer serving non-Omani Deans regarding succession planning initiatives for Omani academics to move into an increasing number of roles in the Institutes. Whilst the Panel suggests that the process of Omanisation be reviewed regularly to ensure it is meeting the strategic intent, it concluded that, overall, the MOHEIs' Omanisation policy (Portfolio, p.79) was working well.

Commendation 8

The Oman Academic Accreditation Authority commends the Ministry of Health Educational Institutes for the successful implementation of their Omanisation policy.

9 GENERAL SUPPORT SERVICES AND FACILITIES

Goal 3 of the MOHEIs Strategic Plan (2011-2015) relates to the commitment of the MOHEIs to ensure the provision of all the required educational resources to promote an innovative teaching-learning environment (Portfolio, p.80) and Objective 3 of the MOH Strategic Plan (2011-2015): Domain Health Educational Institutes commit to improving the individual Institutes infrastructure in order to meet the demands for higher education.

This Chapter reports the Panel's findings in relation to general support services planning and management; public relations and marketing; communication services; and facilities management.

9.1 *General Support Services and Facilities Planning and Management*

The MOHEIs indicate that the Director of Administration and Finance in the Directorate General of Education and Training (DGET) is responsible for the overall planning and management of the general support services and facilities for the MOHEIs (Portfolio, p.80). In the regions, the Directorate General of Health Services (DGHS) is involved in the oversight of these aspects in the Nursing Institutes. The Deans and Directors of Administration have management responsibility at the Institute level. Furthermore, the MOHEIs indicate that planning and management in this area of their activity is challenging due to an absence of "standardised rules, policies and procedures from either the DGET or the MOH to guide the process of implementing..." (Portfolio, p.80).

The Panel was informed that individual Institute's operational financial budgets are usually fixed by the DGET's Office on a historical expenditure basis, and that they mainly cover staff salaries and student's allowances leaving little room for appropriate planning of running costs or managing unforeseen urgent needs. Annual requests are prepared by the Institutes and are usually sent to the DGET Office, although, in regional Institutes these are directed into two channels: educational resources requests are sent to the DGET's Office, while other support needs such as stationery, furniture and hostel needs are sent to the regional DGHS Office.

The Panel found that procurement of resources and supplies and availability of services are often problematic owing to inconsistent rules and policies and lack of common procedures governing these processes. The Panel was told that many requests for improved infrastructure and maintenance had been put on hold or that the approval was not forthcoming. Staff indicated that this was due either to inaction at DGET or DGHS level to process requests (apart from where successfully personal negotiating by the Deans had resulted in action as discussed in Section 1.6) or suspension of infrastructure development pending the implementation of the proposed college model. The delays and reactive approach to resource planning were posing significant hardships on the Institutes. The Panel concluded this was an area that needs to be improved.

Recommendation 42

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes adopt a consistent, systematic and proactive approach to planning and management of the Institutes' facilities, and implement timely replacement and preventive maintenance processes to ensure that physical resources, infrastructure and facilities are able to support core academic and training activities.

9.2 *Public Relations and Marketing*

The MOHEIs state that the Higher Education Admissions Centre (HEAC) is initially responsible for the public relations and marketing activities of the MOHEIs. Marketing at the Institute level is mainly coordinated by the Administration Department, Student Affairs and extra-curricular activities committees (Portfolio, p.81). The MOH has a website that includes a section on the Institutes, giving brief details on them and the programs they run; the Panel found this is updated infrequently and its effectiveness and usefulness has not been monitored.

The Panel was informed that the MOH websites were purely functional and were not intended to promote the MOHEIs although some Institutes had developed their own websites. In the absence of centrally managed initiatives, the Panel found some Institutes had instigated successful in-house public relations and marketing initiatives, utilising school visits and participation in public activities to create awareness about these Institutes and their role in providing health services personnel and professionals. Good practice examples of these promotional activities were identified at Oman Health Information Management Institute for website construction and Salalah Nursing Institute for promotion of community health care roles (see Commendation 7). However, the Panel found that promotional activities were usually carried out through extra-curricular events mainly delivered by students and organised by staff. Overall, the Panel concluded that public relations and marketing activities were not carried out in a planned or strategic manner and were without proper analysis as to the extent these activities meet their objectives. The MOHEIs need to address this.

Recommendation 43

The Oman Academic Accreditation Authority recommends that the Ministry of Health Educational Institutes develop and implement a marketing strategy with a clear mandate to promote and increase community awareness of the contribution of the Institutes to the provision of health services professionals in Oman and that they ensure the strategy is fully supported with necessary human, financial and web-based resources with outcomes regularly evaluated.

9.3 *Communication Services*

The MOHEIs use several means of internal communication, including “internal memos, notice boards, posters, TV displays, meetings, e-mail, intranet, phone calls, faxes” (Portfolio, p.81) as well as face to face contact. All Institutes have student handbooks but only some Institutes had staff handbooks or suggestion boxes providing mechanisms for staff and students to give feedback (Portfolio, p.81). The Panel found reliance on letter writing as a form of communication from individual Institutes to the DGET and DGHS, in particular regarding requirements for resources (see Section 1.6). This communication system may in part be a product of the current ineffectiveness of electronic communication systems available through the MOHEIs but clearly outdated and ineffective.

Some Institutes had internal (intranet) networks. Staff and students informed the Panel that all Institutes were making efforts to address the limitations to the internet and general IT services across the Institutes. The Panel was informed that there are plans in place centrally to upgrade the internet connection in all Institutes and establish a reliable campus wide network coverage including in Institutes that do not have one. This network coverage should enable enhanced internal and external communication systems to be developed. (The development of websites for the Institutes as a mechanism for enhanced marketing and public relations has been addressed in Section 9.2). The latest MOHEIs Operational Plan includes a commitment to improving the speed of the broadband connections by contracting for a faster service for all Institutes; the Panel encourages urgent follow up of this intention to ensure fast, efficient and effective communication for the Institutes.

Affirmation 6

The Oman Academic Accreditation Authority agrees with the Ministry of Health Educational Institutes that they need to take steps, in conjunction with the Ministry of Health, to ensure that a functional campus-wide intranet system exists in all Institutes coupled and strengthened with high speed internet connectivity accessible to all staff and students.

There were varying levels of communication across Institutes between managers and staff. Improved communication systems would enable good practice to be shared. The group of Nursing Institutes does, in general, communicate effectively both formally, at the Nursing Council level, and informally across the Nursing Institutes (see Commendation 2). The Panel was told that Deans, particularly newly appointed ones, often telephone their colleagues for advice and support and that they found this communication useful.

9.4 *Facilities Management*

According to the MOHEIs, facilities management across all Institutes is handled by the Deans and Directors of Administration, with each Institute having its own system for managing maintenance (Portfolio, p.82).

The Panel confirmed that there was no common system for facilities management and no standardised approach for measuring the efficiency of services and facilities management. This is an area that needs to be addressed (see Recommendation 42).

APPENDIX A. AUDIT PANEL

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APPENDIX B. ABBREVIATIONS, ACRONYMS AND TERMS

The following abbreviations, acronyms and terms are used in this Report. As necessary, they are explained in context. In some cases, URLs are provided to facilitate further enquiries about these acronyms and terms.

ADRI	A four step, cyclical model for analysing a topic, comprising: Approach → Deployment → Results → Improvement.
Approach	The first dimension of the ADRI cycle, which focuses on evaluating what a HEI aims to achieve for a given topic and how it proposes to achieve it.
Clinical preceptor.....	A qualified health professional who provides clinical supervision for a student on clinical placement
Deployment	The second dimension of the ADRI cycle, which focuses on whether a HEI's plans for a given topic are being followed in practice, and if not, why not.
DGET.....	Directorate General of Education and Training
DGHS	Directorate(s) General of Health Services
DNMA	Directorate of Nursing and Midwifery Affairs
Executive Officer.....	An OAAA staff member assigned to an Audit Panel to provide professional guidance and support.
External Reviewer	A Member of the OAAA Register of External Reviewers; a person approved by the OAAA Board to participate as a member of the OAAA's various external review Panels.
FP.....	Foundation Program
GPA.....	Grade Point Average
HEAC	Higher Education Admissions Centre
HEI.....	Higher Education Institution (also known as HEP – Higher Education Provider)
HR.....	Human Resources
IELTS.....	International English Language Testing System
IHS.....	Institute of Health Sciences
Improvement.....	The fourth dimension of the ADRI cycle, which focuses on how effectively an organisation is improving its <i>approach</i> and <i>deployment</i> for any given topic in order to achieve better <i>results</i> .
IT	Information Technology
MOF.....	Ministry of Finance
MOH.....	Ministry of Health
MoHE	Ministry of Higher Education (www.mohe.gov.om)
MOHEIs.....	Ministry of Health Educational Institutes
MoU.....	Memorandum of Understanding
OAAA Board	The governing body of the Oman Academic Accreditation Authority
OAAA.....	Oman Academic Accreditation Authority (www.oaaa.gov.om)
OAC.....	Oman Accreditation Council (became OAAA in 2010)
OAPI.....	Oman Assistant Pharmacy Institute

OHIMI	Oman Health Information Management Institute
ONI	Oman Nursing Institute
ONMC	Oman Nursing and Midwifery Council
OSNI.....	Oman Specialised Nursing Institute
Panel Chairperson	The Chairperson of the Audit Panel.
Panel Member	An OAAA External Reviewer who is a member of an Audit Panel.
Portfolio	see <i>Quality Audit Portfolio</i> .
Quality Assurance	The combination of policies and processes for ensuring that stated intentions are met.
Quality Audit.....	An independent evaluation of the effectiveness of the system and processes by which a HEI sets, pursues and achieves its mission and vision.
Quality Audit Portfolio	The report produced as the result of a self study. Also forms the main submission made to the OAAA by the HEI being audited.
Quality Audit Report.....	A public report published by the OAAA which presents the findings and conclusions of the Audit Panel's External Review of a HEI.
Quality Enhancement.....	The combination of policies and processes for improving upon existing <i>approach, deployment</i> and <i>results</i> .
Results.....	The third dimension of the ADRI cycle, which focuses on the evidence of the outputs and outcomes of a topic's <i>approach</i> and <i>deployment</i> .
<i>sic</i>	Quoted as in the original text
System.....	In this Report, <i>system</i> refers to plans, policies, processes and results that are integrated towards the fulfilment of a common purpose.

