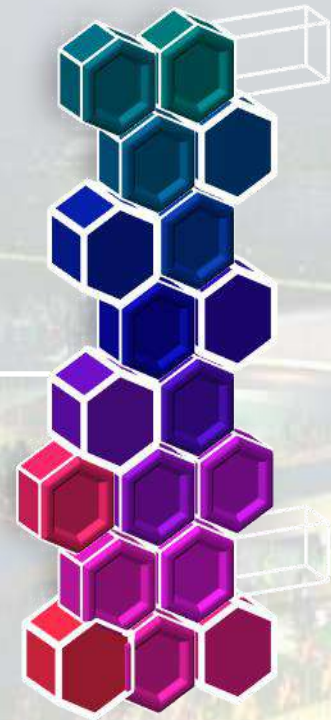
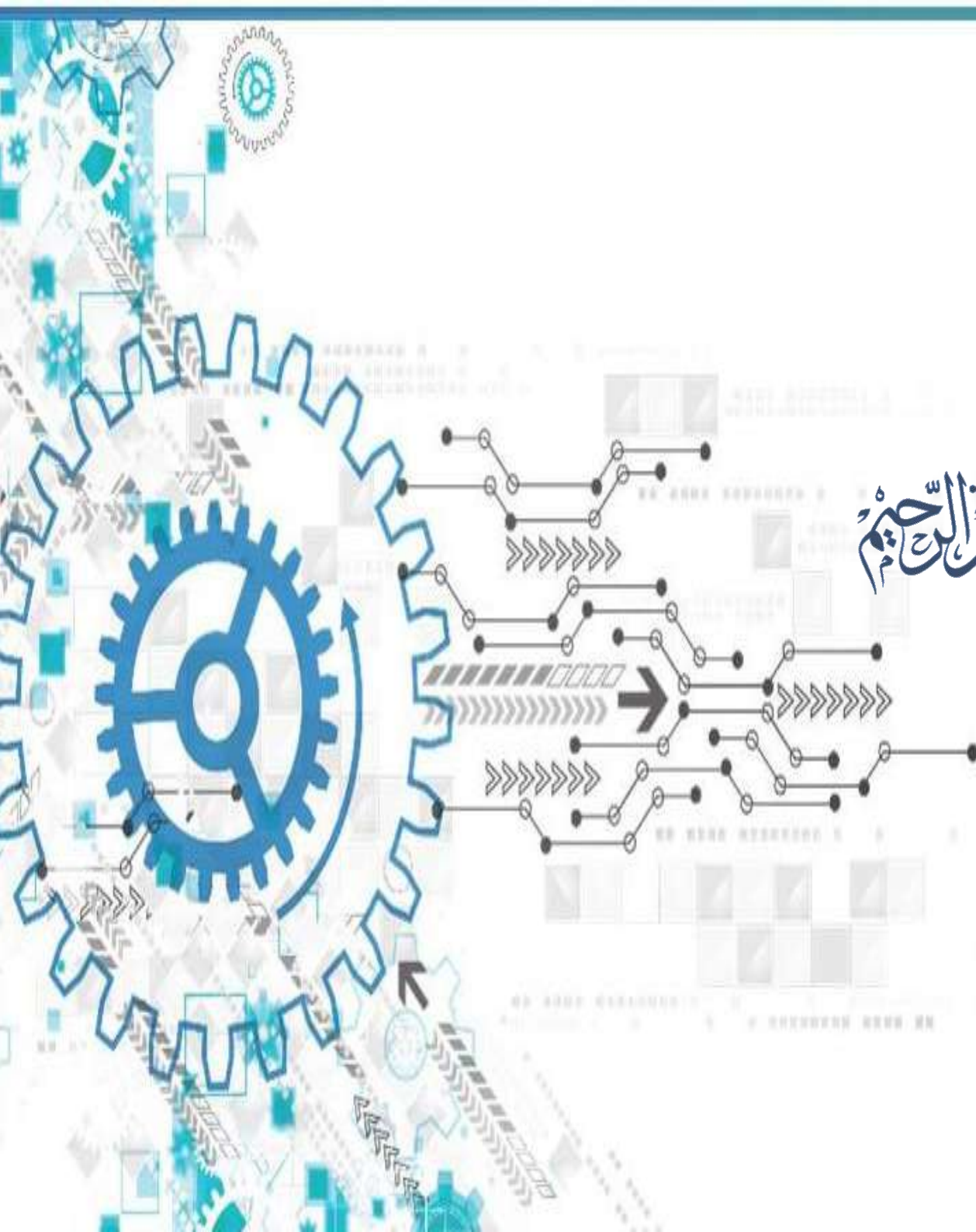


Quality Assurance Guide

Biological Science Program

2024





بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

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Introduction

The process of enhancing quality assurance and excellence in higher education programs is an ongoing process through academic evaluation and accreditation processes to guide planning, decision-making and achieving goals. Quality systems are activated to achieve continuous improvement in the performance of academic programs within a framework of integrity, transparency, fairness and a supportive organizational climate for work. Accreditation is primarily based on evaluation over a specified period of time, highlighting the quality of programs and outcomes that demonstrate the alignment of purpose with performance. As such, quality assurance can be considered a prerequisite for accreditation. The accreditation process, at the program level, includes assessment by the National Commission for Academic Accreditation and Evaluation (NCAAA) based on a set of agreed-upon criteria. If these criteria are met, accreditation is granted. It is worth noting that accreditation indicates that the institution and its programs are up to international standards, and it is necessary to maintain these quality standards as part of the continuous improvement of the institution's performance over the long term. Quality assurance is primarily an internal accountability system for the program, and relies heavily on the commitment and support of all staff in administration and teaching. The quality assurance process identifies strengths, weaknesses, and corrective and preventive plans in academic programs, leading to improving their quality. This Quality Assurance System Manual is intended to serve as a concise source of information for the program's quality system, assessment of learning outcomes, and highlighting important quality assurance



policies, guidelines, and procedures that support the program in its goal of ensuring quality practices in all areas. This manual does not cover every policy in the program; rather, it supplements other policies and guidelines. The program derives all of its guidance, including policies, procedures, quality practices, and systems, from the University.

• Abrief overview of the program:

The Biological Science program was established as one of the programs affiliated with the College of Arts and Science at Najran University in 40/1441H, according to Resolution No. 6-4-1440/1441 AH dated 13/09/1441H. The program awards a bachelor's degree to students in biology. The program offers 130 study units on the credit hour system. The department is keen on the continuous development of education programs to be in line with national and international standards and ensure the graduation of student's worthy of the trust of the labor market in the Kingdom of Saudi Arabia. The program includes an elite group of faculty members with a high degree of competence in teaching and scientific research, in addition to their outstanding contributions in providing many university and community services. The program is always keen to provide qualified scientific cadres of faculty members, researchers, experts and technicians specialized in scientific and technological fields to keep pace with scientific development in various fields.



It also aims to encourage scientific research through research conducted by faculty members, and to cooperate with scientific and governmental bodies and institutions and production centers to solve various environmental and societal problems related to the disciplines of biology. The program is equipped with a laboratory that contains some supporting technologies to assist teaching for bachelor's students and assist researchers, but it also still requires a lot of supplies and equipment for the faculty member to perform his academic and research duties.

First

• Terms mentioned in the guide:

✚ **Quality Assurance:**

Evaluation, assessment and follow-up processes related to performance quality that serve two distinct purposes: (1) ensuring that the required quality levels are maintained and improved. And (2) reassuring stakeholders that quality is maintained at levels similar to good practices in accredited programs.

✚ **Internal Quality Assurance:**

Quality assurance processes implemented within the program and by it or for it. Internal quality assurance is not limited to monitoring and review processes managed by the university itself, but also includes the use of external auditors from other institutions, or from accreditation or other quality assurance agencies to review and advise programs and activities.

✚ **Performance Indicators:**

Specific forms of evidence and measurements that are adopted and used by the university/programs to provide evidence about the quality of performance and its achievement of its goals and mission. Performance indicators are specific and directly related to the goals and objectives to which they relate. Performance indicators may be direct or indirect and all objectives are linked to more than one performance indicator to ensure accurate monitoring of performance trend and quality by providing evidence of the achievement of an objective from different perspectives.

✚ **Key Performance Indicators (KPIs):**

Are selected performance indicators of particular importance for the purpose of evaluating performance or achieving key objectives. They include a short list of measurements that accurately reflect the quality of performance and achieve goals. This list includes the

set of key indicators specified by the Education and Training Evaluation Commission in addition to indicators related to the university's strategic objectives. For colleges and programs, this list includes indicators related to the main objectives derived from the college/program's mission.

✚ Assessment:

Is the process of measuring the level of performance compared to reference targets or approved standards? This term is used in two different contexts: evaluating student performance in tests, exams, or other tasks in order to measure their achievement of the intended learning outcomes; or the process of measuring the quality of university/college/program performance compared to the accreditation standards of the Education and Training Evaluation Commission.

✚ Accreditation:

An official certificate from a recognized authority that the program or university meets the required standards in order to be accredited. The NCAAA has set these standards, which are the quality assurance and accreditation standards for higher education institutions/programs.

✚ Benchmark:

Comparison points or performance levels used to determine objectives and targeted performance levels. The benchmark may be internal through comparison with previous performance of the same college/program or a similar college/program in the same university, or it may be external through comparison with a counterpart outside the university (in this case, it must be ensured that the approved conditions for selecting an external benchmarking partner are met).

✚ Domains of Learning:

Broad categories of learning types expected to be acquired after completing the specified study period for an academic program, and they are identified and described in the National Qualifications Framework. The university and academic programs are committed to

them when describing their academic programs and determining the appropriate teaching and assessment strategies for each domain of learning.

✚ **Learning Outcomes:**

The learning that results from participation in a course or program, and is a detail of what the student should be able to demonstrate in terms of knowledge/skills under each area of learning. The National Qualifications Framework (NQF) has provided a description in precise terms of the level of knowledge, skill and values expected for different qualifications.

✚ **Mission:**

A brief general statement that defines the goals and directions of the university/college/program/department. Although it is important to formulate the mission in general terms, the formulation must be precise enough to serve as a guide for planning and decision-making at all levels. The mission must be used as a basis for decision-making (the formulation of the mission should reflect the answer to the following questions: Who are we? What do we offer? To whom? How? The mission may include a definition of the areas of excellence and the geographical scope covered by the entity's services)

✚ **Program:**

A coherent course of study followed by students in a specific academic or professional field that leads to obtaining a qualification (academic degree). The program includes an integrated package of courses and educational activities that aim to develop knowledge, skills and values related to the nature of the program and qualify students to practice specific professions after successfully completing the program.

✚ **Standard:**

The main areas set by accreditation bodies to audit and evaluate academic performance, and are used as a reference for evaluating the performance and achievements of the university/programs. The university, with all its academic entities and programs, is primarily committed to evaluating its performance against the accreditation standards set by the Education and Training Evaluation

Commission and its periodic updates, in addition to the standards of other accreditation bodies in the event of applying for accreditation from other recognized accreditation bodies.

✚ **Criterion:**

Identifies the sub-components of each standard, meaning that when evaluating performance in each standard, there are points of focus within the same standard that must be achieved in order to meet the requirements of the standard. In other words, achieving the overall requirement of the standard depends on meeting the full set of criterion requirements, which means that all sub-components must be addressed, as meeting this requirement partially means a decrease in performance and its score in the general standard.

✚ **Qualifications Framework:**

A document that specifies the nature, levels or standards of learning required for an academic or technical degree. Qualifications frameworks specify increasing levels of mastery of knowledge and skills required for an academic, professional or technical degree.

✚ **Graduate Characteristics:**

The distinctive characteristics of university/program graduates that have been developed as a result of adopted teaching policies and strategies. This term is used to refer to the attitudes, skills, behavioural habits or personal characteristics that are evident in the behaviour of graduates in external situations rather than purely academic learning outcomes that may refer to abilities rather than actual behaviour.

✚ **Teaching Strategies:**

The strategies used by a faculty member to develop student learning. These are the specific techniques used to develop student learning in various areas that may include, for example, sequencing questions to develop or apply concepts to new situations, clarifying values, case studies, group problem-solving tasks, simulations, role-playing, etc. This term should not be confused with “teaching methods”, which is a term used to describe the form of organizing teaching or delivering training.

✚ Internal Auditor:

He is a faculty member working at the university who has experience in working in the field of quality assurance and academic accreditation, and has completed training courses that qualify him to provide technical support, review quality and accreditation documents, and assist the university's colleges/academic programs in achieving consistency of their internal quality management systems with the institutional system and ensuring the quality of their outputs and improving them to qualify them to obtain/renew their academic accreditation.

✚ The university's internal auditors team:

It is a team that issues an annual decision to form it and includes a number of faculty members from various academic specializations at the university who have experience in the field of quality assurance and academic accreditation. The team's tasks focus on providing technical support and reviewing quality and accreditation documents for the university's colleges/programs under the umbrella of the institutional system for quality management and assurance and in accordance with the policies/procedures/models approved by the Deanship of Development and Quality.

Second

• Vision and mission of the university/college/program:

University Vision

Leadership in teaching, learning and scientific research to build an innovative and internationally competitive knowledge society.

University Mission

Providing distinguished education and producing competitive scientific research that contribute to the development of the knowledge economy and building effective community partnerships, by strengthening institutional governance that supports creativity and national values.

College of Arts and Sciences Vision

Excellence in teaching, learning, scientific research locally and internationally, and effective community participation

College of Arts and Sciences Mission

Providing high-quality educational outputs, producing distinguished scientific research and building partnerships that serve the community and meet its needs by providing an environment that keeps pace with modern technologies, supporting governance and human resource development.

College of Arts and Sciences Objectives

1. Develop the organizational and physical environment to provide stimulating and supportive learning resources for the development of students' skills.
2. Professional development of human resources to support the educational and research process and to enhance opportunities for continuing education.
3. Providing advanced high-quality academic programs that meet the requirements of development and the needs of the labor market.

4. Develop research production to support innovation and the knowledge economy.
5. Strengthening social responsibility and building effective community partnerships with institutions and bodies

Biological Science Program Mission

- Preparing qualified cadres with knowledge and skills in the field of biological sciences, and supporting research activity to contribute to meeting the requirements of society and the labor market.

Biological Science Program Goals

- ✚ Providing students with basic knowledge and developing their skills in the field of biological sciences and their applications.
- ✚ Providing a supportive educational environment that keeps pace with developments in the field.
- ✚ Enhancing the research and community effectiveness of program employees.

Third

• Objectives of the Quality Management System:

Objectives of the Quality Management System:

- Verifying that each time a process is implemented, the same determinants and controls are used and applied in a consistent manner.
- The program's compliance with the requirements of the National Center for Academic Evaluation and Accreditation (NCAAA), which form the cornerstone of quality management.
- Ensuring the implementation of good practices for NCAAA standards by adopting quality assurance policies and mechanisms for all processes.

Fourth

• Objectives of the Guide:

Objectives of the Guide

- The quality guide is the official document that clarifies the program's policies and directions to ensure the quality of its processes and outputs. The guide includes reference to policies related to the main processes of the program "teaching and learning - scientific research - community partnerships", and includes defining roles and responsibilities in the process of managing the quality system. The purpose of this guide is to:
- Spread awareness and communicate information related to the nature of the quality management system, responsibilities and roles in a clear manner to program members.

- Provide a reference on which the academic program relies in building/implementing/developing its internal quality systems.
- Meet the requirements for program accreditation from the Education and Training Evaluation Commission.

Chapter Two: Organizational Structure of Quality Management

- **At the academic program level:**

The Deanship of Development and Quality at the university assigns an internal reviewer for each program or several programs of the university's programs as a link and is responsible for providing technical support for the program and reviewing documents to ensure their quality.

Quality structure of the academic program:



The Development and Quality Committee is responsible for managing the quality system at the program level. This committee is considered one of the unified committees in all university programs according to the “Program Committees in Colleges” guide issued by the University Agency for Educational Affairs and circulated to colleges on 5/28/1444 AH.

• **Competencies and tasks in managing the quality system at the department/program level:**

• **First: Tasks of the Department Council**

In addition to the tasks specified by the organizational regulations of the Department Council, the Council shall be responsible for performing the following tasks:

- Approving the names proposed by the Department Head for quality officers for the programs affiliated with the department.
- Approving the proposed formation of advisory committees for the programs affiliated with the department.
- Discussing and approving the annual operational plans for the programs affiliated with the department.
- Discussing and approving the submitted evidence/descriptions/reports/improvement plans/or other documents or papers related to quality and accreditation processes.
- Discussing the challenges facing quality officers in the programs affiliated with the department in implementing their tasks and recommending solutions.
- Discussing any new topics related to proposals to create or develop new programs and all proposals for continuous improvement of programs and taking decisions regarding them.

• **Second: Duties of the Head of Department:**

In addition to the duties specified by the organizational regulations for the Head of Department, the Head of Department shall be responsible for performing the following duties in relation to the management of the quality system:

- Annual nomination of the name of the Quality Officer for each program affiliated with the department and submitting it for approval to the Department Council.
- Approval of the names proposed by the Quality Officers for the heads and members of the Quality Subcommittees in the programs affiliated with the department.
- Determining the topics related to quality work that are required to be submitted for presentation and approval by the Department Council.
- Communicating with internal/external benchmarking partners - for the programs affiliated with the department - to exchange annual values for performance indicators.
- Submitting documents and reports of programs that require submission to the College Council for approval.
- Periodic meeting (at least once a month) with the Quality Officers in the programs affiliated with the department to follow up on the progress of the programs in implementing their operational plans and quality work, and overcoming obstacles and challenges facing the programs in implementation.
- Submitting copies of the approved documents/reports for the programs affiliated with the department to the parties responsible for keeping the approved copies.
- Submitting all program files of the department that require review by the College's Development and Quality Unit, the internal auditor from the Deanship of Development and Quality, and following up on the implementation of programs for internal review notes before approving them.
- Submitting self-study files - for programs affiliated with the department - to the independent auditor designated by the University Deanship for Development and Quality.

- General supervision of preparing the department and its affiliated programs to receive external review teams from accreditation bodies.
- Attending meetings of the independent auditor and meetings invited by the external review team for accreditation and following up on the implementation of programs for review recommendations.
- Submitting the independent review report to the department council to discuss the recommendations contained therein to take corrective measures and develop appropriate improvement plans.
- Submitting reports of external review teams for programs affiliated with the department to the department council and discussing the recommendations contained therein to develop appropriate improvement plans.
- Submitting accreditation reports to the department council and discussing the recommendations and conditions contained therein - in the case of conditional accreditation - to develop a plan to address the recommendations/lift the conditions within the period specified in the reports.
- The head of the department may delegate one or some of his duties to any faculty member in the department, pursuant to an official delegation specifying the type of task and the duration of the delegation. All faculty members in the department/programs shall be informed of this delegation.
- **Third: Tasks of the Quality Officer in the Program:**
 - Proposing the names of the heads of the quality sub-committees in the program and their members and submitting them to the head of the department.
 - Providing technical support to the heads of the sub-committees to ensure that they understand the nature of their tasks and the integration of their roles in implementing the initiatives and activities assigned to them in the annual operational plan of the program.

- Proposing the formation of the advisory committee for the program and submitting it to the head of the department for presentation to the department council and approval.
- Following up on the activation of the role of the advisory committees in the planning and continuous improvement processes of the program.
- Attending the periodic meetings of the Development and Quality Unit in the college and the meetings called for by the head of the department.
- Attending and actively participating in the training workshops/related meetings held by the Deanship of Development and Quality/Development and Quality Unit in the college.
- Meeting with the members of the Development and Quality Committee in the program (at least twice a month) to follow up on the implementation of the operational plan and quality and accreditation tasks.
- Proposing the internal/external benchmarking partners for the program.
- Distributing roles among the members of the committees and coordinating between them in preparing and collecting the attachments of the annual quality report in the program.
- Preparing and writing the annual quality report for the program, and ensuring that the quality requirements of its files and attachments are met.
- Ensuring that the internal review notes are met on all documents and papers related to the program.
- Proposing the formation of a self-study preparation team and general supervision of the preparation of the self-study report and its attachments and ensuring that the accreditation requirements are met.
- Uploading documents/documents related to the accreditation requirements and the self-study report and its attachments for internal review and following up on the implementation of all review notes.

- Representing the program as a facilitator and liaison officer with the independent reviewer and during academic accreditation processes.
- Uploading program documents/documents - after amending them in light of the internal review by the Deanship of Development and Quality - to the website of the National Center for Academic Evaluation and Accreditation.
- Following up on the implementation of the program committees of the recommendations of the center's advisor regarding amending or fulfilling the submitted documents.
- General supervision of preparing the program and its members for external review.
- Continuous communication with the internal reviewer of the Deanship of Development and Quality, and coordinating efforts during the program preparation phase for accreditation and during the accreditation phase and after accreditation to ensure continuous improvement of the program.
- The tasks assigned to him by the head of the department related to the development and improvement of the program.
- In the event that there is a male and female quality officer, the role of each of them in performing the previous tasks shall be determined by an official decision from the head of the department, without prejudice to the quality of the performance of the tasks and outputs, and all faculty members in the department shall be notified of the decision.
- **Fourth: Tasks of the Development and Quality Committee:**
 - This committee is responsible for ensuring quality at the program level and controlling the quality of its documents and papers by reviewing them - before submitting them for approval or archiving - and ensuring the completeness and accuracy of all required data and information and the quality of the documentation process. The committee is also considered responsible for reviewing and ensuring the quality of all program operations and outputs and documents requested by the competent authorities

at the university from the program. The committee is headed by the program's quality officer. This committee includes in its formation the heads of the four subcommittees and is headed by the program's quality officer.

- **Fifth: Tasks of the heads of subcommittees:**

- **Tasks of the heads of subcommittees:**

- Distributing activities/tasks to committee members and following up on their implementation and documentation.
- Providing technical support and providing appropriate training opportunities for committee members to ensure their familiarity with the nature of the activities and tasks they are required to implement.
- Meeting and communicating with committee members to discuss and follow up on the implementation of the tasks assigned to them and overcome implementation obstacles.
- Preparing reports on the implementation of the activities assigned to the committee in the annual plan and submitting them to the program's quality officer for review before submitting them to the department council.
- Submitting the committee's outputs - which require review or presentation to higher organizational levels - to the program's quality officer.
- Making the required amendments to the committee's files in light of the review notes and feedback.
- Preparing and storing continuous improvement files and closing the quality circle for inputs and processes that fall within the scope of the committee's tasks.
- Attending meetings called for by the quality officer or department head and preparing reports required for discussion.
- Attending relevant training workshops held by the College's Development and Quality Unit or the Skills Development Unit at the Deanship of Development and Quality.

- Preparing and keeping records of the implementation of all committee activities and meetings in paper and electronic form and archiving them for easy access to data and information related to the committee's tasks.
- Implementing the tasks assigned by the quality officer/official related to the committee's work.
- **Sixth: Tasks of the subcommittees:**

These committees carry out their tasks in coordination with the unified committees in all university programs in accordance with the guide for program committees in colleges issued by the University Agency for Educational Affairs and circulated to colleges on 5/28/1444 AH "taking into account any amendments that may occur to it and approved by the University Agency for Educational Affairs".

1. Subcommittee for Planning and Follow-up:

- Carrying out planning activities at the program level, including developing a proposal to update the message and objectives with the participation of the beneficiary sectors and ensuring their consistency with the message and objectives of the college/university, and preparing a draft of the annual operational plan for the program and its attachments in light of the program's annual reports, the self-study report and the external review report - if any - and ensuring their consistency with the college/university's executive plan.
- Implementing the initiatives and activities assigned to the committee in the program's annual operational plan.
- Following up on the committees' implementation of the activities assigned to each committee in the program's annual operational plan according to the approved timetable.
- Preparing quarterly and annual reports to complete the annual operational plan of the program and submitting them to the quality officer through the committee chairman.

- Preparing all documents related to planning and following up on implementation and submitting them to the quality officer through the committee chairman.
- Implementing all internal review notes on the documents of the first standard "Program Management and Quality Assurance" before submitting them to obtain approvals from the official councils.
- Preserving and archiving the committee's documents and records after obtaining approvals from the official councils.
- Implementing any reviews or developments directed by the college's Development and Quality Unit related to the nature of the committee's work.
- Any tasks assigned to the committee by the department head or the quality officer related to the nature of its work.

2. Subcommittee on Education and Learning:

- Implementing the committee's role in terms of activities and initiatives included in the program's annual operational plan, and what is related to the tasks of continuous improvement of the educational process/ student assessment and testing processes/ student support and guidance/ student activities/ learning resources/ devices and equipment.
- Following up and ensuring the preparation of the program description and its courses/ and periodic reports on courses and the program's annual reports within the specified time frame.
- Implementing any directives/ updates/ reviews received from the College's Development and Quality Unit related to documents submitted for review or to developing or improving the educational process/ resources/ student activities/ student support processes.
- Preparing all documents/ papers related to the educational process and supporting processes "admission and registration/ student support and guidance/ learning resources and extracurricular activities" and submitting them to the quality officer through the committee chairman.

- Implementing all internal review notes - on documents/documents of the second standard "Teaching and Learning", and the third "Students" in addition to the sixth standard "Scientific Research and Projects" in the event that the program is offered at the postgraduate level - before submitting them to obtain accreditation from the official councils.
- Preserving and archiving the committee's documents and records after obtaining accreditation from the official councils.
- Preparing review reports on the relevant documents submitted to it by the department head or the program's quality officer.
- Implementing any new developments related to the nature of the committee's work that are directed by the college's vice dean for educational affairs.
- Any tasks assigned to the committee by the department head or the quality officer related to the nature of its work.

3. Performance Measurement Committee Tasks:

- Implementing the committee's role in terms of activities and initiatives included in the program's annual operational plan.
- Preparing indicator description cards and a matrix of performance indicators for the program's objectives, operational plan and annual targets.
- Designing/updating data collection tools for the program's performance indicators and operational plan, and the annual monitoring plan for the values of the main indicators and submitting them through the committee chairman to the quality officer.
- Annual monitoring of the values of the program's performance indicators and operational plan, and preparing the annual report to monitor the program's main performance indicators and their benchmarks (internal/external) and submitting them through the committee chairman to the quality officer.
- Preparing all documents/documents related to the fourth standard "Faculty", and the fifth "Learning Resources, Facilities and Equipment", and submitting them to the quality officer - through the committee chairman - to submit them for internal periodic review and implementing all internal review notes on the documents/documents.

- Saving and archiving the committee's documents and records after obtaining the approvals from the official councils.
- Implementing any reviews or developments directed by the university's Performance Measurement Unit or the College's Development and Quality Unit related to the nature of the committee's work.
- Any tasks assigned to the committee by the department head or quality officer related to the nature of its work.

4. Academic Accreditation Committee Tasks:

- Implementing the committee's role in terms of activities and initiatives included in the program's annual operational plan.
- Providing the documents and evidence requested by the College's Development and Quality Unit from the program during the institutional/programmatic accreditation phase.
- Preparing and equipping the program and raising the awareness of its members during the institutional and programmatic accreditation phase in light of the directives of the College's Development and Quality Unit.
- Completing and updating documents related to accreditation requirements and standards and collecting relevant evidence from all quality subcommittees in the program and storing them in the standards files "on paper and electronically".
- Following up on updating program documents according to the latest versions of the National Center for Academic Evaluation and Accreditation.
- Preparing self-study files and their attachments, and ensuring that the evidence and accreditation requirements are met before submitting them for review by the College's Development and Quality Unit and the Academic Accreditation Unit in the Deanship of Development and Quality.
- Implementing the reviews or developments directed by the College's Development and Quality Unit and the Academic Accreditation Unit in the Deanship of Development and Quality related to the nature of the committee's work.
- Tasks assigned to the committee by the head of department or the quality officer/officer related to the nature of its work.

• Responsibility matrix for preparing/reviewing/approving the most important program documents:

Document title	Responsible for preparation	The entity/entities responsible for internal auditing	The body/bodies responsible for accreditation The body/bodies responsible for accreditation	The entity/entities responsible for keeping the certified copies
First: Plans, policies and procedures				
Program Mission and Goals	Subcommittee for Planning and Follow-up	First level of review: Planning and Follow-up Committee of the College's Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department Development and Quality Unit at the College Strategic Planning Unit at the Deanship of Development and Quality
Program Policies and Procedures				
Annual operational plan of the program				
Periodic follow-up plan (following up on the committees' implementation of their activities according to the operational plan and evaluating their outputs).				
Program performance indicators and operational plan indicators/targets/benchmarks/and annual monitoring plan.	Program Performance Measurement Subcommittee	First level of review: Planning and Follow-up Committee of the College's Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department "Program File" Development and Quality Unit at the College Quality Assurance Unit at the Deanship of Development and Quality Performance Measurement Unit at the University

		Level 3 of review: University Performance Measurement Unit.		
Create a study plan. Make a major change to the curriculum and study plan.	Program Plans and Curricula Committee	First level of review: Education and Learning Committee of the College's Development and Quality Unit. Second level of review: Education and Learning Unit of the Deanship of Development and Quality. Third level of review: Academic Plans and System Committee of the University Agency for Educational Affairs.	First level of accreditation: Department Council. Second level of accreditation: College Council. Third level of accreditation: University Agency for Educational Affairs. Fourth level of accreditation: University Council.	Academic Program/Scientific Department "Program File" Teaching and Learning Unit at the Deanship of Development and Quality Dean of the College for Educational Affairs University Agency for Educational Affairs
Making a non-substantial change to the curriculum and study plan	Program Plans and Curricula Committee	Education and Learning Committee of the College's Development and Quality Unit.	Level 1 Accreditation: Department Council Level 2 Accreditation: College Council.	Academic Program/Scientific Department "Program File"
Program description (attached to it is a detailed plan for measuring learning outcomes).	Program Teaching and Learning Subcommittee	First level of review: Education and Learning Committee of the College's Development and Quality Unit. Second level of review: Education and Learning Unit of the Deanship of Development and Quality. (Program description and a representative sample of	Level 1 Accreditation: Department Council Level 2 Accreditation: College Council.	Academic Program/Scientific Department "Program File" Deputy Dean for Educational Affairs University Agency for Educational Affairs

		course descriptions and field experience (description).		
	Course description.	Course Coordinators		
Secondly, the identification evidence				
Program Organizational Guide	Subcommittee for Planning and Follow-up	First level of review: Planning and Follow-up Committee of the Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council.	Academic Program/Scientific Department Development and Quality Unit at the College Deputy Dean for Educational Affairs
Student Guide	Program Teaching and Learning Subcommittee	First level of review: Education and Learning Committee of the Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality.	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department Development and Quality Unit at the College Deputy Dean for Educational Affairs
Quality Guide for Academic Programs	Program-level Quality Assurance Committee	First level of review: Quality Assurance Committee of the College's Development and Quality Unit. Second level of review: Quality Assurance Unit of the Deanship of Development and Quality.	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department Development and Quality Unit at the College Quality Assurance Unit at the Deanship of Development and Quality
Third: Reports				

Periodic/annual reports on the implementation of the program operational plan initiatives and activities	Subcommittee for Planning and Follow-up	First level of review: Planning and Follow-up Committee of the College's Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Program/Department Development and Quality Unit at the College Strategic Planning Unit at the Deanship of Development and Quality
Annual report of the results of stakeholder surveys (students, alumni, employers, faculty, employees).	Performance Measurement Subcommittee	First level of review: Performance Measurement Committee of the College's Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality.	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department Development and Quality Unit at the College Quality Assurance Unit at the Deanship of Development and Quality Performance Measurement Unit at the University
Annual monitoring report on program performance indicators.				
Annual Program Report (attached to it is the annual report on measuring the program's learning outcomes)	Subcommittee on Teaching and Learning	First level of review: Education and Learning Committee of the Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality.	Level 1 Accreditation: Department Council Level 2 Accreditation: College Council.	Academic Program/Scientific Department Development and Quality Unit at the College Deputy Dean for Educational Affairs University Agency for Educational Affairs
Comprehensive periodic report of the program "with each graduation session"	Academic Accreditation Subcommittee of the Program	First level of review: Academic Accreditation Committee of the College's Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality.	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department Development and Quality Unit at the College
Accreditation Requirements/Self-Study Report and Attachments	A work team that includes all program members, the			

	administrative and technical team.	review: Internal auditor from the Deanship of Development and Quality.		Academic Accreditation Unit at the Deanship of Development and Quality.
Annual Quality Report of the Program	Program Development and Quality Committee	First level of review: Quality Assurance Committee of the College's Development and Quality Unit. Second level of review: Internal auditor from the Deanship of Development and Quality.	Level 1 Accreditation: Department Council. Level 2 Accreditation: College Council	Academic Program/Scientific Department Development and Quality Unit at the College Academic Accreditation Unit at the Deanship of Development and Quality.

Chapter Three: Quality Management System:

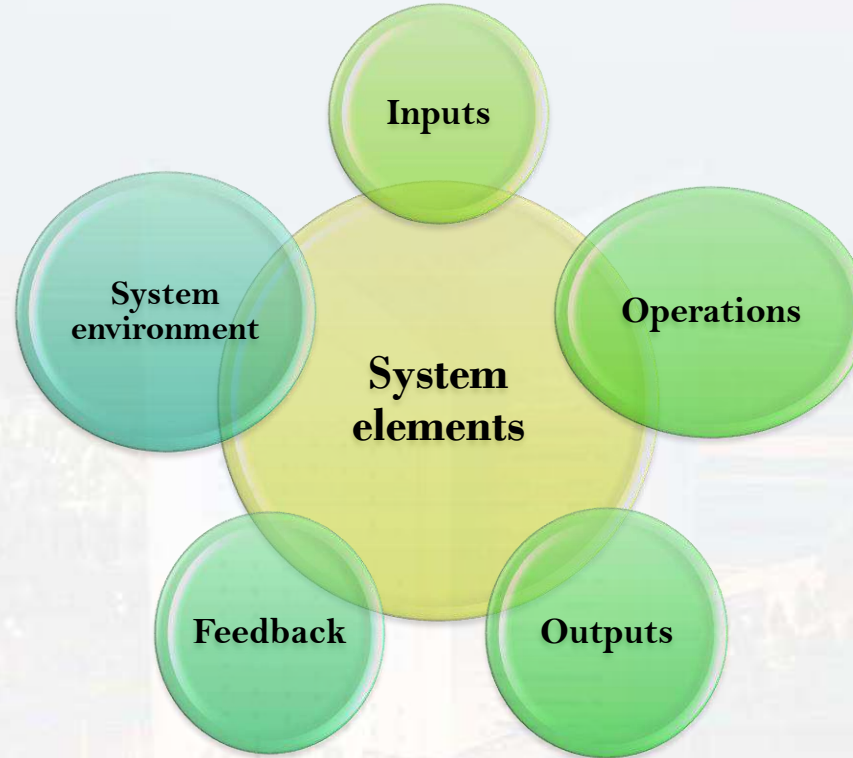
First

• The Quality Management System and its Elements:

The quality management system in this guide means the system and framework adopted by the program according to the official system adopted by the university to document its policies and procedures, and manage its operations to ensure the quality of its outputs and achieve its goals and mission, as the application of the system is reflected in improving various aspects of performance as shown in the figure:



Elements of quality management system:



+ Inputs:

This refers to all the material and human resources, the governing systems and regulations that form the cornerstone of the planning stage and through their management, specific results and outputs can be obtained. Inputs, processes and outputs interact in the quality cycle, as the outputs of the planning stage are considered inputs to the implementation stage, and the outputs of each process are affected by the quality of the inputs and outputs of both the planning and implementation stages.

+ Processes:

This refers to the set of activities and procedures that are implemented in light of the input management plan with the aim of obtaining specific outputs. The processes are divided into two groups:

- Basic processes, including education and learning, scientific research, and community partnership.
- Supporting processes, including administrative and financial processes, support and support services.

Under each of the basic/supporting processes, there are a number of sub-processes and sub-sub-processes, each of which has its own inputs and executive procedures through which the targeted outputs of the process can be achieved.

+ Outputs:

This refers to the targeted result resulting from carrying out a set of planned activities and procedures, and the quality of the outputs is considered an indicator of the quality of both the inputs and processes.

+ Feedback:

It means taking advantage of the results of the evaluations to improve the quality of inputs and processes to ensure continuous improvement of the quality of outputs. Evaluations are conducted using appropriate performance indicators that help identify strengths and areas that require further improvement.

Feedback can be obtained through the interim evaluation process "during implementation" or after the final evaluation process and obtaining the process outputs. Feedback maintains the sustainability of the system, ensures continuous improvement, and closes the quality circle.

System environment:

It means all internal and external variables that affect the quality management system and is divided into:

The internal environment, which includes:

- Leadership support.
- Organizational structure.
- Internal systems and policies.
- Beneficiary participation.
- Organizational culture.
- Human and material resources.
- Supporting systems such as the data and information management system, and the documentation system.

The external environment, which includes:

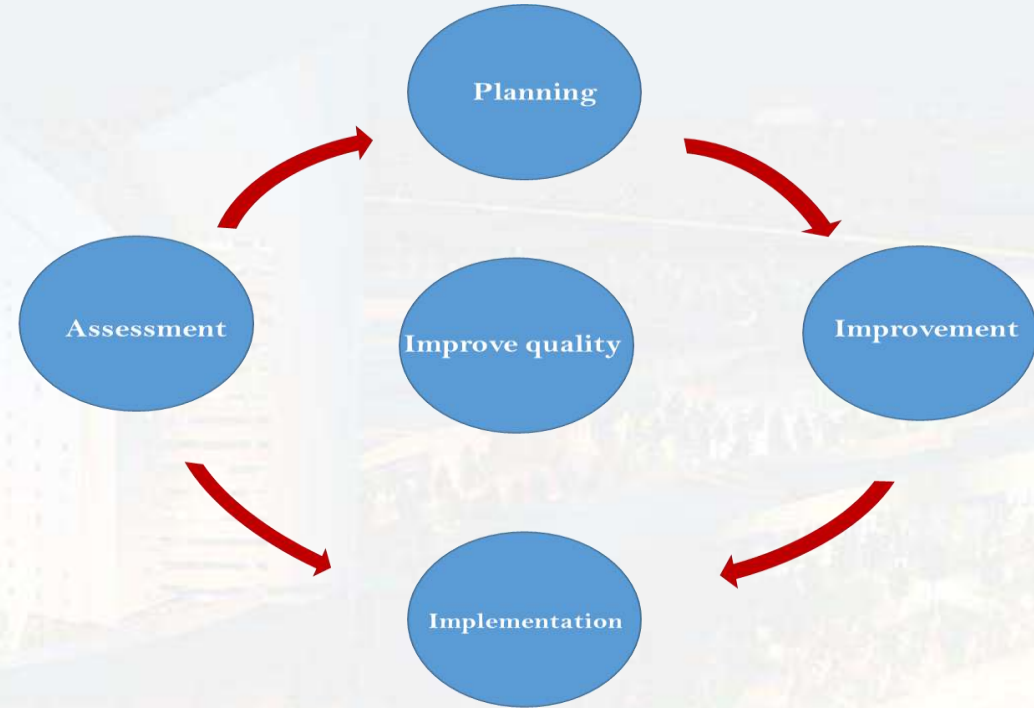
- National trends in higher education.
- Developments in labor market requirements.
- Requirements of local and international accreditation bodies.

- Standards of professional bodies.
- Standards of local and international classification bodies.

Second

• Continuous development/improvement methodology "Closing the quality circle":

The university adopts the Deming PDCA model for continuous improvement/development through successive cycles of four interconnected processes: planning-implementation-evaluation-improvement, where the outputs of each of these processes are considered inputs to the next process.





The duration of a single improvement cycle varies, and in general, two types of improvement cycles can be distinguished:

1. The minor improvement cycle "continuous improvement":

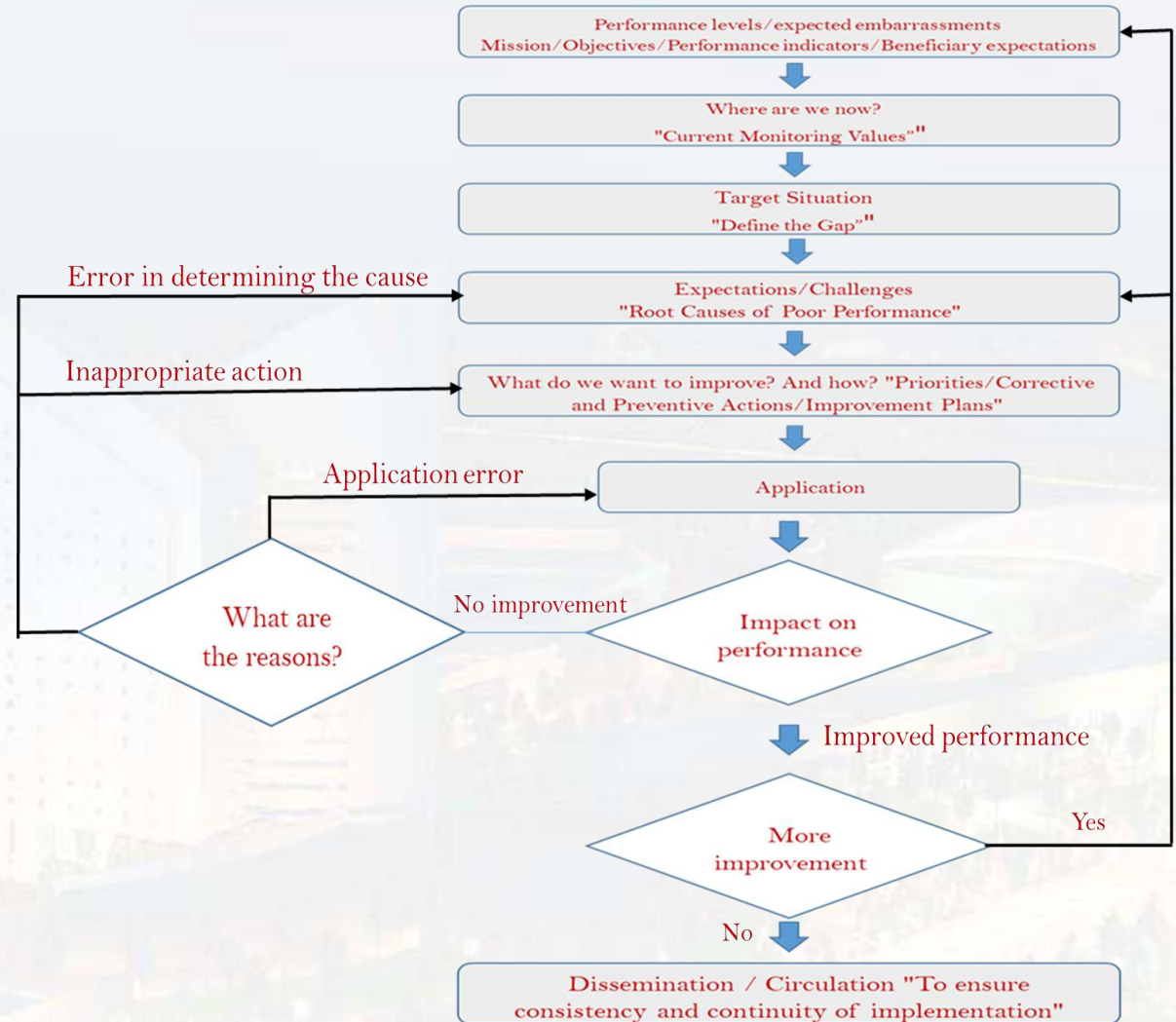
The duration of this cycle does not exceed one academic year and may be less than that (for example, the course improvement cycle lasts one semester), and the improvements may be in the form of quick corrective actions in light of the evaluation results, or improvement is planned for the next cycle - if the improvement requires going through several procedures and requires a longer period of time. This short cycle is characterized by flexibility and the speed of discovering weaknesses and challenges and dealing with them quickly before their impact worsens in the long term, while on the other hand, it is not expected during this cycle to make fundamental institutional or programmatic modifications or changes.

2. Major improvement cycle "development":

The duration of this cycle is linked to the institutional accreditation renewal cycle, and some fundamental amendments may coincide with the strategic planning cycle every 5 years. The development cycle for programs is also every 5 years "accreditation renewal cycle", in which the program conducts a comprehensive evaluation of all its aspects using the self-evaluation scales form of the Education and Training Evaluation Commission. The results of this evaluation may result in a plan to make fundamental amendments to the program's curriculum and/or mission/objectives/structure/policies/regulations/systems...etc. The external review process during institutional/program accreditation also includes monitoring some aspects of weakness that are included in the form of recommendations or conditions in accreditation reports and also require some fundamental amendments. In general, the results of the comprehensive evaluation reflect the extent of the university's/programs' success in addressing the weaknesses and challenges that were monitored in the minor improvement cycles.

Closing the Quality Circle

Closing the quality circle means going through the four processes of the Deming Quality Circle "Planning - Implementation - Evaluation - Improvement" and then benefiting from the feedback at the end of each cycle to start a new cycle of planning to improve/develop performance. All organizational and academic units at the university are committed to providing supporting evidence on the implementation of the activities of each of the four processes, as well as supporting evidence on taking corrective/improvement measures in light of the results and feedback, and following up and studying the impact of these measures on the level of performance at the end of the improvement cycle, and also providing evidence on adopting the improvement/corrective measures that have proven effective and applying them during the following

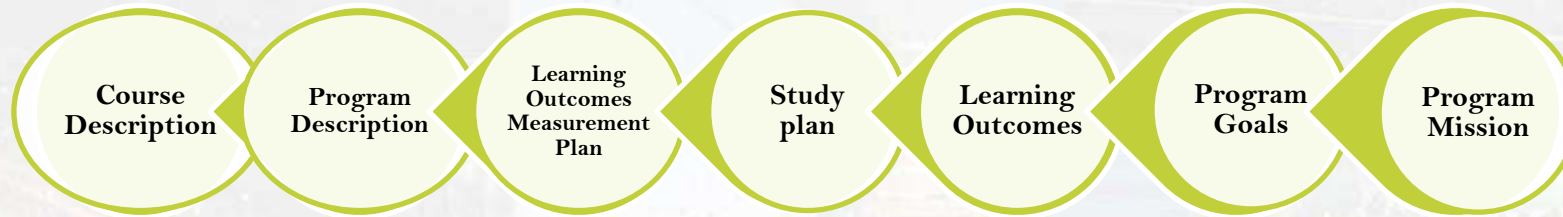


cycles and following up on their impact and studying opportunities for improvement.

Third

• **Quality and continuous improvement processes and procedures at the program level:**

Stages of the program planning process



In all its operations, the program adheres to the policies approved by the University Agency for Educational Affairs and its executive procedures, and the mechanisms and models approved by the Education and Learning Unit of the Deanship of Development and Quality.

Quality determinants of the program's Mission and objectives:

- Consistency with the message and objectives of the department/college/university.
- Involvement of the relevant sectors of beneficiaries in its preparation.
- The mission text guides all the program's operations and activities.

- The wording of the objectives is clear and stems from the mission text.
- Completion of the stages of internal review and approval by official councils.
- Dissemination through various means to various sectors of beneficiaries.
- Periodic review and updating in light of the approved policy for periodic review of the mission text and in a manner consistent with amendments to the university's mission and its strategic directions/related variables at the local and international levels, the results of comprehensive annual and periodic evaluations, and the results of external reviews by accreditation bodies.

Quality determinants of program learning outcomes:

- Consistency with the specialized academic standards approved by the Education and Training Evaluation Commission.
- Consistency with the approved mission of the program.
- Alignment with the characteristics of university graduates.
- Compliance with the requirements of the National Qualifications Framework.
- Compliance with specialized standards and labor market requirements.
- The presence of learning outcomes specific to each track separately (in the event that the program has tracks).
- Involving the relevant sectors of beneficiaries and experts in their preparation.
- Completing the stages of internal review and accreditation by official councils.
- Publishing them through various means to various sectors of beneficiaries.
- Periodic updating to keep pace with developments in the field/ program accreditation standards from the Education and Training Evaluation Commission/ trends and requirements of the labor market/ the university's mission and strategic directions/ relevant variables at the local and international levels, as well as the results of comprehensive annual and periodic evaluations.

To ensure that the program's message is consistent with its objectives and learning outcomes and linked to appropriate performance indicators, all academic programs must prepare a program planning matrix in accordance with the guiding model of the Deanship of Development and Quality, approve it by the official councils, and adhere to it in building the program's annual operational plans.

Determinants of the quality of the program's study plan:

- It includes courses that cover and achieve the approved goals of the program and all learning outcomes.
- It keeps pace with scientific, technical, and professional developments in the field of specialization.
- It achieves a balance between general requirements and specialization requirements.
- It achieves a balance between theoretical and applied aspects.
- It achieves sequence and integration between the courses to achieve the targeted learning outcomes of the program.
- It specifies the requirements of exit points "if any".
- It meets all the requirements and models approved by the university's policy for creating, amending, and developing study plans, programs, and their executive procedures.
- It meets the levels of internal review and accreditation by the official councils.
- It is published through various means to various sectors of beneficiaries.
- Reviewing the plan periodically and updating/developing it in light of amendments to the program's mission/objectives/learning outcomes and other developments related to labor market trends, changes in accreditation requirements/standards, in addition to relevant national or international trends.

Quality determinants of the program learning outcomes measurement plan:

- Adherence to the controls and models approved by the Teaching and Learning Unit.

- Clarity and accuracy of the link between course learning outcomes and program learning outcomes.
- Comprehensiveness that ensures the measurement of all learning outcomes at the course and program levels and ensures the measurement of all program learning outcomes at least twice during the program cycle.
- Appropriateness of measurement tools to the field of learning and the nature of the outcome, and their diversity between direct and indirect measurement.
- Focus on advanced level courses "crown" when measuring program learning outcomes.
- Use appropriate indicators to evaluate students' achievement of learning outcomes at the course and program levels.
- Accuracy and appropriateness of the time frame for measuring outcomes at the course and program levels.
- Defining the roles and responsibilities of the various parties in implementing the learning outcomes measurement plan at the course and program levels.
- Sequence and integration of the stages of the measurement cycle to ensure the accuracy of the measurement results and their use in the continuous improvement of the courses and program.
- Meeting the levels of internal review and implementing the review notes and recommendations.
- Meeting the levels of plan approval.
- Review the measurement plan periodically and update/develop it in light of changes to the program learning outcomes/related courses/measurement methods/measurement timeline.
- Announce and make it available to beneficiaries.

• Program-learning outcomes:

Learning outcomes are the basis from which all procedures for designing academic programs and courses begin. They are also the basis for evaluation, the focus of all quality and academic accreditation processes, and the main document for education reform movements.

PLO	Program Learning Outcomes	
	1	Knowledge and understanding
K1	1.1	Define the main concepts in biology, the scientific basis of biological processes in living organisms and the fundamentals of animal and plant structure from a taxonomic perspective.
K2	1.2	Explain the biological science concepts by using the knowledge and skills of other basic sciences.
K3	1.3	Recognize biological phenomena, factors and variables that affect them using biological theories, principles and concepts.
	2	Skills
S1	2.1	Determine and apply the anatomical and physiological characteristics of living organisms according to their classification, life cycles and development.
S2	2.2	Employ scientific approaches to solve biological issues, make comparisons, explain biological phenomena, and evaluate ecosystems.
S3	2.3	Perform various biological experiments and microscopic tasks using appropriate laboratory tools and instruments in accordance with safety and security regulations.
S4	2.4	Use various standard and specialized digital technological tools and applications to process and analyze data and information and in the presentation and discussion of information and scientific reports.
	3	Values, autonomy & responsibility
V1	3.1	Show commitment to academic principles and ethical standards in performing his tasks.

V2	3.2	Demonstrate the ability to work independently and cooperatively, interact constructively with others, and take responsibility in decision-making.
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• Teaching and learning strategies:

Quality assurance processes require careful identification of teaching, learning and assessment strategies and linking them to learning outcomes. Teaching and learning strategies and methods, and evaluation strategies and methods, are among the most important factors influencing the success of the program and achieving its quality. The National Authority for Evaluation and Accreditation defines teaching strategies as the strategies used by a faculty member to develop a student's education. It can be defined as a set of general rules and broad outlines that are concerned with the means of achieving the desired goals of teaching. Accordingly, education or teaching strategies can be defined as a set of general rules and broad outlines that are concerned with the means of achieving the desired goals of teaching, and they refer to the methods and plans followed to reach the learning goals.

• Teaching and learning strategies applied to achieve program-learning outcomes (ILOs):

Program Learning Outcomes	Teaching and learning strategies
K1	Lectures, classroom activities, dialogue and discussion, presentations.
K2	Lectures, classroom activities, dialogue and discussion, presentations.
K3	Lectures, classroom activities, dialogue and discussion, presentations.
S1	Collaborative learning, problem-solving strategy, and group discussions
S2	Problem Solving Strategy, Peer Education, Group Discussion
S3	Collaborative learning, problem solving strategy, peer education, group discussion, practical training.
S4	Training and practice, cooperative learning, problem solving strategy, peer education, group discussion, self-learning, and brainstorming.
V1	Workshops, Collaborative Learning, teamwork, and group discussion.
V2	Group discussion, cooperative learning, self-learning, practical training

• Assessment Methods for program learning outcomes:

Program Learning Outcomes	Assessment Methods
K1	<p>Direct measurement:</p> <p>1- Average student achievement score in questions related to the outcome in final written exams in the courses related to the outcome</p> <p>2- Average student achievement score in questions related to the outcome in the Exit exam.</p> <p>Indirect measurement</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
K2	<p>Direct measurement:</p> <p>1- Average student achievement score in questions related to the outcome in final written exams in the courses related to the outcome</p> <p>2- Average student achievement score in questions related to the outcome in the Exit exam.</p> <p>Indirect measurement:</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
K3	<p>Direct measurement:</p> <p>1- Average student achievement score in questions related to the outcome in final written exams in the courses related to the outcome</p> <p>2- Average student achievement score in questions related to the outcome in the Exit exam.</p>

	<p>Indirect measurement The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
S1	<p>Direct measurement: 1- Average student achievement score in questions related to the outcome in final written exams in the courses related to the outcome 2- Average student achievement score in questions related to the outcome in the Exit exam.</p> <p>Indirect measurement The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>

Program Learning Outcomes	Assessment Methods
S2	<p>Direct measurement:</p> <p>1- Average student achievement score in questions related to the outcome in final written exams in the courses related to the outcome</p> <p>2- Average student achievement score in questions related to the outcome in the Exit exam.</p> <p>3- average students score of evaluation during the presentation and discussion of the graduation project</p> <p>Indirect measurement</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
S3	<p>Direct measurement:</p> <p>1- Average student achievement score in questions related to the outcome in final practical exams in the courses related to the outcome</p> <p>2- Average student achievement score in questions related to the outcome in the Exit exam.</p> <p>3- average students score of evaluation during the presentation and discussion of the graduation project</p> <p>Indirect measurement</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
S4	<p>Direct measurement:</p>

	<p>1- Average student achievement score in questions related to the outcome in final practical exams in the courses related to the outcome</p> <p>2- Average student achievement score in questions related to the outcome in the Exit exam.</p> <p>3- average student's achievement score in evaluation of the graduation project</p> <p>Indirect measurement</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
V1	<p>Direct measurement:</p> <p>1- Average student's achievement score in evaluation of the graduation project</p> <p>2- Average students score of evaluation during the presentation and discussion of the graduation project</p> <p>Indirect measurement</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>
V2	<p>Direct measurement:</p> <p>1- Average student's achievement score in evaluation of the graduation project</p> <p>2- Average students score of evaluation during the presentation and discussion of the graduation project</p> <p>Indirect measurement</p> <p>The average rating of students for the statement related to the outcome in the student evaluation form for their achievement of learning outcomes.</p>

• **Quality determinants of program description:**

- Adherence to the models approved by the Education and Training Evaluation Commission according to its latest versions.
- Completing all paragraphs and items of the description with accurate and correct information.
- Matching the information contained in the description regarding the program plan with the approved study plan for the program.
- Consistency between the learning outcomes matrix/methods for evaluating the program learning outcomes contained in the description with the approved detailed plan for measuring the program learning outcomes.
- Teaching and learning strategies and activities "classroom/extracurricular" are appropriate for the associated learning outcome and the nature of the field.
- Consistency of everything contained in the program description regarding admission and student support with the policies and regulations approved by the university/program.
- Consistency of the program quality assurance procedures with what is stated in the quality manual and related policies and procedures.
- The areas of evaluating the program's quality include all elements of its approved mission and various methods are used for measurement.
- **Regarding the program's performance indicators and the measurement plan, the following should be taken into account:**
 - The plan should include the main performance indicators for academic programs according to the latest versions of the Education and Training Evaluation Commission and a number of additional performance indicators approved for the program to measure its objectives.

- The suitability of the additional performance indicators for the objectives to be measured in terms of type, number, and measurability.
- The appropriate identification of the annual target values, based on previous monitoring and benchmarking.
- The suitability of the external benchmarking partner in terms of similarity in the nature of the program, its accreditation, and consistency in measurement methods and tools.
- Preparing a description card for each performance indicator that includes all information about the indicator.
- Attaching the approved and proven tools and forms for measuring performance indicators.
- Coordination with the university's performance measurement unit and adherence to the criteria for selecting indicators, selecting internal/external review partners, and the target values for indicators.
- Meeting the internal review levels for description and accreditation from official councils.
- Making the approved description available to the beneficiary sectors.
- Reviewing the description periodically and updating/developing it in accordance with the university's policy for approving, amending and developing academic plans and program, which specifies the time of review (annual/comprehensive) and the nature of the resulting amendments (essential/non-essential), responsibilities and levels of review and accreditation.

• **Determinants of the quality of course descriptions:**

- Course description in light of the approved program description.
- Commitment to the models approved by the Education and Training Evaluation Commission according to its latest versions.
- Fulfillment of all paragraphs and items of the description.

- Fulfillment of the levels of internal review and accreditation from official councils.
- Publishing the approved descriptions and making them available to the beneficiary sectors.
- Reviewing the description periodically and updating/developing it in accordance with the university's policy for approving, amending and developing academic plans and programs that determine the type and timing of the review, the nature of the resulting amendments (essential/non-essential), and the responsibilities and levels of review and accreditation from official councils.

• Program operational planning:

All academic programs at the university are committed to annually preparing an operational plan that is consistent with the annual executive plan of the university and college and achieves the program's objectives, and addresses the weaknesses in performance that were monitored in previous reports. The annual operational plan for the program is considered the guide for all its operations and activities during the academic year.

Determinants of the quality of the annual operational plan of the program:

- Link to the mission and objectives of the program.
- Consistency with the annual executive plan of the department/college/university.
- Involving all members of the program and benefiting from the opinions of advisory bodies in preparing the plan.
- Consistency of the plan's initiatives and activities with the program's objectives.

- The plan includes activities to implement initiatives related to the college's annual executive plan and its consistency with the university's annual executive plan.
- Developing the plan in light of previous plan completion reports and the recommendations and suggestions for improvement included in the program evaluation reports.
- Determining the support required to implement the plan's activities.
- Linking the plan's objectives to appropriate performance indicators and determining the annual target values for the indicators.
- Adherence to the university's approved models for designing operational plans.
- Meeting the internal review levels and implementing the review's observations and recommendations.
- Meeting the plan's approval levels.
- Announcing and making it available to beneficiaries.

The operational plan should include improvement initiatives and activities covering the following areas:

- The educational process.
- The research process.
- Community services.
- Supporting operations (student support and guidance - preparation and training - employment - learning resources, facilities and equipment).
- Follow-up and evaluation (follow-up on the committees' implementation of their activities, and evaluate their outputs).

Quality determinants of the program's organizational guide:

- Consistency with the organizational frameworks of the university/college.
- Commitment to the directives issued by the university's agency for educational affairs regarding the names and tasks of committees.
- Clarity of the program's organizational structure and its inclusion of all committees related to the implementation of program activities.
- The guide includes a clear definition of the competencies, roles, and responsibilities of committees, councils, and academic and administrative leadership, ensuring that there is no conflict of competencies or overlap in tasks.
- Including all updates and amendments approved for the contents of the guide.
- Meeting the levels of internal review and implementing the review's observations and recommendations.
- Meeting the levels of accreditation of the guide.
- Announcing and making it available to beneficiaries.

Quality determinants of the program's identification guide:

- The guide includes a definition of the program and its establishment/ mission/ objectives/ values matrix/ list of key performance indicators for the program/ learning outcomes/ the role of beneficiary sectors in the processes of managing and ensuring the quality of the program and its continuous improvement.
- Include the organizational structure of the department/program that clarifies the levels and lines of authority and includes all program committees.
- Include the guide with a definition of the study environment in the program (program admission requirements, program delivery locations, facilities and equipment, learning resources, human resources, support and services provided by the program, student activities, etc.).

- Include the study plan and a brief description of the program according to the latest amendments approved in the guide.
- Include the guide with contact information for program officials.
- Meet the internal review levels and implement the review notes and recommendations.
- Meet the guide's accreditation levels.
- Announce and make it available to beneficiaries.

Student Guide Quality Determinants:

- The guide includes the program's mission/objectives/value matrix/list of key performance indicators/program learning outcomes/jobs for which program graduates are prepared/the student's role in the program's quality management and assurance processes and its continuous improvement.
- The guide includes a definition of the program's study environment (program delivery sites, facilities and equipment, learning resources, human resources, academic guidance, support and services provided by the program to students and graduates, student activities, etc.).
- The guide includes the most important policies and regulations that concern the student and their electronic links (admission and registration policies, study and examination regulations, disciplinary regulations, complaints and grievances, rights and duties, etc.).
- Including the study plan and a brief description of the program according to the latest amendments approved in the guide.
- Meeting the internal review levels and implementing the review's observations and recommendations.
- Meeting the guide's accreditation levels.
- Announcing and making it available to beneficiaries.

• Implementation Process:

Implementation Quality Determinants:

- All members of the academic program are committed to implementing the approved plans for the programs and the approved policies/systems/regulations without making any amendments to them.
- In the event of new developments that require taking exceptional measures or amending the implementation of the approved plans for the program, members or heads of the executive committees in the program may submit the proposed amendment and its justifications to the program management. They may not begin implementing the proposed amendment before obtaining the approval of the competent authority at the department or college level (according to the level of the required amendment and as determined by the competencies in the approved organizational guide for the program/department/college). All members of the program are notified of the approved amendment and documented in the program records.
- All members of the program and the program's executive committees are responsible for preparing files and records that include documentation of the implementation of the tasks and activities assigned to them - each according to his role - in paper and electronic form.
- All evidence and records related to the implementation of the program's operational plan initiatives and activities are attached to the quarterly follow-up reports and annual achievement reports.

Course files should be updated annually and ensure that all required documents are included in the course file, which are:

- CV of the faculty member/members assigned to teach the course.
- Approved course description "Education and Training Evaluation Commission Form".
- Brief course description "Approved".
- Teaching materials and learning resources used during the year to teach the course.
- Models of classroom activities applied during the year to achieve the course learning outcomes according to the field.

- Models of extracurricular activities applied during the year to achieve the learning outcomes according to the field.
- Methods applied during the year to evaluate student performance according to the field "Attach tests - short questions Quiz - projects - presentations."
- Models of evaluated student work attached to the performance evaluation scale Rubrics "In the case of essay questions, projects or presentations".
- Written midterm/final exam paper with answer sheet.
- Approved quarterly report to measure students' achievement of course learning outcomes.
- Approved quarterly report to evaluate students for the course.
- Approved quarterly reports for the course "Education and Training Evaluation Commission Form".
- Record of updates made to the course description and their justifications.

In case the course is offered in different locations or for both parts, the contents of the file should reflect each location/part separately in addition to the overall results at the course level. The faculty member responsible for the course/course coordinator can add what he/she deems appropriate to the course file, provided that this does not come at the expense of any of the previously specified files.

The program file should also be updated annually and the required files should be completed, which are:

- The approved program description.
- The approved plan for measuring the program learning outcomes.
- The annual program report "approved"
- The approved annual reports for measuring the program learning outcomes.
- The approved annual reports for the annual monitoring of the program performance indicators.
- The opinion poll reports conducted during the year "approved".

- The program accreditation file including the self-study report - the independent opinion if any - the accreditation report, the improvement plan/addressing the accreditation conditions, and progress reports in addressing the recommendations and conditions of accreditation.
- A record of the updates made to the program description and their justifications.
- If the program is offered in different locations or for both sections, the contents of the file should reflect each location/section separately in addition to the overall results at the program level as a whole. Whatever the department head/program coordinator deems appropriate may be added to the file, provided that this does not come at the expense of any of the previously specified files.

• **Evaluation Process:**



The academic program undergoes an annual evaluation process, in addition to a comprehensive evaluation process every five years (the program accreditation renewal cycle from the Education and Training Evaluation Commission).

The annual "periodic" evaluation process produces two types of reports:

- Follow-up reports: are conducted during the improvement cycle and aim to ensure progress towards achieving the target and to monitor implementation challenges - if any - and address them.
- Achievement reports: are conducted at the end of the annual improvement cycle - except for course reports that are prepared quarterly - and through them the achievement of annual targets and the extent of progress towards achieving the targets at the end of the comprehensive evaluation cycle are evaluated. These reports include a detailed analysis of the results in light of benchmark comparisons, identifying weaknesses and improvement proposals for the next cycle.

Quality determinants of periodic reports:

All program reports should meet the requirements of good documentation, and meet the following:

- Adherence to the approved templates for "Operational Plan Follow-up and Completion Reports/Decision Reports/Program Annual Report"
- Review of the improvement proposals and priorities included in the previous year's report/the procedures implemented in this regard/the impact of the procedures implemented.
- Annual monitoring values of the relevant approved performance indicators.).
- Analysis of the results of the annual monitoring of the indicators.
- Identifying strengths and aspects that require further improvement.
- Identifying improvement priorities to be included in the improvement plan for the following year.

Comprehensive periodic evaluation of the program:

The comprehensive evaluation of the program is conducted for the first time after the graduation of the first batch or when it first applies for program accreditation from the Education and Training Evaluation Commission - or other recognized bodies in the event that the program wishes to apply for international accreditation - and then periodically (with each accreditation renewal cycle), and the comprehensive evaluation of the program includes an accurate evaluation of all aspects of the program's performance, its inputs, processes, and outputs, and the degree of its compliance with the approved criteria and standards issued by the accreditation body, with the provision of supporting evidence for the level of compliance.

The program completes the self-study report using the form approved by the accreditation body, as the self-study report and its attachments are the basic pillar on which the external visit team relies in its evaluation of the program.

The comprehensive evaluation process of the program goes through several stages as follows:

1. Announcing the start of the self-evaluation project and preparing the program's members.
2. Training the program's committees on the self-study models and the role assigned to each committee "The program may form committees specific to the comprehensive self-evaluation stage of the program and determine their tasks and competencies."
3. Each committee shall determine the degree of compliance with the accreditation criteria and standards, collect documents, evidence and testimonies for each criterion/sub-criterion/standard, and then write a report on the committee's criterion/standards "in paper and electronic form."
4. Collecting and reviewing the reports prepared on each criterion, then preparing the full self-study report for the program and its attachments in paper and electronic form (the attachments to the self-study report include the following: the external review

report or the previous accreditation visit (if any) and the program's response to the recommendations contained therein, a detailed statement of the faculty (including name, gender, nationality, qualifications, and study system (regular, distance learning), academic rank, general specialization, specific specialization, university from which he graduated, list of courses taught in the current year), a report on the program's self-evaluation procedures (including the membership of committees and work teams and their tasks and the job title of each member and a description of the procedures for preparing each criterion), a comprehensive analytical report on the program's key performance indicators (including performance trends and benchmarks according to gender and branches/locations), an independent opinion report on the program's self-evaluation, if any.

5. Fulfilling all the requirements of the National Center for Academic Evaluation and Accreditation to qualify for program accreditation.
6. Internal review of self-study documents and requirements for qualifying for accreditation: The internal review of program documents goes through two stages, the first at the college level and is implemented by The Development and Quality Unit at the college and the second at the university level through the internal reviewer from the Deanship of Development and Quality and the Academic Accreditation Unit at the Deanship. The program must be committed to fulfilling the internal review notes before submitting its files for independent review.
7. Independent review "if any" of the self-study documents and eligibility requirements for accreditation: This is carried out by an independent expert or a team from outside the university whose members have experience in the field of quality and academic accreditation in addition to academic experience in the same specialization of the program for at least one of the team members. The program is committed to fulfilling the notes of the independent review team and preparing improvement plans in light of the recommendations contained in the report before submitting the documents to the Academic Evaluation and Accreditation Center to request accreditation/renewal of accreditation.

8. External review of the program (in the event of applying for accreditation or renewing accreditation): This is done by a team - formed by the National Center for Academic Evaluation and Accreditation - that includes experts in quality and academic accreditation and specialists in the academic field of the program. The team reviews the extent to which the program meets the accreditation requirements and the quality of its compliance with the program accreditation standards by examining its documents, records, attachments and supporting evidence. The matter is not limited to reviewing documents and records, as the external review team sets a date with the program to conduct a field visit during which the quality of the infrastructure, equipment, laboratories and learning resources is evaluated. During this time, meetings are held with the program management, program employees, and beneficiary sectors to verify the initial observations they reached through examining the documents and files.
9. The program's external review report (in the event of accreditation or renewal of accreditation) includes a number of recommendations and proposals, for which the program is committed to preparing an improvement plan - within a time frame based on the program's priorities for improvement - where the program's plan to implement the recommendations of the external review team is submitted to the center, and after its approval by the center, the program is committed to implementation and the implementation of the plan is followed up internally at the program/college/university level and also through annual follow-up reports submitted to the National Center for Academic Evaluation and Accreditation.
10. In light of the final report of the external review, the center's decision is made to fully accredit the program, or grant the program conditional accreditation with a specific period and linked to conditions that the program must develop a plan to raise within the time frame specified by the center, or reject accreditation, and in all three cases the program must continue to implement its system for quality management and continuous performance improvement through development/designing and implementing improvement plans, monitoring and evaluating performance, and taking improvement/corrective measures to ensure the sustainability of development and continuous improvement of the program and its outputs.

11. The program is committed during all stages of preparation for accreditation or renewal of accreditation to coordinate with the Academic Accreditation Unit in the Deanship of Development and Quality.

The program should take into account the following notes to the center when submitting its report for accreditation/re-accreditation:

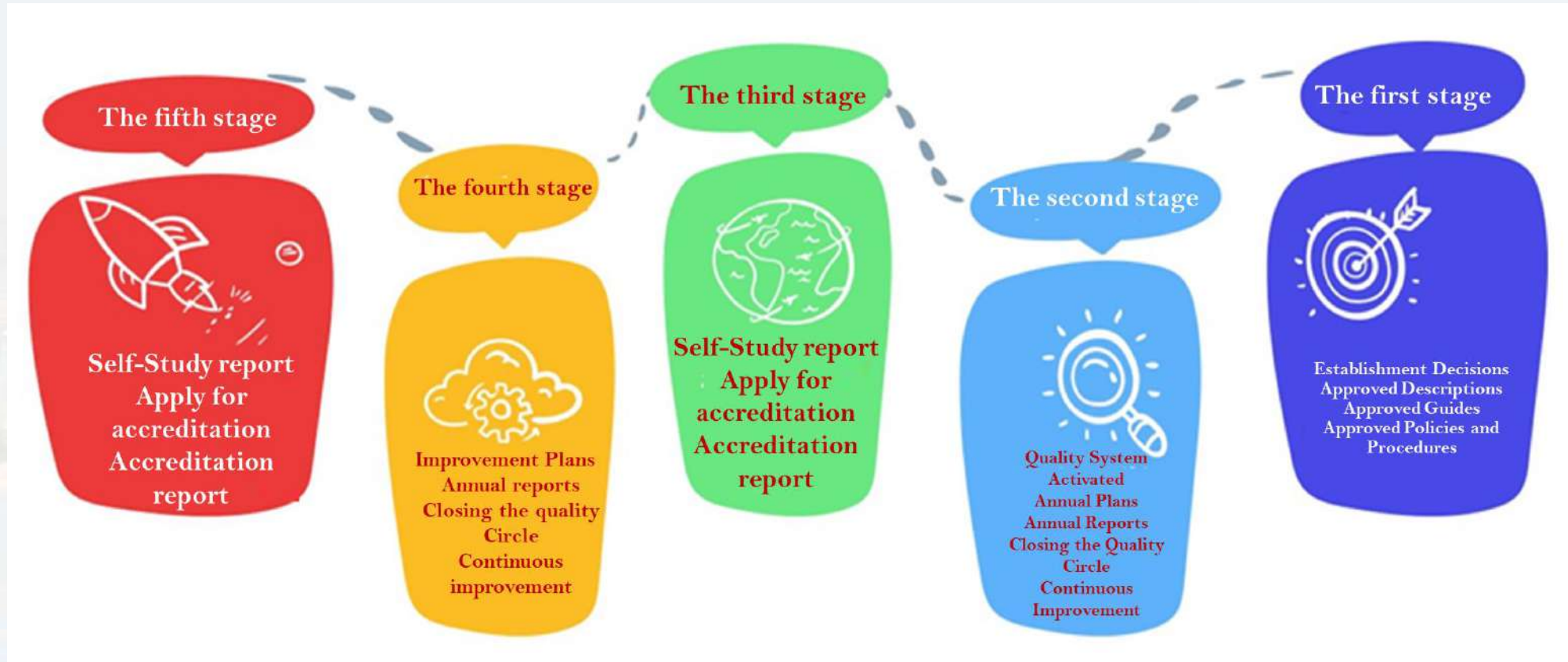
Attach all evidence and testimonials on which the program relied in the self-study and upload them to the electronic portal for academic accreditation - on the center's website, and ensure that all attachments submitted are closely related to what is stated in the report. Short descriptive titles should also be used to identify the content of each attachment. It is preferable not to attach some files related to (photos, long messages, emails, notes, questionnaires, memos) to the self-study report, as they can be made available for review during the review team's visit to the program.

• Improvement Process:

The improvement process is based on the results and analysis of the results in the "quarterly/annual/comprehensive" evaluation reports, monitoring of weaknesses in performance and proposals for improvement. During this stage, the procedures that will be implemented to improve performance or address weaknesses are determined and are in one or more of the following forms:

- Rapid corrective measures.
- Preventive measures.
- Improvement/development plans

Expected outcomes at each stage of the academic program



Procedural steps for monitoring and evaluating quality in programs:

1. The role of the academic program:

- Forming a work team from the program's members and its various committees.
- Collecting the files required to prepare a draft of the program's annual quality report according to the form approved by the Deanship of Development and Quality.
- Preparing the report and its attachments and submitting them to the Vice Dean for Development and Quality and the Head of the Development and Quality Unit for review.
- Preparing the report in its final form after making amendments in light of the observations and recommendations of the internal review by the Vice Dean for Development and Quality.
- Discussing and approving the report by the Department Council.
- Submitting the report with all its attachments to the Vice Dean for Development and Quality to submit it to the Deanship of Development and Quality.

2. The role of the Deanship of Development and Quality “represented by the Quality Assurance Unit”:

- Reviewing the annual quality report and examining all attachments by the program's internal auditor to ensure the accuracy of the information and data contained in the report.
- Providing feedback to the programs on the same form within the time frame specified by the Deanship.
- Preparing an annual report by the Head of the Quality Assurance Unit on the level of quality in the university's academic programs on Form No. 2.

- Discussing and approving the annual report prepared by the Quality Assurance Unit.
- Submitting the approved report for presentation to the University Council.

Performance Indicators and Benchmarks:

The program is committed to adopting the list of key performance indicators for academic programs issued by the Education and Training Evaluation Commission, in addition to a number of indicators appropriate to the nature of the program, its mission and objectives.

The program's Performance Measurement Unit is responsible for following up and monitoring the annual values of performance indicators and preparing their reports. ([Cards to describe their indicators/annual reports to monitor the values of indicators/annual report to monitor the percentage of achievement of objectives through the performance indicators associated with them](#))

The program is committed to making an internal comparison with the approved annual targets for performance indicators, and with their previous performance by tracking performance levels and providing a statistical analysis of the values of performance indicators that clarify the direction of performance and identify improvement opportunities for indicators that achieved the annual targets, and studying the root causes of the weakness of the values of indicators that did not achieve their targets, and then determining improvement proposals that may be in the form of corrective/preventive measures that are implemented directly, or in the form of initiatives/projects included in the annual plan for the following year.

• Program Quality Performance Indicators:

Code	Key Performance Indicators	Description
KPI-P-01	Students' Evaluation of Quality of learning experience in the Program	<ul style="list-style-type: none"> - Average of the overall rating of final year students of the quality of learning experience in the program, satisfaction with the various services offered by the program (restaurants, transport, sports facilities, academic, vocational, psychological guidance...). - Student satisfaction with the adequacy and diversity of learning sources (references, periodicals, information databases... etc.) on a five-point scale in an annual survey.
KPI-P-02	Students' evaluation of the quality of the courses	<ul style="list-style-type: none"> - Average of students' overall rating for the quality of courses on a five point scale in an annual survey.
KPI-P-03	Completion rate	<ul style="list-style-type: none"> - The proportion of undergraduate students who completed the program in minimum time in each cohort.
KPI-P-04	First-year students retention rate	<ul style="list-style-type: none"> - 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
KPI-P-05	Students' performance in the professional	<ul style="list-style-type: none"> - percentage of students or graduates who were successful in the professional and/or national examinations, or their score average and median (if any)

	and/or national examinations	
KPI-P-06	Graduates' employability and enrolment in postgraduate programs	- Percentage of graduates from the program who within a year of graduation were: a) employed within 12 months. b) enrolled in postgraduate programs during the first year of their graduation to the total number of graduates in the same year.
KPI-P-07	Employers' evaluation of the program graduates proficiency	- Average of the overall rating of employers for the proficiency of the program graduates on a five point scale in an annual survey
KPI-P-08	Ratio of students to teaching staff	- Ratio of the total number of students to the total number of fulltime and full-time equivalent teaching staff in the program
KPI-P-09	Percentage of publications of faculty members	- Percentage of full-time faculty members who published at least one research paper during the year to total faculty members in the program.
KPI-P-010	Rate of published research per faculty member	- The average number of refereed and/or published research per each faculty member during the year (total number of refereed and/or published research to the total number of full-time or equivalent faculty members during the year).
KPI-P-011	Citations rate in refereed journals per faculty member	- The average number of citations in refereed journals from published research per faculty member in the 6 Standard Code Key Performance Indicators Description program (total number of citations in refereed journals from published research for full-time or equivalent faculty members to the total research published).

Documentation and Records Management

Quality Guide

Documents

Documents that explain the general frameworks that govern the workflow and the guidelines that determine how it is performed and how its quality is judged, such as: (regulations/systems/policies and procedures/forms/mechanisms/standards/work manuals...)

Activity Implementation Records

Documents used as evidence of work implementation according to approved frameworks and compliance with standards that determine its quality, such as: (planning records, records of implementation of approved plan activities, records of meeting minutes and decisions, records of performance evaluation, records of continuous improvement and closing quality loops...)

Importance of documenting the quality management system:

• Common understanding and unification of efforts:

Good documentation is an effective means of communication between university/program affiliates as it allows them to have a common understanding of the policies and plans adopted towards achieving the mission and objectives, and also provides a common vision about expected performance and how to evaluate it.

- **Providing accurate data and information:**

Good documentation provides accurate data and information that helps in understanding the current situation and analyzing it to reach facts that can be relied upon in taking corrective measures or building future improvement plans.

- **Investment and waste reduction:**

The existence and documentation of work regulations, general policies, executive procedures, work plans, and work evaluation standards - in addition to the good definition of roles and responsibilities - contribute to organizing work, employing competencies, and investing resources, which is reflected in saving effort, time, and resources.

- **Early detection of performance problems and their treatment:**

Good documentation helps in monitoring work and providing data and information about its efficiency, which enables decision-makers to discover problems early and deal with challenges in a way that prevents their exacerbation in the future.

- **Continuous learning:**

Good documentation contributes to providing a large amount of cumulative experience on the impact of corrective and improvement measures, which leads to a deeper understanding of problems and choosing the most appropriate ways to deal with them.

- **Providing evidence to accreditation bodies:**

Good documentation contributes to providing evidence - to accreditation bodies - on compliance with standards and the existence of an effective quality system based on sound planning in light of understanding the current situation and determining targets, then implementation based on planning, then evaluating implementation and its outputs in light of specific and approved indicators, then improvement based on analyzing the evaluation results and studying improvement alternatives, and then closing the quality circle by planning for a new cycle of continuous improvement.

• **Good documentation controls:**

- Following all approved policies at Najran University related to documentation, visual identity, circulation, etc.
- Reviewing and updating documents according to the approved cycle for review and updating and re-approving them before saving them in files, clarifying the date of approval and issue number and arranging them sequentially in their file.
- Providing updated documents/evidence in paper and electronic form to facilitate the review and review process.
- Keeping a record of the amendments made to the documents.
- Keeping the cancelled documents and marking them in a separate file to prevent their misuse.
- Following up on the completion and updating of records (record of implementing the annual plan activities and record of the results of the annual evaluations, records of evidence of self-evaluation scales, records of continuous improvement and closing quality circles, record of meeting minutes, etc.).
- Disposing of old documents and records - in accordance with the university's general policy for retaining and disposing of records - which specifies the period of retention of records and the mechanism for disposing of them.

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Directory Credentials

COUNCIL / COMMITTEE	DEPARTMENT COUNCIL
REFERENCE NO.	14460417-1075-00008
DATE:	27/10/2024

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