

DIRE DAWA UNIVERSITY ድሬዳዋ ዩኒቨርሲቲ



#### REPORT

### DDU Anesthesia Program Mock Evaluation for Accreditation <u>Submitted to</u>:

Academic Vice President

> CMHS-CED

#### > Anesthesia Education and Services

Date: <u>-January 2025 G.C.</u> Place and Mode: <u>Direct Site Visit and Review at DDU, Ethiopia</u> Organized by: <u>DDU</u>

Name

Signature

1.	Dr Megersa Kasim (AVP, Organizer)
2.	Dr Hussen Mohammed (CED, Organizer)
3.	Dr Daniel Mamo (DDU Quality, Director)
4.	Dr Girma Beka (AVP Office Head, Organizer)
5.	Amelmasin Faris (Program Focal person, HECDD)
6.	Assistant Prof Alekaw Sema (Committee member, CMHS MSEQIICD)
7.	Aragaw Hamza (Committee member, Secretary)
8.	Abdi Mohammed (Committee member, Dept-Head)
9.	Amana Deko (Committee member)
10.	Ayantu Ibrahim (Committee member)
11.	Ayantu Abebe (Student representative, committee member)
12.	Nesru Cheko (Student representative, Committee member)
13.	G/egeber Hadgu (Skill Lab, Committee member)
14.	Hailemariam Mamo (PhD) (CMHS Quality Director)
	Dagne Adugna (Anesthesia Staffs)
16.	Sherif Abdi (Committee Anesthesia Staffs)
17.	Yomilan Geneti (Skill Lab Coordinator)
	Mahder Minwagaw (Anesthesia Staffs)
	Netsanet Melkamu (NMESD, Committee)
20.	Gudisa Weyessa(Midwifery DeptHead)





## DDU Anesthesia Program Mock Evaluation for Accreditation

# 1. Summary

The Dire Dawa University (DDU) Anesthesia Program underwent a comprehensive mock evaluation from January 14-16, 2025, in preparation for accreditation. The evaluation was conducted by experts from the Ethiopian Education and Training Authority (ETA), Ministry of Health (MoH), and the Ethiopian Anesthetists Association (EAA). The purpose of the evaluation was to assess the program's strengths, identify gaps, and provide actionable feedback to enhance the accreditation readiness of the program. The evaluation included document reviews, site visits, and discussions with key stakeholders from the university and Dilchora Hospital, including the President, Vice Presidents, Chief Executive Director, Quality and Enhancement Directors, Directors, Students, Accreditation committees, Heads, clinicians and faculty members.

#### **Participants:**

- Ethiopian Education and Training Authority (ETA)
- Ministry of Health (MoH)
- Ethiopian Anesthetists Association (EAA)
- University President, Vice Presidents, Quality and Enhancement Directors, Accreditation Committee's, Director's, Heads, Students, Program Coordinators, Faculty Members and Hospitals staffs.

# 2. Key Feedback Summary:

## Strengths Identified

- Strong university leadership and institutional support.
- High-level faculty commitment and dedication.
- Well-documented self-evaluation reports aligned with ETA guidelines.
- Availability of key resources and Digitalization of program information, accessible through the university website.

#### **Areas Needing Improvement**





Improvement in support services such as HR, particularly in Skill Lab renovation, Finance, and Student Handbook. Efforts should focus on staff development and motivation, effective utilization of feedback mechanisms, document triangulation with the inclusion of identified gaps, and strengthening functionality through monitoring and evaluation via proper documentation.

## Next Steps & Recommendations

Develop action plans based on feedback: Implement action plans to address feedback gaps.

# 3. Tentative Schedule

The Tentative Schedule for DDU-Anesthesia program Mock assessment by ETA, MoH & EAA; for accreditation. January 14-16,2025.						
Date	Activity	Organizers/facilitator/presenter	Key Points			
Day 1	Opening Remark made	CED & AVP	Welcome speech and introduction			
	Objective Briefing done	Mr. Siraj Ahmed (EAA President) and Amare H/Kiros	Overview of the mock assessment			
	Site Visit were to Department Offices, Classrooms, Skill Lab, clinical training sites, HR, Finance,etc.	By Team of Assessors (ETA, MoH, EAA lead by Abdulrahman Tune (EAA)				
	Presentation by DDU	By Amelmasin Faris (Program Focal person)	Program overview, strengths, and challenges			
	Discussion & Feedback	By Team of Assessors & Accreditation Committee	Initial observations and feedback			
Day 2	Site Visit to Library, Student Service, ICT, Hospitals, Registrar, etc.	By Team of Assessors	Curriculum, faculty, and student support			
	Discussion & Feedback	By Team of Assessors at presence of accreditation committee, Faculty, Heads, Directors, etc.	Program management and quality improvement measures			
	Discussion & Feedback	By Team of Assessors at presence of accreditation committee, Faculty, Heads, DDU-quality Directors, etc.	Co-curricular activities and resource management			
Day 3	Summary of Assessment presented	By Team of Assessors at presence of Dr Hussen M. (CED), Dr Daniel (DDU quality Director), accreditation committee,	Findings, skills lab observations, action plans			





to Department, DDU Quality and CMHS	Dr Girma (AVP Office Head), Heads, Directors	
Overall Summary of Assessment presented to DDU	Dr. Ubah Adem (DDU President), Dr. Megersa Kasim (AVP), Dr. Hussen Mohammed (CMHS-CED), etc.	Appreciation and commitment to improvements
Closing Remarks	Dr. Ubah Adem (DDU President)	Appreciation and promise for improvements

# 4. DDU-COMPREHENSIVE ACTION PLAN BASED ON MOCK FEEDBACK FOR ACCREDITATION (ETA, MOH, AND EAA):

#### **Comprehensive Action Plan Based on Mock Feedback for Accreditation (ETA, MoH, and EAA)** January 19, 2025

	<b>EAA)</b> January 19, 2025							
Standard No.	Feedback Area	Identified Issues	Action Steps	Responsible body	Progress	Timeline		
1. Prog	gram Outco	mes						
1.1		Missing Program establishment Letters/ Senate Minute needs to be included	Retrieve Senate minute/ DDU management program establishment /approval letter	Accreditation committee (Dr Daniel, & Dr H/Mariam, Amelmasin, Dr Girma	Ongoing	January 20-26, 2025		
1.2		Detail elaboration on program outcomes	Review, refine, and elaborate program outcomes ensuring detailed monitoring and evaluation measures are in place	Accreditation- committee (Dr H/Mariam, Amelmasin, Aragaw		January 20- February 15, 2025		
1.3		Tracer study, monitoring dashboard and evaluation	Implement a monitoring dashboard and reports	Accreditation- committee (Dr H/Mariam, Amelmasin Quality		January 20- February 15, 2025		
1.4		Program establishments request/approval at CMHS-council minutes	Retrieve minute/ letters' of program establishment	Alekaw Sema, and Dr H/mariam, CED		January 20- February 15, 2025		
2. Cur	riculum							
2.1		Missing Senate and council approval	Retrieve and document Senate and committee approval	Accreditation committee (Dr Daniel, Dr JibrielDr Hussen, Amelmasin	Ongoing	January 20- February 15, 2025		
2.2		Curriculum review at college level and minutes	College level review, and related minutes/documents	Alekaw Sema, and Dr H/mariam, CED		January 20- February 15, 2025		
2.3		incomplete curriculum approvals	Ensure formal curriculum approvals are documented	Accreditation committee (Dr Daniel, Dr JibrielDr	Ongoing	January 20- February 15, 2025		





			Hussen, Amelmasin		
2.4	Incomplete documentation processes/reports/evidence	Compile detailed self-evaluation reports with evidence /involvement	Accreditation- committee (Amelmasin, Dr H/Mariam,		January 20- February 15, 2025
2.5	Indigenous knowledge not verified	Initiate verification process for indigenous knowledge integration	Accreditation committee, Curriculum committee (Aragaw		January 20- February 15, 2025
2.6	CBC monitoring and evaluation	Establish CBC monitoring dashboard and evaluation	Accreditation committee, Quality Assurance		January 20- February 15, 2025
3. Learning and	Teaching	1	1		
3.1	Skills lab setup organization is poor	standardize the skills lab setup/renovation with aluminum	AVP, Admin, Dr. Legesse (Skills Lab Director), Yomilan, Amana		January 20- February 15, 2025
3.2	Lack of teaching aids /Equip the lab with- tools (dols, gloves, charts/videos)	Finalize the ongoing purchase, and provide anatomy charts and videos	AVP, Admin, Dr. Legesse (Skills Lab Director), Yomilan, Amana	ongoing	January 20- February 15, 2025
4. Stud	ents				
4.1	Lack of Student Handbooks	Develop Student Handbooks	Accreditation committee (Dr Daniel, Dr H/Mariam, Amelmasin, Quality,	Ongoing	January 20- February 15, 2025
4.2	Lack of career guidance	Introducing structured career counseling services and guideline	Career office and DDU-Quality Director		January 20- February 15, 2025
5. Academic St	taff				







5.1	Staff development gap	Establish	AVP, DDU-	January
	and no PhD yet	partnership with	Quality Director,	20-
		internation	CED	February 15, 2025
		University and		15, 2025
		implement staff		
		development (PhD		
		program		
5.2	Unclear staff promotion	Establish formal	AVP, DDU-	January
	and retention mechanisms	promotion and	Quality Director,	20-
		retention	CED, HR	February
		guidelines		15, 2025
5.3	Staff-to-student ratio (1:6)	Recruit additional	AVP, DDU-	January
	not maintained	staff to meet the	Quality Director,	20-
		required ratio	CED, HR	February
		T 1 CC		15, 2025
5.4	Lack of staff motivation	Implement staff	AVP, DDU-	January 20-
		promotion	Quality Director,	February
		/motivation	CED, HR &	15, 2025
			Finance	15, 2025
6. Educationa	II Resources			
6.1	Old books in the library	Update Books in	Library & IT	January
	and Low quantity	the libraries,	Directors with	20-
		Reorganize	accreditation	February
		resources	committee	15, 2025
6.2	Skills lab not fully	Purchase missing	AVP, Admin,	January
	equipped	equipment and	DDU-Quality	20-
		organize the lab	Director, Skills	February
			Lab Coordinator	15, 2025
6.3	Inadequate e-learning	Increase e-course	IT, Aragaw,	January
	resources	materials with	Rahel,	20-
		students utilizing		February
7		_		15, 2025
7. Resear	rch and Community Engagement			
7.1	<ul> <li>Industry linkage left</li> </ul>	Develop industry	CED, DDU-	January
	missing	partnerships and	Quality Director,	20-
		MoUs with	Research &	February
		Regional health	Community	15, 2025
		centers	Office	
7.2	Lack collaborations/	Established	AVP, Admin,	January
	external partnership, MoU	partnership with	DDU-Quality	20-
		international	Director,	February
		university		15, 2025
7.3	Lack preceptor selection	Conduct preceptor	AVP, CED,	January
	evidence and Training	Training for	Quality	20-
				February
				15, 2025



DIRE DAWA UNIVERSITY ድሬዳዋ ዩኒቨርሲቲ



			preceptors with	DirectorAlekaw	
			reports	Sema.	
	ogram Managemen		1	· · · · · · · · · · · · · · · · · · ·	
8.1		Missed documentation on HR & Finance related policy, guidelines & report	Organize and complete HR & Finance related policy, guidelines'& report documentation	AVP, Admin, CED, Dr Daniel, Finance Director (Alemu), HR Officer, Dr H/Mariam,	January 20- February 15, 2025
8.2		Missed Quality reviews & Documentation both internal and external	Streamline internal and external quality processes	Quality Director, Quality Assurance	January 20- February 15, 2025
	ntinuous Quality In				-
9.1	Continuous Quality Improvement	Self-assessment is not supported by QI intervention	Implement Quality Improvement interventions	Quality Director, Accreditation committee, QI Committee	January 20- February 15, 2025
9.2		No benchmarking practices	Benchmarking – with best practice	Quality Director, Accreditation committee, QI	January 20- February 15, 2025
9.3		Gap analysis is missing	gap analysis with documented minutes and align findings with continuous quality improvement plans	Quality Director, Accreditation committee, QI Committee	January 20- February 15, 2025
	Continuous qu	ality improvement		I I	I
	Input → proce Rubrics: 1. Policy 2. Plan, st 3. Implem 4. Monitor 5. Culture	rategy ent r & evaluation			

Annex

Sample of photos as Evidence for the Mock Evaluation for

Accreditation at DDU





































DIRE DAWA UNIVERSITY ድሬዳዋ ዩኒቨርሲቲ



































Prepared by: Amelmasin Faris & Aragaw Hamza