FINAL REPORT
of the project:

ALO LEADERSHIP DEVELOPMENT
AT THE UNIVERSITY OF THE WESTERN CAPE
Cape Town, South Africa

Project Dates: May 12, 2004 to March 31, 2006

Project Supported Through a Grant From
USAID
United States Agency for International Development
Higher Education Development (HED)
Report Submitted April 31, 2006

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Project Information

The Association Liaison Office for University Cooperation in Development
Promoting Higher Education Partnership for Global Development
Institutional Partnerships Program
Final Report
April 2006

Partnership Title:
ALO Leadership Development at the University of the Western Cape

Development Field/ Sector:
Higher Education Leadership and Administrative Transformation

Lead U.S. Institution: University of Missouri (UM)

Host Country: South Africa

Lead Host Country Partner Institution:
University of the Western Cape, South Africa (UWC)

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Project Period: May 2004 to April 2006
Table of Contents

I. Area of Strategic Interest ........................................................................... 5
II. Background Information .......................................................................... 5
III. Project Objectives and Activities Project A: Leadership ......................... 6
IV. Project Objectives and Activities Project B: Nursing Program ............... 11
V. Contribution of the Project to the Development of the Host Country .... 16
VI. Challenges Faced ................................................................................ 16
VII. Executive Summary of Project .............................................................. 17
VIII. Quantitative Record ............................................................................ 18
IX. Appendices .......................................................................................... 21
   a. Interim Reports
   b. Record of Comments from Participants
   c. Evaluation of the Academic Leadership Program (ALP)
   d. Reports from Participants
   e. UWC Master Level in Nursing Program

ALP (Leadership Project) Faculty
Area of Strategic Interest

The University of Missouri (UM) System and the University of the Western Cape (UWC) engaged in a mutually beneficial inter-institutional project focused on Higher Education Leadership and Administrative Transformation under the flagship of USAID’s program goal “Building Human Capacity Through Education and Training”.

This project was undertaken with the support of the USAID Cooperative Agreement with the American Council on Education (ACE) in their effort to mobilize the resources of U.S. higher education in support of international development cooperation.

Background Information

The seeds for the development of the project were rooted in events unfolding in 2003 that precipitated issues which could be addressed through just such a partnership.

The watershed event was the decision of the South African Ministry of Higher Education to assign the University of the Western Cape total responsibility for baccalaureate nursing education in the Western Cape Province beginning in January 2004. With that mandate, UWC began a partnership to prepare the UWC school of nursing faculty to assume the responsibility for educating an anticipated enrollment of 1,000 students. In additionally, UWC felt that the time was right to address a longstanding need to address more faculty for leadership roles.

The UM was well positioned to join UWC in the important and urgent task of institutional development and capacity building. Under the guidance of Dr. Ron Turner, Vice President of the UM system (retired, 2005), UM and UWC have worked closely together since 1986 to establish and maintain a model academic exchange program. This program has supported faculty development activities and projects of mutual benefit for more than 400 professors and higher education administrators over the past 20 years.

“I felt privileged to be one of the trainees. It boosted my confidence in my ability to do the new work of a chair.”
**Project Overview:**

The ALO grant was designed, therefore, to serve two distinct needs. Project A would build capacity in academic leadership by developing an academic leadership program. Project B would focus on revamping the curriculum of UWC’s nursing school to better prepare an increased number of students to serve community needs. Both projects have been an unqualified success. A viable leadership program has been created as a result of ALO HED funding and that program will assist UWC by building a core of people equipped to play leadership roles at UWC. Indeed, as the UWC Vice Rector stated, without such trained higher education leaders UWC can not, in fact, reach its goals.

Project B has also helped the UWC nursing school make significant progress. Considerable work has been done on the nursing curriculum which, when fully implemented, will help the nursing school be more effective in fulfilling its teaching and research missions. Certainly, collaboration will generate some papers and improve the international academic standing of the UWC faculty. The assistance of UM colleagues may help some UWC faculty earn advanced degrees.

Undoubtedly, to the extent that better teaching produces better trained, and more effective nurses, the long term impact of this grant could be very significant. Better trained nurses translate into better health care for South African citizens. Moreover, some of the programs that have been developed or are in the process of development will further improve nursing education at UWC and ultimately improve the nursing care received by future patients.

**Project Objectives**

Thus, to build capacity in academic leadership and nursing education at the University of the Western Cape (UWC) in Cape Town, South Africa the partnership conducted two projects between May 2004 and March 2006. These projects and their outcomes are described below.

**Project A** was designed to develop an academic leadership program at UWC.

There was a documented need to strengthen the knowledge and skills of academic heads and administrators who direct the centers, units, schools and institutes at UWC. Development of their skills in academic administration was viewed as a crucial prerequisite for creating units in which both faculty and students could maximize academic achievements.

In recent years leadership capacity in institutional research, grant and contract administration, fundraising and human resource development have become a global imperative. UWC was aware of the need to develop in these areas, but lacked the infrastructure and financial backing to ensure that development.
To address these issues, representatives of the UM Academic Leadership Institute committed to partner with UWC leaders to design, implement and evaluate a leadership program that was relevant and appropriate for UWC’s needs.

**Project B** undertook a revision and restructuring of UWC’s nursing curriculum to accommodate the needs of 21st century nursing students in South Africa.

Nursing education is a national priority in South Africa. First, the rising incidence of HIV/AIDS and tuberculosis in South Africa has fueled the demand for nurses with a Bachelor of Science in Nursing (BSN), which is known as Baccalareate Curationis in South Africa. Additional urgency for this project was created by the impending increase of UWC undergraduate nursing student enrollment from 276 in 2003 to 480 in 2004. A number of these undergraduates would otherwise have enrolled elsewhere before UWC was assigned exclusive responsibility for undergraduate nursing education in the Western Cape province.

At the time the grant proposal was written it was anticipated that enrollment would increase by 200 nursing students per year. Yet, there was no indication that the thirteen (13) academic faculty in the school of nursing would be increased on a permanent basis. Clearly there was an immediate need for the development of new administrative and academic processes as well as a systems approach to nursing education at the undergraduate level.

The increased student load required major improvements in staff development, including: increased teaching, learning and research skills; curriculum design and development tied to evidence-based practice; and increased student advising to improve academic development of students from previously disadvantaged communities.

The award from USAID allowed the University of the Western Cape and the University of Missouri to engage in a mutually beneficial program to address these urgent issues.

**Project A:**
**Academic Leadership Program**

“In the leadership program I learned how to make myself heard in a group.”

Project Leaders:
Dr. Anita Maurtin-Cairncross (UWC)
Dr. Lora Lacey-Haun (UM)
GOAL OF PROJECT A: Developing an academic leadership program at UWC

Objective 1a: Establishment of an academic leadership program as an ongoing institutional effort to improve operating processes and systems and to support academic leadership development

Objective 2a: An increase in the capacity and capability of faculty interested in academic administration, departmental chair, and other leadership opportunities

The Leadership Development program was a collaborative effort between the University of Missouri and the University of the Western Cape. The need for leadership development and succession was identified by the campus leaders at UWC and partnering with UM, a program was developed that was both state of the art in leadership development and designed to meet the unique needs and strategic goals of UWC. Evaluation reports were used to guide program development and sustainability.

Leadership Development Activities

A needs assessment was conducted on the UWC campus to determine the unique leadership issues to be addressed and three UWC campus leaders met in Kansas City with the UM faculty and leadership development consultant to identify the essential content, the structure, and format to effectively implement the program.

Two year-long sessions were implemented during the grant period. The first, initiated in February 2005, was focused on academic leadership development involving a 360° individual evaluation, case studies and small group activities. Twelve department chairs from across the campus participated in a week-long seminar in February and monthly discussion sessions for the following twelve months. Participant inclusion for the second session, which began in February 2006, was modified to include administrative directors/supervisors as well as department chairs; the program format and structure did not change. Eleven individuals from various academic and administrative departments completed the week-long seminar and are currently participating in monthly discussion sessions.

Program evaluations have been overwhelmingly positive in terms of both the knowledge and skills gained by the individual participant, as well as an overwhelming support to continue to program on the UWC campus. The goals initially identified in the grant were exceeded and the outcomes of the project support the program’s success.

Leadership Activities

An overview of activities includes the following:

- Assessment of UWC leadership strengths, needs and potential.
- Collaboration on an action plan for a sustainable leadership development occurred in year one, and was implemented throughout the project.
- Consultation with specialists in leadership development was provided to UWC.
- Ongoing technical assistance to highlight professional development needs and to evaluate training outcomes was provided.
• Opportunities were created for interested UWC administrators and faculty to enhance personal academic leadership skills.
• Opportunities for collaboration with other leaders were implemented.
• Opportunity was developed for faculty and administrative staff to participate in a “Train the Trainer” workshop to create a pool of leaders capable of sustaining the program.

**Project A Outcomes:**

**Leadership Development Project Year One:**

The Leadership Development Project was initially designed to build leadership capacity for UWC faculty, especially those from traditionally underrepresented groups. All objectives of the project as they were originally stated were met and exceeded.

Following extensive discussion and planning a four-day workshop for leadership development was held in February 2005 at a community center near the campus of UWC.

After the workshop, the participants continued to meet monthly throughout the first year. At ongoing leadership workshops topical issues such as “workload” and “disciplinary procedures” were addressed.

For example, a leadership workshop addressing the role of departmental chairs at UWC under a new remuneration strategy was held in the third term.

A secondary objective of the leadership project was to enhance leadership opportunities for women. A Women’s Writing Group was organized in the first year and has continued through year two. The Dental Faculty women who participated in the first year discussed papers which have now been presented at an International meeting in Kuwait. One additional participant has completed a paper for submission to a peer-reviewed journal.

To signify the completion of the first year of the Leadership Development Program at UWC a certificate award ceremony was held in February 2006 while the UM facilitators were present.

The program was designed for a one-year commitment from participants. However, participants found the program so beneficial that they decided to continue to meet on a quarterly basis with workshops and meetings on current topics relevant to their roles as Departmental Chairs. One such workshop was held on March 23, 2006 and focused on an Accountability Document that was recently submitted to the University Senate. In addition, the process of implementation of a leave policy for academic and administrators was discussed.
Leadership Development Project Year Two

Because of the success of the first leadership group, UWCs senior leadership encouraged the ALP planning team to expand the program to include administrators. As a result, the name was changed from “Academic Leadership Development” to “Leadership Development Program”. A second four-day workshop for leadership development was held in February 2006 for a second wave of attendees, composed of eight academic and three administrators. The first of the year's monthly meetings was held on March 10, 2006.

The first *Train The Trainer* course was held in February 2006 for volunteers from the first year Leadership Development Project. There will be scheduled interactions between participants of year one and year two Leadership Development training throughout the year following the sunset of the grant.

“In terms of new emerging leaders, this will be effective. I have already been able to go to three peers for mentoring.”

Leadership development has historically been available only for the highest level academes (Deans, Vice-Rectors, and Rectors). Until now there have been limited opportunities for middle management, Heads of Departments and Department Chairs to benefit. The new program at UWC to develop leadership potential will have far-reaching impact within their own university and across the country, as UWC leadership facilitators conduct outreach to other institutions of higher education.

Primarily, this project provides a complement and augments the Faculty Development and Staff Development programs previously offered at UWC by changing the format and approach to leadership development. In the past a limited leadership development opportunity was provided to entry-level faculty to prepare them to serve at the entry level. The new project will provide leadership development widely, to faculty across levels of service, with the purpose of allowing prepared faculty to move upward into leadership positions not only at UWC, but in any institution at which faculty may want to serve.

Perhaps the most significant outcome of this project is the elevation of academic leadership from an ad-hoc activity to an institutionalized process. Unfortunately, UWC is not currently in a financial position to fully adopt an ALP like that at UM. Nonetheless, because participants have found the program so meaningful, efforts are underway to seek additional funding to sustain the leadership program until such time that internal funding can fully sustain the program. UWC is developing the expertise needed to provide leadership development not only within their own institution, but at other institutions of higher education in the Western Cape Province, as well.
As it moves forward the Leadership Development Project will be continuously evaluated and the outcomes will be disseminated through professional publications and conference presentations.

**Workforce Development in Higher Education**

The goals of this project are to develop and enhance leadership skills for persons in key positions on the UWC campus. The design of the program and the development of a model suitable for use at other African schools increase the likelihood that the leadership program can be sustained after the completion of the grant period. Therefore, there is the potential for significant impact on the workforce at UWC.

**Project B:**
**Restructuring the UWC Nursing Program**

**Project Leaders:**
Dr. Thembisile Khanyile (UWC)
Dr. Kay Libbus (UM)

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<tr>
<th>GOAL OF PROJECT B:</th>
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<td></td>
<td>Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa</td>
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**Objective 1b:** Development of an *Academic Learning Program* to assist underachieving students

**Objective 2b:** Development of appropriate teaching and learning materials for nursing education at UWC

**Objective 3b:** Revise UWC nursing course syllabi and program, plan outlines and develop report on teaching methodologies and technologies based on analysis of UWC’s nursing program

The exchange program between the University of the Western Cape School of Nursing (UWC) and the University of Missouri Schools of Nursing (UM) arose from a request from the UWC Dean of the Faculties of Community and Health Sciences at UWC in October, 2003.

The Western Cape Ministry of Health had selected UWC as the only University in the province to admit undergraduate nursing students beginning in January 2004. The UWC School of Nursing was facing at least a two-thirds increase in their student body without a parallel increase in faculty and other resources and they were interested in consulting with
UMC School of Nursing to develop strategies for continuing to deliver quality nursing education.

To carry out the work of Project B, faculty exchanges took place. The exchange program took place between May 1, 2005 and April 30, 2006. Three UM faculty members made four visits to UWC and three UWC faculty members made four visits to UM. UM faculty visiting UWC observed classes and visited clinical-community practice sites, reviewed curriculum, course materials, and national requirements for nursing education, and held extensive interviews individual and groups of nursing faculty and students as well as meeting with UWC officials. These meetings included strategic planning sessions with the entire UWC nursing school faculty.

Based on observations from those meetings along with requests from faculty and students, a plan of action was developed, then amended and finally approved by the UWC school of nursing. Specific strategies were formulated to implement the plan and UWC faculty visited UM nursing schools to observe teaching strategies and work one-on-one with faculty in specific areas such as developing post-graduate programs in nursing education and primary care nurse practitioner training, the use of technology and simulation as learning methodologies, and the development of streamlined assessment techniques.

The exchange visits included a number of presentations by the visiting faculty for student and faculty groups as well as extensive orientation to clinical hours.

Further, a number of UM faculty have become outside readers for thesis and dissertations for UWC post-graduate students. Some collaborative research efforts have been discussed and work on these projects will commence before the end of 2006.

Throughout the project UM faculty worked closely with UWC counterparts to design and implement a review and restructuring of the nursing program at UWC in accordance with the recent appointment of UWC as the only school of nursing in the Western Cape province.

Both UM and UWC faculty members and administrators have expressed deep satisfaction with the results of our exchange and anticipate working together in specific areas.

“It was interesting that, in spite of the two Nursing programmes being from different contexts and catering to contrasting worlds, and that the programs have some differences in exit level outcomes, the process is not so different in context of clinical skills acquisition.”
Activities (reported in detail in five Interim Reports) included the following:

- UWC undertook a self assessment of strengths and needs in the school of nursing
- Nursing curriculum and resources, clinical facilities, policies and practice issues all were evaluated
- Needs for faculty development, student development and clinical placement opportunities were explored
- An Action Plan for nursing education was developed based upon the needs assessment with recommendations for curriculum, pedagogical, staffing, research, and clinical enhancements
- A Research Plan was developed to increase the body of nursing knowledge through post-graduate nursing education and research.
- Guidelines for post-graduate program were developed
- A joint Master in Science of Nursing program was established and is in operation
- Selection criteria to recruit the best post-graduate students was reorganized
- Basic knowledge of computer literacy and research methodology were encouraged
- Mentoring programs for research supervisors including PET programs and skills development were created
- An academic staff review panel for student proposals was created
- Nursing academic staff were encouraged to include post-graduate students in their research
- A Mock Review panel for academic staff grant proposals was developed
- An Action Plan for sustainability was developed

In year two a number of meetings were held with South African national policy makers to discuss legislation and/or regulations that would allow Advance Practice Nurses to be recognized in South Africa. Specifically the departments and agencies to whom UM and UWC faculty presented, include the following:

- South African Nursing Council (SANC)
- South African Medical Council
- South African Pharmacy Council
- Provincial Government representatives
- South African National Council for Research

**Permanent Ongoing Nursing Collaboration**

Areas of continued collaboration for the UM-UWC Nursing Faculties were identified as indicated below. These areas for collaboration will be refined, specified, and extended based on outcomes of UWC academic staff visits to UM and additional UM visits to UWC.

“I was skeptical at the beginning, concerned about Americanizing our thinking and adopting the first world. Now I thank the ALO for the exposure.”
Academic Staff Development

Specific UM academic staff will continue to mentor UWC faculty in both teaching and research in the following areas.

- Nurse Practitioner certification
- Development of a program for distance education and research for all levels of nursing education
- Development of Mental Health Nursing curricula and clinical sites for training
- Training and support for development of Research potential among UWC faculty
- Training in distance learning techniques. Including Blackboard based learning, distance education, master's track in education, primary care, establishment and maintenance of nursing clinical skills lab (and the UM “Sim Man”) a computerized practice model, problem based learning, and integrating change into established curricula and established faculty.
- Development of educational outcomes for an Advanced Practice Nursing certification program, building on the current BSN (Bs. Cur.) program.
- Development of funding of faculty, space, scholarships and equipment needed for the new programs.

Nursing Workforce Development

UWC has committed to developing a pipeline of nurses at the request of the government of South Africa which has mandated that nurses will be the primary health care providers in most communities. So the task has become finding the best methods of educating nurses in that paradigm, rather than in an institutional hierarchy model. Since nurses will be the first point of contact for most patients needing health care, they will have to learn to develop analytical skills to serve in that manner.

As the project drew to a close, partners addressed continuation strategies. While final decisions regarding financial continuation have not been made, partners think that the next phase of this collaboration will probably take the form of collegial relationships with research and teaching, distance education for their students for masters in nursing education as well as possible primary care nurse practitioner program; and ongoing UMSAEP proposals.

The faculty and students of the Sinclair School of Nursing at the University of Missouri and the wider UM system have benefited educationally from the cross-cultural relationship with the UWC faculty and their students. The partnership has established plans for some student exchanges in which students and their faculty will have the opportunity to examine nursing assumptions through a different cultural lens. This experience will improve teaching and learning as faculty improve, over time, the way the system operates.
Additional cross cultural exchanges are planned so that students at both institutions will benefit from living in another culture. Work is underway to develop trans-cultural nursing questions that will lead to improved health in both populations and which will develop additional funding streams that will improve funding overall.

During the project UWC made the decision to adapt new nursing curricula and methods of instruction in undergraduate nursing.

Changes established are as follows

- Shift to concept of active learning under the strong leadership of their director with technical assistance from UM.
- Establish programs in problem based learning
- Increase use of self mediated learning tools
- Develop a learning laboratory
- Use new techniques in test construction
- Implement methods that will help students learn to synthesize and analyze information.

Additional Outcomes of the Projects:

The activities of this program have also significantly benefited the University of Missouri. Long-term collaborative relationships have been strengthened and new relationships have been developed. The participants from UM have gained significantly in understanding and valuing the differences and similarities shared with UWC colleagues. In addition, the program allowed the relationship to extend to include the University of Georgia.

The benefits of having participated in this program have been felt by both students and faculty at UM, thus extending learning gains to the entire academic community. As a synergy of this project UM faculty may have the opportunity to work with a large US business in expanding and building new international partnerships.

An additional gain for UWC, as the enrolling institution in the Cape Higher Education Consortium (CHEC), has been the opportunity to play an important role in ensuring that the new CHEC curriculum is submitted for internal and external approval by South Africa’s regulatory structures. As a result, UWC will be better equipped to meet the CHEC platform challenges for the next years to come.

The CHEC curriculum has gone through several updates since its inception. Representatives of all nursing schools met regularly with CHEC to revise curriculum. The South African Nursing Council (SANC) has now approved the curriculum. UWC taught year one of the CHEC curriculum beginning with the intake of first year

“I gained realization about how one’s personal style influences reaction. I also gained knowledge of other people’s styles.

Now I look at things differently, seeing consequences.

A Leaders’ focus should be on process, not content.”
students in January, 2005. Plans are thoroughly outlined for the four years of the CHEC
curriculum as well as completing the existing 2\textsuperscript{nd}, 3\textsuperscript{rd}, and 4\textsuperscript{th} year students continue in
the original nursing program. Finally, the involvement with and success gained through
the two ALO- HED funded projects, have clearly resulted in renewed interest in the
already long term cooperation between UWC and the University of Missouri.

\textbf{Contribution of this project to the development of the UWC and the host country}

In addition to the outcomes noted above the improvements in the UWC nursing
curriculum will have long-term impact on nursing education in South Africa as well as
the quality of care patient’s receive. The leadership program will have a similar long-
term impact. There has been a long-standing dearth of academic leadership in South
Africa at all levels. Much of this state of affairs has to do with the non-professional and
ad hoc manner in which leadership is generally viewed. The results of the Leadership
Development Program established at UWC have already impacted the way leadership
development is perceived at UWC. With the implementation of the ‘\textit{train-the-trainer}’
program, which is already envisaged by UWC as a potential means to develop faculty in
regional leadership roles, South African higher education stands to gain widely from the
synergies of this ALO- HED project.

\textbf{Challenges encountered and lessons learned}

As already indicated UWC is still facing a need for additional support in order to ensure
that the gains in both nursing and leadership areas are sustained. The main
programmatic challenge encountered was communication. The institutions were located
so far apart that their working hours, holidays and semester schedules overlapped very
little. The delays in communication by telephone, email and mail have been attributed to
this factor. A secondary challenge was, and is, not programmatic but a persistent
condition: the lack of funds to allow identified needs to be met. Examples of such needs
are: additional faculty, laboratory equipment, and high-tech hardware.
EXECUTIVE SUMMARY OF PROJECT

Project Title: Leadership Development at the University of the Western Cape

Project Directors:

US: Rodney Uphoff, University of Missouri School of Law
    South Africa: Jan Persens, University of the Western Cape International Relations

Project Dates: May 12, 2004 to March 31, 2006

This USAID funded project was built upon the proven effectiveness of a twenty-year collaboration between the University of the Western Cape in Cape Town, South Africa and the University of Missouri in the United States. The seeds for project development were rooted in events unfolding in 2003 that precipitated issues which could be addressed through just such a partnership.

The watershed event was the decision of the South African Ministry of Higher Education to assign the University of the Western Cape total responsibility for baccalaureate nursing education in the Western Cape Province beginning in January 2004. With that mandate, UWC began a process to create a two-pronged partnership which could: 1) develop leadership among faculty, and 2) prepare the school of nursing to assume the responsibility for educating an enrollment of an anticipated 1,000 students.

The major focus of the leadership development program was to promote the development of a core set of knowledge, skills, and qualities that all academic leaders should possess in the areas of university organization, operations and environment; departmental leadership and management; and personal effectiveness.

The Leadership Development Program established through this project has been shown to increase the capacity and capability of faculty and administrators to address the issues raised in their initial needs assessment.

Further, the program has been so well received by faculty that it has spun off two leadership initiatives: 1) a Women’s Academic Writing Group through which faculty at the UWC meet regularly for peer critique and encouragement, and 2) a Train the Trainer program by which UWC is preparing to provide regional leadership development consultation for other institutions. These programs will be continued as an ongoing institutional effort to improve operating processes and systems that support academic leadership development.

In addition to the need to develop more faculty leaders the UWC nursing school faced a dire situation created by an impending large increase in student enrollment. They requested assistance in undergoing a needs assessment followed by any restructuring as necessary to accommodate the needs of 21st century nursing students in South Africa.

The grant supported the evaluation of the UWC nursing school which in turn led to positive curricular revisions. The revamped nursing curriculum and the new masters programs will lead to the nursing faculty and staff at UWC being better prepared to meet the learning needs of increased numbers of students.

This mutually beneficial partnership also impacted the University of Missouri faculty, staff, and students by increasing their understanding of international issues in nursing and leadership development through the experiences they shared with UWC counterparts.
QUANTITATIVE RECORD

The following information is provided to quantify the impact of the ALO project for Leadership Development between the University of Missouri and the University of the Western Cape in Cape Town South Africa, since beginning of ALO funding May 12, 2004, to the completion of the project activities March 31, 2006.

Exchanges supported for host country participants:

Faculty: 5
   Cheryl Nicodem
   Thembisile Khanyile
   Anita Maurtin-Cairncross
   Nomafrench Mbombo (Report Appendix 2)
   Jan Persens

Administrators: 1
   Tyrone Pretorius

Nature and duration of the exchanges:
Travel was for periods of 10 to 20 days per trip to plan and implement the project activities as described in the 5 Interim Reports and the Final Report.

While in the United States the partners from South Africa met with 90 American Nursing students and 44 Arts and Sciences students; 25 Nursing Faculty; and 50 community members.

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Exchanges supported for U.S. participants:

Faculty: 6
   Lora Lacey Haun
   Kay Libbus
   Thad Wilson
   Marjorie Fonza- via UMSEP/ UM support
   Rod Uphoff
   Rob Williams

Undergrad: 1
   Cheryl Phelps

Administrators: 2
   Ron Turner
   Tanya Whitehead

Nature, location and duration of the exchanges:
To learn local conditions and expectations; To ensure understanding of and expectations of the projects; To plan and implement project activities as reported.

____________________
**Internships the partnership has supported:**
Undergrad: Cheryl Phelps

**Nature, location and duration of the internships.**

Cheryl Phelps is an undergraduate senior at UM with a background in statistics, who aspires to work for the US government. She had a 10 day research internship to assist with the collection and analysis of data for the evaluation of Project A: the first year of the leadership program.

__________________

**Number of host country nationals who have been trained**

**Leadership Program**
Females: 17
Males: 8
Total: 25
Under age 25: none

**Nursing Program:**
Females: 850
Males: 100
Total: 950
Under age 25: 700

**Faculty Presentations/ Meetings**
27 UWC faculty / administrators

__________________

**Number of times partnership consulted/ collaborated with a host country government entity/ organization**
5, as follows:
South African Nursing Council
South African Medical Council
South African Pharmacy Council
Provincial Government (Western Cape)
South African National Council for Research

__________________

**New degree programs partnership:**
Advanced Practice Nurse (planned)
Master of Science in Nursing (MSN, in operation with 14 students January 2006)
Distance Education
**Partnership contributions and or leveraged contributions** other than cost-share, beyond what was originally proposed, to strengthen the capacity of host country higher education institutions:

<table>
<thead>
<tr>
<th>Dollar ($)</th>
<th>Utilization of Funds</th>
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<tbody>
<tr>
<td>5,500</td>
<td>Leadership Trainer R. Williams</td>
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<tr>
<td>85</td>
<td>Leadership materials</td>
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<tr>
<td>288</td>
<td>Direct testing expense</td>
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<tr>
<td>2,100</td>
<td>Conference venue in SA</td>
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<tr>
<td>10,000</td>
<td>Faculty time</td>
</tr>
<tr>
<td>3,032</td>
<td>Conference venue in SA</td>
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<tr>
<td>760</td>
<td>Materials</td>
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<td>1,128</td>
<td>Direct testing expense</td>
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<tr>
<td>67,500</td>
<td>2,700 nursing textbooks @ $25</td>
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<tr>
<td>1,700</td>
<td>Shipping of books to SA</td>
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<tr>
<td>1,000</td>
<td>Student Intern expenses</td>
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$115,593    Total Funds Leveraged beyond cost-share
APPENDIX 1: INTERIM REPORT SUMMARIES

Interim Progress Report
October 31, 2004
Period Covered by Report: May 12, 2004 – September 30, 2004

What activities have the partner institutions undertaken during this reporting period to achieve the stated partnership objectives and development outcomes?

Prior to the UM site visit to UWC partnership directors (Dr. Jan Persens of UWC and Dr. Ron Turner of UM) conferred by telephone to review all project plans, activities, schedules, staffing, budgets, and evaluation procedures. Before the UM site visit to UWC project directors also confirmed monitoring and assessment plans with the project evaluators.

On a rotating schedule between June 21 and August 8, 2004 the project partnership director from UM, Dr. Ron Turner, along with Dr. Kay Libbus, Dr. Lora Lacey-Haun and the evaluator, Dr. Tanya Whitehead, made site visits to UWC.

Site visit outcome reports reflect Project A: Academic Leadership Development, Project B: Nursing Education and management perspectives. Reported material was provided by Dr. Lora Lacey-Haun for Project A, Dr. Kay Libbus, for Project B, Dr. Ron Turner for Project Management and Implementation, and Dr. Tanya Whitehead for Project Evaluation. These reports are provided below in the order indicated. Following the reports major and/or emerging implementation issues are noted, and a conclusion is provided.

In addition, UWC Professor Jan Persens traveled to UM after the annual ALO meeting in Washington, D.C. in August 2004 to consult with Dr. Turner and UM project leaders on operational aspects of the project and to review plans for the remainder of 2004.

PROJECT A: Developing an Academic Leadership Program at UWC
Project Leaders: Dr. Anita Maurtin-Cairncross (UWC) and Dr. Lora Lacey-Haun (UM)
GOAL OF PROJECT A: Developing an academic leadership program at UWC

Objective 1a: Establishment of an academic leadership program as an ongoing institutional effort to improve operating processes and systems and to support academic leadership development

Objective 2a: An increase in the capacity and capability of faculty interested in academic administration, departmental chair, and other leadership opportunities

Year One Site Visit (July 18 – August 6, 2004) activities for Project A are as follows:

Dr. Lora Lacey-Haun traveled to UWC from July 18 – August 6, 2004 to engage UWC faculty and staff in planning the Academic Leadership Program. The following list shows the breadth and scope of the collaboration process in which she engaged:

- Dr. Anita Maurtin-Cairncross, Coordinator of Project A at UWC
- Rector Brian O’Connell
- Focus group lead by external consultant Dr. S. Wickham on the topic of supervision
- Executive Director of Human Resources: Ms. A. Hambrook-Glaeser
- Briefing with Vice Rector of Academic Affairs, Professor Tyrone Pretorius
- Focus group discussion with all deans
- Meeting with Dean of the Faculty of Arts Professor S. Ridge and Deputy Dean Professor G. Fredericks
- Meeting with Professor L. Tshiwula, Vice Rector for Student Development and Support
- Multiple meetings with Professor Jan Persens
- Meeting with Professor A. Travill, Deputy Dean, Faculty of Community and Health Sciences
- Multiple meetings with Professor T. Khanyile, Chair of Nursing Department
- Meeting with Mr. N. Hendricks, Acting Director, Division of Life Long Learning
- Meeting with Dean of Science, Professor J. van Bever Donker
- Meeting with Dean of Education, Professor D. Meerkotter
- Seminar on the Ethics of Research conducted by the African Colleges of Medicine
- Meeting with Dr. I. Miller, Registrar
- Meeting with Mr. M. Regal, Acting Executive Director of Finance
- Meeting with Dean of Research Development, Professor R. Christie

Findings are as follows:

Based upon the expressed opinions of the faculty, it is clear that the Academic Leadership Development Program at UWC needs to be a coordinated program with existing resources including: UWC’s Middle Management Certificate Program, Vice-Chancellor’s Leadership Development for Deans, UWC HR, and UWC Faculty Development Program.
UWC’s support for the Academic Leadership Program is demonstrated by:

- a. Overwhelming support by all persons interviewed by Dr. Lacey-Haun.
- b. Identification of potential ongoing funding to sustain the program through the government workforce training program.
- c. Identification of key individuals on campus with areas of expertise needed for implementing the Academic Leadership Program.
- d. Support of top administration for the program as a campus wide program and for an emphasis on women leadership development.

Four major areas were identified that will influence the final program developed; these areas need further discussion with the leadership at UWC:

1. Priority topics for inclusion in the program, e.g. conflict management, dealing with difficult situations, facilitating faculty/staff development.
2. Issues surrounding orientation (induction) to UWC for individuals assuming leadership positions including UWC’s mission, values and strategic initiatives, operation and policy guides need to be developed. Early discussion on these programmatic areas has begun. UWC faculty stated that the format desired will have the following characteristics: it will be progressive, on-going, and challenging. Regular feedback sessions must be built into the program. The timing of the program needs to be integrated into the university calendar. Mentorship connections for new faculty must be identified and a mentorship plan written and established. If funding were to allow it, faculty stated that they prefer implementation of a multi-level 360-degree assessment strategy. The UWC respondents stated a strong negative opinion regarding the usefulness of synchronous on-line sessions. However, they strongly supported development of an on-line resource center with asynchronous message posting.
3. Special program opportunities for women were an area of high interest. Note: A. Maurtin-Cairncross will collect data before the October visit to Missouri to more fully develop this area. A basic approach may be needed in areas such as building self-confidence, the influence of societal views, and treatment of women.
4. The Executive Leadership at UWC needs to consider some strategies for facilitating the transformation that is being discussed on campus. Many faculty interviewed, especially those at levels up to that of Dean, were concerned that the mechanisms and resources to function under the proposed transformation would have to be assured to develop at a rate that would support them as they worked under new levels of expectation.

Between August and October 2004 the following activities occurred:

1. Anita Maurtin-Cairncross collected data on needs for women leadership development.
2. L. Lacey-Haun set up agenda and consultants for UWC team visit to Missouri.
3. T. Pretorius, A. Maurtin-Cairncross, and J. Persens prepared to come to Missouri October 10 – 17 to consult with UM colleagues on program format, program content, the selection
of participants, schedule and operational plan for implementation of the UWC leadership program in 2005.

**PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa**

Project Leaders: Dr. Thembisile Khanyile (UWC) and Dr. Kay Libbus (UM)

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**Year One Site Visit (June 17 – July 23, 2004) activities for Project B are as follows:**

In the process of developing the nursing project goals Kay Libbus met with and interviewed Nursing School and UWC administrators, academic faculty, post-graduate students, and representatives from community agencies. A list of these individuals appears in appendix A. She was also provided the opportunity to make a number of visits to clinical sites; a list of these sites is included in Appendix B. Finally, she reviewed a number of documents from the Nursing School at UWC, and National documents. A list of sources is shown in Appendix C. The strategies and goals to be achieved over the course of the project are being developed jointly by the three UM Schools of Nursing and the Nursing School at UWC.

The report is divided into three areas: Part 1.) An Assessment of Strengths and Challenges; Part 2.) Possible Areas for Collaboration; and Part 3.) Next Steps.

**Part 1: Assessment of Strengths and Challenges faced by UWC School of Nursing**

**Strengths**

- In the words of Dr. T. Pretorius, (Vice-Rector of UWC, June 21, 2004), UWC School of Nursing has “the opportunity to make history in South Africa.” According to Professor Thembisile Khanyile, director of the UWC School of Nursing, the ministry of health estimated that 1000 new nurses will be needed annually to meet the needs of the Western Cape Province.
A new and innovative provincial baccalaureate nursing curriculum has been created through the Cape Higher Education Consortium (CHEC).

A Memorandum of Understanding through CHEC provides support for classroom and clinical teaching from academic staff from the former undergraduate nursing programs at University of Cape Town (UCT) and Stellenbosch University.

Nursing education has been identified as an ‘executive project’ by UWC administration.

Academic faculty from other UWC departments are willing to support the SON missions. For example Dr. Thandi Pouone at the UWC School of Public Health, an expert in childhood malnutrition, has offered to teach a unit for the School of Nursing in the detection and management of childhood malnutrition, and Dr. Debbie Jackson, a staff member in the UWC School of Public Health, will be teaching a module and research for the SON.

UWC and SON commitment supports the need to continue to produce quality nursing graduates; albeit in a much larger volume [366 first year students were admitted in January 2004 up from a typical intake of 100-120 per year].

Two additional lecturers were added to the SON academic staff in 2004.

There is now a nucleus of four doctoral prepared academic staff at the SON, at least one of whom has extensive experience as a scholar and researcher.

There is a relatively new chairperson at the SON who is committed to finding ways to facilitate academic staff development.

There is an active academic staff development program with Community and Health Sciences offering assistance to the School of Nursing.

The majority of School of Nursing academic staff supports UWC and provincial policy dictating that academic staff must earn advanced degrees and develop into productive, publishing scholars.

Research funding is available through a variety of organizations.

UWC and SON leaders are committed to action.

The SON has moved into a larger physical facility and has established a skills laboratory. Two satellite laboratories are planned at two hospitals, Tygerberg and Groote Schuur.

Challenges

Changing from the traditional modes of nurse-training are not accomplished without difficulty, particularly since the South Africa Nursing Council (SANC) prescribes a training pattern that does not completely reflect the provincial and national need for nurses as the backbone of and major provider for Primary Health Care. It was noted, in fact, that the SON clinical placement site schedule reflects emphasis on bedside nursing.

The School of Nursing is out of compliance with the SANC regulation that all nursing academic staff have advanced preparation in nursing education.

The 2004 increase in student numbers and the expectations of continued high enrollments place stress on academic staff time and suggest the need to examine existing methods of teaching and assessment.
• The necessity for advanced degrees, scholarship and publication places stress on academic staff time and suggests the need to examine existing methods of teaching and assessment.
• Non-nursing administration and academic staff in the Faculty of Community Health Sciences have difficulty appreciating the intense and thus expensive, nature of undergraduate nursing education.
• SON has identified inadequacy of library materials and learning materials.
• Student preparation for academic work appears to be uneven; the school is faced with a challenge of having to cater for the mature adults who are returning to learning as well as incoming students from a variety of educational backgrounds.
• For some students, English is not their first language. As South Africa has 11 official languages, writing in appropriate syntax complicates the academic challenges for many students.
• The 4000 hour clinical practicum requirement of the SANC stretches academic staff in terms of supervision and students in terms of the unavailability of normal holiday time.

Part 2: Areas of Potential Collaboration between UM and UWC

Areas of potential collaboration for the UM-UMC Nursing Faculties were identified as indicated below. These areas for collaboration will be refined, specified and extended based on data collected by UWC academic staff visits to UM and additional UM visits to UWC.

Teaching

• UWC and UM academic staff work together to develop alternative and innovative teaching methodologies. Specific examples would be: a shift in assessment to include self-mediated learning materials; use of capacity development and teaching methods for skills laboratory; and the use of Internet based assignments.
• UWC and UM academic staff work together to develop innovative clinical experiences for students. For example, consider the possibilities of allowing students to use a certain percentage of hours of volunteer time as clinical hours; use ‘alternate’ break experiences such as family studies as clinical hours, increased development of practicum that helps meet S.A. and Western Cape Province health goals such as the development of the nursing clinic at Saartjie Baartman Women’s Center.
• UWC and UM academic staff work together to investigate ways of increasing proportion of active teaching methodologies may be used. For example, developing new methods for teaching the large lecture class and instituting ways in which academic staff can model teaching technologies for each other will be explored.
• UWC and UM academic staff work together to develop assessment techniques to minimize academic staff marking time. For example, test construction, increased use of objective types of examinations, use of trained teaching assistants in marking papers, reducing the effort that faculty put into assessing the use of written English rather than the assessment of critical content and skills and other approaches will be explored.
• UM and UWC examine ways to increase capacity through working with academic faculty external to the School of Nursing and/or UWC, including the faculties of the UWC School of Public Health and nursing faculties at UCT and Stellenbosch.
• UWC and UM examine ways to identify and remediate under-prepared students, including: using pre-matriculation or early post-matriculation screening to assess academic readiness and, subsequently, to utilize early referral to campus services.
• UWC and UM examine the feasibility of adding post-graduate programs to prepare students for additional service areas in Primary Health Care, including advanced nurse practitioners such as family nurse practitioners, pediatric nurse practitioners or development of a joint MPH-MCUR degree.

Academic Staff Development

• Specific UM academic staff mentor UWC faculty in areas of both teaching and research.
• UM-UWC will develop courses / modules in advanced nursing education via distance learning to assist UWC academic staff to improve their academic qualifications.

Research

• Collaboration and mentoring between UWC School of Nursing (SON) post-graduate faculty and UM SON post-graduate faculty and research leaders in developing research infrastructure and developing a ‘niche’ area for nursing research at UWC.
  For example, UM faculty will serve as external readers for UWC SON post-graduate theses and dissertation and suggest ways in which academic staff and students may co-publish papers; UM can mentor UWC in the development of Research Interest Groups.
• Collaboration between UWC SON post-graduate faculty and other UWC faculties in research.
• Collaboration between UWC SON post-graduate faculty and with other School of Nursing faculties in the Western Cape Province.
• Close collaboration between UWC’s four doctoral prepared staff in setting the research mission of the SON.
• Joint UWC-UM nursing research projects.


➢ UM School of Nursing Project Coordinator, Dr. Kay Libbus, received E-mail from Dr. Thembisile Khanyile, Chair of the UWC Nursing Department she had met the July 17 collaborative program deadline for a research proposal for a small HIV-AIDS project.

➢ UM Nursing Project Coordinator met in Columbia, MO. USA with Dr. Ron Turner and Dr. Jan Persens, project directors, on August 17 to discuss methods of regular/weekly communication between the UM and UWC nursing project leaders, dates and program plans for the UWC project leader’s visit to UM, and plans for
communication between the UM nursing program leader and other nursing faculty on the UM campuses.

- On August 18, Dr. Kay Libbus contacted Richard Madsen, a MU statistician, who will be visiting SA for 6 weeks (this will be his 5th visit). He has consulted extensively with nursing faculty and students at UM. He was asked to work with UWC nursing faculty while he was there September and October. He consented to do this within limits of his time.

- August 17, during the first faculty meeting of the new school year the UM nursing project leader explained the UM/UWC ALO project and asked for volunteers from UM to work with UWC faculty in specific areas.

- The UM nursing project leader followed up her appeal to the MU faculty with an E-mail August 23 and received positive replies from 5 UMC faculty.

- Faculty areas of interest for collaboration are:
  - Problem Based Learning
  - Development of community-based clinical experiences
  - Development of primary health care post-graduate program
  - Development of nursing education post-graduate program
  - Research collaboration in areas of oncology, medication compliance and more.
  - Preceptor mentoring
  - Participation in Professor Khanyile’s visit to UM
  - Teaching and research in women’s health

- August 23 the UM nursing project leader created an e-mail distribution list for UWC nursing leadership and provided information regarding Dr. Madsen’s visit related to statistical consulting.

- A conference call among UM nursing project participants occurred on Friday September 3 to work on ‘next steps’ and protocol for the project.

- Work at both campuses is moved forward in the planning for October meetings which UWC faculty will attend on site at UM.

- A conference call was scheduled for Friday September 3 for numerous project personnel to work on ‘next steps’ and protocol for the project.

How have the activities benefited (or will they ultimately benefit) the U.S. institution?
How have they benefited the community surrounding the U.S. institution?

Project A:

The activities of the Leadership Development Project will have a significant impact on both the UMKC and the UM systems. The cross cultural exchange of issues and strategies is rich
and will ultimately strengthen many UM faculty and staff who will be participating in this project with the representatives from UWC.

**Project B:**

The faculty and students of the Sinclair School of Nursing at the University of Missouri and the UM will benefit educationally from the cross-cultural relationship with the UWC faculty and eventually hopefully their students. We hope to establish student exchanges, examining nursing assumptions from a different cultural lens, and it will improve our teaching as we improve how we deal with diversity. We hope to build cross-cultural exchanges so our students will benefit from living in other cultures. We hope to develop trans-cultural nursing questions that will lead to improved health in both populations through new research.

**Has your partnership adapted curricula or introduced methods of instruction relevant to host country development needs during this reporting period? If yes, fully describe.**

**Project A:**

This project will complement and augment the Faculty Development and Staff Development programs that are currently offered at UWC by changing the format and approach to leadership development. The new project will provide leadership development to faculty across levels with the purpose of allowing prepared faculty to move upward into leadership positions not only at UWC, but in any institution at which faculty may want to serve.

**Project B:**

UWC has made the decision to adapt new curricula and methods of instruction in undergraduate nursing. Changes agreed upon to date are as follows:

- Shift to concept of active learning under the strong leadership of their director with technical assistance from UM.
- Programs in problem based learning
- Self mediated learning tools
- Develop learning laboratory
- Test construction
- Methods to help students learn to synthesize and analyze information.

**Has your partnership undertaken activities to equip individuals for participation in the host country’s workforce? If yes, are some of these efforts targeted to underserved or disadvantaged groups? Please fully describe.**

**Project A:**

Yes. The goals of this project are to develop and/or enhance leadership skills for persons in key positions on the UWC campus. The design of the program will enable it to be sustained after the completion of the grant period, and for trained persons to move into faculty positions at other institutions. Therefore, there is the potential for significant impact on the
workforce at UWC as well as in the region. In addition to seeking persons of historically
disadvantaged racial populations, women- also a disadvantaged group- are specifically being
targeted for leadership development through this ALO program.

**Project B:**

Yes. Project B was designed in response to the assignment by the South African Ministry of
Higher Education to the University of Western Cape a comprehensive responsibility for
baccalaureate nursing education in the Western Cape Province. It is the belief of the nursing
school at UWC that since nurses will be the primary health care providers in the communities
the task is to make sure that nurses are educated in that paradigm, rather than in the
institutional hierarchy model.

**Have there been any synergies, serendipities, or human interest stories for the**
**partnership during this reporting period? If yes, fully describe.**

1. Three new non-ALO funded UWC-UM research collaborations have resulted in the
   first 5 months of the UM/UWC ALO project. All three of the research projects
   involve the nursing department at UWC. Partners include the Departments of
   Economics and Statistics at UM- Columbia, the School of Nursing at UM-St. Louis,
   and the School of Nursing at UM- Columbia.
2. Faculty from both universities in the ALO Project have made presentations to
   students in both partner universities in social science disciplines. Dr. Persens
   addressed a class of students at UM- Kansas City on the topic of community
   organizing. Faculty from the UM- Columbia Truman School of Public Affairs made
   presentations to students at UWC in government.
3. UM-Columbia Truman School of Public Affairs brought new potential international
   academic partners to UWC from Ireland for the purpose of international work in the
   area of peace.
4. The College of Arts and Sciences at UM-Kansas City will send a teacher and 12
   students to Cape Town in 2005 for an academic service learning experience.

**Challenges our partnership encountered in carrying out its planned activities during**
**this reporting period:**

**Major or Emerging Implementation Issues Identified:**

1. Due to personnel changes unrelated to this project at the University of The Western
   Cape the person taking the leadership role in Project B: Nursing Education on the
   UWC side will be changed from Dr. Cheryl Nikodem to Dr. Thembisile Khanyile.
   Dr. Nikodem will continue involvement with the ALO project as a project member.
2. Given recent changes in project leadership at UWC, the project budget will be revised
   to reflect contributed personnel costs in line with the participation of staff engaged in
   the project.
3. Dr. Lora Lacey-Haun, taking the leadership role on Project A: Leadership
   Development on the UM side, has requested that a second person from UM be added
   to Project A for the period of program implementation to occur in February 2005. It is
her belief that to implement the initiative two Leadership program trainers, offering a wide array of skill-sets, will be needed to work in tandem to ensure an effective implementation of the Academic Leadership program.

4. An outcome of discussions between partners was a decision to forgo the organization of a conference which was to be held at UWC on the topic of professional development needs and opportunities for UWC staff. Instead, UWC faculty will have the exceptional opportunity to experience segments of the state of the art UM Academic Leadership Institute activities and conduct seminars for UM faculty on leadership issues in South Africa during extended stays at UM.

5. Regular communication patterns will need to be developed between the project sites. The potential of building in Internet connectivity to facilitate communication may be helpful and the usefulness of this media will be explored.

6. In the early stages of the project work was done to create a common understanding at the micro level – especially in the area of nursing- between collaborators.
Interim Progress Report
April 30, 2005

Project A: Developing an Academic Leadership Program at UWC
Project Leaders: Dr. Anita Maurtin-Cairncross (UWC) and Dr. Lora Lacey- (UM)

GOAL OF PROJECT A: Developing an academic leadership program at UWC

Objective 1a: Establishment of an academic leadership program as an ongoing institutional effort to improve operating processes and systems and to support academic leadership development.

Objective 2a: An increase in the capacity and capability of faculty interested in academic administration, departmental chair and other leadership opportunities.

Overview

UWC faculty Dr. Anita Maurtin-Cairncross, Professor Jan Persens and Professor Tyrone Pretorius met at the UM campus in Kansas City with UM faculty Dr. Lora Lacey- and Dr. Ron Turner to finalize the plans for the Academic Leadership Program (LDP) at UWC. Dr. Rob Williams was in attendance as a consultant for development of the Academic Leadership Development program to be held in February 2005 at UWC. During this work session, the representatives from UWC determined that they would like to make slight modifications in the UM LDP which was used as the model and have Dr. Rob Williams serve as the facilitator for the initial session.

A timeline was developed to allow for the initial session to be moved from July 05 to Feb 05 so that the program would better align with UWC’s academic calendar. The revised timeline called for the initial session to be implemented in February 2005 with the remainder of the program to be implemented throughout the 2005 calendar year.

A synopsis of the Leadership Development Program (LDP) at UWC is as follows:

1. Identification of no more than 10 - 15 participants who are academic faculty in leadership positions at UWC.

2. Implementation of 360 degree leadership style evaluation for each LDP participant that included the following: a self evaluation, evaluation of participant by both their superior and from a person who reports to them, and by two peers.

3. A facilitated 3 to 5 day interactive and hands-on session using case studies and simulations to discuss real issues academic leaders face. Individual and group work to
assess individual leadership styles, work with other department chairs/faculty to solve actual problems, develop an informal network of expertise, enhance personal leadership skills and work with other emerging leaders at UWC.

4. Creation of a system for quarterly workshop sessions at UWC throughout the year for Leadership Development Program follow-up sessions to concentrate on topics of interest to the group.

5. Monthly informal “Brown Bag” lunch meetings at UWC at which Leadership Development Program participants may meet to discuss common concerns/issues, upcoming campus initiatives and share ideas and advice.

Project B: UWC Visit to University of Missouri School of Nursing in Kansas City; Project Leaders: Thembisile Khanyile, R.N., Ph.D. (UWC) and Dr. Kay Libbus (UM)

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Overview

UWC Professor Thembisile Khanyile, R.N., Ph.D. traveled to all three Nursing School partner locations at the University of Missouri (St. Louis, Kansas City, and Columbia) from Monday, Nov 29 to Wed, Dec 1, 2004 to meet with nursing faculty. Details of the meetings are shown in Appendix A, B, and C.

Meeting outcomes were as follows:

1. Consolidation of proposed areas of nursing school collaboration, development of timelines and partnerships

2. Advice received from UM on the plan for the Masters in Nursing program at UWC

3. UWC presented questions about teaching and assessment models utilized by Missouri faculty. UWC academics then adapted similar strategies for use at UWC
4. A Cape Higher Education Consortium (CHEC) Platform monitoring and evaluation plan was created for the restructured nursing education program serving students from three universities in the Western Cape at the behest of the South African government.

5. A proposal to obtain clinical skills laboratory equipment for the Groote Schuur and Tygerberg community nursing sites for UWC clinical nursing experiences was developed.

6. Plans were set in place for a new undergraduate nursing student exchange between UWC and UM. Decision was made for UMKC School of Nursing to take leadership role in this multi-site effort.

7. A restructure plan of the nursing program was submitted to UWC CHS Faculty for internal approval and submission to senate, and to the South African Nursing Council for approval.

8. By the end of April 2005 a proposal will be developed by UWC for acquiring additional educational and computer resources.

How have the activities benefited (or will they ultimately benefit) the U.S. institution?
How have they benefited the community surrounding the U.S. institution?

The UWC/UM partnership has had direct impact on the education of students at the UM system. 30 UM students have benefited from having professors from UWC speak in classes, 6 statistics students gained experience in working on data collection tools, 1 statistics student participated in the interviews and data entry, and 8 UM students benefited from participating directly with the project by traveling to South Africa, as shown in Question 15.

Describe the extent and nature of engagement of other collaborating U.S. institutions in partnership activities during this reporting period.

UM students raised funds from US businesses, churches and individuals to pay for their travel to South Africa. Between January 2005 and April 2005 they raised $27,000 by holding book sales, a benefit dance, and giving talks at businesses.

How have these activities contributed to (or do you anticipate they will contribute to) development in the host country?

- There is now an historic collaboration of the schools of nursing among all three universities in Cape Town that have traditionally served segregated populations. The South African Ministry of Higher Education has assigned to the University of the Western Cape the leadership role in nursing education. Therefore, this project has designed a collaboration between an historically English medium institution (University of Cape Town), an historically Afrikaans medium institution (University of Stellenbosch) and an historically Black institution (University of the Western
Cape) in which all nursing students will be educated together, with the first two years of training occurring at the University of the Western Cape.

- The reality is that nursing in South Africa will still require substantial financial and human resource inputs funded by the State. This was recently illustrated by a recent report (see Appendix E) on a study in which it was demonstrated that “nursing at clinics countrywide is in such crisis that staff are buckling under a nurse: patient ratio of 1:90 instead of 1:35, and as a consequence nurses face severe personal health risks.”

- The concentrated effort by this project on the development of leadership among academics at UWC will have an impact on the whole tertiary education sector where presently the severe shortage of leadership is experienced.

**How has your partnership strengthened the host country higher education institution during this reporting period?**

**Project A: Academic Leadership Development**

- Faculty at UWC are networking with UM faculty partners to enhance research, teaching, and leadership skills.

- Use of the UM model for leadership development among UM faculty was adapted to the training needs at UWC and implemented for 14 new leaders at the level of chair or head of department.

- About 20% of UWC faculty have accepted the opportunity to take part in the new Leadership Development Program supported by US AID in year one, and will have had their leadership capacity developed through participation in the year-long project.

- UWC Academic Leadership Development participants report that they feel connected to each other as colleagues in a new way, and that their ability to provide high quality leadership to their departments has been enhanced by participation in the training.

- 80% of the women enrolled in the Leadership Development Program have joined a support group to increase publications among women faculty at UWC. The group meets for 2-3 hours every second week, and works on enhancing the writing skills of participants. The goal is for each professor to publish a paper in the coming year.

**Project B: Nursing Program Development**

- The Master in Nursing program at UWC developed in partnership with UM with US AID support has been approved by Senate and is now under review by the South African Department of Education. It is slated to begin operation with a pilot group of 10 students in January 2006.
In the first term of the consolidated nursing program in the Western Cape (CHEC consortium in nursing education) 360 students were enrolled. At the second term the pass-rate for these non-traditional students was 96%. 100% of the 44 students who did not pass the courses on the first try re-enrolled in the same program in year two. There are currently 344 first year students enrolled in the CHEC consortium, and 300 second year students enrolled.

There are already inquiries from student applicants for the January enrollment in the new master level School of Nursing program at UWC.

Has your partnership informed policy at the institutional, community or national levels in the host country through policy relevant research consultations, analysis, advice and/or direct assistance? (e.g., helped increase the enrollment or participation of underserved students, adopted a policy of services to the community etc.) If yes, fully describe.

The School of Nursing at the University of Western Cape is working to modernize the clinical nursing requirements for nursing students through the South African Nursing Council (SANC). In the past SANC has required the clinical placements of students to be at bedside in hospitals. The provincial and national need for nurses is not met by this protocol. Instead, there is a need for nurses to serve as the backbone and the major provider of Primary Health Care in poor communities. This issue of service to the community is being addressed through this project.

Due to the historically underserved of disadvantaged Black South Africans by the educational and higher educational programs, the University of the Western Cape has allowed entry to students -even those with poor entry preparation- and has established methodology to prepare students with a disadvantaged start to succeed in college level work within the first year or so of entry to college.

A new service learning project component has been developed and implemented. In this project students from the UM system and the UWC system will work together in community service in the most underserved communities in the Cape Town area. The first 8 students to participate arrived in Cape Town in April 2005.

The partnership is crafting a new model of Nursing Education for the country across all levels of nursing training. All over the country people are watching to see how this model will work in South Africa.

Has your partnership conducted collaborative research during this reporting period to address a development problem in the host country? If yes, fully describe.

UWC professor Thembisile Khanyile, R.N., Ph.D. and UM professor Kay Libbus, R.N., Ph.D. are collaborating on a project to evaluate the impact of HIV/ AIDS training programs offered by selected organizations in the Western Cape, South Africa. This project will involve three master level students who will focus on...
different areas of HIV/ AIDS training programs. One will look at Non Government Organizations (non-profits), another will study Governmental training, and the third will study Faith-Based Organization projects.

- UWC professor Cheryl Nikodem with UM partners are engaged in a randomized clinical trial on two drugs vs. a control drug on babies exposed to HIV and to treat pneumonia. Funded by Discovery Labs, Medical Research Council, UMSAEP funding. Total funding is over R1,000,000:00. This project will change international practice of treating PCP, additionally two post graduate students will do their thesis on this study: a Doctoral Nursing Student will earn her doctorate and a Master Level student will do the cost-benefit ratio study.

- UWC post graduate student Felicity Daniels is doing her dissertation research under the guidance of Dr. Kay Libbus of UM on the outcomes of the Master Level Nursing program to begin in January 2005.

Has your partnership adapted curricula or introduced methods of instruction relevant to host country development needs during this reporting period? If yes, fully describe.

Project A: Academic Leadership Development
- The UM model of higher education leadership development has been adapted to the needs and interests of the University of the Western Cape for the development of the leadership capacity of 20% of the current faculty leaders in year one of the training program.

Project B: Nursing Education
- UWC nursing leaders have adopted the use of multiple choice questionnaires. Through a process of research and development, multiple choice exams have been added to the UWC array of assessment tools for undergraduate nurses, replacing some of the term paper and essay style assessment tools that were previously the only assessment tools in use.

Has your partnership undertaken activities to equip individuals for participation in the host country’s workforce? If yes, are some of these efforts targeted to underserved or disadvantaged groups? Please fully describe.

- In the first half of year one of the program 360 new nursing students were enrolled in 2004. The pass rate was 96%. Of the students who did not pass, 100% re-enrolled in the nursing education program in 2005.

- In the second half of year one of the program 300 new nursing students were enrolled in January 2005.

Have there been any synergies, serendipities, or human interest stories for the partnership during this reporting period? If yes, fully describe.
After Professor Jan Persens, ALO project leader from UWC, spoke to a UM community organizing class in the College of Arts and Sciences in Kansas City in fall 2004, students and their Professor began to plan a community service project in South Africa. They raised funds through book sales and a benefit dance, which paid their expenses for a two week community service visit to South Africa in April 2005 with Professor Dr. Tanya Whitehead. Their service learning project was to help prepare an orphanage for children with AIDS who lost their parents to AIDS.

What challenges has your partnership encountered in carrying out its planned activities during this reporting period?

Overall:
During this past quarter our Project Director, Dr. Ron Turner of UM, retired. He has provided leadership from the UM side over an 18 year period to the collaboration efforts between the two universities. While he will be missed, before his retirement Dr. Turner worked closely with the UWC head of project, Dr. Jan Persens and with his UM replacement, Dr. Joel Glassman who will serve as acting project director, to assure a smooth transition.

Project A: Leadership Development

- The Academic Leadership Development Project will need to find a streamlined method for selecting participants. There are 7 schools, known as Faculties. There is space in the training program for 3 persons from each of the 7 Faculties. It has been decided that to meet the needs of the institution to provide capacity building where it most needed, one of the three must be a woman, and two of the three must be Black. There has been discussion around the issue of the correct level of person to train for leadership given that individuals are not appointed to leadership positions but are elected, and each serves in the role of Chair for only 2 years.

- A White Paper is being developed to address the problems of an elected, rotational leadership that lasts only 2 years. It is thought that senior persons in the department have experienced the difficulty that Heads of Departments have in trying to reconcile their management and academic roles, and therefore they do not seek these leadership positions. However, that leaves only junior faculty to serve in leadership capacities, and they do not garner respect from their more senior colleagues.

- There has been some concern that the personality trait psychometric tool used in the Leadership Development Program is not value free. The administration of the Leadership Development Program has begun to seek a South African version of the 360 degree rating tool given to participants in the program in the effort to reduce cultural bias.
Project B: Nursing Education

- The nursing program continues to seek ways to fund the purchase of library materials, computers, and mechanical clinical tools for use in the new, extended nursing program.

- The nursing program continues to work with the South African Nursing Council (SANC) and the South African Department of Higher Education to modernize requirements and to assure effective collaboration between the universities in the Cape Higher Education Consortium.

- Nursing School administration is concerned about how to maintain educational quality given the great increase in the numbers of students enrolled, and the diversity of the students. This is being closely monitored and discussed.
PROJECT A: Developing an Academic Leadership Program at UWC
Project Leaders: Dr. Anita Maurtin-Cairncross (UWC) and Dr. Lora Lacey-Haun (UM)

GOAL OF PROJECT A: Developing an academic leadership program at UWC

Objective 1a: Establishment of an academic leadership program as an ongoing institutional effort to improve operating processes and systems and to support academic leadership development

Objective 2a: An increase in the capacity and capability of faculty interested in academic administration, departmental chair, and other leadership opportunities

Activities for Project A are as follows:

Report from Dr. Anita Maurtin-Cairncross:
As planned, since the April 2004 evaluation report there have been two ‘brown bag’ lunch meetings. These were well attended. The April workshop documents cover the roles and responsibilities of departmental chairpersons as well as the document relating to the ‘availability of academic staff’. These documents will form the basis of the ‘position paper on departmental chairpersons’ which this group of ALP participants have envisioned developing.

Professor Persens addressed the second meeting on matters relating to the acknowledgements of these participants as well as the future of this type of activity at UWC.

On May 27, a workshop was held in the Dentistry faculty in Mitchell’s Plain. This is an off-campus faculty site. The location was based on a request from the Dentistry ALP participants. The agenda had three items, namely,

1. the understanding of workload at UWC – presenter Prof Ridge (acting vice-rector: academic
2. The new remuneration strategy at UWC – Presenter Ms Hambrook-Glaeser (Executive Director HR)
3. Disciplinary procedures for academic and administrative staff at UWC – Presenter Ms. Hambrook-Glaeser (Executive Director HR) & Mr. Hollenbach (manager: Industrial Relations)

This was a very successful exercise which started with the Dentistry staff taking many colleagues, who had not visited this faculty before, on a tour of the facilities.
Professor Ridge provided a very sound and ‘transparent’ guiding framework for departmental chairpersons to use when determining the workload of staff members. This procedure would also illustrate to staff how workloads were designed. Application of these procedures would assist in addressing equity of workloads per staff member.

Ms Hambrook-Glaeser, was not able to attend due to illness but requested another session be scheduled where remuneration strategy could be discussed with these participants.

The session on disciplinary procedures was found to be very informative by all the participants. The many questions indicated the level of engagements of the participants with regard to disciplinary procedures. This item was on the agenda precisely because many participants required clarity around these issues. Documents and policies relating to disciplinary procedures were circulated to participants at their request.

Report from Dr. Lora Lacey Haun
See Appendix for full evaluation report of February 2004 of the Academic Leadership Program (ALP). Based upon this analysis of the Academic Leadership Program (ALP) at mid term via a set of semi structured interviews with ALP participants, there is wide spread general agreement that the program is useful in training new academic leaders at the University of the Western Cape.

Given a generally high level of program appreciation (91%) participants identified relative strengths and weaknesses of the program at mid point.

Among strengths, participants believed that the 360 degree evaluation was both useful and relevant. The organization and pace of the workshops sessions received high marks, as did the major presenter. Most participants liked the meeting format of a shortened week, with free evenings. Many participants would have preferred another month for the workshop.

Participants reported a general sense that the mentoring component of the workshop needs to be better developed, given the high level of interest among participants in engaging in extended peer coaching and mentoring relationships.

This report will be used in planning and implementation of next steps for ALP.
PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa
Project Leaders: Dr. Thembisile Khanyile (UWC) and Dr. Kay Libbus (UM)

GOAL OF PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa

Objective 1b: Development of an Academic Learning Program to assist underachieving students

Objective 2b: Development of appropriate teaching and learning materials for nursing education at UWC

Objective 3b: Revise UWC nursing course syllabi and program, plan outlines and develop report on teaching methodologies and technologies based on analysis of UWC’s nursing program

Activities for Project B are as follows:

Project partners are collaborating in offering two advanced degrees: 1) a MS degree in nursing education to ensure appropriate teaching faculty and 2) a MS degree leading to primary care nurse practitioner preparation. Primary care nurse practitioners do not currently exist in South Africa and are looked upon as a way to increase access to basic health services as well as health promotion and disease prevention services among the large population with limited access to services. Primary care nurse practitioners will also serve an important role in treatment and control of the AIDS and TB epidemics that exist in South Africa.

The following is a report provided by Dr. Thembisile Khanyile, of UWC

During Dr. Thembisile Khanyile’s planning visit to UM in November 2004, the focus was on four broad areas, namely:
- Creative teaching for large student groups
- Clinical teaching and evaluation in large groups
- Research and scholarship development for faculty
- Post graduate programme review (Psychiatric Nursing)

Creative teaching in large classes
Lessons learned were incorporating Evidence Based Practice throughout the undergraduate program, and using Case Presentations during class sessions. From the second semester 2005, UWC will commence with case base approach to teaching and learning and the use of evidence based practice in learning.
Clinical teaching and evaluation
We are going to make use of our Masters students to assist with facilitation of learning in the clinical laboratory. The internship program for senior students will also be introduced in the near future.

Research and scholarship development
At least one collaborative research project is underway between UM/UWC. Prof Libbus and Khanyile. At least three Masters students will graduate from this project and three publications will result from this project. Dr Mbombo will travel to UM in November 2005 to discuss the second research initiative between UM/UWC. One UWC lecture Mrs. Daniles has registered for PhD and will be co-supervised by Prof Khanyile and Dr. Libbus.

There is another possibility of one member, Ms Splinter, who is interested in elderly research who can be co-supervised by the colleagues from UM Columbia.

Post graduate programme review
UM faculty will travel to UWC to assist Nursing with review of the Post Grad. Psychiatric Nursing programme.

Dr. Libbus (MU) has reported that she and her colleagues in Missouri will undertake In-person and online consultations between faculty; support an application for MS in nursing education by UWC faculty committee and nurse practitioner program to the South African Board of Nursing.

Part 2: Areas of Collaboration between UM and UWC
Areas of collaboration for the UM-UMC Nursing Faculties were identified as indicated below. These areas for collaboration will be refined, specified and extended based on data collected by UWC academic staff visits to UM and additional UM visits to UWC.

Teaching

- UWC and UM academic staff work together to develop alternative and innovative teaching methodologies [for example, self-mediated learning materials including capacity development and teaching methods for skills laboratory; use of Internet based assignments, etc.]
- UWC and UM academic staff work together to develop innovative clinical experiences for students. For example, consider the possibilities of allowing students to use a certain percentage of hours of volunteer time as clinical hours; use ‘alternate’ break experiences such as family studies as clinical hours, increased development of practicum that helps meet S.A. and Western Cape Province health goals such as the development of the nursing clinic at Saartjie Baartman Women’s Center.
- UWC and UM academic staff work together to investigate ways in an increasing proportion of active teaching methodologies may be used. For example, developing new methods for teaching the large lecture class and instituting ways in which academic staff can model teaching technologies for each other will be explored.
UWC and UM academic staff work together to develop assessment techniques to minimize academic staff marking time. For example, test construction, increased use of objective types of examinations, use of trained teaching assistants in marking papers, reducing the effort that faculty put into assessing the use of written English rather than the assessment of critical content and skills and other approaches will be explored.

UM and UWC examine ways to increase capacity through working with academic faculty external to the School of Nursing and/or UWC, including the faculties of the UWC School of Public Health and nursing faculties at UCT and Stellenbosch.

UM and UM examine ways to identify and remediate under-prepared students, including: using pre-matriculation or early post-matriculation screening to assess academic readiness and, subsequently, to utilize early referral to campus services.

UWC and UM examine the feasibility of adding post-graduate programs to prepare students for additional service areas in Primary Health Care, including advanced nurse practitioners such as family nurse practitioners, pediatric nurse practitioners or development of a joint MPH-MCUR degree.

Academic Staff Development

- Specific UM academic staff will continue to mentor UWC faculty in areas of both teaching and research.
- UM-UWC continue to move forward on plans to develop courses / modules in advanced nursing education via distance learning to assist UWC academic staff to acquire necessary teaching credentials.

Overview of ALO Project Management Activities

| GOAL OF PROJECT: Engagement in a mutually beneficial inter-institutional project focused on Higher Education Leadership and Administrative Transformation. |
| Objective 1b: Development of a Faculty Leadership Training program at UWC |
| Objective 2b: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa |

Program Management Activities

**Purpose**

UM project director Dr. Joel Glassman engaged in discussions with colleagues at the University of the Western Cape (UWC) in Bellville, South Africa related to the academic exchange program established by UM and UWC in 1986, including: review of 2005 program activities, and plans for 2006 and beyond. These discussions included consultation with the UWC vice chancellor, the UWC director of international relations and representatives of the UWC faculties and departments.
Requirements for verification of contributed UWC and UM staff effort and the need for timely submission of ALO project expenses and requests for reimbursement were reviewed and clarified. The budget was reviewed, and reporting responsibilities were met. Plans for 2006 travel for ALO participants were also reviewed and confirmed.

Describe the extent and nature of engagement of other collaborating U.S. institutions in partnership activities during this reporting period.

Overview provided by Dr Maurtin-Cairncross (UWC):
It is a very positive opportunity for us to have cooperative efforts between the institutions that make up the UM System that will benefit the students, the faculty, the curriculum development and takes us out of a competitive realm and lets us cooperate.

The three campus are cooperating to help UWC school develop a Master (MS) degree in nursing education and we are using courses we have developed and will develop to offer at least 10 of UWC faculty by 2005. Additionally online coursework in nursing education is being arranged through UM and will contribute to opportunity for UWC faculty and graduate students to earn a degree from UWC.

Additional Gains:
- The research output of the department will increase
- The post graduate programme will be more structured and the throughput rates will improve
- A total of two UWC faculty have registered for their PhDs.
- Three students will graduate with Masters Degree after participating in the HIV/AIDS training programs evaluation project.
- The possibility of student exchange between UM/UWC will benefit both faculty and students to participate in a cultural immersion experience.

Has your partnership adapted curricula or introduced methods of instruction relevant to host country development needs during this reporting period? If yes, fully describe.

Project A:
This project will complement and augment the Faculty Development and Staff Development programs that are currently offered at UWC by changing the format and approach to leadership development. Historically leadership development has been provided to entry level faculty to prepare them to serve at the entry level. The new project will provide leadership development to faculty across levels with the purpose of allowing prepared faculty to move upward into leadership positions not only at UWC, but in any institution at which faculty may want to serve. UWC, as the enrolling institution in the Cape Higher Education Consortium, has played an important role in ensuring that the new CHEC curriculum is submitted for internal and external approval by the country’s regulatory structures. As a
result, UWC will be better equipped to meet the CHEC platform challenges for the next years to come.

**Project B:**
UWC has made the decision to adapt new curricula and methods of instruction in undergraduate nursing. Changes agreed upon to date are as follows:
- Shift to concept of active learning under the strong leadership of their director with technical assistance from UM.
- Programs in problem based learning
- Self mediated learning tools
- Develop learning laboratory
- Test construction
- Methods to help students learn to synthesize and analyze information.

Has your partnership undertaken activities to equip individuals for participation in the host country’s workforce? If yes, are some of these efforts targeted to underserved or disadvantaged groups? Please fully describe.

**Project A:**
Yes. The goals of this project are to develop and/or enhance leadership skills for persons in key positions on the UWC campus. The design of the program will enable it to be sustained after the completion of the grant period. Therefore, there is the potential for significant impact on the workforce at UWC.

In addition to seeking persons of historically disadvantaged racial populations, women- a disadvantaged group- are specifically being targeted for leadership development. Mrs. Felicity Daniels has registered for her PhD and will be supervised jointly by Prof. Khanyile and Libbus. Her research topic is: Monitoring and evaluation of the CHEC platform for undergraduate nurse education in the Western Cape. By the end of 2005 she is expected to submit her proposal. It is envisaged that through her study, implementation problems can be identified and resolved in a timely manner.

It is also envisaged that the report of this research can be used to formulate guidelines that can be used by other regions which still have to embark on similar restructuring exercises.

**Project B:**
Yes. We are developing nursing at the request of the South Africa who has stated that nurses will be the primary health care providers in the communities. So the task is to make sure that we educate nurses in that paradigm, rather than in the institutional hierarchy model. They will be the first contact for the community needing health care and they will have to learn to develop analytical skills to serve in that manner.

What challenges has your partnership encountered in carrying out its planned activities during this reporting period?
Major or Emerging Implementation Issues Identified:

The Leadership Program faculty at UWC report that time is often a challenge, but the response, attendance and participation in the monthly meetings has been phenomenal. They report that the attendance rate has been approximately 80% at each of the monthly meetings.

The Nursing project at UWC reports that funding for the clinical skills laboratory remains a concern. UWC has three clinical skills laboratories for the approximately 900 students but there is insufficient equipment for these labs.
Institutional Partnerships Program
Interim Progress Report
October 2005

PROJECT A: Developing an Academic Leadership Program at UWC
Project Leaders: Dr. Anita Maurtin-Cairncross (UWC) and Dr. Lora Lacey-Haun (UM)

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<th>GOAL OF PROJECT A: Developing an academic leadership program at UWC</th>
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<tr>
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Activities for Project A are as follows:

October 2005 Leadership Report from Anita Maurtin-Cairncross:

The monthly meetings of the ALP are a point of connection where participants come together to discuss their respective jobs and the challenges they are experiencing with the view of finding ways to address those challenges. Additionally, participants discuss their future plans as well as UWC’s future.

The July meeting was fairly well attended with a large percentage of faculty however the August meeting had less than 30% attendance. This is typical of activities where attendance is required outside of teaching time (there was a similar trend in the attendance of Staff development workshops).

A recent meeting held on a regularly scheduled meeting date with the Executive Director of Human Resources had 70% attendance. The content of the meeting was the introduction of a new remuneration and reward strategy. Attendees were able to engage the principles and proposed practices that would govern the implementation of the new reward system. The Executive Director of HR noted that she was very impressed with the 'learning community' that had developed in this group.

Additionally, we met with Dr. Ron Turner, the first Project Director for the ALO project before his official lunch hosted by UWC. Sixty percent of the participants attended this meeting and each briefly recounted what being in the ALP had meant to them thus far. These comments were very similar (but more cryptic) than the ones captured in the interviews and provided in an earlier ALO update. Dr Turner expressed his pleasure in meeting the group and re-iterated the importance of sustaining the energy. He was also hopeful that the program would broaden into a regional one where UWC would be regarded as the 'leader' in
leadership development. This is clearly a suggestion which will require inputs at the ‘train-the-trainer’ level. Planning has already begun for the leadership development workshop to be held in February 2006. The leadership development continuation proposal is well underway. It has been submitted to UWC International Relations Committee for review. Currently there are some queries which are outstanding and Dr Maurtin-Cairncross will be able to report in full on this matter in the next three months. The draft proposal can be viewed in Appendix 2 of this document.

The women’s scientific writing group had six potential participants. Everyone attended the first meeting. Attendance dropped a bit over time to the point that during the last three months there were two scheduled meeting where only one or two people attended. There were very valid reasons for this lack of attendance as faculty were engaged in other research-based activities. For example, one participant was at the University of Missouri, St Louis at a partnership meeting, three additional participants were preparing to attend an international conference and thus had to double teach in preparation for their absence. We do intend to 'pick' up the process and hope that each participant will have at least one draft article, which could be developed over the December Vacation for submission for publication, early in the New Year. The most recent meeting, a breakfast, was attended by four of the six women participants. Meetings are continuing on a regular basis.

On October 18 Dr Maurtin-Cairncross met with Prof Persens to initiate planning activities for the next cohort and in this meeting it was resolved that ALP participants would receive certificates as a way of acknowledging their efforts and expression of gratitude by the University’s executive management. Participants will receive the certificates as well as a T-shirt embossed with ALP 2005. At the cohort meeting, scheduled for October 27 the dates on which work to develop the white paper on departmental chairpersons at UWC, will be identified.

The fundamental outcome of the past three months is the embracing of the ALP as an essential and crucial way of developing leadership qualities at UWC. This realization was clearly verbalized at the strategic planning breakaway sessions of the UWC Executive Management team on October 17 and 18 during which Dr Maurtin-Cairncross made a presentation.

Due to the present ad hoc nature of the approach to Academic Leadership development at South African Higher Education institutions, it is safe to say that Academic Leadership development is bound to be an on-going activity. To some extent it simply means that such ALP’s should be institutionalized, otherwise quality will suffer. UWC is nowhere close to be in a financial position to go to scale with an ALP. However, judging from the response and comments of the UWC Executive Management team, in particular the support of the Executive Director for Human Resources, Ms Amanda Hambrock-Glaeser, it is clear that there is a great awareness of the need for an institutionalized ALP. This is a good beginning. In the meantime external funding will have to be sourced.
PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa
Project Leaders: Dr. Thembisile Khanyile (UWC) and Dr. Kay Libbus (UM)

GOAL OF PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa

Objective 1b: Development of an Academic Learning Program to assist underachieving students

Objective 2b: Development of appropriate teaching and learning materials for nursing education at UWC

Objective 3b: Revise UWC nursing course syllabi and program, plan outlines and develop report on teaching methodologies and technologies based on analysis of UWC’s nursing program

Activities for Project B are as follows:
Visit was made by Dr. K. Libbus to UWC, September-October 2004. The purpose of the travel was to follow up on progress made according to objectives of Project B as described above. A daily log and formal outcomes report may be viewed in their entirety in Appendix 4.

Specifics of Dr. Libbus’ visit to UWC, September 21-October 1, 2005 are as follows:

- Meeting with T. Khanyile and Normafrench Mbombo to discuss agenda for visit. Khanyile, Mbombo, & Nikodem currently are serving as executive committee in decision-making for the school of nursing at UWC. Mbombo has assumed the role of undergraduate program leader and Nikodem heads the graduate program and research program leaders. Faculty are cooperating and working closely to achieve the work of the school.

- Meeting with Dr. Cheryl Nikodem to discuss her visit to MU October 17-27, 2005 and a tentative itinerary was presented to her. She agreed with most of it but wished, additionally, to meet with Bill Folk, who is the co-investigator for the MU-UWC indigenous medicine grant.

- Staff meeting with all faculty. Khanyile and Mbombo presented parallel curriculum plans. CHEC Curriculum implementation began with admission of January, 2005 class. 2nd, 3rd, and 4th year students continued in pre-CHEC curriculum. The last student group in ‘pipeline’ (pre-CHEC curriculum) should theoretically graduate at the end of 2008. Classes, clinical experiences, and responsibilities were presented for 06, 07, 08, and 09 for CHEC only. A number of very positive changes are taking
place at the UWC school of Nursing. Several academic staff from the School of Public Health and the other nursing institutions in the Western Cape (Stellenbosch and University of Cape Town) are scheduled to teach specific modules. The inclusion of the SPH faculty occurred during this planning year. The two Satellite laboratories at Tygerberg and Groote Schuur Hospital are equipped and operational.

- Specific deficiencies in staff and clinical experiences were discussed and plans to remediate these deficiencies were discussed. The plans for 2006 were approved and these plans are to be used as a basis for the 2006 budget request from the University.

- Brief discussion with T. Khanyile regarding beginning the joint UWC-UM Masters in Nursing Education program. The South African Nursing Council has not yet approved the proposal although it is possible that students may begin to matriculate into the program and take some preliminary courses. I communicated the importance of having some lead time so we could plan for taking their students into our on-line nursing education courses.

- Met with two thesis-only MCur students for whom Libbus will be co-supervisor. Received the proposal of Andile Msimango 10 days ago and had made extensive corrections and suggestions to his proposal. He will return the corrected proposal to Libbus electronically in US and I will read and respond to him. Received Nembhe proposal and will meet with her in several days. These two theses are off-shoots of Professor Khanyile’s UMSAEP research proposal to assess community based AIDS-HIV education and care in the Western Cape Metropole. Mr. Msimango is doing a descriptive analysis, assessing the HIV- AIDS teaching programs of Government-Based Organizations, Non-Governmental Organizations, and Faith Based Organizations. Ms. Nembhe will be assessing the effectiveness of AIDS-HIV teaching programs on participant knowledge and attitude using and pre-test, post-test design.

- Met with Dr. Richard Madsen, statistical consultant, and the two post-grad students regarding their study design. Since these are thesis-only students, they have had no course-work in statistics or research design. Dr. Madsen made suggestions related to design and analysis. Both students will attempt to meet with him again before he leaves UWC October 21, 2005.

- Met with Professor Nikodem and her research assistant regarding the new E-Journal that UWC is trying to publish, Journal of Community and Health Sciences. I discussed their ideas and made suggestions as well as agreeing to serve on the editorial review board and to solicit manuscripts for them when they are up and running. The journal has been approved by the powers that be including Dr. Ratie Mpofu, Dean of the College of Community and Health Sciences, of which Nursing is a department.

- Discussion with Professor Nikodem regarding faculty progress in gaining advanced degrees. Ms. June Jeggels is probably the closest to gaining her doctorate in nursing. She has collected data and has begun data analysis. Her dissertation concerns
perceptions of home-based care of the elderly. Mrs. Hester Julie and Mrs. Felicity Daniels are in proposal development stages for their doctoral dissertations. Mrs. Julie has applied for the 2006 UMSAEP program to come to UMSL. Ms. Audrey Splinter is in the proposal development stage for her MCur thesis and is exploring perceptions of Elderly Abuse in the Western Cape Metropole. She also has applied for the 2006 UMSAEP program and is due for a sabbatical leave this upcoming academic year. Professor Nikodem also shared with me the mini-theses for the two MCur students who are graduating.

- Discussion with Ms. Audrey Splinter regarding her MCur thesis proposal. I have already connected her with Dr. Myra Aud, assistant professor at the University of Missouri-Columbia, who is willing to co-supervise her thesis. I told her that when I return to US, I would attempt to find to world-wide prevalence figures for abuse of the elderly and forward the references to her.

- Attended University graduation. The first Nursing PhD student received had degree as well as two MCur students.

- Discussion with Dr. Renfrew Christie, Research Dean, regarding research at UWC.

- Meeting with Phophi Nembahe regarding her MCur Thesis. Gave extensive feedback on her proposal and made suggestions for research design.

- Meeting with Prof Khanyile to review CHEC plans for 2006.

- Meeting with Prof Mbombo to discuss her visit to University of Missouri. She will plan to arrive in St. Louis and travel to Columbia by shuttle on approximately the 8th of November. She will be with MU faculty until November 11 at which time she will either return to St. Louis to go to the International Sigma Theta Tau Meeting in Indianapolis, In with the UMSL faculty. She will leave from Indianapolis or St. Louis for South African, probably November 17 or 18.

- Assisted in facilitating all day School of Nursing Workshop on SON 5-year strategic plan. The purpose of this workshop was to set achievable goals and evaluation criteria to be met before 2010.

- A Teaching Goal was set: To increase the throughput rate of undergraduate students by 5% - from 80 to 85%. Action plan includes: A) Reviewing admission criteria with the intent to meeting the general education requirements of UWC; Faculty would like to have students enter who are able to do the work for life sciences and who are math and English literate; plan to encourage students to participate in the academic development plan. Explication of the student Bursary payments will also be sought in order to help students focus on academic matters. B) A second plan for increasing the throughput rate is to improve the skills of academic staff. Five faculty will visit the Netherlands in January 2006 to for a NUSSIF skills training program, designed to assist faculty teaching skills. These academic staff will return to UWC and mentor
other academic staff in regular in-service workshops and by using peer assessment. C) Improve the student evaluation tool; D) Continue performance review for Academic Staff. E) Improving systems of teaching/learning by considering approaches such as blocking classes, especially midwifery in the 4th year.

- Research Plan: To increase the body of nursing knowledge through post-graduate nursing education and research. Action Steps are:  a) Develop guidelines for post-graduate program, reorganize the selection criteria to recruit the best post-graduate students; b) encourage basic knowledge of computer literacy and research methodology by encouraging students and faculty to attend computer training sessions; d) Develop mentoring programs for research supervisors including PET programs and skills development; d) Develop academic staff review panel for student proposals; e) Encourage academic staff to include post-graduate students in their research; f) Develop Mock Review panel for academic staff grant proposals – ask academic staff which of their peers they would like to review their proposals. Include appropriate deadlines for proposals so reviewers will have time to read and respond; and g) Submit manuscripts for publication in JCHS.

- Meeting with Professor Jan Persens regarding status of ALO nursing project.

- Consultation with Felicity Daniels and Thembi Khanyile regarding Felicity’s Dissertation proposal. She will be evaluating the CHEC platform curriculum and plans to complete this in approximately three years. Contacted Dr. Louise Miller, UMC, who is experienced in this type of research. She agreed with work as co-advisor for Daniels.

- Consultation with Ms. Hester Julie regarding her dissertation proposal. She will develop and test a model for evaluation of service learning in nursing students. Her co-adviser will be Dr. Donna Taliaferro of UMSL.

- Site Visits with Andile Msimango and Phophi Nembhe to HIV-AIDS training programs. Discussion of facilitating their research.

- Attended post-graduate seminar for student and academic staff to learn to use Research Toolbox. Attended 30 minute lecture on measurement and research and reliability and validity

There was also a visit from C. Nikodem to Missouri this Quarter to discuss undergraduate and postgraduate education as well as research collaboration. Her report (written on the fly since she is still here as the report is due) can be found in Appendix 2 of this document.

As described above, Dr Nomafrench Mbombo will visit UM in November 2005.

Dr Thad Wilson from UMKC will visit UWC in April 2006. The main purpose of his work at UWC will be to conduct a situational analysis for the Masters in Nurse Practitioner program. In regard to Future Funding there has been no progress to date.
Areas of Collaboration between UM and UWC

Areas of collaboration for the UM-UMC Nursing Faculties were identified as indicated below. These areas for collaboration will be refined, specified and extended based on data collected by UWC academic staff visits to UM and additional UM visits to UWC.

Academic Staff Development

Specific UM academic staff will continue to mentor UWC faculty in areas of both teaching and research.
- Wilson: NP
- Libbus: Distance education and research
- Fonza: Mental Health Nursing
- Taliaferro: Research
- Stieglitz: Distance learning. Areas emphasized were Blackboard based learning, distance education, master’s track in education, primary care, establishment and maintenance of nursing clinical skills lab (and the UM “Sim Man”) a computerized practice model), problem based learning, and integrating change into established curricula and established faculty.

UM-UWC continue to move forward on plans to develop courses / modules in advanced nursing education via distance learning to assist UWC academic staff to acquire necessary teaching credentials. This is still in South Africa Nursing Council waiting for approval. Plans are in place at UM level to go forward when approval received. Dr. Libbus will be meeting with UMKC regarding this November 9, 2005.

Overview of ALO Project Management Activities

GOAL OF PROJECT: Engagement in a mutually beneficial inter-institutional project focused on Higher Education Leadership and Administrative Transformation.

Objective 1b: Development of a Faculty Leadership Training program at UWC

Objective 2b: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa

Program Management Activities

We have a new project director for our final portion of the project. Prof. Rodney Uphoff is a seasoned international scholar from the University of Missouri- Columbia, School of Law and the project is fortunate to have his direction and encouragement in the final and most challenging stages. His CV is attached in Appendix 4.
Professor Uphoff has spent the past four summers working with the law faculty at the University of Western Cape. He created a study abroad program for American and UWC law students that he co-directed for the past two summers with Prof Pierre du Vos of UWC. Over the past quarter UM project director Dr. Rodney Uphoff engaged in discussions with colleagues at the University of the Western Cape (UWC) in Bellville, South Africa related to the academic exchange program established by UM and UWC in 1986, including: review of 2005 program activities, and plans for 2006 and beyond. These discussions included consultation with the UWC vice chancellor, the UWC director of international relations and representatives of most of the UWC faculties and departments.

Professor Uphoff started his tenure with the project by reviewing and clarifying requirements for verification of contributed UWC and UM staff effort and the need for timely submission of ALO project expenses and requests for reimbursement. The budget was reviewed by the project directors, and reporting responsibilities were discussed. Plans for transport of 2,700 nursing books offered as a gift to UWC from Assessment Technologies Institute, LLC (ATI) were also reviewed and confirmed.

**How have the activities benefited (or will they ultimately benefit) the U.S. institution?**

**How have they benefited the community surrounding the U.S. institution?**

**Project A**
The activities of the Leadership Development Project has already had a significant impact on both the UWC and the UM systems. The cross cultural exchange of issues and strategies is rich and will ultimately strengthen many UM faculty and staff who will be participating in this project with the representatives from UWC. The impact of this project will exceed the boundaries of the university as national consultants will engaged in the program development.

**Project B:**
The faculty and students of the Sinclair School of Nursing at the University of Missouri and the wider UM system will benefit educationally from the cross-cultural relationship with the UWC faculty and eventually hopefully their students. We have established some student exchanges, examining nursing assumptions from a different cultural lens, and it will improve our teaching as we improve how we deal with diversity. We hope to build additional cross-cultural exchanges so our students will benefit from living in their culture. We hope to develop trans-cultural nursing questions that will lead to improved health in both populations and which will develop additional funding streams that will improve funding overall.

**How has your partnership strengthened host country higher education institution during this reporting period?**

There is a dearth of Academic leadership in South Africa at all levels. Much of this state of affairs has to do with the non-professional and ad hoc manner in which leadership is generally viewed. The results of the overall ALP program as a professional development program have already impacted on the way leadership development is perceived at UWC. With the development of a ‘train-the-trainer’ program, as already envisaged by UWC as well
as the potential development of UWC as a trainer center for academic development, South African higher education stands to gain from the results of this ALO funded program.

**Project A:**
This project will complement and augment the Faculty Development and Staff Development programs that are currently offered at UWC by changing the format and approach to leadership development. Historically leadership development has been provided to entry level faculty to prepare them to serve at the entry level. The new project will provide leadership development to faculty across levels with the purpose of allowing prepared faculty to move upward into leadership positions not only at UWC, but in any institution at which faculty may want to serve. UWC, as the enrolling institution in the Cape Higher Education Consortium, has played an important role in ensuring that the new CHEC curriculum is submitted for internal and external approval by the country’s regulatory structures. As a result, UWC will be better equipped to meet the CHEC platform challenges for the next years to come.

The CHEC curriculum has gone through several updates since the inception of this curriculum with representatives of all nursing schools and CHEC meeting regularly. The South African Nursing Council has approved the curriculum. UWC taught year one of the CHEC curriculum with the intake of first year students beginning January, 2005. Plans are thoroughly outlined for the four years of the CHEC curriculum as well as completing the existing 2nd, 3rd, and 4th year students are in the original nursing program.

**Project B:**
UWC has made the decision to adapt new curricula and methods of instruction in undergraduate nursing. Changes agreed upon to date are as follows:

- Shift to concept of active learning under the strong leadership of their director with technical assistance from UM.
- Establish programs in problem based learning
- Increase use of self mediated learning tools
- Develop a learning laboratory
- Use new techniques in test construction
- Implement methods that will help students learn to synthesize and analyze information.

**Have there been any synergies, serendipities, or human interest stories for the partnership during this reporting period? If yes, fully describe.**

One synergy has been that an American publisher (Assessment Technologies Institute, LLC (ATI)) of nursing content mastery review books for Bachelor Level nurses donated a set of 2,700 books to the School of Nursing at UWC. Through a longstanding program managed by Dr. Nick Peroff of the University of Missouri- Columbia funding was arranged from various sources. The School of Nursing at Kansas City, under the direction of Dr. Lora Lacey Haun, Dean and funding from the ALO US AID project was used to augment other monies for the transport of the nursing textbooks to UWC.
What challenges has your partnership encountered in carrying out its planned activities during this reporting period?

Major or Emerging Implementation Issues Identified:

The Leadership Program faculty at UWC report that time is often a challenge, but the response, attendance and participation in the monthly meetings have been lessened as of late. This attendance tendency can be improved by a different approach to the scheduling of meetings and activities. Sometimes the periods close to the end of terms present unexpected challenges for departmental chairpersons, especially those who are first time incumbents. Certainly this downward tendency in attendance during a particular period can also be used as an instrument for a particular aspect of academic leadership development. Despite the difficulties encountered in helping faculty find the time to participate the clear gains are compelling and continue to interest faculty who make every effort to participate on an ongoing basis.

Appendix 2: Application for continuation grant of Leadership Program

By Anita Maurtin-Cairncross

Name/Title: Anita Maurtin-Cairncross Ph.D
Department/Campus: Office of Staff Development: UWC
Campus Address: Room 38.7, Gold Fields Building Phone: 27 21 959 2514
Fax: 27 21 959 1334
E-mail: amaurtin-cairncross@uwc.ac.za

Proposal Abstract (Include a brief statement of the problem or need being addressed, the intended outcomes/objectives of the project, the project methodology, and the project timeline):

LEADERSHIP DEVELOPMENT PROJECT

Academic leadership development at middle management level has not yet become an organic aspect of tertiary education in South Africa. It is also known that generally there is a dearth of leadership capacity at South African Universities. For this reason the American Council on Education has provided leadership development opportunities at senior management level. But this problem is also prevalent at lower levels for which insignificant training provision is made at the moment. Where such training opportunities exist, they are usually of a generic nature and not sector specific.

The proposed project is aimed at leadership capacity development at UWC. This intervention would include participants from both the academic and the administrative sectors of the institution. The leadership development program would serve a sector in the institution which requires a strong capacity building and interfacing component. This request is based on and inspired by the outcomes of a first academic leadership workshop held in February of this year (2005) involving 14 academic HODs and which was funded by a grant from the Association Liaison Office (ALO) in Washington, DC. It is envisaged that the proposed intervention would provide an opportunity for firstly, leadership capacity building of another group of HODs, both academic and administrative, and secondly, for the development of a cadre of internal facilitators who would be able to sustain
Thus, the proposal is for a UM colleague(s) to visit UWC for two purposes: to facilitate a four-day workshop for departmental chairpersons (academic participants) and heads of departments (administrative support participants); and also to facilitate a four- to five-day train-the-trainer program for participants who have completed the leadership development program, and have been identified by the facilitator in conjunction with UWC project team members. Four or five participants of the February 2005 workshop have already been selected for the train-the-trainer program to be covered by this proposal.

This project will have a two year time span in order for the program to have sufficient UM-input and UWC development to ensure the sustainability of the project. This time-frame would enable the project team to have conducted a SWOT analysis of the program and to develop interventions for further and continuous improvement of an institutionalized leadership development program. Therefore the proposal timelines are June 2006 – May 2008

Proposed budget, including matching funding (use attached budget form):

Amount requested: R 53 500.00
Matching: R 43 000.00
TOTAL: R 96 000.00 (FOR YEAR 1)

NB: FUNDS REQUESTED FROM THE EXCHANGE PROGRAMME MUST NOT EXCEED THE AMOUNT MENTIONED ON PAGE 1.

Attach a detailed narrative proposal (maximum of 5pgs.) and a detailed budget.

Signature of Applicant: ___________________________ Date:

Signature of department chair and/or dean: ______________________ Date:

Please attach:
1) your curriculum vitae,
2) a letter of endorsement from your chair and/or dean, and
3) a letter of commitment from your University of Missouri collaborator.

*BUDGET SUMMARY ON THE FOLLOWING PAGE*
### BUDGET SUMMARY

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<tr>
<th>Item*</th>
<th>Amount requested from UMSAEP</th>
<th>Amount funded by other sources**</th>
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<td>2. Conference Facility</td>
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</tbody>
</table>

*Attach a brief description justifying each budget item.

**Please identify the source(s) of matching funds.

### BUDGET JUSTIFICATION

1. Airfare: Estimated price of tickets for 2 facilitators for 2 weeks
2. Room and board: For 14 days for 2 facilitators
3. Ground transportation: Car to be shared by the 2 facilitators.
4. Personnel Administrative assistant to be paid by UWC
5. Materials and printing: UWC to fund materials, printing
6. Communication:
Facilitators’ mobile phone hiring
Landline, fax and internet costs to be carried by UWC

Other expenses: UWC to fund Testing materials and Analysis of psychometric measurements and Conference facility.

Rationale:
The impetus for this project is provided by UWC’s expressed interest in working with faculty at the University of Missouri (UM) in the development of an academic leadership program. This interest stems from UWC’s conviction of the impact of top class academic leadership and its awareness of UM Academic Leadership Institute which prepared faculty members from the four UM System campuses for leadership positions as department chairs, deans and academic administrators. In an ironic sense, UWC has become the victim of its own success in informal academic leadership development in the past in that a substantial number of its faculty, administrators and alumni had been attracted to other higher education institutions in South Africa. In order to sustain its own need for academic leadership, UWC must now consider a more explicit and institutionalized way of developing its cadre of academic leaders. The increasingly demanding nature of higher education practices in South Africa, coupled with a reduction of funding as a result of needs in other social welfare areas such as health, housing, primary and secondary education and poverty, require innovative responses from academic leaders at higher education institutions. Deans and directors are now called upon to carry out executive functions more explicitly. These include managing of their faculty’s/unit’s budgets at a time of fiscal pressures, mergers and incorporations, playing a more significant role in academic planning and review exercises, raising funds for scholarships, buildings and endowed professorships, ensuring compliance to a range of statutory requirements, managing enrolment into their faculties/units., and providing leadership in the establishment of student support and development programs. In some of these activities, deans and executive members are supported by heads of academic departments and managers of administrative support units. However, due to a lack of experience among some of these colleagues, closer supervision is required. Scarcity of funds also makes mistakes very costly. UWC is, therefore, seeking to enhance the leadership qualities of a range of its academic leaders and administrative managers. Thus, in addition to enhancing the role of departmental chairpersons in this regard, there is also a need to strengthen the knowledge and skills of academic heads of departments and managers of administrative units. Training and development of their skills in academic administration is crucial for they impact directly on academic achievements of staff and students, in particular efficiency of administration of prerequisites for certain course offerings and programs, proper registration, and accurate administration of course selections. In the modern day higher education landscape in South Africa, leadership capacity in institutional research, grant and contract administration, fundraising and human resource development has become inevitable. UWC has a proper understanding of these aspects but lack the infrastructure and required finances to ensure the development of the concomitant skills. Representatives of the UM Academic Leadership Institute will work with UWC academic administrators and faculty members to design, implement and evaluate a leadership program relevant and appropriate for the UWC context as a result of the proposed project.

Leadership Development Program Participants
The person responsible for the operationalizing of the program will be Dr Anita Maurtin-Cairncross, who is the Manager of Staff Development at UWC, and who reports directly to the Deputy Vice Chancellor (DVC) for Academic Affairs. She also works closely with Ms Amanda Hambrook-Glaser, Executive Director for Human Resource Development at UWC. UM faculty will work with counterparts at UWC to design and implement an academic leadership program at UWC in order to build the support necessary to develop academic leaders to address the goals of the University Strategic Plan. The DVC’s involvement is very appropriate since the deans of UWC’s seven
faculties report to this office. The DVC also chairs UWC’s academic planning efforts. In turn, all
directors of centres, units, schools, institutes and divisions report to deans.

Over the two-year span of the proposed project UWC envisages to sponsor visits for UWC
participants on the leadership development program to participate in the UM Academic Leadership
Institute activities where they will lead seminars for UM faculty on leadership issues in the South
African context.

Program Activities
Leadership development programs should assess individual strengths and weaknesses, offer
constructive feedback to participants, and provide on-going support. The goal should be enhanced
development of an academic and administrative leader that a) provides followers with a clear sense
of purpose that energizes followers, creates a shared vision, and provides a role model for ethical
behaviour; b) encourages followers to question traditional ways of problem solving and to improve
the work process methods; c) requires understanding and addresses the individual needs of all
workers and helps them to develop their full potential; d) clarifies expectations for followers and articulates what they can expect if they meet these levels of performance; and e) focuses on
monitoring tasks. (Graham, S.W. & Robinson, D.G. 2003)
The program must be tailored to match organization goals and create a network of organizational
support to ensure the likelihood of sustained change and organizational impact. (Graham, S.W. &
Robinson, D.G. 2003). The success of the Leadership Development Program will be evaluated by
the achievement of objectives over the 2 year grant period.

Envisaged Outcomes
Upon the completion of year 1, the UWC and UM will have:

1) Initiated the first session of a year long leadership development program designed to
meet the needs of UWC. Selected activities may include: a) long workshop; b)
meetings, interviews and other appropriate interactions between UWC and UM
counterparts, c) on-line case studies between UM and UWC program participants d) on-
line threaded discussions addressing individual questions or issues, f) periodic group
meetings by UWC participants with focused discussion topics, g) use of UM web
resources for Leadership Development.

2) Developed the infrastructure and plan for identifying and retaining women faculty as
potential academic leaders

Upon the completion of year 2, the UWC and UM will have:

1) Completed the first session of the Leadership Development Program
2) Achieved leadership training in areas identified as needs by UWC.
3) Established the structure and resources for sustaining the Academic Leadership Program.
4) Initiated the 2nd cycle of this Leadership Development Program which is a follow-up to
the ALO sponsored pilot program scheduled to be completed by February 2006.

A team of experts from the UM system will be assembled to participate in this project as needed.
Other faculty, staff and administrators will be participating in the program once the final needs of
UWC are identified and the appropriate experts in the UM system are identified.

It is anticipated that, while the UWC representatives are at UM, a variety of additional events will be
scheduled to allow the faculty and staff from the different campuses within the UM system to benefit
from the knowledge and expertise UWC colleagues bring to share with UM colleagues.
Interim Progress Report  
April 2006  
Partnership Title: ALO Leadership Development at the University of the Western Cape

QUALITATIVE ANALYSIS

1. In one or two sentences, state the overall objective of this higher education partnership and its intended development results.

Background Information

The USAID Cooperative Agreement with the American Council on Education (ACE) seeks to mobilize the resources of U.S. higher education in support of international development cooperation. To build capacity in academic leadership and nursing education at the University of Western Cape (UWC) in Cape Town, South Africa this partnership is developing an academic leadership program at UWC and revising and restructuring UWC’s nursing curriculum to accommodate the needs of 21st century nursing students in South Africa.

As a result of the partnership activities it is anticipated that UWC’s capacity, in both academic leadership and nursing education, will be increased.

2. In approximately 200 words describe the development issue the partnership addresses and the most noteworthy development outcomes that have occurred during the reporting period, whether intended or unintended, and their significance.

Development/Outcomes To Date:

The main objective of Project A of the partnership is to assist UWC with leadership capacity building among faculty, particularly those from minority populations or traditionally underserved areas. Following the workshop held in March 2005, the leadership group continues to meet monthly as do the women in the peer mentoring group. The outcomes of Project A have been well-received by the UWC senior management and the project is seen as an example of what can be achieved in human resource development at a particular level with the assistance of partner institutions. Indeed, given the success of the first leadership group, UWC senior leadership urged the ALP directors to expand the program to include administrators. During the reporting period, two additional workshops were held in Feb. 2006. Thus, there is now a mechanism in place for the ongoing development of faculty with leadership potential.

The main objective of Project B of the partnership is to assist UWC School of Nursing with the development of a curriculum that aims to educate an increased number of students while
ensuring a balance between quantity of access and quality of the programs offered by the UWC Nursing Department. During the reporting period, Nomafrench Mbombo visited Missouri and Professors Thad Wilson and Margie Fonza visited UWC. These exchanges have furthered the goals of sharing teaching methodologies and developing collaborative relationships including co-advising of UWC Masters and Doctoral Students in Nursing. These collaborations will result in more well prepared faculty for the UWC Nursing School. Research collaborations continue and possible research links for future projects have been identified. Most importantly, Thad Wilson worked with his UWC colleagues to develop a curriculum for a nurse practitioner program that has the potential to significantly benefit South African nursing students and their patients.

3. What activities have the partner institutions undertaken during this reporting period to achieve the stated partnership objectives and development outcomes?

Project Activities:
Activities under this agreement for this reporting period began on October 31, 2005 and will conclude on April 30, 2006.

Partnership directors Jan Persens of UWC and Rod Uphoff of UM met in Columbia in Nov. 2005 to discuss the partnership progress. They were pleased with the progress made in both areas of activity: Faculty Leadership and Nursing Education. The directors agreed that efforts must be made to extend the lifespan of both projects in order to ensure that there is no backward movement in what has been achieved. One outstanding outgrowth of the HED project will be that Dr. Anita Maurtin- Cairncross will carry on the work of the Leadership Program via a series of Train the Trainer workshops for a group of UWC department heads and a consultation program, selected from the initial leadership program, who will carry the new training in leadership to faculties in other locations in Africa. In addition, Dr. Persens observed that the voluntary cooperation by the three heads of department in the Faculty of Dentistry is an encouraging by-product of the scheduled monthly meetings by the ALP cohort. This is sign that the participants are not only accepting ownership of the leadership development process, but are actively engaged in transforming higher education in South Africa. In the second HED project, Nursing Education, an unprecedented number of nursing students are matriculated in undergraduate nursing education, with an additional 15 students in a Master Level nursing program that is a direct outcome of the USAID- HED funded project for higher education development partnerships.

Reports on project activities are provided below for Project A and Project B below, as indicated. Following the reports, major and/or emerging implementation issues are noted and appendices are provided. A final report is forthcoming on May 1, 2006.

PROJECT A: Developing an Academic Leadership Program at UWC Project Leaders: Dr. Anita Maurtin-Cairncross (UWC) and Dr. Lora Lacey-Haun (UM)
GOAL OF PROJECT A: Developing an academic leadership program at UWC

Objective 1a: Establishment of an academic leadership program as an ongoing institutional effort to improve operating processes and systems and to support academic leadership development

Objective 2a: An increase in the capacity and capability of faculty interested in academic administration, departmental chair, and other leadership opportunities

Activities for Project A are as follows:

Leadership Report from Anita Maurtin-Cairncross and Lora Lacey-Haun:

The monthly meetings of the ALP continue to provide a popular point of connection where UWC faculty and administrators come together to discuss their respective jobs and the challenges they are experiencing with the view of finding ways to address those challenges. Even though the program was initially designed with a one year commitment from participants, the group has decided to continue with quarterly workshops and/or meetings on topics relevant to them in their roles as Departmental Chairs. The first of these workshops took place on the 23rd of March and focused on an Accountability Document which was recently submitted to the Senate. In addition, the implementation of leave for academic and administrative support staff will be discussed.

Because of the success of the first leadership group, UWC senior leadership encouraged the ALP planning team to expand the program to include administrators. As a result, the name was changed from Academic Leadership Program to Leadership Development Program.

A second workshop was planned by Dr. Maurtin-Cairncross and Dr. Lacey-Haun and then held in Feb. 2006 with the assistance of Dr. Rob Williams. The Year 2 participant group was comprised of 8 academic faculty and 3 administrators. Informal evaluations of the 4-day workshop indicated that the participants found the workshop to be a valuable learning experience. This group recently had their first monthly meeting. Plans are also being made to integrate the ALP and the LDP groups throughout the coming year.

In addition, a select group of the original ALP participants were trained at a Train the Trainer workshop event held over a weeklong period in late Feb. 2006. These workshops were a tremendous success and have put into place a viable leadership development program.

An outcome of this project is the elevation of academic leadership development from an ad-hoc activity to an institutionalized process. Unfortunately, UWC is not currently in a financial position to fully adopt an ALP like that at the University of Missouri. Nonetheless, because participants have found the program so meaningful, efforts are underway to seek additional funding to sustain the leadership development program until such time that internal funding can sustain the program.
A secondary objective of the project has been to focus on women’s leadership development. The program participants for both the LDP and ALP were identified and invited to participate in ongoing activities to assure female participation. The Women’s Writing group which organized during Year One regrouped to continue their support in the coming year. The Dental faculty women who participated the first year collaboratively discussed papers which have been presented in Kuwait. Several papers related to this project will be presented in international conferences in the coming months.

**PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa Project**

**Leaders: Dr. Thembisile Khanyile (UWC) and Dr. Kay Libbus (UM)**

<table>
<thead>
<tr>
<th>GOAL OF PROJECT B: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa</th>
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<tr>
<td><strong>Objective 1b:</strong> Development of an <em>Academic Learning Program</em> to assist underachieving students</td>
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<tr>
<td><strong>Objective 2b:</strong> Development of appropriate teaching and learning materials for nursing education at UWC</td>
</tr>
<tr>
<td><strong>Objective 3b:</strong> Revise UWC nursing course syllabi and program, plan outlines and develop report on teaching methodologies and technologies based on analysis of UWC’s nursing program</td>
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**Activities for Project B are as follows:**

The Action Plan for the final months of the project included:

A) Reviewing admission criteria with the intent to meet the general education requirements of UWC. Nursing Faculty would like to have students enter who are able to do the work for life sciences and who are math and English literate. The Faculty expect to encourage students to participate in the academic development plan. Explication of the student Bursary payments will also be sought in order to help students focus on academic matters.

B) A second plan for increasing the persistence to graduation rate is to improve the skills of academic staff. Five faculty visited the Netherlands in January 2006 for a NUSSIF skills training program, designed to assist faculty teaching skills. These academic staff returned to UWC and now mentor other academic staff in regular in-service workshops and by using peer assessment. This training allows UWC faculty to grow as they build off the observations of teaching and skills training and discussions with their American and Dutch colleagues.
C) Improve the student evaluation tool

D) Continue performance review for Academic Staff.

E) Improving systems of teaching/learning by considering approaches such as blocking classes, especially midwifery in the 4th year.

**In addition, a Research Plan was formulated including the following goals:** To increase the body of nursing knowledge through post-graduate nursing education and research. Action Steps in the area of research were:

A) Develop guidelines for postgraduate program, reorganize the selection criteria to recruit the best postgraduate students;

B) encourage basic knowledge of computer literacy and research methodology by encouraging students and faculty to attend computer training sessions;

C) Develop mentoring programs for research supervisors including PET programs and skills development;

D) Develop academic staff review panel for student proposals;

E) Encourage academic staff to include postgraduate students in their research;

F) Develop Mock Review panel for academic staff grant proposals – ask academic staff which of their peers they would like to review their proposals. Include appropriate deadlines for proposals so reviewers will have time to read and respond; and

G) Submit manuscripts for publication in JCHS.

During this reporting period, Nomafrench Mbombo visited three of the Missouri campuses to explore additional means of strengthening the UWC nursing curriculum by observing teaching techniques and courses that were working well at UM. Additionally, she continued the project’s focus of identifying more opportunities for collaborative research in areas of mutual interest. Finally, she discussed funding possibilities with her Missouri colleagues and ways to sustain progress made under this ALO grant.

Dr Thad Wilson from UMKC visited UWC in March-April 2006. The main purpose of his work at UWC was to conduct a situational analysis for the Masters in Nurse Practitioner program. Wilson and his UWC colleagues met with national nursing associations and government officials to assist UWC faculty to educate leaders in government about the needs of nursing educators and initiate a new Advanced Practice nursing program in South Africa.
Dr. Wilson worked with the UWC School of Nursing in the development of an Advanced Practice Nursing curriculum. He also assisted with efforts to change current regulations to allow Advanced Practice Nurses to practice.

The outcomes of Dr Wilson’s visit in April 2006 included:

1. Meet with representatives from the South African Nursing Council to discuss legislation or regulation to allow Advanced Practice Nurses (APN) to be recognized.
2. Work with faculty from Department of Nursing at UWC to develop strategies for persuading physicians and pharmacists to support efforts for APN practice.
3. Meet with representatives from the South African Medical Council to discuss legislation or regulation to allow APNs to be recognized.
4. Meet with representatives from the South African Pharmacy Council to discuss legislation or regulation to allow APNs to be recognized.
5. Meet with Provincial Government representatives to discuss legislation or regulation to allow APNs to be recognized.
6. Meet with representatives from the South African National Council for Research to discuss funding for studies related to APN outcomes.
7. Work with faculty from Department of Nursing at UWC to develop educational outcomes for the APN program, building from current BSN outcomes.
8. Work with faculty from Department of Nursing at UWC to develop a MSN curriculum for APN education, building on current BSN curriculum.
9. Work with faculty from Department of Nursing at UWC to develop a plan for funding APN education – teachers, space and equipment, scholarships, etc.

Marge Fonza of UM system also went to UWC in April 2006 with the following goals:
To meet with UWC Mental Health Curriculum faculty and to provide consulting/advising in the following areas:

a. Assisting in developing case studies relevant for the undergraduate mental health program;

b. Collaborating in designing a skills training program and assessment tools for basic mental health nursing;

c. Reviewing the current Mental Health Program in line with the regulatory body’s requirement for undergrad and post graduate levels;

d. Harmonizing the existing mental health program with the newly developed curriculum.

Areas of Collaboration between UM and UWC

Areas of collaboration for the UM-UMC Nursing Faculties identified over past months have been initiated as indicated below.

Academic Staff Development
Specific UM academic staff will continue to mentor UWC faculty in areas of both
teaching and research.
a. Wilson: Nurse Practitioner
b. Libbus: Distance education and research
c. Fonza: Mental Health Nursing
d. Taliaferro: Research
e. Stieglitz: Distance learning. Areas emphasized were Blackboard based learning, distance education, master’s track in education, primary care, establishment and maintenance of nursing clinical skills lab (and the UM “Sim Man”) a computerized practice model), problem based learning, and integrating change into established curricula and established faculty.

UM-UWC continue to move forward on plans to develop courses / modules in advanced nursing education via distance learning to assist UWC academic staff to acquire necessary teaching credentials. The UWC school of nursing has received all needed approval for the Master Level program, and the first graduates will be reviewed for approval by the South Africa Nursing Council post graduation.

Overview of ALO Project Management Activities

<table>
<thead>
<tr>
<th>GOAL OF PROJECT: Engagement in a mutually beneficial inter-institutional project focused on Higher Education Leadership and Administrative Transformation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective 1b: Development of a Faculty Leadership Training program at UWC</td>
</tr>
<tr>
<td>Objective 2b: Revising and restructuring UWC’s nursing curriculum to accommodate needs of 21st Century nursing students in South Africa</td>
</tr>
</tbody>
</table>

Program Management Activities

After the first months in which Professor Uphoff started his tenure with the project by reviewing and clarifying requirements for verification of contributed UWC and UM staff effort, he rapidly moved into planning for the subsequent finalization of the US AID/ HED project and its sustainability. He and Prof. Jan Persens met in Nov. 2005 to discuss plans to sustain the progress accomplished during this grant in the coming years. They intend to meet again in May here in Missouri and then in June at UWC to develop a plan that will continue the collaboration in nursing. They also will work to secure funding to sustain the leadership program. Finally, Uphoff will assume primary responsibility for preparing the final wrap-up of the project in the Final Report, to be received by HED May 1, 2006.
How have the activities benefited (or will they ultimately benefit) the U.S. institution? How have they benefited the community surrounding the U.S. institution?

Project A

The activities of the Leadership Development Project has had a significant impact on both the UWC and the UM systems. The cross cultural exchange of issues and strategies were lively and stimulating and ultimately enriched the many UM faculty and staff who participated in this project with the representatives from UWC. The impact of this project will most certainly exceed the boundaries of the university as national consultants also were engaged in the program’s activities.

The activities of this project have significantly benefited the University of Missouri. Long term collaborative relationships have been strengthened and new relationships have been developed. The participants from the UM have gained significantly in understanding and valuing the difference and similarities shared with our UWC colleagues. In addition, this program allowed us to bring a third partner, University of Georgia to the relationship. The outcomes of having participated in this program have been shared with both students and staff at the UM thus, expanding the learning to the broader university community. Because of participation in this program UM faculty have the opportunity to work with a large US business in expanding and building new international relationships.

Project B:

The faculty and students of the Sinclair School of Nursing at the University of Missouri and the wider UM system have directly benefited educationally from the cross-cultural relationship with the UWC faculty. Some student exchanges have been established. UM nursing faculty have gained by examining nursing assumptions from a different cultural lens, and that in turn, will improve teaching at UM and help UM faculty better deal with diversity issues. UM nursing faculty hope to build additional cross cultural exchanges so UM students will benefit from experiencing other cultures. We hope to develop trans-cultural nursing questions and collaborative research that will lead to improved health in both populations and which will create additional funding streams as well.

Additional Gains:

UM-UWC faculty cooperated in co-supervising a number of post-graduate students in research projects related to important South African nursing issues (HIV-AIDS, service learning, abuse of the elderly, home based care) and developing post-graduate programs,
including Master of Nursing Education, that will ultimately improve the health of the nation.
UMSL sponsored UWC to develop a chapter of Sigma Theta Tau, an international nursing
honorary, that will encourage and promote nursing scholarship. UM faculty participated in
the development of a scholarly journal for nursing and community health sciences. Finally,
UM faculty also participated in helping UWC academic faculty develop a strategic plan for
2010.

An international research conference will be held at the University of the Western Cape in
August 2006. The impact of this USAID/ HED project will be presented to the international
higher education community at that time.

Describe the extent and nature of engagement of other collaborating U.S.
institutions in partnership activities during this reporting period.
None in this reporting period.

List these institutions (including Non Government Organizations), community-
based organizations, government agencies, the private sector, other higher
education institutions, etc.) and describe their involvement:

UM Kansas City, UM Columbia, UM St. Louis

3. How have these activities contributed to (or do you anticipate they will
contribute to) development in the host country?

The involvement with and success gained through the two ALO funded projects, have clearly
resulted in renewed vigor in the already long term cooperation between UWC and the
University of Missouri. This year an increased number of proposals were submitted for the
2006 competition for exchange visits between the two institutions. These program activities
have contributed to UWC by building a core of people equipped for leadership which is a
very important mission of UWC. The Vice-Rector stated that without such people, UWC
cannot reach its goals.

Second, the UWC Nursing School believes it is more effective in fulfilling its teaching and
research missions as a result of this grant. Certainly, collaboration will generate some papers
and improve the academic standing of the UWC faculty. The assistance of UM colleagues
may well help some UWC faculty earn advanced degrees.

Third, to the extent that better teaching produces better trained, more effective nurses, the
long term impact of this grant could be very significant. Better trained nurses will mean
better health care for South African citizens. Moreover, some of the programs that have been
developed or are in the process of development will further improve nursing education at
UWC and ultimately the nursing care receive by future patients.

4. Describe the extent and nature of engagement of other collaborating host
country institutions in partnership activities during this reporting period.
This project has not worked with other host country higher education institutions. However, it is our intention to disseminate the leadership program that develops out of the ALO funded project to other institutions at a regional level.

5. How has your partnership strengthened host country higher education institution during this reporting period?

Leadership

The plan for UWC is to develop the expertise needed to provide leadership development programs for other institutions of higher education in the Western Cape Province. While there are opportunities for leadership development for Dean’s, Vice-Rectors and Rectors, there are limited opportunities for middle management which includes HOD (Heads of Departments) and Department Chairs.

There was a dearth of academic leadership in South Africa at all levels. Much of this state of affairs has to do with the non-professional and ad hoc manner in which leadership is generally viewed. The results of the overall ALP program as a professional development program have already strongly impacted the way leadership development is perceived at UWC. An outstanding outcome of the project was that UWC developed a consultation it can carry to other universities in Africa. UWC’s leadership program has been designed in such a way that it will serve as a model for other South African higher education institutions, will provide income to sustain the program and will develop education in the region.

Nursing

The UWC nursing program has been evaluated and improvements based upon the UWC self-evaluation have been implemented across the board in curriculum, assessment, and methodology areas. Additionally, a higher education partnership between the UWC nursing school and nursing schools at three UM campuses has been engineered to provide ongoing support and enrichment for both campuses. A new Master Level nursing program at UWC and joint research projects are in place that strengthen and enrich both universities and will bear fruit within the next 2 years.

6. Has your partnership informed policy at the institutional, community or national levels in the host country through policy relevant research consultations, analysis, advice and/or direct assistance? (e.g., helped increase the enrollment or participation of underserved students, adopted a policy of services to the community etc.) If yes, fully describe.

Nationally: Dr. Wilson of UM and his UWC colleagues have addressed South African policymakers at the foundation and government levels in an effort to institute a new role for advance practice nurses. Nurse Practitioners may play a critical role in addressing healthcare needs of SA citizens in underserved areas.
Within UWC:

Nursing: A strong research potential has been identified within the university and is under development. That research will help to improve the delivery and effectiveness of nurses in South Africa.

Leadership: This program has informed UWC institutional policy through increased awareness of policy and the skills needed for Heads of Departments and Department Chairs in management and leadership. It is our expectation that the leadership program will serve as a model for other African universities in the years to come.

7. Has your partnership conducted collaborative research during this reporting period to address a development problem in the host country? If yes, fully describe.

Project B: Research

Wide scale research initiatives are well underway as described in the report of Dr. Libbus. This project is being evaluated and the outcomes will be disseminated through professional publications and conference presentations.

8. Has your partnership adapted curricula or introduced methods of instruction relevant to host country development needs during this reporting period? If yes, fully describe.

Project A:

Leadership capacity building in the host country was enhanced as a result of having all project activities based from the host institution thereby allowing more individuals to participate. This project will complement and augment the Faculty Development and Staff Development programs that are currently offered at UWC by changing the format and approach to leadership development. Historically, leadership development has been provided to entry level faculty to prepare them to serve at the entry level. The new project will provide leadership development to faculty across levels with the purpose of allowing prepared faculty to move upward into leadership positions not only at UWC, but in any institution at which faculty may want to serve. UWC, as the enrolling institution in the Cape Higher Education Consortium, has played an important role in ensuring that the new CHEC curriculum is submitted for internal and external approval by the country’s regulatory structures. As a result, UWC will be better equipped to meet the CHEC platform challenges for the next years to come.

The CHEC curriculum has gone through several updates since the inception of this curriculum with representatives of all nursing schools and CHEC meeting regularly. The South African Nursing Council has approved the curriculum. UWC taught year one of the CHEC curriculum with the intake of first year students beginning January, 2005. Plans are thoroughly outlined for the four years of the CHEC curriculum as well as completing the
existing 2nd, 3rd, and 4th year students are in the original nursing program.

**Project B:**
UWC has made the decision to adapt new curricula and methods of instruction in undergraduate nursing. Changes agreed upon to date are as follows:

- Shift to concept of active learning under the strong leadership of their director with technical assistance from UM.
- Establish programs in problem based learning
- Increase use of self mediated learning tools
- Develop a learning laboratory
- Use new techniques in test construction
- Implement methods that will help students learn to synthesize and analyze information.

10. Has your partnership undertaken activities to equip individuals for participation in the host country’s workforce? If yes, are some of these efforts targeted to underserved or disadvantaged groups? Please fully describe.

**Project A:**
Yes. The goals of this project were to develop and/or enhance leadership skills for persons in key positions on the UWC campus. It is the intention of the partnership that the design of the program will enable it to be sustained after the completion of the grant period. Therefore, there is potential for significant impact on the workforce at UWC over time.

**Project B:**
Yes. We are clearly developing a sizeable number of nurses who will be better equipped to serve as the primary health care providers in the economically disadvantaged Western Cape communities.

11. Has your partnership been involved in community outreach activities in the host country during this reporting period? If yes, fully describe.
Not in this quarter.

12. Has your partnership been involved in building the host country’s trade capacity during this reporting period? If yes, fully describe.
Not applicable to this project.

13. Have there been any synergies, serendipities, or human interest stories for the partnership during this reporting period? If yes, fully describe.

A number of synergies have been identified. These are:

- Continuation of Year 1 ALP group.
- Expansion from academic to academic and administrative staff participation.
• Enhance the sense of community for on-campus and off-campus staff members (Meetings scheduled at off-campus sites and off-campus faculty developing relationships with on-campus faculty)
• Closer collaboration between administrative support and academic staff.
• A report on some of the activities of the partnership was made at Yale University in April 2006 at the Unite For Sight International Conference.
• Dr. Patti Schnitzer from MU was in South Africa for a meeting in Durban. She had met Dr. Cheryl Nikodem during her 2005 visit to MU and they had been discussing possible research by e-mail. Dr. Schnitzer (at her own expense) detoured to spend two days in Cape Town to meet with Dr. Nikodem to begin to develop a research collaboration.

14. What challenges has your partnership encountered in carrying out its planned activities during this reporting period?

Major or Emerging Implementation Issues Identified:

Timely communication remains a challenge, due to the distance, time change, seasonal difference and discrepancy between the academic calendars of the universities. The project has had enormous success despite the challenges of finances and distance.

15. Outline your partnership’s planned activities for the next six months, paying particular attention to achieving stated objectives:

The project sunset was on March 31, 2006. The only remaining activities planned involve continued planning by the project directors with faculty members at both institutions to sustain the progress made in both areas.
## QUANTITATIVE ANALYSIS

<table>
<thead>
<tr>
<th>Question</th>
<th>Faculty</th>
<th>Undergrad</th>
<th>Grad Students</th>
<th>Administrators</th>
<th>Others</th>
<th>Since beginning of ALO funding (May 12, 2004)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How many exchanges has the partnership supported for host country participants?</td>
<td>Faculty: 1</td>
<td>Undergrad: Grad Students:</td>
<td>Administrators:</td>
<td>Others:</td>
<td>Faculty: 8</td>
<td>Undergrad: Grad Students: Administrators: 1 Others:</td>
</tr>
<tr>
<td>Describe the nature and duration of the exchanges. To discuss common understanding of purpose and activities of funded project. To share any new developments with UM colleagues. Details reported in the body of the report.</td>
<td>Faculty: 4</td>
<td>Undergrad: Grad Students:</td>
<td>Administrators:</td>
<td>Others:</td>
<td>Faculty: 12</td>
<td>Undergrad: 1 Grad Students: Administrators: Others:</td>
</tr>
<tr>
<td>2. How many exchanges has the partnership supported for U.S. participants?</td>
<td>Faculty:</td>
<td>Undergrad: Grad Students:</td>
<td>Administrators:</td>
<td>Others:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Describe the nature, location and duration of the exchanges. Details reported in the body of the report.</td>
<td>Faculty:</td>
<td>Undergrad: Grad Students:</td>
<td>Administrators:</td>
<td>Others:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. How many internships has the partnership supported?</td>
<td>Faculty:</td>
<td>Undergrad: Grad Students:</td>
<td>Administrators:</td>
<td>Others:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Describe the nature, location and duration of the internships.</td>
<td>Faculty:</td>
<td>Undergrad: Grad Students:</td>
<td>Administrators:</td>
<td>Others:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Approximately how many host country nationals have been trained (formally / informally, short term/long term) through partnership activities (e.g. degree programs, certificate programs, seminars, workshops, extension days, etc.)?</td>
<td>Females: 850</td>
<td>Males: 100</td>
<td>Total: 950</td>
<td>Males: 108</td>
<td>Females: 859</td>
<td>Total(including seminars workshops and extension days): 1,550</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>665 under age 25</td>
<td>885 over 25</td>
</tr>
<tr>
<td>5. How many times has your partnership consulted/ collaborated with a host country government entity/organization?</td>
<td>One in this time period</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
6. How many times has your partnership participated in host country government sponsored panels and/or any other initiative to inform policy within the host country.

<table>
<thead>
<tr>
<th>Participation</th>
<th>Five in this time period</th>
</tr>
</thead>
</table>

List and describe the nature of participation in the panels and/or initiatives.

7. How many new degree programs has your partnership established? Please indicate the type of degrees (e.g., AAs, Bas, MAs, MSs, PhDs) the fields and describe the programs.

- M. CURR. program for nursing was developed for UWC students. There are 14 students enrolled. Details in the report.

8. Has your partnership contributed or leveraged contributions other than cost-share, beyond what was originally proposed, to strengthen the capacity of host country higher education institutions?

<table>
<thead>
<tr>
<th>Description</th>
<th>Estimated total dollar amount</th>
<th>Estimated total dollar amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,700 Books at $25 each = $67,500</td>
<td>$7,973 for Leadership Development Consultant</td>
<td></td>
</tr>
<tr>
<td>Estimated total dollar amount: $115,593</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

List separately and estimate the dollar amounts.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>New faculty time (R. Williams)</td>
<td>$5,500.00</td>
</tr>
<tr>
<td>materials</td>
<td>$85.00</td>
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<tr>
<td>testing</td>
<td>$288.00</td>
</tr>
<tr>
<td>conference venue</td>
<td>$2,100.00</td>
</tr>
<tr>
<td>Total</td>
<td>$10,000.00</td>
</tr>
<tr>
<td>Faculty time</td>
<td>$10,000.00</td>
</tr>
<tr>
<td>Conference venue</td>
<td>$3,032.00</td>
</tr>
<tr>
<td>Materials</td>
<td>$760.00</td>
</tr>
<tr>
<td>Testing</td>
<td>$1,128.00</td>
</tr>
</tbody>
</table>

APPENDICES

Appendix 1: Interim Report Travelers

1. Nomafrench Mbombo, November 8 - 18, 2005 from UWC to Missouri to collaborate with UM nursing colleagues.

2-3. Lora Lacey-Haun, February 9 - 24, 2006, from UM to UWC with Rob Williams to conduct the LDP and Train the Trainers Workshops.
Thad Wilson and Marge Fonza, April 1 - 10, 2006, from UM to UWC with Wilson to collaborate with UWC colleagues regarding curriculum and nurse practitioner program. and Fonza to explore establishment of mental health nursing specialization for UWC.

Appendix 2:
2.a. Report of Professor Mbombo
2.b. Report of Thad Wilson and Marge Fonza

2.a. Report of Normfrench Mbombo

UNIVERSITY OF MISSOURIE VISIT, USA: 7th - 18th November 2005
(Kansas City, Columbia, St Louis)

Purpose of the Visit

1. Programme level: Academic Leadership
   To consolidate and strengthen the UWC undergraduate programme in context of exploring other sound ways of utilising our resources.
2. Individual level: Scholarship
   Explore possibilities of research collaboration etc in building scholarship and publication output, in the department

Programme level: What can work for us

- Skills laboratory for nursing skills: Skills laboratory is utilized as a learning environment. They have a full time expert nurse in laboratory. Students can utilise and practise in the lab under the guidance of the lab nurse. For us, currently, we don’t have full time skilled lab nurses, as a result students have to make appointments with the clinical supervisors or lecturers who have tight schedules.
- The use of manikins (dolls): They have ‘dolls’ that can be utilised for different purposes e.g., it becomes cost effective to order a doll with limbs that can be utilised for intravenous injections, wound dressing etc at the same time. The computerised ‘humanlike’ manikin is a necessity for our students because of large number of students placed at health facilities. It gives students exposure to critical abnormalities and illnesses and are given opportunity to manage these in a non threatening safe environment. This builds them confidence when they are exposed to real life experiences.

Recommendation: The manikin is about a quarter million rand. The school needs to explore ways on generating funds to have at least two of these as a start especially for senior students.
• Students’ Skills lab clinical packs: Currently, we don’t charge students for these packs they use in the lab when practising. Making these packs according to required clinical procedures and allowing students to purchase them could be cost effective (e.g. In Kansas City).

• Student evaluation/assessment was identified elsewhere as one contributing factor to staff increased workload in the department. The CPS electronic system (Class Performance System), a quick classroom quiz based on MCQs utilised appears to one of solutions to the above in some contexts of our programme. Recommendation: To explore, as part of UWC e-learning, how can they assist in this regard (website available to see if CPS can be accustomed fro UWC). The advantage CPS is that the feedback to students on their performance and identifying learning gaps, is available immediately. The approach also encourages groupwork teaching and learning, which is inline with the schools’ teaching philosophy.

• Collaboration possibilities:
  o Through ‘satellite’, since USA is advanced in terms of clinical resources for nurses, the possibility to cross teach in some areas e.g., medical surgical nursing/acute care clinical instructions is one area from USA to SA.
  o Student Exchange: SA students can benefit in the above area. USA health system is well equipped and advanced in acute care, whilst SA’s focus is more on preventive, community oriented care. The USA students can benefit when SA 4th year students are doing projects in the community between August and October (semester 8). SA students can do exchange when they are on their advanced level of Medical and Surgical Nursing (semester 5), which is semester one of our B CUR3, and this can be between March to May.
  o A skills laboratory person from USA can assist in guiding our newly appointed person in terms of innovative ways in coordinating the laboratory.

Community visits related to the programme
This was based on my interest area and research in women’s health, among others. The aim was also to explore possibilities of future staff and students collaboration. For example, with mental health, I identified how students can benefit from their Community based mental health institutions.

KANSAS CITY:
• Women’s Centre for the abused women
• Children’s Centre for under impoverished and orphaned children
• Community Based Organization: educating women who are engaged in ‘high risk sexual behaviours’ on STIs and HIV/AIDS

COLUMBIA
• Family Birth centre: a maternity ward in academic hospital
• Class presentation by postgraduate students who are doing interdisciplinary course on Domestic Violence
• Social work: Women’s health research meeting with Prof Sable
• Class presentations by Nursing undergraduate students doing course on Child birth

St LOUIS
• Psychiatry mental health services
• Community Mental health services
• Sigma Theta Tau International presentations (UWC is chapter founded by St Louis)
• PhD students Presentations

Scholarship
• UMKC: Explored on writing Grant proposal(s) with Prof Pat Kelly in context of women’s health, and also to explore how students can be accommodated in this in context of developing projects in the communities. STATUS (we have exchanged articles to identify commonalities and also shared information about possible funders). Also, I’m part of their writer’s circle, assisting each other on editing our articles for publication. Prof Lacey-Horn is co ordinating this.
• St Louis: Writer’s circle to assist in editing of articles. Assisting in consolidating UWC STTI chapter. Assisting in proposal writing for SA Centre for abused women which is our students’ clinical learning facility.
Columbia: Interdisciplinary Women’s health seems a buzz word with most people involved from all over on campus. Possible research collaboration and big grant funding with many in Nursing, Social work, Gender Studies etc. To explore possibility of e.g. Funded Postdoctoral for me in 2006 to execute this.

OTHERS
I was exposed to various people and places, for example, I met with vice presidents in two campuses, the deans of the schools in all 3 campuses, academic staff from other departments, health service providers in some academic hospitals, students, church community etc.

Conclusion
The exposure was worth it in context of where UWC is with nursing programme and taking some of my recommendations forward would be advisable. Also the UM- UWC is about complementing each other, I didn't identify any areas for supplementation. It was also surprisingly interesting that inspite the Nursing programmes are from different contexts and are catering contrasting the worlds, and that the programmes have some differences in exit level outcomes, the process is not so different in context of clinical skills acquisition. The numerator is different but the denominator is same- nurses. I was sceptic at the beginning, concerned about Americanising our thinking and adopting the first world.

I thank the ALO for the exposure.

Compiled by Nomafrench Noma Mbombo PhD

APPENDIX 2, continued
2.b. Report of Thad Wilson and Marge Fonza

The Development of the Master’s Nurse Practitioner degree at the University of Western Cape

Report of visit by Thad Wilson, RN, FNP, PhD
University of Missouri-Kansas City School of Nursing to the University of Western Cape School of Nursing
February 25 –March 10, 2006

Background
Dr. Thembi Khanyile visited UMKC in November 2004 and UM Columbia in July 2005. On both occasions she and Dr. Wilson discussed the possibility of developing a Masters Nurse Practitioner program at UWC. Following the July visit, a preliminary plan in the development of the program was created and is presented below.

1. Practice rules & regulation (R&R). Currently there is no “legal” role similar to a Master’s prepared NP for nurses in South Africa. Therefore, prior to educating NPs there would need to be a change in the rules and regulations for nurses.
   a. The development of the R&R should probably include the SA Nursing Council, SA Medical Council and SA Pharmacy Council.
   b. Once the R&Rs are completed, the authority should be given to the SA Nursing Council.

2. To accomplish the above, Dr Thad Wilson will visit South Africa to experience the situation first hand. Prior to the visit Professor Khanyile will arrange for presentations to as many of the following as possible:
a. Province Health Directorate,
b. SA Nursing Council,
c. SA Medical Council and
d. SA Pharmacy Council

3. The presentation will include:
   a. What is a Nurse Practitioner – scope of practice, types of activities, etc.
   b. Educational program – outline of courses and clinical
   c. Competency – how determined and evaluated
   d. Recommendations for R&Rs – based on R&Rs from selected states in US.

Visit Activities

Dr. Wilson arrived 26 February 2006 and departed 9 March 2006. Weekends were for sightseeing and SA elections were held the first of March and all offices were closed. Therefore, a total of eight days were available for work.

27 Feb – Met with Professor Khanyile and Professor Kortenbout to prepare presentation outline and materials (see Powerpoint – Appendix A).

28 Feb – In the morning, Professor Khanyile and Dr. Wilson gave a presentation to the Provincial Health Managers Council. The presentation was well received. Questions from this meeting, with answers, are found in Appendix B.

2 Mar - Professor Khanyile, Professor Kortenbout and Dr. Wilson attended and gave the same presentation to Provincial Directorate of Human Resources meeting. This was a very important event. The main purpose of this meeting was to discuss how Certificate Course in Curative Skills in Primary Health Care (PHC) course can become accredited by the South African Nursing Council (SANC). The chair indicated that further this course could no longer be offered, unless it was accredited. Partnerships with Health Education Institutions would be beneficial, possibly even mandatory, for accreditation to occur. The regional representatives reported how the course was being taught in their area and to whom it was taught. A brief history of this course was also provided:

Ms Earle gave a brief summary on the history of the PGWC certificate course in Curative Skills in the PHC. She indicated that the Red Cross Pediatric Clinical Skills course started in 1973. Informal training in clinical skills for registered nurses started in the 1970’s. In the late 1970’s, early 1980’s, Dr Turner formally taught the certificate and the diploma course. His notes were put into a book format, which is still in use. Dr Turner passed on, and Dr John Frankish took over from him. The regions were formed in 1996 / 97 and the course was decentralized. The current course was reaccredited by SANC as a Curative Skills in PHC course in 1994, after NHPD took over from PAWC Western Cape Region. Before 1994 it used to be the Certificate Course in Health Assessment, Diagnosis, Treatment and Care.
Questions from this meeting, with answers, are found in Appendix B.

3 Mar – Met with Professors Kortenbout and Nikodem. Discussed current Masters programs and curriculum. Decided it was best to identify “Core,” “Stream,” “Elective,” and “Thesis” grouping of modules (courses). Worked on strategies to address issues with SANC and government. Professor Kortenbout and I spent the afternoon working on the proposed curriculum.

6 Mar – Spent significant amount of time searching the internet to learn more about SA health policies, politics and organization. A list of important sites follows:

- Medical Research Council - [http://www.mrc.ac.za/](http://www.mrc.ac.za/)
- Human Science Research Council - [http://www.hsrc.ac.za/](http://www.hsrc.ac.za/)
- South Africa Nursing Council - [http://www.sanc.co.za/](http://www.sanc.co.za/)
- Denosa.org.za
- National Research Foundation of SA - [http://www.nrf.ac.za/](http://www.nrf.ac.za/)

7 Mar – Visited Khayelitsha clinic. This clinic is located in the middle of a poverty stricken community. Most of the 500,000 people live in informal housing (corrugated iron shacks) and over half of the adults are unemployed. The clinic was well organized and the staff very dedicated. One of their major issues is staffing, particularly physicians. I observed several opportunities for Master’s NPs to meet the needs of this clinic.

8 Mar – Traveled to Pretoria, SA with Professor Kortenbout to visit with the South African Nursing Council (SANC) and Department of Health, Human Resource Planning personnel. Due to miscommunication concerning the date of the meeting, we were unable to meet with anyone at SANC, even after repeated offers to meet at any time.

We met with Ms. Gumede, Cluster Manager: Human Resources and Andrew Crichton, Director: Human Resource Planning. This was a very productive meeting. They clearly understood how a Master’s degree is way to advance one’s career. Mr. Crichton has also studied the US nursing education system and was able to provide guidance based on that knowledge blended with his experience and background in SA. At this time, their perception is that the following area’s have the greatest likelihood of success: Nurse Anesthetist (CRNA), Pediatric NP, Trauma NP (ER), and Family NP. Other suggestions:

- Need to base curriculum and position on new Nursing Act (soon to be published)
- Don’t include dispensing in role, prescribing is okay.
- Best to develop a nationwide proposal, involving several schools
- Include strong science base with pathophysiology and pharmacology
- Proposal should include –
  - Evidence of need
  - Specifically how it is different from Diploma or Certificate NP
- Limit the research component (more evidence-based practice)
- Delineate scope of practice
- How the Master’s NP will articulate with other professions
- Referral levels – resource at regional and district levels

9 Mar – Final meeting with Professors Khanyile and Kortenbout. We attempted to determine “next steps”. After the meeting with the Department of Health officials, we decided to scrap our first attempt at a curriculum, it wasn’t comprehensive enough. The plan for implementation is presented below. I had truly hoped to accomplish more during this visit, but the learning curve for me was very steep. I believe Professor Kortenbout and I can accomplish some of the work presented in the following plan, but it will take more than email to meet our goal.

Plan for Implementation (Next Steps)

1. Determine if we should continue.

I believe we should. However, there is a tremendous amount of work that needs to be done. It will probably require a dedicated person at UWC and a committed cohort of faculty from the UM system to reach our goal.

2. Seek funding.

To reach the goal of a Masters NP program at UWC by 2007 or 2008, it will require funding for faculty, support staff, liaisons in SA, equipment and more face-to-face interaction between UWC and UM faculty. We need to determine likely sources of funding, who will submit the proposals, etc.

3. Develop a plan for approval of the role in SA.

- Based on input from the Department of Health, this may require coalition building with at least one other university and possibly more. Someone in SA will need to coordinate this effort.
- Get SANC approval – with a curriculum based on the new nursing act.
- Meet with SA Council of Medicine and SA Council of Pharmacy to garner support.
- Determine the resources needed to start and continue the program.
- Develop a timeline for acceptance.

4. Develop a plan for approval of the program at UWC.

- Design a curriculum – specific modules, when offered, outcomes and evaluation (a very rough first draft based on information from all visits while in SA is included in Appendix C)
- Determine admission and progression criteria
- Clearly outline the articulation with certificate and diploma prepared NP’s.
• Develop a comprehensive program evaluation plan.
• Identify process for approval – who, when, responsibilities, etc.
• Determine resources needed to start and continue the program.

Section 2

Issues identified during meetings with community, governmental partners.

1. Is there a need for a Masters NP? Currently Certified NPs (CNP) are doing similar work.
   a. Professor Khanyile shared that many nurses practicing in the hospitals will take the necessary courses to become a CNP, but never practice as a CNP because the income is much better in the hospital. The education serves only to increase their pay in the hospital and is not used to promote primary health care.
   b. The curriculum will include business and marketing strategies, which will give the Masters NP the freedom, knowledge and skills to work for the government or to start their own practice and together with rendering a service, also make money.
   c. Other agencies are already offering the diploma and certificate, so UWC has chosen to offer something unique, the Masters NP.
2. CNPs are “abused” in the current system – providing services similar to physicians, but paid a poor salary. How would the Masters NP solve this?
   a. Same as “b” above.
3. Who would be the mentors or clinical preceptors for these students?
   a. This has yet to be determined and will need further exploration.
4. How does the Masters NP fit into the plan for Medical Assistants (similar to Physician Assistants in the US) currently under discussion in SA?
   a. The cost to develop educational programs for the MA would be very high. The cost to develop the Masters NP will be relatively small, yet the graduates of the program will be able to meet the primary care needs of the country.
5. How to get the education to those who most want it, but may not be able to live in Cape Town?
   a. Use of internet and preceptors may provide an option for those living in other area’s.
6. How to give “credit” for work and experience? PHC nurses who wish to get a Masters NP, what courses will they take?
   a. This will be decided as the curriculum is further developed.
Appendix 3: Nursing Collaboration Exchanges

Below is a list of UWC-UM Nursing Exchange faculty and administration engaged in Project B of this higher education partnership, plus the number of contacts each had per visit with students and faculty in the host country.

Kay Libbus – UWC visit June 16-July 17, 2004

University of Western Cape Administration

Professor Tyrone Pretorious, Vice-Rector
Professor Renfrew Christie, Dean of Research
Professor Jan Persens, Director of International Relations
Professor Ratie Mpofu, Dean of the Faculty of Community Health Sciences

UWC School of Nursing Academic Staff

Dr. Thembi Khanyile, Director
Dr. Nomafrench Mbombo, Assistant Director
Dr. Elma Kortenbout
Dr. Cheryl Nikodem
Ms. J.D. Jeggels
Mr. S. Arunachallam
Mrs. F.M. Daniels
Mrs. H. Julie
Ms. E. Kearns
Ms. A Splinter
Mrs. Sonja Walker
Mrs. A. Traut
Mrs. E. Fortuin
Mrs. Loretta Le Roux
Ms. Shamima Mooideen (post-graduate student in advanced midwifery)
Ms. Haaritha Boltman (post-graduate student in advanced midwifery)

UWC School of Public Health Academic Staff

Dr. Debbie Jackson
Dr. Thandi Puoane
Dr. Marjorie Sable (Visiting Scholar from the University of Missouri-Columbia)
Dr. Gail D. Hughes (Visiting Scholar from the University of Mississippi Medical Center)
Dr. Ann Anderson (Visiting Scholar from London School of Tropical Medicine)
Dr. Anita Maurtin-Caincross (Staff Development)

Clinical Site Personnel
Sisters in charge of Antenatal Clinic and MOU at Elsies River Health Center
Sister in Charge at Zakhle Clinic (Khayelitsha)
Sister Sophie Matthews – Mental Health Specialist for Helderberg Region (Somerset West)
Ms. Z. January – Occupational therapist and psychosocial therapist for Helderberg Region (Macassar)
Synnov Skorge, center manager of Saartjie Baartman Centre for Women and Children
Director of PATCH Child Abuse Center (Somerset West)
Director of Helderberg Community Crisis Center (Somerset West)

Also met with 3rd year students (75) and 4th year students (60).

Thembi Khanyhile UWC Visit to MU

Thembi Khanyhile
School of Nursing Administrators and Faculty
Kay Libbus
Rose Porter
Rebecca Johnson
Marilyn Rantz
Marge Sable (Social Work)
Kristin Metcalf-Wilson
Gina Oliver
Beth Traudes
Vicki Conn
Marge Whitman
Alice Kuehn
Verna Rhodes (emerti)
Jia Lee
Roxanne McDaniel
Linda Bullock
Connie Brooks
JoAnne Banks Wallace
Cindy Russell

Presented Brown Bag Seminar on Recognition of Prior Learning – attended by 25 faculty and post-graduate students.

Attended PhD class – 10 students

University Faculty and administration
Marge Sable (Social Work)
Ron Turner (University Administration)
Linda Cupp (MU Direct)
Rosemary Allen (MU DirectO)

Attended Chancellor’s Christmas Reception – met many faculty and administrators
Thembi Khanyile July 16 – July 26, 2005

University of Missouri-Columbia Faculty and administrators
Kay Libbus
Linda Bullock
Jane Armer
JoAnne Banks Wallace
Students
Mon Benjakul,

Cheryl Nicodem
Rose Porter
Roxanne McDaniel
Vicky Conn
Kay Libbus
Linda Bullock
Jane Armer
Louise Miller
Deidre Wipke-Tevis
Donna Williams
Myra Aud
Rebecca Johnson
Cindy Russell
Patti Schnitzer
Anne Heine
Kristin Metcal-Wilson

Presentation to 12 faculty and postgraduate students on translating research into practice
12 students in undergraduate OB clinical practice
20 students in graduate women’s health class

Bill Folk (Medicine)
Rodney Uphoff (Law)
Richard Madsen (Statistics)
Karen Wingert (PT)
Marge Sable (Social Work)
Joe Haslag (Economics)

Meeting of Wakonse Foundation (faculty development group to improve college teaching) – approximately 40 people

Nomafrench Mbombo (UWC) to MU November 12-15, 2005

School of Nursing Faculty and Administrators
Kay Libbus
Patti Schnitzer  
Beth Traudes  
Anne Heine  
Roxanne McDaniel  
Pam Evans Smith  

Other:  
Richard Porter  
Jim McCartney  
Marge Sable  

Participated in class on domestic violence – 25 students and faculty  
Participated in undergraduate OB clinical practicum – 12 students  
Participated in undergraduate OB lecture – 60 students  

**APPENDIX 4: New MSN Program**  

*Masters in Nurse Practitioner Program*  
*By Dr Khanyile (UWC) & Dr Wilson (UMKC)*  

**Background**  
- SANC registration of qualifications statistics revealed that 40% of professional nurses have more than two post basic qualifications  
- Only 40% of PHC facilities have PHC trained nurses  
- Majority of P/N work in tertiary and secondary levels of care delivery  

**Purpose of the program**  
- To ensure responsiveness and relevance of educational program  
- To focus the career pathways of the critical health professional  
- To ensure retention and motivation of critical health professionals (nurses)  
- To ensure relevance of health professional educational programs to the strategic priorities of the NHS  

**Objective of the presentation**  
- UWC in collaboration with UM will offer this program in 2008  
- To solicit inputs from the stakeholders that will assist in the development of the program  
- To engage stakeholders in the planning  

**Lessons from Missouri**  
- The need – underserved population  
- The early days – diploma program  
- Move to the Master’s Degree  
- Increased enrolment in Schools of Nursing  

**Outcomes of Current Practice**  
- Primary Care NP’s – quality of care excellent  
- Meeting needs of underserved  
- Standardized Education  
  - Business management  
  - Primary care  
  - Role transition
Core Courses (60)
Research Quantitative & Applied Epidemiology (20)
Research Qualitative (includes computer analysis) (20)
Role Course – legal, ethical, management, program planning, andrology (20)

Stream Courses (120)
Advanced Pathophysiology (20)
Pharmacology for Primary Care (20)
Advanced Health Assessment & Diagnostic Reasoning (20)
Nurse Practitioner – Acute (20 – 4 didactic and 16 clinical practice)
Nurse Practitioner – Chronic (20 – 4 didactic and 16 clinical practice)
NP Clinical Application (20 – 2 didactic and 18 clinical practice)

Research/Thesis (40)
Student works with faculty member.

Electives (40)
Forensic nursing (20)
Women’s health (20)
Gender based violence (20)
Other possibilities – HIV care, TB care, etc.

Total Hours - 260 (Total clinical hours = 720)
### QUANTITATIVE ANALYSIS

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<th>This period</th>
<th>Since beginning of ALO funding (May 12, 2004)</th>
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<tr>
<td>1.</td>
<td>How many exchanges has the partnership supported for host country participants?</td>
<td>Faculty: 1 Undergrad: Grad Students: Administrators: Others:</td>
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Describe the nature and duration of the exchanges. To discuss common understanding of purpose and activities of funded project. To share any new developments with UM colleagues. Details reported in the body of the report.

|   | How many exchanges has the partnership supported for U.S. participants? | Faculty: 4 Undergrad: Grad Students: Administrators: Others: | Faculty: 12 Undergrad:1 Grad Students: Administrators: Others: |

Describe the nature, location and duration of the exchanges. Details reported in the body of the report.

|   | How many internships has the partnership supported? | Faculty: Undergrad: Grad Students: Administrators: Others: | Faculty: Undergrad: 1 Grad Students: Administrators: Others: |

Describe the nature, location and duration of the internships.

|   | Approximately how many host country nationals have been trained (formally / informally, short term/long term) through partnership activities (e.g. degree programs, certificate programs, seminars, workshops, extension days, etc.)? | Females: 850 Males: 100 Total: 950 | Females: 859 Males: 108 Total (incl. seminars, workshops, extension days): 1,550 |

885 Over age 25 665 Under age 25
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<td>5.</td>
<td>How many times has your partnership consulted/ collaborated with a host country government entity/ organization?</td>
<td>One in this time period</td>
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<td>6.</td>
<td>How many times has your partnership participated in host country government sponsored panels and/or any other initiative to inform policy within the host country.</td>
<td>Five in this time period</td>
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*List and describe the nature of participation in the panels and/or initiatives.*

7. How many new degree programs has your partnership established? *Please indicate the type of degrees (e.g., AAs, Bas, MAs, MSs, PhDs) the fields and describe the programs.*

M. Curr. program for nursing was developed for UWC students. There are 14 students enrolled. Details in the report.

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<td>8.</td>
<td>Has your partnership contributed or leveraged contributions other than cost-share, beyond what was originally proposed, to strengthen the capacity of host country higher education institutions?</td>
<td>Estimated total dollar amount: 2,700 Books at $25 each = $67,500</td>
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<tr>
<td></td>
<td></td>
<td>Estimated total dollar amount: $7,973 for Leadership Development Consultant</td>
</tr>
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*List separately and estimate the dollar amounts.*

New faculty time (R. Williams) : $5,500.00  
materials : $85.00  
testing : $288.00  
conference venue : $2,100.00  

Total  
Faculty time : $10,000.00  
Conference venue : $3,032.00  
Materials : $760.00  
Testing : $1,128.00
APPENDICES for Interim Report of April 2006

Appendix 1: Interim Report Travelers

2. Nomafrench Mbombo, November 8 - 18, 2005 from UWC to Missouri to collaborate with UM nursing colleagues.

2-4. Lora Lacey-Haun, February 9 - 24, 2006, from UM to UWC with Rob Williams to conduct the LDP and Train the Trainers Workshops.

4-6. Thad Wilson and Marge Fonza, April 1 - 10, 2006, from UM to UWC with Wilson to collaborate with UWC colleagues regarding curriculum and nurse practitioner program and Fonza to explore establishment of mental health nursing specialization for UWC.

Appendix 2:
2.a. Report of Professor Mbombo
2.b. Report of Thad Wilson and Marge Fonza

2.a. Report of Normafrench Mbombo

SCHOOL OF NURSING
UNIVERSITY OF THE WESTERN CAPE
Private Bag X17 BELLVILLE 7535 South Africa
Telephone: +27 21 959-3923/ 2271 Fax: +27 21 9591 478
Email: nmbombo@uwc.ac.za Mobile:+27 82 202 3127

UNIVERSITY OF MISSOURIE VISIT, USA: 7th - 18th November 2005
(Kansas City, Columbia, St Louis)

Purpose of the Visit

3. Programme level: Academic Leadership
To consolidate and strengthen the UWC undergraduate programme in context of exploring other sound ways of utilising our resources.

4. Individual level: Scholarship
Explore possibilities of research collaboration etc in building scholarship and publication output, in the department

Programme level: What can work for us

- Skills laboratory for nursing skills: Skills laboratory is utilized as a learning environment. They have a full time expert nurse in laboratory. Students can utilize and practice in the lab under the guidance of the lab nurse. For us, currently, we don’t have full time skilled lab nurse, as a result students have to make appointments with the clinical supervisors or lecturers who have tight schedules.

Recommendation for us: To appointment a nurse who will be full time in the lab and assist students in practising and evaluation of skills. This will reduce some of workload from academic staff. In terms of way forward, the CHEC affordability model does indicate a need for the enrolling institution to appoint a skills lab coordinator. The school has explored this including ‘job’ description for this person. Also, the use of
senior students as clinical mentors for juniors needs to be explored. Currently, this approach is a pilot study by Faculty of Community & Health Sciences (FCHS) for all health professionals' students, but not in the clinical context.

- The use of manikins (dolls): They have ‘dolls’ that can be utilised for different purposes e.g., it becomes cost effective to order a doll with limbs that can be utilised for intravenous injections, wound dressing etc at the same time. The computerised ‘humanlike’ manikin is a necessity for our students because of large number of students placed at health facilities. It gives students exposure to critical abnormalities and illnesses and are given opportunity to manage these in a non threatening safe environment. This builds them confidence when they are exposed to real life experiences.

  Recommendation: The manikin is about a quarter million rand. The school needs to explore ways on generating funds to have at least two of these as a start especially for senior students.

- Students’ Skills lab clinical packs: Currently, we don’t charge students for these packs they use in the lab when practicing. Making these packs according to required clinical procedures and allowing students to purchase them could be cost effective (e.g. In Kansas City).

- Student evaluation/ assessment was identified elsewhere as one contributing factor to staff increased workload in the department. The CPS electronic system (Class Performance System), a quick classroom quiz based on MCQ’s utilised appears to one of solutions to the above in some contexts of our programme.

  Recommendation: To explore, as part of UWC e-learning, how can they assist in this regard (website available to see if CPS can be accustomed fro UWC). The advantage CPS is that the feedback to students on their performance and identifying learning gaps, is available immediately. The approach also encourages group work teaching and learning, which is inline with the schools’ teaching philosophy.

- Collaboration possibilities:
  - Through ‘satellite’, since USA is advanced in terms of clinical resources for nurses, the possibility to cross teach in some areas e.g., medical surgical nursing/ acute care clinical instructions is one area from USA to SA.
  - Student Exchange: SA students can benefit in the above area. USA health system is well equipped and advanced in acute care, whilst SA’s focus is more on preventive, community oriented care. The USA students can benefit when SA 4th year students are doing projects in the community between August and October (semester 8). SA students can do exchange when they are on their advanced level of Medical and Surgical Nursing (semester 5), which is semester one of our B CUR3, and this can be between March to May.
  - A skills laboratory person from USA can assist in guiding our newly appointed person in terms of innovative ways in co coordinating the laboratory.

Community visits related to the programme
This was based on my interest area and research in women’s health, among others. The aim was also to explore possibilities of future staff and student’s collaboration. For example, with mental health, I identified how students can benefit from their Community based mental health institutions.

KANSAS CITY:
- Women’s Centre for the abused women
- Children’s Centre for under impoverished and orphaned children
- Community Based Organization: educating women who are engaged in ‘high risk sexual behaviours’ on STI’s and HIV/AIDS

COLUMBIA
- Family Birth centre: a maternity ward in academic hospital
- Class presentation by postgraduate students who are doing interdisciplinary course on Domestic Violence
- Social work: Women's health research meeting with Prof Sable
- Class presentations by Nursing undergraduate students doing course on Child birth

ST LOUIS
- Psychiatry mental health services
- Community Mental health services
- Sigma Theta Tau International presentations (UWC is chapter founded by St Louis)
- PhD students Presentations
Scholarship

- UMKC: Explored on writing Grant proposal(s) with Prof Pat Kelly in context of women’s health, and also to explore how students can be accommodated in this in context of developing projects in the communities. STATUS (we have exchanged articles to identify commonalities and also shared information about possible funders). Also, I’m part of their writer’s circle, assisting each other on editing our articles for publication. Prof Lacey-Horn is co-coordinating this.

- St Louis: Writer’s circle to assist in editing of articles. Assisting in consolidating UWC STTI chapter. Assisting in proposal writing for SA Centre for abused women which is our students’ clinical learning facility.

- Columbia: Interdisciplinary Women’s health seems a buzz word with most people involved from all over on campus. Possible research collaboration and big grant funding with many in Nursing, Social work, Gender Studies etc. To explore possibility of e.g. Funded Postdoctoral for me in 2006 to execute this.

OTHERS
I was exposed to various people and places, for example, I met with vice presidents in two campuses, the deans of the schools in all 3 campuses, academic staff from other departments, health service providers in some academic hospitals, students, church community etc.

Conclusion
The exposure was worth it in context of where UWC is with nursing programme and taking some of my recommendations forward would be advisable. Also the UM- UWC is about complementing each other, I didn’t identify any areas for supplementation. It was also surprisingly interesting that in spite the Nursing programmes are from different contexts and are catering contrasting the worlds, and that the programmes have some differences in exit level outcomes, the process is not so different in context of clinical skills acquisition. The numerator is different but the denominator is same- nurses. I was sceptic at the beginning, concerned about Americanising our thinking and adopting the first world.

I thank the ALO for the exposure.

Compiled by Nomafrench Noma Mbombo PhD

APPENDIX 2, April 2006 Interim Report continued
2.b. Report of Thad Wilson and Marge Fonza

The Development of the Master’s Nurse Practitioner degree at the University of Western Cape

Report of visit by Thad Wilson, RN, FNP, PhD
University of Missouri-Kansas City School of Nursing to the University of Western Cape School of Nursing
February 25 –March 10, 2006

Background
Dr. Thembi Khanyile visited UMKC in November 2004 and UM Columbia in July 2005. On both occasions she and Dr. Wilson discussed the possibility of developing a Master’s Nurse Practitioner program at UWC. Following the July visit, a preliminary plan in the development of the program was created and is presented below.

4. Practice rules & regulation (R&R). Currently there is no “legal” role similar to a Master’s prepared NP for nurses in South Africa. Therefore, prior to educating NP’s there would need to be a change in the rules and regulations for nurses.
a. The development of the R&R should probably include the SA Nursing Council, SA Medical Council and SA Pharmacy Council.
b. Once the R&R’s are completed, the authority should be given to the SA Nursing Council.

5. To accomplish the above, Dr Thad Wilson will visit South Africa to experience the situation first hand. Prior to the visit Professor Khanyile will arrange for presentations to as many of the following as possible:
   a. Province Health Directorate,
   b. SA Nursing Council,
   c. SA Medical Council and
   d. SA Pharmacy Council

6. The presentation will include:
   a. What is a Nurse Practitioner – scope of practice, types of activities, etc.
   b. Educational program – outline of courses and clinical
   c. Competency – how determined and evaluated
   d. Recommendations for R&Rs – based on R&Rs from selected states in US.

Visit Activities

Dr. Wilson arrived 26 February 2006 and departed 9 March 2006. Weekends were for sightseeing and SA elections were held the first of March and all offices were closed. Therefore, a total of eight days were available for work.

27 Feb – Met with Professor Khanyile and Professor Kortenbout to prepare presentation outline and materials (see PowerPoint – Appendix A).

28 Feb – In the morning, Professor Khanyile and Dr. Wilson gave a presentation to the Provincial Health Managers Council. The presentation was well received. Questions from this meeting, with answers, are found in Appendix B.

2 Mar - Professor Khanyile, Professor Kortenbout and Dr. Wilson attended and gave the same presentation to Provincial Directorate of Human Resources meeting. This was a very important event. The main purpose of this meeting was to discuss how Certificate Course in Curative Skills in Primary Health Care (PHC) course can become accredited by the South African Nursing Council (SANC). The chair indicated that further this course could no longer be offered, unless it was accredited. Partnerships with Health Education Institutions would be beneficial, possibly even mandatory, for accreditation to occur. The regional representatives reported how the course was being taught in their area and to whom it was taught. A brief history of this course was also provided:

Ms Earle gave a brief summary on the history of the PGWC certificate course in *Curative Skills in the PHC*. She indicated that the Red Cross Paediatric Clinical Skills course started in 1973. Informal training in clinical skills for registered nurses started in the 1970’s. In the late 1970’s, early 1980’s, Dr Turner formally taught the certificate and the diploma course. His notes were put into a book format, which is still in use. Dr Turner retired, and Dr John Frankish took over
from him. The regions were formed in 1996 / 97 and the course was
decentralized. The current course was reaccredited by SANC as a Curative Skills
in PHC course in 1994, after NHPD took over from PAWC Western Cape
Region. Before 1994 it used to be the Certificate Course in Health Assessment,
Diagnosis, Treatment and Care.

Questions from this meeting, with answers, are found in Appendix B.

3 Mar – Met with Professors Kortenbout and Nikodem. Discussed current Master’s
programs and curriculum. Decided it was best to identify “Core,” “Stream,” “Elective,” and
“Theesis” grouping of modules (courses). Worked on strategies to address issues with SANC
and government. Professor Kortenbout and I spent the afternoon working on the proposed
curriculum.

6 Mar – Spent significant amount of time searching the internet to learn more about SA
health policies, politics and organization. A list of important sites follows:

- Medical Research Council - http://www.mrc.ac.za/
- South Africa Nursing Council - http://www.sanc.co.za/
- Denosa.org.za
- National Research Foundation of SA - http://www.nrf.ac.za/

7 Mar – Visited Khayelitsha clinic. This clinic is located in the middle of a poverty stricken
community. Most of the 500,000 people live in informal housing (corrugated iron shacks)
and over half of the adults are unemployed. The clinic was well organized and the staff very
dedicated. One of their major issues is staffing, particularly physicians. I observed several
opportunities for Master’s NPs to meet the needs of this clinic.

8 Mar – Traveled to Pretoria, SA with Professor Kortenbout to visit with the South African
Nursing Council (SANC) and Department of Health, Human Resource Planning personnel.
Due to miscommunication concerning the date of the meeting, we were unable to meet with
anyone at SANC, even after repeated offers to meet at any time.

We met with Ms. Gumede, Cluster Manager: Human Resources and Andrew
Crichton, Director: Human Resource Planning. This was a very productive meeting. They
clearly understood how a Master’s degree is way to advance one’s career. Mr. Crichton has
also studied the US nursing education system and was able to provide guidance based on that
knowledge blended with his experience and background in SA. At this time, their perception
is that the following areas have the greatest likelihood of success: Nurse Anesthetist
(CRNA), Pediatric NP, Trauma NP (ER), and Family NP. Other suggestions:
- Need to base curriculum and position on new Nursing Act (soon to be
  published)
• Don’t include dispensing in role, prescribing is okay.
• Best to develop a nationwide proposal, involving several schools
• Include strong science base with pathophysiology and pharmacology
• Proposal should include –
  ▪ Evidence of need
  ▪ Specifically how it is different from Diploma or Certificate NP
  ▪ Limit the research component (more evidence-based practice)
  ▪ Delineate scope of practice
  ▪ How the Master’s NP will articulate with other professions
  ▪ Referral levels – resource at regional and district levels

9 Mar – Final meeting with Professors Khanyile and Kortenbout. We attempted to determine “next steps”. After the meeting with the Department of Health officials, we decided to scrap our first attempt at a curriculum, it wasn’t comprehensive enough. The plan for implementation is presented below. I had truly hoped to accomplish more during this visit, but the learning curve for me was very steep. I believe Professor Kortenbout and I can accomplish some of the work presented in the following plan, but it will take more than email to meet our goal.

Plan for Implementation (Next Steps)

5. Determine if we should continue.

I believe we should. However, there is a tremendous amount of work that needs to be done. It will probably require a dedicated person at UWC and a committed cohort of faculty from the UM system to reach our goal.

6. Seek funding.

To reach the goal of a Masters NP program at UWC by 2007 or 2008, it will require funding for faculty, support staff, liaisons in SA, equipment and more face-to-face interaction between UWC and UM faculty. We need to determine likely sources of funding, who will submit the proposals, etc.

7. Develop a plan for approval of the role in SA.

• Based on input from the Department of Health, this may require coalition building with at least one other university and possibly more. Someone in SA will need to coordinate this effort.
• Get SANC approval – with a curriculum based on the new nursing act.
• Meet with SA Council of Medicine and SA Council of Pharmacy to garner support.
• Determine the resources needed to start and continue the program.
• Develop a timeline for acceptance.
8. Develop a plan for approval of the program at UWC.

- Design a curriculum – specific modules, when offered, outcomes and evaluation (a very rough first draft based on information from all visits while in SA is included in Appendix C)
- Determine admission and progression criteria
- Clearly outline the articulation with certificate and diploma prepared NP’s.
- Develop a comprehensive program evaluation plan.
- Identify process for approval – who, when, responsibilities, etc.
- Determine resources needed to start and continue the program.

Section 2

Issues identified during meetings with community, governmental partners.

7. Is there a need for a Masters NP? Currently Certified NP’s (CNP) are doing similar work.
   a. Professor Khanyile shared that many nurses practicing in the hospitals will take the necessary courses to become a CNP, but never practice as a CNP because the income is much better in the hospital. The education serves only to increase their pay in the hospital and is not used to promote primary health care.
   b. The curriculum will include business and marketing strategies, which will give the Masters NP the freedom, knowledge and skills to work for the government or to start their own practice and together with rendering a service, also make money.
   c. Other agencies are already offering the diploma and certificate, so UWC has chosen to offer something unique, the Masters NP.

8. CNPs are “abused” in the current system – providing services similar to physicians, but paid a poor salary. How would the Masters NP solve this?
   a. Same as “b” above.

9. Who would be the mentors or clinical preceptors for these students?
   a. This has yet to be determined and will need further exploration.

10. How does the Masters NP fit into the plan for Medical Assistants (similar to Physician Assistants in the US) currently under discussion in SA.
    a. The cost to develop educational programs for the MA would be very high. The cost to develop the Masters NP will be relatively small, yet the graduates of the program will be able to meet the primary care needs of the country.

11. How to get the education to those who most want it, but may not be able to live in Cape Town?
    a. Use of internet and preceptors may provide an option for those living in other areas.

12. How to give “credit” for work and experience? PHC nurses who wish to get a Masters NP, what courses will they take?
    a. This will be decided as the curriculum is further developed.
APPENDIX 4: New MSN Program

Masters in Nurse Practitioner Program
By Dr Khanyile (UWC) &

Dr Wilson (UMKC)

Background
- SANC registration of qualifications statistics revealed that 40% of professional nurses have more than two post basic qualifications
- Only 40% of PHC facilities have PHC trained nurses
- Majority of P/N work in tertiary and secondary levels of care delivery

Purpose of the program
- To ensure responsiveness and relevance of educational program
- To focus the career pathways of the critical health professional
- To ensure retention and motivation of critical health professionals (nurses)
- To ensure relevance of health professional educational programs to the strategic priorities of the NHS

Objective of the presentation
- UWC in collaboration with UM will offer this program in 2008
- To solicit inputs from the stakeholders that will assist in the development of the program
- To engage stakeholders in the planning

Lessons from Missouri
- The need – underserved population
- The early days – diploma program
- Move to the Master’s Degree
- Increased enrolment in Schools of Nursing

Outcomes of Current Practice
- Primary Care NP’s – quality of care excellent
- Meeting needs of underserved
- Standardized Education
  - Business management
  - Primary care
  - Role transition

Core Courses (60)
Research Quantitative & Applied Epidemiology (20)
Research Qualitative (includes computer analysis) (20)
Role Course – legal, ethical, management, program planning, andrology (20)

Stream Courses (120)
Advanced Pathophysiology (20)
Pharmacology for Primary Care (20)
Advanced Health Assessment & Diagnostic Reasoning (20)
Nurse Practitioner – Acute (20 – 4 didactic and 16 clinical practice)
Nurse Practitioner – Chronic (20 – 4 didactic and 16 clinical practice)
NP Clinical Application (20 – 2 didactic and 18 clinical practice)
Research/Thesis (40)
Student works with faculty member.

Electives (40)
Forensic nursing (20)
Women’s health (20)
Gender based violence (20)
Other possibilities – HIV care, TB care, etc.
Total Hours - 260 (Total clinical hours = 720)

APPENDIX II: RECORD OF COMMENTS FROM PARTICIPANTS

The following are quotes from program participants that provide a sense of what the program meant in the lives of participants.

- I learned how a person can make yourself heard in a group

- We learned how to assert oneself, be less concerned with people’s comfort about what you are saying rather than make sure they hear what you mean.

- I made a shift to seeing my role as outcome based rather than being perfectionist.

- In regard to the Leadership Development Program – the curriculum was American, but issues were South African.

- While the examples used were too American the concepts were global.

- South Africans don’t like conflict, but we were still challenged.

- Personal leadership style was well articulated, but the further into how you might evolve was uni-dimensional, not across a range of domains, blurred. I would like more specific information/ help with how I might evolve across domains.

- Universal higher education issues were reflected. Maybe later we can bring racial issues & cultural issues up, but ‘Americanism’ was not a problem, not way off.

- I gained realization about how one’s personal style influences reaction. I also gained knowledge of other people’s styles. Now I look at things differently, seeing consequences. Leaders’ focus should not be on process, not content.

- I learned that we have to be careful that the strongest person doesn’t impose the wrong decision on people. Learn to trust other people’s solutions to problems. Negotiate with people instead of imposing on them

- Role playing was constructive
• This project brought things out in the open so they could be discussed.

• Before this I didn’t think I was a good leader, but now I know everybody can be a leader. It increased by competence.

• One reason I was excited to go to the Leadership Development workshop was to see a leader in operation. There were quite a few case studies, but the number of situations is so large that the case studies are too few. The time was too limited to cover the specific topics we needed.

• My suggestion for selection would be to take both those who are in current leadership roles as well as those who have potential for leadership and might be in leadership roles in the future. People could then request the opportunity to be considered for attendance.

• What comes to mind is learning how to deal with difficult people. The personality assessment I also liked. Since I could see myself in the analysis, I found it most useful.

• The reason I liked the conflict presentation is because leaders fear dealing with difficult people. What he did was to reverse roles and show how to deal with it. Just the other day, a colleague came into the office very angry. He sat across from me, leaning forward and a time kept repeating that he was angry – in an aggressive way. His body language said “I am here for a fight.” I used the skills Rob demonstrated at the workshop to try to get my colleague to speak about the problem rather than continuing to share his feelings about the people with whom he was in conflict. He actually left saying, “Thank you for listening to me and thank you for the advice.” I didn’t say, “I agree with you.” I just told him it was very interesting and that I would like to hear the other side of the problem.

• At first I found it hard to see myself as my report showed. But now I find I capitalize on my strengths and can work on my areas of weakness.

• We have formed a cohesive group and I have been able to go to three peers for individual mentoring on specific issues. In terms of new entering leaders, this will be effective.

• Another point that was a spin-off, we have formed a women-only group to learn to publish academic materials. This is a safe place for us to learn this new skill. I think this will be very effective. This is very important because of the difference between promotion of women and of men.
APPENDIX III:

EVALUATION OF THE ACADEMIC LEADERSHIP PROGRAM AT
The University of the Western Cape, Cape Town, South Africa

February 1 – April 30, 2005
Interim Report

Photos of ALP by Anita Maurtin-Cairncross, Project A

Evaluation Provided for:
University of the Western Cape and University of Missouri
Schools of Nursing

By
Tanya D. Whitehead, Ph.D.
University of Missouri, College of Arts and Sciences
104 Scofield Hall 711 East 51 Street
Kansas City, Missouri USA

Background
The University of the Western Cape has initiated an academic leadership training program as one component of an academic development program funded by US AID and operated in partnership with the University of Missouri.

The goals of the UWC Academic Leadership Program (ALP) are as follows:
1. Provide feedback to each participant from four different instruments focusing on values, personal preferences, academic leadership competencies and occupational personality profile. Integrate that feedback to identify potential areas for personal development.
2. Explore theoretical and applied models of leadership that focus on “mastery of self”, “mastery of relationships”, and “mastery of action”.
3. Highlight the similarities and differences of academic leadership when compared to other leadership context.
4. Identify the elements of a “leadership culture” at the University of the Western Cape and areas for improvement.
5. Provide opportunities for “peer coaching” and a chance to develop a learning plan for each participant.
6. Link critical points of the US AID funded Higher Education Partnership grant to leadership development.
Method
The fourteen academic faculty (8 women, 6 men) from UWC who entered the training program in January 2005 were interviewed in April 2005 for an Interim Evaluation of program usefulness. Each person was given the opportunity to provide written and verbal feedback in a confidential face to face structured interview format conducted by an outside evaluator.

Findings
The following scale was used for the evaluation of program activities:
0 = Missing information
1 = Excellent
2 = Very good
3 = Good
4 = Fair
5 = Poor

All fourteen participants in the academic leadership program were interviewed. One participant was interviewed by telephone due to a death in the family that prevented a face to face meeting.

Table 1: Overview of participant ratings of ALP activity usefulness
Overall relevance of content for academic leaders
Organization and pace of the workshop
Overall knowledge and effectiveness of presenters
Overall satisfaction with this session
Provided a comprehensive self-evaluation and evaluation by peers
Introduced theories of leadership & strategies for academic leadership
Provided opportunities to develop a network of peers to enhance effectiveness
Provided tools & ideas that will enable you to create a year-long learning plan
Provided you with tools & strategies you can use immediately while at work
Assessment workbook & instructions sent prior to session
On-site notebook materials & handouts

Statistics

- N Valid
- N Missing
- Mean
- Median
- Mode
- Range
- Minimum
- Maximum

Variables
As shown in Table 1, participants rated usefulness of leadership training activities on eleven variables related to theoretically based leadership training components. Each area is addressed individually in the sections below.

1. **Overall relevance of content for academic leaders** 69% rated Very Good - Excellent

Table 2:

<table>
<thead>
<tr>
<th>Overall relevance of content for academic leaders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>------------</td>
</tr>
<tr>
<td>Valid</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Figure 1:

ALP program participants provided the following verbal feedback to further illustrate their rating.

- Appropriate, some concepts could have been refined – like introvert/extrovert
- Good leadership – based too much on personality traits rather than leadership dimension (ex: decision making style, function of role in team, role adoption, management style)
- Learned how a person can make yourself heard in a group
• Learned how to assert oneself, be less concerned with people’s comfort about what you are saying rather than make sure they hear what you mean.
• Good leadership – based too much on personality traits rather than leadership dimension (ex: decision making style, function of role in team, role adoption, management style)
• Strength was to meet with people from all across the university.
• While I understand the relevance of the personality profile, many of us were uncomfortable with it.
• Self-evaluation instrument was tedious and people trying to get it done.
• Completion was very rushed, made for a bad mood
• Parts were contradictory and tedious.
• Results were encouraging and surprisingly a good match, encouraging.
• It was great getting to know yourself better.
• Process needs improvement: Would have valued more time spent on specific issues faced at UWC.
• Needed more time to address concerns as they were floated by participants.
• We should have had pre-reading on leadership. There wasn’t enough time to go through all the handouts during the workshop.
• I did not know what to expect. I trusted the developers of the course, that it was based on sound principles.
• I liked the 360 evaluations. They helped more than one might think. I learned a lot from the test results; such simple questions give such an elaborate result.
• Useful as a start to focus on personality.
• It was quite relevant to our dynamics.
• Balanced context.
• Context could be less theories and more practical. It was so much to take in that perhaps important things were lost.
• The idea was not to make it too theoretical, but to make it practical. The theory was balanced to make sense of hands-on experiences. I think we got sufficient of both. I liked the balance between theory and practical application.
• What could have been improved was a prior knowledge of what it was going to be about. Prior reading might have helped.

2. Organization and pace of the workshop. 100% reported Very Good to Excellent

Table 3:

<table>
<thead>
<tr>
<th>Organization and pace of the workshop</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid 1 Excellent</td>
<td>7</td>
<td>53.8</td>
<td>53.8</td>
<td>53.8</td>
</tr>
<tr>
<td>2 Very Good</td>
<td>6</td>
<td>46.2</td>
<td>46.2</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>13</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>
Participants reported the following to illustrate their rating of the organization and pace of the February 2005 workshop sessions:

- There was no rush and no dragging. We covered the topics in detail.
- Approach using case scenarios rather than lecture
- Discussion very helpful – summaries helpful
- It was excellent that we pledged confidentiality of everything discussed
- Well skilled leader, able to introduce feedback, loop back into discussion.
- South Africans don’t like conflict, but we still challenged each other.
- It was well structured, but we needed more role playing.
- I preferred it as an 8-5 event so that I could go home or to the office each evening.
- I liked being able to go home each evening, but could have arranged to stay at retreat if needed; both ways have merit.
- There were very good case studies that we didn’t have time to do, but it was very useful.
- I liked going home each night
- It’s good to have 4 days and go home in the evening. I went back to the office in the evenings. It was more conducive to integrate what you learned and to see what was happening in the office

3. **Overall knowledge and effectiveness of presenters:**
   **100% rated Very Good to Excellent**

   **Table 4:**

<table>
<thead>
<tr>
<th>Overall knowledge and effectiveness of presenters</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid 1 Excellent</td>
<td>11</td>
<td>84.6</td>
<td>84.6</td>
<td>84.6</td>
</tr>
<tr>
<td>2 Very Good</td>
<td>2</td>
<td>15.4</td>
<td>15.4</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>13</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Participants made the following illustrative comments:

- Appreciated the individual one-to-one after the assessments.
- Good advice to take the entire assessment; don’t choose your favorite parts.
- He was encouraging.
- Shift to seeing role as outcome-based rather than being perfectionist
- What I liked about Ron was he was objective. He showed his personal self. I felt he understood each of us; he was endearing.

4. **Overall satisfaction with this session. 100% rated Very Good or Excellent**
Table 5:

<table>
<thead>
<tr>
<th>Overall satisfaction with this session</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>Valid</td>
</tr>
<tr>
<td>2 Very Good</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Participants provided the following verbal feedback to illustrate their ratings:

- To make it “excellent”, I think one-to-one between trainees and presenter to go over the 360 evaluations.
- Could Rob stay and meet individually with people the following week?
- Establish individual plan.
- I have attended many workshops over 20 years. This was the best I have ever attended.
- It was held at a bad time of the year: first week of classes. We were concerned about what was happening back in the office. A better time of year is mid-term; perhaps end of April or early May. Some of us had to come back to the office at night. I would prefer a 3- or 4-day retreat with overnight if the timing is correct.
- I enjoyed it. It was a very positive experience. It was a great thing to build up contacts among other people with similar problems.
- I was happy with the interactions of the sessions. We were able to speak about our experiences. Maybe it could be improved by being more practical, especially more case studies raised by UWC people. If some of us were new in position, but could discuss with more experienced peers.
- This is not my first time as department chair so I had a better idea of how things work at different levels than some of the others.
- I felt privileged to be one of the trainees. It boosted my confidence in my ability to do the work of chair. I felt more in control of the position.
- If reading were much increased, then it would be better to stay over, but I liked going home in the evening.
- That was excellent because now I know many department chairs I never met before.

5. Provided a comprehensive self-evaluation and evaluation by your peers of your leadership strengths and weaknesses. 91% rated Very Good to Excellent
Table 6:

Provided a comprehensive self-evaluation and evaluation by peers

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>1</td>
<td>5</td>
<td>38.5</td>
<td>41.7</td>
</tr>
<tr>
<td>Excellent</td>
<td>2</td>
<td>6</td>
<td>46.2</td>
<td>91.7</td>
</tr>
<tr>
<td>Very Good</td>
<td>4</td>
<td>1</td>
<td>7.7</td>
<td>100.0</td>
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<tr>
<td>Total</td>
<td>12</td>
<td>92.3</td>
<td>100.0</td>
<td></td>
</tr>
<tr>
<td>Missing System</td>
<td>1</td>
<td>7.7</td>
<td></td>
<td></td>
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<tr>
<td>Total</td>
<td>13</td>
<td>100.0</td>
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</tbody>
</table>

Participants provided the following comments to illustrate their rating:

- When we did the psychometrics tests, it got boring. I was not sure what I even marked. But there was a lot of truth in how the analysis came out. It was nice that it highlighted strengths we were not even aware of. It was very helpful to get pointers from the group.
- One thing that really stood out for me was the 360 evaluation. Despite my experience in the past, this is the first time I have had a good look at myself.
- I found it hard to see myself as my report showed. But now I find I capitalize on my strengths and can work on my areas of weakness.
- Mechanism good, but the process was poor. Problem was that people nominated their own evaluators – which were not necessarily the right reviewers. Also, reviewers felt exposed by their answers.
- Gross over-evaluation of expertise/competence from what I observed.
- A person in the session should not have evaluated another participant.
- More anonymous review process.
- Didn’t leave with a complete feeling of understanding; needed individual time to explore, in personal consultation. I would have liked more.
- The feedback was very interesting. It was excellent to learn what to work on. It was so accurate that it was scary. The way it was handled, it was not intimidating or embarrassing.
- In the time given, they could not have gotten more information. It was very intense workshop and excellent. Leaders were very available to individuals and the group.

6. **Introduced theories of leadership and strategies for academic leadership.**
   54% rated Very Good or Excellent; 39% rated Good; 8% rated Fair
Table 7:

<table>
<thead>
<tr>
<th>Introduced theories of leadership &amp; strategies for academic leadership</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong><code>Frequency</code></strong></td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>Valid</td>
</tr>
<tr>
<td>1 Excellent</td>
</tr>
<tr>
<td>2 Very Good</td>
</tr>
<tr>
<td>3 Good</td>
</tr>
<tr>
<td>4 Fair</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Participants illustrated their ratings with the following comments:

- It could be improved. I didn’t feel I got theories, just my own 360 evaluation.
- Being spread over 4 days was a strength, but it was also hard because people didn’t have 4 days to spare.
- Personal leadership style was well articulated, but the further we went into how you might evolve was uni-dimensional. Information was not provided across a range of domains, and theories were blurred.
- Role playing was constructive.
- People had to take the initiative and do the reading themselves.
- We touched on it, but we didn’t have enough time to really cover theory. We needed more workshops just on theory. I feel we needed more theory, but we might get that in our ongoing sessions.

7. Provided opportunities to develop a network of peers to enhance your effectiveness as an academic leader. 85% rated Very Good or Excellent; 15% rated Good

Table 8:

<table>
<thead>
<tr>
<th>Provided opportunities to develop a network of peers to enhance effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong><code>Frequency</code></strong></td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>Valid</td>
</tr>
<tr>
<td>1 Excellent</td>
</tr>
<tr>
<td>2 Very Good</td>
</tr>
<tr>
<td>3 Good</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Participants reported the following:

- Suddenly, I know people in camps I didn’t know before.
The size of the group was perfect. If there had been more people, I might have been hesitant to speak up.

Now I can E-mail chairs – informal Q&A in all kinds of topics.

Would have liked people to be paired off, structure in mentorship pairs, or 3-4 in a mentorship team. The group was too big to just leave it.

Meeting to put forward what issues the UWC people want to address – the burning issues – these then showed up as theories (it gave us a chance to consort)

Operational/defining goals. We had the chance to have a practical application to our issues

Have not had enough time to meet. The first meeting was just to set agenda and plan schedule. Not everyone could attend the second. However, there is potential, especially since a sub-group of women are now meeting to mentor writing for publication

It is working well. We meet, we e-mail each other. It is very helpful to meet people with similar needs and situations.

That was an outcome, but it needs to be followed up. But that does not depend on them anymore; we have to carry it out. The network exists, but it needs to be followed up (reinforced). I have not had much contact with peers after session due to lack of time. Perhaps if more practical objectives would be established for the group that would commit us.

The group built a strong bond.

We have formed a cohesive group and I have been able to go to three peers for individual mentoring on specific issues. In terms of new entering leaders, this will be effective.

Another point that was a spin-off, we have formed a women-only group to learn to publish academic materials. This is a safe place for us to learn this new skill. I think this will be very effective. This is very important because of the difference between promotion of women and of men.

The group has decided to come up with a white paper to show what is expected of Heads of Departments and where they will get support.

7. **Provided tools and ideas that will enable you to create a year-long learning plan.**  
85% reported Very Good or Excellent; 14% reported Good or Fair

Table 8:

<table>
<thead>
<tr>
<th>Provided tools &amp; ideas that will enable you to create a year-long learning plan</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>1 Excellent</td>
<td>4</td>
<td>30.8</td>
<td>30.8</td>
</tr>
<tr>
<td>2 Very Good</td>
<td>7</td>
<td>53.8</td>
<td>53.8</td>
<td>84.6</td>
</tr>
<tr>
<td>3 Good</td>
<td>1</td>
<td>7.7</td>
<td>7.7</td>
<td>92.3</td>
</tr>
<tr>
<td>4 Fair</td>
<td>1</td>
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<tr>
<td>Total</td>
<td>13</td>
<td>100.0</td>
<td>100.0</td>
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</table>
Participants made the following illustrative comments:

- I am doing a 3-month planning session for myself. I would like to have a 6-month review from my peers to be sure I am achieving what I am supposed to.
- They could have included in the workshop towards planning and how to plan.
- I got the tools at the workshop, but due to the structure of my work, I am not able to use them in a structured way.
- Don’t mix deans and heads of schools with chairpersons – makes it awkward to share. Group should be more homogenous.
- Specifics weren’t “teased out” – no detail, just identified traits
- It is very early; we are planning another workshop and speakers
- One didn’t leave the workshop with those tools in place.
- The momentum has been maintained and has not died out.
- There is a year-long plan, but the problem has been to find a time at which everyone can attend.
- We identified our goals in session as a group. Then we took them from group to group. We had developed them in public, but no one monitors them. No one knows if I am doing them
- This part is the least clear to me. What now? Where does it lead?
- They awakened in me aspects of leadership and how to be a leader. It was done very well. They highlighted the reading of the mistakes we make in dealing with people.

8. **Provided you with tools and strategies you can use immediately while at work.** 83% rated Very Good or Excellent; 17% rated Good or Fair

Table 9:

| Provided you with tools & strategies you can use immediately while at work |
|---|---|---|---|
| | Frequency | Percent | Valid Percent | Cumulative Percent |
| Valid | 1 Excellent | 5 | 38.5 | 41.7 | 41.7 |
| | 2 Very Good | 5 | 38.5 | 41.7 | 83.3 |
| | 3 Good | 1 | 7.7 | 8.3 | 91.7 |
| | 4 Fair | 1 | 7.7 | 8.3 | |
| Total | 12 | 92.3 | 100.0 | |
| System | 1 | 7.7 | | |
| Total | 13 | 100.0 | | |

Participants made the following illustrative comments:

- Many of us were going through changes, and one aspect we had to deal with was the management of conflict.
- It’s about teamwork, and we learned a great deal about how to tell people what we want them to do. We got specific information on how to handle conflict.
- The workbook of the program not specific enough.
- Conflict resolution training was needed. There was a small sample of a wide range of possible. More types of situations would have been helpful. Needed more time
- My own issues that I battle as leader have not been resolved.
- We need small group (3-4 participants) mentoring for strategy building. Develop intimate awareness of each others’ issues. Perhaps the 360 assessment could have been used to group people who could be of help to each other.
- A strength was that we stayed in contact and kept it going.
- One reason I was excited to go to the workshop was to see a leader in operation. There were quite a few case studies, but the number of situations is so large that the case studies are too few. The time was too limited to cover the specific topics we needed.
- Maybe I use them in a sub-conscious way.

### 10. Assessment workbook and instructions sent prior to session

67% rated Very Good to Excellent; 33% rated Fair or Poor

Table 11:

<table>
<thead>
<tr>
<th>Assessment workbook &amp; instructions sent prior to session</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
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<td>33.3</td>
<td>33.3</td>
</tr>
<tr>
<td>3 Good</td>
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<td>4 Fair</td>
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<td>15.4</td>
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<td>88.9</td>
</tr>
<tr>
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<td>11.1</td>
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<tr>
<td>Total</td>
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</tr>
</tbody>
</table>

Participants recommended the following improvements:

- Explain ahead about why we have to fill in the questionnaires, how the information would be used. Generate more commitment.
- Useful, but perhaps mix could be refined around leadership
- Have available on-line, at a website.
- Get everyone informed much earlier.
- I was given too little information. I would have liked to have info from my dean to give context that since I am a new academic leader, there are certain skills I need to acquire.
- The person who told me about it was consistent and persistent so I got it done.
- The info could have said: ‘From this, a profile of your management skills will be drawn and used to help you improve.’ We needed to know how it will be used: for the individual’s benefit.
- After selection notification, the person should be informed enough that they are not completely in the dark. Specifically, people should be told how the responses will be analyzed and used.
- It was adequate.
11. On-site notebook materials and handouts. 82% rated Very Good or Excellent; 18% rated Good

Table 12:

<table>
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Participants provided the following additional feedback:

- What made it nice was that this was a flexible guide.
- We didn’t stick to the training materials.
- We should have had a pre-reading. From that we would have had questions and input for the session.
- The materials were quite good, but we should have gotten them earlier.
- Leadership development program – curriculum was American, but issues were South African.
- Examples were too American by case study names, but concepts were global.
- Some concepts were American, i.e. tenure and provost, but the discussion was generic.
- Universal higher education issues were reflected. Maybe bring racial issues & cultural issues up, but ‘American’ was not a problem, was not way off.
- The materials we got at the workshop were not directly related to workshop situations. We did not refer to them. There was no reason for people to read them.
- Pre-reading would have helped.
- What we did use in the workshop was good, very clear.
- I didn’t find mistakes in it.
- There was not enough time to go into it.

12. Welcome to the LDP (relevance of content to academic leaders). 92% rated Very Good to Excellent
Table 13:

<table>
<thead>
<tr>
<th>Relevance of - Welcome to the LDP</th>
<th>Frequency</th>
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</table>

13. **Welcome to the LDP (effectiveness of presentation)**  
85% rated Very Good to Excellent, 15% rated Good

Table 14:

<table>
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14. **Leadership in Action (relevance of content to academic leaders)**  
85% rated Very Good to Excellent; 15% rated Good

Table 15:

<table>
<thead>
<tr>
<th>Relevance of - Values in leadership &amp; fellowship</th>
<th>Frequency</th>
<th>Percent</th>
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15. **Leadership in Action (effectiveness of presentation)**  
92% rated Very Good to Excellent; 8% rated Good
Table 16:

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16. **Values in Leadership and Fellowship (relevance of content to academic leaders)**
85% rated Very Good to Excellent; 15% rated Good

Table 17:

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17. **Values in Leadership and Fellowship (effectiveness of presentation)**
92% rated Very Good to Excellent

Table 18:

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18. **Comments from Rector Brian O’Connell (relevance of content to academic leaders)**
39% rated Excellent; 15% rated Very Good; 46% rated Good
Table 19:

<table>
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19. Comments from Rector Brian O’Connell (effectiveness of presentation)
75% rated Very Good or Excellent; 25% rated Good

Table 20:

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One participant contributed the following explanation:
- I did not agree with statement he made.

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21. Values and Motivation Inventory (effectiveness of presentation)
100% rated Very Good or Excellent
Table 22:

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22. **Case Study – Values in Academic Leadership (relevance of content to academic leaders)** 77% rated Very Good or Excellent; 23% rated Good

Table 23:

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23. **Case Study – Values in Academic Leadership (effectiveness of presentation)** 92% rated Very Good or Excellent; 8% rated Good

Table 24:
Presentation of - Case study: values in academic leadership

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24. Individual Personality Assessment: Results from the Jung Type Indicator (relevance of content to academic leaders).

92% rated Very Good or Excellent; 8% rated Good

Table 25:

Relevance of - Individual personality assessment: results from the Jung type indicator

<table>
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25. Individual Personality Assessment: Results from the Jung Type Indicator (effectiveness of presentation)

100% rated Very Good or Excellent

Table 26:

Presentation of - Individual personality assessment: results from the Jung type indicator

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</table>
26. Relational Leadership, Personal Management and Dealing with “Difficult People” (relevance of content to academic leaders).

70% rated Very Good or higher; 30 rated Good to Fair

Table 27:

| Relevance of - Relational leadership, personal management & dealing with "difficult people" |
|---|---|---|---|
| Valid | Frequency | Percent | Valid Percent | Cumulative Percent |
| Excellent | 7 | 53.8 | 53.8 | 53.8 |
| Very Good | 2 | 15.4 | 15.4 | 69.2 |
| Good | 3 | 23.1 | 23.1 | 92.3 |
| Fair | 1 | 7.7 | 7.7 | 100.0 |
| Total | 13 | 100.0 | 100.0 | |

27. Relational Leadership, Personal Management and Dealing with “Difficult People” (effectiveness of presentation)

83% rated Very Good or Excellent; 17% rated Good

Table 28:

| Presentation of - Relational leadership, personal management & dealing with "difficult people" |
|---|---|---|---|
| Valid | Frequency | Percent | Valid Percent | Cumulative Percent |
| Excellent | 7 | 53.8 | 58.3 | 58.3 |
| Very Good | 3 | 23.1 | 25.0 | 83.3 |
| Good | 2 | 15.4 | 16.7 | 100.0 |
| Total | 12 | 92.3 | 100.0 | |
| Missing System | 1 | 7.7 | | |
| Total | 13 | 100.0 | | |
28. Using Assessment for Development: Different Perspectives (relevance of content to academic leaders).
85% rated Very Good or Excellent; 15% rated Good

Table 29:

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29. Using Assessment for Development: Different Perspectives (effectiveness of presentation)
75% rated between Very Good to Excellent; 25% rated Good

Table 30:

<table>
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<tr>
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30. Academic Leadership Competency Inventory Results (relevance of content to academic leaders).
84% rated Very Good to Excellent; two participants did not respond

Table 31:

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<tr>
<th>Relevance of - Academic leadership competency inventory results</th>
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30. Academic Leadership Competency Inventory Results (effectiveness of presentation)

91% rated Very Good to Excellent; 9% rated Good

Total 31:

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<th>Presentation of - Academic leadership competency inventory results</th>
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32. Academic Leadership at Western Cape: What’s Valued and Why? (relevance of content to academic leaders)

Relevance of - Academic leadership at Western Cape: What's valued & why?

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<th>Relevance of - Academic leadership at Western Cape: What's valued &amp; why?</th>
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33. Academic Leadership at Western Cape: What’s Valued and Why? (effectiveness of presentation)

55% rated Very Good or Excellent; 36% rated Good, and 9% rated Fair
Table 34:

**Presentation of - Academic leadership at Western Cape: What's valued & why?**

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34. **Occupational Personality Profile (relevance of content to academic leaders)**
91% rated Very Good to Excellent; 9% rated Good

Table 35:

**Relevance of - Occupational personality profile**

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35. **Occupational Personality Profile (effectiveness of presentation)**
73% rated Excellent; 27% rated Very Good

Table 36:

**Presentation of - Occupational personality profile**

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36. **Building Effective Departments: Coaching and Mentoring (relevance of content to academic leaders)**
83% rated Very Good or Excellent; 7% rated Good or Fair
Table 27:

<table>
<thead>
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<th>Relevance of - Building effective departments: Coaching &amp; mentoring</th>
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37. Building Effective Departments: Coaching and Mentoring (effectiveness of presentation) 64% rated Very Good or Excellent; 37% rated Good or Fair

Table 38:

<table>
<thead>
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38. Peer Coaching (relevance of content to academic leaders). 64% rated Excellent; 27% rated Good; 9% rated Fair

Table 39:

<table>
<thead>
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<th>Relevance of - Peer coaching</th>
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- This area needed to have a method: Who does the mentoring? Who gets it?
- Establish a plan and carry it out.
Our development plan should be to get an input on peer coaching.
Could be a real follow-up; a second session so it could be developed further.

39. Peer Coaching (effectiveness of presentation)

60% rated Very Good or Excellent; 40% rated Good or Fair

Table 40:

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Needed more time for peer coaching – having an ongoing relationship

Qualitative Questions and Responses

40. What knowledge or skills did you acquire at the February session?

I gained the realization of how one’s personal style influences reaction.
I gained knowledge of other people’s styles. I’m looking at things differently, seeing consequences. Leaders’ focus should be on the process, not the content.
This has reinforced previous learning. Things were brought out into the open and discussed.
One skill I learned was that I was encouraged to call colleagues in other departments to discuss issues I cannot discuss in my own department.
I learned that “you don’t need to go it alone.”
One thing that stood out for me was the 360° evaluation look at my leadership style and my weaknesses. I appreciated the suggestions of how to work on my style.
I learned a lot from the outcome of the 360° assessment and a lot from the case studies.
I acquired an understanding of the kind of person I am. I gained information on problem solving skills. We were encouraged and learned self acceptance.
What comes to mind is dealing with difficult people. The personality assessment I also liked. Since I could see myself in the analysis, I found it most useful.
In terms of my personality, it allowed the opportunity to look at my strengths and weaknesses. Prior to the session, I was ready to give up. Through the session, I realized I could do it and I could learn how to manage my weaknesses. It gave me support and confidence. The evaluation helped me improve my skills.
I had had a limited idea of leadership before, and now I know everyone can be a leader.
The best thing I learned there was about myself. It was amazing how much accurate information you can extract from a few questions.
When there is a problem now in the department, I can try to be calm and keep my emotions out of it. I can look at the issues, talk to all the people, and try to get them together. It gave me confidence.

Need to be dealt with as an individual leadership style, but the context in which we operate is very important here. Very complicated variables that constrain or facilitate relationship between person and setting. The organizational climate and culture. Slowing down reaction style.

The reason I liked the conflict presentation is because leaders fear dealing with difficult people. What he did was to reverse roles and show how to deal with it. Just the other day, a colleague came into the office very angry. He sat across from me, leaning forward and a time kept repeating that he was angry – in an aggressive way. His body language said “I am here for a fight.” I used the skills Rob demonstrated at the workshop to try to get my colleague to speak about the problem rather than continuing to share his feelings about the people with whom he was in conflict. He actually left saying, “Thank you for listening to me and thank you for the advice.” I didn’t say, “I agree with you.” I just told him it was very interesting and that I would like to hear the other side of the problem.

41. Based on your experience, what was the most valuable part of the February session?

- It changed how I interact with my colleagues. In some cases, we have learned how to accommodate for our areas of weaknesses. It is also the way you look at others, both peers and superiors. You now know a little more about leadership qualities and you look for those. It also helps you know how to approach people based upon their different personality types.
- The evaluation, the 360°, was very informative.
- The peer counseling was highly valuable as was the role playing.
- The theory information was very constructive.
- A reminder of the role that I as an individual leader play in dis-empowering myself.
- Exercises for group (day 1), decision making model. First individual, then group. Be careful that the strongest person doesn’t impose the wrong decision on people. Learn to trust other people’s solutions to problems. Negotiate with people instead of imposing on them.
- The most valuable was the colleagues’ evaluation feedback
- The interaction with others.
- The objective for each of us (or most of us) was to identify how we could improve as leaders, so the most valuable thing was to learn about ourselves.
- The most valuable part was the personality profile.

42. Has this experience changed how you think about your role as an academic leader?

- Yes, my thinking about my role as a leader shifted. I thought I was a leader by default, but now I see that everybody can lead as long as you get to know your style and can learn to use it well.
Yes, before this I didn’t think I was a good leader, but now I know everybody can be a leader. It increased my competence.

Yes, absolutely.

Has not changed how I think because I am a reluctant leader and I am intimidated by the work ahead.

The one moment Rob spent speaking to me about my 360 appraisal changed my whole vision of my role and how I work now.

This has changed me and made me to be able to utilize my strengths to manage my department effectively.

No, but I think I may be doing things unconsciously different as well. It was reinforcing what I am already doing. It was reassuring.

Definitely charged, but I still go into a dip where I think it isn’t working. Other times I am at a high point when I see that what I learned in the workshop is working.

It was very helpful to look at my colleagues rating of me. It was especially helpful to see how colleagues view your leadership role in your department. It made me look more closely at how I do things. You put expectations on yourself that differ from what others expect of you.

43. In what specific ways is the leadership training too Americanized – and what suggestions do you have? Can you give an example?

In some ways, the presenter succeeded in putting more emphasis on UWS. Most of the exercises we did were about real issues at UWC. As I recall, the presenter was very concerned to have a presentation that was not too Americanized. I think there was enough opportunity to engage with UWC issues. It may be that the tests were an American thing, but overall I would think it reasonably reflected the way I see myself and there was a list I benefited from. It was very relative to our works at UWC overall.

In many ways, the situations in both countries are the same, but I am not sure to what extent presenters are aware of the South African situations. Yet I also don’t know how a South African person could have done a better job. Perhaps joint presenters for contextual input from a South African and American presentation team. But it would have to be a complete outsider to UWC.

It was not my impression that it was too Americanized. Rob continuously tried to localize it and the issues are universal anyway.

Outside the formal setting, I heard how much people who attended liked the session and found them helpful.

The first day we had a talk about it; cultural imposition, but it is not an issue.

The focus was not on the literature, so it was never a problem.

Management is an international endeavor, so it was quite relevant.

No, it was not too Americanized. I did not feel that.
44. How could the leadership program be made more relevant to South Africans?

- Go through the deans and heads of departments to let everyone know the history of the project and why Americans are doing this kind of evaluation; it reminded people of Apartheid.

45. What would it take to enhance this leadership development program?

- Have people who have been in their leadership role for a couple of months or longer, not brand new people be the ones who are trained.
- Apart from 4-day workshop, have a refresher course – something linked to it, someone to report back to. Keep up motivation to maintain commitment. There is a danger that with so many workshops going on, it could just become another formality. We could lose the momentum we built in the first 4 days. A workshop for current issues and real life instances that are real now, and not keep it at a generic level.
- Do more case studies and exercises; have them prepared in advance.
- Do more role playing
- Mentoring and coaching should be more formalized and carry forward. Consolidate those quickly. Program was focused very much on reflection. It was not crystallized into a plan and not operationalized as it should have been.
- It was voluntary to participate. It should be more part of a person’s career path for people who are identified for leadership development training. Should be more thoughtfully decided – to protect the focus of the university, in collaboration between identified leaders and that they have agreed.
- If we had some preparatory work and pre-reading and bring specific issues we could discuss, that would be better. I am not sure we were prepared well enough for this course. Provide more information in UWC organizational structure.
- From senior management level, there should be background information (bigger picture) given to the heads of departments.
- Since people pass through their leadership period too quickly in 2 years, is this wasted on the person who returns to ordinary faculty and is no longer in leadership position? Should be linked through the UWC structure and policy.
- Extend the days to 5 days, Monday through Friday. Leave the evenings off so people can go home. I appreciated that we started and finished on time.
- My suggestion for selection would be to take both those who are in current leadership roles as well as those who have potential for leadership and might be in leadership roles in the future. People could then request the opportunity to be considered for attendance.
- What needs to be done must be done at a personal level, not a change in the workshop. I don’t believe anything else could be done. The self evaluation was very useful. It let me stand aside and assess myself better in the workplace and as a leader.
- International team to co-present the workshops. The American could also read the South African literature on leadership and use that in the workshop. Cut down a bit on theory and put in more practical information on how people deal with issues and
with problems they face. I loved the organizational sheet addressing how you would arrange a project by priority.

- It would help probably before they go on a leadership program like this that they get a good orientation to the university structure and policy by attending the orientation for academic staff. In the sessions, I could hear that my colleagues were having a sort of identity crisis. In addition to your role as a chair, a knowledge of university policies – an orientation – would help new people. Then people would come into the training with this background knowledge about the university.

- Also, attendees could provide a list (maybe a tick-off list) of topics they need to have addressed in the training before the session. Also, before the attendees go through the course, they should write a short page or so on what they think about leadership so they can measure their learning as they go on.

46. What should someone who was considering taking part in the Leadership Development Program know before they agree to participate?

- Tell prospective candidates that what you put into it is what you will get out. The most important thing is how you use that knowledge.
- Should be made clear that the group is an important networking group.
- More info on what program is about; what are the main goals? Highlights of program? People need to be able to get up to speed.
- Give all dates up front.
- Give dates for event in November.
- Some people felt unwilling to do personality assessments. Assure people of confidentiality. Mention goal, of course, but not details
- Give them a preamble as to what it is about. Let them know what is involved and how the information will be used
- Share agenda ahead of time to the participants. Share the context of the workshop, and give readings ahead of time.
- Other things to include: Conflict resolution; should send pre-workshop questionnaire to get info on relevant topics (6 months before hand) – this means identifying people 6 months before.
- Question: How were the persons chose to come to the group? Were they nominated or did they volunteer: I think that information should be open, and that people who want to participate should be able to.

47. Is there anything else you would like to tell the program planners about the February session?

- Not too much prep, but was powerful to bring responses into workshop
- It was a relaxed atmosphere; very enjoyable.
- Hold 2 weeks before the start of the term (end Jan).
- Send reading material 8-10 weeks earlier (end Nov).
- You probably think you have a chance to see those things you talked about implemented. It was very helpful to learn about the problems other experiences. There is now an idea that we must write a white paper, which is worth a try. The
university needs to look at the role of the chair person and empower that position. Having an elected person does not go along well with the overall structure of the university. This may be a remnant from when we were democratizing the university and should be reconsidered.

- The timing was not good because it occurred during term. While it would be hard to find any time that is good for everyone, mid-year might be a good time. Perhaps one week of the 3-week break (end of June, beginning of July). This would also be a bit better because at mid-term, we are encountering these issues so they would be more fresh.
- The timing could better be changed to either December or January.

Summary

Based upon an analysis of the Academic Leadership Program (ALP) at mid term via a set of semi structured interviews with ALP participants, there is widespread general agreement that the program is useful in training new academic leaders at the University of the Western Cape.

Given a generally high level of program appreciation (91%) participants identified relative strengths and weaknesses of the program at mid point.

Among strengths, participants believed that the 360 degree evaluation was both useful and relevant. The organization and pace of the workshops sessions received high marks, as did the major presenter. Most participants liked the meeting format of a shortened week, with free evenings. Many participants would have preferred another month for the workshop.

Participants reported a general sense that the mentoring component of the workshop needs to be better developed, given the high level of interest among participants in engaging in extended peer coaching and mentoring relationships.
Background

The Academic Leadership Program (ALP) culminated from a funding proposal that was jointly written between the International Relations Office and the Office of the Vice-Rector: Academic at the University of the Western Cape (UWC). The proposal had two components viz, on the one hand, leadership capacity building for UWC and on the other hand, curriculum development support for the Department of Nursing at UWC as they would be the only center to offer a regional undergraduate program in Nursing. This proposal was submitted and approved by the American Liaison Organization (ALO).

This report will only focus on the ALP component of the proposal. The primary aim of the funding was to develop an ALP modeled on the program at the University of Missouri (UM). Travel trips between UWC and UM was the major component of the budget.

Activities commenced with Dr Lacey- visiting UWC in mid-July to early-August, 2004. The purpose of this trip was to ascertain the leadership needs at UWC. Meetings were conducted with Deans and Heads Of Departments. In October 2004, Professors. Pretorius (Vice-Rector: Academic) and Persens (Director: International Relations Office) as well as Dr Maürtin-Cairncross traveled to UM-Kansas City to plan the ALP for UWC. Initially, the workshop was planned for August, 2005. However, the project team decided that the program should be moved to Feb 2005 to allow for a full year of implementation and evaluation prior to the end of the ALO funding period that ends April 2006. The ALO representatives requested that activities be re-scheduled to February 2005, in order for the evaluation to be completed at the end of the funding term in December, 2005.

Planning of pre-workshop activities

The ALP would consist of various activities such as the completion of psycho-metric assessments; a four day workshop at the beginning of the year, monthly ‘brown bag lunches’ and quarterly meetings. However, there were other processes that also needed to be clarified prior to the commencement of activities. These included: selection of participants; the venue (and the issue of residential vs. non-residential); date of the workshop.
At UMKC it was resolved that:
- The pilot ALP would include only academic Heads of Departments (three participants per faculty would be allowed)
- The venue would be ‘off campus’ and be residential to ensure full participation
- Deans would be required to nominate participants using their own criteria. One criterion that would be stipulated was that one participant is a woman.
- The workshop would be scheduled for the week prior to the commencement of classes

However, on returning to UWC some of these decisions had to be amended to increase the relevance make this workshop more cost effective. And thus, the ultimate decisions included:

- To reduce costs, the workshop would be ‘off-campus’ but non-residential and thus the venue would be in the environs of UWC
- The stipulated criterion with regard to participant selections was expanded to state that at least one participant be black and one be a woman
- The date for the workshop was re-scheduled to the first week of classes because:
  * the bulk of junior and senior student registration took place in the week prior to the commencement of classes and
  * the term at UWC is only seven weeks long and when colleagues become embedded in teaching and committee work, it would be more difficult to participate in this program

**The phases of the project**

1. Psycho-metric assessments
2. Academic Leadership Competency Inventory – to be completed by participants and raters (identified by participants) to serve as a 360 degree feedback assessment.
3. ALP workshop (February 7 – 10, 2005 at Bell Rosen Hotel).
4. Monthly ‘informal’ lunches
5. Quarterly day-long ‘workshops’.
6. Certification at the end of the year.

- The ALP commenced with **psycho-metric assessments**. Because of the cost involved in the instruments used by UM, it was resolved that comparable instruments would be sought in South Africa. These assessments were loaded onto terminals in a computer laboratory by an external consultancy in order for all the participants to complete these in one session. The test was administered jointly by the consultancy and staff from the Industrial Psychology department at UWC. Reports were generated and e-mailed to the consultant for analysis. This exercise was completed on December 1, 2004. On this day participants also submitted their self rating on the ACLI as well of the names of persons\(^1\) who they chose to rate them. Thus a total of four raters as well as the self-rating from the participant formed the 360 degree feedback. These were

\(^1\) Raters were to come from the categories: a person you report to; a person who reports to you and two peers.
confidential reports and thus the completed forms were returned to the Office of Staff Development using self-addressed envelopes which were provided. These reports were also submitted in the sealed envelopes to the UM-consultant for analysis.

- **The ALP workshop**: the workshop was facilitated by Dr R Williams who facilitates the ALP for the UM. Dr Lacey also traveled to Cape Town to co-facilitate the workshop as she would be developing the evaluation instrument and thus would need to understand the dynamic as well as observe the positive and weakness of the workshop. Participants for the workshops included three participants from the Dentistry and Science faculties, respectively; one participant from the Arts faculty; five from the Faculty of Community and Health Sciences (CHS) as it was resolved that because Nursing was included in CHS faculty both the Head of Departments (HOD) and the deputy HOD of the Nursing department as well as the other three nominations would be included. Workshops were conducted from 09h00 to 16h00 daily.

The topics for the first day included Leadership in action, values in leadership and follower-ship. The day was concluded with participants engaging in their own and other participants’ psycho-metric assessments from the Values and Motivation Inventory (VMI). The rector’s input and his responses to questions asked also provided ‘space’ for relevant discussions to leadership issues at UWC.

On Day Two, participants engaged in various small group activities which included case studies, self assessment activities as well as sharing the results of another psycho-metric assessment, viz the Jung Type indicator.

Day Three was when the participants were involved in role playing which was a very powerful and effective tool for elucidating challenges related to leaders at UWC. The topics and discussions were UWC specific and thus provided opportunities for valuable learning experiences for all participants. The results of the Occupational Personality Profile were discussed individually and in groups for feedback.

On the final day of the workshop activities involved peer mentoring and peer coaching. This was a very effective form of engagement with challenges which were stipulated by individual participants. This type of group work activity within and between groups provided for the development of many interpersonal and leadership skills.

The evaluations of the participants (attached) reflect the positive experiences of participants. In the final session of the day, when participants had to “graduate” another participant and make concluding comments, all participants spoke about the value of this workshop to their leadership roles. All participants were eager to continue with the monthly meeting where they would be able to further share and learn from each other.

**Some of the challenges of this workshop**
- It would have been preferred if all faculties were represented.
- The case studies were ‘too American’ as stated by the facilitators themselves
- There should have more opportunities to frame the context of the workshop.

THE WAY FORWARD

Participants agreed to meet at a scheduled time during the next week to plan the dates for the monthly ‘brown bag lunches’, the quarterly workshops as well as the topics of the workshops.

APPENDIX IV.
REPORTS FROM PARTICPANTS

Meetings and Interviews at UWC June 17 – July 23, 2004
Dr. Kay Libbus

University of Western Cape Administration
Professor Tyrone Pretorius, Vice-Rector
Professor Renfrew Christie, Dean of Research
Professor Jan Persens, Director of International Relations
Professor Ratie Mpofo, Dean of the Faculty of Community Health Sciences
Dr. Anita Maurtin-Cairncross (Staff Development)

UWC School of Nursing Academic Staff
Dr. Thembisile Khanyile, Chair
Dr. Nomafrench Mbombo, Assistant Director
Dr. Elma Kortenbout
Dr. Cheryl Nikodem
Ms. J.D. Jeggels
Mr. S. Arunachallam
Mrs. F.M. Daniels
Mrs. H. Julie
Ms. E. Kearns
Ms. A Splinter
Mrs. Sonja Walker
Mrs. A. Traut
Mrs. E. Fortuin
Mrs. Loretta Le Roux  
Ms. Shamima Mooideen (post-graduate student in advanced midwifery)  
Ms. Haaritha Boltman (post-graduate student in advanced midwifery)

**UWC School of Public Health Academic Staff**

Dr. Debbie Jackson  
Dr. Thandi Puoane  
Dr. Marjorie Sable (Visiting Scholar from the University of Missouri-Columbia)  
Dr. Gail D. Hughes (Visiting Scholar from the University of Mississippi Medical Center)  
Dr. Ann Anderson (Visiting Scholar from London School of Tropical Medicine)

**Clinical Site Personnel**

Sisters in charge of Antenatal Clinic and MOU at Elsies River Health Center  
Sister in Charge at Zakhle Clinic (Khayelitsha)  
Sister Sophie Matthews – Mental Health Specialist for Helderberg Region (Somerset West)  
Ms. Z. January – Occupational therapist and psychosocial therapist for Helderberg Region (Macassar)  
Synnov Skorge, center manager of Saartjie Baartman Centre for Women and Children  
Director of PATCH Child Abuse Center (Somerset West)  
Director of Helderberg Community Crisis Center (Somerset West)

**Clinical Site Visits in communities served by UWC June 17 – July 23, 2004**

**Dr. Kay Libbus**

Tyberberg Hospital  
Elsies River Health Center and Maternity Obstetric Unit  
Saartjie Baartman Center for Women and Children  
Macassar Health Center  
Somerset West Health Center  
Helderberg Community Crisis Center  
PATCH Child Research Center

**National, Provincial, University and School of Nursing Documents Reviewed**


University of Western Cape (2004). University Calendar 2002, Faculty of Community and Health Sciences. Cape Town: author.

South Africa Department of Health. Strategic Health Plan.  

South Africa Nursing Council Home Page. [http://www.sanc.co.za](http://www.sanc.co.za)


Cape Higher Education Commission. (4 April, 2004). Submission of Realigned Curriculum for B Cur Degree in Nursing (General Psychiatry and Community Health) and Midwifery According to Government Notice R425 February 1985 (SANC). Cape Town: Author. Includes: Covering letter to UWC Senate Committees; Detail of first year modules; Detail of second year modules; Detail of third year modules; Detail of fourth year modules; Breakdown of academic and clinical hours; Addendum A – Initial distribution, of institutional responsibilities for offering specific modules. This is subject to discussion in the context of the affordability model and other elements of the Memorandum of Understanding

Memorandum of Understanding for proposed CHEC realigned curriculum for BCur degree in nursing.

Current UWC nursing program curriculum including selected specific undergraduate and graduate modules (courses)
UWC School of nursing self-evaluation report
UWC School of Nursing Policy Manual
  School of Nursing Organization
  Guidelines on Election of Chairperson
  Terms of Reference for Management Committee
  Committee Representations from the school
Mission and Objectives of the University
Admission policy
Staff Recruitment Policy
Equity acceleration program
Throughput rates for 2002 and 2003
UWC assessment policy
Quality assurance policy
Educational exchange policy
Recognition of Prior learning policy
UWC HIV policy
Student Safety
Annual report
Student evaluation
B. Cur Council
Guidelines for Orientation (staff)
Student Disciplinary Code
UWC Visit to University of Missouri St. Louis College of Nursing
Visit of UWC Professor Thembisile Khanyile, RN, PhD
November 22-23, December 8-9

Met with Dean Lucille Travis, RN, PhD, CRNA, BC and Dr. Kim Stieglitz for welcome, general orientation to College of Nursing, overview of programs, and general relationship with UWC to date.

Tour of College and introductions with staff and faculty with Kim Stieglitz.

Met with Dr. Peggy Ellis and Sue Farberman about masters in education program, nurse practitioner programs (family, pediatric, adult, acute care), including implementation and evaluation. Role of problem based learning and advanced nursing practice education discussed. Binders and printed masters program materials were provided.

Lunch with Kim Stieglitz, Roberta Lee, Sue Farberman with discussion of programs on both campuses and general goals for visit.

Meeting with Diane Saleska, nursing clinical skills lab coordinator. Demonstration of the “Simulation Man” computer driven practice model; tour of skills laboratory, shared resources of vendors, financial needs.

Meeting with Chris Tobnick, technology support specialist at College of Nursing. Demonstration of MyGateway blackboard system, course utilization, UM system uses. Discussion of college use of technology.

Meeting with doctoral faculty (Drs. Hsueh, Bachman, Fish) regarding program, potential collaborations, online availability and capability, areas of interest of faculty in order to serve as outside readers and support PhD students.

Dr. Khanyile presented her tiered plan for UWC coordinated system of education at sponsored lunch with a number of UMSL faculty and staff in attendance. Also served to support cultural exchange and increase awareness of South Africa and academic system.

Met with Dr. Jean Nelson, a long time faculty working extensively in undergraduate education using problem based learning. Discussion was lively, including many issues of real-life education and initiation of changing learning styles.
Meeting with Dr. Joel Glassman, Director, Center for International Studies to discuss visit, experiences in collaboration with UWC and UM. Had discussion of evaluation of educational programs as changes were implemented. Dr. Glassman followed up with connection to Dr. George McCall to assist with planning.

On the return visit, the focus was on discussion of research projects. Met with Drs. Donna Taliaferro and Roberta Lee, who are planning a funded visit to UWC in April and May 2005. The visit is intended to be an assessment of research areas and introductions/collaboration with interested UWC faculty.

Lunch meeting with Stieglitz, Lee, Taliaferro, Jerry Durham focused on evolving primary needs of UWC and potential funding sources.

Afternoon meeting via polycom with UMC and UMKC and Dr. Khanyile, who provided a synopsis and summary of her visit. All campuses seemed to find this very informative, and appreciative of the work accomplished by all.

Center for Teaching and Learning Directors Drs. Peggy Cohen and Cheryl Bielema, both who are familiar with the UWC program, met with Khanyile and Stieglitz to discuss strategies for change in major curriculum revisions.

On the final day, Dr. Khanyile attended an Information technology Workshop with Stieglitz on using Centra and MyGateway for online learning, and significant new innovations.

Fatigue from the trip had set in, so a couple hours were spent touring St. Louis.

Meetings and Interviews at UWC July 18 – August 6, 2004
Dr. Lora Lacey-Haun

Approximately 20 meetings were held that included approximately 45 individuals. A semi-scripted interview was conducted at each meeting resulting in the identification of 5 major categories to be considered as the Academic Leadership Program is developed.

- Dr. Anita Maurtin-Cairncross, Coordinator of Project A at UWC- introduction to structures, policies and procedures at UWC
- Rector Brian O’Connell,
- Focus group lead by external consultant Dr. S. Wickham on the topic of supervision
- Executive Director of Human Resources: Ms. A. Hambrook-Glaeser
- Briefing with Vice Rector of Academic Affairs, Professor Tyrone Pretorius
- Focus group discussion with all Deans
- Interview with Dean and Deputy Dean of the Faculty of Arts- Professor S. Ridge and Professor G. Fredericks
➢ Interview with Professor L. Tshiwula, Vice Rector of Student Development and Support
➢ Multiple meetings with Professor Jan Persens
➢ Interview with Professor A. Travill, Deputy Dean, Faculty of Community and Health Sciences
➢ Interview with Professor T. Khanyile, Chair of Nursing Department
➢ Interview with Mr. N. Hendricks, Acting Director, Division of Life Long Learning
➢ Interview with Dean of Science, Professor J. van Bever Donker
➢ Interview with Dean of Education, Professor D. Meerkotter
➢ Seminar on the Ethics of Research conducted by the African Colleges of Medicine
➢ Interview with Dr. I. Miller, Registrar
➢ Interview with Mr. M. Regal, Acting Executive Director of Finance
➢ Interview with Dean of Research Development, Professor R. Christie
➢ Focus group discussion with non-academic heads of departments
➢ Interview with Dr. Chris Tapscott, Dean, Economic and Management Science and Ms. Madge Du Preez
Monday, November 29:

--meeting with Kit Smith for purpose of general orientation and tour of the School of Nursing
--attended undergraduate Community Health course with faculty Teri Scott and Susan Bennett and approximately 40 students. Dr. Khanyile observed class project for that day (received topic, researched topic, and created posters all that morning in class) and was very interested in the teaching techniques used for the class session. About one half hour was devoted to open discussion between Dr. Khanyile and the students, with each asking the other about education and nursing in their respective countries.
--Lunch meeting with Kit Smith to review schedule and objectives for visit at UMKC. Decided to concentrate on undergraduate teaching issues, development of FNP program, and possible research collaboration.
--meeting with Dean Lora Lacey-Haun for formal welcome to the School of Nursing. Also discussed the relationship between UMKC and UWC Schools of Nursing and follow-up from Dean Lacey-Haun’s summer trip to South Africa.
--meeting with Associate Dean Thad Wilson for overview of undergraduate and graduate programs
--attended BSN completion class with faculty member Maithe Enriquez and 6 students. Guest speaker Carlos Poston presented, followed by lively discussion. The purpose of this session was to give Dr. Khanyile an opportunity to see another level of nursing education and different teaching strategies.

Tuesday, November 30:

--Meeting with Maria Little at St. Vincent’s, a community based center with whom the School of Nursing has several collaborative (both educational and service) projects. Discussion revolved around educational experiences for students, as well as the nurse run adult clinic at the site. Also established an important contact for both Dr. Khanyile and Maria as they discussed Maria’s previous, and future, visits to South Africa.
--meeting with faculty member Anita Skarbek, focusing primarily on the use of academic service learning in undergraduate courses.
--lunch meeting with Marje Fonza to explore some historical African American sites in KC and to discuss a variety of topics.
--meeting with Thad Wilson and Melissa Smith to discuss issues involved in the development of a post-graduate primary health program.
--meeting with faculty member Lynn Rasmussen to discuss online clinical programs and courses
--meeting with faculty members Teri Scott, Susan Bennett, and Jan Rice to discuss undergraduate teaching issues and strategies: test construction, clinical experiences, and evaluation methods
--tour of nursing skills lab and discussion of lab experiences/strategies with Mary Wieliczka
--attended small reception with approximately 15 School of Nursing faculty and community partners

Wednesday, December 1:

--breakfast meeting with faculty members Maithe Enriquez, Pat Kelly, Lora Lacey-Haun, Peggy Ward-Smith and Jennifer Hunter to discuss research interests and collaboration
--attended pathophysiology class with faculty member Jan Rice and 42 students. Dr. Khanyile was very interested in the problem based teaching strategy that was used in the class session.
--attended lunch session with students for open exchange and discussion. About 15 students attended and participated in lively discussion of nursing and nursing education in both the United States and South Africa. There was great interest expressed in developing the opportunity for some kind of student exchange program.
--Attended SBC presentation to gain knowledge of various distance education technologies and their applications
--dinner meeting with Dean Lacy-Haun, Thad Wilson, and Kit Smith to discuss next steps and follow-up.

Report by Dr. Kay Libbus of UM on her visit to UWC

Report of Site Visit to the University of Western Cape School of Nursing, September 20-October 1, 2005
M. Kay Libbus, DrPH, RN, Professor
University of Missouri Sinclair School of Nursing
Columbia, Missouri 65211-4120 USA

This report from my site visit updates and amends the preliminary report of June, 2004. Log of visit is appended.

Assessment

Strengths

• In the words of T. Pretorius, (former Vice-Rector of UWC, June 21, 2004) UWC School of Nursing has “the opportunity to make history in South Africa.” According to Prof Thembi Khanyile, director of the UWC School of Nursing, the ministry of health estimated that 1000 new nurses will be needed annually to meet the needs of the Western Cape Province. The UWC School of Nursing was identified by the Minister of Education as one of the two enrolling institutions in the Western Cape
Province for undergraduate nursing students; [the other institution (C-PUT, an institution that will result from the merger of two Technikons and the absorption of the a large diploma program, WCCC, will not admit before January 2006]. UWC was the only undergraduate nursing institution to admit students in January, 2005. It is unclear when C-PUT will be admitting their first intake of undergraduate nursing students.

- A new and innovative provincial baccalaureate nursing curriculum has been created through the Cape Higher Education Commission (CHEC). The CHEC curriculum has gone through several updates since the inception of this curriculum with representatives of all nursing schools and CHEC meeting regularly. The South African Nursing Council has approved the curriculum. UWC taught year one of the CHEC curriculum with the intake of first year students beginning January, 2005. Plans are thoroughly outlined for the four years of the CHEC curriculum as well as completing the existing 2nd, 3rd, and 4th year students you are in the original nursing program.

- A Memorandum of Understanding through CHEC provides support for classroom and clinical teaching from academic staff from the former undergraduate nursing programs at University of Cape Town and Stellenbosch Universities Faculty from the other Schools of Nursing have not yet participated in teaching but are identified in the plan for CHEC implementation.

- Nursing education has been identified as an ‘executive project’ by UWC administration. Nursing education continues to receive support from the University and the Dean of Community and Health Sciences.

- Academic staff from other UWC departments are willing to support the SON missions [for example Dr. Thandi Pouone at the School of Public Health, and an expert in childhood malnutrition, has offered to teach a unit for the School of Nursing in the detection and management of child hood malnutrition and Dr. Debbie Jackson will be teaching a module and research for the SON] . At least three faculty from the School of Public Health are scheduled to teach modules in the updated CHEC curriculum.

- UWC and SON commitment supports the need to continue to produce quality nursing graduates, albeit in a much larger volume [366 first year students were admitted in January 2004 up from a typical intake of 100-120 per year]

- Two additional lecturers were added to the SON academic staff in 2004. Two lecturers have been appointed to permanent positions and three other lecturers appointed. The school is in the process of hiring clinical supervisory faculty (part-time, contract faculty) for the 2006 Academic Year.

- There is now a nucleus of four doctoral prepared academic staff at the SON, at least one of whom has extensive experience as a scholar and researcher. Khanyile, Mbombo, & Nikodem currently are serving as executive committee in decision making for school. Relationships seem very congenial and productive. Mbombo has assumed the role of undergraduate program leader and Nikodem as graduate program and research program leaders. When E. Kortenblut returns from leave in January,
2006 she will assume the role of clinical director. Doctoral faculty cooperating closely to achieve the work of the school.

- There is a relatively new chairperson at the SON who is committed to finding ways to facilitate academic staff development. Professor Khanyile clearly has moved into a strong leadership role in the SON and in the Community and Health Sciences. She is working very effectively with administrators, academic and non-academic staff, and students.

- There is an active academic staff development program with Community and Health Sciences offering assistance to the School of Nursing.

- The majority of School of Nursing academic staff support UWC and provincial policy dictating that academic staff must earn advanced degrees and develop into productive, publishing scholars. Two faculty are writing dissertation proposals and one a thesis proposal. UM Faculty from the Schools of Nursing will be co-supervising for all of these projects. Professor Nikodem is spearheading the development of a new multi-disciplinary online journal, *Journal of Community and Health Sciences*. I agreed to serve on the editorial review board and review manuscripts. At least one SON faculty as submitted a manuscript to date. An important element of the UWC School of Nursing Strategic Plan for 2010 is to increase the body of nursing knowledge through research and publication.

- Research funding is available through a variety of organizations. As a part of the action plan for their UWC SON, Professor Nikodem will be distributing a list of available funding, plus dates, to academic staff. A plan for peer review of research proposals is also being put into place.

- UWC and SON leaders are committed to action. A total of three academic staff/faculty exchanges have taken place to date with four planned prior to the end of ALO funding, March 31, 2006. Specific goals and objectives have been established for past visits with most being met. Goals and objectives for future visits will be evaluated post-site visit. Two large shipments of text and reference books are being sent to UWC School of Nursing from the UMSL and UMKC Schools of Nursing. As noted above, a number of UM faculty are involved with thesis and dissertation supervision. We are waiting for approval from the South African Nursing Council to begin active planning and implementation of the shared UM-UWC Master of Nursing Education Program.

- The SON has moved into a larger physical facility and has established a skills laboratory. Two satellite skills laboratories are equipped, staffed and operational at Tygerberg and Groote Schuur Hospitals. There is some controversy at Tygerberg since the hospital wants to move the lab now that the University has paid to renovate the room. Professor Khanyile and staff and opposing this move.

**Challenges**

- Changing from the traditional modes of nurse-training are not accomplished without difficulty, particularly since the South Africa Nursing Council (SANC) prescribes a training pattern that does not completely reflect the provincial and national need for nurses as the backbone of and major provider for Primary Health Care [SON clinical placement site schedule reflects emphasis on bedside nursing]; A proposal for a Post-
The School of Nursing is out of compliance with the SANC regulation that all nursing academic staff have advanced preparation in nursing education. As noted above, the proposal for a Masters in Nursing Education is currently being considered by SANC.

The 2004 increase in student numbers and the expectations of continued high enrollments place stress on academic staff time and suggest the need to examine existing methods of teaching and assessment. Case-based learning has been introduced in the modules in the new CHEC curriculum. Academic Staff have moved to more objectives types of assessment, including multiple choice examinations for undergraduate students. An action for the strategic plan is to increase throughput rates of students by 5% (from 80 to 85% of those who begin, graduate) and will do an evaluation study to compare the former traditional, and the new case-based curricula.

The necessity for advanced degrees, scholarship and publication place stress on academic staff time and suggest the need to examine existing methods of teaching and assessment. See above.

Non-nursing administration and academic staff have difficulty appreciating the intense and thus expensive, nature of undergraduate nursing education. The Dean of Community and Health Sciences is working to provide additional resources to the School of Nursing. Additionally, other international relationships are being pursued including one that trains students to developed on-line courses from the Netherlands.

SON has identified inadequacy of library materials and learning materials

Student preparation for academic work appears to be uneven; the school is faced with a challenge of having to cater for the mature adults who are returning to learning and well as incoming students from a variety of educational backgrounds. Entrance criteria will be examined and updated as part of the strategic plan. As noted above, the SON hopes to increase the throughput rate by examining entrance criteria, encouraging students to use the academic development services, and improving the efficiency of teaching techniques.

For some students, English is not their first language. As South Africa has 11 official languages, writing in appropriate syntax complicates the academic challenges for many students. See above

The 4000 hour clinical practicum requirement of the SANC stretches academic staff in terms of supervision and students in terms of the unavailability of normal holiday time. This situation has not changed and will continue to offer challenges to nursing education at UWC.

**Identified area of potential collaboration for the UM-UMC Nursing Faculties**

[Areas for collaboration will be refined, specified and extended based on data collected by UWC academic staff visits to UM and additional UM visits to UWC]
Teaching

- UWC and UM academic staff work together to develop alternative and innovative teaching methodologies [for example, self-mediated learning materials including capacity development and teaching methods for skills laboratory; use of Internet based assignments, etc.]; Professor Khanyile has collected and applied certain ideas during her visits to UM
- UWC and UM academic staff work together to develop innovative clinical experiences for students [for example, consider the possibilities of allowing students to use a certain percentages of hours of volunteer time as clinical hours; use ‘alternate’ break experiences such as family studies as clinical hours, increased development of practicum that helps meet S.A. and Western Cape Province health goals such as the development of the nursing clinic at Sarah Baartman Women’s Center, etc.]. Students in the new curriculum have an increased proportion of community based clinical experiences.
- UWC and UM academic staff work together to investigate ways in an increasing proportion of active teaching methodologies may be used
- [for example, developing new methods for teaching the large lecture class and instituting ways in which academic staff can model teaching technologies for each other]. Change to Case Based Curriculum as noted above
- UWC and UM academic staff work together to develop assessment techniques to minimize academic staff marking time [for example, test construction, increased use of objectives types of examinations, use of trained teaching assistant in marking papers, reducing the effort that faculty put into assessing the use of written English rather than the assessment of critical content and skills, etc.]. Noted above.
- UM and UWC to examine ways in which to increase capacity through working with academic faculty external to the School of Nursing and/or UWC [for example, the faculties of the School of Public Health, nursing faculties at UCT and Stellenbosch] Faculty from SPH and other Schools of Nursing are participating in teaching specific Modules in SON
- UWC and UM will work together to examine ways in which to identify and remediate under-prepared students [for example pre-screening with TELP or another instrument to assess academic readiness; early referral to campus services]. See above.
- UWC and UM will collaborate to examine the feasibility of adding post-graduate programs to prepare students for additional service areas in Primary Health Care [for example advanced nurse practitioners such as family nurse practitioners, pediatric nurse practitioners or developing a joint MPH-MCUR degree]. As noted above, NP Program will be proposed to SANC February, 2006. Further, Dr. Marjorie Fonza, UMKC will be making UWC site visit to help UWC restructure post-graduate mental health program. Waiting for SANC approval for Masters in Nursing Education Program.

Academic Staff Development

- Specific UM academic staff to mentor UWC faculty in areas of both teaching and research identified interest and need. UM faculty are serving as research co-
supervisors for UWC SON Academic Staff and are working with UWC Academic Staff who visit UM.

- UM-UWC work together to develop courses/modules in advanced nursing education via distance learning to assist UWC academic staff to acquire necessary teaching credentials. Waiting for approval for Masters in Nursing Education Program. Hope to develop other distance modules for Nurse Practitioner Program.

Research

- Collaboration and mentoring between UWC SON post-graduate faculty and UM SON post-graduate faculty and research leaders in developing research infrastructure and developing a ‘niche’ area for nursing research at UWC [for example, UM faculty will serve as external readers for UWC SON post-graduate theses and dissertation and suggest ways in which academic staff and students may co-publish papers; UM can mentor UWC in the development of Research Interest Groups]. Professor Nikodem to visit MU October 17-27, 2005, to examine research program. See information above regarding development of on-line journal.
- Collaboration between UWC SON post-graduate faculty and other UWC faculties in research. Collaboration between UWC SON post-graduate faculty and with other School of Nursing faculties in the Western Cape Province. Did not evaluate
- Close collaboration between four doctoral prepared staff in setting the research mission of the SON. Did not evaluate.
- Joint UWC-UM nursing research projects Several research partnerships have been established. (For example, Khanyile & Libbus; Julie, Khanyile, & Taliafero)

Daily Log of Dr. Kay Libbus’s Visit to UWC, September 21-October 1, 2005

September 21, 2005
1) Meeting with T. Khanyile, N. Mbombo to discuss agenda for visit; Khanyile, Mbombo, & Nikodem currently are serving as executive committee in decision making for school. Relationships seem very congenial and productive. Mbombo has assumed the role of undergraduate program leader and Nikodem as graduate program and research program leaders. When E. Kortenblut returns from leave in January, 2006 she will assume the role of clinical director. Doctoral faculty cooperating and working closely to achieve the work of the school.
2) Meeting with C. Nikodem to discuss her visit to MU October 17 27- tentative itinerary presented to her. She agreed with most of it but wished to meet with Bill Folk, who is the co-investigator for the MU-UWC indigenous medicine grant. She also asked not to be scheduled for dinners other than meetings.
3) Staff meeting with all faculty. Khanyile and Mbombo presented parallel curriculum plans. CHEC Curriculum implementation began with admission of January, 2005 class. 2nd, 3rd, and 4th year students continued in pre-CHEC curriculum. The last student group in ‘pipeline’ (pre-CHEC curriculum) should theoretically graduate at the end of 2008. Classes, clinical experiences, and responsibilities were presented for 06, 07, 08 and 09 for CHEC only. A number of very positive changes are taking place at the UWC school of Nursing. Several academic staff from the School of Public Health and the other nursing institutions in the Western Cape (Stellenbosch and University of Cape Town) is scheduled to teach specific modules. The inclusion of the SPH faculty occurred during this planning year. The two Satellite laboratories at Tygerburg and Groote Schurr Hospital are equipped and operational. Specific deficiencies in staff and clinical experiences were discussed and planning to fulfill these deficiencies were discussed. The plans for 2006 were approved and these plans are to be used as a basis for the 2006 budget request from the University.

4) Brief discussion with T. Khanyile regarding beginning the joint UWC-UM Masters in Nursing Education program. The South African Nursing Council has not yet approved the proposal although it is possible that students may begin to matriculate into the program and take some preliminary courses. I communicated the importance of having some lead time so we could plan for taking their students into our on-line nursing education courses.

September 22, 2005
1) Met with two thesis only MCur students for whom I will be co-supervisor. I had received the proposal of Andile Msimango 10 days ago and had made extensive corrections and suggestions to the proposal. I gave him a printed copy with my comments and he also copied the corrected copy to electronic media. He will return corrected proposal to me electronically in US and I will read and respond to him. I had not yet received the proposal of Phophi Nembahe, although it had evidently been e-mailed to me while I was in transit to South Africa several days prior to our meeting. She gave me the file electronically and we made an appointment to meet on September 26, 2005 after I had had time to read the proposal and make comments. These two theses are off-shoots of Professor Khanyile’s UMSAEP research proposal to assess community based AIDS-HIV education and care in the Western Cape Metropole. Mr. Msimango is doing a descriptive analysis, assessing the HIV-AIDS teaching programs of Government-Based Organizations, Non-Governmental Organizations, and Faith Based Organizations. Ms. Nembahe will be assessing the effectiveness of AIDS-HIV teaching programs on participant knowledge and attitude using and pre-test, post-test design. A third student “Pat” was on my schedule but did not attend the meeting and I am unsure what facet of this project she will be doing.

2) Met with Dr. Richard Madsen, statistical consultant, and the two post-grad students regarding their study design. Since these are thesis only students, they have had no course-work in statistics or research design. Dr. Madsen made suggestions related to design and analysis. Both students will attempt to meet with him again before he leaves UWC October 21, 2005.

3) Met with Professor Nikodem and her research assistant regarding the new E-Journal that UWC is trying to publish, Journal of Community and Health Sciences. I discussed their ideas and made suggestions as well as agreeing to serve on the editorial review board and to solicit manuscripts for them when they are up and running. The journal has been approved by the powers that be including Dr. Ratie Mpofu, Dean of the College of Community and Health Sciences, of which Nursing is a department.

3) Attended Dr. Ron Turner’s farewell reception with Professors Khanyile, Mbombo, and Nikodem

September 23, 2005
1) Discussion with Professor Nikodem regarding faculty progress in gaining advanced degrees. Ms. June Jeggels is probably the closest to gaining her doctorate in nursing. She has collected data and has begun data analysis. Her dissertation concerns perceptions of home-
Mrs. Hester Julie and Mrs. Felicity Daniels are in proposal development stages for their doctoral dissertations. Mrs. Julie has applied for the 2006 UMSAEP program to come to UMSL. Ms. Audrey Splinter is in the proposal development stage for her MCur thesis and is exploring perceptions of Elderly Abuse in the Western Cape Metropole. She also has applied for the 2006 UMSAEP program and is due for a sabbatical leave this upcoming academic year. Professor Nikodem also shared with me the mini-theses for the two MCur students who are graduating.

2) Discussion with Ms. Audrey Splinter regarding her MCur thesis proposal. I have already connected her with Dr. Myra Aud, assistant professor at the University of Missouri-Columbia, who is willing to co-supervise her thesis. I told her that when I return to US, I would attempt to find world-wide prevalence figures for abuse of the elderly and forward the references to her.

3) Attended University graduation. The first Nursing PhD student received had degree as well as two MCur students.

September 26, 2005
1) Discussion with Dr. Renfrew Christie, Research Dean, regarding research at UWC.
2) Meeting with Phophi Nembahe regarding her MCur Thesis. Gave extensive feedback on her proposal and made suggestions for research design. I will send her what information I can find on reliability and validity of her two research instruments when I return to the U.S. She will send me drafts of her thesis electronically and I will make and return.

September 27, 2005
1) Meeting with Prof Khanyile to review CHEC plans for 2006
2) Meeting with Prof Mbombo to discuss her visit to University of Missouri. She will plan to arrive in St. Louis and travel to Columbia by shuttle on approximately the 8th of November. She will be with MU faculty until November 11 at which time she will either return to St. Louis to go to the International Sigma Theta Tau Meeting in Indianapolis, In with the UMSL faculty. She will leave from Indianapolis or St. Louis for South African, probably November 17 or 18. I will write an invitation letter when I return to U.S. asking for the dates November 7 through November 20 so we can get the visa process started. I also told her that I would attempt to arrange meeting with her for Dr. Pat Kelly of the UMKC faculty during her time in Columbia. I will ask Dr. Kelly to drive to Columbia for the day or will transport professor Mbombo to UMKC for the day.

September 28, 2005
Assisted in facilitating all day School of Nursing Workshop on SON 5 year strategic plan. The purpose of this workshop was to set achievable goals and evaluation criteria to be met before 2010.
1) Teaching: Increase the throughput rate of undergraduate students by 5% - from 80 to 85%.
Action plan includes: A) Reviewing admission criteria with the intent to meeting the general education requirements of UWC; Faculty would like to have students enter who are able to do the work for life sciences and who are math and English literate; plan to encourage students to participate in the academic development plan. Explication of the student Bursary payments will also be sought in order to help students focus on academic matters. B) A second plan for increasing the throughput rate is to improve the skills of academic staff.- 5 faculty with visit the Netherlands in January 2006 to for a NUSSIF skills training program, designed to assist faculty teaching skills. These academic staff will return to UWC and mentor other academic staff in regular in-service workshops and by using peer assessment. C) Improve the student evaluation tool; D) Continue performance review for Academic Staff. E) Improving systems of teaching/learning by considering approaches such as blocking classes, especially midwifery in the 4th year.
2) Research: Increase the body of nursing knowledge through post-graduate nursing education and research: A) Develop guidelines for post-graduate program, reorganize the selection criteria to recruit the best post-graduate students; b) encourage basic knowledge of computer literacy and research methodology by encouraging students and faculty to attend computer training sessions; C) Develop mentoring programs for research supervisors including PET programs and skills development; D) Develop academic staff review panel for student proposals; E) Encourage academic staff to include post-graduate students in their research. F) Develop Mock Review panel for academic staff grant proposals – ask academic staff which of their peers they would like to review their proposals. Include appropriate deadlines for proposals so reviewers will have time to read and respond. G) Submit manuscripts for publication in JCHS.

A complete set of minutes with time-limes was recorded by Ms. S. Abrahams.

September 29, 2005
1) Meeting with Professor Jan Persens regarding status of ALO nursing project.
2) Consultation with Felicity Daniels and Thembi Khanyile regarding Felicity’s Dissertation proposal. She will be evaluating the CHEC platform curriculum and plans to complete this in approximately three years. I had originally agreed to serve as her co-adviser but as I know little about evaluation research, I contacted Dr. Louise Miller, UMC, who is experienced in this type of research. She agreed with work as co-advisor for Felicity.

1) Consultation with Hester Julie regarding her dissertation proposal. She will develop and test a model for evaluation of service learning in nursing students. Her co-adviser will be Dr. Donna Taliaferro of UMSL.

September 30, 2005
Site Visits with Andile Msimango and Phophi Nembahe to HIV-AIDS training programs. Discussion of facilitating their research.

October 1, 2005
Attended post-graduate seminar for student and academic staff to learn to use Research Toolbox.
Attended 30 minute lecture on measurement and research and reliability and validity.
Dr Rose Porter – SoN
Dr Porter is the dean of MU Sinclair school of nursing. She strongly supports research activities and nurtures a research culture in the SoN that provides a stimulating environment for faculty members. The faculty themselves value collegial input and strong mentoring for beginning researchers are available from the senior members. Up to 40 - 50% of faculty (tenure posts) time is spent on their research projects. Special laboratories or dedicated spaces are allocated to faculty members to do their research or to keep their research documentation and equipment. Dedicated personnel are allocated to assist in grant proposal writing. The research intensive environment is fully supported by the dean and this has contributed to extensive external funding received by faculty members. The grant money are allocated to the individual researchers for use in their projects, a small percentage of each grant go to SoN. There are four main research interest groups: Gerontology, Women’s health, Health behavior changes and Oncology research.

The Son provides undergraduate and postgraduate programmes, but do not offer midwifery due to lack of practical facilities.

Dr Roxanne Mc Daniel – SoN
Dr Mc Daniel’s interest is in the field of cancer research: Nursing care of clients with cancer and Cancer Nursing: principles and practice. She is Associate dean and director of Master and undergraduate studies. Nursing education and training is quite different from the South African curriculum. The staff student ratio is to dream of. The SoN has many undergraduate students, these are only 3 and 4 the year students and tenure (permanent) and non-permanent faculty members including of clinical supervisors. Currently about 100 master students and PhD students.

The SoN offers the following programs:

**Bachelor of Science in Nursing**
Students follow a “general” undergraduate program for two years (Freshman and sophomore). They take subjects related to nursing majors. During there sophomore year (2nd year of studies) they apply to do the clinical nursing major, which they do
in their 3rd and 4th year (junior and senior years) They only come to the SoN from their 3rd year. Only about half the “general” students are then selected to continue with the actual nursing program as this application is very competitive and limited by space. The program is offered on a full-time or part-time basis. The students do less than 1000 hours in clinical facilities during their training. Internet and e learning plays an integral role in the education. All he courses are available on line.

**RN-BSN**
This program caters for students who are currently licensed to practice nursing in Missourie, but who wishes to obtain a BSN degree, thus they have a diploma certificate in nursing. Students can apply for credit for their general foundation non-nursing course work. The standard course can be completed over three semesters.

**Accelerated BSN**
This is a 15 month course and students who hold a Bachelor degree in any other field may apply. Students need to complete the prerequisite courses before enrolling for the accelerated BSN.

**Master of Science (Nursing)**
Most of these students are mid-career nurses who study part time while continuing to work. All the courses are available online. The program can be completed over four semesters. The masters program emphasizes specialization in a specific field. All students must take 9-12 hours of core courses in nursing theory and research methodology, the rest of the credits is in the field of specialization. The advance practice preparation is in one of three fields:
Health restoration/support,
Students in this area prepare as a clinical nurses in an area of specialization such as critical care, trauma or pediatric oncology.
Health promotion/protection
Students prepare for certification in areas such as mental health, public health or school health.
Health care systems.
This area prepares students for leadership roles such as educators or administrators.

**Doctor of Philosophy (Nursing)**
This involves team work. A temporary advisor (supervisor) is allocated to the student. This advisor is a faculty member who ha similar interests as the student. The advisor chairs the student’s doctoral program committee. The committee is selected during the students first year and consists of a minimum of 5 faculty members (one external to the department). The committee evaluates the students progress and oversees the dissertation and research. Specific course work is applicable and a dissertation is written that can contribute to nursing knowledge.
Upon completion of the course work the student must pass a written and oral examination to attain doctoral candidacy status.

**Dr Vicky Conn - SoN**
An amazing amount of $900-00 has been awarded to Dr Conn by the National Institute of Nursing Research (NINR) to complete a meta analysis in the field of chronic illness. The title of her project is: “Chronic illness exercise interventions: A meta-analysis.” She has found that there is no summary of the literature across chronic illness and has discovered the importance of a good meta analyses. I have recommended to her to contact the Cochrane centre as she may find benefit form the assistance they offer people who intend to do a systematic review using meta analyses.

**Dr Kay Libbus – SoN**
Dr Libbus is the Director for PhD studies at SoN. She is also the facilitator for the ALO project. Needless to say that Dr Libbus is an excellent host and I am greatly thankful to her for all the effort she has put into this ALO project to make it a success. Dr Libbus research interests are in the field of public health, specially HIV and TB as well as maternal health. She also collaborates with dr Bullock looking into domestic violence during pregnancy. I can foresee future research collaboration in all of these fields as they are burning questions in the Western Cape. I hope that we will be able to write collaborative NINR research grants and other grants to obtain money to do the research together.

**Dr Linda Bullock – Ellis Fischell State Cancer hospital**
Dr Bullock has recently been allocated more than 1,9 million dollars from NINR to investigate a nursing smoking cessation intervention in pregnant women - BEEP – Behavioural and Educational Enhancement. This is a randomized control trial comparing different interventions during different time periods of gestation and post partum period. The interventions include a standard smoking cessation pamphlet, educational booklets, weekly telephone call and the last group booklets and calls. Participant’s saliva is analyzed for chemicals that can be detected up to 7 days after the last “puff”. Outcomes such as stress and low birth weight are looked at. She is also interested in domestic violence against pregnant women. We have started to write a proposal for her to visit us in 2006 to set up some research intervention regarding domestic violence and pregnant women.

**Dr Louise Miller - SoN**
Dr Miller shared valuable information on how to set up courses on webct. I am very interested to put the MCur advance midwifery on the web as well as the research methodology course for undergraduate and post graduate students. I found this session extremely helpful and now I can go back and see how it compare with KWELnewgen.

**Dr Marilyn Rantz – EFSCH, Tiger Place**
Dr Rantz has spent the last few years working on issues to improve nursing care for the elderly. She received a $500 000 NINR grant to look into: Nursing home MDS data analysis and quality improvement and Nursing home care processes, outcomes and costs. She is author of a book that help elderly people in finding a place for long term care: The new nursing homes: a 20 minute way to find great long-term care. She was furthermore instrumental in getting new legalization regarding nursing homes. She was instrumental in the setting up of a unit that provides home health experts “at your door”. This is a service agency called Senior Care, that provide all nursing, medical, rehabilitation services via one call. Dr Rantz was also involved in the design of Tiger Place, state of the art “retirement home” for the aged. She is still very much involved in various research projects taken place at Tiger Place.

Dr Bill Folk – School of Medicine
I have specific interests in the use of herbal remedies during pregnancy, labour and breastfeeding and requested an appointment with Dr Folk. Dr Folk has recently been awarded a large grant in collaboration with KZN medical school and Prof Quinten Johnson at UWC to look into the specific use of herbs especially in the treatment of TB, cervical cancer and HIV. I have also met with Dr R Madsen and Dr Glen Cameron that is also involved with the project.

Dr Deidre Wipe-Tevis – SoN
Dr Wipe-Tevis has decided that it is high time to challenge the practices of wound care. She has received nearly 1 million dollars from NINR to look into leg ulcers: Venous ulcers: Testing effects of compression and position and Skin microvascular responses: Young and older adults. She has the latest modern technology in her laboratory to investigate wound healing. The primary aim of the research is to develop and test treatments delivered by nurses that will improve the quality of care to patients with chronic wounds.

Dr Donna Williams – SoN
Shear stress and cellular control of capillary function, my first remarks when I notice this title was that this cannot be a nurse. Dr Williams is a physiologist with a very interested back ground such as fluid balance control in astronauts at NASA. Needless to say she quickly proved that basic science research has a definite and appropriate place within a nursing school. She received a $1.2 mil grant has set up a laboratory in the nursing department where she use small hand made pipettes (in her lab) to control fluid perfusion into individual capillaries in the mesentery of leopard frogs.

Dr Rodney Uphoff – International relations
A five star lunch in the Alumni restaurant With Dr Uphoff who is the director of the exchange program between Um and UC, to catch up with progress on the ALO and UMSAEP collaboration.

Dr Karen Wingert - EFSCH
Dr Wingert is a physiotherapist who has visited UWC, physiotherapy department before. Not only did she showed me around EFSCH but I was fortunate to experienced at first hand a lymphatic drainage therapy session. She works closely with Dr Armer with women / men who had been diagnosed with breast cancer. She will be visiting UWC again during 2006. She also introduced me to the other team members and it is unbelievable the warmth of care that projects from this team. A definite dedicate team that really care for there patients / participants.

Dr Jane Armer - EFSCH
Dr Armer is a breast cancer survivor herself and suffers from lymhedema. Her team focus on delivering therapy for lymhedema. She received grant money of more than $1.6 mil to study participants in a prospective study: Prospective study of breast cancer lymhedema. Participants are enrolled when they are diagnosed and measurements are done before surgery. Participants are then regularly followed up till 30 months post surgery. She investigates the current incidence rates of lymhedema as well as management strategies and preventative activities for lymhedema.

Dr Myra Aud – SoN
Dr Aud is also interested in gerontology. She did a very interesting study in exploring the effects of the moon on elderly mood changes. We set up a definite collaboration where dr Aud has agreed to be co supervisor to one of our staff members, Ms A Splinter, who will look into the abuse of eldery people in her masters during 2006.

Dr Cindy Russel - SoN
Dr Russel’s interest is in the field of compliance of medication in patients who had renal transplants. She uses a very specific electronic device that is built into the cap of the medication container that records the “opening” activity of the container for up to 2 years. Immunosuppressive medications are extremely expensive and it is not sure why patients fail to properly and consistently take the much needed anti-rejection drugs. She hopes that this research will help patients to facilitate the medication-taking process.

We further had discussions on the difference between the two schools employment compliment. It is interesting to know that because UM is state subsidized (tax payers money) all tenure salaries are published and anyone have access to see what the salaries of faculty members are. This will be a gross privacy violation in South Africa.

Dr Patty Schnitzer - SoN
Dr Schnitzer’s research is in the field of accidental and abusive injury that lead to death in children especially under the age of five. This field of research could be very interesting in the Western Cape and we are working on a plan of action to meet when Dr Schnitzer visits Durban during 2006.

(Dr) Ms Anne Heine – Columbia Regional Hospital, Clinical practice
(Dr) Ms Kristen Metcalf-Wilson – SoN Women’s health class
Dr Richard Madsen - Statistics
Dr Joe Haslag - Economics

Presentations:
Lunch hour presentation – Research into practice
Presentation to Women’s Health class

Social activities
Martini Party
MKT trial
Suppers

Open house of EFSCH
Country music concert at the Blue Not

Cheryl

Ass. Prof. Dr. Cheryl Nikodem
Faculty of Community and Health Sciences
Department of Nursing
24 October 2005
The Development of the Master’s Nurse Practitioner degree at the University of Western Cape

Report of visit by Thad Wilson, RN, FNP, PhD
University of Missouri-Kansas City School of Nursing to the University of Western Cape School of Nursing
February 25 –March 10, 2006

Background

Dr. Thembi Khanyile visited UMKC in November 2004 and UM Columbia in July 2005. On both occasions she and Dr. Wilson discussed the possibility of developing a Master’s Nurse Practitioner program at UWC. Following the July visit, a preliminary plan in the development of the program was created and is presented below.

7. Practice rules & regulation (R&R). Currently there is no “legal” role similar to a Master's prepared NP for nurses in South Africa. Therefore, prior to educating NP’s there would need to be a change in the rules and regulations for nurses.
   a. The development of the R&R should probably include the SA Nursing Council, SA Medical Council and SA Pharmacy Council.
   b. Once the R&R’s are completed, the authority should be given to the SA Nursing Council.

8. To accomplish the above, Dr Thad Wilson will visit South Africa to experience the situation first hand. Prior to the visit Professor Khanyile will arrange for presentations to as many of the following as possible:
   a. Province Health Directorate,
   b. SA Nursing Council,
   c. SA Medical Council and
   d. SA Pharmacy Council

9. The presentation will include:
   a. What is a Nurse Practitioner – scope of practice, types of activities, etc.
   b. Educational program – outline of courses and clinical
   c. Competency – how determined and evaluated
   d. Recommendations for R&R’s – based on R&R’s from selected states in US.

Visit Activities

Dr. Wilson arrived 26 February 2006 and departed 9 March 2006. Weekends were for sightseeing and SA elections were held the first of March and all offices were closed. Therefore, a total of eight days were available for work.
27 Feb – Met with Professor Khanyile and Professor Kortenbout to prepare presentation outline and materials (see Powerpoint – Appendix A).

28 Feb – In the morning, Professor Khanyile and Dr. Wilson gave a presentation to the Provincial Health Managers Council (?). The presentation was well received. Questions from this meeting, with answers, are found in Appendix B.

2 Mar - Professor Khanyile, Professor Kortenbout and Dr. Wilson attended and gave the same presentation to Provincial Directorate of Human Resources meeting. This was a very important event. The main purpose of this meeting was to discuss how Certificate Course in Curative Skills in Primary Health Care (PHC) course can become accredited by the South African Nursing Council (SANC). The chair indicated that further this course could no longer be offered, unless it was accredited. Partnerships with Health Education Institutions would be beneficial, possibly even mandatory, for accreditation to occur. The regional representatives reported how the course was being taught in their area and to whom it was taught. A brief history of this course was also provided:

Ms Earle gave a brief summary on the history of the PGWC certificate course in Curative Skills in the PHC. She indicated that the Red Cross Paediatric Clinical Skills course started in 1973. Informal training in clinical skills for registered nurses started in the 1970’s. In the late 1970’s, early 1980’s, Dr Turner formally taught the certificate and the diploma course. His notes were put into a book format, which is still in use. Dr Turner passed on, and Dr John Frankish took over from him. The regions were formed in 1996 / 97 and the course was decentralised. The current course was reaccredited by SANC as a Curative Skills in PHC course in 1994, after NHPD took over from PAWC Western Cape Region. Before 1994 it used to be the Certificate Course in Health Assessment, Diagnosis, Treatment and Care.

Questions from this meeting, with answers, are found in Appendix B.

3 Mar – Met with Professors Kortenbout and Nikodem. Discussed current Master’s programs and curriculum. Decided it was best to identify “Core,” “Stream,” “Elective,” and “Thesis” grouping of modules (courses). Worked on strategies to address issues with SANC and government. Professor Kortenbout and I spent the afternoon working on the proposed curriculum.

6 Mar – Spent significant amount of time searching the internet to learn more about SA health policies, politics and organization. A list of important sites follows:
   Medical Research Council - http://www.mrc.ac.za/
   Human Science Research Council - http://www.hsrc.ac.za/
7 Mar – Visited Khayelitsha clinic. This clinic is located in the middle of a poverty stricken community. Most of the 500,000 people live in informal housing (corrugated iron shacks) and over half of the adults are unemployed. The clinic was well organized and the staff very dedicated. One of their major issues is staffing, particularly physicians. I observed several opportunities for Master’s NPs to meet the needs of this clinic.

8 Mar – Traveled to Pretoria, SA with Professor Kortenbout to visit with the South African Nursing Council (SANC) and Department of Health, Human Resource Planning personnel. Due to miscommunication concerning the date of the meeting, we were unable to meet with anyone at SANC, even after repeated offers to meet at any time.

We met with Ms. Gumede, Cluster Manager: Human Resources and Andrew Crichton, Director: Human Resource Planning. This was a very productive meeting. They clearly understood how a Master’s degree is way to advance one’s career. Mr. Crichton has also studied the US nursing education system and was able to provide guidance based on that knowledge blended with his experience and background in SA. At this time, their perception is that the following area’s have the greatest likelihood of success: Nurse Anesthetist (CRNA), Pediatric NP, Trauma NP (ER), and Family NP. Other suggestions:

- Need to base curriculum and position on new Nursing Act (soon to be published)
- Don’t include dispensing in role, prescribing is okay.
- Best to develop a nationwide proposal, involving several schools
- Include strong science base with pathophysiology and pharmacology
- Proposal should include –
  - Evidence of need
  - Specifically how it is different from Diploma or Certificate NP
  - Limit the research component (more evidence-based practice)
  - Delineate scope of practice
  - How the Master’s NP will articulate with other professions
  - Referral levels – resource at regional and district levels

9 Mar – Final meeting with Professors Khanyile and Kortenbout. We attempted to determine “next steps”. After the meeting with the Department of Health officials, we decided to scrap our first attempt at a curriculum, it wasn’t comprehensive enough. The plan for implementation is presented below. I had truly hoped to accomplish
more during this visit, but the learning curve for me was very steep. I believe Professor Kortenbout and I can accomplish some of the work presented in the following plan, but it will take more than email to meet our goal.
Plan for Implementation (Next Steps)

9. Determine if we should continue.

I believe we should. However, there is a tremendous amount of work that needs to be done. It will probably require a dedicated person at UWC and a committed cohort of faculty from the UM system to reach our goal.

10. Seek funding.

To reach the goal of a Masters NP program at UWC by 2007 or 2008, it will require funding for faculty, support staff, liaisons in SA, equipment and more face-to-face interaction between UWC and UM faculty. We need to determine likely sources of funding, who will submit the proposals, etc.

11. Develop a plan for approval of the role in SA.
   - Based on input from the Department of Health, this may require coalition building with at least one other university and possibly more. Someone in SA will need to coordinate this effort.
   - Get SANC approval – with a curriculum based on the new nursing act.
   - Meet with SA Council of Medicine and SA Council of Pharmacy to garner support.
   - Determine the resources needed to start and continue the program.
   - Develop a timeline for acceptance.

12. Develop a plan for approval of the program at UWC.
   - Design a curriculum – specific modules, when offered, outcomes and evaluation (a very rough first draft based on information from all visits while in SA is included in Appendix C)
   - Determine admission and progression criteria
   - Clearly outline the articulation with certificate and diploma prepared NP’s.
   - Develop a comprehensive program evaluation plan.
   - Identify process for approval – who, when, responsibilities, etc.
   - Determine resources needed to start and continue the program.
Masters in Nurse Practitioner Program
By Dr Khanyile (UWC) &
Dr Wilson (UMKC)

Background
- SANC registration of qualifications statistics revealed that 40% of professional nurses have more than two post basic qualifications
- Only 40% of PHC facilities have PHC trained nurses
- Majority of P/N work in tertiary and secondary levels of care delivery

Purpose of the program
- To ensure responsiveness and relevance of educational program
- To focus the career pathways of the critical health professional
- To ensure retention and motivation of critical health professionals (nurses)
- To ensure relevance of health professional educational programs to the strategic priorities of the NHS

Objective of the presentation
- UWC in collaboration with UM will offer this program in 2008
- To solicit inputs from the stakeholders that will assist in the development of the program
- To engage stakeholders in the planning

Lessons from Missouri
- The need – underserved population
- The early days – diploma program
- Move to the Master’s Degree
- Increased enrollment in Schools of Nursing

Outcomes of Current Practice
- Primary Care NP’s – quality of care excellent
- Meeting needs of underserved
- Standardized Education
  - Business management
  - Primary care
  - Role transition
Issues identified during meetings with community, governmental partners.

13. Is there a need for a Masters NP? Currently Certified NP’s (CNP) are doing similar work.
   a. Professor Khanyile shared that many nurses practicing in the hospitals will take the necessary courses to become a CNP, but never practice as a CNP because the income is much better in the hospital. The education serves only to increase their pay in the hospital and is not used to promote primary health care.
   b. The curriculum will include business and marketing strategies, which will give the Masters NP the freedom, knowledge and skills to work for the government or to start their own practice and together with rendering a service, also make money.
   c. Other agencies are already offering the diploma and certificate, so UWC has chosen to offer something unique, the Masters NP.

14. CNP’s are “abused” in the current system – providing services similar to physicians, but paid a poor salary. How would the Masters NP solve this?
   a. Same as “b” above.

15. Who would be the mentors or clinical preceptors for these students?
   a. This has yet to be determined and will need further exploration.

16. How does the Masters NP fit into the plan for Medical Assistants (similar to Physician Assistants in the US) currently under discussion in SA.
   a. The cost to develop educational programs for the MA would be very high. The cost to develop the Masters NP will be relatively small, yet the graduates of the program will be able to meet the primary care needs of the country.

17. How to get the education to those who most want it, but may not be able to live in Cape Town?
   a. Use of internet and preceptors may provide an option for those living in other area’s.

18. How to give “credit” for work and experience? PHC nurses who wish to get a Masters NP, what courses will they take?
   a. This will be decided as the curriculum is further developed.
Core Courses (60)
Research Quantitative & Applied Epidemiology (20)
Research Qualitative (includes computer analysis) (20)
Role Course – legal, ethical, management, program planning, andrology (20)

Stream Courses (120)
Advanced Pathophysiology (20)
Pharmacology for Primary Care (20)
Advanced Health Assessment & Diagnostic Reasoning (20)
Nurse Practitioner – Acute (20 – 4 didactic and 16 clinical practice)
Nurse Practitioner – Chronic (20 – 4 didactic and 16 clinical practice)
NP Clinical Application (20 – 2 didactic and 18 clinical practice)

Research/Thesis (40)
Student works with faculty member.

Electives (40)
Forensic nursing (20)
Women’s health (20)
Gender based violence (20)
Other possibilities – HIV care, TB care, etc.

Total Hours - 260 (Total clinical hours = 720)
The MSN program was designed to meet and exceed standards for certification in the USA (American Nurses Credentialing Center). The UWC school of nursing will work with the South African Nursing Council to establish similar guidelines for certification within South Africa.
APPENDIX 5: THE MASTER LEVEL PROGRAM

CHAPTER 1: INSTITUTIONAL SELF- EVALUATION USING THE HEQC CRITERIA

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SCHOOL OF NURSING
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Institution Name: University of the Western Cape
Head of Institution: Prof B P O ‘Connel (BA (Hons) UED. MA, MEd.
Provider Type: Public Higher Education Institution
Programme Name: Masters in Nursing (Education (M Cur)
NQF Level: 8
Approved by Senate: 23 August 2005
HEQC Reference Number:

Programme Information
Programme Name: Masters in Nursing (Education (M Cur)
NQF Level: 8
Expected Minimum Time for Completion: 2-4 years of study
Number of Credits: 240
Registered with Department of Education: PQM Approved
Registration with SAQA: yes
SAQA Registration Number: 19444

1. Programme Design (Criterion 1)

1.1. How does the institution take into account the mission of the institution and its institutional plan?
The Institutional Operating Plan (IOP) is firmly grounded in the institutional mission statement as adopted in 1987 and incorporated in the strategic plan 2001-2005.

The University’s mission with the amended inscription from the Vice-Chancellor’s inaugural address (see the italics) reads as follows:

“The University of the Western Cape is a national university, alert to its African and international context as it strives to be a place of quality, a place to grow from hope to action through knowledge. It is committed to excellence in teaching, learning and research, to nurturing the cultural diversity of South Africa, and to responding in critical and creative ways to the needs of a society in transition. Drawing on its proud experience in the liberation struggle, the university is aware of a distinctive academic role in helping build an equitable and dynamic society.”

In particular, it aims to:

Advance and protect the independence of the academic enterprise;
Design curricula and research programmes appropriate to its southern African context;
Further global perspectives among its staff and students, thereby strengthening intellectual life and contributing to South Africa’s reintegration in the world community;
Assist educationally disadvantaged students gain access to higher education and succeed in their studies;
Nurture and use the abilities of all in the university community;
Develop effective structures and conventions of governance, which are democratic, transparent and accountable;
Seek racial and gender equality and contribute to helping the historically marginalised participate fully in the life of the nation;
Encourage and provide opportunities for lifelong learning through programmes and courses;
Help conserve and explore the environmental and cultural resources of the southern African region, and to encourage a wide awareness of them in the community; and
Co-operate fully with other stakeholders to develop an excellent, and therefore transformed, higher education system.
1.2. How does the programme meet the needs of students and other stakeholders?

On 9th December 2002, the Minister of Education announced Cabinet’s decision to incorporate the School of Oral Health of the University of Stellenbosch into the Faculty of Dentistry at the University of the Western Cape. In addition UWC was mandated to be the only university in the province to offer undergraduate nursing. Through the establishment of a Nursing Platform via CHEC and a Regional Nursing Academic Board it was found that:

(a) Nurse training needs for the Western Cape are estimated to be at a current deficit of approximately 1000 nurses of all categories, in the context of the 2010 Health Care Plan. The PGWC has committed to remedy the situation by providing bursaries for all categories of nurse training as one element of the human resource strategy.

(b) Currently in this province Nursing Education at a Masters level is a scarce skill and hence the difficulty in recruiting candidates for academic posts. The other two universities that are US and UCT both offer Nursing Education at a degree and post basic diploma level which make it difficult to recruit graduates from these programs since they do not hold a Master degree.

(c) Those with a Masters degree do not hold a Nursing Education qualification (ETQA requirement) and those with a Nursing Education qualification do not have a Masters degree (University requirement).

(d) This programme is directly linked to employment. The graduate student will have specialist skills to practice as a health professional educator in any higher learning institution.

1.3. How does it articulate with other programmes?

Horizontal articulation: Articulates the M. Cur programme offered within the department namely, Masters in Advanced Midwifery and Neonatal Nursing as well as Masters in Advanced mental Health Nursing. Vertical articulation: candidates can proceed to do a PhD in Nursing.

Programme Design

Programme Name: Masters in Nursing (Education (M Cur)

NQF Level: 8

Expected Minimum Time for Completion: 2-4 years of study

Number of Credits: 240
1.4. Purpose of the Qualification

(a) Currently the School of Nursing is one of the only two enrolling institutions in the province to offer the education and training of nurses. On the other hand the Department is faced with a problem of inability to recruit suitable qualified people to teach at our undergraduate programme. Academic staff who have a Masters Degree do not hold the qualification as Nurse Educators although this is a South African Nursing Council requirements, while those that have Nursing Education do not possess a Masters degree which is a University requirement. This program will strengthen the capacity of the department to meet the CHEC platform challenges.

(b) Learners credited with this qualification will be able to function with advanced cognitive and practical competencies in nursing and midwifery education as educators, leaders, and authors. Qualifying learners are registered by the SANC as nurse educators (R118).

1.5. Assumptions of Learning in Place

(a) Learners should have a fundamental knowledge base of the discipline of nursing by applying the basic ethical, moral, legal and professional principles as a framework during their interaction with individuals of all age groups, their families and other multidisciplinary team members.

(b) Learners should have the ability to effectively apply knowledge from the nursing sciences in solving familiar problems/needs of individuals of all age groups in a variety of health care settings.

© Learners have a clear understanding the scientific principles of preventive, promotive, curative and rehabilitative health in providing care to individuals with medical and surgical, psychiatric nursing and midwifery health problems.
1.6. Exit Level Outcomes for the M Cur

(a) Create active and learning centered environments in the teaching of nursing and midwifery both in clinical and classroom settings based on comprehensive and systematic understanding of adult development, learning and motivation theories.

(b) Evaluate various theories and models of nursing and health based on a critical analysis of different perspectives about health and disease and how these impact on decision making in the practice of nursing and midwifery.

(c) Lead curriculum change and/or transformation in the education of nurses and midwives based on critical analysis of educational philosophy with regard to its implications for nursing and midwifery education.

(d) Critically evaluate global and national issues and policies, including managing diversity, Recognition of Prior Learning, globalization and the nursing workforce etc., with specific reference to nursing and midwifery education.

(e) Analyze a range of research methods and approaches with regard to their appropriateness for investigating particular research problems in nursing and midwifery education.

(f) Utilize a wide range of appropriate databases (textual and electronic) to conduct an extensive and efficient literature search on nursing and midwifery education.

(g) Design and implement classroom and clinical learning sessions using appropriate teaching strategies based on expected learning outcomes taking into consideration the principles of adult learning.

(h) Plan and implement the assessment of classroom and clinical learning outcomes based on a comprehensive understanding of principles and strategies of assessment of learning outcomes with specific reference to professional education.

(k) Demonstrate a comprehensive and critical understanding of theories and approaches of educational management, including quality management systems, with specific reference to managing a nursing education institution (nursing colleges, university and technikon nursing departments).

(l) Lead evidence-based practice in nursing and midwifery education.

(m) Demonstrate ability to critically review and consolidate knowledge from all different disciplines of nursing and utilize this knowledge in conducting research.

(n) Demonstrate ability to effectively apply the main research methods of enquiry in nursing research.

(o) Demonstrate ability to formulate a researchable problem, select an appropriate research method, population and samples.
Demonstrate ability to develop a data collection instrument and procedures

1.7. Programme Structure

The M Cur is a structured Two-year (full-time) and Four-year (part-time) programme combining both coursework and a mini-thesis. The coursework constitutes 50% of the programme and the mini-thesis the other 50%. Twenty SAQA credits are attached to each of the eleven modules that constitute the coursework component for a total of 200 credits, and 40 SAQA credits are attached to the mini-thesis.

The mini-thesis is the research component of the programme with a prescribed length of between 7 000 and 12 000 words, on a topic in the field of Nursing Education. The structured coursework introduces the students to educational research through a structured, guided process. It aims at the preparation of the student for both the production of the mini-thesis and a more general introduction into the art and craft of nursing education research and knowledge production.

The eleven modules that constituted the structured coursework are the following:

**Year One (Full Time) and Year One and Two (Part Time)**

<table>
<thead>
<tr>
<th>Subject/module name</th>
<th>Fundamental/Core</th>
<th>Credits</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical Foundations of Nursing Education</td>
<td>Core</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>Curriculum Development</td>
<td>Core</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>Issues in Health Professional Education</td>
<td>Core</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>Advanced Qualitative Research Methods</td>
<td>Fundamental</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>Advanced Quantitative Research Methods</td>
<td>Fundamental</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>Teaching and Learning Methods</td>
<td>Core</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>Assessment in Higher Education (winter school)</td>
<td>Core</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td><strong>TOTAL CREDITS</strong></td>
<td></td>
<td><strong>120</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Year Two /Three (Full Time) and Year Three to Four (Part Time)**

<table>
<thead>
<tr>
<th>Module name</th>
<th>Fundamental/core</th>
<th>Credits</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applied Epidemiology</td>
<td>fundamental</td>
<td>20</td>
<td>8</td>
</tr>
</tbody>
</table>
Management in Higher Education | Core | 20 | 8
---|---|---|---
Evidence Based Practice | Fundamental | 20 | 8
Mini thesis | 40 | 8
Professional Development | Fundamental | 20 | 8
**TOTAL CREDITS** | | **120** |

*Prescribed Textbooks*

**Theoretical Foundations of Advanced Nursing Practice**


**Curriculum Development**


Tyler, R.W. (1949) Basic principles of curriculum development and instruction. Chicago: The University of Chicago Press. [NB: This book is old, but I recommend that the students read Tyler’s original work because other authors are misinterpreting his work]

**Issues in Higher Education**


**Assessment of Learning**


**Management in Higher Education**


Research methods: Recommended resources


Aldershot: Ashgate.


1. Rules of Combination
A student must complete all the modules prescribed in year one before they can proceed with year two. The programme must be completed in a period of three to four years. Otherwise, student will have to apply to be re-admitted and submit a Time-frame acceptable to Senate, how the study programme will be completed.
1.9. Learning Activities

1.9.1. Types of Learning

<table>
<thead>
<tr>
<th>Types of Learning Activities</th>
<th>Hours Based on Credits</th>
<th>% of Learning Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lectures (face to face, limited interaction or technologically mediated)</td>
<td>36hr</td>
<td>18%</td>
</tr>
<tr>
<td>Tutorials: individual groups of 30 or less</td>
<td>36hr</td>
<td>18%</td>
</tr>
<tr>
<td>Syndicate groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practical workplace experience</td>
<td>40hr</td>
<td>20%</td>
</tr>
<tr>
<td>Independent Self study of standard texts and references</td>
<td>60hr</td>
<td>30%</td>
</tr>
<tr>
<td>Independent self study of specially prepared materials (case studies, multi-media, etc)</td>
<td>34hr</td>
<td>14%</td>
</tr>
<tr>
<td>Total</td>
<td>200hr</td>
<td>100%</td>
</tr>
</tbody>
</table>

The above table specification is per module.

1.9.2. Time Table Information

Summary of Total Learning Hours

Formula

1hr= 1 period
3 periods per week
1 to 3 weeks per semester
1 week evaluation, periods
Total learning includes contact with lecturer & self study
Evaluation includes tests/ assignments/ projects and summative evaluation
## Module name

<table>
<thead>
<tr>
<th>Module name</th>
<th>Semester</th>
<th>Periods</th>
<th>Practical learning</th>
<th>Evaluation</th>
<th>Theoretical</th>
<th>Total learning time</th>
<th>CREDIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical Foundations of Nursing Education</td>
<td>S1</td>
<td>36</td>
<td>40</td>
<td>12</td>
<td>112</td>
<td>200</td>
<td>20</td>
</tr>
<tr>
<td>Assessment of Learning in Higher Education</td>
<td>S1</td>
<td>36</td>
<td>40</td>
<td>12</td>
<td>112</td>
<td>200</td>
<td>20</td>
</tr>
<tr>
<td>Teaching and Learning Methodologies</td>
<td>S1</td>
<td>36</td>
<td>100</td>
<td>12</td>
<td>52</td>
<td>200</td>
<td>20</td>
</tr>
<tr>
<td>Curriculum development</td>
<td>S2</td>
<td>36</td>
<td>80</td>
<td>12</td>
<td>72</td>
<td>200</td>
<td>20</td>
</tr>
<tr>
<td>Management in Higher Education</td>
<td>S2</td>
<td>36</td>
<td>40</td>
<td>12</td>
<td>112</td>
<td>200</td>
<td>20</td>
</tr>
<tr>
<td>Evidence Based Didactics</td>
<td>S2</td>
<td>36</td>
<td>100</td>
<td>12</td>
<td>52</td>
<td>200</td>
<td>20</td>
</tr>
</tbody>
</table>

### 1.10. The assessment criteria and evidence requirements are as follows:

#### 1.10.1. Formative Assessments

Written examinations, assignments, projects, portfolios and teaching practice workbooks. A minimum of three assessments per 20 credit module.
1.10.2. Summative Assessments

Coursework
Formal sit-down assessment a minimum of 50% is required to pass each module. The aggregate attained for the coursework component must be 50% or more.

Mini-thesis
A mark of 50% or more must be attained for the mini-thesis which shall be 7,500-12,500 words illustrating familiarity with the basic research process, ability of the candidate to work independently using correct language and satisfactory technical workmanship. No thesis which has been previously submitted for a degree at another university shall be accepted, but material taken from publications of the candidate may be incorporated therein.

1.11. Rules for qualification for the Assessment
At least obtain a coursework mark of 50% in the formative assessments to qualify for the summative assessment and a mark of 50% or more must be attained for the mini-thesis awarded by the external assessor.

2. Programme Input
2.1. Programme Design
The need for this degree was assessed by the CHEC platform. The latter consist of all Heads of Nursing Departments of higher educations within the Western Cape.

This programme was designed using the expertise of various staff members in teaching in the department of Nursing, Education and Psychology within the institution with advice from members of the CHEC Nursing Platform in the Western Cape. Current programmes offered within the Nursing Department as well as in the university were used as a guide for the preparation of the programme.

Before the programme was submitted to the Senate and Senate Academic Planning Committee for approval it was submitted the Nursing Department, the Faculty's Academic Planning Committee, the Quality Assurance Office and the Executive Committee of Senate. The design of the programme has been influenced by developments in the region, the institution becoming the only enrolling institution for nursing education within the region, the challenges facing the nursing profession in the area as educators and therefore making provision for staff development.

As part of the QA processes of the institution, we will obtain feedback on the quality of the programme via external and internal moderation from professionals and academics, annual reports, the evaluation of examination results reports, and its own internal programme review methodology. On the curricula of our programmes peers either involved in the industry and
academia to act as programme advisors. The feedback from the peers will be used to assess whether the curriculum provides the students with the learning essential for success in the field.

2.2. Student Recruitment, Admission and Selection

2.2.1. Provide details of the information you plan to provide students about programme requirements.

The prospectus of the institution as well as the official Calendar of the Faculty will have all the necessary requirements pertaining to the programme. Information would relate to course fees, programme structure, assessment requirements, entrance requirements and application and selection procedures and processes information brochures, detailing the above will also be sent to health care institutions. Potential students also have access to the University Yearbooks.

The University Calendar 2005: Part 1: General Information contains the following information, amongst others:

- policies on admission, language and assessment
- admission and registration procedures and guidelines
- academic rules
- rules regarding library usage and student discipline.

The University Calendar, Part V: Community and Health Sciences contains the following information, amongst others, rules for the M.Cur degree admission requirements, duration of study, composition of curriculum. Once accredited, the content will be expanded.

2.2.2. What are your admission requirements and how do they relate to the requirements for the academic level of the programme?

Student will be admitted who are already in the profession. The qualifications required will have to be the equivalent of a diploma or degree (M+4) in nursing and/or midwifery pegged at NQF Level 7 (See 5.6 on RPL).

2.2.3. How does the selection process take into account the optimal number of students to achieve the proposed learning outcomes?

In terms of the viability of the programme and the capacity of current staff members it has decided that only 10-15 students will be admitted annually. The overriding factor is not to exceed the available capacity for offering good quality education. Further expansion will depend on the IT Infrastructure, and human resources provided.

2.2.4. How do your recruitment and admission policies take into account the objective of widening access to higher education?
In terms of its mission and equity principle, the institution is committed to widening its access and it will do so via its current RPL policies, especially the newly accepted Portfolio Development Programme for postgraduate students in Nursing who do not meet the traditional admission requirements, by evaluating their professional competencies against programme requirements.

3. **Staffing.**

3.1. The qualifications, teaching experience, and research supervision of staff involved in the programme:

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualification</th>
<th>Teaching experience</th>
<th>Research supervision experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prof T Khanyile</td>
<td>PhD; Master in Nursing Education; Honours in Nursing Education and B.Cur with Nursing Education and Community Health as majors.</td>
<td>10 years both Undergraduate and post graduate programmes</td>
<td>Masters students = 15 completed</td>
</tr>
<tr>
<td>Prof E. Kortenbout</td>
<td>PhD; Masters in Community Health; Post graduate diploma in Nursing Education</td>
<td>31 years teaching at both undergraduate and post graduate levels</td>
<td>1 PhD and 30 Master students</td>
</tr>
<tr>
<td>Prof C Nikodem</td>
<td>D. Cur; M.Cur; B.Cur (Nursing Education &amp; Community Health)</td>
<td>3 years as a clinical lecturer and 1 year teaching both undergraduate and post graduate levels.</td>
<td>10 Master students</td>
</tr>
<tr>
<td>Dr Mbombo</td>
<td>PhD, M.Cur. (Advanced Midwifery &amp; Neonatology) B.Cur; Assessor Training course.</td>
<td>5 year teaching experience at both undergraduate</td>
<td>Masters student = 5</td>
</tr>
</tbody>
</table>
3.2. What kind of teaching and assessment competence does the academic staff attached to the programme have?

Only staff with one qualification level higher than the M Cur and a minimum of 10 years experience in the field will be allowed to teach, assess and supervise the student’s research. Furthermore, the majority of the staff members in the Nursing Department underwent and completed an Assessor Training Programme during 2003.

3.3. How does the research profile of the academic staff match the nature and level of the programme?

See Paragraph 3.1 above

3.4. What opportunities does the institution provide for academic staff to enhance their competencies and to support their professional growth and development?

Support is provided to full-time academic staff to study at this institution free of cost. Studies at other institutions are normally subsidized. Research grants are also available to pursue their research in their area of expertise. Funding is also available for staff to attend conferences, locally
or internationally as well as to present papers their area of expertise. Our PET project
(Postgraduate Enrolment and Throughput also provides opportunities for supervisors to attend
programmes to sharpen their research and supervisory skills.

3.5. What mechanisms does the institution have to ensure that recruitment of staff follows
relevant labour legislation?

The institution is committed to the principles of the LRA and other related Acts. Recruitment
policies are aligned and are provided in the annexures. Advertisements are placed nationally and
internationally in newspapers and professional journals. Special committees are set up in each
Faculty that has to deal with the selection of candidates before the names are submitted to the
Joint appointments Committee of Senate and Council, who will interview the candidates and make
a final selection.

Recruitment and selection takes place as far as possible in line with equity targets of the
institution and have been submitted annually to the Department of Labour.

3.6. What mechanism does the institution have to ensure that the ratio between staff and
students in the proposed programme are appropriate for the nature of the programme?

_The programme in terms of the student numbers that will be allowed should not exceed
the ratio and fte/sle ratio of 1:25 .in coursework and 1:7 in supervision the current ratio
is 1:12 on coursework and 1:5 for thesis supervision_

3.7. To what extent are the academic and support staff sufficient in size and seniority for
the nature and the field of the programme?

3.7.1. Staffing
Attach the staff profile of persons attached to the learning programme

<table>
<thead>
<tr>
<th>Name</th>
<th>Gender</th>
<th>Race</th>
<th>Highest Qualification</th>
<th>Experience</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>T.D. Khanyile</td>
<td>F</td>
<td>A</td>
<td>PhD</td>
<td>10 years</td>
<td>Ass't. Professor</td>
</tr>
<tr>
<td>E Kortenbout</td>
<td>F</td>
<td>W</td>
<td>PhD</td>
<td>31 years</td>
<td>Professor</td>
</tr>
<tr>
<td>C. Nikodem</td>
<td>F</td>
<td>W</td>
<td>D Cur</td>
<td>4 years</td>
<td>Ass. Professor</td>
</tr>
<tr>
<td>N Mbombo</td>
<td>F</td>
<td>A</td>
<td>PhD</td>
<td>4 years</td>
<td>Senior lecturer</td>
</tr>
<tr>
<td>L. Fakude</td>
<td>F</td>
<td>A</td>
<td>M.Cur</td>
<td>6 years</td>
<td>Lecturer</td>
</tr>
</tbody>
</table>
Support Staff

In the Department

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Race</th>
<th>Highest Qualification</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>C Fetser</td>
<td>30</td>
<td>F</td>
<td>C</td>
<td>Reading Badm.</td>
<td>General secretary</td>
</tr>
<tr>
<td>N Nyumba</td>
<td>25</td>
<td>F</td>
<td>A</td>
<td>Reading: Badm</td>
<td>HOD Secretary</td>
</tr>
<tr>
<td>E Faviers</td>
<td>28</td>
<td>F</td>
<td>C</td>
<td>Matriculation</td>
<td>Admin officer</td>
</tr>
</tbody>
</table>

Training opportunities are provided for support staff in terms of the Official University’s Annual Staff Development programmes. Heads of Departments recommends support staff to attend these programmes.

4. Teaching and Learning Strategy

4.1. What activities does the programme have to promote student learning?

The programme is made up of a combination of lectures, research, case studies, examinations and assignments. Since all the students will be adults and working, independent study will be encouraged, through seminars constructive engagement will be promoted to share their experience in terms of their knowledge in the world of work and to combine theory with practice. Classes are small and individualized attention is provided.

4.2. How does the teaching and learning strategy reflect the institutional type, mode of delivery and student composition?

This is a contact, full-time or part time programme and as such it is designed to enable learners to have independent learning. Part time students may take the programme over 4 years and enroll in such a manner to match their own working needs with the studies. Specific time will be made available during the day and after hours for consultation.

4.3. How does the teaching and learning strategy ensure that it is appropriate for the learning outcomes?

This will be constantly reviewed and realigned with the needs of the learners. This will be done through assessing our module evaluation forms from students during meeting with lecturers as well
as comments from external moderation to improve teaching and learning strategies. This is done at the end of every semester. All student assessment will be reviewed at monthly Departmental meetings.

5.4. To what extent does the teaching and learning strategy make provision for staff to upgrade their teaching methods?

See 3.4 above

5.5. What mechanisms to monitor progress, evaluate impact, and effect improvement are included in the strategy for teaching and learning?

Two PET Project publications, the Thesis Guide and the Supervision Guide, form an integral part of the supervision process. Students will be provided a copy of the Thesis Guide to which regular reference is made, and the feedback to students is based on the criteria used to assess the mini-thesis. Student progress is measured on a monthly basis by the lecturer or Supervisor.

6. Student Assessment Policies and Procedures

6.1. To what extent are the policies and procedures for internal assessment appropriate for the mode of delivery of the programme?

All assessment papers at Masters Level are moderated both internally and externally to ensure that quality is maintained and that learning outcomes are appropriately tested. To this effect, the following procedures are applied:

All eleven modules as well as the mini-thesis are subjected to external examination. At the beginning of each academic year, each responsible academic is requested by the Faculty Officer, to nominate an external examiner as well as an alternate examiner for each module which will be presented during that particular year. An alternate examiner is nominated in the case of the non-availability of the first nominee at the time of assessment. The nominations are done based on the expertise, experience and standing of the academics that are attached to other institutions. This list of examiners are then submitted for approval at the first Faculty Board meeting of the year, then to the Senate Executive Committee whereafter it will be implemented by the Post-graduate Office, Student Administration.

In the case of the mini-thesis three examiners are recommended by the supervisor when the mini-thesis is nearing completion: the supervisor, an independent internal examiner who is attached to UWC, and an external examiner. A letter to this effect must be tabbed at the Faculty Higher Degree Committee, and forwarded to Senate Higher Degree Committee, stipulating the student’s
name, student number, registered thesis title, degree, Faculty, supervisor and the names, titles, institutional affiliations of each recommended examiner. Where an examiner has not examined a thesis before, a short CV of the examiner must be included. There are other criteria and administrative procedures pertaining to the appointment of these examiners - see rule A.5.1.5 in the University Calendar 2005, Part 1, General Information.

6.2. What mechanisms does the institution have for academic staff to monitor student progress?

Through discussion with students and academics at monthly meetings within the department under chair of the programme co-coordinator. No formal centralized system do exits. The existing system is currently being revised, and will be replaced by a system known as the Marks Administration System (MAS). It will be developed to capture and publish marks as a part of the initial leg of an overall student tracking and administration system at UWC. The system seeks to capture core functionality concerning marks administration as per UWC’s documented rules. The approach has been to capture most of what constitutes common practice across all faculties. MAS are meant to attain the following outcomes:

- Ensure the consistent application of a single set of assessment rules
- Form the basis for a broader system for tracking students’ performance
- Retain assessment marks in a secure manner
- Assure the integrity of assessment marks as far as possible and not include measures that would compromise this
- Be successfully accepted be utilized by the university’s community.

This web-based application is a role based system. This means that every user needs to have a role assigned to him/her by the Faculty Officer before he/she can work within the system. The user’s level of access to MAS is determined by the role/-s assigned to him/her. The five roles that will be assigned are Faculty officer, module coordinator, marks administrator, responsible lecturer, and departmental chair. The role of the marks administrator, for example, is to capture marks, and to make corrections to marks that have been captured only prior to submission of the marks to the responsible lecturer, but may not do so thereafter. The responsible lecturer, on the other hand, is accountable for the integrity of the marks handed to the marks administrator to be captured. The responsible lecturer must also vet the marks captured by the marks administrator as well as be consulted when mark adjustments need to be carried out for continuous assessment.

Thus far a series of workshops had been held with faculty officers, module coordinators, lecturers and mark administrators to acquaint themselves with MAS. When up and running MAS will enhance the existing measures to ensure the reliability, rigour and security of the assessment system.
6.3. What mechanism does the institution have to ensure the explicitness, validity and reliability of assessment practices?

Assessors are the lecturers on the programme. They are familiar with the field of study and appropriately qualified. They evaluate the programme and ensure that the assessment regime is in line with the learning outcomes of the programme. External moderators are persons competent in the field of study and should be ideally resident in the province. They are appointed annually but not for a period for more than three years and only under exceptional circumstances. See above for the appointment procedures.

6.4. How does the programme management relate moderator’s reports and external examiner reports and how are the latter used to improve teaching and learning?

After each assessment cycle, reports received from external moderators for both the modules and mini-theses will be summarized by the programme co-coordinator for discussion at Departmental meetings with due regard of the recommendations made.

6.5. What system does the programme use for the recording of assessment results and the settling of disputes in relation to assessment results?

All final marks of students are uploaded at the end of each semester onto the university IT system where student’s records are stored called LINC this upload can only commence once the final marks have been validated and duly signed by the internal assessor. Once all final marks have been uploaded, changes can only made by special request to the Registrar motivating the change and duly signed by the Deans or his/her nominee. This is forwarded to student Administration for processing on the student’s academic record (see paragraph 6.2. above for new system of marks administration.

In terms of our current Assessment Policy, a student can:

* Apply for the re-marking of his/her final assessment task at a prescribed rate and not later than 20 days after the commencement of a semester. If, after checking the final assessment task by the internal assessor, it is sent to an external assessor who has not previously marked the assessment.

If a pass symbol is awarded, the student is refunded.

* If he/she submits work by the due date, they shall receive feedback on their work in time for them to benefit in preparing for the next task. As much assessed work
as possible should be discussed with students, and where appropriate and possible returned to them with written comments. Feedback to students shall be constructive, focusing on assisting them to understand how they can improve the quality of their work. (This requirement does not apply to examinations).

* Request a review of a mark received for an assessment exercise, other than a final, sit-down examination, where he/she feels it is unfair or incorrect,. Any assessment exercise may only be submitted for a review of marks once, and the work resubmitted for or review may not be altered or added to by the student. The application shall be in writing to the lecturer concerned within five working days of the return of the assessment exercise.

6.6. What mechanisms are in place to ensure that the assessment for RPL is rigorous and secure?

The RPL process for access (not credit) at the university in general is administered via our Division of Life long Learning at undergraduate level via Portfolio Development module. The University Senate for the last 15 years has set criteria in terms of the admission of RPL with the Senate Higher Degrees Committee with oversight responsibilities. These are the level of the highest existing qualification obtained, research competencies, writing skills, work experience related to the programme content and programme exit level outcomes, conferences attended, papers delivered, special awards,

All applications are prepared and motivated by departments in terms of student competencies against faculty requirements within the stated criteria. Their recommendations are submitted to the Faculty to decide on student access. Thereafter, recommendation will be submitted to Faculty Higher Degrees Committee, and then to the Senate Higher Degrees Committee and ultimate to Senate. Faculties also have the options to from an ad-hoc committee with representatives from similar disciplines from other higher education institutions to take decisions on a student’s capabilities to be admitted to post graduate studies.

5.7. What mechanisms are in place for the development of staff competence in the field of RPL?

The Senate only recently accepted a Portfolio Development modules specially designed for the admission to Postgraduate studies for Nursing, taking into account prospective student’s professional competencies and to match it against Learning already assumed to be in place. This
has not yet been tested and staff competencies developed. However, professional in this area will act as evaluators before such an applicant is submitted for admission.

### List of External Examiners Used by Institution in the past

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Discipline</th>
<th>Highest Qualification</th>
<th>Teaching Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prof. A. Adejumo</td>
<td>HOD (UKZN)</td>
<td>Research</td>
<td>PhD</td>
<td>12yrs</td>
</tr>
<tr>
<td>Prof. N. Gwele</td>
<td>Dean (DIT)</td>
<td>Curriculum Development / Evidence- based didactics</td>
<td>PhD</td>
<td>14yrs</td>
</tr>
<tr>
<td>Dr N. Mtshali</td>
<td>HOD Post Grad. (UKZN)</td>
<td>Teaching &amp; Learning Methodologies / thesis / Professional Development</td>
<td>PhD</td>
<td>6yrs</td>
</tr>
<tr>
<td>Prof. J. Bruce</td>
<td>HOD (Wits)</td>
<td>Theoretical Foundation of Learning</td>
<td>PhD</td>
<td>10yrs</td>
</tr>
<tr>
<td>Prof. M Chabeli</td>
<td>RAU</td>
<td>Assessment in Higher Education</td>
<td>PhD</td>
<td>15yrs</td>
</tr>
<tr>
<td>Prof. NE Sokhela</td>
<td>HOD (UNITRA)</td>
<td>Management in Higher Education</td>
<td>PhD</td>
<td>16yrs</td>
</tr>
<tr>
<td>Prof. R. Ganga-Limando</td>
<td>UNISA</td>
<td>Issues in Health Prof Education / Applied Epidemiology</td>
<td>PhD</td>
<td>7yrs</td>
</tr>
<tr>
<td>Prof. S. Mogotlane</td>
<td>HOD (UNISA)</td>
<td>Management in Higher Learning</td>
<td>PhD</td>
<td>15yrs</td>
</tr>
</tbody>
</table>
7. Infrastructure and Library Resources

7.1. Departmental IT Infrastructure

The IT infrastructure for the Department of Nursing comprises of

<table>
<thead>
<tr>
<th>PC (Specifications)</th>
<th>Printer</th>
<th>Software</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>6</td>
<td>Novell Groupwise</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td>Sophos Anti-virus</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td>Research Toolbox</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td>Adobe Acrobat</td>
</tr>
</tbody>
</table>

There are computer laboratories for student use at several locations on campus.

<table>
<thead>
<tr>
<th>Labs</th>
<th>Access</th>
<th>Availability</th>
<th>Comments</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thintana Teaching</td>
<td>Formal lectures</td>
<td>08:30-21:00</td>
<td>Dept request</td>
<td>Main Hall</td>
</tr>
<tr>
<td>Thintana Walk-in</td>
<td>General access</td>
<td>08:30-21:00</td>
<td>Any student</td>
<td>Mail Hall</td>
</tr>
<tr>
<td>Writing Centre</td>
<td>General access</td>
<td>08:30-21:00</td>
<td>Any student</td>
<td>Old Arts Building</td>
</tr>
<tr>
<td>Law</td>
<td>General access &amp; specialize</td>
<td>08:30-21:00</td>
<td>Law students Times vary</td>
<td>Law</td>
</tr>
<tr>
<td>LIS</td>
<td>General access</td>
<td>08:30-21:00</td>
<td>Library students</td>
<td>LIS Dept</td>
</tr>
<tr>
<td>BoE</td>
<td>Formal lectures</td>
<td>08:30-21:00</td>
<td>Departmental request</td>
<td>EMS Building</td>
</tr>
<tr>
<td>B20</td>
<td>Special request</td>
<td>08:30-21:00</td>
<td>Times vary</td>
<td>B-Block</td>
</tr>
<tr>
<td>Library L13</td>
<td>Postgraduate students</td>
<td>24 hours</td>
<td>Any P/G student</td>
<td>Library</td>
</tr>
<tr>
<td>EMS 4th floor</td>
<td>Postgraduate students</td>
<td>24 hours</td>
<td>Any P/G student</td>
<td>EMS</td>
</tr>
<tr>
<td></td>
<td>Postgraduate Students</td>
<td>24 hours</td>
<td>Any P/G student</td>
<td>Dos Santos Residence</td>
</tr>
</tbody>
</table>

186
New labs that will be completed in the second semester of 2005

<table>
<thead>
<tr>
<th>Labs</th>
<th>Access</th>
<th>Availability</th>
<th>Comments</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>SVE4</td>
<td>Postgraduate student</td>
<td>24 hours</td>
<td>Any P/G student</td>
<td>Main residence</td>
</tr>
<tr>
<td>Cassinga</td>
<td>Undergraduate Students</td>
<td>24 hours</td>
<td>Undergraduate students only</td>
<td>Main residence</td>
</tr>
<tr>
<td>Centre</td>
<td>Any student</td>
<td>24 hours</td>
<td>Any student</td>
<td>Main Campus</td>
</tr>
</tbody>
</table>

7.2. Library

The following is derived from UWC's Prospectus 2005-2006:\(^2\):

The Library supports the University’s mission, in particular its commitment to learning, teaching and research, by providing both the space and environment in which students and staff can explore and acquire knowledge and develop lifelong learning and advanced information seeking skills. The Library provides access to a vast array of information resources in a number of different formats. It has a collection of over 280 000 books and subscribes to 1129 printed journals and more than 120 electronic databases with online access to more than 20 000 electronic journals.

The Library’s collections contain standard and core materials on programmes studied at UWC, and representative materials on major trends in scholarship. It also provides Faculty research support, postgraduate student research support, and curriculum support. In addition to the open stack collections, the library provides a reserved reading and short loan collection which houses South African and UWC publications including UWC theses in support of research.

The Library’s computer facilities consist of 161 individual computer workstations, flatbed scanners, printers, and two servers. The computer workstations are equipped with software to support independent learning and research. The LICT section of the Library is committed to the development, implementation and effective use of information and Communication Technology within the Library. It aims to provide infrastructure of high quality to facilitate the preservation, dissemination, and management of, and access to information. Access to the extensive collection of electronic resources is facilitated via the Library’s web portal UWC Link enabling a single point of access to peer-reviewed journals, subject gateways, indices, and various electronic resources. The retrieval of electronic information via this portal is further supported by means of direct

\(^2\) This document will be available onsite as Document V.
linking to articles, citations, tables of content, etc. The Library supports distance learning by providing remote access (from home or school) to its catalogue and electronic databases.

7.1. To what extent does the programme have suitable and sufficient lecturing venues in relation to the expected student intake and the nature of the programme?

At least two venues accommodating (20) for this programme is available within the buildings occupied by the Nursing Department.

7.2. How does the IT infrastructure and library resources available for the students and staff match the programme requirements?

The Library also has a special training facility equipped with 36 state-of-the-art computers. The main purposes of the training facility are:

- To train users in Information Literacy
- To train users in the use of specific e-resources
- For library orientation

**Academic Search Premier**
This EbscoHost database is the world’s largest academic multi-disciplinary database. Coverage spans virtually every area of academic study.

**Introduction to the Library's eResources**
An introductory session about ejournals, databases and ebooks.

**OPAC** Learn to use the library's online catalogue to find books and other items in the library.

**PET Science**
In collaboration with the PET project on campus the library offers information literacy sessions to Postgraduate students. The Facilitator will focus on resources and information relevant to Science faculty students.

**Proquest Academic Research Library (ARL)**
A comprehensive academic database covering a broad range of subjects including arts, business, children, education, general interest, health, humanities, law, military, psychology, sciences, social sciences, and women's interests.
Expanded Academic (ASAP)
From arts and the humanities to social sciences, science and technology, this InfoTrac database meets research needs across all academic disciplines.

Sabinet
A key gateway to South African information sources such as journal articles, books, research reports, theses, newspaper articles, legal publications and library holdings.

Africa-Wide NEPAD
Topics include politics, history, economics, business, mining, development, social issues, anthropology, literature, language, law, music and much more.

Basic Search Skills
Learn key search skills to find information for your research or assignments.

UWC Link
Learn to use the library's electronic resources portal.

PET
In collaboration with the PET project on campus the library offers information literacy sessions to Postgraduate students. The Facilitator will focus on resources and information relevant to Law students.

International Bibliography of the Social Sciences (IBSS)
Indexes the information contained in over 2,600 social sciences journals and 6,000 books each year. Coverage includes both core and specialized material from over 100 countries. Please note that journals contained in this database are classified by the DoE as accredited journals.

NetLibrary eBooks
The library has purchased over 200 netLibrary ebooks. You may search for a wide range of books on medicine, social science, language and literature, computer science, business, economics and management, life sciences, physical science, maths, library science, education, psychology and more.

Computer Labs
Library
Go to our website to obtain more information about the library's user education programme [http://www.uwc.ac.za/library](http://www.uwc.ac.za/library).

7.3. How are the management and maintenance of library resources including support and access for students and staff regulated?

The Library is managed by the University Librarian who reports to the Deputy Vice-chancellor (Academic). The Senate Library Committee which comprises of one person per faculty has oversight responsibilities and administers, inter alia the resource allocation to faculties for the purchasing of new books. The University Librarian is supported by a staff of 1x Secretary, 2x deputy university librarians, 10 x Librarians, 4 x section heads, 7 x Senior Library Assistants, 24 Library Assistants, 1 x E-learning Support training Officer, 1 IT Support Technician, 1 Cataloguer. Training in various areas provides to Library staff in terms of our annual staff Development Programme.

Library hours are:

**During the Academic year:**
- Mondays, Tuesdays, & Thursdays. 08:20 to 22:00
- Wednesdays & Fridays 09:20-22:00
- Saturdays 09:00 to 17:00

**During University Vacations** 08:15 to 16:30

In 2005 a budget allocation of Rxxxxx was made to the library for additional textbooks for the programme. Each Faculty and Faculty librarian, which liaises with academics within the faculty and the Faculty’s representative on the Senate Library Committee. Programme coordinators also arrange training sessions with the Faculty librarian. These sessions take place in the Library Thintana Training Room, where students receive hands-on on 35 PC’s. (See above)

Most information sources in the Library can be borrowed by all UWC community members for varying lengths of time. Bookings for items can be made online via the Library’s catalogue.

Information sources not held by the Library are available through an active interlibrary loan programme. As a member of the Cape Library Co-operative (CALICO) the library maintains consortia agreements with the University of Cape Town, University of Stellenbosch and the Cape Peninsula University of Technology (formerly the Cape and Peninsula Technikons).

Library staff is actively engaged in a comprehensive instructional services programme in support of educational and research functions of UWC. The following services are offered by the Faculty of Community and Health Sciences Faculty Librarian:
• General assistance to students and other library users in finding information for coursework
• Reference services
• Information literacy and education programmes
• Assistance with accessing information via online databases.

The Library facilitates integration of new information technologies into learning and research by providing students and Faculty with a variety of multimedia resources. The Multi-media Center provides access to information resources in digital formats such as CD-ROMs, videos and audiotapes, as well as access to scanning facilities.

The library provides a comprehensive self-service photocopying and printing service to students, staff and Faculty. Reasonable measures are taken to promote copyright and license compliance among its users.

Most of the above-mentioned information is available on the Library’s website at www.uwc.ac.za/library, to which all UWC students and staff have access

8. Programme Administrative Services

8.1. Administrative Systems
Management of the programme is the responsibility of the Head of the Nursing Department. All management issues are brought to the Departmental Meetings and then referred to the Management Committee of Faculty. Both these structures meet regularly. Guidance and counseling services for students or staff are available by appointment at our Institute for Student Counseling or our PET project. Faculty are available for consultation during stipulated hours. All complaints from students or staff will be forwarded to the Head of the Nursing Department. The Department is assisted by the Faculty Officer and 5 staff members, who will attend to matters referred to it by either the Nursing Department or Management Committee of Faculty. The matter is then investigated by the Faculty Officers in conjunction with the Registrar’s Office in particular the Central Student Administration Offices. All complaints from students or staff will be forwarded to the Head of the Nursing Department.

8.2. Certification of Qualifications
The Senate Assessment Committee on behalf of Senate validates certification of students who qualify to be awarded undergraduate and Honours qualifications in terms of programme requirements. The Senate Higher Degrees Committee on behalf of Senate validates certification of students who qualify to be awarded Masters and Doctoral qualification.

All Faculties recommend at least twice a year, after each assessment and promotion cycle,
(at end of each semester) submit the names of students who completed a qualification to the relevant Senate Committee for consideration.
The Senate Assessment Committee and the Senate Higher Degrees Committees validates and verify the awarding of a qualification(s) to a student(s) in terms of its respective Standing Orders and policy guidelines and with due regard to the programme rules as published in the different faculty calendars. A diploma or degree may only be awarded to a student who meets all the requirements for obtaining such a qualification in terms of the General rule A.5.1 as published in the General Calendar.

**Procedures for certification**

After the Committees decide to award the degree, the specific Student Administration staff assigned enters the promotion code (01 or 02) on the student’s official academic record and with the Senate Higher Degrees Committee reference number where applicable. Student Administration extracts a list from the Mainframe of all students who completed their qualifications (Promotion code 01 and 02).

The names must be extracted per programme and ensured that:

* all students comply with the requirements for the degree and that all students who studied with a conditional exemption are issued a full exemption certificate by the Matriculation Board;
* all students who have completed their studies but have outstanding fees are informed that they will not graduate if the outstanding fees are not paid by a due date.
* The names of students who due to disciplinary measures may not be awarded a degree, are removed from the list.

**Security Arrangements**

i) The Registrar has ultimate responsibility for the security and safe-keeping of certificates and to ensure that the process is well protected provided that the Registrar may delegate at operational level, this responsibility to the Head: Student Administration.

(ii) All blank certificates and those prepared for graduation must be kept in a steel cabinet and secured within a fire-proof safe.

(iii) Only persons responsible for the preparation and issuing of certificates may have access to it.

**Ordering of Certificates**

(i) The Head: Student Administration is responsible for ordering blank certificates bi-annually. On the blanks only the university crest and name appears in terms of UWC certificate specifications as defined in Cert Spec.2004/1.

(ii) When ordering the certificates due consideration should be given
to the specifications such as lay-out, paper quality as per UWC certification specifications.

(iii) Ensure that a proper stock register is kept that indicates stock at hand, certificates issued, and spoilt certificates that should be destroyed.

Printing of Certificates

(i) The Head of Student Administration must ensure that the printing of certificates takes place in a secure area with limited access.

(ii) Printing the names and degree appellation on the certificates is automated and the names of students will only be printed from the IT system once verification has taken place.

(iv) Before the certificates are set up for printing, both the Head: Student Administration and the person assigned to oversee the printing will release by special code the signature of the Vice-Chancellor and Registrar that need to appear on the certificate. Certificates are then printed in terms of the minimum standards set by the institution in terms of its certification policy.
MISSION STATEMENT OF THE UNIVERSITY

The University of the Western Cape is a national university, alert to its African and international context as it strives to be a place of quality, a place to grow. It is committed to excellence in teaching, learning and research, to nurturing the cultural diversity of South Africa, and to respond in critical and creative ways to the needs of a society in transition. Drawing on its proud experience in the liberation struggle, the university is aware of a distinctive academic role in helping build an equitable and dynamic society.

In particular, it aims to:

→ Advance and protect the independence of the academic enterprise
→ Design curricula and research programmes appropriate to its southern African context
→ Further global perspectives amongst its staff and students, thereby strengthening intellectual life and contributing to South Africa’s reintegration in the world community
→ Assist educationally disadvantaged students gain access to higher education and succeed in their studies
→ Nurture and use the abilities of all in the university community
→ Develop effective structures and conventions of governance, which are democratic, transparent and accountable
→ Seek racial and gender equality and contribute to helping the historically marginalized participate fully in the life of the nation
→ Encourage and provide opportunities for lifelong learning through programmes and courses
→ Help conserve and explore the environmental and cultural resources of the southern African region, and to encourage a wide awareness of them in the community
→ Co-operate fully with other stakeholders to develop an excellent, and therefore transformed, higher education system.

MISSION AND VISION OF THE COMMUNITY AND HEALTH SCIENCES FACULTY

The University of the Western Cape has an explicit commitment to the development of historically disadvantaged communities in South Africa from which it draws most its students. It aims to play a particular role in this development by making its education accessible to students from these communities. The faculty of Community and Health Sciences is a multi-disciplinary team committed to the promotion of a new vision of Health and Welfare Services. Both in the training and education it offers and in the professionals it produces it aims to advance the transformation of existing Health and Welfare Services in South Africa.

The faculty is committed to:

1. a proactive approach to managing it’s own affairs as well as to the professionals issues which it must address;
2. the pursuit of excellence in education, research and community service;
3. the generation of knowledge which amongst other things, addresses the realities, problems and needs of the community;

4. Student education which promotes:
   - A progressive primary health care approach to health and welfare services which is firmly rooted in the community
   - Inter-disciplinary teamwork
   - Competency in problem-solving, leadership and advocacy
   - Critical analysis
   - An attitude of creativity and adaptability

5. Student academic development, generating appropriate teaching strategies to address educational inadequacies and ensure the acquisition of competencies;

6. the development of dynamic, accessible and responsive models of training and intervention;

7. developing a collaborative relationship with the broader community;

8. Staff development, both as an important function of departments, and as requiring vigorous and structured attention from the faculty.

MISSION, VISION AND GOALS FOR THE SCHOOL OF NURSING

1. The Dept. of Nursing, UWC aims to position itself as an innovative School of Nursing and Midwifery in the country in line with the Minister of Education’s restructuring proposal in 2003 to position the University of the Western Cape as the one of the two enrolling institutions in the region.

2. The Department of Nursing believes that the process of producing a professional nurse is best achieved through community, problem and competency based curriculum. We believe that the professional nurse is a community oriented, generalist nurse who is competent in meta-cognitive, problem-solving, partnership-building and self-directed learning skills, as well as the attributes of a caring environment.

3. We believe that Education does not mean the transmission of information and skills, but aims much more broadly at developing self-learning and personal development in the student. In order to reach these goals, the postgraduate
program (M.Cur) should use teaching learning strategies that promote active learning. Therefore, Self-directed learning will be used as the basis for teaching and learning both in classroom and the clinical settings.

Specifically the School of Nursing of Nursing of strives to:

1. Develop competent nursing practitioners and nurse educators who value and implement a primary health care approach in dealing with individuals, groups and communities;

2. Develop competency through a process and student based curriculum with the emphasis on problem solving, critical thinking and partnership building skill;

3. Operationalize the value of good quality of life (health), for all equal and just, within the framework of respect for uniqueness, dignity, and freedom of every human being;

4. Be committed to, and honour the service of mankind through scientifically sound, sensitive and caring behaviour.

Students and teaching/learning

1. Many students come into all level programmes from educationally disadvantaged backgrounds, which may influence the development of meta-cognitive skills of students.

2. The processes of problem solving and partnership building with client and colleagues are those taught in the programmes in the department.

3. Undergraduate programmes are comprehensive and liberal, to prepare generalists, while specialization takes place on a post-grade level.

4. Relevant teaching can only be done by lecturers who are involved in their profession, the health care services and communities.

Purpose of the curriculum

To prepare post graduate nurse educators equipped with the knowledge, skills and professional values to meet the health care needs of the population and thereby contribute to the transformation of society. The postgraduate nurse’ practice will reflect and understanding of the social, cultural, and economic context of our country in the 21st century, whilst conforming to standards of nursing practice.
1.2.4 The approach
Case based learning approach
This method of teaching and learning helps the learners to readily apply theory into their practice. It uses clinical practice-based scenarios in the classroom for students to review gather more information on, and come up with solutions. A good case study is a vehicle by which a chunk of reality is brought into the classroom to be worked upon by the class and the facilitator. This approach creates a balance between content based curriculum and problem based curriculum as follows:

- Curriculum is outcomes based in the sense that the curriculum developers focus on the exit level outcomes to be achieved
- It is self-directed curriculum in that students first confronts the learning material by themselves. They study the problem and the new material and try to solve the problem in small groups before validating their solutions within the larger group.
- It structures knowledge in the clinical context which means that subsequent recall and use of the knowledge is facilitated (McKeachie, 1994).
- It is an integrated curriculum in which a range of subjects can be presented around comprehensive case studies. This allows learners to see the relevance of biomedical and social sciences and facilitates application of knowledge in practice.
- Since learning resources are identified for the learners this curriculum is used more easily than the problem based curriculum especially in situations where learners are placed in rural clinical sites.
- Discussion of cases takes place in small or large groups. This is particularly advantageous in our situation where there will be large class sizes. Active learning will be promoted even in large classes.

Teaching/ facilitating role

- In this approach, the teacher assumes the role of a facilitator.
- The most important role is prior planning. He/ she should ask the questions: what would I learn from this exercise/ case? How would I go about solving these problems? If I find myself faced with similar situation, will I miss the problem?
- The group facilitator should be familiar with assigned exercises and be able to identify their relevance to the specific module outcomes.
- The facilitator should try to help the groups to move beyond dependence on him/her as the leader and solver of the problem. The facilitator should become the “enabler” of the group.
♦ The facilitator should decide in advance how much time should be spent on each exercise and how many exercises should be included in each case study.

Teaching strategies:
In line with the philosophical underpinnings and theoretical underpinnings of the curriculum, teaching strategies that promote active learning, problem solving and critical thinking will be used. These include but are not restricted to strategies such as small group discussions, class presentations, role plays especially in case base learning.

Assessment
Continuous assessment of learning will form part of the formal methods of assessment. This concept also includes the assessment of the learner's previous experience before it can be recognized. There is a direct link between access and assessment and between assessment and competence which leads to a qualification. The Triple Jump Exercise will be used as the main instrument to assess competence. The Triple Jump Exercise is a structured exercise consisting of three parts or steps which are the (a) problem definition, (b) information search and study, (c) problem synthesis formulation and intervention. It is an experiential exercise which allows the learners to observe and evaluate problem solving behaviours while simultaneously verifying their self awareness with another person (examiner). The Triple Jump Exercise is a well recognized approach to assess problem solving and critical thinking skills. This assessment instrument will be used in conjunction with other assessment methods like the theory paper and clinical skills assessment through Objective Structured Clinical Evaluation. See Annexure on Evaluation tools.

THE THEORETICAL FRAMEWORK FOR THE M.CUR DEGREE PROGRAM
Experiential learning theory forms the basis for the curriculum. Therefore, the learner’s experience prior to commencing the program and during the program will feature prominently in the teaching-learning encounter. Experiential learning allows for practical and valid assessment methodologies for assessing what people have learned either from previous experience or current experience. Emphasis on the outcomes of learning is more practicable when the experiential learning theory is used. This emphasis on the outcomes of learning also enables the
creation of formal links between the classroom and the clinical setting. In other words the classroom boundary is extended. Reflection an important concept in the theory will allow learners to grasp the meaning of their clinical experiences in class.

The model developed for the desired learner outcomes is an adaptation of the Critical thinking model by Maquis-Huston. The model provides an interaction between the learner and others that results in the ability to critically examine nursing issues. This model allows for learning of appropriate social and professional behaviours rather than mere acquisition of knowledge and skills. The model depicts four overlapping spheres each one being an essential component of the teaching/learning mode. There needs to be didactic material that precedes each case to be reviewed. Personalized learning occurs during class presentations wherein the learner’s conceptualization of the case is subjected to critique by the other learners and the facilitator.

The four main spheres in the critical thinking model

(a) Problem solving. Here the learners need to be introduced to formalized approaches to problem solving and critical thinking. The facilitator plays an important role in ensuring that the tasks to be accomplished by the learners during the case study review provides the learners with relevant exercises.

(b) Secondly there needs to be a theory component, such as the didactic material that precedes each learning exercises or set of exercises. As new material is presented, the learner should be given a chance to apply the theory through experiential learning.

(c) Thirdly the use of group process where the learner interacts with other learners, his/her critical thinking abilities are enhanced. Group process enhances both verbal and listening skills and encourage risk taking as learners give and receive constructive feedback from fellow learners.

(d) The last sphere of the model requires that the learner be personally involved in the learning process. Personalizing the learning through reflection allows for learning to become internalized. When the learner takes risk through sharing his/her conceptualization of the problem or during oral presentations, or written exercises, personalized learning is enhanced.
CHAPTER 3

SUBMISSION OF NEW PROGRAMMES/QUALIFICATIONS TO THE COUNCIL ON HIGHER EDUCATION FOR APPROVAL AND ACCREDITATION.

Section 1

ACADEMIC QUALITY OF THE PROGRAMME

Please state the following:

1.1. Title of qualification/ programme. M. Cur (Nursing Education)

1.2. Purpose(s) of the programme.

(a) Currently the Department of Nursing is one of the only two enrolling institutions in the province to offer the education and training of nurses. On the other hand the Department is faced with a problem of academic staff who do not hold the qualification as Nurse Educators although this is a South African Nursing Council requirement. This problem was highlighted by the SANC delegation during their accreditation visit in 2004. This program will strengthen the capacity of the department to meet the CHEC platform challenges.

(B) Learners credited with this qualification will be able to function with advanced cognitive and practical competencies in nursing and midwifery education as educators, leaders, and authors. Qualifying learners are registered by the SANC as nurse educators (R118).
1.3. **Faculty in which this programme will be offered.**
(If other Faculties are involved in programme offerings please indicate the date this proposal was tabled at the Faculty’s Academic Planning Committee).
Community and Health Sciences

1.5. **Area of Concentration**
Health Professional Education

1.6. **Envisaged student enrolment for the next five years.**
Ten to fifteen students per year = 50 – 70 students over five years

1.7. **Specify mode of instruction : (Distance, residential or mix)**
Residential and mixed mode

1.8. **Relationship (Access articulation etc) to other programmes and qualifications**
Horizontal articulation: Articulates the M. Cur programmes offered within the department namely, Masters in Advanced Midwifery and Neonatal Nursing as well as Masters in Advanced mental Health Nursing.
Vertical articulation: candidates can proceed to do a PhD in Nursing.

1.9 **Admission requirements**
The equivalent of a diploma or degree (M+4) in nursing and/or midwifery at NQF Level 7.

1.10. **Learning assumed to be in place.**

1. Learners to demonstrate a fundamental knowledge base of the discipline of nursing by applying the basic ethical, moral, legal and professional principles as a framework during their interaction with individuals of all age groups, their families and other multidisciplinary team members.
2. Learners to demonstrate the ability to effectively apply knowledge from the biological sciences in solving familiar problems/needs of individuals of all age groups in a variety of health care settings.
3. Learners to demonstrate a sound knowledge of the scientific principles of preventive, promotive, curative and rehabilitative health in providing care to individuals with medical and surgical, psychiatric nursing and midwifery health problems.
4. Demonstrate ability to effectively select and apply knowledge gained from Pharmacology in solving well
defined medical and surgical, psychiatric nursing and midwifery problems of individuals of all age groups.

5. Use knowledge and experience to offer suggestions for solving health problems at a community level.

6. Demonstrate knowledge and understanding of the normal development of a person within a society and how this can influence health, illness and health care delivery.

7. Demonstrate a sound understanding of all the steps of the research process.

8. Demonstrate ability to critically review and consolidate knowledge from all different disciplines of nursing and utilize this knowledge in conducting research.

9. Demonstrate ability to effectively apply the main research methods of enquiry in nursing research.

10. Demonstrate ability to formulate a researchable problem, select an appropriate research method, population and samples.

11. Demonstrate ability to develop a data collection instrument and procedures.

### 1.1 Exit Level Outcomes and Associated Assessment Criteria:

<table>
<thead>
<tr>
<th>Exit Level Outcomes</th>
<th>Associated Assessment Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Create active and learning centered environments in the teaching of nursing and midwifery both in clinical and classroom settings based on comprehensive and systematic understanding of adult development, learning and motivation theories</td>
<td>1.1 Critical analysis of adult development, learning (cognitive, behavioral, and social, transformative and experiential) and motivation theories show comprehensive understanding of a range of aspects including, conceptualizations of knowledge, teaching, learning, basic assumptions, and andragogical implications for nursing and midwifery education and is valid in accordance to current discourses about teaching/learning in professional education.</td>
</tr>
<tr>
<td></td>
<td>1.2 Teaching practice in nursing and midwifery is based on understanding of adult development, learning and motivation theories as evidenced by the creation and maintenance of an active learning environment and thus allowing learners space to question their meaning and perspectives about health and illness.</td>
</tr>
</tbody>
</table>
2. Evaluate various theories and models of nursing and health based on a critical analysis of different perspectives about health and disease and how these impact on decision making in the practice of nursing and midwifery

2.1 Critical analysis and synthesis of the philosophical basis of nursing is based on recognized contemporary nursing theories, models and relevant to current socio-political context of nursing practice.

2.2 Analysis of nursing and midwifery decisions is supported by a particular model or theory of nursing and takes into consideration the legal and ethical frameworks of nursing practice as well as the socio-political, economic and cultural context in which such decision have to be made.

3. Lead curriculum change and/or transformation in the education of nurses and midwives based on critical analysis of educational philosophy with regard to its implications for nursing and midwifery education.

3.1 Critical analysis of educational philosophy with regard to its implications for nursing and midwifery education is in accordance with rules of consensual validation.

3.2 Inferences on the implications of educational theory on teaching nursing and midwifery are based on comprehensive analysis of the current discourses on the nature and purpose of professional education.

4. Critically evaluate global and national issues and policies, including managing diversity, Recognition of Prior Learning, globalization and the nursing workforce etc, with specific reference to nursing and midwifery education.

4.1 Health and education policies are critically analyzed in accordance to their implications for curriculum relevance in nursing and midwifery.

4.2 Nursing and/or midwifery curriculum design is led and initiated in collaboration with relevant stakeholders taking into consideration relevant health and education policies as well as rules and regulations of the SANC for a particular nursing program.

4.3 Critical analysis, synthesis and independent evaluation of global and national issues impacting on nursing and midwifery education is supported by
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5. Analyze a range of research methods and approaches with regard to their appropriateness for investigating particular research problems in nursing and midwifery education.</strong></td>
<td><strong>5.1 The analysis of research approaches and methods is comprehensive and coherent and includes theoretical and or philosophical orientations about knowledge, reality and truth as well as the implications of these theoretical orientations for selection of techniques and strategies based on particular research problem(s) and questions.</strong></td>
</tr>
<tr>
<td><strong>6. Utilize a wide range of appropriate data bases (textual and electronic) to conduct an extensive and efficient literature search on nursing and midwifery education.</strong></td>
<td><strong>6.1 Review of literature on any selected topic in nursing and midwifery education is effectively carried out as evidenced by the exhaustiveness of the type of data bases (textual and electronic) accessed as well as their relevance to the topic in question.</strong></td>
</tr>
<tr>
<td><strong>7. Design and implement classroom and clinical learning sessions using appropriate teaching strategies based on expected learning outcomes taking into consideration the principles of adult learning.</strong></td>
<td><strong>7.1 A coherent and critical understanding of the importance of congruency between expected learning outcomes and the teaching/learning process supports evaluation of various teaching strategies with regard to their effectiveness in facilitating deep and self-directed learning in clinical and classroom setting.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>7.2 Teaching plans and implementation thereof, places emphasis on collaborative learning, learner</strong></td>
</tr>
</tbody>
</table>
| 8. Plan and implement the assessment of classroom and clinical learning outcomes based on a comprehensive understanding of principles and strategies of assessment of learning outcomes with specific reference to professional education. | 8.1 Identification, selection and combinations of assessment approaches and strategies is based on a coherent and logical understanding of the requirements of applied competence and integrated assessment and meets the criteria for credible, trustworthy, feasible, and valid assessment.  
8.2 Assessment of clinical learning in particular is largely undertaken in a real-world practice environment where appropriate, and/or simulated clinical learning environments.  
8.3 Generic Assessment Criteria as per Unit Standard No. ASSMT 01 of NSB Education, Training and Development. |
|---|---|
| 9. Develop a coherent curriculum for a particular nursing and/or midwifery program taking into account the principles of the NQF and the stipulations of the ETQA for nursing and midwifery education (SANC) in collaboration with peers. | 9.1 Critical analysis of development theory and models includes philosophical underpinnings, and implications thereof for the curriculum development process in nursing and midwifery education.  
9.2 The designed curriculum is comprehensive and includes all the steps of curriculum development as verifiable with any standard curriculum development text in nursing and midwifery education and is a collaborative piece of work involving peers.  
9.3 The designed curriculum is appropriate in terms of SANC guidelines and regulations for a particular program of nursing and/or midwifery, SAQA requirements and current national health policies on human resource development for health. |
10. Demonstrate a comprehensive and critical understanding of theories and approaches of educational management, including quality management systems, with specific reference to managing a nursing education institution (nursing colleges, university and technikon nursing departments).

10.1 Approaches and theories of educational management are interrogated and critically analyzed in terms of their applicability and relevance to managing nursing education institutions within the context of the current situation in nursing education in South Africa with regard to governance, programs, financing and provision.

10.2 Analysis of the current situation in nursing and midwifery education evidences a comprehensive and reflective understanding of the implications of the dual systems of governance and provision of nursing education for coherent programming and financing of nursing education.

10.3 Evaluation of a nursing education institution's quality management systems shows a broad understanding of principles and aims of institutional quality management systems in HE in South Africa and globally with specific reference to the requirements of the relevant ETQAs (HEQC and SAN C) for quality improvement and assurance.

11. Lead evidence-based practice in nursing and midwifery education

11.1 Teaching scholarship evident in the identified areas of research as well as application of best-practice evidence in nursing and midwifery education.

11.2 Critiques of research report meet the standards of the specific community in nursing and midwifery education.

11.3 Results of research undertaken are disseminated through publication, conference presentation, stakeholder seminars etc.

12. Demonstrate comprehensive theoretical and clinical

12. As per relevant exit level outcomes and associated assessment criteria for the chosen field
competence in the field in which teaching will take place. of teaching at NQF Level 8 (postgraduate certificates and diplomas in nursing as well as masters’ diplomas in nursing and midwifery.

1.12. **Integrated Assessment**
Written examinations, assignments, projects, portfolios and teaching practice workbooks. A minimum of three assessments per 16 credit module.

1.13. **Duration:** 2 years **Total credits 240**

1.14. **Minimum credits required at specific levels**

1.15. **Credits for fundamental, Core and Elective components**

<table>
<thead>
<tr>
<th>Year one modules</th>
<th>Subject/module name</th>
<th>Code</th>
<th>Current/New</th>
<th>Fundamental/Core</th>
<th>Credits</th>
<th>Level</th>
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<tr>
<td>Theoretical Foundations of Nursing Education</td>
<td>891820</td>
<td>New</td>
<td>Core</td>
<td>20</td>
<td>8</td>
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<td>Curriculum Development</td>
<td>891821</td>
<td>New</td>
<td>Core</td>
<td>20</td>
<td>8</td>
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<tr>
<td>Issues in Health Professional Education</td>
<td>891822</td>
<td>New</td>
<td>Core</td>
<td>20</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Advanced Qualitative Research Methods</td>
<td>881368</td>
<td>Current</td>
<td>Fundamental</td>
<td>10</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Advanced Quantitative Research Methods</td>
<td>891813</td>
<td>Current</td>
<td>Fundamental</td>
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<tr>
<td>Teaching and Learning Methods</td>
<td>891823</td>
<td>New</td>
<td>Core</td>
<td>20</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Assessment of learning in Higher Education (winter school)</td>
<td>891824</td>
<td>New</td>
<td>Core</td>
<td>20</td>
<td>8</td>
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<td><strong>TOTAL CREDITS</strong></td>
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</table>

**EXIT OPPORTUNITIES**
Candidates can exit at this level with a certificate in Nursing Education in accordance with R118.
Year two modules

<table>
<thead>
<tr>
<th>Module name</th>
<th>Code</th>
<th>Current/new</th>
<th>Fundamental/core</th>
<th>Credits</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applied Epidemiology / any speciality module</td>
<td>881368</td>
<td>current</td>
<td>fundamental</td>
<td>20</td>
<td>8</td>
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<tr>
<td>Management in Higher Education</td>
<td>891825</td>
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<tr>
<td>Evidence Based Practice</td>
<td>891826</td>
<td>New</td>
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<td>EXIT OPPORTUNITY AFTER 18 months or 3 semesters</td>
<td>Candidates can exit at this level with a post graduate diploma in Nursing Education in accordance with R118.</td>
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<td></td>
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<tr>
<td>Mini thesis</td>
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<td>Professional Development</td>
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<td></td>
<td>120</td>
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</table>

1.15. Moderation options.

RPL
Access to the programme can also be provided in terms of the university’s RPL policy and its admission criteria as stipulated by Senate. In the RPL process students have to undergo a Portfolio Development Course to support the student’s admission. The PDC will focus on written submission explaining the reasons for the candidate’s interest in Nursing Education as an adjunct to their existing professional competencies and indicating the nature of a possible research project.

Articulation
This qualification will articulate horizontally with our current M Cur in Midwifery as well as Masters programmes in Public Health upon Completion, a student may proceed with PhD studies.

Moderation
The programme will be moderated via a system of external peer review and evaluation. At least one internal supervisor/ assessor and at least two external assessors will be
appointed. The minimum qualifications for assessor will be a PhD plus 3-5 years research experience in Nursing Education

1.17  **Review date of programme**
January 2008

1.18. **International comparability of qualification.**

This qualification is recognized by the nursing councils and higher education institutions in countries such as the UK, Canada, USA, the Middle East, SADC and the rest of Africa. For instance individuals who have successfully completed this qualification have had no problem in gaining entry to higher degrees in education in these countries as well as securing employment as teachers.

1.19. Please specify general and promotions rules of the programme to be inserted in the General or Faculty Calendar

General University rules shall apply.

Each module includes student assessment
A minimum of 50% is required to pass each module
The aggregate attained for the coursework component must be 50% or more

**Mini- thesis**
A mark of 50% or more must be attained for the mini-thesis which shall be 7,500-12,500 words illustrating familiarity with the basic research process, ability of the candidate to work independently using correct language and satisfactory technical workmanship.

No thesis which has been previously submitted for a degree at another university shall be accepted, but material taken from publications of the candidate may be incorporated therein.

2.9.  **Postgraduate supervision procedures and support.**

Orientation programme will be conducted to socialize the student to post graduate studies. Each student will be allocated to a supervisor for research supervision and support. Seminars will be conducted to allow students to interact with each other and with their teachers. Proposal presentations will be conducted in the Department and all students will be allowed to sit in and engage during the discussion.
Section 3:
3.1 Date of approval by the Council of the University

3.2 Contact details of person making the submission:
Professor T. Khanyile
Signature……………………………….

CHAPTER 4
FIRST YEAR MODULES

Year one modules

<table>
<thead>
<tr>
<th>Module name</th>
<th>Convener</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Theoretical Foundations of Nursing Education</td>
<td>Prof Khanyile</td>
</tr>
<tr>
<td>2 Curriculum Development</td>
<td>Prof. Khanyile</td>
</tr>
<tr>
<td>3 Issues in Health Professional Education</td>
<td>Prof. Khanyile</td>
</tr>
<tr>
<td>4 Advanced Qualitative Research Methods</td>
<td>Prof. Khanyile/ Dr Mbombo/Ms Fakude</td>
</tr>
<tr>
<td>5 Advanced Quantitative Research Methods</td>
<td>Prof. Nikodem/Prof Kortenbout</td>
</tr>
<tr>
<td>6 Teaching and Learning Methods</td>
<td>Ms L. Fakude</td>
</tr>
<tr>
<td>7 Assessment of learning in Higher Education</td>
<td>Prof. Khanyile /Ms Fakude</td>
</tr>
<tr>
<td>Module Name</td>
<td>Theoretical Foundations of Nursing Education</td>
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</tr>
<tr>
<td>Level Outcomes</td>
<td>Associated Assessment Criteria</td>
</tr>
<tr>
<td>---------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>1. Create active and learner-centered environments in the teaching of nursing and midwifery both in clinical and classroom settings based on comprehensive and systematic understanding of adult development, learning and motivation theories.</td>
<td>1.1 Critical analysis of adult development, learning (cognitive, behavioral, and social, transformative and experiential) and motivation theories show comprehensive understanding of a range of aspects including, conceptualizations of knowledge, teaching, learning, basic assumptions, and andragogical implications for nursing and midwifery education and is valid in accordance to current discourses about teaching/learning in professional education.</td>
</tr>
<tr>
<td>2. Evaluate various theories and models of nursing and health based on a critical analysis of different own meaning perspectives about health and disease and how these impact on decision making in the practice of nursing and midwifery.</td>
<td>1.2 Teaching practice in nursing and midwifery is based on understanding of adult development, learning and motivation theories as evidenced by the creation and maintenance of an active learning environment and thus allowing learners space to question their meaning and perspectives about health and illness.</td>
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</tbody>
</table>
| 2. Critical analysis and synthesis of the philosophical basis of nursing is based on recognized contemporary nursing theories, models and relevant to current socio-political context of nursing practice. | 2.2 Analysis of nursing and midwifery decisions is supported by a particular model or theory of nursing and takes into consideration the legal and ethical frameworks of nursing practice as well as the socio-political, economic and cultural context in which such decision have to}
be made.

2.3 Critical analysis of educational philosophy with regard to its implications for nursing and midwifery education is in accordance with rules of consensual validation.

| Main Content | - current theoretical models  
|              | - philosophical underpinnings of teaching and learning  
|              | - theories of adult learning  
|              | - contemporary approaches to teaching and learning (PBL/ CBA/CBE ) |

| Pre-requisites | None |
| Co-requisites  | None |
| Prohibited Combinations | None |

<table>
<thead>
<tr>
<th>Breakdown of Learning Time</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact with lecturer / tutor:</td>
<td>36</td>
</tr>
<tr>
<td>Assignments &amp; tasks:</td>
<td>56</td>
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<tr>
<td>Tests &amp; Examinations:</td>
<td>12</td>
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<td>Practicals:</td>
<td>40</td>
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<tr>
<td>Self study</td>
<td>56</td>
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<td>Other: Please specify</td>
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<td>Summative assessment not less than 60%</td>
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<td>Continuous assessment not more than 40%</td>
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<td>Level</td>
<td>8</td>
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</tbody>
</table>

**Specific Learning Outcome**
1. Critically evaluate global and national issues and policies, including managing diversity, Recognition of Prior Learning, globalization and the nursing workforce etc, with specific reference to nursing and midwifery education.

**Associated Assessment Criteria**
1.1 Health and education policies are critically analyzed in accordance to their implications for curriculum relevance in nursing and midwifery.
1.2 Nursing and/or midwifery curriculum design is led and initiated in collaboration with relevant stakeholders taking into consideration relevant health and education policies as well as rules and regulations of the SANC for a particular nursing program.
1.3 Critical analysis, synthesis and independent evaluation of global and national issues impacting on nursing and midwifery education is supported by an extensive and integrated review of literature and current research on such issues (e.g. managing diversity in the learning environment, migration and the nursing workforce, RPL etc).

**Main Content**
- National policies / influencing affecting Nursing Education (ETQA; SAQA; SANC)
- Globalization in the education and training of nurses
<table>
<thead>
<tr>
<th>Pre-requisites</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-requisites</td>
<td>None</td>
</tr>
<tr>
<td>Prohibited Combinations</td>
<td>None</td>
</tr>
</tbody>
</table>

**Breakdown of Learning Time**

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</table>

**Methods of Student Assessment**

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<td>Level</td>
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</table>

**Specific learning outcome**

1. Design and implement classroom and clinical learning sessions using appropriate teaching strategies based on expected learning outcomes taking into consideration the principles of adult learning

**Associated Assessment Criteria**

1.1 A coherent and critical understanding of the importance of congruency between expected learning outcomes and the teaching/learning process supports evaluation of various teaching strategies with regard to their effectiveness in facilitating deep and self-directed learning in clinical and classroom setting.

1.2 Teaching plans and implementation thereof, places emphasis on collaborative learning, learner needs and differences, development of self-directed learning, inquiring minds, as well as the complexity and unpredictability of clinical learning environments

2. Plan and implement the assessment of classroom and clinical learning outcomes based on a comprehensive understanding of principles and strategies of assessment of learning outcomes with specific reference to

2.1 Identification, selection and combinations of assessment approaches and strategies is based on a coherent and logical understanding of the requirements of applied competence and integrated assessment and meets the criteria for credible, trustworthy, feasible, and valid assessment
professional education.

2.2 Assessment of clinical learning in particular is largely undertaken in a real-world practice environment where appropriate, and/or simulated clinical learning environments.

<table>
<thead>
<tr>
<th>Main Content</th>
<th>- Media design, selection and presentation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Teaching and learning environments</td>
</tr>
<tr>
<td></td>
<td>(theoretical and clinical)</td>
</tr>
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<td></td>
<td>- Various teaching methodologies</td>
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<td>- Assessment of learning both theoretical</td>
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<tr>
<td></td>
<td>and clinical</td>
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<td>- Electronic teaching and learning</td>
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<table>
<thead>
<tr>
<th>Co-requisites</th>
<th>None</th>
</tr>
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<tr>
<td>Prohibited Combinations</td>
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<td>12</td>
</tr>
<tr>
<td><strong>Practicals:</strong></td>
<td>40</td>
</tr>
<tr>
<td>10x 1 hr teaching sessions plus 10 x 1hr clinical lab. Demonstrations and clinical assessments of students plus media development</td>
<td></td>
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<tr>
<td><strong>Self study</strong></td>
<td>56</td>
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<td><strong>Other: Please specify</strong></td>
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<td>Associated Assessment Criteria</td>
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<tr>
<td>1. Develop a coherent curriculum for a particular nursing and/or midwifery program taking into account the principles of the NQF and the stipulations of the ETQA for nursing and midwifery education (SANC) in collaboration with peers.</td>
<td>1.1 Critical analysis of development theory and models curriculum includes philosophical underpinnings, and implications thereof for the curriculum development process in nursing and midwifery education. 1.2 The designed curriculum is comprehensive and includes all the steps of curriculum development as verifiable with any standard curriculum development text in nursing and midwifery education and is a collaborative piece of work involving peers. 1.3 The designed curriculum is appropriate in terms of SANC guidelines and regulations for a particular program of nursing and/or midwifery, SAQA requirements and current national health policies on human resource development for health.</td>
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<tr>
<td>2. Lead curriculum change and/or transformation in the education of nurses and midwives based on critical analysis of educational philosophy with regard to its implications for nursing and midwifery education.</td>
<td>2.1 Critical analysis of educational philosophy with regard to its implications for nursing and midwifery education is in accordance with rules of consensual validation. 2.2 Inferences on the implications of educational theory on teaching nursing and midwifery are based on comprehensive analysis of the current discourses on the nature and purpose of professional education.</td>
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| Main Content | - various conceptualizations of curriculum  
- curriculum development process |
- different models of curriculum development
- curriculum evaluation models
- design curriculum for a specific programme

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### Specific Learning Outcomes

1. Determine purpose of assessment and articulate competences to be assessed.

2. Determine assessment strategy and plan and implement assessment activities.

### Associated Assessment Criteria

1. The purpose of the assessment is adequately and completely described and clarified.

2. The competences to be assessed are clearly identified and adequately justifiable and appropriate.

3. Assessment criteria are appropriate to the identified competence and in accordance with assessment policy.

2.1 Assessment strategies are accurately determined taking into consideration the variety of locations and or learning environments and purposes.

2.2 Assessment activities take into account the special needs of the learner without compromising validity of assessment.

2.3 Assessment activities are in line with principles of good assessment design and take into account previous moderation and assessment reports.

2.4 Provision for moderation is made in
| 3. Evaluate and judge evidence and provide feedback to the candidate. | accordance with relevant institutional assessment policies and ETQA requirements. |
| 3.1 Different kinds of evidence are considered, using appropriate technology. |
| 3.2 Evidence is fairly evaluated for authenticity, validity and sufficiency and explicitly justified in term of assessment protocols. |
| 3.3 Assessment decision are explained and justified to individuals and groups of candidates. |
| 3.4 Feedback is given in a sensitive manner clearly indicating areas of further or remedial learning. |
| 4. Process, record and report results of assessment | 4.1 Results are recorded accurately, using the required format. |
| 4.2 Reports are made with integrity and are submitted in a timely manner to relevant authorities. |
| 5. Reflect on and evaluate the assessment process and competences against which assessment was made. | 5.1 Significant issues arising from assessment practice are observed and selected with acumen, taking into account the moderator's reports. |
| 5.2 Significant issues arising out of an assessment process are carefully analyzed and decisions made on viable improvement. |
### Main content

Knowledge and understanding of:
- Principles of assessment and assessment design
- Factors affecting assessment design and implementation
- Quality assurance requirements
- National/ institutional policies and guidelines on assessment
- Procedures for the evaluation of assessment
- Integrated assessment systems
- Ethics appropriate to assessment in Nursing Education

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### Chapter Four

#### Second Year Modules

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<tr>
<td>1. Applied Epidemiology</td>
<td>Prof. D. Jackson (SOPH)</td>
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<tr>
<td>2. Management in Higher Education</td>
<td>Prof. T. Khanyile</td>
</tr>
<tr>
<td>3. Evidence Based Practice</td>
<td>Prof. Nikodem</td>
</tr>
<tr>
<td>4. Mini thesis</td>
<td>Dr. Mbombo; Profs Kortenbout, Nikodem &amp; Khanyile</td>
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<td>5. Professional Development</td>
<td>Prof. Kortenbout</td>
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### Module Name: Professional Development

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**Specific Learning Outcomes**

1. Demonstrate a sound ability to identify, organize and format into formal learning outcomes learning acquired formally or experientially.

**Associated Assessment Criteria**

1.1 Identification of experientially acquired learning is accurate and correct in accordance with given checklist and relevant tools.

1.2 Statements of experientially acquired learning are organized and formatted correctly in accordance with given formats, and checklists.

2. Demonstrate an ability for self reflection to

2.1 All the steps of the process of reflection are correctly applied in the
identify ‘gaps’ in theoretical knowledge acquisition based on the learning outcomes of the specific programme.

development of the individual’s learning plan.

2.2 The learning plan developed reflects all the characteristic of learning outcomes that is: realistic; feasible; logical; unambiguous and measurable

3. Demonstrate an understanding of the standards that will be used to assess the portfolio.

3.1 Preparation of evidence for the assessment of the portfolio is based on a sound understanding of all the assessment methods that will be used.

3.2 Preparation of the learning plan to close the gaps in theoretical knowledge demonstrates a sound understanding of the assessment methods used in RPL.

4. Demonstrate a sound understanding of all the steps involved in the process of portfolio development.

4.1 The process of developing the portfolio is based on all the steps of developing a portfolio.

4.2 The portfolio as a product for evaluation contains all the necessary documentation in accordance with a given checklist.

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<th>Main content</th>
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<tbody>
<tr>
<td>- Development of own learning contract</td>
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<tr>
<td>- Development of a teaching portfolio</td>
</tr>
<tr>
<td>- Evidence of facilitation of learning to groups of students in a Case Based Curriculum session</td>
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<td>- Evidence of clinical accompaniment of groups of students</td>
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<td>- Evidence of students’ assessment</td>
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<td><strong>Specific Learning Outcomes</strong></td>
<td><strong>Associated Assessment Criteria</strong></td>
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<tr>
<td>1. Lead evidence-based practice in nursing and midwifery education</td>
<td>1.1 Teaching scholarship evident in the identified areas of research as well as application of best-practice evidence in nursing and midwifery education. 11.2 Critiques of research report meet the standards of the specific community in nursing and midwifery education. 11.3 Results of research undertaken are disseminated through publication, conference presentation, stakeholder seminars etc.</td>
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<tr>
<td>12. Demonstrate comprehensive theoretical and clinical competence in the field in which teaching will take place.</td>
<td>12. As per relevant exit level outcomes and associated assessment criteria for the chosen field of teaching at NQF Level 8 (postgraduate certificates and diplomas in nursing as well as masters’ diplomas in nursing and midwifery).</td>
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<td>- theory and rationale for evidence based practice (EBP)</td>
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<td>- Barriers to advancement of EBP</td>
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<td>- Recommendations for teaching and advancing EBP</td>
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### Specific Learning Outcome

1. Demonstrate a comprehensive and critical understanding of theories and approaches of educational management, including quality management systems, with specific reference to managing a nursing education institution (nursing colleges, university and technikon nursing departments).

### Associated Assessment Criteria

1.1 Approaches and theories of educational management are interrogated and critically analyzed in terms of their applicability and relevance to managing health professional education institutions within the context of the current situation in education in South Africa with regard to governance, programs, financing and provision.

1.2 Analysis of the current situation in health professional education evidences a comprehensive and reflective understanding of the implications of the dual systems of governance and provision of nursing education for coherent programming and financing of nursing education.

1.3 Evaluation of a health science education institution's quality management systems shows a broad understanding of principles and aims of institutional quality management systems in HE in South Africa and globally with specific reference to the requirements of the relevant ETQAs (HEQC and SAN C) for quality improvement and assurance.

### Main Content

- educational management theories
- organizational structures of different HLIs
- Quality Assurance in Higher Learning
- Transformative management in Higher Education
- Funding in Higher Education

### Pre-requisites

None

### Co-requisites

None
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End of Appendices to Final Report