January 2017

Quality Assurance Self-assessment: A Catalyst at Aga Khan University

Tashmin Khamis
Aga Khan University, tashmin.khamis@aku.edu

Khairunnisa Dhamani
Aga Khan University, khairunnisa.dhamani@aku.edu

Follow this and additional works at: https://ecommons.aku.edu/eastafrica_fhs_fhs
Part of the Medicine and Health Sciences Commons

Recommended Citation
Available at: https://ecommons.aku.edu/eastafrica_fhs_fhs/13
Quality Assurance Self-assessment: A Catalyst at Aga Khan University

Tashmin Khamis* & Khairunnisa Dhamani**

Abstract

This article describes the establishment of the Aga Khan University’s Network of Quality Assurance and Improvement in promoting the principles of quality in its programmes. As an international university, the experiences and lessons learned have the potential to inform quality assurance and improvement in similar contexts. The authors reflect on past attempts to improve the quality of educational offerings, which were primarily traditional quality assurance audits. With the advent of the Inter-University Council for East Africa self-assessment process, the next generation of quality assurance and improvement was launched for the Aga Khan University programmes. They found the self-assessment process effective in changing attitudes towards quality enhancement and implementation of improvement plans, because it created ownership in the process. Practically, self-assessment is an important tool for academic quality assurance providing critical feedback, and catalysing action. The article will be useful for those establishing quality teaching and learning units across multi-site, multi-campus universities, especially in resource challenged environments.

Keywords: higher education, quality assurance and improvement, academic development, resource challenged environments

* Director, AKU Networks of Quality, Teaching and Learning, Office of the Provost, Aga Khan University, Nairobi, Kenya. E-mail: tashmin.khamis@aku.edu
** The Aga Khan University School of Nursing & Midwifery, Dar es Salaam, Tanzania. E-mail: khairunnisa.dhamani@aku.edu
Résumé


Mots clés : enseignement supérieur, assurance et amélioration de la qualité, développement académique, environnements en difficulté de ressources

Introduction and Background

Building and investing in a sound higher education system is key to forging the future of nations and their economies yielding ‘an inclusive and diverse knowledge society to advance research, innovation and creativity’ (Teferra 2013:2). For meaningful and sustainable development, it is imperative that appropriate resources are committed to quality of programmes in higher education (Teferra 2013:2). Driven by its mission for human development, the Aga Khan University (AKU) is producing leaders and quality graduates who do and will transform society for the better (Rasul 2012).

Founded by the Aga Khan in 1983, the major focuses of AKU are in the fields of health and education. AKU currently offers programmes in eight countries spread over three continents. In Pakistan, the palette includes a medical college, school of nursing, teaching hospital, as well as the Institute for Educational Development (IED), which includes professional development centres in Gilgit-Baltistan and Chitral, and the Examination Board in Karachi. In London (United Kingdom), the Institute for the Study of Muslim Civilisations offers a graduate degree in Muslim cultures. In East Africa,
AKU offers programmes in advanced nursing studies (Kenya, Uganda and Tanzania), postgraduate medical education (Kenya and Tanzania), and the Master of Education at IED (Tanzania). These programmes are supported by a 250-bed teaching hospital (Aga Khan University Hospital in Nairobi) and Aga Khan Hospital in Dar es Salaam. AKU is also working with the governments of Syria, Egypt and Afghanistan to improve the nursing and medical education curriculum, teaching standards and clinical practice.

This paper will focus on the efforts across the East African Advanced Nursing Studies programmes which undertook a quality assurance/improvement initiative in 2013–2014.

**Quality Assurance in the Advanced Nursing Studies Programmes**

To meet the needs of a changing society with increasing professional and health sector market demands, AKU has historically reviewed its programmes to inform status as well as to plan the development of new offerings.

![Quality Assurance Framework for Academic Programmes](image)

**Figure 1:** Quality Assurance Framework for Academic Programmes

*The Quality Assurance Context at AKU: pre-2012*

Processes were in place to assess quality assurance at AKU which were largely peer reviews of programmes, either internally or through use of external evaluators. A quality assurance framework at AKU was established in 2009 focusing on the student experience. The aim of this framework, known as the ‘Student’s Journey’ (Figure 1) was to focus quality assurance mechanisms on the students as they progressed through the academic system across all programmes. The framework focused on the various steps a student takes from considering an AKU
programme through application and, if successful, enrolment and navigation of the learning experience, before emerging a graduate and alumni of AKU. The framework looked at how the student experience could be strengthened at each stage of the journey. At this point our efforts were primarily rooted in work of Gibbs (2010, 2012) which considered the dimensions of quality in higher education institutions and how too often the wrong dimensions were captured or highlighted. In essence, quality rankings were often not actually addressing teaching quality and/or educational outcomes (Pascarella 2001; Gibbs 2010). Gibbs (2010) further identified that most indicators are process rather than product variables as reflected in the Table 1.

**Table 1: Educational Outcome Indicators.**

| Quality of student intake (entry standards) |
| Class size (and close contact with faculty, but not class contact hours, nor necessarily low student to staff ratios) |
| Pedagogical practices that engender student engagement (participatory teaching methods; collaborative learning; extent and quality of student-faculty interaction; level of academic challenge) |
| Quantity and quality of feedback to students and clear expectations on goals, standards and assessments (rubrics) that promote ‘deep’ rather than ‘surface’ learning approaches |
| Whether teaching is valued, rewarded, supported and funded and opportunities exist for peer engagement for teacher improvement |

In 2010, at AKUANS, through a series of faculty retreats on curriculum review, the faculty identified the need to develop a baseline understanding of the current quality assurance processes, at each of the steps of the student journey in order to guide quality assurance priorities, develop quality metrics to benchmark against, and identify ways forward. To ensure the baseline reviews were conducted in a systematic and participatory way, the Programme Director for Quality Assurance conducted three-day visits to each campus (in Kenya, Uganda and Tanzania) between September and November 2010. During these visits, data were collected using the following methods:
- class observations: at least two classes per campus;
- SWOT analysis with faculty;
- interview with registrar’s offices;
- focus group discussions with current enrolled nurse to registered nursing (EN-RN) and registered nurse to bachelor of science in nursing (RN-BScN) students.
focus group discussions with alumni;
• semi-structured interviews with the foundation dean, academic heads and programme coordinators;
• employer interviews (face-to-face or by telephone): at least two per campus;
• documentation review of student evaluations.

The selection and creation of the tools was based on the student journey framework as well as Gibbs’ Dimensions of Quality indicators described previously. The data collected were triangulated with the results of the initial baseline reviews completed by the management teams (academic heads and programme coordinators). In order to ensure that quality assurance needs or priorities identified would be acted on effectively, all recommendations were necessarily evidence based, inclusive of students’ voices, and process ownership was felt by management and the faculty. The Programme Director then developed a report of the findings, in consultation with the Dean.

Despite the participatory methods of data collection, it was evident that, when findings and recommendations were shared, the faculty felt the report was owned by the senior management team, rather than themselves. Their responses to the reports were dismissive and often defensive of areas of critique and weaknesses. Thus, the recommended actions were largely seen as driven or contrived by academic management, especially in the priority area identified which was the imperative for faculty educational development to strengthen the teaching learning experience.

At this point it was recognised that a new innovative approach would be necessary to move forward positively on the quality assurance efforts.

The Journey Shifts: Post-2012

Coincidently, an evolving momentum for quality assurance in higher learning environments was afoot in East Africa. As the East African Community came together, the Inter-University Council for East Africa (IUCEA) were tasked with working together with the various Commissions of Higher Education, particularly in Kenya, Tanzania and Uganda, to harmonise higher education structures to enable mobilisation of students and graduates across the region. Initiatives being implemented in East Africa to bolster quality and harmonisation of curricula include subject benchmarking; the credit and accumulation transfer system that sets minimum academic standards for different disciplines and programmes; implementation of a regional higher education qualifications framework; and principles and guidelines for quality assurance in higher education in East Africa. In this
regard, the IUCEA partnered on the Dialogue on Innovative Education Strategies initiative with the German Academic Exchange Service and the German Rectors’ Conference to enhance quality of higher education in the East African region. Learning from the Bologna harmonisation process in Europe, the IUCEA has developed a quality assurance handbook *A Road Map to Quality* which includes four volumes to support universities in East Africa to implement good practices for quality assurance at the programme and institutional level, as well as to guide establishment of effective internal quality assurance mechanisms and directorates in universities in the region, that are aligned to international standards. The IUCEA partnered with the regulatory Commissions of Higher Education and select universities to pilot the first of these handbooks, *Volume 1: Guidelines for Self-Assessment at Program Level* (IUCEA 2010).

In 2012, the opportunity to participate in a pilot project was offered which would focus on a new model of quality assurance. Given their recent experience and ongoing struggles with the quality assurance process, it was decided that the post-registration Bachelor of Science of Nursing (Post-RN-BScN) programme at the AKU Advanced Nursing Studies (AKUANS) in Tanzania and Kenya would embark on the self-assessment quality assurance process with the intent of developing a quality improvement plan. This project was initiated by the IUCEA in collaboration with development partners, specifically, the German Academic Exchange Service and the German Rectors’ Conference, as well as the national higher education regulatory bodies of the participating East African countries. Through use of IUCEA’s *Handbook for Quality Assurance in Higher Education* (2010), the self-assessment teams outlined the parameters for quality assurance and tool implementation guidance.

The AKU senior management was highly supportive of this initiative with the Dean of Nursing appointing chairs and members to self-assessment teams in each setting. The teams comprised faculty members, student representatives and members of support staff, including a student record officer, human resource personnel and an academic liaison officer. Under the Office of the Provost, the AKU Network of Quality Assurance and Improvement supported these self-assessment teams with training and guidance on the process as well as ensuring that all findings were backed by documented evidence. Essentially, similar stakeholders were participating in this second quality assurance audit (as the one described previously) but the major difference was that the self-assessment teams were internally led rather than headed by the senior management team.
Two of the authors, both academic staff at AKU, participated in the third cohort of the IUCEA Quality Assurance training. With this knowledge and expertise, they organised and conducted a workshop for the East African self-assessment team outlining the details of the project and the process of conducting programme self-assessment. The training emphasised five steps of the self-assessment process: (1) preparation of the self-assessment; (2) data collection and documenting evidence; (3) analysis of information; (4) evaluation; and (5) writing a self-assessment report including the improvement plan. The overall purpose of this effort was to launch an evaluative process for the Post-RN-BScN programme and make commendations for its quality improvement.

The East African self-assessment team was divided into three groups to work on process, inputs and quality assurance cells on the analysis model for self-assessment. As depicted in Figure 2, the analysis model consists of eighteen cells categorised into three dimensions, specifically quality of the input, quality of the process and quality of the output. This model was foundational to guiding the team to systematically and rigorously assess the multiple dimensions contributing to the quality of education (IUCEA 2010). At the onset, the groups were challenged to populate each cell with evidence to achievement and quality. During this process of populating each cell, it was evident that there was replication of information and exemplars across cells, which was interpreted as integrative and validating. Each cell was described and critically analysed to understand the current situation within the programme and then to decide whether performance was satisfactory, evolving or needing improvement. For example, Cell Number One focused on inputs from various stakeholders when establishing or revising a programme (see Table 2). The description of this cell contained information related to various stakeholders including accreditation bodies within the university and outside the university such as nursing councils, Ministries of Health and Commissions of Higher Education in both Tanzania and Kenya. Critical analysis of the cell indicated that the programme met the relevant needs and requirements of the government and key stakeholders including alumni and employers; however, no tracer study was conducted and there was no database for stakeholders’ requirements. The analysis allowed rating this cell using a scale of 1–7.
Table 2: Exemplar Content of Cell Number One from AKU Self-Assessment Team

<table>
<thead>
<tr>
<th>Cell #/ Name</th>
<th>Cell Description</th>
<th>Evidence Sought</th>
<th>Strengths</th>
<th>Weaknesses</th>
<th>Score /7</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Requirements of Stakeholders</td>
<td>Faculty/department responsible has a clear understanding about the relevant demands of stakeholders -Ministries of Health -Commissions of Higher Education -Employers -Alumni</td>
<td>-Interim Authorities/ Certificate of Registration -Nursing Council Approvals -Satisfaction surveys -Evaluation reports</td>
<td>-Pioneer program -Non-impacting of current workforce -Highly-innovative programme</td>
<td>-No tracer study -No database of stakeholder requirements -Lack of structured forum to determine needs -Data uptake and utilisation strategies</td>
</tr>
</tbody>
</table>

As part of the evidence, various documents, such as letters of Interim Authority or Certificate of Full Registration from the respective Commissions of Higher Education, Nursing Councils’ approval of the RN-BScN curriculum, alumni and employer satisfaction survey reports and external evaluation reports, were sought. The fourth step required the self-assessment team to mention strengths and weaknesses of this cell followed by the last step to discuss an improvement plan. For example, the team’s contribution stated:

There is evidence that the programme largely meets the stakeholders’ requirements as seen in the curriculum and various documents. The programme meets the requirements of the government regulatory bodies, as well as the labor market as indicated through a stakeholder satisfaction survey. As a pioneer work-study programme, the programme addresses the unique learning needs of working nurses without affecting the critical shortage of nurses at their places of employment. However, there is no clear evidence in the documents reviewed to suggest that the programme is based on the clear understanding of the requirements by the stakeholders (Self-Assessment Team, Kenya 2013:16).

To address the shortcomings, the team indicated various strategies such as: conducting a tracer study, establishing a database for stakeholder requirements and expectations; holding structured forums to identify the needs and requirements of key stakeholders; and also establishing strategies for using the data from stakeholders to inform the programme in line with their requirements (Self-Assessment Team Kenya and Tanzania 2013).
These steps were essential to assess each cell’s factors/content for level of quality. As the process continued, the group members brainstormed on possible strategies to address or mediate the problems/weaknesses in the respective cells. It was also noted that despite the model’s depiction of a linear relationship between cells, the quality of each cell was seen to impact all three dimensions, which was made evident through the application of the model.

Learning from the Pilot

There were a number of elements of the new process that were viewed favourably by the faculty and management. Firstly, there was a greater sense of ownership of the reporting and ensuing improvement plan created by the East African quality assurance team. They wrote the reports, provided the context and insights, and shared the findings, which was both empowering and reflective. Secondly, there was a positive response to the quality assurance efforts even though the analysis of weaknesses resulted in greater criticism than had been evidenced in the previous audit which had met with major resistance. It is interesting that, despite similar findings and recommendations of the two reports (especially in the area of the need for faculty development in the area of teaching/learning), there was acceptance and acknowledgement of the latter document.

A number of changes have occurred at AKU to strategically align with the promotion of quality in student intake and excellence in teaching and learning as a result of the experiences in this pilot. There has been the establishment of the Quality Assurance Directorate (university wide) which provides guidance, experiences and policy to move this agenda positively. Further, in January 2013, the Provost announced the establishment of four networks: Teaching and Learning (TL_net) including Blended and Digital Learning (BDL_net), Quality Assurance and Improvement (QAI_net), and Student Experience (SE_net). The TL_net and QAI_net both focus on quality assurance and improvement of the learning environments. Mandates of the QAI_net and TL_net are intertwined in the efforts to strengthen the student learning experience at AKU, with the former focusing on continuous monitoring of academic programmes and the latter on professional development of the faculty. By supporting the faculty to teach students in engaging ways, the learning outcomes of AKU graduates will be realised, that is, students who can think critically, solve problems, work in teams and be leaders, lifelong learners and catalysts for change. Such a learner-centred environment ensures quality programmes, quality graduates and a quality faculty.
In addition, the IUCEA process has been adopted and embedded into the AKU Academic Quality Framework in March 2015, following the positive results from the ANS pilot. The AKU Academic Quality Framework is intended to promote improvement, assure the quality of learning opportunities and the standards of AKU programmes and awards, and provide evidence of quality assurance to stakeholders. From a practical level, this means that there will be a predictable cyclical review of all programmes. Every programme will be subject to periodic review every five years, consisting of self-assessment, external peer review and monitoring of resulting improvement plans through an annual self-monitoring process.

Acknowledgements

We are immensely grateful to Stephanie Ryan, Consultant, the Refinery Leadership Partners Inc, Vancouver, British Columbia for her support and comments on an earlier version of the manuscript.

Disclosure Statement

The authors declare no financial or other benefits.

References

Self-Assessment Committee, 2013, Self-assessment Reporting: Registered Nursing to Bachelor of Science in Nursing Programme (unpublished), Nairobi, Kenya: The Aga Khan University.