

# Quality Assurance System Manual



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### **LIST OF ABBREVIATIONS**

ABBREVIATION	FULL FORM
APR	Annual Program Reports
CAMSJ	College of Applied Medical Sciences in Jubail
Dean	Dean of the College of Applied Medical Sciences in Jubail
DAD	Deanship of Academic Development
DQAA	Deanship of Quality and Academic Accreditation
ETEC	Education and Training Evaluation Commission
HPEU	Health Professions Education Unit
KPIs	Key Performance Indicators
МОН	Ministry of Health
NCAAA	National Commission for Academic Accreditation and Assessment
QA	Quality Assurance
QAAU	Quality and Academic Accreditation Unit
SES	Self Evaluation Scale
SSRP	Self-Study Report for Program
VDAA	Vice Dean for Academic Affairs
VDDCP	Vice Dean for Development and Community Partnership
VDSRI	Vice Dean for Scientific Research and Innovation



#### INTRODUCTION

This manual serves as a comprehensive guide for faculty members at Imam Abdulrahman bin Faisal University's College of Applied Medical Sciences in Jubail (CAMSJ), focusing on the college's quality characteristics, process cycle, and management model. It particularly highlights quality planning, evaluation, and the pursuit of academic accreditation. The content also includes crucial details about the college's vision, mission, goals, and values. Additionally, it provides insights into the organizational structure and function of quality representatives to manage quality at CAMSJ. Notably, the concepts in this manual are developed based on prevailing quality management practices within the university, aligning with the requirements of Education and Training Evaluation Commission (ETEC).

The manual concisely delineates the faculty members' essential duties related to work quality, operational mechanisms, and follow-up within the quality units, while also outlining their involvement in completing academic accreditation forms. Lastly, it sheds light on the pivotal role played by the quality and accreditation unit in organizing continuous development programs and conducting training workshops for faculty members.

CAMSJ is a recently established institution, aiming to become the premier medical college in the Jubail area. Its establishment reflects a commitment to staying at the forefront of advancements in medical care and training specialized professionals in applied medical sciences. The primary goal of CAMSJ is to provide vital support and healthcare services to the community.

CAMSJ holds the distinction of being the first college in Saudi Arabia to offer a bachelor's degree program in Neuroscience Technology. Additionally, the college offers two other academic programs: Respiratory Care and Anaesthesia Technology. These programs are designed to address the societal needs and produce highly skilled technical professionals in the field of medicine. The curriculum is meticulously crafted to keep pace with the rapid developments in curative, preventive, and treatment techniques, as well as scientific research.

By offering these programs, CAMSJ aims to contribute to the advancement of medical knowledge and play an active role in enhancing healthcare services within the region. Through comprehensive education and training, the college strives to produce competent graduates who are well-prepared to meet the challenges of the evolving healthcare landscape.

#### **CAMSJ VISION, MISSION & VALUES**

The vision, mission, and values are the foundation of our college's strategic plan. They are a result of the alignment with IAU's strategic plan matrix and benchmarking similar QS ranked universities.

#### **Vision**

Excellence in health professions education, research, and social responsibility nationally and internationally.

#### **Mission**

To graduate qualified professionals in health care striving for development and life-long learning, through distinguished education and commitment to scientific research and community service.

#### **Values**

- Accountability
- Social Responsibility
- Collaboration
- Transparency

- Excellence
- Innovation
- Diversity
- Compassion

#### **CAMSJ STRATEGIC GOALS**

CAMSJ has eight strategic goals which are:

- **Goal 1** Provide excellence in health professions education.
- **Goal 2** Promote the culture of scientific research and innovation.
- Goal 3 Enhance social responsibility and community relationships.
- **Goal 4** Foster growth of the college community.
- **Goal 5** Maintain vibrant working environment.
- **Goal 6** Strengthen the college administrative system.
- **Goal 7** Develop the college financial resources.
- Goal 8 Enhance communication and information technology services.

# MESSAGE OF THE VICE DEAN FOR DEVELOPMENT AND COMMUNITY PARTNERSHIP

Just like academic institutions worldwide, CAMSJ is dedicated to meeting the requirements and expectations of the national interests it serves. CAMSJ is committed to delivering its educational and research missions by continuously striving for improvement and excellence in its services.

As the Vice Dean, I am proud to witness CAMSJ is actively undergoing a steady and rigorous transformation to adapt to changes. The QAAU at CAMSJ has been diligently working in coordination with the Deanship of Quality Academic Accreditation, CAMSJ management, departments, and other units, both internally and externally.

Externally, we collaborate with the Ministry of Health and Education and Training Evaluation Commission (ETEC). Together, we strive to form and implement a robust quality model that aligns with national, regional, and international quality guidelines.

To achieve these requirements and ensure quality, CAMSJ recognizes the importance of having a coherent strategy supported by up-to-date strategic and periodic plans, policies, and procedures. We emphasize transparency and effectiveness in our monitoring facilities to ensure continuous improvement. The quality units are dedicated to developing a comprehensive quality manual that encompasses the quality management model, quality cycle, and processes for monitoring and evaluation.

I would like to extend my sincere gratitude to the Dean, and all the Vice Deans for their wholehearted support throughout the development of this manual. Their unwavering encouragement has been invaluable. Together, we strive for excellence and success in serving our community and stakeholders.

#### Sincerely,

#### Dr. Sama Hammad

# VICE DEANSHIP FOR DEVELOPMENT AND COMMUNITY PARTNERSHIP

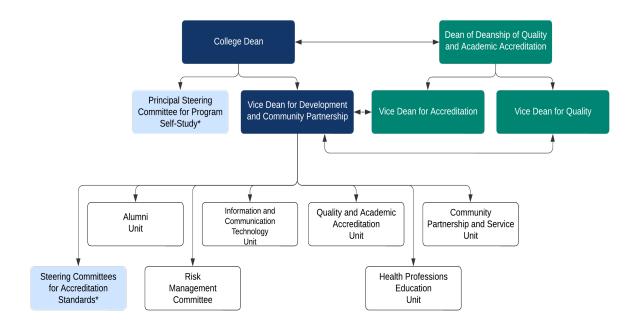
CAMSJ Vice Deanship for Development and Community Partnership to oversee the enhancement of quality standards in all academic aspects. Operating within a defined structure, this vice deanship aligns with ETEC standards. It emphasizes continuous evaluation, development, and adaptation to changes on national and international levels. The vice deanship, through its clear organizational structure, fosters a culture of quality among staff members and extends its impact to educational and community service activities. The ultimate goal is to champion and implement a robust quality framework within the college.

The college aims to have a coherent strategy with transparent and effective policies and regulations. They emphasize continuous evaluation and development to align with the IAU vision in education and adapt to changes at national and international levels. The college has a direct engagement with the community through three programs. Each program requires an individual approach and customized plan to achieve and maintain quality accreditation. The QAAU supports all departments in building their own work models and fulfilling their potential within ETEC standards.

This dedicated unit ensures adherence to quality-related endeavors within the college. With a clear organizational structure, the unit fosters a culture of quality among staff members and throughout educational and community service activities. Its ultimate aim is to promote and implement a robust quality framework within the college.

#### **Organizational Structure**

Vice Deanship for Development and Community Partnership provides support and advice to the various programs of the college and spread its culture at the level of the college in collaboration with the IAU Deanship of Quality and Academic Accreditation (DQAA). It helps the college to provide better service to its internal (i.e. students & teaching staff) & external customers (i.e. employers). See Figure 1 for CAMSJ Vice Deanship for Development and Community Partnership organizational structure.



<sup>\*</sup>Adhoc committees that functions only during accreditation period

Figure 1: CAMSJ Vice Deanship for Development and Community Partnership Organizational Structure

# Role of the Vice Dean for Development and Community Partnership

The Vice Dean for Development and Community Partnership plays a crucial role in promoting and fostering a culture of quality, academic accreditation, and continuous improvement within the college. Vice Dean responsibilities encompass a wide range of tasks that contribute to the overall enhancement of the college's operations and quality assurance processes. Here is a concise and brief summary of the quality-related tasks:

- Follow-up with program coordinators to conduct quality orientation programs for the new faculty and staff
- Follow-up and review the eligibility requirements documents of the programs for national and international accreditation (if applicable) and develop appropriate plans to review the program in relation to accreditation standards
- 3. Liaise with DQAA and provide training/workshops according to the program requirements
- 4. Follow-up conducting the surveys to make sure it is assigned for the students, faculty members, etc. on-time
- 5. Follow up the reports, recommendations, and action plan generated from the survey's results for its accomplishment in each program with consultation with the DQAA.
- 6. Monitor and follow-up the recommendations and action plans of the programs and course reports
- Follow-up the KPIs and benchmarking reports of the program and college.
- 8. Coordinate with Program heads and discuss with the Dean on the KPI results and planning for improvement.

#### Vice dean's tasks (Cont.):

- 9. Leading program to initial self-evaluation and supervise its implementationaction plans and review their evidences in consultation with DQAA.
- 10. Liaise with DQAA to support the program for preparing self-study reports and action plans.
- 11. Prepare and supervise the colleges/Programs for the independent opinion in consultation with DQAA.
- 12. Prepare and supervise the Programs for the review visit in consultation with DQAA.
- 13. Supervise, monitor and follow-up action plan implementation across Programs in the college.

#### STRUCTURE AND FUNCTION OF QUALITY REPRESENTATIVES

#### A. Quality and Academic Accreditation (QAA) Unit

CAMSJ has established a QAAU under the VDDCP. This unit is responsible for ensuring quality in all academic aspects of the college by meeting the ETEC standards. The QAAU ensures its compliance by collecting, analyzing, and updating necessary documents and data. It operates within a defined structure and aims to establish a culture of quality throughout the college.

The establishment of the unit was authorized by the college dean's decision in December 2019, and its structure was subsequently revised in September 2022. The unit comprises a chairperson, co-chairperson, and a representative of quality from three programs. It operates under the supervision of the Vice Dean for Development and Community Partnership, as illustrated in Figure 1.

The unit fulfils the following tasks and responsibilities:

- 1. Work directly with the Vice Dean for Development and Community Partnership on the goals of the unit.
- Lead the quality and academic accreditation unit to create and collect the eligibility requirements for the national/international accreditation of academic programs.
- 3. Work closely with the Deanship of Quality and Academic Accreditation (DQAA) to develop, and manage the quality enhancement system, in line with the strategic plan of DQAA and IAU.
- 4. Present annual unit reports to the Vice Dean for Development and Community Partnership at the College on the status of work in the Unit according to its responsibilities and barriers encountered.
- 5. Participate in the development of the strategic plans of the college in cooperation with the DQAA and supervise its implementation.
- 6. Participate in education sessions related to quality assurance, academic accreditation in IAU or outside such as, annual Education & Training Evaluation Commission (ETEC) conferences and others.
- 7. Participate in implementing the findings of self-study report for the college programs.

The unit fulfils the following tasks and responsibilities (Cont.):

- 8. Check the completeness of the annual program reports for all programs in the college ensuring they are approved and signed by department chairperson and get approval from Departmental Faculty Board; should include key performance indicators relating to the most important objectives, and an indication of whether the short-term results on operational plans confirm to what is required if the long-term strategic plans and objectives are to be achieved.
- 9. Instill the concept of quality and infuse its culture in the College as a whole.

#### **B. Principal Steering Committee for Program Self-Study**

The Principal Steering Committee holds a pivotal role within the college administration, being regarded as the driving force behind quality initiatives and academic accreditation. Led by the College Dean, the committee comprises esteemed members including the College Vice Deans for Scientific Research and Innovation and Development and Community Partnerships, Program Chairs, and Chair of QAA (Figure 2). With a strong focus on achieving excellence in quality and accreditation, the committee diligently carries out the following essential tasks:

- 1. Following-up of the accreditation tasks as per the designated timeline of accreditation process of the college.
- 2. Monitoring the progress of the work of all the steering committees.
- 3. Discussing any issues related to the SES and SSRP.
- 4. Reviewing the SES and SSRP evidence.
- 5. Completing any forms/supplements needed to fulfil the eligibility criteria for the national accreditation.

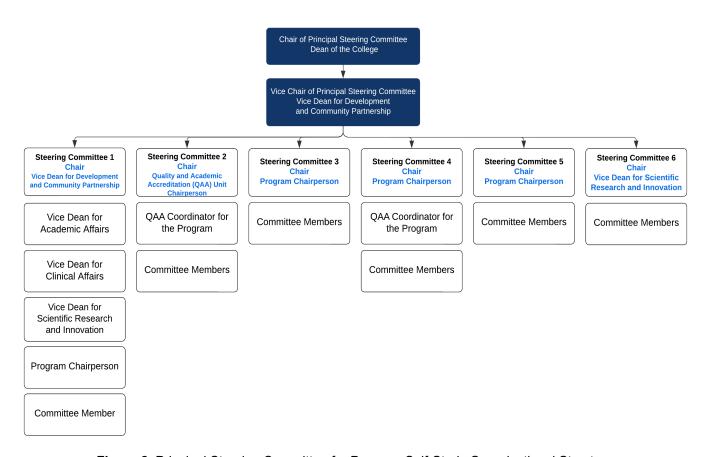


Figure 2: Principal Steering Committee for Program Self-Study Organizational Structure

#### **C. Steering Committees for Accreditation Standards**

The ETEC Program encompasses six essential standards: Mission and Goals, Program Management and Quality Assurance, Teaching and Learning, Students, Teaching Staff, and Learning Resources, Facilities, and Equipment. To ensure comprehensive evaluation and improvement, each program has established 6 committees for the six standard. All are overseen by a dedicated committee that directly reports to the Vice Dean (See Figure 2).

These committees are entrusted with the following key responsibilities:

- 1. Completion of the requirements for the standard including the selfevaluation scales and self-study report after feedback is received.
- 2. Collaboration with other departments and vice deanships in the college in collecting the shared documents.
- 3. Preparation and compilation of the required evidence for each criterion.
- 4. Preparation of periodic reports and submission to the department chairs (to be performed by the Chairperson of the Committee).
- 5. Completion of any forms/supplements needed to fulfil the eligibility criteria for the national accreditation.

#### D. Program Quality and Academic Accreditation Coordinator

To ensure the effective implementation of quality practices across the college's programs, the role of the quality coordinator is crucial. The responsibilities of the coordinator encompass the following tasks:

- 1. Coordinate with the QAAU to provide training and workshops in accordance with program status and quality requirements.
- 2. Review and follow-up on the documents required for national and international accreditation (if any), as well as create appropriate plans and proposals for reviewing and developing the program in relation to accreditation standards in coordination with the QAA Unit.
- Coordinate with the QAAU to follow-up on the implementation of recommendations and the work plans of the annual program reports and courses' reports.
- 4. Work with the QAA Unit to follow up on the entry of KPIs and benchmarking comparisons in the UDMetrics application.
- 5. Report to the program's chairperson on the results of the KPI reports and action plans.

#### E. Program QAA Committee

The tasks and responsibilities of the QAA Committee in the academic program include:

- 1. Conduct regular internal audits to ensure compliance with quality standards and accreditation requirements.
- 2. Develop and implement processes for continuous improvement of the program, based on feedback and evaluation.
- 3. Collaborate with faculty members to develop and update course portfolios, incorporating best practices.
- 4. Organize and facilitate meetings with external stakeholders, such as industry professionals and accreditation bodies, to gather input and ensure alignment with industry needs.
- 5. Establish mechanisms for gathering and analyzing data on student learning outcomes, using assessment tools and surveys.
- 6. Coordinate the preparation of accreditation self-study reports and ensure timely submission to relevant accreditation bodies.
- 7. Stay updated on current trends, research, and best practices in program quality and academic accreditation, and disseminate relevant information to faculty and staff.
- 8. Support faculty members in developing their teaching and assessment skills through workshops and training sessions.
- 9. Collaborate with other departments and units within the university to promote a culture of quality and continuous improvement.
- 10. Engage in benchmarking activities by conducting comparative analysis with similar programs in other institutions to identify areas for improvement.
- 11. These responsibilities are carried out under the leadership of the program quality and academic accreditation coordinator, who serves as the head of the committee.

#### F. Risk Management Committee

The risk management committee at our college plays a pivotal role in ensuring a secure and resilient academic environment. Committed to identifying, analyzing, and mitigating potential risks, this committee operates as a safeguard for the institution and its stakeholders. By implementing comprehensive strategies, they aim to protect assets, reputation, and the overall well-being of the college community. Through proactive planning and response mechanisms, the risk management committee contributes significantly to maintaining a safe and conducive learning atmosphere.

This committee work reports to the VDDCP and fulfil the following responsibilities:

- 1. Identify and prioritize risks.
- 2. Prepare risk management plans in line with CAMSJ's strategic plan.
- 3. Log-in incidents via Hemaya, IAU reporting system.
- 4. Log-in incidents in CAMSJ's reporting Excel sheet.
- 5. Create awareness on the risk management culture via campaigns, education and training on the importance of risk management.
- 6. Create periodical reports on risk management plans for CAMSJ.

#### **G. Information and Communication Technology Unit**

The Information and Communication Technology (ICT) unit at our college serves as the technological backbone, fostering innovation and connectivity across academic and administrative realms. They fulfil the following tasks:

- 1. Conduct meetings with the members of the unit to meet expected annual goals.
- 2. Coordinate between the various departments and administration at CAMSJ to keep the website updated.

The unit responsibilities are (cont.):

- 3. Provide content for CAMSJ webpage and other social media outlets.
- 4. Execute the Information Technology (IT) survey.
- 5. Analyze the data of the IT survey.
- 6. Follow IAU Brand Management Unit guide for website content creation.
- 7. Update faculty webpage profiles (e.g., CVs and promotions).
- Bring awareness on how faculty can update their own profiles periodically.
- 9. Design CAMSJ's books, flyers, advertisements, and social media posts through available tools.
- 10. Create content for CAMSJ social media outlets in consultations with higher administration (Dean, Vice Deans, and Department Chairs).
- 11. Document CAMSJ events and activities on website and other social media outlet.
- 12. Collect key performance indicators needed for the college's strategic plan and other reports.
- 13. Create annual reports for the unit along with their action plans at the end of each academic year and submit to the vice dean's office.

#### H. Alumni Unit

Each Program should establish an alumni committee that work under the umbrella of the alumni unit of the college. This College level alumni unit work under the coordination of the Alumni and Career Development Center of IAU to fulfil the following objectives:

1. Provide advisory guidance to senior students regarding their career planning, employment preparation and future work potential.

#### Alumni unit objectives (Cont.):

- 2. Establish a connection with the senior students prior to graduation and continue to have active links with the alumni beyond graduation.
- 3. Establish a database for the alumni names, contact details and updates
- 4. Distribute alumni and employer surveys via Estibana and CAMSJ's survey via forms.
- 5. Create report for alumni and employer annually based on data available.
- 6. Hold annual meetings for CAMSJ alumni.
- 7. Invite alumni to participate in the events and activities organized by the college.
- 8. Promote a sense of affiliation between the college and alumni.
- 9. Prepare an annual report regarding the unit's achievements and submit to the vice dean's office end of each academic year.

#### I. Community Partnership and Service Unit

Each program has established a community service committee that works in collaboration with the CAMSJ Community Partnership and Service Unit that works with the Deanship of Community Service and Sustainable Development to meet the needs of present and future generations.

#### Some of unit's responsibilities are:

- 1. Conduct meetings with the members of the unit to meet expected annual goals.
- Develop the Vice Deanship's community service plan in collaboration with the departments.
- 3. Collect key performance indicators needed for the college's strategic plan and other reports.
- 4. Explore potential areas of community partnership based on needs assessment.
- 5. Encourage CAMSJ faculty and staff to use IAU's social responsibility bank to log in all community hours.
- 6. Engage students into community service activities through curricular and extra-curricular work.
- 7. Tailor students' talents, hobbies via community service activities.
- 8. Facilitate official approvals for community services activity locations.
- 9. Activate international days via community service work.
- 10. Provide community service opportunities via the National Volunteer Platform.
- 11. Login all CAMSJ's community service hours in the National Volunteer Platform.
- 12. Monitor and document volunteer hours.
- 13. Create annual reports for the unit along with their action plans and submit to the Vice Dean's office at the end of each academic year.

#### J. Health Professions Education Unit

The Health Professions Education Unit (HPEU) acknowledges the contributions of CAMSJ members to the progression of educational, research, and service missions. The unit is dedicated to fostering initiatives and providing opportunities that contribute to individual growth in terms of performance, satisfaction, and professional standing within the workplace. The following duties and responsibilities are delegated to the unit:

#### A. Training and Development

- 1. Assess the college needs for training and development provided by faculty, health specialists, technicians and staff -CAMSJ members-.
- Develop a training schedule for each academic year based on the college needs.
- 3. Provide training by University's Deanship of Academic Development (DAD) and internally within the college from CAMSJ members.
- Prepare training workshops to equip CAMSJ members with the skills to prepare essential reports effectively.
- 5. Guide new faculty members or returning members who have recently re-/joined to attend specific training geared for new orientees.
- 6. Provide scientific panels and workshops to discuss latest developments in the medical field and within medical education at the college and institutional levels.
- 7. Establish a dedicated Health Professions Education (HPE) portfolio online to systematically monitor and evaluate the essential teaching competencies of each faculty member via LinkedIn and other platforms.
- 8. Recognize and honor outstanding educational practices or initiatives within academic affairs.

Health Professions Education Unit duties and responsibilities (Cont.)

#### B. Enhance the Work Environment.

Assess the college needs for training and development provided by faculty, health specialists, technicians and staff -CAMSJ members-.

- Conduct workshops related to team building, open-dialogue, appreciation, fun and spontaneity.
- 2. Provide ongoing support and counselling for the well-being of CAMSJ members as per requests or by referrals.
- 3. Ensure that CAMSJ members receive constructive feedback and feel inclusive.
- 4. Provide a positive environment for the college by hosting events that foster engagement and vitality for CAMSJ members.
- 5. Partake in the annual nomination process for faculty awards for teaching, research and community service.
- 6. Create a retiree database for college faculty, health specialists, technicians, and staff to benefit from their expertise post-retirement.

#### K. Academic Units and Committees

All programs offered at CAMSJ must formulate a set of committees or/and units to fulfill certain functions towards the accomplishment of mission of the college and/or program. Some committees are established at the level of college and few of them are established at the program level. These include:

#### External advisory committee

The external advisory committee plays a vital role in the academic program. Its main functions include offering valuable insights and advice from external experts in the field. This committee helps ensure that program aligns with industry needs and stays relevant. They provide guidance on curriculum development, share industry trends, and offer suggestions for improvement.

#### Curriculum committee

The curriculum committee at CAMSJ has important tasks to ensure topnotch academic quality. They regularly review and enhance the curriculum using good academic practices, aligning it with the program, college, and IAU goals. The committee suggests new courses, changes to existing ones, and updates to general education criteria. They tackle issues between departments to avoid duplicating content and create maps to guide how skills are taught. Additionally, they assess textbooks, materials, and teaching methods to meet current educational standards. The committee also supports faculty members in making curriculum changes.

#### Disciplinary committee

CAMSJ has established a disciplinary committee to respond to student disciplinary issues and offer an immediate decision with an appropriate action plan. This committee serves to protect and sustain the integrity and credibility of the college. This committee reports to the Vice Dean for Academic Affairs. As per university rules and regulations, all matters concerning disciplinary action require immediate investigation and this committee usually responds to reported incidents of academic or general misconduct.

#### Quality of assessment and examination committee

This committee is concerned with the responsibilities to formulate, direct, implement, and monitor all issues related to examinations. Specific duties and responsibilities include:

- Collaborate with the University's Quality of Assessment and Examinations
   Center.
- 2. General oversee of the quality assessment and examination committee for each academic program in the college.
- 3. Ensure the quality of student assessment and exams in the college.
- 4. Monitor the implementation of IAU assessment and examination policies in all academic programs.
- 5. Supervise the overall construction of question banks for courses in the college.
- 6. Coordinate with the University's Quality of Assessment and Examinations
  Center and relevant training entities at the university to train faculty
  members on how to prepare and assess student assignment and activities.

#### Quality of assessment and examination committee responsibilities (Cont.)

- 7. Prepare technical reports on exams and other assessment tasks at the college, highlighting strengths, weaknesses, outstanding practices, and submit them to the University's Quality of Assessment and Examinations Center after presenting them to the college council by the college's VDAA.
- 8. Perform other tasks and assignments specified by the University's Quality of Assessment and Examinations Center.

#### Academic advisory committee

This committee is established to value the importance of student participation in its decision-making processes. This committee seeks to enhance the degree of student input and help the college to better understand the needs of its students and the means to assist them. Following are the goals and objectives of committee:

- 1. Develop the moral, spiritual, and professional values of each graduate and cultivate the values of honesty, collaboration, and tolerance.
- 2. Foster an academic environment that encourages constructive criticism as well as critical thinking while always respecting the opinions of others.
- 3. Provide a voice to improve the academic programs and services and enhance the research efforts at the program/college.
- 4. Strengthen the bonds between the students and the college administration and establish mechanisms for increasing dialogue, cooperation and understanding, thereby helping to improve the operation of the College's academic programs and services.
- 5. Enhance student participation in the decision-making process that affects the academic programs and services of the college.
- 6. Develop and enhance student leadership and collaboration skills through their activities on student advisory committees.

#### Academic advisory committee objectives (Cont.)

7. Develop a mechanism for generating student feedback and suggestions regarding the academic programs and services of the college.

#### ❖ Scientific research unit

Each program should establish a research committee to work under the umbrella of the Research Unit of the College to bolster the research activity and position of the respective program. The following duties and responsibilities are delegated to the unit:

#### A. The Research Groups

- Coordination with the academic departments and faculty members in the college to form groups of common research interest "research groups" at the beginning of each semester and submit their proposals to the VDSRI.
- Coordination and following up with the heads of research groups in the college and submission of a progress report every 4 weeks to the College Dean and VDSRI.
- 3. Coordination with the academic departments to encourage students to participate in the existing research.
- 4. Ensuring that the prepared research is compatible with the scientific publication specifications and in accordance with the evaluation rubrics and approving it before starting the publication process.

#### B. The College Scientific Productivity

- Updating the publication database prepared by the VDSRI monthly to include published research, research accepted for publication, and funded research.
- 2. Following up the publication activity of the college twice every semester through the scientific databases approved by the university.

#### Students' activities unit

The student activity unit, set up in the college, aims to energize and inspire students through enjoyable extracurricular activities. The unit plans various activities throughout the academic year, including team sports, learning sessions, and other engaging events, to enhance students' daily lives and foster camaraderie. The students' activities coordinator at CAMSJ is responsible for the following tasks:

- 1. Supervise cultural, sports, and social student activities held in the college.
- 2. Recommend an annual student activities plan, submitting it for approval at the end of each academic year.
- 3. Oversee clubs and student councils in the college according to the university regulations set by the Academic Affairs Agency and the Student Affairs Deanship.
- 4. Directly communicate and coordinate with representatives of student activities at the Deanship of Student Affairs.
- 5. Distribute tasks within individual clubs and monitor their performance.
- 6. Submit the budget needs for activities in the new academic year before the end of the current academic year.
- 7. Monitor the implementation of the activities planned according to the approved plan by the Deanship of Student Affairs.
- 8. Prepare regular reports on both curricular and extracurricular activities held in the college.
- 9. Raise proposals for performance improvement.
- 10. Perform any other tasks assigned by the Dean.

#### L. Faculty Member

Faculty members play a crucial role in the quality and academic accreditation process, acting as the key drivers of educational excellence. The involvement of faculty members in promoting and fostering a culture of quality within the college is paramount. Here are some aspects highlighting their roles:

- 1. Establishing a culture of quality: Faculty members actively contribute to the dissemination and establishment of a culture of quality within the college. They are attentive to quality guidelines and principles throughout all stages of the learning process, from preparing course materials and defining learning outcomes to employing effective teaching methods and assessment techniques. Faculty members ensure that course reports accurately analyze student results and respond appropriately to student feedback.
- 2. Active involvement in departmental quality work: Faculty members actively participate in all quality initiatives within their respective departments. This involvement includes the preparation of self-assessment files, self-study files, and the collection of evidence to support the continuous improvement of the educational process.
- 3. Engagement in scientific research and community services: Faculty members contribute to the development of the program by engaging in scientific research activities and participating in community service initiatives. Their involvement in research and community engagement strengthens the program's overall quality and relevance to societal needs.

- 4. Continuous course portfolio updates: Faculty members maintain up-to-date course portfolios, which serve as a comprehensive record of their professional achievements, educational qualifications, research contributions, and relevant experiences. By regularly updating their course portfolios, faculty members demonstrate their commitment to professional growth and development. These portfolios also provide a transparent view of their expertise, allowing students and stakeholders to assess their qualifications and the quality of their teaching. Additionally, maintaining current course portfolios enables faculty members to showcase their strengths and areas of expertise, contributing to the overall quality of the educational programs they are involved in.
- 5. Showcasing their professional achievements, educational qualifications, research contributions, and relevant experiences. By continuously updating their CVs, faculty members demonstrate a commitment to professional growth and maintain a comprehensive record of their expertise.
- 6. Participation in professional development: Faculty members actively participate in workshops and training programs aimed at enhancing their teaching skills, fostering quality in education, and promoting scientific research within the college. These opportunities enable faculty members to stay informed about the latest pedagogical practices, quality assurance methodologies, and research advancements, ultimately benefiting the overall quality of the program.

Through their dedication and active involvement, faculty members contribute significantly to the ongoing improvement and accreditation of the academic programs, ensuring a high-quality educational experience for students.

#### IAU QUALITY ASSURANCE SYSTEM

IAU has established a comprehensive quality assurance system to ensure the continuous monitoring and enhancement of quality across all its colleges and academic programs. This system is characterized by its systematic and structured approach towards maintaining and improving the overall quality standards. To facilitate this process, regular and periodic communication takes place between the DQAA and the College Vice Deanships for Development and Community Partnership, as well as the Vice Deanships for Academic Affairs at the respective colleges.

IAU's quality assurance system fosters a culture of institutional quality by establishing an internal regulatory framework that incorporates transparent and consistent procedures. This framework encourages active engagement from all stakeholders and demonstrates a strong commitment to continuous quality improvement at every level. The system at IAU harmoniously integrates both internal and external dimensions of quality assurance, working in synergy to achieve academic accreditation. For a comprehensive understanding of the quality assurance system implemented at IAU, please refer to Figure 3.

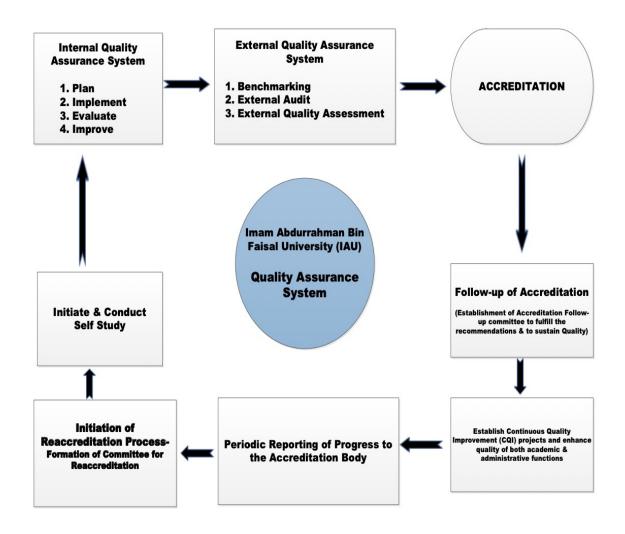


Figure 3: Quality Assurance System at IAU (Note: excerpted from DQAA quality assurance manual, 2020, p. 60)

#### **CAMSJ QUALITY ASSURANCE SYSTEM**

#### A. Internal Quality Assurance System

CAMSJ has taken significant strides in establishing a comprehensive performance measurement system that includes various evaluation methods, such as student surveys, to consistently assess and report on the effectiveness of teaching in all courses, programs, and support services. The purpose of the internal quality assurance system is to foster harmonization of the Quality Assurance (QA) system across programs, adhering to widely accepted guidelines.

The evaluation process follows the university's quality cycle, which involves planning, implementing, evaluating, and continuously improving through monitoring, analysis, and interpretation.

The university's quality assurance system focuses on four key areas: academic activities, administrative activities, student support services, and research output & community services. Internal quality assurance holds a crucial position within the accreditation framework, and the university has implemented specific practices to ensure the effectiveness of the internal quality assurance system.

#### 1. Quality assurance system on academic activities

CAMSJ has implemented a robust monitoring and evaluation system to track students' progress and provide timely feedback. The system incorporates feedback surveys from four categories of stakeholders: students, academic and administrative staff, employers, alumni, and local governance & community. Various surveys, such as course evaluation survey (CES), students experience surveys (SES), program evaluation surveys (PES), and students survey on lecturing skills (SSLS), are conducted using the online application called 'Estibana.' The university has clear procedures to assess students' achievement of learning outcomes, adhering to predefined criteria and regulations.

The Estibana application facilitates qualitative analysis and generates real-time reports for analysis and action.

Additionally, IAU utilizes Key Performance Indicators (KPIs) through the "Muashirat" application to assess its performance in teaching & learning, research & community services, and achieve its strategic goals. The KPI system covers all major university segments and is based on the Define-Measure-Analyze-Benchmark-Improve-Control model, encompassing 49 monitored KPIs at program, college, and institutional levels.

### 2. Quality assurance system on learning & teaching

Quality assurance activities in the college encompass inputs, processes, and outcomes, with a particular focus on learning outcomes for students. The process begins with student admissions and continues throughout their learning journey until graduation. Continuous assessment, examinations, surveys, and course reports are used to evaluate teaching and learning activities. Course portfolios, prepared by teaching staff based on program/course specifications, provide an overview of the course delivery process. These reports undergo review by QAA committees and department councils to identify areas for improvement and develop action plans. Annual Program Reports (APRs), including program specifications, course specifications, Quality Assurance of Students Assessment, Assessment of Program Learning outcomes, Assessment of Course Learning outcomes, and course reports, are routinely prepared to ensure and monitor program quality. The Dean submits the Annual Program Reports to the vice rector for Academic Affairs, who then reports the progress to the University Council. Figure 4 illustrates the process of quality assurance on learning and teaching.

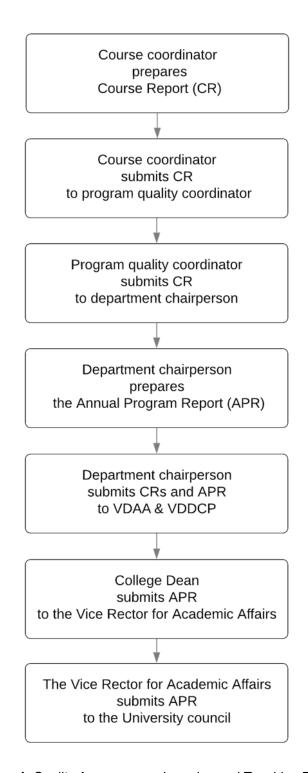


Figure 4: Quality Assurance on Learning and Teaching Process

#### 3. Quality assurance system on students' assessment

CAMSJ maintains a commitment to ensuring the quality of student assessment. Clear procedures, regulations, and predefined criteria are in place to assess students consistently across all programs. The university employs direct and indirect assessment methods to measure student achievement of learning outcomes. These methods provide a comprehensive evaluation of students' knowledge and skills.

#### a. Direct assessment methods

Direct assessment methods are utilized to measure student learning outcomes at both the program and course levels. These methods include written and practical exams, oral exams, and research projects. They provide a direct evaluation of students' understanding and application of the intended learning outcomes.

Students' achievement of Program Learning Outcomes (PLO) is assessed directly by adopting the following **15 steps** process.

- **Step-1:** Preparation of program planning matrix.
- **Step-2:** Use course specification to align each CLO with appropriate PLOs.
- **Step-3**: Use course specification to determine appropriate teaching strategies and assessment methods for measuring each CLO.
- **Step-4**: Devise an appropriate course blueprint & assessment plan for each course offered in the program.
- **Step-5**: Prepare CLO assessment matrix for each course offered in the program (develop this table separately for each course).
- **Step-6:** Measure students' achievement of each course learning outcome of the respective course offered in the academic program. Incorporate the findings in the course report (T7 Template).

- **Step-7:** Aggregate students' achievement concerning the CLOs contributing to each PLO (i.e., using course specification). It is mandatory to prepare a CLOs-PLOs Mapping matrix to facilitate this process.
- **Step-8:** Classify students' achievement into four categories using a predefined grading system (i.e., A, B, C, and D).
- Step 9: Develop KPIs for each PLO using Magar 3 parts for successful measurement of learning outcomes, and these include: (i) a measurable verb; (ii) the essential condition (if any) under which the performance is to occur and (iii) the criterion of acceptable performance. Accordingly, the minimum 'threshold' and the 'target' for the successful accomplishment of each PLO are defined. Presently, all the undergraduate programs of IAU consider 60% and above as the minimum threshold, indicating a successful accomplishment of each PLO. Thus, each KPI is defined as "the percentage of students who 75 achieved the minimum threshold (i.e., 60%) in the respective learning outcomes of courses targeting each one of the Program learning outcomes- "The higher the score, the better the performance'.
- **Step-10:** Fix the target and internal benchmark for each PLO.
- **Step-11:** Obtain External benchmark with similar programs in other Saudi Universities.
- **Step-12:** Compare actual performance with target, internal and external benchmark.
- **Step-13:** Develop recommendations and an action plan for improvements.
- **Step-14:** Implement Action plan.
- **Step-15:** Continue the cycle annually and ascertain the program's progress toward its goals and objectives.

Details will be available in the programs' quality assurance manual.

#### b. Indirect assessment methods

In addition to direct assessment, CAMSJ employs indirect methods to assess student achievement of learning outcomes. These methods involve stakeholder evaluation surveys, such as program evaluation surveys (PES), student experience surveys (SES), alumni, and interns satisfaction surveys, and employer surveys. Program learning outcomes assessment survey is also created to assess PLOs. These surveys gather feedback and perceptions from various stakeholders to assess the effectiveness of the educational programs. Furthermore, the performance of graduates in professional exit exams and the results of professional exam indicators are considered as indicators of student achievement.

By employing a combination of direct and indirect assessment methods, IAU ensures a comprehensive evaluation of students' progress and attainment of program learning outcomes.

The survey items are crafted according to the anticipated learning outcomes of the respective undergraduate program, typically assessed through a five-point Likert scale. A straightforward approach involves listing each expected learning outcome, prompting students to rate their mastery level on a scale for each program learning outcome (See Table 1).

**Table 1:** Grading of Students responses during Surveys that are used to assess their achievement of LOs

Performance Grading	Criteria			
	Mean	Median	First Quartile	Cumulative % of 4 or 5
High Quality	3.6 & above	4 & 5	4 & 5	80 & above
Acceptable	2.6 – 3.6	3	3	60 -8-
Improvement Required	Less than 2.6	1 & 2	1 & 2	Less than 60

The importance of data and the indirect assessment efforts are to:

- improve the program, services, and curriculum,
- improve planning for future assessment,
- expand efforts to engage students in measuring the achievement of the PLOs, and
- made to make current systems and efforts more effective.

#### 4. Quality assurance system on teaching staff

CAMSJ has implemented a system to ensure that the staff are qualified and capable of carrying out the core activities of teaching and learning, research, and community service. To verify their qualifications, faculty members need to have their certificates endorsed by the Ministry of External Affairs in their respective countries, after verification from the issuing university and employer. These certificates are then attested by the Royal Embassy and Cultural Attaché of Saudi Arabia in the applicant's country. If the highest degree is obtained from outside the applicant's country, it should be attested by the respective Ministry and Embassy in that country. The Saudi cultural attaché conducts final verification by communicating with the educational institutions and universities from where the candidates obtained their qualifications, considering the recognition of qualifications stipulated by the Saudi Ministry of Higher Education. Recruitment committees verify the candidates' claims before their appointment by reviewing their experience and qualifications.

The university Deanship of Academic Development, and the Directorate of Training & Development take responsibility for enhancing the educational environment by providing extensive training and development programs to faculty and staff, transforming them into exceptional educators. The Directorate of Medical Education also offers training to health science faculty on teaching and assessment methods. The training and consultation unit of DQAA provides regular training programs on quality and academic accreditation.

Also, the college Health Professions Education Unit is regularly providing faculty and the technical staff learning development opportunities via IAU's various deanships or administrations. KPIs for faculty include the proportion of staff with verified doctoral qualifications, job satisfaction, and participation in faculty development programs. The university has established procedures for evaluating the performance of faculty and staff, including portfolio evaluation, student feedback on teaching effectiveness, and contributions to the university, research, and community services. Uniform regulations govern faculty promotions at the university.

#### 5. Quality assurance system on facilities & learning resources

The university has well-defined procedures in place to ensure that the facilities required for student learning are suitable and adequate for each program. This includes conducting thorough checks on computer facilities, the library, and laboratories to ensure their quality. They have policies in place for ICT usage and information security. KPIs include stakeholder evaluations of the library, number of books per student, IT expenditure, and availability of online databases. The Directorate of Library Affairs governs learning resource management.

## 6. Quality assurance system on student support services

The university places great importance on providing high-quality facilities for student learning, conducting comprehensive assessments of computer facilities, the library, and laboratories to ensure their suitability. To maintain efficient use of ICT systems, the university has implemented policies and regulations that apply to faculty, support staff, students, and authorized individuals. Additionally, the university has an Information Security Policy in place to safeguard valuable computer-based information.

KPIs are utilized to gauge the effectiveness of learning resources, including stakeholder evaluations of the library, the ratio of books to titles, annual expenditure on books and periodicals per student, the availability of online databases, and the accessibility of computer terminals. The management of learning resources is governed by the Directorate of Library Affairs, which maintains a Policy and Procedures manual, and the annual reporting of KPIs ensures continuous improvement and accountability in this regard.

### 7. Quality assurance system on administrative activities

Each college within IAU adheres to the university's guidelines for monitoring quality improvements in administrative processes. These guidelines recognize the significance of administrative and educational support units in achieving institutional effectiveness, which is closely linked to student learning outcomes.

To ensure ongoing evaluation and enhancement of activities and services in these units, an integrated assessment process is carried out annually. This process aligns with the assessment of program learning outcomes and is aimed at fulfilling the university's mission, commitment to institutional effectiveness, and fostering a conducive environment for student learning.

The DQAA collaborates with the DAD to manage this process. Each administrative unit, in cooperation with DQAA, reviews its mission, goals, and assessment strategies, collects, and analyzes relevant data, and utilizes this information to implement appropriate changes and updates. To facilitate this process, units develop annual assessment plans and reports, which are then submitted to the Administrative Development Deanship for review and feedback.

Notable administrative support services provided at IAU include Deanship of Information and Communication Technologyy, Directorate of Library Affairs, General Directorate of Human Resources, Directorate of the Office of the Financial Controller, Deanship of Admissions and Registration, and Deanship of Student Affairs.

## **B. External Quality Assurance System**

CAMSJ has quality management procedures for collaborative partners. A new partnership requires approval from higher administration based on a report from the DQAA. A Memorandum of Understanding must be signed by the head of the partner institution. The partnership agreement outlines operational arrangements. The university collaborates with local and international institutions for benchmarking and ranking projects. Benchmarking projects should align with the university's mission, promote learning from best practices, and have the rector's approval. A code of conduct ensures selection, equivalence, contact, agreement, confidentiality, exchange, use, and completion principles are followed. DQAA initiates benchmarking projects with input from colleges. Four types of benchmarking are used: performance, functional, strategic, and process. External benchmarking are selected based on shared goals, trust, and senior management commitment. Internal and external benchmarking are conducted, focusing on seven priority areas.

Benchmarking results are reported, recommendations are implemented, and progress is monitored. IAU also utilizes benchmarking services provided by QS ranking and Times Higher Education for ranking purposes, offering benefits such as performance analysis and institutional comparisons.

## C. Quality Management Plan

The QAA Unit at the college follows a specific plan to effectively collect, monitor and ensure the quality of programs. Table 2 outlines the workflow for the semester one of the academic year and Table 3 for the second semester.

Table 2: First semester quality management plan

Task	Week due
Course portfolio (second semester of previous academic year)	End of Week 2
Operational plan report + action plan (previous academic year)	End of Week 4
Comprehensive survey report + action plan (previous academic year)	End of Week 6
PLO assessment report + action plan (previous academic year)	End of Week 8
KPI Report + action plan (previous academic year)	End of Week 10
Annual program report + action plan (previous academic year)	End of week 12
Launch Estibana Surveys	TBA from
CES - Course Evaluation Survey	DQAA
SSLS - Student Survey on Lecturing Skills	
OPS - Orientation Program Survey	_

**Table 3:** Second semester quality management plan

Task	Week due	
Course portfolio (second semester of current academic year)	End of Week 2	
Launch Estibana Surveys	TBA from	
CES - Course Evaluation Survey	DQAA	
PES - Program Evaluation Survey		
SES - Student Experience Survey		
SSLS - Student Survey on Lecturing Skills		
FYSS - Final Year Students' Survey		
OPS - Orientation Program Survey		
SAS - Student Affairs Survey		
SSAA - Student Satisfaction Survey About Academic Advisor		
LUS - Library User Satisfaction Survey		
VMV - Vision, Mission, and Values Survey		
AJS - Academic Job Satisfaction		
ADJS - Admin Job Satisfaction Survey		
Internship Satisfaction Survey	TBA from	
Alumni Survey	CAMSJ Vice Dean for	
Employers Survey	Development	
· · · · ·	and Community	
	Partnership	

Continuous monitoring of the progress of quality work takes place, and evidence is collected and raised accordingly. Feedback mechanisms are established to provide guidance and support throughout the process. In case of any updates or changes to quality standards, contingency plans are developed to ensure timely adaptation, especially in situations where faculty members may be unavailable. By following the plan, the QAAU can effectively oversee the quality of programs, track progress, and ensure compliance with DQAA requirements.

## **D. Key Performance Indicators**

At QAAU, dedication to maintaining the highest standards of quality in operations is evident. As part of the commitment to excellence, 17 fundamental Key Performance Indicators (KPIs) were carefully sourced from ETEC. Encompassing a comprehensive range of metrics, these KPIs ensured continuous monitoring and enhancement of performance across critical aspects of the organization. Additionally, it's important to note that while the 17 KPIs provided a comprehensive overview of quality standards, additional KPIs existed at the individual program level, detailed in the program operational plan. These program-specific KPIs were tailored to meet the unique requirements and objectives of each program, ensuring alignment with the specific needs the diverse range of initiatives (See Table 4).

To enhance organizational performance and ensure strategic objectives were met, the college followed the IAU KPI monitoring model as a crucial framework. This model facilitated systematic tracking and evaluation of essential metrics aligned with specific goals. See Figure 5 for the IAU KPI Monitoring Model.

# **IAU KPI Monitoring Model Define KPIs Measure KPIs** (Through appropriate tools and techniques) **Analyze the Performance of KPIs** (Current year performance) **Develop Corrective Action Compare Performance with** Plan Internal Benchmark (Do SWOT and develop & implement (Calculated based on the performance strategies for seeking CQI) of last 2 & 3 years) BENCHMARKING **PROCESS Fix Target Benchmark for Compare Performance with External Benchmark** (Fix a new target for the KPIs based on (Comparison of performance with the comparison of actual, internal, and national or international HELs) external benchmark)

Figure 5: IAU KPI Monitoring Model (Note: excerpted from DQAA quality assurance manual, 2020, p. 64)

Table 4: ETEC 17 KPIs

KPIs Code	KPIs	Measurement Methods	Measurement Time
KPI-P-01	Percentage of achieved indicators of the program operational plan objectives	Survey - Statistical analysis (Committee, Decisions)	End of the academic year
KPI-P-02	Students' Evaluation of quality of learning experience in the program	Program evaluation Survey (PES)	End of the program
KPI-P-03	Students' evaluation of the quality of the courses	Course evaluation Survey (CES)	End of the semester
KPI-P-04	Completion rate	Students affairs results	End of the program
KPI-P-05	First-year students retention rate	Student affairs results	End of the preparatory year
KPI-P-06	Students' performance in the professional and/or national examinations	Alumni Survey	Annually after the students graduate
KPI-P-07	Graduates' employability and enrolment in postgraduate programs	Alumni Survey	Annually after the students graduate
KPI-P-08	Average number of students in the class	Enrollment	Beginning of the semester
KPI-P-09	Employers' evaluation of the program graduate's proficiency	Survey	Annually
KPI-P-10	Students' satisfaction with the offered services	Survey	Annually
KPI-P-11	Ratio of students to teaching staff	Calculated at the beginning of the academic year	Annually
KPI-P-12	Percentage of teaching staff distribution	Calculated at the beginning of the academic year	Annually
KPI-P-13	Proportion of teaching staff leaving the program.	Calculated from the data given by the faculty affairs.	End of the academic year

KPIs Code	KPIs	Measurement Methods	Measurement Time
KPI-P-14	Percentage of publications of faculty members	Collection of data from the faculty	End of the academic year
KPI-P-15	Rate of published research per faculty member	Collection of data from the faculty	End of the academic year
KPI-P-16	Citations rate in refereed journals per faculty member	Collection of data from the faculty	End of the academic year
KPI-P-17	Satisfaction of beneficiaries with the learning resources	Survey	Annually

### E. Closing the Loop: Results Dissemination and Follow-up

Assessment serves the purpose of evaluating the effectiveness of the university and its administrative units, allowing for continuous improvement based on the utilization of assessment results. "Closing the Loop" signifies the completion of a full cycle, from establishing a mission to using assessment findings in the next planning and assessment phase. It is crucial to widely disseminate and thoroughly evaluate assessment results, using them to enhance university services and processes. The sharing of results and assessment plans with unit staff and university management is essential for collaborative efforts in implementing the next steps. This includes acknowledging both successes and shortcomings to develop effective action plans that build on strengths and propose remedial measures for areas needing improvement. Action plans should provide specific suggestions, prioritize inter-unit cooperation, consider costs if applicable, and focus on increasing the likelihood of success in the next assessment cycle. Furthermore, unmet goals at the administrative unit level may indicate the need for changes in services, policies, and procedures.

It should be noted that closing the assessment loop may require additional resources beyond the current budget. The assessment loop is only considered closed, when necessary, modifications are implemented. The responsibility for implementing proposed action plans lies with all units, and each unit should submit an assessment report detailing expected outcomes, assessment measures used, a brief discussion of results, and how the results were utilized to improve services and processes.

The program chairperson should submit the report to the dean and VDDCP for timely feedback and comments. Once approved, all reports should include a detailed timeline and identify the responsible parties for implementation. The academic program along with the VDDCP will monitor implementation and review any necessary remedial action plans.

Benchmarking results are reported, recommendations are implemented, and progress is monitored. The university also utilizes benchmarking services provided by QS Intelligence Unit and Times Higher Education for ranking purposes, offering benefits such as performance analysis and institutional comparisons.

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#### CONCLUSION

The manual serves as a fundamental document for planning, establishing, and monitoring quality within any quality system. At vice deanship, we have maintained a clear, achievable, and robust plan that stems from a solid and well-established foundation. Our manual is supported by a fully functional strategic plan, which is translated into clear and manageable tasks and subtasks. It provides valuable insights into the quality features, processes, cycles, and management model implemented in the college. It outlines our comprehensive quality plan, including periodic evaluations, as well as methods and tools for continuous improvement. VDDCP is dedicated to the overall quality development of CAMSJ, adhering to the standards set by the ETEC. While accreditation is certainly an important outcome, the true measure of our success lies in the continuous excellence of our educational process and the production of highly successful graduates. Through our unwavering commitment to quality, we strive to ensure a thriving educational environment that fosters growth, innovation, and positive outcomes for our students.

## **REFERENCES**

Deanship of Quality and Academic Accreditation. (2022). IAU quality assurance system manual.

Strategic Planning Committee. (2022). College of Applied Medical Science strategic plan 2022-2026.

https://www.iau.edu.sa/sites/default/files/resources/camsj\_strategic\_plan\_-\_en\_finalized\_2\_0.pdf



جامعة الإمام عبد الرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY كلية العلوم الطبية التطبيقية بالجبيل College of Applied Medical Sciences in Jubail