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Accreditation Perceptions and Involvement in Saudi Arabian Schools of Nursing

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School of Nursing
in conjunction with the
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by

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the requirements for the degree
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Each person whose signature appears below certifies that this dissertation in his/her opinion is adequate, in scope and quality, as a dissertation for the degree Doctor of Philosophy.

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CONTENT

FIGURES

Figures Page

TABLES

Tables Page

ABBREVIATIONS

KSA	Kingdome of Saudi Arabia
KACST	King Abdulaziz City for Sciences and Technology
NCAAA	National Commission for Academic Accreditation and Assessment
CBAHI	Central Board of Healthcare Institutions
NQF	National Qualifications Framework
PSMCHS	Prince Sultan Military College for Health Sciences
ABPMIQ	Association between Perceptions with Motivation and Level of Involvement Questionnaire
UNESCO	United Nations Educational Scientific and Cultural Organization
IIEP	International Institute of Educational Planning
ACE	American Council of Education
ACS	American College of Surgeons
TJC	The Joint Commission
CHEA	Council for Higher Education Accreditation
ACICS	Accrediting Council for Independent Colleges and Schools
APLU	Association of Public and Land-grant Universities
HEIs	Higher Education Institutions
SPSS	Statistical Package for the Social Sciences
CCNE	Commission on Collegiate Nursing Education
EC2000	Engineering Criteria 2000
ABET	Accreditation Board for Engineering and Technology
EAC	Engineering Accreditation Council

SACS	Southern Association of Colleges and Schools
TPB	Theory of Planned Behavior
TRA	Theory of Reasoned Action
TAM	Technology Acceptance Model
WAP	Wireless Application Protocol
SMEs	Small and Medium Enterprises
IRB	Institutional Review Board
NLN	National League of Nursing

ABSTRACT OF THE DISSERTATION

Accreditation Perceptions and Involvement in Saudi Arabian Schools of Nursing

by

Amal Alaskar

Doctor of Philosophy, Graduate Program in Nursing
Loma Linda University, June 2018
Dr. Ellen D'Errico, Chairperson

"Accreditation is a voluntary program in which trained external peer reviewers evaluate an academic institution and compares it with pre-established performance standards" (Alkhenizan & Shaw, 2012, p. 407). Those standards need to be applied by the faculty and administrators working at institutions of higher education. To understand, evaluate, and improve the quality of higher education, it is crucial to explore and examine how those implementing accreditation perceive the process of accreditation and whether it has any association with their motivation and involvement.

This quantitative descriptive correlational study used a survey method to examine whether there is a relationship between perceptions about the academic accreditation process and its purpose, with motivation and level of involvement among faculty and administrators responsible for introducing accreditation into nursing schools in Saudi Arabia.

Since the Kingdom of Saudi Arabia (KSA) is new to the concept of applying national accreditation standards, the study provided unknown information about perceptions and motivation associated with accreditation in KSA universities and colleges. Further, the data gained from this study suggested a statistically significant difference between the faculty and administrators' perception of process, perception of

purpose, and level of education. There was a statistically significant difference in the level of involvement based on age category, type of institution, years in teaching and level of education. In contrast, there was no statistical significance in the participant's motivation.

The findings of this research study contributes to the lack of data regarding the schools of nursing faculty and administrators' perceptions, motivation and involvement level in the academic accreditation process and what could significantly change educational perception and practices in KSA nursing education.

CHAPTER ONE

INTRODUCTION

Background and Problem Statement

In the Kingdom of Saudi Arabia (KSA), the number of institutions of higher education has significantly increased in recent years from eight in 2003 to 27 governmental and eight private universities and colleges in 2017 (moe.gov.sa, 2017). With this increase has come a desire to carefully evaluate the quality of higher education. Until 2004, national accreditation of Saudi Arabian institutions of higher education was not required. Thus, there was a lack of an established set of national standards for educational institutions and the different programs these schools offered. Individual educational institutions used different approaches and standards to ensure the quality of education they offered. For example, schools of nursing (SN) followed an international quality assurance approach that was guided by standards such as those used in the United Kingdom or other developed countries and modified to culturally fit Saudi Arabian higher education institutions.

With the rapid growth of educational institutions, the need for a national agency for quality assurance was identified. To meet this need, the National Commission for Academic Accreditation and Assessment (NCAAA) was established in 2004. NCAAA is the national educational accreditation agency in Saudi Arabia. It is an independent organization in terms of finance and administration. Since its creation, the NCAAA has developed and disseminated specific guidelines and criteria to start a systematic accreditation process (Al Mohaimeed, Midhet, Barrimah and Saleh, 2012). Following the establishment of guidelines and criteria for a systematic accreditation process by the

NCAAA, the Ministry of Higher Education mandated that all institutions of higher learning, including schools of nursing, be accredited.

Because academic accreditation in Saudi Arabia is a recent requirement, issues regarding perceptions, involvement and motivation to support accreditation by those responsible for implementing the process such as the faculty members and adminsitrators, are unknown. The key to predicting the success of the accreditation process, however, lies in knowing the perceptions and motivation of faculty and administrators tasked with implementing accreditation.

Current literature has little to say on the the professional's perceptions, understanding and willingness to participate in the accreditation process. Hasan (2010) reported that studies on the implementation of external quality assurance activities revealed that members of the academic staff view these processes as burdensome and unfavorable to their professional work of quality teaching and learning. Further, Al-Shehri and Al-Alwan (2013), pointed out that successful accreditation compliance lies with the managers of the organization and the creation of a culture of quality within the group. The same needed compliance applies to the faculty and staff of the schools of nursing, whose involvement depend on their perceptions towards the accreditation process.

The goal of this research is to examine whether there is a relationship between perceptions about the academic accreditation process and its purpose, with motivation and level of involvement among faculty and administrators responsible for introducing accreditation into nursing schools in Saudi Arabia. In this chapter, background

information about accreditation will be described, followed by the purpose, aims and significance of this study.

The NCAAA Accreditation Process and Quality Assurance System

The NCAAA is the only national accrediting body in the Kingdom of Saudi Arabia that can issue accreditation and quality assurance for post-secondary schools. It is an independent authority that was established in 2004 by the Higher Council of Education (HCE). The standards created by the NCAAA are based on global best practices adapted to meet higher education in Saudi Arabia by giving special attention to issues of particular importance to Saudi Arabia (NCAAA handbook, 2015). For instance, of importance to Saudi Arabian culture is the need to segregate male and female students. Educational institutions by custom are therefore required to provide for the learning and training of both the male and female student populations. Further, the NCAAA provides more detailed sub-standards to allow academic institutions to follow common practices and give flexibility to the different student characteristics, institutional missions and the communities they serve. The NCAAA goals are to:

- Establish standards, criteria and procedures for academic assessment and accreditation in all post-secondary educational institutions;
- Support involved faculty and staff by providing them with training on the assurance systems and quality establishment and development;
- Evaluate and provide support for the development of quality assurance documentation and reports necessary for the accreditation process;
- Manage and coordinate the external accreditation reviews of programs and institutions (NCAAA handbook 2015).

The NCAAA Standards

The NCAAA standards of accreditation are defined in eleven areas of activity designed for the administration and operation of academic institutions and the programs they offer: mission and objectives, administration and governance, quality assurance management and improvement, learning and teaching, student administration and support services, learning resources, equipment and facilities, financial planning and management, process of employment of faculty and staff, research, and institutional relationships with the community. Each of these eleven standards are described and further divided into major sub-standards. Further, to enable academic institutions and programs evaluate their performance in relation to the eleven general standards and their sub-standards, the NCAAA provides self-evaluation tools in the handbook.

The National Qualifications Framework (NQF)

In order for the NCAAA to ensure consistency in student learning outcomes throughout the Kingdom of Saudi Arabia, the Commission developed the National Qualifications Framework (NQF). The Framework is an important element in the Saudi Arabian system for accreditation and quality assurance. Under this Framework are three principal elements: levels of academic award, credit hours, and domains of learning. First, the levels refer to the different levels of academic awards given to learners. They start from the entry level that occurs after completion of secondary education to the level of doctor in the field of study. Second, credit hours refer to the amount of hours assigned to a given course or program to indicate the amount of learning expected. Fifteen credit hours are expected for full time undergraduate students in a given semester and 30 hours in an academic year. Third, domains of learning identify student learning outcomes in

five areas: (a) knowledge, (b) cognitive skills, (c) interpersonal stills and responsibility, (d) communication, information technology, and numerical skills, and (e) psychomotor skills.

Specifically, the Framework is a supplementary document provided by the NCAAA for academic institutions to support the success of the accreditation process by "setting out the learning expectations and credit requirements for levels of academic awards" (NCAAA handbook 2015, p.3). Additional documentation includes templates for programs, key performance indicators, surveys of the student, course descriptions, reports, and scales of self-evaluation.

NCAAA Process

The NCAAA process involves four major stages commencing with pre-review, then review, followed by post-review, and finishing with re-accreditation. The process is as follows: During the first stage of pre-review, the institution conducts a self-evaluation and prepares a strategic plan for quality improvement that implements the new system requirements for quality assurance recommended by the NCAAA. In this stage, there is opportunity to deal with any problems found in the self-evaluation. In the second stage, the NCAAA consults with institutions and prepares a schedule for reviews for accrediting both institutions and programs. In the third stage, the NCAAA conducts a site visit and carries out an assessment for full institution and program accreditation. In the fourth stage, the institution receives an accreditation action. When an institution is granted full academic accreditation, it will undergo subsequent reviews for accreditation every five years (see Figure 1).

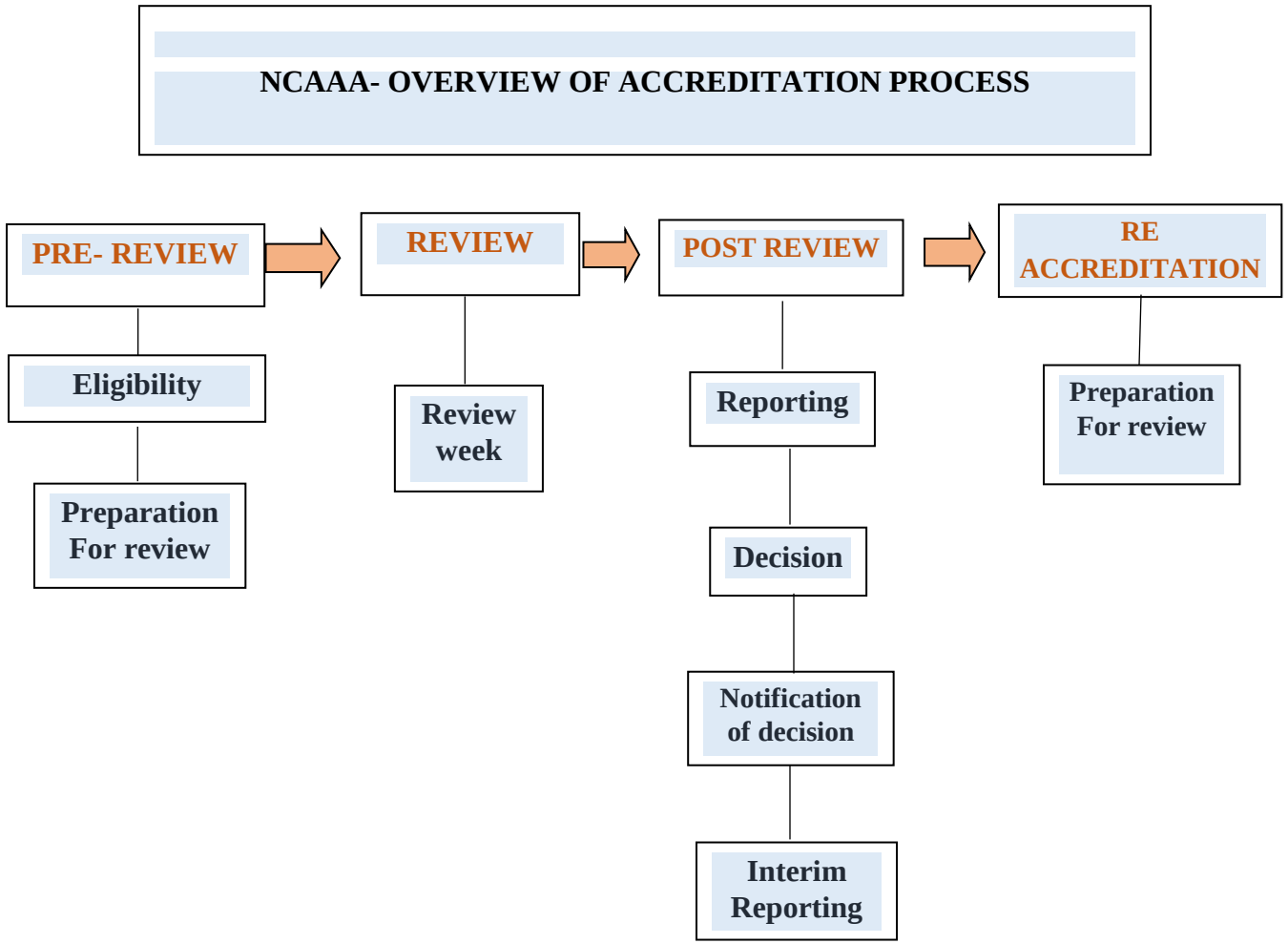

Figure 1. NCAAA- Overview of accreditation process.

The NCAAA accreditation review process is cyclical and dependent on the accreditation actions provided by a review panel. It can take up to 18 months or longer to complete an accreditation review cycle depending on how effectively an institution or program progresses through each review stage.

Institutions and programs must comply with the expected overall best practices as defined by the NCAAA standards. Accreditation actions may include the following awards: accreditation, conditional accreditation, no accreditation, or accreditation deferred.

Prioritization of Accreditation in Saudi Arabia

The inauguration of the NCAAA in 2004 reflected the growing concern to accredit institutions of higher education in developing countries along the lines of European and American programs (Lenn, 1992). The United Nations Educational Scientific and Cultural Organization (UNESCO) and International Institute of Educational Planning (IIEP) reports have recommended instituting or improving accreditation processes (UNESCO, 2008). Equally, the European Union, through the 1999 Bologna Accord, has sought to integrate equal standards of quality across not only institutions but also national boundaries (Toward the European Higher Education Area, 2001).

While European countries like France in 1984, the United Kingdom and The Netherlands in 1985 began to formalize quality control within their borders, the United States launched into this arena much earlier in its history. Accreditation efforts began soon after the Civil War in the late 1800s (Bernhard, 2011). Today, the need for

accreditation is widely accepted, and accreditation has proven to be vital to promoting high educational standards.

History of the Accreditation in the United States

The United States instituted accreditation in higher education far in advance of other developed countries and provides models associated with the goal of accreditation in higher education. The Association of Public and Land-grant Universities (APLU) was established in 1887, focusing on educational standards and admissions procedures. When accreditation for U.S. academic institutions began in the 1880s, the goal was "to protect public health and safety and to serve the public interest" (Parsons, 2011, para1). The first academic accrediting council primarily emphasized educational standards and admissions procedures. The American Council of Education (ACE), established in 1918, concentrated on the standardization and effectiveness of the accreditation process. After World War II, as government funding in higher education increased, concerns with and demand for accreditation standards of education increased (Fitzgerald et. al. 2012). Eventually, Congress passed the Higher Education Act in 1965 which regulates academic accreditation in the United States (Parsons, 2011).

Accreditation activities were not limited to educational institutions. A precursor to the accreditation of healthcare institutions began in 1918 when the American College of Surgeons (ACS) began conducting on-premises hospital inspections (McIntyre, Rogers & Heier, 2001). Its goal was to determine the facilities-level compliance with ACS internally developed hospital standards which later led to the formation of the Joint Commission on Accreditation of Hospitals (TJC). In 1951, the Joint Commission began offering its accreditation services to healthcare organizations and subsequently published

Standards for Hospital Accreditation. In 1965, Congress passed Social Security legislation, which contained a provision that hospitals be Joint Commission-certified to participate in Medicare and Medicaid programs (McIntyre et al., 2001). Accreditation of academic programs, particularly those teaching the health sciences, would be an important influence on the success of healthcare institution accreditation (Wojtczak et al., 2005).

The Council for Higher Education Accreditation (CHEA), defined accreditation as "a process of external quality review used by higher education to scrutinize colleges, universities, and educational programs for quality assurance and quality improvement" (Eaton, 2015, p.1*).* Three accrediting private and nonprofit entities are designed for the purpose of accrediting schools in the United States. According to CHEA internal data, (The Fundamentals of Accreditation, 2002, p.1) there are more than 17,600 of these accredited programs and single purpose operations. The accrediting entities work as described below:

Regional accreditation organizations review institutions in six regions of the United States. An example of this regional accreditation is the Western Association of Schools and Colleges (WASC). Almost all or 98% of regionally accredited academic institutions are degree granting and non-profit although a few are non-degree and for-profit.

National accreditation organizations review academic institutions all over the United States and are often "single-purpose" organizations. Examples of these types of organization are the Commission on Collegiate Nursing Education (CCNE) for nursing and the Accreditation Board for Engineering and Technology, Inc. (ABET) for business

information technology. National accreditation organizations can accredit single-purpose institutions that are degree granting and non-profit or non-degree granting and non-profit.

Specialized accreditation organizations review more narrowly focused single-purpose institutions and programs all over the U.S. An example of this type of accreditation organization is the American Board of Nursing Specialties (ABNS).

The Academic Accreditation Process in the United States

There are six main steps to the academic accreditation process in the United States. These steps include initiation, self-study, on-site evaluation, accreditation granting, monitoring, and re-evaluation. The following explains these steps:

1. *Initiation* involves the establishment and distribution of the academic standards of the accrediting organizations, in collaboration with the educational institutions.
2. *Self-study* is an in depth self-evaluation measuring how accurate institutions are applying the standards provided by the accrediting organizations.
3. *On-site evaluation* refers to the time when a team appointed by the accrediting organizations visits the institution and determines if the institution and /or the program meets the standards provided by the accrediting bodies.
4. *Accreditation granting* is the stage when the accrediting body is satisfied that the institution has met standards and accreditation status is granted. This granting of accreditation status is documented with published notification to all stakeholders.
5. *Monitoring* stage takes place during the accreditation period that has been granted to assure the fidelity of standards adherence. It is an ongoing process.

6. *Re-evaluation* refers to the periodic re-evaluation of listed institutions and/or programs by the accrediting body to assure accreditation status. (Eaton, 2010, p.4-5).

General Five Standard Approaches of the Accreditation Process

Generally, there are five approaches to the accreditation process. The first, *minimal model*, ensures fundamental characteristics of the institutions and/or programs. The second, *peer review model*, involves different institutions that coalesce and establish a group of peers to form an accrediting team from each institution. Third, the *program club model*, uses a group of peer institutions that become an accrediting body by reporting progress and changes to each other on their educational programs. Fourth, the *regulatory model*, is commonly used in health related educational programs and entails institutions strictly adhering to a core curriculum, with minimum defined requirements. An example of this would be listing all the necessary courses in a software curriculum and specifying curriculum parameters (e.g., minimum 4 credit hours of a specific course). Faculty composition and direct prescriptions of curriculum are involved in this model. Fifth, the *outcomes-based model*, is usually used in health related educational programs; it prescribes basic requirements and core curriculum. This model focuses on the goals and objectives stated by the program such as increasing the number of graduates who continue on to nursing school (Approaches to accreditation, 2016). Of these five, the last two are the most commonly used in nursing education.

Accreditation and Healthcare Organizations

In healthcare organizations, the accreditation process provides a benchmark of care by which hospitals can be measured and compared, driving institutions to strive for

excellence. Several studies have demonstrated that the advantages of accreditation are increased standards of patient care, maintenance of quality assurance, increased recognition of the healthcare organization, and enhanced quality/continuity of patient care. For example, a systematic review by Alkhenizan and Shaw (2011) of 26 studies revealed that general accreditation programs resulted in the improvement of structure, process of care, and clinical outcomes. These outcomes included management of acute myocardial infarction, trauma, surgical care, pain management and infection control. Moreover, the positive attitudes toward accreditation ensured increased care levels for physician residents and improved management (Alkhenizan & Shaw, 2012).

Despite overwhelming evidence that accreditation adds to the organization's prestige and directly correlates to increased quality of care for individuals, professionals employed within healthcare organizations expressed differing views about some aspects of the process. For example, Alkhenizan and Shaw (2012) conducted a review of 17 studies on the healthcare professionals' attitude towards accreditation. They found that the majority supported accreditation although their attitudes varied among the professionals of each specialty. Findings from the review showed that 77% of the teaching hospital staff viewed preparation for accreditation as a relevant stage in the evolution of the hospital. Whereas, 81% believed that their experience in the preparation process as essentially "bureaucratic and prescriptive". These studies also showed that in general, nursing professionals were the most likely to view the accreditation process in a positive light. Specifically, the nursing staff perceptions and attitudes toward quality of care increased when employed at an accredited hospital. Radiologists also showed favorable attitudes towards accreditation. Physicians showed skepticism with concerns

raised on the measurement of quality indicators because they perceived that no significant benefit to the quality of care received by patients, is gained. The review also reported conflicting attitudes among senior staff, managers, and owners of the healthcare industry. Positive attitudes were related to the hospital leaders' view of accreditation towards improved quality, which is a potential marketing tool. Negative attitudes were related to the participants' perception of the process as not worth the cost due to great demands of hospital staff time and effort.

Impetus for Accrediting Educational Institutions

Studies of accreditation in medical schools world-wide conclude that accreditation assures equal standards for medical doctors graduating from all medical schools and defines the minimum essential requirements that every medical school should provide (Wojtczak et al., 2005). This is important for the safe provision of health care, and can also be applied to nursing education where safe standards of care are the desired outcomes based on education.

Educational institutions stress that accreditation is useful not only to evaluate the quality of new and established programs but also to allow individual organizations to monitor and provide a means of ongoing quality improvement of the curriculum (Azila & Tan, 2005; Simpson, Lockyer, & Walters, 2005). The education of nurses, who work in close partnership with physicians in administering quality and ethical treatment, logically necessitates equally rigorous standards and requirements for both to achieve an expert credential. The rapidly changing nature of health care affects the planning and implementation of educational programs in nursing (Simpson & Courtney, 2002), requiring that high quality standards be incorporated in nursing curricula. Nurses need to

be taught knowledge and skills in order to improve their potential to make informed decisions, develop self-management skills, and take personal responsibility. Planning effectively will help nurses navigate complex organizations and become independent information gatherers. Accreditation assures that rapid changes are incorporated into education.

There is evidence that the accreditation process advances the teaching and curricula of schools, programs, and universities. According to Al Mohaimeed and colleagues (2012), the accreditation process universally leads to quality improvements. For example, accreditation requirements over the last 10 years have encouraged schools in Australia and New Zealand to bolster their curricula. Greater emphasis in the accreditation requirements of both countries focused on teaching and assessment of communication skills, better curricula integration, more focus on student-centered learning, and creating consistency in course evaluations (Simpson, Lockyer & Walters, 2005). Further, a study of business school accreditation in Lebanon which is a relatively new concept in that country, confirmed that accreditation was linked to quality assurance and continued improvement (Elie, Safi and Chaar, 2009).

Purpose and Aims of the Study

The purpose of this study is to examine whether there is a relationship between perceptions about the academic accreditation process and its purpose, with motivation and level of involvement among faculty and administrators responsible for introducing accreditation into nursing schools in Saudi Arabia. The specific aims of this study are to:

1. Describe the current perceptions of schools of nursing faculty and administrators about accreditation purpose and process.

2. Describe the motivation and level of involvement with the accreditation process of faculty and administrators.
3. Analyze the relationship between perceptions with motivation and level of involvement.
4. Evaluate how perceptions predict motivation and level of involvement.

Definitions of Major Constructs

Academic Accreditation

"A voluntary program in which trained external peer reviewers evaluate an academic institution and compare it with pre-established performance standards" (Alkhenizan & Shaw, 2012, p. 407). It is a major way that "students, families, government officials, and the press know that an institution or program provides a quality education" (Eaton, 2010, p.2).

Perceptions about Accreditation

A way that nursing faculty and administrators are being or becoming aware of understanding and interpreting the academic accreditation process importance; that it is a combination of their knowledge and attitudes toward the process of academic accreditation. Perceptions about accreditation include knowledge and attitudes towards the purpose and the process of accreditation.

Attitude on Accreditation

Refers to the faculty members' and administrators' favorable or unfavorable perception of accreditation (Werner, 2004).

Behavior Change

Behavioral change is the modification of certain behaviors and practices

(Hardeman, Johnston, Johnston, Bonetti, Wareham and Kinmonth, 2002) influenced by the faculty members' and administrators' perception on the accreditation process.

Knowledge

Knowledge is "justified true belief" (Niedderer, 2007). Knowledge is the level of understanding or misconceptions that faculty and administrators have about the academic accreditation process. It also encompasses awareness of the level of familiarity that faculty and administrators need to acquire about the process of accreditation to improve the level of motivation, and involvement in the process. Specifically, knowledge regarding accreditation refers to any facts, information, awareness or familiarity acquired in printed materials, verbal reports or audio-visual means. In addition, it includes any form of experiential knowledge. It is considered to be a part of the perception of accreditation.

Level of Involvement

Level of involvement refers to the intensity of focus or the dedication of time and energy of those responsible for earning their institution's accreditation. It is participation in institutional effectiveness activities (Welsh & Metcalf, 2003).

Motivation

The process of stimulus by either words or actions to inspire or guide people's behaviors to achieve certain needs and goals and has a number of levels that determine the energy used to meet those goals. Motivation is more than a simple belief that an action should be carried out; it involves a profound belief in the worthiness of accreditation. It is one of the major predictors of administrators' perceptions of the importance of institutional effectiveness activities (Welsh & Metcalf, 2003).

Motivated Faculty and Administrators

Motivated faculty members and administrators are interested in providing a higher level of achieving institutional goals by applying accreditation standards, believing their work is satisfying and enjoyable, and are either self-motivated or responding to behaviors imposed on them.

Process

Refers to a series of actions that leads to a specific result or outcome (Merriam Webster, 2016).

Significance of the Study

According to The Accrediting Council for Independent Colleges and Schools (ACICS), the importance of accreditation is that it can elevate the status of an educational program leading to increased student enrollment, funding from additional entities, student enrollment in professional activities/affiliations, better caliber of student skills, and decreasing attrition rates ("The Importance of Accreditation," 2011). Colleges and universities worldwide have become accredited to ensure programs meet the standards of quality recognized by other institutions. Faculty and administrators are a central and foundational part of the educational process. Therefore, initial faculty involvement in the accreditation process will result in better buy-in in terms of engaging in self-assessment activities and making necessary curricula adjustments. Hence, it is compelling to measure the administrator and faculty member perceptions of the processes to identify possible factors influencing their motivation and involvement. Insight into faculty and administrator perceptions of the academic accreditation process may create more meaningful and productive processes. Studying administrator and faculty perceptions

may demonstrate the essence of faculty work behavior, involvement and motivation in this study.

Using medical education as an example, the ultimate goal of accreditation is to adjust medical education to the rapid changes in healthcare service systems and prepare doctors for the needs and expectations of the public and to help them adjust to advances in scientific knowledge, new technology, and ensure lifelong learning (Al- Shehri and Al-Alwan 2013).

Nursing school accreditation ensures that graduates from accredited nursing school programs qualify to attend any other accredited institutions to pursue higher studies. Additionally, a school's accreditation can also make its graduates more competitive in the job market. Further, employers prefer to hire practitioners from accredited institutions because they are trained under nationally established standards for nursing education (C. Neish, personal communication, May 1, 2013). ACICS has supported that accreditation is important because it helps employers determine the validity of programs of study and whether a graduate is qualified.

Accreditation is a recent mandate in Saudi Arabia. To date, there has been no reported studies on accreditation of the schools of nursing in the Kingdom of Saudi Arabia. This study will be the first to provide a foundation for understanding the process of accreditation. Specifically, it will help identify whether perceptions influence motivation and the level of involvement towards the accreditation process. Further, it will also describe whether the Theory of Planned Behavior can be applied in the accreditation process.

Overview of Remaining Chapters

Chapter one provides an overview of the rationale for exploring the perceptions of faculty and administrators who are involved in the accreditation process and how these perceptions may affect their commitment to the process. Some of the history and characteristics of mandated accreditation standards that institutions must incorporate to be ready for an evaluation was also presented.

Chapter two identifies the gaps in knowledge by reviewing the relevant literature. Chapter three will introduce the methodology. Chapter four will provide the results of the study, including the research question, design, sample, and data analysis. Chapter five will present the discussion of the findings.

CHAPTER TWO

LITERATURE REVIEW

Increased globalization of education and industry in the 21st century has led to the prioritization of accreditation (UNESCO, 2008). Moreover, the need for accreditation has become widely accepted and is relevant in the promotion of high education standards.

The rapid expansion of academic institutions in Saudi Arabia calls for the need for accreditation (Al-Sheri & Al-Alwan, 2013; moe.gov.sa, 2017). Al-Sheri and Al-Alwan (2013) highlighted that undergraduate medical education needs accreditation to evaluate institutional contributions to foster a culture of quality in medical institutions. While the authors have stressed the need in medical institutions, this demand is clearly for all academic centers. The establishment of the National Commission for Assessment and Academic Accreditation (NCAAA) in 2004 reflected a growing concern for accrediting institutions of higher education (Lenn, 1992).

According to Al-Sheri and Al-Alwan (2013), the history of accreditation in Saudi Arabia, some of which predated the 2004 government mandate, was unlike some early U.S. attempts at accreditation of medical schools. For example, being in a different era required different goals and vision. The goal of accreditation of U.S. academic institutions in 1880s was "to protect public health and safety and to serve the public interest" (History of Accreditation, 2011, para. 1). Accreditation in Saudi Arabia, however, was designed to contribute to increased quality of the programs rather than a mere judgment of compliance (Al-Sheri & Al-Alwan, 2013).

The purpose of this literature review is to determine the current state of the science concerning the association of SN faculty and administrators perceptions about the process and purpose of academic accreditation with motivation and level of involvement in the process. The search strategy and key words, explanation of concepts and key variables, validation of study survey instrument, framing the theoretical foundation for the study, and a critique of the literature will be discussed.

Literature Search Strategy

An electronic search was conducted of the national and international literature to find relevant studies done on the relationship between perceptions, with motivation and involvement in the process of academic accreditation and its effect on higher education outcomes. Electronic databases included All EBSCO host Databases such as CINAHL, ERIC, Health Source: Nursing/Academic Edition, PUBmed, ProQuest, Ovid, Google Scholar and snowballing the relevant literature citations. The search was limited to scholarly journals, using all the MeSH terms such as, *academic accreditation, attitude, institutional effectiveness, nursing schools, medical education, academic accreditation* and *Saudi Arabia* with no date limits in order to gain thorough understanding of the background of the topic.

The keywords searched were *academic accreditation* and *attitude, research, accreditation process* and *research* and *Saudi Arabia*; *academic accreditation* and *nursing schools* and *administrators*, and/or *medical education, academic accreditation* and *faculty perceptions* and *research*. The literature was limited in terms of studies specifically examining the relationship between the perceptions of faculty and administrators, to their motivation and involvement in the academic accreditation

process. One hundred fifty titles came up, and all of the titled abstracts were reviewed. In total, the search yielded 67 articles which included 12 research articles, one systematic review, two theoretical, and two analyses that were relevant to the study. The majority were opinion papers. Titles and abstracts were screened to select the relevant articles for full text review. Four duplicate articles were excluded. In the end, 67 articles were reviewed.

After adding the keyword *institutional effectiveness*, 150 titles came up, with one article having to do with motivation and level of involvement, and another one on the administrators and faculty perceptions on the process of accreditation.

The literature review is discussed below and organized under two general categories: the independent variables *perceptions, knowledge* and *attitudes* and the dependent variables: *motivation* and *involvement level*.

Exploring relationships will help create more effective processes for the academic accreditation activities integral to quality teaching, learning, and curriculum. Articles on healthcare accreditation was not the focus of this study but the information provided insight into the attitudes of healthcare workers towards their accreditation process.

Concepts and Variables

The Independent Variables

Perceptions - Knowledge and Attitude

Al-Sheri and Al-Alwan (2013) stressed that the key to accreditation is commitment to quality improvement. Quality control alone does not suffice for quality improvement. A more holistic approach is needed than just complying with pre-set standards. However, for nursing schools to have and maintain the highest quality in any

accreditation system, it must principally focus on and be continuously promoting a culture of quality. Al-Sheri and Al-Alwan (2013) suggested a three-fold approach: audit, reflection and research. These approaches engage both the heart and the mind of all stakeholders thus fostering a culture of quality internally and rendering accreditation less burdensome. An exploration of engagement of both the heart and mind is critical to this study, stressing the importance of perceptions in the evaluation of the likelihood of establishing successful accreditation processes in an institution.

Bologna Process "reforms" was a series of ministerial meetings and agreements between European countries designed to ensure comparability in the standards and quality of higher education qualifications through a concise set of eight national standards and guidelines and which served as an obligatory criteria for accrediting programs by external bodies and was implemented in 1999. These standards were: (a) system control of the institution, (b) qualification goals of the concept of studies, (c) conceptual position of the program in the study system, (d) the study concept, (e) operating the study program, (f) system of examinations, (g) transparency and documentation, and (h) quality assurance (Suchanek, Pietzonka, Künzel, & Futterer, 2012).

A study conducted over 5 years looked at the impact of accreditation, its effects and limitations on the reform of study programs in Germany. An analysis of 1,380 accreditation decisions was done between July 2004 and December 2009 along with interviews of key actors (those responsible for reform in the Higher Education Institutions (HEIs) as well as student representatives) in Lower Saxony's 36 higher education institutions and vocational schools. A questionnaire about attitudes toward the accreditation process was developed asking how external conditions could be improved

to make reform more successful. The questionnaire also asked about specific subject-areas to see whether violations of the accreditation process differed. Online questionnaires were sent via email to vice-presidents, Bologna commissioners, quality managers, deans and program managers. In addition, 24 student leaders from the various schools were selected for in-person interviews.

As a result of this study, it was determined that a decade after Bologna's implementation, reform showed positive effects and revealed some problem areas, such as insufficient advice by accrediting agencies, incomprehensibility of the criteria and conflict of criteria with institution goals and standards. Positive effects of the study showed that the more a goal is accepted, the greater was the average compliance score. In the final year of the study, "conditional accreditations" (Suchanek et al., 2012, p. 15) decreased, which was attributed to the increased expertise of the accreditation personnel. In terms of negative findings, Suchanek et al. (2012) found that obstacles hindering the reform process differed by subject area. For example, greater resistance to standard implementation was found in informatics and the natural and technological sciences where there was great discomfort with the criteria relating to modularization (organizing topics into study modules). Study participants found the criteria associated with modularization to be difficult to comprehend. There was manifestation of a negative attitude among faculty members towards the Bologna reform related to violations of quality criteria. The analysis showed a relationship existed between incomprehensibility of quality criteria and inadequate modularization. Modularization apparently posed a major problem since 15.2% of all caveats prescribed by agencies pertained to the fact that study modules were insufficiently constructed and described. The second most frequent

critique referred to a lack of adequate human and material resources (13.8%) followed by a failure to attune examinations with the program's qualification goals and its modules and to design them to be knowledge, as well as competence, oriented (10.2 %). Investigation showed that resistant attitudes were related to the incomprehensibility or the lack of knowledge of the quality criteria "modularization" in the reform process.

When the data were examined from the point of view of violation of the eight accreditation standards, "system of examinations" and "transparency and documentation" logged the most violations. However, natural sciences, followed by engineering, pedagogic and social sciences showed the highest level of violations, again a result of resistance to modularization. Suchanek et al. (2012) also found that there were more violations at smaller institutions. Educational level or public/private ownership were not factors. In summary, the study also showed that modularization apparently posed a major problem area and resulted in significant violations in feasibility-of-study requirements as well as human and material resources. This study implied that it is seemingly important to examine other factors such as knowledge and attitudes of the human resources and its relationship to involvement and motivation levels as variables in the accreditation process.

To study accreditation from the perspective of allied health deans and program directors, Baker, Morrone and Gable (2004) conducted a parallel-sample survey on those critical to the academic accreditation process, which included deans and program directors of educational institutions offering clinical laboratory sciences and nuclear medicine technology, physical therapy, radiation therapy, occupation therapy, medical

technology and radiography. This study focused on four-year colleges and universities of allied health programs, academic health centers and medical schools in the United States.

Baker, Morrone and Gable (2004) used a survey originally developed by Brown (1999) looking at the effectiveness and reform of regional accreditation through a series of questions about presidential and political perceptions of the current accreditation process. A total of 595 program directors were identified. Combining an Association of Schools of Allied Health Professions mailing list with a web search, a total of 178 allied health deans were identified and 595 program directors. These lists resulted in 773 surveys being mailed.

The survey was designed to fit the intended population and to assess accreditation in four areas: purpose (seven statements), effectiveness (23 statements), process (10 statements), and critique and reform (19 statements). Thus, there were a total of 59 statements. Statements were rated on a Likert scale with six options, from 5 = strongly agree, 4 = agree, 3 = neutral, 2 = disagree, to 1 = strongly disagree, and "don't know" to avoid selection of the neutral category when lack of knowledge prevailed. To reduce the response set, some positive statements in the survey were modified to introduce negative statements or statements that would most likely evoke a negative response. Demographic and descriptive information was requested at the beginning of the instrument, at the end of the survey open-ended questions were provided.

In the above study, an advisory committee of program directors and allied health deans and associate deans was formed to participate in pilot testing. The goal of running the pilot test was to critique the study variables and the survey design. A final survey design was developed and professionally typeset to enhance readability based on the

feedback and comments received from the pilot testing members, along with advisory committee recommendations.

A cover letter attached to the questionnaire was delivered to 773 study participants (178 deans and 595 program directors). Responses from study participants were grouped first by their respective designated position (dean or program director) and secondarily by discipline for program directors. Quantitative data from responses were imported into SPSS from an Excel database in order to be analyzed. Before any analysis, a syntax computer command was conducted to remove the values of the "don't know" option in the questionnaire. In addition, all negative statements were recoded to reverse the direction of Likert-scale values. Descriptive statistical analysis was conducted for the descriptive and demographic information. Sum means and Cronbach's alpha for the four categories of dependent variables (purpose, process, effectiveness, and critique and reform) were determined to insure the validity of the 773 surveys mailed with 424 valid responses and a return rate of 55%.

Results showed that overall, respondents confirmed that specialized accreditation improves quality in higher education. However, both deans and program directors opposed government or state-imposed accreditation standards as opposed to peer evaluation. Specifically, deans showed greater support for critique and reform efforts whereas program directors supported purpose, process and effectiveness. Deans were more concerned with cost, duplicated effort and coordination than program directors. Baker, Morrone and Gable (2004) concluded that there is a need for greater understanding of the process and participation as well as a need for accrediting

institutions to stress the positives in accreditation and help institutions to see it as an ongoing process of self-improvement.

Furthermore, many higher education institutions employ accreditation agencies to ensure that their prescribed curriculum is emphasizing the skills and competencies indispensable for the students to become confident professionals, excelling at their chosen craft. For example, nursing accreditation established by the National League for Nursing (NLN) Accrediting Commission, Inc. depicts several key factors when evaluating candidacy for accreditation: evaluation of mission and administration, faculty and staff, program curriculum, program resources, and recurring program evaluation/outcomes (NLN, 2013). However, in an empirical study examining the impact and limitations of academic accreditation as a method of monitoring the reform of study programs done in Germany by Suchanek et al., 2012, found, 1) that there are some quality criteria that have not been assessed by program accreditation, such as development of competencies, class evaluation and recognition of external achievements, and 2) that accreditation reports did not always reflect what was happening on the ground. For example, lack of compliance on behalf of HEIs which is not detected by agencies. The Suchanek et al (2012) and Al- Shehri and Al-Alwan (2013) studies hypothesized that the positive perceptions of those who are involved in implementing accreditation in their institutions will determine the degree of process success.

Bernhard (2011) explored attitudes from the perspectives of professionals, experts and administrators of higher education systems from Austria and United Kingdom towards quality assurance. The study used analytical research of higher education literature and expert interviews from written questionnaires. Questionnaires were sent to

the study participants. The total number of questionnaires sent to the study participants however, was not explicit. The total return rate from qualitative written questionnaires was 14 from national representatives of both countries and 17 from international experts in quality assurance in higher education. A clear limitation of the study was that the author did not mention how many questionnaires were sent to the participants. Built on a two-layer comparative analysis, from (1) the descriptive and peer-reviewed country reports and (2) the perspectives from the national experts, analysis revealed that both countries are experiencing an immense transition process in developing accreditation implementation strategies and a new mean for assuring quality in their higher education systems. Bernhard (2011) also cited a history of spotty implementation of program accreditation despite the success of quality assurance promotion.

The study done by Bernhardt, Videto, Widdall, Chen, Airhihenbuwa and Allegrante, (2004) involved the coordination of accreditation on the health education programs. Previous efforts of promoting quality assurance for credentialing health educators through program accreditation and approval were not successful. The authors, who were members of *The National Task Force on Accreditation in Health Education,* were tasked to develop a plan for coordinated accreditation of undergraduate and graduate health education programs. One of the task force goals was to gather profession wide opinions and input to any new system proposed. Web-based surveys were used to assess program approval with different viewpoints on accreditation.

The findings of the above study were discussed along with the idea for moving forward into a plan for a balanced and coordinated system of accreditation. All surveys (n=666), from health education professionals (n=506) and from faculty and

administrators (n=105) at academic programs in health education overwhelmingly supported accreditation for their programs. Most felt that the new mandate should integrate with current practices. Respondents felt that coordinated and comprehensive accreditation should accommodate program diversity and the program should be linked to individual certifications. There was a willingness to take part in the accreditation process at their institutions.

Bernhardt and colleagues' (2004) surveys raised two relevant questions. First, the respondents were self-selected to a certain extent. The survey failed to consider the knowledge and commitment of professionals and administrators who did not complete the questionnaire. Second, acknowledgment of the importance of accreditation in theory does not always translate into dedicated commitment.

Prados, Peterson and Lattuca's (2005) principal concern was with the process of accreditation and maintaining the highest quality control and how to implement that quality through the entire process. They looked at engineering schools and posited that engineering accreditation had become more prescriptive over the last three decades inhibiting the development of innovations that better reflect the changing needs of the profession. The accreditation board for engineering programs developed revised criteria called *Engineering Criteria 2000* (EC2000), which emphasized learning outcomes, assessment and continuous improvement rather than strict curricular specifications. To assess the utility of the new criteria, the Accreditation Board for Engineering and Technology (ABET) conducted a multi-year research project to evaluate the effect of EC2000 on U.S. engineering education, providing a baseline for future evaluation of student outcomes. Initial feedback was gained by interviewing deans and faculty

members at an engineering retreat. Two surveys were used – one for program chairs and one for faculty. Feedback received indicated that because outcomes assessment and continuous improvement were new concepts, they were unwelcome. However, researchers concluded that integration of the accreditation process should prove beneficial and less cumbersome once a commitment to the process is made. It was recommended that the study be replicated to further evaluate progress in implementing the new criteria and provide a baseline assessment of student learning for future comparisons. This study was the first of its kind and can provide a blueprint of sorts for future studies in other disciplines. The study conclusions were based on a focus of program strengths and deficiencies, and did not look at all the stakeholders and what effect their knowledge level and/or motivation had on the success of programs.

Said, Chow, Ramli, Ya and Sabria (2013) conducted a descriptive study of an undergraduate engineering program in Malaysia looking at and evaluating the impact of accreditation criteria on the quality of the selected programs where the data was collected in the form of benchmarking and surveys. This was a basic study evaluating whether accreditation is necessary to maintain high standards in engineering. It was noted that accreditation allows for professional advancement and international mobility as well as instituting international expectations for a broad spectrum of skills. Moreover, accreditation places emphasis on the quality assurance of programs. Researchers used questionnaires and benchmarking. Benchmarking involved comparing Malaysian programs with others worldwide. The questionnaires were used to assess the participants values in terms of attitudes, (for or against certain aspects of accreditation), and beliefs (whether they felt certain areas of the accreditation were valid or invalid). Sample

inquiries were: (a) Does the EAC have authority to evaluate the achievements of the students? (b) Is there a positive or negative influence on teaching habits from the presence of the accreditation process?

To collect data from participants, a five-point scale of "strongly agree" to "strongly disagree" was used. One additional option was "not relevant" where deemed necessary. The questionnaires were given to engineering faculty involved in accreditation activities during a Workshop for the Accreditation Committee members of the Faculty of Engineering at the same university. It was not mentioned how many questionnaires were distributed but 32 were returned.

The results showed that, although accreditation was seen as invaluable, it was also perceived as cumbersome. Improvement in teaching as well as integration of research into teaching was seen as critical. The researchers suggested that the introduction of teaching assistants as in the U.S. model would help. Further, they stressed that professional evaluations need to take into account teaching, accreditation and research efforts. In addition, "a discussion on the evaluation that include the supposed dichotomies which arise from this accreditation process, namely the compromise between research versus teaching; and the value of engineering knowledge whether as an academic pursuit or catering to industry's needs revealed that there is a need to separate programs into those aimed at careers and those aimed at research" (Said et al., 2013).

The benchmarking study showed that the U.S. and Hong Kong maintained flexibility by keeping curriculum formulation to a minimum. The U.S. also stressed the importance of academic staff who are skilled instructors. Japan and Korea had an elaborate mechanism for monitoring student progress whereas Malaysia stressed the

involvement of industry and professional partners. They also observed that some faculty found accreditation criteria cumbersome. Although the Malaysian system had tried to emulate the *Engineering Criteria 2000* (EC 2000), researchers wondered whether the problem might lie in the notion that Malaysian faculty had an incomplete understanding of the aims of the study.

Volkwein, Lattuca, Harper, and Domingo (2007) conducted an investigation about the differential impact of changing the standards of EC 2000-driven accreditation changes from 1994 to 2004. Examined were programs that had been reviewed earlier and then later after the application of the EC2000 standards in the accreditation cycle. The goal was to examine if the programs were significantly different in student experience and learning outcomes. A conceptual model and five survey instruments were developed for the study and used for the current analysis to examine the influence of the change in the accreditation standards. A sample of 203 national representatives from 40 organizations offering engineering programs were reviewed in different years during the period of transition.

Data were received from program chairs (n=147), faculty (n=1200), graduates of 2004 (n=4300), and graduates of 1994 (n=5500). Before incorporating the new accreditation criteria in 1994, there were significant variations in engineering student learning outcomes from EC2000 accredited programs to programs prepared under previous guidelines. Despite those variations, the 2004 findings showed a surprisingly uniform level of outcomes and experiences for the students. For example, results pointed to the notion that engineering accreditation seems to be accomplishing the goal of quality assurance as evidenced by interviewing graduating seniors, pre-EC2000 alumni,

employers, faculty, program heads and deans. Moreover, results highlighted student perceptions of accreditation influenced faculty attitudes. Students noted that their experiences at the institution changed after accreditation was completed. For example, students reported more collaboration and active management in individual learning, increased interaction and feedback from instructors, and an emphasis on program openness to new ideas and people. Because of the student's ability to interact more readily with the instructors, many instructors viewed accreditation in a positive light (Volkwein et al., 2007).

This study illustrates that while processes and procedures have a vital place in any course of change or development, it is people who make change possible and are affected by the success of failure of those changes. All stakeholders must have a grasp of accreditation issues, believe in their value and have a personal commitment and positive attitude. These are key elements in the successful implementation of an accreditation program.

In a systematic review of 17 research studies (12 quantitative and 5 qualitative) of healthcare professional attitudes toward accreditation, Alkhenizan and Shaw (2012) found an overall positive attitude of the health care professionals towards accreditation. However, it was not explained how attitude influenced the accreditation process. It is therefore relevant to explore how attitude affects motivation and involvement during the accreditation process.

Lebanon, a Middle Eastern country, is newly accepting the need for accreditation. Elie, Safi and Chaar, (2009) studied the professors and students in Lebanese business

schools and their perceptions of the meaning of accreditation, its benefits and disadvantages using qualitative and quantitative data analysis.

Data were collected from students and faculty at six institutions. Total respondents were 57 students and 31 professors (n=88). Twenty-six student and 12 professor respondents were from a French-based program. Thirty-one students and 19 professors were from an American-based program. Data collection consisted of a survey with 88 face-to-face administered questionnaires based on a Likert scale and consisting of three parts, 1) demographic data, 2) five open-ended questions testing the awareness of the responding parties of the business schools' accreditation and what it meant to them and 3) inquiries into the true perceptions regarding their views of the external quality assessment program. Prior to this the survey had only been used in a face-to-face interview manner, due to the respondents having not been handed the questions. Upon completion of part two, the exact meaning of the business programs' accreditation was delivered to each respondent.

The researchers found that those involved in programs based on the American system were more knowledgeable than those in programs based on the French system. The American-based respondents were also more aware of the pros and cons of accreditation, perhaps because American institutions of higher education adopted accreditation about a century before the French. Both groups generally viewed accreditation as promoting quality assurance and continued improvement that would strengthen the image of the school and the program, and be advantageous to both faculty and students. Students, however, were less familiar with the costs of accreditation in

terms of time, personnel and financial resources required and were less aware of how much accreditation might successfully measure student learning and instructional quality.

For the statistical analysis, correlation was used to explore the relationships between the outcome variables such as s*chools image, reputation, ranking and quality* and independent variables such as *moneymaking scheme, cannot measure students learning* and *dominated by Western views*. Interestingly, the *image about business schools* had a negative relationship with accreditation unfavorable connotations attached to it for example, 1) western view influence, 2) a scheme to "make money", and 3) a process that cannot measure a student's ability to learn). They also found a significant positive linear relationship between "strengthening the university image" and "accreditation by Western agencies".

It was important to understand how respondents form perceptions of accreditation. To determine the differences in perception, the Mann-Whitney U-test was performed to verify the differences (French-based versus American-based and students versus professors). The authors recommended expanding the study with a larger number of subjects and inclusion of more stakeholders such as employers.

The Dependent Variables

Motivation and Involvement Level

A mixed methods study conducted by Al Mohaimeed et al. (2012) in the College of Medicine at Qassim University, National Commission for Academic Assessment and Accreditation (NCAAA) led an exercise of the university academic accreditation whereby 51 self-administered NCAAA questionnaires were used by the college of medicine before and after the Accreditation process to collect data and explore what

influences the accreditation process. For the qualitative portion of the study, a focus group of six members from the quality assurance team of the college was conducted. The focus group interview guidelines were developed based on the NCAAA questionnaires. The researchers studied and analyzed post accreditation data and compared it to pre accreditation data. The study showed that accreditation brought significant changes in education processes and administration of curriculum. Moreover, accreditation led to significant improvements in the quality of medical education implemented at the college. Both studies by Al Mohaimeed et al. (2012) and Suchanek (2012) looked at processes and provided a clear source of pre-post comparison.

In a study to evaluate how the accreditation process assists in the introduction of organizational changes to improve quality and safety of care in health care organizations in Canada, Pomey, Charles, Champagne, Angus, Shabah and Contandriopoulos (2010) analyzed multiple case studies of five health care organizations with a different accreditation status. Analysis was done by interviewing top managers, conducting focus groups and analyzing self-assessment and accreditation reports and other documents related to the cases. Results showed that the process of accreditation stimulated a spirit of cooperation and increased integration. However, over time, the motivation towards changes related to accreditation decreased. Among the health care professionals involved, physicians showed less interest in quality processes, confirming previous studies where physicians are less cognizant of the importance of accreditation (Alkhenizan & Shaw, 2012). In contrast, quality department directors and nurse managers manifested the most involvement. The study implied that accreditation causes modification of certain behaviors and practices but this was not a specific aim of the research. Therefore, it is

imperative to explore what variables affect the motivation and level involvement in change processes.

To look at faculty-institutional engagement, Schwartz, Skinner, and Bowen (2009) conducted a study by interviewing a total of 532 presidents, board chairs, and chief academic officers by phone and in person regarding the successes and failure of accreditation and faculty engagement on their campuses such as 1) "identify factors that promote or deter successful collaboration as well as patterns of problems that detract from productive engagement; 2) examine activities that constitute 'good practice'; 3) offer recommendations for improving institutional governance and leadership; and 4) produce knowledge that can be shared with institutions" (Schwartz et.al., 2009, p.3). The aim of the study was to identify factors leading to the success or failure of interactions, good practices, recommend improvements, and resources that institutions can use. Results showed institutional governors and leaders see faculty and board engagement as valuable and understand the stumbling blocks that sometimes exist in achieving substantive interaction. Further, Schwartz et al. (2009) found that the increased number of part-timers threatens that engagement.

Schwartz et al. (2009) also found barriers to effective governance such as lack of time, lack of mutual understanding and respect, and outdated governance policies and practices. In addition, they saw problems in the increased complexity of higher education and sometimes a lack of interest related to commit the time or energy or that they were not attracted to governance positions. However, interaction could be improved in better orientation, continuing education and opportunities for faculty and trustee service on committees and work groups. Frequent communication was especially helpful as was

greater transparency in decision-making and in responsibilities. The leadership of the head of the institution was seen as critical in determining the success of the researchers' recommendations, which included faculty presentations at trustee meetings and ensuring that trustees are appointed who have higher education experience. The authors also discuss the importance of the role of communicating clearly to all stakeholders, which most often lie at the foundation of successful relations between faculty and governors (Schwartz et al.; 2009). The study looks at how personal engagement or involvement levels affect successful outcomes.

According to White, Paslawshi, and Kearney (2013), faculty opposition and resistance to change was noted. For example, faculty and administrators sometimes view accreditation as a distraction from their critical administrative roles within the institution (Hasan, 2010). In addition to their day-to-day responsibilities, they must compile reports; attend meetings, and review programs and curricula for one or two year periods, depending on the size of the institutions. Moreover, it has been reported that medical school faculty perceive the process of accreditation as ''overly onerous and detrimental to their real work'' (Hasan 2010, p.26). According to White et al., (2013), resistance lies in loss of control/recognition of faculty members' own teaching, skepticism about the need to change, defense of existing educational practices, or lack of faculty understanding of necessity to change. It is therefore important to examine what predicts personal engagement and level of involvement in response to the academic accreditation process.

In response to a perceived need for improved quality in higher education, accrediting agencies began to operationalize a new form of quality improvement labeled

"institutional effectiveness" (Volkwein, 2010). In 2003, Welsh, & Metcalf conducted an in-depth study of faculty and academic administrators from a wide circle of influence. It was clear that to have successful, meaningful institutional effectiveness activities; the involvement of faculty was of utmost importance to maintain a high level of institutional effectiveness.

The study addressed five research questions: 1) Do the views and perceptions of faculty and academic administrators concerning the importance of institutional effectiveness activities differ significantly? 2) Is there a significant difference in the perceptions of the faculty and academic administrators in terms of the importance of institutional effectiveness when respondents perceive the internal versus external motivation for the activities of institutional effectiveness? 3) Do the perceptions of the faculty and academic administrators differ significantly when reported depth of institutional effectiveness implementation on their campuses is perceived as low or high? 4) Is educational quality the determining factor of faculty and academic administrators' perceptions and differing views that might be significantly altered by their view of the importance of institutional effectiveness activities? 5) Are there significant differences between faculty and academic administrators' perceptions of institutional effectiveness activities importance based on their level of participation in the activities?

Welsh, & Metcalf's study method will be described in depth because it provides a foundation for the proposed study. During the autumn of 2000, academic administrators and faculty received a mailed questionnaire addressing the five research questions. The Southern Association of Colleges and Schools (SACS), which conducted the reviews from September 1998 to May 2000 for reaffirmation of accreditation or initial

accreditation, sent these to 168 educational learning centers that were being reviewed. The inclusion sample was faculty from institutions that were reviewed by (SACS) in the USA, served on self-study steering committees, who were experienced in institutional effectiveness issues and who had an average total experience of 18.99 years in higher education. Only consistent, familiar, understandable and simple terminology was used on the research tools. All faculty were given the opportunity to participate in the survey. Out of 704 total faculty, 386 responded to the survey, a 54.8% response rate.

The dependent variables were *perceived definition of quality index* and the independent variables were *depth of implementation, external motivation, internal motivation*, and *reported level of involvement*. A Likert scale survey questionnaire of 9-18 items was specifically developed for this study. Faculty respondents had the opportunity to answer open-ended questions regarding institutional effectiveness activities, with the questions being aimed at how to improve the implementation of the programs. Validity and reliability were ensured by a six member professional panel of individuals from post-secondary education specializing in institutional effectiveness. These evaluators established content validity for each question of the research. Each survey item was judged and had a rating applied, the degree to which it was appropriate. Panel members having received a copy of the instrument grouped variables into indices. Each index had a short description of the variable included. After careful examination of single items, the overall adequacy of each index was rated by panel members addressing the related variable.

A five point Likert scale was used for each item and the index rating overall, with extra space given to elicit more comments from the participants. With five separate

indices, it was imperative that internal consistency and reliability be maintained in the questionnaire. Modification to the questionnaire was made based on the panel suggestions. Changes seemed to focus on concepts regarding definition of institutional effectiveness and clarification of some of the more awkward questions with the addition of two questions about mission (research and service oriented) which were not previously part of the survey. Most ratings category from the evaluators was "good" and/or "excellent". The indices were also rated by each evaluator and they also scored "good" and/or "excellent".

A threshold correlations coefficient was used as the statistical procedure for this study. The reliability of the survey was established through a pilot study. This was done by a group of 69 educators from higher education institutions from SACS of whom were not included in the analysis and sample. The overall response rate came in at 59% from 41 respondents. Each item from the indices met or passed a Cronbach's coefficient tests *r* value of 0.70 except for the *definition of quality index.* This variable coefficient was 0.52, but it still warranted inclusion in the final study instrument because of the significant correlation among the subset of the questionnaire.

The five indices each met or were very close to the standard threshold of 0.70. The indices ranged from a high of 0.93 to a low of 0.67 on the Cronbach's score range. In the end, the minimum criterion of 0.60 was exceeded by each score and the 0.70 criterion goal was exceeded by all except one for this research area. The pilot study coefficient for each index was not as high as the related coefficient scores in the survey. An outcome from the survey has shown that the *definition of quality* index coefficient went from 0.52

to 0.67 which is considered noteworthy. Parametric statistical methods were used to analyze the data.

Compared to the large number of faculty at institutions accredited by SACS, there was a normal distribution in regard to the size of the sample used in the survey. Calculations were used and descriptive statistics applied for the first research question. On the five point scale, the average response was 3.89 for the faculty showing that the faculty placed a high importance on institutional effectiveness activities. Once the variance was analyzed, it revealed not much of a difference among different types of institutions and the attending faculty members on any of the five indices.

A correlation regression analysis was conducted to measure question number 2 that pertained to the four predictor variables (*depth of implementation, external motivation, internal motivation,* and the *reported level of involvement* and the impact they have on the perceived importance of institutional effectiveness activities. The study of the correlation showed that the predictor variables had a significant correlation ($p = 0.01$) and were quite strongly related (coefficients regarding correlation range from 0.602 to 0.757) with each other. The dependent variable (*perceived definition of quality index)* also had interesting predictor variables that correlated significantly ($p = 0.01$) and again quite strongly (the dependent variable having a correlation coefficients range from 0.657 to 0.735) which showed the perceived importance of the institutional effectiveness activities.

The dependent variable is the standard to which the predictor variables (*depth of implementation*, *external motivation, internal motivation,* and *reported level of involvement)* are placed into the question. Its order is determined by the relationship

strengths to the dependent variable. In this research, it was observed for the predictor variables a range from 0.735 for the *perceived definition of quality,* to 0.657 for the *level of involvement*, and 0.722 for motivation.

The predictor variables seem to explain a larger than expected percent of the change in the dependent variables ($r^2 = 0.654$, $F = 140.730$, $p = 0.01$) after running the regression analysis. There were three important predictor variables of the administrative perception as to why they held a view of the importance of institutional effectiveness activities which was brought out by looking closely at the data: (0.404) pertaining to the *perceived motivation*, (0.261) *personal level of involvement* and (0.324) looked at the *definition of quality*. However, *implementation* was not nearly a significant predictor with the faculty (0.061) which means there was not enough support for institutional effectiveness activities.

The findings from this survey study seem to suggest three best practices that can help set benchmarks as institutions strive to implement this program. First, improvement in the programs and services of the institution are clearly what motivate faculty to support the implementation of institutional effectiveness activities. Second, institutional effectiveness activities are definitely stronger when faculty become personally involved in institutional effectiveness activities. Third, faculty would be more inclined to support institutional effectiveness activities if they felt or perceived that the preferred view of quality was also part of the outcome of the implementation of the program. Different types of institutions had no significant differences on motivation, definition of quality, implementation and level of involvement among faculty. The study also found an association between the predictor variables (*motivation, definition of quality,*

implementation and level of involvement) likewise with the dependent variable (*perceived importance of institutional effectiveness.* The study also revealed that three of the independent variables (*motivation, definition of quality and level of involvement)* are predictors of administrators' perceived importance of institutional effectiveness.

It is suggested that promoting an outcomes-oriented perspective on quality is much more likely to garner faculty support for a program of institutional effectiveness activities. Faculty do not seem to spontaneously support programs of this nature and administrators should not expect them too. However, if administrators promote an outcomes based perspective with an emphasis on quality, then faculty support for accreditation activities should be expected.

A qualitative study was conducted by MacDonald and associates (2014) to explore faculty motivation to participate in their institutional assessment in different general education disciplines using a semi-structured interview approach. In addition, an *Expectancy Value-Cost Model* of motivation was applied. This study targeted faculty working in general education as area coordinators and senior administrators of general education. General education coordinators were interviewed about their perceptions of student learning outcome assessments, using a semi-structured interview approach, and then coded by consensus according to the *Expectancy-Value Theory* of motivation. It was found that faculty most frequently do not see the relevance or usefulness of assessment in their day-to-day work with students.

The Theoretical Framework

The Theory of Planned Behavior by Fishbein and Ajzen (1975) theorized that compatibility a) has to exist between specific targeted behaviors in a specific situation, in

a given time, b) specific attitudes are related to the targeted behavior for that behavior to be predicted and c) assessment of the situation is required for the prediction. They further theorized that, aside from compatibility, behavioral *intention* needs to be assessed to predict the targeted behavior. Behavioral intention refers to how much effort an individual commits to perform a behavior. Intention is ascertained by the individual's attitudes and subjective norms. The more the individual is committed to perform the behavior, the more likely the behavior is to be performed.

Using Fischbein's and Azjen's Theory of Planned Behavior, this study will measure nursing school administrator and the faculty member knowledge of newly mandated accreditation instituted by the Kingdom of Saudi Arabia's National Commission for Academic Accreditation and Assessment (NCAAA) as well as their attitudes toward the accreditation process. After taking measurements for both the knowledge and attitudes toward accreditation, the researcher will determine the effect of both knowledge and attitude towards the behavior of cooperation and participation in the accreditation process.

Theory of Planned Behavior

The Theory of Reasoned Action (TRA) provides consistency in studying the relationship between behavior and attitudes (Fishbein & Ajzen, 1975; Werner, 2004). According to Werner (2004), the Theory of Planned Behavior (TPB) is an extension of the TRA. The main idea of the TRA and the TPB is that people are rational in their decision-making, which includes their actions and the implications of those actions. Eppen et al. (1998) pointed out that the assumption for rational decision-making is that the decision is made under uncertainty.

The main concepts in TRA are compatibility and behavioral intention norms (Ajzen, 1988; Fishbein & Ajzen, 1975). Compatibility means that in order to predict a specific behavior and target in a given situation and period of time, attitudes that are related to the target, period of time and the situation should be assessed. The concept of behavioral intention states that an individual's motivation to engage in behavior is defined by the attitudes that influence the behavior. According to Fishbein & Ajzen, (1975), behavioral intention indicates how much effort an individual intends to commit to perform a behavior. The higher the level of commitment, the more likely the behavior will be performed. Behavioral intention is determined by attitudes and subjective norms (Ajzen, 1988; Fishbein & Ajzen, 1975). An attitude refers to an individual's perception, either favorable or unfavorable, toward a specific behavior (Werner, 2004).

In real life, social factors could be a determinant for individual behavior. Social factors mean all the influences of the individual's environment (such as norms) that may influence the individual's behavior (Ajzen, 1991). Ajzen (1991) proposed an additional factor in determining individual behavior in TPB, which is perceived behavioral control– or the individual's perception of how easily a specific behavior will be performed which Ajzen (1991) suggests might indirectly influence behavior. Godin, Conner & Sheeran, (2005) have shown that, when the attitude, subjective norm, and perceived behavioral control are successfully and competently controlled, moral norms improve the prediction of the intention to adopt a given behavior (see Figure 2).

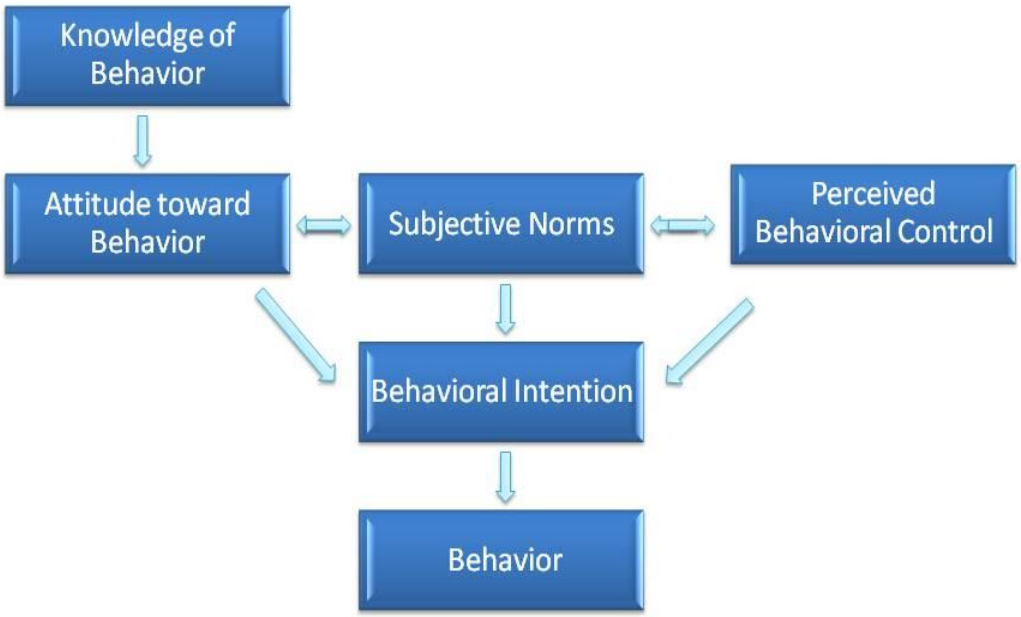

Figure 2. The Theory of Reasoned Action/Planned Behavior

Conceptual Model for the Study

Based on the application of TPB the conceptual model of this study is shown in Figure 3.

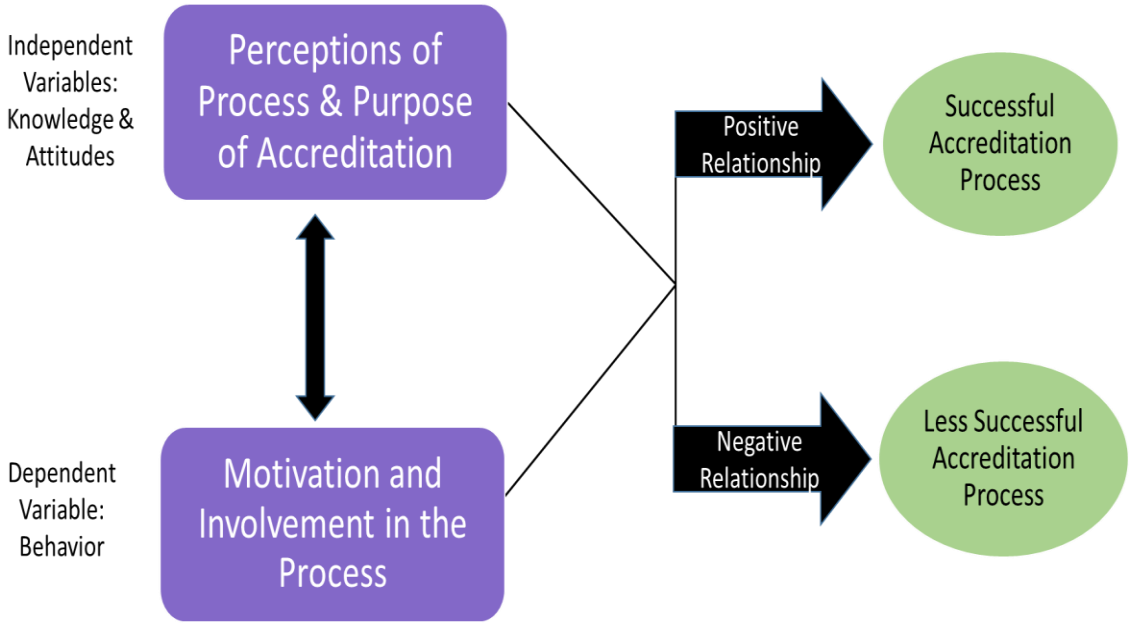

Figure 3. Research model for the relationship between perception of academic accreditation, motivation, level of involvement and its effect on the success of the process of accreditation.

Application of the Theory of Planned Behavior in Research Studies

The Theory of Planned Behavior (TPB) is one of the most widely cited and applied behavioral change theories. It is one of the closely inter-related families of theories adopting a cognitive approach to explaining behavior centering on individuals' attitudes and beliefs. The TPB/TRA, which hypothesized the intention to act as the best predictor of behavior, is an outcome of the combination of attitudes towards a behavior. Existing literature provides several reviews of the TPB. Papers that provide examples of the potential approach are summarized below.

TPB is suited to predicting behavior and retrospective analysis of behavior, and has been widely used in relation to health (Armitage & Conner, 2010; Taylor et al.,

2007). Jones (1996) suggests that the TPB can predict 20-30% of the variance in behavior brought about via interventions and a preponderance of intention. Strong correlations are reported between behavior and both the attitudes towards the behavior and perceived behavioral control components of the theory. To date, only weak correlations have been established between behavior and subjective norms.

Armitage & Conner, (2010) suggest this issue is most likely to be methodological and state that the few studies measuring subjective norms appropriately actually illustrate reasonably strong relationships with behavior. TPB is not considered useful or effective in relation to planning and designing the type of intervention that will result in behavioral change (Hardeman et al., 2002; Taylor et al., 2007; Webb et al., 2010). Using the TPB theory to explain and predict likely behavior may, however, be useful in identifying particular influences on behavior that could be targeted for change. Hardeman et al. (2002) posited that "Even when authors use the TPB to develop parts of the intervention, they seem to see the theory as more useful in identifying cognitive targets for change than in offering suggestions on how these cognitions might be changed" (p. 149).

TRA and TPB have been used to explain the adoption of Information Technology (IT) from individual perspectives. TRA was modified into the *Technology Acceptance Model* (TAM) to predict user acceptance of new computer technology (Chin & Marcolin, 2001; Legris, Ingham & Collerette, 2003). TAM uses the same principles as TRA in predicting acceptance of IT (as a behavior) from an individual's intention to accept IT. A similar outcome about using word processing programs in computers has been assessed in a study involving 107 graduate business administration students at the University of Michigan (Davis, Bagozzi & Warshaw, 1989).

TPB has been also used to explain the adoption of voice-mail technology (Benham & Raymond, 1996) and wireless application protocol (WAP) service (Hung, Ku & Chang, 2003). Riemenschneider, Harrison and Mykytyn (2003) concluded that TPB is also comparable with TAM in explaining web presence in small and medium enterprises (SMEs). Felton, Dimnik & Northey (1995) also focused on the attitudes of accounting students towards becoming a chartered accountant by employing the theory of reasoned action to develop a model that examined attitudes toward career choice.

Gibson and Frakes (1997) studied the attitudes of individuals toward reporting unethical behavior. A model was developed based on the theory of reasoned action that indicated that the intention to behave unethically was a function of attitudes toward the behavior and beliefs regarding the two constructs (attitude and behavior).

Godin et al. (2005) focused on whether the intentions of individuals were aligned with their moral norms. They employed the theory of planned behavior as a model to examine the intention to behave unethically. Marquardt and Hoeger (2009) also studied the implicit moral cognitions and decisions in the realm of business ethics, and combined the theory of planned behavior with the implicit attitude measure to test the effect of implicit moral attitudes. Stevens, Steensma, Harrison and Cochran (2005), also focused on the extent to which ethics codes are actually used by executives when making strategic choices as opposed to being merely symbolic artifacts. They combined the theory of planned behavior and stakeholder management theory finding that financial executives are more likely to integrate their company's ethics code into their strategic decision processes if the code is integrated into daily activities through ethics code training programs.

Relationship of the Concepts

The Theory of Planned Behavior will specifically assess the attitudes of administrators and faculty members of the schools of nursing toward accreditation in order to predict their cooperation and participation in the accreditation process. As knowledge about specialized accreditation increases, it is hypothesized that attitudes change for the better, and cooperation and participation in the accreditation will more likely occur.

Jones (1996) looked at the lessons psychologists have learned about how human behavior affects the environment and how these lessons can be used by planners. Jones (1996) cited Martin Fishbein and Icek Ajzen's theory of reasoned action (1975), which said that behavior is best predicted by intention, and Ajzen's theory of planned behavior (1985; 1991), which looks at the level of confidence one has in the ability to act.

Jones (1996) noted that asking the right questions is essential to gathering useful information about attitudes. Participants need to be asked questions assessing the likelihood of their taking certain actions rather than broad questions about beliefs: for example, specific action, target, context and timeframe. Jones (1996) proceeded to evaluate the relevance of Ajzen and Fishbein's thesis in terms of its value to planners. Policymakers are criticized for "lumping" all such concepts under the rubric of information, assuming that more information will result in more change. Jones (1996) concluded that planners would do well to use these elements of planned behavior to determine how members of the public might, for example, adopt wise environmental habits.

Rationale of Study

The rationale for this study is based on the impact of accreditation where the accreditation process standardizes quality of nursing education. With new mandates of accrediting schools of nursing, a study is needed to determine if nursing educators in Saudi Arabia are interested in improving the quality of nursing education by determining the perceptions of those who implement accreditation and how it relates to faculty and administrators level of motivation and level of involvement.

The review of the literature in chapter 2 demonstrates that there is a lack of both theoretical and empirical literature on faculty and administrators perceptions, motivation and level of involvement in academic accreditation.

Strengths of the Literature Reviewed

Qualitative, quantitative, mixed methods and systematic literature reviews were examined. Studies were conducted at different countries in different educational cultures such as institutions in The Kingdom of Saudi Arabia, The United States, Lebanon, Malaysia, Germany and the United Kingdom. Due to the lack of the literature regarding accreditation process in schools of nursing, specifically in KSA, the researcher included literature conducted at healthcare settings that studied the effect of accreditation on hospitals quality of care and hospital staff attitudes towards accreditation. In addition, the target population focus of many studies was on higher education experts, deans, program directors, faculty and students from different educational disciplines such as medicine, allied health and engineering schools and programs. The literature was focused on the following areas:

- Accreditation and improved student performance and learning outcomes

- Accreditation processes and its effect on the quality of education
- The effect of the positive perceptions of accreditation on the attitude of faculty and leaders working in higher education institutions and how crucial it is to understand how they behave and make decisions to achieve successful accreditation.
- Thus, the focus of the review of literature for this study was based on the following themes:
- Perceptions, Knowledge and Attitudes of Accreditation on Higher Education.
- Motivation
- Level of Involvement

Strengths were identified from the literature review. First, the literature contributed to fostering of a culture of quality in higher education institutions. Second, improving the understanding of school leaders and faculty about the accreditation process does in fact support quality assurance goals for educational programs and student learning outcomes. Third, the identification of changes linked to the accreditation process was based on the attitude of those involved in the process. Fourth, the literature supported that different types of institutions have no significant difference in motivation, definition of quality, implementation and level of involvement among faculty. Fifth, the literature supports a need for school leaders to reflect on their increasingly diverse health discipline and improve the attitude of those involved in the accreditation process by improving the understanding of how to improve the quality of education.

Limitations of the Literature Reviewed

A review of related literature shows a lack of research related to the association between the perceptions of SN faculty and administrators about academic accreditation and their motivation and involvement in the process, and how important this is to the success of accreditation. Therefore, a need for future research, which carefully investigates the relationship of leadership's perceptions with motivation and level of involvement is warranted. Another limitation was that some studies did not mention how many questionnaires were sent initially, and some did not present their tool clearly.

Summary

Previous studies implied some missing links in the accreditation process, which hampers the successful outcome of curricular and institutional changes. These variables include understanding of the change process itself, attitude towards change, and the relationship to behaviors towards accreditation. In this study, the independent variable is *perception*, consisting of the notions *knowledge* and *attitude*. Perception regarding accreditation refers to knowledge and attitudes regarding any facts, information, awareness or familiarity acquired in printed materials, verbal reports or audio-visual means, and any form of experiential knowledge and attitudes referring to an individual's favorable or unfavorable perception of accreditation (Werner, 2004). Perceptions may positively or negatively influence the individual's behavior toward accreditation such as their motivation and level of involvement.

Social factors influence individual behaviors. According to the Theory of Planned Behavior, the intention to act is the best predictor of behavior (Ajzen, 1991). Perceived behavioral control and the individual perception of how a specific behavior will be

performed is an additional factor determining individual behavior in TPB. The concept of TBP was used in this study examining whether perceptions relate to the targeted behaviors, motivation and involvement levels to augment the changes brought about by the accreditation process. Specifically, nursing school administrators and the faculty members from different schools of nursing offering a 4-year program in the Kingdom of Saudi Arabia were the participants.

CHAPTER THREE

THE STUDY METHODOLOGY

Purpose

The purpose of this study was to examine whether a relationship exists between perceptions about the academic accreditation process, with motivation and level of involvement to participate in it among the faculty and administrators responsible for introducing accreditation into schools of nursing in Saudi Arabia.

In order to address the purpose, the following aims were studied:

(a) Current perceptions of nursing school faculty and administrators about accreditation;

(b) Motivation, and level or involvement with the accreditation process of faculty and administrators;

(c) The relationship between perceptions, with motivation and level of involvement;

(d) How well perceptions predicted motivation, and level of involvement.

Data was collected using a web-based survey Likert scale questionnaire. The research aims were addressed by doing a data analysis to provide useful descriptive information to support the results of the study.

Research Design

This was a quantitative, descriptive, and correlational study design. "Quantitative descriptive correlational research describes relationships among variables" (Polit & Beck, 2008, p. 275). A descriptive correlational method was used to describe the relationship between perceptions of faculty and administrators with their motivation and level of

involvement in working on the accreditation processes. This study employed an online survey methodology. Surveys, as supported by Creswell (2013), have a special way of gaining data and are helpful in collecting information on trends, attitudes, opinions, beliefs, and practice. Attitudes, opinions, beliefs and practice were of particular interest in the proposed study. In this study, the *perception* of faculty and administrators towards the accreditation process was the independent variable, with *motivation* and *level of involvement* being the dependent variables.

Research Question

Is there a relationship between the faculty and administrators perceptions about the process and purpose of accreditation, with motivation and level of involvement in the accreditation process?

Methodology

Sample

A convenience sample of faculty and administrators was selected from 28 schools offering 4-year Bachelor of Science in nursing program and was going through the process of academic accreditation in Saudi Arabia.

Sample Size

In quantitative research, it is recommended to calculate the sample size at the research design stage (Fowler, 2009). Selecting the largest sample size possible is recommended to secure an accurate representation of the targeted population (Polit & Beck (2008). A minimum sample size of 158 was sought, achieving 80% power to detect an *r*-squared of 0.05 attributed to 2 independent variables using an F-Test with a significance level (alpha) of 0.05. The variables tested were adjusted for an additional 8

independent variables with an *r*-squared of 0.15. This population was delimited to a homogenous group of subjects through inclusion and exclusion criteria.

Inclusion Criteria

All nursing faculty and administrators who could read and understand English and had access to computers to fill out the questionnaire, participants who taught in a 4 year nursing program in a school of nursing, and who were involved in the process of accreditation in some way, either as a member of the accreditation committee or were evaluating some points of it were invited to participate.

Exclusion Criteria

Excluded were Associate and diploma degree only nursing programs, nursing faculty and administrators who have had no experience in the process of accreditation and whose schools were not undergoing accreditation during the data collection period.

Protection of Human Subjects

Ethical approval was granted by Loma Linda University, Office of the Vice President of Research Affairs for IRB approval. Required Institutional Review Board forms for international research, the research questionnaire, and the research proposal were reviewed. Ethical principles considered were respect for persons, confidentiality and beneficence/non-malfeasance.

Respect for Persons

This was a self-administered online questionnaire. The beginning statement described the study. Consent was implied when invited participants clicked on the survey link and completed the questionnaire.

Confidentiality

An online survey was used to protect the confidentiality and the anonymity of the participants, and questionnaires were randomly numbered. Data was pooled so no information about schools or individuals were identified.

Beneficence/Non-Malfeasance

Data collection methods are not to cause harm to participants, although some can cause harm that is not transparent such as observations or experiments while some can be intrusive such as interviews and questionnaires (Parahoo, 2006). Sensitive and highly personal questions can be threatening if they elicit guilt or when the respondent is alone and without support. The author also mentioned that questions on knowledge, behavior or experience may also be threatening to professionals (participants) if their employers gain access to the data they provided. A written statement on the electronic information sheet assured participants that the data collected was de-identified and remained confidential and that only the researcher had access to it.

Instrumentation

A web-based survey measured faculty and administrator's perceptions, motivation, and level of involvement in participating in the accreditation process. The study instrument, *The Perceptions with Motivation and Level of Involvement (PMI)*, is a five-point Likert-type scale derived and modified from the following two measures (see Appendix A): Baker, Morrone & Gable's, (2004), *Presidential and Political Perceptions of Regional Accreditation Effectiveness and Reform* and Welsh & Metcalf's, (2003) *Institutional Effectiveness in selected Accreditation Colleges and Universities SACS*.

The survey was composed of nine demographic items, 34 Likert scale items and a comments section allowing the participants to free text thoughts, suggestions, ideas or other information about the accreditation process. The five-point Likert scale was as follows: 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = somewhat agree, 5 = strongly agree. To avoid selection of the neutral category when lack of knowledge prevailed), an option "X" was added for items that did not apply to the participants or items they did not know. The instrument included seven questions about the variable *Perception of purpose*, ten questions about *Perception of the process*, eight questions about *Motivation* and nine questions about the *Level of involvement* variable. Demographic and descriptive information were requested at the beginning of the questionnaire, also an extra space for any additional information was provided to give the participants the opportunity to add comments and suggestions about the accreditation process.

Demographic Information

Eight mediator variables or demographic information were collected: age, gender, type of institution, years in practice, level of education, past experience of any form of accreditation, role within the school (administrator, or faculty), and phase of school performance. Demographic variables were used as mediators by the researcher to manipulate and measure the data collected to find out if the independent variable had any effect to the studied phenomenon. Therefore, the level that other factors can influence the relationship between the key variables can be defined by the mediator variables.

Independent Variables

Perceptions of the Faculty and Administrators

A questionnaire originally developed by Brown (1999), modified and used by Baker, Morrone & Gable, 2004 to study political and presidential perceptions about the effectiveness and reform of regional accreditation was redesigned to fit the intended audience. The survey was designed to assess accreditation in four areas (see Table 1). Based on the Baker, Morrone & Gable (2004) survey instrument participants were asked to assess accreditation purpose (7 items) and process (10 items). Some items were modified to fit the culture in Saudi Arabian higher education schools and institutions. Remaining questions from the original questionnaires that did not support the goal of this study were removed.

Statements from the Baker, Morrone & Gable (2004) questionnaire were used to understand participant's perceptions towards the academic program accreditation purposes and process. Demographic/descriptive information of the participants was requested. The questionnaire gave participants the option to respond to the statements on a Likert scale of six options "strongly agree; agree; neutral; disagree; strongly disagree"; and an extra option "not applicable" was also included to avoid selection bias. To reduce the response set, some positive statements in the survey were modified to introduce negative statements or statements that would most likely evoke a negative response.

Dependent Variables

Motivation and Level of Involvement of the Faculty and Administrators

A survey instrument by Welsh & Metcalf, 2003 was used to develop the questionnaire for this study. The aspects addressed in the questionnaire are summarized

in Table 1. The survey was originally used to examine faculty perspectives on accreditation-driven institutional effectiveness activities in higher education to measure the impact of four predictor variables such as quality, external and internal motivation, implementation depth and level of involvement, which were developed and presented in the form of indices to address their research questions. The literature review done by the researcher suggested that said predictor variables have an influence on faculty participation. This study looked at the relationship between faculty and administrators perceptions about the importance of academic accreditation with two variables from Metcalf's instruments which are: (1) motivation (9 items), and (2) level of involvement (9 items).

Participants Additional Comments

A space for voluntary information and comments about accreditation were provided for subjects to write free text. Comments were evaluated as qualitative information. At the end of the questionnaire, the researcher's contact information was provided for any inquiries, additional information or comments. Relevant comments were added to the "additional comments" and evaluated with descriptive qualitative methods.

Data Collection Procedures

Following appropriate institutional and ethics approval, data was collected using the following steps.

- An online questionnaire titled *Association between Perceptions with Motivation and Level of Involvement* was developed from two separate instruments. This questionnaire was designed to measure one independent

variable, two dependent variables, and eight mediator (demographic) variables.

- The instrument was pilot tested by five volunteer faculty from PSMCHS to enhance readability and understandability of the instrument content. Volunteers suggested minor changes in terminology to make it culturally appropriate for KSA. Suggested changes were incorporated into the questionnaire.
- The online survey was developed using Qualtrics® software.
- An email stating the purpose, aims, risks and benefits of the study was sent to the deans of schools. Included in the email was a link to the survey.
- Deans were requested to forward the email to faculty. The forwarding of the email constituted the dean's consent (see Appendix C).
- In two weeks a reminder e-mail or a phone call was made by the researcher to all school's deans reminding them about the study.
- Face-to-face visits with the deans, and with permission, flyer distribution and presentations at faculty meetings was needed to enlist further participation when recruitment was slow.
- The questionnaire provided a space where faculty and administrator respondents could comment about academic accreditation activities, including suggestions for improving implementation.
- Contact information was provided for any inquiries, additional information or comments**.**

- When the questionnaires were completed, they were sent back electronically through the Qualtrics® program used at Loma Linda University. Data received was encrypted, password protected and accessible only to the researcher until the study was completed.

Statistical Data Analysis

Descriptive statistics were given as mean standard deviation or median with minimum and maximum for quantitative variables, and number with percentages for categorical variables. Cronbach's alpha was used to assess the internal reliability of the items for each of the scale variables. Independent samples T test was performed to test if there were any differences in mean scores of the quantitative variables between the two academic positions. Independent samples Mann-Whitney U test was used when the assumptions of independent samples T tests were not met. Pearson Chi-Square procedure was used in the analysis to assess the association between quantitative variables. Fisher's exact test was used in the analysis when the assumptions of Pearson Chi-Square were not met.

Multiple linear regressions was used to explore the relationships between the outcome variables (continuous) and independent variables after adjusting for covariates. Statistical analysis was performed using IBM SPSS statistics (version 23; IBM Corporation 1989, 2014.) Alpha was set at 0.05 significance level.

Summary

Chapter three described the methodology including research design, sample, instruments used, ethical considerations, data collection procedures and statistical data analysis.

Table 1. Study instrument variables

Variables and level of Measurement	Number of items and type of scale	Validity	Reliability
(Perceptions of purpose and process). Adapted questionnaire from Baker, Moron and Gable, 2004. *Scale Measurement*	17 items	Content validity was established by an advisory committee composed of experts associated with specialized accreditation and with testing and survey design	On the original measure the reliability for the section on Purpose and Process were as follows: Purpose Cronbach's alpha Deans 0.70, PD* 0.67 Process Cronbach's alpha Deans 0.60 PD 0.54
(Motivation). Adapted questionnaire from Welsh and Metcalf, 2003. *Scale Measurement*	8 Items	On the original measure content validity was established by A panel of six postsecondary education professionals in the field of institutional effectiveness	A pilot study was conducted and analyzed. Cronbach's ranged from 0.67 to 0.93. Each score surpassed the 0.60 minimum criterions and all except one scale exceeded the 0.70 criterion goal established for this study. Coefficient scores for each index was higher than the related ones from the pilot study, the definition of quality index coefficient rose to 0.67 from 0.52.
(Level of Involvement). Adapted questionnaire from Welsh and Metcalf, 2003. *Scale Measurement*	9 Items		
Demographics			
Age Interval	Age in years		NA
Gender-*Nominal*	(1) Male (2) female		NA
Type of institution-*Nominal*	(1) Private (2) Public		NA

Table 1. Continued

Years in practice-*Ratio*	(1) < 1 year (2) 1 -5 y (3) 6-10 y (4) > 10y	NA
level of education-*Nominal*	(1) BS (2) Ms (3) PhD	NA
past experience of any form of accreditation-*Nominal*	(1) Yes (2) No	NA
Role within the school (instructor Administrated)-*Nominal*	(1) Faculty (2)Admin.	NA

*Program Director

CHAPTER FOUR

RESULTS

Introduction

This chapter presents results of data analyzed from the Likert-type scale survey instrument, the *Perceptions with Motivation and Level of Involvement (PMI)* (see Appendix A). A detailed discussion about data analysis, findings, results, and interpretation of the quantitative data is included in this chapter.

The purpose of this quantitative study was to examine whether there is a relationship between perceptions about the academic accreditation process and purpose, with motivation and level of involvement to participate in it among the faculty and administrators responsible for introducing accreditation into nursing schools in Saudi Arabia. The aims of this research were to a) describe current perceptions of nursing school faculty and administrators about accreditation purpose and process, b) describe the motivation and level of involvement with the accreditation process of faculty and administrators, c) analyze the relationship between perceptions with motivation and level of involvement, and d) to evaluate how perceptions will predict motivation and level of involvement. Free text comment data provided by the participants added strength to the findings of the study and helped to understand more fully the participants' perception about the accreditation process

Data Collection

Data were collected electronically using an online survey instrument from 28 Saudi Arabian nursing schools between September 2016 and February 2017. The survey was housed online at the Qualtrics® website (www.qualtrics.com) through the Loma

Linda University Information Technology Department. There was a low risk of incomplete data because the researcher built the survey in such a way that the participants were not able to skip any questions. This was accomplished by setting a "forced response" where the subject had to indicate a response to each question in order to move to the subsequent survey question. To avoid omission bias, the option "Does not apply to me or Do not know" on this survey was counted as missing data.

Recruitment Strategy Steps

1. A solicitation email stating the purpose, aims, risks and benefits of the study was sent to the deans of 28 nursing schools (see Appendix B). A link to the survey was included in the email.
2. Deans were requested to forward the email to faculty. The forwarding of the email constituted the dean's consent for faculty to participate in the study.
3. Three schools required the proposal to be approved by their own Institutional Review Boards (IRB). These IRB approvals took between 1-3 months to approve the proposal. Two schools requested a letter from the researcher's employer (The College Director at Prince Sultan Military College of Health Sciences, Dhahran, Saudi Arabia), with a copy of the Loma Linda University Institutional Review Board (LLU IRB) approval. The majority of schools were satisfied with a letter of request with the LLU IRB approval attached.
4. Every two weeks after initiating contact with the school deans via email, the researcher made follow-up phone calls and sent reminder e-mails to all school deans reminding them about the study, and asking if the invitation to participate had been forwarded to faculty.

5. Recruitment was initially slow. Some technical issues with the internet were encountered and were subsequently resolved. In order to enlist further participation, the researcher requested 15-minute presentations that were face-to-face for schools within traveling distance from the researcher's home and SKYPE virtual presentations during faculty meetings at schools that were at a greater distance.
6. All participants completed and submitted the survey using their personal or work electronic device.
7. All completed questionnaires were returned electronically to the LLU database. Data collected were encrypted, password protected and accessible only by the researcher.
8. After presentations at the different schools, a thank you card and flower bouquet was sent to each dean in appreciation for their support in distributing the survey.

Survey items were grouped into four categories related to the study purpose.

The first category was entitled *perceptions of the purpose* of academic accreditation. This category examined if school of nursing (SN) administrators and faculty understood the intentions of academic accreditation through the survey items stated, which also examined beliefs if accreditation provided an effective national system for assuring quality in higher education, specifically in schools of nursing.

The second category was the *perceptions of process* of academic accreditation which investigated an understanding of the importance of site visit functions. The primary role of the site visit is to evaluate compliance of nursing program practices with

published criteria of standards and essentials leading toward program effectiveness. Survey questions elicited respondent's beliefs about whether accreditation site visits stimulate long-term improvements and improved educational outcomes.

The third category, *motivation,* specifically examined items concerning faculty and SN administrator interest in providing a higher level of achieving institutional goals by applying accreditation standards through either self-motivation (internal motivation) or response to behaviors imposed on them (external).

The fourth category was entitled *level of involvement*. Items in this category examined whether faculty and administrators personal engagement in academic accreditation activities and level of involvement in the process predicted the degree to which academic accreditation was successfully implemented. Institutions seeking successful accreditation should strive to optimize faculty involvement in the process (Welsh and Metcalf, 2003). The researcher's intention was to examine if nursing school administrator and faculty perceptions and knowledge on the academic accreditation could improve their involvement in the process.

Since the Deans forwarded the online survey website to the faculty members in each school, there was no explicit means of knowing how many members received and participated in the study. Thus, no return rate could be fully established. Two factors influenced this result. First, there was difficulty in reaching the Deans' offices. Second, there were delays in the Deans' communication with the researcher. Data collection resulted in the acquisition of 189 surveys from 28 schools of nursing faculty and administrators. Further, in the free text comments, data were provided by 74 participants in the form of typed comments placed in the comments section of the survey.

Quantitative data from responses were imported into IBM SPSS statistics (version 23; IBM Corporation 1989, 2014). Before any analysis, a "don't know or not applicable" response option was considered missing data, and since it was not applicable for the participants, a score was not given for the questions they did not or could not answer. Additionally, all negative statements were re-coded to reverse the direction of Likert-scale values to have all tool items in the same direction, which was a positive direction in the tool used for this study.

Scale Internal Reliability

To assess the internal reliability for the five-point Likert items scale, "Perceptions with Motivation and Level of Involvement (PMI)" used in this study, Cronbach's alpha coefficient was calculated. The (PMI) scale measured the SN perceptions about the accreditation process and purpose with their motivation and level of involvement and yielded a Cronbach's alpha coefficient ranging from 0.7384 to 0.8617, which indicates a high level of internal consistency for the scale with this specific sample (Table 2).

Summary Statistics of the Main Variables

Table 2 provides the scale descriptive of the items, including Mean *(*M), Median (Mdn), and minimum (Min) and maximum (Max) scores. In a 5-point Likert-type scale ranging from 1 – 5. Average scores were perception of process, (M= 3.75), perception of purpose, (M= 3.94), motivation, (M= 3.75), and level of involvement, (M= 3.45), meaning the average of the scores leaned towards agreement with the scale items. The majority were mostly "somehow agree".

Table 2. Descriptive of the Scale of Perceptions with Motivation and Level of Involvement Variables.

Variables	α	Mean	Median	Min	Max
Perception of Process	0.86	3.75	3.86	1.75	5.00
Perception of Purpose	0.74	3.94	4.10	1.20	5.00
Motivation	0.75	3.75	3.78	1.00	5.00
Involvement	0.80	3.45	3.60	1.00	5.00

Sample Characteristics.

This section is a general description of the study participants, summarized in Table 3. The participants were almost of equal distribution in terms of age groups. Thirty-three percent were in the 20-36 age group, 36% were age 36-45 and 31% were age 46-65. The gender breakdown of the participants was 17% male and 83% female. The low number of males compared to females explains that traditionally, nursing is a female dominated profession. The majority (74%) were from government schools of nursing. Half of the sample population had over 10 years in teaching (51%). More than half of the population had past experience with accreditation (69%). The majority of the participants (63%) were highly qualified (Masters and PhD degrees) (Table 3).

Table 3. Characteristics of Participants (N=189).

Variable	N	%
Age category		
20-35	62	33
36-45	68	36
46-65	59	31
Gender		
Male	32	17
Female	157	83
Institution type		
Government	139	74
Private	50	27
Role within school		
Administrator	55	29
Faculty member	134	71
Years in teaching		
0-5	66	35
6-10	27	14
10+	96	51
Level of education		
Diploma or Bachelors	70	37
Masters or PhD	119	63
Past experience with accreditation		
Yes	129	68
No	60	32

Characteristics of Participants by Gender

A Chi-squared test analysis was calculated and showed a large number of male and female participants were in the 36 to 45 age group (37.5% and 35.7%). There were more female participants in both government and private schools (70.7% and 29.3%). Further, there were more female faculty members than female administrators. Female participants dominated over males in both administrators (37.5% versus 27.4%) and faculty members (62.5% versus 72.6%). Also, there were more female participants in

both diploma/bachelor (40.1%) and master's/doctoral degrees (60%) than males (22% and 13.2%). Lastly, more females had past experience with accreditation (55.5%) than male participants (13.2%). (See Table 4)

Table 4. Demographic Characteristics of the Study Participants by Gender.

	Male		**Female**		
	N	**%**	**N**	**%**	***P* value**
Age category					0.82
20-35	9	28.10	53	33.80	
36-45	12	37.50	56	35.70	
46-65	11	34.40	48	30.60	
					0.05
Type of Institution					
Government	28	87.50	111	70.70	
Private	4	12.50	46	29.30	
					0.25
Role					
Administrator	12	37.50	43	27.40	
Faculty	20	62.50	114	72.60	
Level of education					0.05
Diploma or Bachelors	7	21.90	63	40.10	
Masters or PhD	25	13.23	94	60.00	
Past experience with accreditation					0.37
Yes	24	75.00	105	67.00	
No	8	25.00	52	33.10	

Characteristics of Participants by Their Role in the SN

Administrators and faculty were similar in terms of age group breakdown. A majority of the faculty (74%) and administrators (73%) were from governmental institutions. Faculty had a higher level of education (masters or PhD level, 69%) while (47%) of administrators had masters or PhD qualifications. Ninety from a total of 134 (71%) of faculty had past experience with accreditation while only 34 of a total of 55 administrators had past experience with accreditation (Table 5).

Table 5. Demographic Characteristics of the Study Participants by Role Within their Institutions.

	Administrators n=55		Faculty n=134		
	N	**%**	**N**	**%**	***P* value**
Age category					0.60
20-35	16	29	46	34	
36-45	19	35	49	37	
46-65	20	36	39	29	
Gender					0.35
Male	12	22	20	15	
Female	43	78	114	85	
Institution type					1.00
Government	40	73	99	74	
Private	15	27	35	26	
Level of education					0.01
Diploma or Bachelors	29	53	41	31	
Masters or PhD	26	47	93	69	
Past experience with accreditation					0.30
Yes	34	62	95	71	
No	21	38	39	29	

Characteristics of Participants by Type of Institutions

A chi-squared test analysis revealed that the study participants in the private institutions were largely from the younger age category of 20 to 35 years (58%) than the government-based participants (23.7%). Government-based faculty members were primarily in the middle and later age groups of 36 to 45 and 46 to 65 years old (36% and 40.3%) as compared to the private-based participants. While female participants dominated in numbers in both institutions (80% in government and 92% in private), there were more male participants in the government schools (20.1%) than the private institutions (8%). Faculty members comprised more of the study participants (70% and

99%) than administrators (30% and 40%) in both institutional types. Government schools have more participants with master or doctoral degrees (69.1%) than private institutions (46%). Lastly, a greater number of faculty members and administrators who participated in the study have past experiences with accreditation (56% and 72.7%) than those with no experience (27.3% and 44%). (Table 6).

Table 6. Demographic Characteristics of the Study Participants by Type of Institutions

	Government		**Private**		
	N	**%**	**N**	**%**	***P* value**
Age category					<0.01
20-35	33	23.70	29	58.00	
36-45	56	40.30	12	24.00	
46-65	50	36.00	09	18.00	
Gender					0.05
Male	28	20.10	04	08.00	
Female	111	80.00	46	92.00	
Role					0.87
Administrator	40	28.80	15	30.00	
Faculty	99	71.20	35	70.00	
Level of education					<0.01
Diploma or Bachelors	43	30.90	27	54.00	
Masters or PhD	96	69.10	23	46.00	
Past experience with accreditation					0.03
Yes	101	72.70	28	56.00	
No	38	27.30	22	44.00	

Results of Descriptive and Inferential Analysis

Research Question and Aims

To answer the study research question "*Is there a relationship between perceptions with motivation and level of involvement?",* four aims were developed that would create a clear link between the research project and the research question:

Aim 1. Describe the Current Perceptions about Accreditation Purpose and Process by Role within the SN.

Description of the Differences in Perceptions of the Process and Purpose by Role

A Mann-Whitney test was used to assess the difference between faculty and administrator perceptions about the accreditation process and purpose. The test revealed that SN faculty (Mdn = 4.13) had a significantly higher perception of the process of accreditation than administrators (Mdn = 3.80, *P* = 0.01). Moreover, the test showed that faculty (Mdn = 3.86) were also slightly higher in their perception of the purpose of accreditation than administrators (Mdn = 3.66, *p* = 0.05) (See table 7).

Table 7. Characteristics of the Study Participants by Role Within their Institutions

Variables	**Administrators n=55**		**Faculty n=134**		
	Median	**Min,Max**	**Median**	**Min,Max**	***P* value**
Perception of Process	3.80	1.4,5.0	4.13	1.2,5.0	0.01
Perception of purpose	3.66	1.7,5.0	3.86	1.9,5.0	0.05

Description of the Differences in Perceptions of the Process/Purpose, Motivation and Level of Involvement by Gender

An independent t-test analysis was used to test the characteristics of the study participants by gender. Both female and male participants showed similar perception of purpose, process, motivation, and level of involvement (see Table 8).

Table 8. Characteristics of the Study Participants by Gender.

	Female		Male		
Variables	Mean	SD	Mean	SD	*P* value
Perception of purpose	3.76	0.89	3.74	0.72	0.92
Perception of Process	3.95	0.92	3.93	0.69	0.93
Motivation	3.51	0.71	3.44	0.67	0.95
Level of Involvement	3.72	0.92	3.75	0.79	0.84

Description in the Differences in Perceptions of the Process/Purpose, Motivation and Level of Involvement by Type of Institution

An independent t-test analysis was used to describe the characteristics of the study participants by type of institution. Government-based participants showed a significantly higher perception of purpose than those from private schools with a (M= 3.44, p= < 0.01). Participants in both government and private schools did not show any significant differences in their perception of process, motivation, and level of involvement (see Table 9).

Table 9. Characteristics of the Study Participants by Type of Institutions.

	Government		Private		
Variables	Mean	SD	Mean	SD	*P* value
Perception of purpose	3.86	0.76	3.44	0.64	<0.01
Perception of Process	3.99	0.78	3.78	0.56	0.08
Motivation	3.43	0.69	3.53	0.62	0.36
Level of Involvement	3.81	0.82	3.56	0.76	0.06

Aim #2: Describe Motivation and Level of Involvement with the Accreditation Process.

Description of the Differences in Motivation and Level of Involvement

Independent Samples Mann-Whitney U test was used to assess the differences between faculty and administrators' motivation with dichotomous variables, and the Kruskal-Wallis test was used with other categorical demographic variables.

Level of involvement. Results revealed an association between participant age (Mdn = 4.11, p<0.01), years in teaching (Mdn = 4.00, p <0.01), institution type (Mdn = 3.94, p = 0.03), level of education (Mdn = 3.94, p= 0.01), past experience with accreditation (Mdn = 3,74, p = 0.01) and level of involvement. Participants from each age category tended to have almost an equal level of involvement (age 20-35, Mdn = 3.44; 36-45, Mdn = 3.67; 46-65, Mdn = 4.11). There was not a great difference in the level of involvement based on the gender of the participants, where males showed a slightly higher level of involvement (Mdn = 4.06) than females (Mdn = 3.78). There was a slightly higher level of involvement of those working for government schools of

nursing (Mdn = 3.94), compared to private schools (Mdn = 3.50). In addition, those with over 10 years of experience in teaching showed a higher level of involvement (Mdn = 4.00), than those who had 6-10 years in teaching (Mdn = 3.89) and those who taught for five years or less (Mdn = 3.53). Moreover, highly qualified participants (Masters and PhD) tended to have higher levels of involvement (Mdn = 3.94), compared to those with less qualifications (Mdn = 3.56). Finally, participants having past experience with accreditation (Mdn = 0.00) had a higher involvement level than those who did not (Mdn = 0.00).

Motivation. Age ($p = 0.18$), gender ($p = 0.74$), type of institution ($p = 0.54$), role within the school ($p = 0.12$), years in teaching ($p = 0.82$), level of education ($p = 0.86$), and past experience with accreditation ($p = 0.12$), had no association with motivation ($p > 0.05$). Measures of central tendency showed an equal level of motivation regardless of age category (age 20-35, Mdn = 3.63; 36-45, Mdn = 3.63; and 46-65, Mdn = 3.68). There was not a significant difference in the level of motivation based on the gender of the participants (males Mdn = 3.63 female, Mdn = 3.50). Those working for government schools of nursing were more motivated (Mdn = 3.63) than those working for private schools (Mdn = 3.50). There was no difference in the motivation of those with over 10 years teaching experience (Mdn = 3.63), than those with less experience (6-10 years in teaching, Mdn = 3.63; 0-5, Mdn = 3.44). Faculty (Mdn = 3.63) were more highly motivated than administrators (Mdn = 3.44). Highly qualified participants (Masters or PhD) had a slightly higher motivation (Mdn = 3.63), than those with less qualifications (Mdn = 3.54). Participants who had past experience with accreditation (Mdn = 0.00) had a higher motivation level than those who did not (Mdn = 0.00) (Table 10 & 11).

Table 10. Characteristics of Sample with Level of Involvement.

Variable	Median	Min,Max	*P*- value
Age category			<0.01*
20-35	3.44	1.88,5.00	
36-45	3.67	1.00,5.00	
46-65	4.11	1.89,5.00	
Gender			0.77
Male	4.06	1.00,5.00	
Female	3.78	1.88,5.00	
Institution type			0.03*
Government	3.94	1.00,5.00	
Private	3.50	1.88,5.00	
Role within school			0.76
Administrator	3.78	1.89,5.00	
Faculty member	3.78	1.00,5.00	
Years in teaching			<0.01*
0-5	3.53	1.00,5.00	
6-10	3.89	2.00,5.00	
10+	4.00	1.89,5.00	
Level of education			<0.01*
Diploma or Bachelors	3.56	1.88,5.00	
Masters or PhD	3.94	1.00,5.00	
Past experience with accreditation			<0.01*
Yes	3.75	1.00,5.00	
No	3.44	1.89,5.00	

*$p \leq .05$. [a]Kruskal-Wallis test. [b] Mann-Whitney test

Table 11. Characteristics of sample with motivation.

Variable	Median	Min,Max	*P*- value
Age category			0.18
20-35	3.63	1.00.5.00	
36-45	3.63	2.25,4.50	
46-65	3.38	1.75,4.75	
Gender			0.74
Male	3.63	2.00,5.00	
Female	3.50	1.00,4.75	
Institution type			0.54
Government	3.63	1.00,4.75	
Private	3.50	1.38,5.00	
Role within school			0.11
Administrator	3.44	1.00,5.00	
Faculty member	3.63	1.38,4.75	
Years in teaching			0.82
0-5	3.44	1.00,5.00	
6-10	3.63	2.25,4.500	
10+	3.63	1.75,4.75	
Level of education			0.86
Diploma or Bachelors	3.54	1.00,5.00	
Masters or PhD	3.63	2.00,4.75	
Past experience with accreditation			0.16
Yes	3.50	1.00,4.75	
No	3.56	1.75,5.00	

*$p \leq .05$. [a]Kruskal-Wallis test. [b] Mann-Whitney test

Aim # 3: Analyze the Relationship between Perceptions with Motivation and Level of Involvement.

Correlation between Perceptions with Motivation and Level of Involvement

Spearman's correlation was used to examine the association between SN administrator and faculty perceptions about the accreditation *process* and *purpose* with their *involvement* and *motivation* in working on the process of accreditation. The test indicated the following results; 1) There was a positive, weak correlation between

perception of the purpose and motivation, (r = 15, p = 0.04). 2) A positive, moderate correlation was found between perception of the purpose and level of involvement; (r = 0.57, p < 0.01). 3) A positive, weak correlation was found between perception of the process and motivation; (r = 0.23, p = 0.01). Finally, there was a positive, moderate correlation between perception of the process and level of involvement; (r = 0; 49, p = 0.01). (Table 12).

Table 12. Relationship between Perceptions with Motivation and Level of Involvement.

	Motivation		**Involvement**	
Variable	***r***	**p-value**	***r***	***p*-value**
Perception of Purpose	0.15	0.04*	0.57	<0.01*
Perception of Process	0.23	<0.01*	0.49	<0.01*

*$p \leq .05$
r= correlation coefficient

Aim #4: Evaluate how well Perceptions Predict Motivation and Level of Involvement.

Multiple linear regression analysis was performed to explore the relationships between the perception of the accreditation process and purpose with motivation and level of involvement, after adjusting for the other variables (*age, gender, type of institution, years in teaching level of education and past experience with accreditation*).

Relationship between Perceptions of the Accreditation Process/Purpose with Motivation

The analysis of the data using multiple regression presented in Table 13, revealed a statistically significant linear relationship between the perception of the process and motivation (β = 0.40, p = <0.01). For every unit increase in the *perceptions of the process* scale, motivation values increased by 0.40. However, there was no statistically significant linear relationship between the *perception of the purpose* and *motivation* (β = - 0.05, p =

<0.59). For every unit increase in *perceptions of the purpose* scale, *motivation* values decreased by 0.05 (see Table 13).

Table 13. Association between the Perception of the Accreditation Process and Purpose with Motivation

Variables	**β**	**95% C.I.**		***p-value***
		LL	***UL***	
Perception of Process	0.40	0.21	0.59	<0.01*
Perception of Purpose	- 0.05	-0.23	0.13	0.59
Age				
20-35 (Reference)	---			
36-45	0.00	-0.26	0.27	0.99
46-65	- 0.19	-0.48	0.11	0.22
Gender				
Male (Reference)	---			
Female	-0.15	-0.41	0.10	0.23
Institution type				
Government (Reference)	---			
Private	0.14	-0.08	0.37	0.22
Role within school				
Administrator (Reference)	---			
Faculty member	0.08	-0.14	0.29	0.48
Years in teaching				
0-5 (Reference)	---			
6-10	0.19	-0.12	0.50	0.23
10+	0.15	-0.12	0.42	0.28
Level of education				
Diploma or Bachelors (Reference)	---			
Masters or PhD	- 0.16	-0.38	0.07	0.16
Past experience with accreditation				
Yes (Reference)	---			
No	0.12	-0.09	0.33	0.27

*$p \leq .05$.
Multiple Linear Regression

Relationship between Perceptions of the Accreditation Process/Purpose with Level of Involvement

Multiple linear regression was used to explore the relationship between *Perception of the Accreditation Process and Purpose* with *level of involvement* after adjusting for the other variables (*age, gender, type of institution, years in teaching level of education and past experience with accreditation*). The analysis of the data revealed a statistically significant linear relationship between the *perception of the process* and the *level of involvement* ($\beta = 0.37$, $p = <0.01$). For every unit increase in the faculty and administrators *perceptions of the process and purpose* scale, *level of involvement* values increased by 0.49. Additionally, the test revealed a statistically significant linear relationship between the perception of purpose ($\beta = 0.37$ $p = 0.01$) with level of involvement. For every unit increase in *perception of the process and purpose* scale, *level of involvement* values increased by 0.37 (Table 14).

Table 14. Association between the Perception of the Accreditation Process and Purpose with the Level of Involvement after Adjusting to Other Variables

Variables	β	95% C.I.		*p-value*
		LL	*UL*	
Perception of Process	0.49	0.30	0.69	<0.01*
Perception of Purpose	0.37	0.19	0.55	<0.01*
Age				
20-35 (Reference)	---			
36-45	-0.16	-0.42	0.09	0.21
46-65	-0.02	-0.30	0.27	0.91
Gender				
Male (Reference)	---			
Female	0.09	-0.15	0.35	0.44
Institution type				
Government (Reference)	---			
Private	0.05	-0.17	0.27	0.63
Role within school				
Administrator (Reference)	---			
Faculty member	-0.23	-0.44	-0.03	0.03*
Years in teaching				
0-5 (Reference)	---			
6-10	0.09	-0.21	0.39	0.54
10+	0.13	-0.13	0.39	0.31
Level of education				
Diploma or Bachelors (Reference)	---			
Masters or PhD	-0.09	-0.31	0.12	0.38
Past experience with accreditation				
Yes (Reference)	---			
No	-0.14	-0.35	0.06	0.17

*$p \leq .05$.
Multiple Linear Regression

Comments Data Obtained

In providing an opportunity for participants to comment using free text, they could choose to provide more information about their perceptions of nursing program accreditation that may not have been addressed through the survey questions.

Comments Analysis

Thirty-nine percent (74) of the 189 participants completing surveys used free text to write a suggestion or a comment in the designated box constituting the final question of the survey. Modified themes identified were: (a) quality improvement and (b) education.

Quality Improvement

Of the seventy-four commentating participants, 30 (41%) made a comment about quality improvement. These participants believed that accreditation is an indicator and a mechanism of academic quality in higher education.

> "Quality improvement of the program should be a continuous process not only for accreditation process".

> "….the thing is unfortunately staff at any institute cares about paper work and not about actual practice. We need a clear PROCESS to verify the effective and how to apply what is written on papers."

Education

There was a high demand for increasing the knowledge and awareness on the process of academic accreditation by the nursing faculty and administrators to be able to work on it effectively and efficiently. Of those that commented, (21) 28% expressed a need for increasing the knowledge of those required to implement accreditation in their institutions.

> "We need staff training in applying the process, so they can do effective and faster application of the quality standards."

> "We have to take courses and workshops in quality and accreditation process to be more aware about accreditation process."

Other frequent comments were on staff *involvement*. The six participants who commented believed it should be a required mandate to act collectively and not as

individuals to be able to achieve the improvement of academic quality in their institutions. Others thought that involvement of all faculty members as well as teaching assistants can achieve a high level of quality.

> "Accreditation process should be one which starts from grass root level involving all the stake holders inside and outside the organizations to achieve what is optimal."
>
> "Efforts should be made to make sure that those who are involved should be motivated enough through professional and personal incentives so that their involvement and commitment is guaranteed."
>
> "It should also be made sure that what is achieved should be maintained, it should not be something that is done just to get accredited and then all efforts go down the drain."

The remainder of the comments were 23 brief statements on themes such as time, cooperation, incentives, politics and power, experience, staff shortage and the importance of strong leadership. Strong leadership and interaction between faculty and administrators both strongly influence overall institutional effectiveness (Welsh and Metcalf, 2003).

Summary

This chapter began with an overview of the data analysis procedures, a description of the demographic characteristics of the 189 participating SN faculty and administrators, and a description of the reliability of the Perceptions with Motivation and Level of Involvement (PMI) survey instrument. The responses to each question contained within the four main variables such as; 1) the perception of the accreditation process, 2) the perception of the accreditation purpose, and 3) motivation and the level of involvement were examined using descriptive statistics, including median, minimum & maximum for the continuous variables, numbers and percentage for the categorical variables. The main focus of the study was first, to determine if there was an association

between the perception of the accreditation process and purpose with the faculty and administrator's motivation and level of involvement. Second, to determine if there was a significant change in the faculty and administrators perceptions in regard to the accreditation process, and purpose.

The data suggested that there was a statistically significant difference between the faculty and administrators *perception of process, perception of purpose* and in their level of education. There was no statistically significant difference in the participant's motivation; however, there was a statistical significance in their level of involvement based on their age category, type of institution, years in teaching and level of education. The insights gained by this research study will contribute to the lack of data regarding KSA SN faculty and administrator's motivation and involvement level in the academic accreditation process and what could significantly change perceptions and practices. Chapter 5 will provide an interpretation of the data and conclusions.

CHAPTER FIVE

DISCUSSION

In this chapter, a discussion of the implications of the findings, and how these relate to the literature are discussed. In addition, the strengths and limitations, recommendations for future research and conclusion of the study are reviewed.

Summary of Findings

Sample Characteristics

Age

The findings revealed equal sample representation in terms of percentage for each age category. Each group age was approximately one third of the sample. Thus, it could be surmised that in this sample, age bias may not have played a role in the results.

The above findings on age can be explained by Roger's theory of innovation. Change can be challenging at any age. Rogers's theory seeks to explain how, why, and at what rate new ideas and technology are accepted and spread. Understanding the benefit and the characteristics of an innovation affects the speed and the chance of spread through a social system. Knowledge, persuasion, decision, implementation and confirmation are the processes involved with innovation acceptance (Sahin, 2006). Rogers theory (1983), classified people as innovators, early adopters, early majority, late majority and laggards, can influence the rate of adoption of an innovation. This study supports the theory that both faculty and administrators could be considered in the earlier stages of innovation acceptance when it comes to the adoption of accreditation for schools of nursing in KSA.

Age and Involvement

In this study, the older the participants' age (46 to 65 years, 36 to 45 years and 20 to 35 years), the higher their involvement in accreditation. This finding suggests that with age, comes experience and maturity. More experienced and mature faculty may demonstrate higher levels of accountability and responsibility.

Gender

More females participated in this study than males. This is not surprising because according to the World Health Organization, the gender most involved in the nursing profession worldwide is overwhelmingly female (75%). ("Gender and Health Workforce Statistics", 2008). According to Saudi customs and social traditions, the nursing profession is not highly regarded and thus, is poorly paid. Some view physical care of patients such as bathing, toileting, and other assistance with personal hygiene as menial work, not worthy of Saudi citizens. *Ikhtilat* prohibits unrelated individuals of different genders from associating or working together. However, in nursing, it is a professional obligation for female nurses to associate and work with male patients and male professionals such as nurses and doctors. With most physicians in Saudi Arabia as male and patients are not limited to female, female nurses are placed in a position to work with them. Since culturally, women are viewed as temptation that provoke sensual desire (*fitna*) that in turn lead to adultery (*zina*), female nurses who work with the male population are at risk of violating *fitna* and *zina*. (Alwedinani, 2016).

Fathers frequently influence the career choices of daughters. To avoid breaches in *ikhtilat*, female family members can be discouraged from studying nursing so as not to risk bringing dishonor to the family. Such traditions lead to persistent nursing shortages

in KSA, necessitating the importation of nurses from other countries World Health Organization Report, (2006). Bringing in people from diverse countries may have affected the responses generated by the study sample. A surprising 32 percent of nurses in KSA are male, which again, may be from international sources (Male Nurses Worldwide, 2012). This high percentage may be necessary due to *Ikhtilat* since it is considered unseemly for an unrelated female to touch a male body, even if that male is a patient. This, however, is not the case in the nursing education field in Saudi Arabia. Due to gender specific facilities imposed by cultural restrictions, there are far more female faculty and administrators (Alboliteeh, Magarey, & Wiechula, 2017).

Another finding on gender showed there were more female than male participants employed in government schools of nursing while more male participants worked in private institutions. Having more female participants employed in government schools is supported by the statistical significance of female faculty having higher qualifications with either a master's or a doctoral degree than the male participants. These findings are congruent with common practice in KSA. The government schools have more resources to employ well qualified faculty than privately owned schools of nursing. Thus, more highly qualified females are employed by the well-funded government schools of nursing than privately owned schools that can only afford those with bachelor degrees. This explanation further confirms the finding that the higher qualified female participants hold administrative positions more than the less qualified male participants. Thus, there were more female than male administrators who participated in the study. Further, the study found no differences in both the male and female participants' perception of process/purpose, motivation, and level of involvement. This finding may be due to a

homogenous form of orientation on the accreditation given by the NCAAA to all the academic institutions. Further, the finding is supported by the result showing perception on process/purpose is significantly related to motivation and involvement. Thus, having the same knowledge base on the process and purpose of accreditation may have had the same effect on motivation and involvement.

Gender and Involvement

The study finding showed that both female and male participants were involved in the accreditation process. This indicates that the involvement in the accreditation process is not significantly gender specific.

Type of School

A majority of respondents were from government schools. The Kingdom of Saudi Arabia has more government than private schools of nursing (28 government versus 8 private). Government schools are larger and capable of accommodating more students which in turn necessitates more faculty. Size and number of government schools with more faculty explains the preponderance of respondents from government schools.

Type of School and Involvement

In the study, government schools were more involved in the accreditation process than private schools of nursing. This may be due to the significant finding that government schools have more qualified faculty members than private schools.

Teaching Experience

According to Lewin's change theory, the notion of "unfreezing" from the current situation is an essential prerequisite for meaningful change to occur (Lewin, 1951; Schein, 1996; Schriner, Deckelman, Kubat, Lenkay, Nims & Sullivan, 2010). Unfreezing

requires an imperative on the part of stakeholders that the current status quo is untenable and that forward movement is necessary. Lewin's theory of change supports the finding that the more experienced faculty members were moving forward from the status quo and were highly involved in the accreditation process. This moving away from the status quo may indicate having the vision of a meaningful change and what the accreditation process can do with the quality of education and the respect that comes with a reputable profession.

Teaching Experience and Involvement

The study showed that the highest involvement in the accreditation process came from faculty members with 10 plus years in teaching. One could surmise that faculty with many years of experience not having been subjected to the rigors required by accreditation, would show resistance to the newly imposed accreditation initiatives in KSA. In this study, those with 10 or more years of teaching experience had a positive outlook on accreditation. One could conclude that overall, respondents were open to the changes imposed.

Qualifications

Study findings show faculty members were more highly qualified compared to administrators (greater percentage of having masters and doctoral degrees). Highly qualified faculty members teaching on the "front line" may have been a positive influence when it came to attitudes and perceptions. Faculty members with masters and doctoral degrees could have acted as positive role models for the less qualified teachers. In essence, these individuals may be establishing the "milieu" of striving towards excellence and improvement. This is a topic for further research.

Qualifications and Involvement

Highly qualified faculty members were found to be more involved in accreditation than those with diplomas or bachelor degrees. This finding may be related to the notion that faculty members who have masters and PhD degrees may be more knowledgeable about academia, who in turn are more sensitive to the quality of education the schools offer.

Past Experience with Accreditation

Sixty-eight percent of faculty members with past experience in the accreditation process participated in the study. Accreditation preparation culminating in site team visitation can be stressful, especially if the assigned accreditation team is perceived as difficult or punitive. Therefore, previous experience may impact the respondent's participation. For many faculty, educational accreditation experience has been preceded by hospital accreditation experience.

Joint Commission International (JCI), a leader in healthcare accreditation in Saudi Arabia was established in 1994. Since then, hospitals in Saudi Arabia were mandated to undergo accreditation (Joint Commission International, 2018). The large number of nurse faculty members who have past experience with any form of accreditation may be related to the idea that at one time or another they had the experience with JCI while working in the hospital.

Past Experience with Accreditation and Involvement

Since a majority of the sample had past experience with accreditation and were involved in the accreditation process may suggest that faculty would like to improve the quality of education offered. Further, their involvement may allude to the idea that

previous accreditation experiences for the respondents were likely positive and may be the impetus to contribute to the assessment process.

Sample Characteristics and Motivation

There were no significant findings in the sample characteristics regarding motivation. Perhaps the eight items of the tool gauging motivation was not sensitive enough to determine the nuances of that variable, an important aspect of the process. Further study on motivation is needed, perhaps with measurements that are more sensitive to this concept.

Characteristics of Study Participants by Role-Administrators versus Faculty Members

This study found differences in SN administrators and faculty perceptions of the process and purpose of accreditation. The results showed that faculty members had a higher perception of the process and purpose of accreditation than administrators. This finding may be because faculty in the study had higher qualifications than many administrators (Table 5). Faculty play an important role in preparing for and implementing the details of the accreditation process, possibly leading them to have a more intricate understanding of the process and purpose than administrators (Table 7).

Baker, Morrone and Gable's (2004) study found that deans and program directors agreed with the purpose of accreditation but had different perspectives about it. Administrators were more concerned with costs, duplication of effort, and coordination than program directors.

Such role differences may have had a direct influence concerning perception of process and purpose with administrators in this study. A priority in an administrator's job

description is to have an accredited school and programs whereas with faculty, this ultimate accountability is not as heavily placed. Perhaps because of this, faculty members can afford to be more idealistic about the purpose and process. Further, though faculty and administrators have different priorities, both groups have a stake in a successful accreditation determination. Not only must a school demonstrate standards and quality, but the process must be done efficiently and cost effectively. Ultimately, the overall desire is to upgrade the image of nursing to be recognized as a highly regarded profession in KSA.

Research stresses the importance of perception in the evaluation of establishing a successful accreditation processes in an institution (Al-Sheri and Al-Alwan, 2013). Furthermore, the results confirm Suchanek et al's (2012) study finding that resistant attitudes by faculty members are related to lack of knowledge of the quality assurance or accreditation process. Elie, Safi and Chaar's (2009) study supports the hypothesis that awareness and experience of accreditation can affect how people perceive the meaning of it.

The Association between the Perception of Process/Purpose and Motivation

The correlation coefficient test showed a positive weak association between perception of process/purpose and motivation. Upon closer scrutiny using multiple linear regression, the test revealed that perception of process motivated participants more than the perception of purpose (Tables 12 and 13). This is an interesting finding because generally, participation in an accreditation event is motivated by a high perception of purpose. Four reasons may explain why perception of process motivated the participants more than perception of purpose. First, the study finding is suggestive that with

accreditation as a new concept in Saudi Arabia, participants who went through the process got more motivated as they experienced the event rather than being motivated through a preliminary understanding of the purpose of accreditation. The perception of purpose without the experience of going through the process did not motivate participants. This may indicate that faculty and administrators got more motivation with more experience with the process. Second, an important reason why the process may have motivated the participants could be related to participants building their curriculum vitae by participating in the accreditation process bringing them status in the work place. Third, the presence and participation of international faculty members in the process of accreditation may be based on their eagerness to know how the accreditation process can be adapted and translated in Saudi Arabia. Fourth, as the Saudi Arabian government is standardizing the quality of education in the country, faculty members were more motivated to go through the process to implement change for better educational and learning outcomes.

The above results indicate that attention to faculty and administrator perceptions about accreditation is important since it has a direct and positive association with motivation to work on the process of accreditation. Developing a culture of excellence, continuous quality improvement, elimination of blame or being punitive, and encouraging a spirit of respect for educators' hard work cannot be overemphasized.

The Association between the Perception of Process/Purpose and Involvement

The study showed that there was a positive moderate correlation between perception of process/purpose and the level of involvement. The multiple linear regression showed that both perception of process and purpose of the accreditation can

predict the level of involvement (Table 12 and 14).

These findings suggest that participants with a high perception of the process and the purpose of accreditation are more involved with accreditation. Research shows that involvement was identified as an important predictor of the degree to which accreditation activities were successfully implemented. If faculty perceived that accreditation did not focus on improving education, they were less likely to become involved (Welsh & Metcalf, 2003). This was a surprising finding in that the literature suggests, “Increasingly, the knowledge of the ever-changing accreditation process is the purview of a select few who are assigned this work on their campuses” (“Assessment Update," 2018).

The results are supported by Lewin’s change theory. According to the theory, individuals involved in the process are putting thought into action, which may be evidence of higher levels of motivation. Action is a driving forced which according to Lewin’s theory leads the “unfreezing” stage into the “moving” stage of change. Welsh & Metcalf (2003) found faculty involvement and support are critical to successful implementation.

The study findings that the perception of process significantly predicted motivation while the perception of process and purpose significantly predicted the level of involvement in the accreditation process differed from Welsh & Metcalf’s (2003) study results. Welsh & Metcalf’s study identified that motivation and the level of involvement of faculty members predicted perceptions of institutional effectiveness activities. The differences are that the current study used perception of the process/purpose of accreditation as independent variables and motivation/level of involvement as dependent variables. Whereas, Welsh & Metcalf (2003) utilized the

variables of motivation and involvement as independent variables and perception to institutional effectiveness as the dependent variable.

While Hasan (2010) pointed out negative attitudes of faculty members towards the accreditation process as time consuming and taking them away from their real work, the current study findings showed the opposite where the perception of the process of accreditation influenced the participants' motivation and level of involvement. This finding may be related to the fact that accreditation is a new concept among faculty members in Saudi Arabia that their perception on the process gave more weight on their motivation and involvement than just the mere understanding of the purpose. It suggests that going through the accreditation process gave Saudi Arabian participants the motivation to be involved in institutional effectiveness activities. In countries where the accreditation process is routinely conducted, the literature states participants identified the accreditation process as time consuming and bothersome. In institutions where accreditation has been repeatedly performed to maintain the quality of education, the time and cost invested to achieve quality assurance was seen as not worthy (Alkhenizan & Shaw, 2012).

The finding that participants from government schools showed a significantly higher perception on the purpose of accreditation than private institutions may be due to the greater number of highly qualified faculty members and administrators found in government schools. Those with higher qualifications in government schools may have greater understanding on the importance and advantages of accreditation on their institutions.

Limitations

The study limitations were: 1) the researcher had no control over getting participants to respond in a timely manner, and had to rely on the SN deans (and their priorities which was difficult for the researcher to influence) to support and encourage participation in the study. Respondent's surveys continued to be submitted well after data collection had officially closed. Most of those questionnaires were incomplete, so would not have added much to the results. 2) The geographical distribution of the schools made it impossible for the researcher to visit each school of nursing in the KSA to recruit more respondents. The absence of the researcher from following up with the schools of nursing that were geographically distant may have impacted the participation of both administrator and faculty members of the schools of nursing. Study subjects whom the researcher was able to visit responded immediately. 3) Internet glitches were a frustrating limitation that wasted time at the beginning of data collection. 4) The survey tool may not have been sensitive enough to detect a relationship between participants' motivation and their characteristics. 5) There was a lack of relevant literature. 6) There was no feasible way to determine a response rate.

Recommendations

It is important that schools of nursing in KSA coordinate with accrediting agencies to schedule educational opportunities for both faculty and administrators. Further, there is need for frequent, affordable seminars, in-service sessions and conferences to be made available. Deans, administrators and faculty alike need to be encouraged, allowed time off and financial support to attend these educational programs. Faculty "champions" who are highly engaged in accreditation can be designated as team

leaders and can be the “go to” individuals for information and encouragement. These highly empowered faculty can be instrumental in accreditation preparation and can help engage others. Knowledgeable faculty are empowered faculty. Empowered faculty can make a positive impact on the quality of education and SN outcomes. Examining what predicts personal engagement and level of involvement in response to the academic accreditation process will require further study. The findings from this study and the literature about accreditation changes revealed much about the attitudes and beliefs by which those who work in academia shape the educational process. It is desirable that now and in the future, Saudi Arabian schools of nursing will be adopting a culture of quality and innovation through an integral involvement of the faculty to achieve an ongoing successful accreditation designation.

Understanding faculty and administrators perceptions on accreditation provided insight about the current processes in place at institutions of higher education. Individuals within their institutions should be able to use the data from this research to evaluate faculty involvement regarding accreditation processes as it relates to faculty and administrators perceptions.

Implications

Implications for Practice

The information included in this study can be used to inform accrediting agencies and administrators about the importance of understanding how the faculty can be motivated to work on the accreditation process and make them more involved in it. Information gleaned from this study suggests administrators and accrediting agencies take into consideration improving the knowledge and understanding of those working on

the accreditation process and that it should include faculty. Additional training is foundational to a positive accreditation experience. Elements of the training and engagement of the faculty might include establishing a positive attitude towards accreditation through the following:

- "No blame" culture.
- Creating, cultivating, sustaining and measuring student learning outcomes throughout the curriculum.
- Development of a strategic plan for upcoming and re-designation accreditation.
- Involving more faculty in institutional self-study activities.
- Celebrating accomplishments.

Implications for Research

More research is needed related to the association between the perceptions of SN faculty and administrators about academic accreditation with their motivation and involvement in the process, and the influence these variables have on successful accreditation. Research that carefully investigates the relationship of leadership's perceptions with motivation and level of involvement is needed. While this study focused on the existing relationship between the SN faculty and administrator's perceptions and their motivation and involvement, further studies are required for deeper exploration into the effect of nursing school accreditation on patient outcomes and the career progression of accredited SN graduates.

The following studies are recommended.

1. Explore the challenges of nursing programs going through the process of accreditation.
2. Follow-up studies are recommended to determine attitudes and action plans of education leaders after the accreditation process has been completed and accreditation obtained.
3. Determine quality differences between the student outcomes from accredited and non-accredited programs.

Implication for Theory

This study has supported the Theory of Planned Behavior by Fishbein and Ajzen (1975), which theorizes that compatibility has to exist between the behaviors (motivation and involvement) in a specific situation (accreditation process). Further studies of how faculty and administrator attitudes can predict a successful accreditation as theorized by TPB and assessment of the situation is required for the prediction. More study is needed to explore the intricacies of individual motivation and how internal and external factors influence behavioral intention.

Conclusion

The accreditation of undergraduate nursing education is a concern that has become a growing topic of interest within the Saudi Arabian Higher Education Community. SN accreditation is important for ensuring quality standards, encouraging continuous improvement, fostering international program recognition, guaranteeing equal opportunities for students and graduates in the global market, and providing relevant stakeholders with transparent and credible information on the quality of different educational programs. Accreditation is widespread internationally in other higher

education fields, including engineering, allied health, medical education and information technology but limited in the field of nursing, particularly in Saudi Arabia. Although the nursing faculty in Saudi Arabia recognize the importance of accreditation in the quality of education and its outcomes, there have been limited opportunities for their involvement. This study used a quantitative methodological approach to explore SN faculty and administrators' perception influencing motivation and involvement in accreditation, which will ultimately affect the success of the accreditation process. This dissertation also presents an overview of American and Saudi accreditation models.

This study's findings emphasized the importance of increasing the knowledge of those implementing the accreditation process in order to boost motivation as indicated by the Theory of Planned Behavior. It was also found that past exposure to accreditation and years of teaching have a positive impact on the SN faculty and administrators involvement in the process. The majority of the participants emphasized the importance of improving their knowledge about the accreditation process and its best practices, developing a quality culture and securing administrative support.

The NCAAA has played a crucial role in promoting change in Saudi Arabian schools. However, building an effective quality culture requires great time and effort on the part of those involved in the process. Improving the quality of education in KSA schools requires teamwork and involvement of every member in planning and implementation to become a more focused, effective and applicable process. Analysis of the data led the researcher to conclude that these findings may reach policymakers and educators, prompting more effective practices in higher education accreditation in Saudi Arabia.

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APPENDIX A

ASSOCIATION BETWEEN PERCEPTIONS WITH MOTIVATION AND LEVEL OF INVOLVEMENT QUESTIONNAIRE

Click on the response below that most describes you

1- Age:
   a) 20-35 b) 36-45 c) 46-55 d) 56-65

2- Gender:
   a) Female b) Male

3- Is your institution Government or private?
   a) Government b) Private

4- Role within the school
   a) Administrator b) Faculty member

5- How many years have you been teaching?
   a) Less than 1 year b) 1 - 5 years
   c) 6- 10years d) Over 10 years

6- Level of education
   a) Diploma b) Bachelors c) Masters d) PhD

7- Have you had any past experience of any form of academic accreditation?
   a) Yes b) No

Read the statements on the left and mark your level of agreement or disagreement on the right. Knowing that 1= strongly disagree 2= disagree 3=neutral 4=somewhat agree 5= strongly agree X= don't know or doesn't apply to me

PERCEPTIONS

PURPOSE*		**1**	**2**	**3**	**4**	**5**	**Don't know or Doesn't apply to me**
1.	NCAAA accreditation provides an effective national system for assuring quality in higher education						
2.	It is effective to distinguish between the purpose of institutional and program accreditation.						
3.	NCAAA program accreditation provides an important process for improving the quality of nursing program						
4.	NCAAA program accreditation does not provide assurance that programs meet established quality standards						
5.	Peer evaluation is a major strength of program accreditation						
6.	Graduation from an accredited programs is not required for being licensed in the profession of nursing						
7.	Nursing program benefit from periodic self-evaluation required by the accrediting agency.						

	PROCESS*	**1**	**2**	**3**	**4**	**5**	**Don't know or Doesn't apply to me**
8.	The self-study is an effective feature of accreditation						
9.	Evaluation of a program's self-study against standards/essentials by a site visit team of peer evaluators is an effective feature of accreditation						
10.	The primary purpose of the site visit is to evaluate compliance of program practices with published criteria of standards/essentials						
11.	The primary purpose of the site visit is to identify areas of improvement						
12.	Site visit teams are typically composed of peers from other programs with similar missions.						
13.	Selection of peer evaluators for a site visit team is made primarily by professional staff of accrediting agency.						
14.	Selection of peer evaluators for a site visit team is a shared decision among the accrediting agency, program director and visiting team.						
15.	Program accreditation has shifted its emphasis from process to outcomes results.						
16.	Program accreditation does not need to be concerned with inputs and processes that lead toward program effectiveness.						
17.	The program accreditation process stimulates long-term improvements.						

	MOTIVATION**	**1**	**2**	**3**	**4**	**5**	**Don't know or Doesn't apply to me**
18	We mainly conduct self-study activity because of accreditation requirement						
19	Improvement of nursing program and services is the primary motivation for academic accreditation on our campus						
20	If there were no outside requirements or mandates, our commitment to academic accreditation activities would probably diminish.						
21	Evaluating the effectiveness of our accreditation process is a natural extension of the ideals of investigation and inquiry within the academy.						
22	Academic accreditation does little to affect the true quality at our institution.						
23	Changes happen so slowly at our institution that it's hard to specify what changes are based on particular evaluations.						
24	The results of our academic accreditation process seem to be more important to outside stakeholders than to our campus community.						
25	Our institution offers such quality that academic accreditation initiatives can do little to improve it.						

	LEVEL OF INVOLVEMENT	**1**	**2**	**3**	**4**	**5**	**Don't know or Doesn't apply to me**
26	I have participated in a review of my institution's mission statement.						
27	I am highly involved in academic accreditation activities at my institution.						
28	I have participated in defining specific goals for my area.						
29	I have helped formulate assessment techniques to measure progress towards area goals.						
30	I am not familiar with the academic accreditation plan for my area.						
31	I have engaged in specific assessment exercises to aid in my institutions in academic accreditation activities.						
32	I have made improvements as a result of specific assessment results from our academic accreditation activities.						
33	I am not personally aware of benefits of academic accreditation activities.						
34	We should use the results of academic accreditation activities to support budget requests.						

What comment/s or suggestion/s do you have about the accreditation process?

_____

_____

_____

* Baker, S.S., Morrone, A.S., & Gable, K.E. (2004). Allied health dean's and program directors' perspectives of specialized accreditation effectiveness and reform. *Journal of Allied Health, 33*(4), 247-254.
** Metcalf, J. (2001). Faculty and Academic Administrator Perceptions Concerning Institutional Effectiveness Importance in Selected Colleges and Universities Accredited By the Southern Association of Colleges and Schools.

APPENDIX B

SOLICITATION E-MAIL TO DEANS

Dear (Dean Name),

I am working on the research project entitled "Accreditation Perceptions and Involvement in Saudi Arabian Nursing Schools" for my PhD program. Your support in forwarding the following email including the survey link to the faculty and administrators at your institution is highly appreciated. I would be grateful if you would encourage your staff to fill out the survey in a timely manner in order to help me complete this research successfully and on time. It is recommended that each participant use their own work/personal computer or other electronic device to complete the survey. Multiple participants using the same computer might invalidate results.

Sincerely,

Amal Alaskar MSN, PhD (c)
Investigator, Graduate Division Student
Loma Linda University School of Nursing
Loma Linda, California 92354

APPENDIX C

INFORMED CONSENT LETTER

Dear Nursing Faculty and Administrators,

I am conducting a research study using an online survey about Accreditation Perceptions and Involvement in Saudi Arabian Nursing Schools. The purpose of this study is to examine whether there is a relationship between perceptions about the academic accreditation process with level of involvement and motivation to participate in it among the faculty and administrators responsible for introducing accreditation into their nursing schools in Saudi Arabia. This study will also help me fulfill requirements for a Ph.D. in nursing.

You are invited to participate in this survey if you meet the following criteria:

1. You are a Nursing faculty or an administrator involved in the process of accreditation in some way, either as an administrator (leads out in the process) or faculty member (implements accreditation criteria).
2. You teach in a 4 year program of nursing.
3. You can read and understand English and have access to computers to be able to fill out the questionnaire.

Participation in this one time voluntary survey involves answering 44 questions about the following aspects of accreditation: Perception about the purpose (7 items) and the process (10 items), motivation (8 items), and level of involvement (9 items), including 9 demographic items. The answers will be rated on a Likert scale with six options ranging from 1= strongly disagree to 5= strongly agree and X= don't know or doesn't apply to me. There is also space for free text comments and suggestions. It will take between 30 and 45 minutes to complete the survey. Approximately 158 people will take part in this study.

No identifying information about you will be collected, and your responses will be confidential. Whether or not you participate is entirely voluntary and will not affect your relationship with your school.

There is a minimal risk of breach of confidentiality; however, this risk will be minimized by using software that allows you to complete and submit the survey anonymously. The link below will take you to the survey. After you finish answering the questions, you will submit the survey electronically. You may choose not to participate, stop answering

questions at any time or choose not to submit your answers at the end without penalty. When we receive the results, no information will link your answers back to you.

Although you will not benefit directly from this study, the information provided will potentially benefit institutions of higher education who are considering accreditation.

Thank you in advance for considering this invitation. If you have any questions, please contact me by email at aalaskar@llu.edu

If you wish to proceed and participate in the survey after reading this letter, please click on the link provided below. By clicking on the link, you are giving your consent to participate.

Sincerely,

Amal Alaskar MSN, PhD (c)
Investigator, Graduate Division Student
Loma Linda University School of Nursing
Loma Linda, California, USA 92354

APPENDIX D

AUTHORS APPROVAL TO USE THEIR INSTRUMENTS

From: Jeff Metcalf [jmetcalf@kcu.edu]
Sent: Thursday, October 01, 2015 1:17 PM
To: Pothier, Patricia (LLU)
Cc: vmadden@kcu.edu; Alaskar, Amal (LLU)
Subject: Re: Question about a research measure on institutional effectiveness

Dear Dr. Pothier (and copy Amal Alaskar),

Thank you for your email, and for your interest in my research and for working with Ms Alaskar as she attempts to further add to the body of knowledge in this field. All of us who have been through the doctoral/dissertation process are grateful to those who provided assistance, whether in-person or through their published works, and I am happy to provide permission to Ms Alaskar to use any of my work she might find helpful in completing her dissertation.

Given that regional accreditation in the US was a central component of my original research (I assume she is looking at my dissertation research, but there were a few articles published using the same data set also), it seems a natural extension to consider accreditation in Saudi Arabia. I know nothing about Saudi accreditation, but am humbled to know there may be some value in the research for our higher education friends in the Middle East.

Dr. Welsh was my advisor at the University of Louisville and has since retired. If this email is sufficient for permission to utilize my instrument or other published work, great; if not, please feel free to have Ms Alaskar contact me either by email (jeff@kcu.edu<mailto:jeff@kcu.edu>) or telephone (606-474-3258).

Thank you again for your email. Best wishes to you and Ms Alaskar!

Jeff

Dr. Jeff Metcalf
President & CEO of the University
Kentucky Christian University
606-474-3258

Baker, Sarah S [ssbaker2@iupui.edu]

To: Alaskar, Amal (LLU)

Dear Amal,

I would be happy to share my instrument, but you might also want to check with Nancy Brown (contact information in dissertation). As I was pursing my journey I came across Nancy's instrument used to analyze presidents' perception of accreditation in SAC. To increase my validity she provided me approval to use and modify her instrument, which I did.

If I might be of assistance, please let me know. You have my permission to use questionnaire.

Best wishes,

Sarah

Alaskar, Amal (LLU)

To: Baker, Sarah S [ssbaker2@iupui.edu]

Hi Dr. Baker,

My name is Amal Alaskar PhD student at Loma Linda University, School of Nursing my research goal is somehow having a similar goal of your research but in nursing schools in Saudi Arabia. I really value the hard work that produced this great article and very interested in your findings, and I want to know what do I need to do to get your permission to get the questionnaire that you have used, also asking your permission to use the same questionnaire for my classes and dissertation.

Warm regards'
Amal Alaskar

APPENDIX E

INSTITUTIONAL REVIEW BOARD APROVAL

LOMA LINDA UNIVERSITY HEALTH

INSTITUTIONAL REVIEW BOARD

RESEARCH PROTECTION PROGRAMS

24887 Taylor Street • Suite 202 • Loma Linda, CA 92350

(909) 558-4531 (voice) • (909) 558-0131 (fax)

Exempt Notice ***IRB# 5160317***

To: **D'Errico, Ellen**

Department: **Nursing Graduate Programs**

Protocol: **Accreditation perceptions and involvement in Saudi Arabian nursing schools**

Your application for the research protocol indicated above was reviewed administratively on behalf of the IRB. This protocol is determined to be exempt from IRB approval as outlined in federal regulations for protection of human subjects, 45 CFR Part 46.101(b)(2).

Please note the PI's name and the IRB number assigned to this IRB protocol (as indicated above) on any future communications with the IRB. Direct all communications to the IRB c/o Research Protection Programs.

Although this protocol is exempt from further IRB review as submitted, it is understood that all research conducted under the auspices of Loma Linda University will be guided by the highest standards of ethical conduct.

IRB Chair/Designee

4/13/16

Date

Loma Linda University Adventist Health Sciences Center holds Federalwide Assurance (FWA) No. 00006447 with the U.S. Office for Human Research Protections and the IRB registration no. is IORG0000226. This Assurance applies to the following: Loma Linda University, Loma Linda University Medical Center (including Loma Linda University Children's Hospital, LLUMC East Campus Hospital), Loma Linda University Behavioral Medicine, and affiliated medical practices groups.

IRB Chair:
Travis Losey, MD
Department of Neurology
(909) 558-4531, tlosey@llu.edu, Pager #1290 for emergencies

IRB Administrator:
Linda G. Halstead, MA, Director
Research Protection Programs
Ext 40570, Fax 80131, lhalstead@llu.edu

IRB Analyst:
[illegible], MPH, CCRP, CIP
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