THE ROLE OF ACCREDITATION STANDARDS IN DELIVERING A QUALITY ASSURED PROGRAM - EXPERIENCE IN THE UAE

Sabeena Salam  
Faculty, Department of English and Head of Institutional Effectiveness,  
Dubai Pharmacy College  
sabeena@dpc.edu

Fouzia Shersad  
Faculty, Department of Pathology and Director Institutional Effectiveness Dubai Medical College  
fouzia@dmcg.edu

Abstract: In an era where higher education institutions aspire to gain a reputation of quality, accreditation bodies have been restructuring their standards to match the needs of the education community. This study aims to evaluate the extent to which the accreditation body, viz. Commission of Academic Accreditation (CAA) in the UAE has achieved this goal; using the experience of two HEI’s in the country. The study of the accreditation history especially for the last two decades of the Dubai Medical College and Dubai Pharmacy College has been evaluated. The improved commitment and loyalty of the faculty, improved communication channels and structured reporting has made it easy to detect problems before they lead to undesirable effects. Leadership support has led to mobilization of resources and expansion based on the needs of the community. The mission driven outcomes based assessment based on the CAA standards have led to remarkable improved in student satisfaction rates and in proactively mitigation of risks.

Keywords: quality assurance, higher education, accreditation standards

INTRODUCTION

One of the functions of accreditation is to provide medical and health science schools an opportunity for critical self-analysis which leads to significant improvement in quality. In the present day, higher education institutions (HEI) aspire to gain academic excellence that will give them a reputation of quality. This has led accreditation bodies to review their credibility due to which they have been restructuring their standards to match the needs of the education community.

Aim of Study

a. To evaluate how accreditation standards lead to a quality assurance of a higher education program.

b. To assess which areas are benefited by accreditation standards.

The experience of the accreditation process for last 8 years of two colleges were studied and evaluated for the effects.

Background

In UAE, the Ministry of Higher Education and Scientific Research’s licensing agency and accrediting body, the Commission for Academic Accreditation (CAA), has strict guidelines and regulations covering areas such as Mission, Organization and Governance, Quality Assurance, Educational Program, Faculty and Professional Staff, Students, Learning Resources, Physical Resources, Fiscal Resources, Public Disclosure and Integrity, Research and Scholarly Activities and Community Engagement. These are the areas where the commission takes an active role in evaluating programs offered in the UAE. Since 2011, Community Engagement has received a lot of importance in the CAA standards.

For program accreditation, the CAA invites a team of visiting international experts (the Evaluation Review Team or ERT) to evaluate specific areas related to curriculum of the specified profession. This has helped them keep the standards more generic and applicable to a wide variety of HEI. All HEI within the country are mandatorily
accredited by the Commission of Academic Accreditation (CAA) under the Ministry of Higher Education in accordance with its compliance to the latest Standards 2011 for Licensure and Accreditation.

For example, it has been reported that this does not affect the quality in medical education, as they use an external review team composed of expert team from international arena as a crucial part of the accreditation process. (Ahmed & Shersad, 2010). In addition to creation of systematic processes, this accreditation also provides opportunities for learning across different sectors of higher education.

**REVIEW OF LITERATURE**

It was noted that in order to ensure quality of educational programs HEI should have an institution level performance appraisal system in place and this process should be evaluated by an accreditation body which provides incentives through grading so that the quality does not deteriorate with time. (Stella & Gnanam, 2003)

Multiple levels of analysis are done in most institutions and these standards vary from region to region. Every country has a particular set of values and norms which have to be reflected in the standards. These standards should be aligned with international standards and use of specific international standard can be due to attributes related to individual like information type, adaptation of standards) and by country-level attributes (i.e., absorptive capacity, linguistic distance, incentives for adoption of standards). (Popescu, 2010) It is evident that Standards have been improved by time with a holistic approach while distinguishing the supply side and the demand side of the knowledge economy. (Brink, 2010)

In the UAE, though the public higher education sector provides free education to the national students, the private sector has grown steadily since 1997. But even while the economy was booming, many scholars reported that it was the low level of trust by the employees and employers in the higher education system that has been a challenge in meeting the needs of the economy (Hijazi, Zoubeidi, Abdalla, Al-Waqfi, & Harb, 2008). A great deal of effort has been reported in the higher education sector and it has gone a long way in improving higher education in the country. (Parikh, 2010)

Past researchers have reported that the accreditation paradigm of health professions education has to change according to the move towards outcome-based education, so that it builds competence related to context of society. (Davis & Ringsted, 2006) The CAA has introduced the national qualifications framework in order to bring all levels of education under the ambit of a single structured format and this has been mandated by every institution since 2010.

Several other studies in Europe and USA have pondered over this topic of benefits of accreditation standards in medical and paramedical programs. Several studies evaluated the way different accreditation bodies affect education institutions by comparing the effects of two different accreditation bodies in controlled circumstances. The study comparing the effects of the different accrediting bodies on medical and osteopathic schools failed to prove that accreditation bodies make any difference in the quality. (Wood & Hahn, 2009) However, if we look an individual institution it will definitely show a positive impact.

Studies in the Asia-Pacific regions have shown that India and China have excelled in a broad spectrum of access, quality, and delivery indicators (Goldman, Kumar, & Liu, 2008). While the higher education sector has been assured quality by accreditation bodies, non-conformance indicates that more than two thirds are below quality (Gupta & Gupta, 2012).

**RESULTS**

Evaluation was done on the accreditation and the effects of the process on two bachelor’s programs viz. Bachelor Pharmacy of Dubai Pharmacy College and Bachelor of Medicine and Surgery of Dubai Medical College. Currently both colleges are licensed and accredited by the Commission of Academic Accreditation. Both colleges have also achieved laurels for their strong programs from organizations like GCC Pharmaceutical Congress, Dubai Quality Award and Mohammed Bin Rashid Al Maktoum (MRM) Excellence Award.
Desirable effects of the accreditation process:

The benefits of the process as delineated from the effects in the colleges and the programs as reported in the annual reports and the feedback of faculty are given below:

1. Evolution of culture of self-assessment at the individual unit and institutional level
2. Development of a common language
3. Greater faculty professional development
4. Creation of standardized institution-wide indicators
5. Streamlining of data through the Centre for Higher Education Data and Statistics (CHEDS)
6. Creation of a holistic framework where every aspect is systematically and regularly assessed and improved
7. Integration of the framework of output of each unit to align with the mission and vision of the entire organization.

1. Evolution of culture of self-assessment at the individual unit and institutional level

Since the CAA insisted on submitting clearly delineated self-assessment document, it became imperative for the two institutions to perform a systematic outcome based self-assessment annually. This was the reason why the institutional effectiveness unit was put in place. In Dubai Medical college, the institutional effectiveness unit had put in place a self assessment model for each unit individually and then the annual reports from each department was channeled through the unit to obtain results. The results are fed into the strategic plan for the next year for improvement activities. Processes were identified and committees were formed to ensure proper implementation and evaluation of these processes. Each committee formulated their own intended outcomes. Then the strategic plan was built based on this input and the overall mission.

In Dubai Pharmacy College, the institutional effectiveness unit started from strategic plan and intended outcomes were distributed by IE to functional units which were responsible for major areas of the plan. IE prepares the indicators and results of the indicators for each unit. At the end of every year, each unit prepares their assessment based on the results.

Remarkably, both institutions created a culture of self-assessment, which was applauded by external reviewers of accreditation team and other organizations.

2. Development of a common language

Language improvement was in three strata

1. International terms related to IQA system.
2. Terms used in day to day management where faculty and staff refer to different parts or functions.
3. Understanding what each of the terms entail. It also helps in the application of key terms of the institution, like mission, vision, values, priorities, strategic plan etc.

The terminology related to quality assurance like indicators, learning outcomes, benchmarking, key enablers and stakeholders developed. The terms used for day to day activities became clear for all and unified across the institutions. Even the definition of unit level and institutional level activities became clear to all members. This is in spite of the fact that the terms were coined specifically for the institution or whether international terms were used.

Some of the first steps involved were mission vision exercises where all members were made familiar with a common mission, vision and values. This translated into improved efficiency of all processes.
3. Creation of standardized institution-wide indicators

As the criteria for improvement were analyzed, several indicators emerged. These indicators were gradually benchmarked with international institutions and refined. These now were standardized indicators for the entire institution. During this process, a clear and standardized institution wide indicator system developed.

4. Greater emphasis on faculty development:

One of greatest advantages of having an accreditation body is perhaps the focus on developing faculty. Both colleges show the high level of satisfaction rates for their own professional growth and development. A systematic process to assess the needs and to meet the needs has been in place in both colleges. The difference is that while DMC has focused on training and workshops, DPC has a majority of efforts towards research. The presence of evaluation system meant that all members used all the resources available to them to perform research and to publish. The linkage to promotion has also helped in achieving this target.

5. Streamlining of data through the Centre for Higher Education Data and Statistics (CHEDS)

When the CAA introduced the database system which evolved into the CHEDS initiative, the colleges conformed to the regulatory needs. The data was now possible to be benchmarked with similar institutions and this made a valuable external target for the individual institutions to aim for. Therefore, collection of data is streamlined and funneled through the Centre for Higher Education Data and Statistics (CHEDS).

5. Creation of a holistic framework where every aspect is systematically and regularly assessed and improved

Since the CAA insisted on alignment of the institutional strategy with that of each unit. This meant that all units followed the same overarching goals at the level of the institution. The CAA 2011 criteria stressed on the need for program goals and institutional goals over and above the unit level goals or targets. These had to show linkages with the individual departments goals as well. This meant that the improvement was synergistic and all parts followed the same path. The micro level as well as macro level improvements was all aimed at achieving the mission and vision of the college. The next level of the program level indicators and strategic priorities were now clearly communicated and understood by all involved.

6. Integration of the framework of output of each unit to align with the mission and vision of the entire organization

Every course file contains the institutional mission and goals. The outcomes assessment matrix requested by the CAA, meant that the department outcomes should be derived from the institutional goals.

DISCUSSION

The majority of the benefits are related to the improved motivation and commitment of the faculty members. The synergistic processes and clear responsibilities led to clear job descriptions and efficiency of time. Leaders ensured resource mobilization and improvement which would have otherwise taken years was now done in a very short span of time. Time constraints now became time efficient.

The enhanced reputation attracted better faculty which in turn led to improved pedagogy. The reputation also led to higher quality of applicants and better outcomes. Faculty benefits of professional development led to improved efficiency, commitment, accountability and satisfaction.

Process improvement, involvement of leaders and commitment of faculty led to increased commitment and innovation. Regular assessment has shown major benefits in alignment of the mission and vision to the activities of individual units leading to improved effectiveness.
Conclusion

The multiple benefits of individual indicators lead to better achievement of the mission and vision. This alignment in turn encourages involvement and commitment of all stakeholders. Such a comprehensive drive for the better produces overall benefit to the program and the institution.

REFERENCES