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| **Institution:** | **................................................................................** |
| **Report Date:** | **............ / .......... / ..........** |

**Table of Contents**

[Introduction 3](#_Toc533415396)

[Elements of Evaluation: 4](#_Toc533415397)

[Steps for Evaluation: 5](#_Toc533415398)

[First Step: Evaluation of the criterion 5](#_Toc533415399)

[Second Step: Evaluation of the Standard 10](#_Toc533415400)

[Self-Evaluation Scales for the Program 13](#_Toc533415401)

[1. Mission, Vision, and Strategic Planning 14](#_Toc533415402)

[2. Governance, Leadership, and Management 16](#_Toc533415403)

[3. Teaching and Learning 20](#_Toc533415404)

[4. Students 25](#_Toc533415405)

[5. Faculty and Staff 29](#_Toc533415406)

[6. Institutional Resources 31](#_Toc533415407)

[7. Research and Innovation 34](#_Toc533415408)

[8. Community Partnership 36](#_Toc533415409)

# Introduction

In order to emphasize the vital role played by the Center in supporting higher education institutions and enhancing their ability to meet the standards of quality assurance and academic accreditation, the Center has prepared the Self-Evaluation Scales for Higher Education Institutions document. This document aims at assisting quality assurance officials in educational institutions to conduct evaluation objectively based on the Center’s quality assurance standards for higher education institutions. This document can also be used for planning, self- review, and support institutional quality improvement strategies.

This document provides Self-Evaluation Scales for institutional quality assurance and academic accreditation standards, which include the following standards:

1. Mission, Vision, and Strategic Planning

2. Governance, leadership, and Management

3. Teaching and Learning

4. Students

5. Faculty and Staff

6. Institutional Resources

7. Research and Innovation

8. Community Partnership

The quality assurance and continuous improvement of educational institutions are based on the self-evaluation carried out by the institution and its various units based on the quality performance criteria. The faculty and staff responsible for the various activities in the institution evaluate the level of performance according to these criteria and based on suitable evidence and proofs, with the support of performance indicators and benchmark comparisons with other institutions of high-quality performance, especially in areas of high importance. This self-evaluation is supported by independent opinion through an independent evaluator or evaluators from outside the institution; to enhance the credibility, objectivity and accuracy of the evaluation.

This document contributes to the development of a common language between the staff of the educational institution, the external reviewers, and the National Center for Academic Accreditation and Evaluation. This document describes the levels of the good performance of the higher education institutions, thus determining satisfactory or unsatisfactory performance. Furthermore, this document helps higher education institutions to know exactly what is required under each standard, and the performance expected of them in a descriptive, gradual manner that makes it easy to determine its current level. In addition, it benefits the external reviewers and independent evaluators during the review processes, to accurately identify the performance of institutions for each of the institutional areas. Finally, this document serves as the guide and orientor for planning processes to improve the quality of performance based on self and external evaluation according to these scales.

# Elements of Evaluation:

In order to achieve the highest degree of accuracy in the evaluation, the Center has developed specific elements that the evaluation processes depend on for all the criteria listed under each standard. The evaluation of the quality level is based on the extent to which the criterion meets its elements, and effectively closes the quality loop (planning, implementation, review and improvement), taking into consideration the nature of the criterion, and the existence of practices that demonstrate any aspect of excellence and creativity in the institutional performance, that is in line with what many institutions of higher education have reached and what they aspire to reach.

The elements of evaluation of the criteria are composed of the following:

• Extent of availability of elements and components of the criterion

• Quality level of application for each element.

• Regularity of application and assessment, and availability of evidence.

• Continuous improvement and level of results in the light of indicators and benchmarks

• Excellence and creativity in practices of the elements of the criterion.

The institution's assessments should be based on evidence and indicators of quality, not on unsubstantiated impressions not supported by evidence.

**Essential Criteria:**

Due to the importance of some of the criteria, a set of criteria has been identified, which represent essential criteria. These criteria have been marked with an asterisk (\*) and written in bold face. Such criteria must be evaluated at the level of at least 3 points out of 5, when the institution applies for accreditation.

# Steps for Evaluation:

The quality of the performance is evaluated by evaluating the criterion first, and then evaluating the standard as a whole, as follows:

## First Step: Evaluation of the criterion

Starting with determining the extent of applicability of the criterion to the institution using one of the two options:

**Option 1: Not Applicable**

That is, the institution is not required to apply the criterion because it is not suitable for its nature and activities. If this is the case, the criterion is not counted within the criteria included in the evaluation of the standard.

**Option 2: Applicable**

That is, the criterion is related to the nature and activities of the institution, and it is important to provide it. If this is the case, the criterion is evaluated using a five-point scale (1 to 5). The quality of performance can be judged by:

**A. Unsatisfactory Performance:**

This includes two levels: (1 and 2), as follows:

**Level 1 (Non-Compliance):**

There are no or few available elements of the criterion, (or) the elements of the criterion are not applied at all, (or) are applied at a very low level, (or) are rarely applied.

**Level 2 (Partial Compliance)**

Most of the elements of the criterion are available, (or) that the elements of the criterion are applied at low level (or) are applied irregularly, (or) there is no assessment or it is there but is irregular, (or) there is insufficient evidence, and there may be some limited improvement procedures.

**B. Satisfactory Performance:**

It includes three levels: (3, 4, and 5), detailed as follows:

**Level 3 (Compliance):**

All elements of the criterion are available, all of which are applied at a good level and regularly, there is a regular and effective assessment, sufficient evidence is available, and there are regular improvement procedures and good results.

**Level 4 (Perfect Compliance):**

All the elements of the criterion are available, all of which are applied at a perfect level and regularly, there is a regular and effective assessment, sufficient and varied evidence is available, and there are regular procedures for improvement and higher results compared to previous results.

**Level 5 (Distinctive Compliance):**

All the elements of the criterion are available, all of which are applied at a distinct level, on a regular basis, there is a regular, effective, and excellent assessment, and various, comprehensive, and cumulative evidence is available, there are regular procedures for improvement and distinct results compared to other institutions, and there is creativity in the practices of the elements of the criterion.

The elements used for evaluation at the criterion level can be summarized according to the following table:

| **Levels of**  **Evaluation**  **Elements**  **of Evaluation** | **NA** | **Unsatisfactory**  **Performance** | | **Satisfactory**  **Performance** | | |
| --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Distinctive Compliance** |
| **1** | **2** | **3** | **4** | **5** |
| **Extent of availability of elements and components of the criterion** |  | * There are no available elements of the criterion * Or there are few available elements | * Most of the elements of the criterion are available | * All of the elements of the criterion are available | * All of the elements of the criterion are available | * All of the elements of the criterion are available |
| **Quality level of application for each element** |  | * The elements of the criterion are not applied at all, (or) are applied at a very low level | * The elements of the criterion are applied at low level | * The elements of the criterion are applied at good level | * The elements of the criterion are applied at perfect level | * The elements of the criterion are applied at distinct level |
| **Regularity of application and assessment, and availability of evidence** |  | * Rarely applied | * Applied irregularly, * (or) there is no assessment, or it is there but is irregular, * (or) there is insufficient evidence | * Applied regularly, * There is a regular and effective assessment, * Sufficient evidence is available | * Applied regularly, * There is a regular and effective assessment, * Sufficient and varied evidence is available | * Applied on a regular basis, * There is a regular, effective, and excellent assessment, and * Various, comprehensive, and cumulative evidence is available, |
| **Continuous improvement and level of results in the light of indicators and benchmarking** |  | ------------ | * There may be some limited improvement procedures | * There are regular improvement procedures and good results. | * There are regular procedures for improvement and higher results compared to previous results. | * There are regular procedures for improvement and distinct results compared to other institutions |
| **Excellence and creativity in practices of the elements of the criterion** |  | ------------ | ------------ | ------------ | ------------ | * There is creativity in the practices of the elements of the criterion. |

**Examples of Measurement Scales for Evaluation of Criteria**

**First Example: Criterion 2.5.7**

The institution uses the results of measuring satisfaction rates and performance assessment for providing feedback and continuous development and improvement.

| **Level** | **Description of Performance** |
| --- | --- |
| **(1)**  **Non-Compliance** | The institution does not measure satisfaction rates or does not evaluate performance level, or does not benefit from measurement results in providing feedback or continuous improvement, or rarely, or very poorly benefits from them. |
| **(2)**  **Partial Compliance** | The institution benefits from measurement results in providing feedback, and continuous development and improvement in a limited and irregular manner, or at a weak level; there may be some limited procedures to develop these processes**.** |
| **(3)**  **Compliance** | The institution benefits from the results of measuring satisfaction rates and evaluating performance in providing feedback, and continuous development and improvement at a good level on a regular basis; there is sufficient evidence, and there are procedures to assess and develop these processes**.** |
| **(4)**  **Perfect Compliance** | The institution benefits from the results of measuring satisfaction rates and evaluating performance in providing feedback, and continuous development and improvement at a high level, regularly and effectively, there is sufficient and varied evidence for this, and there are effective procedures to assess and develop these processes**.** |
| **(5)**  **Distinctive Compliance** | Any distinction and creativity in the practices of the elements of the criterion |

**Second Example: Criterion 4.1.1**

The institution is committed to the implementation of policies and standards governing the students' admission and transfer, and credit equivalency; and distributes students to the academic programs according to specific, fair, and published mechanisms.

| **Level** | **Description of Performance** |
| --- | --- |
| **(1)**  **Non-Compliance** | The institution does not have policies and criteria for admission, transfer, and credit equivalency, and there are no specific mechanisms for the distribution of students among academic programs, or they exist but they are not appropriate or are not adhered to or applied rarely, or applied very poorly. |
| **(2)**  **Partial Compliance** | The institution has policies and criteria for admission, transfer, and credit equivalency, there are also mechanisms for the distribution of students to academic programs, some of which are inadequate, or insufficiently publicized, poorly or irregularly applied, or not assessed or assessed irregularly, and there are limited procedures for their development. |
| **(3)**  **Compliance** | The institution has policies and criteria for admission, transfer, and credit equivalency, there are also mechanisms for the distribution of students to academic programs, all of which are appropriate and published, and the institution is committed to applying them in a good, systematic, and fair manner, sufficient evidence is available, and most of them are subject to periodic assessment and development**.** |
| **(4)**  **Perfect Compliance** | The organization has policies and standards for admission, transfer, and equivalence. There are also mechanisms for the distribution of students to academic programs, all of which are appropriate and published by various means. The institution is committed to applying them at a high level on a regular and fair basis, and there is sufficient and varied evidence. All are subject to periodic assessment and development with high results for improvement**.** |
| **(5)**  **Distinctive Compliance** | Any distinction and creativity in the practices of the elements of the criterion |

## Second Step: Evaluation of the Standard

The evaluation shall be at the level of the standard as a whole, by collecting the points of evaluation for all the related criteria according to their level of quality. The average shall then be calculated by dividing the sum of these points by the number of the applicable criteria on the institution. The performance level of the standard shall be calculated according to the following table:

|  |  |  |
| --- | --- | --- |
| **Quality Rating/Level of Standard** | | **Average** |
| **Level** | **Overall Rating** |
| **Distinctive Compliance** | **Five Points** | **≥ 4.5** |
| **Perfect Compliance** | **Four Points** | **From 3.5 to < 4.5** |
| **Compliance** | **Three Points** | **From 2.5 to < 3.5** |
| **Partial Compliance** | **Two Points** | **From 1.5 to < 2.5** |
| **Non-Compliance** | **One Point** | **< 1.5** |

It is to be noted that no institution shall be admitted for accreditation unless it has obtained at least Compliance level (3 points) in each of the eight standards and in each of the essential criteria.

**An illustrative example of how to calculate the average to evaluate the standard:**

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Distinctive Compliance** |
| **1** | **2** | **3** | **4** | **5** |
| **1-1** | **Institutional Mission and Goals** | |  |  |  |  |  |  |
| **1.1.1** | **The institution's mission defines the purpose of its existence; is consistent with its nature, the needs of the community, and the national trends; and is periodically reviewed. \*** | |  |  |  | 🗸 |  |  |
| **1.1.2** | **The institution's goals are linked to its mission, clear and realistic. \*** | |  |  |  | 🗸 |  |  |
| 1.1.3 | The institution's mission and goals are formally approved by the governing body and are widely publicized. | |  |  |  |  | 🗸 |  |
| **1.1.4** | **The mission guides all of the institution’s operations (e.g. planning, decision-making, resource allocation, academic program development). \*** | |  |  |  | 🗸 |  |  |
| **1.1.5** | The institution has values that guide the work and the behavior of its employees. | |  |  | 🗸 |  |  |  |
| **1-2** | **Vision and Strategic Planning** | |  |  |  |  |  |  |
| **1.2.1** | The institution has a clear, ambitious, and publicized vision. | |  |  |  | 🗸 |  |  |
| **1.2.2** | **The institution develops a well-defined, comprehensive strategic plan that is consistent with its vision and be in line with national developmental plans and programs (e.g. Vision 2030 and National Transition Programs). \*** | |  |  |  |  | 🗸 |  |
| 1.2.3 | The institution’s strategic plan includes clear strategic objectives, linked to specific performance indicators to measure the extent of their achievement based on targeted performance benchmarks. | |  |  |  |  | 🗸 |  |
| **1.2.4** | The strategic plan includes an estimation of potential risks and mechanisms to deal with them. | |  | 🗸 |  |  |  |  |
| **1.2.5** | The institution adopts operational and execution plans for all its units, for which the strategic plan represents a reference framework. | |  |  |  | 🗸 |  |  |
| **1.2.6** | **The institution follows up the extent to which the strategic plan is implemented through specific mechanisms; prepares periodic reports on its progress; and develops and adjusts it as required based on the results of the review, assessment process, and changing circumstances.\*** | |  |  | 🗸 |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | | **32** | | | | | |
| **Number of Applicable Criteria** | | | **11** | | | | | |
| **Average Evaluation of the Standard** | | | **2.91** | | | | | |
| **Overall Quality Rating of the Standard** | | | **3** | | | | | |

**Identification of strengths and aspects that need to be improved and priorities for improvement:**

The Self-Evaluation Scales document includes parts that require the staff of the institution to identify the strengths in each standard based on the high performance criteria in the institution, in addition to the need to identify areas that need improvement (weaknesses), and then the guidance to focus on priorities for improvement, to be a fundamental basis for building improvement plans.

**Independent Opinion:**

The Self-Assessment Scales document includes an independent opinion part to support self-evaluation processes with an evaluation carried out by a person(s) outside the institution, which addresses the accuracy and objectivity of the results of the self-evaluation undertaken by the institution, based on available evidence and performance indicators, with attachment of detailed report about the evaluation.

# Self-Evaluation Scales for the Program

# 1. Mission, Vision, and Strategic Planning

The institution must have clear and appropriate mission and goals, which specify the purpose of its existence and direct planning, decision-making and working in all academic and administrative units. The strategic plan of the institution must be linked to a clear vision and aligned with national and international trends. The institutional performance must be monitored and assessed based on key performance indicators.

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **1.1** | **Institutional Mission and Goals** | | | | | | |
| **1.1.1** | **The institution's mission defines the purpose of its existence; is consistent with its nature, the needs of the community, and the national trends; and is periodically reviewed. \*** |  |  |  |  |  |  |
| **1.1.2** | **The institution's goals are linked to its mission, clear and realistic. \*** |  |  |  |  |  |  |
| 1.1.3 | The institution's mission and goals are formally approved by the governing body and are widely publicized. |  |  |  |  |  |  |
| **1.1.4** | **The mission guides all of the institution’s operations (e.g. planning, decision-making, resource allocation, academic program development).\*** |  |  |  |  |  |  |
| 1.1.5 | The institution has values that guide the work and the behavior of its employees. |  |  |  |  |  |  |
| **1.2** | **Vision and Strategic Planning** | | | | | | |
| 1.2.1 | The institution has a clear, ambitious and publicized vision. |  |  |  |  |  |  |
| **1.2.2** | **The institution develops a well-defined, comprehensive strategic plan that is consistent with its vision and be in line with national developmental plans and programs (e.g. Vision 2030 and National Transition Programs). \*** |  |  |  |  |  |  |
| 1.2.3 | The institution’s strategic plan includes clear strategic objectives, linked to specific performance indicators to measure the extent of their achievement based on targeted performance benchmarks. |  |  |  |  |  |  |
| 1.2.4 | The strategic plan includes an estimation of potential risks and mechanisms to deal with them. |  |  |  |  |  |  |
| 1.2.5 | The institution adopts operational and execution plans for all its units, for which the strategic plan represents a reference framework. |  |  |  |  |  |  |
| **1.2.6** | **The institution follows up the extent to which the strategic plan is implemented through specific mechanisms; prepares periodic reports on its progress; and develops and adjusts it as required based on the results of the review, assessment process, and changing circumstances. \*** |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | |  | | | | | |
| **Number of Applicable Criteria** | |  | | | | | |
| **Average Evaluation of the Standard** | |  | | | | | |
| **Overall Quality Rating of the Standard** | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 2. Governance, Leadership, and Management

The institution must have governance systems that ensure its effectiveness and efficiency; and must implement policies, regulations and procedures that support its mission, goals, and strategic and operational plans. The institution must have a clear and functioning organizational structure with defined authorities and responsibilities for all jobs. The institution must have a leadership style, and an administrative system that is based on planning, implementing, reviewing, and improving with follow-up; and must apply quality systems that achieve continuous performance development in a framework of integrity, transparency, equality and fairness in a supportive institutional environment. All related aspects of institutional performance must be assessed based on key performance indicators.

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **2.1** | **Governing Councils and Committees** | | | | | | | |
| **2.1.1** | **The institution is managed by councils with specific responsibilities and authorities (e.g., Board of Trustees, University Council, College Councils, Scientific Council) in accordance with the Higher Education Regulations in the Kingdom of Saudi Arabia. \*** | |  |  |  |  |  |  |
| 2.1.2 | The permanent and temporary committees in the institution are formed in accordance to specific and declared regulations; and their responsibilities and authorities are defined with an appropriate representation of the male and female sections and the branches. | |  |  |  |  |  |  |
| 2.1.3 | Councils and committees act to improve institutional effectiveness and operational efficiency in their various aspects (e.g. academic, administrative, financial and internal quality systems). | |  |  |  |  |  |  |
| 2.1.4 | The institution implements a system to assess the efficiency of the councils and committees and enhance their performance. | |  |  |  |  |  |  |
| **2.2** | **Leadership and Management** | | | | | | | |
| **2.2.1** | **The institution implements a published and transparent system that ensures the recruitment of appropriately qualified academic and administrative leaders, the development of their capabilities and the preparation of future leaders.\*** | |  |  |  |  |  |  |
| 2.2.2 | The institution implements mechanisms for accountability, and assesses the performance of leaders at all levels according to specific and published standards. | |  |  |  |  |  |  |
| 2.2.3 | The leaders enable the participation of all stakeholders (e.g. students, teaching staff and employee) in decision-making processes. | |  |  |  |  |  |  |
| 2.2.4 | The leaders make decisions based on institutional studies, information, and data. | |  |  |  |  |  |  |
| 2.2.5 | The leaders adopt appropriate procedures enabling the coordination and integration between administrative and academic units. | |  |  |  |  |  |  |
| 2.2.6 | The leaders work to create positive organizational climate and work environment; encourage initiatives and development proposals; and motivate outstanding performance and creativity throughout the institution. | |  |  |  |  |  |  |
| 2.2.7 | The leaders keep all stakeholders informed about developments in the institution, and update them on a regular basis. | |  |  |  |  |  |  |
| 2.2.8 | The leadership adopts effective mechanisms to improve the institution’s reputation and image. | |  |  |  |  |  |  |
| **2.3** | **Systems, Policies, and Procedures** | | | | | | | |
| **2.3.1** | **There are comprehensive, approved and published policies for institutional activities that support and contribute to national trends (e.g. policies for academic, research, administrative, financial, rights and duties, quality, and community partnerships).\*** | |  |  |  |  |  |  |
| **2.3.2** | **The institution applies proper systems, regulations and procedures to ensure the implementation of its policies. \*** | |  |  |  |  |  |  |
| 2.3.3 | There is an institutional system for reviewing policies and procedures, ensuring their effectiveness and developing them. | |  |  |  |  |  |  |
| 2.3.4 | There is a clear system of delegation of authorities with a clear specification of the delegated responsibilities and tasks. | |  |  |  |  |  |  |
| **2.4** | **Organizational structure** | | | | | | | |
| **2.4.1** | **The institution’s organizational structure is consistent with its mission, goals, scope of activities, and size. \*** | |  |  |  |  |  |  |
| 2.4.2 | The organizational structure determines the organizational links, authoritarian relations and terms of references of all academic and administrative units. | |  |  |  |  |  |  |
| 2.4.3 | The institution is committed to the organizational structure and relies on it in the recruitment and promotion processes. | |  |  |  |  |  |  |
| **2.4.4** | **The institution has comprehensive and published job descriptions that ensure consistency between authorities and responsibilities; and follows up the compliance with them. \*** | |  |  |  |  |  |  |
| **2.5** | **Quality Assurance Management** | | | | | | | |
| **2.5.1** | **The institution has an effective quality assurance and management system, covering all of its activities and units and is directly linked to the senior management. \*** | |  |  |  |  |  |  |
| 2.5.2 | The institution provides appropriate physical, financial, and manpower support for quality assurance requirements. | |  |  |  |  |  |  |
| 2.5.3 | All stakeholders (e.g. teaching staff, employee, students) participate in quality assurance processes. | |  |  |  |  |  |  |
| **2.5.4** | **The institution has a centralized system for collecting, documenting, analyzing, managing, and reporting data related to its various activities.\*** | |  |  |  |  |  |  |
| **2.5.5** | **The institution uses various mechanisms and tools to monitor its performance and measure the progress rates at all levels. \*** | |  |  |  |  |  |  |
| 2.5.6 | The institution conducts benchmarking of its performance, and the performance of its academic and administrative units, using specific key performance indicators. | |  |  |  |  |  |  |
| 2.5.7 | The institution uses the results of measuring satisfaction rates and performance assessment for providing feedback and continuous development and improvement. | |  |  |  |  |  |  |
| 2.5.8 | The institution conducts research and developmental studies that are necessary to improve its performance and achieve its goals. | |  |  |  |  |  |  |
| 2.5.9 | The quality assurance system is subject to continuous assessment and improvement. | |  |  |  |  |  |  |
| **2.6** | **Integrity, Transparency, and Ethics** | | | | | | | |
| 2.6.1 | The institution applies policies and procedures to support public, institutional and professional values; continuously develops them; and monitors the commitment of its employees to these values. | |  |  |  |  |  |  |
| **2.6.2** | **The institution applies mechanisms that ensure fairness, equality and integrity in all its practices (e.g. recruitment, performance evaluation, promotion and professional development processes). \*** | |  |  |  |  |  |  |
| 2.6.3 | The institution implements a clear and published policy for disclosure and avoidance of conflict of interest for its academic, administrative and financial transactions. | |  |  |  |  |  |  |
| 2.6.4 | The institution provides the necessary information to the stakeholders in an informed and up-to-date manner; and is committed to the credibility, accuracy, and transparency in the information it disseminates. | |  |  |  |  |  |  |
| 2.6.5 | The institution has a system that ensures the adherence of its employees to intellectual property, publishing rights, and the values ​​of scientific integrity. | |  |  |  |  |  |  |
| 2.6.6 | There are mechanisms to report and deal with corruption and other irregularities. | |  |  |  |  |  |  |
| **2.6.7** | **The institution has policies and procedures that clearly define how to handle complaints, appeals, and disciplinary procedures, and it adheres to them. \*** | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 3. Teaching and Learning

The institution must have clear and effective policies and procedures to design, approve and assess academic programs and courses. The planning of the programs must contribute to the achievement of the institution’s mission and goals. The institution must define the graduate attributes and learning outcomes at the institution and program levels that are in line with its mission and the Saudi Arabia Qualification Framework (SAQF). The institution must have an effective system that ensures high standards of teaching and learning in all offered programs; and that the quality of teaching and learning is regularly monitored through appropriate mechanisms and periodically reviewed for further development.

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **3.1** | **Design and Development of Academic Programs** | | | | | | | |
| **3.1.1** | **The institution implements clear and announced policies and procedures for the design, approval or amendment of academic programs and courses, including the identification of related responsibilities and authorities at all levels. \*** | |  |  |  |  |  |  |
| 3.1.2 | The institution sets out guidelines for the design of its academic programs, including the achievement of its mission and goals, following the recent local and international trends, meeting the needs of the stakeholders (such as the labor market and society), and using appropriate benchmarking. | |  |  |  |  |  |  |
| **3.1.3** | **The institution ensures that its academic programs at all levels meet the standards and requirements of the Saudi Arabia Qualifications Framework (SAQF). \*** | |  |  |  |  |  |  |
| 3.1.4 | The institution applies a clear and approved strategy for teaching, learning, and assessment that defines its philosophy and ensures the accomplishment of its educational goals and learning outcomes of its programs. | |  |  |  |  |  |  |
| 3.1.5 | The institution implements clear and published regulations, policies and procedures governing all aspects of assessment (e.g. test specifications and grade distributions). | |  |  |  |  |  |  |
| **3.1.6** | **The institution applies effective mechanisms to verify that programs meet academic and professional standards and to ensure the proper sequencing and integration of program courses in achieving program learning outcomes. \*** | |  |  |  |  |  |  |
| 3.1.7 | The institution ensures unifying of curriculum plans, and program and course descriptions offered at more than one site (e.g. male and female sections, and different branches), and the adherence to them. | |  |  |  |  |  |  |
| 3.1.8 | The institution has appropriate standards and regulations that ensure the quality of field training activities in the academic programs; and makes sure the compliance of programs to them. | |  |  |  |  |  |  |
| 3.1.9 | The institution plans extracurricular activities that are aligned with the institution's goals, integrated with its academic programs, and support the personal and professional development of students. | |  |  |  |  |  |  |
| **3.2** | **Graduate Attributes and Learning Outcomes** | | | | | | | |
| **3.2.1** | **The institution defines its general graduate attributes that derive learning outcomes at the institutional level, which are consistent with its mission, educational goals, development requirements and labor market, and are approved and publicized. \*** | |  |  |  |  |  |  |
| 3.2.2 | The institution ensures that the graduate attributes are identified for each program, and that these attributes are in line with the institutional graduate attributes, the program mission, the discipline and professional standards, and the needs of the labor market. | |  |  |  |  |  |  |
| 3.2.3 | The institution ensures that academic programs have identified student learning outcomes that integrate graduate attributes, meet the expectations of stakeholders within and outside the institution, and are aligned with the requirements of the Saudi Arabia Qualifications Framework (SAQF). | |  |  |  |  |  |  |
| 3.2.4 | The institution ensures that its graduates achieve targeted attributes through variety of appropriate assessment mechanisms. | |  |  |  |  |  |  |
| **3.3** | **Academic Programs Quality Assurance and Enhancement** | | | | | | | |
| **3.3.1** | **The institution has clear policies and procedures for reviewing, assessing, and improving the academic programs and courses, and for the quality assurance of teaching and learning in all sites and in different modes of learning (e.g., blended learning and distance learning), including the identification of related responsibilities and authorities at all levels. \*** | |  |  |  |  |  |  |
| 3.3.2 | The institution applies periodic procedures to ensure the quality of the educational process, including the review of the annual reports of all programs by specialized committees at the level of the programs, colleges and institution; and takes appropriate actions for enhancement and development. | |  |  |  |  |  |  |
| **3.3.3** | **The institution applies systems and procedures to monitor and assess the extent to which graduate attributes and intended learning outcomes at all levels are achieved. \*** | |  |  |  |  |  |  |
| 3.3.4 | The institution conducts periodic comprehensive evaluation for the programs (e.g., once every three years), and prepares reports on the overall level of quality of the programs, with identification of points of strength and weakness, and significant levels of quality discrepancies among programs, departments, and units. | |  |  |  |  |  |  |
| 3.3.5 | The institution provides the programs and the teaching staff with the necessary data for assessment processes and preparation of reports (e.g., performance indicators data for each program or branch separately, the progress of students in the programs, their completion rates, student evaluations of courses and programs). | |  |  |  |  |  |  |
| 3.3.6 | The governing body of the institution discusses the data concerning the key performance indicators for all programs annually, and makes appropriate decisions for improvement. | |  |  |  |  |  |  |
| 3.3.7 | The institution implements effective procedures for the planning and management of academic support services that meet the needs of academic programs and students; and assesses and develops these services periodically. | |  |  |  |  |  |  |
| 3.3.8 | The institution provides the electronic services and environment that suite the programs and courses offered in distance and e-learning modes; and adheres to standards governing such modes of learning. | |  |  |  |  |  |  |
| 3.3.9 | The institution adopts mechanisms for the independent verification of the validity and objectivity of assessment of student achievement. | |  |  |  |  |  |  |
| **3.4** | **Educational Partnerships (if any)** | | | | | | | |
| 3.4.1 | The formal agreements of partnership programs with other institutions clearly define arrangements and responsibilities; are enforceable according to the Kingdom's rules and regulations; and include the fulfillment of the standards of the National Center for Academic Accreditation and Evaluation (NCAAA), and the standards and requirements of the Saudi Arabia Qualifications Framework (SAQF), and are fully complied with. | |  |  |  |  |  |  |
| 3.4.2 | The institution ensures that the programs or courses offered by the international educational institutions, including e-learning programs and distance education courses, are accredited, quality assured, and licensed by the Government at the country of origin. | |  |  |  |  |  |  |
| 3.4.3 | The institution - in case of adopting programs from other institutions- takes appropriate procedures that ensure that the components of the adopted academic program, assignments and tests are in conformity with the society values ​​and culture. | |  |  |  |  |  |  |
| 3.4.4 | The institution establishes regulations that ensure the good quality of all aspects of programs provided by partner institutions, including courses, educational materials, teaching, and student achievement standards, and provided services; and monitors the adherence to them. | |  |  |  |  |  |  |
| 3.4.5 | The institution assesses the effectiveness of partnerships on a regular basis and makes appropriate decisions accordingly. | |  |  |  |  |  |  |
| **3.5** | **Graduate Programs** | | | | | | | |
| **3.5.1** | **The institution applies mechanisms to verify that learning outcomes and study plans are in line with the level and nature of the qualifications in graduate studies, are consistent with academic and professional standards, and adhere to the requirements of Saudi Arabia Qualifications Framework (SAQF). \*** | |  |  |  |  |  |  |
| 3.5.2 | The institution ensures the availability of sufficient faculty members with the appropriate qualifications and experience for graduate programs. | |  |  |  |  |  |  |
| 3.5.3 | The institution monitors the commitment of graduate programs to the approved admission criteria and requirements. | |  |  |  |  |  |  |
| 3.5.4 | The institution determines the roles and responsibilities of faculty members, graduate students and their supervisors, making sure that all parties are adequately familiarized with them, and ensures compliance with them. | |  |  |  |  |  |  |
| 3.5.5 | The institution implements a system and mechanisms to follow-up the progress of graduate students, their progress rates and provide them with the necessary support. | |  |  |  |  |  |  |
| 3.5.6 | The institution applies a system and mechanisms to assess the efficiency of the graduate programs and the quality of their outputs with the participation of the stakeholders; and the results are used for enhancement and development. | |  |  |  |  |  |  |
| **3.6** | **Learning Resources** | | | | | | | |
| **3.6.1** | **The institution implements effective mechanisms that ensure providing adequate quantitative and qualitative learning resources and related services based on the needs of programs and all stakeholders, and avails them at sufficient and appropriate time. \*** | |  |  |  |  |  |  |
| 3.6.2 | The institution implements mechanisms and procedures for the efficient management of the library and learning resources, and provides it with adequate and appropriate numbers of qualified staff. | |  |  |  |  |  |  |
| 3.6.3 | The institution provides the appropriate support and training to enable students and teaching staff to use effectively the learning resources, library and all its services. | |  |  |  |  |  |  |
| 3.6.4 | The library has adequate facilities for individual, small groups and people with special needs use. | |  |  |  |  |  |  |
| 3.6.5 | The institution implements mechanisms to cooperate with local and international institutions and centers to allow and exchange resources and references that ensure meeting the needs of stakeholders. | |  |  |  |  |  |  |
| 3.6.6 | The institution has databases and appropriate electronic systems that allow stakeholders to access the information sources, research materials, and scientific journals from within or outside the institution. | |  |  |  |  |  |  |
| 3.6.7 | The institution implements effective mechanisms for assessing library services and facilities, and learning resources; and periodically develops and updates them based on the feedback from the stakeholders and programs' needs. | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 

# 4. Students

Policies and regulations governing students’ admission must be clear, fair and published widely. The institution must have an effective electronic system to manage and secure students' records. The rights and duties of students must be specified, published, and adhered to. The institution must establish rules of good conduct, and procedures for disciplinary, grievance and appeals that are transparent and fair. The institution must provide effective mechanisms for guidance and counselling, and provide all the services needed by students equally, taking in consideration people with special needs. The institution must have an effective policy to benefit from the opinions of graduates, in addition to adopting programs for taking care of international students, if any, and their needs.

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **4.1** | **Student Admissions** | | | | | | | |
| **4.1.1** | **The institution is committed to the implementation of policies and standards governing the students' admission and transfer, and credit equivalency; and distributes students to the academic programs according to specific, fair, and published mechanisms. \*** | |  |  |  |  |  |  |
| 4.1.2 | The institution adopts procedures that ensure the consideration of the recommendations of colleges and academic programs regarding the number of students planned for admission to the programs and commensurate with the available resources. | |  |  |  |  |  |  |
| 4.1.3 | The institution adopts an effective electronic system to manage the admission and registration processes, data retrieval and request of statistics, to monitor students' progress during their studies and to provide electronic services to students with the appropriate ease and speed. | |  |  |  |  |  |  |
| 4.1.4 | The institution makes available all information related to the types of programs and courses it provides, and their mode of instruction, financial costs, services, etc.; and makes them accessible to everyone before the application for admission. | |  |  |  |  |  |  |
| **4.2** | **Student Records** | | | | | | | |
| **4.2.1** | **The institution applies clear policies and rules for the management of students' records, which define their content, mechanisms of protection, preservation, confidentiality, and accessibility, with the provision of backup copies. \*** | |  |  |  |  |  |  |
| 4.2.2 | The student record system provides the statistical data to the related parties at the institutional and program levels that are required for planning, reporting and quality assurance processes (e.g. ratios of students who are transferred, withdrawn, under probation, droppers, and deferred). | |  |  |  |  |  |  |
| 4.2.3 | The institution applies specific and appropriate procedures for updating students’ records, delivering student results and timely revealing them. | |  |  |  |  |  |  |
| 4.2.4 | The institution establishes an effective mechanism for verifying that each student meets graduation requirements. | |  |  |  |  |  |  |
| **4.3** | **Student Rights and Responsibilities** | | | | | | | |
| **4.3.1** | **The institution identifies students' rights and responsibilities; and orients students to them and explores students' views on their implementation and effectiveness. \*** | |  |  |  |  |  |  |
| 4.3.2 | The institution establishes regulations and disciplinary penalties related to student offenses, and procedures for their grievances; and monitors their implementation. | |  |  |  |  |  |  |
| 4.3.3 | The institution adopts appropriate representation of students in the relevant councils and committees. | |  |  |  |  |  |  |
| 4.3.4 | The institution has effective mechanisms to preserve the rights of people with special needs. | |  |  |  |  |  |  |
| **4.4** | **Guidance and Counselling** | | | | | | | |
| **4.4.1** | **The institution adopts an effective and comprehensive system to provide guidance and counselling services, in accordance with specific plans and programs, and through qualified, adequate, and appropriate staff; and establishes appropriate mechanisms for monitoring of their implementation. \*** | |  |  |  |  |  |  |
| 4.4.2 | The institution provides an orientation and guidance program for the new students that ensures their full understanding of the type of available services and facilities, and their rights and duties. | |  |  |  |  |  |  |
| 4.4.3 | The institution provides effective services and programs for academic guidance and career counselling to students that suit their needs. | |  |  |  |  |  |  |
| 4.4.4 | The institution adopts appropriate regulation to identify gifted, talented, creative and underachiever students; and develops programs for caring to each category, including motivation and support. | |  |  |  |  |  |  |
| 4.4.5 | The institution provides psychological, behavioral and social counselling services to students in accordance with procedures that are simple, flexible, and confidential, through specialized units. | |  |  |  |  |  |  |
| 4.4.6 | The institution adopts periodic means to measure students’ satisfaction with guidance and counselling services, which contribute to their continuous improvement. | |  |  |  |  |  |  |
| **4.5** | **International Students** | | | | | | | |
| 4.5.1 | The institution applies effective mechanisms to attract distinguished international students; and adopts specific criteria for their selection and acceptance. | |  |  |  |  |  |  |
| 4.5.2 | The institution provides programs that support adaptation of international students with the institution's community; provides them with social and health care as well as appropriate educational environment; and tracks their academic progress. | |  |  |  |  |  |  |
| 4.5.3 | The institution assesses systems, programs and services related to international students (such as scholarship programs, etc.) periodically, ensuring their continuous improvement. | |  |  |  |  |  |  |
| **4.6** | **Students' Services and Activities** | | | | | | | |
| **4.6.1** | **The institution is committed to providing the necessary services to all students according to their needs and numbers, including appropriate emergency health care services. \*** | |  |  |  |  |  |  |
| 4.6.2 | The institution monitors the quality of services provided to students through effective mechanisms, including measuring their satisfaction with the quality and adequacy of services, and that contributes in the continuous enhancement processes. | |  |  |  |  |  |  |
| 4.6.3 | The institution develops plans for student activities that are consistent with its mission and goals, involving students in their preparation; defines mechanisms for implementing these plans; and allocates appropriate resources for them. | |  |  |  |  |  |  |
| 4.6.4 | The institution takes the necessary mechanisms to organize and motivate students to participate in the various student activities; monitors the extent of their participation and their satisfaction rates; and improves their quality. | |  |  |  |  |  |  |
| 4.6.5 | The institution encourages students' creativity and innovations, and allows for conducting entrepreneurial activities. | |  |  |  |  |  |  |
| **4.7** | **Alumni** | | | | | | | |
| 4.7.1 | The institution provides the appropriate mechanisms to follow up its alumni and communicate effectively with them, and has an updated database about them. | |  |  |  |  |  |  |
| 1.7.2 | The institution adopts various mechanisms and means to explore the opinions and experiences of the alumni and to measure the extent of appropriateness of the knowledge, skills and competencies they have acquired to meet the requirements of the employment organizations and their professional performance. | |  |  |  |  |  |  |
| 4.7.3 | The institution supports its relationship with the alumni, including international students, through engaging them in its public and academic events and developmental plans, and providing them with appropriate services; and invests their professional and occupational expertise in enhancing institutional and academic performance. | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 5. Faculty and Staff

The institution must have sufficient number of teaching staff and employee with the appropriate qualifications and expertise to carry out their responsibilities properly, and must provide them with the necessary support and appropriate professional development programs. The institution must assess their performance periodically and use the results for improvement.

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **5.1** | **Employment and Retention** | | | | | | | |
| 5.1.1 | The institution plans to recruit the appropriate qualified and experienced teaching staff and employee based on its needs; and applies fair and published policies and procedures for recruitment, nomination, employment, and termination of services. | |  |  |  |  |  |  |
| 5.1.2 | The institution implements effective mechanisms to verify the validity and credibility of the candidates’ qualifications and experience as well as the reputation of the institutions from which they have obtained their qualifications. | |  |  |  |  |  |  |
| **5.1.3** | **The institution has a sufficient number of teaching and administrative staff, and technicians with appropriate qualifications to carry out its various tasks. \*** | |  |  |  |  |  |  |
| 5.1.4 | The institution applies appropriate standards and procedures when using the services of adjunct and part-time teaching staff and take into account the balance in their proportion to the appointed full-time faculty. | |  |  |  |  |  |  |
| 5.1.5 | The institution uses appropriate mechanisms to retain competent teaching staff and employee. | |  |  |  |  |  |  |
| 5.1.6 | The institution provides appropriate care and services for teaching staff and employee, assesses these service, and acts to improve them. | |  |  |  |  |  |  |
| 5.1.7 | The institution applies approved standards to promote faculty and staff transparently and fairly. | |  |  |  |  |  |  |
| **5.2** | **Professional Development and Evaluation** | | | | | | | |
| 5.2.1 | The institution provides effective programs to orient and train new teaching staff and employee. | |  |  |  |  |  |  |
| 5.2.2 | The institution provides teaching staff with financial and professional support in the fields of education and research, especially to junior teaching staff with limited experience (e.g., providing personal guidance, involvement in research teams, helping them develop their research projects). | |  |  |  |  |  |  |
| 5.2.3 | The institution provides teaching staff and employee with fair and appropriate opportunities for professional and personal development. | |  |  |  |  |  |  |
| 5.2.4 | The institution provides effective mechanisms to motivate teaching staff and employee to develop their performance. | |  |  |  |  |  |  |
| 5.2.5 | The institution applies mechanisms to ensure the continuous participation of faculty in the scientific, research, and professional activities. | |  |  |  |  |  |  |
| **5.2.6** | **The institution implements an effective, published system for evaluation of teaching staff and employee performance; provides them with feedback; and uses it to improve their performance. \*** | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 6. Institutional Resources

The institution must have the adequate financial resources, and the physical and technical infrastructure to support its activities and operations at all its main campuses and branches. These resources must be managed in an efficient manner and comply with the rules and regulations. The institution must verify, through periodic evaluation processes, that its resources are adequate to ensure the quality of its educational programs and support continuous improvement; and that it has an effective system for safety and risk management.

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **6.1** | **Financial Resources and Budget** | | | | | | | |
| 6.1.1 | Financial planning and budget processes are linked to the institution’s goals and strategic priorities, and are prepared with the participation of relevant stakeholders. | |  |  |  |  |  |  |
| 6.1.2 | The institution acts to diversify its sources of income according to appropriate and effective strategies. | |  |  |  |  |  |  |
| 6.1.3 | The institution includes cost estimates in the work plans of new projects or programs, and determines the implications of their approval on existing services and activities. | |  |  |  |  |  |  |
| **6.1.4** | **The institution has sufficient solvency and financial stability to support its programs and activities. \*** | |  |  |  |  |  |  |
| 6.1.5 | The institution implements mechanisms that ensure the financial needs of all its academic and administrative units are responded to smoothly and expeditiously. | |  |  |  |  |  |  |
| 6.1.6 | The institution has a system to monitor the expenditure, to follow up adherence to the budget, and to prepare the relevant annual reports. | |  |  |  |  |  |  |
| 6.1.7 | Internal and external financial audits are carried out independently; and the institution is committed to act on the provided recommendations. | |  |  |  |  |  |  |
| 6.1.8 | Financial planning processes include procedures for assessment of and dealing with the financial risks. | |  |  |  |  |  |  |
| 6.1.9 | The institution applies effective mechanisms to raise expenditure efficiency. | |  |  |  |  |  |  |
| **6.2** | **Information Technology** | | | | | | | |
| **6.2.1** | **The institution provides adequate technical infrastructure and equipment that suit its academic, educational, and administrative needs.\*** | |  |  |  |  |  |  |
| 6.2.2 | The institution updates and maintains periodically its technical equipment in all its units according to an appropriate mechanism. | |  |  |  |  |  |  |
| 6.2.3 | The institution applies mechanisms for regulating the effective use of technical equipment. | |  |  |  |  |  |  |
| 6.2.4 | The institution applies appropriate systems for institutional and personal information security. | |  |  |  |  |  |  |
| 6.2.5 | The institution provides the necessary training and technical support to faculty, staff and students who use communication and information technologies. | |  |  |  |  |  |  |
| 6.2.6 | The institution establishes codes of conduct to regulate the ethical use of its technical resources; and verifies compliance with them. | |  |  |  |  |  |  |
| 6.2.7 | The institution assesses the efficiency of its technical equipment on a regular basis and the results areused for improvement and development. | |  |  |  |  |  |  |
| 6.2.8 | The institution uses information technology effectively in management and communication systems. | |  |  |  |  |  |  |
| 6.2.9 | The institution uses information technology systems that are integrated and reliable (e.g., having limited errors and failures) and have adequate capacity and performance speed. | |  |  |  |  |  |  |
| **6.3** | **Facilities and Equipment** | | | | | | | |
| 6.3.1 | The institution involves relevant stakeholders in determining its current and future needs of facilities and equipment; develops comprehensive plans to provide them and to ensure their sustainability and periodic maintenance; and links that with its strategic and financial plans. | |  |  |  |  |  |  |
| 6.3.2 | The institution has a mechanism to regulate and rationalize the use of facilities and equipment; and it provides the needed training on their use. | |  |  |  |  |  |  |
| 6.3.3 | Adequate facilities and equipment are available for people with special needs. | |  |  |  |  |  |  |
| **6.3.4** | **The institution provides the necessary facilities for practicing of cultural, sports and other extracurricular activities, as well as the necessary facilities for praying, food services, studying, and resting. \*** | |  |  |  |  |  |  |
| 6.3.5 | The institution ensures that all health, hygiene and environmental requirements in facilities and equipment are met. | |  |  |  |  |  |  |
| 6.3.6 | The institution assesses the quality of the facilities and equipment regularly; and the results are used for improvement and development. | |  |  |  |  |  |  |
| **6.4** | **Safety and Risk Management** | | | | | | | |
| 6.4.1 | The institution has a comprehensive risk management plan, which includes the level of risk according to its priorities. | |  |  |  |  |  |  |
| 6.4.2 | The institution provides the appropriate mechanisms and resources to activate the risk management plan. | |  |  |  |  |  |  |
| 6.4.3 | The institution implements safe mechanisms for the disposal of hazardous waste. | |  |  |  |  |  |  |
| 6.4.4 | The institution assesses risk management processes and procedures; and the results are used for improvement and development. | |  |  |  |  |  |  |
| 6.4.5 | The institution uses efficient security systems to protect people, facilities, equipment and personal property, with a clear definition of responsibilities. | |  |  |  |  |  |  |
| **6.4.6** | **The institution implements systems to ensure generic and professional safety for the establishments and individuals according to approved standards; and provides training on these systems. \*** | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 7. Research and Innovation

The institution must have specific plans for research and innovation activities that reflect its strategic directions and conform to its scope and mission, and provide the necessary resources to these activities. It must provide appropriate support for faculty, students and staff to carry out their role in these activities. The institution must monitor and document its research and innovation activities, prepare periodic reports and take the necessary actions for improvement and development

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Non-Compliance** |
| **1** | **2** | **3** | **4** | **1** |
| **7.1** | **Planning and Management of Research** | | | | | | | |
| **7.1.1** | **The institution establishes a specific and published plan for research activities, that is consistent with its mission and goals, and contributes to the achievement of the national directions and developmental priorities. \*** | |  |  |  |  |  |  |
| 7.1.2 | The institution has mechanisms for determining research priorities, and follows up its application. | |  |  |  |  |  |  |
| 7.1.3 | The institution implements policies and procedures that ensure the provision of comparable opportunities for research in all its units and branches, including male and female student sections. | |  |  |  |  |  |  |
| 7.1.4 | The institution has in place implemented policies and procedures to protect intellectual property rights, and to ensure commitment of researchers to the disciplines and ethics of research. | |  |  |  |  |  |  |
| 7.1.5 | The institution applies regulations and procedures to regulate the work of research centers and chairs (if any) to ensure their efficiency and the achievement of their objectives; and evaluates their effectiveness periodically. | |  |  |  |  |  |  |
| 7.1.6 | The institution applies specific policies and procedures for marketing and commercial investment of innovations and research production of its employees, in a manner that guarantees the rights of researchers. | |  |  |  |  |  |  |
| 7.1.7 | The institution has an up-to-date and publically available databases for the research production of its employees. | |  |  |  |  |  |  |
| **7.1.8** | **The institution applies appropriate mechanisms to measure its research production according to specific performance indicators; prepares annual reports on them; and the results are used for improvement and development. \*** | |  |  |  |  |  |  |
| **7.2** | **Support of Research and Innovation** | | | | | | | |
| 7.2.1 | The institution applies various mechanisms to develop research skills of teaching staff and students, and motivate them. | |  |  |  |  |  |  |
| 7.2.2 | The institution allocates sufficient budget to enable the achievement of its research plan. | |  |  |  |  |  |  |
| 7.2.3 | The institution provides the appropriate environment for research, including information resources, databases, facilities, equipment, and software. | |  |  |  |  |  |  |
| 7.2.4 | The institution provides supportive procedures for research activities and international publication (e.g., translation and editing units, and support centers). | |  |  |  |  |  |  |
| 7.2.5 | The institution provides a supportive environment for innovation and creativity. | |  |  |  |  |  |  |
| 7.2.6 | The institution applies mechanisms to support participation and cooperation in the field of research and innovation with government and private industrial and professional sectors, universities, and research institutes and centers at the local and international levels. | |  |  |  |  |  |  |
| 7.2.7 | The institution has effective safety systems that ensure the safety of researchers and their research activities as well as facilities and environment. | |  |  |  |  |  |  |
| 7.2.8 | The institution has mechanisms to promote outstanding research achievements and initiatives. | |  |  |  |  |  |  |
| 7.2.9 | The institution encourages students to participate in appropriate research projects and activities; and recognizes their efforts. | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**

# 8. Community Partnership

The institution must have specific plans and mechanisms for community partnership that reflect its strategic directions, conform to its nature and mission, and support the effective participation of its teaching staff, students and employee. The institution must establish effective cooperative relations with the local and international community, professional bodies, and the various sectors of labor market. The institution must document its activities, follow up the effectiveness of community partnership, and improve and develop it

| **Levels of Evaluation**  **Elements of Evaluation** | | **NA** | | **Not Satisfactory** | | **Satisfactory** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Non-Compliance** | **Partial Compliance** | **Compliance** | **Perfect Compliance** | **Distinctive Compliance** |
| **1** | **2** | **3** | **4** | **5** |
| **8.1** | **Planning and Management of Community Partnership** | | | | | | | |
| **8.1.1** | **The institution establishes a specific plan for community partnership that is consistent with its mission, goals, and the needs of the community. \*** | |  |  |  |  |  |  |
| 8.1.2 | The institution ensures the active participation of its employees and students in implementing its community partnership plan through clear and variety of tasks and activities. | |  |  |  |  |  |  |
| 8.1.3 | The institution implements clear policies and procedures for the provision of consultancy and services to other sectors; and specifies the related rights and benefits. | |  |  |  |  |  |  |
| **8.1.4** | **The institution implements specific mechanisms for documenting, monitoring, and assessing the effectiveness of its activities in the field of ​​community partnership according to specific performance indicators; and prepares periodic reports that contribute to the improvement of the performance. \*** | |  |  |  |  |  |  |
| **8.2** | **Activating Community Partnership** | | | | | | | |
| 8.2.1 | The institution provides the opportunity to employers and professional bodies to participate actively in the planning and development of institutional and program performance and to support their activities. | |  |  |  |  |  |  |
| 8.2.2 | The institution encourages teaching staff, employee and students to cooperate with the community institutions, various scientific and professional bodies, and to be involved in voluntary work at the local and international levels. | |  |  |  |  |  |  |
| 8.2.3 | The institution provides professional development and continuous education programs that contribute to meeting the community needs. | |  |  |  |  |  |  |
| 8.2.4 | The institution offers variety of participatory programs and initiatives with the community that contribute to the development of entrepreneurship and pilot projects. | |  |  |  |  |  |  |
| 8.2.5 | The institution offers cultural, awareness, and service initiatives and activities that meet the needs of the local community. | |  |  |  |  |  |  |
| 8.2.6 | The institution allows the community to benefit from its various facilities and resources (e.g., library, sport facilities, classrooms, and laboratories). | |  |  |  |  |  |  |
| **Overall Evaluation of the Standard** | | | | | | | | |
| **Total Sum of Evaluation of Criteria**  (Total Sum of Points) | | |  | | | | | |
| **Number of Applicable Criteria** | | |  | | | | | |
| **Average Evaluation of the Standard** | | |  | | | | | |
| **Overall Quality Rating of the Standard** | | |  | | | | | |

\* Essential Criteria

**Strengths:**

**1.**

**2.**

**Areas for Improvement:**

**1.**

**2.**

**Priorities for Improvement:**

**1.**

**2.**

**Independent Opinion:**