



الجهاز الوطني للإعتماد الأكاديمي و ضمان جودة التعليم
National Bureau for Academic Accreditation And Education Quality Assurance

NBAQ



The NBAQ Handbook For Institutional Self-Assessment

**Focus on Implementing
The NBAQ's Standards & Quality Indicators**

**Edition
2017**



THE UNIVERSITY OF CHICAGO

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CONTENTS

	Foreword	1
1	Overview of the NBAQ's Standards	3
2	Purposes of the NBAQ's Institutional Accreditation	6
3	The Accreditation Cycle	6
4	The Importance of the Institutional Self-Assessment	8
5	Benefits of the Self-Assessment Report	10
6	Overview of the Self-Assessment Report	11
7	Characteristics of the Self Assessment Report	12
8	Planning for the Self-Assessment Report	13
9	Implementation of the Self-Assessment Report	14
10	Duties of the Accreditation Steering Committee and Task Teams	16
11	Time-Frame for Implementing the Self-Assessment Report	18
12	Format of the Self-Assessment Report and Focused Assessment Repots	21
13	Substantiation and Supporting Documents	25
14	Submission of the Final Self-Assessment Report	26
15	Coordinating the Content of the Institutional Self-Assessment Report with the NBAQ's Standards	26
16	Implementing the NBAQ's Standards & Quality Indicators	29
17	APPENDICES	171
	Appendix A : Glossary of Terms	173
	Appendix B : The NBAQ's Eligibility Requirements for Institutional Accreditation	177
	Appendix C : Additional Prompt Questions	181
	Appendix D : Suggested Documentation	215



Foreword

The NBAQ Handbook for Institutional Self-Assessment is designed for Kuwait's tertiary institutions and presents a practical reference to develop and implement a standard mechanism for institutional self-evaluation processes that culminate in a comprehensive self-assessment report. The *Handbook* adheres to the global practice of requiring tertiary institutions to conduct a thorough and candid self-assessment of all units and sectors prior to official site-visits undertaken

by teams of external peer evaluators. This requirement reflects our belief that the culture of transparent assessment is a powerful and positive tool that extends to all stakeholders of higher education institutions immensely valuable experiences and oversees continuous institutional growth. Using this *Handbook* in conjunction with *The NBAQ Handbook for Institutional Accreditation* will furnish a solid foundation for providing the prime stakeholder, i.e., students, the best educational experience possible as they pursue graduation and successful careers.

The practice of periodic institutional self-assessment is undoubtedly crucial because not only it gauges the degree to which the institution meets the NBAQ's established standards for accreditation but also presents ample opportunities for the institution's governance to engage its stakeholders and seek the input of its academic community for the review of its operational plans and policies as well as implement strategies for improvement. Briefly, a comprehensive and well-integrated institutional self-assessment report tends to optimize the institution's focus on quality assurance and the better achievement of stated mission and goals.

The NBAQ Handbook for Institutional Self-Assessment was developed by an expert team of academicians with diverse expertise. In presenting the first edition of this *Handbook*, I am pleased to recognize and appreciate the team's dedicated efforts that resulted in this valuable document. The publication of this *Handbook* marks a significant step that brings Kuwait's tertiary institutions into globally-agreed upon mechanisms and procedures of accreditation and quality assurance.

The NBAQ's accreditation process offers the public, both within and outside Kuwait, a reliable quality assurance system applicable to Kuwait's post-secondary educational institutions and is a significant component of the State's strategy to ensure accountability and transparency in the domain of higher education.

Prof. Nouria Abdulkareem AlAwadi

Director General,

National Bureau for Academic Accreditation &
Education Quality Assurance (NBAQ)- KUWAIT

About the NBAQ's Handbook for Institutional Self-Assessment

The National Bureau for Academic Accreditation and Education Quality Assurance (NBAQ) is a governmental agency having as its main purpose the accreditation of Kuwait's tertiary educational institutions.

The NBAQ's Handbook for Institutional Self-Assessment is designed as a reference handbook for candidate institutions to use when investigating compliance with the NBAQ's thirteen standards and their quality indicators. This handbook takes a practical and task-oriented approach to the completion of the institutional Self-Assessment Report. While the detailed procedures presented in the various sections of *Handbook for Institutional Self-Assessment* are mainly intended to generate a thorough, candid, and extensive evaluation of internal practices in relation to institutional effectiveness, they also ensure coherence and uniformity in the focused, subject-specific and unit-specific processes of self-assessment. Unlike the small-scale work of focused task teams that review particular aspects and units of the institution, a holistic accreditation self-assessment has a tremendous and far-reaching impact on the entire institution. Put differently, the Self-Assessment Report is a collective inquiry to examine the institution as a whole in cooperation with all stakeholders over a specific period of time. It is hoped that the institutional self-assessment processes elicit innovative practices that significantly promote quality and produce a significant reduction of deficiencies. Moreover, in generating a holistic and analytical Self-Assessment Report, the detailed procedures (contained in this handbook) act as a tool to furnish a sound basis for the site-visit evaluation by a team of peer experts.

1. Overview of the NBAQ's Standards

Accreditation by a central national agency has become an increasingly global practice and a major governmental policy in higher education, especially in light of the massification of post-secondary education. More than a way of showcasing status, accreditation is a way to assure prospective students and society that the services that institutions of higher education offer possess undeniably up-to-standard quality.

Kuwait has now a centralized system that ensures that a level of quality must be achieved and maintained by all post-secondary educational institutions. The NBAQ derives its authority to oversee and monitor the overall quality of Kuwait's

tertiary institutions from the Amiri decree number 417/2010. Compatible to internationally practiced principles of institutional and educational effectiveness, the NBAQ accreditation system is an integrated evaluation process based on thirteen standards:

- 1. Institutional General Frame of Reference**
- 2. Administration and Leadership**
- 3. Faculty**
- 4. Student Affairs and Support Services**
- 5. Degree Programs**
- 6. Teaching Strategies and Methods & Student Learning Assessment**
- 7. Scientific Research and Knowledge Generation**
- 8. Facilities, Infrastructure, and Technology Systems**
- 9. Finance and Budget**
- 10. Human Resources**
- 11. Outreach and Community Service**
- 12. Ethics**
- 13. Quality Assurance and Improvement**

Each of the above standards has a Section A, which states its general requirements. Each also has a Section B, which specifies a set of quality indicators that are inextricably linked to the standard. The indicators are the fundamental and imperative elements that exist concomitantly with the requirement. They betoken the operational best practices that are necessary to reach an exemplary level of effective performance and compliance. Section C, which features in greater detail the interrelated components of the quality indicator, helps institutions (i) consider critically the extent to which they fulfill the standard, and (ii) the extent they have effective practices and processes on a micro level. Taken together, the quality indicators and their components establish a wide-ranging perspective that helps institutions negotiate the intricate and interrelated questions that must be dealt with in achieving quality. In addition, each standard has, in Appendix D, a suggested list of substantiating documents that can illustrate compliance. Rather than including a definitive list of documents, or discarding the Appendix

altogether, a suggested list better articulates the multiple possible pieces of evidence that can be taken into account when proving compliance.

The overarching objectives of the NBAQ's standards are to establish a model of sustained effectiveness and continual improvement. For this reason, tertiary institutions should approach the NBAQ's standards as shapers of future planning, teaching strategies, and managerial-administrative practices. To the NBAQ, the underlying meaning of effectiveness embraces three expectations: (1) how well the institutional units/sectors are achieving their set targets and objectives without draining their resources; (2) how well they are using their data and feedback from stakeholders (constituencies) to improve the efficiency and productivity of their operations; (3) how successful they are in delivering a student-centered and employability-oriented education. Because the NBAQ's standards have a qualitative nature, and not merely a quantitative one, they can assess a wide variety of post-secondary institutions that are different in size, organizational structure, range of programs, and scope of community services and outreach.

The NBAQ's standards have a normative function in that they delineate the notion of quality for Kuwait's tertiary institutions as well as for peer evaluation teams. Being accredited, according to the NBAQ's standards, means that the institution has effectiveness because it has resources that are appropriate to its mission and goals; academic programs are student-centered, meet the internally agreed-upon principles of admission, curricula, graduation requirements and duration, and are able to demonstrate through tangible evidence the extent they provide students with skills and competencies and knowledge literacy.

As a system, the NBAQ institutional accreditation has a dual basis. The first aspect is an internal Self-Assessment Report (SAR) that demonstrates across-the-board quality and highlights quality in two interconnected areas: (1) the institution's effectiveness, (2) the solidity and worthiness of students' learning outcome and competency in relation to degrees awarded. In positing that learning outcomes are the index to students' achievements, the NBAQ affirms that student learning outcomes are the most concrete evidence of institutional effectiveness as regards the most important key stakeholder. The second aspect of the NBAQ's institutional accreditation is an external evaluation by peer evaluators that verifies the declaration of the institutional Self-Assessment Report. Nevertheless, summative judgments on the quality and effectiveness of institutions that merit accreditation rest with the NBAQ's Directing Council. Through this dual basis of its accreditation system, the NBAQ inculcates in the institution a sense of accountability to its stakeholders and encourages a quality mindset that seeks the implementation of norms which are both up to date and agreed upon internationally.

2. Purposes of the NBAQ's Institutional Accreditation

The public responsibility for the quality of post-secondary education rests with the institution providing it as well as the NBAQ and its Directing Council; consequently, the fulfillment of this public responsibility is a matter of partnership. While institutions usually have an internal mechanism to oversee the quality of their services, the NBAQ ensures, through external peer evaluation, that the services do indeed meet the minimum requirements of quality. As an informed judgment about the quality of an institution formulated by peer evaluators, the NBAQ's accreditation system has the following purposes:

1. Ensure that tertiary institutions in Kuwait meet fundamental quality criteria and that they function at an acceptable level, according to the NBAQ's standards of quality.
2. Prompt tertiary institutions to move toward greater effectiveness, productivity, and outreach. Institutions that have met the NBAQ's standards at a minimal level are expected to improve, both educationally and institutionally.
3. Promote public confidence in Kuwait's tertiary institutions and the quality of their graduates.

3. The Accreditation Cycle

The accreditation cycle is a mechanism to ensure that institutions continuously maintain good quality. The cycle consists of nine phases:

Phase 1. The institution establishes eligibility and submits to the NBAQ the "Eligibility Application Form," demonstrating with evidential documents and data that it meets the requirements of the accreditation process. See Appendix B, entitled "The NBAQ's Eligibility Requirements for Institutional Accreditation."

Phase 2. When the NBAQ decides that the institution has met all eligibility requirements, the institution obtains "candidacy status."

Phase 3. Upon request, the institution receives training in the NBAQ's standards and the preparation of the holistic Self-Assessment Report.

- Phase 4. The institution evaluates itself according to the NBAQ's standards and submits its Self-Assessment Report (SAR) which assesses the degree and level of its compliance with all of the NBAQ's standards and quality indicators. In its conclusion, the SAR scrutinizes seriously the status of institutional effectiveness in relation to student learning outcomes across programs.
- Phase 5. The NBAQ forms a team of peer evaluators from tertiary institutions outside of Kuwait. Peer evaluators have general competence and expertise in key areas, such as academics, administration, student services, physical resources, and finance. The NBAQ provides guidelines for the preparation of the evaluation report.
- Phase 6. The team of peer evaluators visit the institution; they review the institutional (holistic) SAR and evaluate the institution in light of the NBAQ's standards and quality indicators. Specifically, the team assesses and identifies areas and levels of compliance (i.e., strengths) and areas and levels of non-compliance (i.e., weaknesses). On the basis of its findings, the team prepares an evaluation report with recommendations to the NBAQ's Directing Council.
- Phase 7. The NBAQ sends the final evaluation report of peer evaluators to the institution to amend in case (1) the report contains factually incorrect information, and/or (2) does not record significant favorable information, and/or (3) records information that is irrelevant to the NBAQ's standards.
- Phase 8. The NBAQ's Directing Council examines the SAR in the context of its standards and issues a verdict on the accreditational status of the institution.
- Phase 9. The NBAQ follows up with the institution regarding the implementation of recommendations for improvement.

It is worth noting that, upon the request of the institution, the NBAQ conducts a "Pre-accreditation Audit" (i.e., a pilot accreditational activity) whose purpose is to determine what areas need quality improvement prior to the formal accreditational site-visit of a team of peer evaluators. The pre-accreditation audit follows the same procedures as outlined above.

4. The Importance of the Institutional Self-Assessment Report

The holistic Self-Assessment Report (SAR) is the basis for preparing the institution to undergo the NBAQ's accreditation. At its most basic level, a holistic self-assessment by an institution is the practice of reviewing all institutional sectors and holding the institution's governing body as well as all its units accountable for effectiveness and educational quality (See Figure 1). The SAR is a primary means of verifying institutional effectiveness and the solidity of students' competencies. As a process of evaluation, the perspective through which it is conducted is the normative reference of the NBAQ's quality standards.

Because self-assessment is a collaborative, broad-based process and involves a series of activities whose purpose are candid analysis and evaluation, the final product—the holistic institutional SAR—should serve three entities: (1) all institutional constituencies, (2) the team of peer evaluators, and (3) the NBAQ's accreditation commission. Given this, the aims of the holistic SAR are to:

1. Evaluate the institution's level of compliance with the NBAQ's quality standards.
2. Develop an informed perspective on institutional improvement, including the improvement of educational programs and institutional practices with regard to administration, management of resources, and operation of service sectors, including community outreach.
3. Prepare the institution to receive an external evaluation by a team of peer evaluators.

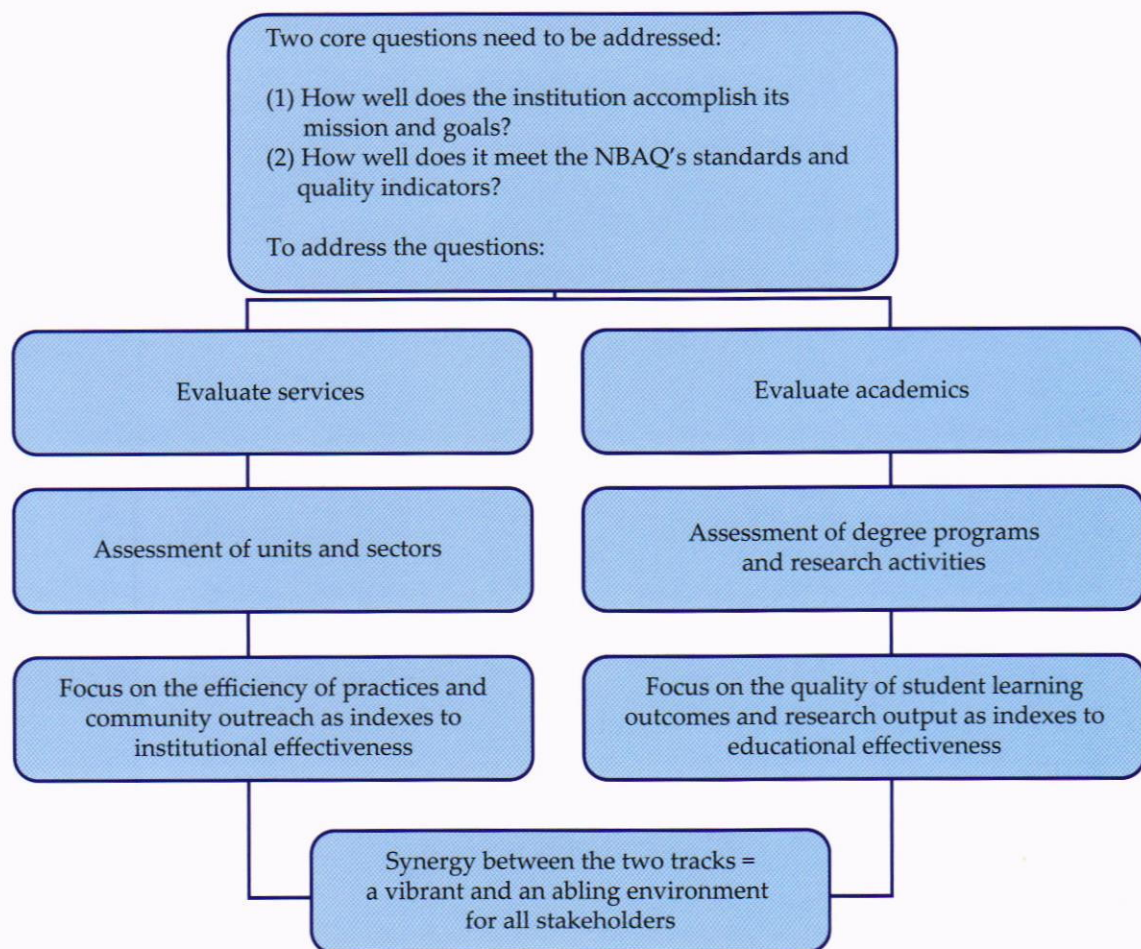
In light of the above aims, a well-founded SAR addresses the following major questions:

- Do the institution's internal operations—academic, administrative and fiscal—converge to actualize a level of effectiveness?
- What has been the impact of institutional organization on student and faculty achievements?
- Have the principles of daily operations enhanced the performance of the stakeholders?

- How do programs define and develop the core competencies that are required in enrollee students and how do they verify the accomplishment of desired goals?
- How can units and available resources be managed more purposefully in order to meet well-defined objectives?
- How can planned outcomes be maximized?
- In brief, can the institution do better? Is this the best the institution can do?

Figure 1.

The Self-Assessment Report as a Dual-Track Process



5. Benefits of the Self-Assessment Report

The Self-Assessment Report is an honest and thorough examination of the institution in the context of the NBAQ's standards. Self-assessment is a valuable process because it provides the institution with the opportunity to:

1. Draw into focus the strengths and weaknesses of the institution.
2. Review the institution's mission and goals and investigate if each unit is equipped to contribute to the mission and goals.
3. Bridge the gap between what the institutional mission and goals statements promise and the status quo.
4. Examine the present goals of academic programs in terms of their current value and their relevance.
5. Align instructional methods used by faculty with the current educational needs of students.
6. Bolster educational effectiveness and set up targeted learning outcomes as the key perspective from which institutional planning originates.
7. Seek the input of its internal stakeholders concerning implementable solutions to challenges and risks that the institution faces, be they related to finance, student enrollment, faculty retention, etc.
8. Change current institutional practices to meet the new imperatives of a changing world.
9. Reconsider foundational documents such as faculty bylaws, student bylaws, etc., for their roles in achieving the stated mission and goals of the institution.
10. Lay the groundwork for subsequent stages of improvement and quality enhancement of the institution.

6. Overview of the Self-Assessment Report as Process

In all higher education institutions the maintenance of the quality of academic programs, services, and operations is an ever-growing necessity. It is advisable that institutions establish deanships (or equivalent units) for accreditation and quality assurance that establish mechanisms for the implementation of quality-building projects and ensure the achievement of the NBAQ's institutional accreditation.

To conduct an institutional Self-Assessment Report, the institution must:

1. Establish a system of gathering and organizing quantitative and qualitative information/evidence related to both the goals of programs and units as well as the range of actual resources available for them.
2. Identify the goals of institutional service units/sectors.
3. Identify the students' learning outcomes in degree programs and the General Education Program.
4. Apply the NBAQ's quality standards to assess the educational effectiveness of programs and the quality performance of service units/sectors based on relevant quantitative and qualitative information gathered.
5. Analyze the findings in light of key questions, such as: To what extent is the institution in compliance with the NBAQ's standards? Does the institution have effectiveness in areas specified by the NBAQ's standards? To what extent do institutional practices facilitate or hinder the achievements of the institution's mission and goals?
6. Determine the types of improvement decisions that are crucial to the institution.

7. Characteristics of the Self-Assessment Report (SAR)

The holistic SAR must be written in an accessible and clear style. While description is necessary, a SAR that lacks analysis and evaluation does not meet the NBAQ's requirements, and it cannot be the basis of obtaining accreditation status at any level. The NBAQ assures institutions that it respects and complies with the principles of confidentiality and will not make public the content of self-assessment studies of institutions that do not succeed in achieving accreditation.

A valid SAR has the following characteristics:

1. It is candid and analytically informative for the institution's constituencies and the team of peer evaluators.
2. It gives the team of peer evaluators a clear picture of how the institution gathered and organized relevant information and data, and how it drew on both to formulate its findings.
3. It addresses all of the NBAQ's standards and quality indicators, demonstrating the institution's level of compliance (See Figure 2). If not in compliance with a specific standard, the SAR should specify how the institution plans to achieve compliance with the standard.
4. It clearly evaluates the institution's strengths, deficiencies, and effectiveness in accordance with the NBAQ's standards and the institution's mission and goals.
5. It incorporates the findings of the focused, subject-specific and/or unit-specific assessment reports written by task teams and defines the types of decisions that should be planned and implemented with regard to units and programs.
6. It brings into focus the shortcomings of the institutional strategic plan(s) and provides a scheme to eliminate these shortcomings within a definite time-frame.
7. It follows a well-organized structure so that evaluators are able to review the entire report or just access particular chapters and appendices, or even specific indicators, as they need them.

Figure 2.

Numerical Table of the NBAQ's Standards and Quality Indicators

	Standards	Number of Quality Indicators
1	Institutional General Frame of Reference	6
2	Administration and Leadership	5
3	Faculty	5
4	Student Affairs and Support Services	5
5	Degree Programs	6
6	Teaching Strategies and Methods & Student Learning Assessment	5
7	Scientific Research and Knowledge Generation	5
8	Facilities, Infrastructure, and Technology Systems	3
9	Finance and Budget	5
10	Human Resources	5
11	Outreach and Community Service	4
12	Ethics	3
13	Quality Assurance and Improvement	6
		Total 63

8. Planning for the Self-Assessment Report

For the purposes of clarification, the *NBAQ's Handbook for Institutional Self-Assessment* uses two distinguishing terms: "task teams" and "focused assessment reports" (FAR). Although the handbook uses the term "task team" to designate focused, unit-specific and subject-specific groups, institutions may use any other terminology that reflects the nature of the work, such as subcommittee, task force, or study group, etc. Moreover, to distinguish the written material submitted by "task teams" from the holistic institutional Self-Assessment Report (SAR), the handbook refers to it as "focused assessment report."

The purpose of the SAR is to investigate the effectiveness of an institution and to revitalize faculty, administrators, and staff, and orient their energies toward the continual improvement of the student learning experience. As an institution embarks on identifying areas of compliance with the NBAQ's standards and quality indicators, and tackling areas that are out of compliance, the formation of a steering committee, chaired by a competent head, is imperative. Moreover, a major aspect of the challenge of completing a holistic self-assessment within a specific time-frame (usually 12 months), is to organize capable task teams.

Since it is not uncommon in large and medium-size institutions to face the fact that data, information, and evidential material exist in fragmented form, the institution must establish at the outset a system for the aggregation, classification, and periodic updating of its information and data. The aggregation and classification is helpful for participants in the SAR and administrators in charge of the strategic plan. Moreover, the process of aggregation and classification is a valuable source to substantiate adequately the institution's compliance with the NBAQ's standards and quality indicators.

The NBAQ recommends the following structure for the completion of the SAR:

1. President, or Provost, or Dean of Accreditation and Quality Assurance
2. The Institutional Accreditation Steering Committee
3. Focused subject-specific and/or unit-specific Task Teams

9. Implementation of the Self-Assessment

1. Throughout the process, the NBAQ assists the institution by appointing a liaison officer responsible for advising the institution on matters of self-assessment and for contacting the institution in regard to issues related to the site visit team.
2. To ensure the widespread participation of the institution's constituencies, the chief executive administrator (president or provost) explains to the institution's constituencies the context of the SAR and its importance to the institution. He/she must assure the constituencies that the findings and recommendations of the SAR will be channeled into plans and practical decisions. In addition, he/she allocates resources to the production of the SAR, including technical support, software, and workspace. To support the participants in the preparation of the SAR, it is advisable that the institution adjusts the teaching load and administrative duties of participating members.

3. The governing body of the institution appoints the head of the Accreditation Steering Committee, who has the following responsibilities: supervise the task teams and prepare the draft of the SAR . The head discusses the preliminary draft of the SAR with representatives of the institution's constituencies.
4. It is advisable that the head of the Accreditation Steering Committee, in consultation with the president, administrators and faculty, appoints members of the Accreditation Steering Committee. Among its members, there must be a liaison officer responsible for coordination with the NBAQ. Moreover, it is advisable that there be a person with high-level editorial skills on the Steering Committee, so that the various focused assessment reports can be synthesized into a holistic SAR, homogeneous in tone and style.
5. Members of the Steering Committee should have the following qualities: (i) be energetic and able to dedicate time and effort; (ii) be knowledgeable about the institution; (iii) have excellent communication skills and the ability to work cooperatively; (iv) be familiar with the NBAQ's standards and quality indicators; (iv) be representative of the diverse constituencies; (v) in particular, members of the Steering Committee must have knowledge about the kind of qualitative and quantitative information necessary for the writing of a sound and well-substantiated SAR. This includes instructing task teams in (1) the right kind of information that needs to be collected, (2) casting the information and data collected in legible and user-friendly forms, (3) effectively use the information that is relevant to programs and units to generate analysis and evaluation. Members of the Steering Committee can chair several task teams, or the teams select their own chairs from among the members.
6. Several various task teams prepare analytical, focused assessment reports on specific subjects (e.g., student support services, resource management and development) and on specific units (e.g., science programs, social sciences programs). In the writing of their reports, task teams seek the participation of all relevant constituencies.

Members of task teams should be committed to the assessment process: well-organized and punctual, daringly analytical, and broad in their knowledge of units and sectors.

10. Duties of the Accreditation Steering Committee and Task Teams

Duties of the Institutional Steering Committee (ISC):

- Meet with the NBAQ's officials.
- Study the NBAQ's standards in order to chart the scope of the holistic SAR. Decide on the format of the SAR in consultation with the NBAQ's liaison.
- Form capable task teams as per the NBAQ's standards and/or units/sectors.
- Decide on the prompt questions that the task teams should investigate.
- Devise a coordination mechanism among task teams.
- Devise a mechanism to solicit the feedback of all constituency groups.
- Set up a system for collecting, classifying and sharing newly created as well as existing data and information, including an inventory of previous assessment reports.
- Determine the format of the SAR and set editorial guidelines for task teams.
- Set up a schedule for task teams to accomplish their assignments.
- Set up a date for the completion of the holistic SAR to be sent to the NBAQ twelve weeks before the site visit of peer evaluators.
- Conduct an orientation for chairs of task teams on the importance of candid evaluation and cross-fertilization of ideas on improvement and quality enhancement.
- Oversee and coordinate the progress of task teams' focused reports and keep the work on schedule.
- Review promptly submitted focused reports to verify that they have addressed the prompts questions, that the writing is clear, that adequate substantiation is provided, that statistics are correctly interpreted and that recommendations for improvement are feasible.
- Edit the focused assessment reports.
- Distill a holistic institutional SAR from the collection of focused assessment reports.

- Share the SAR with constituencies and make use of their input.
- Submit the final holistic SAR to the governing body for approval.

Duties of Task Teams:

- Study closely their assigned standard(s) and subject(s).
- Determine relevant and effective methods of assessment.
- Seek relevant data and information and evidential material, qualitative and quantitative.
- Solicit the feedback of relevant constituencies.
- Conduct an in-depth analysis and evaluation in light of prompt questions, verifying how well the sectors/units meet the assigned standard(s).
- Determine the strengths, weaknesses and challenges facing units/sectors with reference to the assigned standard (s).
- Integrate description with informative data analysis, and follow the editorial guidelines set by the steering committee.
- Suggest short-term and long-term improvement plans.
- Outline recommended implementable changes.
- Submit focused reports according to the schedule set by the Steering Committee.

11. Time-Frame for Implementing the Self-Assessment Report

Assessment of compliance with the NBAQ's standards and quality indicators is a major project; it requires adequate time to carry out efficiently. Generally, it takes about two years to complete the holistic SAR and receive the site-visit evaluation. A rushed self-assessment is likely to yield limited value and insight.

Incorporating the information that was detailed in Section 10, the timetable below provides institutions that are seeking initial accreditation with a model of a well-scheduled SAR. Small educational institutions are likely to need less time (about a year and a half) than large institutions to finalize the SAR and prepare for the accrediting site-visit evaluation. Moreover, it is expected that institutions undergoing re-accreditation will accomplish the writing of the SAR within a shorter time frame.

Summer 1 (June-August) & Semester 1 (September-December)

Prior to Summer 1 the top governing body appoints the Head of the Accreditation Steering Committee. The rest of the committee members are appointed subsequently.

During Summer 1 and Semester 1 the Steering Committee selects an electronic system of collecting, classifying and sharing existing data and information, including an inventory of previous assessment reports.

The chief executive administrator (president or provost) instructs institutional staff to aggregate, classify, and update evidential documents and data within a specific time frame.

Duties of the Steering Committee during Summer 1 and Semester 1

- Meet with the NBAQ's liaison for coordination.
- Study the NBAQ's standards in order to chart the scope of the holistic SAR
- Form capable task teams per standards and/or units.
- Receive, along with members of task teams, training workshops regarding the NBAQ's standards and the writing of the SAR.
- Devise a coordination mechanism among task teams.

- Decide on the prompt questions that the task teams should investigate.
- Devise a mechanism to solicit the feedback of constituency groups.
- Determine the format of the SAR, and set editorial guidelines for task teams.
- Set up a schedule for task teams to accomplish their assignments.
- Set up a date for the completion of the holistic SAR which is to be sent to the NBAQ twelve weeks before the site visit of peer evaluators.
- Conduct an orientation for chairs of task teams on the importance of candid evaluation and cross-fertilization of ideas on improvement and quality enhancement.

Semester 2 (January-May) & Summer 2 (June-August)

During this period, Task Teams:

- Study closely their assigned standards and subjects.
- Determine the effective methods of assessment.
- Seek relevant data and information and evidence.
- Solicit the input of relevant constituencies.
- Conduct in-depth analysis and evaluation in light of prompt questions, verifying how well the sectors/units meet the standard.
- Determine the strengths, weaknesses and challenges facing units/sectors.
- Integrate informative analysis of data and description; follow the editorial guidelines set by the steering committee.
- Suggest improvement plans
- Outline recommended implementable changes.
- Submit assessment reports according to the schedule set by The Steering Committee.

During this period:

The NBAQ's liaison officer schedules follow-up visits to the institution in regard to the progress of the SAR.

The NBAQ approves a list of possible external peer evaluators and informs the institution of their names and qualifications, and verifies that no conflict of interest exists.

Semester 3 (September-December)

During Semester 3, the duties of the Steering Committee are as follows:

- Review and edit the focused assessment reports.
- Distill a holistic SAR from the collection of focused assessment reports.
- Share the holistic SAR with constituency groups, and make use of their input.
- Submit the SAR to the governing body for approval.

During this same period the NBAQ's liaison officer schedules follow-up visits to the institution in regard to the completion of the SAR.

The NBAQ finalizes the list of members comprising the peer evaluation team. In consultation with the institution, the NBAQ's commission arranges for the site visit.

Semester 4 (January-May)

Within a month of receiving the SAR, the NBAQ reviews it for clarity and adequacy of organizational structure, for compatibility with all of the NBAQ's standards and quality indicators, and for proper and adequate substantiating documents. Within the subsequent month, the institution incorporates the NBAQ's requested amendments, if any.

The NBAQ's Director General sends the SAR to the team of peer evaluators who conduct a site visit within two months of receiving the SAR.

12. Format of the Self-Assessment Report and Focused Assessment Reports

The length of the SAR depends on the format that the Accreditation Steering Committee adopts and the length of the focused reports. In no case should it exceed 250 pages. The basic format of the SAR needs to be organized into three main sections: an introduction, a multi-chapter body corresponding in number to the NBAQ's thirteen standards, and a conclusion. The institution may re-organize the body of the SAR according to a second format that groups the standards according to related themes and domains. In this case, members of task teams will work together to address more than one standard, for example 2 and 12 (Administration and Leadership & Ethics); 9 and 8 (Finance and Budget & Facilities, Infrastructure, and Technology Systems); 3 and 7 (Faculty & Scientific Research and Knowledge Generation); 5, 6, and 4 (Degree Programs & Teaching Strategies and Methods & Student Learning Assessment & Student Affairs and Support Services). The merit of the first format is that it ensures comprehensiveness; moreover, the distribution of the work among numerous small task teams may effect a brisk pace. The merit of the second format is that it reflects conveniently the reciprocity between standards and quality indicators. Regardless of the preferred format, chapters comprising the body must be coordinated with the NBAQ's standards in terms of content, and the format must clearly indicate to the peer evaluators which chapters within the body of the SAR address which of the NBAQ's standards.

Format of the Holistic Self-Assessment Report

I. Cover Page

The page includes name of the institution and the date of the SAR.

II. Table of Contents

The table must clearly show the structural relationship between sections and subsections, ensuring the users' easy navigation from element to element. Moreover, pagination of the SAR must be sequential.

III. Introduction to the Self-Assessment Report

This section has the nature of an overview and is required to:

1. Begin with a concise institutional fact sheet.

2. Describe the institutional profile. This part highlights the institution's history, its General Frame of Reference, its administrative and organizational structures, the number and names of degree programs, the number of faculty members per college, the number of enrolled students per college, the sources of budget and finance, and features of the campus and infrastructure, etc.
3. Identify the distinctive and unique features of the institution.
4. Give an overview of the format used in the SAR, including its focus/foci.
5. List the names and titles of members of the Accreditation Steering Committee, followed by those of task teams.
6. Explain the structures of the Accreditation Steering Committee and Task Teams.
7. Identify and describe the participating constituency groups.
8. Summarize the developmental changes during the last 4-5 years.

IV. Body of the Self-Assessment Report: Verifying Compliance & Effectiveness

The body of the SAR consists of chapters that are distilled from focused assessment reports that were prepared by task teams. The chapters address all of the NBAQ's thirteen standards and sixty three quality indicators.

It is advisable that the Accreditation Steering Community scrutinizes the suggested prompt questions (within the pages of Section 15, and in Appendix C). The purpose of the suggested prompt questions is to trigger in-depth and guided analyses and spur quality-driven candid investigations. It is hoped that the prompt questions would stimulate scenarios to refine current policies and procedures. Since the prompts are optional, institutions may develop their own prompt questions; however, devised prompts must be relevant to the quality indicator and must be substantiated with qualitative and/or quantitative evidence. Moreover, it is strongly advised that task teams look at Appendix D as a starting point, where lists of evidential material that normally exists in institutions are given. Not only do the lists give directives on ways to substantiate institutional compliance, but they should also provide good stimulation for fruitful discussions.

Focused assessment reports must consistently follow the NBAQ's "Standard & Indicators Assessment Template" (SIAT). The template has a tripartite structure: description; vigorous analysis and evaluation; implementable recommendations.

Standard & Indicators Assessment Template (SIAT).
Part A: Description of Standard on . . . (please specify)

Action 1	Give an overview of the duties of the Task Team.
Action 2	Explain coordination mechanisms used with other Task Teams working on relevant issues/topics.
Action 3	Give a descriptive overview of the existing state of affairs with regard to the Standard as a whole.
Action 4	List and explain the tools/methods used to collect data and information, including constituency groups consulted.
Action 5	Describe the current state of affairs regarding the Quality Indicator's domain of themes and concerns.

Part B: Analysis and Evaluation of Each Standard's Quality Indicators

Action 1	State the prompt questions that the Focused Assessment Report addresses per Quality Indicator.
Action 2	State and analyze the findings of the Task Team apropos each Quality Indicator of the Standard.
Action 3	Account for strengths and weakness and challenges per Quality Indicators of the Standard.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs meet effectively their stated objectives apropos the Quality Indicators of the Standard.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicators of the Standard.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance per Quality Indicator.
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format

Part C: Recommendations	
Action 1	Identify areas of strength with respect to the Standard that merit retaining.
Action 2	Identify areas of malperformance and needs that must be urgently addressed with regard to the Standard
Action 3	Establish an implementable quality improvement plan apropos the Standard.

(V) Conclusion of the Self-Assessment Report

This final section should:

1. Summarize the overall findings that come in the chapters comprising the body of the SAR, including strengths, weaknesses, and challenges.
2. Chart the level of institutional compliance with each Standard.
3. Identify areas where the institution is not in compliance with Standards and Quality Indicators.
4. Establish plans to achieve compliance and determine their time frame.
5. Classify and group the recommendations that come in the body of the SAR into sets that are assigned a schedule of priority.

VI. Appendices and Supplements

This section lists an array of important supporting documents, including primary data that constitutes sources for substantiation, and focused subject-specific and unit-specific reports. All supporting documents must be made available in a workroom for peer evaluators, preferably in electronic form.

Please note that during the visit, peer evaluators are free to request additional information and documents from units, administrators, or faculty. Heads of units and chairs of task teams must have available for peer evaluators copies of the focused assessment reports. Moreover, peer evaluators are free to request interviews with constituency groups who are not scheduled in the site visit timetable, such as students, staff, technicians, and alumni.

13. Substantiation and Supporting Documents

The documentation system should focus first on gathering and classifying existing material then consider what new documents and data must be created. All material related to the substantiation of compliance with the NBAQ's standards and validation of institutional and educational effectiveness must be available for the use of all task teams. The arrangement of the inventory of documents and data that will constitute substantiating material should correspond to the organizational format of the SAR.

To ensure that substantiating material in all its forms is easily accessed by the team of peer evaluators, institutions must employ a user-friendly and easily searchable system that clearly links standards and quality indicators to pertinent substantiating materials. Therefore, in their organization of the substantiating material per standard, institutions need to use a folder hierarchy system, i.e., a main folder dedicated to the standard, with several sub-folders corresponding in titular digits (and titular phrases, if additionally used) to quality indicators. Titles of substantiating documents must begin with digits that correspond to the digits of the components of the quality indicators. By way of illustration, the figure below shows a sample of a folder hierarchy.

Main folder for Standard II. Administration and Leadership

-  Sub-folder for Quality Indicator 2.1
-  Sub-folder for Quality Indicator 2.2
-  Sub-folder for Quality Indicator 2.3
-  Sub-folder for Quality Indicator 2.4
-  Sub-folder for Quality Indicator 2.5
 -  Document for 2.5.1
 -  Document for 2.5.2
 -  Document for 2.5.3
 -  ... etc

To ensure that documentation is compatible with the NBAQ's instructions concerning the characteristics of the SAR , substantiating documents and data must:

1. Be dated.
2. Be available in electronic, read-only formats.
3. Show proof of authenticity, such as the printed name of faculty or administrator, or the logo of the department or unit that issued them.
4. Show evidence that they are final versions and not drafts.
5. Exhibit signature(s) if they have a place for signature line(s).
6. Define, especially if large, using highlighted text or bookmarks, where in the bulk of the document peer evaluators must focus their attention.
7. Be clearly labelled, so that titles of substantiating documents begin with digits corresponding to Quality Indicators and to specific Components of Quality Indicators.

14. Submission of the Final Self-Assessment Report

The institution must submit the final self-assessment report, and the focused assessment reports that are unit-specific and/or subject-specific, along with all substantiating documents prepared for the accreditation process in electronic format that is read-only. Electronic submission should be on USB drives that are readable on all personal computers. Since these forms of electronic submission are self-contained, they should not include external links to live websites. The number of submitted copies is 10. However, the units of the institution, including degree programs, must keep hard copies of their focused assessment reports and substantiating documents in case the submitted electronic version run into technical problems during the site visit of peer evaluators.

15. Coordinating the Content of the Institutional Self-Assessment Report with the NBAQ's Standards

This section details the process of writing a holistic Self-Assessment Report. It contains the Standards, the Quality Indicators, and samples of prompt questions. Moreover, it contains the template (see below) which should be used in responding to each Quality Indicator.

Analysis and Evaluation Re: 1.1

Mark √ for actions implemented. Justify the exclusion of unmarked actions.

Action 1	State the prompt questions relevant to 1.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 1.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Implementing The NBAQ's Standards & Quality Indicators

Standard I

Institutional General Frame of Reference

A. Standard Requirements

The institution's vision, mission, goals, and values are clearly defined, and they are explicitly stated and publicly announced as guiding principles to conduct the processes of planning, implementation, governance and administration, as well as to oversee the functionality of all sectors within the institutional set-up.

B. Quality Indicators

- 1.1 The institution has a General Frame of Reference (GFR), or similarly named document, that represents the institution's vision, mission, and goals on the local, regional, and international levels. (Note: When a local institution is associated with an international or "parent" institution, its GFR is expected to be aligned with the "parent" institution, and also reflective of local characteristics and priorities.)
- 1.2 The GFR is formally approved, maintained, and periodically reviewed by the institution.
- 1.3 The GFR is based on guiding principles expressed by well-articulated vision, mission, and goal statements that are in keeping with its nature (academic, polytechnic, etc), and appropriate for a degree-granting post-secondary institution.
- 1.4 The GFR guides the institution and is reflected clearly in its policies, practices, and degree programs.
- 1.5 The institution's commitment to the process of quality assurance and continuous improvement is clearly articulated in the GFR.
- 1.6 The GFR is published, readily accessible, and available to the public.

C. Key Components of the Quality Indicators of Standard I

- 1.1 The institution has a General Frame of Reference (GFR), or similarly-named document, that represents the institution's vision, mission, and goals on the local, regional, and international levels. (Note: When a local institution is associated with an international or "parent" institution, its GFR is expected to be aligned with the "parent" institution, and also reflective of local characteristics and priorities.)

Components of the Quality Indicator	
1.1.1	The GFR is available and accurately expresses the institution's vision, mission, goals, and values.
1.1.2	The GFR articulates the institution's mission and goals at local and regional levels and serves both national, regional, and/or international developmental needs.
1.1.3	Where applicable, the local institution's GFR aligns itself with the "parent" institution; moreover, it demonstrates local characteristics and priorities.

Suggested Prompts for Quality Indicator 1.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What are the current institutional vision, mission, goals and values of the institution?
2. How does the institution's conceptualization of its mission and goals distinguish it from other local tertiary institutions?
3. Is the phrasing of the vision, mission, goals, and values reflective of the nature of the institution?
4. How do the institutional mission and goals serve both national and regional developmental needs?

Analysis and Evaluation Re: 1.1					
Action 1	State the prompt questions relevant to 1.1				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 1.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

1.2 The GFR is formally approved, maintained, and periodically reviewed by the institution.

Components of the Quality Indicator	
1.2.1	The institutional GFR was developed in consultation with relevant constituents.
1.2.2	The GFR is formally approved by the governing body.
1.2.3	The institution follows a procedure for periodically reviewing the GFR, aligning it with developmental changes on local and regional levels.

1.2.4	The GFR is recent and up-to-date.
1.2.5	The institution has records showing action by its governing body to review the GFR.

Suggested Prompts for Quality Indicator 1.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. From what perspective(s) did the institution develop and ratify its vision, mission, goals and values?
2. Who are the constituents who contributed to the formation of the current/ revised institutional vision, mission, goals and values? And what mechanism does the institution follow to assure that its constituents are actually involved in re-shaping its mission and goals?
3. What new developmental plans are in place to achieve the institutional mission and goals?

Analysis and Evaluation Re: 1.2	
Mark √ for actions implemented. Justify the exclusion of unmarked actions	
Action 1	State the prompt questions relevant to 1.2.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.2.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.2.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 1.2.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.2.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.

Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.2.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

1.3 The GFR is based on guiding principles expressed by well-articulated vision, mission, and goal statements that are in keeping with its nature (academic, polytechnic, etc.) and appropriate for a degree-granting post-secondary institution.

Components of the Quality Indicator	
1.3.1	The institutional vision is clear, comprehensive, and connected to the mission, goals and objectives that the institution seeks to achieve in future at local, regional, and international levels.
1.3.2	The mission and goals of the institution are consistent and in keeping with its nature.
1.3.3	The mission and goals of the institution are accomplishable within the limits of its available resources.
1.3.4	The institutional mission and goals are centered on academic teaching, student learning, research, and community service.

Suggested Prompts for Quality Indicator 1.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What measures is the institution implementing to ensure that it is achieving each aspect of its mission and goals?
2. In brief, what resources are available to achieve the institutional mission and goals?

3. To what extent are financial/budgetary allocations aligned with the priorities which are implicitly stated in the institutional mission and goals?
4. To what extent are the institutional mission and goals centered on academic teaching, student learning, research, and community service?

Analysis and Evaluation Re: 1.3					
Mark √ for actions implemented. Justify the exclusion of unmarked actions					
Action 1	State the prompt questions relevant to 1.3.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.3.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 1.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.3.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

1.4 The GFR guides the institution and is reflected clearly in its policies, practices, and degree programs.

Components of the Quality Indicator	
1.4.1	The GFR sets the overall direction towards effective planning, administrative and budgetary strategies, and internal decision-making.
1.4.2	On-going activities and practices associated with the academic, administrative, budgetary, and service sectors, are consistent with the institutional GFR.
1.4.3	The institutional GFR specifies the institutional philosophy of education.
1.4.4	The qualifications and competencies of the institution's graduates are consistent with its mission and goals.
1.4.5	The institutional GFR includes a section on its future developmental plans as regards degree programs, research, physical resources and infrastructure.

Suggested Prompts for Quality Indicator 1.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How has the institutional GFR strengthened the role of planning and improved the process of administration and governance?
2. Are the institutional mission, goals, and values clearly reflected in its policies, practices, and academic programs?
3. How effective are the institution's programs in producing graduates who possess the targeted learning outcomes and competencies as indicated in the GFR? What assessment tools are used?
4. Does the institution have in place a plan and a program for assessing the effectiveness of its units and services, contributing to the accomplishment of its mission and goals?

5. Are the qualifications and competencies of the institution's graduates consistent with its mission and goals? How does the institution measure these aspects?

Analysis and Evaluation Re: 1.4					
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions					
Action 1	State the prompt questions relevant to 1.4.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.4.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.4.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 1.4.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.4.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

1.5 The institution's commitment to the process of quality assurance and continuous improvement is clearly articulated in the GFR.

Components of the Quality Indicator	
1.5.1	The institutional GFR comprises a section on key performance indicators and evidentiary instruments by which the institution assesses the scope and extent of accomplishing its mission and goals.

Suggested Prompts for Quality Indicator 1.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What measures and policies does the institution implement to assess the scope and extent of accomplishment of its mission and goals?
2. What does the institution utilize to assess the quality assurance actions it seeks to implement?

Analysis and Evaluation Re: 1.5	
Mark √ for actions implemented. Justify the exclusion of unmarked actions	
Action 1	State the prompt questions relevant to 1.5.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.5.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.5.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 1.5.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.5.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.

Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.5.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

1.6 The GFR is published, readily accessible, and publically available.

Components of the Quality Indicator	
1.6.1	The institutional vision, mission, goals and values are displayed on the institutional website, widely broadcast, published in print, and released in informational publications.
1.6.2	Members of the institutional community (board of trustees/top governing council, administrators, faculty, and student population) are well aware of the institution's mission, goals and values.

Suggested Prompts for Quality Indicator 1.6

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Are the institutional vision, mission, goals and values displayed on the institutional website, published in print form, and released in the informational publications?
2. How well are the members of the institutional community aware of the institution's vision, mission, goals and values?

Analysis and Evaluation Re: 1.6

Mark √ for actions implemented. Justify the exclusion of unmarked actions

Action 1	State the prompt questions relevant to 1.6.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 1.6.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 1.6.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units / programs effectively meet their stated objectives apropos the Quality Indicator 1.6.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 1.6.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 1.6.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard II

Administration and Leadership

A. Standard Requirements

The institution is headed by an administrative entity, such as a governing body or a board of trustees, whose members constitute a competent body of professionals. These members have widely diversified specializations and expertise, are vested with executive and legislative authority, and are accountable for the accomplishment of the mission and goals of the institution, as specified in the institutional general frame of reference. The governing body develops and implements the institutional quality improvement plan, as well as financial resource adequacy for the effective functioning of the institution's administrative, academic, and service sectors. In addition, the institution's daily operations are in the hands of a full-time chief executive (or president), a qualified professional with high-level academic qualifications and advanced expertise, who does not preside over the governing body. All sectors and units of the institution are managed by qualified administrators.

B. Quality Indicators

- 2.1 The institution has bylaws that set the composition and the responsibilities of the members of the governing body (or a similarly named highest authority) to reflect the mission and goals of the institution. This body sets plans for the overall development of the institution and regularly monitors the progress in the implementation of these plans.
- 2.2 The institution has a full-time chief executive, or similarly named person, whose main responsibility is to the institution. Moreover, it appoints a sufficient number of qualified executives and administrators to provide effective leadership and management of its academic units and support sectors.
- 2.3 Members of the institution holding executive authority are responsible for overseeing and monitoring the effective operation of the institution in order to ensure its integrity and the continuity of its degree programs.
- 2.4 The institution's members holding executive authority adhere to the ethics and practices of good governance and professional excellence.

2.5 Members holding executive authority demonstrate commitment to the processes of quality assurance and continuous improvement by implementing the institutional quality improvement plan(s).

C. Key Components of the Quality Indicators of Standard II

2.1 The institution has bylaws that set the composition and responsibilities of the members of the governing body (or a similarly named highest authority) to reflect the mission and goals of the institution. This body sets plans for the overall development of the institution and regularly monitors the progress in the implementation of these plans.

Components of the Quality Indicator	
2.1.1	The institution develops policies, modifies bylaws, and lays the framework of developmental plans through effective consultations held by the governing council with the faculty and staff.
2.1.2	The institution has clear regulations concerning budgetary expenditure, and this expenditure bolsters and enhances advances in the institution's quality improvement plans.

Suggested Prompts for Quality Indicator 2.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What process is being used in developing and adjusting institutional policies and bylaws?
2. Who participates in establishing and developing/reviewing institutional policies and bylaws?
3. How does the institution determine its priorities in the allocation of budgetary expenditure?

Analysis and Evaluation Re: 2.1						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 2.1					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 2.1.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 2.1.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 2.1.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 2.1.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 2.1.					
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.					
Compliance Rating		0	1	2	3	4
Rationale for Excluding Actions Number (specify)						

2.2 The institution has a full-time chief executive, or similarly named person, whose main responsibility is to the institution. Moreover, it appoints a sufficient number of qualified executives and administrators to provide effective leadership and management of its academic units and support sectors.

Components of the Quality Indicator	
2.2.1	The institution has a legislative framework and bylaws for governing all administrative positions.

2.2.2	The institution has a legislative framework and bylaws for governing all academic positions.
2.2.3	The institution has clear job descriptions for administrative and executive positions.
2.2.4	The institution's organizational structure lists and outlines the responsibilities and powers vested in each unit and sector. The institution's organizational structure is posted on the institution's website.
2.2.5	The institution's administrative structure lists all job descriptions and responsibilities, duties, prerogatives, and appointment requisites of each job/position.
2.2.6	The institution's chief executive, on assuming his/her leadership position, presents an operational developmental agenda, explains its key components to the faculty and student community as well as to employees.
2.2.7	The institution assesses the extent to which the chief executive achieves the operational developmental agenda.

Suggested Prompts for Quality Indicator 2.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the institution have a clearly defined organizational structure? Does it detail the responsibilities and powers vested in each unit and sector?
2. How does the administrative structure of the institution relate to effective management? And how does it help the institution accomplish its mission and goals?
3. How well do administrators meet the institution's definition of effective leadership and management?
4. How does the institution ensure that all its sectors and units are managed by qualified administrators?
5. How does the institution's chief executive ensure that interaction with the faculty, employees and students is continual and effective?

6. What mechanisms are used to assess and ensure the quality performance of its chief executive (or president) and its senior executives and administrators.

Analysis and Evaluation Re: 2.2					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 2.2.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 2.2.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 2.2.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 2.2.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 2.2.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 2.2.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

2.3 Members of the institution holding executive authority are responsible for overseeing and monitoring the effective operation of the institution in order to ensure its integrity and the continuity of its degree programs.

Components of the Quality Indicator	
2.3.1	The executive authority effectively utilizes available human and fiscal resources, and is dedicated to their development.

2.3.2	In its administrative practices and operations, the institution adheres to clear governance and follows an organizational structure that has clear job descriptions, and clearly outlines responsibilities and procedures, thereby ensuring its efficient and smooth operation as well as information flow throughout the institution's constituent sectors.
2.3.3	The institution has a manual that defines and explains its policies and procedures.
2.3.4	The institution maintains an enabling and conducive environment that encourages motivation, enhances accomplishments, leads to job satisfaction, and invigorates participation in the implementation of quality improvement plans.
2.3.5	The effectiveness of members holding executive authority is periodically evaluated, and timely corrective action is taken to rectify any deficiencies.
2.2.6	The institution has an updated comprehensive manual, documenting the regulations, bylaws, policies, and administrative, financial, and legal procedures concerning the faculty and staff. This manual is available in both electronic and print formats.

Suggested Prompts for Quality Indicator 2.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the institution, in its administrative practices and operations, adhere to effective governance and follow an organizational structure that outlines clear job descriptions, responsibilities and procedures?
2. To what extent does the institution adhere to the principle of administrative accountability, self-assessment and continuous evaluation processes?
3. What mechanisms does the institution employ to follow up, assess, and assure the quality of the work performed by its employees?

4. What evidence exists that institutional units and sectors engage in collaborative efforts to create and maintain an enabling environment that is conducive to productivity?
5. Did the institution conduct, within the previous four years, a review of the effectiveness of its administrative units in charge of student affairs and services? What new actions/initiatives were undertaken?

Analysis and Evaluation Re: 2.3					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 2.3.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 2.3.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 2.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 2.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 2.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 2.3.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

2.4 The institution's members holding executive authority adhere to the ethics and practices of good governance and professional excellence.

Components of the Quality Indicator	
2.4.1	The institution adheres to the principles of administrative accountability, self-assessment and continuous evaluation.
2.4.2	The institution adheres to the norms of objectivity and transparency in the preparation of its self-assessment reports.
2.4.3	The institution has a system of accountability that ensures the effective implementation of duties and responsibilities by its executive cadres, staff and faculty, within the set time limits, and in accordance with the norms of integrity, impartiality, honesty, and the values outlined in the institutional General Frame of Reference.
2.4.4	The institution has in place well-defined regulations ensuring that matters concerning student admissions, appointments of faculty and staff, application of disciplinary measures, dismissals and terminations, are fair and non-discriminatory in nature, and make no judgments on grounds of gender, religion, ethnic/national origin, creed, political belief, or physical impairment.

Suggested Prompts for Quality Indicator 2.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the institution enforce its regulations and ethics regarding student admissions, appointments of faculty and staff, application of disciplinary measures, dismissals and terminations, are fair and non-discriminatory (in regards to gender, religion, ethnic/national origin, creed, political belief, or physical impairment)?
2. How does the institution conceptualize norms of integrity, impartiality, and honesty in regard to administrative practices?

3. What practices does the institution follow to ensure that it adheres to the principles of administrative accountability?
4. How deeply infused is the culture of accountability and non-discrimination across the institution? What evidence exists to substantiate the institution's claims?

Analysis and Evaluation Re: 2.4						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 2.4.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 2.4.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 2.4.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 2.4.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 2.4.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 2.4.					
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.					
Compliance Rating	0	1	2	3	4	
Rationale for Excluding Actions Number (specify)						

2.5 Members holding executive authority show commitment to the processes of quality assurance and continuous improvement by implementing the institution's quality improvement plan(s).

Components of the Quality Indicator	
2.5.1	The units and sectors of the institution undertake developmental and quality improvement initiatives.
2.5.2	The institution develops a mechanism for follow-up, assessment, and quality assurance, as well as development of leadership modalities.
2.5.3	The institution has a strategic plan for quality improvement, which is comprehensive, based on expert studies, publically announced, and systematically implemented, and is consistent with the institution's General Frame of Reference.
2.5.4	The institution has a mechanism for quality assessment and review of policies, degree programs, and performance of units and sectors at all levels. In addition, the institution has an assessment mechanism for evaluating the performance of executives in key leadership positions.
2.5.5	The institution has an academic accreditation and quality assurance unit, with a liaison officer, responsible for communicating with the NBAQ.
2.5.6	The institution generates comprehensive, analytical Annual Reports that (a) analyze in precise and accurate terms the status of the institution and the execution of its developmental strategic plan, (b) record strengths and weaknesses, and (c) list institutional overall performance, inclusive of its units and sectors. The Annual Reports are published and available in both print and electronic formats.
2.5.7	The institution has clear regulations and policies for rewarding excellent and distinguished campus community members.
2.5.8	The institutional statistics and self-studies provide empirical evidence of the participation of various sectors in the implementation of quality improvement plans.

Suggested Prompts for Quality Indicator 2.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How do the different units and sectors of the institution participate in the developmental and quality improvement initiatives?
2. What mechanisms are in place to assess and review the institution's policies, academic programs, and performance of units and sectors?
3. How does the institution evaluate its relationship with its Academic Accreditation and Quality Assurance Unit and the National Bureau for Academic Accreditation and Education Quality Assurance?
4. How were the SWOT analyses (or their equivalent) used to quality assure sectors of the institution?
5. How have the institution's mechanisms for quality assessment and its academic accreditation and quality assurance unit impacted curricula development, student services, and infrastructure improvement?
6. How are annual reports used to guide decision making in regard to the improvement of units and sectors, including academic departments? And how did the institution's annual reports during the previous four years prompt new policies and developmental initiatives?

Analysis and Evaluation Re: 2.5	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 2.4.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 2.4.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 2.4.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 2.5.

Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 2.5.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 2.5.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard III

Faculty

Note: The term “faculty” refers to all those an institution assigns to teach and instruct students in academic and occupational/technical degree programs.

A. Standard Requirements

The institution recruits a competent faculty with high-level credentials, in specific disciplines, for teaching and instructional purposes, on a full-time basis (in the main), and the faculty observes academia’s professional ethics.

B. Quality Indicators

- 3.1 The institution has a clear strategic plan regarding the recruitment of qualified faculty. The institution employs a competent faculty and ensures the professional development of the existing faculty and its continued employment.
- 3.2 The institution implements bylaws that set the required professional qualifications of its faculty members, by discipline and degree level, as appropriate for the type and level of degree program.
- 3.3 The number of faculty members and academic/training staff is sufficient to meet the operational demands of each of the degree programs.
- 3.4 The institution implements its bylaws regarding faculty’s responsibilities, rights, and reward policies. These bylaws are compatible with international norms.
- 3.5 The institution ensures that faculty members and academic/training staff are committed to the processes of quality assurance and continuous improvement.

C. Key Components of the Quality Indicators of Standard III

- 3.1 The institution has a clear strategic plan regarding the recruitment of qualified faculty. The institution employs a competent faculty and ensures the professional development of the existing faculty and its continued employment.

Components of the Quality Indicator	
3.1.1	The institution applies clear and firm criteria in the recruitment of prospective faculty members, whether appointed on full-time, part-time or secondment basis, in accordance with established guidelines.
3.1.2	The institution ensures that full-time instructors form a substantial percentage of its faculty composition; and reliance on temporary and part-time instructors occurs only when absolutely necessary.
3.1.3	The institution encourages the faculty to participate in professional development programs and workshops (concerning teaching strategies, research methodologies, application of new technologies, and quality enhancement issues, in general).
3.1.4	The institution observes international measures regarding the job security of its component faculty and academic/training staff.

Suggested Prompts for Quality Indicator 3.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the institution have a clear strategic plan regarding the recruitment of competent faculty, the professional development of the existing faculty members and their continued employment? If so, explain its merits.
2. How effectively did the institution's strategic plans (over the previous four years) guide faculty recruitment and policies related to faculty affairs?
3. How effective are the institution's policies regarding the recruitment and retention of qualified faculty?
4. What are the most significant challenges facing the institution in regard to the retention of distinguished faculty? What plans did the institution adopt to tackle this issue.
5. How does the appointment of faculty on part-time, visiting and secondment impact the quality of programs?

Analysis and Evaluation Re: 3.1 Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 3.1.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 3.1.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 3.1.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 3.1.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 3.1.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 3.1.					
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.					
Compliance Rating		0	1	2	3	4
Rationale for Excluding Actions Number (specify)						

3.2 The institution implements bylaws that set the required professional qualifications of its faculty members, by discipline and degree level, as appropriate for the type and level of degree program.

Components of the Quality Indicator	
3.2.1	Faculty members hold high-level qualifications, with advanced degrees from recognized universities and educational institutions, in specific fields of specialization.
3.2.2	The faculty's expertise in each program is wide-ranging and diversified.

3.2.3	The faculty distribution in various academic ranks, positions and categories is appropriate and reflective of the levels of expertise and professional accomplishments.
3.2.4	The faculty hold positions, on full-time (in the main), part-time, and visiting and secondment bases, within each program, as per the employment system.

Suggested Prompts for Quality Indicator 3.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What percentage of faculty members hold high qualifications, with advanced degrees from recognized universities, in specific fields of specialization?
2. Are the faculty's areas of expertise in each program wide-ranging and diversified?
3. What is the number of faculty in each academic within each academic program? What do these numbers reveal?
4. Are there significant differences between programs (and colleges) in regard to faculty size and distribution in terms of academic rank? What plans does the institution adopt to manage the situation?

Analysis and Evaluation Re: 3.2	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 3.2.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 3.2.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 3.2.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 3.2.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 3.2.

Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 3.2.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

3.3 The number of faculty members and academic/training staff is sufficient to meet the operational demands of each of the degree programs.

Components of the Quality Indicator	
3.3.1	The students-faculty ratio in each academic/professional/occupational program is consistent with international norms and standards.

Suggested Prompts for Quality Indicator 3.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Is the student-faculty ratio in each academic/professional program consistent with international norms and standards?
2. What do statistics on student-faculty ratios in each academic program offered by the institution indicate?

Analysis and Evaluation Re: 3.3	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 3.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 3.3.

Action 3	Account for strengths and weakness and challenges per Quality Indicator 3.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 3.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 3.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 3.3.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

3.4 The institution implements its bylaws regarding faculty's responsibilities, rights, and reward policies. These bylaws are compatible with international norms.

Components of the Quality Indicator	
3.4.1	The institution has a manual for job descriptions, specifying the qualifications and responsibilities, salary and financial benefits associated with each academic rank, position and category, whether full-time, part-time, visiting, or on secondment.
3.4.2	The faculty participates in preparing, developing, and revising the curricula of degree programs.
3.4.3	The faculty is committed in its teaching practices, adhering to the philosophy of education that is centered on student learning outcomes.

3.4.4	The faculty actively pursues scholarly and scientific research, generating new knowledge, and the faculty demonstrates academic/scientific/occupationally-related merit.
3.4.5	The faculty's work hours cover the core responsibilities of teaching and research, and service to the institution and society at large.
3.4.6	The institution implements a policy of granting sabbatical leave to faculty.
3.4.7	The institution ensures that the work climate is conducive to productivity, and encourages professional development and retention of faculty.
3.4.8	The institution is committed to provide employment security to its competent faculty through tenure and long-term contracts.
3.4.9	The institution bestows recognition and rewards on faculty that excels in teaching, research, and service to the institution and society at large.
3.4.10	The institution promptly investigates faculty grievances and complaints, and maintains transparency in its dealings with such.
3.4.11	The institution guarantees through explicit laws faculty's academic and intellectual freedom as well as freedom of expression.

Suggested Prompts for Quality Indicator 3.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent is faculty active in the development of new courses and programs and the improvement of running programs?
2. How does the administration/unit describe and assess the faculty's research productivity and new knowledge generation in each of the academic programs offered by the institution.
3. What are the quality standards/criteria for faculty performance? How are they communicated to faculty members? How often are these criteria met?

4. How has the faculty teaching load impacted its teaching and research performance and its services toward the community?
5. How does the institution ensure that the work climate is conducive to productivity? And, how does it encourage faculty retention and professional development?
6. On average, what percentage of faculty members met the institution's criteria for promotion? What percentage met contract renewal criteria?

Analysis and Evaluation Re: 3.4					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 3.4.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 3.4.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 3.4.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 3.4.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 3.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 3.4.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

3.5 The institution ensures that faculty members and academic/training staff are committed to the processes of quality assurance and continuous improvement.

Components of the Quality Indicator	
3.5.1	The institution assigns an equitable workload to faculty, encompassing teaching, research, service to the institution and society, student advisement, and participation in institutional development.
3.5.2	Faculty members are committed to and competent in performing their duties and responsibilities.
3.5.3	Faculty's classroom performance indicates teaching competence and expertise in instructional methods that bolster student learning outcomes.
3.5.4	The institution periodically assesses the faculty's performance in terms of teaching, research, professional and community service, according to established and clear procedures.
3.5.5	The institution provides the faculty adequate opportunities for the enhancement of competencies and professional advancement through the provision of sabbatical leaves, academic missions, and allocation of resources and financial support to attend and participate in conferences, and collaborate with professional and professionally-specialized organizations and societies.
3.5.6	Faculty's entitlement to academic positions is determined on the basis of their academic qualifications, scientific publications, patents achieved (if applicable), teaching competency, and professional experience.

Suggested Prompts for Quality Indicator 3.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent is the workload assigned to faculty in balance with time needed for research, student supervision, and contributions to the community?

2. How does the institution assess the faculty members in regard to teaching, research and community services?
3. How does the institution promote effective teaching among its faculty members?
4. What were/are the results of newly introduced faculty policies/bylaws on the effectiveness of teaching, research, and community outreach?
5. What steps are taken when an achievement gap among faculty members is observed?

Analysis and Evaluation Re: 3.5					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 3.5.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 3.5.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 3.5.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 3.5.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 3.5.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 3.5.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard IV

Student Affairs and Support Services

A. Standard Requirements

The institution sets and implements admission requirements, determining the level of preparedness of students to be admitted. The institution, moreover, implements a system of student support services that ensures their rights and provides venues for self-improvement.

B. Quality Indicators

- 4.1 The institution sets and implements bylaws and/or procedures that specify the admission requirements to its degree programs. These bylaws and/or procedures are uniformly applied.
- 4.2 The institution implements its bylaws and/or procedures regarding conditional admission (if permissible), credit-transfer policies, and course equivalence policies.
- 4.3 The institution implements a system of student support services that ensure student rights.
- 4.4 The institution provides diverse venues for student self-improvement.
- 4.5 The institution implements an efficient system that integrates the diverse matters of student affairs.

C. Key Components of the Quality Indicators of Standard IV

- 4.1 The institution sets and implements bylaws and/or procedures that specify the admission requirements to its degree programs. These bylaws and/or procedures are uniformly applied.

Components of the Quality Indicator	
4.1.1	The institution has in place a specialized unit that oversees student admissions.
4.1.2	The institution sets and implements admission policies based on the principles of equality and integrity.

4.1.3	The institution adhere to admission criteria that are well-defined and publically announced. The institution uniformly applies admission requirements on students seeking admission.
4.1.4	The institution ensures that the number of students admitted is within the capacity of the degree programs and the limits of available physical facilities.
4.1.5	The institution has specific criteria for admission to select programs. These criteria are consistently applied.
4.1.6	Admission criteria to graduate programs normally include a bachelor's degree in an appropriate field.

Suggested Prompts for Quality Indicator 4.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution set and implement its admission policies?
2. On what basis does the institution determine the number of students admitted to each of its academic programs?
3. To what extent does the institution take the number of available faculty members and available physical facilities into account in determining the number of students admitted to each program?
4. How does the institution determine the level of preparedness of the students to be admitted?
5. How does the institution's student policies/requirements relate to its mission and goals?
6. What do data and statistics about student enrollment, retention, and withdrawal/dismissal reveal about the effectiveness of admission policies and criteria?

Analysis and Evaluation Re: 4.1

Mark √ for actions implemented. Justify the exclusion of unmarked actions.

Action 1	State the prompt questions relevant to 4.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 4.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 4.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 4.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 4.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 4.1.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

4.2 The institution implements its bylaws and/or procedures regarding conditional admission (if permissible), credit-transfer policies, and course equivalence policies.

Components of the Quality Indicator

4.2.1	The institution adheres to its policies of conditional admission (if permissible).
4.2.2	The institution adheres to its credit-transfer policies.
4.2.3	The institution strictly observes its policy of course equivalence.

Suggested Prompts for Quality Indicator 4.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the institution use a policy of conditional admission? If yes, how often does the institution apply this policy? How consistently does it apply it?
2. How does the institution's understanding of its mission and goals shape its policies on conditional admission, credit transfer, and course equivalence?

Analysis and Evaluation Re: 4.2					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 4.2.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 4.2.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 4.2.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 4.2.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 4.2.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 4.2.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

4.3 The institution implements a system of student support services that ensure student rights.

Components of the Quality Indicator	
4.3.1	The institution has a unit that oversees student guidance and orientation, organizes a range of services, extra and co-curricular activities, as well as student field exposure. The institution promptly responds to student queries and addresses student problems as a fundamental principle of professional ethics and work protocol.
4.3.2	The institution documents and publishes explicit and readily-available bylaws and guidelines on the rights, responsibilities, on-campus ethics and proper conduct of students.
4.3.3	The admission conditions and graduation requirements (as per curriculum taught) are publically available and readily accessible to all potential applicants well before the application deadline.
4.3.4	The institution ensures that course offerings allow for a timely progress and graduation of students.
4.3.5	The institution consistently observes its policies governing course registration and withdrawal.
4.3.6	The institution, through an efficient on-line registration system and qualified faculty and staff, renders effective student academic guidance.
4.3.7	The institution's technology concerning student affairs and course registration is user-friendly, and readily-accessible.
4.3.8	The institution ensures that students are informed periodically regarding their academic progress and the necessary requirements for graduation, via the registration system and/or emails, and other means.
4.3.9	The institution maintains an efficient and secure system for the safety, confidentiality and protection of student records.

4.3.10	The institution systematically and accurately updates student files.
4.3.11	The institution has provision for ensuring the availability of first aid and primary healthcare services.
4.3.12	The institution renders effective psychological and social counseling through specialized units and qualified staff.
4.3.13	The institution has specific procedures concerning the submission of complaints and grievances, and for investigating such within set time lines. The institutional bylaws do not permit unwarranted disciplinary or punitive measures against students who file complaints or grievances.
4.3.14	The institution adopts an unbiased and fair approach in dealing with student grievances and matters concerning disciplinary action.

Suggested Prompts for Quality Indicator 4.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How effective and frequent is the institution's communication with its students in regarding their academic progress and graduation requirements?
2. What procedures are in place to handle student complaints and grievances?
3. To what extent do student support services bolster the students' achievement of key learning outcomes in the general education program?
4. What processes and mechanisms are in place to ensure the quality of student academic guidance? What initiatives did the institution introduce during the previous four years to improve student academic guidance and orientation?
5. What efforts have been undertaken by the unit responsible for student counseling, social as well as psychological, to enhance the effectiveness of its services? And what efforts are undertaken to develop the skills of its social and psychological counselors?

Analysis and Evaluation Re: 4.3						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 4.3.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 4.3.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 4.3.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 4.3.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 4.3.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 4.3.					
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.					
Compliance Rating		0	1	2	3	4
Rationale for Excluding Actions Number (specify)						

4.4 The institution provides diverse venues for student self-improvement.

Components of the Quality Indicator	
4.4.1	The institution ensures the efficiency of the center for student training, internship, and career guidance.
4.4.2	The institution ensures the efficiency of the center for graduating students' employment.
4.4.3	The institution organizes self-improvement activities for its students.

Suggested Prompts for Quality Indicator 4.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution assess its student training, internship, and career guidance?
2. How does the institution ensure that its graduates have attained requisite competencies, knowledge literacy, skills and training in their field of specialization?
3. How does the institution verify that its graduates have reasonably met the requirements of employability?
4. In what ways does the current dispensation/management of the institutional budget reflect priorities given to students self-improvement activities?

Analysis and Evaluation Re: 4.4	
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 4.4.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 4.4.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 4.4.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 4.4.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 4.4.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 4.4.

Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

4.5 The institution implements an efficient system that integrates the diverse matters of student affairs.

Components of the Quality Indicator	
4.5.1	The institution has a comprehensive and up-to-date catalog, both in electronic and print formats, providing first-hand information and guidelines on course registration procedures and requirements, graduation requirements, and student bylaws. The catalog also includes a descriptive account of all programs and courses offered as well as information concerning the affiliated faculty of programs.
4.5.2	The institution publishes its academic calendar, making it readily accessible.
4.5.3	The institution announces on its website, and through other media channels, the dates that are important for student affairs.
4.5.4	At the beginning of each semester, the institution organizes an orientation program for newly-admitted students.
4.5.5	The institution has an efficient electronic system in place that networks offices and provides online student support services as well as access to archived data and information.
4.5.6	The institution utilizes diverse means and channels to keep its integral offices and constituencies informed and updated on changes in student bylaws and degree programs, policies, and courses offered.
4.5.7	The institution effectively utilizes students records and data-files for generating analytical and statistical studies to help the top governing body/administration and units to bolster operational efficiency and the effectiveness of planning and developmental processes.

4.5.8	The administration oversees the implementation of bylaws governing student on-campus ethical conduct, and takes necessary disciplinary measures against any student violating the bylaws. Punitive measures are taken against any student who resorts to cheating and plagiarism.
4.5.9	The institution allocates a percentage of its budget for organizing and supporting the cultural, artistic, and athletic activities of students.

Suggested Prompts for Quality Indicator 4.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the institution implement its bylaws governing students' on-campus ethical conduct?
2. What are the types of measures taken against students who resort to cheating and plagiarism?
3. How has data related to students affairs impacted curricula and teaching methods?
4. What measures are undertaken to ensure that resources allocated to cultural, artistic, and athletic activities are sufficient?

Analysis and Evaluation Re: 4.5	
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 4.5.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 4.5.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 4.5.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 4.5

Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 4.5.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 4.5.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard V

Degree Programs

Note: The term “a degree program” refers to a prescribed curriculum composed of a sequence of credit courses that mandate contact hours and whose successful completion terminates in the awarding of a degree. Degree programs can be academic, professional, occupational, and technical.

A. Standard Requirements

The institution’s degree programs are aimed at achieving the vision, mission, objectives, and values that are specified in its General Frame of Reference (GFR). The institution develops and implements its degree programs in accordance with legislative frameworks and mechanisms that assure adherence and compatibility of curricular content, teaching methods and practices to globally acceptable quality standards.

B. Quality Indicators

- 5.1 Each degree program has a clear vision, mission, and set of objectives and values, which are consistent with the institution’s General Frame of Reference. Moreover, the curricula of the programs are established within internationally recognized frameworks.
- 5.2 The management of each degree program is in the hands of an effective administration that is responsible for overseeing the implementation of the program’s quality development.
- 5.3 Qualified faculty and staff, and the necessary resources for effective implementation and quality assurance, are available for degree programs.
- 5.4 Each program targets the accomplishment of a set of key learning outcomes and competencies, which prepare graduates for employment and good citizenship.
- 5.5 The institution offers graduate programs that are consistent with international standards (if applicable).
- 5.6 The institution has a specialized unit for assessing and improving the quality of degree programs, as well as maintaining cooperation with programmatic accreditation agencies/societies.

C. Key Components of the Quality Indicators of Standard V

5.1 Each degree program has a clear vision, mission, and a set of objectives and values, which are consistent with the institution's General Frame of Reference. Moreover, the curricula of the programs are established within internationally recognized frameworks.

Components of the Quality Indicator	
5.1.1	Each program is guided by a clear vision and mission, and objectives and values, reflected in their compatibility with the program's curriculum.
5.1.2	The General Education component carries about one third of the credits for programs in the humanities and social sciences.
5.1.3	The Core Program in General Education includes courses in the humanities, literature, arts, and social and behavioral sciences. This program does not include specialized courses or professional training. The General Education of occupational/technical programs contains applied courses that are occupationally-related.
5.1.4	As mandatory requirements, the institution offers an English language competency program, an Arabic language competency program, and course(s) in the history of Kuwait.
5.1.5	The institution conducts English language competency tests—a prerequisite for students opting for enrolment in programs that use English as the medium of instruction.
5.1.6	The institution has a comprehensive and updated manual on programs and curricula, together with a brief description of the courses offered, the nature and objectives of each program, the enrollment prerequisites, and the faculty's credentials in-brief. The manual is available both in print and electronic formats.

Suggested Prompts for Quality Indicator 5.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How have the institution's vision, mission, and goals impacted the establishment and/or review of the current visions, missions, and goals of degree programs?
2. What are some of the international features of the academic programs? And what are some of their distinctive features?
3. What types of courses does the Core Program in General Education contain?
4. What steps did the institution undertake to improve student competencies in the English and Arabic languages?
5. What initiatives/revisions has the institution undertaken to enhance the quality and effectiveness of the General Education Program during the previous four years?

Analysis and Evaluation Re: 5.1						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 5.1.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 5.1.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 5.1.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 5.1.					
Action 5	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 6	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 5.1.					
Action 7	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 5.1.					
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.					
Compliance Rating	0	1	2	3	4	
Rationale for Excluding Actions Number (specify)						

5.2 The management of each degree program is in the hands of an effective administration that is responsible for overseeing the implementation of the program's quality development.

Components of the Quality Indicator	
5.2.1	The institution designs its degree programs according to a sound framework and in keeping with the requirements of developing multiple skills and sufficient knowledge literacy levels, in accordance with the needs of the courses in the various disciplines.
5.2.2	Each program adheres to well-publicized, clearly-defined policies on student admission, graduation requirements, and instructional methodologies, as well as acquirement of requisite skills and learning experiences.
5.2.3	In matters of the overall distribution of credits, the institution adheres to clearly defined policies: — A diploma program carries a minimum of 60 credits, based on a semester system; the requirements of other educational systems must be compatible with this indicator. — A bachelor's degree program carries a minimum of 120 credits, based on a semester system; the requirements of other educational systems must be compatible with this indicator. — The minimum credit requirement for a Master's degree programs is 30 credits for the semester system. Programs that follow other systems are required to demonstrate compatibility with this indicator of performance credibility.
5.2.4	The institution follows clear policies in the implementation, award, equivalence, and transfer of credits. The maximum number of credits allowed in transfer from other institutions is 30 for a diploma, and 60 for a bachelor's degree program.
5.2.5	A central unit is responsible for the supervision, effectiveness, and quality development of the Core Program in General Education.

5.2.6	The degree program periodically offers to students all courses listed in the curriculum.
5.2.7	The institution deploys standardized assessment tools for the evaluation, review, and quality enhancement and update of degree programs.
5.2.8	The institution has in place clear and simple procedures for curriculum revision, improvement, and change.
5.2.9	Each degree program implements a system of student orientation and advisement.
5.2.10	An annual review of the student orientation plan is carried out by the degree program's administration, based on feedback from academic counselors, and electronic surveys of student satisfaction.
5.2.11	The continuing education program falls within the institutional General Frame of Reference, and is consistent with the functionality of degree programs.
5.2.12	The institution consults with concerned faculty before offering new programs.
5.2.13	The institution has well defined and simple mechanism(s) for initiating new programs, in keeping with development of knowledge, as well as professional fields.

Suggested Prompts for Quality Indicator 5.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What types of interdepartmental and intercollegiate collaboration and interaction exist with regard to curricula and course offerings?
2. Is the number of faculty in each program adequate to cover the range of courses and disciplines offered?
3. How does the institution assess its academic programs?
4. Who participated in establishing and reviewing of plans for the quality development of programs?

5. To what extent do programs utilize alumni feedback in the revision of curricula?

Analysis and Evaluation Re: 5.2					
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 5.2.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 5.2.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 5.2.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 5.2.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 5.2.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 5.2.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

5.3 Qualified faculty and staff, and the necessary resources for effective implementation and quality assurance, are available for degree programs.

Components of the Quality Indicator	
5.3.1	The faculty and staff associated with each degree program hold appropriate qualifications.

5.3.2	The faculty actively participates in developing, approving, and updating degree programs.
5.3.3	The institution makes available the necessary support services and facilities for the effective operation of each degree program, and ensures efficient management of the programs offered.
5.3.4	The institution complies with the principle that each program receives sufficient funds and support to maintain its good quality.

Suggested Prompts for Quality Indicator 5.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the current allocation of resources to each offered program reflect the institution's commitment to its strength and the employability of its graduates?
2. How does the institution demonstrate that its academic programs receive sufficient funds to maintain the quality of the programs?
3. How does the institution ensure the effective operation and efficient management of its academic programs?

Analysis and Evaluation Re: 5.3 Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 5.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 5.3.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 5.3.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 5.3.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 5.3.

Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 5.3.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

5.4 Each program targets the accomplishment of a set of key learning outcomes and competencies, which prepare graduates for employment and good citizenship.

Components of the Quality Indicator	
5.4.1	Each program aims at a well-defined set of learning outcomes as indicators of the extent and quality of student knowledge literacy and acquisition of expected skills, character traits, and competencies. Occupational/technical programs identify the advanced tools and equipments with which students must demonstrate competency.
5.4.2	The learning outcomes and competencies of the graduates of each program are compatible with the requirements of final degrees as well as the target/plausible profession(s).
5.4.3	The institution verifies that its graduates have attained requisite competencies, knowledge literacy, skills and training in their field of specialization, as well as reasonably meet the employability requirements.

Suggested Prompts for Quality Indicator 5.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent do major and minor program sheets/curricula taught demonstrate curricular coherence and integration of diverse skills and competencies?
2. What mechanism is in place to determine and review the key student learning outcomes, competencies, and character traits acquired in the academic programs?
3. How well publicized are statements of key learning outcomes? How well are faculty and students aware of key learning outcomes and competencies at program, course, and general education levels?
4. What mechanism is in place in regard to the selection of textbooks and course instructional materials?
5. Is library acquisition of resources consistent with the course offerings of graduate and undergraduate programs?
6. What mechanism is in place to ensure that instruction in undergraduate courses meets the program's goals for student knowledge literacy, expected skills and competencies, and character traits?

Analysis and Evaluation Re: 5.4 Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 5.4.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 5.4.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 5.4.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 5.4.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 5.4.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 5.4.

Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

5.5 The institution offers graduate programs that are consistent with international standards (if applicable).

Components of the Quality Indicator	
5.5.1	For the sustention of each graduate program, the institution provides support, including financial funds, information resources, instructional technologies, research resources, equipment, laboratories and consumables (where applicable), etc.
5.5.2	The institution has clearly-specified guidelines for identifying and selecting qualified and competent prospective students to join graduate programs.
5.5.3	The graduate degree programs are aimed at the development of self-learning skills, advancing scientific research competencies, developing critical thinking, and promoting creative abilities and innovation skills in students.
5.5.4	The essential components of each graduate degree program include specialized and/or interdisciplinary courses, and research. The professional program, apart from providing professional training, also includes practical and/or research exposure as an essential component.
5.5.5	A committed and specialized faculty, invariably working on a full-time basis, teaches graduate courses. This faculty is active in research and knowledge production.
5.5.6	The institution's permissible limit for transfer of credits from other institutions, for graduate degree programs, does not exceed 20 percent of the total credits earned.

5.5.7	The graduate degree programs rely on a system of periodic self-evaluation of performance in a bid to identify their strengths, weaknesses, opportunities, threats, and paths to improvement. The programs refine their quality by acting on the findings of their self-evaluations.
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Suggested Prompts for Quality Indicator 5.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What measures does the institution take to ensure that its graduate programs are well sustained?
2. How do the objectives of the graduate programs relate to the development of Kuwait?
3. How does the institution interlink its graduate and undergraduate programs in terms of curricula and student competencies?
4. What is the percentage of faculty involved in graduate programs?
5. How does the institution assess the effectiveness of its graduate programs?
6. What are the most significant challenges facing graduate programs? What measures are in place to address these challenges?

Analysis and Evaluation Re: 5.5	
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 5.5.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 5.5.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 5.5.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 5.5.

Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 5.5.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 5.5.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

5.6 The institution has a specialized unit for assessing and improving the quality of degree programs, as well as maintaining cooperation with programmatic accreditation agencies/societies.

Components of the Quality Indicator	
5.6.1	The institution periodically measures the level of skills and competencies acquired by students in regard to the General Education Program and in regard to the language of instruction, research writing and training.
5.6.2	The faculty effectively deploys measures and mechanisms for quality assurance, and effectiveness of teaching methods and instructional processes used in degree programs.
5.6.3	The institution assesses the effectiveness of student training programs and the quality and merit of student graduation projects.
5.6.4	Degree programs benefit from the feedback received from students on improving teaching methods and updating curricula.
5.6.5	Each degree program has a system for outreach and follow-up with alumni.

5.6.6	Each program has a committee that oversees the program's accreditation and quality assurance.
5.6.7	The institution has secured, or has plans to secure, the accreditation of its degree programs by programmatic accreditation agencies that are approved by the NBAQ.

Suggested Prompts for Quality Indicator 5.6

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the institution have a specialized unit for assessing and improving the quality of academic programs, as well as maintaining cooperation with institutions and societies, specialized in accreditation of programs?
2. How well do faculty in each program understand the role of quality assurance mechanisms and measures? How receptive is the faculty to the importance of quality assurance?
3. What evidence exists that the institution used assessment results to improve the quality of its academic programs?
4. What are the plans of the institution regarding the accreditation of its academic programs?
5. How do the academic programs respond to accreditation and quality assurance issues and recommendations?

Analysis and Evaluation Re: 5.6	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 5.6.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 5.6.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 5.6.

Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 5.6.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 5.6.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 5.6.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard VI

Teaching Strategies and Methods & Student Learning Assessment

A. Standard Requirements

The institution relies on effective methods and teaching strategies as its fundament, and it offers students the opportunities to acquire needed competencies, aimed at enhancing their skills and creative abilities. The institution also deploys instructional technologies that, in a way compatible with the demands and nature of the degree programs, strengthen the acquisition of knowledge and skills by students. The institution applies clear and varied techniques for assessing and analyzing the extent and depth of acquisition of learning outcomes by students.

B. Quality Indicators

- 6.1 The institutional academic/educational facilities (libraries, laboratories, etc.) are well-equipped with information, instructional, scientific, and reference resources, which are continuously developed and upgraded.
- 6.2 The faculty uses effective teaching methods and strategies in classrooms, laboratories, and training facilities. Moreover, the faculty observes the standard protocols of effective teaching.
- 6.3 The students are provided with an educational environment that challenges their minds and develops their potentials and capabilities.
- 6.4 The institution ensures that assessment methods are effective, and indicative of the extent and various levels of students' academic achievements and/or occupationally-related knowledge and skills.
- 6.5 The institution has a system for periodic review and quality improvement of methods and strategies deployed in the teaching-learning cycle. This system relies on the feedback of students, faculty and the stakeholders, as well as assessment outcomes.

C. Key Components of the Quality Indicators of Standard VI

- 6.1 The institutional academic/educational facilities (libraries, laboratories, etc.) are well-equipped with information, instructional, scientific, and reference resources, which are continuously developed and upgraded.

Components of the Quality Indicator	
6.1.1	An efficient system oversees the management of the academic/educational facilities in terms of daily operations and the rendering of services.
6.1.2	The institution has efficient computer/technology systems which provide robust support for the delivery of effective teaching as well as student learning.
6.1.3	Educational course material, including textbooks, is available for students at the beginning of the semester.
6.1.4	The institution provides students with disabilities with the necessary instructional material, with the aim of facilitating their learning needs and supporting their academic progress.
6.1.5	The institution has a system that facilitates electronic communication between the faculty and students.

Suggested Prompts for Quality Indicator 6.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent are teaching strategies and student learning assessment methods reflective of programs' mission and goals?
2. How adequate are available instructional resources and technologies in classrooms and instructional sites for the delivery of effective teaching and student learning?
3. How is the library involved in providing the needed support for effective teaching and student learning?
4. What measures does the institution implement to ensure a system that promotes the intellectual, artistic, and personal development of students?

Analysis and Evaluation Re: 6.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 6.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 6.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 6.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 6.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 6.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 6.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

6.2 The faculty uses effective teaching methods and strategies in classrooms, laboratories, and training facilities. Moreover, the faculty observes the standard protocols of effective teaching.

Components of the Quality Indicator	
6.2.1	The institution trains its faculty in new instructional technologies; the faculty implements these technologies in classrooms and training premises. The faculty avoids instructional methods that encourage reliance on memorization.

6.2.2	The faculty uses appropriate instructional technologies and knowledge delivery systems in its education venues.
6.2.3	The institution extends assistance to faculty in teaching and training, facilitating the grading of student assignments, conducting tutorials and skill-development workshops, and organizing co-curricular activities.
6.2.4	The curricula of programs ensure that students utilize a variety of learning resources, and acquire a firm grasp in using instructional and library technologies, as well as research databases.
6.2.5	The institution encourages the faculty to pursue research that enhances the quality of teaching methods and instructional processes.
6.2.6	The faculty maintains sufficient and periodic office hours.
6.2.7	The ratio of student to faculty in each course is consistent with international norms and is in line with established quality standards.
6.2.8	Students receive a detailed course description at the beginning of the semester.
6.2.9	Senior students are trained in gathering and analyzing data, applying various up-to-date methodological and analytical tools as per the concerned discipline's requirements.
6.2.10	Senior capstone and graduation research projects constitute an essential component of degree programs. They are characterized by diversity, are geared towards proposing solutions to societal problems and issues, and are demonstrative of the acquisition of holistic skills and competencies.
6.2.11	The institution has in place a system for monitoring students' class attendance, and conducts periodic studies to maintain statistical records of their attendance and absence.

Suggested Prompts for Quality Indicator 6.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. In what ways does the institution promote the culture of creativity and inquisitiveness among its students?
2. In what ways does the institution promote innovations in teaching strategies and methods among its faculty?
3. How does the institution respond to faculty using ineffective instructional and student assessment methods in relation to the nature of courses?
4. What is the percentage of faculty members who were involved during the previous four years in research related to teaching methods and instructional processes?
5. How does the institution ensure that its graduates are trained in critical thinking and the use of analytical tools?

Analysis and Evaluation Re: 6.2	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 6.2.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 6.2.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 6.2.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 6.2.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 6.2.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 6.2

Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

6.3 The students are provided with an educational environment that challenges their minds and develops their potentials and capabilities.

Components of the Quality Indicator	
6.3.1	The institution ensures that instructor-student interaction, class discussion, inquiry, and exchange of ideas are essential strategies in the teaching of courses.
6.3.2	The teaching of soft skills is an integral part of curricula, including teamwork competencies, time management, presentations, reporting skills, as well as professional and behavioral ethics.
6.3.3	The institution offers workshops and extracurricular activities that provide students with the necessary learning experiences, refining their written, oral, communication and practical skills.
6.3.4	The institution utilizes up-to-date technologies to motivate students to engage in self-education. Teaching methods include a practical component aimed at developing student skills for self-learning.
6.3.5	The institution encourages students to participate in research activities, forums and conferences. The institution has in place a system to reward students endowed with innovative abilities and research competencies.
6.3.6	Students acquire sufficient knowledge of the principles of research, application of research methodologies, and ethical considerations in research (if relevant).
6.3.7	The institution has channels to disseminate students' intellectual and creative achievements as well as scholarly research.

6.3.8	The institution applies varied and explicit assessment tools for evaluating and analyzing the extent of students' acquisition of learning outcomes as well as their satisfaction with the institution's learning environment.
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Suggested Prompts for Quality Indicator 6.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How deeply infused are student-centered teaching and interactive pedagogy among faculty members?
2. How strong is the institution's commitment to the dissemination of interactive instruction and reliance on class discussion and inquiry as imperative teaching strategies? What policies and procedures bolster this commitment?
3. How does the institution demonstrate its commitment to encouraging students' creativity and their pursuit of research and intellectual activities?
4. How does each academic program emphasize the teaching of soft skills?
5. To what extent do teaching and assessment methods promote aptitudes for self-learning in students?

Analysis and Evaluation Re: 6.3	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 6.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 6.3.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 6.3.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 6.3
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 6.3

Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 6.3				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

6.4 The institution ensures that assessment methods are effective, and indicative of the extent and various levels of students' academic achievements and/or occupationally-related knowledge and skills.

Components of the Quality Indicator	
6.4.1	Each program relies on a mechanism that ensures that course assessment methods are compatible with the targeted learning outcomes.
6.4.2	The institution periodically analyzes assessment results and gauges their compatibility with targeted learning outcomes.
6.4.3	The institution verifies that applied assessment scales are reflective of student performance, distinguishing different levels.
6.4.4	The institution periodically analyzes statistical data (a) in order to determine the frequency of students' course withdrawals, (b) to investigate the reasons for irregular rates of student success or failure.

Suggested Prompts for Quality Indicator 6.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution ensure that its examinations and assessment methods are fair, and genuinely capable of measuring the extent and various levels of student academic achievement?
2. How does the institution ensure the compatibility of its course assessment methods with the key learning outcomes?
3. What steps are undertaken when achievement gaps in student learning outcomes within programs and colleges are observed?
4. What measures does the institution undertake when grade inflation or grade deflation is observed?

Analysis and Evaluation Re: 6.4					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 6.4.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 6.4.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 6.4.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 6.4.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 6.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 6.4.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

6.5 The institution has a system for periodic review and quality improvement of methods and strategies deployed in the teaching-learning cycle. This system relies on the feedback of students, faculty and stakeholders, as well as assessment outcomes.

Components of the Quality Indicator	
6.5.1	Degree programs ensure that the scope, breadth, and depth of the course curricular content and student performance indicators are compatible in all sections within the same course.
6.5.2	The institution develops its curricula and instructional methods within the framework of the recommendations and empirical findings of the latest studies.
6.5.3	Students periodically evaluate the effectiveness of course content and instructional methods. The faculty periodically analyzes student feedback concerning course-evaluation, and uses the information for improving pedagogy as well as faculty class performance.
6.5.4	The institution uses the results of student assessments as feedback to improve the efficiency of courses offered.
6.5.5	The institution holds counseling sessions for students, advising them on ways to improve their academic performance levels.
6.5.6	Students are alerted well in advance regarding a decline in their academic record.

Suggested Prompts for Quality Indicator 6.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the assessment of courses by faculty and students impact classroom pedagogy and instructional methods?
2. To what extent does the assessment of curricula and instructional methods impact budgetary allocations?

3. How often does the institution conduct reviews of courses, academic programs, and training programs?
4. How have the latest pedagogical studies and researches impacted the improvement of instructional methods and curricula?

Analysis and Evaluation Re: 6.5					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 6.5.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 6.5.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 6.5.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 6.5.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 6.5				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 6.5.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard VII

Scientific Research and Knowledge Generation

A. Standard Requirements

The educational institution has in place an ongoing and up-to-date plan for the development of scientific research and/or knowledge generation and/or creative productivity. The actual output of this plan provides a means of calibrating the quantity and quality of institutional research activities.

B. Quality Indicators

- 7.1 The institution has clear bylaws and a strategic plan for developing and sponsoring scientific research and intellectual and/or creative productivity; the plan integrates well in the institution's overall developmental plans.
- 7.2 The institution possesses up-to-date physical assets, a well-equipped infrastructure, laboratories and theatres, all consistent with the size of its faculty. These physical resources are used to support the research and creative output of faculty and students.
- 7.3 The institution has an administrative unit that specializes in the planning, facilitating, and monitoring of faculty members' research, and intellectual and/or creative productivity.
- 7.4 The institution uses research and knowledge generation as a vital measure of its standing, locally, regionally, and internationally.
- 7.5 The institution upholds ethical standards that safeguard intellectual property rights, encourage freedom of expression, and permit the legal and moral usage of research outputs.

C. Key Components of the Quality Indicators of Standard VII

- 7.1 The institution has clear bylaws and a strategic plan for developing and sponsoring scientific research and intellectual and/or creative productivity; the plan integrates well in the institution's overall developmental plans.

Components of the Quality Indicator	
7.1.1	The institution has well defined bylaws and policies governing the funding and quality assessment of research productivity, generation of new knowledge, and innovative output of faculty.
7.1.2	The institution provides opportunities to faculty members for effective contribution to scientific research and productivity, in keeping with universally applied practices. These practices include assigning an appropriate teaching workload as well as providing financial support and incentives.
7.1.3	Scientific research and intellectual and/or creative productivity are affirmed as goals of the institution and criteria for assessing faculty's academic performance. They are also used to evaluate the institution's community outreach and services.
7.1.4	The faculty's research activity, generation of new knowledge, and/or creative output correlate with the curricula of graduate and undergraduate programs.
7.1.5	The institution assigns credits for courses that train students in research methodologies. Students participate in research projects and related activities, including scientific seminars and conferences.
7.1.6	The institution has a clearly-specified, and widely-publicized mechanism in place for motivating and rewarding its distinguished researchers.
7.1.7	The institution invests a part of its research efforts in the development of instructional, academic, and administrative processes.
7.1.8	The institution reviews and develops the curricular content of programs, effectively utilizing the findings of relevant applied research/studies.

Suggested Prompts for Quality Indicator 7.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the institution regard research/innovative activities as an indicator of its performance?
2. What mechanism does the institution adopt to ensure that its faculty are assigned teaching workloads in keeping with universally applied practices so as to be able to carry out research/innovative activities?
3. To what extent does the research productivity of the institution reflect its institutional mission and goals?
4. How does the institution determine budgetary allocations for the funding of research?
5. What measures does the institution implement to provide an environment that is conducive to research activities?

Analysis and Evaluation Re: 7.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 7.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 7.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 7.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 7.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 7.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 7.1.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

7.2 The institution possesses up-to-date physical assets, a well-equipped infrastructure, laboratories and theatres, all consistent with the size of its faculty. These physical resources are used to support the research and creative output of faculty and students.

Components of the Quality Indicator	
7.2.1	The institution ensures the availability of physical resources, including libraries, periodicals, and research and information databases to assist faculty and students in pursuing research activities.

Suggested Prompts for Quality Indicator 7.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What steps does the institution undertake to ensure the effectiveness and sufficiency of physical resources and their technology in serving the needs of its faculty and its students?

Analysis and Evaluation Re: 7.2	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 7.2.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 7.2.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 7.2.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 7.2.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 7.2.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.

Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 7.2.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

7.3 The institution has an administrative unit that specializes in the planning, facilitating, and monitoring of faculty members' research, and intellectual and/or creative productivity.

Components of the Quality Indicator	
7.3.1	The institution has a unit, dedicated to overseeing the planning, supervision and enhancement of the quality of research and intellectual and/or creative output of faculty.
7.3.2	The institution allocates a portion of its budget for rendering sufficient financial support to faculty research projects and the pursuit of creative enterprises. The institution also extends technical support to facilitate the generation of new knowledge, and creative endeavors of faculty and graduate students.
7.3.3	The institution encourages the investment of scientific research in industrial, commercial, and services areas. The faculty undertakes research and creative pursuits with the public and private sectors on a contractual basis.
7.3.4	The institution seeks to form consortia, and enter into partnership agreements and memoranda of understanding with institutions sharing similar interests, within Kuwait, the region, and at a global level, for scientific cooperation in diverse areas of research as well as exchange of services such as library inter-loans and the utilization of resources and equipment.
7.3.5	The institution periodically arranges training programs on new research methodologies for the faculty.

7.3.6	The institution publishes abstracts of faculty's completed research, as well as intellectual and/or creative works.
7.3.7	The institution periodically assesses each faculty member's research performance and/or creative output. The faculty relies on the assessment feedback for improving its research and creative/intellectual performance.
7.3.8	The institution periodically publishes statistics on faculty's and graduate students' research productivity and creative accomplishments.
7.3.9	The unit measures the impact of research and creative activities on the academic performance of the faculty.

Suggested Prompts for Quality Indicator 7.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How much emphasis does the institution place on research as a criterion for faculty recruitment/appointment, and renewal and termination of contracts?
2. What percentage of the institutional budget is allocated for research/innovative activities?
3. What initiatives are undertaken to interlink faculty's research with industrial, commercial, and cultural firms/businesses?
4. How does the institution ensure that it benefits from partnership agreements in regard to scientific/research cooperation?
5. How often does the institution review the effectiveness of its unit tasked with the supervision and enhancement of research and the generation of knowledge?

Analysis and Evaluation Re: 7.3	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 7.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 7.3.

Action 3	Account for strengths and weakness and challenges per Quality Indicator 7.3.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 7.3.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 7.3.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 7.3.					
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.					
Compliance Rating	0	1	2	3	4	
Rationale for Excluding Actions Number (specify)						

7.4 The institution uses research and knowledge generation as a vital measure of its standing, locally, regionally, and internationally.

Components of the Quality Indicator	
7.4.1	The faculty's research productivity and intellectual and/or creative output demonstrate quality and conformity with internationally established principles of sound scholarship.
7.4.2	The research and knowledge generation of the institution correlate with opportunities and challenges of development within Kuwait and the region.
7.4.3	The faculty succeeds in publishing its research and new knowledge output, both regionally and internationally.
7.4.4	The institution has a mechanism for assessing and documenting the scientific impact of faculty's research output and knowledge generation.

7.4.5	The institution has a mechanism for assessing and documenting the impact of faculty's creative output in specialist circles and professional domains.
7.4.6	The institution has in place an explicitly defined mechanism for comparing its research output and newly generated knowledge with comparable regional educational institutions.

Suggested Prompts for Quality Indicator 7.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent do faculty members succeed in publishing the results of their research/innovative activities in regional and international journals?
2. To what extent does the research output of faculty address the developmental needs of Kuwait and the region?
3. What has been the impact of the institution's research/innovative output on its regional and international standing?
4. What plans does the institution have to encourage the faculty's involvement in promoting its standing via research?
5. What are the most significant challenges facing the institution with regard to research productivity and the generation of new knowledge?

Analysis and Evaluation Re: 7.4	
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 7.4.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 7.4.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 7.4.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 7.4.

Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 7.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 7.4.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

7.5 The institution upholds ethical standards that safeguard intellectual property rights, encourage freedom of expression, and permit the legal and moral usage of research outputs.

Components of the Quality Indicator	
7.5.1	The institution has a clearly defined regulatory framework governing the ethics of research, intellectual property rights, observing freedom of expression, and adherence to copyright laws, etc.
7.5.2	The institution has well-defined disciplinary measures for faculty and students who violate the ethics of research.

Suggested Prompts for Quality Indicator 7.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What evidence exists that the institution adheres to its stated ethics of research, intellectual property rights, and freedom of inquiry?
2. How does the institution ensure that research funds are allocated in a fair manner?

Analysis and Evaluation Re: 7.5

Mark √ for actions implemented. Justify the exclusion of unmarked actions.

Action 1	State the prompt questions relevant to 7.5.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 7.5.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 7.5.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 7.5.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 7.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 7.4.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard VIII

Facilities, Infrastructure, and Technology Systems

A. Standard Requirements

The institution has appropriate and well developed facilities and infrastructure equipped with high quality technology systems. The facilities, infrastructure and technology resources, adequately meet the needs of students, faculty, and administrative and technical staff, as well as the requirements of degree programs. The institution oversees compliance with safety measures in the operation and maintenance of facilities, infrastructure, and technology systems.

B. Quality Indicators

- 8.1 The wide-ranging facilities of the institution's campus are well equipped to meet the needs of its beneficiaries.
- 8.2 The institution operates and maintains efficient facilities, infrastructures, and functional technology systems that meet the needs of its beneficiaries.
- 8.3 The Institution ensures the principles of safety, cleanliness and hygiene in the management of all its facilities and infrastructures.

C. Key Components of the Quality Indicators of Standard VIII

- 8.1 The wide-ranging facilities of the institution's campus are well equipped to meet the needs of its beneficiaries.

Components of the Quality Indicator	
8.1.1	The institution has an integrated campus that houses classrooms, laboratories, library/libraries, faculty and staff offices, storage and parking facilities, areas earmarked as green belts, and dormitories (where applicable).
8.1.2	The campus has service facilities for its constituents, such as clinic(s), sports field(s), designated prayer area(s), hall(s) for cultural activities and faculty-student recreation, and bookshops and stationery shop(s).

8.1.3	The campus ensures a congenial environment for students with disabilities.
8.1.4	The outdoor environment surrounding the buildings and physical facilities is pleasant and features green belts and safe pedestrian pathways.
8.1.5	The institution observes architectural principles regarding the ratio of available space in a single facility to the number of its users. The availability of designated areas earmarked for teaching, research, and administrative and service activities is in conformity with the architectural/spatial needs of these activities.
8.1.6	The number and capacity of classrooms, laboratories, sporting areas, cafeterias, and recreation areas are in conformity with the number of enrolled students.
8.1.7	The instructional space allocated for the delivery of lectures, simultaneously accommodates 50 percent of the student population.
8.1.8	The campus has an adequate number of halls/rooms earmarked for specific purposes, including faculty meetings, public lectures, student and faculty rest areas, and study rooms for students. The study rooms can accommodate a minimum of 25 percent of students enrolled in post-graduate programs.
8.1.9	The spatial distribution of the institution's buildings and facilities is in keeping with the criteria specified below: (a) The institution allocates a minimum space of 7.5 square meters as office area per faculty member. (b) Should the enrolled student population exceed 4000, the institution allocates a minimum space of 2000 square meters for indoor athletics. (c) The number of parking spaces assigned for faculty members simultaneously accommodates at least 75% of the faculty. (d) Parking spaces are available for all full-time staff.

	(e) The institution makes available a minimum of one parking space for each one of four enrolled students. (f) The institution designates a minimum of 25 percent of campus space as green belt. (g) The institution has fully operational lavatories, depending upon the campus community size, with a minimum of one lavatory earmarked per 50 students, and a minimum of one lavatory per 20 faculty/staff members.
8.1.10	The institution has campus maps and signboards displaying the direction and location of all buildings and facilities. The campus map is accessible online.
8.1.11	The institution's campus is connected to a public transport system. The institution designates fixed areas for campus transport.
8.1.12	The institution consults its constituent community in the formulation of its developmental plan, and for oversight of the implementation of needed changes in on-campus facility operations.

Suggested Prompts for Quality Indicator 8.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Who participates in the formulation of the developmental plan in regard to campus facilities?
2. To what extent is the spatial distributions of the institution's buildings and facilities aligned with the criteria of the NBAQ?
3. To what extent are the capacities of classrooms, laboratories, cafeterias, and recreation areas aligned with the criteria of the NBAQ?

Analysis and Evaluation Re: 8.1						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 8.1.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 8.1.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 8.1.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 8.1.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 8.1.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 8.1.					
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.					
Compliance Rating		0	1	2	3	4
Rationale for Excluding Actions Number (specify)						

8.2 The institution operates and maintains efficient facilities, infrastructures, and functional technology systems that meet the needs of its beneficiaries.

Components of the Quality Indicator	
8.2.1	The institution has a unit(s) that oversees the daily operation of all facilities and infrastructure as well as campus maintenance and safety matters.
8.2.2	The institution has well defined and published bylaws and policies providing the legislative framework for regulating the use of facilities, physical resources, technology and infrastructure.

8.2.3	The institution has bylaws regulating the activities and responsibilities of personnel in charge of facilities and infrastructure maintenance.
8.2.4	The institution has in place a strategic plan aimed at resource conservation and the optimal use of facilities and infrastructures; the institution exhibits expertise in spatial utilization to accomplish its activities and meet its needs.
8.2.5	The institutional strategic plan includes provision for meeting the institution's future developmental needs concerning facilities and infrastructure construction, and has an effective system in place for the acquisition of needed financial resources for plan implementation.
8.2.6	The institution has in place an effective system to oversee operation and maintenance of its facilities and infrastructure.
8.2.7	The institution has a highly efficient technical support unit(s).
8.2.8	The institutional assets and resources are focused on invigorating the teaching and learning processes, enhancing knowledge, and encouraging scholarly research, in a congenial climate that stimulates creativity and leads to productivity.
8.2.9	The institution's facilities, infrastructure, and technology systems create an enabling environment for achieving the objectives that are expressed in the General Frame of Reference.
8.2.10	The institution's buildings and infrastructures conform to technical (i.e. engineering and architectural) specifications and requirements, and the buildings' indoor atmosphere is characterized by effective air circulation, temperature control, adequate lighting systems, soundproof walls, spatial distribution adequacy and occupancy, protective environment from external weather exigencies, effective and safe lifts, stairs and emergency exits.
8.2.11	The institution has efficient and well-maintained telephone and communication systems.
8.2.12	The institution provides each faculty member and each employee with a computer, and makes computer facilities available for student use.

8.2.13	The institution's computer laboratories are well equipped, with one computer allocated per 20 students, and one printer per 50 students.
8.2.14	The institution develops databases and informational archives pertinent to its administrative and service units and their activities. The databases and archives are comprehensive and are updated regularly.
8.2.15	The institution periodically assesses the adequacy of its technical infrastructure, as well as keeping track of the efficiency of the information system.
8.2.16	The institution ensures efficient operation and regular maintenance of its facilities and infrastructures, and takes appropriate measures when efficiency declines.
8.2.17	In the operation and maintenance of its facilities, the institution observes the terms that are stated in its contracts.
8.2.18	The institution promptly uses feedback received from its constituent community for improving and maintaining its facilities, physical resources and infrastructure.

Suggested Prompts for Quality Indicator 8.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What are the most significant challenges that face the institution with respect to the availability and quality assurance of its physical resources, infrastructure, and technology systems?
2. To what extent do the institutional facilities, infrastructure, and technology systems create an enabling environment that is conducive to the achievement of goals stipulated in the General Frame of Reference?
3. How effective are the institutional technology systems and physical infrastructure in rendering services to meet the beneficiaries' needs?
4. How frequently does the institution review and update its technology infrastructure?

5. To what extent has the institution developed archival databases and information with regard to its administrative service units? What mechanism is in place to update them?

Analysis and Evaluation Re: 8.2						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 8.2.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 8.2.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 8.2.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 8.2.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 8.2.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 8.2.					
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.					
Compliance Rating		0	1	2	3	4
Rationale for Excluding Actions Number (specify)						

8.3 The Institution ensures the principles of safety, cleanliness and hygiene in the management of all its facilities and infrastructures.

Components of the Quality Indicator	
8.3.1	The construction of the campus facilities, resources, and infrastructure guarantees the safety of campus constituencies. Safety measures in all campus buildings include fire extinguishers, alarm and sprinkler systems, and an access route for fire trucks and ambulances. These measures are functional and well maintained.
8.3.2	The institution observes and adheres to the principles of safety, hygiene and cleanliness in management of its facilities. The institution has an efficient system that oversees chemical refuse and odor dispersal in laboratories and workshops.
8.3.3	The institution follows safety principles in its facilities' daily operations, and it has an effective evacuation system in place for emergencies.
8.3.4	The institution periodically tests the functionality and efficiency of its safety devices and evacuation systems, keeping them in a state of preparedness for possible emergencies and disasters.
8.3.5	The institution periodically provides training to its constituent communities on safety and precautionary measures to be followed in the event of an emergency.
8.3.6	The institution has in place procedures and plans aimed at the effective use of emergency shelters.

Suggested Prompts for Quality Indicator 8.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution ensure that safety measures in all campus buildings are commensurate with the numbers of constituencies using the buildings?
2. How does the institution ensure the overall quality of hygiene and cleanliness in laboratories and workshops?
3. How often does the institution test its campus safety devices?

4. Does the institution have an evacuation plan in place for emergencies? How often is this plan tested?

Analysis and Evaluation Re: 8.3 Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 8.3.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 8.3.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 8.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 8.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 8.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 8.3.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard IX

Finance and Budget

A. Standard Requirements

The institution has steady sources of funding and a budget that facilitates the accomplishment of its objectives and meets the outstanding needs of its degree programs as well as the requirements of effective governance. The institution has an effective system for budgetary expenditure and the monitoring of expenses; in addition, it has short and long-term fiscal strategies aimed at ensuring financial stability and risk reduction. The institution upholds the values of integrity and honesty, and it refrains from wastage of funds, as the fundamental basis of its fiscal policy and practices.

B. Quality Indicators

- 9.1 The institution has a standard document that defines the fundamentals of its financial operations and budgetary expenditures. Moreover, it implements an operational fiscal plan, which is feasible, precise, guided by disciplinary norms, and ensures maximum effectiveness.
- 9.2 The institution ensures that in budgetary expenditures on degree programs, facilities, and infrastructures are sufficient for maintaining their quality.
- 9.3 The institution aligns its spending practices with quality assurance operations, and with the implementation of developmental projects.
- 9.4 The institution avoids fiscal deficit and problems resulting from borrowing, and endeavors to ensure a secure, stable, and healthy financial status through the effective deployment of professional methods and modalities.
- 9.5 The institution adheres to a comprehensive financial audit system, and contracts an external, experienced and professional bureau to oversee its financial audit.

C. Key Components of the Quality Indicators of Standard IX

- 9.1 The institution has a standard document that defines the fundamentals of its financial operations and budgetary expenditures. Moreover, it implements an operational fiscal plan that is feasible and precise, is guided by disciplinary norms, and ensures maximum effectiveness.

Components of the Quality Indicator	
9.1.1	The institution has in place a specialized unit that oversees financial management, including funding sources, the budget, and expenditures. The unit also monitors institutional financial practices and transactions, and submits periodic reports and financial data to the governing body.
9.1.2	The institution prepares its financial budget in consultation with the administrative staff and faculty representatives, and the top governing body approves the budget.
9.1.3	The institution strengthens its budget and financial resources through research and service contracts with external agencies (local and/or global).
9.1.4	The institution manages its budget and financial resources independently from external funding agencies and uncommon sources of revenue.
9.1.5	The institution relies on full or partial self-financing for supporting some of its activities and services.
9.1.6	The institution maintains comprehensive documentation of its financial practices and transactions, in both electronic and print formats.
9.1.7	The institution is systematic and regular in disbursing salaries to all faculty, staff, and personnel.
9.1.8	The institution has in place clear fiscal bylaws and policies specifying ethical guidelines concerning the financial practices and accountability of staff members who are responsible for financial resources.
9.1.9	The institution examines and investigates all acts of financial mismanagement and takes prompt and appropriate disciplinary action(s).

Suggested Prompts for Quality Indicator 9.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What mechanism is in place to ensure the maintenance of the institution's financial equilibrium? What plan does the institution have in place in case financial disequilibrium occurs?
2. What are the most significant challenges that face the institution's financial condition?
3. To what extent is financial information readily available for units/department administrators in order to make informed decisions?
4. To what extent is the specialized unit tasked with overseeing the institution's financial management free from intervention by external entities?
5. To what extent does the institution observe the principle of holding accountable managers and staff overseeing the budget and financial resources?

Analysis and Evaluation Re: 9.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 9.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 9.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 9.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 9.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 9.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 9.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

9.2. The institution ensures that in budgetary expenditures on degree programs, facilities and infrastructures are sufficient for maintaining their quality.

Components of the Quality Indicator	
9.2.1	The institution has financial resource sufficiency and stability, covering its operational expenses. The resource adequacy enables the institution to maintain the quality of instructional processes and programs, pay faculty and staff salaries, operate and maintain infrastructural and physical facilities, support student activities, and implement plans for development and quality enhancement.
9.2.2	The budget covers the salaries of faculty, staff, and personnel.
9.2.3	The budget of the institution provides for essential funding of degree programs and operational expenses of institutional facilities.
9.2.4	The institution's expenditure on degree programs and their sustained improvement claims a significant percentage of the operational budget.
9.2.5	The institution's expenditure on enhancing the quality of all degree programs is adequate.
9.2.6	The institution budgets in a professional manner for the cost and expenditure involved in establishing new programs.
9.2.7	The institution's expenditure on supporting students and their activities claims a sizeable proportion of the operational budget.
9.2.8	The institution has in place realistic plans and procedures for optimizing investment and judiciously using financial resources. The institution takes corrective measures to avoid any unnecessary expenditure, preventable cost, and financial vulnerability.

Suggested Prompts for Quality Indicator 9.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What evidence exists that the financial resources and assets are sufficient to sustain the operation of the institution over the next ten years?
2. What percentage of the institution's operational budget is allocated to: salaries, operation of facilities, development of facilities and infrastructure, quality assurance of education, libraries and information development resources, and student support?
3. What procedures are in place with regard to the financing of new programs?
4. How have available financial resources affected faculty's recruitment and retention, and staffing levels?

Analysis and Evaluation Re: 9.2	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 9.2.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 9.2.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 9.2.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 9.2.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 9.2.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 9.2.
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.

Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

9.3 The institution aligns its spending practices with quality assurance operations, and with the implementation of developmental projects.

Components of the Quality Indicator	
9.3.1	The institution periodically reviews its plan for allocating and dispensing the budget, ensuring best management practices and effective financial performance.

Suggested Prompts for Quality Indicator 9.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What procedures are in place with regard to meeting the evolving challenges of educational technologies?
2. To what extent are fiscal allocations aligned with the quality of student learning and the quality of the academic programs?

Analysis and Evaluation Re: 9.3	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 9.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 9.3.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 9.3.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 9.3.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 9.3.

Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 9.3.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

9.4. The institution avoids fiscal deficit and problems resulting from borrowing, and endeavors to ensure a secure, stable, and healthy financial status through the effective deployment of professional methods and modalities.

Components of the Quality Indicator	
9.4.1	The value of loans, as a percentage of the total budget, must not exceed 30 percent. The loans are taken for the funding of regular operational processes, or developing degree programs in the long run.
9.4.2	The institution has an effective mechanism for monitoring debt as a percentage of the total budget, guaranteeing funding availability, and assessing financial risks and ensuring their curtailment.
9.4.3	The institution takes instant measure(s) against budgetary deficit or funding shortfall for the sustenance of specific activities or processes.

Suggested Prompts for Quality Indicator 9.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution ensure the minimization of fiscal deficit and borrowing problems?

2. To what extent do the institution's budget and financial resources rely on non-scholarship tuition? To what extent does it rely on investment returns on institutional assets? To what extent does it rely on governmental scholarships/aid awarded to enrollees? To what extent does it rely on institutional loans?
3. What is the mechanism(s) that the institution undertakes to monitor its debts, and assess financial risks and bring about their reduction?

Analysis and Evaluation Re: 9.4					
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 9.4.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 9.4.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 9.4.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 9.4.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 9.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 9.4.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

9.5 The institution adheres to a comprehensive financial audit system, and contracts an external, experienced and professional bureau to oversee its financial audit.

Components of the Quality Indicator	
9.5.1	The institution uses standard and professional system(s) for the auditing of its budgetary practices.
9.5.2	The institution documents and reviews its operational budgetary expenditure prior to the close of the fiscal year.
9.5.3	The institution regularly assesses its financial performance, expenditure practices, general financial status, imminent obstacles and forthcoming challenges, both more immediately ahead and over the long term.
9.5.4	The institution has in place realistic plans and procedures for optimizing investment and judiciously using financial resources. The institution takes corrective measures to avoid any unnecessary expenditure, uncalled-for cost, and financial vulnerability.
9.5.5	The institution relies on an external auditor (or a certified financial bureau, or a governmental regulatory/monitoring agency) to review and assess its financial expenditure and transactions. The auditing bureau's directors/administrators are not associated with the institution in any capacity.

Suggested Prompts for Quality Indicator 9.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How often does the institution audit its budgetary practices?
2. What types of corrective actions does the institution undertake when problems are detected?
3. To what extent does the institution use audit reports to improve the management of its financial practices?

Analysis and Evaluation Re: 9.5	
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 9.5.

Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 9.5.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 9.5.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 9.5.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 9.5.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 9.5.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard X

Human Resources

Note: In this standard, human resources are divided into two categories. *First*, the managerial cadre, which is exclusive and synonymous with experienced administrators holding high-level qualifications. *Second*, personnel, which is inclusive of all the non-academic workforce.

A. Standard Requirements

The institution appoints qualified and competent human resources to fulfill effectively the needs of all programs and units. The resources comprise (1) managerial cadres (executives and administrators) who manage the various support sectors of the institution, and (2) personnel that staff the academic units and support sectors. The institution judiciously implements explicitly stated bylaws that regulate the institution's human resources in terms of its (1) selection and hiring, (2) duties and responsibilities, (3) rights, (4) professional growth and development, and (5) grievances.

B. Quality Indicators

- 10.1 The institution has a specialized unit that deals with matters concerning human resource affairs. The unit is headed by a person who is well-versed in the institution's bylaws and the relevant legislative regulations of Kuwait.
- 10.2 The institution employs qualified human resources (managerial cadres and personnel), sufficient in number to fulfill the demands of its degree programs and support services.
- 10.3 The institution consistently applies its bylaws concerning human resource matters in terms of (1) recruitment policies, (2) employees duties and responsibilities, (3) rights, (4) performance evaluation mechanisms, (5) promotion processes and requirements, (6) vacation periods, (7) contract renewal and termination, and (8) health insurance (if applicable). These bylaws are publically available in both print and electronic formats.
- 10.4 In dealing with its human resources, the institution adheres to fundamental ethical principles, including proper treatment, fairness, non-discriminatory employment, and professional development opportunities.

10.5 Managerial cadres and personnel are committed to the processes of quality assurance and continuous improvement; they contribute to the development and/or implementation of the institutional quality improvement plans.

C. Key Components of the Quality Indicators of Standard X

10.1 The institution has a specialized unit that deals with matters concerning human resource affairs. The unit is headed by a person who is well-versed in the institution's bylaws and the relevant legislative regulations of Kuwait.

Components of the Quality Indicator	
10.1.1	The institution has a unit responsible for human resource affairs.
10.1.2	The head of the human resource affairs unit is well versed in the bylaws of the institution as well as the relevant regulations of Kuwait.
10.1.3	The institution has in place a plan that specifies recruitment/appointment of needed human resources.

Suggested Prompts for Quality Indicator 10.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What evidence exists that the person heading the unit responsible for human resources is well-versed in institutional bylaws and legislative regulations?
2. Does the institution have a plan that specifies recruitment/appointment needs for human resources? If yes, how was it developed and how well is it implemented?

Analysis and Evaluation Re: 10.1	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 10.1.

Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 10.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 10.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 10.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 10.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 10.1.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

10.2 The institution employs qualified human resources (managerial cadres and personnel), sufficient in number to fulfill the demands of its degree programs and support services.

Components of the Quality Indicator	
10.2.1	Most of the institution's human resource (cadres and personnel) is appointed on a full-time basis.
10.2.2	The managerial cadres are competent and demonstrate good managerial practices.
10.2.3	The institution's human resources hold requisite qualifications and appropriate certificates, and possess specialized and technical skills that are appropriate for the professional requirements of positions.

10.2.4	The institution's managerial cadres are aware of the institutional General Frame of Reference, and are familiar with the institution's strategic plans.
10.2.5	The human resources of all programs and units are professional, having specialized skills that ensure the effective fulfillment of positions' responsibilities and duties.
10.2.6	The personnel ratio is compatible to the requirements of each degree program's student enrollment and faculty size.
10.2.7	The human resources soft skills are exhibited in teamwork, communication efficiency with institution's constituent communities, a sense of alertness towards follow-up and coordination in business-related matters, including effective time-management concerning office hours.
10.2.8	The staff and secretarial personnel are well aware of the procedures that regulate the functions and responsibilities of their units/office; they are also versed in the completion of transactions and the processing of forms.
12.2.9	The secretarial personnel are responsible for digitizing and maintaining records of correspondence, including the accurate and efficient archiving of files and documents, and promptly respond to all types of communication in a professional manner.
12.2.10	The institution's human resources are trained in new and relevant technologies.

Suggested Prompts for Quality Indicator 10.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What are the qualifications and the required specialized skills of the managerial cadres?
2. How does the institution monitor and assess its human resources?
3. What plans/measures does the institution implement to ensure that human resources possess requisite soft skills?

4. To what extent are the institution's human resources trained in new and relevant technologies?
5. In what ways does the institution support the professional development of its managerial cadres and personnel?
6. How well does the institution implement principles of accountability with regard to the stated responsibilities of human resources?

Analysis and Evaluation Re: 10.2						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 10.2.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 10.2.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 10.2.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 10.2.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 10.2.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 10.2.					
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.					
Compliance Rating	0	1	2	3	4	
Rationale for Excluding Actions Number (specify)						

10.3 The institution consistently applies its bylaws concerning human resource matters in terms of (1) recruitment policies, (2) employees duties and responsibilities, (3) rights, (4) performance evaluation mechanisms, (5) promotion processes and requirements, (6) vacation periods, (7) contract renewal and termination, and (8) health insurance (if applicable). These bylaws are publically available in both print and electronic formats.

Components of the Quality Indicator	
10.3.1	The institution has a comprehensive manual, specifying job titles of all positions within the institution. The manual, available in both print and electronic formats, outlines the functions of each position within the institutional structural frame, the qualifications required for each job title, associated responsibilities, and the authority or power vested in the appointee in a designated position.
10.3.2	The institution provides a comprehensive manual, in both electronic and print form, on bylaws concerning the duties, responsibilities, and rights of its human resources, including official work-hours, holidays, financial rights, benefits, and health insurance (if applicable), etc.
10.3.3	The institution consults concerned degree programs and units in matters of the employment of new human resources.
10.3.4	The institution clearly defines the terms and requirements for promotion, and oversees with fairness and integrity all applications for promotion.
10.3.5	The institution extends contractual security to its committed and responsible human resource.
10.3.6	The institution's laws are binding in matters of human resource presence in designated work area(s)/office(s) during the official work hours (where applicable).
10.3.7	The institutional human resource is effective and diligent.
10.3.8	The institution implements its bylaws regarding any breach of responsibility and/or abuse of power.

Suggested Prompts for Quality Indicator 10.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution ensure fairness and integrity in handling human resource promotions?
2. How does the institution ensure job security for its committed and responsible human resources?
3. What are the policies of the institution regarding the rights of personnel and the terms of their contracts, work conditions, etc? How does the institution assess the effectiveness of these policies?
4. How do financial resources of the institution influence the appointment and retention of qualified human resources?
5. How well do the managerial cadres understand the implications of the General Frame of Reference and the institution's strategic plan on managerial imperatives?

Analysis and Evaluation Re: 10.3	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 10.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 10.3.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 10.3.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 10.3.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 10.3.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.

Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 10.3.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

10.4 In dealing with its human resources, the institution adheres to fundamental ethical principles, including proper treatment, fairness, non-discriminatory employment and professional development opportunities.

Components of the Quality Indicator	
10.4.1	The institution has in place an official document that outlines the work ethics binding on human resources. This document is available in both electronic and print formats.
10.4.2	The institution's bylaws are fair in dealing with human resources, including their grievances and allegations, and the resolution of them.
10.4.3	The interaction between faculty and human resources is characterized by fairness and integrity, and institutional bylaws forbid all forms of discrimination.
10.4.4	The institution ensures a congenial environment, attracting and facilitating the retention of qualified and competent human resources.

Suggested Prompts for Quality Indicator 10.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the institution have an official document that outlines the work ethics of human resources? What channels does the institution use to publicize this document among its constituencies?

2. How effective are the institution's policies and procedures in regard to creating a congenial atmosphere conducive to the retention of its qualified human resources?
3. What process is in place to respond to grievances of human resources?

Analysis and Evaluation Re: 10.4					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 10.4				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 10.4.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 10.4.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 10.4.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 10.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 10.4.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

10.5 Managerial cadres and personnel are committed to the processes of quality assurance and continuous improvement; they contribute to the development and/or implementation of the institutional quality improvement plans.

Components of the Quality Indicator	
10.5.1	The institution periodically assesses the performance of its human resources, in accordance with well-defined measures that are consistently applied. The assessment outcome is communicated to the concerned employee, who has the right to respond to his/her assessment report, registering grievances, if any.
10.5.2	Representatives of the institution's governing body assess periodically the efficiency and performance of the managerial cadres.
10.5.3	The managerial cadres periodically assess the efficiency and performance of their immediate subordinates.
10.5.4	The institution rewards those employees whose performance earns an excellent rating.
10.5.5	The institution invites human resource feedback regarding needs, skills development and professional exposure.
10.5.6	Human resources participate in enhancing and developing the quality of institutional administrative/managerial practices.

Suggested Prompts for Quality Indicator 10.5

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution ensure that assessment measures of human resources are consistently applied?
2. What mechanism is in place to allow human resources to dispute assessment outcomes?
3. How effective are the institution's methods of assessing the performance of its managerial cadre(s) and personnel in terms of personal motivation, diligence and competency in carrying out duties? Does the institution use a generic or a job-specific performance evaluation form?
4. How does the institution respond to complaints from constituencies about human resources demonstrating poor performance?

5. To what extent are managerial cadres involved in quality assurance processes?
To what extent are they assessed from the perspective of their contribution (involvement) in promoting the quality assurance of the institution?

Analysis and Evaluation Re: 10.5					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 10.5.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 10.5.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 10.5.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 10.5.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 10.5.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 10.5.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard XI

Outreach and Community Services

A. Standard Requirements

The institution accords priority to its effective contribution to the service of the local community, and considers it as one of its prime responsibilities. The institution implements constructive and sustained interactions with the local community. In addition, it cooperates with regional and global communities, taking advantage of development opportunities to enhance its services.

B. Quality Indicators

- 11.1 The institution has a Public Relations unit, which is responsible for developing strong relationships with the local, regional and international communities.
- 11.2 The institution implements a well-defined and widely publicized plan on programs and services, aimed at serving society at large.
- 11.3 The institution develops partnerships with local, regional, and international institutions in diverse domains, including scientific research and sources of knowledge, sharing experience, enrichment of degree programs, facilitation of both student activities, and consultations, etc.
- 11.4 The institution periodically evaluates its outreach programs and community services in order to improve their quality.

C. Key Components of the Quality Indicators of Standard XI

- 11.1 The institution has a Public Relations unit, which is responsible for developing strong relationships with the local, regional and international communities

Components of the Quality Indicator	
11.1.1	The institution has an active unit dedicated to outreach and community services.

11.1.2	The institution relies on diverse media channels to register its presence and familiarize the public and society (parents, secondary school graduates, etc) with its vision, mission and goals, bylaws, requirements of offered programs, faculty's curriculum vitae, achievements of select faculty and students, bylaws, tuition fees, etc.
11.1.3	The institution publicizes the expertise of its faculty as well as their capabilities in serving the local community.
11.1.4	The institution publicizes services that can be rendered to society at large.
11.1.5	The institution publicizes information on the number of students admitted, the percentage of student retention, graduation rates within a specified period, as well as related information of concern to students and parents.
11.1.6	The institution electronically receives the community's inquiries, and promptly responds to relevant inquiries.
11.1.7	The institution utilizes diverse media channels to announce its accreditation status, publicizes the accreditation status of programs offered, each program's student enrollment capacity, and employment prospects of the qualifying degrees/ specialization.
11.1.8	The institution maintains communication with its alumni and invites them to contribute to the institution's development and advancement.
11.1.9	The institution coordinates with secondary schools (and pre-tertiary institutions), to extend the benefits of its educational and cultural activities.

Suggested Prompts for Quality Indicator 11.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the institution publicize the expertise and capabilities of its faculty in regards to its readiness to service the local community and the society at large?

2. To what extent does the institution keep the public informed in regards to the accreditation status of its academic programs, as well as its prospective accreditation plans?
3. In what ways are the institution's community services and outreach programs congruent with its mission and goals?
4. How have the institution's community projects that are directed at high school students impacted their college preparation?
5. What mechanism does the institution employ to assess the effectiveness of its unit responsible for community service and outreach activities?

Analysis and Evaluation Re: 11.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 11.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 11.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 11.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 11.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 11.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 11.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

11.2 The institution implements a well-defined and widely publicized plan on programs and services, aimed at serving society at large.

Components of the Quality Indicator	
11.2.1	The institution encourages active involvement of the faculty in serving the community, and provides the needed assistance.
11.2.2	The institution offers useful services (research, consultancy, training, cultural, and other activities), to serve the community's needs. The nature of the services offered is consistent with the terms and outlook defined in the institutional General Frame of Reference.
11.2.3	The institution offers continuing education programs on demand (disciplinary, occupational, technical, etc) for various sectors of society.
11.2.4	The institution cooperates with civil society's organizations and associations, and contributes towards resolving public affair issues.
11.2.5	Faculty members cooperate with social institutions in meeting the various needs of society.

Suggested Prompts for Quality Indicator 11.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What are the types of services (research, consultancy, training, cultural, and others) that the institution offers in service to the public and private sectors?
2. What percentage of faculty members is involved in programs and services focused on serving the community and society?
3. To what degree do current issues (environmental, social, political, cultural, etc.) prompt public seminars and lectures at the institution?
4. How well does the institution establish and assess its program(s) in continuous education and community services?

5. How does the institution ensure that enrollees in continuing education programs receive quality services, including advisement and vocational/professional counseling?

Analysis and Evaluation Re: 11.2					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 11.2.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 11.2.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 11.2.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 11.2.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 11.2.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 11.2.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

11.3 The institution develops partnerships with local, regional, and international institutions in diverse domains, including scientific research and sources of knowledge, sharing experience, enrichment of degree programs, facilitation of both student activities, and consultations, etc.

Components of the Quality Indicator	
11.3.1	The institution draws from local, regional and/or global expertise for its self development, and for continuous improvement of its practices.
11.3.2	Degree programs maintain strong and enduring ties with the private, public and employment sectors in order to: • establish student internships and training activities, • facilitate practical exposure of students to employment opportunities, • facilitate the implementation of empirical or applied studies and investigative field projects.
11.3.3	Degree programs seek locally available professional expertise to enrich the activities or forums intended for the institutional student community.
11.3.4	The institution offers professional and consultative services to the public and private sectors, including services aimed at quality enhancement, development, research, etc.
11.3.5	The institution invites representatives of different sectors and experts with relevant experiences to join its advisory committees.
11.3.6	The institution establishes effective partnerships with select regional and international institutions for joint studies and research, publications, exchange of expertise, shared experiences, and organization of joint student activities.
11.3.7	The institution invites local, regional, and international experts to cooperate with it, including the delivery of lectures, and participation in institutional scientific/specialized conferences and forums.

Suggested Prompts for Quality Indicator 11.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How often do academic programs opt for professional expertise available within society? What are the main contributions of these experts?
2. To what extent does the institution develop partnerships with local, regional, and international institutions to improve its research/innovative activities, enrich its academic programs, benefit its students, etc.?
3. How does the institution monitor and assess the effectiveness of its partnerships with local, regional, and international institutions?
4. How diverse are community service programs? What percentage of community service projects targets the development of employment skills? What percentage is cultural in nature?

Analysis and Evaluation Re: 10.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 11.3.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 11.3.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 11.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 11.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 11.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 11.3.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

11.4 The institution periodically evaluates its outreach programs and community services in order to improve their quality.

Components of the Quality Indicator	
11.4.1	The institution undertakes effective measures to maintain a good reputation locally, regionally, and globally through constructive outreach activities.
11.4.2	The institution actively seeks the opinions of its constituencies and involves them in the decision-making process regarding outreach activities and community services.
11.4.3	The institution assesses its connections with the outside world and attempts to enhance their quality and effectiveness.

Suggested Prompts for Quality Indicator 11.4

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What innovative types of outreach activities does the institution undertake to maintain a good reputation locally, regionally and globally?
2. How does the institution's community outreach distinguish it from other local/regional peer institutions?

Analysis and Evaluation Re: 11.4	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 11.4.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 11.4.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 11.4.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 11.4.

Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 11.4.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 11.4.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard XII

Ethics

A. Standard Requirements

The institution and its constituents uphold and conform to the value of integrity as the fundamental basis of operations. In all its dealings, the institution diligently adheres to fulfilling its responsibilities and sustaining *esprit de corps* among sectors of its constituent community. Moreover, select additional values guide the institution.

B. Quality Indicators

12.1 The institution adheres to the principles of integrity, transparency, fairness, and the application of the values of diligence and impartiality in all its internal and external dealings.

12.2 The institution respects the values of civil society.

12.3 The institution adheres to the dual principles of responsibility and *esprit de corps* in its operations; the institutional community accordingly diligently fulfils its responsibilities, and the administration exhibits *esprit de corps*, creating an enabling, positive, and forward-looking environment.

C. Key Components of the Quality Indicators of Standard XII

12.1 The institution adheres to the principles of integrity, transparency, fairness, and the application of the values of diligence and impartiality in all its internal and external dealings.

Components of the Quality Indicator	
12.1.1	The institution establishes a code of ethical conduct, or a similarly named document, that is approved by the governing body. This document ensures that the institution's actions are guided by integrity, impartiality, and accountability.
12.1.2	All members of the institutional community are bound by the same ethical standards, including the top governing body, faculty members, academic/training staff, support personnel, students, and contracted personnel.

12.1.3	The constituent community of the institution adheres to the principle of integrity in its professional life.
12.1.4	The institution acts appropriately against violations of the principle of integrity committed by any member of its constituent community.
12.1.5	The institution is committed to the norms of transparency, including the publication of survey results based on beneficiaries' opinion, publication of the method(s) deployed in the selection of administrative officers, and promotion processes.
12.1.6	The institution adheres to the laws governing copyrights and intellectual property rights.
12.1.7	The institution practices the principle of transparency by announcing its bylaws, policies, and latest decisions to its constituent community (in electronic and print formats).
12.1.8	The institution practices the principle of fairness and impartiality in selecting highly qualified faculty and human resources for its administrative and key positions.
12.1.9	The institution observes the norms of fairness and impartiality in all its dealings and practices, including student admissions, faculty and human resource appointments, and in employee performance assessments.
12.1.10	The institution adheres to the norms of integrity, fairness, and impartiality in the redressal of the grievances of faculty, students, and human resource.
12.1.11	The institution's administration exerts diligent efforts to accomplish its mission and goals as well as the core objectives of the offered degree programs.
12.1.12	The institution's degree programs exhibit adherence to professional ethics as per the nature of programs.
12.1.13	The institution takes appropriate preventive measures in matters involving conflict of interest, as regards decisions concerning formation of committees responsible for faculty appointments, and in other administrative practices.

12.1.14	The institution honors and adheres to the terms of its agreements, commitments, and declarations.
12.1.15	The institution evaluates its internal conformity to the principle of integrity by assessing its policies and the extent and righteousness of their implementation.
12.1.16	The institution follows the norms of honesty and transparency in all its dealings with The National Bureau for Accreditation and Education Quality Assurance.

Suggested Prompts for Quality Indicator 12.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does the institution have a code of ethical conduct? Who developed and who approved this code? What are the main mandates of this code?
2. How does the institution ensure that its constituencies adhere to the laws governing copyrights and intellectual property rights?
3. How does the institution monitor the adherence of its constituencies to its stated ethical values as articulated in its General Frame of Reference?
4. How deeply infused is the culture and observance of avoidance of conflicts of interest?
5. What evidence exists that the institution observes the norms of integrity, fairness, and impartiality in redressing the grievances of its constituencies?

Analysis and Evaluation Re: 12.1	
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 12.1.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 12.1.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 12.1.

Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 12.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 12.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 12.1.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

12.2 The institution respects the values of civil society.

Components of the Quality Indicator	
12.2.1	The institution maintains rights of privacy and confidentiality regarding the personal information of its constituents.
12.2.2	The institution respects academic freedom, as well as freedom of thought and speech, in consonance with civil society's values.
12.2.3	The institution prohibits the discourse of hate and prejudice, and all types of discriminatory behaviors/acts.

Suggested Prompts for Quality Indicator 12.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution ensure the maintenance of the rights of privacy and confidentiality regarding the personal information of its constituents?

2. How does the institution ensure respect of academic freedom, and freedom of expression?
3. What evidence exists that the institution mandates the prohibition of the discourse of hate and prejudice, and discriminatory behavior on its campus?

Analysis and Evaluation Re: 12.2					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 12.2.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 12.2.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 12.2.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 12.2.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 12.2.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 12.2				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
(Rationale for Excluding Actions Number (specify					

12.3 The institution adheres to the dual principles of responsibility and *esprit de corps* in its operations; the institutional community accordingly diligently fulfils its responsibilities, and the administration exhibits *esprit de corps*, creating an enabling, positive, and forward-looking environment

Components of the Quality Indicator	
12.3.1	The institution assigns high value to the fulfillment of assigned responsibilities.
12.3.2	The governing board exhibits firm resolve and commitment in ensuring the institution's quality enhancement and development.
12.3.3	In keeping with the dual principles of responsibility and <i>esprit de corps</i> , (a) the institution's constituent community diligently fulfills its assigned responsibilities; (b) the institution exhibits solidarity in fostering a congenial environment that transpires in job satisfaction and realization of career aspirations.
12.3.4	In keeping with the dual principles of responsibility and <i>esprit de corps</i>, (a) the institution's constituent community diligently fulfills its assigned responsibilities; (b) the institution exhibits solidarity in fostering a congenial environment that transpires in job satisfaction and the realization of career aspirations. (d) promotes an attitude of mutual respect among students, and their receptivity to intellectual, cultural, and religious differences; (e) encourages a spirit of reciprocity and cooperation among faculty members.
12.3.5	The institution applies the principle of accountability in a forthright and earnest manner.
12.3.6	The institution evaluates the extent and level of implementation of the dual principles of responsibility and <i>esprit de corps</i> by examining the effectiveness of its practices in creating an enabling and encouraging environment among the members of its constituent community.

Suggested Prompts for Quality Indicator 12.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How does the institution promote an attitude of mutual respect among students, and receptivity to intellectual, cultural, and religious differences?
2. To what extent does the institution apply the principle of accountability to its faculty and employees?
3. How does the institution ensure that a synergy between the principles of dedication to responsibility and the generation of *esprit de corps* is achieved?

Analysis and Evaluation Re: 12.3					
Mark ✓ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 12.3.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 12.3.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 12.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 12.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 12.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 12.3.				
Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Standard XIII

Quality Assurance and Improvement

A. Standard Requirements

The institution ascertains its quality and effectiveness through the application of: *first*, a Quality Assurance System (i.e., internal quality monitoring processes), and *second*, an Academic Accreditation System (i.e., external quality monitoring processes).

B. Quality Indicators

Quality Assurance System

- 13A.1 The institution has in place a specialized unit earmarked for Quality Assurance matters.
- 13A.2 The unit responsible for quality assurance matters promotes among its constituent community the culture of (a) assessment, (b) self-monitoring, and (c) continuous quality improvement.
- 13A.3 The institution executes its Quality Assurance Plans that ensure the implementation of evidence-based assessment processes and prepare the institution for the achievement and maintenance of accreditation.

Academic Accreditation System

- 13B.1 The institution has a specialized unit(s) earmarked for institutional and programmatic accreditation.
- 13B.2 The institution seeks and maintains: (a) institutional accreditation that is granted by the National Bureau for Academic Accreditation and Education Quality Assurance (NBAQ), and (b) programmatic accreditation that is granted by specialized and independent scientific agencies.
- 13B.3 To improve its performance and efficiency, the institution utilizes and benefits from its self-assessment reports (both institutional and programmatic), as well as the recommendations of peer evaluation teams.

C. Key Components of the Quality Indicators of Standard XIII

First: Quality Assurance System

13A.1 The institution has in place a specialized unit earmarked for Quality Assurance matters.

Components of the Quality Indicator	
13A.1.1	The unit, earmarked for quality assurance, fulfils its responsibilities concerning internal quality assurance, in the following manner: (a) Gathers evidence, demonstrating that the institution is efficiently achieving its mission and objectives. The unit presents the evidence to the institutional community as well as to society at large. (b) Oversees "SWOT" analysis (or its equivalent) of all degree programs and units with the purpose of identifying individual and exclusive strengths, weaknesses, opportunities and threats. (c) Provides periodic analytical reports to the top governing body/administration, with the aim of improving institutional programs and units. (d) Ascertains that the performance of the members of its constituent community attains desired levels. (e) Ascertains that members of its constituent community effectively perform their duties in a professional manner. (f) Ascertains that the faculty members design the curricula and teach their courses in accordance with specified requirements. (g) Ascertains that the graduates are: (1) qualified in their fields, (2) employable, and (3) capable of serving the community and society at large.

	(h) Ascertains that the principles of integrity, responsibility, and <i>esprit de corps</i>, as well as the values of transparency, fairness, and honesty, prevail throughout the institutional academic, administrative, and financial practices. (i) Ascertains that scientific research and productivity of faculty members and graduate students is adequate on quantity and quality counts. (j) Ascertains that the institution's contributions to community services and its outreach programs are adequate, helpful, and relevant to the community's needs. (k) Ascertains that the institution's action-plan is put into effect and that it enhances the continuous development of the performance of the constituents (l) Ascertains that infrastructures and technology systems are sufficient and that they are efficiently managed. (m) Ensures that the student to faculty ratio is comparable to international standards. Moreover, faculty holding PhDs from accredited universities teach a minimum of 50 percent of credits required for graduation in each diploma program, a minimum of 90 percent of credits required for graduation in each bachelor's degree program, and 100 percent credits required for graduation in each Master's and PhD program.
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Suggested Prompts for Quality Indicator 13A.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What mechanism does the institution employ to empower its unit responsible for quality assurance?
2. To what extent are the institution's practices (educational, administrative, fiscal, etc.) aligned with its "Quality Assurance System"?
3. What issues received priority treatment by the CUQA during the previous four years?
4. How does the CUQA promote among the institutional constituencies the culture of assessment, continuous quality improvement, and self-monitoring?

5. How does the CUQA determine that the institution's graduates are qualified in their fields, employable, and capable of serving the community and society?
6. How frequently does the CUQA provide analytical reports to the governing body in regard to the improvement of institutional programs and units?

Analysis and Evaluation Re: 13A.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 13A.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 13A.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 13A.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 13A.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 13A.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 13A.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

13A.2 The unit responsible for quality assurance matters promotes among its constituent community the culture of (a) assessment, (b) self-monitoring, and (c) continuous quality improvement.

Components of the Quality Indicator	
13A.2.1	The institution draws from local, regional and/or global expertise for its self development, and for continuous improvement of its practices.
13A.2.2	The unit periodically organizes activities that aim at disseminating the culture of assessment and self-monitoring.
13A.2.3	The unit gauges the level of faculty's involvement with processes related to quality assurance matters.

Suggested Prompts for Quality Indicator 13A.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What percentage of faculty members participate in activities that strengthen both the culture of assessment and that of self-monitoring?
2. What measures does the institution adopt to ensure that members of the units responsible for quality assurance possess the required skills and competencies with regard to self-assessment?

Analysis and Evaluation Re: 13A.2	
Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 13A.2.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 13A.2.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 13A.2.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 13A.2.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 13A.2.

Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 13A.2.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

13A.3 The institution executes its Quality Assurance Plans that ensure the implementation of evidence-based assessment processes and prepare the institution for the achievement and maintenance of accreditation.

Components of the Quality Indicator	
13A.3.1	The institutional "quality assurance system" includes measurable benchmarks as well as general assessment elements, uniformly applicable to all degree programs, and units. The system also includes special standardized benchmarks concerning specific requirements of certain degree programs and units.
13A.3.2	The institution holds consultations with its beneficiaries (and experts in the fields taught), regarding the establishment of a quality assurance system for continuous self-assessment, and quality control of its practices.
13A.3.3	Each program has a unit/office that oversees its quality assurance.
13A.3.4	The unit(s) responsible for quality assurance and accreditation solicits the faculty's opinion through surveys concerning the quality of programs they are affiliated with.
13A.3.5	The unit(s) responsible for quality assurance and accreditation solicits the employment sectors' opinion concerning the competencies and aptitudes of graduates for practicing their profession as per degrees earned.

13A.3.6	The unit(s) responsible for quality assurance and accreditation solicits the opinion of alumni on the benefits and adequacy of the competencies and skills they acquired during the course of their study at the institution.
13A.3.7	The unit(s) responsible for quality assurance and accreditation generates statistics on the faculty's research quality (quantitative and qualitative), as well as the faculty's contribution in the generation of new knowledge.
13A.3.8	The unit(s) responsible for quality assurance and accreditation assesses the scope, quality, and impact of the services offered by the institution to the community.
13A.3.9	The unit(s) responsible for quality assurance and accreditation assesses the efficiency and quality of institutional infrastructure and operational system.
13A.3.10	The unit(s) responsible for quality assurance and accreditation generates analytical reports on the success and benefits of internal assessment and self-regulatory processes concerning quality assurance.
13A.3.11	The administrative officers of programs and units submit periodic reports, documenting the strengths, weaknesses, opportunities, threats, and challenges confronting the programs and units.
13A.3.12	The educational institution's top governing body/administration periodically assesses the performance and effectiveness of its quality assurance unit(s), and the extent of success of the mechanism of continuous self-assessment and quality control.

Suggested Prompts for Quality Indicator 13A.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. Does each program have an office/committee that oversees its quality assurance? What are the qualifications and required specialized skills of the heads of these offices/committees?

2. To what extent do units responsible for quality assurance use faculty's feedback to ascertain the quality of programs? How do programs use this faculty feedback?
3. To what extent are the units responsible for quality assurance able to identify the strengths, weaknesses, opportunities, threats, and challenges confronting the institutional programs and units? What is the impact of their work on the improvement of the programs and institutional units?
4. To what extent does the governing body assess the performance and effectiveness of its quality assurance unit? What is the impact of this assessment?
5. How many assessment reports were published by the units responsible for quality assurance? To what extent did these reports incorporate the level of student learning outcomes as a key factor in their assessment reports?

Analysis and Evaluation Re: 13A.3 Mark √ for actions implemented. Justify the exclusion of unmarked actions.	
Action 1	State the prompt questions relevant to 13A.3.
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 13A.3.
Action 3	Account for strengths and weakness and challenges per Quality Indicator 13A.3.
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 13A.3.
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 13A.3.
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 13A.3.

Action 8	Provide an annotated inventory of relevant supporting/ evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

C. Key Components of the Quality Indicators of Standard XIII

Second: Academic Accreditation System

13B.1 The institution has a specialized unit(s) earmarked for institutional and programmatic accreditation.

Components of the Quality Indicator	
13B.1.1	The institution has a Central Unit for Academic Accreditation (CUAA) which is dedicated to the achievement of accreditation(s).
13B.1.2	The CUAA promotes awareness among faculty of the benefits of accreditation, as well as the requirements for its successful accomplishment.
13B.1.3	The CUAA takes necessary steps towards ensuring that a team of faculty members possesses the needed expertise as regards self-evaluation processes, and the preparation of professional reports on self-assessment regarding accreditation.
13B.1.4	Each program has a unit, office or a committee, responsible for overseeing academic accreditation.
13B.1.5	All service units and degree programs of the institution closely cooperate with the CUAA in the implementation of academic accreditation processes.
13B.1.6	The degree programs maintain liaison and communication, as well as develop interactive relations, with internationally recognized accreditation organizations and agencies.
13B.1.7	Most programs/departments are successful in achieving accreditation of their respective programs.

13B.1.8	The institution maintains a website that keeps the faculty and staff updated on the academic accreditation of the institution as well as ongoing and prospective plans concerning accreditation of programs. The website relays vital information, data and statistics, spanning the previous four years; it also provides access to assessment forms, as well as miscellaneous documents, facilitating the preparation of analytical and assessment studies concerning accreditation.
13B.1.9	The CUAA deals with The National Bureau for Accreditation and Education Quality Assurance as a key partner for the continuous improvement of the institution's performance, and promptly responds to the Bureau's recommendations.
13B.1.10	The institution's top governing body/administration periodically assesses the performance and effectiveness of the CUAA, gauging the extent of its success.

Suggested Prompts for Quality Indicator 13B.1

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. How well does the scope of the CUAA's responsibilities align with the extent of the authority it holds?
2. To what extent does the CUAA interact or form partnerships with internationally recognized accreditation organizations and agencies? What is the level of cooperation with these organizations and agencies? What is the level of cooperation with these organizations and agencies?
3. What mechanism does the CUAA employ to promote the close cooperation of service units and academic programs in its pursuit of achieving institutional accreditation by the NBAQ?
4. In what ways does the institution ensure that some faculty members possess expertise in conducting self-assessment processes on the level of program and institution?
5. What percentage of academic programs achieved programmatic accreditation? Is this percentage consistent with the institution's plans in regard to programmatic accreditation?

6. What process is in place to address the inability of programs to achieve programmatic accreditation?

Analysis and Evaluation Re: 13B.1					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 13B.1.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 13B.1.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 13B.1.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 13B.1.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 13B.1.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 13B.1.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

13B.2 The institution seeks and maintains: (a) institutional accreditation that is granted by the NBAQ and (b) programmatic accreditation that is granted by specialized and independent scientific agencies.

Components of the Quality Indicator	
13B.2.1	The institution's governing body/administration consistently supports and gives impetus to the implementation of the academic accreditation assessment processes.

13B.2.2	The CUAA has in place a plan that facilitates completion of the institutional self-assessment accreditation reports. A number of faculty and administrative staff review the final drafts of the reports.
13B.2.3	The institution has a comprehensive guide, outlining standard processes, procedures and steps towards achieving academic accreditation. The guide addresses issues pertaining to the preparation of self-assessment reports, etc.
13B.2.4	The CUAA takes necessary measures in the preparation of an accurate, comprehensive, and focused report on institutional self-assessment, duly taking account of the standards of the NBAQ.
13B.2.5	Each degree program of the institution has in place a plan for accomplishing the program's self-assessment report, the final draft of which is verified by a number of faculty members from the department.
13B.2.6	All units and programs of the institution participate in the preparation of the institutional self-assessment report.
13B.2.7	The CUAA organizes site visits for peer evaluation teams for the purpose of consultation.
13B.2.8	The institutional self-assessment report measures key requirements of the standards of the NBAQ's instructions on the writing and formatting of the aforementioned report.

13B.2.9	Self-assessment reports for programmatic accreditation are characterized by the following features: (a) The self-assessment report is analytical and duly supported by relevant statistics. (b) The self-assessment report takes due account of multiple quality indicators and it is based on the comprehensive analysis of accumulated data, demonstrating the continuity of quality improvement concerning instructional methods, student learning outcomes, and the effectiveness of administrative and planning practices, spanning the previous four years. (c) The self-assessment report is based, among other factors, on opinion surveys of beneficiaries, i.e., faculty, students, staff, alumni, and others. (d) The self-assessment report includes applicable recommendations that are significant in creating an enabling and congenial climate.
13B.2.10	The findings of institutional and programmatic self-assessment reports are correct, substantiated, and explicit.

Suggested Prompts for Quality Indicator 13B.2

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. What role does the governing body play with regard to accreditation? How does it assess the success of its role?
2. What resources are allocated to the continual support of the CUAA?
3. How well does the CUAA achieve its tasks of documenting and archiving?
4. What mechanism is in place to ensure that units/departments/programs consider programmatic accreditation a priority?
5. How does the institution acknowledge the work of faculty members in charge of major accreditation processes?

Analysis and Evaluation Re: 13B.2						
Mark √ for actions implemented. Justify the exclusion of unmarked actions.						
Action 1	State the prompt questions relevant to 13B.2.					
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 13B.2.					
Action 3	Account for strengths and weakness and challenges per Quality Indicator 13B.2.					
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 13B.2.					
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 13B.2.					
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.					
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 13B.2.					
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.					
Compliance Rating		0	1	2	3	4
Rationale for Excluding Actions Number (specify)						

13B.3 To improve its performance and efficiency, the institution utilizes and benefits from its self-assessment reports (both institutional and programmatic), as well as the recommendations of peer evaluation teams.

Components of the Quality Indicator	
13B.3.1	The CUAA undertakes corrective measures in light of self-assessment reports and peer evaluations.
13B.3.2	Degree programs rectify curricula, instructional methods, etc, in light of self-assessment reports and feedback from peer evaluation teams.

Suggested Prompts for Quality Indicator 13B.3

[It is not mandatory for the institution to respond to each of the suggested prompts. However, the institution's responses to all the standards, the quality indicators and their components must be substantiated.]

1. To what extent does the CUAA undertake corrective measures to remedy problems highlighted by assessment reports and feedback from peer evaluation teams?
2. What impact has assessment had on faculty's approach to student-centered education?

Analysis and Evaluation Re: 13B.3					
Mark √ for actions implemented. Justify the exclusion of unmarked actions.					
Action 1	State the prompt questions relevant to 13B.3.				
Action 2	State and analyze the findings of the Task Team apropos Quality Indicator 13B.3.				
Action 3	Account for strengths and weakness and challenges per Quality Indicator 13B.3.				
Action 4	Appraise, using data and statistics and qualitative evidence, the extent that the units/programs effectively meet their stated objectives apropos the Quality Indicator 13B.3.				
Action 5	Evaluate the extent that the units relevant to the Standard are in compliance with Quality Indicator 13B.3.				
Action 6	Explain how analysis and evaluation can be utilized to implement timely quality improvement plans and practices.				
Action 7	Select the ratings (from 0-4) that accurately reflect level of compliance with Quality Indicator 13B.3.				
Action 8	Provide an annotated inventory of relevant supporting/evidential documents and data in electronic format.				
Compliance Rating	0	1	2	3	4
Rationale for Excluding Actions Number (specify)					

Appendices

Appendix A : Glossary of Terms

Academic/training staff: teaching assistants with appropriate qualifications and assist faculty members; may be responsible for secondary teaching duties and/or other administrative functions; including full-time and part-time persons.

Bylaws: documented rules that regulate the functioning of the institution. These may be rules, regulations, laws, policies, or similarly named.

Central Unit for Academic Accreditation (CUAA): the institutional top unit which is dedicated to the achievement and follow-up processes pertaining to institutional and programmatic accreditation.

Constituencies: internal and external groups who are affected by the institution, its degree programs, services, and its overall operations. Relevant internal constituency groups include students, faculty, academic/training staff, administrators, employees and personnel. External constituency groups include potential employment sectors, governmental bodies, prospective applicants, parents of students, professional associations, and alumni.

Core Program in General Education: includes a spectrum of courses in the humanities, literature, arts, and social and behavioral sciences that all students should take. This program does not include specialized courses or professional training.

Degree Program: the term refers to a prescribed curriculum composed of a sequence of credit courses that mandate contact hours and whose successful completion terminates in the awarding of a degree. Degree programs can be academic, professional, occupational, and/or technical.

Developmental Plan: a document that prescribes a focused course of tactical action that targets the improvement and enhancement of a specific sector or unit in accomplishing its intended operational goals. Typically, developmental plans are short-term or medium-term.

Effectiveness: the term refers to the systematic and documented process that measures the performance of the institution with regard to three aspects: (1) how well the institutional units/sectors are achieving their set targets and objectives without draining their resources; (2) how well they are using their data and feedback from stakeholders/constituency groups to improve the efficiency and productivity of their operations; (3) how successful they are in delivering a student-centered and employability-oriented education.

Executive Authority: a term that designates the president, vice-president(s), dean(s), departmental chair(s), and director(s) of administrative/service sector(s).

Faculty members: the term refers to all those an institution assigns to teach and instruct students in academic and occupational/technical degree programs, this includes full-time and part-time persons. Each faculty member is associated with at least one educational unit, or its equivalent. Faculty members may also be responsible for administrative functions in various support sectors of the institution.

General Frame of Reference (GFR): an umbrella term that comprises the institution's vision, mission, goals, and values.

Governing Body: the highest administrative entity (such as a board of trustees), vested with executive and legislative authority, and whose members constitute a competent body of professionals possessing widely-diversified specializations and expertise. The governing body is accountable for the accomplishment of the institution's mission and goals, as specified in the institutional General Frame of Reference (GFR). Moreover, it is accountable for overseeing the quality and efficiency of the institution.

Integrated campus: the institution's various campus sites (if applicable) are connected through an efficient bus/shuttle system.

Institution: a degree-granting post-secondary educational entity that is licensed by the Ministry of Higher Education in the State of Kuwait. For the purposes of this Standard, the institution is considered to be composed of: (1) academic units (colleges, academic departments or similarly named), and (2) support sectors (includes administrative and service functions).

Learning Outcomes: statements that define a set of desired abilities, skills, knowledge literacy, and the application of knowledge and skills that existing students from a degree program must achieve. Measurable and tangible, learning outcomes provide directions for the sequencing of courses comprising a curriculum, the development of curriculum content and students services, and the alignment of teaching strategies with assessment methods. Each program aims a well-defined set of learning outcomes as indicators of the extent and quality of student knowledge literacy and acquisition of expected skills, character traits, and competencies. Occupational/technical programs identify the advanced tools and equipments with which students must demonstrate competency.

Quality Assurance System (QAS): the *internal* quality monitoring processes that the institution implements to ascertain its quality and effectiveness. While the

QAS is internal, namely based on self-assessment and self-monitoring, the Academic Accreditation System (AAS) involves *external* quality monitoring processes conducted by/through the NBAQ.

Stakeholders: closely linked with the term “constituencies,” it designates groups that have a vested interest in the effective operation of the institution and its achievement of its mission and goals.

Strategic Plan: a document that sets forth a holistic, developmental, long-range directing plan whose set of actions are based on advancing the institutional mission and accomplishing future envisioned goals and objectives. Emphasizing a broad vision, it re-evaluates the performance and management patterns of all sectors and units of the institution, the institutional operational mechanisms, and the development and optimization of all resources.

Support personnel: persons working in the institution that are neither faculty nor academic/training staff. These are divided into: (1) managerial cadres (executives and administrators) who manage the various support sectors of the institution, and (2) non-academic manpower that staff academic units and support sectors. Persons working for entities with service level agreements with the institution are considered to be Support Personnel and are similarly bound by the requirements of this Standard.

Appendix B : The NBAQ's Eligibility Requirements for Institutional Accreditation

Eligibility is a process whose aim is to screen institutions prior to a period of formal cooperation with the NBAQ that culminates in a site-visit evaluation by peer evaluators. Institutions must meet all the requirements listed below and provide relevant evidential documents.

Eligibility Requirements:

1. **Licensure.** If non-governmental, the institution must be licensed to operate as a post-secondary educational institution that awards degrees.
2. **Proper Governance.** The institution has a bona fide governance structure. It has a governing body that appoints two academically qualified persons as president and deputy president (or equivalent posts) on a full-time basis; both president and deputy president have requisite administrative and executive authority.
3. **General Frame of Reference.** The institution has a vision, mission, goals, and values that are officially adopted by its governing board and are posted on its official website. Its General Frame of Reference is appropriate to a student-centered higher education institution and is consistent with its nature (academic, research-oriented, vocational, polytechnic).
4. **Strategic Plan.** The institution has a tenable strategic plan that is publicized. The plan charts and describes the institution's developmental projects in regard to educational effectiveness, quality enhancement of student achievements, and improvement of institutional practices.
5. **Financial Stability and Accountability.** The institution has adequate financial resources that are well documented in terms of sources, available revenue, and expenditure. The institution undergoes a comprehensive financial audit by an external, experienced and professional bureau.
6. **Degree-granting Status.** The institution is operational and it offers one or more degree program(s) whose duration is at least 2 years (or four semesters). At least 75 percent of the student population is enrolled in degree programs. At least one batch of admitted students has successfully graduated from a degree program(s).

7. **Admission Policies.** The institution's admission policies are clearly articulated and are congruent with its mission and goals; these policies align student aptitudes with admission into programs.
8. **Faculty.** Faculty members have proper credentials and sufficient expertise. The size of the institution's faculty is appropriate to the number of programs offered as well the number of enrolled students. A significant percentage of faculty is appointed on a full-time basis. The institution has published and widely available bylaws on faculty's responsibilities and rights.
9. **General Education.** A General Education component forms an integral part of all offered programs. The courses comprising General Education are diverse in subject matter; they target a range of clearly defined competencies and skills (both soft and hard); and they are compatible in rigor and depth to higher education levels.
10. **Post-Secondary Level Programs.** Programs offered are consistent with the institution's General Frame of Reference and they meet the internationally agreed-upon principles of admission, curricula, number of credits, duration, and graduation requirements. The detailed curricula of each offered program is available in print and electronic format.
11. **Student Learning Outcomes.** The institution has official documents that clearly align student learning outcomes, competencies, and knowledge literacy with the curricula of offered programs. The institution, moreover, has official documents about methods used systematically in assessing student learning outcomes.
12. **Human Resources.** The institution has human resources with sufficient and appropriate qualifications to provide administrative and student services on a daily basis.
13. **Physical Resources.** The institution has adequate physical resources that support educational effectiveness. The instructional learning and information resources are adequate for the mission of its academic programs and the research activities of its faculty. The institution's campus provides the institution's constituencies with an enabling environment.
14. **Integrity.** The institution provides its constituencies, in print and electronic format, with accurate and up-to-date information about its licensure, the composition of the governing body, the qualifications of its top administrators and faculty, the curricula of programs offered and their programmatic accreditation status, its policies and bylaws in regard to internal stakeholders

(i.e., students, faculty, and staff), financial resources and student tuition rates and obligatory fees and student refund policies, its complaint and grievance procedures in regard to all constituencies, its observance of confidentiality, its commitment to the ethical values of impartiality, fairness, non-discrimination, respect for civic values, protection of the freedom of expression, and its mechanism(s) to investigate any breach of the above ethical values and practices.

Appendix C: Additional Suggested Prompt Questions

Additional Prompt Questions for Standard I

Institutional General Frame of Reference

Additional Prompts Questions for Quality Indicator 1.1

1. In what way does the institutional vision align itself with the mission, goals and objectives that the institution seeks to achieve in the future on local, regional, and international levels?
2. If applicable, how would the institution describe and delineate the alignment of the institutional vision, mission, goals and values with the “parent” institution, and how do they demonstrate local characteristics and priorities.

Additional Prompts Questions for Quality Indicator 1.2

1. What factors prompted the revision/amendment of the institutional vision, mission, goals and values.
2. How do the changes or amendments that were introduced to the institutional vision, mission, goals and values reflect new institutional realities?

Additional Prompts Questions for Quality Indicator 1.3

1. On what grounds does the institution claim that its vision is clear and comprehensive?
2. How does the institution utilize its vision, mission, goals and values to oversee the functionality of all sectors within the institutional setup?
3. How are the mission and goals of the institution consistent and in keeping with its nature?
4. What new organizational re-structuring (if any) was introduced to ensure and maintain quality that is pertinent to the nature of the institution?

Additional Prompts Questions for Quality Indicator 1.4

1. Are student admission policies compatible and consistent with the institution’s mission and goals?

2. Does the institutional GFR specify the institutional philosophy of education?
3. How did the institution's conceptualization of its mission influence major recent decisions as regards institutional improvement and policy changes?
4. To what extent did the review(s) of programs, research productivity, technical training, and the assessment of other factors play a role in developing the GFR?
5. Does the institutional GFR include a section on its future developmental plans? How far into the future do these plans extend?

Additional Prompts Questions for Quality Indicator 1.5

1. What tools does the GFR use to ensure continuous improvements?

Additional Prompts Questions for Quality Indicator 1.6

1. Through what channel does the institution publicize its GFR?

Additional Prompt Questions for Standard II

Administration and Leadership

Additional Prompts Questions for Quality Indicator 2.1

1. What role does the governing board (or the board of trustees) play in the development of the institution?
2. To what extent do budgetary expenditures advance the institution's quality improvement plans.

Additional Prompts Questions for Quality Indicator 2.2

1. Through what channels does the institution publicize its organizational structure?
2. According to what criteria is the chief executive (or president) appointed?
3. What are the main responsibilities of the chief executive (or president) of the institution?
4. What types/range of competencies, and expertise possess members of the top governing body of the institution?

5. What legislative framework and general bylaws govern administrative and academic positions. To what extent are they effective?
6. Does the institution have a detailed and published guide that specifies all job descriptions and responsibilities, duties, prerogatives, and appointment requisites of each job/position?
7. Has the institution introduced changes to its organizational structure during the previous four years? Why?
8. How did documents regarding job descriptions contribute to the cultivation of the culture of quality and the commitment to effectiveness and work ethics?
9. What is the institution's understanding of effective leadership? What are its principles as conceptualized by the institution's governing body (or board of trustees)?

Additional Prompts Questions for Quality Indicator 2.3

1. How does the governing body of the institution develop and implement the plan for the institutional quality improvement and financial resource adequacy? How does the institution ensure the effective usage of available human and fiscal resources?
2. How widely publicized and easily obtainable is the institutional manual (guide) which details the regulations, bylaws, policies, and administrative, financial, and legal procedures concerning employees, faculty and staff?
3. What knowledge, skills, and attitudes should faculty/staff possess to be eligible for holding executive authority?
4. What evidence exists that the executive authority has effectively utilized available resources (human and fiscal) for developmental purposes?
5. How does the institution evaluate those of its administrators vested with executive authority, and their adherence to effective governance?
6. What are the grounds for taking corrective action to rectify the deficient performance of members holding executive authority?

Additional Prompts Questions for Quality Indicator 2.4

1. To what extent is the governing body accountable for the accomplishment of the mission, goals and values of the institution?

2. What evidence exist that the institution's executive authority adhere to the ethics and practices of good governance (e.g., objectivity and transparency) and professional excellence in all its dealings?
3. How does the institution guard against unfair and discriminatory practices?

Additional Prompts Questions for Quality Indicator 2.5

1. How does the institution develop its strategic plan for continual quality improvement?
2. What is the organizational structure of the institution's unit in charge of academic accreditation and quality assurance? And how effective is it?
3. What initiatives did administrators with executive authority undertake during the previous four years to develop the quality and effectiveness of their units and sectors?
4. How does the institution demonstrate the importance it places on rewarding excellence?
5. How do the units of the institution respond to the plans and initiatives of its academic accreditation and quality assurance unit?

Additional Prompt Questions for Standard III

Faculty

Additional Prompts Questions for Quality Indicator 3.1

1. What are the institutional criteria regarding the recruitment of prospective faculty members?
2. What percentage of faculty members are full-time?
3. In what way does the institution encourage the faculty to participate in professional development programs and workshops?
4. How successful is the institution in attracting faculty members who are targeted by the institution's policies and plans in regard to faculty employment? What statistics are available for substantiation?

Additional Prompts Questions for Quality Indicator 3.2

1. Are the faculty's areas of expertise, within each academic program offered by the institution, sufficient to ensure the quality of taught curricula.
2. How does the institution ensure that policies/criteria in relation to faculty credentials are complied with consistently?

Additional Prompts Questions for Quality Indicator 3.3

1. How does the institution ensure that the number of faculty in each program is adequate for its effective operation?

Additional Prompts Questions for Quality Indicator 3.4

1. Do faculty members comply with the institutional philosophy of education?
2. To what extent are faculty members committed to student-centered teaching?
3. What does the institution expect of the faculty in terms of research productivity? How does it assure that these expectations are met?
4. To what extent does the faculty participate in serving the institution and society at large?
5. How does the institution promote faculty's services to the community?
6. What is the impact of graduate programs on the performance of the faculty?
7. How does the institution ensure that the faculty performs its role/responsibilities efficiently?
8. How has diversity affected academic programs and research generation?
9. Have the level and scope of institutional support for faculty over the previous four years increased, decreased, or remained unchanged?
10. In what ways does the institution encourage faculty's participation in professional development programs and training workshops?
11. What procedures does the institution implement to support the development of faculty as teachers and researchers?
12. What recent initiatives did the institution introduce to reward or encourage faculty?

13. Is the institution committed to providing employment security to its competent faculty through tenure and long-term contracts?
14. Does the institution implement a policy of granting regular sabbatical leaves to each of its faculty members?
15. How well do faculty members observe professional ethics?
16. Does the institution recognize and reward faculty members who excel in teaching, research, and services?
17. What process does the institution follow in handling faculty's grievances and complaints?
18. How does the institution support faculty in terms of health insurance, housing, etc?
19. Are policies regarding faculty promotions uniformly and consistently applied?
20. On what basis does the institution determine the termination of contracts?
21. Does the institution put restrictions on intellectual freedom, or freedom of expression?
22. How does the institution ensure that opportunities for self-improvement are equitably accessible to all faculty?
23. How does the institution ensure that policies regarding faculty rights and responsibilities are fairly implemented?

Additional Prompts Questions for Quality Indicator 3.5

1. What measures does the institution implement to ensure the participation of faculty in the evaluation of student learning outcomes?
2. What measures did the institution adopt to assess how effectively the institutional faculty services are functioning?
3. How has faculty's feedback been used to impact institutional decision making and the improvement of services and facilities offered to faculty?
4. What role does students' evaluation of faculty play in improving faculty teaching?
5. In what areas is the faculty distinguished?
6. How does the institution evaluate its policies and bylaws regarding faculty rights and responsibilities? Who carries out the evaluation?

Additional Prompt Questions for Standard IV

Student Affairs and Support Services

Additional Prompts Questions for Quality Indicator 4.1

1. Who oversees student admissions?
2. Do the institution and its programs adhere to admission criteria that are well-defined, and announced publicly?
3. How does the institution publicize its admission criteria?
4. Does the institution uniformly apply admission requirements on students seeking admission?
5. Does the institution have pre-requisites for admission to specific programs? Are these pre-requisites consistently applied?
6. What are the main admission criteria to graduate programs?
7. What process has been used to establish the current admission policies for select programs?
8. How did the institution's admission policies for select programs impact the quality assurance processes of these programs?
9. How does the institution ensure that it applies principles of equality and integrity to student admissions?
10. Are the admission and retention rates consistent with the institution's mission and goals? Are they consistent with the institution's strategic plan?
11. How does the institution ensure that the quality of physical facilities and services related to students are commensurate with the number of enrollees?
12. How does the institution demonstrate that tuition and fees are commensurate with degrees earned?
13. To what extent is the institution successful in providing financial aid to students?

Additional Prompts Questions for Quality Indicator 4.2

1. According to what principles does the institution formulate its policy on credit transfer?
2. According to what criteria is course equivalence determined?

Additional Prompts Questions for Quality Indicator 4.3

1. Who oversees student orientation and guidance?
2. Who oversees the organization of student activities on and off campus?
3. Who is responsible for responding to student queries and addressing their problems?
4. Does the institution have bylaws on student rights and responsibilities, and proper student conduct?
5. According to what mechanism does the institution determine the frequency of courses offered?
6. To what extent does the institution observe its policies governing course registration and withdrawal?
7. How does the institution maintain student records?
8. Who oversees the updating of student files?
9. What types of first aid and primary healthcare services are available on campus? What evidence exists that students benefit from healthcare services?
10. How does the institution ensure that the scope/range of student support services is commensurate with student needs?
11. How do student support services reflect elements that are present in the institutional General Frame of Reference?
12. How has the improvement in quality of student support services impacted the allocation of institutional resources, both fiscal and physical?
13. What processes and mechanisms are in place to ensure the confidentiality and protection of student records?
14. What mechanisms does the institution implement to systematically evaluate units tasked with student services? How effective are these mechanisms?

15. What evidence exists that the institution has upgraded the technology used in administering student academic affairs?
16. What efforts are undertaken to promote awareness of the scope of available student services among newly-admitted enrollees?
17. Which student services are given priority in the current institutional developmental plan? Why?
18. What types of support services does the institution provide for students who are on probation or at risk of dismissal?
19. How effective and adequate are the institution's program(s) in helping students with special needs?
20. What kinds of training and field exposure does the institution provide for its students?
21. To what extent do students participate in setting up extra- and co-curricular activities?
22. How does the institution ensure the security of student records from physical and electronic theft and destruction?
23. What processes are in place to tackle student complaints and grievances regarding issues such as registration, grading, violation of rights, disciplinary actions, etc?
24. How have recent changes in policies and the management of available facilities impacted student campus life?

Additional Prompts Questions for Quality Indicator 4.4

1. Who oversees student training, internship, and career guidance?
2. What types of job-related assistance does the institution provide to its senior/graduating students?
3. To what extent does the institution communicate with its graduates? For what purposes?
4. How often does the institution organize self-improvement activities for its students?

Additional Prompts Questions for Quality Indicator 4.5

1. Is the institution's catalog available in both electronic and print formats?
2. What are the types of information available in the institution's catalog?
3. How does the institution publicize its academic calendar?
4. How does the institution publicize dates that are important for student affairs?
5. How often does the institution organize orientation programs for newly-admitted students?
6. How effective is the institution's online student-support system?
7. Through what channels does the institution publish its bylaws and guidelines on student rights, responsibilities, on-campus ethics and proper conduct?
8. What measures does the institution undertake to promote adherence among students to the principles of ethical conduct?
9. What evidence exists that students benefited from orientation programs?
10. What are the grounds for dismissal of a student from the institution?
11. How does the institution ensure that its units and constituencies are updated on changes in policies and bylaws related to student affairs?

Additional Prompt Questions for Standard V

Degree Programs

Additional Prompts Questions for Quality Indicator 5.1

1. How do key student learning outcomes reflect the missions and goals of programs?
2. How are student learning outcomes reflected in the construction of major sheets/curricula of programs?
3. What processes are used to formulate/review the vision, mission, and goals of degree programs?
4. How have the institution's mission and goals impacted the formation of the General Education Program (or its equivalent)?

5. How has the institution's philosophy of education impacted the teaching strategies of the degree programs?
6. What constituencies have participated in the formation of the General Education Program?
7. In what ways is the General Education Program linked to the degree programs?
8. What percentage of credits does the General Education component carry in the humanities and social sciences?
9. Does the institution have mandatory courses in the history of Kuwait?
10. Through what channels do students and faculty members obtain information about programs and curricula?
11. Does the institution have a mechanism for the evaluation of Arabic and English language competency before admission to select programs? To what extent are the results a key factor in admission to these select programs?

Additional Prompts Questions for Quality Indicator 5.2

1. To what extent is the distribution of credits in the degree programs compatible with international norms?
2. What is the minimum number of credits for diploma degree programs, bachelor's degree programs, and graduate programs?
3. To what extent is the employability of students a factor in the design of curricula of programs, and in the adoption of teaching strategies and methods?
4. Who manages the core Program in General Education?
5. How do minor programs enhance major programs?
6. With what frequency are courses that are listed in the curricula of the different degree programs offered?
7. How do degree programs orient, advise and guide their students?
8. How does the institution assess the orientation, advice and guidance of its students?
9. What are the maximum number of credits permissible in transfer from other institutions, for diplomas, and for bachelor's degrees?

10. According to what criteria does the institution determine the compatibility of the learning experience of transfer students to enrollee students completing the same program?
11. How do transfer students impact the coherence of degree programs and the fostering of key learning outcomes and competencies?
12. What is the scope of the continuing education which is offered by the degree programs?
13. What processes are in place to benefit from student feedback with regard to the quality improvement of academic orientation, training, and revision of courses?
14. What new programs were introduced within the previous four years? With what justification?

Additional Prompts Questions for Quality Indicator 5.3

1. How does the nature of the degree programs influence the allocation of institutional resources?
2. What processes are employed to review the qualifications of faculty and teaching staff?

Additional Prompts Questions for Quality Indicator 5.4

1. How well do students understand the interrelationship between each component of the major sheet/curricula taught?
2. How do programs ensure that individual courses contribute to key student learning outcomes and competencies?
3. Are the key learning outcomes of programs compatible with the requirements of final academic degrees as well as plausible professions?
4. How pervasive are research activities in undergraduate programs?
5. How does the institution define excellence in teaching? How well do faculty members meet this definition?
6. What mechanisms do programs follow to assess the effectiveness of faculty's teaching? Do these mechanisms impact the quality improvement of instruction and training methods?

7. What practices do programs follow to promote quality assurance of taughtcurricula?

Additional Prompts Questions for Quality Indicator 5.5

1. How adequate is the institution's support for each graduate program?
2. Are the essential components of the different graduate programs consistent with international norms?
3. What evidence demonstrates that graduate program courses have advanced content and rigor commensurate with the degree levels?
4. 4. How does the institution identify and select its graduate students?
5. How does the institution select the faculty who teach graduate courses and supervise graduate students?
6. What is the institution's policy regarding transfer of credits from other institutions for graduate programs?

Additional Prompts Questions for Quality Indicator 5.6

1. To what extent are the institutional resources adequate for the effective implementation and quality assurance of the degree programs offered?
2. How do the degree programs keep in touch with their alumni?
3. How active is the unit dedicated to quality assurance of degree programs?
4. What assessment plans did programs undertake during the previous four years regarding teaching methods, instructional processes, student training, and graduation projects?

Additional Prompt Questions for Standard VI

Teaching Strategies and Methods & Student Learning Assessment

Additional Prompts Questions for Quality Indicator 6.1

1. To what extent are educational course materials available for students at the beginning of each semester?

2. What are the qualifications of the personnel who service the educational facilities on a daily basis?
3. Who evaluates the effectiveness of the operation and management of the institution's teaching-related facilities?
4. How efficient is the management of the services and daily operations of the educational facilities?
5. What are the most significant challenges facing the institution in relation to educational technologies?
6. How effective are the institution's policies and procedures in regard to the continual improvement of teaching-related facilities?
7. In what ways does the institution ensure that its facilities/libraries, and the way they are managed, are learning-centered?
8. What evidence exists that students regularly and effectively use the resources of the institution's library/libraries?
9. How does the institution create an environment that is effectively conducive to the learning experiences of students with disabilities?
10. What system does the institution employ to ensure effective and continual communication between faculty and students?

Additional Prompts Questions for Quality Indicator 6.2

1. How does the institution align its instructional technologies with student learning outcomes and competencies?
2. What evidence exists that students do utilize a variety of learning resources, including library technologies and research databases?
3. What mechanism does the institution implement to ensure the effectiveness of instructional technologies in relation to the needs of the courses offered?
4. To what extent is the student-to-faculty ratio in each course consistent with international norms?
5. What is the average number of office hours a faculty member is expected to maintain? And, in general, how are these office hours distributed through the week?
6. What are the mechanisms that faculty members use to monitor class attendance? And, how do they deal with poor class attendance?

7. What initiatives has the institution undertaken to encourage faculty to conduct empirical research in teaching methods and instructional processes that are employed in the delivery of curricula?
8. To what extent does the institution provide the faculty with opportunities to acquire knowledge in new teaching methods and technologies?
9. What are the mechanisms that the institution uses to ensure the quality of senior capstone and graduation research projects?
10. How have senior capstone and graduation research projects impacted students' employability and/or their pursuit of post-graduate programs?

Additional Prompts Questions for Quality Indicator 6.3

1. What resources are allocated to the enhancement of the institutional educational environment?
2. In what ways do course assignments help students achieve the intended key learning outcomes of courses?
3. How well do extracurricular activities align with effective acquisition of learning outcomes?
4. What role does the faculty play in the evaluation of teaching methods and knowledge delivery systems at the departmental and collegiate levels?
5. What mechanisms are in place to encourage faculty members to assess student learning outcomes in courses they teach?
6. How does the institution ensure that programs use diverse student assessment methods in the teaching of curricula?
7. To what extent do students participate in research activities and innovative practices?
8. How does the institution reward students who participate in research activities and innovative practices?
9. How does the institution assess the extent of its graduate students' acquisition of the fundamental principles of research?
10. What channels does the institution use to disseminate students' intellectual and creative achievements, and their scholarly research?
11. How does the institution ensure that students possess key soft skills upon graduation?

12. How often does the institution offer workshops and extracurricular activities that enhance students' soft skills?
13. How does the institution define the idea of student self-education?
14. To what extent do students engage in self-learning?
15. What workshops does the institution periodically offer to refine student skills? How wide-ranging and accessible are these workshops?
16. What percentage of students are satisfied with the institutional pedagogical environment?

Additional Prompts Questions for Quality Indicator 6.4

1. How do academic departments/units assess the effectiveness of course assignments, exams, etc., in relation to the cultivation of key learning outcomes of courses?
2. What steps are taken by the institution to ensure the complete coverage of the syllabi in the different programs?
3. What process is in place to assist students who need counseling regarding their academic performance? What range of support services are offered?

Additional Prompts Questions for Quality Indicator 6.5

1. For courses with multiple sections, how does the institution ensure that coverage of the contents of these courses and the performance of the students are compatible?
2. What are the mechanisms that the institution uses to advise students on how to improve their academic performance?
3. How effective is the institution in communicating with its students in regard to any decline in their academic performance?

Additional Prompt Questions for Standard VII

Scientific Research and Knowledge Generation

Additional Prompts Questions for Quality Indicator 7.1

1. What constituencies participated in formulating the institutional research

plans? How do these plans integrate into the institutional General Frame of Reference?

2. How does the institution assess the quantity and quality of the scientific research and/or knowledge generation and/or creative productivity?
3. Is the quantity and quality of the scientific research/innovative activities benchmarked with comparable institutions? How are these institutions selected?
4. How does the institution demonstrate the importance it places on research productivity and generation of knowledge?
5. How does the institution deal with faculty members who do not participate in research/innovative activities?
6. To what extent does the institution support and fund research activities related to the development of pedagogical and administrative processes?
7. What is the impact of applied research/studies on the development and revision of the curricular content of offered programs?
8. To what extent is research productivity part of the mission and goals of degree programs?
9. How does the institution encourage the alignment of the teaching of graduate and undergraduate curricula with faculty research productivity and generation of knowledge?
10. What process was used to formulate the institutional bylaws concerning the role of research in faculty promotions?
11. How does the institution incorporate the faculty's prospective research into the preparation of the institutional annual budget?
12. What policies and procedures are in place to ensure that faculty has the opportunity to conduct research?
13. How does the institution prioritize the types and areas of research/innovative output that its faculty undertakes?
14. What procedures does the institution implement to reward outstanding researchers?
15. What is the extent of consensus among faculty regarding the importance of research productivity? What does this level of consensus reveal?

Additional Prompts Questions for Quality Indicator 7.2

1. To what extent are available physical resources used to support the research and creative output of faculty and students?

Additional Prompts Questions for Quality Indicator 7.3

1. To what extent do faculty's research/innovative activities help in solving technical problems encountered in the public and private sectors in Kuwait?
2. What type of agreements does the institution have with institutions sharing similar interests—within Kuwait, in the region, and at a global level—with regard to research/innovative activities? What is the scope of these agreements?
3. What mechanism does the institution employ to assess each faculty member's research/innovative performance? How does this improve the research and creative/ intellectual performance of the faculty member?
4. How often does the institution publish statistics on research/innovative output of its faculty and its students?
5. What evidence exists that graduate students receive adequate funding for their research activities?
6. What percentage of faculty research is collaborative? What does this percentage reveal?
7. To what extent are faculty research methodologies up-to-date?
8. To what extent does the faculty research output contribute to the advancement of Kuwait's industrial, commercial, cultural and service sectors?
9. What channels does the institution employ to widen the reach and impact of its faculty research and creative/innovative output?
10. How has the institution's membership in consortia contributed to the achievement of its mission and goals? What role does the institution play in these consortia?
11. To what extent do students participate in research/innovative activities?
12. How does the institution reward faculty members who guide and supervise students involved in research/innovative activities?

Additional Prompts Questions for Quality Indicator 7.4

1. How does the institution rate the overall quality of its faculty's research? On what grounds is the rating determined?
2. How consistently does faculty's research/innovative output conform with internationally established principles of sound scholarship?
3. What mechanisms does the institution have for comparing its research/innovation output with comparable regional educational institutions?
4. What mechanism is in place to assess the impact of faculty's creative/innovative output?
5. How has faculty's recruitment during the previous four years impacted the institution's research productivity?

Additional Prompts Questions for Quality Indicator 7.5

1. What types of disciplinary measures does the institution take against its faculty and its students who violate the ethics of research?

Additional Prompt Questions for Standard VIII

Facilities, Infrastructure, and Technology Systems

Additional Prompts Questions for Quality Indicator 8.1

1. Does current spatial distribution of the institution's physical resources reflect its commitment to ensuring the quality, accessibility, and sufficiency of services extended to its constituencies?
2. To what extent does the institution ensure the accessibility of its facilities to students with disabilities?
3. How does the institution ensure that its campus is visitor-friendly?
4. How accessible is the institution's campus by public transportation?
5. How did the institution's mission and goals influence the ratio between available space in a single facility and the number of its users?
6. How does the institution demonstrate its commitment to creating a pleasant outdoor environment?

Additional Prompts Questions for Quality Indicator 8.2

1. How stable are fiscal resources for the effective operation and maintenance of facilities and infrastructure?
2. How does the institution determine its future developmental needs with regard to facilities, infrastructure, and technology systems?
3. To what extent do the institution's physical resources, the condition of its infrastructure, and available technology systems contribute to (or detract from) programs and units in the accomplishment of their missions and goals?
4. How does the institution ensure optimal and cooperative use of facilities/physical resources among its units/sectors?
5. Who oversees the daily operation of facilities and infrastructure, and campus maintenance and safety matters?
6. How often does the institution train its constituencies in the necessary skills and mastery of technological systems related to their jobs and responsibilities?
7. Does the institution make available the required variety of physical resources in a single common location to support the learning experience of students?
8. How does the institution ensure that its computer facilities are adequate and accessible for students' use?
9. How does the institution ensure that its communication systems are well-maintained?
10. How often does the institution upgrade its computer laboratories?
11. How does the institution monitor and assess the efficiency of the unit(s) that oversees the daily operation of campus facilities and infrastructure?
12. What process is in place to respond promptly to complaints from constituencies regarding the inefficiency of facilities and infrastructure in terms of management, maintenance, etc.?
13. How satisfied are the institution's constituencies with its facilities, infrastructure, and technology systems?
14. To what extent are the institution's mission and goals guiding the management style and the development (improvement) of its physical resources, infrastructure, and technology systems?

15. What types of technology systems, facilities and infrastructure types should the institution be planning for during the coming four years? Why?
16. To what extent does the institution use feedback from its constituencies to improve and maintain its facilities and infrastructure?
17. How effective are the institution's contacts regarding the daily operation and maintenance of its facilities?
1. How often do problems arise due to violations of contracts related to facilities, physical resources, infrastructure, and technology systems?

Additional Prompts Questions for Quality Indicator 8.3

1. How does the institution demonstrate that budgetary allocations for safety and security are appropriate to the size of its constituencies and the total size of its campus?
2. How does the institution dispose of chemical refuse?
3. How does the institution ensure the adequacy of emergency shelters?
4. How often does the institution provide training/information to its constituent community regarding safety and emergency matters?

Additional Prompt Questions for Standard IX

Finance and Budget

Additional Prompts Questions for Quality Indicator 9.1

1. Does the institution have bylaws that regulate its financial operations and budgetary expenditure?
2. In what context(s) is the annual budget of the institution developed?
3. To what extent is the governing body informed about the financial practices and transactions of the institution?
4. To what extent do available financial resources reflect the institution's vision, mission, and goals?
5. What constituencies participate in the preparation of the institution's master budget? And what steps does the institution follow in the budget planning process?

6. How well does the institution document its financial practices and transactions?
7. To what extent does the governing board control the institution's financial matters?
8. How effective is the institution's strategic plan in strengthening and expanding the institution's financial resources, revenue and assets?
9. What percentage of the budget comes from services revenue, sales of publications, long-distance programs, patents, donations, etc.?
10. How does the institution ensure that it is systematic and regular in disbursing salaries and wages?
11. To what extent does the institution investigate acts of financial mismanagement?
12. What are the types of disciplinary actions that the institution undertakes against people convicted of financial mismanagement?
13. How does the institution ensure that staff members who are responsible for financial resources act ethically?

Additional Prompts Questions for Quality Indicator 9.2

1. How does the institution ensure that its financial resources are stable?
2. How successful is the institution in balancing expenditures and revenue?
3. In what areas are the allocated financial resources insufficient?
4. How do the available resources and competition with other institutions impact the salaries and benefits of faculty and employees?
5. To what extent does (or what evidence exists that) the institution allow degree programs to increase their budgets in response to changes in cost, or the improvement of their quality assurance?
6. What plans are in place to address issues related to the institution's investment in new equipment, technology systems, library collections, etc.?

Additional Prompts Questions for Quality Indicator 9.3

1. To what extent does the institution align its spending practices with quality assurance operations and the execution of developmental projects?

Additional Prompts Questions for Quality Indicator 9.4

1. How does the institution ensure that its financial security is adequate and steady?
2. What is the percentage of the institution's budget that consists of funds obtained through loans?
3. For what types of activities does the institution obtain funds through loans?
4. How has competition from other institutions affected the institution's financial standing?

Additional Prompts Questions for Quality Indicator 9.5

1. How effective is the institution's system of independent audit?
2. How does the institution select the outside organization in charge of auditing its financial expenditures and transactions?
3. How do the institutional administrators ensure that the auditing bureau's directors/personnel are not connected with the institution in any capacity that might lead to conflicts of interest?

Additional Prompt Questions for Standard X

Human Resources

Additional Prompts Questions for Quality Indicator 10.1

1. Who oversees the unit responsible for human resource affairs?

Additional Prompts Questions for Quality Indicator 10.2

1. What are the qualifications and the required specialized skills of the staff and secretarial personnel? What are the main responsibilities of the secretarial personnel?
2. What are the most significant challenges facing the institution with regard to human resources?
3. How well-informed and aware are the institution's executives and managerial cadres of the overall institutional General Frame of Reference?
4. To what extent does the institution consult concerned degree programs and units in matters of employment of new human resources?

5. What percentage of the institution's human resource is appointed on a full-time basis?
6. What soft skills has the institution promoted, via workshops, seminars, etc., among its human resource during the previous four years?
7. How does the institution align the number of personnel in programs/units with the needs of these programs/units?
8. Do the qualifications of human resources appointed to programs reflect the institution's commitment to ensuring the quality of those programs?
9. How effective is the mechanism that the institution use to ensure that newly-appointed managerial cadres engage in good managerial practices?
10. How does the institution ensure that it is appointing the types of managerial cadres and personnel appropriate to the needs of faculty and students?

Additional Prompts Questions for Quality Indicator 10.3

1. How does the institution ensure job security for its committed and responsible human resources?
2. What are some of the reasons for contract termination of human resources?
3. To what extent does the institution implement its bylaws regarding the breach of responsibilities and abuse of power?
4. To what extent does the institution observe its regulations regarding the day-to-day duties and responsibilities of its human resources?
5. How is the performance of the managerial cadre(s) and personnel consistent with the aspirations, mission, and goals of the institution?
6. How have the institution's mission and goals impacted bylaws concerning the recruitment, rights, benefits, contract renewal, and termination of human resources?
7. How well-publicized are the manuals that contain the bylaws related to the affairs of human resources?
8. How comprehensive are the manuals regarding the following human resource matters: (1) recruitment policy, (2) employee responsibilities and rights, (3) performance evaluation mechanism, (4) promotion process and requirements, (5) vacation period, (6) contract renewal and termination, and (7) health insurance?

Additional Prompts Questions for Quality Indicator 10.4

1. How does the institution ensure that interactions between faculty and human resources are characterized by fairness and integrity?
2. Does the institution have bylaws that prohibit all forms of discrimination against its human resources?
3. What procedures are in place to handle workplace conflicts among personnel?
4. What constituencies formulated the criteria related to the promotion and/or demotion of managerial cadre members and personnel?
5. How does the institution monitor and assess the management of its human resources?

Additional Prompts Questions for Quality Indicator 10.5

1. How does the institution reward employees with excellent performance?
2. In organizing training programs, to what extent does the institution use human resource feedback regarding their needs, skills development, and professional exposure?
3. How deeply infused into managerial cadre(s) and personnel is the culture of quality assurance and dedication to serving the institution's constituencies?
4. How have salaries, wage rates, and allocated benefits impacted the efficiency level of human resources' performance?
5. How have periodic assessments of managerial cadre(s) and personnel impacted their performance?
6. What steps are undertaken when performance gaps in relation to human resources within sectors/units are noticeable?
7. What process is in place to benefit from the feedback of managerial cadres and personnel in the quality improvements of institution's units?
8. What measures are undertaken when the performance rating/assessment of personnel is unsatisfactory?

Additional Prompt Questions for Standard XI

Outreach and Community Services

Additional Prompts Questions for Quality Indicator 11.1

1. Does the institution have a Public Relations unit which is responsible for developing strong relationships with the local, regional and international communities? What are the qualifications and the required specialized skills of the head of this unit?
2. What channels does the institution employ to register its presence and familiarize the public and society with its nature, its mission, and the quality levels of its programs?
3. What channels does the institution employ to publicize services that can be rendered to society at large?
4. How effective is communication between the institution and its alumni?
5. What mechanisms does the institution employ to encourage its alumni to contribute to its development and advancement? How effective are these mechanisms?
6. Through what channels does the institution ensure effective communication with local and regional communities?
7. How have the institution's mission and goals influenced its recent community service decisions?
8. On what grounds does the institution determine budgetary allocations to community services and outreach activities?
9. What process is in place to respond effectively to queries and feedback from the community?
10. How does the institution assess the work of its Public Relations Unit?

Additional Prompts Questions for Quality Indicator 11.2

1. Is the nature of services offered by the institutional units consistent with their missions and goals?
2. To what extent does the institution cooperate with civil society's organizations and associations to contribute to resolving public affair issues?

3. To what extent is the institution committed to providing the public with life-long learning opportunities?
4. What community service projects has the institution undertaken during the previous four years?
5. To what extent does the institution encourage and support involvement of its constituencies in community service projects?
6. What sector(s) of the public does the institution prioritize in its continuing education services? What measures did it take to accomplish this goal?
7. How does the institution monitor the quality of services and programs offered to the community?
8. How does the institution reward faculty and personnel who participate in community service and outreach activities?

Additional Prompts Questions for Quality Indicator 11.3

1. How does the institution ensure that its academic programs maintain strong and enduring relationships/ties with the public and private sectors?
2. To what extent do representatives of different sectors and experts with relevant experience participate in the work of the institution's advisory committees?
3. What policies and procedures are in place to initiate and sustain the institution's partnerships?
4. To what extent do the institution's community services and partnerships impact faculty's careers and students' competencies and their civic awareness?
5. How often does the unit responsible for community service assess the mutual impact of the institution and its community partners?
6. What mechanism is in place to link faculty expertise with service to the community?
7. What mechanism is in place to link curricula and student course assignments with serving the community?
8. How does the institution align faculty's teaching load with service to the community?
9. To what extent have community service activities/projects generated fiscal revenue?

10. Realistically, how do the institution and its programs draw from local, regional, and/or global expertise for their development? What does this reveal?

Additional Prompts Questions for Quality Indicator 11.4

1. To what extent does the institution involve its constituencies in the decision-making process regarding outreach activities and community services?
2. What evidence exists that the institution uses the results of assessments to enhance and develop its community service and outreach activities?

Additional Prompt Questions for Standard XII

Ethics

Additional Prompts Questions for Quality Indicator 12.1

1. How does the institution ensure that all its constituencies adhere to the principle of integrity? How promptly does the institution take measures against violators of professional ethics?
2. How well do students understand and observe the ethics of intellectual property rights?
3. To what extent do faculty members abide by professional ethics?
4. To what extent does the institution honor the terms of its agreements, commitments, and declarations?
5. How does the institution ensure that it follows the norms of honesty and transparency in all its dealings with the NBAQ?
6. To what extent is the phrasing of the institution's bylaws on ethical conduct clear and definite? Through what channels are they publicized?
7. How effective is the institution's code of ethics in promoting ethical behavior among its constituencies?
8. Through what channels does the institution inform its constituencies about results of surveys soliciting its beneficiaries' opinions?
9. What policies are in place to align the institution's selection of administrators with its stated principles of fairness, integrity, and transparency?

10. What bylaws explicitly mandate the prohibition of conflicts of interest by the governing board, managerial cadres, administrators, faculty and staff?
11. What evidence exists that student admissions, and the appointments and promotions of faculty and human resources are carried out in a fair and transparent manner?
12. What evidence exists that the institution observes the norms of integrity, fairness, and impartiality in the processes of allocating student support, including the granting of financial aid?
13. What mechanism is in place to ensure the proper and timely investigation of violations of principles of integrity?
14. To what extent does the institution regard observance of its stated ethical values/principles a key factor in permanent appointment?
15. How effectively linked are observance of integrity and professional ethics to the promotion and rewarding of staff?

Additional Prompts Questions for Quality Indicator 12.2

1. How does the institution foster in its students the values of civil society?
2. How does the institution reprimand members of its constituencies who are convicted of acts of hate, prejudice and/or discrimination?

Additional Prompts Questions for Quality Indicator 12.3

1. How does the institution reward its employees who fulfill their assigned responsibilities in an outstanding manner?
2. How does the institution foster a congenial environment that leads to both a high level of job satisfaction and the realization of career aspirations?
3. How does the institution promote the spirit of cooperation among members of its constituencies?
4. How does the institution encourage collegiality and cooperation among its faculty members?
5. How does the institution assess its success in creating an enabling environment for its constituencies?

Additional Prompt Questions for Standard XIII

First: Quality Assurance and Improvement

Additional Prompts Questions for Quality Indicator 13A.1

1. What are the qualifications and required specialized skills of the head of the Central Unit for Quality Assurance (CUQA)?
2. How was the "Quality Assurance System" developed?
3. How well do faculty and staff understand the role and responsibilities of the CUQA?
4. How frequently does the CUQA carry out a SWOT analysis? How has the SWOT analysis impacted the institution?
5. To what extent does the CUQA gather evidence, demonstrating that the institution is efficiently achieving its mission and objectives?
6. How does the CUQA determine that the quantity and quality of scientific research and productivity of faculty members and graduate students are adequate?
7. How does the CUQA determine that the institution's contributions to community service and its outreach programs are adequate, helpful, and relevant to the community's needs?
8. To what extent does the unit responsible for quality assurance achieve the range of its responsibilities as defined by the NBAQ?
9. What are the most significant challenges that face the CUQA?
10. How has the unit responsible for quality assurance impacted the institution's approach to governance?

Additional Prompts Questions for Quality Indicator 13A.2

1. How strong is the constituencies' commitment to the culture of assessment, self-monitoring, and continuous improvement?
2. How effective are the activities that aim at the dissemination of the culture of assessment?

Additional Prompts Questions for Quality Indicator 13A.3

1. To what extent do units responsible for quality assurance use the employer feedback to ascertain the competencies and aptitudes of graduates? How do programs use this feedback?
2. To what extent do units responsible for quality assurance use the alumni feedback to ascertain the adequacy and benefits of the competencies and skills acquired by them during their studies at the institution? How do programs use this feedback?
3. How frequently do units responsible for quality assurance generate statistics on the faculty's research activities? How do programs use statistics to improve their research output?
4. What evidence exists that the institution implements a "Quality Assurance System" based on benchmarking or general (internal) assessment methods, such as solicitation of opinions from faculty and alumni?
5. How available and accessible are the institution's statistics that are related to quality assurance matters?
6. How well have assessments carried out by units responsible for quality assurance impacted the quality enhancement of curricula, student services, and infrastructure across the campus?
7. To what extent does the institution succeed in providing units responsible for the quality assurance of academic programs with adequate funding?
8. To what degree are methods used by quality assurance units within programs to solicit the opinions of constituencies both candid and objective?

Additional Prompt Questions for Standard XIII

Second: Academic Accreditation System

Additional Prompts Questions for Quality Indicator 13B.1

1. What are the qualifications and required specialized skills of the head of the CUAA?

2. What role does the CUAA play in developing/reviewing the institution's vision and mission?
3. How does the CUAA promote awareness among faculty of both the benefits of accreditation and the requirements for its successful accomplishment?
4. To what extent do academic programs cooperate with the CUAA in submitting their assessment reports in a timely manner?
5. How well does the CUAA meet its mission of facilitating the programmatic accreditation of academic programs?
6. What channels does the institution employ to keep the faculty and staff well-informed and updated about the academic accreditation of the institution, the status of accreditation of its academic programs, and other issues related to accreditation?
7. On what grounds does the institution select its programmatic accreditation liaison officers?
8. According to what criteria does the institution appoint its liaison officer with the NBAQ?
9. What measures does the governing body take when the CUAA's performance is unsatisfactory?

Additional Prompts Questions for Quality Indicator 13B.2

1. What steps does the CUAA undertake to ensure that the institutional self-assessment reports satisfy the requirements of the NBAQ's standards?
2. Does the CUAA organize consultative site visits by experts in accreditation?
3. What mechanism does the CUAA employ to ensure that self-assessment reports are analytical, collaborative, and evidence-based?
4. How easily-accessed, well-developed, and user-friendly are institutional forms that are related to the preparation of self-assessment reports?
5. What are the qualifications of the person(s) in charge of integrating data, information, and statistics contained in program-level (unit-level) focused assessment reports to prepare the holistic institutional self-assessment report?
6. Through what channels does the institution publicize its comprehensive guide on matters of accreditation?

7. Which programmatic self-assessment reports/peer evaluation reports strongly promoted curricular changes in programs offered?

Additional Prompts Questions for Quality Indicator 13B.2

1. How have the results of assessments related to the attainment of accreditation been used to improve student learning outcomes and educational, administrative and fiscal practices?

Appendix

Suggested Documentation Illustrating Compliance with the NABQ's Standards

Suggested Documentation Illustrating Compliance with Standard I

Institutional General Frame of Reference

1. The decree and other related documents concerning the establishment of the institution.
2. Citation from archival data and other documents and publications
3. Samples of curricula, exams, and other instructional material used in teaching and training.
4. Documents demonstrating the input of the institutional constituencies (internal stakeholders') in developing the institutional General Frame of Reference.
5. Empirical data on student learning outcomes and institutional quality.
6. A copy of the evaluation mechanism that measures the effectiveness of the institution and the programs offered.
7. Copies of internal and external reviews of the institution (if any).
8. Copies of minutes of meetings of the board of trustees/top governing council, administrators, and faculty committees.
9. A copy of the institutional long-term strategic plan.
10. Evidence of review of institutional vision and/or mission and goals.
11. A copy of institutional SWOT (or comparable) analysis.

Suggested Documentation Illustrating Compliance with Standard II

Administration and Leadership

1. A copy of the institutional organizational structure.
2. A copy of institutional regulations, policies, administrative and legal procedures.
3. A copy of institutional regulations and bylaws governing leadership positions.
4. A copy of institutional regulations and bylaws governing administrative and academic positions.
5. A copy of the job descriptions of executive and administrative cadres.
6. A copy of the mechanism of quality assessment, review of policies, assessment of degree programs, and performance of units and sectors.
7. A copy of the assessment mechanism of the performance of leading officers.
8. A copy of institutional regulations and policies concerning rewarding excellent campus community members.
9. A copy of institutional legislation regulating appointments, disciplinary actions, dismissals, and terminations.
10. A document, demonstrating that the institution has a unit for academic accreditation and quality assurance.
11. Copies of annual reports presenting analytical account of the extent to which the institution accomplishes its strategic goals and developmental plans, and records strengths and weaknesses of the performance of institutional units and sectors.
12. Evidence that the institution adheres to the principles of accountability.
13. A questionnaire that gauges job satisfaction and career development.

Suggested Documentation Illustrating Compliance with Standard III

Faculty

1. A record documenting faculty's credentials.
2. A record documenting faculty's areas of expertise within each degree program offered.
3. Statistical data on the appointment status of faculty (i.e. whether full-time, part-time, or visiting) within each degree program offered.
4. Statistics on the faculty-student ratio within each degree program offered.
5. Statistical data classifying each faculty member by rank designation, and specifying ranks' percentage vis-à-vis total faculty size within each degree program offered.
6. Statistics documenting distribution of faculty workload (by hours assigned) in terms of teaching and research responsibilities, as well as services rendered to the institution and wider society.
7. Statistics documenting faculty's research productivity and new knowledge generation in each of the degree programs offered.
8. Statistics enlisting faculty's participation in activities, aimed at serving the institution and wider society, in each of the degree programs offered.
9. Evidence demonstrating faculty's awareness of the institutional General Frame of Reference, and understanding of its elements.
10. Evidence demonstrating departmental faculty's participation in the appraisal and development of departmental curricula.
11. Evidence demonstrating that each degree program's faculty adheres to the philosophy of education, based on student learning outcomes.
12. Evidence demonstrating faculty's participation in human resource recruitment, secondment, and contract renewal processes.
13. Evidence illustrating periodic assessment of the faculty's competency by the institution in teaching and research performance, as well as in services rendered to the institution and wider society.
14. Statistics listing the duration of faculty's contract period.

15. Evidence exhibiting that the institution has in place promotion bylaws.
16. Evidence demonstrating institutional fairness and transparency in the application of faculty promotion bylaws.
17. A record listing distinguished faculty members who have achieved excellence in teaching, research, and community service, over the previous four years.
18. Samples of faculty grievances, and institutional decisions on their redressal.
19. Evidence demonstrating institutional efforts in encouraging faculty's participation in professional development programs and training workshops.
20. A copy of institution's policy on the system of faculty sabbatical leave.
21. Statistical data recording the percentage of faculty granted sabbatical leave over the previous four years.
22. A copy of the institutional strategic plan to attract new faculty and develop and retain existing faculty.
23. A copy of the opinion survey on faculty's job satisfaction and professional development.
24. Evidence illustrating the availability of an institutional manual, documenting rules, regulations and bylaws governing faculty affairs, both in electronic and print formats.

Suggested Documentation Illustrating Compliance with Standard IV

Student Affairs and Support Services

1. A copy of the institution's advertisement announcing admission requirements, and dates for application submission to join the institution.
2. A copy of the organizational structure of the unit responsible for student admissions.
3. A copy of the institution's bylaws and regulations governing admission policies and requirements.
4. Evidence demonstrating the academic institution's adherence to strict implementation of advertised admission requirements.

5. A copy of additional requirements (if applicable) for admission to degree programs; in addition, evidence demonstrating the academic institution's adherence to these admission requirements.
6. Evidence demonstrating the academic institution's adherence to implementation of requirements governing conditional admission, if any.
7. Evidence demonstrating the academic institution's adherence to implementation of policies and procedures governing student transfers.
8. Evidence demonstrating the academic institution's adherence to implementation of policies and procedures concerning course equivalence.
9. Evidence demonstrating the academic institution's adherence to implementation of rules concerning enrolment in and withdrawal from courses.
10. Evidence demonstrating the academic institution's organization of an orientation program(s) for new students at the beginning of the academic year.
11. Evidence demonstrating the academic institution's reliance on multiple channels to keep the students informed on latest developments in bylaws, regulations, and degree programs.
12. A copy of Students Handbook (or Guide). Also, a copy of requirements for course registration, graduation, and student bylaws.
13. Copies of forms for course registration.
14. A copy of bylaws and regulations concerning student rights and responsibilities, and rules pertaining to good conduct while on campus.
15. A copy of the organizational structure of the student academic guidance unit and the student affairs and activities unit in the academic institution.
16. Evidence demonstrating the academic institution's continuous guidance to students.
17. Evidence demonstrating that the academic institution keeps the students periodically informed about their academic progress and the requirements that remain for graduation.
18. Samples of students' records.
19. Information illustrating the academic institution's mechanism for maintaining confidentiality of student information and records.

20. Evidence demonstrating the academic institution resorting to disciplinary action against students for non-compliance with rules of good conduct.
21. Evidence demonstrating the academic institution resorting to disciplinary action against students who engage in cheating, plagiarism, and/or scientific fraud.
22. Survey of beneficiaries' opinions on the effectiveness of the student training and recruitment center.
23. Survey of beneficiaries' opinions on the effectiveness of the graduate recruitment center.
24. A copy of the institution's academic calendar.
25. A copy of procedures used for (a) filing students' complaints, and (b) investigating such complaints.
26. A copy of the budgetary allocation for student services and activities (cultural, artistic, and athletic).
27. Samples of students' complaints, and the decisions taken regarding them.
28. Samples of warning notification and statement of termination sent to students with poor academic performance.
29. Statistics on the academic institution's outstanding students, and procedure for honoring them.
30. Data on the academic institution's computer system and software.
31. Evidence demonstrating the provision of primary health care and ambulatory services in the academic institution.

Suggested Documentation Illustrating Compliance with Standard V

Degree programs

1. A copy of the advertisement announcing the institution's vision, mission, objectives and values for each of the degree programs offered.
2. A document with a description of each of the degree programs offered by the institution, providing information on the program's (a) nature, (b) developmental strategies, (c) applied quality assurance and performance

measurements, and (d) the targeted learning outcomes the program aims to achieve.

3. A document outlining additional requirements for admission to the degree programs (where applicable).
4. Statistics on faculty-student ratio vis-à-vis each of the degree programs that the institution offers.
5. Statistics on faculty-teaching assistant ratio for each of the degree programs that the institution offers.
6. Statistics on faculty-administrative staff ratio for each of the degree programs that the institution offers.
7. Information on spatial logistics concerning classrooms, laboratories and workshops vis-à-vis students registered in each of the degree programs that the institution offers.
8. A document exhibiting resource adequacy, both in terms of quantity and quality, concerning experiment instruments, and equipment in laboratories and workshops (where applicable) for each of the degree programs that the institution offers.
9. A document testifying to the adequacy, efficiency, quality, and modernity of technology and equipment in laboratories, and workshops (where applicable) for each of the degree programs that the institution offers.
10. A document outlining the availability and adequacy of audiovisual devices in classrooms and lecture halls.
11. A document demonstrating the adequacy of well trained technicians working in the institution's laboratories and workshops.
12. Documents outlining the requirements for graduation concerning each of the degree programs that the institution offers.
13. Copies of students' study-plans for each of the degree programs that the institution offers.
14. Documents outlining course descriptions and the sequential arrangement of courses for each of the degree programs that the institution offers.
15. A document providing a descriptive account of the policies and mechanisms for updating degree programs and courses.

16. A document demonstrating the provision of an active academic guidance program in place for each of the degree programs that the institution offers.
17. A document outlining the policies and procedures overseeing the transfer process between different degree programs that the institution offers.
18. A document demonstrating students' exposure to field training in various degree programs.
19. A document outlining diverse methods deployed by faculty members in evaluating students' performance and allocating grades.
20. Statistics on the distribution of final course grades for each degree program.
21. Statistics on outstanding students vis-à-vis total number of students enrolled in each degree program.
22. Statistics on students receiving warnings and those on probation versus the total number of students enrolled in each degree program.
23. Statistics on students opting for a change of major versus the total number of students enrolled in each degree program.
24. Statistics for the previous four years on the student drop-out rate vis-à-vis the number of students admitted in each batch.
25. Statistics for the GPA (Grade Point Average) of graduates from each degree program.
26. Data on the teaching load of faculty members in each degree program.
27. Data on the academic rank of faculty members in each degree program.
28. Statistics on the ratio of papers published in refereed scientific journals vis-à-vis the number of faculty members in each degree program.
29. Statistics on the average length of time elapsed prior to employment of graduates from each degree program.
30. A document outlining each degree program's strengths and weaknesses, and the local and regional challenges that it encounters.
31. A document demonstrating each degree program's periodic updating of its vision, mission, objectives and curricular contents, in view of its strengths, weaknesses, opportunities, and challenges.

32. A document demonstrating that each degree program has a monitoring and follow-up mechanism in place for quality assurance and continuous improvement.
33. Opinion surveys showing each degree program director maintains effective communication channels with the program's students, and faculty, and the institution's administration.
34. A document demonstrating the endeavors of each degree program director to (a) strengthen relations with various sectors of society, and (b) develop effective communication channels, thereby enabling the faculty to enter into contractual agreements that result in the initiation of various projects with the concerned sectors.
35. Evidence that the educational institution maintains a dedicated website incorporating substantial information on the degree programs that the institution offers. And evidence that the institution assigns professional personnel to manage its website through periodic updates and content upgrades.
36. Documents demonstrating that the degree programs are supportive of community-based activities and that these activities are carried out by both the students and the faculty.
37. Periodic surveys of the opinions of employees and beneficiaries on administrative and academic effectiveness concerning various programs that the institution offers.
38. Copies of the minutes of departmental council meetings, and samples of committee reports for each degree program.
39. Copies of self-assessment reports and yearly internal audit(s), as issued by Quality Assurance and Improvement Unit(s) of degree programs.
40. Outcomes of surveys on the opinion of graduates as regards each of the degree programs that the institution offers.
41. Samples of the observations and suggestions of employers of graduates concerning the effectiveness of each of the degree programs.

Suggested Documentation Illustrating Compliance with Standard VI

Teaching Strategies and Methods & Student Learning Assessment

1. Data on spatial logistics concerning the number and capacity of classrooms, laboratories, workshops and field training areas available for the effective implementation of degree programs. Also, appropriateness of these areas vis-a-vis number of students/users, adequacy of institutional facilities in terms of quantity and quality, including provision and availability of latest instruments, equipment and technology.
2. A report on library acquisitions and resources in terms of books, journals, etc., electronic databases, and audio/video materials. Also, a report on the quality of services that the library extends to students and faculty members.
3. Data on the number of technicians who render assistance in education and training of students in each degree program.
4. Samples of methods applied in assessing student performance and measuring each degree program's learning outcomes.
5. Samples of the standards applied in assessing student assignments in various courses including the rating and distribution of final grades (samples of examination questions, samples of marking rubrics, written remarks of faculty on student assignments).
6. Statistics on the student-faculty ratio for each degree program.
7. The ratio of graduates obtaining their degree within the normal/specified time-span to the total number of graduates in the same batch in each degree program.
8. A report on assessment elements and relative weighting of each element for the evaluation and rating of student assignments for a number of courses offered within degree programs.
9. A copy of bylaws and regulations concerning incidents of cheating, plagiarism, and/or scientific fraud.
10. Samples of student portfolios, graduation project reports, and capstone research papers.

11. A report on the scientific, technological and cultural activities of students within and without the academic institution.
12. Data and documentation concerning student training programs and the mechanism(s) for supervising such training programs.
13. A study on the effectiveness of training and workshops in developing student skills, and their impact on achieving the degree program learning outcomes. Also, documentation on updating the field training system and use of the feedback to ensure the continuous improvement of courses.
14. Documents illustrating faculty's continuous assessment of student class performance during the course (home assignments, periodic and final exams, projects, etc.). Also, documents demonstrating that the faculty extends feedback to guide students (e.g. written remarks and commentaries on assignments, project reports and exams, etc.).
15. Samples of student responses to questionnaires concerning course and faculty evaluation.
16. Assessments by employers of graduates from each degree program.

Suggested Documentation Illustrating Compliance with Standard VII

Scientific Research and Knowledge Generation

1. Copies of the institutional bylaws, regulations, and policies governing financial support for both sustaining and evaluating scientific research and the generation of new knowledge.
2. Statistics on projects funded by the institution during the previous four years.
3. Statistics on projects funded by external institutions during the previous four years.
4. A list of journals and research databases to which the institutional library/libraries subscribe.
5. A document outlining the institutional research priorities strategic to the needs of society in Kuwait.
6. A document demonstrating that the institution periodically organizes workshops aimed at developing student and faculty skills in scientific research methodologies.

7. Statistics on the total number of institutional papers published in refereed proceedings of scientific conferences versus the total number of faculty members.
8. Statistics on the total number of institutional papers published in refereed scientific journals versus the total number of faculty members.
9. Statistics on the total number of institutional papers published in high impact (Q1 or Q2) journals vis-a-vis the total number of faculty publications in journals.
10. Statistics on citations of publications, authored by the institutional faculty.
11. Statistics on the number of publications that the institutional faculty authored in collaboration with authors from international institutions.
12. Statistics on the number of publications concerning the development of institutional educational processes, and academic and administrative practices.
13. Statistics on the number of patents developed by the institutional faculty or employees.
14. Statistics on the number of books authored by the institutional faculty.
15. A report on the academic institution's "Centers of Excellence."
16. A report on some of the involvement of institutional faculty members in editing and/or refereeing of local or international scientific journals.
17. A report on some of the institution's faculty members invited as keynote speakers at local or international conferences, seminars or workshops.
18. A report on some students' participation in research activities.
19. Evidence that the educational institution maintains an up-to-date database on faculty members' research productivity, generation of new knowledge, and creative output; the database includes information on (a) faculty member publications, (b) research and creative projects, and (c) participation in scientific conferences, etc. Evidence that the database is aimed at facilitating the formation of research and publication groups.
20. Samples of the academic institution's assessment reports concerning faculty members research performance.
21. A document outlining a clearly defined and announced policy on motivating and rewarding distinguished researchers.

22. A document soliciting faculty member responses concerning the institutional (a) quality of research services offered, and (b) ways to enhance research performance and discovery of new knowledge.
23. A document outlining research performance as a prerequisite for the appointment, contract renewal, and academic promotion of faculty members.
24. A list of collaborative programs and joint research activities with national, regional, and international institutions.
25. A document that highlights the impact of faculty members' publications on society in Kuwait.
26. Examples demonstrating that the academic institution uses some outputs of applied research to (a) develop degree programs curricula, and (b) improve some academic and administrative procedures and practices.
27. A document outlining clearly defined policies and procedures concerning disciplinary action against faculty members who resort to plagiarism and scientific fraud.
28. Documents indicating that the institution has a dedicated website, and a printed manual outlining the bylaws, regulations, policies, governing financial support for the sustenance and evaluation of scientific research, and generation of new knowledge.

Suggested Documentation Illustrating Compliance with Standard VIII

Facilities, Infrastructure, and Technology Systems

1. A copy of the institution's comprehensive Master Plan of the campus, facilities (including facilities for services and recreation), network of internal roads, and green belt areas.
2. A report on the (a) size (in square meters) of institutional facilities, (b) type of facilities, and (c) number of facility users. The report should also include the extent to which the facilities' actual size complies with the criteria of spatial distribution specified in section "C" above.
3. A copy of the institutional library's architectural plan. Also, a report on spatial distribution within the library, and delegated areas for books, periodicals, computers, reading rooms, and halls for study.

4. A report on library resource acquisitions over the previous four years for educational and research purposes, such as books, periodicals, databases, computers, as well as furnishings and furniture.
5. A report on the size of classrooms, lecture halls, seminar rooms, etc., and the type (quantity and quality) of technology and equipment provided in teaching facilities.
6. A report on the size of offices of faculty members and administrative staff.
7. A report on the size of scientific, computer, and linguistic laboratories, etc., clearly specifying the space allocated to each user, and the type (with quantity and quality) of technology/equipment provided in these facilities.
8. A quantitative report on cafeterias, sports stadium(s), halls for cultural activities, restrooms for the academic community and for students, dormitories or hostel facilities for students (where applicable), bookstore, places of worship, medical clinics, and size and capacity of parking areas.
9. A report on the size of institutional academic and administrative staff meeting rooms.
10. A report on the availability of computers in academic and administrative departments. The report should explicitly state the optimum quantity and quality of computers needed to accomplish departmental activities promptly and efficiently.
11. A report outlining the existence (in quantity and quality) of computer labs for meeting the learning and research needs of students.
12. A report illustrating that the institution upgrades its computer systems with the most advanced and up-to-date of software.
13. Surveys aimed at soliciting the opinions of beneficiaries on the efficiency of infrastructure, and facilities (electricity, fiber optics, electronic network, phones, water, and sewage).
14. A report on the installation of safety, security, and hygiene systems in institutional buildings and facilities.
15. A report showing the congeniality of the institutional campus to people with special needs.
16. A report showing that the institution has contracted specialized companies

and private offices for the maintenance of appliances and equipment used for educational and research purposes.

17. Evidence that the institution has a dedicated website (homepage) and that it is regularly upgraded and updated.
18. Evidence of the sustained efforts by the institution to develop its information systems, in keeping with the requirements of its activities.
19. A report demonstrating the existence of independent review and monitoring systems at the institution that are effectively used for reviewing and monitoring the use of facilities, infrastructure and technology systems.
20. A copy of the institutional bylaws and regulations outlining the responsibilities of personnel in charge of facility, infrastructure and technology management.
21. Evidence showing that the institution is endowed with adequate, well designed and equipped facilities and infrastructure. The facilities and infrastructure are compatible with the number of (a) students, (b) faculty and administrative staff, and the (c) programs. Also, evidence concerning the institution's adherence to safety measures in the operation of facilities and infrastructure.
22. A document illustrating that the institution periodically trains the beneficiaries in responding to emergency situations and exposure to danger.

Suggested Documentation Illustrating Compliance with Standard IX

Finance and Budget

1. A copy of the institution's operational budget.
2. A report on the institution's financial and funding status (the capital, loans, debt, financial liquidity, etc.).
3. Samples of the institution's financial audit and accounts review reports.
4. Statistics on expenditure, such as:
 - a) Ratio of expenditure on faculty member salaries to overall expenditure of the academic institution.
 - b) Ratio of expenditure on administrative staff salaries to overall expenditure of the academic institution

- c) Ratio of expenditure on educational and knowledge sources (libraries, journals, research databases, etc.) to overall expenditure of the academic institution.
 - d) Ratio of expenditure on technology (student admissions, accounting, archiving and record-keeping systems, etc.) to the overall expenditure of the institution.
 - e) Ratio of expenditure on research support to the overall expenditure of the institution.
 - f) Ratio of expenditure on student activities to the overall expenditure of the institution.
 - g) Ratio of expenditure on rendering support for faculty members' development (attending conferences, workshops and training sessions, etc.) to the overall expenditure of the institution.
5. Sample reports (periodic and/or annual) concerning the annual budget of a number of degree programs/departments.
 6. A report on self and external financing, donations, and non-fiscal assets.
 7. Sample of correspondence and copies of contracts concerning (a) maintenance and restoration of buildings, campus improvement, etc., and (b) scientific, training, and quality assurance activities, etc.
 8. A copy of the institution's bylaws and regulations concerning procurement, supply, disbursement, and distribution system.
 9. A copy of the institution's short- and long-term strategic plans concerning the financial system.
 10. A copy of the institution's bylaws and regulations stating the responsibilities of personnel in charge of financial affairs.
 11. A report comparing the funding allocated for degree programs in similar fields of knowledge.
 12. A report on student(s) financial commitments concerning payment of fee(s) and any other amount(s) for each program that the academic institution offers.
 13. A report on the cost that the institution incurs per student in each of the programs.

Suggested Documentation Illustrating Compliance with Standard X

Human Resources

1. A report on the institution's human resource size, enlisting their proportion in each degree program, unit, and facility, to the beneficiaries (students, faculty and administrative staff, and others).
2. Statistical data on the qualifications and professional experience of the human resource.
3. A copy of the institution's bylaws and regulations concerning (a) the mechanism for human resource appointment, (b) promotion requirements, (c) the mechanism for the evaluation/assessment of employees, (d) contract renewal and termination, (e) annual/periodic vacations, (f) end-of-service benefits, and (g) health insurance (if applicable).
4. A copy of the institution's job description for each position.
5. Samples of the institution's evaluation of some employees.
6. A copy of the human resource opinion survey concerning job satisfaction.
7. A copy of the human resource opinion survey concerning training needs.
8. A report on human resource participation in training and workshop sessions during the previous four years.
9. A copy of the faculty assessment surveys of the performance of human resources in degree programs.
10. A copy of the students' assessment surveys as regards the performance of human resources in student affairs and service facilities.
11. A sample of the academic institution's human resource employment contract.
12. Data on human resource promotions during the previous four years.
13. A sample of promotion files concerning some of the human resource.

Suggested Documentation Illustrating Compliance with Standard XI

Outreach and Community Service

1. The academic institution's website link dedicated to community service.
2. Evidence in support of the academic institution's periodic announcements to keep the community updated on its accreditation status as well as on various accredited programs offered.
3. A copy of the academic institution's policies and strategies concerning community service and the method of interaction with the community and society.
4. A report outlining various types of cooperation existing between the institution and public and private sectors.
5. A report documenting various types of institutional community activities over the previous four years.
6. A document on the institution's updated and centralized database on alumni information.
7. Examples of the institution's outreach activities for alumni.
8. Examples of the academic institution's news sent periodically to the alumni (e-newsletter).
9. A report on some institutional faculty members participating in community-based organizations (private, governmental or voluntary organizations, etc.).
10. A list of experts from the public and private sectors participating in some of the academic institution's advisory committees.
11. A copy of a survey soliciting alumni opinion of the academic institution's interaction with them.
12. A report on the institution's existing and prospective partnerships with local, regional and international institutions.
13. A report on the institution's programs and workshops held as continuing education over the previous four years.
14. A report on some enrichment activities that the educational institution offered to secondary schools in Kuwait over the previous four years.

Suggested Documentation Illustrating Compliance with Standard XII

Ethics

1. Evidence indicating that the institution's bylaws and regulations accord due significance to the principles of integrity, responsibility and *esprit de corps*.
2. A document indicating that the institution exhibits transparency in investigating issues and practices concerning the integrity of the institutional community.
3. Evidence demonstrating that the institution resorts to disciplinary action against those engaging in cheating, plagiarism and/or scientific fraud.
4. Evidence demonstrating the institution's assessment of the extent of job satisfaction and career aspirations among the institutional community.
5. A report on the sample of activities demonstrating students' openness to others, and their receptivity to others' differences.
6. A statement concerning cases of complaints as regards breach of confidentiality and privacy of personal information.
7. A statement concerning incidents of complaints and grievances as regards the random use, and abuse, of power.
8. A statement concerning cases of complaints from the institutional community (and/or others) regarding the institution's failure to honor its contractual obligations and guarantees to its beneficiaries.
9. Evidence demonstrating the existence of cooperation between the institution's faculty members.
10. A report outlining the institution's mechanism for the selection of faculty and administrative staff for management positions. The report should include select samples of the appointment process.
11. Evidence demonstrating that the institution assesses in accordance with accepted standards of best practice, the principles of integrity, responsibility, *esprit de corps*, and other professional norms and values in its administrative and service units.

Suggested Documentation Illustrating Compliance with Standard XIII

Quality Assurance and Improvement

1. A copy of the organizational structure of unit(s) dedicated to quality assurance and academic accreditation. Also, a copy of the work/action mechanism that the unit(s) follow.
2. A statement concerning the unit(s) staff size for quality assurance and academic accreditation. Also, a statement on the staff's credentials.
3. A statement on fiscal allocations for the operations and activities of the quality assurance and academic accreditation unit(s).
4. A statement on the number of committees dedicated to overseeing the implementation and follow up, or a similarly named document of the institution's internal "Teaching-Learning Quality Assurance System" or a similarly named document.
5. A copy of the institution's "Internal Quality Assurance System," including the benchmark systems for degree programs and units.
6. Samples of the institution's SWOT (or comparable) analysis reports, providing a measure of the strengths, weaknesses, opportunities, and threats of some degree programs and units.
7. Evidence demonstrating that the institution's top governing council/administration, faculty, and administrative staff held deliberations on the SWOT (or comparable) analysis reports generated by various programs and units.
8. Evidence demonstrating that the quality assurance and academic accreditation unit provides requisite data to the committees responsible for preparing the institutional self-assessment report.
9. A copy of the institution's recent self-assessment report used for academic accreditation.
10. A statement on the participants assisting in preparing the self-assessment report used for institutional academic accreditation. Also, information on the participants' job titles, and the degree programs and units they represent.
11. Evidence documenting the deliberations of institution's top governing council/administration and beneficiaries on the self-assessment report used for the purpose of institutional academic accreditation.

12. Sample copies of self-assessment reports used for programmatic accreditation of some programs offered
13. A report demonstrating the interaction/communication between some degree programs that the institution offers and relevant programmatic accreditation organizations/agencies.
14. Samples of external peer evaluator reports concerning a number of degree programs that were evaluated during the previous four years (if any).
15. A statement on the accreditation status of the degree programs that the educational institution offers.
16. A report on the meetings, seminars, workshops and training sessions held on quality assurance and academic accreditation by the institution for the benefit of teaching and administrative staff.
17. A study on the impact of SWOT (or comparable) analyses in improving the quality of the curriculum content and components of some degree programs, as well as methods of teaching and learning.
18. A study on the impact of external peer evaluator reports (if any) on the development of relevant degree programs and practices of the programs' teaching faculty.

