JAZAN UNIVERSITY
COLLEGE OF NURSING
VICE DEANSHIP FOR QUALITY & DEVELOPMENT

QUALITY ASSURANCE MANUAL

1440-2019

Jazan University

College Of Nursing

Vice Deanship for Development & Quality

QUALITY ASSURANCE MANUAL

Dean of Nursing College

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1440-2019

INTRODUCTION

AQU Establishment:

The university has created a designated Vice Deanship for quality and development in each college. In the College of Nursing, this has been created in June 2019. The Vice Dean is responsible for all quality assurance and management activities in the College. Before the establishment of the quality agency in the college was managed quality through the Quality Assurance Unit.

Importance Of Quality Manual:

These guidelines will assist the quality assurance member to develop a quality assurance system which makes clear:

1- The principles and values underpinning the provider's education and training programs and related services. These will be set out in the Mission and Policies which should inform:

- Management and staff as to the general approaches to follow in their work.
- Learners and other stakeholders as to what they can expect of the provider.

2- The procedures designed to implement the policies.

3- An internal monitoring system which will regularly measure the effectiveness of the procedures

4- A self-evaluation system which will examine and report on the quality of programs and services. This evaluation will include the views of learners and of an external evaluator who can make comparisons with other similar provision.

5- A system of responding to the findings of monitoring and evaluation which will address areas for improvement and build on areas of strength.

Principles:

Quality:

Quality in education and training means a commitment to identifying and meeting the needs and expectations of learners.

Improvement:

Improvement, arising from regular monitoring of the service offered, should be at the heart of any quality assurance process.

Transparency:

Transparency will ensure that those involved on all sides of the learning process are aware of their roles and what they are entitled to expect. Making explicit that which had previously been assumed, and possibly misunderstood, is one of the key functions of quality assurance.

Consistency:

Consistency and fairness are key constituents of any process from the perspective of the consumer. They have a particular relevance for learners seeking awards.

Equality:

Equality, integrated in quality assurance procedures, will facilitate greater access to a diverse range of learners.

DEFINITIONS IN QUALITY

Quality:
It is about satisfying the *requirements* of the customer who bought the product or service and it is about being fit for the *purpose* for which the product or service was bought.

Academic quality:
Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate and effective teaching, support, assessment and learning opportunities are provided for them.

Academic standards:
Academic standards are a way of describing the level of achievement that a student has to reach to gain an academic award (for example, a degree). It should be at a similar level across the Kingdom.

Quality assurance (QA):
Quality assurance refers to a range of review procedures designed to safeguard academic standards and promote learning opportunities for students of acceptable quality.

Quality system:
A quality system, also known as a Quality Assurance (QA) system or a Quality Management System (QMS), is a management system that helps to ensure the consistency of quality of the goods or services (education) that are supplied. Compliance with Quality System Standards is demonstrated by completion of a successful quality system audit conducted by a certification organization acceptable to the Government which is in our case: The National Center for Academic Accreditation and Assessment (NCAAA)

Saudi Arabian Qualification Framework:
Setting standards for the registration and qualification of qualifications, the framework aims to:

1- Provide a coherent approach to the construction, design and development of all qualifications offered in the Kingdom with the aim of increasing confidence in national qualifications, enhancing transparency and flexibility and disseminating best practices in designing and building qualifications.

2- Criteria for the registration and placement of qualifications indicate that the entity designing the qualifications has regulations and procedures that ensure the potential for building and developing qualifications.

3- Qualifications that meet the criteria are registered and maintained in the National Observatory database, which includes all qualifications in the Saudi Qualifications Framework.

ESTABLISHMENT OF NURSING COLLEGE

In alignment with the comprehensive educational development that Saudi Arabia is experiencing and the need for the Ministry of Health and other health sectors to prepare specialized national competencies, the health services sector in the Kingdom has witnessed great strides in the quality of these services provided to citizens.

The Government of the Custodian of the Two Holy Mosques has devoted all its attention to the Saudi person and strives to improve his knowledge, intellect and work to enable him to keep abreast of the tremendous development witnessed by the Kingdom in all fields. From this point of view, the supreme approval was issued by the Royal Decree No. 5088 / B and dated 7/8/1432 AH restructuring the Health College for Girls of Jazan University to the Faculty of Nursing and Allied Health Sciences to include 3 sections namely Nursing, Respiratory Care, Ambulance and Emergency. Then came the approval of the Ministry of Education No. 71524 dated 27/8/1438h to amend the name of the Faculty of Nursing.

The College aspires to provide qualified health personnel in health care and hopes to share their role in the Saudi universities with an important role in providing manpower in the health sector with a high degree of professional competence for graduates and providing them with the modern knowledge and skills necessary to help them perform their duties properly. The college includes specialization nursing and midwifery.

VISION

In the light of the Jazan University vision, the College of Nursing seeks to be a scientific beacon with local leadership and regional excellence in the fields of nursing education, scientific research and community service.

MISSION

Preparing qualified academic and professional graduates to provide specialized nursing care focused on the patient in health institutions through the provision of educational program and scientific research with a commitment to the values and customs and community norms.

VALUES

1. Justice.
2. Excellence.
3. Ethics.
4. Empowerment.
5. Affiliation.

NURSING PROGRAM

Nursing program was established as an academic department in the college of Nursing and Allied Health Sciences in 1433 h. According to the Ministry of Education's approval in 1438, the name of the college was amended from the college of Nursing and Allied Health Sciences to the college of Nursing. The vision and mission of the Nursing Department are based on the vision and mission of the college of Nursing 2020. The bachelor's degree in Nursing is awarded in the sense that the student has a bachelor's degree in general nursing. The nursing program consists of 4 branches in El- Dayer, Fursan, Al-Darb and Sabya.

VISION

In the light of the Nursing college vision, the Nursing program seeks to be a scientific beacon with local leadership and regional excellence in the fields of nursing education, scientific research and community service.

MISSION

Is to achieve excellence in nursing education through the development of specialized nurses capable of providing quality nursing care through clinical practice and participation in scientific research to meet the health care requirements of society within the framework of international standards.

MAIN STRATEGIC OBJECTIVES OF THE PROGRAM

No. of Strategic Goal	STRATEGIC GOALS	No. of Action steps	ACTION STEPS
1.	Demand increased preparation from Incoming Students in medical specialization, existing students and Increased Performance from.	1-	Enhance the students' performance.
		2-	Improve college readiness for incoming students.
		3-	Preparing the expected incoming students.
2.	Require the use of world- class methods and technologies in teaching and learning.	1-	Improve the performance of faculty members.
		2-	Improve the learning environment and resources.
3.	Encourage International Studies, International Partnerships, and International Research Agendas.	1-	Expand international online and study abroad programs.
		2-	Encourage involvement of Nursing staff in international research activities.
4.	Develop a comprehensive system to evaluate and reward faculty.	1-	Enhancing the recruitment process.
		2-	Adopt the best practices for faculty evaluation.

VICE DEANSHIP QUALITY& DEVELOPMENT (VDQD)

VISION
Achieving the highest standards of excellence in applying the best quality practices.

MISSION
Create a culture of quality and excellence in The College of Nursing by monitoring and improving all activities related to Nursing Education, Research, Health Care and community services.

GENERAL OBJECTIVES
1. Monitor and support the implementation of the Strategic Plan for The College of Nursing and operational plan for nursing program.
2. Promote the culture of quality in The College of Nursing among staff, employees, administrative and students.
3. Monitor and improve the quality of governance and administration of The College of Nursing.
4. Monitor and improve the quality of teaching and learning and all related matters in The College of Nursing at Undergraduate levels.
5. Monitor and improve the quality of scientific research in The College of Nursing and assuring that it is conducted in accordance to the International Ethical Guidelines.
6. Lead, support, and follow the accreditation of The College of Nursing in a spirit of using accreditation as a quality improvement tool.
7. Suggest, support, organize, and evaluate all new quality improvement initiatives in The College of Nursing.

WHAT IS THE ROLE OF THE DEANSHIP FOR QUALITY & DEVELOPMENT (VDQD)?

Our main role is to ensure that high standards within teaching and learning processes for the undergraduate program are recognized and awarded, and problems can be identified and addressed.

POGRAM QUALITY ASSURANCE SYSTEM

1. Planning, Development and Quality Management.

2. Communicating with all academic and administrative entities (senior leaders, heads of department and units, staff, faculty, students, etc.) inside the SRCs (via email, formal letters, etc.) for any matter related to planning, development or quality assurance requirements.

3. Periodic review of strategy and suggestion of modification and required changes as well as providing assistance to departments in preparation of their strategic and operational plans and ensuring alignments with strategy.

4. Institutionalizing continuous improvement mechanisms in all departments through advising on institution-wide strategic priorities and strategic plans for quality improvement, and assisting internal academic and administrative units in the development of quality improvement strategies within their own areas.

5. Review critical incidents, and perform root cause analysis as required in collaboration with the concerned departments and facilitating adaptation of needed remedial actions.

6. Coordinating and leading the preparation of periodic self-studies for consideration within the institution and for use in external reviews.

7. Implementing adequate processes to ensure that the design of students' intended learning outcomes on course and program levels meet the SAQF requirements, and that students' achievements of intended learning outcomes are at least equal to those achieved elsewhere by comparable institutions and programs; and reporting this to the Central Quality Assurance Committee.

8. Disseminating the culture of Quality Assurance among administrative and academic leaders, faculty, staff and students within the institution via training, advice and support as required in addition to other promotional activities (e.g. posters, fairs, lectures, conferences, seminars, etc.).

9. Ensuring establishment, implementation and compliance of policies and procedures with quality standards (e.g. EEC -formerly NCAAA- standards) and benchmarks through quality audits. This also involves establishing and monitoring self-assessment processes and reporting requirements.
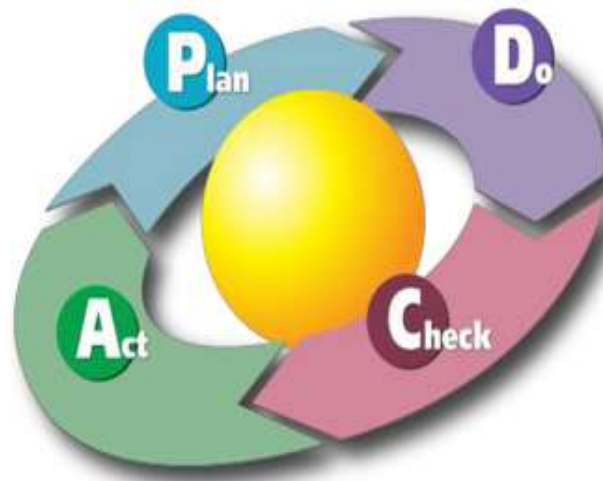
10. Conducting quality evaluations and surveys, providing analysis and improvement implications, and implementing follow-up mechanisms for maximum use of assessment and evaluation processes in order to develop detailed, periodic reports and executive plans for improvement.

11. Developing a procedures manual describing the institution's structure and processes for quality assurance; specifying criteria for selection and formats for indicators, benchmarks, and objectives; preparing standard forms for matters such as student and graduate surveys; and advising on operational procedures for the planning and implementation of quality processes.

12. Developing Criteria for assessing the quality of inputs, processes and outcomes, (with a particular focus on outcomes) and maintaining systematic collections of reports on performance including data on indicators and benchmarks that will be required for analysis and reporting on trends in performance and changes in the environment within which the institution is operating.

13. Maintaining statistical data of the institutional and programmatic KPIs (including mark distribution, progress rates, completion rates, etc.) in accessible databases, reviewing the KPIs regularly and including them in periodic reports.

14. Making sure that self-evaluation processes of quality of performance depend on different types of relevant evidence, including- but not limited to- feedback from stakeholders (e.g. students, staff, faculty, graduates, employers, government bodies); and reporting this to the Central Quality Assurance Committee.

Verifying the interpretations of evidence, analysis, conclusions and plans for improvement through consultation with well informed, independent reviewer/ and reporting this to the Central Quality Assurance Committee

HOW DO THE DQD WORK? THE QUALITY CYCLE IS:

- Objectives
- Questions & Predictions (Why)
- Plan to carry out the cycle (who, what, where, when)

- Carry out the plan
- Document problems
- Begin analysis of data

- Complete the data analysis
- Compare data to predictions
- Summarize what was learned

- What changes are to be made?
- Begin next cycle

★ *Plan:*   Plan what you want to change and make measurements (using the dimensions of quality as a guide) to confirm the problem. Diagnose what can be improved and decide on the best way to make the change.

★ *Do:*   Implement the change.

★ *Check:*   Using the indicators in the "Plan" step of the cycle, measure the impact of the change. Look for positive, negative and unexpected impacts, because changes in complex systems can have negative side effects and unintended consequences.

★ *Act:*   Act on the results of the study. The net result should be more modifications and changes. Depending on the results, you then re-enter the "Plan" step again.

WHAT THE VDQD DO?

1- **Overseeing the overall program planning, delivery and evaluation by following up with:**

❖ The preparation of academic course specifications, learning objectives and plans.
❖ All course and program reports and implementing improvement steps depending on results.
❖ The Design and conduct of academic quality educational programs and activities.
❖ The assessment and examination methods and results.

2- **Dealing with the administrative processes including:**

★ Preparing and updating of job descriptions of main academic positions and "Terms of Reference" of all college committees

3- **Creating policies and procedures related to academic functions of the College and monitoring compliance with policies and procedure.**

4- **Monitoring academic staff performance, this is implemented by:**

◆ Preparing the annual academic activities self-report and producing detailed comparative reports between Departments/Units and staff for academic loads and performance. This self-reported form includes all teaching, research, community services, continuance medical education, and clinical work. The report is sent to each faculty member in the beginning of each year. His/her performance is compared to the average of the department and the college. The chairman of the department discusses each faculty report with the faculty member in details. Comments are documented and a plan is set and documented for the upcoming year.

◆ Preparing, analyzing and reporting students satisfaction about the staff performance

4. **Ensuring the effective implementation of College systems for the comparability of the standards of programs of study - with reference to standards across and within disciplines.**

5. **Preparing forms and surveys for data entities.**

6. **Advising on any other matters which may from time to time be determined by the Academic Board.**

All quality planning, reports and surveys were discussed and approved by the College council. These evaluations and reports provide an overview of performance for the program as a whole to guide planning for improvements. The VDQD establishes a plan for evaluation for each academic year to ensure regular monitoring of courses and continuous improvement of both the program and courses. VDQD sends the survey reports to the corresponding department, in which the report is discussed at various levels including the department council. Based on these discussions a quality improvement plan is set for the course.

Program Review Process
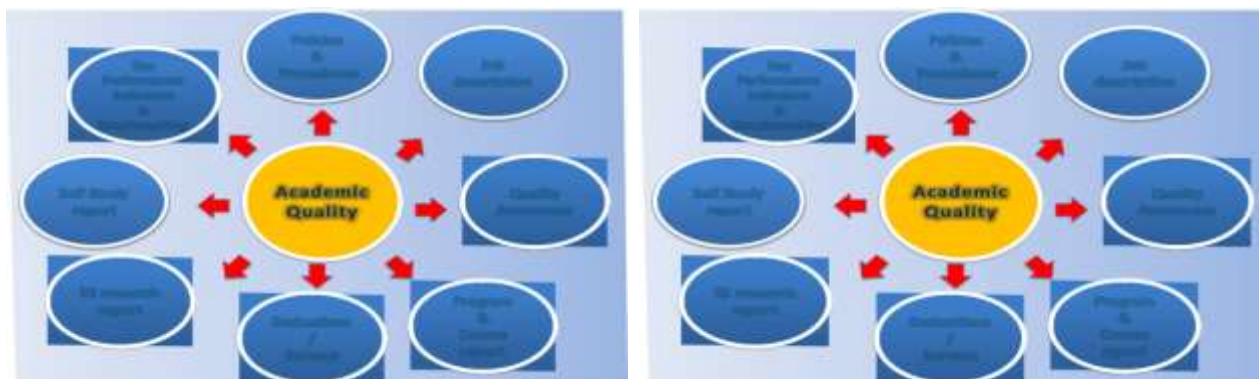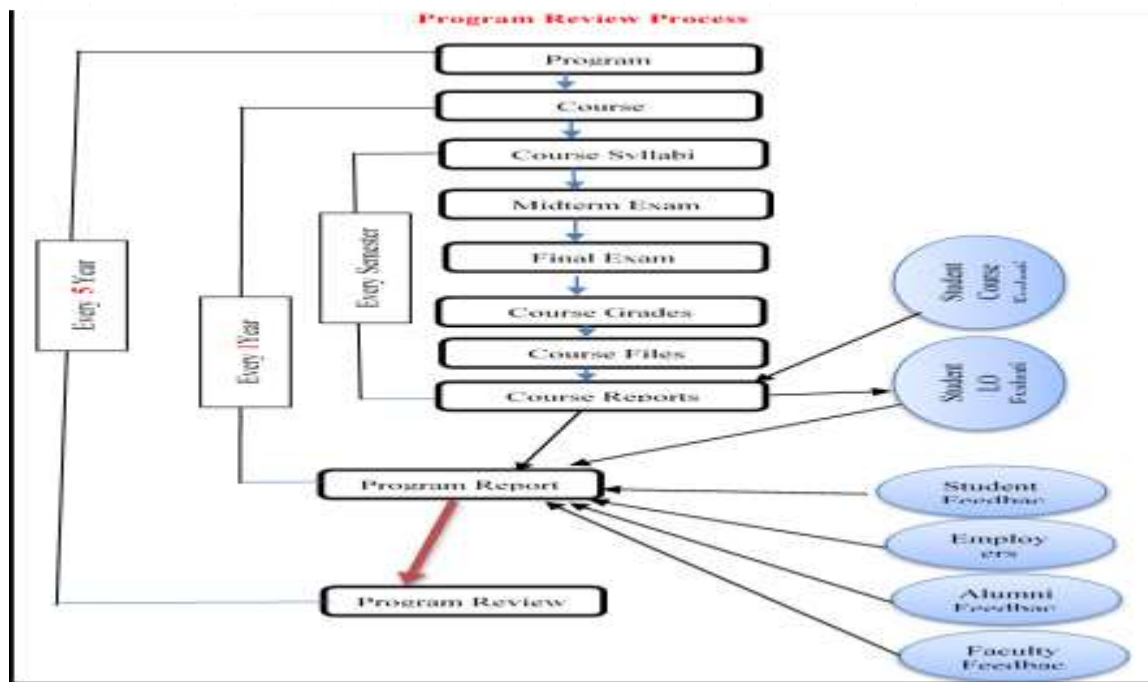
QUALITY MONITORING PROCEDURES

The program quality Monitoring procedures are carried out through the following steps

1- Planning in nursing college can be explained as the process of setting goals, developing strategies, outlining the implementation arrangements and allocating resources to achieve those goals. It is
important to note that planning involves looking at a number of different processes:
1- Identifying the vision, goals or objectives to be achieved
2- Formulating the strategies needed to achieve the vision and goals
3- Determining and allocating the resources (financial and other) required to achieve
4- Outlining implementation arrangements, which include the arrangements for monitoring and evaluating progress towards achieving the vision and goals

2- Monitoring in nursing college can be defined as the ongoing process by which stakeholders obtain regular feedback on the progress being made towards achieving their goals and objectives. Focuses on reviewing progress against achieving goals.

3- Evaluation is a rigorous and independent assessment of either completed or ongoing activities to determine the extent to which they are achieving stated objectives and contributing to decision making. The aims of both monitoring and evaluation are very similar: to provide information that can help inform decisions, improve performance and achieve planned results.

Quality Monitoring procedures are carried out by:

- Department and College Council.
- Program Assessment Committee.
- Advisory Committee of Nursing College.
- Self-study committees (6 standards).
- Quality committees.

POLICIES & PROCEDURES

Definitions

Policies

A policy is a documented statement of principle and approach to a particular area of education/training. It is also a tool which VDQD can use to inform current and prospective learners of what they can expect from program.

Policies will usually be quite concise and not contain much detail regarding implementation. However, each policy should implicitly or explicitly state the quality team's commitment to address the issues listed in each of the policy areas in these guidelines. To be effective, a policy must be disseminated to all those that it is intended to inform.

Procedures

To be translated into practice, a policy must be broken down into one or more clear and coherent processes. The statements of how these processes are carried out are the procedures, and their development will be informed by the relevant policy.

A procedure covering any process will generally specify;

- ❖ The title of the procedure relates to the task(s) which it is designed to perform.
- ❖ The method(s) used to fulfill the purpose of the procedure.
- ❖ Who applies this method(s).
- ❖ The evidence that will be generated when the procedure is carried out.
- ❖ How the effectiveness of the procedure will be monitored by whom, how often, in what way, etc.

What is termed a procedure can take many forms. e.g. a staff handbook may be 'the procedures covering aspects of staff recruitment and development.

Internal Monitoring

Once policies and procedures are developed and implemented, the next phase of the quality assurance process is to monitor the learning effectiveness on an ongoing basis. Internal monitoring can be done in various ways, some formal, others less so; Internal monitoring must be systematic and consistent.

Internal monitoring should identify areas of provision which are successfully implementing policy and those which are not. To recognize what is successful implementation, a provider will need to identify a tangible form of evidence. Where the evidence is not present, then remedial action needs to be identified and taken. This might mean the relevant procedure needs to be applied more consistently or that the procedure or policy needs to be updated. In this way continuous improvement becomes a reality.

It should be clear for each procedure that:

- ❖ The responsibility for monitoring its effectiveness has been assigned to a specific job role.
- ❖ It will be monitored at a specified frequency.
- ❖ It will be monitored in a particular way.

POLICIES AND PROCEDURES OF QUALITY

1- Students with poor academic performance.
2- Students survey system.
3- Examination.
4- Staff dispute against student evaluation.

1-STUDENTS WITH POOR ACADEMIC PERFORMANCE

1.0 Conditions:
This General Internal Policy and Procedure applies on, Academic Guidance Committee, Course organizers, Heads of Departments and Quality.

2.0 Purpose:
To provide opportunity for students with poor academic performance to improve their academic achievement in accordance with the college and program missions.

3.0 Definitions:
Poor academic performance: Students who obtained grade D in more than 50% of courses or with cumulative grade-point averages below 2 and students who received grade F in any number of courses.

4.0 Policy:
Poor performance and failing students should be helped to overcome their academic weakness and to improve their grade.

2-Students survey system

1.0 Conditions:
This General Internal Policy and Procedure applies on VDQD, QU, Course organizers and Heads of Department.

2.0 Purpose:
To provide opportunity to students to express their opinion about and expectations from, the learning outcomes, resources, teaching staff and assessment to share in program improvement
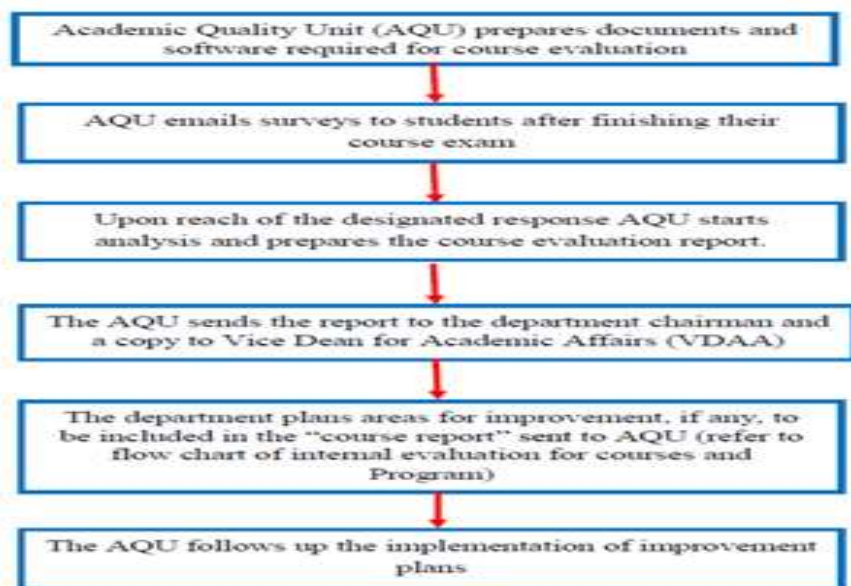
3.0 Definitions:
Intended Learning Outcomes: what the student is expected to know and be able to do at the end of a course or programme according to a given standard of performance.
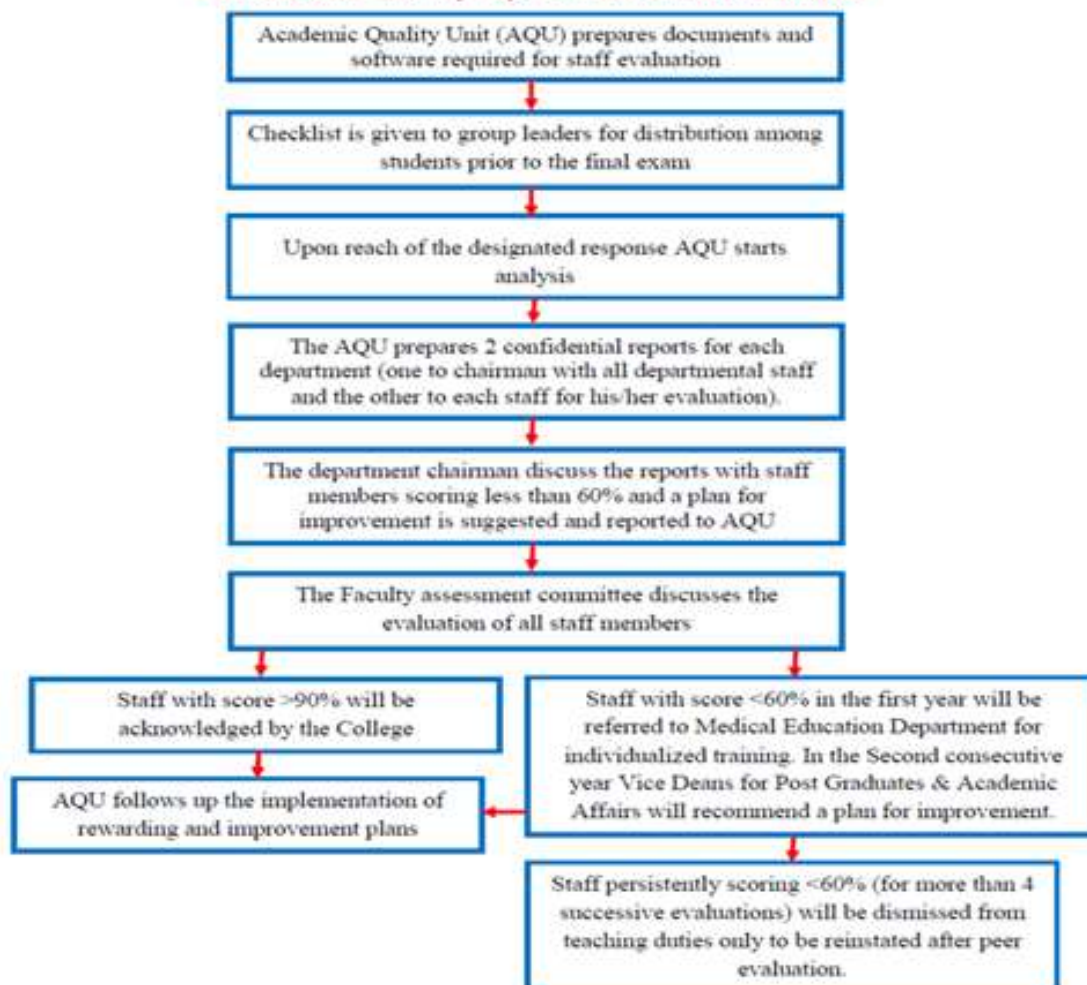
4.0 Policy:
4.1 The students should be involved in evaluation of courses content and implementation
4.2 The students should be involved in evaluation of their teaching staff members.

High level flow diagram for
The student' surveys system for course evaluation

Academic Quality Unit (AQU) prepares documents and software required for course evaluation

↓

AQU emails surveys to students after finishing their course exam

↓

Upon reach of the designated response AQU starts analysis and prepares the course evaluation report.

↓

The AQU sends the report to the department chairman and a copy to Vice Dean for Academic Affairs (VDAA)

↓

The department plans areas for improvement, if any, to be included in the "course report" sent to AQU (refer to flow chart of internal evaluation for courses and Program)

↓

The AQU follows up the implementation of improvement plans

High level flow diagram for
The student' surveys system for staff evaluation

Academic Quality Unit (AQU) prepares documents and software required for staff evaluation

↓

Checklist is given to group leaders for distribution among students prior to the final exam

↓

Upon reach of the designated response AQU starts analysis

↓

The AQU prepares 2 confidential reports for each department (one to chairman with all departmental staff and the other to each staff for his/her evaluation).

↓

The department chairman discuss the reports with staff members scoring less than 60% and a plan for improvement is suggested and reported to AQU

↓

The Faculty assessment committee discusses the evaluation of all staff members

Staff with score >90% will be acknowledged by the College

Staff with score <60% in the first year will be referred to Medical Education Department for individualized training. In the Second consecutive year Vice Deans for Post Graduates & Academic Affairs will recommend a plan for improvement.

AQU follows up the implementation of rewarding and improvement plans

Staff persistently scoring <60% (for more than 4 successive evaluations) will be dismissed from teaching duties only to be reinstated after peer evaluation.

3- ASSESSMENT AND EXAMINATION

1.0 Conditions:

This General Internal Policy and Procedure applies on Examination committee, Course organizers and Department' Heads.

2.0 Purpose:

The regulations outlined in this document are intended to define the policy and procedures for assessment of students enrolled in the College of Nursing at Jazan University. These regulations have been developed in accordance with the rules and regulations of the Ministry of Higher Education and Jazan University (JU) to explain the details, to suit the Nursing College.

3.0 Definitions:

Continuous assessment:

Continuous assessment is the assessment of a students' progress throughout a course of study **DOPS**

Direct Observation of Procedural Skills (DOPS) is a workplace-based assessment of clinical procedural task performed by trainees on patients evaluating a particular skill.

End of the year examination

A summative assessment administered in the end of an academic term.

Formative assessment

Formative assessment is the part of the assessment process which evaluates on-going teaching/learning process throughout the course. it also includes feedback to the students.

MCQs

Multiple Choice Questions (MCQ's) is an assessment tool to assess knowledge consisting of stem, that directly or indirectly possess a question and a set of distracters from which the answer is selected

Quizzes and Midterm examination

A summative assessment administered in the middle of an academic term/course.

Summative assessment

A summative assessment (or final examination) is the part of assessment process which evaluates student learning/teaching process at the end of a block/course

4.0 Policy:

The examination policy must be developed in accordance with the rules and regulations of the Ministry of Higher Education and Jazan University (JU) to explain the details and to suit the Nursing College.

4- STAFF DISPUTE AGAINST STUDENT EVALUATION

1.0 Conditions:
This policy applies to all student evaluation of teaching staff perceived by the evaluated staff member as being inappropriately-based or inaccurate.

2.0 Purpose:
The policy aim to:

2.1 Inform teaching staff about dispute methods against student evaluations perceived as inappropriately-based/inaccurate.

2.2 Disclose the possible outcomes of dispute.

3.0 Policy:

3.1 The college is dedicated to safeguard against inappropriately-based or inaccurate feedback from students on teaching staff by enforcing that all teaching staff have the right to dispute any student feedback perceived as inappropriately-based/inaccurate via a designated form.

4.0 Procedure:
See the following flow chart and dispute form
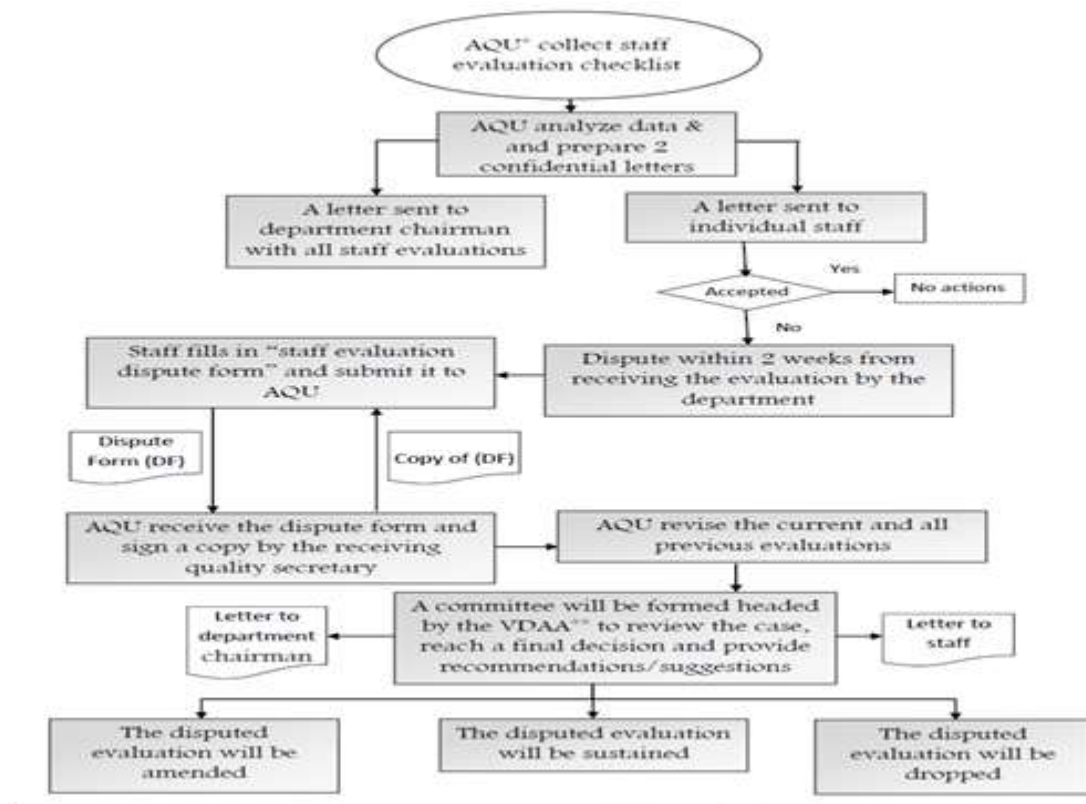
Academic Job Descriptions

A job description is a written statement of the content of any particular job and derived from the analysis of that job. It can be distinguished from a person specification, which describes not the content of the job, but the attributes required of an employee to do that job to the required standard.

Job descriptions can serve a number of useful purposes:
- Human resource planning
- Recruitment and selection
- Job evaluation
- Training and development
- Job redesign
- Performance management
- Organization change

Limitations of job descriptions

❖ Job descriptions describe the requirements of the job but take no account of how the individual carries out that job.

❖ In modern organizations, especially those using project teams, individuals may be used very flexibly and more in accordance with their abilities than in terms of the specific job they were originally employed to do.

❖ If job descriptions are applied too rigidly they may become inappropriate for an organization that is rapidly changing.

❖ Job descriptions require frequent updating because over time the work actually carried out by the job holder may become significantly different from the responsibilities set out in the job description.

The best way of combating these problems is to try to ensure that job descriptions are written flexibly by focusing on the overall objectives, rather than on the tasks to be carried out to meet those objectives, and to update them regularly.

Academic Job Descriptions

Dean.	Professor.
Vice Dean For Female Section.	Assistant Professor.
Vice Dean For Quality And Development.	Assistant Professor.
Head Of Department (Female).	Assistant Professor.
Assistant Od Head Of Department (Male).	Lecture.
Director Of Academic Unit.	Lecture.
Director Of Academic Advising.	Lecture
Director Of A Training Unit.	Administrative.
Quality Committee.	All Staff Members.

جامعة جازان

كلية التمريض

وكالة التطوير والجودة

الدليل الإرشادي

للوصف الوظيفي والتنظيمي

بكلية التمريض

2019-1440

ACADEMIC TERMS OF REFERENCES

Terms of reference are used to describe the purpose roles and structures of projects, working groups, reference groups and committees. They are guidelines for the way group members will work with each other and are usually the first task undertaken by a group.

Terms of reference provide a written basis for making decisions, confirming a common understanding between members how they will make decisions and work together.

Often the following headings are used in Terms of reference documentation:

- Purpose

- Membership

- Meeting Frequency

- Authority

- Roles and Responsibilities

KEY PERFORMANCE INDICATORS

For providing evidence of achievement of objectives the faculty has prepared a set of key performance indicators that are considered as a part of the whole quality management system indicators driven from the Quality Management System NCAAA.

The National Center for Academic Accreditation and Assessment (NCAAA)

The National Center for Academic Accreditation and Assessment has been established by the Higher Council of Education in Saudi Arabia with responsibility to establish standards and accredit institutions and programs in post-secondary education.

The system for quality assurance and accreditation is designed to support continuing quality improvement and to publicly recognize programs and institutions that meet required quality standards. The objective is to ensure good international standards in all post-secondary institutions and in all programs offered in Saudi Arabia.

Students, employers, parents and members of the community should be able to have complete confidence that what has been learned by students, the research conducted, and the services provided are equivalent to good international practice.

Accreditation of a program will give public recognition that these standards have been achieved. Saudi Arabian qualifications should be accepted without question anywhere in the world.

There is considerable variation in the amount of experience that higher education institutions have had with quality assurance processes and the system of higher education is expanding rapidly. In recognition of this the system for accreditation will be introduced progressively over a transition period of several years. During this time programs may be considered for accreditation in institutions that are well advanced with the introduction of quality assurance systems, and others will be evaluated and accredited as their internal quality assurance systems are put in place.

The National Center for Academic Accreditation and Assessment in Saudi Arabia (2018) has developed a set of standards for quality assurance and accreditation of higher education institutions and programs in eleven general areas of activity.

1.	1.Mission and goals
2.	Program management and quality assurance
3.	Teaching and learning
4.	Students
5.	Faculty members
6.	Learning resources, facilities, and equipment

These standards are based on what is generally considered good practice in higher education throughout the world and adapted to meet the particular circumstances of higher education in the Kingdom of Saudi Arabia.

جامعة جازان

نوع الجهة حكومي

تاريخ الاعتماد   أكتوبر/2018 - سبتمبر/2022

نوع الاعتماد   مشروط

Jazan University

Institution Type   Governmental

Accreditation Date   Oct 2018 - Sept 2022

Accreditation Type   Conditional