



**National Commission for Academic Accreditation
&
Assessment**

**Handbook for Quality Assurance
and
Accreditation in Saudi Arabia**

PART 3

**EXTERNAL REVIEWS FOR ACCREDITATION
AND
QUALITY ASSURANCE**

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AND
QUALITY ASSURANCE**

National Commission for Academic Accreditation & Assessment

**Riyadh
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TABLE OF CONTENTS

INTRODUCTION.....	6
CHAPTER 1.....	7
APPLICATIONS FOR APPROVAL AND ACCREDITATION OF HIGHER EDUCATION INSTITUTIONS AND PROGRAMS	7
1.1 Stages in Approval and Accreditation of a New Private Institution.....	7
1.2 Ministry of Higher Education and Commission Requirements at each Stage.	9
1.3 Changes in Accredited Programs	15
1.4 Changes in Scope of Institution’s Activities	16
1.5 Proposals for Approval and Accreditation of New Private Universities	16
1.6 Institutions Based in Other Countries Wishing to Operate in Saudi Arabia.....	17
1.7 Stages of Approval and Accreditation for New Public Institutions	18
1.8 Stages in Accreditation for Existing Institutions	19
CHAPTER 2.....	21
PLANNING AND CONDUCT OF EXTERNAL REVIEWS.....	21
2.1 Eligibility for Accreditation Review.....	21
2.2 Activities Prior to a Review for Provisional Accreditation	21
2.3 Activities Prior to a Review for Full Accreditation	22
2.4 Activities During a Review	23
2.5 Activities After a Review	24
2.6 Preparations by an Institution for an Institutional Review	25
2.7 Preparations by an Institution for an External Program Review	27
2.8 Preparations by the Commission for an External Review	30
CHAPTER 3.....	32
CONDUCT OF AN EXTERNAL REVIEW	32
3.1 Summary of Activities	32
3.2 Sample Review Programs.....	33

CHAPTER 4	39
ROLE AND RESPONSIBILITIES OF EXTERNAL REVIEW PANELS	39
4.1 Qualities Required in External Reviewers.	39
4.2 Responsibilities of Review Panel Members	40
4.3 Responsibilities of the Chair of a Review Panel	41
4.4 Avoidance of Conflict of Interest	42
4.5 Verifying Conclusions in an Institution’s Self Study	43
4.6 Techniques for Information Gathering by a Review Panel	45
4.7 Some Issues in the Conduct of External Reviews	48
4.8 Deciding on Recommendations	50
4.9 Preparation of a Review Report	50
4.10 Action Following a Review	51
4.11 Management of Disputes and Appeals	52
ATTACHMENT 1	56
APPLICATION FOR PROVISIONAL ACCREDITATION OF A HIGHER EDUCATION INSTITUTION	56
Application Summary	56
Documents to be submitted with Application	58
ATTACHMENT 2	59
INFORMATION REQUIRED BY THE NCAAA IN A PROPOSAL FOR PROVISIONAL ACCREDITATION OF AN INSTITUTION	59
Descriptive and General Information	59
Information Relating to Quality Standards	60
Mission	60
Governance and Administration	60
Quality Assurance System	60
Learning and Teaching	60
Student admission requirements	61
Student Administration and Support Services	61
Learning Resources	62
Facilities and Equipment	62
Faculty and Staff and Employment Processes	62
Research	62

Institutional Relationships With the Community	63
ATTACHMENT 3	64
INFORMATION REQUIRED IN A PROPOSAL FOR PROVISIONAL ACCREDITATION OF A NEW PROGRAM	64
ATTACHMENT 4	65
PROVISIONAL ACCREDITATION OF A NEW PROGRAM THAT IS IN THE PROCESS OF IMPLEMENTATION	65
Requirements.....	65
ATTACHMENT 5	66
ELIGIBILITY REQUIREMENTS FOR FULL ACCREDITATION OF A HIGHER EDUCATION INSTITUTION	66
Eligibility Requirements.....	67
ATTACHMENT 6	72
ELIGIBILITY REQUIREMENTS FOR AN APPLICATION FOR FULL ACCREDITATION OF A HIGHER EDUCATION PROGRAM.....	72
Relationship to Institutional Accreditation	73
Eligibility Requirements for Accreditation of a Higher Education Program	73
Minimum Institutional Requirements for Eligibility for Program Accreditation	74
ATTACHMENT 7	77
REQUIREMENTS FOR REPORTS ON CHANGES IN ACCREDITED PROGRAMS	77
ATTACHMENT 7A.....	78
REPORT ON MAJOR CHANGES IN AN ACCREDITED PROGRAM	78
ATTACHMENT 7B.....	80
ANNUAL REPORT ON MINOR PROGRAM CHANGES.....	80

INTRODUCTION

The National Commission for Academic Accreditation & 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 postsecondary institutions and the programs they offer. The Commission is committed to a strategy of encouraging, supporting and evaluating the quality assurance processes of postsecondary institutions to ensure that the 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 in introducing and developing internal quality assurance processes and preparing 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. Part 1 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.

Parts 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 of institutions on a five year cycle.

Parts 1, 2 and 3 of the handbook should be read in conjunction with several other key documents, the *National Qualifications Framework* which sets out the learning expectations and credit requirements for levels of academic and technical awards and the two documents setting out standards for accreditation. The standards address the eleven areas of activity in higher education institutions. The primary standards documents for higher education 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 that provide self-evaluation scales for assessment of performance in relation to the standards. A set of standards based on the general requirements for programs but with additional matters relevant to distance education has been prepared. These standards as well as some specific requirements developed by the Ministry of Higher Education must be met for programs offered by distance education, and an institution offering such programs must meet them for any of its programs delivered that way. Standards for technical training programs have also been developed and must be met in technical training programs offered in community colleges established by universities. The TVTC has developed standards and processes for the quality assessment and accreditation of programs in other public or private technical training institutes or colleges. Supplementary documents dealing with programs in some special fields of study are in preparation. These documents explain the standards expected by the Commission and are intended to serve as important guides for continuing improvements in quality.

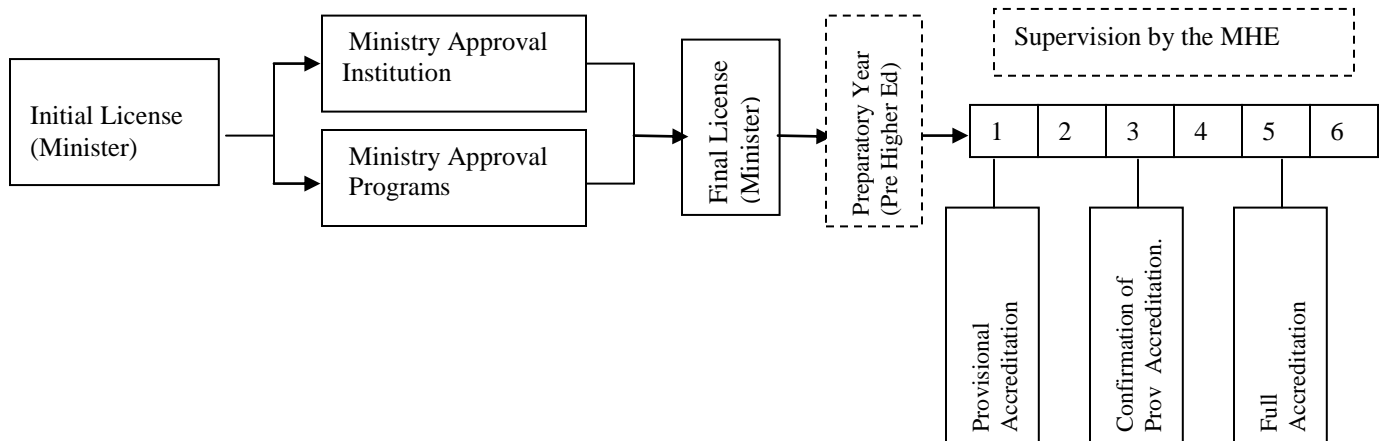
CHAPTER 1

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 summarized below.

1. An application is made 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. In developing these plans the applicant should pay careful attention to the requirements of both the Ministry of Higher Education for institutional and program approval and the National Commission for Academic Accreditation & Assessment (“the Commission”) standards and requirements for accreditation.
3. An application is made to the Ministry of Higher Education for approval to establish the institution and to offer its initial range of programs.
4. The Ministry of Higher Education advises the applicant if the institution and its programs are approved and the applicant can then proceed with acquiring facilities and equipment and planning for recruiting initial staff.
6. When all necessary requirements have been met, the Ministry of Higher Education issues a final license permitting the institution to offer specified degree programs.
7. The institution may introduce a preparatory year to ensure adequate background for students enrolling at the institution. If it is offered, a preparatory year is not part of the higher education program that follows and does not carry credit towards that program. It is “preparatory” and designed to ensure that students have the necessary skills to begin higher education studies in their chosen field. During the first year when higher education courses are offered, the Commission may assess the institution and its initial programs for provisional accreditation. If the institution’s activities and plans for further development meet all of its requirements, the Commission may grant provisional accreditation.
8. The institution must provide summary annual reports to the Ministry and to the Commission indicating implementation of its plans. Visits to the institution may be conducted to verify the accuracy of these reports and confirm scholarship eligibility.
9. In the third year of operations in an institution that has provisional accreditation, the Commission will conduct a formal site visit to review the quality of its activities and the quality of its programs. If all requirements are met the Commission will issue a confirmation of provisional accreditation and may recommend continuing scholarship eligibility.
10. In the year following that in which the first students have graduated, detailed self studies must be completed for the institution and its programs and the Commission will conduct independent external reviews for full accreditation of the institution and of the programs from which students have graduated.



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

12. Additional programs may be introduced at any time and may be granted provisional accreditation provided they are within the scope of programs approved by the Ministry of Higher Education and approved by the Ministry. These programs should be assessed for provisional accreditation by the Commission before they are offered or in the first year in which they are offered, and will be considered for full accreditation in the year following completion of the program by the first group of students.

Special Notes

13. 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 another organization (either within Saudi Arabia or elsewhere), that organization should be fully briefed at the beginning about all the local requirements of both the Ministry of Higher Education (MHE) and the National Commission for Academic Accreditation & Assessment (NCAAA). Proposals that do not include all the information required by each of these organizations in the required format (for example, preparation of program and course specifications for programs to be offered) will not be considered by that organization.

14. An institution can only be considered for provisional or full accreditation if it has a final license that authorizes all the higher education award programs it offers. If an institution offers programs outside its approved scope of activities (e.g. programs in other fields of study, or postgraduate programs that have not been approved) neither the institution nor any of its programs can be considered. (Note that this does not prevent the institution from offering non credit community education programs that do not contribute credits towards a degree or an associate degree or diploma.)

15. It is important that the relationship between an institutional accreditation and a program accreditation be clearly understood.

In institutional accreditation the systems for overseeing the quality of ALL programs will be considered and this may involve a close examination of a sample of programs to assess the effectiveness of those institution-wide arrangements. Effective quality assurance processes must apply to all of an institution’s programs including any offered through distance education, on remote campuses, and any that have been recently licensed by the MHE,

even if this is through a separate licensing arrangement. If the institution offers a preparatory or foundation year or has established community colleges, the systems for oversight of the quality of these programs or colleges will be evaluated. (e.g., for programs in technical training)

In program accreditation, the specific program will be evaluated in detail and all the standards applicable to that program must be met. Although this evaluation will not focus on institutional matters, if there are institutional arrangements that affect the quality of the program, the impact of those arrangements will be assessed. For example, if institutional processes result in staffing being inadequate, learning resources being insufficient, or a serious lack of equipment or other resources, this may prevent the program being accredited even if those managing the program have no authority to solve the problem.

16. In an institution that has provisional accreditation, self studies for full accreditation should begin in the final year of the institution's first degree program in preparation for an assessment for accreditation. The external review for accreditation will take place in the following year when the first students have graduated. If full accreditation is not granted the consequences will depend on the seriousness of problems found. Further details of decisions that may be made and consequences of failure to gain accreditation are provided below.

17. 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 in another country. These requirements are included in the general descriptions set out below and in Attachment 1 to Part 3 of this Handbook

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

Details of requirements and processes for Ministry licensing and approvals should be obtained from the Ministry. The following information provides a brief summary.

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 of the institution and its initial programs by the Ministry of Higher Education. A copy must also be provided when consideration for provisional accreditation is carried out 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 Approval of a Private Institution and of its Programs

For private 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

(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, 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.

It is **STRONGLY RECOMMENDED** that as these plans are prepared, the requirements of the NCAAA for institutional and program accreditation be considered at the same time. These will be required when the institution is assessed in its first year of operation and failure to plan for these from the beginning is likely to result in very substantial duplication of effort and additional cost.

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.

The plans prepared by the applicant are considered in detail by specialized committees established by the Ministry. The Ministry considers the advice of these committees and decides whether approval should be given. If the institution is approved, the Ministry will also specify the programs it is approved to offer, and the level (e.g. diploma, bachelor's, master's) at which this can be done.

For postsecondary 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 Final License

When the facilities, staffing and other matters required before the first students are admitted have been completed, the applicant should apply to the Ministry of Higher Education for a Final License. The Ministry will conduct a site visit and conduct further investigations to check that its requirements have been met.

The Ministry 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 approved 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, the institution 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.

If after an institution commences and the Ministry's requirements are not met, action may be taken by the Ministry to enforce implementation of the plans or impose other sanctions.

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

1.2. 4 Commission Requirements for Provisional Accreditation of a New Institution

To meet the Commission's requirements for provisional accreditation, the applicant must submit 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 institution's 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 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 1.2.5 below.

Processes Followed by the Commission

Members of staff of the Commission will be available to provide advice to the applicant on its requirements. 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.

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 Commission's requirements for accreditation will be met when the plans set out in the proposal have been implemented. 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. 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.

1.2. 5 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.

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 3 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 first group of students has completed the program. 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 at each qualification level. They must also meet more specific requirements for programs in various professional fields

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. (This should be done before students are admitted to the programs concerned.)

(Note that if an institution wishes to expand its scope of activities 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 of Higher Education in advance). See Section 1.4, **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. 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

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.

During the initial development period, that is until the institution and the initial programs have been fully accredited, summary annual reports describing action taken on implementation of the plans submitted for provisional accreditation 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.

1.2. 6 Full Accreditation of a New Institution

When the first group of students has 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 (e.g. representing itself as a university when it only 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). 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

The report of the review panel, together with the initial proposal, will be considered by the Commission's advisory committee. 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 may be taken by the Ministry under Ministry regulations, including possible revocation of the institution's license and closure of the institution.

1.2. 7 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 accreditation 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 a report prepared 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. 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* and consistent with the requirements of the *National Qualifications Framework* and particular requirements for the field of study concerned. (While particular emphasis will be given to the standard for Quality of Learning and Teaching, 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.

The reports of the review panel, together with the program self study report, will be considered by the Commission's relevant advisory committee. 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. 8 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. 9 Re-accreditation of Programs

After a program has been fully accredited further self-studies and external reviews by the Commission will 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. 10 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 status.

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

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 is that the program is no longer accredited and must be re-submitted for accreditation.

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), 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 (e.g. 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 7.

1.4 Changes in Scope of Institution's Activities

It is possible for a license to be modified by the Ministry of Higher Education to extend the institution's scope 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 extended range of activities are required. The Ministry's approval must be obtained—and the Minister must agree and approve a change to the institutions final license.

For its institutional accreditation to be extended to cover the increased scope of activities the proposed change must be submitted to the Commission for its agreement and the Commission may conduct a review to check that its quality assurance requirements will continue to be met.

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 for accreditation as a university relating to range of fields of study, level of programs, involvement in research, faculty participation in scholarly activity, and size of institution sufficient to sustain the more extensive range of activities.

The additional accreditation requirements for a university established by the Commission are described in 2.4 of Part 1 of the Handbook.

In setting these accreditation requirements, the Commission recognizes that the standards may take some time to achieve—for recently established and new public universities. 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 Institutions Based in Other Countries Wishing to Operate in Saudi Arabia

1.6.1 General Considerations

The educational opportunities made available when an institution that is based elsewhere and 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.

(a) A course or program developed in another country may be offered by a Saudi Arabian institution under licensing, franchising or other contractual arrangements. 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*.

(b) An international institution may establish an organization 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 organization 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*.

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. (e.g., 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.

1.6.2 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 local 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 a local private institution; 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.

1.6.3 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 are proposed (see section 1.3 in this Handbook and the definition of a major change in Handbook 1), 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.

1.7 Stages of Approval and Accreditation for New Public Institutions

When a completely new public institution is established, 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.

1.8 Stages in Accreditation for Existing Institutions

1.8.1 General Considerations

Following an initial self evaluation, strategic plans should be developed for the introduction of required quality assurance processes, and to deal with any weaknesses or 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 a further self evaluation and if it believes standards are being met, it should apply to the Commission for accreditation. This should be done a minimum of 12 months and preferably 18 months in advance of an anticipated time for an accreditation review. The Commission will conduct an initial visit and check on eligibility requirements, after which a decision will be made on a date for a review to be conducted. The sequence of activities for a review is described in Chapter 2. . . The Commission will develop a schedule for external reviews to be carried out during the transition period as the new system is introduced.

1.8.2 Schedule for Institutional 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.

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.

CHAPTER 2

PLANNING AND CONDUCT OF EXTERNAL REVIEWS

2.1 Eligibility for Accreditation Review

Accreditation reviews may occur at several stages for both institutional and program assessments.

- Before, or shortly after an institution begins to operate or a program is introduced. These reviews lead to provisional accreditation.
- As soon as the first group of students has graduated (from the institution or from the program from which students have graduated). These reviews lead to full accreditation.
- After the institution or program has been accredited, further reviews for accreditation will occur on a five year cycle.

The main purposes of the accreditation processes are to promote quality improvement and to provide assurance to the institution and the students and wider community that good standards are being achieved. The objective is to recognize good quality, not to “fail” institutions or programs that may be having difficulties. Consequently before an accreditation review process begins there is a preliminary check to make sure that necessary processes and other requirements are in place. The review after that will make a judgment about the quality of what is done.

The preliminary check will determine eligibility for a review to take place. For a new or recently established institution the eligibility check will be largely based on plans for development, combined with some information about initial activities. The eligibility checks for a program will similarly be largely based on plans, and if the program has already been introduced on preliminary evaluative data that is available.

For institutions or programs that are fully established, that is those from which initial students have already graduated, more complete information must be available about the existence and effectiveness of a substantial number of processes and outcomes.

Details of these eligibility requirements are included in Attachment 5.

2.2 Activities Prior to a Review for Provisional Accreditation

The process for provisional accreditation of an institution involves an analysis of the institution’s plans for development and of the programs it plans to offer during its first few years. This can be done in advance before the first students are admitted which gives those responsible for establishing the institution and its first student’s greater confidence that it will meet requirements for accreditation. However it can also be done at a slightly later stage when it has started its teaching programs. In the latter case, the assessment will involve a combination of what has already been done, and what is proposed.

In either case continuation of provisional accreditation and eventual full accreditation will require monitoring of implementation as time goes on to ensure that the plans are being implemented as planned.

After provisional accreditation has been granted, the institution submits brief annual reports indicating action taken to continue implementation of its plans, the institution is visited by the NCAAA again in its third year after which (if implementation is proceeding satisfactorily) the provisional accreditation is confirmed. The institution begins preparations for a full accreditation evaluation during its fourth year, and its assessment for full accreditation occurs in the year following the graduation of its first group of students (normally in its fifth year).

Before this process begins the NCAAA must be satisfied that certain requirements for provisional accreditation are met. These requirements relate to core elements in the NCAAA's standards for quality assurance and accreditation, and (for a private institution) to compliance with the terms and conditions of its final license.

The details of requirements are shown in Attachments 1, 2 and 3 of this Handbook. An application for consideration for provisional accreditation of an institution should be made at least two semesters in advance of the planned time for a review and in the case of a new institution this application should be accompanied by applications for provisional accreditation of programs to be offered by the institution during its first three years.

2.3 Activities Prior to a Review for Full Accreditation

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 as a liaison officer to facilitate conduct of the review and the liaison officer meets with the institution to discuss arrangements and timelines. This representative of the Commission will be available during the period of preparation to provide advice and assistance.

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

The institution nominates a senior contact person 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 postsecondary 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 including the schedule for the visit to the institution, meeting and interview rooms and arrangements for nominating participants in interview sessions. Arrangements are also made for provision of any additional information sought by the review panel.

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 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 use 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.

2.4 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. If the reviews are being conducted in separate male and female sections, these staff should be available in each section.

The person appointed as an institutional liaison during the review has very important responsibilities. That person should meet with the liaison 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 or sections for male and female students, institutional liaisons should be nominated who can assist with arrangements on each campus.

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

2.5 Activities After a Review

One Month After the Review

The draft review report given to the Commission Liaison Officer 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 final report is sent to the institution which is asked for its response to recommendations for action that were included in the report. These responses should be made in brief summary form. The institution is not required to accept every recommendation but is expected to take them all seriously and if not accepted or an issue that has been identified is responded to in a different way reasons, should be given. The institution's response to the recommendations will be considered when decisions are made on whether the institution or program should be accredited

The report is considered by the Commission's Accreditation Review Committee which may provide comment and advice on the report for consideration by the Commission in making its decision on accreditation. This Committee does not make separate judgments on whether an institution or program should be accredited, but is asked to provide advice on the equivalence of standards applied by different review panels to try to ensure that some external review panels are not tougher or easier than others.

Four Months (approximate date) After a Review

The report and its recommendations are considered by the Commission, together with the response of the institution to the recommendations and any comments or advice from the Accreditation Review Committee. The Commission decides on accreditation after considering the report and this advice.

The final report is sent to the institution together with details of the decision 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, they may include on its website a description of those practices 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

The timeline for later action will depend on action required and time scale for response.

At a time specified by the Commission, the institution provides 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.

2.6 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*:

- A. Mission and objectives
- B. Governance and Administration
- C. Management of Quality Assurance and Improvement
- D. Learning and Teaching
- E. Student Administration and Support Services
- F. Learning Resources
- G. Facilities and Equipment
- H. Financial Planning and Management
- I. Employment Processes
- J. Research
- K. 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

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

- a) A brief summary of the institution's history, scale and range of activities;
- b) 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;
- c) A list of campus locations indicating programs offered and student numbers;
- d) Faculty, staff and student numbers in total and by college, department, and program;
- e) Summary information about the institution's accreditation status including the outcomes of any previous institutional reviews, and any conditions that were established;
- f) A description of the institution's quality assurance arrangements, priorities for development, and any special issues affecting its operations; and
- g) 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 institution's strategic plan.
- (iii) A copy of the institutions strategic plan for quality improvement (which may be included within the broader institutional strategic plan)
- (iv) A current student catalogue, prospectus, bulletin or handbook that includes 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. CVs of current teaching staff should be on file and available for the review panel if required.

Preliminary discussions should be held with the Commission Liaison Officer 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.

2.7 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

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 Commission Liaison Officer 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.

A person at the institution will need to be nominated as liaison to coordinate preparations and assist the panel during the review. That person should meet with the nominated Commission Liaison Officer 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 liaison should escort the panel to meetings and introduce members as appropriate. In public meetings the liaison 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 liaison 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
- 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.

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 students work and assessment tasks, faculty research reports, etc,
- Tea and coffee provisions in each location.

2.8 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 liaison officer 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 liaison 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 Commission Liaison Officer will normally remain with the panel and provide assistance during the review. At the end of the review that 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.

3.1.1 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.

3.1.2 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.

3.1.3 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.

3.1.4 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.

3.1.5 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. |

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

- 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, counseling, and other student support services and extracurricular 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

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)
- 12:30pm 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 day's 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 day's 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

- 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 (e.g. 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.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

- 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 postsecondary 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 postsecondary 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 Commission Liaison Officer.

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.

A person should not become involved in consultancy work or related activities for any institution which they have reviewed for at least 12 months after completion of a review without first obtaining specific approval from the NCAAA.

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 analyzed?

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 counterproductive 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 focused 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, and 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 this 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, the 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 postgraduate 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

Background

The National Commission for Academic Accreditation and Assessment (NCAAA) values its responsibility of determining standards and criteria for academic accreditation, selecting experienced and knowledgeable academic professionals who are recognized in their fields and ensuring that those standards are applied consistently for all institutions and programs. The accreditation decisions are based on the evidence presented by the institution that supports the institution's case for compliance with the NCAAA standards, policies and procedures existing at the time of the evaluation.

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 value judgments, or differences about the accreditation or approval decisions rendered by the Commission may arise. Consequently, the Commission Appeals Process is available to the institutions for resolution of such concerns. In this case, the institution is provided the opportunity to appeal directly to the Secretary General of the Commission citing evidence in support of its appeal.

The appeal process is designed to provide procedural fairness for the appellant. However consideration is 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 generally accepted resolution will be to have an immediate re-assessment of all or part of the grievance, rather than to grant accreditation.

Terms of Reference for Appeals Processes

Purpose

- 1.) To provide institutions and program leaders an opportunity to bring to the Commission's attention matters related to concerns about the procedural and/or administrative conduct of the evaluation.
- 2.) To present to the Commission apparent errors in fact or misinterpretation of evidence in a self-study report or errors of observation during an on-site visit.
- 3.) To provide an external, third party assessment of the merits, reasonableness and validity of an appealable decision.

Management of the Appeals Process

Appealable Issues

Procedural action on an appeal will be based on the evidence available to the review panel and the Commission at the time decisions was taken. Complaints or disputes arising from an accreditation decision may relate to:

- 1.) Substantive errors of fact or observation during a site visit.
- 2.) Misinterpretations of the evidence in a self-study report.
- 3.) Failure of a review panel to follow the NCAAA published standards, policies and procedures that are sufficiently serious to undermine the validity of the evaluation.
- 4.) The manner in which the Commission staff or persons it appoints handled the procedures published in the Commission's Handbooks.

Arrangements for an Appeal

- 1.) An institution or program may challenge an appealable decision by a formal letter of appeal addressed to the Board of Directors of the NCAAA within 30 days of receipt of written notification of the Commission's decision. The appeal must specify the basis on which the appeal is made, which must be either that the Commission did not follow its policies and procedures, or substantive errors in fact, misinterpretation of the evidence in a self-study report or errors of observation during the on-site visit.
- 2.) Grounds for challenging the accreditation decision must be sufficiently serious to undermine the validity of the decision, or unreasonable judgments about an institution or program on the basis of the evidence available to the review panel and the Commission at the time of the visit.
- 3.) A non-refundable appeal fee will be charged to the institution or program filing the appeal, such fee will be submitted with the letter of appeal.
- 4.) The institution will be advised that the decision of the Board of Directors after considering the Appeals Panel recommendations will be final.

- 5.) The accreditation status of the institution shall not change until all procedural processes of the appeal have been exhausted or terminated.

Appointment of an Appeals Panel

- 1.) Within Thirty (30) days of receipt of the institution or program's appeal, the member of the Board nominated by the Board for oversight of appeals will consider the submission and if he believes there are reasonable grounds for considering the appeal will appoint a three-person appeal panel to advise on the matter.
- 2.) The three persons will include one member of the Board of Directors as chair and two persons familiar with NCAAA standards and procedures and with expertise in quality assurance matters in educational institutions relevant to the dispute, or program. None of the persons nominated will have had an affiliation with the institution or program filing the appeal or with the accreditation process which is the subject of the appeal.

Scope of an Appeal

- 1.) The appeal is a challenge to the accreditation decision of the Commission based on the evidence before the review panel and the Commission at the time of the visit.
- 2.) The letter of appeal and supporting information must not refer to facts or conditions that were not presented to the review panel at the time of the visit.
- 3.) The procedural and substantive issues addressed by the Appeal Panel will be limited to those stated in the appeal letter.

Decisions of the Appeal Panel

- 1.) The Appeal Panel may reject the appeal if it believes the accreditation decision was reasonable or not sufficiently serious to undermine the validity of the accreditation decision.
- 2.) If the Appeals Panel finds that there is insufficient evidence to make a fully informed decision or that there was a probable violation of policy or procedures or other technicalities, or an error in judgment of sufficient magnitude to affect the validity of the accreditation decision, the normal remedy will be to have an independent re-assessment of all or part of the issue or issues concerned, rather than to grant or withdraw accreditation.
- 6.) If an appeal is supported by the Appeal Panel after considering evidence available to the review panel and the Commission at the time the original decision was made, the Appeal Panel may recommend to the Board of the Commission that it reverse the decision of the Commission. However, the decision of the Commission will not be reversed without compelling evidence to support this action. In other words, the Appeal Panel must become aware of and document evidence *conclusive* that invalidates the accreditation decision of the Commission and communicate this evidence and its recommendation to the Board.

Report of the Appeal Panel

- 1.) The Chair of the Appeal Panel will provide a written report to the Chair of the Board detailing the findings of the Appeal Panel and describing the evidence on which its findings are based. Supporting documentation should accompany the report for any finding that is contrary to the Commission's accreditation decision.

- 2.) The Chair of the Board will respond to the institution or program with written notification of the result of the appeal. If the appeal was upheld, the report to the institution will be amended in keeping with the decisions of the Appeal Panel. If the appeal was not upheld, the institution will be notified that the issues in dispute were considered and the appeal was not upheld.

- 3.) The decision of the Board of the Directors after considering the Appeals Panel findings will be final.

ATTACHMENT 1

APPLICATION FOR PROVISIONAL ACCREDITATION OF A HIGHER EDUCATION INSTITUTION

Application Summary

1. Name of institution _____
3. Location (s) _____
4. Date of approval of initial license to establish institution _____
5. Date of commencement _____
6. Actual and/or planned 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 preparatory year if these are planned)

Foundation or Preparatory Year (if applicable)	Areas of Study	Year of Introduction

National Commission for Academic Accreditation & Assessment
External Reviews for Accreditation and Quality Assurance

Higher Education Program Title(s)	Field of Study	Major Study or Track(s)	Year of Introduction

(Notes: 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

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

10. Language(s) of Instruction

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



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. Copy of agreement with partner institution (if any)

ATTACHMENT 2

INFORMATION REQUIRED BY THE NCAAA IN A PROPOSAL FOR PROVISIONAL ACCREDITATION OF AN INSTITUTION

A detailed proposal is required. 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.

Descriptive and General Information

- The title of the institution
- Name and contact details of a person from whom additional information can be obtained
- The existing and/or proposed location of the institutions 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 major 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.
- 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 (i.e. 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 and each subsequent 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

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

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 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 counseling 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 NCAAA Standards for Distance Education and the requirements of the Ministry of Higher 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 extracurricular 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 or learning resource center.

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.

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 that 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

Policy on teaching staff participation in scholarship and 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 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 commercialization 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.

ATTACHMENT 3

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 specifications (and any field experience specifications if applicable) 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 program 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 year by year 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 year 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.

ATTACHMENT 4

PROVISIONAL ACCREDITATION OF A NEW PROGRAM THAT IS IN THE PROCESS OF IMPLEMENTATION

Provisional accreditation of a new program can be granted before the program has started, or after it has started and before the first group of students has graduated. Processes for provisional accreditation of a program that has started will normally occur during the second year of the program, but this timing may be varied by agreement with the Commission.

Requirements

1. Plans for the program as for a normal provisional accreditation before a program starts. However course specifications should be available for all courses in the program rather than only those to be taught during the first two years.
2. This could be presented in tabular form. In any cases where originally planned action has not been taken as planned, an explanation should be given, and revised plans described to meet the requirements concerned.
3. Most recent annual reports for all courses that have already been taught.
4. Most recent annual program report for the program.
5. Student course evaluations for the most recent semester should be available for courses that have been taught.
6. A summary of responses to the course evaluations referred to above with any relevant comments and planned responses. (This could be included with the initial annual program report.
7. The Student Experience Survey (SES) (See NCAAA recommended student survey) should have been completed by students in the second year of the program. A summary of responses to this survey should be provided with relevant comments on those responses.
8. Self Evaluation Scales for Higher Education Programs should be completed, with any items where the program has not reached a stage where information could not be provided marked NA.
9. CVs for all teaching staff in the program.

Items 1, 2, 4, 6, 7, and 8, and a summary of staff qualifications and teaching responsibilities should be provided to the Commission in hard copy and in electronic form. The other items should be available for inspection during a site visit.

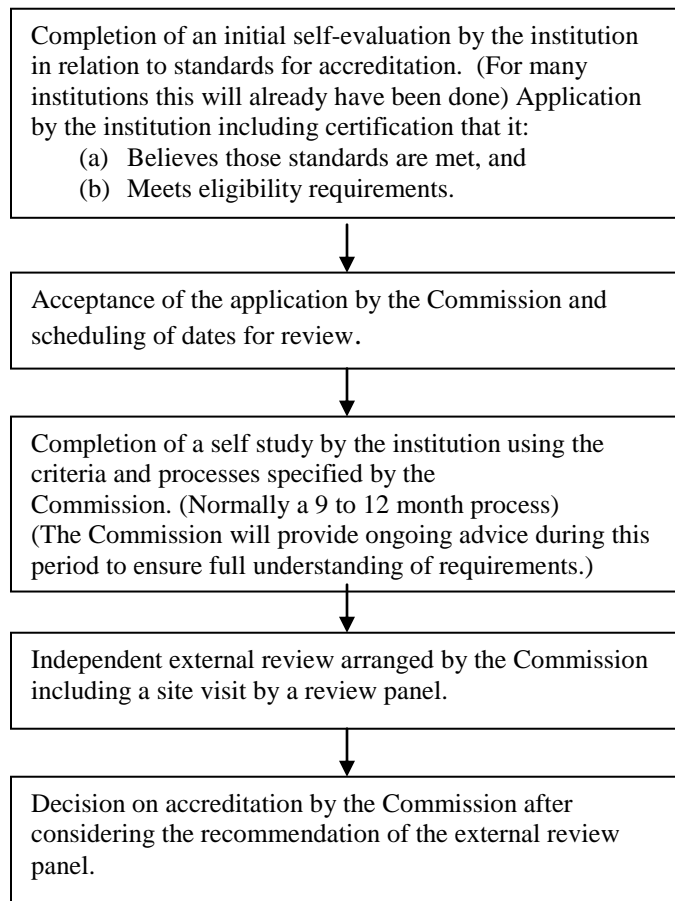
ATTACHMENT 5

ELIGIBILITY REQUIREMENTS FOR FULL ACCREDITATION OF A HIGHER EDUCATION INSTITUTION

The process for full accreditation of an institution involves a rigorous self evaluation in relation to the eleven standards specified by the Commission followed by an independent external review. In that external review a panel of reviewers will verify the conclusions of the institution's self evaluation and consider the quality of performance in relation to the NCAAA standards.

Before this process begins the Commission must be satisfied that certain requirements are met. These requirements relate to core elements in the standards for quality assurance and accreditation, and to compliance with the terms and conditions of its official approval or (for a private institution) its license to operate.

The major steps involved are:



Details of requirements for a self study and the external review process are included in Part 3 of *Handbook for Quality Assurance and Accreditation of Higher Education Institutions*.

Eligibility Requirements

1. The institution must have been established by the government of Saudi Arabia as a higher education institution, or (if a private institution) have been granted a final license to operate as a higher education institution in Saudi Arabia by the Ministry of Higher Education or other government authority authorized by the Higher Council of Education.
2. The activities of the institution must be consistent with its official approval or its final license (including for example its scope or range of programs, the level at which programs are offered, its title as an institution, and any special conditions specified for its license)
3. The institution must have a mission approved by its governing board that is consistent with its official approval or final license and appropriate for an institution of its type and the community or communities in which it operates.
4. The institution must have a strategic plan for the achievement of its mission and major development objectives that includes objectives for quality improvement (or an associated quality improvement plan).
5. The institution must have developed and made readily accessible to teaching and other staff affected by them, a complete set of administrative policies and regulations including terms of reference for major committees and responsibilities of teaching and administrative positions. These should be consistent with the requirements of Standard 2—Governance and Administration and other relevant standards dealing with teaching and administrative and support services. Committees or councils for which terms of reference and membership structure must be available include:
 - a. University council or board of trustees.
 - b. Any standing sub committees of the university council or board of trustees.
 - c. Senior academic committees (including the academic council if applicable) responsible for oversight of and approval of programs or major program changes, research development, and graduate studies programs (if applicable)
 - d. Any standing sub committees of the senior academic committee.
 - e. Institutional quality committee. (Note that although it should be normal practice to have a single quality committee for all institutional activities, if separate committees have been established to oversee quality for academic functions and administrative functions the membership structure and terms of reference of both must be available, together with the committee responsible for coordinating the two sets of activities.)
 - f. Institutional requirements for college academic committees or councils and standing sub-committees
 - g. Institutional requirements for department academic committees or councils and standing sub-committees.
6. The institution must have published guides (or catalogues or handbooks) that are readily accessible to existing and potential future students, and teaching and other staff, that include accurate and current information about details of programs and courses, degrees offered and graduation requirements, admission requirements and procedures, costs and refund policies (if applicable), rules and regulations directly affecting students.
7. The institution must have program specifications for all of its degree level programs in the form required by the Commission. These program specifications must have been approved by the institution's senior academic committee.
8. The institution must have course specifications in the form required by the Commission for all courses in a majority of its programs and firm commitments to complete specifications for all remaining courses by the proposed time for the external review.
9. The institution must have established and described in policies and regulations processes for program approval and approval of program changes under the authority of a central curriculum committee or equivalent. The processes must provide an appropriate balance between institutional responsibility and oversight, and flexibility for course and program modifications as required at department or college level.

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

10. The institution must have effective systems for monitoring the quality and supporting improvements in its programs that meet the requirements for Standard 4—Learning and Teaching, and all of the sub sections of that standard.
11. The institution must have established arrangements for maintaining records and providing summary statistical data to departments, colleges and central committees (Quality committee and Curriculum Committee or equivalent) including at least the following information.
 - a. Grade distributions for all courses.
 - b. Mean grade distributions for all courses for each department (or program), college, and the institution as a whole. (desirably provided for courses at each year level)
 - c. Completion rates for all courses.
 - d. Mean completion rates for all courses for each department (or program), college, and the institution as a whole. (desirably provided for courses at each year level)
 - e. Year to year progression rates and total program completion rates for all programs.
12. The institution must have established arrangements for student evaluation of courses and programs and mechanisms for the use of those survey results in program and course evaluations at department, college and institutional levels. These arrangements should include a number of common questions across the institution for internal benchmarking purposes, and centralized processing of survey results with regular reports provided to relevant levels within the institution.
13. The institution must have an effective system for quality assurance covering all areas of institutional activity and operating under the supervision of a senior manager within the institution's central administration. Note that this must include some appropriate processes for monitoring the quality of organizations established by the institution or of services contracted out to other organizations such as community colleges, preparatory year programs, regional campuses, or contracted services such as catering, or IT services.
14. The institution must be able to provide reliable data on the Key Performance Indicators specified by the Commission and any additional indicators identified by the institution for its own performance evaluation. Note that for the initial accreditation reviews to be conducted in 2010, it is recognized that systems for collecting required data for all the NCAAA's KPIs may not yet be in place. However data must be available for use in the institutions self study for a majority of items, and plans must have been prepared for the remaining items to be available.
15. The institution must have identified other institutions to provide comparative benchmarks for quality evaluation and where necessary have established agreements for exchange of information on indicators to be used for this purpose. (Note that special agreements are not required for use of published data on performance benchmarks, but are necessary if unpublished data is to be used. An institution may benchmark its performance on different functions against different institutions if it wishes to do so.)
16. If the institution is a university, or if it is another type of institution that has a mission or objectives that include research it must have systems for collecting and reporting data from all departments, colleges and any research centers on the extent and significance of research activity.
17. The institution must have systems in place for collecting and reporting on the extent and usefulness of formal and informal community service activities, including services provided by community service units or centers, and by other individuals, departments or colleges.
18. A new or recently established institution must have been in operation long enough for its first cohort of students to have graduated and information from its graduates about the quality of their programs must be included in evidence provided for accreditation.
19. The institution must have reviewed its activities in relation to the eleven standards specified by the Commission. (This is not intended to be a complete self study, but should involve completion of the self evaluation scales for higher education institutions by a committee or committees with thorough knowledge of all parts of the

National Commission for Academic Accreditation & Assessment

External Reviews for Accreditation and Quality Assurance

organization. The Rector (for a university) or the chair of the Board of Trustees (for a private college) must have certified, after considering advice, that in its view the institution has achieved satisfactory performance on each of the eleven standards. (Satisfactory performance for the purpose of this item should be taken to mean an overall rating of at least three stars for each standard and sub-standard on the starring rating system.)

(NOTE: It is not necessary for every single item within the sub sections of the standards to be given three stars or more. However that rating for each standard and sub-standard as a whole must be at that level.

Special Notes

Accreditation by the Commission will be based on all the eleven standards described in the Commissions document *Standards for Quality Assurance and Accreditation of Higher Education Institutions*. However in the initial accreditation judgments particular emphasis will be given to the standard for learning and teaching and all of the subsections of that standard and to selected other items specified by the Commission.

If a former college or colleges were amalgamated with an existing institution two or more years before the date of application the quality assurance arrangements and eligibility requirements will be expected to apply to the total institution including those former colleges.

If a former college or colleges were amalgamated with an existing institution less than two years before the date of application the quality assurance arrangements and eligibility requirements will not be expected to apply to those former colleges, but the institution will be expected to have finalized plans for the full incorporation of those colleges into the institution and the extension of the quality assurance arrangements to them within no more than two further years. In this situation the accreditation judgment will be based on the previously existing institution and the adequacy of the plans for incorporation of the college(s)

An institutional review for accreditation must deal with the total institution. Appropriate processes must be in place for the quality assurance of any associated community colleges or foundation year programs. An institutional review of a private college or university will include all associated colleges even if they have received a separate license from the MHE.

If an institution offers programs by distance education arrangements for the provision of those programs must meet the requirements of the Ministry of Higher Education for Distance Education, and the programs offered in that mode must also meet the standards for distance education programs set by the NCAAA. Special arrangements may be made an extension of time for this to be done provided a detailed action plan has been prepared for those requirements to be fully met within a maximum period of three years.

Name of Institution _____

Eligibility for Institutional Accreditation

Eligibility Check List		Criteria	
		Criteria Met	Confirmed (NCAAA)
1.	Final license or approved government institution		
2.	Activities consistent with license or approval		
3.	Mission approved and consistent with license or approval		
4.	Strategic plan including plan for quality		
5.	Availability of policies, regulations and terms of reference		
6.	Published guides or handbooks for students		
7.	Program specifications for all programs		
8.	Course specifications		
9.	Regulations and descriptions of processes for program approval, changes, and review		
10.	Systems for monitoring quality and improving programs		
11.	Central maintenance analysis and reporting of statistical data		
12.	Student surveys		
13.	Quality assurance system covering all standards		
14.	Data on Key Performance Indicators		
15.	Arrangements for comparative benchmarks		
16.	Systems for maintenance of data on research (if applicable)		
17.	Systems for maintenance of data on community service activities		
18.	Students graduated		
19.	Compliance with standards for accreditation.		

 Signed (Rector or Dean)

 Date

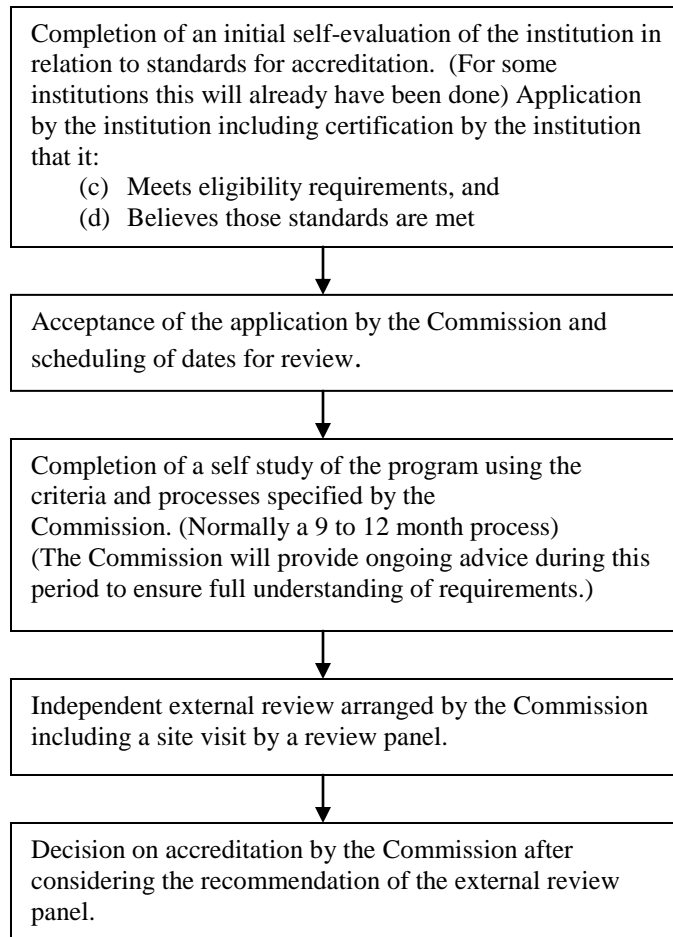
ATTACHMENT 6

ELIGIBILITY REQUIREMENTS FOR AN APPLICATION FOR FULL ACCREDITATION OF A HIGHER EDUCATION PROGRAM

The Commission wishes to encourage institutions to seek accreditation as soon as they are in a position to do so. However it wants to recognize quality, not to make negative judgments which would cause difficulties for the institution and program concerned and for the students who are enrolled. Consequently premature applications before a quality system is fully in place will not be considered. Like most other accrediting agencies, the Commission has set some eligibility requirements that must be met before a program can be considered for accreditation.

Before this process begins the Commission must be satisfied that certain requirements are met. These requirements relate to core elements in the standards for quality assurance and accreditation, and to compliance with the terms and conditions of its official approval or (for a private institution) its license to operate.

The major steps involved are:



Details of requirements for a self study and the external review process are included in Part 3 of *Handbook for Quality Assurance and Accreditation of Higher Education Institutions*.

Accreditation is public recognition that necessary standards are met in the management and delivery of a program, and the quality of learning outcomes achieved by students. The standards must be at least equivalent to what is done in high quality international institutions.

The process for full accreditation of a program involves a rigorous self evaluation in relation to the eleven standards specified by the Commission followed by an independent external review. In that external review a panel of reviewers will verify the conclusions of the program self evaluation and consider the quality of performance in relation to the NCAAA standards.

Relationship to Institutional Accreditation

Criteria for program accreditation relate primarily to the program concerned. However the quality of a program and the evidence that is required for accreditation depend to a considerable extent on processes within the institution as a whole. These may be beyond the control of those managing the program but they still affect its quality and must be considered in any program evaluation. Consequently the Commission prefers to review an institution as a whole before going on to accredit individual programs.

However it is recognized that at this transitional stage in the introduction of the quality assurance system in Saudi Arabia considerable work is required before many institutions meet all the requirements for institutional accreditation. This could cause delays for good quality programs that meet eligibility requirements. The Commission does not want to delay accreditation of programs unnecessarily and is prepared to consider programs that meet eligibility requirements before the institution has been accredited, provided certain specified quality assurance requirements are met in the institution.

It is important to recognize that these special arrangements relate to eligibility for consideration for accreditation. If a program is to be accredited ALL the standards required must be met, regardless of who is responsible for delivering particular services.

If the institution has full accreditation by the Commission these institutional requirements will be assumed to have been met. If the institution has not yet been accredited by the Commission the institutional requirements described below will have to be met before a program can be reviewed for accreditation.

Eligibility Requirements for Accreditation of a Higher Education Program

1. The program must be one which the institution is authorized to offer by the relevant government authority. (i.e. at a level and within a field of study that is included in its final license or Ministry or other government approval.
2. The application must have been approved by the Rector of the university or the Dean of the college within which the program is offered.
3. A program specification must have been prepared in the form required by the Commission and approved by the relevant senior committee within the institution.
4. Course specifications must have been prepared in the form required by the Commission and approved for all courses included in the program.
5. Clearly stated descriptions must be available of course content, program requirements, and other regulations affecting students in the program, including institution or college-wide requirements as well as those specific to the program concerned.
6. Completed annual program and course reports in the form required by the Commission must have been prepared for at least one year for the application to be approved and for a second year by the time of the site visit.

7. Student evaluation surveys must have been conducted with a minimum of a 50% response rate for all courses, and for the program. Reports on survey responses must be available for at least two years by the time the self study report is completed.
8. At least one group of students must have completed the program, and feedback from that group of students must be available. (Not required for provisional accreditation)
9. For any program designed to prepare students for professional practice a program, department or college advisory committee must have been established with a majority of members in the profession(s) concerned who are external to the institution. Terms of reference of that committee must include reviewing program evaluation data and providing advice on program content and delivery arrangements.
10. One or more institutions or agencies must have been selected for benchmarking the quality of the program, and a list of indicators that are considered in using these benchmarks must be available. If these indicators include unpublished data agreements must have been completed for the relevant data to be provided.
11. A brief summary report must be provided demonstrating consistency of the program with the requirements of the Qualifications Framework for Higher Education as specified in Part 2 of the Handbook for Quality Assurance and Accreditation of Higher Education, Section 2.7. These requirements include the title of the award to be granted on completion of the program, the number of credit hours (which must be in addition to any studies in a foundation or preparatory program), learning outcomes in the domains of learning, and evidence of the level of achievement of learning outcomes in those domains.
12. The Self Evaluation Scales for Higher Education Programs must have been completed with a rating of at least 3 stars on all standards and sub standards applicable to the program. (Note: It is not necessary for every single item within the scales to be given three stars or more. However that rating for each group of items must be at that level and the Commission may specify certain individual items on which a minimum three star rating is required).

Minimum Institutional Requirements for Eligibility for Program Accreditation

1. Existence of a strategic plan for the development of the institution.
2. Establishment of a quality center and preparation of a strategic plan for quality assurance.
3. Existence of an approved set of key performance indicators for use within the institution that include indicators of program quality. Data from these indicators should be available for the institution as a whole and for a majority of programs in the institution. (including the program seeking eligibility for accreditation)
4. A clear description of the institution's processes for program approval, monitoring program quality, and approval of program changes.
5. Use of student course and program evaluation surveys in at least 50% of colleges or departments across the institution and provision of data for the institution as a whole on common items in a form that can be used for within-institution benchmarking.
6. Provision of student advising and counselling services and processes for the evaluation of the adequacy of those services for the students attending the institution.
7. Provision of adequate facilities for extracurricular activities appropriate for the students attending the institution.
8. Provision of learning resources adequate to support the programs offered by the institution and processes in place to identify and respond to program requirements and evaluate the adequacy of this provision.
9. A system within the institution for providing summary statistical data to departments, colleges and central committees (Quality committee and Curriculum Committee or equivalent) This data must include at least the following information and be available for purposes of benchmarking of programs throughout the institution:
 - a. Grade distributions for all courses.
 - b. Mean grade distributions for all courses for each department (or program), college, and the institution as a whole. (desirably provided for courses at each year level)
 - c. Completion rates for all courses.
 - d. Mean completion rates for all courses for each department (or program), college, and the institution as a whole. (desirably provided for courses at each year level)
 - e. Year to year progression rates for all year levels, and total program completion rates for all programs.

f. Data on employment outcomes of graduates.
If programs are offered in sections for male and female students the statistical data must be available for both sections as well as in aggregated form or both sections combined.

Special Notes

1. Accreditation by the Commission will be based on all the standards for higher education programs and will apply regardless of whether services are managed by the college or department concerned or by institutional level organizational units. A separate statement has been prepared indicating matters that will receive special attention at this stage of development and this should be considered carefully as self studies are undertaken and preparations made for an accreditation review.

2. Programs offered with the same title in different parts of the institution, for example in male and female sections, on a central and a branch campus, by daytime or evening classes, or by face to face or distance education, delivery will normally be considered as the same program and must be considered together in the self study and external review. The Commission MAY consider treating them as separate programs in exceptional circumstances but this will require special approval in advance, and normally a difference in the title of the award to make it clear that they are intended to be different programs.

If a program is offered by distance education as well as by face to face instruction the distance education arrangements must meet both the requirements of the Ministry of Higher Education and the distance education standards of the NCAAA.

If programs are offered in different parts of the institution, the self study will have to show clearly any differences between the sections concerned and strategies to respond to any differences in quality found.

Eligibility Requirements for Full Accreditation of a Higher Education Program

Name of Institution _____

Name of Program _____

Tick the column beside each criterion to indicate that it is met.

Eligibility Check List		Criteria	
Program Name _____		Criteria Met	Confirmed (NCAAA)
Program Requirements			
1.	Program authorized		
2.	Application for accreditation approved		
3.	Program specification		
4.	Course specification		
5.	Descriptions of course and program requirements and regulations		
6.	Annual course and program reports		
7.	Student evaluation survey results		
8.	Students graduated, evaluations available		
9.	Program advisory committees		
10.	Indicators and benchmarks		
11.	Consistency with qualifications framework		
12.	Self evaluation scales		

Complete Once for All Programs Applying for Accreditation			
Institutional Requirements for Program Eligibility		Criteria	
		Criteria Met	Confirmed (NCAAA)
1.	Strategic plan for institution		
2.	Quality Center and plan for quality		
3.	Data on KPIs affecting programs across the institution		
4.	Regulations and descriptions of processes for program approval, changes, and review		
5.	Data on Student evaluation surveys across the institution		
6.	Student advising and counselling system		
7.	Facilities for extracurricular activities		
8.	Provision of learning resources and system for responding to program requirements		
9.	Institutional system for provision of statistical data		

Signed (Rector or Dean)

Date

ATTACHMENT 7

REQUIREMENTS FOR REPORTS ON CHANGES IN ACCREDITED PROGRAMS

It is a condition of accreditation by the NCAAA 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.

ATTACHMENT 7A

**REPORT ON MAJOR CHANGES IN AN ACCREDITED
PROGRAM**

To be submitted at least one full semester before the changes proposed are to be implemented

Institution
College/Department
Program Title and Code
Program Coordinator/Director
Date of Report

1. (a) Change Proposed
(b) Proposed date of implementation
2. Reasons for Change
3. Objectives to be Achieved

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External Reviews for Accreditation and Quality Assurance

4. Process for Evaluating Achievement of Objectives Sought

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) E.g. Faculty recruitment or retraining, professional development, etc.

ATTACHMENT 7B

ANNUAL REPORT ON MINOR PROGRAM CHANGES

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

<p>1. Courses Added to or Deleted from the Program</p> <p>Reasons</p>
<p>2. Changes in Teaching Strategies Recommended in the Program Specification</p> <p>Reasons</p>
<p>3. Changes in Assessment Processes Recommended in the Program Specification</p> <p>Reasons</p>
<p>4. Changes in Program Evaluation Processes</p>



National Commission for Academic Accreditation & Assessment
External Reviews for Accreditation and Quality Assurance

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