King Abdulaziz University
Vice Presidency for Development
Deanship of Quality and Academic Accreditation

# Internal Quality Assurance System
## (IQAS)
### Standard & Guidelines

First Edition
2020

# KAU

King Abdulaziz University

# Table of Contents

# Glossary

To enable you to be comfortable with, and have a better understanding of the terminologies used, concerning quality assurance in higher education, it is important to start by defining the terms and phrases used. The following definitions are commonly accepted and should be useful as a point of reference for the remainder of this document.

**Quality:** An educational definition refers to an ongoing process ensuring the delivery of agreed standards. These agreed standards should ensure that every educational institution, where quality is assured has the potential to achieve a high quality of content and results.

**Quality Assurance (QA):** The means by which an institution is able to confirm that the standards set by the institution itself or other awarding body, are being maintained and enhanced.

**Quality Control:** Refers to the verification procedures (both formal and informal) used by institutions in order to monitor quality and standards to a satisfactory standard and as intended.

**Accreditation:** The process whereby an authority, recognized by institutions and government, determines that an institution offering programs in higher education may become self-accrediting, or offer its own higher education awards subject to periodic review. An accreditation agency certifies that the standards of a program are appropriate for the award to which it leads; and that the methods are appropriate for the purpose.

Accreditation is the result of a review of an education program or institution following certain quality standards agreed on beforehand. It's a kind of recognition that a program or institution fulfils certain standards.

**Standards:** A statement, making explicit what is implicit in academic practice, of the generic intellectual qualities that may be expected of a graduate

generally or within a particular field or discipline. It is assumed that standards can be represented on a scale, at least to the extent of distinguishing pass and fail and various classes of honors attainment. Standards may be expressed comparatively, that is norm-referenced; or in absolute terms, that is criterion-referenced.

**Learning Outcomes:** Program learning outcomes describe what students are expected to know and be able to do by the time of graduation, and at the time of successful completion of a course for course learning outcomes. These relate to the knowledge, skills, and values that students acquire as they progress through the program until the number of required credits are gained to graduate.

**Assessment:** One or more processes that identify, collect, and prepare data to evaluate the attainment of intended learning outcomes. Effective assessment uses relevant direct, indirect, quantitative and qualitative measures as appropriate to the outcome being measured. Appropriate sampling methods may be used as part of an assessment process.

**Evaluation:** One or more processes for interpreting the data and evidence accumulated through assessment processes. Evaluation determines the extent to which intended learning outcomes are being attained. Evaluation results in decisions and actions regarding program improvement. Don A., Richard J., Bruce Milligan (2000); Martina V. (2002).

**Program Specification:** A document that defines the program outline, level, learning outcomes, number of credit units and contact hours.

**Course Specification:** A document that defines the course content, requirements, learning outcomes, teaching and assessment approaches.

**Program File:** The design of a program including the program specification and all the course specifications. Supporting evidence of the key inputs to the design (external scan) should also be included.

**Program Report:** A document that reports on the delivery of the program over the last year using the NCAAA Program Report template. This evaluation of the program confirms standards have been achieved and identifies areas where opportunities for development and enhancement exist. It also provides the opportunity to identify good practice so this may be shared across the University.

**Course Report**: A document that defines the course content, learning outcomes, teaching and learning performance including samples of student exam and the results of the course assessment survey. This report is based on the NCAAA Course Report template.

**Advisory Committee**: a committee comprises a group of faculty staff from the academic department of the Faculty in addition to 50% of the members represented by the employers from outside the institution.

**Stakeholders**: a term that includes all faculty members, students, alumni and employers who affect or are affected by the academic program's outcomes.

**External Auditors**: people or bodies with high experience in scientific and academic fields representing international academic institutions or consulting organizations.

**Academic Programs**: all academic programs at all educational levels (Diploma (in all levels) - Bachelor - Master - PhD) and in various learning styles (Traditional - Electronic - Blended - Distance).

# Section A

Quality Assurance approach at KAU

# Section A: Quality Assurance approach at KAU

## A1. Introduction

The continuing interest in quality assurance systems and standards around the world reflects the rapid growth of higher education and the demand for well-qualified professionals by the business sector and industry, especially within knowledge-based economies. Thus, King Abdulaziz University (KAU) has strategically decided to emphasize the Quality Assurance (QA) and applicable policies and procedures for programs and awards on offer in order that it secures international standards for its awards.

The approach being taken by KAU supports the growing demand for QA in international universities where there is increased mobility of graduates and faculty, and where programs increasingly seek accredited status by international bodies to demonstrate their standing. KAU is committed to achieving accreditation through the National Centre for Academic Accreditation and evaluation (NCAAA) and structuring the institutional organization to align with this approach and achieve the Saudi 2030 Vision.

QA can be a driver for the University to achieve excellence in higher education (Patricia Ryan, 2015). Therefore, KAU expects affiliated programs to work towards continuous improvement through its QA processes. These processes are designed to support the strategic goals of the University.

Assuring the quality of academic programs at KAU requires a unified policy for all relevant parties which clearly defines the tasks and rules of each party. This is achieved through a series of procedures supporting this unified policy. The policy also aims to improve the content and outcomes of current academic programs to fulfill the requirements of the society and deliver the requirements of the job market.

The provisions of (IQAS), apply to all academic programs in the University, whether current or under development and at all educational levels (Diploma (in all levels) - Bachelor - Master - PhD) and in various learning styles (Traditional - Electronic - Blended - Distance).

To achieve this approach this document aims to provide an overview of the Quality Assurance (QA) system and approved Standards adopted by KAU.

For programs that have international accreditations, they can use the forms of accreditation bodies in accordance with the standards of the Education and Training Evaluation Commission.

## A.2 QA Policy and Purpose of IQAS

### A.2.1 Approach

The Vice-Presidency of Development has responsibilities for quality issues, which include the resources available, the processes followed, the quality of services provided and the quality of students' learning. Thus, the Vice-Presidency has established required standards, with a focus on the standards listed by internationally accepted and renowned accreditation boards and has developed a QA framework for KAU that specifies generic standards of learning outcomes for each level of qualifications. The Vice- Presidency requires Faculties and programs to adhere to this directive and has established a unified approach using the University's Internal QA Systems (IQAS).

In delivering this directive, all programs delivered at KAU must meet the regulatory requirements of the Kingdom of Saudi Arabia. These include the same credit and standards requirements, conformity with the National Qualifications Framework- Kingdom of Saudi Arabia (NQF), the requirements for years of study and academic awards, and the development of learning outcomes in the three different domains of learning. IQAS is preparing the University for the future, and as such has focused on the NQF which replaces the Saudi National Qualifications Framework (SAQF). KAU achieves these

requirements by setting out its own regulatory framework of procedures and policies in the form of this IQAS and its QA policy and procedures which guide all members of the University in achieving the aim of providing high quality academic programs leading to awards of the University. KAU programs equip students to achieve academic standards recognized both nationally and internationally.

The Vice-Presidency of Academic Affairs and the Curriculum Centre also play a central role in delivering the QA agenda, and their role and input is described at each stage of their involvement in IQAS.

The IQAS is a dynamic process for ensuring academic standards and quality improvements at KAU and the regular updating of the IQAS reflects the careful consideration that will be applied by the KAU academic community.

The IQAS recognises that quality assurance procedures and the generation of quality improvements are most effective when operating closest to the point of delivery. It is also recognised that the IQAS contributes to the requirements of NCAAA institutional standard 3 which states 'the institution must have clear and effective policies and procedures to design, approve and assess academic programs and courses. The planning of the programs must contribute to the achievement of the institution's mission and goals....'

To achieve the aim of fully embracing the IQAS framework, it is important that all staff and faculty at KAU take full responsibility for ensuring that they fully align their actions and promote the guiding principles for academic standards and quality as set out in the IQAS. It is expected that key members of academic management at KAU and in the departments, Faculties and institutes will take the lead responsibility for promoting and delivering all aspects of the IQAS throughout the University. Success will be evident when the whole community fully shares the responsibilities and demonstrates ownership of the IQAS and continues to promote enhancements and developments to reflect the dynamics of the national and international communities within which it resides.

## A.2.2 Internal Quality Assurance Areas for Programs: Policy

The University sets out its quality assurance requirements through a policy, which states the following:

**1**. The academic departments adhere to the standards and requirements of NQF in approving, amending or developing academic programs to ensure that these programs are compatible with the institution's mission and goals as well as modern local and global trends and to meet the society and job market needs.

**2**. A program Advisory Committee must contribute to the design and approval of the programs and the Advisory Committee should include members of professionals and experts in the program's specialization, to assure that these programs meet today's requirements and market needs. Inputs from all stakeholders should be evaluated for program redesign during a periodic review.

**3**. All academic programs must be subject to external auditing to ensure that these programs comply with standards from international bodies.

**4**. All new or developed academic programs are required to obtain official approvals from the relevant university departments or councils.

**5**. The academic departments should specify clear graduate attributes for each program. Recognizing that not every program offered by the University will be able to deliver all the University specified graduate attributes (see Annex A), each program must include at least one aspect from each of the four categories of the University's graduate attributes and should also include any graduate attributes from the professional standards of the program as well as the market needs. This is regarded as the minimum requirement, and all programs should strive to adopt the maximum number of University-defined graduate attributes possible.

**6**. All Academic departments should make sure that they have carefully designed learning outcomes for their programs which deliver the chosen graduate attributes by embracing the institutional learning outcomes into their design, meet the standards of the NQF and also meet the expectations of the beneficiaries from inside and outside the institution (see Annex B). It is imperative that the continuity and integration of program courses in achieving these outcomes is structured into the curriculum design.

**7**. The academic departments should ensure the unification of the program's curriculum and courses presented in more than one site (both male and female students and in the different branches) and make sure of their commitment to them.

**8**. The academic departments must adhere to the approved policy for the quality of field training activities in academic programs.

**9**. The academic departments should make sure that extracurricular activities are aligned with the institution's goals, integrate with its academic programs, and support students' personal and professional development.

**10**. The academic department shall abide by the regulations, policies and procedures governing academic and research affairs and evaluation aspects (such as all assessments, exam blueprints and grading system) and verify their reliability and objectivity.

**11**. The academic departments should assure that there is an appropriate quantitative and qualitative provision of learning resources and electronic services provided according to the e-learning and the distance learning methods and should ensure that these requirements are met and assessed periodically for improvement purposes.

**12**. The academic departments ensure the availability of a sufficient number of faculty members with appropriate qualifications and experiences for academic programs at all levels and types.

**13**. The scientific department prepares a curriculum outline (Course Syllabus) and announces it to students

**14**. The academic departments ensure the achievement of all learning outcomes for academic programs that form graduate attributes at both the institution and program level.

**15**. The academic departments conduct a comprehensive periodic assessment of the programs once every five years, and reports are prepared on the general level of quality in the program, with the identification of strengths and weaknesses.

**16**. The necessity of involving faculty, staff, students, alumni and employers in planning and quality assurance processes as detailed in the QA procedures.

**17**. The academic department investigates the assessment data (such as performance indicators and measurement data, student progress, program completion rates, students 'assessment of the program, courses and services, alumni and employers survey results) annually with advisory committees. The results of these analyzes are used in planning processes and development. The secretary of the Department Council, assisted by the administration in the Faculty, will construct an overview report for the Dean's consideration. This report will be presented to the Faculty Council for oversight.

**18**. The need for flexibility and sufficient authority to allow those in charge of the program to bring about the necessary development and change; In response to the developments and results of the periodic review processes of the program.

**19**. The academic department shall implement systems, regulations, procedures and plans approved by the institute/Faculty, including grievances, complaints, and disciplinary cases.

**20**. The academic department is committed to developing professional skills and capabilities of the academic, technical, and administrative support staff to keep pace with modern developments.

**21**. The academic department applies an effective system to assess the performance of the faculty and staff in accordance with clear and publicized standards.

**22**. The academic department applies mechanisms and procedures through which it guarantees integrity, fairness and equality in all its academic and administrative practices between the male and female faculty, staff, and students and branches (if any).

**23**. The academic department is committed to activating the values of scientific honesty, intellectual property rights, and rules of ethical and behavioral practices in all academic, research, administrative and service fields and activities.

# Section B

Program Standards and Quality

# Section B: Program Standards and Quality

The Quality Assurance Policy for Academic Programs at the University is supported by a series of procedures regulating the work of this policy and is compliant with the requirements of the National Center for Academic Accreditation and Assessment (NCAAA) as well as the procedures of the ISO 21001 Quality System. Accordingly, these procedures were divided into four levels or stages (planning, implementation, monitoring, improvement) with the aim of facilitating and developing a mechanism and working procedures for these programs and securing program standards (Figure1).
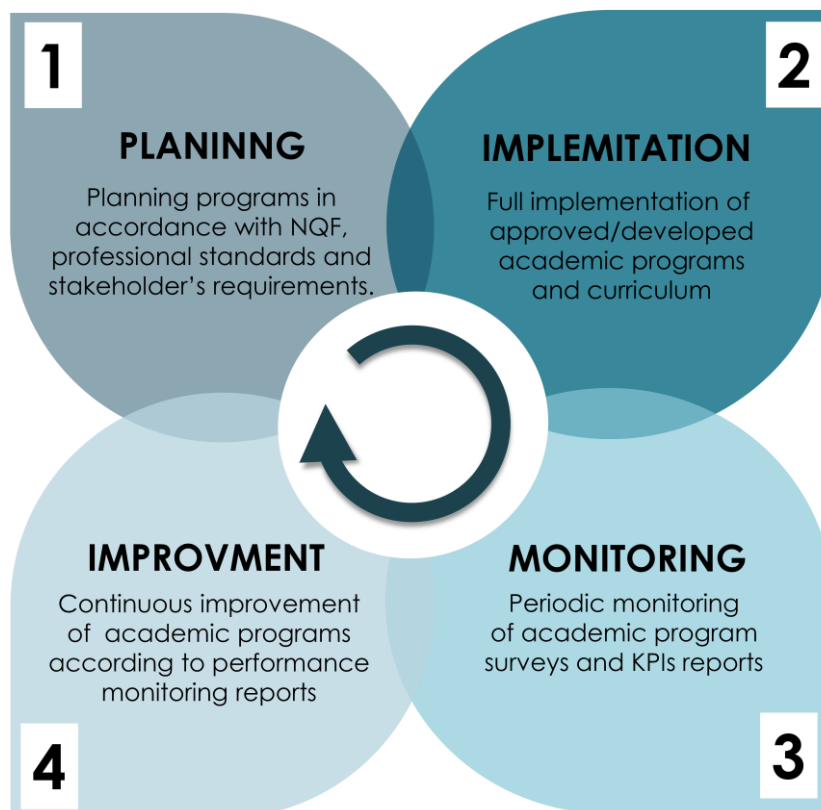


Figure 1 Program Quality Cycle

## B.1 Planning Stage

If a new program is proposed, the planning stage starts with the concept of looking at how the KAU and the supporting Faculty's Strategic Plan might be implemented through the development of such a program, or perhaps by

adding an additional track through an existing program. It is equally important to demonstrate how the proposed program is aligned with the labor market and Vision 2030. This stage of the program design allows the proposal to identify the resources required; financial, human and physical.

Once that initial phase is agreed, the program is subjected to external auditing, culminating in a formal approval.

Hence the planning stage comprises 3 steps:
- Initial phase of program design
- Full design subjected to external Auditing.
- Second phase : Approval

## Initial phase

**1**. At phase one , The academic department of the Faculty or institute fills the application form of approving / developing an academic program ([Application Form](#)). The department is required to attach the program file that includes some supporting documents such as department / Faculty council and Advisory committee meeting minutes, program and courses specifications and reports according to the forms of the National Center for Academic Accreditation and Assessment available on the NCAAA website and the Deanship of Quality and Academic Accreditation's website ([DQAA - Forms](#)).

**2**. The program file is presented to the department's advisory committee, then the Department and Faculty councils, for approval. It is then to be sent to the relevant specialized authority for approval (Curriculum Center / Deanship of Graduate Studies).

## External Auditing

The program scrutiny should demonstrate its alignment with professional body standards and/or benchmarking (national and international). Particular attention at this auditing stage should be paid to the LOs, ensuring the level against the NQF is appropriate for the program, and that both the learning

and teaching and the assessment strategies have been thoughtfully designed to assess the LOs using a range of approaches.

**1**. After reviewing and approving the program file by the competent authority, the entire program file is sent to two external auditors from international universities to express their opinions about the program.

**2**. The academic department is addressed to fulfill the reviewer's notes if any, and once the notes are fulfilled, the approval of the Deanship of Graduate Studies and the Curriculum Center can be taken.

## Deanship of Quality and Academic Accreditation Approval

**1**. The Academic department sends the complete program file to the Deanship of Quality and Academic Accreditation.

**2**. The Deanship of Quality and Academic Accreditation reviews the program file and verifies that it adheres to the requirements and standards:

    a.  The National Center for Assessment and Academic Accreditation.

    b.  The National Qualifications Framework (NQF).

    c.  The unified Saudi classification for educational levels and specializations.

The aim of approval is to ensure that the proposed program is appropriate for the purpose of justifying degree and title, complies with King Abdulaziz University regulations, and complies with external quality requirements.

**3**. After the academic department fulfils the notes of the Deanship of Quality and Academic Accreditation (if any), the Deanship sends a letter to the academic department confirming its approval for the academic program.

## Second phase: Approval

**1.**  The academic department of the Faculty or institute presents the program file to the Standing Committee for Curriculums and Academic Programs.

**2**. The Standing Committee for Curriculum and Academic programs sends the files for postgraduate programs to the Deanship of Graduate Studies for approval by the Deanship's Council.

**The approval process will be guided in its deliberations by the following:**

- The proposal is consistent with the University's mission and strategic plan and those of the relevant Faculty, particularly any community engagement contribution.
- The program meets the appropriate criteria/regulations of the Ministry of Education and the NCAAA.
- There is demand for the program as indicated by the identified labor market.
- The program is at the appropriate standard for the level of award(s) involved.
- The program is current and valid in the light of developing knowledge in the subject.
- The program and courses specifications have been thoroughly thought out and completed.
- There is documented evidence of consultation with interested bodies/persons from outside the University.
- The program prepares students with the necessary skills to be ready for the labor market.
- The resource base, including staffing, will be in place to run the program.

Additionally, the processes of approving or developing academic programs clearly define and outline the duties and responsibilities of all relevant authorities which can be summarised as follows:

### Academic department / Faculty

The academic department provides the program file according to the National Center for Academic Accreditation and Assessment template, which

has been approved by the advisory committee and department's and faculty's councils.

## Curriculum Center

The center reviews the curriculum structure for all new/developed diploma's and bachelor's programs and verifies their codes, pathways, credits hours according to the levels of the National Qualifications Framework and the Unified Saudi Classification of Educational levels and Specializations.

## Deanship of Postgraduate Studies

The center reviews the curriculum structure for all new/developed Master's and Ph.D.'s programs and verifies their codes, pathways, credits hours according to the levels of the National Qualifications Framework and the Unified Saudi Classification of Educational levels and Specializations.

## External Auditors

the external auditors examine the program file including goals mission and outcomes and ensure that it meets international professional standards.

## Deanship of Quality and Academic Accreditation

reviews the program file, including graduate attributes, learning outcomes, teaching and assessment strategies, to ensure its consistency with the standards of the National Center for Academic Accreditation and Assessment and its consistency with the National Qualifications Framework and the Unified Saudi Classification of Educational levels and Specializations.

## Standing Committee for Curriculum and Academic Programs

The committee which directed by the Vice-Rector for Academic Affairs scrutinizes the program file and all the reports from the relevant authorities and addresses their recommendations to the university council (Standing Committee for Curriculum and Academic Programs).

## University Council

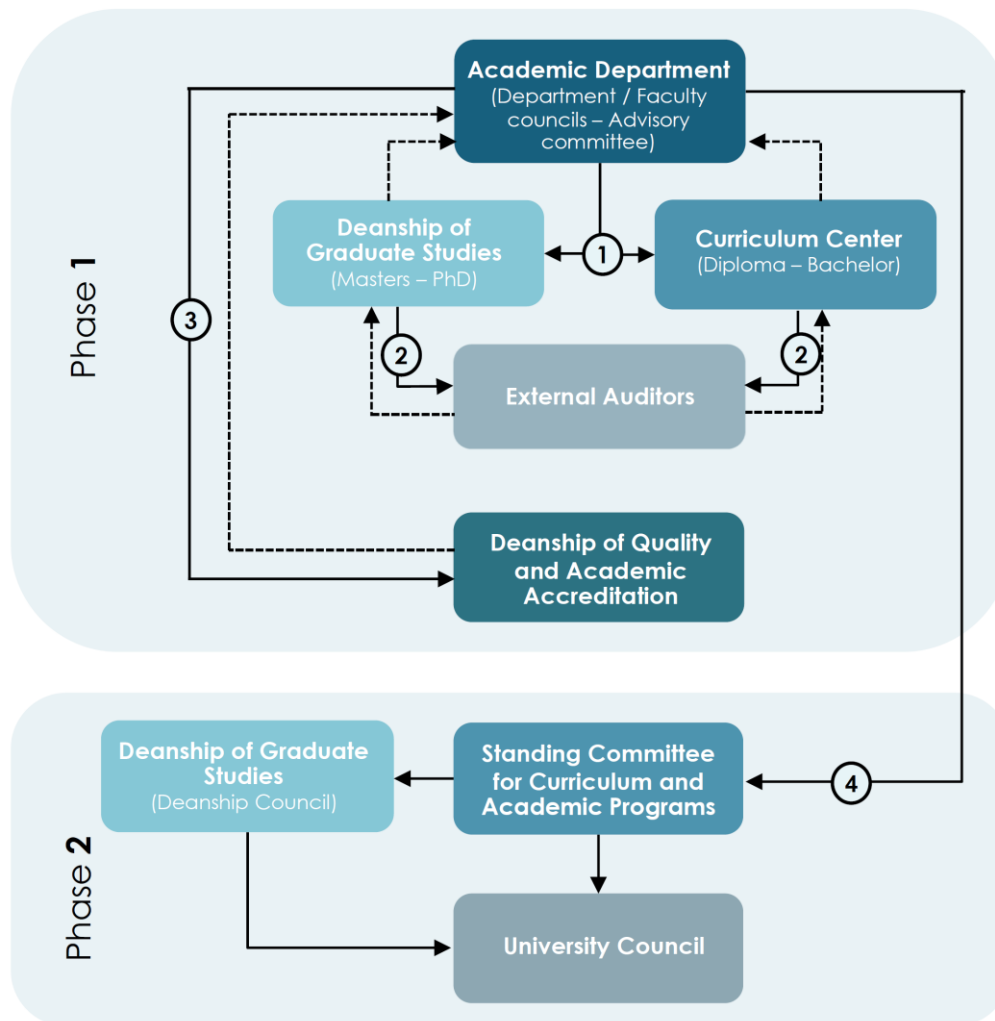conduct the final approval based on previous recommendations.

Figure 2 Overview of the Planning Stage

## B.2 Implementation

In this stage the program and course specifications that were prepared in the previous stage (planning), and the teaching and assessment strategies it contains, are implemented. There is a need to ensure that the implementation is commensurate with the intended learning outcomes. Hence, the implementation stage requires the full processes of learning, teaching and assessment of the program to be conducted.

KAU provides a range of tools to help with the detailed activity required to secure implementation.

**Procedures:**

**1**. The course coordinator is assigned the course specifications from the approval stage for all courses that he or she teaches. If more than one instructor participates in teaching more than one section of the same course, then the course coordinator works with these faculty members to ensure consistency of approach.

**2**. Faculty teaching a course across all the delivery points (all branches) should make every attempt to jointly develop common teaching materials and assessments. This will help secure the same standards across all points of delivery.

**3**. The faculty take the list of topics from the specification and adopt the approved learning experiences and assessments strategies for the course.

**4**. The faculty develop the student learning experience for each week of delivery and associated assessments which are aligned with the CLOs

**5**. Internal verification of assessments is secured by following the assessment policy set by the Vice President Academic Affairs (see Testing and Student Performance Evaluation Policies).

## B.3 Monitoring

### B 3.1 Monitoring Process

The monitoring stage is conducted at the end of the delivery of every course and annually for the overall delivery of the program. A range of inputs to this stage are considered, including all stakeholder feedback, performance indicators and analysis of the effectiveness of the learning, teaching and assessment processes. Monitoring is the cornerstone of quality enhancement.

**Monitoring** is a continuous process by which a program is kept under review, via an Annual Program Report (APR) and the associated Course Reports

(semester based CRs) and Field Experience Reports (on completion of field experience activities) (DQAA - Forms). Combined, the three reporting processes make an overall annual program and course monitoring reporting process which underpins the effective operation of the program.

To achieve this, a program team will regularly seek to gather evidence and feedback, evaluate that evidence and make subsequent changes to enhance outcomes, delivery and operation. The monitoring point will take place at the end of the academic year at program level and at the end of each semester for courses and field experience. Student feedback is particularly important, with the structure and contents of the survey, based upon the Course Evaluation Survey and Student Experience Survey, to inform the monitoring processes. Any field experience surveys will also be considered at this stage. Feedback via other stakeholder surveys will also be conducted. The University has a centralized system to gather all this information.

The monitoring process is reflective and should be noting and disseminating good practice and developing and implementing an action plan for improvements to the program and courses. All these points should be documented in the program and course reports. This stage is an inclusive process involving the program coordinator and all staff teaching on courses making up the program. It will embrace student feedback and independent advice such as external experts, advisory committees and alumni.

The process includes collecting evidence and analyzing the issues and evidence and comparing the program performance against the key performance indicators or benchmarks for the subject area. Hence annual monitoring of programs and courses is the cornerstone of the quality processes, and leads to a review of every program's currency, ensuring the continuing relevance, appropriateness and success of the award and student experience. The key features of the monitoring process are:

- To evaluate the statistical information on student recruitment, grades, progression and completion.

- To consider and respond to inputs and feedback from students and external experts, and if appropriate external agents such as professional and accreditation bodies and advisory committees.

- To reflect on the learning, teaching and assessments strategies deployed and consider any recommendations for change.

- To review the appropriateness and effectiveness of the learning outcomes in securing the program goals.

- To recommend changes for improving the student learning experience or curriculum content.

Hence a focus is placed on a comprehensive assessment of the program and its decisions in order to verify the quality of the programs and its outcomes. In summary:

1. The course instructor prepares a course report for each course. In case of that more than one instructor participates in teaching more than one section for the same course, the course coordinator prepares one overarching report reflecting all the different sections and including documents such as the results of the course and field experience survey, as well as a sample of student work, exams, projects, and assignments.

2. The course instructor, course coordinator, program coordinator, and head of the department review and discuss the program report and all courses reports, analyse results, measure the extent of which the program learning outcomes are achieved and approve reports in the department council.

3. The program coordinator prepares the program's annual report, including program statistics, assessment of learning outcomes and the results of the program's key performance indicators. The program annual report is able to draw information from the course reports.
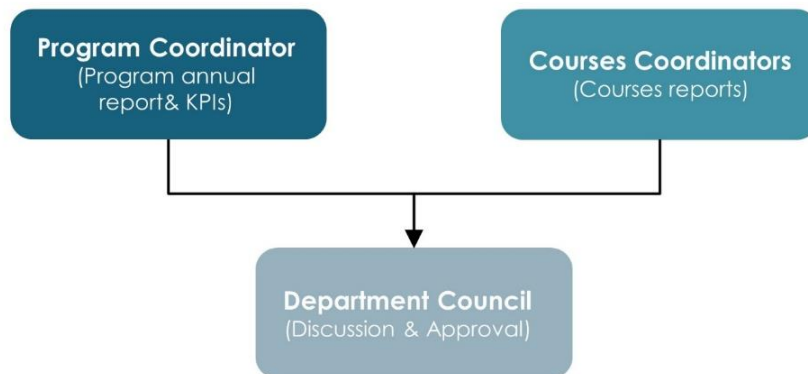
Figure 3 Monitoring Routes

## B.3.2 Timelines

The activities detailed above in B3.1, taken together, will contribute to the overall confidence of the University that the standards of the awards are secure. It is important that all the activities are completed in a timely manner, so the opportunity for enhancement is taken, and the system is demonstrably responsive to ensuring that the students experience a high-quality program.

At the end of each semester, each course coordinator will prepare a course report (CR) in consultation with the course teaching team. Statistics produced by the University, coupled with the other sources of input such as student evaluations, external advisor or advisory committee inputs, when taken together will provide the basis for analysis. The course report should be reflective of the learning and teaching during the semester, and of the assessment approach taken, recommending any amendments to the course definition that should be considered by the program team. Field reports are equally produced at the end of the semester.

Program coordinators are key faculty in the next phase. They are responsible for presenting the annual program report (APR) to the Academic Department Council. Once considered and approved by the Council, the total combined information can be forwarded within the Faculty.

The Academic Department Council will receive all the above reports within its remit and will scrutinize the reports to ensure that the process has been fully implemented, and that appropriate action plans are in place. It will note any program or course amendments proposed and take action to ensure these are processed before the end of the semester. Comparison of statistical data or other evidence will be undertaken, both across the programs in the Faculty, but equally against other comparative benchmark data that it has available. The secretary of the Academic Department Council, assisted by the administration in the Faculty, will construct an overview report for the Dean's consideration. This report will be presented to the Faculty Council for oversight.

The performance data provided for each stage will be refined for the purpose of the council considering the information. The expectation is that all performance data at each stage will be presented in identical format to enable effective comparisons to be made, including comparison with any external KPIs or external data sources. To achieve this standardization at program level, increasingly KAU will electronically produce much of the supporting data sets through central processes defined in EQAUP (see Annex C), but the program coordinator will take responsibility for ensuring that the process is completed, and will solicit the required information from appropriate sources (such as external benchmark data). The data sets will be further refined as the systems continue to develop, and are planned to cover the following areas:

- KPIs based on NCAAA requirement including:
    o student progression and success rates
    o employability of graduates
    o students' satisfaction with their programs
    o effectiveness of teaching

- profile of student populations, publications, faculty to student ratio etc

An overview of this reporting may be summarized as:

| Activity /event | Documents | Timing |
|---|---|---|
| **CR** | ● Statistical information on course progression<br>● Course evaluation survey (NCAAA templates) | End of semester in which course delivered |
| **APR** | ● statistical data on recruitment, progression and completion<br>● any external experts' report, professional body reports and advisory committee inputs<br>● student issues and course evaluations based on course reports and student meetings<br>● learning and teaching developments and proposed enhancements<br>● review of assessment strategies and recommendations for change<br>● program monitoring evaluation and report on above, including an action plan and report on progress against previous action plans<br>● proposals for revisions or updates to the program specification and course definitions.<br>● CRs and Field experience reports | No later than two months following completion of the program delivery for an academic year |
| **Department or Faculty overview report** | ● All APRs and CRs in the Faculty<br>● Statistical information and comparative benchmark data | No later than 6 weeks before the end of the semester following academic year under review |

| | | |
|---|---|---|
| **EQAUP- Kpis** | • Statistical information of The NCAAA 17 key performance indicators at the program level These indicators are the minimum to be periodically measured, and the academic program can use additional performance indicators if it believes they are necessary to ensure the quality of the program. | EQAUP-KAU forms are activated on the first day of the third week of the second semester. EQAUP-KAU forms are closed at the end of the fourth week of the first semester for the following year. |

Figure 4. Timeline of Monitoring

## B.4 Improvement

The improvement stage flows directly from the monitoring stage where evaluation took place. Thus, the periodic comprehensive self-studies undertaken in the monitoring stage to assess performance result in plans for improvement. These self-studies are followed by independent external peer reviews that verify the conclusions of the self-studies and consider performance in relation to international standards. The conclusions can embrace the updating of the program or course specifications to reflect subject developments and inputs from all sources, including the Advisory Committee and independent review. These updates can be categorized as both major or minor changes and will be implemented following formal approval processes being conducted.

Improvement procedures differ according to the time period and the amount of change that occurs to the program as a result of the improvement plan followed. Section B.4.2 addresses major and minor changes to a program and course specification.

### B.4.1 Periodic Review

Mandatory development plans are followed every five years, and can result in fundamental changes in the program (changing the number of credit hours or adding or removing courses) that require approval from the competent

authority (Curriculum Center / Deanship of Graduate Studies/Deanship of Quality and Academic Accreditation ) of the university to adopt the proposed improvement plan, and through it, the following procedures are followed, based on Figure 2:

**1.** At phase one, The academic department of the Faculty or institute fills the application form of approving/developing an academic program (Application Form). The department is required to attach the program file that includes some supporting documents including the proposed improvements such as department / Faculty council and Advisory committee meeting minutes, program and courses specifications and reports according to the forms of the National Center for Academic Accreditation and Assessment available on the NCAAA website and the Deanship of Quality and Academic Accreditation's website (DQAA - Forms).

**2.** The program file is presented to the Advisory Committee in the academic department, then by the department and Faculty councils for approval, and then it is sent to the relevant specialized authority for approval (Curriculum Center / Deanship of Graduate Studies).

**3.** After reviewing and approving the developed program file from the competent authority (Curriculum Center / Deanship of Graduate Studies), the entire program file is sent to two external auditors from international universities to express their opinions about the program.

**4.** After the Academic Department meets the comments of the external auditors (if any), the Academic Department send the program file to the competent authority (Curriculum Center / Deanship of Graduate Studies)for approval.

**5.** The Academic department sends the program file to the Deanship of Quality and Academic Accreditation. The Deanship of Quality and Academic Accreditation reviews and audits the developed program's file and courses to

ensure the extent to which the developed program conforms to the requirements and standards of the NCAAA.

**6.** After the department fulfils the notes of the Deanship of Quality and Academic Accreditation (if any),and confirming its approval for the developed academic program, the academic department of Faculty or institute presents the developed program file to the Standing Committee for Curriculums and Academic Programs.

## B.4.2 Regular improvements to programs

Program improvements can be divided into 2 categories with a different route for approval.

**1.** Major changes requiring approval by the route shown in Figure 2.
**2.** Minor changes requiring approval by the Faculty Council, supported by Academic Department Council shown in Figure 5.

**Major changes**

This will typically involve a change to one or more of the following major components of a program:

- Overall goals or program learning outcomes.
- Program title, duration or mode(s) of study.
- Assessment regulations for the program.
- A significant addition to the resources required.
- The overall scope and structure of the program, for example the addition of new pathways, or internships
- Changes affecting more than 25% of the course curriculum and contents.

The request for amendment will comprise as a minimum:
- An amended program specification
- Amended course specifications

**Minor changes**

Minor changes to program are included in this category. It allows small adjustments to be made relatively easily in recognition of the dynamic nature of successful programs which develop and evolve. Minor changes that may be approved under this category include:

- Course content changes provided the learning outcomes are not affected
- Teaching and learning methods
- Increase or modify allocated teaching and learning time to help the students
- Assessment weighting between components of course assessment
- New reference material



Figure 5 Minor Improvement route

# B.5 Program Closure

The authority to remove a program rests with the University Council, acting on the advice of the Deans Advisory Committee. Normally, such recommendations arise from one of the following situations:

- failure to recruit sufficient students to ensure viability.

- consistent failure to deliver a program of acceptable academic standards (e.g. unable to recruit sufficient faculty or provide adequate facilities).
- change in the Department or Faculty's Strategic direction.
- failure of the program to remain current or relevant.

In the event of a program being proposed for withdrawal through one of the above situations, the Department Council will propose closure to the Faculty Council. If agreement to close is approved, then a formal application using the same route as program approval in Figure 2 is followed. The application will declare the title of the award(s) being withdrawn and a clear indication if any courses which comprise this program are currently being offered to students on other programs across the University. Provision in the application to withdraw must be made for students already registered for the award and who have started their program of study, in order that they are given adequate protection to complete their studies or for them all to have agreed a transfer to an alternative program of study.

A Faculty may suspend recruitment and admission to a program, in which case the protection offered to enrolled students remains in situ. In all cases, withdrawal and suspension, the Program Committee must determine when the last enrolled cohort will reach the completion of the program and make appropriate arrangements for the protection of the best interest of those students. Once approved by University Council the program closure decision will be forwarded to the Deanship of Admissions so that student recruitment ceases.

# Section C

Assessment

# Section C: Assessment

## C.1 Introduction

Students are quite often apprehensive about what is expected from them. Many new students may not be familiar with the style of assessments being used. This is a key area, and the early success or failure can have real impact on the confidence level of a student, and their motivation to continue and complete their program. Remember, there is only one chance to get it right the first time. If the guidelines for the assessment are not clear they may inadvertently waste time on aspects of their assignment and hence not achieve their full potential. It is therefore important that students are provided with guidance that is specified through an assignment brief and rubrics. It is good practice for any Program Handbook or the Bb to contain all the assignment outlines so that students are aware from the outset of the assessment requirements to be placed upon them.

Establishing the assessment schedule for all courses, with clear submission dates which spreads the workload expected for students and staff will enable students to perform to the best of their ability.

Assessment for each course will be carried out under the authority of the relevant academic regulations. Each course will have a clearly defined assessment plan, which is made known to the students through their handbook or BlackBoard and is specified in the course specification. The contribution of each component of assessment undertaken by the student will be strictly followed, and all assessment components which contribute more than 25% of the overall course grade will be moderated.

Prior to the start of each course delivery, Course Coordinators will liaise with other members of the course team and should provide the Program Coordinator with a schedule of proposed dates for the handing out and submission of assignments, as part of the course plan. The Program

Coordinators' role will be to identify any overall areas of concern for example, excessive number of assignments, insufficient time for completion of assignments by students, bunching of assignments, inappropriate submission dates, etc. and raise any issues with the Course Coordinators. Having agreed the assessment schedule, the process moves on to the one of monitoring and control. This process can be part of the program committee activities.

Situations will inevitably arise when it is not possible to adhere to the agreed assessment schedule and adjustments will have to be made. Where this is the case it is essential that effective communications be maintained between the Program Coordinator and the Course Coordinator(s) in order that the students' learning experience is not adversely affected. Most importantly, the students should be made aware of any changes being proposed to the published assessment schedule.

## C.2 Assessment principles

Responsibility for ensuring equal treatment for all students in assessment and protecting program standards lies with the University. KAU's assessment requirements are based on student performance against defined national standards within the NQF and NCAAA standards documentation. Each program must evidence a range of assessment types that support a deep rather than a shallow approach to the students' learning experience.

Where necessary, procedures are in place to ensure that specific assessments can be modified to meet the needs of students with special needs. Such students may be identified during the initial admission stage or at a later stage of their study when the special need is recognized. Arrangements for these students are the responsibility of the host Faculty supported by the Deanship of Admissions and Registration.

## C.3 Quality of student assessment

Assessment of students must support student learning. Assessment helps students to establish where they are in the learning process and where they need to go. The faculty's role is to support the student in getting there by

adjusting teaching plans and using assessment evidence to give supportive feedback to each student.

It is well understood that the quality of the assessments and the securing of the intended learning outcomes underpins the approach taken at KAU. Assessment strategies are important as much as the student learning experience is directly influenced by the assessments taken. KAU takes the view that an integrated learning, teaching and assessment strategy can promote and contribute to a 'deeper learning' student experience. Together with good, timely feedback, student assessment provides the environment through which effective learning takes place, enabling students to demonstrate that the intended learning outcomes have been achieved.

## C.4 Assessment Management

Course assessment will vary depending on the nature of the intended learning outcomes, the defined strategy in the course specification and the judgment of the course coordinator as to the best methods of assessment within that approved approach. Any changes to that strategy needs to be approved through the minor amendments route and published in the student handbook prior to the start of the semester. Course coordinators should review the assessment approach taken and report on its effectiveness through the regular course monitoring process, taking and responding to advice from external advisors and student feedback, to ensure learning outcomes are met and student learning is of the highest quality.

All staff must ensure they manage their assessment processes according to the detailed University standard (Testing and Student Performance Evaluation Policies). Students must also ensure they keep to the assessment regulations as detailed below.

### C.4.1 Assessment setting

Staff must be prepared to submit assessments early in the semester in which the course is delivered to ensure the moderation processes are completed. This will be part of the course plan which all course coordinators should produce.

Each assessment must be moderated by another staff member. No assessments should be given to students until the moderation processes are complete and any issues identified in the process have been addressed. Program coordinators should guard against assessment overload and check that course assignments are, where possible, not all due for submission at the same time.

### C.4.2 Student assessment schedule and submission arrangements

At the beginning of each semester, students must be given submission dates. Dates for formal examinations should also be given with reminders issued at least 4 weeks before the examination period. Students must be clearly advised on how assessments should be submitted and reminded of penalties and/or process for late submission. The submission should include a signed declaration that the work is the students' own. KAU will increasingly use anti-plagiarism detection techniques and associated methods of assessment submission as it further develops its infrastructure.

## C.5 Marking and grading

All assessments should be marked by the teaching staff delivering the course that semester. The marking process should normally be completed within two weeks plus up to 2 days to enter data onto the systems Course teams are expected to operate clear assessment protocols, using moderation approaches which ensure consistency and evidence that standard levels of practice are in place. Cross marking between the branches to maintain standards is promoted as a way of maintaining standards.

Of course, the sampling size will also be based on the confidence level of the initial sample. Any major discrepancies must be resolved, with input from another faculty member such as the program coordinator if necessary. A major discrepancy would be where the two markers were more than 10% different in their grading of an assessment. Normally the sampling size will follow the square root approach, so if 100 students took an assessment, then the sample size would be 10. Only if inconsistencies in marking arose would the sampling size increase.

Students need to be aware of, and understand, assessment criteria that will be used to mark all assessment tasks. Faculty must ensure that assessment criteria are explained when any assessed task is given to students and that details are clearly set out in each assessment.

Internal moderation is vital to ensure that course staff applies assessment criteria consistently and that there is a shared understanding of the academic standards students are expected to achieve. Through course and program reviews, good evidence of moderation is a vital component to the underpinning of internal quality procedures. The use of varied moderation techniques in particular situations is encouraged, i.e. moderation may focus on a cohort sample such as borderline cases or involve the use of two staff double-blind marking.

**DQAA** can advise Faculties on:
- best practice on using precise numerical marks or grades/bands when assessing student work.
- giving clear guidance on how borderline marks are best defined and managed.
- where anonymous marking is appropriate and where it is not, e.g. in practical or work-based assessment

- when second or double marking is best used and how that process is best conducted, i.e. deciding whether a second marker should have knowledge of the first marker's grades.
- standard process to be used for internal moderation and verification of marks and procedure to follow if there is disagreement on marks between internal and external moderators
- how best to undertake analysis of marks and marking trends to produce comparative evidence on standards. Such analysis should be incorporated into annual program review.

KAU has a policy to secure assessments using its verification approach. A copy of the policy is provided here (see Annex D)

KAU has a standard system for assessment grading. The grades a student receives are calculated against an assessment scale which is out of 5 points, e.g. a student receiving B+/4.5 denotes the assessment is classed as superior with a percentage of 85 to less than 90. An assessment receiving F/1.0, i.e. less than 60% is denoted a failure

Grades earned by the students are calculated on grade scale basis out of (5) points as follows:

| Percentage | Grade | Grade Symbol | Points Scale |
|---|---|---|---|
| 95-100 | Outstanding | A+ | 5.00 |
| 90-95 | Excellent | A | 4.75 |
| 85-90 | Highly very good | B+ | 4.50 |
| 80-85 | Very good | B | 4.00 |
| 75-80 | Highly good | C+ | 3.50 |
| 70-75 | Good | C | 3.00 |
| 65-70 | Fairly good | D+ | 2.50 |
| 60-65 | Pass | D | 2.00 |
| Less than 60 | Fail | F | 1.00 |

❖ **Source**: Undergraduate Study and Examinations Regulations and Approved Implementing Rules, Deanship of Admission and Registration, King Abdulaziz University,1437/1438 AH, page 14.

# Annex A

Graduate Attributes

# Annex A: Graduate Attributes

The University has established a range of graduate attributes. Programs should select from these attributes and add any further attributes specific to the discipline of the program being designed. The attributes should be integral to the overall design, such that students successfully meeting all the LOs will have demonstrated the graduate attributes of the program. The graduate attributes are reflected in the Institutional Learning Outcomes and these will be integrated within the design of the program and course LOs. This will be achieved by mapping the institutional learning outcomes to the program learning outcomes to demonstrate where they are delivered. This design approach commits the program designers to deliver the graduate attributes at the correct NQF level.

Determining the attributes and characteristics of the graduates is the basic and first step for starting the process of renewal and making the needed changes in the specialized program curricula and reformulating the educational outcomes of the programs. This leads to the development of teaching and evaluation strategies for learning which ensures achieving graduates' efficiency. In addition to making the required changes in curricular and programs, there are also changes that should take place in the extracurricular activities. This helps enhance the attributes and characteristics of university graduates.

The attributes of graduates are defined as the cognitive qualities, skills and behaviors that the university community agrees to develop and make mastery of by the students during their time at the university. In another definition, they are the characteristics that help graduates to generally integrate into society with the pedagogical and behavioral skills they gained.
The attributes of graduates are one of the important factors for structuring academic programs in Higher Education and aligning the outcomes of higher education with the needs of the labor market or the changing business sector.

The attributes of graduates are also known in the literature as university outcomes or graduates' competencies.

The importance of determining the qualities of graduates is usually linked to the need of the labor market or with the employment skills required by the labor market. This helps increase job opportunities for graduates in various required practical fields and reduce the unemployability rate, which is one of the main goals of university's outcomes quality and keeping them updated.

In determining the attributes of the graduates, several institutional, local and global aspects and frameworks must also be taken into account. On a global level for example, the 21st century are considered as one of the main attributes and international frameworks for Higher Education graduates. Locally, there is the framework of the Kingdom's Vision 2030, its goals and programs for the higher education sector. Regarding the institutional framework, the vision and mission of the universities must also be taken into account when defining the attributes of graduates in order to distinguish between the outcomes of universities. Within this framework, university excellence must be the forefront (Figure A1).
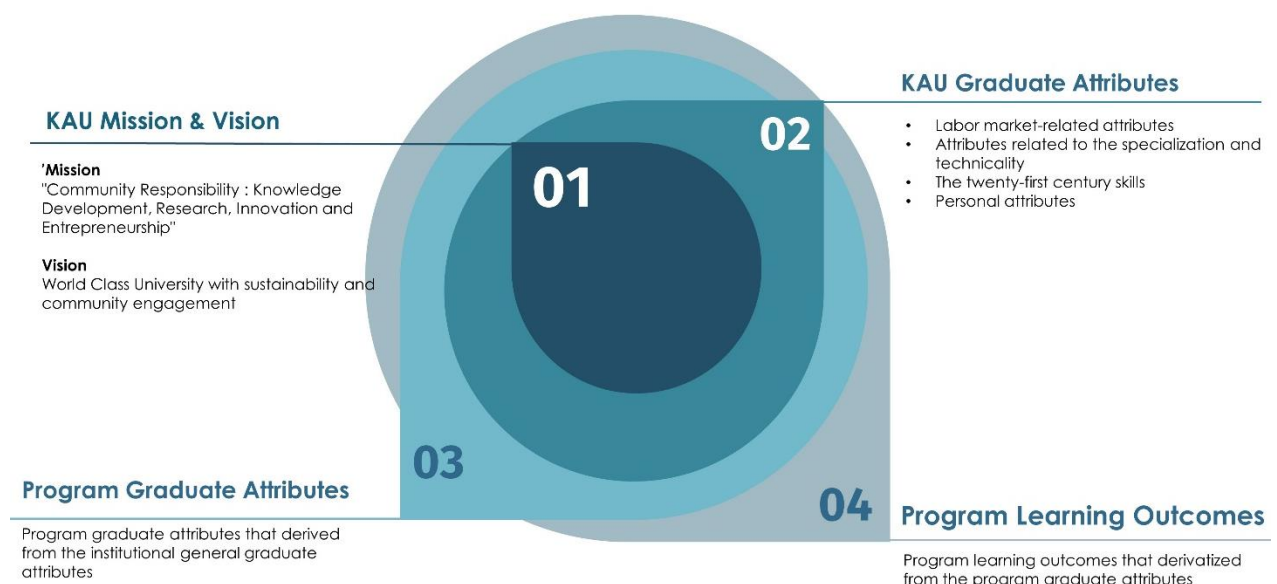


**KAU Mission & Vision**

'Mission
"Community Responsibility : Knowledge Development, Research, Innovation and Entrepreneurship"

Vision
World Class University with sustainability and community engagement

**01**

**02**

**KAU Graduate Attributes**

- Labor market-related attributes
- Attributes related to the specialization and technicality
- The twenty-first century skills
- Personal attributes

**03**

**Program Graduate Attributes**

Program graduate attributes that derived from the institutional general graduate attributes

**04**

**Program Learning Outcomes**

Program learning outcomes that derivatized from the program graduate attributes

Figure A1. The strategy of constructing KAU graduate attributes

**Attributes of university graduates include four areas:**

**First**: **Labor market**-related attributes, which are the skills and behaviors that the student acquires during university time to enable him/her to engage in the labor market as follows:

1. Critical thinking.
2. Creative problem solving.
3. Effective communication skills.
4. Working within a team.
5. Effective and influential leadership.
6. Self-confidence in general and when proposing ideas.
7. Excellent command of spoken and written English.

**Second**: Attributes related to the **specialization and technicality**, which are the skills related to the specialization and specific discipline in the field of study with mastery of general technical skills. These include programming skills and data analysis with the basics of artificial intelligence that empower students within their field of specialization in the labor market.

**Third**: **Personal attributes**, which are the knowledge and behaviors that polish the personal characteristics of the King AbdulAziz University students to empower them in both local and global communities. These are:
Seeking lifelong learning.
1. Independence and passion for initiative.
2. The ability to coexist with different people and cultures locally and globally, and to be able to demonstrate global citizenship.
3. The ability to withstand and adapt in various work environments.

In addition to the competencies, King Abdulaziz University educational model has adopted the necessity for graduates to acquire twenty-first century skills. This is considered a major requirement for their involvement in the competitive

labor market and the acquisition of any other qualities that may not be available in graduates of other universities.

**Fourth**: The **twenty-first century skills**, which are teamwork, effective communication, time management, computer and technical skills, coordination, leadership, negotiation, critical thinking, innovation, emotional intelligence, continuous learning, citizenship, self-management, self-marketing, research, knowledge exchange, planning and coordination, digital knowledge, self-awareness, independence, ethical values, understanding professional and social values, global citizenship, initiative for development, directing services, respecting different cultural backgrounds, and mastering different languages.

❖ **Source**: The above information obtained from the Graduate Attributes Document that approved and circulated by the vice presidency for Academic Affairs, Circular No.4211589 on 27/1/1442.

# Annex B

Learning Outcomes

# Annex B: Learning Outcomes

Opportunities for learning in higher education may be formal or informal. The term 'learning outcomes' recognizes that learning will generate a range of outcomes, including the intended learning defined in the program of study and learning which is generated by or as experience or which is the by-product of other learning activities. The program learning outcome should be derived from the institution general graduate attributes which consistent with institution mission and vision. Once determined, the learning outcomes for the program of study map directly to the summative assessment, with the assessment methods being appropriate to offer every student an equal opportunity to demonstrate their achievement of the intended learning outcomes (ILOs) irrespective of how and where the student has studied (Figure B1).
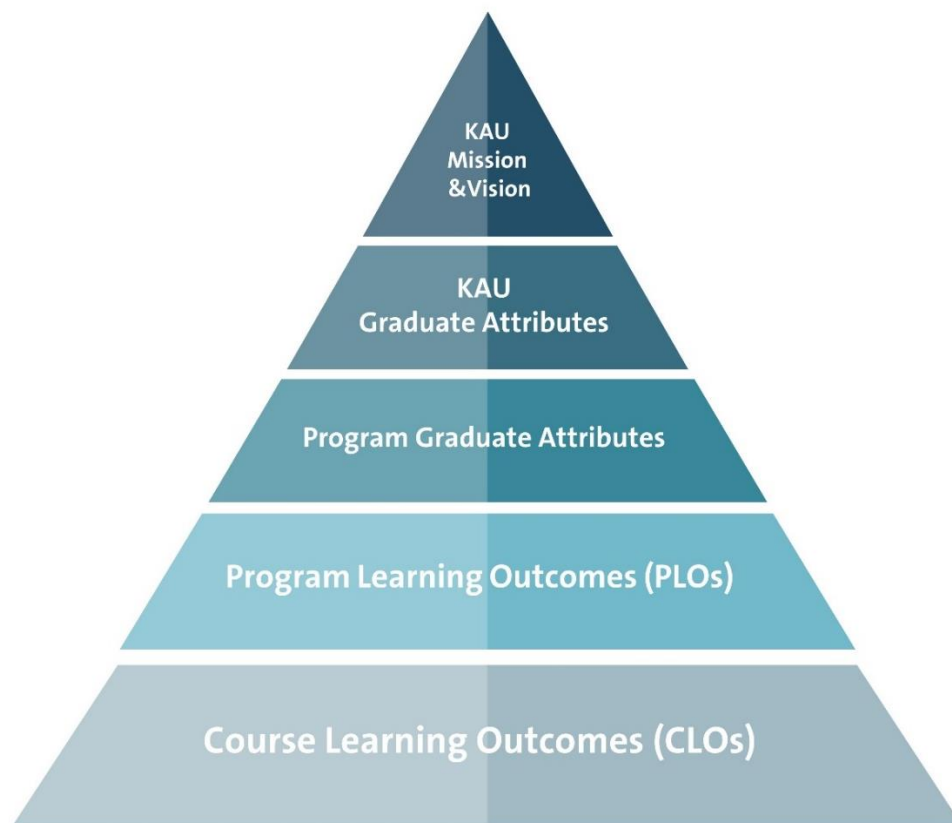


Figure B.2 Hierarchy of setting learning outcomes.

Learning and teaching activities and associated resources underpin the program and course design to provide every student with an equal and

effective opportunity to achieve the intended learning outcomes. Learning and teaching activities, support for learning, and resources together enable every student who engages appropriately to achieve the learning outcomes. The learning opportunities support students to make the transition into higher education and to progress academically and intellectually through their program of study, whatever its level.

In writing the learning outcomes, the following guidelines should be followed.

- Make the ILOs measurable so they become the basis of the assessment plan.
- The ILOs should be relevant, so each course ILO can be mapped across to the program ILO (see Figure B.2 below)
- The mapping should be at the right level on the national qualifications' framework (for example a course learning outcome that is based on 'demonstrate an understanding' cannot be mapped to a program ILO which requires the student to 'analyse').
- The ILOs should be written from a students' point of view and focus on key issues, rather than a larger number of trivial issues. Remember the more ILOs stated, the more detailed the assessment strategy, and each course should certainly not exceed ten ILOs, and be closer to four or five.

Once an initial draft of the ILOs is completed, it is required that a mapping between the course ILOs and the program ILOs is undertaken. In a good design, each program ILO will be tested in more than one course, and usually multiple courses. That helps in situations where one assessment has only been partially completed, but the student can still be confirmed as having met the learning outcomes of the program.

| Course code & No. | Program Learning Outcomes | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Knowledge and understanding | | | | Skills | | | | Values, independence and responsibility | | |
| | K1 | K2 | K3 | --- | S1 | S2 | S3 | --- | V1 | V2 | ---- |
| Course .... | | | | | | | | | | | |
| Course .... | | | | | | | | | | | |
| Course .... | | | | | | | | | | | |

* Add a table for each track (if any).

Figure B.2 Curriculum learning outcomes mapping.

A completed matrix would indicate the courses and levels that are required to teach each one; using the program's course numbers in the left-hand column and the following level scale:

**Levels:  I = Introduced   P = Practiced   M = Mastered   A = Assessed**

Typically, each ILO starts with a verb that supports learning at a particular level. There are several taxonomies (such as Bloom's Taxonomy in Annex C) which provide a supporting set of verbs. Normally the program ILOs will have been written before the course ILOs, the mapping above is a basic test of completeness. It is possible to review the program ILOs as the development of all the courses nears completion.

If any course ILO cannot be mapped to a program ILO, then it is probably inappropriate for this program and should be removed. Remember that ILOs should be expressed in a language which students can understand. Also remember that any updates or amendments to the ILOs should be made through the appropriate process.

There are two basic concepts behind the ILOs in guiding the learning process:

- Students are guided by the ILOs
- Faculty align the learning, teaching and assessment methods with the ILOs

**To support the university sectors (colleges and institutes) in achieving the effectiveness of the steps to build and evaluate different types of LOs and ensure their quality. KAU has conducted a clear** policy which applies to all programs including Diploma, Bachelor and Postgraduate studies in all colleges and institutes of the University ([Quality Assurance Policy for Learning Outcomes of Academic Programs](#)).

# Annex C

EQAUP-plus Practices and KPIs
(Faculties/Institutions)

## Annex C: EQAUP-plus Practices and KPIs (Faculties/Institutions)

| Code | Key Performance Indicators | Type of indicator | Method of calculate |
|---|---|---|---|
| **Standard 1: Mission and Goals** | | | |
| **KPI-P-01** | Percentage of achieved indicators of the program operational plan objectives | Percentage | $\dfrac{\text{The number of performance indicators of the operational plan objectives of the program that achieved the targeted annual level}}{\text{The total number of indicators targeted for these objectives in the same year}} \times 100$ |
| **Standard 3: Teaching and Learning** | | | |
| **KPI-P-02** | **Students' Evaluation of quality of learning experience in the program** (Average of overall rating of final year students for the quality of learning experience in the program on a five-point scale in an annual survey) | Number | For answer Kindly, Calculate the average of (first and second semester) for Question No. (27) "Overall I was satisfied with the quality of my learning experiences at this institution" From the program evaluation survey |
| **KPI-P-03** | **Students' evaluation of the quality of the courses** (Average students overall rating for the quality of courses on a five-point scale in an annual survey) | Number | For answer Kindly, Calculate the average of (first and second semester) for Question No. (28) "Overall, I was satisfied with the quality of this course " From the course evaluation survey |
| **KPI-P-04** | **Completion rate** (Proportion of undergraduate students who completed the program in minimum time in each cohort) | Percentage | $\dfrac{\text{The number of undergraduate students who completed the program in the minimum time}}{\text{The total number of undergraduate students enrolled at the beginning of the first year in the same program}} \times 100$ |

| Code | Key Performance Indicators | Type of indicator | Method of calculate | |
|---|---|---|---|---|
| KPI-P-05 | **First-year students retention rate** (Percentage of first-year undergraduate students who continue at the program the next year to the total number of first-year students in the same year) | Percentage | Total number of undergraduate students enrolled in the program who successfully complete the first year of the program (not the preparatory year) | ×100 |
| | | | The total number of first-year students in the same year | |
| KPI-P-06 | **Students' performance in the professional and/or national examinations** (Percentage of students or graduates who were successful in the professional and / or national examinations) | Percentage | The total number of students or graduates who have successfully passed professional and / or national exams in a program | ×100 |
| | | | Total number of students or graduates from the same program | |
| KPI-P-07 | **Graduates' employability** a) The percentage of graduates of the program who were employed during the first year of their graduation | Percentage | Total number of graduates of the program who were employed during the first year of their graduation | ×100 |
| | | | The total number of graduates from the same program | |
| KPI-P-07 | **Graduates' enrolment in postgraduate programs** b) The percentage of graduates who enrolled in postgraduate programs during the first year of their graduation | Percentage | Total number of graduates who enrolled in postgraduate programs during the first year of their graduation | ×100 |
| | | | The total number of graduates from the same program | |
| KPI-P-08 | **Average number of students in the class** Average number of students in the class (in each teaching session/activity: lecture, small group, tutorial, laboratory or clinical session) | Number | Total number of students in the program | ×100 |
| | | | The total number of sections in the same program | |
| **Standard 4: Students** | | | | |

| Code | Key Performance Indicators | Type of indicator | Method of calculate |
|---|---|---|---|
| **KPI-P-09** | **Employers' evaluation of the program graduate's proficiency** Average of overall rating of employers for the proficiency of the program graduates on a five-point scale in an annual survey | Number | Overall average for (employer survey) of program / department |
| **KPI-P-10** | **Students' satisfaction with the offered services:** Average of students' satisfaction rate with the various services offered by the program (restaurants, transportation, sports facilities, academic advising, ...) on a five-point scale in an annual survey) | Number | Overall average of (university student service) questionnaire of program / department |
| **KPI-P-11** | Ratio of students to teaching staff of full-time and full-time equivalent teaching staff ( on the job) | Ratio | The total number of students ⎯⎯⎯⎯⎯⎯⎯ The total number of full-time and fulltime equivalent teaching staff in the program (on the job only) |
| **KPI-P-12** | a) Percentage of teaching staff distribution based on Gender Female | Percentage | The total number of faculty member (females) in the program ⎯⎯⎯⎯⎯⎯⎯ ×100 The total number of faculty members in the same program |
| **KPI-P-12** | a) Percentage of teaching staff distribution based on Gender Male | Percentage | The total number of faculty member (males) in the program ⎯⎯⎯⎯⎯⎯⎯ ×100 The total number of faculty members in the same program |
| **KPI-P-12** | b) Percentage of teaching staff distribution based on Branch (Sulaymaniyah Branch) | Percentage | The total number of faculty members in the program, Sulaymaniyah Branch ⎯⎯⎯⎯⎯⎯⎯ ×100 The total number of faculty members in the program in all branches |
| **KPI-P-12** | b) Percentage of teaching staff distribution based | Percentage | The total number of faculty members in the ×100 |

| Code | Key Performance Indicators | Type of indicator | Method of calculate | |
|------|---------------------------|-------------------|---------------------|---|
| | on Branch<br>( Rabigh Branch) | | program, Rabigh Branch | |
| | | | The total number of faculty members in the program in all branches | |
| **KPI-P-12** | c) Percentage of teaching staff distribution based on Academic Ranking (lecturer) | Percentage | The total number of faculty members with the rank of lecturer in the program | ×100 |
| | | | The total number of faculty members in the same program | |
| **KPI-P-12** | c) Percentage of teaching staff distribution based on Academic Ranking (Assistant Professor) | Percentage | The total number of faculty members with the rank of Assistant Professor in the program | **×100** |
| | | | The total number of faculty members in the same program | |
| **KPI-P-12** | c) Percentage of teaching staff distribution based on Academic Ranking (Associate Professor) | Percentage | The total number of faculty members with the rank of Associate Professor in the program | **×100** |
| | | | The total number of faculty members in the same program | |
| **KPI-P-12** | c) Percentage of teaching staff distribution based on Academic Ranking (Professor) | Percentage | The total number of faculty members with the rank of Professor in the program | **×100** |
| | | | The total number of faculty members in the same program | |
| **KPI-P-13** | c) Proportion of teaching staff leaving the program annually for reasons other than age retirement | Percentage | The total number of teaching staff leaving the program annually for reasons other than age retirement | **×100** |
| | | | The total number of faculty members in the same program | |
| **KPI-P-14** | **Proportion of teaching staff leaving the program** | Percentage | The total number of full-time faculty members who published at least | **×100** |

| Code | Key Performance Indicators | Type of indicator | Method of calculate |
|---|---|---|---|
| | Percentage of full-time faculty members who published at least one research during the year | | one research during the year in the program |
| | | | Total faculty members in the same program |
| KPI-P-15 | **Rate of published research per faculty member** (The average number of refereed and/or published research per each faculty member during the year) | Ratio | total number of refereed and/or published research in the program |
| | | | the total number of full-time or equivalent faculty members during the year in the same program |
| KPI-P-16 | **Citations rate in refereed journals per faculty member** (The average number of citations in refereed journals from published research per faculty member in the program) | Ratio | The total number of citations in refereed journals from published research per faculty member in the program |
| | | | The total research published |
| **Standard 6: Learning Resources, Facilities, and Equipment** | | | |
| KPI-P-17 | **Satisfaction of students with the learning resources** a) Average of students' satisfaction rate with the adequacy and diversity of learning resources (references, journals, databases... etc.) on a five-point scale in an annual survey. | Number | For answer Kindly, Calculate the average for Questions from the University Service Questionnaire for Students: Q21: References mentioned in course syllabi are readily available. Q22: The library provides the appropriate the updated scientific book and publications. Q28: In general. I am satisfied with library services. Q31: Sources of digital electronic library database are available |
| KPI-P-17 | **Satisfaction of faculty members with the learning resources** | Number | For answer Kindly, Calculate the average for Questions From the |

| Code | Key Performance Indicators | Type of indicator | Method of calculate |
|---|---|---|---|
| | b) Average of faculty members' satisfaction rate with the adequacy and diversity of learning resources (references, journals, databases... etc.) on a five-point scale in an annual survey. | | University Service Questionnaire for Faculty and Other Employees Holding Similar Positions:<br>Q22: References mentioned in course syllabi are readily available.<br>Q23: Faculty members are consulted about books required for the library.<br>Q24: The library provides the appropriate the updated scientific book and publications<br>Q28: In general. I am satisfied with library services.<br>Q31: Sources of digital electronic library database are available. |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| **1** | | **Mission and objectives** | |
| **1.0.1** | 1. The program has a clear, appropriate, approved and publicized widely mission that is consistent with the mission of the institution and the college/department; and is consistent with the needs of the society and the national trends. | Mission statement, its link to the nature of the program and how it meets the needs of the students to conform to the needs in the Kingdom of Saudi Arabia. | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| **1.0.3** | 2. The program mission and goals guide all its operations and activities (e.g., planning, decision-making, resources allocation, curriculum development). | Examples of decisions taken based on the mission of the program to meet the requirements of the program. | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| **1.0.5** | 3. Program managers monitor the extent to which its goals are achieved, through specific | Alignment of the program's objectives with projects and | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| | performance indicators, and take the necessary actions for performance improvement. | measurable key performance indicators. | |
| 1.0.6 | 4. The program mission and goals are reviewed periodically with the participation of relevant stakeholders and are developed accordingly. | 1. Meeting Minutes of Mission statement<br>2. Review and meeting minutes of the Faculty board for approving it.<br>3. A phased questionnaire distributed to program beneficiaries to ascertain the effectiveness of the mission. | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| 2.1 | **Program management** | | |
| 2.1.8 | 5. The program management monitors its commitment to implement its role in the community partnership plan of the institution through specific performance indicators. | 1. Attach community service reports.<br>2. Mechanisms for documenting and following up community service activities. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| 2.1.12 | 6. The program forms an advisory committee, comprised of members of professionals and experts in the program specialization, to contribute to its evaluation, development, and performance improvement. | 1. The meeting minutes of the advisory committees shall enclosed.<br>2. Copies of the decisions resulting from the recommendations of the advisory committees and their implementation plans. | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| 2.1.14 | 7. The program management provides reliable and publicly disclosed information to the community about the program description, performance, and achievements that suits the needs of the stakeholders. | Photos from the website and samples of brochures distributed to the students. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| **2.1.16** | 8. The program implements an effective system to evaluate the performance of leaders, teaching staff, and employee according to clear, published standards and mechanisms that ensure fairness, transparency, and accountability; and the results of the evaluation are used to provide feedback, improvement, and development | 1. Model and example of faculty member assessment.<br>2. Minutes of the feedback session. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **2.1.17** | 9. The program management is committed to activating the values of the scientific integrity, intellectual property rights, rules of ethical practices, and proper conduct in all academic, research, administrative, and service fields and activities. | 1. Process of Publishing Code of Ethics for students and faculty members.<br>2. Examples of a documented record of violations in the college.<br>3. Examples of the Committee of Scientific Research Ethics | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **2.1.18** | 10. The program management applies the systems, regulations, and procedures that are approved by the institution/college, including those related to grievance, complaints, and disciplinary cases. | Attach a proof of systems application (case example) | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **2.2** | **Program quality assurance** | | |
| **2.2.1** | 11. The program management implements an effective quality assurance and management system that is consistent with the institution quality system. | 1. Quality system improvement plans.<br>2. Follow-up reports on development and improvement plans.<br>3. Project completion reports related to development plans. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| 2.2.3 | 12. The program management approves key performance indicators that accurately measure the program performance and coordinates to provide regular data on them. | A list of the NCAAA key performance indicators for two consecutive years. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| 2.2.4 | 13. The program analyzes the evaluation data annually (e.g., performance indicators and benchmarking data, student progress, program completion rates, student evaluations of the program, courses and services, views of graduates and employers); and results are used in planning, development, and decision-making processes. | 1. A report that includes the results of the views of the students, graduates, and employers about the program.<br>2. A list from the annual program report showing the distribution of students' grades, their progress rates and their graduation rate. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| 2.2.5 | 14. The program conducts a periodic, comprehensive evaluation (every three / five years) and prepares reports about the overall level of quality, with the identification of points of strength and weakness; plans for improvement; and follows up its implementation. | A comprehensive evaluation report is attached (recommended every five years) | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| 3.1 | **Graduate Attributes and Learning Outcomes** | | |
| 3.1.1 | 15. The program identifies its graduate attributes and intended learning outcomes that are consistent with its mission and aligned with the graduate attributes at the institutional level; and they are approved, publicly disclosed, and periodically reviewed. | A list of the program learning outcomes / qualifications of the program graduates, linked to professional and vocational standards and the needs of the labor market. | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| 3.1.2 | 16. The graduate attributes and learning outcomes are consistent with the requirements of the National | Report on the consistency of the program with National Framework (NQF), and | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| | Qualifications Framework (NQF) and with academic, professional, and labor market requirements. | report on its comparison to a similar program. | |
| 3.1.4 | 17. The program applies appropriate mechanisms and tools for measuring the graduate attributes and learning outcomes and verifying their achievement according to specific performance levels and assessment plans. | Documented mechanism by the Dean or the vice dean. A report on the stakeholders 'survey results. A report showing how to monitor and benefit from the academic fields to develop courses and programs. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| 3.2 | **Curriculum** | | |
| 3.2.7 | 18. The learning outcomes in the courses are aligned with the program learning outcomes (e.g., Matrix for the alignment of the learning outcomes of the courses with program learning outcomes). | Example of distribution matrix of learning outcomes in courses | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| 3.2.11 | 19. The learning outcomes of the field experience activities are aligned with the learning outcomes of the program; and appropriate strategies for training, assessment, and training venues are identified in order to achieve these outcomes. | 1. Field Experience Specification according to NCAAA<br>2. Attach the mechanism of field experience selection in the college | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| 3.2.12 | 20. Both the program field-experience supervisor and the field supervisor are informed with the intended learning outcomes and the nature of the tasks entrusted to each of them (supervision, follow-up, student assessment, evaluation and development of field experience); and their commitment is followed up according to specific mechanisms. | 1. A report clarifying the faculty members' visit to the field experience<br><br>2. Attach the report of evaluation of training supervisors for field experience survey | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| **3.2.13** | 21. The program ensures a unified application of its study plan as well as the program and the course specifications offered at more than one site (sections of male and female students and different branches). | 1. Minutes of Curriculum Committees , <br> 2. Exams Committees and minutes of Department Councils proofing both male and female faculty participation | ☐Every 5 years <br> ☐ Every 3 years <br> ☑ Annually |
| **3.3** | | **Quality of Teaching and Students' Assessment** | |
| **3.3.4** | 22. The courses are periodically evaluated for ensuring the effectiveness of the teaching and learning strategies and assessment methods, and reports are prepared on them. | Forms of courses reports | ☐Every 5 years <br> ☐ Every 3 years <br> ☑ Annually |
| **3.3.5** | 23. The program applies mechanisms to support and motivate excellence in teaching and encourages creativity and innovation of the teaching staff. | Awards recognizing outstanding teachers. | ☐Every 5 years <br> ☐ Every 3 years <br> ☑ Annually |
| **3.3.6** | 24. The program implements clear and publicized procedures to verify the quality and validity of the assessment methods (e.g., their specifications, diversity, and comprehensiveness to cover the learning outcomes, distribution of grades and accuracy of marking), and to ensure the level of student achievement. | 1. Examples of the Exam Blueprint if any. <br> 2. Course specification | ☑Every 5 years <br> ☐ Every 3 years <br> ☐ Annually |
| **3.3.8** | 25. The feedback is provided to students about their performance and evaluation results at a time that allows them to improve their performance. | 1. The process approved by the Dean or the Vice Dean is attached. <br> 2. Samples of the office hours' schedules or the feedback interviews. <br> 3. The extent to which the students are satisfied with receiving | ☐Every 5 years <br> ☐ Every 3 years <br> ☑ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| | | feedback on their performance. (from course evaluation survey) | |
| **4** | **Students** | | |
| **4.0.1** | 26. The program has approved and publicly disclosed criteria and requirements for the admission and registration of students that are appropriate to the nature of the program and are applied fairly. | Attach the criteria and conditions approved by the program and attach proof of its declaration | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| **4.0.4** | 27. The program applies fair and approved policies and procedures for students transferring to the program and the equivalency of what students had previously learned. | The minutes of the department board includes the transfer mechanism with the transfer case (if any) | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **4.0.5** | 28. The program provides comprehensive orientation for new students, ensuring their full understanding of the types of services and facilities available to them. | Report on the application | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **4.0.7** | 29. Students are provided with effective academic, professional, psychological, and social guidance, and counselling services through qualified and sufficient staff. | 1. forms of teaching staff members for the academic guidance<br>2. Attach proof of psychological and social counselling services (letter, case) | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **4.0.8** | 30. Mechanisms are applied to identify gifted, creative, talented, and underachieving students in the program, and appropriate programs are available to care for, motivate, and support each group of them. | A documented report clarifies the mechanism for determining students from each category (creative, excellent, unsurpassed) and programs offered for each category. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **4.0.12** | 31. The program implements an effective mechanism to communicate with its alumni and involve them in its events and activities, explore their | Alumni Unit Annual Report. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| | views, and benefit from their expertise and support; and provides updated and comprehensive databases about them. | | |
| **4.0.13** | 32. Effective mechanisms are applied to evaluate the adequacy and quality of services provided to students and measure their satisfaction with them; and the results are used for improvement. | Annual report of the Students' Support Unit (name vary according to the faculty) | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **4.0.15** | 33. The program implements effective mechanisms to ensure the regularity of students' attendance and their active participation in the course and field experience activities. | attach an approved mechanism which used in the college | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **4.0.16** | 34. There is an appropriate representation for students in relevant councils and committees. | 1. The decision to form the committee<br>2. Committee Minutes | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **5** | Teaching Staff | | |
| **5.0.2** | 35. The program has an adequate number of faculty members at all sites where it is offered (e.g., male and female student sections, branches) | 1. Number of faculty members<br>2. Ratio of students to teaching staff. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **5.0.3** | 36. The faculty members have the necessary competency (e.g., qualifications, certificates, professional licenses, experience required), and effective teaching skills; and appropriate mechanisms are applied for verification. | 1. Statistics of the scientific qualifications of faculty members<br>2. Distributing faculty members to scientific departments with their qualifications | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **5.0.4** | 37. The program provides appropriate orientation for new and adjunct teaching staff to ensure their understanding of the nature of the program, their rights, tasks, responsibilities, and workload. | 1. Attach the schedule of the training programs<br>2. Attach the percentage of the new teaching staff attendance. List of the KAU teaching Diploma | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| | | candidates and graduates. | |
| 5.0.6 | 38. The teaching staff regularly participate in academic activities (e.g., participation in conferences and group discussions , research projects, arbitration of theses and research) to ensure their awareness of the latest developments in their fields of specialization; and their participation in these activities and scientific production are considered in their criteria for evaluation and promotion. | Statistics of participations of faculty members in (conferences, discussion creation, research projects, arbitration of letters and research( | ☐Every 5 years ☐ Every 3 years ☑ Annually |
| 5.0.9 | 39. Teaching staff participate in professional and academic development programs in accordance with a plan that meets their needs and contributes to the development of their performance. | Attach the training programs and attendance rate of the total number of faculty members in the program | ☐Every 5 years ☐ Every 3 years ☑ Annually |
| 6 | Learning resources, facilities, and equipment | | |
| 6.0.1 | 40. The program implements clear policies and procedures that ensure the adequacy and appropriateness of learning resources and services provided to support student learning. | 1. Attach a report on the opinions of the faculty members and how they respond to the needed resources. <br> 2. Letters of request of scientific departments for educational materials or any other sources. | ☐Every 5 years ☐ Every 3 years ☑ Annually |
| 6.0.10 | 41. The program has the sufficient number of qualified technicians and specialists for the operation and preparation of laboratories. | Statistics in numbers of technicians and specialists in their qualification. | ☐Every 5 years ☐ Every 3 years ☑ Annually |
| 12 | Timetables and Teaching Load | | |
| 12.1 | 42. Completion of the Program specification | A unified completed Program specification (in latest NCAAA form) for the two campuses (female and male). | ☑Every 5 years ☐ Every 3 years ☐ Annually |

| No. | Practice | Evidence | Time Period |
|---|---|---|---|
| **12.2** | 43. Completion of course specification for each program. | Unified completed course specifications (in latest NCAAA form) for the two campuses (female and male). | ☑Every 5 years<br>☐ Every 3 years<br>☐ Annually |
| **13** | **Preparatory year** | | |
| **13.1** | 44. There is a course specification for the preparatory year course that includes learning outcomes and assessment methods used | A completed form of NCAAA Course specification for Preparatory Year course | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |
| **13.2** | 45. There is a report for the preparatory year course that shows the extent to which the learning outcomes of the course have been achieved. | A completed form of NCAAA Course Report for each Preparatory Year course. | ☐Every 5 years<br>☐ Every 3 years<br>☑ Annually |

# Annex D

Policy of Verifying the Assessment
of Student Performance

# Annex D: Policy of Verifying the Assessment of Student Performance

**Introduction**

Assessment of students must support student learning. Assessment helps students to establish where they are in the learning process and where they need to go. The faculty's role is to support the student in getting there by adjusting teaching plans and using assessment evidence to give supportive feedback to each student

It is well understood that the quality of the assessments and the securing of the intended learning outcomes underpins the approach taken at KAU. Assessment strategies are important in as much as the student learning experience is directly influenced by the assessments taken. KAU takes the view that an integrated learning, teaching and assessment strategy can promote and contribute to a 'deeper learning' student experience. Together with good, timely feedback, student assessment provides the environment through which effective learning takes place, enabling students to demonstrate that the intended learning outcomes have been achieved.

**The purpose of the policy**

1. Guaranteeing accuracy and fairness in the process of assessing students.
2. Monitoring the quality and mechanisms of assessment in relation to what is suitable for the programs' requirements.
3. Verifying that students' level is in accordance with the requirements of various study programs by making sure that the assessment focuses on the learner (student).

**Nature of policy**

The aim of this document is to illustrate the KAU policy in verifying the assessment of the semester coursework and exams (mid-year, final) and class

and non-class activities. This policy follows the requirements of the learning outcomes outlined in the national framework of qualifications of higher education in the Kingdom of Saudi Arabia. The policy also commits to designing assessments in accordance with this framework, which is itself designed to lead to the acquisition of knowledge, general skills, and professional experience normally associated with studies that lead to equivalent certificates at other highly regarded institutions worldwide. The framework also includes the knowledge and skills required for professional practice in Saudi Arabia. The verification process of assessment of semester work and coursework guarantees that the assessment process is consistent, fair, and reliable in order to guarantee the quality of the educational process in accordance with the national and international criteria.

**Procedures**

1. Verifying that the syllabus requirements (for example: Types of costs, Types of exams…etc) which are identical to the agreed description of syllabus in the Scientific Council Department which should be adhered to and followed by the member of the teaching staff.

2. Learning outcomes matrix should be used, or any other tested and suitable means, when correcting students' exams.

3. Using effective procedures to verify that students' work is their own work.

4. Providing periodical feedback to students concerning their performance and the results of their assessment during each semester along with additional support if necessary.

5. Each department should provide an independent reviewer (a teaching staff member in the same field) from other educational institutions to review correction of random samples from students' class work. Departments also conduct independent comparisons for levels of achievement which students obtained with other equivalent institutions in Saudi Arabia or abroad. This broad objective independent verification of assessment results enables the university to ensure that assessments are fair for students.

# Internal Quality Assurance System (IQAS)

# 2020



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