

UNIVERSITY OF HEALTH AND ALLIED SCIENCES
School of Medicine



STRATEGIC PLAN
JUNE 2018

1. Background to the Strategic Plan of the School of Medicine (SOM), University of Health and Allied Sciences

Given that University of Health and Allied Sciences was established as a publicly funded university by an act of parliament (Act 828) in 2011 for the education and training of world-class health professionals, its 2017–2027 Strategic Plan makes reference to the two documents listed below.

i. The United Nations (UN) 2030 Agenda for Sustainable Development

This document refers to 17 Sustainable Development Goals (SDGs), the third of which focuses on health and is to “ensure healthy lives and promote well-being at all ages.”

ii. The Health Component of Ghana’s 40-year Development Plan (currently in draft format)

In aligning its Strategic Plan with that of UHAS, SOM as a unit of UHAS, has drawn from the two documents referred to above, in addition to relevant information from the Development Plans for the Ministries of Education and Health.

2. Format of the School of Medicine Strategic Plan

The Strategic Plan for SOM contains the under-listed elements:

- Core mandate of the School
- Vision, Mission and Values/Ethos
- Structure: Departments/Units
- Situational Analysis
- Strategic Plan Content

The Strategic Plan content includes goals, strategic objectives/action plan priorities, KPIs/timelines. The implementation version of the document contains details on key tasks/responsibilities and budgeted resources.

3. Core Mandate of the School of Medicine

The core mandate of SOM is to train qualified students into competent medical doctors and physician assistants who are conversant with the health needs of the communities they will serve, and who have the knowledge, skills and attitudes that will make them sufficiently competent to provide the health services required of them so as to achieve optimal health and well-being for the people of Ghana and beyond.

The Dean of SOM, UHAS is responsible for the development and implementation of the Strategic Plan for the School, and for ensuring that its objectives and priorities are aligned with those of the University.

In crafting the Strategic Plan, SOM adopted a collaborative approach with internal and external stakeholders, who were engaged during the developmental phase of the plan. The same collaborative approach will be used to execute the plan.

4. SOM Vision, Mission and Values/Ethos

Vision

The School of Medicine, UHAS is dedicated to providing innovative leadership in modern medical education, research, health improvement and patient-focused care, and to the training of professionals serving in communities with competence and compassion.

The School's mandate shall be carried out within a culture of excellence, innovation, integrity, service and community focus, which values shall be considered imperative.

Mission

SOM shall produce competent and compassionate medical professionals with effective leadership skills and a focus on community service and research.

Values/Ethos

The achievement of SOM's strategic objectives will be within the context of UHAS and the school's own values/ethos which rest on the pillars of innovation; excellence; integrity; punctuality; community engagement (service and care).

5. Structure: Departments/Units

- Department of Basic Medical Sciences (Physiology, Anatomy & Medical Biochemistry)
- Department of Pharmacology
- Department of Pathology (Chemical Pathology, Haematology & Anatomical Pathology)
- Department of Microbiology and Immunology
- Department of Radiology
- Department of Obstetrics and Gynaecology
- Department of Paediatrics and Child Health
- Department of Internal Medicine
- Department of Surgery
- Department of Eyes, Ear, Nose and Throat
- Department of Anaesthesia and Critical Care
- Department of Community Medicine
- Department of Psychological Medicine and Mental Health

6. Situational Analysis

In developing the Strategic Plan, a situational analysis was conducted using a PESTLE assessment of the external political, economic, socio-cultural, technological, legal and environmental circumstances of medical schools in Ghana (including SOM, UHAS) and beyond, in order to position the Strategic Plan within the relevant external context.

A SWOT analysis was also carried out with the active involvement of key stakeholders including SOM faculty members and students to assess the internal strengths, weaknesses, opportunities and threats within the operating environment of SOM. This was done relative to its direct competitors, specifically, and the educational sector in general.

The output of the situational analysis informed the development of the Strategic Plan which was designed to leverage SOM's strengths, address its weaknesses, take advantage of its opportunities and mitigate the threats confronting the School.

The output, which is presented in appendices I and II of this document, formed a key component of the basis for the development of the Goals, Strategic Objectives and Action Plan Priorities detailed in Section 7 below.

7. Goals, Strategic Objectives/Action Plan Priorities and KPIs/ Timelines

GOAL 1: Employment and Development of Competent Human Capital

Attract, recruit and develop the best human capital possible within a performance-oriented culture.

SOM recognises that competent, performance-oriented human capital is vital for the achievement of its strategic objectives. It will therefore actively plan for the recruitment and development of such resources, while professionally managing their performance once they are recruited. This is in line with our belief that the employment and development of competent Human Resources within a performance-driven environment is imperative for the School's success.

In addition to executing the action plan priorities detailed below, the School intends to carry out the following short-to-long-term strategies:

- **Short-term.** Engage retired and non-retired Professors, faculty and staff from Ghana's Teaching Hospitals on contract or part-time basis, and plan innovative ways of attracting faculty and staff including courting colleagues and volunteers from within and outside Ghana, and mentoring potential successors etc.
- **Medium-term.** Seek accreditation from the Ghana College of Physicians and Surgeons to train specialists at Ho Teaching Hospital. These specialists' interest in teaching will be actively facilitated by the School.
- **Long-term.** Develop a career pathway for the top 10 students in each batch to go into residency programmes and subsequently join faculty. This is to enable the School become self-reliant regarding staffing of its departments.

STRATEGIC OBJECTIVE 1

To adopt contemporary, transparent and consistent methods for employing competent faculty and staff and developing them into performance-oriented human capital within a performance-driven culture.

ACTION PLAN PRIORITIES	KPIs
<ul style="list-style-type: none"> i. Develop a comprehensive plan to attract national and international faculty and staff. ii. Adopt Equal Employment Opportunity (EEO)-based recruitment processes and performance management systems that recognise very good to exceptional performance. iii. Create a collegial, professional and performance-oriented work culture by making use of relevant policies and internal stakeholder management processes. iv. Build the capacity of faculty to teach to international standards for a medical school. 	<ul style="list-style-type: none"> i. Plan must be started within 3 months of coming into force of the strategic plan and must be completed and enforcement commenced within an additional 3 months. ii. Recruitment and performance management policies and procedures to be documented and implemented within 6 months. iii. 100% adherence to UHAS Statutes and SOM Career Development Programme guided by ethical and professional conduct by SOM's faculty, staff and students. iv. Learning and development plan for medical education for faculty developed within 3-6 months. v. ICT infrastructure upgraded and faculty and staff given access to electronic and print resources, etc., within 12-18 months.

GOAL 2: Attract and Retain a Diverse and Inclusive Mix of Human Capital

Attract and retain a diversity of students, faculty and staff and socialise them into all SOM activities, taking cognisance of their peculiar beliefs, cultures and individual or group circumstances.

As institutions become more and more aware of the benefits of a diverse and inclusive mix of people in learning and work environments, diversity and inclusion is becoming an increasingly important consideration in modern management of persons within the same environment.

Diversity of thought processes, viewpoints, experiences, cultures, beliefs and other considerations are thought to drive creativity, innovation, productivity and the achievement of mutually beneficial goals.

In deciding its strategic objectives and priorities therefore, SOM carefully considered the need to not only plan for diversity and inclusion of identifiable groups as part of its student enrolment and faculty/staffing process, but also to develop and retain them. This is in order to benefit from the multiplicity of ideas and perspectives diversity and inclusion brings.

It is against this background that SOM seeks to carry out the Action Plan Priorities stated under Strategic Objective 2 below.

STRATEGIC OBJECTIVE 2

To make SOM known as a good place to study and work by building a respectful, supportive and rewarding study and work environment for distinct groups of persons, and a productive yet flexible environment for non-study and non-work related matters.

ACTION PLAN PRIORITIES	KPIs
<ul style="list-style-type: none"> i. Profile the demographics of SOM students, faculty and staff. ii. Plan to enrol students and hire qualified faculty and staff from traditionally under-represented groups in SOM iii. Actively create an inclusive study and work environment, which recognises and respects religious, cultural and other differences between identifiable groups of people, and gives them a sense of belonging. iv. Identify and address the legitimate needs of distinct groups for benefits such as accommodation, transportation, commuting, childcare and eldercare, etc. 	<ul style="list-style-type: none"> i. Create a live database with the demographic profiles of students, faculty and staff with conditions that may require support. ii. Set diversity and inclusion targets to be achieved within 5-6 years. Include an M&E and reporting system for annual measurement and reportage on profile changes. iii. Develop, communicate and educate students, faculty and staff on a Diversity and Inclusion (D&I) Plan which is in accordance with UHAS D&I plan <ul style="list-style-type: none"> - Allows identifiable groups to connect. - Communicates SOM's commitment to D&I and implements initiatives to demonstrate this. (e.g., offering scholarships and internships to minority groups etc). - Recognises religious/cultural practices, holidays, attire, faculty, staff and students with special needs etc. iv. Design and set up social clubs (e.g., for youth/middle aged/elderly, etc.), welfare schemes and motivational employment conditions, e.g., accommodation/infrastructure, sports/recreational facilities, nursery/kindergarten, competitive remuneration etc.

GOAL 3: Research-Driven Teaching and Learning

Conduct high quality medical and bio-medical research that directly impacts the learning and practice of Medicine.

SOM understands and acknowledges the importance of research in driving and continuously improving teaching and learning to impact the socio-economic fabric of its communities and the nation as a whole.

Against this background, the School seeks to ensure that the research projects, which drive its teaching and learning processes, are carried out with the active involvement of the communities and groups we serve, and that our projects are relevant to their needs and requirements.

The research-driven teaching and learning approach will be adopted primarily to enable the following:

- Good understanding of each subject matter, its principles, what is workable in that field of knowledge and why
- An informed perspective of the short and long term implications of an action or inaction regarding a specific subject matter
- Provision of a justification and rationale for problem solving and decision-making in specified fields of medical and biomedical science.

STRATEGIC OBJECTIVE 3

To become known and recognised for excellence and innovation in medical and bio-medical research which advances the education of medical professionals and positively impacts the health and well-being of individuals, groups and communities.

ACTION PLAN PRIORITIES	KPIs
<ul style="list-style-type: none"> i. Actively participate in the development of UHAS' policies and procedures for regulating the conduct of research. ii. Build the capacity of students, faculty/staff to conduct breakthrough research and secure research funding from local and international sources. iii. Collaborate with individuals, groups and communities to ensure their active involvement in research in which outcomes meet their needs and drive the teaching and learning effort. iv. Collaborate with national and global players in the medical/bio-medical science fields to discover innovative solutions based on research into emerging challenges in the health sector in Ghana and beyond; and relevant to the health and wellness needs of specific communities and groups. 	<ul style="list-style-type: none"> i. Performance reviews show that all students, faculty and staff are informed about, and can apply UHAS research policies and procedures in the conduct of their research work. ii. Performance reviews and research outcomes should show above-average knowledge and application of relevant research methods. iii. & iv. Trends in health and well-being challenges established through research with % potential solutions proffered.

GOAL 4: Excellence in Standards of Medical & Bio-Medical Science Teaching/ Education and Learning

Employ exemplary standards of teaching and education and provide students, faculty and staff with a highly conducive and enabling learning and working environment with state-of-the-art ICT facilities.

SOM seeks not only to produce graduates/post graduates who have been taught or guided to study specific subjects in medical and biomedical sciences, but who will be able to transfer such knowledge to other students.

Students will not just be taught, but will be educated within specific physical, social and cultural settings, which will enable consistently high and effective standards of teaching, education and learning in an enabling infrastructural/physical environment.

Learning outcomes will reflect collaboration between students, faculty and staff.

STRATEGIC OBJECTIVE 4

To position SOM as one of the highest quality and leading providers of Medical and Bio-Medical Science education in Ghana.

ACTION PLAN PRIORITIES	KPIs
<ul style="list-style-type: none"> i. Pursue the highest international standards of Medical and Bio-Medical Science teaching/ education; leadership development and learning. ii. Design relevant and useful assessment tools capable of testing academic standards for faculty, staff and students, and ensuring set standards are maintained at the highest level possible. iii. Adopt novel and transformative approaches to course content and design so as to transfer theoretical information, practical skills, methods and techniques to students. iv. Develop curricular based on the health and wellness needs of targeted groups and communities established through research, innovative science and technology, and a balance between the academic knowledge and practical skills required to manage health and wellness. Provide contemporary, well-maintained and clean facilities for teaching, education and learning, including modern laboratories, equipment, lecture rooms and state-of-the-art ICT services. 	<ul style="list-style-type: none"> i. Standards for Medical & Bio-Medical teaching/ education, leadership development and learning documented within 6 months. ii. Assessment tools for measuring quality standards of Medical & Bio-Medical teaching/education, leadership development and learning by students developed within 6 months. <ul style="list-style-type: none"> - 100% of faculty, staff and students made aware of these tools, how they will be used and what acceptable standards of performance are annually. iii. 100% of SOM curricular/course content and designs reviewed in line with national and international norms. iv. Curriculum/course designs regularly reviewed for relevance in consultation with stakeholders including the NCTE, Medical Council, post grads and students, healthcare industry, etc. Required teaching and learning facilities and ICT support systems provided by end of 2020.

GOAL 5: Institutionalise best practice-in-Class Governance and Control Processes & Systems

To employ best-in-class governance and internal control processes and systems to enable delivery of all SOM's KPIs.

Due to its over-riding importance in ensuring the integrity of SOM and the achievement of its strategic objectives, the Strategy Planning Process carefully considered the need for frameworks to guide professional and ethical operating standards in carrying out all activities and tasks required of management, faculty, staff and students of SOM.

Considering the seriousness attached to the requirement of operating within high professional and ethical standards, SOM will institute, monitor and manage processes to recognise and reward acceptable levels of performance and conduct, while unacceptable conduct will be sanctioned.

Appropriate policies and procedures will be documented and institutionalised for the purpose of monitoring and managing these processes.

STRATEGIC OBJECTIVE 5

To institutionalise governance and control frameworks which enable excellent professional, operational and ethical standards driven by an active and rigorous consequence management system.

ACTION PLAN PRIORITIES	KPIs
<ul style="list-style-type: none"> i. Adopt professional and strong financial management structures and systems devoid of conflicts of interest and inclusive of a rigorous M & E component which ensures timely delivery of financial KPIs. ii. Develop and institutionalise clear policies and procedures to guide professional, transparent and ethical practices in the delivery of the duties of academic, administrative staff and students of SOM. Regular audits on policy application will inform sanctions for breaches. iii. Ensure that the allocation of financial and other resources support the execution of SOM's strategic priorities as aligned with those of UHAS iv. Monitor and regularly report on general governance and control breaches including disciplinary actions taken against offenders and steps taken to prevent similar occurrences. 	<ul style="list-style-type: none"> i. Management structures and systems for Finance/Accounting and HR/Admin management reviewed for good governance and control and report presented (2-3 months). ii. Clear policies and procedures aligned with Public Sector and UHAS Finance and Accounting Standards and HR/ Admin Policies and Procedures documented to guide academic, administrative staff and students to perform their duties and conduct themselves. (3-6 months). iii. Time table prepared for Finance/Accounting and HR/Admin audits in accordance with Action Plan Priority (ii) iv. Financial and other resource allocation plans prepared, operationalised and reported on quarterly. (3 – 6 months from commencement) Audits conducted and reports prepared following audits in line with the audit timetable referred to in (iii) above. (3-6 months)

GOAL 6: Stakeholder Management

Actively plan for the management of internal and external stakeholders to enable successful execution of SOM's strategic objectives.

In developing this Strategic Plan, SOM directly engaged stakeholders, including students and faculty thought to be key to the successful implementation of the plan. Other stakeholders to be engaged as part of the plan and its implementation include:

1. Ghana College of Physicians and Surgeons (GCPS)
2. Ghana Education Service (GES); National Council for Tertiary Education (NCTE); Ghana Health Service (GHS), Medical and Dental Council (MDC)
3. Chiefs, opinion leaders and people within the UHAS Community
4. Other medical schools local and international
5. Schools within the Community
6. Local and international corporate bodies such as banks, vehicle dealerships, estate developers, etc.
7. Financiers and philanthropists
8. District and Municipal Assemblies, Regional Ministers/MPs

STRATEGIC OBJECTIVE 6

To identify, foster and maintain working relationships with key internal and external stakeholders who have the capacity to influence or partner SOM for achievement of mutually beneficial goals and objectives.

ACTION PLAN PRIORITIES	KPIs
<ul style="list-style-type: none"> i. Clearly identify and design a relationship/partnership building strategy for stakeholders who are needed by SOM to develop mutually beneficial relationships in support of its strategic agenda. ii. Partner with district assemblies, other regional bodies, estate developers, international corporate bodies such as banks, financiers and philanthropists, etc., for the development of infrastructure and provision of equipment and other resources. iii. Develop a symbiotic relationship with Ho Teaching Hospital and other District Hospitals. iv. Establish external links/partnerships with other local and international medical schools for the development of education and learning initiatives for faculty, staff and students. v. Create an environment which is responsive to the welfare and social needs of students, faculty and staff and affords them a motivating and enriching learning and teaching experience. 	<ul style="list-style-type: none"> i. List of key external and internal stakeholders prepared with information on potential areas of support/collaboration. ii. Specific plans for the engagement of district assemblies, estate developers and other stakeholders named in items ii. and iii. of the Action Plan Priorities, regarding the kind of support they can provide and the benefits to be derived documented and being implemented by 2020 iii. Written agreements reached with Ho Teaching Hospital and other District Hospitals on ways by which mutually beneficial objectives may be achieved. (3-6 months) iv. List of potential partner medical schools, specific MOUs developed and signed with each of them with the ff. expectations: <ul style="list-style-type: none"> - 150% increase in participation in local and international faculty exchanges and conferences. - 100% increase in providing medical training for faculty. v. Quarterly informal/social interactions between students and lecturers/staff designed and implemented. <ul style="list-style-type: none"> - High ratings (>70%) of Students' Satisfaction Indices measured and reported on quarterly. - Contemporary, well-maintained and clean facilities for teaching and learning including laboratories, equipment, lecture rooms and state-of-the- art ICT facilities available by the end of 2020.

APPENDIX I: PESTLE ANALYSIS

FACTORS	CONDITIONS	DESCRIPTION	LIKELIHOOD OF OCCURANCE			POTENTIAL IMPACT		
			Low	Med	High	Low	Med	High
P OLITICAL	Changes in successive Government policies and priorities.	Successive Governments pursue different policy directions and priorities as a result of which funding to UHAS and by extension, SOM may be negatively impacted.		X		X		
	Governmental pressure to increase student intake	Government could put political pressure on SOM/ UHAS to increase student intake beyond acceptable standards and the limits of available infrastructure			X			X
E CONOMICAL	Insufficient Government subvention and limited alternative sources of funding.	Inadequate financial/other resources could derail execution of the Strategic Plan.			X			X
	Projections/outlook for GHS in terms of exchange rates, interest rates, GDP per capita, inflationary trends, employment levels and per capita income.	If positive, would impact funding of universities and access to higher education.		X		X		
	Implementation of Government's policies.	If successful, would impact levels of economic activity, per capita income, availability of disposable income, development of infrastructure, i.e. access roads, accommodation, lecture halls, equipment and other logistics		X			X	
S OCIO-CULTURAL	Diversity and inclusion.	Issues with diversity and inclusion (ethnicity/religion/student category etc.) may fester into recruitment and retention risks if not addressed timeously.	X			X		
	Socialisation/ integration into the socio-cultural fabric of UHAS/SOM/Ho/ Hohoe.	Absence of an on-boarding/integration policy for new recruits could present human capital retention risks.			X			X

	External stakeholders management	Failure to actively engage and collaborate with critical external policies/institutions e.g. Ho Teaching hospital, district hospitals/clinics, Government, chiefs and people			X		X
T E C H N O L O G Y	Quality of ICT Services	Quality ICT Services provided by telecoms deteriorates further.			X		X
	ICT infrastructure	Inadequate infrastructure would make it impossible to derive the competitive gains such as tele-medicine and on-line medical resources such as PubMed, EBSCO, HINARI etc.			X		X
L E G A L	Education quality standards/accreditation	Charges to more stringent requirements for quality standards/accreditation by the Medical / Dental Councils, NTCE, NAB etc.		X		X	
E N V I R O N M E N T A L	Inadequate environmental infrastructure.	Hazardous environmental pollution due to poor quality/incomplete drainage systems.			X		X
	Sources of water supply.	Unsafe/inadequate water supply sources could lead to water-borne diseases.			X		X
	Poor lighting systems	Unsafe learning and working environment likely to harbour reptiles, rodents etc.			X		X

APPENDIX II: SWOT ANALYSIS

S TRENGTHS	<p><u>IDENTITY</u> i. New medical school that is part of a new university committed to a culture of innovation and excellence.</p> <p><u>LOCATION</u> ii. Located in the regional capital, so visible and easy to access. iii. Located on the premises of Ho Teaching Hospital, so ensures access to the hospital's facilities such as equipped laboratories, theatre, x-ray departments, etc.</p> <p><u>LEADERSHIP, ATTITUDE AND CULTURE</u> iv. Experienced and committed dean/heads of dept. and supportive, professional lecturers/academic staff. v. Youthful staff willing and ready to learn new/professional things. vi. Good human capital, e.g., cardiac, thoracic, vascular surgery specialists, etc. vii. Strong research culture. viii. Culture of excellence emerging as standard practice.</p>
W EAKNESSES	<p><u>GOVERNANCE</u> i. Lack of autonomy from the University. ii. Poor planning of trimester system, poor coordination of teaching schedule, SOM lecturers begin teaching late.</p> <p><u>HUMAN RESOURCES AND FINANCIAL INCENTIVES</u> iii. Lack of lecturers especially clinicians in SOM specialties. iv. Poor integration of new lecturers. v. Low salaries compared to GHS staff, so difficult to attract clinicians from GHS. Infrastructure vi. Limited number of lecture rooms, laboratory and library facilities. vii. Limited office and residential accommodation for the school and lecturers. viii. Hospital lacks facilities for cardiothoracic surgery, which has an impact on the school's ability to exploit its potential in that area. ix. Lack of logistics for teaching. x. Poor internet connectivity and access to other electronic media. xi. No visible presence on the web and other areas. xii. No proper research capabilities. Identity/young/new university xiii. Still developing work ethics. xiv. Not able to generate revenue because of its newness. xv. Not yet fully accredited (provisional). Curriculum, products and output xvi. Students are not given enough practical experiences, e.g., contact with patients. xvii. Lack of financial and non-financial motivation for research and poor visibility of research. xviii. Sub-specialty is very narrow, lacks components such as neurosurgery, plastic surgery, paediatric surgery.</p> <p><u>COLLABORATION/EXCHANGES/RELATIONSHIPS</u> xix. No proper guidelines on collaboration for exchange between the University and national and international universities and other organisations. xx. School policies are not yet established. xxi. Poor relations between university staff and hospital, lack of respect, lack of guidelines on code of conduct between the two groups.</p> <p><u>SECURITY</u> xxii. No security or protection for lecturers and staff on campus.</p>

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">O PPORTUNITIES</p>	<p><u>HUMAN RESOURCE RECRUITMENT/DEVELOPMENT</u></p> <ul style="list-style-type: none"> i. Rope in doctors from other universities/institutions; build their capacity to teach. ii. Potential to attract young faculty to train to establish a core teaching staff. iii. Training for staff in short and long term programmes (masters, PhD, training workshops). <p>*all the above to be based on an incentive/retention*</p> <p><u>COLLABORATION AND EXCHANGES</u></p> <ul style="list-style-type: none"> iv. High awareness/acceptance by local and national population, evidenced by continued increase in student intake. v. Potential to establish a cardiac and thoracic surgery referral institute in Ghana and West Africa. vi. Partnership opportunities with local, national and international research institutions and organisations to give staff further training and student exchange experiences. vii. Potential to develop the Institute of health research in the university. <p>Products/output</p> <ul style="list-style-type: none"> viii. Potential to train new generation of doctors using novel teaching methods such as PBL. Also to establish a residency programme to support teaching of undergraduates, and use IT as a means to attract students and patients. <p><u>NATIONAL AND COMMUNITY</u></p> <ul style="list-style-type: none"> ix. Political stability in Ghana and government support which can facilitate growth and development. x. Located in an environment with high need for health care, so provides opportunity for practical research and teaching.
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">T HREATS</p>	<p><u>GOVERNMENT PROCESSES - DIVERSITY & INCLUSION ISSUES</u></p> <ul style="list-style-type: none"> i. Insensitivity of SOM management staff to the problems of other staff members puts employee retention at risk. ii. Low numbers of faculty and high dependency on part time lecturers may diminish commitment. iii. Physician Assistantship students perceive that they are disrespected and discriminated against, based on the schools' governance processes and from lecturers. <p><u>Financial and non-financial incentives</u></p> <ul style="list-style-type: none"> iv. Economic challenges of UHAS and insufficient funding for research. v. No defined incentive scheme to attract senior faculty to facilitate growth and development. <p><u>Teaching/learning quality control and resultant product output</u></p> <ul style="list-style-type: none"> vi. Poor quality teaching by SOM lecturers. vii. SOM lecturers manipulate the evaluation process by promising students high marks for positive evaluation. <p><u>External competition</u></p> <ul style="list-style-type: none"> viii. Increasing competition in health sciences education at national and international levels.