



International Quality Review

Mid-Cycle Review

Gulf Medical University

Review Report

January 2024

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About this mid-cycle review

This is a report of a Mid-Cycle Quality Review conducted by the Quality Assurance Agency for Higher Education (QAA) at Gulf Medical University. The mid-cycle review consisted of a desk-based analysis of documentary evidence and a site visit to review learning resources and facilities and to meet with staff and students. The review was conducted by a team of two reviewers, as follows:

- Professor Jeremy Bradshaw
- Mr Alan Weale.

The full International Quality Review (IQR) in April 2021, resulted in a [published report](#). The QAA review team concluded that Gulf Medical University met all 10 standards set out in Part 1 of the [Standards and Guidelines for Quality Assurance in the European Higher Education Area \(ESG\)](#). The team identified three features of good practice and made four recommendations.

This mid-cycle review evaluates progress against the key actions since the IQR and considers any significant changes that may impact on the ability of Gulf Medical University to continue to meet the ESG Standards.

Mid-cycle review usually takes the form of a desk-based review. In the instance of the April 2021 IQR, the review visit had to take place virtually due to the Covid pandemic restrictions. This mid-cycle review has therefore included an onsite visit and review of learning resource provision.

Outcome of the mid-cycle review

1 From the evidence provided, the review team concludes that Gulf Medical University is making **satisfactory progress** since the April 2021 International Quality Review and that the period of validity of the IQR should be extended to April 2026.

Summary of IQR outcomes

Overview of the institution

2 Gulf Medical University (GMU) is a university specialising in medical and related sciences. It was established in 1998. It offers medical and health professional education in the fields of Medicine, Biomedical Sciences, Dentistry, Pharmacy, Physiotherapy, Nursing, Medical Laboratory Sciences, Anaesthesia Technology, Medical Imaging Sciences, and Healthcare Management & Economics. GMU offers postgraduate programmes in Precision Medicine, Public Health, Dental Surgery in Endodontics & Periodontics, Physical Therapy, Medical Laboratory Sciences, Clinical Pharmacy, Drug Discovery & Development, Health Professions Education, and Healthcare Management & Economics. In addition, the University also offers short-term certificate courses for health workforce development and career enhancement. GMU is owned by the Thumbay Group - a business conglomerate with a diverse range of business interests and with headquarters in Dubai. Significant to GMU and its context are the Healthcare, Medical Research, Diagnostics, Retail Pharmacy and Health Communications components, which ensure GMU has access to its own network of hospitals, clinics and institutes.

3 GMU's vision is stated as: 'An internationally acclaimed sustainable Academic Healthcare Institution'. Its mission is stated as being to 'Pursue excellence in education, healthcare, and research with a focus on innovation, sustainability, social accountability, and strategic partnerships.' GMU is located across a 25-acre main campus located in Ajman. It is

networked with Thumbay Hospitals, Thumbay Clinics and Thumbay Pharmacies for the medical internship programme.

4 The university programmes are accredited by the Ministry of Education (MoE) of the United Arab Emirates (UAE) through the Commission for Academic Accreditation (CAA). The CAA and UAE National Qualification Centre (NQC) accredited five new programmes during the period 2021-23 and the CAA reaccredited a further nine pre-existing programmes during the same period. Total student enrolment for the year 2023-24 was 2479 - an increase of 17% since 2021.

Good practice identified by the 2021 International Quality Review

- The effective use of external examiners and externality more broadly in assuring assessment standards and external benchmarking (ESG Standard 1.3 and 1.9).
- The multiple opportunities for students to provide feedback has positively impacted on their overall learning experience (ESG Standard 1.7).
- The Quality Assurance and Institutional Effectiveness portal, which provides staff at all levels easy access to data and information critical to monitoring many aspects that impact on student progression, achievement and evaluation of programme effectiveness (ESG Standard 1.7, 1.9, 1.10).

Recommendations of the 2021 International Quality Review

- Introduce training and development for student representatives engaging with quality assurance processes (ESG Standard 1.2).
- Employ a broader range of methods in the acquisition of student feedback (ESG Standard 1.7).
- Clarify the support available to diverse students and people of determination and ensure that this information is easily accessible (ESG Standard 1.8).
- Develop a strategic approach to benchmarking that defines what is to be benchmarked, level of attainment and the use to be made of external input, with particular reference to international partnerships (ESG Standard 1.9 and 1.10).

Changes since the last IQR review visit

5 There have been a number of structural changes at the University, since the April 2021 IQR review visit. These include the creation of new academic units, change of title of one senior manager role, and adjustment of responsibilities and support units. A new institutional Strategic Plan has also been implemented. These changes are detailed in the following paragraphs.

6 A new Centre for Humanitarian Education has been established to provide training and to oversee humanitarian projects and community service as part of the University's social commitment. An Artificial Intelligence Institute has also been established with the aim of developing innovative medical education and healthcare solutions through research into the metaverse, and by the use of artificial intelligence.

7 The title of the Vice-Chancellor for Quality and Global Engagement was modified to Vice-Chancellor for Institutional Effectiveness (VCQIE) in 2022. The role description now includes responsibility for policy development and implementation.

8 The responsibilities of several support units have been adjusted since the 2021 IQR review. The Centre for Leadership and Innovation in Health Professions Education has been merged into the Health Professionals Education Department of the College of Medicine. The responsibility of the BA Center for Online Health Professions Education and Training now extends across all programmes and training sessions. The supportive and guiding roles of the Quality Assurance and Institutional Effectiveness Unit have grown as the Unit and its functions have become more firmly embedded in core practice of the Colleges.

9 Following evaluation of the level of achievement of the 2017-22 Strategic Plan, a new Strategic Plan (2023-27) was developed. Academic quality has a central place in the new plan, forming the first strategic objective and underpinning several of the others. The document includes a description of the extensive consultation with stakeholders, benchmarking and environment scanning processes that led to the plan's creation. The Strategic Plan includes defined objectives, each with key performance indicators.

10 Other changes to the policy and practice of quality assurance are described in the section 'Development of quality assurance and enhancement procedures'.

Findings from the mid-cycle review analysis

Good practice

11 The 2021 QAA review team identified three examples of good practice. These concerned the use of external examiners, student feedback, and the Quality Assurance and Institutional Effectiveness Portal.

12 The effective use made of **external examiners** was identified, together with externality more broadly, in assuring assessment standards and external benchmarking (ESG Standard 1.3 and 1.9). The University has stated its intention to continue to pursue national and international accreditation and certification of its programmes as a means of ensuring external scrutiny of its programmes.

13 The University has continued to provide **multiple opportunities for students to provide feedback** and will expand the range of opportunities available (ESG Standard 1.7).

14 The University continues to seek feedback from its deans, programme directors and all faculty on quality-related issues, through the **Quality Assurance and Institutional Effectiveness Portal**, which provides staff at all levels with easy access to data and information critical to monitoring many aspects that impact on student progression, achievement and evaluation of programme effectiveness (ESG Standard 1.7, 1.9, 1.10).

Recommendations

15 The QAA review team made four recommendations to the University as a result of the 2021 IQR. They were all classified as desirable, rather than essential.

16 The review team recommended that the University **introduces training and development for student representatives engaging with quality assurance processes** (ESG Standard 1.2). In response to this recommendation, training programmes have been developed for student representatives, student council members and others, such as those involved in peer tutoring schemes. While some of this training is delivered at university level, the Colleges have each established Student Happiness Centres to deliver tailored training programmes to students. The report produced by GMU for this mid-cycle review (the Report) provided examples of the training offered by each College, supported by evidence in the

form of pages from the university website. Undergraduate and postgraduate student representatives confirmed that the Colleges and/or the Students' Union provided training.

17 Noting that the predominant method for collecting student feedback is by formal survey using questionnaires, the review team recommended that the University **should employ a broader range of methods in the acquisition of student feedback** (ESG Standard 1.7). In the Report, the University points out that student feedback is also gathered from students who serve on committees and task forces. The procedure for appointing student members of university committees is described in the document *Terms of Reference of Standing Committees*. Examples of student contributions to committee decisions were provided in the form of committee minutes.

18 The University has started to request feedback at the end of each semester from student committee members on their experiences of serving on such committees. Focus groups have been used to gain feedback on the curriculum, courses, university services and other areas. Examples of focus groups for various Colleges were provided.

19 A student voice QR code has recently been introduced to all classrooms. It links to a webpage that enables students to report suggestions or complaints. All complaints must be resolved within 10 days. Academic advisers, mentors and members of the College Student Happiness Centres are expected to remind students about the opportunities for submitting suggestions and grievances using the webpage forms. Students reported that each of these mechanisms for providing feedback were effective. They were able to provide examples of changes that had been triggered by their feedback, including removal of a membership fee for the gym and sports facilities, and expansion of the number of parking spaces.

20 It was recommended that the University **clarifies the support available to diverse students and people of determination and ensure that this information is easily accessible** (ESG Standard 1.8). In response, the University has assigned a coordinator in each college to oversee the services offered to diverse students and people of determination. These coordinators are identified, and their contact details are provided on the university website. The orientation programme for first-year students includes information about services offered to diverse students and people of determination. Slides for the orientation programmes for each of the Colleges were provided as evidence. Information for diverse students and people of determination has been added to the student handbook.

21 The job description of admission officers has been updated to specifically include their role with regard to people of determination, and a form has been made available to applicants to enable them to disclose if they have any form of disability. A list of students that have disclosed a disability is made available to each Student Happiness Centre coordinator through the University Quality Assurance and Institutional Effectiveness Unit to ensure that each student is provided with the support they need.

22 Student Happiness Centre staff were able to confirm their key role in providing support to students of determination. Students were aware of the support available and were able to provide example of adjustments to the physical environment, such as specialised parking, special bathroom facilities and the installation of ramps.

23 Finally, the 2021 review team recommended **the development of a strategic approach to benchmarking that defines what is to be benchmarked, level of attainment and the use to be made of external input, with particular reference to international partnerships** (ESG Standard 1.9 and 1.10). The Report provides several examples of external accreditation exercises and reviews that provide data for benchmarking the University. These include international accreditations and recognition, CAA accreditation, benchmarking against networked institutions, and external review by the Kuwait Ministry of Education. Supporting evidence is provided in each case. External examiners also provide

comparator information. The CAA has commissioned the University to lead on a benchmarking project for the Middle East and North Africa (MENA) region to identify a common set of performance indicators that will be trialled in a small group of local universities, before being launched internationally.

Development of quality assurance and enhancement procedures

24 There have been extensive developments in the policies and practice of quality assurance, including the continued development of online tools and portals described above.

25 The roles of Programme Evaluation & Accreditation Manager and Programme Evaluation & Accreditation Coordinator have been introduced to the Quality Assurance and Institutional Effectiveness Unit and the Associate Director position has been removed. According to the Quality Assurance and Institutional Effectiveness Manual, the Programme Evaluation & Accreditation Manager is responsible for conducting regular internal audits, developing analytical tools for continuous improvement, and ensuring compliance with external accreditation requirements. The Programme Evaluation and Accreditation Coordinator supports the Manager in this activity, including liaising with faculty and staff in the units under review.

26 The Quality Manual has been reviewed continuously since the 2021 IQR. The changes have been driven by feedback from academic staff, the Quality Assurance and Institutional Effectiveness Unit and external review reports.

27 The University continues to seek international accreditation of its programmes. The Report lists recently accredited or reaccredited programmes.

28 Student enrolment is steadily increasing (2,090 in 2020-21 to 2,479 in 2023-24), and student retention is also improving (94.9% in 2020-21 to 98.8% in 2022-23). Staff retention has remained above 85% for the last three academic years.

29 The University has continued to develop the functionality of its online systems. An electronic platform for colleges and administrative departments supports them in the creation of their operational plans, and a monitoring system tracks progress toward meeting the targets of the strategic plan. The platform pulls together all the strategic objectives and key performance indicators (KPIs) into one place where they can easily be accessed.

30 Another development is the introduction of a searchable database of committee, board and university minutes. Minutes are accessible by all staff and can be searched by key words, dates and committee name. Minutes may be downloaded in PDF format. Staff met by the review team were very positive about this development which had improved the dissemination of information from committees to all.

31 Of particular note is a new online portal for the creation of new policies or reviewing existing policies. The process is triggered by any college or unit that identifies the need for the introduction or revision of a policy. The request is submitted electronically and then all stages of the revision and approval are checked and logged before the new or revised policy can be released. Full records of all revisions are recorded for future reference. Through discussion with staff, the review team formed the opinion that the new portal and associated processes contributed significantly to assuring the currency and security of policies and their implementation. While the details of dissemination of revised policies is yet to be fully developed, the review team felt the overall development of the portal to be an example of good practice within GMU and worthy of wider dissemination beyond the University.

32 An e-Portfolio tool has been developed for students to assist them in the compilation of information, and to encourage them to take ownership of their development and to promote self-reflection and goal setting. Students may upload their experiences, achievements and certificates. Mentors are able to access the e-portfolios and to provide personalised feedback and guidance. They also receive information about their students through a self-assessment form that is filled out by students to report any personal, social, or health-related challenges or issues. There is a mentor dashboard that flags up instances of low grade, low attendance or unprofessional attitude to the student mentors. Mentors meet with their students at least once a semester. The initiative was recognised by a Times Higher Education MENA Awards 2023 for Outstanding Student Support.

33 The Quality Assurance and Institutional Enhancement Portal, identified as good practice in the 2021 IQR, has been further developed. It replaces traditional paper-based processes to streamline and digitise all quality-based workflows. It provides easy access to policies, procedures, survey reports and institutional data, and has applications for feedback submission, evaluations, meeting minutes and others. Senior, academic and professional support service staff all reported that the online tools were effective and helped them to carry out their roles.

34 Key performance indicators concerning faculty members are presented through interactive dashboards based on data calculated from: the most recent Centre for Higher Education Data and Statistics; the Caspio faculty database; the submission, teaching assignment application; student grades recorded in the Folio Student Management System; and other sources. Additionally, a set of 36 KPIs are made available to all faculty and staff each year by the Quality Assurance and Institutional Effectiveness Unit.

35 Other applications for faculty and staff members within the Quality Assurance and Institutional Effectiveness Portal include course files, a curriculum vitae creation and maintenance tool, recording of professional development sessions, a staff publications database, a workload application, and other human resource tools. Online forms allow staff to submit appeals, complaints or suggestions, and links are provided to all survey reports including course and faculty evaluation by students.

36 The University has continued to engage with benchmarking exercises, including the Mena Benchmark, the Times Higher Education Impact Ranking, and the Times Higher Education Arab Ranking. The University is a member of The Network: Towards Unity for Health and is evaluated by way of indicators that assess social accountability.

37 Several memoranda of understanding with other institutions have been signed since the 2021 IQR. These cover clinical training, joint thesis supervision, a joint Associate Degree in Pre-Clinical Studies/Doctor of Medicine programme, and general cooperation in medical education.

Findings from the observations of facilities and learning resources

38 The review visit provided an opportunity to view the physical facilities available at the University, including the classrooms, laboratories, the library, and the clinical training resources in the hospital, rehabilitation clinic, and dental unit. The main campus constitutes the university main building, including laboratories, classrooms, offices, colleges/departments, library and learning centre, Thumbay Diagnostic Centre, Centre for Advanced Simulation in Healthcare (CASH), Innovation and Research Centre, coffee shop, restaurant, health club, indoor and outdoor sports complexes, Health Communication Department, ATM, conference rooms and resource centres. In all cases, the facilities were

purpose-built, well maintained, and extensively stocked with state-of-the-art equipment and instrumentation.

39 The buildings were equipped with appropriate health and safety equipment and access to all levels was available via ramps or elevators.

40 The on-campus clinical facilities incorporated teaching accommodation so that lectures, seminars and tutorials may be delivered within the clinical setting. Staff and students confirmed that clinical placements were also available at other off-campus locations.

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