Technical Brief

Assessing Implementation of National Quality Assurance Scheme in Different Medical Colleges in Bangladesh
January – October 2017
Centre for Medical Education (CME), WHO Collaborating Centre for Medical Education
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Introduction
The commitment towards Universal Health Coverage (UHC) urges for quality and equitable healthcare for all. Knowing the fact that ‘no health without health workforce’, there is a need to ensure quality health workforce in all places. To produce quality health workforce, quality education is a must. Quality education creates provisions for development of relevant competencies including knowledge and skills in a particular field. Appreciating the necessity of quality medical education, a National Quality Assurance Scheme (NQAS) was established in 1998 in Bangladesh. National guidelines and tools for quality assurance were revised and published in 2012 with support from the World Health Organization (WHO). Subsequently, the Government (GO) urged all medical colleges in Bangladesh to practice NQAS in their respective institutions. This brief provides an overview of the NQAS and an overview of the first assessment results of its implementation in medical colleges in Bangladesh conducted in 2017.

General objective
To assess the present implementation status of the National Quality Assurance Scheme at different medical colleges in Bangladesh.

Overview of the NQAS
The NQAS aims to ensure academic standards and improve teaching-learning quality including students’ achievements in a respective academic setting. Its composition includes two frameworks, namely organizational framework and operational framework. Organizational framework is comprised of national and institutional frameworks. In the national framework, a National Quality Assurance Body (NQAB) is constituted by: Director-General, Directorate General of Health Services (DGHS) (Chair) and Director, CME (Member Secretary) and CME is designated as the Secretariat. Other members are – Joint Secretary, Ministry of Health & Family Welfare (MOHFW); President, Bangladesh Medical and Dental Council (BMDC); Director, Medical Education, DGHS; Deans, Faculty of Medicine of different universities. The NQAB is given the responsibility of overseeing the overall activities of NQAS. The operational and institutional frameworks are described below:

Institutional framework
The institutional framework of NQAS includes an Institutional Quality Assurance Body (IQAB) headed by the Principal of the respective medical college. The members are - Academic Council, Academic Coordination Committee, Four Phase Coordination Groups, External Examiners, Exchange review visit of academic coordinators and External review by the CME and Directorate of Medical Education.

Operational framework
This framework includes a set of procedures by which, Bachelor of Medicine & Bachelor of Surgery (MBBS) education is assessed. This includes three areas: 1) Course appraisal, 2) Faculty development and review 3) External review. There are standard forms for reporting on each area, which are available in the guideline book.

Specific objectives
1. To collect annual reports related to NQAS from the medical colleges in Bangladesh;
2. To explore the factors which are considered as constraints for implementation of NQAS, if any;
3. To find out the ways and means for effective implementation of NQAS.
Rationale
About 105 medical colleges and 35 dental colleges and units are providing medical education at graduate level in the country. But quality of the education is under debate and concerns have already been made as appears frequently in the daily print and online media¹, policy documents² and peer review journals³. To address this issue to a certain extent, government has developed the scheme to promote quality in medical education.

Key Results
Figure 1: Number of medical colleges submitted NQAS report, N= 104

<table>
<thead>
<tr>
<th>Type</th>
<th>Number of Reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public</td>
<td>36</td>
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<tr>
<td>Private</td>
<td>68</td>
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<tr>
<td>Total</td>
<td>104</td>
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<table>
<thead>
<tr>
<th>Type</th>
<th>Number of Colleges</th>
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</thead>
<tbody>
<tr>
<td>Medical</td>
<td>18</td>
</tr>
<tr>
<td>College</td>
<td>55</td>
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Methods
A technical working group was established. Necessary data collection tools and a checklist were finalized and circulated followed by divisional level field visits. CME issued notification to all medical colleges (104) requesting submission of NQAS reports. Communications were made and reports were collected. Simple frequency analysis was made and final results were consulted with the NQAB and relevant stakeholders.

Course appraisal is done by all colleges based on professional examinations results only. But phase wise course appraisal is not in practice through “Students Evaluation Questionnaire” according to NQAS guidelines.

Faculty development programme exists in 42 medical colleges out of 55 (government college 11/18, non-government college 31/37) but not in line with QAS guidelines through the “Personal Review Form” as suggested.

Peer review or exchange review was done by only 22 medical colleges out of 55 by the academic coordinators between pair medical colleges (Govt.5 out of 18, Non-govt.17 out of 37).

Few qualitative results (from consultation workshop)
- Provision of students counseling are available in few medical colleges.
- Eligibility prerequisites for professional exams are not strictly maintained in many medical colleges.
- Use of note books as source of information instead of standard text books revealed by the key informants.
- Spending more time in non-academic issues at the expanse of academic pursuits.
- Evening clinical teaching not given due importance in many medical colleges.

Major constraints
- Lack of commitment of the management body for implementation of NQAS at institutional level.
- Medical colleges are not well aware of and trained on the tools and guidelines of NQAS.
- Lack of regular monitoring and evaluation of NQAS activities and publication of reports.
- Irregular NQAB meeting to discuss progress on NQAS implementation.

Conclusion and recommendations

- Urgent need of strong commitment from the key stakeholders such as MOHFW, DGHS, BMDC, CME, development partners and civil society organizations to put due emphasis on proper implementation of the NQAS.
- Capacity strengthening of the NQAS Secretariat is needed for regular collection of data and provide feedback to different medical colleges and related stakeholders for their attention and necessary actions.
- There is a need to disburse hands-on training to the faculty members of different medical colleges on QAS on gradual basis.
- Conduct faculty development programme through Medical Education Unit (MEU) as per national tools & guidelines of QAS.

Policy references for quality assurance

- “Criteria and Standard of Bangladesh Medical and Dental Council for Recognizing Medical Colleges, 2009”, published by BMDC and WHO.
- “Criteria and Standard of Bangladesh Medical and Dental Council for Recognizing Dental Colleges, 2009”, published by BMDC and WHO.
- Resolution WHA 66.23. “Transforming Health Workforce Education in support of Universal Health Coverage”.
- Resolution WHA 64.6 on “Health workforce strengthening”.
- Resolution WHA 69.16 on “Global Strategy on Human Resources for Health: Workforce 2030”

Medical Colleges submitted NQAS report

Government (Total 18; alphabetically): Armed Forces Medical College, Chittagong Medical College, Comilla Medical College, Dhaka Medical College, Faridpur Medical College, Kushtia Medical College, Dinajpur M Abdur Rahim Medical College, Mymensingh Medical College, Pabna Medical College, Rangamati Medical College, Rangpur Medical College, Satkhira Medical College, Shaheed M. Monsur Ali Medical College, Shaheed Sukhawardy Medical College, Shaheed Ziaur Rahman Medical College, Shaheed Tajuddin Ahmad Medical College, Sir Salimullah Medical College, and Sylhet MAG Osmani Medical College.

Non-Government (Total 37; alphabetically): Anwer Khan Modern Medical College, Army Medical College Comilla, Army Medical College Rangpur, Army Medical College Chittagong, Army Medical College Jessore, Barind Medical College, BGC Trust Medical College, Brahmanbaria Medical College, Community Based Medical College, Central Medical College, Chattagram International Medical College, Chattagram Maa-O-Shishu hospital Medical College, Delta Medical College, Dhaka Community Medical College, Dhaka Central International Medical College, Diabetic Association Medical College Faridpur, Eastern Medical College, Green Life Medical College, Holy Family Red Crescent Medical College, IBN Sina Medical College, Ibrahim Medical College, International Medical College, Jahurul Islam Medical College, Jalabad Ragib-Rabeeya Medical College, Khwaja Yunus Ali Medical College, Khulna City Medical College, Kumudini Women’s Medical College, Marks Medical College, Medical College for Women and Hospital, North East Medical College, North Bengal Medical College, Parkview Medical College, Prime Medical College, Rangpur Community Medical College, Shaheed Monsur Ali Medical College, TMSS Medical College, and Universal Medical College.

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