

**National Commission for Academic Accreditation &
Assessment**

**HANDBOOK FOR QUALITY ASSURANCE AND
ACCREDITATION IN SAUDI ARABIA**

PART 3

**EXTERNAL REVIEWS FOR ACCREDITATION
AND QUALITY ASSURANCE**

DRAFT
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HANDBOOK PART 3

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AND QUALITY ASSURANCE**

National Commission for Academic Accreditation & Assessment

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TABLE OF CONTENTS

	Page
Introduction	3
Chapter 1 Applications for Approval and Accreditation of Higher Education Institutions and Programs	4
1.1 Stages in Approval and Accreditation of a New Private Institution	4
1.2 Ministry of Higher Education and Commission Requirements at Each Stage	5
1.3 Changes in Accredited Programs	12
1.4 Changes in Scope of an Institution’s Activities	12
1.5 Proposals for Approval and Accreditation of New Private Universities	12
1.6 Recently Established Private Institutions With a License for a University	13
1.7 Approval and Accreditation Stages f a New Private University	13
1.8 Institutions Based in Other Countries Wishing to Operate in Saudi Arabia	14
1.9 Stages of Approval and Accreditation for New Public Institutions	16
1.10 Stages in Accreditation for Existing Institutions	17
Chapter 2 Timeline and Summary of Processes for the Planning and Conduct of an External Review	19
2.1 Scheduling an External Review	19
2.2 Activities Prior to a Review	20
2.3 Activities During a Review	21
2.4 Activities After a Review	22
2.5 Preparations by an Institution for an Institutional Review	22
2.6 Preparations by an Institution for an External Program Review	24
2.7 Preparations by the Commission for an External Review	27
Chapter 3 Conduct of an External Review	29
3.1 Summary of Activities	29
3.2 Sample Review Programs	30
Chapter 4 Role and Responsibilities of External Review Panels	35
4.1 Qualities Required in External Reviewers	35
4.2 Responsibilities of Review Panel Members	36
4.3 Responsibilities of the Chair of a Review Panel	37
4.4 Avoidance of Conflict of Interest	37
4.5 Verifying Conclusions in an Institution’s Self Study	38
4.6 Techniques for Information Gathering by a Review Panel	40
4.7 Some Issues in the Conduct of External Reviews	43
4.8 Deciding on Recommendations	45
4.9 Preparation of a Review Report	46
4.10 Action Following a Review	47
4.11 Management of Disputes and Appeals	47
Attachments	
1. Documents and Information Required to Meet Ministry of Higher Education Requirement For a New Higher Education Institution	50
2. Application Form for Provisional Accreditation of an Institution	51
3. Information Required by the Commission in a Proposal for Provisional Accreditation of a New Program	57
4. Annual Reports on Changes in Accredited Programs	59
5. Requirements for a University	64

INTRODUCTION

The National Commission for Academic Accreditation and Assessment has been established in the Kingdom of Saudi Arabia with responsibility for determining standards and criteria for academic accreditation and assessment and for accrediting post secondary institutions and the programs they offer. The Commission is committed to a strategy of encouraging, supporting and evaluating the quality assurance processes of post secondary institutions to ensure that quality of learning and management of institutions are equivalent to the highest international standards. These high standards and levels of achievement must be widely recognized both within the Kingdom and elsewhere in the world.

This handbook has been prepared to assist institutions to introduce and develop internal quality assurance processes and to prepare for the external peer reviews that the Commission will conduct to verify the achievement of high standards of performance.

Part 1 of the handbook is intended to give a general overview of the system for quality assurance and accreditation> It describes the principles that underlie the approach taken by the Commission, summarizes standards that will be applied in quality assurance and accreditation judgments, and briefly outlines the stages involved in the approval of institutions and accreditation of programs. This part of the handbook also includes an explanation of a number of terms used for the quality assurance and accreditation system in Saudi Arabia.

Part 2 of the handbook focuses on internal quality assurance processes. It provides advice on establishment of an institution's quality center, processes of planning, evaluation and internal reporting on educational programs, and self study and improvement of institutional activities. Templates for use in preparing reports are included in appendices.

Part 3 of the handbook provides details of what is required in preparation for and conduct of external reviews. These processes relate to applications for approval and accreditation of a new institution, the accreditation and re-accreditation of programs, and institutions on a five year cycle.

Parts 1, 2 and 3 of the handbook should be read in conjunction with two other key documents, a *National Qualifications Framework* setting out the learning expectations and credit requirements for levels of academic and technical awards and two documents setting out standards for accreditation. The standards deal with eleven areas of activity in higher education institutions. The primary standards documents are *Standards for Quality Assurance and Accreditation in Higher Education Institutions* and *Standards for Quality Assurance and Accreditation of Higher Education Programs*. Both of these are accompanied by companion documents providing self-evaluation scales for assessment of performance in relation to the standards. Supplementary documents dealing with special issues relevant to distance education, and to programs in different special fields are in preparation. Separate statements of standards for technical training will also be provided. These documents explain the standards expected by the Commission and are intended to serve as important guides for continuing improvements in quality.

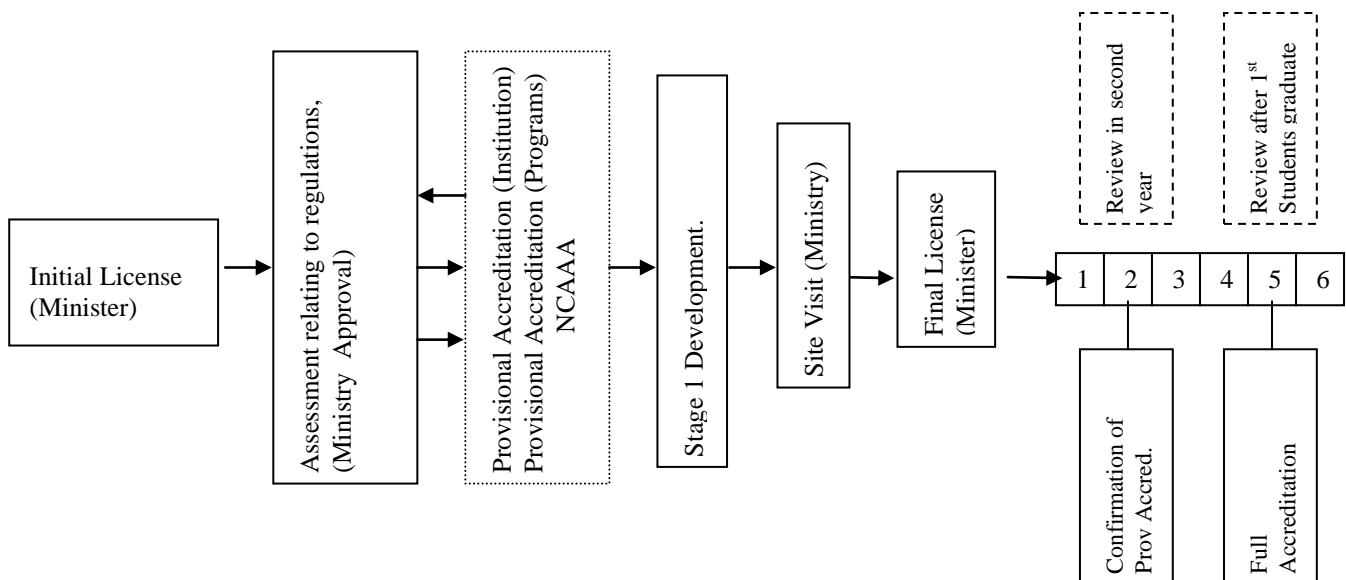
CHAPTER 1

APPLICATIONS FOR APPROVAL AND ACCREDITATION OF HIGHER EDUCATION INSTITUTIONS AND PROGRAMS

1.1 Stages in Approval and Accreditation of a New Private Institution

The stages of approval and accreditation of a new private higher education institution are described in Chapter 3 of Handbook 1 *Standards and Processes for Quality Assurance and Accreditation*. In summary they involve:

1. An application to the Ministry of Higher Education for an Initial License;
2. If the Initial License is granted the applicant develops detailed plans for the establishment of the institution and the programs to be offered, to meet the requirements of the Ministry of Higher Education and the National Commission for Academic Accreditation and Assessment(the Commission).
3. An application is made to the Ministry of Higher Education for approval to establish the institution.
4. The Commission assesses the plans in relation to its requirements for provisional accreditation of the institution and the programs to be offered within the first three years. The Ministry and the Commission will consult about the proposal to ensure that both sets of requirements are met.
5. If both these requirements are met the applicant will be advised by the Ministry and should then proceed with stage 1 of the development of the institution by acquiring facilities and equipment and recruiting initial staff. Stage 1 developments are the preparations required before the first students are admitted.
6. A site visit is undertaken by the Ministry to check that stage 1 developments have been completed.
7. When stage 1 has been completed in keeping with the approved plans the Ministry will recommend to the Minister that he issue a license enabling the institution to commence operations and enroll students. The license will specify the institution's scope of operations, that is the fields of study and the levels of qualifications that can be offered.
8. Initial activities will be monitored by the Ministry and the Commission, and if everything is satisfactory the Commission will issue a confirmation of provisional accreditation in the second year.
9. When the first students have graduated there will be a review of the institution and at that stage it may be granted full accreditation.



Special Note.

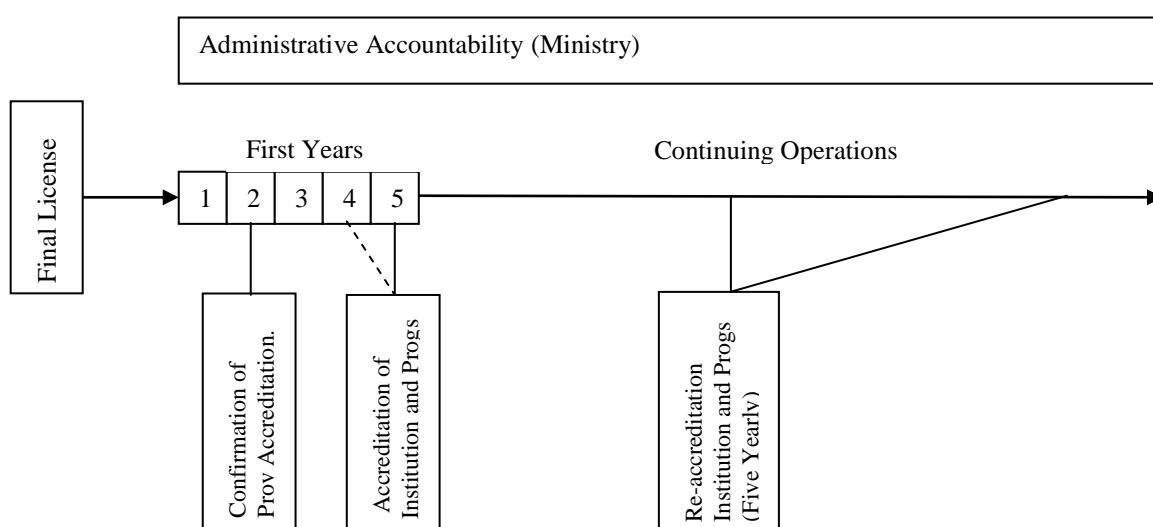
It is essential that planning be done for the institution and for the initial programs in full compliance with the Saudi Arabian requirements. If assistance in planning is provided by an outside organization, that organization must be fully briefed at the beginning about all the local requirements. Proposals that do not include all the required information in the required format (eg. program and course specifications) will not be considered.

10. Initial activities will be monitored by the Ministry and the Commission, and if everything is satisfactory the Commission may in the second year issue a confirmation of provisional accreditation.

11. Self studies for accreditation should begin in the fourth year in preparation for an assessment for accreditation in the fifth year when the first students have graduated. At that stage the institution and initial programs may be granted full accreditation.

12. If full accreditation is not granted the consequences will depend on the seriousness of problems found and one extension of provisional accreditation may be given for a maximum of two years. Further details of decisions that may be made and consequences of failure to gain accreditation are provided below.

13. After the institution, and the programs it offers have been accredited self studies and undergo external reviews for re-accreditation will be required every five years. (The timing of these periodic reviews may be varied by the Commission).



At any time additional programs can be added within the limits of the institutional approval and the final license, but must first receive provisional accreditation by the Commission. Extension of the institutions final license to offer programs in additional fields of study or at higher levels will require approval of the Ministry and amendment to the institutions final license.

An international institution or other organization wishing to establish an institution in Saudi Arabia, or to establish a branch campus linked to an institution based elsewhere will be treated as though it is a private institution and must follow the same processes, including an application for an initial license. However there are some special requirements associated with the relationship between the Saudi Arabian institution or campus and the parent institution. These requirements are included in the general descriptions set out below and in Appendix 1 to this Part 3 of this Handbook

1.2 Ministry of Higher Education and Commission Requirements at each Stage.

1.2.1 Initial License

Requirements for an initial license for a private higher education college are set out in Articles 2 and 3 of the *Executive Rules and Technical Procedures for the Bylaws for the Private Colleges*.

These bylaws, rules and procedures set out requirements for the legal structure of the organization that will be responsible for founding the institution, and the documentation required in a proposal for an initial license. There are a number of specific requirements relating to the founders and their contributions to the venture, the mission and goals, title and location of the institution, and the departments and academic awards it proposes to offer, and the proposed date of commencement. Specific provisions must be made for financial guarantees to protect the interests of enrolled students, and an independent feasibility study must be provided.

The initial license is an authorization to begin detailed planning but does not give the right to do any more than that. A copy of the initial license must be provided at the next stage, the applications for general approval by the Ministry and provisional accreditation by the Commission.

Requirements for private technical colleges and institutes may be obtained from the Technical and Vocational Training Corporation (TVTC).

1.2.2 Ministry Requirements for General Approval

For higher education colleges the requirements of the Ministry of Higher Education are set out in Article 4 of the *Executive Rules and Administrative and Technical Procedures for the Bylaws for the Private Colleges*. These include a number of specific requirements for facilities and equipment, and for academic administration. Article 5 sets time limits for these arrangements to be completed. A summary of these requirements is set out in Attachment 1.

Applicants should be aware that although the Ministry of Higher Education has not repeated the details of its requirements for private colleges in its requirements for a private university, the Commission will expect those requirements to be satisfied in a proposal for a private university before it will give its provisional accreditation.

Detailed plans for the establishment of the institution should be provided describing facilities, equipment and operational procedures in sufficient detail to clearly indicate what will be done to meet the Ministry's requirements. The plans must include details of staged development of facilities, acquisition of equipment and appointment of staff to ensure that adequate provision is made at an initial stage before students are first admitted (Stage 1), and that further provision is made over the first five years as numbers increase and additional courses are offered.

The requirements of the Ministry of Higher Education for educational programs are set out in Article 6 of the *Executive Rules and Administrative and Technical Procedures for the By Laws of the Private Colleges*. They include a number of specific requirements relating to library provisions, equipment required to assist teaching processes, student records equipment, course and program details and provisions for academic staffing.

The feasibility statement included with the application for an initial license should be updated with details of anticipated costs and other matters incorporating any amendments as a result of this detailed planning.

For post secondary institutions that will be responsible to other ministries or government agencies, details of requirements must be obtained from the ministry or agency concerned.

1.2.3 Commission Requirements Provisional Accreditation of a New Institution

To meet the Commission's requirements for provisional accreditation the applicant must submit details of plans and operational procedures in sufficient detail to indicate that its standards will be met. Details of documents that must be provided are included in Attachments 2, 3 and 4 of Part 3 of this Handbook.

The plans must include listings of internal policies procedures and regulations that are to be prepared prior to admission of the first students (Stage 1 preparation), and a timeline for the preparation and implementation of any additional policies, procedures or other arrangements relevant to the institutions quality assurance system.

The standards for higher education institutions are summarized in Part 1 of this Handbook and described in greater detail in the Commission's publication, *Standards for Quality Assurance and Accreditation of Higher Education Institutions*. (A companion document setting out self evaluation scales based on these standards is also available from the Commission).

The provisional accreditation of an institution indicates that after considering the plans the Commission believes that an institution will meet its standards and that it will have the capacity to offer educational programs in the proposed fields of study up to the levels specified in the proposal.

An application for the provisional accreditation of a higher education institution must be accompanied by applications for provisional accreditation of programs to be offered in the first three years.

Requirements and processes for the provisional accreditation of programs are set out in Section 1.2.4 below.

Processes Followed by the Commission

Members of staff of the Commission will be available to provide advice to the applicant on its requirements if required. However this advice will be without prejudice to a decision on the proposal, which will be made by the Commission after receiving independent advice from a review panel and its Advisory Committee on Accreditation.

When a proposal is received it will be checked by the Commission to ensure that necessary information has been included. Additional information or modifications may be requested.

The Commission will appoint an independent panel to evaluate the proposal in relation to the requirements referred to above, and provide a report on the proposal including advice on the extent to which the Commissions requirements for accreditation will be met. The review panel may request additional information on particular matters, may meet with designated representatives of the proposed institution, and may conduct site inspections.

The report of the review panel, together with the initial proposal, will be considered by the Advisory Committee on Accreditation. That committee will consider the proposal and the panel's report, and prepare advice for the Commission on whether provisional accreditation should be granted.

The proposal, the report of the review panel, and the advice of the committee will be provided to the Commission, which will decide on its response. The Commission may decide:

- (a) That provisional accreditation of the institution should be granted.
- (b) That the provisional accreditation of the institution should be deferred for up to one year so that additional required information can be provided or to remedy specific problems that have been identified. This alternative will be used if most but not all requirements have been met and the Commission believes there is a high probability that a subsequent submission could succeed.
- (c) That provisional accreditation should be denied.

If provisional accreditation is granted or deferred the Commission may establish conditions that must be met.

If provisional accreditation is denied the proposal will not be reconsidered before two years have passed, and the whole process must be recommenced beginning with a new application for an initial license.

1.2.4 Commission Requirements for Provisional Accreditation of Programs in a New Institution

Proposals should be made for provisional accreditation of all programs that the proposed new institution wishes to offer during its first three years of operation. At least one must have successfully completed this process before a license can be issued permitting the institution to begin.

The plans for the programs must be set out in program and course specifications in the format required by the Commission, with additional descriptions and program policies and processes as described in Attachment 4 to Part Three of this Handbook.

The standards for accreditation of higher education programs are set out in *Standards for Quality Assurance and Accreditation of Higher Education Programs*. For the Commission to grant provisional accreditation of a program it must be satisfied that if plans for the program are implemented as described it is likely that full accreditation will be granted once the program has been established. Consequently these standards should be studied carefully, and additional explanatory information provided if thought to be necessary to explain fully what is intended.

Programs must comply with the *National Qualifications Framework* which sets out general requirements for credit hours and standards for learning outcomes for each qualification level. They must also meet more specific requirements for programs in various professional fields. Until special

professional field requirements are developed by the Commission consideration should be given to the special requirements of a recognized international accrediting agency in the field concerned.

As noted above provisional accreditation must have been granted for at least one program before a final license is issued. Additional programs can be provisionally accredited at any time if they are within the fields of study and the levels for which an institution has a final license. (Though this must be done before students can be admitted to the programs concerned.)

It is also possible for a final license to be modified to extend the institution's scope of operations and permit additional programs in other fields or at other levels. Such an extension must be approved by the Ministry. See section dealing with Changes in Scope of an Institution's Activities below.

Proposals for provisional accreditation of a new program (and any additional programs proposed at a later time) should be submitted at least 9 months before the proposed first enrollment of students in the program.

Institutions responsible to Ministries or organizations other than the Ministry of Higher Education may also have to meet particular requirements established by them. Details of requirements should be obtained from the Ministry or organization concerned.

Processes Followed by the Commission

Members of staff of the Commission will be available to provide advice to the applicant on requirements for the program proposals if required. However as for provisional accreditation of an institution this advice will be without prejudice to final decisions on the proposals which will be made by the Commission.

When proposals are received they will be checked by the Commission to ensure that necessary information has been included. Additional information or modifications may be requested.

The Commission will appoint an independent panel or panels with expertise in the program areas concerned to evaluate the program proposals in relation to the requirements referred to above, and provide reports on the merits of the proposal and the extent to which those requirements are met. The review panels may request additional information on particular matters, may meet with designated representatives of the institution, and may conduct site inspections.

The reports of the review panels, together with the initial program proposals, will be considered by the Commission's relevant advisory committee on accreditation. That committee will consider the proposals and the panel's reports, and prepare advice for the Commission on whether provisional accreditation of the programs should be granted.

After considering the panel reports and the advice of the advisory committee the Commission will decide on its response.

The Commission may decide for each program considered:

- (a) That the program should be provisionally accredited.
- (b) That the provisional accreditation be deferred for up to one year so that additional required information can be provided or to remedy specific problems that have been identified. This alternative will be used if most but not all requirements have been met and the Commission believes there is a high probability that a subsequent submission could succeed.
- (c) That the provisional accreditation be denied.

The Commission may establish conditions that must be met.

The provisional accreditation of a program will remain valid for a period until two years later than the time when the first group of students is expected to graduate. This time allowance is designed to allow for a self-study of the program and an external review by the Commission before a decision is made on whether the program should be fully accredited.

1.2.5 Notification of Approval and Accreditation

When the Ministry of Higher Education has approved the plans for the institution and its initial programs, and provisional accreditation has been granted by the Commission, the applicant is formally notified by the Ministry. The applicant can then proceed with First Stage development of facilities and acquisition of equipment, appointment of key staff and preparation of detailed policies, procedures and supporting materials for quality assurance with reasonable confidence that a final license will be granted.

1.2.6 . Final License

When the first stage of this development (Stage 1), that is, the facilities, staffing and other matters required before the first students are admitted have been completed, the Ministry will conduct a site visit and conduct further investigations if necessary to check that the requirements have been met.

To obtain a final license the applicant should apply to the Ministry, and include with that application documents from the Commission granting provisional accreditation of the institution and the program(s) and letters from the Ministry and the Commission advising that Stage 1 developments have been satisfactorily completed. (The Ministry of Higher Education will require some additional information including financial guarantees as specified in Article 8 of the *Executive Rules and Administrative and Technical Procedures for the By Laws of the Private Colleges*.)

If the Minister, after receiving this documentation, approves the application a final license will be issued.

The institution may then admit its first students to programs that have been provisionally accredited and proceed with its planned developments.

An institution must not admit students to any programs until a final license is issued. If students are admitted before this it will be subject to strong disciplinary action and the general approval and provisional accreditation may be cancelled.

Unless special permission has been given by the Ministry, advertising of the institution or its programs is not permitted until a final license has been issued.

During the initial development period, that is until the institution and the initial programs have been fully accredited, summary annual reports must be submitted to the Commission which will monitor the implementation of planned activities and may visit the institution or examine relevant documents to check on progress. During its second year of operation the Commission will arrange an inspection to satisfy itself that the approved plans are being satisfactorily implemented and may issue a formal statement giving confirmation of the provisional accreditation.

Annual reports may also be required by the Ministry or other organization to which the institution is responsible.

If the required reports are not provided, or if the plans on which the Commission's provisional accreditation were based are not implemented as proposed, the Commission may suspend its provisional accreditation of the institution or its program(s) and will notify the relevant Ministry or other organization that it has done so. If provisional accreditation is suspended, or if its own requirements are not met, action may be taken by the Ministry or organization under its own rules and procedures to enforce implementation of the plans or impose other sanctions including but not limited to financial penalties or preventing the admission of further students.

1.2.7 Full Accreditation of a New Institution

When the first group of students have graduated the institution should conduct a self-study following the processes outlined in Chapter 3 of Part 2 of this Handbook. This self study should commence during the year in which that first group of students is expected to complete their programs, and be finalized early in the following year when the results obtained by those students are known. In keeping with the principle that the institution should accept primary responsibility for quality, the report on this self-study is an important element in the institution's quality assurance procedures. However it also

provides important documentation for the external review conducted by the Commission before it considers whether full accreditation should be granted.

The Commission will not consider for accreditation any institution that is in breach of Ministry requirements, for example if it is offering programs beyond the scope of its license, or if it is using a title for the institution that misrepresents its license (eg. representing itself as a university when it has a license to operate as a college).

To carry out its external review the Commission will appoint an independent review panel to study documents prepared, visit the institution to inspect facilities and equipment, interview faculty, staff and students, and provide a report.

The standards that will be applied by the Commission are those set out in the *Standards for Quality Assurance and Accreditation of Higher Education Institutions*. To be accredited the institution must meet the requirements of the Ministry of Higher Education (or other ministry or organization to which the institution is responsible) have been met. Because of this a report on the extent to which such requirements have been met should be attached to the self study report.

The preparations that are required by an institution before an external review of the institution takes place, and the actions taken by the Commission and the review panels it appoints are the same as for later five yearly reviews. They are described in Chapters 2 and 3 of Part 3 of this Handbook.

The report of the review panel, together with the initial proposal, will be considered by the Commission's Advisory Committee on Accreditation. That committee will consider the proposal and the panel's report, and prepare advice for the Commission on whether provisional accreditation should be granted.

The self study report, the report of the review panel, and the advice of the committee will be provided to the Commission, which will decide on its response. The Commission may decide on one of the following alternatives:

- (a) That full accreditation should be granted
- (b) That the provisional accreditation be extended for a specified period of time up to a maximum of two years to allow the institution to remedy specific problems that have been identified.
- (c) That the provisional accreditation be withdrawn.

If full accreditation is granted the Commission may establish conditions that must be met.

If provisional accreditation is extended a further review will be conducted at the end of the period of extension to determine whether the problems have been resolved. If they have been resolved full accreditation will be given. If they have not been resolved the provisional accreditation will be withdrawn.

If provisional approval is withdrawn the Minister will be informed and action taken under Ministry regulations, including possible revocation of the institution's license and closure of the institution.

1.2.8 Full Accreditation of a Program

The procedures outlined below refer to individual programs. However the Commission may consider closely related programs in similar fields at the same time, and in a small institution with only a few programs, may consider full approval of the institution and full accreditation of programs simultaneously.

Because of the close relationship between institutional activities and program functions that support programs and the quality of individual programs at an institution accreditation of an institution is normally a prerequisite for full accreditation of a program. However as noted above it is possible for some programs to be considered for accreditation concurrently with an institutional accreditation evaluation.

A self-study of the program should be conducted following the processes outlined in Chapter 2 of Part 2 of this Handbook and following the template for a periodic program self study in the attachment to

that document. This self study should commence during the year in which the first group of students is expected to complete the program, and be finalized early in the following year when the results obtained by those students are known. In keeping with the principle that the institution should accept primary responsibility for quality, the report on this self-study is an important element in the institution's quality assurance procedures. However it also provides important documentation for the external review conducted by the Commission before it considers whether full accreditation should be granted.

The Commission will appoint an independent review panel to carry out the review and provide a report.

The standards that will be applied by the Commission are those set out in the *Standards for Quality Assurance and Accreditation of Higher Education Programs* including consistency with the requirements of the *National Qualifications Framework* and particular requirements for the field of study concerned. (Particular attention will be given to the standard for Quality of Learning and Teaching, but the other standards must also be met).

The preparations that are required before an external review of a program takes place, and the actions taken by the Commission and the review panels it appoints are the same as for later five yearly reviews. They are described in Chapters 2 and 3 of this part of the Handbook and will not be repeated here.

The reports of the review panel, together with the program self study report, will be considered by the Commission's relevant advisory committee on accreditation. That committee will consider the self study and review panel reports, and prepare advice for the Commission on whether full accreditation of the program should be granted.

The Commission may decide on one of the following alternatives:

- (a) That the program should be fully accredited
- (b) That the provisional accreditation be extended for a specified period up to a maximum of two years to remedy specific problems that have been identified.
- (c) That the provisional accreditation be withdrawn.

If full accreditation is given the Commission may establish conditions that must be met.

If provisional accreditation is extended a further review will be conducted at the end of the period of extension to determine whether the problems have been resolved. If they have been resolved full accreditation will be given. If they have not been resolved the provisional approval will be withdrawn.

If provisional accreditation is withdrawn the Ministry will be notified and action will be taken under its regulations. This may include a requirement that the institution cease offering the program and make acceptable arrangements for the continuation of studies by students enrolled in the program at the time the decision is made.

1.2.9 Re-accreditation of Institutions

After institutions have been given full accreditation they will be expected to complete a self-study within five years, and participate in an external peer review conducted by the Commission for re-accreditation every five years.

1.2.10 Re-accreditation of Programs

After a program has been fully accredited further self-studies and external reviews by the Commission should be conducted for re-accreditation every five years.

The Commission may require earlier reviews of institutions or of programs if it believes they are needed.

1.2.11 Ongoing Evaluations and Mid-cycle Reviews

It is expected that an institution, and each program within it, will monitor its quality of performance at least on an annual basis. The approach taken will vary according to differing circumstances but should

include consideration of predetermined performance indicators, and also close attention to any matters identified for special attention in quality improvement strategies.

In addition to this annual monitoring which may be focused primarily on selected issues there should be a more comprehensive overview of quality of performance part way through the formal self study and external review cycle. (e.g. every two or three years.) This should be based on the standards identified by the Commission and should identify any matters requiring attention. However its purpose is for internal institutional monitoring and planning purposes and reports to an external body are not normally required.

1.3 Changes in Accredited Programs

It is expected that programs will be constantly monitored and that changes will be made as required in response to evaluations and to new developments in a field. However if a major change is made the basis for accreditation could be affected and the Commission should be notified at least one full semester in advance, so it can assess the impact of the change on the program's accreditation standing.

If a major change is made without the Commission being informed at least one full semester in advance the accreditation of the program will lapse. The consequence of that is that the program is no longer accredited and must be re-submitted for accreditation.

A major change is one that significantly affects the learning outcomes, structure, organization or delivery of a program or the basis for its accreditation.

Examples of major changes would be the addition or deletion of a major track within a program (eg. accounting or international finance majors within a commerce or business degree), the addition or deletion of a core course of study (eg. mathematics in an engineering degree), a change in title that implied a new or different field of study, re-orientation or development of a program to prepare students for a different occupation or profession, or a change in the title of a program or award that implied coverage of a different field of study or professional preparation, a change in the length of a program, or a new exit point within a longer program (eg. the granting of a diploma within a bachelor degree program).

To enable the Commission to monitor developments in accredited programs institutions are expected to provide brief annual reports on changes made, using the template provided for this purpose in Attachment 4.

1.4 Changes in Scope of Institution's Activities

It is possible for a license to be modified to extend the institution's range of authorized activities and permit additional programs in other fields or at other levels. Detailed plans for the extension that demonstrate the institution's capacity to manage the expended range of activities are required. The Ministry's approval must be obtained, the Commission must indicate that its quality assurance requirements would be met, and the Minister must agree and approve a change to the institutions final license.

The first step in this process is to develop a proposal that meets any requirements established by the Ministry and apply to the Ministry for general approval of the change. An application must also be submitted to the Commission for provisional accreditation of the institution with the proposed extended range of activities, and for provisional accreditation of the additional programs proposed.

If the Ministry approves and the Commission grants provisional accreditation the Ministry may recommend to the Minister that the license be changed to provide for the additional activities proposed.

1.5 Proposals for Approval and Accreditation of New Private Universities

Proposals for new private universities will be considered following the same steps as other private institutions. A private university must meet the same general standards as other higher education institutions as outlined in the *Standards for Quality Assurance and Accreditation of Higher Education Institutions* and the requirements of the Ministry of Higher Education. However there are also

additional requirements for a university. These include Ministry requirements that require programs in at least three colleges and Commission requirements relating to range of fields of study, level of programs, involvement in research, faculty participation in scholarly activity, and size of institution.

The additional accreditation requirements for a university established by the Commission are described in Attachment 3.

In setting these accreditation requirements the Commission recognizes that the standards may take some time to achieve, and that in several cases institutions have already been granted licenses to operate with the title university before the Commissions had been established. Time may also be required for recently established and new public universities to reach the standards required. Consequently there will be special transition arrangements for these institutions. They are intended to provide an appropriate balance between ensuring that necessary standards are met, and giving a new institution a reasonable opportunity to develop over time.

1.6 Recently Established Private Institutions with a License Allowing Use of the Title University

These institutions are entitled to rely on the requirements that were in place at the time they were given a license to operate. They will be encouraged to meet the Commission's accreditation requirements for a university, but not required to do so during the initial five-year cycle of external reviews conducted by the Commission. During that period they will be considered for institutional approval on the basis of Ministry and Commission requirements as though they were colleges, with the additional requirement of three colleges, which was a requirement when they were granted their license. However they will be required to have plans to meet the full requirements for a university no later than the second five year re-accreditation cycle.

1.7 Approval and Accreditation Stages for New Private Universities

The stages involve establishing the institution as a college in the first instance, but with special consideration for early introduction of postgraduate programs leading to provisional approval and recognition as a university towards the end of a staged program of development.

1. The Initial License should be sought from the Ministry of Higher Education with plans and information submitted based on the requirements for a university.
2. If the initial license is granted proposals should be submitted for approval by the Ministry of Higher Education and provisional accreditation by the Commission following the processes outlined above. These proposals should make clear the intended stages of development including introduction of programs in at least three broad fields of study, introduction of post-graduate programs as soon as students have completed undergraduate programs in the field concerned and the programs have been accredited, recruitment of highly qualified academic staff with research involvement, development of research activity, and provision of relevant facilities and equipment.
3. The review panel appointed by the Commission will be asked to advise on the proposal in relation to two sets of standards, whether the proposal meets requirements for a college, and whether it meets the standards for a university.
4. If the Commission, after considering the report of the review panel, believes the plans satisfy the standards for a college but not a university, provisional accreditation will be given for the institution as a college and, provided the plans also meet the requirements of the Ministry, a license will be issued to establish a college.
5. If the Commission, after considering the report of the review panel, believes the plans satisfy the requirements for both a college and a university provisional accreditation will be given for the institution initially as a college, but with endorsement to proceed towards university standing. If the proposal also meets the requirements of the Ministry a license may be issued. This license will be to establish a college in the first instance. However approval will also be given for a staged progression towards recognition as a university subject to the condition that

the plans are implemented as proposed. (Note that it will be necessary for undergraduate programs to be completed and accredited before approval is given to establish post graduate programs in the same broad field of study.

6. After the first group of undergraduate students have completed their programs those programs will be considered for accreditation. If they are accredited proposals for the introduction of post graduate programs in the same broad fields will be considered. If the plans for development of the university are being implemented as planned, provisional accreditation is granted for the initial post graduate programs, and Ministry requirements are also met the license will be amended to permit introduction of those programs.
7. If the institution's license is extended and additional programs are provisionally accredited the institution should introduce the additional programs and continue the development of its research programs until it meets the standards described above for a university.
8. When the institution believes it has met the requirements for a university the Commission will conduct an external review.
 - (a) If, after considering the advice of its review panel, the Commission believes the standards for a university have been met it will notify the Ministry which may recommend to the Minister that its license be amended to include the title university. At that stage the institution will be recognized as having been provisionally accredited as a university.
 - (b) If, after considering the advice of its review panel the Commission believes the institution has not met the requirements for a university but is likely to do so if additional time is allowed for development it may defer consideration of the matter for up to three years to give the institution further time to meet requirements.
 - (c) If, after considering the advice of its review panel the Commission believes the institution is unlikely to meet the requirements for a university within a reasonable period, the provisional accreditation for some or all of the post graduate programs will be withdrawn, and the Commission will recommend to the Minister that its license be amended to remove authorization to offer programs at these levels (Provided staff have the necessary qualifications and involvement in research, and there are adequate facilities, equipment and learning resources to support the post graduate research programs that are being offered approval would be given to permit students enrolled at that time to complete their programs, but no further students could be admitted.)
 - (d) If, after considering the report of the review panel the Commission believes the institution is unable to meet the requirements for the delivery of any or all of its programs at the levels at which they are being delivered, it may withdraw provisional approval or accreditation for the institution or any or all of its programs.

1.8 Institutions Based in Other Countries Wishing to Operate in Saudi Arabia

1.8.1 General Considerations

The educational opportunities made available when an institution that is based elsewhere wishes to provide post-secondary programs in Saudi Arabia are welcomed.

However it is necessary for those institutions and the programs they offer to comply with the rules and regulations applicable to other institutions in Saudi Arabia. This is not a reflection on the quality of any international institution in its own territory, but a general requirement of all providers that they comply with Saudi Arabian quality provisions for the delivery of programs in the country.

There are several different ways in which external institutions may operate in Saudi Arabia.

- (i) A course or program developed in another country may be offered by a Saudi Arabian institution under a licensing or franchising arrangement. Such a program must be accredited by the proper authority in the country of origin, or if the international institution is established in a country that does

not have an accreditation system, evidence that the program is recognized as meeting international standards must be provided.

In this situation the Saudi Arabian institution must meet all requirements for institutional approval, accreditation and licensing, with a final license that includes authority to offer a program in the field and at the level concerned. In addition, the program must be accredited in Saudi Arabia by the Commission following the procedures for provisional and full program accreditation and re-accreditation. In considering the program for accreditation the Commission will take account of quality assurance and accreditation considerations that may have been undertaken elsewhere, but the program must meet all local accreditation requirements including consistency with the *National Qualifications Framework*.

(ii) An international institution may establish a corporation in Saudi Arabia for the purpose of operating a branch campus or campuses. An institution seeking a license under this arrangement must be accredited by the proper authority in the country of origin, or if the international institution is established in a country that does not have an accreditation system, evidence that it is recognized as meeting international standards must be provided.

In this situation the corporation established in Saudi Arabia must meet all the requirements for a private institution set out in the *Executive Rules and Administrative and Technical Procedures for the Bylaws for the Private Colleges* as well as the requirements of the Commission for institutional approval.

Programs to be offered must be accredited in Saudi Arabia by the Commission following the procedures for provisional and full program accreditation and re-accreditation. In considering the programs for accreditation the Commission will take account of quality assurance and accreditation considerations that may have been undertaken elsewhere, but the program must meet all local accreditation requirements including consistency with the *National Qualifications Framework*.

The institution may request, and the Minister may approve, special arrangements for coordination, support, approval, and administration of academic programs between the international institution and the corporation established in Saudi Arabia.

If the international institution is a university in its own country, the title of the university may be used in the title of the local campus. However unless the local campus meets all of the standards required for universities in Saudi Arabia, the term College must be used within its title. (For example Riyadh College of University XXX). The expectations for research involvement and scholarship of faculty, for the nature and levels of programs to be offered, including facilities for faculty research as set out in the *Standards for Quality Assurance and Accreditation of Higher Education Institutions*, must be met.

1.8.2 Stages of Approval and Accreditation for an International Institution

Where a Saudi Arabian institution wishes to offer the program of an international institution that falls within the limits of its license, the program should be submitted to the Commission for provisional accreditation in the same way as required for a private postsecondary institution.

Where a Saudi Arabian institution wishes to offer the program of an international institution that falls outside the limits of its license, it must apply for a change to its institutional approval, and its license, under the procedures described above for private institutions. The particular program to be offered must also be accredited by the Commission.

If an international institution wishes to establish a branch campus in Saudi Arabia it must follow the same procedures as those outlined above for private institutions, that is, an application for an initial license; an application for institutional approval; and an application for program accreditation. If those applications are approved the institution will be given provisional approval, its programs will be given provisional accreditation, and a license will be issued so it can commence operating. The institution will be monitored as arrangements are completed and programs established, after which it will be evaluated by the Commission for full approval and accreditation. Programs will then be re-accredited and an institutional review conducted on a five-yearly cycle.

1.8.3 Changes in Programs and Scope of an International Institution's Activities

As for private institutions, minor changes in programs in response to evaluations and changes in circumstances are expected and should be made routinely to ensure that they remain up to date. However if major changes as described for private institutions are proposed, the Commission must be notified at least one full semester in advance, and if the Commission believes the change would affect the program's accreditation status it must be approved by the Commission or the accreditation will lapse.

If an international institution operating in Saudi Arabia wishes to introduce a program that would fall outside the scope of its license to offer programs in Saudi Arabia it must apply to the Ministry of Higher Education and to the Commission for its institutional approval and its license to be modified in the same way as for a private institution. The new program would have to be provisionally accredited by the Commission before it could be offered.

1.9 Stages of Approval and Accreditation for New Public Institutions

When a new public institution is established *ab initio* plans for an effective quality assurance system should be included in its general plans for establishment. The plans should meet the same requirements as a private institution for institutional and program accreditation and the steps will be the same as those described above for private institutions. The initial accreditation judgments by the Commission will be provisional and the development of its plans will be monitored by the Commission. A subsequent review will be conducted for full accreditation as for private institutions.

When a new public institution is formed by the merger of two or more existing public institutions or colleges of existing institutions, the new institution should as soon as practicable establish quality assurance arrangements for the combined institution. It should then conduct the necessary self-studies and apply to the Commission for accreditation of the institution and its programs. Depending on the extent of development of its quality assurance systems this may lead to either full or provisional accreditation.

The Commission may determine that:

- (i) With respect to the institution:
 - (a) That new institution meets quality assurance requirements and should receive full accreditation.
 - (b) That the new institution does not fully meet quality assurance standards but has appropriate plans for development of quality assurance arrangements and should receive provisional approval.
 - (c) That the new institution does not yet have adequate plans for the development of quality assurance arrangements and should meet specified requirements before applying again for accreditation. The institution would be requested to provide detailed plans for development to the Commission within a specified time period up to a maximum of six months.
- (ii) With respect to each of its programs:
 - (a) That the program meets quality assurance requirements and should be fully accredited.
 - (b) That the program does not fully meet quality assurance requirements but has appropriate plans for development and should receive provisional accreditation.
 - (c) That the program does not yet have adequate plans for development of quality assurance arrangements and should meet specified requirements before applying again for accreditation. The institution would be requested to provide detailed plans for development to the Commission within a specified time period up to a maximum of six months.
 - (d) That there are serious deficiencies in the program and the concerns should be referred to the Ministry of Higher Education with a recommendation that the program be cancelled until those deficiencies are remedied.

1.10 Stages in Accreditation for Existing Institutions

1.10.1 General Considerations

Existing institutions that do not yet have established quality assurance systems should introduce them as soon as practicable. These systems should relate to both the institution as a whole and to the programs that are offered.

If existing institutions already have established quality assurance systems they should review those systems in relation to the requirements for accreditation and quality assurance specified by the Commission. The requirements are consistent with generally accepted good practice in educational quality assurance and should be sufficiently flexible to be compatible with most existing arrangements. However any apparent incompatibilities should be discussed with the Commission.

Following an initial self evaluation strategic plans should be developed for the introduction of required quality assurance processes, and to deal with any weaknesses of problems found. These plans should provide for the progressive implementation of processes and improvements until quality assurance and accreditation requirements are met.

When its quality systems have been established the institution should undertake an institutional self-study, and self-studies of its programs and apply to the Commission for institutional approval and accreditation of its programs. The Commission will develop a schedule for external reviews to be carried out during the transition period as the new system is introduced.

1.10.2 Schedule for Institutional Approval and Program Accreditation for Existing Institutions

The sequence of activities for approval and accreditation may vary slightly, but as far as possible the following steps will be taken so that the institutional and program reviews can be coordinated:

A schedule of institutional and program reviews will be developed by the Commission, in consultation with institutions, taking into account the time when the institutions believe their internal quality systems will be in place and requirements for coordinating the involvement of external review teams.

Institutions introduce their quality assurance systems, and conduct institutional and program self studies.

The scheduling of external reviews for institutions will vary according to circumstances. For example in a small institution with programs in only one or two fields the institutional and program reviews may be combined and carried out concurrently. In a large institution the institutional review will normally be carried out first, and followed at a later time by program reviews in which programs in closely related fields of study may be carried out concurrently.

The Commission may also schedule program reviews in specific areas of study at different institutions at about the same time to facilitate the involvement of international peer reviewers with expertise in those fields.

Processes for the conduct of external reviews and finalization of review reports are described in later chapters of this part of this Handbook.

(i) When the reports of institutional review panels have been finalized they will be submitted to the Commission for its consideration. The Commission may determine:

- (a) That the institution meets quality assurance requirements and should receive full approval.
- (b) That the institution does not fully meet quality assurance standards but has appropriate plans for development of quality assurance arrangements and should receive provisional approval.
- (c) That the institution does not have adequate plans for the development of quality assurance arrangements and should meet specified requirements before applying again for approval. The institution would be requested to provide detailed plans for development to the Commission within a specified time period up to a maximum of six months.
- (d) That there are serious deficiencies in the proposal and the institution should not receive provisional accreditation. The Commission will refer the matter to the Ministry for appropriate action.

(ii) When the reports of program review panels have been finalized they will be submitted to the Commission for its consideration. The Commission may determine:

- (a) That the program meets quality assurance requirements and should be fully accredited.
- (b) That the program does not fully meet quality assurance requirements but has appropriate plans for development and should receive provisional accreditation.
- (c) That the program does not have adequate plans for the development of quality assurance arrangements and should meet specified requirements before applying again for approval. The institution would be requested to provide detailed plans for development to the Commission within a specified time period up to a maximum of six months.
- (d) That there are serious deficiencies in the program and the concerns should be referred to the Ministry of Higher Education with a recommendation that the program cancelled until those deficiencies are remedied.

Chapter 2

Time Line and Summary of Processes for the Planning and Conduct of an External Review

The following schedules provide an overview of the timeline for activities involved in the planning and conduct of an external review for an institution, a program, or a combination of institution and program(s). The basic process is the same for the three types of review, though details of the schedule of activities during the review differs.

Further details of what is involved for institutions and the Commission are provided in later chapters of Part 3 of this Handbook.

2.1 Scheduling an External Review

External reviews of existing institutions are conducted:

- (i) For the first evaluation of an existing institution that was in operation at the time the new system for academic accreditation was established;
- (ii) When an institution with provisional accreditation is being considered for removal of its “provisional “ designation;
- (iii) After provisional designation has been removed, once every five years (though in special circumstances an earlier review may be required).

The requirements and processes followed are the same in each of these circumstances.

External reviews of programs are conducted:

- (i) For the first accreditation of an existing program that was in operation at the time the new system for academic accreditation was established.
- (ii) When a program that has provisional approval is being considered for removal of its “provisional “ designation.
- (iii) After provisional designation has been removed for re-accreditation once every five years. (though in special circumstances an earlier review may be required).

The requirements and processes followed are the same in each of these circumstances.

External reviews for accreditation of programs in related fields of study may be conducted concurrently.

It is also possible for reviews for the accreditation re-accreditation of programs to be conducted at the same time as the institutional reviews. When this is done some of the activities can be combined which may reduce the time and work involved. To achieve this degree of coordination the normal five-year cycle for reviews may be modified after consultation with the institution.

A significant amount of work must be done in preparation for an external review, both by the Commission and within the institution itself. It is also necessary for the Commission to schedule the reviews of a number of institutions and programs and this may take some time to arrange. Consequently if an institution wants to arrange a review at a particular time an application should be made to the Commission at least 18 months in advance of the proposed time for the review. In circumstances where the review is initiated by the Commission, a minimum of 9 months notice will be given. The Commission will make every effort to accommodate requests for timing of reviews, but it may not be possible to agree to all requests.

The following schedule is a guide and may be modified at the discretion of the Commission and in consultation with the institution.

2.2 Activities Prior to a Review

Eighteen Months Prior to a Proposed Review

The institution may initiate a request for a review at a time to suit its planning arrangements.

Nine Months Prior to a Review

The Commission finalizes a schedule of reviews and notifies institutions of planned dates.

The Commission nominates a member of staff to facilitate conduct of the review and the member of staff meets with the institution to discuss arrangements and timelines.

The institution completes a self-study, and prepares of other required documentation.

The institution nominates a senior level contact person representing its quality assurance function to liaise with the Commission about arrangements for the review.

The Commission commences planning for the appointment of a chair and members of the review panel.

The Commission estimates costs for the visit and notifies the institution of the fee for the review and the estimated costs. Payment should be made within one month of this notification.

Four Months Prior to a Review

The Commission finalizes appointment of the chair and members of the review panel.

The Institution provides copies of the self-study report, the institution or program profile and other required documentation in electronic and hard copy form to the Commission.

The chair of the review panel may visit the Commission and the institution for consultations about the review process.

Three Months Prior to a Review

The Commission arranges travel to Saudi Arabia for review panel members from outside the country and makes accommodation arrangements.

The staff member of the Commission facilitating the review sends to the members of the panel:

- Copies of the institutional or program self-study report, completed self evaluation scales and a list of other documents received from the institution;
- Summary information about post secondary education in Saudi Arabia, the approach taken to accreditation and quality assurance, and a draft program for the visit to the institution. Reference is given to documents included on the Commission's web site.
- The chair of the review panel consults with panel members about the review process and their particular roles within it, about issues arising from their initial review of the material, and may contact the Commission to obtain additional information or material if required.

One Month Prior to the Review

The chair of the review panel informs the Commission of any variations the panel would like in the draft visit program (see draft for different types of review below) and any additional material from the institution it would like to have available prior to the review.

The member of staff of the Commission who is facilitating the review consults with the institution to finalize the visit program and arrange for any additional material requested to be provided.

Arrangements for accommodation, local transport and other matters as required for members of the review panel are finalized by the staff member of the Commission and the person appointed by the institution to manage internal arrangements for the review. These arrangements include a meeting room at the hotel for

panel meetings, and provision of interpreting and translating services during the review if required. Arrangements are made at the institution for meeting room(s), work areas, equipment and other requirements.

The staff member of the Commission sends to the members of the panel an itinerary for the visit including final details of travel arrangements, accommodation, and a finalized visit program; and a template for the panel to be used in preparing its draft report on the visit.

Immediately Before the Review

The institution is responsible for ensuring that the panel members arriving by air are met at the airport and escorted to their hotel.

The chair of the panel and the staff member assigned by the Commission have a half day orientation meeting with the panel members to review arrangements and plan for their activities during the review.

After an initial briefing and planning meeting at the hotel where the panel is staying the review panel meets with the Rector or Dean, or a senior academic administrator such as an Academic Vice Rector. A preliminary briefing meeting may be held with female members of the panel to ensure understanding of cultural matters affecting the operations of higher education institutions in Saudi Arabia. A strongly recommended practice is for the institution to arrange a social function immediately prior to the review at which the panel is introduced to and mixes informally with senior faculty and staff who are directly involved.

2.3 Activities During a Review

An external review may take three to five days depending on the size and complexity of the institution, whether programs and the institutional review are conducted concurrently, and the number of programs considered.

The person appointed by the institution to manage institutional arrangements should be available on a full time basis during the review, with other technical and support people being available as required. If program reviews are being conducted concurrently with an institutional review an additional person should be appointed for each program.

The person appointed as an institutional guide during the review has very important responsibilities. That person should meet with the nominated officer of the Commission prior to the review to ensure full understanding of what is needed. He or she should meet the panel when it arrives and ensure that necessary arrangements are made and followed. In an institution that operates with separate campuses for male and female students, institutional guides should be nominated who can assist with arrangements on each campus.

During the visit the person nominated as a guide should escort the panel to meetings and introduce members as appropriate. In public meetings the person should remain, but in meetings with staff or students should normally leave after the introductions and return when the meeting concludes. In meetings to review material and documents the person appointed to assist would normally leave to permit the panel to review materials and discuss matters in confidence. However the panel may request the person to remain and assist.

If the panel requires additional material, or wishes to meet with others for discussion, the person acting as guide should make the necessary arrangements.

During the review the panel undertakes a series of visits and meetings in the institution to review activities. The panel may break into sub groups from time to time to see different things, and will meet together periodically to review progress and compare notes.

At the end of the visit the panel will spend approximately one day preparing a draft report which is given to the staff member assigned by the Commission. The panel then meets with the Rector or Dean and other senior faculty for an exit meeting in which the general conclusions of the review are explained.

Sample schedules are provided in Chapter 3 of Part 3 of this handbook for an institutional review, a program review, and a review in which programs and an institution are considered concurrently. These are for illustrative purposes only. A detailed schedule will be developed for each review taking account of the particular circumstances at the institution concerned.

2.4 Activities After a Review

One Month After the Review

The draft review report given to the representative of the Commission is edited for consistency and to eliminate inadvertent errors, and put into a form suitable for release. The revised draft is sent to the chair of the panel for a final check, and then sent to the institution with an invitation to identify any factual errors that might have occurred.

Evaluation questionnaires are sent by the Commission to the panel members and to the institution inviting comments on the value and effectiveness of the review process.

Two Months After the Review

Within two weeks of receiving the draft report the institution has the opportunity to respond to the Commission indicating any factual errors it believes may have been made. The staff member of the Commission consults with the chair of the panel about the response and any possible adjustments that may be needed in the report. The chair may consult with members of the panel about implications of the changes.

Three Months After a Review

The Commission finalizes the report taking account of any responses received from the institution and the advice of the panel. In this process any amendments by the Commission will be purely editorial and will not affect any conclusions or recommendations made by the review panel. This report is considered by the Commission's Advisory Committee on Colleges and Universities which may provide comment and advice on the report for consideration by the Board of the Commission.

Four Months (approximate date) After a Review

The report and its recommendations are considered by the Board of the Commission, together with any comments or advice from the Advisory Committee on Colleges and Universities. The Board decides on accreditation after considering the report and this advice.

The final report is sent to the institution together with details of the decision of the Board on accreditation.

Two weeks after the report and the decision are sent to the institution the report is included on the Commission's web-site.

If the report has identified processes or activities in the institution that it believes are commendable and that should be made known to other institutions through the Commission's good practice web-site, the Commission invites the institution to provide a description in appropriate form.

The institution is asked for its response to recommendations for action that were included in the report. This response is expected within three months of the request being made, but the time line for action will depend on the matters raised and the institution's plans for response.

Later Action (Timeline will depend on action required and time scale for response)

The institution provides to the Commission a report on action taken in relation to recommendations made by the panel and its plans for response. The Commission may review action taken, and will include an addendum to the report on the website indicating what has been done in response to the review recommendations.

2.5 Preparations by an Institution for an Institutional Review

External reviews of institutions will consider the performance of the institution in achieving its mission driven aims and objectives, and the extent to which it is meeting the standards described in the *Standards for Quality Assurance and Accreditation in Higher Education Institutions*:

- Mission and objectives
- Governance and Administration
- Management of Quality Assurance and Improvement
- Learning and Teaching
- Student Administration and Support Services
- Learning Resources
- Facilities and Equipment
- Financial Planning and Management
- Employment Processes
- Research
- Institutional Relationships With the Community

In considering these matters the reviewers will pay particular attention to the institution's self-study report and an important outcome of the review will be to verify the conclusions of that self-study, although the review panel will also make its own independent assessment of the standards achieved.

The review may also deal with matters identified as priorities by the Commission or the relevant Ministry as important general policy initiatives, and to any areas of weakness or difficulty identified in previous internal or external reports at the institution.

Processes and requirements for completion of an institutional self-study are included in Part 2 of this Handbook and a template for presentation of a self-study report is included in Attachment 2 to that document,

As soon as possible after dates have been set for external reviews to be undertaken the institution should plan for completion of the self-study and prepare for other documents and activities that will be required.

The self study should be completed in time for the report to be sent to the Commission four months before the external review is to take place.

The self-study report should include a detailed institutional profile, descriptions of processes followed in conducting the self-study and an analysis of the institutions performance in relation to the eleven standards identified by the Commission.

An institutional profile section of the report should include the following material:

- A brief summary of the institution's history, scale and range of activities;
- A description of the management and organizational structure using an organizational chart, a list of colleges and departments, and the names and contact details of key individuals;
- A list of campus locations indicating programs offered and student numbers;
- Faculty, staff and student numbers in total and by college, department, and program;
- Summary information about the institution's accreditation status including the outcomes of any previous institutional reviews, and any conditions that were established;
- A description of the institution's quality assurance arrangements, priorities for development, and any special issues affecting its operations;
- A list of matters that are of particular interest to the institution and on which the institution is seeking comment and advice in the review.

The body of the report should include descriptions and evidence of performance relating to each of the Commission's standards. This evidence should include specific data about quality of performance based on clearly defined performance indicators and other information as appropriate, together with comparative information for other relevant institutions selected by the institution for performance benchmarking. The report should include hard data and quantitative information wherever possible.

The report should draw on information provided in the Commission's self-evaluation scales and a copy of the completed scales should be provided in a separate document. However the self-evaluation scales do not constitute the self-study and should be made available for reference in a single separate document.

Six copies of the institutions self-study report should be provided to the Commission four months prior to the date of the review. These should be on A4 paper, unbound, printed on one side, page numbered, and with a table of contents for easy reference. A list of acronyms used in the report should be included as an attachment.

In addition six copies of the report should be provided in electronic form on CDs.

Because of the extensive involvement of international reviewers the self-study report should be provided in English unless otherwise agreed in advance by the Commission. Other documents could be available in English or Arabic.

In addition to the self-study report the following documents should be provided:

- (a) To be sent in advance to external reviewers.
 - (i) Self-evaluation Scales for Higher Education Institutions. The completed scales should include star ratings, independent comments and indications of priorities for improvement as requested in the document, and should be accompanied by a description of the processes used in investigating and making evaluations.
 - (ii) A copy of the institutions strategic plan.
 - (iii) A copy of the institutions strategic plan for quality improvement (which may be included within the broader institutional strategic plan)
 - (iv) Current student catalogue, prospectus, bulletin or handbook including descriptions of the curriculum, admissions requirements, degree completion requirements, and related information.
- (b) To be available for review panels during the site visit. Reviewers may request that some of this material be sent in advance, and may ask for additional material during the visit.
 - (v) Faculty handbook or similar document with information about staffing policies, professional development policies and procedures and related information.
 - (vi) Administrative and financial policies manual or similar document including the institution's bylaws and regulations, roles and responsibilities of administrative and academic officers and major committees, and an explanation of the institutions governance and administrative structure.
 - (vii) Quality assurance manual or description of procedures including information about the institutions system of assessing programs and services, the role of the institution's quality center and systems for gathering and analyzing data on quality of performance and planning for improvement.
 - (viii) Current data on faculty and other teaching staff including tables with numbers by academic rank, by highest qualification, teaching staff/student ratios for each department and college, and for the institution as a whole. For a university (optional for a college) information should be provided on research output for each department, college and for the institution as a whole. Current teaching CVs should be available on file and available for the review panel if required.

3. Preliminary discussions should be held with the member of staff of the Commission nominated to facilitate the review to confirm dates, arrange for provision of documents, plan organizational arrangements, and other matters described in preparations for a review in Chapter 2.

2.6 Preparations by an Institution for an External Program Review

Program reviews will consider the quality of a program in relation its achievement of its aims and objectives and its performance in relation to the eleven standards described in *Standards for Quality Assurance and Accreditation of Higher Education Programs*. Particular attention will be given to the standard for Learning and Teaching including evidence about achievement of intended learning outcomes and consistency with the requirements of the *National Qualifications Framework*. In a professional program attention will be given to the requirements for employment in the field concerned and the processes used to assess the extent to which those requirements have been met.

The document that will be the main focus of attention will be the program self study report which should be a complete separate document based on the template for a periodic program self study provided in the attachment to Part 2 of this handbook. An important outcome of the review will be to verify the conclusions of that self-study. However the review panel will also make its own independent assessment of the standards achieved.

The review may also deal with matters identified as priorities by the Commission or the relevant Ministry as important general policy initiatives, and to any areas of weakness or difficulty identified in previous internal or external reports at the institution.

As soon as possible after dates have been set for external review plans should be made for completion of the program self study and preparation of other documents required.

1. The program self-study should be completed in time for the report to be sent to the Commission four months before the external review is to take place.

The report should include descriptions and evidence of performance relating to each of the Commission's standards. This evidence should include specific data about quality of performance based on clearly defined performance indicators and other information as appropriate, together with comparative information for other programs within the institution and in other institutions for benchmarking. The report should include quantitative data as much as possible.

The report should draw on information provided in the Commission's self-evaluation scales and a copy of completed scales should be provided in a separate document. However the self-evaluation scales do not constitute the self-study report which should be provided as a single separate document.

Five copies of the program self-study report should be provided to the Commission four months prior to the date of the review. These should be on A4 paper, unbound, printed on one side, page numbered, and with a table of contents for easy reference. A list of acronyms used in the report should be included as an attachment. Five copies of the report should be provided in electronic form on CDs.

Because of the extensive involvement of international reviewers the self-study report should be provided in English unless otherwise agreed in advance by the Commission. Other documents could be available in English or Arabic.

2. In addition to the self-study report, the following documents should be provided in hard copy and desirably in electronic format as well.

(a) To be sent in advance to external reviewers.

- (i) Completed scales from the *Self-Evaluation Scales for Higher Education Programs*. The completed scales should include star ratings, independent comments, and indications of priorities for improvement as requested in the document., and should be accompanied by a description of the processes used in investigating and making evaluations.
- (ii) The program specification including the matters described in Chapter 2 of Part 2 of this handbook.
- (iii) An annual program report for the most recent year
- (iv) A brief summary of the outcomes of previous accreditation processes (if any) including program accreditations and any special issues or recommendations emerging from them.
- (v) A copy of the program description from the bulletin or handbook including descriptions of courses, program requirements and regulations.

(b) To be available for the review panel during the site visit: (Members of the panel may ask for some items to be sent to them in advance, and ask for additional material)

- (vi) Course specifications for courses in the program and annual course and program reports.
- (vii) Faculty handbook or similar document with information about faculty and staffing policies, professional development policies and procedures and related information.
- (viii) CVs for faculty and staff teaching in the program and a listing of courses for which they are responsible. This information should include the highest qualification (and if appropriate other qualifications and experience relevant to their teaching responsibilities)
- (ix) Copies of survey responses from students and other sources of information about quality such as employers, other faculty, etc.
- (x) Statistical data summarizing responses to these surveys for several years to indicate trends in evaluations.
- (xi) Statistical data on employment of graduates from the program.
- (xii) Representative samples of student work and assessments of that work.

Preliminary discussions should be held with the member of staff of the Commission nominated to facilitate the review to confirm dates, arrange for provision of documents, plan organizational arrangements, and other matters described in preparations for a review in Chapter 2.

A person will need to be nominated to coordinate preparations and assist the panel during the review. That person should meet with the nominated officer of the Commission prior to the review to ensure full understanding of what is needed. He or she should meet the panel when it arrives at the institution and ensure that necessary arrangements are made and followed. If a program is offered on separate campuses for male and female students institutional guides should be nominated who can assist with arrangements on each campus.

During the visit the person nominated as a guide should escort the panel to meetings and introduce members as appropriate. In public meetings the person should remain, but in meetings with staff or students should normally leave after the introductions and return when the meeting concludes. In meetings to review material and documents the person appointed to assist would normally leave to permit the panel to review materials and discuss matters in confidence. However the panel may request the person to remain and assist.

If the panel requires additional material, or wishes to meet with others for discussion, the person acting as guide should make the necessary arrangements.

Documentation Required if Institutional and Program Reviews are Conducted Concurrently

If the two types of review are conducted concurrently the self-studies and related material for both are required.

Requirements for Assistance, Facilities and Equipment For an External Review

1. Staff Assistance

One person should be available on a full time basis to manage arrangements and coordinate activities during the review.

If program reviews are being conducted concurrently with an institutional review, the person managing institutional arrangements should provide overall coordination and additional persons should be available for each program review. (If program reviews are in closely related areas within a college or department one person may be able to provide support for several of these reviews. However if programs are in different fields a person is required for each.)

If there are separate sections of an institution for male and female students or if a program being reviewed is offered in male and female sections, a person is required (for the institutional review and for each program) to assist in each section.

Technical assistance should be provided for computing and other equipment.

Transport should be provided from and to the airport, and between the reviewers' hotel and the institution.

2. Facilities

A meeting room accessible to male and female staff for use by the review team for planning and confidential discussions.

A work room for the review panel to examine reference material provided by the institution and prepare and discuss draft reports.

Meeting and interview rooms accommodating up to 10 people for meetings with members of faculty, staff and students.

For an institutional review these facilities should be centrally located. For program reviews it is desirable that facilities be in or close to the department offering the program. For concurrent reviews of an institution and one or more programs work spaces should be available both centrally and within the department(s) concerned.

If programs are offered on sections for male and female students, meeting and interview facilities should be available in both sections.

3. Equipment

Computers with printing and internet facilities for each member of the review panel (s).

Photocopier and associated stationary supplies.

Tea and coffee provisions in each location.

4. Reference Material

Paper copies of all documents provided for the review.

Any other relevant reference material including such things as handbooks, policy documents, reports, samples of

2.7 Preparations by the Commission for an External Review

The main processes are the same for institutional and program reviews although the composition of the review panels and the schedule of activities during the review itself will differ.

1. As soon as it has determined its schedule of external reviews the Commission will notify institutions of the dates. This will be done at least nine months in advance of the reviews. The Commission will notify the institution of its expected costs of the review. Payment will be required within one month of this notification.
2. The Commission will nominate a member of its staff to be the main contact for matters involved in the organization and conduct of each review. This person will have responsibility for consultations with the institution and facilitating the review. The initial task will be to hold a meeting with representatives of the institution to review procedures and requirements, and establish a time line submission of documents and conduct of the review.

The nominated member of staff will maintain contact with the institution and provide or arrange for advice and assistance as required.

3. A review panel will be selected by the Commission drawing on a register of trained and experienced reviewers from within Saudi Arabia and outside, ensuring appropriate expertise within the group and avoiding any real or apparent conflict of interest. (See note on conflict of interest below) A person experienced in quality reviews and with experience relevant to the review to be undertaken will be appointed by the Commission to serve as the chairperson of the review team. The selection of a panel and a panel chair will be at the discretion of the Commission, but the Commission will take into account any matters raised by the institution about the composition of the panel.

Review panels will normally consist of three to five people depending on the size and complexity of the review.

The process of selection of review panel members will commence nine months prior to the review and be completed four months prior to the review.

4. Four months prior to the review the Commission:

- Finalizes the appointment of the chair and members of the review panel;
- Checks the documentation provided by the institution;

5. Three months prior to the review the Commission:

- Arranges for travel and accommodation for the review panel as required;
- Sends to the chair and members of the review panel the self study report, institutional or program profile and a list of other material provided by the institution, and for members from outside the country, documents describing the process of accreditation and quality assurance in Saudi Arabia.

6. One month prior to the review the staff member of the Commission :

- Finalizes travel and accommodation arrangements for the review panel;
- Finalizes the visit program to the institution in consultation with the chair of the review panel and the representative of the institution;
- Sends to the review panel and the institution a final itinerary;

- Sends to the members of the review panel a template for use in preparing the report on the review.
- Arranges for interpreting and translating services if required during the review.

7. Immediately prior to the review the staff member of the Commission:

- Meets the chair and members of the review panel at their hotel to provide a final briefing and discuss details of the review;
- Accompanies the panel to the institution and participates in the initial social function and first meeting with the Rector or Dean.

The staff member of the Commission will normally remain with the panel and provide assistance during the review. At the end of the review the staff member will meet with the panel for its final meeting at the hotel, receive a copy of the draft report and accompany the panel in its exit meetings at the institution.

CHAPTER 3

Conduct of an External Review

An indicative outline of activities that might be undertaken in a review visit is provided below. This may be varied to suit particular requirements, and the provision of papers and supplementary information enables the panel to indicate any variations in the visit program they believe are needed. The panel chair should notify the nominated officer at the Commission of any variations requested at least three weeks prior to the visit, so the institution can be informed and any necessary changes in the program made by the institution.

An institutional review would normally take between three and five days depending on the size and complexity of the institution or the program concerned. A program review may take less time unless a number of programs are to be considered concurrently.

This sequence of activities is for illustrative purposes only. Details will be varied to meet differing circumstances.

3.1 Summary of Activities

The review process assumes that panel members have read and understood the documents describing the particular emphases and processes involved in the system of quality assurance and accreditation in Saudi Arabia. They will have studied the documents provided by the institution taking the emphases and processes of the Saudi Arabian system into account and will have formed preliminary views that will be reviewed through discussions and observations during the visit.

Preliminary Meeting(s)

At the beginning of the review, the chair and the Commission staff person assigned to the review will hold a half-day orientation and planning meeting with the panel members. This meeting will review arrangements for the visit and ensure understanding of cultural issues relevant to Saudi Arabian institutions and with which international visitors may be unfamiliar.

Informal Social Function

Whenever possible a social function should be held just prior to or at the beginning of the review at which members of the review team can meet informally with members of the quality committee and senior faculty. This is intended to assist in establishing a collegial and supportive relationship rather than an inspectorial one. The function should be informal, with brief introductory comments by the Rector or Dean or another senior member of faculty, and the chair of the review panel, to help establish a constructive and supportive tone for the review.

First Working Session

The first working session should begin with a meeting with the Rector or Dean, or in the case of a program review, an appropriate senior academic administrator who could be the Rector or Dean for an institutional review, or an Academic Vice Rector or Dean of the College and Head of Department for a program review. At this meeting the panel would be welcomed and an opportunity provided to discuss and clarify any issues relating to the review.

Review Activities

The panel will go together or may divide into sub-groups for visits and discussions with academic and administrative units within the institution. The selection and order of visits will vary according to the focus and priorities of the review, but should always include meetings with faculty and students, and a tour of facilities relevant to the review such as the library /resource center, a sample of computing and laboratory facilities, and for an institutional review, facilities for student recreation and cultural activities, and classrooms.

When considering particular functions or facilities attention should be given to the relevant sections of the *Standards for Quality Assurance and Accreditation of Higher Education Institutions and Standards for Quality Assurance and Accreditation of Higher Education Programs*. Judgments of adequacy should take into account the scale and stage of development of the institution, and its priorities for development as reflected in its mission statement, its self-study report and other relevant documents.

Opportunities should be taken for both planned interviews and informal conversations with faculty and students during the visits, and at least one meeting should be held with a representative group of students.

At an early stage during the review members of the review panel should meet with representatives of the quality committee to discuss its work and the priorities and strategies of the institution for quality improvement.

Provision should be made for the panel to meet periodically during the visit to review progress and identify any further matters requiring attention.

Concluding Activities in the Review

The review panel should meet to agree on its views and recommendations and prepare a draft report. Summary notes on particular matters should be prepared by members of the panel assigned to investigate those issues, and discussed and agreed by the panel. During this discussion every effort should be made to reach consensus. However if there are strongly held differing views, these should be accurately reflected in the written comments and the report. The statements and conclusions should clearly specify the evidence on which the comments are based.

A final meeting should be held with the Rector or Dean (for an institutional review) or academic vice rector and college dean (for a program review) at which the chair of the review panel outlines the major conclusions of the review. At the discretion of the Rector or Dean other senior faculty and academic administrators might be included in this meeting. An additional brief meeting might be held at which other senior faculty and academic administrators can be briefed on the outcomes of the review.

3.2 Sample Review Programs

Individual review schedules will differ depending on the number of panel members, the size of the institution, the number of programs, the location of the institution, and the arrival times of the panel members. The following sample schedules will serve as guides to an institutional review, a program review, and a combined review. Position titles used in these samples are for illustrative purposes. It is expected that institutions will use a variety of titles and have differing administrative arrangements for many of the functions concerned.

3.2.1 Illustrative Schedule for an Institutional Review (5 Days)

Arrival	Panel members arrive late afternoon or evening and check into their hotel.
Day 1	
8:30 am	Panel meets for an orientation and planning session to discuss the review and the assignment of roles and responsibilities to members. Meeting is led by chair of the panel and the Commission staff person. A brief tour of the campus may be arranged.
11.30 am	In institutions or programs offered in different sections for male and female students, senior staff provide a briefing on arrangements for coordination and interactions between these sections.
12.30	Informal lunch at the institution hosted by the Rector or Dean, and including senior faculty and members of the quality committee. Welcome given by the Rector or Dean and response from chair of the panel.

- 2:00 pm Orientation session at the institution with the Rector or Dean—for an introduction to the institution, its mission and goals and objectives, and an overview of its strategic plans.
- 2:45 pm Panel meets with the Academic Vice Rector, a representative group of deans and heads of departments, and the head of the quality center. Overview of program development and evaluation processes and general information on academic performance of the institution. Discussion of section of self study report dealing with Standard 4, Learning and Teaching.
- 4:15 pm Brief tour of campus.
- 5:00 pm Panel departs for the hotel.
- 7:00 pm Panel meets at the hotel to debrief and have dinner.

Day 2

- 8:30 am Panel arrives at the institution and meets briefly.
- 9:00 am Meeting with Rector, Vice Rectors, Head of women's section. Overview of administrative arrangements, Discussion of Standard 2 report.
- 10.00 am Meetings with heads of departments and equivalent for male and female sections. (Selected sample of departments across institution. –if program reviews are being conducted simultaneously with the institutional review, these should be from different departments)
- 11.15 am Meetings with two representative groups of 8 to 10 undergraduate students at different levels drawn from departments across the institution.
- 12.30 pm Working Lunch
- 1.30 pm Panel tours the library/information resource center and meets with the head librarian. Discussion of library systems and support services and report on Standard 6.
- 2:30 pm Panel sub-divides:

Group A meets with director of admissions and reviews admissions standards and processes and with the registrar and reviews student record keeping functions and sample student transcripts and files.
Group B meets with the director of student services and reviews student activities, advising, counselling, and other student support services and extra curricular activities.
- 4:00 pm Panel reconvenes in the meeting room.
- 5:00 pm Panel departs for the hotel.
- 7:00 pm Panel meets to debrief and have dinner.

Day 3

- 8:30 am Panel arrives at the institution and meets briefly.
- 9:00 am Panel meets with dean or vice rector responsible for research development and representative group of deans and heads of departments. Discussion of research performance and research development strategies, and self study report on Standard 10
- 10:15 am Panel sub divides. Group A tours IT support services and computer labs and meets with the head of information technology.

Group B meets with the director and with representative faculty teaching in the English language and foundation programs.

11.30 am Meetings with representative groups of 5 to 8 faculty and teaching staff drawn from across the institution. (If there are concurrent program reviews these would be drawn from other departments)

12.30 Working Lunch

1.30 pm Panel Sub-divides. Group A meets with senior financial managers for briefing on financial management and budgeting.
Group B meets with senior managers responsible for facilities and equipment for briefing on capital planning, maintenance, equipment policies etc.

2.30 pm Panel meets with senior managers responsible for employment and staffing policies for briefing on faculty employment and professional development policies. Panel reviews a representative selection of faculty qualifications and contracts in faculty personnel files.

3.30 pm Visits to selected facilities as requested by the Panel.

5.00 pm Return to hotel

7.00 pm Panel meets to debrief on days activities and have dinner.

Day 4

8.30 am Panel arrives at the institution and meets briefly.

9.00 am Meeting with members of the institutions council for discussion of functions and activities of the Council.

10:00 am Panel meets with representative groups of 8 to 10 recent graduates from different programs in the institution.

11:15 am Panel meets with group of employers of graduates from the institution.

12:30 pm Working lunch. Informal discussion with Academic Vice Rector and Director of Quality Center for follow up on questions raised during the visit.

1.30 pm Panel meeting

2.15 pm Members of panel may visit particular facilities or academic or administrative units to follow up on issues or questions raised., or commence drafting sections of report.

5:00 pm Panel departs for the hotel.

7:00 pm Panel meets to debrief on the days activities. The chair clarifies assignments and responsibilities in drafting the report. The panel has dinner at the hotel.

Day 5

8:30 am Panel meets to discuss possible conclusions and recommendations and to draft designated sections of the report.

9.30 am Panel members draft sections of report.

11.00 am Target time for completion of draft of sections of report. Panel meets to review draft recommendations and suggestions.

12.30 Panel breaks for lunch at the hotel.

- 2:00 pm Exit meeting of Chair of the Panel with Rector/Dean .
- 3:30 pm (Optional Meeting) Panel Chair presents main conclusions to meeting of senior faculty, staff and students.

3.2.2 Illustrative Schedule for a Program Review (4 Days)

Arrival Panel members arrive in the late afternoon or evening and check into the hotel.

Day 1

- 8:30 am Panel meets for orientation and planning session to discuss the review and the assignment of roles and responsibilities to members. Meeting is led by the chair of the panel and the Commission staff person.
- 11:00 am Initial meeting with the Academic Vice Rector or Dean and Head of Department—for an introduction to the institution, and the program and its goals, objectives and recent developments.
- 11.45 am For programs offered in different sections for male and female students, senior staff provide a briefing on arrangements for coordination and interactions between these sections.
- 12.30 pm Informal lunch at the institution hosted by the Academic Vice Rector or Dean, and including senior faculty associated with the program and members of the program self study committee. Welcome given by the Vice Rector or Dean and response from chair of the panel.
- 2:00 pm In the case of a review of one program, the panel meets with the appropriate dean, department head, and/or program coordinator for an overview of the program. If multiple programs are being reviewed, the panel may sub-divide for these meetings. Discussions include description by program coordinator of strategies used to coordinate planning and delivery to achieve the range of learning outcomes in courses offered, successes and difficulties encountered, and program evaluation and improvement strategies. Program coordinator describes main elements of program and course specifications and makes specifications and reports available for review. Panel members pursue questions arising from these descriptions and from their analysis of the self study report.
- 3:45 pm Tour of facilities for the program (eg. classrooms, laboratories, computing facilities etc.)
- 5.00 pm Panel departs for the hotel.
- 7.00 pm Panel meets at the hotel to debrief and have dinner.

Day 2

- 8:30 am Panel meets with head of department for briefing on research and professional development activities, community service activities. Panel may review faculty resumes and research reports.
- 10.00 am Panel meets with faculty members who teach in the program(s) and with the coordinator of any internships or post-graduate studies that may be associated with the program. In the case of multiple programs or a larger number of faculty members, the panel may subdivide.
- 11:30 pm Panel meets with a representative group of 8-12 current students from different levels within the program.
- 12:30 pm Panel has lunch with a small group of faculty and administrators of the program(s).

1:30 pm	Panel meeting.
2:00 pm	Visit to library/learning resource center used for the program to review resources available and receive briefing on systems for program and student support.
3:30 pm	Panel meets with the program coordinator to review examples of students work on tests or assignments and discuss strategies for verifying standards of student achievement.
5:00 pm	Panel leaves the institution for the hotel.
7:00 pm	Panel meets to discuss possible suggestions and recommendations and plan for preparation of report. Dinner at the hotel.
Day 3	
8:30 am	Panel meets with a representative group of graduates of the program(s).
10:00 am	Panel meets with a representative group of employers of graduates.
11:30 am	Planning meeting. Initial consideration of conclusions and recommendations, and identification of any matters requiring further investigation
12:30 pm	Working lunch.
2:00 pm	Follow up visits and consultations as required. Initial preparation of sections of draft report.
5:00 pm	Return to hotel.
7:30 pm	Panel breaks for dinner at the hotel.
Day 4	
8:30 am	Panel meets to review draft suggestions and recommendations.
9:30 am	Panel members continue with drafting of report. Additional consultations or visits to facilities or review materials arranged if required.
11:30 am	Target time for completion of sections of draft report. Report consolidated and reviewed by panel chair.
12.30 pm	Lunch.
1:30 pm	Exit meeting with Dean/Head of Department/ Academic Vice Rector..
2:30 pm	(Optional Meeting) Panel Chair presents main conclusions to meeting of senior faculty, staff and students.

3.2.3 Combined Institutional and Program Review

For smaller institutions or institutions that have one or two programs areas, such as business and IT for example, it will be possible to review both the institution and its programs at the same time. The panel will include experts in institutional and academic administration as well as experts in the individual discipline areas under review. It will also be possible in some larger institutions to conduct institutional reviews and some program reviews simultaneously. Arrangements will differ in different circumstances and details will be worked out on a case by case basis. In general however the two types of review will be separate rather than combined exercises, though provision will be made for consultation and exchanges of information between the review teams at stages during the program.

CHAPTER 4

Role and Responsibilities of External Review Panels

4.1 Qualities Required in External Reviewers.

The value of an external review will depend to a considerable extent on the credibility of the panel, and this will be affected by perceptions of their independence, their expertise in quality assurance processes generally and their familiarity with the focus of the review.

Members of the panel should have substantial senior experience in teaching and/or administration in post secondary education relevant to the institution or program under review. They should also have the personal qualities of sensitivity, objectivity, and integrity to merit the trust and confidence of the institution, the Commission, and the wider community. Members from within Saudi Arabia should have completed a program of training in the processes of quality assurance, and those from elsewhere will also have significant training and experience in the field. Those from outside the country will receive a thorough briefing on local policies and conventions relevant to the review before it commences.

It is unlikely that any one person will have extensive knowledge of all matters that need to be reviewed, but the selection of a team should ensure that within the panel as a whole the required expertise is available.

Depending on requirements for expertise in particular reviews panels may include experienced senior academic administrators, experienced faculty in the field of study concerned, experts in quality assurance processes, and/or experienced members of a profession for which students are being prepared.

4.1.1 Personal Qualities

- Ability to work effectively and collaboratively in a team situation;
- Ability to listen, and to communicate effectively in consultations with faculty, staff and students within an institution;
- Commitment to quality, combined with openness to alternative approaches that meet quality criteria;
- Sensitivity to local culture and traditions, and ability to reconcile these with generally accepted quality benchmarks;
- High standards of ethical behavior in dealing with sensitive or confidential matters.
- Reliability in meeting commitments.
- Ability to support opinions by relevant evidence and to modify opinions in the light of further information.

4.1.2 Academic and Professional Expertise

- Recent successful academic experience including teaching in one or more fields of study under review;
- Successful experience in a senior academic position;
- Experience in post secondary education quality reviews;
- Recent experience in managing quality assurance processes in an educational environment;
- Recent senior experience in research or professional practice in a relevant field combined with recent direct academic activity;
- Demonstrated expertise in the analysis and interpretation of data in forming and validating conclusions;
- Ability to understand and evaluate information provided informally through consultations as well as in formal reports in a way that is sensitive to the particular context, to form hypotheses about underlying issues, and to investigate and form conclusions based on evidence obtained.

Prior to their appointment members of the review panel will be asked to sign a form declaring that they do not have a conflict of interest, and making a formal commitment to maintain the confidentiality of the proceedings after the review is completed.

4.2 Responsibilities of Review Panel Members

Responsibilities of panel members include actions before, during and after the review.

4.2.1 Before the Review

Panel members should familiarize themselves with the standards and requirements for quality assurance and accreditation as specified in the documents provided by the NCAAA. This is essential because the judgment about accreditation is to be based on performance in relation to the Commission's standards.

- When material about the institution or program is received it should be read thoroughly so that the institution's mission, policies and procedures, and its quality assurance mechanisms are thoroughly understood. The reports should provide evidence of quality of performance which the panel has responsibility to verify.
- After reading this material panel members will normally be requested to identify matters that they believe should be investigated in detail as a result of the material studied. Brief written comments about these matters and possible questions that might be asked should be provided to the chair of the review panel and to the nominated officer at the Commission by the date specified.
- Panel members will normally be asked to investigate particular issues in depth during their initial preparation and during the review itself as well as contributing to the overall evaluations as a member of a review panel.
- Panel members may request that additional information or documents be provided or ask that additional evidence relating to the institution's self study conclusions be provided.
- Panel members should prepare possible questions to ask students, staff or administrators in investigating these issues should be prepared in advance, and sources of evidence to supplement what has already been provided should be identified if necessary.

4.2.2 During the Review

Descriptive information about processes followed in the institution and the institution's evaluations of those processes and outcomes should have been provided in documents sent in advance to the panel. Meetings and consultations should focus on verification of conclusions reached, or investigation of issues identified in preliminary analyses for more detailed investigation.

Panel members should communicate genuine interest and understanding, and contribute to the panel's full understanding of the institution's activities.

The review process will involve a number of scheduled meetings with staff and students and others associated with the institution. During these meetings members of the panel will ask questions to investigate matters arising from their initial reading of the material provided.

Panel members should take part in all aspects of the review. It is essential that members follow the guidance of the chair and adhere to agendas and timelines prepared for the various activities.

Arrangements may be made for follow up discussions by individual members of the panel to investigate particular issues in greater depth or to give further consideration to matters raised in later discussions. Where follow up on particular matters is required this should be arranged through the panel chair with the person nominated by the institution to assist with arrangements. It should not be done independently.

Notes should be prepared by each panel member on matters he or she has been given responsibility for investigating. It is important that these notes include summaries of relevant evidence as well as any tentative conclusions formed.

Where a panel divides into sub-groups members may be asked to prepare summary notes for the information of others who are involved in different activities.

The review schedule provides times for the review panel to meet at stages during the review. Full advantage should be taken of these times to discuss and reach preliminary conclusions, or to identify additional investigations that need to be undertaken.

During the review and at its conclusion members should assist by drafting assigned sections of the panel report. Conclusions about commendations, suggestions and recommendations should be discussed and agreed by the panel as a whole.

4.2.3 After the Review

On request members of a panel may provide comments to the Commission on the review process or on aspects of the institution's reports and activities that might be helpful in improving quality assurance arrangements.

Matters discussed or reported on in the review should not be discussed with persons other than the panel chair or other members, or the Commission. All such matters should be kept strictly confidential. Information about the review will not normally be provided other than by the Commission, or under special circumstances with the specific approval of the Commission, by the panel chair. Notes made and material provided during the review should be kept strictly confidential. Notes should be destroyed when no longer required, and other documents either returned to the institution or destroyed.

4.3 Responsibilities of the Chair of a Review Panel

The chair has major responsibilities in leading the group investigation and coordinating its activities, in establishing a climate of cooperation and support in what is potentially a sensitive activity, and in coordinating the drafting of the report.

- When the review panel is first formed the person nominated as chair may be asked to consider material supplied by the Commission and the institution, and advise the nominated officer at the Commission of any special requirements for the arrangements and scheduling of the review activities.
- If circumstances permit the chair may participate with the Commission officer in preliminary discussions with the institution about arrangements for the visit.
- The chair should consult in advance (normally by email) with the members of the review panel to identify matters that they believe after reading the material supplied will need to be given particular attention during the site visit, to work out particular responsibilities for team members during the visit, and to formulate key questions that might be asked during the review. For example, panel members may be asked to give particular attention to performance in relation to several of the Commission's standards, to prepare key questions, and at a later stage to prepare initial drafts for the report commenting on those standards and possible commendations suggestions or recommendations.

These assignments may be reviewed when the review panel meets at the start of the site visit and the comments modified as necessary during the visit under the leadership of the chair in keeping with the opinions of the group as a whole.

- During initial meetings at the institution the chair should act as spokesperson for the group (though this responsibility may be shared with the nominated officer from the Commission). In doing this it is vitally important that a collegial and supportive climate be established, in

which staff and students at the institution and panel members believe they can communicate openly and constructively about matters that may emerge.

- During meetings and in organization of other activities the chair should provide effective leadership, ensuring that meetings proceed in a constructive manner, remain on schedule, and that members can participate effectively in the discussions. The time schedule for meetings is a very important issue. The chair should insist that all meetings commence and conclude on time. If additional time is needed to deal with issues that emerge arrangements may be made for follow up discussions with one or more members of the panel.
- At the conclusion of the visit the chair should ensure that the views of all the panel members are expressed, supported by appropriate evidence, and that notes on those views are provided to assist in the preparation of the report.
- In the exit meeting with the Rector or Dean, or other senior faculty, the main conclusions reached should be outlined by the chair in a constructive manner, with acknowledgement and thanks for the assistance provided in the review. Advice should be given that a draft of the report will be made available for checking on factual accuracy.
- At the end of the review the report should be given to the nominated officer at the Commission.

After the report has been sent to the institution and a response received the Commission may seek comment on possible editorial changes, and if an issue arises about the accuracy of data included or adequacy of evidence to support conclusions, further advice and comment may be sought.

It should be understood that although the review panel is providing expert advice on the review, that advice is given to the Commission, and the final report that is made public is the report of the Commission. Consequently although the Commission will normally follow the advice that it has received it is not bound to do so in all respects, and may seek further advice on particular matters if it believes it is necessary to do so.

4.4 Avoidance of Conflict of Interest

All members should be independent of the institution being reviewed, with no personal, professional or commercial relationships that could lead to a conflict of interest, or even the perception of such a conflict.

A person should not serve on a review panel if he or she has personal or business connections with the institution under review, or with any of its students, senior staff or governing board.

When first approached about participating in a review the panel member will be asked to indicate any potential conflict of interest or prior association that could, or could reasonably appear to influence judgments made. These would include any contractual or personal relationships with the institution or its staff or students, any family or tribal relationship, any past dispute with the institution or senior staff, any close personal friendships, or any anticipated future personal commercial or educational relationship. They will be asked to sign a document certifying that they have no conflict of interest with the institution under review. If the member has any doubts about whether any past or possible future relationship would be considered a conflict of interest details should be provided to the Commission for consideration.

As a general rule the Board will avoid including a member of staff of a private institution on the review panel for another private institution offering similar programs in the same geographical area.

4.5 Verifying Conclusions in an Institution's Self Study

It is the job of the institution to provide programs and services that meet the required standards, and to establish mechanisms to check that it has done so. It is the panel member's job to independently verify that these processes have been effective. This means that they need to look closely at the processes followed, though they can be selective in what they follow up in detail.

Time in the institution is limited, so it cannot be expected that they will check everything. They must prioritize, and focus on areas where they have concerns. How can these areas be identified?

The starting point is the institutional self study or the program self study and program specification, and recent program reports produced by the institution. These documents should be evaluative, not merely descriptive. They should be read carefully, and decisions made about which aspects of them are most and least convincing. Supporting documents should be referred to, such as the course specifications and reports, administrative regulations and reports, data on indicators, survey results and so on. The panel member's job is to test, and if possible verify what the institution says about itself. Members are likely to focus on selected high priority items, and aspects they find least convincing, but not to the exclusion of other matters – they need to take a balanced view.

Testing and verifying can involve simply seeing for oneself – for example if there is a question about the adequacy of the library holdings or laboratory equipment. But where a more qualitative judgment is involved, it will be necessary to explore the perceptions of different people about the matter.

For example, a head of a department may be clear about the intended outcomes of a program. But does the person who is teaching a course that is part of that program understand those aims, and how their own course contributes to meet them? Find out by asking members of the teaching staff. Do students have a clear picture of what skills and abilities they are intended to develop? Do they think the teaching helps them develop those skills? Ask them!

An application for a new program has to be treated differently from an application for re-accreditation. For a new program the judgment has to be whether it is likely the program will achieve the necessary standards, not whether it is doing so. This means that it will be necessary to rely heavily on the plans set out in the application.

For re-accreditation, or for a new or extended program where a similar program is already operating, a lot of information can be gained from observations and discussions with staff and students, and this can be considered as well as the information in the institution's self assessment report and application.

4.5.1 Using the Criteria

This section suggests some lines of enquiry that might be taken in relation to some of the standards. They are examples rather than a complete list, and included here to suggest a style of approach. Judgment about the particular situation combined with experience elsewhere will indicate what needs to be looked at and what should be asked. The examples are prompts, based on the experience of people who have carried out many similar reviews.

4.5.2 Learning Outcomes

These should be set out clearly in the documents from the institution and cover the different types of learning described in the *National Qualifications Framework*. If they are not, some fundamental questions should be asked about whether the institution knows what it is doing. The statements of learning outcomes can be compared with the appropriate level of the *National Qualifications Framework*, and the panel member's knowledge of the specialist field should give the background to consider if they are adequate in relation to future employment.

As suggested above, in the re-accreditation or extension of a program teaching staff and students can be asked if they have a clear understanding of what a program is trying to achieve. Teaching staff can be asked what feedback is available from graduates or opinions of employers and how they use that feedback in reviewing the program.

The teaching strategies proposed for use in developing different kinds of learning outcomes should be clearly described in the documents from the institution. Knowledge of the subject field can help to assess whether the strategies are likely to be effective in promoting the learning necessary for students to achieve the intended outcomes. All of the outcomes should be supported by the curriculum and the level of demand should be progressively greater on the student at successive stages in the program.

Ask teaching staff how they see their teaching fitting in to the overall plan for the program, not just in terms of the knowledge acquired, but also in the development of capacity for thinking and increasing

levels of personal skill and capacity for independent learning. Students can be asked what it feels like to be following the curriculum. Does it meet their expectations?

4.5.3 Assessment

Does assessment cover the full range of learning outcomes? Does it test skills and ability to apply knowledge, or just recall of information? It should be possible to match the outcomes to the assessment tasks described in the documents that have been received. If that cannot be done, there are fundamental questions to ask about whether the institution can be confident that its students have met or will meet the standards required for the award of the degree or other qualification.

Is assessment appropriate? For example, to assess whether a student has mastered a practical skill, he or she should be asked to demonstrate it, not just write about it.

Are there safeguards against cheating or plagiarism? Is there some form of independent verification of results? The answers should be in the documents, but if they are not, it will be necessary to ask the teaching staff.

Are there clear criteria to distinguish between grades? Students can be asked if they understand what they have to do to get the highest grade. Teaching staff can be asked if there are explicit criteria for them to use when they are marking. What mechanisms are there for verifying standards? There should be some way of checking the standards at this institution with those achieved elsewhere.

Do students get helpful feedback? Ask them! It might be helpful to ask to see some student work that has been marked, and to form a view on whether the feedback given was fair and helpful.

Student views are very helpful in considering an application for re-accreditation. What does it feel like to be a student on this program? Are the teachers friendly, helpful and available to answer questions? What are classes like – interesting and informative, or dull and confusing? Do they feel the teaching is helping them to achieve the outcomes of the program?

Teaching staff can be asked how they adjust and vary their teaching styles to respond to the needs of students. Have they received any training in teaching techniques, or other pedagogical matters? Have they used those teaching strategies? How did the students react? Are the methods appropriate for developing skills and applying knowledge, or just transferring information? Are the planned strategies set out in the course specification actually used?

A panel member can ask to see some learning materials, and use specialist knowledge to consider whether they will be effective.

For re-accreditation, the documents should contain statistics on progression and completion rates. If these suggest high rates of drop out or failure, faculty should be asked for comments on the reasons for this. Has enough care been taken to select students who are well matched to the demands of the course? Have the reasons for drop out been analysed?

Ask students about the support and guidance that they receive and whether they think it could be improved. They could be asked whether the question has been asked by the institution, and if so, what has been the response.

4.5.4 Learning Resources

The quantitative assessment of the adequacy of resources is relatively straightforward. However volumes of collections don't mean much unless they are appropriate for the approach to teaching and learning. To establish whether the program is of high quality, it is important to consider how effectively the resources are used. For example, there is little point in having an excellent library if it is closed when students want to use it, or if they are not expected to seek information from a range of sources beyond a single textbook. How often do students use the library for independent study or for investigations they choose to undertake themselves?

4.6 Techniques for Information Gathering by a Review Panel

Members of a review panel need to consider both quantitative and qualitative data in verifying conclusions of self-study reports, finding strengths and weaknesses that and selecting matters about which improvements should be recommended. A number of techniques can be used.

4.6.1 Interviews

Much of the information needed will come from interviews in which clarifications are being sought, explanations obtained, and related information gathered that could indicate opportunities for improvement. Particular features of interviews may include:

- Clarification of any ambiguous data or conflicting claims, including conflicts between what may have been written and what individuals may have said.
- Checking on points that may be either the views on one or two individuals or generally held opinions within the institution.
- Constructive discussion about the interpretation of data and its implications.
- Checking that all relevant data has been seen rather than partial data that might give a superficial and mistaken impression.

In conducting interviews it is important to listen carefully and make notes on what has been said, and to concentrate on major rather than minor or insignificant issues. Making suggestions and proposals is not the role of the interviewers and should normally be avoided other than in response to a specific request or as a mechanism to find out more information.

Offering advice based on practice at the interviewer's own institution may be counter productive if it creates an impression that the interviewer is making comparisons with his or her own institution rather than looking objectively at what is being done at the institution under review. Any relevant suggestions based on other experience can be included in a report if the panel as a whole believes them to be relevant

In addition to sampling of issues by the review panel it is also important in individual or group interviews to provide opportunities for staff or students to raise matters they believe should be considered. Although it may not be possible in the time available to explore such issues in as much depth as might be desirable, the opportunity to raise such matters and have them considered is an important element in the review process.

4.6.2 Obtaining Evidence from Different Perspectives

A further technique that can be used effectively, particularly in relation to matters where direct evidence is difficult to obtain and interpretations must be made, is to use triangulation. This involves seeking related information of different kinds and considering the consistency or inconsistency of conclusions reached. An example might be to compare perceptions of senior administration, staff, students, and external stakeholders on particular matters, together with statistical data from different sources. If similar conclusions are reached from different perspectives the conclusions can be accepted with reasonable confidence. If the conclusions differ, the result may be in some doubt, but in addition the extent of difference may itself be an indicator of some underlying problem.

4.6.3 Examining Selected Issues in depth

This strategy involves selecting some issue or planned development and looking at how it was dealt with and what follow up action was taken. An example might be to begin with a user survey of library services and follow action taken in response to that survey by a library reference or advisory group, action or non-action by library staff, and subsequent survey evaluations. Data for consideration might include the survey results, minutes of relevant meetings, interviews with staff, interviews with students etc. Similar processes could be used for action taken following teaching evaluations, by looking at course reports, action plans, subsequent action to implement the action plans, and later evaluations.

Since there is an enormous range of possible issues and many different functions and activities it is necessary to select a sample of matters to investigate. These should include some of the matters on which the institution has focussed in its own self-study, but should not be restricted to these. Other matters may be determined through a random selection process or by an analysis of data provided and identification of things that may have been missed or deliberately avoided.

4.6.4 Style of Questions

The style of questioning can lead to very different relationships and quality of information gained. As a general principle the questioners should try to communicate genuine interest in the matter being considered and a full and sympathetic understanding of the response. Questions should be carefully planned and carry the impression that the questioner has already carefully considered information that had previously been provided and is pursuing an important matter in greater depth. Things to avoid include asking multiple questions simultaneously, using lengthy preambles, telling anecdotes, describing another organization including the interviewer's own institution, and offering alternative possibilities for action in dealing with the matter under discussion without being asked to do so.

Apart from these general information gathering and questioning techniques there are some important quality issues that are highlighted in the standards and the self evaluation scales, and the National Qualifications Framework. These may be helpful for panel members planning their interviewing and investigating strategies.

4.6.5 Considering Inputs, Processes and Outcomes

In reviewing an institution or program inputs, processes and outcomes must be considered. The most important of these, and the focus of the documents used, is outcomes.

Inputs are the resources that are put into a program – staff, libraries, laboratories, and so on. These are necessary of course and it will be important to check that necessary resources are available to support the programs This is a largely quantitative measure.

Processes are the things that happen in the institution. They need to be efficient, and effective in promoting student learning, and in providing the necessary services and resources to support that learning. Many of the items in the standards documents and the self evaluation scales relate to processes followed in good institutions. An important part of the quality evaluation relates to whether these things are done in the institution or the program that is under review, and how well they are done.

Outcomes are the results of the activities that take place in an institution. They relate to student learning, research conducted, and contributions to the community.

For student learning the outcomes are what students are able to do as a result of completion of their program. They are a set of skills and abilities that the student will have developed. They are described in general terms for each of the domains of learning at increasing levels of performance in the *National Qualifications Framework*.

- knowledge associated with a field of advanced study or professional practice (knowledge domain)
- high level conceptual and cognitive skills that are used for solving complex problems, and for decision making in unique and unpredictable circumstances; (Cognitive skills domain)
- general competencies needed in a range of employments, such as communication, mathematical and analytical skills including use of IT Communication, IT and numerical skills domain)
- acceptance of personal and team responsibilities, capacity for learning, and leadership; ((interpersonal skills and responsibility domain)

And in certain fields of study, capacity to perform high level physical skills. (psychomotor skills domain)

It is these abilities that matter to employers, and which students must have developed if they are to progress in their careers. They need to be set at a level that is comparable with the outcomes achieved by universities elsewhere in the world, and the *National Qualifications Framework* is designed with that aim in mind.

For research activity (which is a required activity for universities but not essential for colleges) the outcome is not only the amount of research conducted (which can be assessed by such things as numbers of refereed publications or amounts of competitive research funding) but also its value and

significance. This is more difficult to assess, but can be evaluated through the use of indicators such as international citation indices or patents. Research can be basic or applied, may deal with the application of knowledge and theory to local or international problems, may be funded from a variety of public and private sources, and may involve applications of insights from one field of knowledge to another. It should include further applications and extensions or research undertaken by faculty in post graduate programs. However to be judged as legitimate research it must have been subject to some appropriate form of independent peer review.

For outcomes relating to an institution's contributions to its community the concern is not just to the amount of such activity, but also to its significance and value. Consequently evidence provided by an institution about community contributions should include some evidence about what difference they have made. Such contributions should include activities provided by an institution from within its own resources, and services for which charges are made.

4.6.6 Checking on Standards of Learning Outcomes

Institutions have been asked to establish learning outcomes that are consistent with the *National Qualifications Framework*, that meet the requirements for professional practice, and to introduce mechanisms to verify standards of learning outcomes. This verification of standards of learning is important to ensure internal consistency within an institution (an A in one course or section of a course should be comparable to an A in any other) and to ensure that the quality of learning outcomes is consistent with that achieved in other good institutions (an A at one institution should be comparable to the quality of achievement to earn an A at another). The standards for learning and teaching include a requirement that there be systems in place for verifying standards of student achievement and self study reports should include descriptions of how this was done.

External reviewers familiar with particular fields of study can look at samples of students work and form opinions of the standards achieved. However a more important and more valid approach is to look closely at the processes used by the institution to verify standards, the conclusions reached as a result of those processes, and action taken if any problems are found.

4.6.7 Testing and Verifying in Relation to Standards

Institutions have been advised that criteria for accreditation will include generally accepted standards of good practice in higher education. Exactly what these "generally accepted standards of good practice" are could be open to debate. However to provide a guide, descriptions of a number of these practices have been provided by the Commission as "standards" documents, and self evaluation scales have been provided to assist institutions and programs managers in their self evaluations relative to them. The standards are defined in eleven broad areas of activity relating to functions carried out in higher education institutions, with sub sections and individual items that relate to specific activities within each area. Self evaluation of performance in institutions should be based on these standards, and the extent to which the institutions (or programs) own goals and objectives are achieved. Evaluations for accreditation are based on the same criteria.

Higher education institutions have been asked to base their judgments about quality on evidence as much as possible and to indicate in their reports the evidence on which their conclusions are based. This should make it possible for a reviewer to consider the evidence and make a judgment about whether the conclusions reached are valid.

For a program to be accredited, it must be consistent with the qualifications framework, and meet at an acceptable level all of the standards relating to programs and learning support services set out in the Standards for Quality Assurance and Accreditation of Higher Education Programs. For an institution to be accredited it must meet all the standards in the Standards for Quality Assurance and Accreditation of the overall quality of its educational programs. Of course it does not have to be achieving high standards on every item considered. However if problems are found they should be identified and acceptable strategies for dealing with them must be in place.

4.7 Some Issues in the Conduct of External Reviews

4.7.1 Judgments of Teaching Effectiveness

Observations of teaching are unlikely to provide a valid or reliable view of teaching effectiveness in the short and unusual circumstances of an external review, and are not encouraged. However assessment of the effectiveness of teaching is extremely important and evidence about it should be provided by the institution through such things as examples and overall analyses of student assessments of teaching effectiveness and trends in these over time, induction and peer support strategies, and institutional research on the effectiveness of techniques to develop different kinds of learning outcomes.

In relation to teaching strategies the information should include not only the strategies themselves, the extent to which they are used, and their effectiveness in developing the outcomes they are designed for. Reference should be made not only to knowledge acquisition but also to personal responsibility and capacity for self directed learning, the skills of communication, transfer of learning and creative problem solving that are emphasized in the *National Qualifications Framework*. The evidence provided by the institution should be verified through discussions with students, through consideration of results of program reviews and surveys of graduates and their employers, and any other measures the institution may have introduced.

4.7.2 Discussions with Students.

As noted above, important objectives of the review are to verify the outcomes of the institution's internal review processes and to make informed and independent judgments about quality. This requires free and frank comment from a representative cross section of the student body. However the tone of cooperation in planning for improvement should be preserved in discussions with students, and a careful balance must be achieved between identifying problems and confirming strengths.

The comments of students may be inhibited by cultural sensitivities such as reluctance to criticize, unwillingness to communicate with or in front of members of staff, or by fear of consequences if critical comments are reported back to the institution. Consequently they should be encouraged to speak openly and frankly with assurance of complete confidentiality, and if necessary on an individual basis. Any such assurances must be honored. On the other hand individual students may have experienced personal difficulties that are not representative of the student group as a whole, and make criticisms that do not accurately reflect the true situation.

In many institutions it will be important for review panel members of the same sex to discuss issues with students in an informal way, and the experience of review panel members in other institutions is important in interpreting comments. Where critical comments are made they should be acknowledged in a non-judgmental way, and an opportunity taken without identifying the student concerned to verify the concern with the institution.

At least one meeting should be held with a representative group of students, and if there are separate sections for male and female students, with students in both sections. At any such meetings the members of the review panel should be introduced by a senior member of staff, the purpose of the meeting and the basis for selection of students described, and the desirability of providing representative and confidential comments emphasized. The member of staff should then leave the meeting, and return at a prearranged time to conclude the discussion.

Questions raised by panel members will vary according to the issues emphasized in the review. They might include some general matters such as how are the views of students sought; and how influential are those views when decisions are made; do students serve on institutional committees; have their views been sought in the institution's self study; and how confident are students at the institution that they are acquiring the intended range of learning outcomes and whether they are mastering the skills required for practice in their chosen profession. Questions on particular issues might be derived from the *standards documents and self evaluation scale*, from issues raised in the self-study and from program and course reports. A list of possible questions appropriate to the institution and or program concerned should be prepared beforehand by the members of the panel.

4.7.3 Discussions with Teaching Staff

As for discussions with students it is important to verify conclusions of the self-study and identify other issues that should be addressed through informal and formal discussions with faculty. There are potential barriers to effective communication with staff just as there are with students. The experience and skill of members of the panels will be important in overcoming these problems- Some general considerations that reviewers should keep in mind are discussed below.

It is important that the cooperative and constructive tone of the review is maintained and that it is made clear that the role of the review panels is not to find fault or to resolve disputes. If a member of staff has serious concerns these should be acknowledged, but the person referred to appropriate avenues for consideration at the institution or the responsible ministry. Members of the review panel should not be drawn into discussions with an aggrieved member of staff about an issue of personal concern.

Individual cases of dispute are not the business of the review, but they are relevant if they indicate a general issue of quality or administrative procedure. An appropriate response to an issue of this sort may be to discuss the issue with the institution. However great care should be taken not to probe matters that are confidential to a particular individual, but rather to determine whether the issue is of general concern, and whether the institution's processes are adequate to deal with it.

In discussions with staff, review panel members should be non-judgmental, and should avoid making comparisons with other institutions, including their own. Opinions about adequacy or otherwise of the institution's activities should, of course, be formed during the review, and evidence to support those opinions clearly identified. However these opinions should only be expressed in the confidential meetings of the panel. Communications about the conclusions of the review should only be expressed by the chair in the final meetings with the Rector of Dean and senior staff, and following the review only through the formal report approved by the Commission.

4.7.4 Matters of Commercial Sensitivity or Institutional Confidentiality

The review panel should be sensitive to personal matters that might be raised, or matters affecting individuals that should be confidential to individual students or members of staff. They should also exercise discretion in relation to matters the institution regards as commercially sensitive. It is highly desirable that any such matters be identified in advance so plans can be made for dealing with them, but this will not always happen. Verification of quality sometimes requires information about things the institution may want to keep confidential. If access to information that the review panel regards as important is denied by the institution, the possibility of a confidential examination by two members of the panel should be discussed with the Rector of Dean, or the senior member of staff responsible for assisting the review. Those two members would then report back to the rest of the group without revealing confidential details.

If this approach is not acceptable by the institution the review panel should indicate in its report that the information was not provided, and whatever conclusions follow from that non-provision should be included in the report. A decision whether to require the information will be made by the Commission, and in the case of a dispute between the Commission and the institution, the matter will be resolved by the Minister. In such a dispute the Commission's decision on accreditation must be guided by the information available to it, and its responsibility as an independent authority to accredit institutions and programs on the basis of evidence about their quality. It should not grant approval or accreditation if it believes that it does not have sufficient valid information on which to base a decision.

4.8 Deciding on Recommendations

The simplest way of doing this is to consider each standard in turn. What evidence is there and how does the level of provision compare with the descriptions of standards in the *Standards for Quality Assurance and Accreditation of Higher Education Institutions and the Standards for Quality Assurance and Accreditation of Higher Education Programs*. Is the panel's assessment consistent with the assessment made by the institution? The panel needs to make an assessment based on the documents read, the questions asked, and the facilities seen. The evidence itself should be evaluated. Is it sufficient? Or is it necessary to find out more or to attach a condition in relation to this criterion? Or does the evidence fall so far short of what is required that the criterion has not been met?

To recommend accreditation or re-accreditation of an institution or a program it is necessary to be satisfied that all the standards have been met. As noted above this does not mean that every single item in the self evaluation scales must receive a high rating. However the overall performance for each standard and subsection of standards must be satisfactory, and any specific difficulties or weaknesses identified and strategies in place to deal with them

4.9 Preparation of a Review Report

An initial draft of the review report will normally be prepared by members of the panel on the day following the review. It will draw on information from the institutional or program self study and other information provided by the institution prior to the review, and the notes prepared by the members of the panel during the review and the discussions held at that time. The comments and conclusions should represent the opinions of the panel members after reviewing the evidence provided by the institution and their own investigations in the review. Wherever possible opinions should be supported by evidence that has been seen and this evidence should be referred to in the report. Comments will not be made on individuals.

The report should not attempt to present a comprehensive description of the institution's activities. Rather, after a brief introductory description to provide a context, it should make comments on each of the relevant standards, but not on all the specific practices used in the self evaluation scales. Comments are only required on the individual matters that need to be referred to.

An important element in the report is the verification of the institution's judgments of the quality of matters considered in its self-studies, and confirmation of those judgments or suggested variations should be included. In addition the report should note in its comments any activities or initiatives that should be commended, and any that represent weaknesses that should be addressed. Where such matters have already been identified by the institution and are being addressed this should be acknowledged, though the panel may wish to comment on whether the action being taken is likely to resolve the problem.

Where practices are commended and have potential for implementation elsewhere, the Commission may invite the institution to prepare a brief summary for inclusion in a "Good Practice" website.

The report by the panel should include a recommendation on the decision by the Commission to accredit the institution or program, indicating the reasons for its recommendation.

Reports on reviews may vary to some extent reflecting differing issues and circumstances. However they will normally include the following sections:

- Introduction, including a brief description of the institution and significant features of its mission, planned development, and environment. This would be derived largely from information provided by the institution. In an institutional review the report will include an introductory section describing the history and main features of the institution.
- Description of procedures and range of activities followed by the review panel.
- Introductory comments, suggestions and recommendations relating to the institution's quality of performance in relation to each of the standards identified in the *Standards for Quality Assurance and Accreditation in Higher Education Institutions (or Programs)*. In its observations the panel should acknowledge instances where problems have been identified by the institution and are being dealt with (though it may comment on whether the response is adequate). It will also note any commendations for activities that might be considered for inclusion in the Commission's "Good Practices" website.
- List of suggestions and recommendations for consideration by the institution.
- The Review panel's recommendation to the Commission on whether the institution or the program(s) should be accredited.

The final report is a public document owned by the Commission and responsibility for it rests with the Commission. When it has been finalized it will be made publicly available by the Commission. However before that stage is reached the following steps will be taken.

(i) The draft of the report will be given to the Commission at the conclusion of the review visit. The Commission may make editorial changes for consistency of style and presentation, but will not change the substance of the comments and recommendations that the report contains. If changes are made the edited draft will be sent to the chair for comment.

(ii) The draft report will be sent to the institution to check for accuracy of factual information. Responses should be specific, citing page references, and indicating what changes in wording would be required to correct an error. Specific evidence should be provided in support of the change. Three weeks will be allowed for this response.

If significant corrections are requested the Commission may consult with the chair of the panel about the changes and any implications for the recommendations in the report, and may amend the document at its discretion. In case of disputes over factual material the Commission may arrange for independent advice on the matter, and will make a final decision following consideration of the advice it receives. It is emphasized that this step in the process is designed to check for factual errors, not to provide an opportunity for changing the conclusions of the report. However if major factual errors are identified appropriate amendments should be made.

(iii) The Commission will review the document and prepare a final version. Copies of the report will then be provided to the institution and made available to the responsible Ministry. Arrangements may be made by the Commission for the report to be included on its web site. The report will not be made publicly available until after it has been provided to the institution. This is done to ensure the institution is fully informed before the report reaches the public domain

(iv) The report of the review panel will be considered by the Commission and a decision made on accreditation. The Commission may decide to accredit the institution or the program, to defer consideration until certain conditions had been met, or to deny accreditation. Where an institution or program has been provisionally accredited the Commission may at its discretion agree to a continuation of that provisional accreditation for a specified period and subject to certain conditions.

4.10 Action Following a Review

After completion of each review the Commission will invite the institution to provide confidential comments on the value and effectiveness of the review process and the contribution of the panel to its quality assurance processes. These comments will be used by the Commission in reviewing its own procedures, and in selection of personnel for future reviews.

The Commission will also invite the review panel to provide any informal comments on the self study and review process at the institution. These comments will not be included in the report of the review panel. However the information will be used by the Commission in reviewing and improving its own arrangements, and information relevant to the institution's activities will be passed on to it for consideration in improving its quality assurance processes.

The institution will be expected to consider the external review report and take appropriate action in response, as part of its normal quality assurance processes.

In cases where there are specific requirements relating to accreditation the institution will be expected to indicate what specific action it will take in response, and to report within a specified period of time that the necessary action has been effectively taken.

This follow up should occur in two stages.

First, within three months of the receipt of the final report and the decisions of the Commission on accreditation the institution should advise the Commission of action it proposes to take in relation to recommendations in the external review report.

Second, when that action has been taken, a report should be provided to the Commission. If that report is not received by the date specified the Commission will investigate. Information about the action taken and results will be included with the external review report on the Commission's web site.

Where there are no formal accreditation or approval requirements but matters requiring attention have been identified in recommendations, follow up by the institution should still occur.

These follow up activities are intended to indicate responsiveness of the institution to constructive suggestions for improvement rather than being a further major imposition. Consequently major reports

are not expected, just summaries of plans and (verified) results. Further, unless specific requirements or conditions have been set by the Commission or the responsible Ministry it is not obligatory for the institution to respond in precisely the way the review panel has recommended. The responsibility for quality improvement rests with the institution and it is open to it to search for different solutions in keeping with its mission and strategic planning processes.

What is required however is that concerns be recognized, taken seriously, and appropriate action taken to deal with them. The recommendations made by the panel, and the responses made by the institution, will be known in subsequent external reviews, and the appropriateness and effectiveness of action taken will form part of the evaluation undertaken at that time. If appropriate action is not taken by the institution in dealing with concerns raised, it will be up to the relevant Ministry to take action, which may include directions or sanctions appropriate to the problem concerned. The Commission may deny or suspend approval or accreditation, but will not act as a policeman in enforcing responses.

4.11 Management of Disputes and Appeals

The processes for external review and preparation of reports are intended to be consultative and supportive rather than critical and adversarial. Nevertheless it is possible that differences of opinion or disputes may arise, or that judgments about accreditation or approval decisions may be disputed. Consequently procedures are available for resolution of disputes.

Complaints or disputes may relate to three different kinds of issues, (a) the way the tasks of the Commission are carried out by its staff or persons it appoints, (b) errors of fact, or misinterpretations of evidence in review reports, or (c) faulty decisions reached by the commission on questions of accreditation or approval. Grounds for disputing the outcome of reviews (type (c) issues) may include failure to follow the published procedures for review that are sufficiently serious to undermine the validity of the decision, or unreasonable judgments about an institution or program on the basis of evidence available to the review panel and the Commission at the time decisions were taken.

To be sustained an appeal over an accreditation decision would need to demonstrate that a decision is unreasonable in the light of the available evidence. The appeal process must demonstrate procedural fairness for the appellant. However consideration must also be given to the public interest in the outcomes of the accreditation and approval process in ensuring provision of high quality educational programs. Consequently if an appeal is upheld, the normal remedy will be to have an independent reassessment of all or part of a proposal, rather than to grant accreditation.

4.11.1 Dispute Over Actions of the Commission

Any complaints about the procedures followed by members of the staff of the Commission, or by review panels or other parties involved in Commission activities should be addressed to the Secretary General of the Commission who will consider the matter, determine a response, and advise the complainant of action taken. In considering the matter the Secretary General may at his discretion seek the advice of another person or persons who are independent of the dispute and have not been involved with the panel concerned, to advise on the matter.

Any complaints about the actions of the Secretary General of the Commission including failure to act appropriately in response to issues raised under item (a) should be addressed to the Chair of the Commission who will consider the matter, determine a response and advise the complainant of action taken. In considering the matter the Chair of the Commission may at his discretion seek the advice of another independent person or persons to advise on the matter. The decision of the Chair of the Commission will be final.

4.11.2 Dispute over Factual Accuracy of Material Contained in Reports

The institution will be given an opportunity to comment on significant matters of fact that may have been overlooked or misunderstood during the review, and to request corrections. The Commission will consider any such requests and may consult the chair of the review panel in doing so. The institution will be advised of the response and provided with a copy of revised wording in the draft report.

If the institution is dissatisfied with the response it may appeal to the Secretary General of the Commission requesting an amendment and providing evidence to support its request. The Secretary

General will consider the matter, determine a response, and advise the institution of action taken. In considering the matter the Secretary General may at his discretion seek the advice of another person or persons who are independent of the dispute and have not been involved with the panel concerned, to advise on the matter.

If the institution believes the Secretary General has not taken proper action in response to the request and not reached a proper conclusion it may write to the Chair of the Commission requesting further consideration of the matter. The Chair of the Commission will consider the matter, determine a response and advise the complainant of action taken. In considering the matter the Chair of the Commission may at his discretion seek the advice of another independent person or persons to advise on the matter. The judgment of the Chair of the Commission will be final. If the Chair of the Commission seeks independent advice in making his decision under this provision and the request of the institution is not upheld, the Commission may charge a fee to cover the costs of the review.

If the request by the institution is agreed to, the report will be amended in keeping with that decision. If the request is not agreed to the report will be amended with an addendum indicating that the matter in dispute has been considered and not upheld.

4.11.3 Dispute over Accreditation Decisions

Decisions on accreditation of programs or institutions are made by the Commission following advice received by external review panels that it appoints. Conclusions should be based on evidence. If there is a dispute over factual accuracy or non-inclusion of relevant information the matter will be dealt with under the procedures described in items 3 and 4 above.

If there is a dispute over the judgment of the review panel on accreditation or approval, or over the decision of the Commission following that advice, the institution may submit an appeal to the Chair of the Commission citing evidence in support of its appeal in relation to the procedures, standards and criteria for decisions that have been adopted by the Commission.

The Chair of the Commission will consider the submission and if he believes there are reasonable grounds for considering the appeal will appoint a three-person appeal board to advise on the matter. The three persons will include two persons nominated by the Chair of the Commission with expertise in quality assurance matters in educational institutions relevant to the dispute who have not been involved in the review of the institution or program, and a member of the Board of the Commission other than the Chair or the Secretary General. The member of the Board of the Commission will chair the panel.

The appeal board may recommend rejection of the appeal if it believes the decision made was reasonable in the light of the evidence considered and the standards and criteria specified, or acceptance of the appeal if it believes the decision was not reasonable. The decision of the Board of the Commission after considering the appeal boards recommendations will be final. If the appeal is rejected the Commission may charge the institution a fee to cover the costs of the review. If the appeal board believes there is insufficient evidence to make a fully informed decision, or that there has been a deficiency in procedures or other formalities or technicalities, or an error of judgment of sufficient magnitude to affect the validity of the decision it may recommend that the decision be suspended and a further full or partial external review undertaken. As noted above, in the public interest a remedy if an appeal is approved will not be to grant accreditation, but rather to arrange a further independent review. The decision of the Board of the Commission to suspend the decision will be final and arrangements may be made by the Commission and the institution for a further consideration as proposed.

Documents and Information Required to Meet Ministry of Higher Education Requirements for Approval of a New Higher Education Institution

Details of requirements for initial approval of a new higher education institution should be obtained from the Ministry of Higher Education.

For institutions that will be responsible to other Ministries or organizations such as the Ministry of Health or the Technical and Vocational Training Corporation (TVTC), should be obtained direct from the Ministry or organization concerned.

Attachment 2

Application for Provisional Accreditation of a Higher Education Institution

Application Summary

1. Name of institution _____

3. Location (s) _____

4. Date of approval of initial licence to establish institution

5. Proposed date of commencement _____

6. Intended student enrolments within five years of commencement

	Number of Students			No of Courses Offered
	Male	Female	Total	
Year 1				
Year 2				
Year 3				
Year 4				
Year 5				

7. Proposed Programs and levels of awards (Include foundation or preliminary year if relevant)

Award Title	Field of Study	Major Study or Track(s)	Year of Introduction
Foundation Year (if applicable)			

(Note: Levels of Awards must be consistent with Qualifications Framework)

Extend table as necessary to include programs planned for the first five years. Detailed program proposals will be required for those to be offered within the first three years.)

8. Statement of Mission

8. Name of partner or sponsoring institution (if any)

9. Language of Instruction _____

10. Existing institution(s) to be included in a merged institution (if any)

11. Proposed student fees per year _____

Documents to be submitted with Application

1. Letter granting the initial license to establish the institution
2. Detailed proposal for provisional accreditation of the institution with attachments as required.
3. Proposals for provisional accreditation of programs to be offered within the first three years.
4. Agreement with partner institution (if any)

Information Required by the NCAAA in a Proposal for Provisional Accreditation of an Institution

A detailed proposal is required in addition to the summary shown in Attachment 2. The proposal should set out plans for the institution that contain sufficient information to demonstrate that requirements for quality assurance and accreditation will be met. This information should be presented in an unbound, page numbered report, single sided, with a table of contents. Where supporting information required is in separate documents these should be referred to in the text of the proposal and attached as numbered appendices. A copy of the documents should be provided in English or Arabic as determined by the Commission in hard copy and in electronic form on CD.

If information required has been included in a separate document required by the Ministry of Higher Education or another ministry or organization, and a copy of that document is attached, the information need not be repeated but should be referred to in the text with a cross reference to where the information is located. That information should also be provided in both hard copy and in electronic form.

Section 1.

Descriptive and General Information

- The proposed title of the institution
- Name and contact details of a person from whom additional information can be obtained
- The proposed location of the campus or campuses
- A brief statement of any special issues or circumstances affecting the development of the institution
- Fields of study and levels to which programs are to be offered within the first five years.
- Titles and levels of academic awards for programs to be offered within the first five years with details for each campus where more than one campus is proposed.
- Time line for establishment of the institution including development of facilities and provision of equipment, staffing, and commencement of programs, with the numbers of students expected to be enrolled on a year by year basis for the first five years.

Information Required on Stages of Development

Details must be provided of facilities and resources to be provided at two vital stages in the development of the new institution. The first stage is the preparatory work to be completed in preparation for admission of the first group of students. The second stage refers to further developments that are planned to occur as the institution becomes fully operational. As noted above a schedule should be provided to indicate when these will occur.

Plans for the facilities and equipment and administrative arrangements required by the Ministry of Higher Education must be approved by the Ministry. The Stage 1 component of these plans must be completed before students can be admitted. This will be checked by the Ministry in a site visit before a final license is issued.

Plans for quality assurance arrangements and operating procedures that will meet the standards specified by the NCAAA must be approved by the Commission. Sufficient information must be provided in the initial proposal for the Commission to be confident that its standards will be met.

Stage 1 Preparatory Work to be Completed Before a Final License is Issued

Stage 1 of the development includes the provision of facilities, equipment, staffing, and other resources and processes that are necessary for the first group of students during the first year.

Facilities and equipment must be sufficient for the courses to be offered in the first year, adequate for the number of students to be enrolled, and there must be firm commitments for further developments to

meet requirements during subsequent years to meet the requirements for the planned numbers of students and programs.

Staffing must include the staff required to lead the development of each program to be offered and carry out teaching responsibilities (ie a fully qualified and appropriately experienced head of department or program coordinator in the field concerned should be appointed, and staff employed to teach the courses to be offered in the first year.) Evidence of the availability of teaching staff could include completed contracts of employment with appropriate commencement dates prior to the start of the classes concerned.

Information Relating to Quality Standards that is Required by the NCAAA

Information provided will be checked by the NCAAA for consistency with its standards before Provisional Accreditation is granted.

Mission

- Concise statement of the mission of the institution and goals for achievement in the first five years.
- A brief statement of the rationale for the mission including reference to major economic, cultural and demographic features of the region in which the institution is to be located.

Governance and Administration

- Description and or charts showing the proposed general and academic administrative structure of the institution.
- Titles and job descriptions for senior positions.
- Titles, terms of reference and membership structure of academic and administrative boards and committees. If the proposed institution is to be established by an international institution or other organization the relative responsibilities of the Saudi Arabian institution and the international institution or other organization should be clearly specified.
- A copy of the constitution or articles of governance for the institution.

Quality Assurance System

- A statement setting out organizational arrangements, responsibilities, processes and timelines for introduction of quality assurance arrangements dealing with the matters described under Standard 3 in *Standards for Quality Assurance and Accreditation of Higher Education Institutions*. This system should include proposed key performance indicators and benchmarks to be used for evidence of achievement. Details should be provided of staffing, resource provisions and terms of reference for a quality center and quality committee, a list of key performance indicators, sources of benchmarks for comparisons of quality of performance, and an annual quality performance monitoring system.

Learning and Teaching

(Note: This section deals with overall institutional processes and arrangements for assuring the quality of teaching and learning throughout the institution. The accreditation of individual programs is dealt with separately in applications for program accreditation.)

- List of programs and qualifications to be awarded. These should be consistent with the National Qualifications Framework and planned dates of commencement for each program should be provided.
- Summary of any special student attributes that the institution intends to develop in its students, and strategies to be used in developing those attributes.
- Details of policies or regulations establishing processes for verification of achievement of standards of intended learning outcomes by students and other aspects of course and program quality
- Student admission requirements.
- Strategies to be followed in evaluating and improving teaching effectiveness

- Systems for support of student learning including regulations governing faculty workloads and availability for student counselling and advice, tutorial assistance, and mechanisms for monitoring student progress and workload.
- Institutional processes for course development and review including program approval procedures, employer and student feedback, and industry or professional advice on programs.
- If the new institution incorporates an existing institution or institutions, details of transition arrangements to ensure opportunities for current students to complete their programs.
- If the institution is to be established under sponsorship by or in partnership with another institution, a copy of any contracts establishing those arrangements and, a description of the processes to be used for evaluating their effectiveness.
- If courses are to be wholly or partly offered by distance education details of plans to meet the *Standards for Quality Assurance and Accreditation of Programs Offered by Distance Education*.

Student Administration and Support Services

- Identification (where a standard computing package is to be used) or description of the computing system to be used for student records and administration. This must be appropriate for the programs offered and provide reliable and secure student records, and have the capacity to provide the data necessary for key performance indicators.
- Details of administrative arrangements and funding provisions for student services including extra curricular activities, and indicators to be used for evaluation of quality of these provisions and services.
- Plans for provision of student services, including medical, general counseling and academic advice.
- If student residences are to be provided by the institution, details of supervision arrangements and services to be made available.
- Copies of regulations dealing with the following matters should be provided.

Registration and admission procedures.
 Security and privacy of student records.
 Communication and publication of results.
 Student progress rules.
 Student discipline procedures.
 Fee collection and refund policies if applicable.
 Student appeal procedures.
 Codes of Conduct for students, faculty and staff.
 Assessment for advanced standing on admission.

Learning Resources

- Details of the nature and extent of learning resource provision including the library and reference collection. An explanation should be given of the relationship of these plans to the approach to be taken to teaching and learning in the programs to be offered.
- Details of electronic and web based material to be made available.
- Details of computing facilities to be made available for access to electronic material through a library learning resource centre.
- Details of planning and evaluation processes for learning resource provision, and indicators and benchmarks of effectiveness of provision
- Sufficient information should be provided about budget allocations, organization and user support, for an independent assessment of adequacy of provision. The submission should include reference to established standards and level of provision at comparable good quality institutions offering similar programs elsewhere.

Facilities and Equipment

- Copy of information technology policy and associated regulations including codes of conduct, security, compatibility of software and hardware.
- An independent report on the adequacy of equipment for administrative and teaching requirements. For a proposed university or other institution which is intended to be involved

with research or the provision of postgraduate studies, an independent report on the adequacy of planned facilities and equipment for the proposed level of research activity.

Faculty and Staff and Employment Processes

- A table showing proposed faculty and staff numbers in each year for the first three years in relation to the numbers of students proposed to be enrolled, the courses to be offered, and the ratios of faculty and staff to students in each year.
- Statement of policies on level of qualifications required for employment of teaching staff.
- Details of regulations, processes and opportunities for staff professional development.
- Planned system for recruitment, and orientation and training of new teaching and other staff.
- Policy and regulations on supervision and evaluation of staff, and mechanisms for recognizing and rewarding outstanding performance.
- Policies and regulations on dispute resolution, discipline and appeal procedures.

Research

(For a proposed university, or other institution wishing to develop postgraduate programs or research activities.)

- Research development plan including administrative arrangements, priority fields for development, mechanisms for cooperation with community and other organizations, and timelines for implementation.
- Policy on teaching staff participation in scholarship and research.
- Policy on maintenance and management of equipment obtained through research funding.
- Strategy and timelines for development of higher degree research programs.
- Policy on student participation in staff and institutional research.
- Policy and regulations on intellectual property and commercialisation of research.
- Summary of indicators and benchmarks to be used in evaluating the amount and quality of research activity.

Institutional Relationships With the Community

- Community relations strategy including policy and mechanisms for encouraging staff involvement in community activities.
- Indicators and benchmarks to be used in evaluating the quality of community relationships.

Information Required in a Proposal for Provisional Accreditation of a New Program

For the Commission to grant provisional accreditation of a new program it must be satisfied that if the plans for the introduction of the program are implemented as proposed it will meet requirements for full accreditation.

Consequently as plans are developed careful consideration should be given to the standards set out in the Commission's documents, *Standards for Quality Assurance and Accreditation of Higher Education Programs* and the *National Qualifications Framework* as well as any specific requirements relevant to the field of study concerned. As part of the planning process attention should be given to the templates for program and course specifications and to the requirements for verifying consistency with the National Qualifications Framework set out in Part 2 of this Handbook. Program developers are expected to seek advice from a range of sources including experienced faculty in the field concerned, relevant employers or professional practitioners, and to consider requirements of relevant specialized accrediting agencies.

The following documents are required in support of an application:

1. Program specification in the form required by the Commission including the Course Planning Matrix.
2. Course and any field experience specifications for all courses to be offered in the first two years of the program and a detailed schedule for the preparation and institutional approval of those to be offered in later years of the program.
3. Program description in the form to be included in the institution's handbook or bulletin. This should include required and elective courses, credit hour requirements and department/college and institution requirements and details of courses to be taken in each year or semester.
4. Brief description of all courses to be offered in the form to be included in the institution's handbook or bulletin.
5. Handbook or bulletin description of admission requirements including any course or experience prerequisites.
6. Regulations specifying requirements for attendance, year to year progression and program completion.
7. Description of administrative arrangements for the organization and management of the program.
8. Description of process followed in obtaining advice on the content and development of the program including, for example, consultation and advice from faculty in the field at other institutions or other experts, advice from employers or representatives of the profession, consideration of requirements of professional bodies or accreditation agencies in the field concerned. The description should include a summary of advice received, and a copy of any reports or written advice should be attached.
9. Resource Acquisition Schedule.

The program specification includes details of equipment, staffing and resource requirements when the program is fully operational. An application for provisional accreditation must include in addition a detailed semester by semester schedule specifying facility, equipment,

staffing and resource requirements for the period until the program is fully implemented. This should be presented in tabular form indicating planning and preparation timelines, details of requirements, expected costs by semester, and an indication by the relevant authority in the institution (e.g. chief librarian, facilities manager, dean) indicating that the necessary resources will be available when required.

National Commission for Academic Accreditation and Assessment

Annual Report on Changes in Accredited Programs

It is a condition of accreditation by the National Commission for Academic Accreditation and Assessment that a brief report be submitted annually to the Commission advising of any amendments made to programs that it has accredited.

A major change is one that significantly affects the learning outcomes, structure, organization or delivery of a program or the basis for its accreditation. The Commission must be advised of proposals to make major changes at least one full semester in advance of the change being introduced or accreditation may be suspended. The Commission will advise the institution if it believes an assessment of the impact of the proposed change on the accreditation status of the program is required.

Information about other changes should be provided in annual reports no later than the beginning of the semester in which they are introduced.

Examples of major changes would be the addition or deletion of a major track within a program (e.g. accounting or international finance majors within a commerce or business degree), the addition or deletion of a core course of study (e.g. mathematics in an engineering degree either deleted or made an elective), a change in title that implied a new or different field of study, reorientation or development of a program to prepare students for a different occupation or profession, or a change in the title of a program or award that implied coverage of a different field of study or professional preparation, a change in the length of a program (number of semesters or number of credit hours), or the inclusion or deletion of an exit point within a longer program (e.g. the granting of an associate degree within a bachelor degree program).

Examples of minor changes that should be reported by the time they are introduced would be the introduction or deletion of an optional course, a change in recommended teaching strategies or assessment processes as stated in the program specification, a change in credit hour allocations for individual courses without changing the total credit requirements for the program, variations in proportions of time allocated for laboratory, lecture or tutorial requirements, changes in processes for program evaluation, or changes in strategies for professional development of faculty and staff.

Changes in text or reference materials, in the assignment of teaching faculty, and minor variations in course content are expected as part of ongoing program development, and need not be reported.

5. Impact (if any) on Students Already Enrolled in the Program

6. (a) Resources Required (if any) (including equipment, facilities, reference material etc.

(b) Have funds been allocated for the provision of these resources? Yes No

If not, What provision has been made for provision of resources required.

7. Faculty Requirements (if any) Eg. Faculty recruitment or retraining, professional development, etc.

Annual Report on Program Changes

To be submitted annually for all accredited programs where minor changes are made

1. Courses Added to or Deleted from the Program

Reasons

2. Changes in Teaching Strategies Recommended in the Program Specification

Reasons

3. Changes in Assessment Processes Recommended in the Program Specification

Reasons

4. Changes in Program Evaluation Processes

Reasons

5. Changes in Arrangements for Course Delivery (Mix of lectures, tutorials, laboratories, etc.)

Reasons

6. Changes in Professional Development or Training Provisions for Faculty

Reasons

7. Other Changes

Reasons

Requirements for a University

Standard

The institution must be committed to the creation, transmission and application of knowledge through research and scholarly activity. It must be dedicated to the development of highly skilled professionals and scholars in a number of fields through undergraduate and postgraduate academic, professional and research programs. The requirements stated here are a minimum rather than a desirable level of performance. It is expected that an established university would have substantially higher levels of research activity and involvement of post graduate research than is stated here and that it would benchmark its performance in research and post graduate studies against highly regarded international universities. .

Good Practice in a University

Good practice in relation to the activities of a university is described in a number of the detailed standards in the *Standards for Quality Assurance and Accreditation in Higher Education Institutions*. These are applicable to universities as they are to other higher education institutions but there are additional requirements for a university.

Minimum specific requirements are:

Breadth of Programs

Programs offered in at least three broad fields of learning¹ with a minimum of 10% of the institution's students enrolled in programs in each of the three fields.

Level of Programs Offered

Undergraduate programs should be provided in at least three fields of learning. At postgraduate levels programs should be offered up to the level of doctorates in at least one of those fields and at least masters degrees in a second. At least 5 % of students must be enrolled in higher degree programs. At least 2.5% must be enrolled in research degrees.

Involvement in Research

At minimum of 2.5% and preferably at least 5% of the annual operating budget of the institution (excluding student stipends) must be spent on support for or conduct of research. This amount can include special research grants, the institution's share of joint research and development projects and the provision of support for specialized research equipment for staff and postgraduate student research. However it does not include funding for the teaching of postgraduate research or other programs, or general program administration.

Sustained Scholarly Activity

Teaching staff at all levels in the institution should be involved in scholarly activities that ensure familiarity with the latest developments in their field and include exposure to those developments in

1. For the purposes of this requirement the following are considered broad fields of learning. . 1. Fine and Performing Arts, 2. Humanities and Religious Studies, 3. Education, 4. Social Sciences, 5. Business and Management, 6. Law, 7. Science, 8. Computer Science, 9. Engineering Manufacturing and Construction, 10. Agriculture and Related Studies, 11. Health Sciences, 12. Personal and Community Services. (Classification subject to review)

their teaching. Faculty who are teaching at postgraduate level are expected to be qualified at doctoral level and to be active scholars and researchers as evidenced by recent refereed publications. Where professional programs are offered at postgraduate level an alternative to doctoral qualifications for an appropriate proportion of teaching faculty may be extensive, successful, and recent experience in the field concerned.

Size of Institution

The minimum size of a university expressed in terms of student enrolments is **2000** equivalent full time students in higher education award programs. This number does not include students enrolled in foundation or preparatory programs, or in other non-award courses.