

## Quality assurance, accreditation, and glocalisation of pharmacy programmes

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## **Abstract**

Pharmacy programmes assessment is one of the most essential elements of quality assurance and a means of producing competent graduates. This short communication emphasises the need for the quality and monitoring of franchised pharmacy degree programmes. The authors recommend adopting measures that ensure the maximum coordination of the many franchised pharmacy programmes. Such measures would not only be beneficial to maintaining the integrity of the institute, but also result in competitive and competent pharmacy professionals that will serve the needs of society.

Keywords: Pharmacy, Programme Assessment, Franchise, Quality, Glocalisation

In today's pharmacy education, programme assessment is one of the essential elements of assuring quality education and producing competent graduates. The expanding role of pharmacists and the greater emphasis on pharmacy education have served to invigorate a drive to improve curricular content and training in pharmacy, and measures to ensure high quality outcomes in professional pharmacy degree programmes (Khan, 2010; 2012). A change and implementation of a new curriculum to a more clinical pharmacy practice orientation have improved the knowledge and skills of undergraduate students in terms of practice in a healthcare environment (Abbas, 2014). Thus, there is a call for a continuous review and needs assessment of pharmacy curricula for enhanced training and quality professional pharmacy degree programmes.

Developments in pharmacy practice have not only led to a drive to enhance curricula but also to evaluate and assess the programmes' learning outcomes. For example, in developed countries like the United States (US) and Canada, the Accreditation Council for Pharmacy Education (ACPE) and the Canadian Council for Accreditation of Pharmacy Programme (CCAPP), respectively, are the main bodies responsible for academic pharmacy programmes' evaluation and accreditation. These organisations are committed to harmonising the pharmacy curricula for unified programme learning outcomes through a structured curriculum and achieving designated competency standards.

In Malaysia, the accreditation of pharmacy degree programmes is based on guidelines issued by the Pharmacy Board Malaysia and the Malaysian Qualifications Agency. The Guidelines on Approval and

Recognition of a Pharmacy Programme sets out best practices in nine areas relating to the structure and process of higher education (Malaysian Qualifications Agency, 2013). Each area has precepts or principles that institutions should demonstrate, together with guidelines on how these precepts could be met. The criteria and standards are applicable at the university, school or department levels and should be used appropriately in the different contexts. One of the most important areas is curriculum design and teaching-learning methods. Typically, the reviewers from the Pharmacy Board Malaysia and the Malaysia Quality Agency scrutinise the teaching method, pharmacy curriculum content, ethics and humanities component of the curriculum, management/delivery of the programme as well as the links between the schools of pharmacy and external stakeholders (Pharmacy Board Malaysia, 2007; Malaysian Qualifications Agency, 2013).

The advancement and prowess of clinical pharmacy practitioners in countries where pharmacy practice has been well established have been a source of inspiration for future pharmacy graduates (Long et al., 2013). However, economic downturn and the absence of public or private funding have limited the opportunities for studying pharmacy overseas. To overcome these barriers, local and international universities have adopted the strategy of 'Glocalisation'. Glocalisation, as defined by the Oxford dictionary, is the practice of conducting business according to both local and global considerations (Oxford, 2017). Under the influence of glocalisation, local and international universities in Malaysia have therefore adopted three approaches for providing pharmacy education:

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- 1. Branch campus outside the home country: Some internationally-recognised universities have opened outreach campuses in overseas countries teaching the same curriculum as in their home campuses. Examples are the University of Nottingham (United Kingdom [UK]), Monash University (Australia), and the University of Reading (UK), all of which have overseas campuses in Malaysia that offer programmes in pharmacy.
- 2. Credit transfer arrangement (twinning programme):
  Some universities have adopted credit transfer programmes. An example is the International Medical University (IMU) that allows students to study in Malaysia for two years and later spend the rest of the programmes in the University of Tasmania in Australia (Pharmaceutical Services Division).
- 3. Franchised programme: Universities that receive support and licensing to offer pharmacy programmes that are offered at other universities. Under these franchised programme arrangements, the franchiser university allows the faculty in the franchisee university to gain access to their syllabus, examination and teaching materials.

In recent years, some of these approaches have ceased to exist as they have been suspended by the Pharmacy Board of Malaysia, largely due to issues related to compliance to regulatory provisions. Thus, most of the universities that offered twinning pharmacy programmes (students completing two years of pharmacy programme at home-based university and finishing the remaining years in the other university abroad) have now been discontinued.

Examples of such universities that offered this approach include:

- Malaysian Allied Health Sciences Academy (MAHSA) University (twinning with School of Pharmacy and Biomolecular Sciences, Liverpool John Moore University)
- ii. SEGI University (twinning with Faculty of Applied Sciences, Sunderland University)
- iii. International Medical University (twinning with Strathclyde Institute of Pharmacy & Biomedical Sciences)
- Taylor's University (twinning with Welsh School of Pharmacy, Cardiff University).

Some of the franchised pharmacy programmes are also no longer operational. From 2010 to 2015, six franchised pharmacy programmes were suspended or discontinued as instructed by the Pharmacy Board of Malaysia (Soh *et al.*, 2017). Some of the franchised programmes that were stopped include Island College of Technology, UCSI University, INTI University, and Asia Metropolitan University. In one of the cases, the main reason for the suspension was inadequate compliance with the internal standards of the franchiser and accreditation frameworks. Later, the students registered were shifted to the

franchiser university in order to continue their pending degree credits. Another reason for discontinuation of programmes were high franchisee fee charges. It is more economical to offer a home-grown programme where the syllabus is largely adopted from the previous franchisee.

## Conclusion

This short communication emphasises the need for assuring the quality and monitoring of franchised pharmacy programmes. The Malaysian case study stresses the need for quality assurance in other countries where franchised programmes are presented. The authors recommend adopting measures that ensure the maximum coordination of the many franchised pharmacy programmes in countries where similar types of programme are implemented. Such measures would not only be beneficial to maintain the integrity of the academic programmes, but would also result in competitive future pharmacy professionals that will serve the needs of a nation.

## References

Abbas, A. (2014). Evidence based improvements in clinical pharmacy clerkship program in undergraduate pharmacy education: The evidence based improvement (EBI) initiative. *Pharmacy*, **2**, 270-75.

Khan, T.M. (2010). Critical considerations in pharmacy curriculum development in South Asian and Southeast Asian developing nations. *American Journal of Pharmaceutical Education*, **74**(9), 176.

Khan, T.M. (2013). Deficiencies in clinical pharmacy curricula in developing Asian nations. *European Journal of Hospital Pharmacy*, **20**, 64–66

Long, C.M., Hadi, M.A., Kassab, Y.W., Yap, Y.L. & Lee, W.L. (2013). Does MSc in clinical pharmacy promote a clinical pharmacy career? A qualitative study. The 13th Asian Conference on Clinical Pharmacy, September 13th - 15th, 2013 Haiphong city, Vietnam; *Asian Conference on Clinical Pharmacy*, 2013.

Malaysian Qualification Agency. (2013). Rating for accreditation of undergraduate pharmacy programme in Malaysia (revised version).

Oxford. (2017). Definition of glocalisation. Available at: <a href="https://en.oxforddictionaries.com/definition/glocalisation">https://en.oxforddictionaries.com/definition/glocalisation</a> Accessed 10th January, 2018.

Pharmaceutical Services Divisions (Ministry of Health Malaysia). List of Recognized Pharmacy Degree by Pharmacy Board Malaysia. Available from http://www.pharmacy.gov.my/v2/en/content/list-recognized-pharmacy-degree-pharmacy-board-malaysia.html. Accessed 10th January, 2017

Pharmacy Board Malaysia. (2017). Guidelines on approval and recognition of a pharmacy programme.

Soh, Y.C., Siang, F.Y., Cin, Y.L., Jatau, A.I., Long, C.M., & Tahir, M.K. (2017). Students' views about a pharmacy franchise programmes in Malaysia: A qualitative study. *Pharmacy Education*, **17**(1), 73-80.