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QUALITY MANAGEMENT SYSTEM (QMS) JAZAN UNIVERSITY



JAZAN UNIVERSITY QUALITY COUNCIL
UNDER MINISTRY OF EDUCATION

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



**QUALITY MANAGEMENT SYSTEM
JAZAN UNIVERSITY**

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CHAPTER 1

1.0 QUALITY MANAGEMENT SYSTEM (QMS)

1.1 INTRODUCTION

Quality is the extent to which the customers or users believe the product or service surpasses their needs and expectations. Quality of education, for example, is the skill of building the abilities of assimilating the knowledge in the area of educational needs and the implementation of this knowledge to creating mechanisms allowing fulfilling expectations of customers and educational services. The care about the quality of education by the universities is one of the basic process, which creates the present market of educational services. The quality of education becomes the basis to working out and implementing the strategy of the development of educational units. Quality management means the systematic development and maintenance of quality. As a methodological entity, the quality system refers to the methods of quality management. The quality management system includes the methods for continuous improvement of education, research, management, leadership and supporting services. More and more requirements put for the higher education, especially from the point of view of the demand on the job market, caused the necessity of implementing the quality management systems (QMS) compatible with the ISO 9001: 2008 standard to universities. Jazan University aims to continuously improve the quality of all its operations by a formalized system assuring the fulfillment of the academic standards.

This QMS conforms to NCAAA Standard 3 requirement: Management of Quality Assurance and Improvement. The QMS Manual contains organizational information, quality policy, objectives, and methodologies to achieve compliance with NCAAA standards.

1.2 OBJECTIVES

Quality Management System (QMS) - A management system to direct and control an organization with regard to quality. This QMS is established for the following reasons:-

- To provide general information about Jazan University (after this will be referred to as JU);
- To explain briefly the compliance of JU QMS to NCAAA requirements which form the basic foundation for JU Quality Management;

- To lay out the policy and quality assurance for every management activities to ensure good practices of NCAAA standards are implemented at JU; and
- To describe the scope and domain of quality assurance perimeters and boundaries.

1.3 PREPARATION, IMPLEMENTATION AND DISTRIBUTION COPIES

This QMS is applicable and implemented after approval, and duly signed by the Rector of JU. This QMS will be published and also be available on Deanship of Academic Development (DAD)'s portal at JU official website.

1.4 AMENDMENT COORDINATION

DAD, as JU Quality Coordinator, is responsible to coordinate any amendments to this QMS as a mandatory procedure to Manual Control. Any parts of this QMS cannot be produced or amended without permission from DAD.

CHAPTER 2

2.0 ORGANIZATIONAL BACKGROUND

2.1 HISTORY AND BACKGROUND OF JU

JU was established as per the Royal Decree, No.6616/M/B, dated 12/5/1426 Hijri, corresponding to 19/6/2005 Gregorian. The colleges of medicine, engineering, computer and information systems; and the community college formed the nucleus of the university. Then the Teachers' College, which was established in 1401H (1981G), was added followed by the girls' education colleges existing in the region and established in 1412H (1992G). Other colleges established subsequently were an addition to the university to bring the total number of colleges at the end of 1432H (2011) to 26, 25 colleges award bachelor's degrees and one awards diplomas. Aside from these, four deputyships (Vice-Presidencies) for the university and nine support deanships were set up. These are University Deputyship for Graduate Studies and Research, University Deputyship, University Deputyship for Quality and Academic Development, and University Deputyship for Academic Affairs. The 9 Support Deanships include: Deanship for Admission and Registration, Deanship for Students Affairs, Deanship for Scientific Research, Deanship for Academic Development, Deanship for e-Learning and Distance Education, Deanship for Library Affairs, Deanship for Preparatory Year, Deanship for Community Service and Continuing Learning, and Deanship for Graduate Studies.

JU is a public teaching & research university based in the city of Jazan. The establishment of JU was one of the most remarkable academic events in 2006 in Jazan Province, providing the local communities with unique educational opportunities with a modern, and up-to-date programs using the state-of-the-art educational technologies. JU is the province's only university and one of the largest public, nonprofit institutions of higher education in the Kingdom of Saudi Arabia. It has a main central campus of 9 million square meters that rests on the north of Jazan City by the Red Sea on the southwest coast of Saudi Arabia, in addition to seven satellite campuses in Sabya, Abu Arish, Farasan, Ad-Darb, Samtah, Al-Dayr and Al-Ardah.

King Abdullah, Custodian of the Two Holy Mosques - May God Bless Him - laid the foundation stone for the University campus on 14/10/1427H (15/11/2006G). Several projects in the campus have been completed, several others are about to be completed, while many others are still being carried out. The huge expansion JU is witnessing in the

number of colleges and their departments, support deanships, faculty members, male and female students and employees is simultaneous with the university's keenness to develop academic and administrative work according to its drawn up strategic plan and the local and international academic assessment and accreditation criteria. To achieve this balance and double these efforts, the above four deputies have been set up in JU.

JU offers a number of highly demanded majors through many academic departments and centers, an extensive research enterprise and a number of community outreach and public service programs. It is particularly well known for its medical, dental, and business schools, its social sciences and humanities programs, as well as its biomedical teaching and research capabilities.

2.1.1 JU ACHIEVEMENT SO FAR

University Colleges

JU has 25 colleges which award bachelor's degrees and two college awards associate degrees, and in addition, there are 9 support deanships.

Scientific Research

JU aims to provide an environment conducive to conducting research. It continuously evaluates research works, supplies necessary laboratories, equipment and tools, stimulates distinguished and creative performance and builds internal and external partnerships through the following:

- **First:** Setting up research centers and institutes

Four research centers and institutes were set up in JU. They are:

Medical Research Center, Substance Abuse Research Center (SARC), Environmental Research center, and Research and Consultation Services Institute.

- **Second:** Research and Conferences (high international and national participation levels)
- **Third:** Setting up a refereed journal, JU Scientific Journal.

JU has set up a refereed journal which is issued twice a year. The University Deputyship for Higher Studies and Academic Research seeks to continuously develop and upgrade the level of the journal to act as an important source which has researches from different parts of the world and top-notch scientific research that is based on high precision and authenticity which ensures quality and excellence for the journal.

Scholarships

JU has given full priority to scholarship programs offered to faculty members where they can conduct postgraduate studies at prestigious universities that have high academic standards. Faculty members acquire different important skills that keep them abreast of the requirements of advanced technical and scientific knowledge, thus achieving the mission and vision of JU.

The university follows up with postgraduate students to facilitate any difficulty they face and ensure that they will achieve excellence. This is done through developing e-services and forums where students can interact and consult the university about different matters related to their scholarships.

Quality and Academic Development

Deputyship for Quality and Entrepreneurship

Deputyship for Quality and Entrepreneurship at JU is responsible for developing and perfecting the educational process, obtaining academic accreditations to university's programs, developing faculty staff's skills, especially, personal, technical, academic, research, leadership and administrative skills. Thus, faculty members can develop programs, plans and academic curricula and master as well as upgrade teaching methods.

The Deputyship for Quality and Entrepreneurship seeks to achieve some goals such as adopting local and global quality standards, developing academic work in a way that makes it in line with university's strategic goals and plans, employing global standards in designing academic programs and courses and evaluating performance.

To achieve these goals, the deputyship employed some strategies such as setting up specialized units for academic development within colleges, developing the infrastructure of academic development within colleges and implementing training programs in the field of academic development for faculty members, administrative staff and students.

The deputyship has started issuing an important and beneficial series of scientific books in the field of quality and academic development.

Deanship of Academic Development (DAD)

Since its inception in 2009, DAD's major role has been to drive quality initiatives, implementation of the Strategic Plan and efforts at the university level for accreditation of the University's programs. To achieve these targets, DAD started to inculcate a quality culture at JU by introducing a lot of workshops and training programs (local and international trainers). DAD also conducted the first preliminary self-study based on full NCAAA checklist in 2011/2012 session and visited all faculties for Standard 4 readiness. Both results showed that JU is at 50% readiness for institutional accreditation from NCAAA. DAD played a pivotal role in developing new JU Strategic Plan 2020 and also planned to conduct a full self-study of JU in 2014/15 and 2016/17 academic years. In October, 2018 JU has the certificate of accreditation till 2022 (4 years) by the NCAAE.

Information Technology Infrastructure

JU has established its IT center to keep up with the world IT and staying competitive. IT has been used in centralized data maintenance and management, teaching and learning,

online student registration and daily JU operations with efficient staff and excellent bandwidth. JU plans to enhance its IT infrastructures to go paperless and for online-based operations. DAD also developed an ambitious EQMS project to manage online quality assurance of NCAAA good practices, SPMS to manage JU implementation plan 2020 and TMS to manage JU training programs.

JU Web site and Portal

JU has a well-developed web site and portals with excellent web team for supervising the Internet as well as developing the levels of its contents, its design, and the services it gives to users. The JU portal exhibits JU's stupendous achievement to be vividly seen in areas such as technology, information and services. Great effort has been made by JU Portal management to promote the university electronic gate till it achieves international standards.

2.2 JU VISION

“Jazan University will be a gateway to the future for the region and the kingdom, recognized nationally and internationally for academic excellence, competent graduates, high impact research and service that deliver social and economic impacts to the region and the world.”

2.3 JU MISSION

- Achieve academic excellence and prepare graduates to become regional and national leaders in business, industry, health, education, and government.
- Serve the community by addressing its problems and supporting its social and economic development.
- Produce internationally recognized research and new knowledge that meet the needs of Jazan Province, the Kingdom, and the world.

2.4 JU STRATEGIC DIRECTIONS

- Building world class management
- Achieving intellectual excellence
- Delivering social and economic impacts

2.5 JU SEVEN VALUES

- Leadership at all levels
- Quality and excellence, including commitments to critical inquiry, student success, professionalism, interdisciplinary study, and innovation
- Integrity, including honesty, transparency, and accountability
- Freedom of individuals and of thought
- Affiliation
- Respect, fairness, and diversity

- Sincere Citizenship and service to the community

2.6 JU FUNCTIONS

Major functions of JU:

- To provide and maintain higher educational services;
- To conduct research and consultancy services;
- To produce academic publications; and
- To provide community service programs.

2.7 DEFINITION AND ABBREVIATIONS

a) **JU Governing Board (GB)**

Methodology or processes of how JU is being managed or administered to ensure that JU will fulfill its mission and vision.

b) **Stakeholders**

JU Stakeholders are:-

- i) Students
- ii) Staff
- iii) Parents
- iv) Industry
- v) Others

c) **Product**

JU products are delivering higher education services, higher education programs and JU graduates.

d) **JU Top Management**

JU Top Management are JU Governing Board, Executive Committees and JU Senate.

e) **JU Staff**

JU staff are comprised of Academic Staff, Administrative Staff, and Support Staff appointed on permanent or contractual basis.

f) **Quality Representative (QR)**

QR is the person appointed by the GB (in JU case, it is the Dean at DAD) to develop, execute, administer, monitor and plan for continuous improvement to JU QMS based on NCAAA standards.

g) **Chairperson, Self-Study Steering Committee**

Staff appointed by JU Quality Council to conduct annual institutional self-study to monitor and ensure JU QMS being successfully implemented in accordance with NCAAA guidelines.

h) **Division**

All division, faculty, college, deanship, center, institute, unit and branch campuses of JU.

i) **LIST OF ABBREVIATIONS**

CV	- Curriculum Vitae
DCS	- Deanship of Community Services
JU	- Jazan University
JUQC	-Jazan University Quality Council
GB	- Governing Board
DAD	- Deanship of Academic Development
NCAAA	- National Commission for Academic Accreditation and Assessment
MOE	- Ministry of Education
KSA	- Kingdom of Saudi Arabia
QA	- Quality Assurance
QAUC	- Quality Assurance Units at Colleges
ICT	- Information and Communications Technology
NQF	- National Qualifications Framework
HR	- Human Resource
HRD	- Human Resource Development
IQA	- Internal Quality Assurance
EQA	- External Quality Assurance
PDCA	- Plan-Do-Check Action Cycle
SSRI	- Self-Study Report for Institution
SSRP	- Self-Study Report for Program
KPI	- Key Performance Indicators
SLO	- Student Learning Outcomes
TNA	- Training Needs Analysis
T&L	- Teaching & Learning

CHAPTER 3

3.0 INTRODUCTION TO NCAAA STANDARDS

3.1 QUALITY DEVELOPMENT IN KSA AND JU

Quality and Accreditation flourished in the United States, Europe and the Asia Pacific from the mid to the late 1990's and have recently arrived in the Middle East towards the beginning of the 21st Century. The Kingdom of Saudi Arabia has its own NCAAA (National Commission for Academic Accreditation and Assessment) that is the overseer of the national standards for the Higher Education. Quality as applied to higher education in the education industry had been emphasized in “**What is Quality in Higher Education**” by Diana Green (1994) that re-iterated the importance of the audit, assessment and accreditation to “Fit for Purpose”. The purpose of the higher education institutions to implement these quality systems are for improving and managing the quality of the institutions through reduced variation, continuous improvement of its education products and services, education design and delivery quality and prevention of education “defects” or “variants” from standards. These were based on the major concepts and factors that were introduced by quality gurus, like Deming, Juran, Crosby, and Feigen Baum, Ishikawa and Garvin in one form or another in managing quality (Tummala and Tang, 1994). These quality concepts and factors had been translated into the assessment criteria, core elements and values of various quality awards like the MBNQA and EQA (Puay et.al, 1998) and standards such as the ISO 9000 (Pun and Chin, 1999).

To manage quality, a structured and systematic approach is needed to organize and manage the Quality Management System and mechanisms in JU. The approach used in JU is based on the following principles:

1. Quality is the role and responsibility of all members of the JU family as Quality is a single holistic and unified entity that creates and delivers on education value to the society and community.
2. Quality cuts across boundaries of all units that should contribute and commit to the same quality standards with the administrative units supporting and servicing the direct quality actions affecting quality performance of the institution, colleges and programs.
3. Quality brings about and enhances sharing of data, information and knowledge and learning from each other to bring about a learning organization in JU.
4. Quality is a seamless set of actions and activities that synergizes the policies, processes, procedures and people of the institution as a single holistic entity with a singular set of mission and goals that streamlines and unifies the institution towards its commitment to the society and communities.

In this first edition handbook of the QMS, DAD has chosen NCAAA as the blueprint for its standards and criteria as the minimum requirement to be maintained as the JU Quality Management System. As the overall achievement of JU is a culmination and aggregation of the achievements and attainments of each of the programs or colleges that make up JU, JU is only strongest in where it is the weakest, and as such all programs and colleges in the JU family should equally contribute and commit to KSU overall drive for quality performance.

The main reference materials for the NCAAA requirements which are used in the development of the JU – QMS, whereby the institution, colleges and programs and administrative units should use as the main references and in-depth materials are as following:

1. Standards for Quality Assurance and Accreditation of Higher Education Institutions (July 2015)
2. Standards for Quality Assurance and Accreditation of Higher Education Programs (July 2015)
3. Self Evaluation Scales for Higher Education Institutions (August 2015)
4. Self Evaluation Scales for Higher Education Programs (August 2015)
5. Handbook for Quality Assurance and Accreditation in Saudi Arabia (Part 1), the System for Quality Assurance and Accreditation (July 2013)
6. Handbook for Quality Assurance and Accreditation in Saudi Arabia (Part 2), Internal Quality Assurance Arrangements (July 2013)
7. Handbook for Quality Assurance and Accreditation in Saudi Arabia (Part 3), External Reviews for Accreditation and Quality Assurance (July 2013)
8. Multi Sector Qualifications Framework, Kingdom of Saudi Arabia (November 2007)

It should be noted that the NCAAA stipulations are statutory which means that they represent a legal requirement to fulfill and satisfy the minimum standards for quality in the academic assessment that leads to accreditation and represents the highest regulatory agency in the Kingdom of Saudi Arabia governing academic assessment and accreditation. This would inherently mean that they form the minimum requirements needed for academic assessment and accreditation. The institution or the higher education programs should use these as the minimum statutory instruments for conformance and compliance in the development of the institution, college and programs Internal Quality Assurance (IQA) within the requirements of the External Quality Assurance (EQA). The NCAAA forms the basic regulatory national standards that all higher education institutions should comply with and other stakeholders or professional accreditation agencies requirements as additional supplements or complements.

3.2 NCAAA STANDARDS

The National Commission for Academic Accreditation & Assessment (NCAAA) in Saudi Arabia has developed a set of standards and criteria for quality assurance and accreditation of higher education institutions and programs in eleven general areas of activity grouped into 5 main categories of 11 standards and more than hundreds of detailed requirements of each standards which are used as the overarching principles in developing the Standards for the Institution and Program as following:

Institutional Context

1. Mission, Goals and Objectives.
2. Governance and Administration.

3. Management of Quality Assurance and Improvement.

Quality of Learning and Teaching

4. Learning and Teaching.

Support for Student Learning

5. Student Administration and Support Services.
6. Learning Resources.

Supporting Infrastructure

7. Facilities and Equipment.
8. Financial Planning and Management.
9. Employment Processes.

Community Contributions

10. Research.
11. Institutional Relationships with the Community

Inter-relationship of the five NCAAAA standards categories are shown in figure 3:

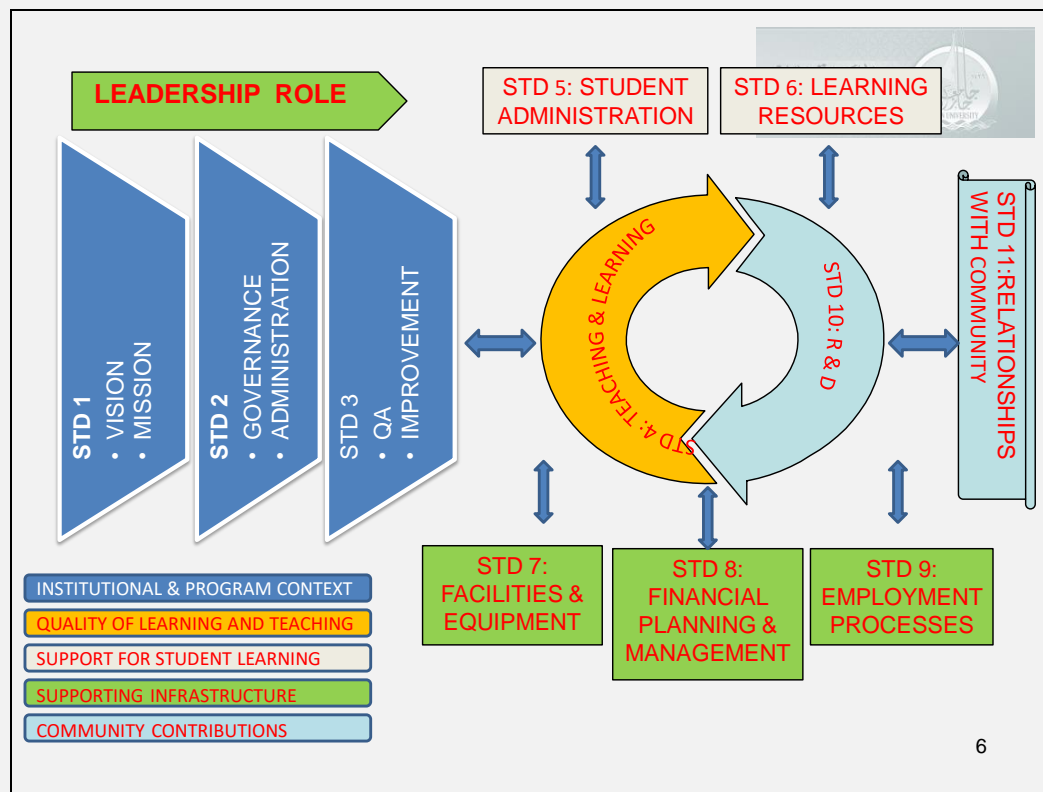


Fig 3.1: NCAAAA standards Inter-relationships

3.3 RELATIONSHIPS BETWEEN STANDARDS FOR INSTITUTIONS AND STANDARDS FOR PROGRAMS

General standards have been developed for higher education institutions and programs. Both of these are covered in 2 separate documents titled: —Standards for Quality Assurance and Accreditation of Higher Education Institutions –Version of 2015 for institutions and — Standards for Quality Assurance and Accreditation of Higher Education Programs – Version of 2015 for programs. The standards and criteria requirements of the institution and program cover the same general areas of activity but there are some differences that reflect a total institutional overview on the one hand and the perspective of just one specific program on the other. In addition, for the NCAAA, some general institutional functions are not considered in a program evaluation.

In general, activities relating to the standards fall into three categories.

- Those that are institutional and have no impact or only very indirect impact on programs. Examples include the management of extracurricular activities or the attractiveness of buildings and grounds. Even though the NCAAA do not consider these in looking at the application of the standards to programs, JU takes a holistic approach towards the above that contributes to the conducive environment for teaching and learning and in developing a complete graduate.
- Those that are general institutional activities with a major impact on programs. Examples would be the provision of learning resources through a library or the processes for employment and promotion of teaching staff. These should be considered in evaluating a program as they impact on the program concerned. For example whether the library provides the services needed for the particular program being considered, or whether appropriately qualified and experienced faculty and staff are available to teach in the program. The quality of a program is affected by these things regardless of who is responsible for administering them. Evaluation of these functions in an institutional evaluation would be broader and consider the quality of management and services provided for the institution as a whole and how effectively they support all programs throughout the institution.
- Those that relate directly to the planning and delivery of programs. Examples would be the appropriateness of intended learning outcomes for students and the quality of teaching in the program. For an institutional evaluation these things should be looked at within all programs, and then a judgment made about strengths and weaknesses in the institution's programs as a whole. This would normally be done by getting a profile of performance at the level of departments or colleges, and then preparing a report identifying similarities and differences and overall performance for programs in general.

3.4 NCAAA EVALUATION SCALE OF THE STANDARDS AND CRITERIA

High quality standards can only be achieved by action planned and undertaken within the institutions offering educational programs. In keeping with this, the approach to quality assurance and accreditation of institutions in the Kingdom of Saudi Arabia is based on self-evaluation in relation to generally accepted standards of good practice, verified by independent external review.

To support this approach, the standards are supported by self-evaluation scales through which faculty and staff responsible for programs rate their own performance using a starring system. It is expected that these self-evaluation scales will be used by institutions and by those responsible for programs in their initial quality assessment, their continuing monitoring of performance, and in their more extensive periodic self-studies prior to an accreditation review by the Commission.

For each individual item, two responses are called for. The first is to indicate whether the practices followed in the institution, college or program. The possible responses are:

- NA – the practice is not applicable or relevant for the institution or unit making the response.
- Y – yes, the practice is followed; or
- N – No, the practice is relevant but not followed.

The second response is called for in cases where the practice is relevant to the institution (i.e., a —Y or — N response). It involves the use of a five-point rating scale to evaluate on how consistently and how well the practice is carried out. Stars, rather than a numeric or alphabetic rating scale, are used for this purpose.

The evaluations relate to:

- The extent and consistency with which processes are followed;
- The quality of the service or activity as assessed through systematic evaluations;
- The effectiveness of what is done in achieving intended outcomes.

The NCAA assessment uses Stars for evaluations. Performances are assessed by allocating from zero to five stars indicating 6 levels of performance in accordance with the following descriptions:

Improvement Required

- **No Star** – The practice, though relevant, is not followed at all. A zero should be recorded on the scale.
- **One Star** – The practice is followed occasionally but the quality is poor or not evaluated.
- **Two Stars** – The practice is usually followed but the quality is less than satisfactory.

Good Performance

- **Three Stars** – The practice is followed most of the time. Evidence of the effectiveness of the activity is usually obtained and indicates that satisfactory standards of performance are normally achieved although there is some room for improvement. Plans for improvement in quality are made and progress in implementation is monitored.

High Quality Performance

- **Four Stars** – The practice is followed consistently. Indicators of quality of performance are established and suggest high quality but with still some room for improvement. Plans for this improvement have been developed and are being implemented, and progress is regularly monitored and reported on.
- **Five Stars** – The practice is followed consistently and at a very high standard, with direct evidence or independent assessments indicating superior quality in relation to other

comparable institutions. Despite clear evidence of high standards of performance plans for further improvement exist with realistic strategies and timelines established.

3.5 NEW NCAAE ACADEMIC STANDARDS (OCTOBER 2018)

- **Institutional Academic standards**

- 1- Mission, Goals and strategic planning.
- 2- Governors and management.
- 3- Teaching and learning.
- 4- Students.
- 5- Teaching staff.
- 6- Institutional resources.
- 7- Scientific research and community relationships.

- **Program Academic standards**

- 1- Mission and goals.
- 2- Program management and its quality assurance.
- 3- Teaching and learning.
- 4- Students.
- 5- Teaching staff.
- 6- Learning resources and equipment.

CHAPTER 4

4.0 SCOPE OF JU QMS/ NCAAA IMPLEMENTATION

4.1 SCOPE OF JU QMS IMPLEMENTATION

QMS scope is for quality management system for JU as a public university as defined in the JU charter.

4.2 SCOPE OF NCAAA IMPLEMENTATION

JU will implement NCAAA standard as mandatory quality system for all KSA public higher education in order to achieve JU quality policy and objectives. The implementation area will cover JU main campus, all branches, JU Community colleges, new and established faculties, etc.

4.3 MAJOR ACTIVITIES OR PROCESSES TO PROVIDE A QUALIFIED HIGHER EDUCATION SERVICES

JU has taken into account the qualifying framework or NQF of KSA in developing its policy, mission and objectives, strategies in providing services of higher education, in line with new JU 2020 Strategic Plan. There are 9 core activities or major processes in providing higher educational services in JU, which are as following:-

- a) Academic Development
- b) Student Development
- c) Building World Class Management
- d) Human Resources Development
- e) Research Development, Consultancy, Intellectual Property Protection and Commercialization/ Entrepreneurship
- f) ICT Development
- g) Infrastructure/ Physical Development
- h) Facilities Management
- i) Admission and Registration

4.3.1 ACADEMIC DEVELOPMENT

In academic development planning, the emphasis is to broaden the learning opportunities for students in southern province in the field of science, technology, commerce, IT, medical, pharmacy and nursing, offering high quality programs to achieve intellectual excellence as defined in Vision 2020. To achieve intellectual excellence, enrollment planning from current 53,000 students' population to 70,000 in 2020 requires a sound policy, clear objectives and right strategies in order to achieve academic development planning.

4.3.2 STUDENT DEVELOPMENT

Deanship of Academic Affairs and Vice Rector for Academic Development and JU Alumni is an integral part of JU. Academic Affairs is entrusted to provide services to all students to achieve JU's New Vision in preparing graduates to become regional and national leaders in business, industry, health, education and government. Academic Affairs will focus on student development starting from college residents, leadership skills, co-curriculum activities, cultural and religious activities, sports and international relations with internal and external universities. JU graduates through Academic Affairs will be molded to be bold, confident, self-esteemed and able to face challenges and competition and have strong personalities. Major student development policies will cover the following:

- To produce students with integrity based on JU 2020 plan and NQF framework (Recently SQF)
- To produce students with entrepreneurship skills
- To incorporate religious and cultural values of Saudi Arabia
- To strengthen sport and co-curriculum activities
- To provide college residence to all qualified students
- To upgrade the student cafeteria
- To produce well-balanced students (intellectual, physical, mental, spiritual and emotional with ethics and good citizenship)
- To initiate and build strong JU Alumni as an important stakeholder
- To provide high quality and responsive medical healthcare
- To provide a safe, clean and productive environment to students at all time

4.3.3 BUILDING WORLD CLASS MANAGEMENT

This strategic direction focuses on coping with the rapid growth that has been assigned to the university by adopting the very best management practices. It reflects the interests of students and stakeholders in the region in ensuring that JU will offer the very best educational opportunities to all who are interested and adequately prepared. This direction involves a sustained effort to provide the infrastructure (physical, intellectual, electronic, transportation, etc.) that is needed to accommodate a growing and diversifying student population, to ensure that faculty members are available in sufficient numbers to teach all of the students who are admitted, and to improve management practices so that the quality of life of students and faculty is improved even as the university grows.

4.3.4 HUMAN RESOURCE DEVELOPMENT (HRD)

World-class administration will strengthen JU in delivering its services and meeting the stakeholders' expectations. In JU Vision 2020, HRD is spelled out very clearly as following:

Vision

To deliver Human Resources quality programs and services so that JU community will be able to become a world class management in education and make JU a great place to work, learn and grow with harmony.

Mission

To provide a positive Human Resources service experience for employees at all levels and collaborate with colleges, deanships, centers, divisions and departments to recruit, develop, support, and retain diverse and talented employees who are the key to JU reputation and success.

Values

To uphold a leadership role in creating a respectful freedom of individual thought and innovative work environment by being faithful to our values of engagement, collaboration, integrity, service excellence and a great place to work with JU employee community.

4.3.5 RESEARCH DEVELOPMENT, CONSULTANCY, INTELLECTUAL PROPERTY PROTECTION AND COMMERCIALIZATION/ ENTREPRENEURSHIP

According to JU Vision 2020 and NCAAA good practices, research planning, development and commercialization will develop the following action plans:

- Creation and dissemination of knowledge.
- Academic development.
- Product/ Idea creation and intellectual property protection.
- Develop human capital.
- Professional services to the community, country and world.

As laid out in JU Vision 2020, here are the action plans:

Invest heavily in academic and research units of regional or national importance, such as engineering, medical sciences, tropical medicine, and environmental studies by implementing these action steps:

- Set aside a special fund to recruit star faculty
- Establish matching fund for research grants in targeted areas
- Build a commercialization incubator

4.3.6 ICT DEVELOPMENT

Information and Communication Technology (ICT) will play a major role to act as a catalyst in teaching, learning and administration. Without ICT, the tasks to enrich educational processes, management and administration will not be executed effectively and efficiently taking into consideration the age of globalization where ICT is the number one communication tool. JU has laid out a clear action plan in JU Vision 2020 to develop a comprehensive ICT blueprint to achieve its vision and mission.

4.3.7 INFRASTRUCTURE/ PHYSICAL DEVELOPMENT

As laid out in JU Vision 2020, JU will complete its campus infrastructure – new campus, upgrades on remote campuses in order to increase enrollment of students and staff. Physical development unit will give priorities to develop academic buildings, administrative offices, laboratories, computer laboratories, student and staff residences with high quality and safety in mind.

4.3.8 FACILITIES MANAGEMENT

In pursuing JU direction to build world class management in JU Vision 2020, JU will be responsible to maintain a world class facility delivery system to increase productivity, and enhance teaching and learning processes.

4.3.9 ADMISSION AND REGISTRATION

Admission and registration provide a link between outside and JU during the application process, providing information on qualifications and entry requirements. They check application forms and make and confirm offers, as well as sending/ publishing application results.

CHAPTER 5

5.0 QUALITY MANAGEMENT SYSTEM

**“QMS is a management system to direct and control
an institution with regard to quality”**

5.1 GENERAL REQUIREMENTS

Governing Board (GB) of JU will create, document, implement, and maintain the JU QMS and will continue to improve its effectiveness in line with NCAAA requirements, stakeholders' satisfaction, JU Vision 2020 and Afaq plan. GB of JU will:-

- a) Determine the required major processes in the QMS and their implementation throughout JU.
- b) Determine process sequence and related processes.
- c) Determine criteria, operational mechanism and effective process control.
- d) Ensure adequate resources and accurate data to support process excellence and process monitoring.
- e) Monitor, measure and analyze process achievement or KPIs achievement.
- f) Execute opportunities for improvements, preventive and corrective control and continuous process improvement.

All major processes will be managed by JU Governing Board in accordance with NCAAA and JU Strategic Plan: Vision 2020.

In case external resources or services are required, GB will ensure these external resources meet NCAAA and QMS requirements. GB will identify the units, divisions or colleges that require external resources.

5.2 DOCUMENTATION REQUIREMENTS

5.2.1 INTRODUCTION

JU GB will document the QMS for JU top management to ensure it meets the QMS Document Structure (see, diagram 5.1).

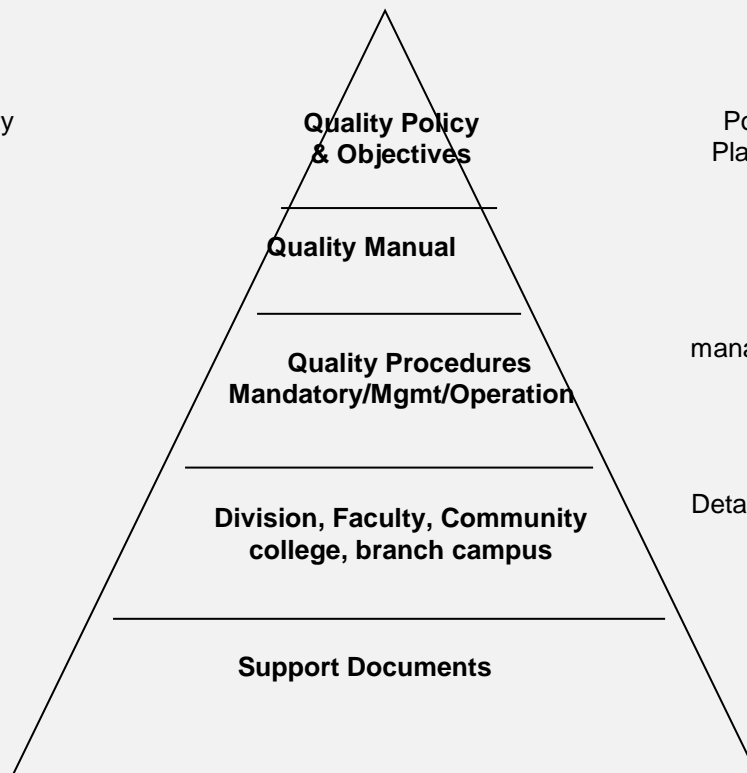
RESPONSIBILITY

GB, JU Council, Quality Council, DAD

Head, Deans, DAD

Head, Dean, Branch Campus head

Head, Dean, Branch Campus



REMARKS

Policy & Strategic Planning Document

Activities and management operation documents

Detailed documents on task/jobs

Support Documents

Fig 5.1: JU QMS Documentation Structure

JU QMS is being created to ensure a good quality management system developed and implemented to guide NCAAA and JU Vision 2020 strategic planning implementation based on quality policy and objectives.

5.2.2 QUALITY MANUAL

Quality Manual is the main document to explain the policy and planning by JU top management. The Quality Manual is the main source of reference other than NCAAA and JU Vision 2020 documents. The scope of JU Quality Manual are:-

- Scope of implementation for QMS.
- Quality policy and quality objectives of JU.
- Non-applicable to NCAAA requirements.
- Reference to procedures and other support documents.
- Process map in the QMS.

Quality Manual is supported by the following quality documents:

• Quality Procedures

Quality Procedures describe all management and operational processes of JU. GB will be responsible to prepare and implement the procedures in line with NCAAA, JU Vision 2020, and future international accreditations requirements. GB will prepare 9 management procedures:

- Mandatory Procedures

- 1 Document Control
- 2 Control of Records
- 3 Self-Study or Internal Audit
- 4 Risk Management
- 5 Improvement Initiatives

- Management Supporting Procedures

Four management support procedures:

- 1 Self-Study Report (SSR)
- 2 Human Resource Development (HRD)
- 3 Stakeholders' feedback (survey and action plans)
- 4 QMS and EQMS monitoring

Major processes, as identified for effective QMS implementation, are listed below in Table 5.1.

Table 5.1: Major Processes in JU Management

No	Service	Responsibility & Accountability
1	Academic Development	Academic Affairs, Deans, Branch campuses
2	Student Development	Student Affairs, Deans, Branch campuses
3	Building World Class Management	GB, Councils
4	Human Resources Development (HRD)	Human Resources VP Quality and Entrepreneurship DAD
5	Scientific Research, patent, Intellectual property and commercialization	Head of Research, Entrepreneurship center
6	ICT Development	IT center
7	Infrastructure Development	Development Office
8	Facilities Management	Facilities Management Development Office
9	Admission and Registration	Deanship of Admission and Registration
10	Community Service	Deanship of Community Service

5.2.3 DOCUMENT CONTROL

Documents created in QMS will be controlled. Procedures to control documents will be as following:

- a) Approval of document before circulation;
- b) Revision, updating, and approval;
- c) Ensure changes and latest documents status identified;
- d) Ensure latest version of the documents;
- e) Ensure documents can be referred when required at any time;
- f) Ensure external documents needed to be identified and verified and their circulation to be controlled; and
- g) Prohibit obsolete documents from being used and must be stamped “VOID”, if it is kept for any reason.

5.2.4 RECORD CONTROL

JU Central Record Control will be established at DAD to oversee Record Control Procedures. One master list of records will be prepared to ensure identification and maintenance of all quality records. One system reference code will be established according to the categories.

All record will be kept safely with easy access for quick reference. If it is kept electronically (EQMS), one back-up system will be established. Top Management will take preventive action to prevent data loss and out in place a risk management plan.

All records should be kept systematically for reference for **FIVE** years before being banished according to procedures set by the Management.

5.2.5 ELECTRONIC QUALITY MANAGEMENT SYSTEM (EQMS) NCAAA DATABASE DEPOSITORY SYSTEM (EQMS)

EQMS is designed to make available a comprehensive, WEB-Based, Quality Management System that provides electronic portfolios and academic assessment for all colleges and programs. It is available any time anywhere for all users who have an internet connection. It computerizes the self-evaluation process. The EQMS allows generating reports and statistics that can be used to improve the quality of NCAAA standards implementation. The EQMS contains dashboard which is a monitoring interface that gives the colleges an overview of the self-evaluation process status. It has multiple indicators to different things such as how many standards the college has used for self-evaluation process, results and rating of self-evaluation scales overall, etc. Once fully launched officially and trained, the JU will be one of the first Institutions in the Kingdom to adopt NCAAA database and self-evaluation system (See: EQMS Guide Book, Appendix 1).

CHAPTER 6

6.0 MANAGEMENT RESPONSIBILITY

6.1 MANAGEMENT COMMITMENT

JU management or top leadership is always committed to the development and implementation of QMS based on national quality standards, NCAAA. The Management will always give continuous support to all quality initiatives to ensure smooth implementation and its effectiveness by:-

- a) To ensure JU staff understand the Mission and Vision of JU Strategic Plan: Vision 2020, NCAAA requirements, meeting all the approved KPIs, and providing quality services.
- b) To continuously review JU strategic plan and JU quality management system.
- c) To conduct regular Quality Council meetings to review the progress of quality assurance, accreditation and KPI achievements.
- d) To ensure adequacy of resources and information.

6.2 MEETING STAKEHOLDERS' REQUIREMENTS

The top management of JU will ensure stakeholders' needs are identified, understood, and fulfilled in order to meet or exceed stakeholders' satisfaction level.

6.3 JU QUALITY POLICY

Governing Board of JU or top leaders of JU will always ensure its Quality Policy:-

- a) In accordance with the Vision and Mission of JU and JU Charter;
- b) Include JU commitment to abide by the requirements of the QMS and continuous improvements;
- c) Serve as basis to create and revise the quality objectives;
- d) Disseminate and understood by all JU staff and reviewed from time to time in line with JU Vision 2020.

6.4 Quality Committee Structures

6.4.1 Higher Standing Quality Committee of the University

The Committee for Evaluation and Accreditation is responsible for planning to ensure quality in all academic programs, and to advise the Rector regarding the policy and institutional issues related to the assessment and adoption of academic programs. The Committee endorses the operational plans of the departments and colleges based on the recommendations of the evaluation teams. More specifically, the functions of the Committee are, but not limited to, as following:

1. Approve and supervise the implementation of a comprehensive plan for the evaluation and accreditation of academic programs at the university.
2. Establish, review and adopt policies and procedures that guarantee the quality of academic programs.
3. Adoption of corrective actions and development plans, based on the results of the self-assessment and the observations of accreditation teams for academic programs and monitoring their implementation.

4. Members of the Committee

The Rector	Head
Vice Rectors	Co-Head
Dean of Academic Development	Reporter
All deans and Deanships	Members

6.4.2 The Quality Assurance Committee

The **Committee on Quality Assurance** is to provide advice to the dean of the faculty concerned with regard to overall feedback on self-study report. The Commission should review the documents submitted, and provide advice and guidance to the committees of academic programs to take action or the necessary corrections before proceeding to accreditation or self-study.

The Quality Assurance Committee's functions:

1. Follow up the plan of assessment and accreditation.
3. Review the self-study report and the documents required for accreditation of academic programs.
4. Provide feedback on the appropriate level of documentation.
4. Ensure that the documents submitted meet the accreditation body standards.
5. Make recommendations for program improvement.
6. Review executive plans for academic programs.
7. Provide periodic reports to the Rector of the university on monitoring progress in the implementation of corrective actions and development plans for academic programs.

Members of the Committee

Dean of Academic Development	President
Vice Dean of Academic Development	Co-President
Vice Dean for Academic Development (female)	Reporter
Advisors from the Deanship of Academic Development	Members
Quality Coordinators in Colleges	Members

6.4.3 College Quality Committee

The Committee on College will report about the evaluation and accreditation for all matters related to academic accreditation and continuous improvement programs, according to local needs and international quality standards. The Committee shall provide support to the dean of the faculty in all matters related to accreditation bodies to meet the requirements. More specifically, the Committee's tasks are as following:

1. Develop and monitor accreditation and evaluation of academic programs in the college plan.
2. Planning and implementation of training and awareness programs with respect to the standards and requirements of the accreditation body.
3. Coordinate and facilitate the efforts of academic programs in the self-evaluation of the national adoption or International accreditation.
4. Ensure that documents submitted meet the accreditation bodies' standards and requirements.
5. Review and monitoring of academic programs within the college based on the results of self-evaluation and recommendations of the accreditation bodies implementation plans.
6. Make recommendations for program improvement.

7.

Members of the Committee:

Dean of the College concerned	President
Vice Dean for Quality and Academic Development	Vice President
Heads of Departments	Reporter
Quality Coordinator	Members

6.4.4 Program Quality Committee

The Program Quality Committee provides advice to the Head of the Academic Division on all matters relating to the accreditation and evaluation of academic programs and related matters with a view to improving the quality of academic programs and teaching and learning methodologies.

Program Quality Committee's tasks:

1. Ensure that the program complies with the quality standards of accreditation bodies.
2. The preparation of self-study to meet the accreditation body standards report.
3. Ensuring the availability of the required documents and files, review of decisions based on the accreditation body requirements.
4. Collecting, reviewing and interpreting the program calendar or recommendations of the accreditation.
5. Recommending improvements to the programs section and propose amendments as appropriate.
6. The preparation of the implementation of the program based on the recommendations or results of the evaluation and accreditation activities plan.
7. Prepare an annual report highlighting the achievements regarding the procedures in the implementation, and propose corrective action plan if necessary.

Members of the Committee

Head of Section concerned	Head
Quality Coordinator for the Department	Co-Head
Members of the department appointed by the head of department.	Members

6.5 RESPONSIBILITY, ACCOUNTABILITY AND COMMUNICATION

6.5.1 RESPONSIBILITY AND ACCOUNTABILITY

Governing Board of JU will identify and inform the job terms and responsibility for all JU staff through JU organizational structure and list of latest job descriptions.

6.5.2 DEANSHIP OF ACADEMIC DEVELOPMENT

GB will appoint a Quality Officer from a senior faculty member to be responsible for quality assurance and accreditation, strategic planning implementation and KPI usage to measure and benchmark results. The Dean of Academic Development's responsibilities:-

- a) To implement and revise JU Quality Management System, QMS

- b) To ensure enough resources for the implementation of QMS;
- c) To report to GB on QMS progress updates;
- d) To ensure all staff of JU are aware of the stakeholders' needs and expectations to ensure continuous improvement of the QMS;
- e) To be responsible as communication officer to liaise with external parties related to quality and assurance.

6.5.3 INTERNAL COMMUNICATION

GB of JU will ensure effective internal communication through:-

- GB meeting
- Quality Council meeting
- Senior management meeting
- Fixed council of JU meeting
- DAD Advisory Council meeting
- Self-Study (NCAAA) Committee
- Awareness sessions
- Internal memo from DAD
- Internal memo from Vice Rector for Quality and Entrepreneurship
- JU website
- DAD's portal
- Electronic Quality Management System (EQMS) portal
- Training Management System (TMS) at DAD portal

Communication channels for quality assurance will be supported and endorsed by JU media and public relations department.

6.6 Quality Management Responsibility of the Rector

Managing quality in a university is quite a challenging task for a Rector of a university. His efforts will be reflected in the quality of graduates the university is going to produce. Ensuring quality is top-notch or at acceptable levels to the standard requested by statutory body concerned should be the main concern and endeavor in implementing the education for the public. Let us explore some of the main responsibilities of the rector and vice rectors in ensuring that an acceptable level of quality in education is maintained.

6.6.1 Responsibilities:

The responsibilities of the Rector in managing quality include mainly, but not limited, to the following areas:

1. Planning process
2. Implementation
3. Review/ Evaluation /Assessment
4. Improvement plan
5. Plan for accreditation and renew accreditation

1. Planning Process:

In the planning process, the following factors are to be taken care of:

- **Good practices** – he must ask what are the good practices he wants to carry out in his quality endeavors.
- **Policies involved** – he must know what are the policies involved in carrying out activities of high quality.

- **Procedures and Guidelines** – he must understand what are the procedures and guidelines that need to be followed to fulfill the requirements of high-quality activities.
- **Work Flowcharts** – he must know what are the flowcharts of activities involved in fulfilling quality requirements.
- **Benchmarking and Key Performance Indicators** – he must know what benchmarks does he have to use and what are the Key Performance Indicators to measure the performance.
- **Schedule of Quality Practices** – he must also ask how he should schedule to implement quality practices.

2. Implementation:

In the implementation stage, he should adhere to the following set of requirements:

- **Follow the schedule:** he must follow the schedule of activities that have been determined earlier on so that everything he has planned will be executed.
- **Follow the quality plan activities:** he must also follow diligently all activities that are related to quality that have been planned.
- **Report the activities:** he must report all activities that are related to quality that he has done accordingly.
- **Conduct surveys as planned:** finally, at the implementation stage, he must conduct the surveys related to quality practices which he had planned earlier.

3. Review/ Evaluation/ Assessment

In the review, evaluation or assessment stage, he has to be concerned on the following factors:

- **Policy on Review/ Evaluation/ Assessment:** he must understand the policy on how to review, evaluate or assess quality practices that he is going to undertake.
- **Guidelines, rubrics on evaluation (star rating):** in order to evaluate properly, he must understand thoroughly the guidelines or rubrics that are related to quality practices.
- **Schedule on evaluation and review (institutional or program):** he must also set a proper schedule to evaluate and review quality practices that he undertakes whether at institutional or program levels.

4. Improvement Plan

In the improvement plan, the Rector can't avoid to consider the following factors:

- **Report on improvement plan:** a report on how to improve the quality practices must also be included in the quality practices.
- **Plan of action:** he must also list down all our plans of action in his effort to improve the current situation.

5. Plan for Accreditation

For a smooth plan for accreditation, he must ensure the following is followed carefully:

- **External audit (JU or other accreditation body):** he must also have specific audit plan in JU or from other accreditation body to acquire accreditation.

6.7 Quality Management Responsibility of the Vice Rectors

6.7.1 Vice Rector (Administration) Office

The Vice Rector (administration) also has big responsibility in handling quality issues in the university. He has vital roles to play in ensuring all administrative matters are managed well so that the university runs smoothly and efficiently.

6.7.1.1 Responsibilities of Vice Rector (Administration):

The responsibilities of Vice Rector (Administration) include the following:

1. Planning process
2. Implementation
3. Review/ evaluation/ assessment
4. Plan for Improvement
5. Plan for accreditation

1. Planning Process

- **Good practices:** the Vice Rector (Administration) must make sure the planning processes are carried out properly and according to the high international standards.
- **Policies involved:** the Vice Rector (Administration) must make sure the policies used in the guidelines of the activities are of high standards.
- **Procedures and guidelines:** the Vice Rector (Administration) must make sure the administrative procedures and guidelines are based on best practices available.
- **Work flowcharts:** the Vice Rector (Administration) must make sure the work flowcharts are carried out with clear guidelines and procedures.
- **Benchmarking and Key Performance Indicators:** the Vice Rector (Administration) must make sure the benchmarking and Key Performance Indicators are in line with the standards used by effective organizations.
- **Schedule of quality practices:** the Vice Rector (Administration) must make sure the schedule to carry out quality practices is planned thoroughly and according to the planned activities.

2. Implementation

- **Follow the schedule:** the Vice Rector (Administration) must make sure all activities are carried out according to the planned schedule.
- **Follow the quality plan activities:** the Vice Rector (Administration) must make sure all activities are carried out according to quality plan.
- **Report the activities:** the Vice Rector (Administration) must make sure the activities are reported accordingly, from time to time.
- **Conduct surveys as planned:** the Vice Rector (Administration) must make sure there are groups of people who take the responsibility to conduct appropriate surveys on all activities that take place in the organization.

3. Review/ Evaluation/ Assessment

- **Policy on review/ evaluation/ assessment:** the Vice Rector (Administration) must make sure the organization follow all policy on review/ evaluation/ assessment.
- **Guidelines, rubrics on evaluation (star rating):** the Vice Rector (Administration) must make sure the evaluation of activities are carried out according to the guidelines established and the rubrics formulated.
- **Schedule on evaluation and review (institutional or program):** the Vice Rector (Administration) must make sure evaluation and review on the institution or program take place according to the planned schedule.

4. Improvement Plan

- **Report on improvement plans:** the Vice Rector (Administration) must make sure someone is responsible in providing report on improvement plans of the organizational activities.
- **Plan of action:** the Vice Rector (Administration) must make sure someone is responsible to create plan of action for the upcoming activities including improvement of results.

5. Plan for Accreditation

- **External audit (JU or other accreditation body):** the Vice Rector (Administration) must make sure external audit is carried out to gauge the effectiveness of the activities conducted in the organization.

6.7.2 Vice Rector Academic Affairs

The Vice Rector for Academic Affairs play crucial roles in planning and implementing activities that are aimed to ensure quality education takes place in the university.

6.7.2.1 Responsibilities of Vice Rector Academic Affairs

1. Planning Process

- **Good practices:** the Vice Rector Academic Affairs must make sure good practices are observed in all planning activities and processes.
- **Policies involved:** the Vice Rector Academic Affairs must make sure all activities are conducted based on appropriate policies as outlined.

- **Procedures and Guidelines:** the Vice Rector Academic Affairs must make sure all activities are conducted based on appropriate procedures and guidelines.
- **Work Flowcharts:** the Vice Rector Academic Affairs must make sure all activities follow the work flowcharts as outlined by the top management.
- **Benchmarking and Key Performance Indicators:** the Vice Rector Academic Affairs must make sure appropriate benchmarking and Key Performance Indicators are used in the quality practices.
- **Schedule of Quality Practices:** the Vice Rector Academic Affairs must make sure all activities are carried according to the schedule set earlier in the planning stages.

2. Implementation

- **Follow the schedule:** the Vice Rector Academic Affairs must make sure the implementation activities are carried out according to the schedule.
- **Follow the quality plan activities:** the Vice Rector Academic Affairs must make sure the implementation activities adhere to the overall quality plan of the organization.
- **Report the activities:** the Vice Rector Academic Affairs must make sure that someone is assigned to report the activities that have taken place.
- **Conduct surveys as planned:** the Vice Rector Academic Affairs must make sure appropriate surveys are conducted as planned to know the effectiveness of the programs conducted.

3. Review/ Evaluation/ Assessment

- **Policy on review/ evaluation/ assessment:** the Vice Rector Academic Affairs must make sure the policy on review/ evaluation/ assessment is in place accordingly.
- **Guidelines, rubrics on evaluation (star rating):** the Vice Rector Academic Affairs must make sure there are proper guidelines, rubrics used in evaluation of quality of academic programs.
- **Schedule on evaluation:** the Vice Rector Academic Affairs must make sure the schedule on evaluation was planned and carried out effectively.

4. Improvement Plan

- **Report on improvement plans:** the Vice Rector Academic Affairs must make sure report on improvement plan related to academic matters is in place and recorded properly.

- **Plan of action:** the Vice Rector Academic Affairs must make sure there is a plan of action on how to improve the quality of academic programs in the future.

5. Plan for Accreditation

- **External audit (JU or other accreditation body):** the Vice Rector Academic Affairs must make sure there is an external audit who will conduct an audit of all academic activities carried out in the organization.

6.7.3 Vice Rector Graduate Studies and Research

The Vice Rector Graduate Studies and Research plays crucial role in planning and implementing activities that are aimed to ensure quality education takes place in the university graduate studies and research.

6.7.3.1 Responsibilities of Vice Rector Graduate Studies and Research

1. Planning Process

- **Good practices:** the Vice Rector Graduate Studies and Research must make sure that the planning aspects are well thought of and executed effectively.
- **Policies involved:** the Vice Rector Graduate Studies and Research must make sure that policies involved in the planning stage are done to the best level possible.
- **Procedures and Guidelines:** the Vice Rector Graduate Studies and Research must make sure that procedures and guidelines are solidly followed and adhered to.
- **Work Flowcharts:** the Vice Rector Graduate Studies and Research must make sure that the work flowcharts are planned and executed properly.
- **Benchmarking and Key Performance Indicators:** the Vice Rector Graduate Studies and Research must make sure that all benchmarking and Key Performance Indicators are followed to their best level.
- **Schedule of Quality Practices:** the Vice Rector Graduate Studies and Research must make sure that the schedule of quality practices is executed accordingly in a timely manner and effectively.

2. Implementation

- **Follow the schedule:** the Vice Rector Graduate Studies and Research must make sure that the schedule in the implementation stage is followed effectively.
- **Follow the quality plan activities:** the Vice Rector Graduate Studies and Research must make sure that all quality plan activities are carried out accordingly.
- **Report the activities:** the Vice Rector Graduate Studies and Research must make sure that somebody will write and submit the

report of all activities that are related to graduate studies and research.

- **Conduct surveys as planned:** the Vice Rector Graduate Studies and Research must make sure that surveys be conducted continuously to know the effectiveness of the programs conducted.

3. Review/ Evaluation/ Assessment

- **Policy on review/ evaluation/ assessment:** the Vice Rector Graduate Studies and Research must make sure that the policy on review/ evaluation/ assessment is in place accordingly.
- **Guidelines, rubrics on evaluation (star rating):** the Vice Rector Graduate Studies and Research must make sure that there are proper guidelines, rubrics used in evaluation of quality of academic programs.
- **Schedule on evaluation:** the Vice Rector Graduate Studies and Research must make sure that schedule on evaluation was planned and carried out effectively.

4. Improvement Plan

- **Report on improvement plans:** the Vice Rector Graduate Studies and Research must make sure that report on improvement plan related to graduate studies and research is in place and recorded properly.
- **Plan of action:** the Vice Rector Graduate Studies and Research must make sure that there is a plan of action on how to improve the quality of graduate studies and research in the future.

5. Plan for Accreditation

- **External audit (JU or other accreditation body):** the Vice Rector Graduate Studies and Research must make sure that there is an external audit who will conduct an audit of all graduate studies and research activities carried out in the organization.

6.7.4 Vice Rector Quality and Entrepreneurship

The Vice Rector Quality and Entrepreneurship plays crucial role in planning and implementing activities that are aimed to oversee and monitor quality and academic development activities take place in the university at all levels.

6.7.4.1 Responsibilities of Vice Rector Quality Entrepreneurship

1. Planning Process

- **Good practices:** The Vice Rector Quality and Academic Development must make sure that the planning aspects on quality and academic development are well thought of and executed effectively.

- **Policies involved:** The Vice Rector Quality and Academic Development must make sure that policies involved in the planning stage are done to the best level possible.
- **Procedures and Guidelines:** The Vice Rector Quality and Academic Development must make sure that procedures and guidelines are solidly followed and adhered to.
- **Work Flowcharts:** The Vice Rector Quality and Academic Development must make sure that all activities follow the work flowcharts as outlined/ planned by the top management.
- **Benchmarking and Key Performance Indicators:** The Vice Rector Quality and Academic Development must make sure that all benchmarking and Key Performance Indicators are followed/ practiced and adhered to their best level.
- **Schedule of Quality Practices:** The Vice Rector Quality and Academic Development must make sure that the schedule of quality practices are executed accordingly in a timely manner and effectively.

2. Implementation

- **Follow the schedule:** The Vice Rector Quality and Academic Development must make sure that the schedule in the implementation stage is carried out effectively.
- **Follow the quality plan activities:** The Vice Rector Quality and Academic Development must make sure that all quality plan activities are carried out accordingly.
- **Report the activities:** The Vice Rector Quality and Academic Development must make sure that somebody will write and submit the report of all activities that are related to quality and academic development..
- **Conduct surveys as planned:** The Vice Rector Quality and Academic Development must make sure that surveys be conducted continuously to know the effectiveness of the academic development carried out.

3. Review/ Evaluation/ Assessment

- **Policy on review/ evaluation/ assessment:** The Vice Rector Quality and Academic Development must make sure that the policy on review/ evaluation/ assessment is in place accordingly.
- **Guidelines, rubrics on evaluation (star rating):** The Vice Rector Quality and Academic Development must make sure that there are proper guidelines, rubrics used in the evaluation of quality of academic development and programs.
- **Schedule on evaluation and review (institutional or program):** The Vice Rector Quality and Academic Development must make sure that schedule on evaluation (institutional or program) was planned and carried out effectively.

4. Improvement Plan

- **Report on improvement plans:** The Vice Rector Quality and Academic Development must make sure that report on improvement plan related to quality and academic development is in place and recorded properly.
- **Plan of action:** The Vice Rector Quality and Academic Development must make sure that there is a plan of action on how to improve the quality of education and academic development in the future.

5. Plan for Accreditation

- **External audit (JU or other accreditation body):** The Vice Rector Quality and Entrepreneurship must make sure that there is an external audit for the purpose of accreditation who will conduct an audit of all quality and academic development activities carried out in the organization.

6.8 QMS REVISION

6.8.1 INTRODUCTION

Quality Council of JU will revise JU QMS periodically either through GB meeting, University Council meeting or University Quality Council meeting or any other meeting involving JU top management.

6.8.2 QMS REVIEW INPUTS

The review will get input from these sources:-

- a) JU Annual Report
- b) JU Internal Annual Financial Audit Report
- c) Self-Study Report (Institutional)
- d) Improvement activities
- e) Previous QMS revision meeting file
- f) Inputs from stakeholders
- g) Inputs from general public
- h) Survey results

6.8.3 QMS OUTPUTS

QMS review results will be used to improve:-

- a) QMS processes and its effectiveness.
- b) Need and wants of the stakeholders.
- c) Resources planning and utilization (human resources and infrastructures).

6.9 SELF-STUDY

6.9.1 INTRODUCTION

An institutional self-study is a comprehensive review of the quality of all aspects of an institution's activities. It is a central component of the internal quality assurance system, but also serves as the primary focus of external reviews by the Commission. For a new institution, a periodic self-study should be carried out immediately after the graduation of the first group of students, and prior to the Commission's external review for full accreditation.

After these initial institutional external reviews have been carried out by the Commission, further external reviews will be conducted every five years and an institutional self-study should be undertaken in preparation for each of those reviews. While an institutional self-study should be comprehensive and should consider the eleven specified standards as criteria for evaluation, it should have a focus relating to the institution's mission and priorities. Particular attention should be given to what had been identified as priorities for planning and development at the beginning of the review period and progress made in dealing with those priorities, and to any current priorities and activities that the governing body or the senior administration believes should be given special attention.

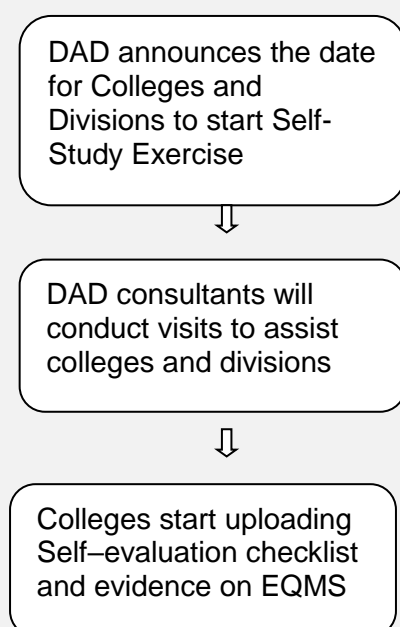
6.9.2 SELF-STUDY REPORT (SSR)

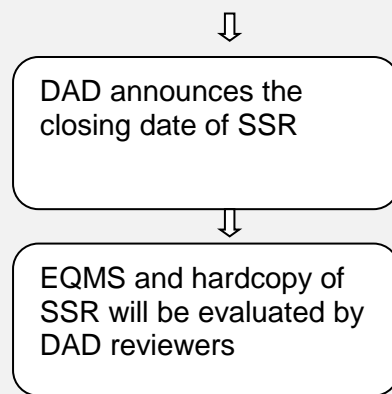
Basically 3 periodic SSR will be conducted:

- Divisional review that represent each standard, for example standard 1, 2, 3, DAD will audit the GB, Rector's unit and Vice Rector for Quality and Academic Development
- Program Audit and College Audit
- Annual Institutional Self-Study

DAD will enforce every Division and College to conduct periodic/ annual self-study exercise and submit the reports according to NCAAA SSR templates manually and electronically via EQMS, including evidence uploading on the system. DAD will conduct an annual institutional self-study by initiating various committees, specially selected members from the administration and colleges.

6.9.2.1 COLLEGE AND DIVISIONAL ANNUAL SELF-STUDY EXERCISE FLOWCHART





6.9.2.1.1 Self Evaluation Scales for Higher Education Programs (SESp)

These self-evaluation scales are intended to provide guidance to program administrators and staff in higher education institutions in their planning, self-review, and quality improvement strategies. Evaluations of quality in post-secondary education are made with reference to generally accepted standards of good practice that serve as criteria for evaluative judgments. This document draws attention to practices that are commonly followed in high quality institutions and adapted to the particular circumstances of higher education in the Kingdom of Saudi Arabia. The scales call for responses to indicate if those practices are followed and if so how well this is done (See Appendix 2).

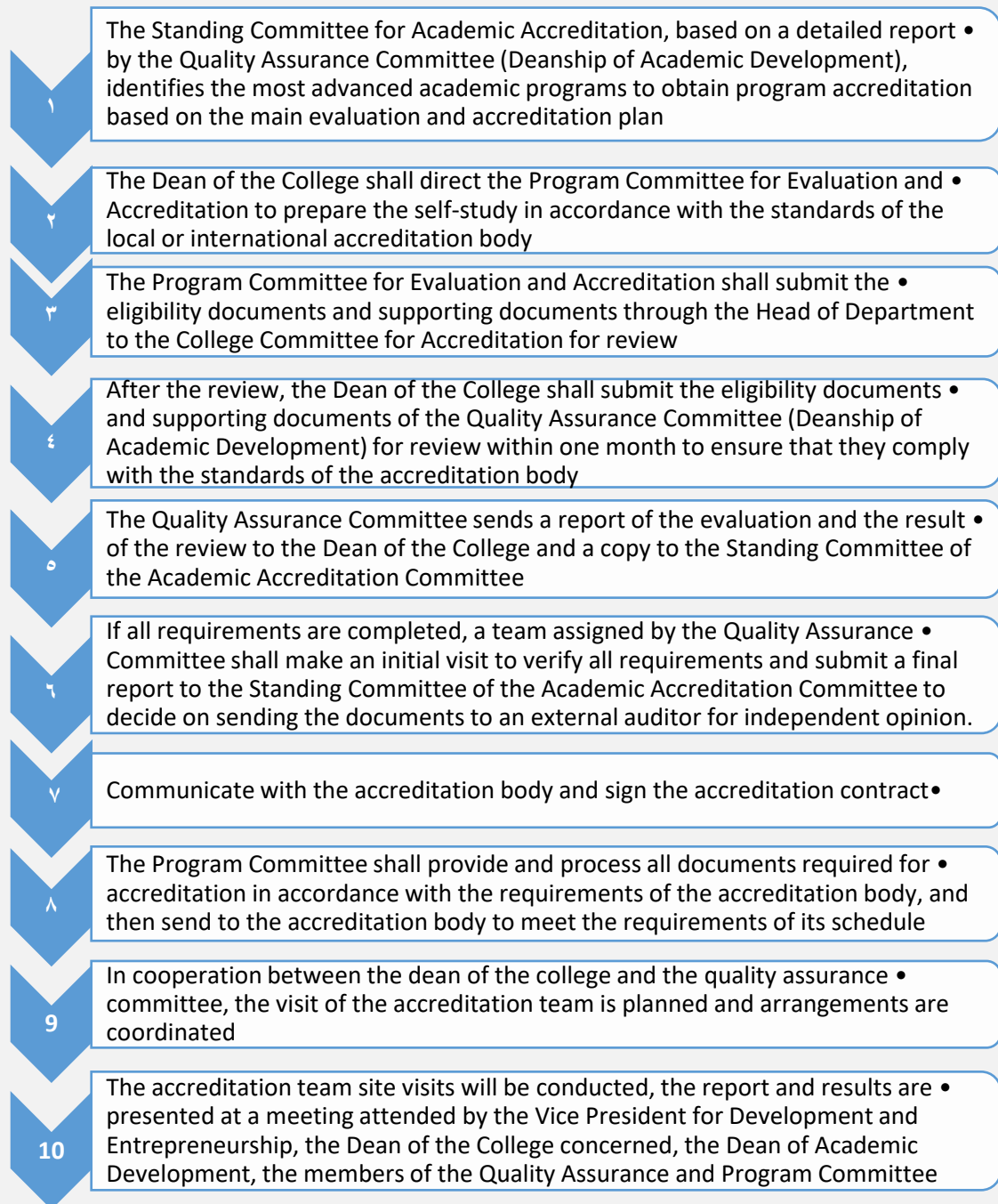
6.9.2.1.2 Program Self-Study Report (SSRp)

A program self-study is a thorough examination of the quality of a program. The mission and objectives of the program and the extent to which they are being achieved are thoroughly analysed according to the standards for quality assurance and accreditation defined by the NCAAA.

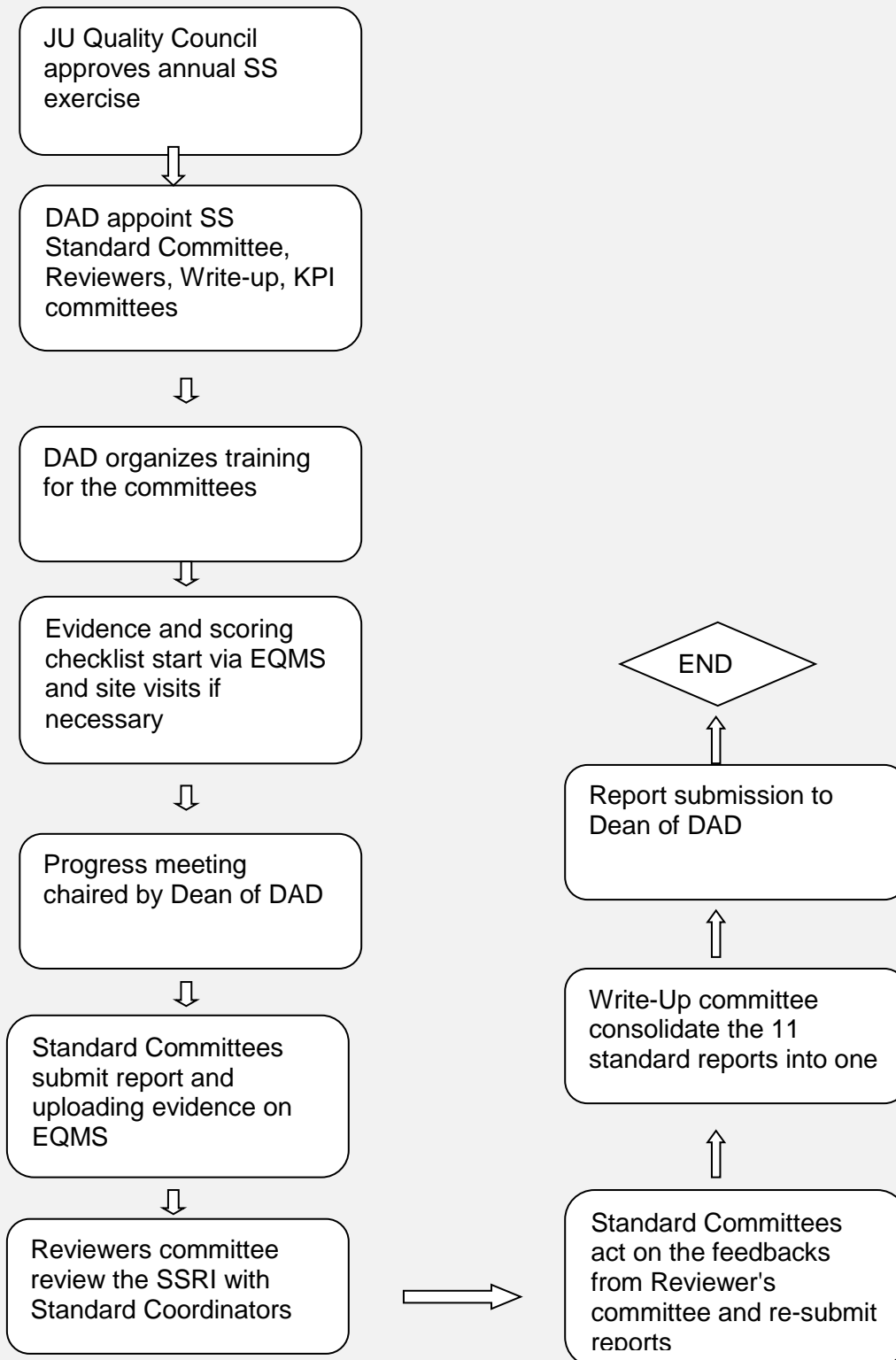
A Self-Study Report for Programs (SSRP) should be considered as a research report on the quality of the program. It should include sufficient information to inform a reader who is unfamiliar with the program about the process of investigation and the evidence on which conclusions are based to have reasonable confidence that those conclusions are sound. Conclusions should be supported by evidence, with verification of analysis and advice from others able to offer informed and independent comments. This SSRP should include all the necessary information for it to be read as a complete self-contained report on the quality of the program (See Appendix 3).

6.9.2.1.3 Program Eligibility form the requirements for program accreditation (See Appendix 4).

6.9.2.1.4 Program Accreditation steps



6.9.2.2 INSTITUTIONAL SELF-STUDY FLOWCHART



6.9.2.2.1 Institution Self-Evaluation Scale (SESi)

High quality standards can only be achieved by honest evaluation of performance and commitment to improve, and by action planned and taken throughout an institution. In recognition of this, faculty and staff responsible for various activities should evaluate their own performance in comparison with generally accepted standards of good practice. Every effort should be made to form valid and reliable judgments based on evidence. However a number of these evaluations will involve subjective judgments and to avoid an illusion of precision and discourage a misleading aggregation of total numbers in a single “quality score” it is recommended that a starring system be used for rating these quality evaluations.

It is expected that these self evaluation scales will be used by institutions, and by those responsible for programs in their initial quality assessment, their continuing monitoring of performance, and in their more extensive periodic self studies prior to an accreditation review by the Commission (See Appendix 5).

6.9.2.2.2 Institution Self-Study Report (SSRi)

An institutional self-study is a thorough examination of the quality of an institution. The mission and objectives of the institution and the extent to which they are being achieved are thoroughly analyzed according to the standards for quality assurance and accreditation defined by the NCAAA. A Self Study Report for the Institution (SSRI) should be considered as a research report on the quality of the institution. It should include sufficient profile information to inform a reader about the process of investigation and the evidence on which conclusions are based to have reasonable confidence that those conclusions are sound. Conclusions should be supported by evidence, with verification of analysis and advice from others able to offer informed and independent comments.

This SSRI should include all the necessary information for it to be read as a complete self contained report on the quality of the institution. The SSRI template includes sections, headings, and tables to assist in preparing the report. Throughout the report evidence should be presented in tables or other forms of data presentation to support conclusions, with comparative data and reference made to other reports or surveys (See Appendix 6).

6.9.2.2.3 Institution Eligibility Form

The process for accreditation of an institution involves a rigorous self evaluation in relation to the eleven standards specified by the NCAAA, followed by an independent external review. In that external review, a panel of experts will verify the conclusions of the institution’s self evaluation and consider the quality of performance in relation to the NCAAA standards.

Before this process begins, the NCAAA must be satisfied that certain requirements are met. These requirements relate to core elements in the standards for quality assurance and accreditation, and in compliance with the terms and conditions of its official approval or for a private institution, its license to operate (See Appendix 7).

6.9.3 JU KPI's

The list of JU KPI's and their level include 33 KPIs of NCAAA, 2015, in addition to 9 KPIs from the JU Strategic Plan: Vision 2020, is shown below:

1. 33 KPIs of NCAAA (Nov. 2015):

NCAAA Standards	KPI Code	Key Performance Indicators	Level
(1) Mission &	S1.1	1- Stakeholders' awareness ratings of	• Program

NCAAA Standards	KPI Code	Key Performance Indicators	Level
Objectives		the Mission Statement and Objectives (Average rating on how well the mission is known to teaching staff, and undergraduate and graduate students, respectively, on a five- point scale in an annual survey).	<ul style="list-style-type: none"> • College • Institution
(2) Governance & Administration	S2.1	2- Stakeholder evaluation of the Policy Handbook, including administrative flow chart and job responsibilities (Average rating on the adequacy of the Policy Handbook on a five- point scale in an annual survey of teaching staff and final year students).	<ul style="list-style-type: none"> • Program • College • Institution
(3) Management of Quality Assurance and Improvement	S3.1	3- Students' overall evaluation on the quality of their learning experiences. (Average rating of the overall quality on a five point scale in an annual survey of final year students.)	<ul style="list-style-type: none"> • Institution • College • Program
	S3.2	4- Proportion of courses in which student evaluations were conducted during the year.	<ul style="list-style-type: none"> • Institution • College • Program
	S3.3	5- Proportion of programs in which there was an independent verification, within the institution, of standards of student achievement during the year.	<ul style="list-style-type: none"> • Institution • College
	S3.4	6- Proportion of programs in which there was an independent verification of standards of student achievement by people (evaluators) external to the institution during the year.	<ul style="list-style-type: none"> • Institution • College
(4) Learning and Teaching	S4.1	7- Ratio of students to teaching staff. (Based on full time equivalents)	<ul style="list-style-type: none"> • Institution • College • Program Separate data for male and female sections and combined for all.
	S4.2	8- Students overall rating on the quality of their courses. (Average rating of students on a five point scale on overall evaluation of courses.)	
	S4.3	9- Proportion of teaching staff with verified doctoral qualifications.	
	S4.4	Retention Rate; 10- Percentage of students entering programs who successfully complete first year.	
	S4.5	11- Proportion of students entering undergraduate programs who complete those programs in minimum time.	

NCAAA Standards	KPI Code	Key Performance Indicators	Level
	S4.6	Graduation Rates for Post Graduate Students: 12- Proportion of students entering post graduate programs who complete those programs in specified time.	
	S4.7	13- Proportion of graduates from undergraduate programs who within six months of graduation are: (a) Employed. (b) Enrolled in further study. (c) Not seeking employment or further.	
(5) Student Administration and Support Services	S5.1	14- Ratio of students to administrative staff.	• Institution
	S5.2	15- Proportion of total operating funds (other than accommodation and student allowances) allocated to provision of student services.	• Institution
	S5.3	16- Student evaluation of academic and career counseling. (Average rating on the adequacy of academic and career counseling on a five-point scale in an annual survey of final year students.)	• Institution • College • Program
(6) Learning Resources	S6.1	17- Stakeholder evaluation of library and media center. (Average overall rating of the adequacy of the library & media center, including: a) Staff assistance, b) Current and up-to-date, c) Copy & print facilities, d) Functionality of equipment, e) Atmosphere or climate for studying, f) Availability of study sites, g) Any other quality indicators of service on a five- point scale of an annual survey.)	• Institution • College • Program Separate data for male and female sections and combined for all.
	S6.2	18- Number of web site publication and journal subscriptions as a proportion of the number of programs offered.	• Institution • College
	S6.3	19- Stakeholder evaluation of the digital library. (Average overall rating of the adequacy of the digital library, including: a) User friendly website, b) Availability of the digital databases, c) Accessibility for users, d) Library skill training and e) Any other quality indicators of service on a five- point scale of an annual	• Institution • College • Program Separate data for male and female sections and combined for all.

NCAAA Standards	KPI Code	Key Performance Indicators	Level
		survey.)	
(7) Facilities and Equipment.	S7.1	20- Annual expenditure on IT budget, including: a) Percentage of the total Institution, or College, or Program budget allocated for IT; b) Percentage of IT budget allocated per program for institutional or per student for programmatic; c) Percentage of IT budget allocated for software licenses; d) Percentage of IT budget allocated for IT security; e) Percentage of IT budget allocated for IT maintenance.	<ul style="list-style-type: none"> • Institution • College • Program
	S7.2	21- Stakeholder evaluation of the IT services (Average overall rating of the adequacy of on a five- point scale of an annual survey). a) IT availability, b) Website, c) E-learning services, d) IT Security, e) Maintenance (hardware & software), f) Accessibility, g) Support systems, h) Hardware, software & up-dates, and Web-based electronic data management system or electronic resources (for example: institutional website providing resource sharing, networking & relevant information, including e-learning, interactive learning & teaching between students & faculty).	<ul style="list-style-type: none"> • Institution • College • Program Separate data for male and female sections and combined for all.
	S7.3	22- Stakeholder evaluation of facilities & equipment: a) Classrooms, b) Laboratories, c) Bathrooms (cleanliness & maintenance), d) Campus security, e) Parking & access, f) Safety (first aide, fire extinguishers & alarm systems, secure chemicals), g) Access for those with disabilities or handicaps (ramps, lifts, bathroom furnishings), h) Sporting facilities & equipment.	<ul style="list-style-type: none"> • Institution • College • Program

NCAAA Standards	KPI Code	Key Performance Indicators	Level
(8) Financial Planning and Management	S8.1	23- Total operating expenditure (other than accommodation and student allowances) per student.	<ul style="list-style-type: none"> • Institution
(9) Faculty and Staff Employment Processes	S9.1	24- Proportion of teaching staff leaving the institution in the past year for reasons other than age retirement.	<ul style="list-style-type: none"> • Institution • College • Program
	S9.2	25- Proportion of teaching staff participating in professional development activities during the past year.	<ul style="list-style-type: none"> • Institution • College • Program
(10) Research	S10.1	26- Number of refereed publications in the previous year per full time equivalent teaching staff. (Publications based on the formula in the Higher Council Bylaw excluding conference presentations)	<ul style="list-style-type: none"> • Institution • College • Program
	S10.2	27- Number of citations in refereed journals in the previous year per full time equivalent faculty members.	<ul style="list-style-type: none"> • Institution • College • Program
	S10.3	28- Proportion of full time member of teaching staff with at least one refereed publication during the previous year.	<ul style="list-style-type: none"> • Institution • College • Program
	S10.4	29- Number of papers or reports presented at academic conferences during the past year per full time equivalent faculty members.	<ul style="list-style-type: none"> • Institution • College • Program
	S10.5	30- Research income from external sources in the past year as a proportion of the number of full time faculty members.	<ul style="list-style-type: none"> • Institution • College • Program
	S10.6	31- Proportion of the total, annual operational budget dedicated to research.	<ul style="list-style-type: none"> • Institution
(11) Community Service	S11.1	32- Proportion of full time teaching and other staff actively engaged in community service activities.	<ul style="list-style-type: none"> • Institution • College • Program
	S11.2	33- Number of community education programs provided as a proportion of the number of departments.	<ul style="list-style-type: none"> • Institution • College

2. 9 KPIs out of 16 from the JU Strategic Plan - Vision 2020:

JU Strategic Direction	KPI Code	Suggested KPIs in the JU Strategic Plan 2020
Building World Class Management	SP1.1	1. Effectiveness of leadership communication.
	SP1.2	2. Average processing time for administrative procedures.
	SP1.3	3. Percentage of faculty and staff filing

		electronic forms.
	SP1.4	4. Faculty satisfaction with administration.
Achieving Intellectual Excellence	SP2.1	5. Percentage of students participating in extracurricular activities.
	SP2.2	6. Number of international partnerships.
Delivering Social and Economic Impacts	SP3.1	7. Number of external advisory committees for colleges and research.
	SP3.2	8. Employer satisfaction with graduates.
	SP3.3	9. Graduates employed as % of graduating class.

6.9.4 QUALITY IMPROVEMENT INITIATIVES

DAD must do the following:

- Must establish dynamic policies, procedures and mechanisms for regular reviewing of its structures, functions, strategy and core activities to assure quality assurance and accreditation initiatives.
- Must provide evidence of review/ self-study system, the result of conducted review and action plan to implement changes and improvements.
- Must show strong correlation between quality assurance and KPIs performance.
- Quality improvements should be based on studies and data based information that lead to the revisions of policies, process and best practices of QMS adopted.

CHAPTER 7

7.0: QUALITY MANAGEMENT SYSTEM IN JU ACADEMIC PROGRAMS

7.1 PROGRAM STANDARDS AND QUALITY

7.1.1 Program Planning and Design

All programs at JU provide a coordinated package of learning experiences within which all components contribute to the learning expected of students. A program includes all of the courses a student is required to take in order to qualify for a designated award. It is not simply a collection of separate courses taught in isolation from each other. Each course should complement and reinforce what is taught in others by accurate mapping of all the program intended learning outcomes to the courses offered. All programs need to be prepared clearly reflecting the goals and learning outcomes, ensuring that the learning are delivered by the courses included within the program. This means that each course must be planned as part of the total program package and delivered as approved. All current courses need to be reviewed to ensure the totality of the courses is mapped against the program aims and outcomes.

Program planning is important in ensuring the range of programs offered by the university matches its strategic plans and the needs of the Kingdom. Program design, development and approval are important for setting programs at an appropriate academic standard. Explicit consideration should be given to relevant external reference points and benchmarks, demonstrating comparison of standards with nationally and internationally accepted institutions and organizations. Adaptation of any international standards needs to respect the NCAAA's Standards for Quality Assurance and Accreditation of Higher Education Programs, the National Qualifications Framework and any relevant national and international professional bodies, such as societies, commissions, committees, etc.

Proposed new programs are considered within a college for planning approval in the light of both academic and planning criteria, including the consideration of the resource implications for any proposal, and the inputs of different stakeholders. The meetings need to be structured and objective to help in program improvement, with clear decisions as an outcome including any recommendations for change to the proposals. Program planning proposals need to be later presented to the higher authorities. The process of scrutiny to arrive at a decision on approval to proceed with the development of a program shall consider the University and College strategic plans and their relation to their main goals. Final program planning agreement is given by the Standing Committee for Study Plans and Curricula, which will be approved by the University Council.

Once the program design is completed by the program design team, the process of scrutiny to arrive at a decision on approving a program needs to be authorized through the cycle of Department Council (where it exists), College Study Plans and Curriculum Committee, College Council and the University Standing Committee for Study Plans before being sent to the University Council of Jazan University. This has the ultimate authority to approve any academic provision within the University, before being sent to the Supreme Council of the Ministry of Education to give its approval.

7.1.2 Major changes

There are 2 types of major changes which are as following:

A. Changes to a key component of a program: This will typically, but not exclusively, involve a change to one or more of the following components of a program:

- Overall aims and program learning outcomes.
- Award designation or title(s), program duration and mode(s) of study.

- Regulations for the admission of students.
- Assessment regulations for the program and/ or regulations for progression through the program.
- A significant addition to the resources required.
- The overall scope and structure of the program, for example the addition of new pathways, interments, changes to the core/ elective mix.
- Pre-requisites and post-requisites.

B. Changes affecting more than 10 credit units in any level: This primarily relates to the approval of new courses and modifications to existing courses that do not come under the category of minor changes.

For either type of major change, appropriate documentation needs to be approved by VPAA who will present them to the University Standing Committee for Study Plans and Curriculum before being sent to the University Council of Jazan University for the final decision and approval.

7.1.3 Minor changes

Minor changes to course specifications are included in this category. It allows small adjustments to be made relatively easily in recognition of the dynamic nature of successful programs which develop and evolve. Minor changes that may be approved under this category include:

- Course content updating as long as aims and learning outcomes are not affected.
- Teaching and learning methods.
- Increase or modify allocated teaching and learning time to help the students.
- Assessment weighing.
- Changes in the endorsed textbooks.

To make such minor changes to courses, appropriate documentation needs to be submitted. The change proposals should have support from the external advisor associated with the program (if appointed). The documentation will comprise as a minimum:

- A paper setting out the rationale for the change(s).
- Updated course specification.

7.1.4 Program Closure

The authority to remove a program or course rests with University Council, acting on the advice of the University Standing Committee for Study Plans and Curriculum. Normally, such recommendations arise from one of the following situations:

- Failure to recruit sufficient students to ensure viability.
- Failure to deliver a program of acceptable academic standards.
- Change in the College's Strategic direction.
- Failure of the program to remain current or relevant.

7.1.5 Program and Course Annual Monitoring and Reporting

Program and course annual monitoring is a continuous process by which a program and its constituent Courses are kept under review. After each semester Course Reports and Field Experience Reports will be produced and considered by College Study Plans and Curriculum Committee (C-SPCC). At the end of the academic year, the Program Report is also written for consideration by C-SPCC. Combined, these reporting processes make an overall annual program and course monitoring reporting process which underpins the effective operation of the program. Student feedback is particularly important and the University uses the NCAA Course Evaluation Survey and Student Experience Survey to inform the monitoring processes. It is an inclusive

process involving the program leader and all staff teaching on the program, student feedback and independent advice (including inputs from the Program or College Advisory Committee).

Figure 7.1 shows the continuous quality improvement cycle and how the process is reflective by collecting evidence and looking at course reports, analyzing the issues and evidence and comparing the program performance against the key performance indicators or target benchmarks for the subject area. This should lead to program improvements. Hence, annual monitoring of programs and courses is the cornerstone of the quality assurance processes, and leads to a review of every program's currency, ensuring the continuing relevance, appropriateness and success of the award and student experience. The aims of annual program and course reporting are:

- To evaluate the statistical information on student recruitment, grades, progression and completion;
- To consider and respond to inputs and feedback from students, and if appropriate external agents such as professional and accreditation bodies;
- To reflect on the learning, teaching and assessments strategies deployed, and consider any recommendations for change;
- To review the appropriateness and effectiveness of the learning outcomes in securing the program aims and objectives;
- To recommend changes for improving the student learning experience or curriculum content.

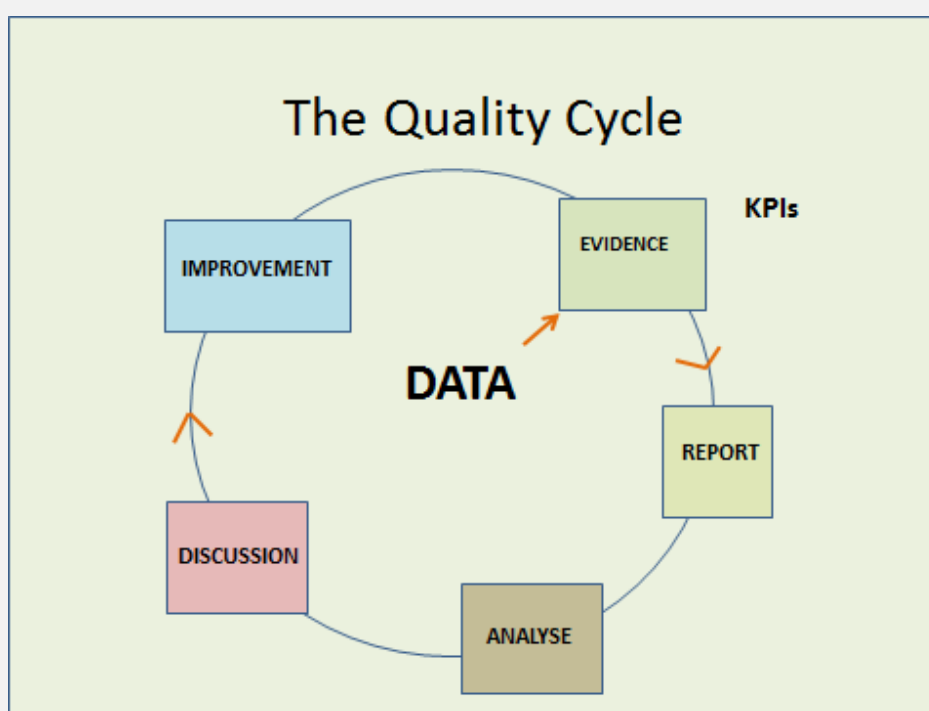


Figure 7.1 The continuous quality improvement cycle

7.1.6 Periodic Program Review

A Periodic Program Review (PPR) is a thorough examination of the quality and standards of a program. All programs will have had experience of annual monitoring and the production of annual program and course reports. The PPR examines the program in greater depth, re-evaluating the need for it, checking on how effectively it is achieving its mission and objectives, and considering any changes which need to be made. In particular, an in-depth review of how the subject area has developed since the last program approval event provides an opportunity to update the program content, including the balance of courses offered. A PPR can be undertaken at any time but to coincide with the requirements for program re-accreditation by the NCAAA – one should be undertaken in the fourth year after its initial accreditation, and after that, on a five year

cycle. In this way the PPR report can become the basic resource for the external review for re-accreditation of a program.

A PPR report should be considered as a well-structured document on the quality of the program. It is primarily produced for the University itself as an important part of the process for quality assurance and improvement. It should include sufficient information to inform a reader who is unfamiliar with the University about the procedures followed and the evidence on which conclusions are based to have reasonable confidence that those conclusions are sound. It should be capable of being read as a complete self-contained report on the quality of the program.

The combination of annual monitoring and PPR are designed to ensure that all programs remain current and do not become dated. Figure 7.2 is the NCAAA representation of the combined activity. A PPR should take due account of any professional standards relevant to the program as well as the standards for quality assurance and accreditation defined by the NCAAA including the National Qualifications Frameworks.

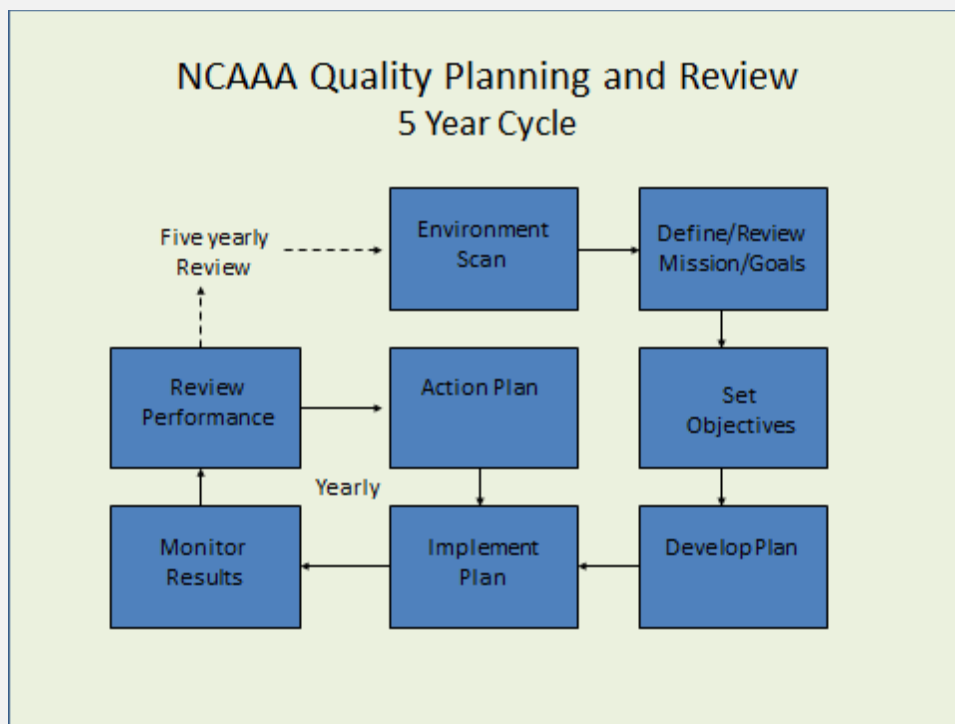


Figure 7.2 NCAAA representation of the combined annual monitoring and PPR

7.1.7 Content of the report

The report should follow the format provided by the NCAAA on Periodic Program Self Study. In this way the University's PPR process will mirror that being used by the regulatory authority and can be used in any subsequent accreditation. All of the templates used for annual monitoring and program specification are presented by NCAAA.

The report should deal with all locations where the program is offered and the description of procedures (section B of the report) should include information about how evaluations were conducted in different locations. This is particularly important if there are different sections for male and female students. If there are significant differences between analyses or evaluations of

delivery of the program in different locations including variances in the achievements of male and female students, these should be noted, explanations offered and actions taken in response recorded.

The substance of the report will provide information to populate all sections of the template. This will include:

- General information
- Process followed
- Mission and objectives
- Program context
- Program developments
- Program evaluation
- Performance in relation to the NCAAA standards
- Review of courses
- Independent evaluation
- Conclusion and action plan

A well written report will be clearly expressed and address all sections fully. It should attempt to describe, analyze, provide evidence, offer reflection and look forward in terms of actions. In this way, the report becomes a dynamic document which both reviews quality and standards and points the way for further improvements to the program.

7.1.8 Documentation

The Self-Study Report of the Program (SSRP) and additional information should be provided in hard copy and electronic format. A list of acronyms used in the report should be provided as an appendix. The report should be accompanied by the following information:

- The program specification.
- The most recent annual program and course reports, including any external evidence.
- Completed scales from the Self-Evaluation Scales for Higher Education Programs.
- A brief summary of the outcomes of previous accreditation processes (if any) and PPRs (if any) with recommendations and subsequent actions undertaken.
- Program handbook as provided to students.

The following documentation should be available if required:

- Course specifications.
- CVs for faculty and staff teaching on the program.
- College mission and objectives.
- Student surveys.
- Employer and alumni surveys.
- Statistical data on employment of graduates from the program.
- Representative samples of student work.

7.2 REGULATIONS AND PROCEDURES

7.2.1 Admission to taught programs

The design and approval of all programs at JU includes careful setting of the entry requirements for each program. In setting those entry requirements, the University is mindful that every student will have a reasonable expectation of achieving all the intended learning outcomes of the program. The learning, teaching and assessment approach for each program will be designed to build on the achievements of students admitted to the course with the entry requirements set. Hence the admissions criteria will set the minimum academic achievements or background

understanding that needs to be demonstrated before an offer of admission to the program of study is made.

The application and admissions process at JU is managed by the Admission Department in the Deanship of Admission and Registration to ensure the effective and efficient implementation of the process. This process includes the capability of ensuring that equal opportunity policies are secured, that transfer of any credits previously gained are managed, that grant applications for non-Saudi students are accepted in accordance with the regulations and rules of the University, and that documents and certificates are checked and translated as necessary. In conjunction with the MIS and student record system, the Deanship retains accurate records of each student at all stages of their program of study.

7.2.2 Management of Prior Learning and Credit Transfer

7.2.2.1 Transfer from one University to another

It is permissible, with the consultation of the College Council which the student wishes to transfer into, that acceptance of a transfer request from outside the University may be made according to the following conditions:

- (a) That the student will have been registered in a college or university recognized by JU.
- (b) That the student has not been dismissed from the University he/ she transferred from for disciplinary or educational reasons.
- (c) That the transferred student undergoes any specific admission requirements of the College which he/ she wishes to be transferred into in the year of transfer.
- (d) The number of credit hours which the transferred student requires to study at JU must not be less than 60 per cent of the prescribed number of the credit hours required to obtain the bachelor's degree from the University.
- (e) That the student should have spent at least two semesters at the University he/ she is transferred from.
- (f) That he/ she should apply for transfer at least eight weeks before the beginning of the semester in which he/ she wishes to transfer.
- (g) If it is discovered after the transfer that the student was dismissed for disciplinary or educational reasons, his/ her registration shall be deemed null and void from the date of accepting his/ her transfer to the University.

7.2.2.2 Transfer from one College to another within the University

Transfer will be in accordance with the following guidelines:

- (a) That College admission requirements apply to the transferee in the same year of transfer.
- (b) That he/ she has spent at least two semesters at the College, seeking transfer from.
- (c) That his/ her cumulative average is not less than 2 out of 5 at the time of transfer.
- (d) That the transfer request is submitted at least six weeks before the start of the semester.
- (e) All courses which have previously been studied, including estimates and semester cumulative averages, throughout his/ her study at the University are confirmed in the academic record of the student by the College he/ she is transferring from.

7.2.2.3 Transfer from one specialization to another

In case of transfer from one specialization to another within the College, the following should be considered:

- (a) Admission requirements should be met for the specialization to which he/ she wants to transfer.
- (b) The transfer is made only once throughout the duration of the student's University study.

(c) All courses which have previously been studied, including estimates and semester cumulative averages, throughout his/ her study at the University are confirmed in the academic record of the student.

(d) A student at the College of Medicine requesting to study one of the other specializations offered by the college achieves cumulative average of not less than 3 out of 5 at the end of the first year.

(e) Any other conditions determined by the College Council.

7.2.3 Undergraduate Framework

JU has a clear academic structure to support the curriculum design, based on levels. The levels' structure also establishes the basis upon which each student's achievement can be measured and upon which progression through the program can be approved.

Typically, a level represents a semester of study. Currently an exception to this structure exists in the College of Medicine, where the structure is based on a full academic year which contributes two levels to the student's achievements. A study level is the indicator for the stage within a program's study plan.

An undergraduate program comprises a minimum of eight levels, and is delivered in a semester system. The exact number of levels for any program is specified in the study plans and program specifications. Two main semesters of 15 weeks and a summer semester or term of not more than eight weeks duration are the building blocks of the academic year, against which each college designs the study plan of every program offered. The periods of registration and final examination are not considered as a part of this period which defines a semester.

The credit hour formula is based on a numbering system in which a full time student load is 15 to 18 credit hours in a semester and 120 to 138 credit hours in a four year degree. The credit hour formula is used as a substitute for estimates of the amount of learning achieved.

In each college, the team of program and course leaders charged with the responsibility of designing a program will establish a group of compulsory, optional and free courses, which in total provide the units or credit hours required for a student to meet the regulations of JU for an award to be made. In designing the study plan, the program team will pay careful attention to the credit hours to which each course contributes. Program approval will establish an accredited study plan from which the student may select a study pathway, whilst being cognizant of any pre-requisites or co-requisites.

7.2.4 Taught Postgraduate Programs

The title of the qualification must comply with the National Qualifications Framework (NQF and the latest one SQF). Particular attention is drawn to the need to use the correct term for the qualification level concerned and the requirements for citing a field of study specialization. A qualification with the title Master must meet all the requirements for such a title in the National Qualifications Framework regardless of any differing practice in another country. Any program that does not fully satisfy these requirements will not be accredited by NCAAA.

7.2.5 Assessment principles

7.2.5.1 Assessment policy and principles

The University recognizes its responsibility to ensure the equitable treatment of all its students in assessment and to protect the standards of its awards across the range of its provision. To this end, it maintains a comprehensive assessment regime directed towards the fair and just assessment of students' performance against defined, published and externally endorsed criteria. Where

appropriate, the detailed requirements of specific assessments may be modified to meet the needs of disabled students or those with specific needs. Such special assessment requirements would be identified during the admissions stage or when the special need was first recognized.

Each program should have a varied diet of assessments designed into its courses, ranging from time-constrained examinations through to dissertations. A key element of the assessment methodology is the application of learning, and approaches which promote deep learning rather than shallow learning experiences.

7.2.5.2 Course assessment

The assessment for each course will vary according to the nature of the intended learning outcomes and how the teaching team judges these can best be assessed. The assessment is defined during program approval, and cannot be amended without re-approval of the course specification. The college-study plans and curriculum committee will actively review the balance of assessment used across the courses, to help promote the student learning whilst ensuring the intended learning outcomes are covered. An assignment must not be assessed as part of a course if the assignment has already been assessed and credit awarded as part of another course, i.e., no double-counting of credit for any item of student work.

To ensure that all students are treated with equity, it is of key importance that all staff engaged in the assessment process undertake their duties diligently and without the possibility of influence. So any member of staff involved in student assessment who has any form of relationship with any student being assessed must declare that potential conflict of interest to the Dean of College. The Dean will take such steps as is necessary to secure the integrity and equity of the assessment process. Students must also adhere to the assessment regulations.

7.2.5.3 Assessment feedback to students

The role of feedback in the learning process is to inform the student of where and how their learning and performance can be improved. Feedback on learning can come from lecturers, fellow students and staff supporting the learning processes such as demonstrators or technicians. Feedback on assessment on the quality of the students' work can be given to assessments contributing to the final grading (summative feedback), or on other non-contributing assessment to help the student improve their work in future (formative feedback). A highly individualized form of feedback sometimes used in (performing) arts, sports, design and professional disciplines takes into account the students' previous developments, and uses this as the starting point for assessing progress or improvement of skills, knowledge and competence.

7.2.5.4 Assessment and awards

7.2.5.4.1 Degree Award

The first class honors degree is granted to the student who scores an accumulative average of 4.75 to 5.00 upon graduation. The second class honors degree will be granted to the student scoring accumulative average of 4.25 to less than 4.75 upon graduation. To obtain the first and second class honors degree the following should be provided:

- (a) The student should not fail in any courses that he/ she has studied at the University or in another University.
- (b) The student should have fulfilled the requirements of graduation within a period equal to the average of the period between the minimum and maximum limit for staying in his/ her College.
- (c) The student should have studied more than 60 per cent of the program/ course graduation requirements at JU.

When the students fulfill all the requirements of the graduation and his accumulative average is less than (2), she/ he should register some courses upon the recommendation of the department council and the approval of the college council or authorized representative in order to raise their average and obtain the degree according to their study plan.

7.2.5.4.2 Graduation

The student will be graduated after fulfilling successfully the graduation requirements in accordance with the educational plan of the college provided that his accumulate average should not be less than accepted. The college council based on the recommendations from the respective department may determine suitable courses to be studied by the student for raising the accumulate average in case he passed all the courses but his accumulative average is less than the minimum.

7.2.5.4.3 Certification

The student will be granted a certificate which shows the student's full name, University number, civil record number, place and date of birth, the college, degree, specialization, grade after graduation, and the session of the University Council provided by date that issued the approval of granting the degree for the student. The certificate shall be signed by the Dean of Admission and Registration.

7.2.5.4.4 Dismissal from the University

The student will be dismissed from the University in the following cases:

- If a student receives three warnings and above for low accumulative average (2 out of 5 or 4 out of 10), and the University Council according to the recommendation of the College Council has not granted a fourth chance to the student for rising his accumulative average by studying the available courses.
- If the student has not fulfilled the graduation requirements within maximum half of the period fixed for his graduation in addition to the period of the program. The College Council may give an exceptional chance to the student for fulfilling the graduation requirements, maximum not exceeding the double of the original period fixed for graduation.
- The University Council, due to exceptional cases, may make an amendment for the students who are governed by the two previous items – a chance not exceeding two semesters.

7.2.6 Academic integrity, misconduct and appeals

7.2.6.1 Principles of Academic Integrity

What is academic integrity and why is it important?

The University is a 'learning community' within which students and staff learn from each other, from their peers and through original research. All members of the University are expected to maintain high standards of academic conduct and professional relationships based on courtesy, honesty and mutual respect. In maintaining this learning community, the concept of academic integrity is fundamental. Academic integrity means conducting all aspects of your academic life in a professional manner.

Acting with academic integrity enables students to demonstrate their own knowledge, skills and understanding of the subject and then to receive feedback to help them progress. Academic Misconduct include Plagiarism, Cheating and Falsification.

7.2.6.2 Appeals of examination results, submitted by University Students

By creating a unit to examine appeals submitted by the students, the University aims to achieve the following:

1. A homogeneous University community in the spirit of mutual cooperation among its employees.
2. Adoption of the principles of justice and equity as a backbone in building a perfect society within the University.
3. Support the rights of students on the basis of laws and regulations, applicable in the University, support the investigation of appeals and adjudicates on appeals submitted by students to further develop the culture of justice and equity among students.

7.3. RESEARCH

JU is committed to providing opportunities for students who complete their undergraduate degrees and demonstrate appropriate interest in taking their field of study to higher levels. As a result of increasing demand of post-graduate studies, JU has established an independent Deanship for Graduate Studies. The Deanship undertakes the supervision of the postgraduate studies programs in conjunction with the faculties.

The Deanship for Graduate Studies has a council for postgraduate studies. The remit of the council is to recommend and implement standard policies across postgraduate areas and to ensure the highest degree of coordination and cooperation between the University faculties and the research centers is achieved.

7.3.1 Student application

All applicants for higher degrees must submit an application in accordance with the Unified Law Organizing the Graduate Studies in Saudi Arabia. The detailed arrangements for application and acceptance, and the application process and accompanying documents required and conditions are detailed in the Unified Law. Registration will only take place following approval of the Council using the specified criteria specified in the Unified Law.

7.3.2 Scientific Research Quality Assurance

All colleges undertake the quality assurance of scientific research programs through their College Council. To undertake this responsibility effectively each college will consider the detail of the quality assurance of scientific research through a College Scientific Research Programs Committee. This Committee notes the registration and ensures ethical issues have been considered. The council within the Deanship for Graduate Studies will undertake the detailed scrutiny and overall management for the quality and standards of its postgraduate degrees, and report regularly to Academic Council.

7.3.3 College Scientific Research Programs Committee

College Scientific Research Programs Committee should be established at each college. It will be chaired by a senior member of staff from the College. The terms of reference for the College Scientific Research Programs Committee will be:

1. To offer advice, if requested, on student applications for admission to the college.
2. To note the registrations of students for research programs in the college.
3. To report, when requested, on the progress of students in the college.
4. To ensure that appropriate ethical approval is secured for each research program unless the college has an ethics committee.
5. To undertake any other task delegated to it by the College Council.
6. To contribute to an environment which supports the University's community engagement goals.
7. To monitor the performance of the College's contribution to the research KPIs set out in the JU Operational Plan, and report to the College Council at least each semester.
8. To report to the College Council, at least annually.

The College Scientific Research Programs Committee will be responsible and accountable for the operational activity required of it by the College Council and will be expected to ensure that all quality assurance activities are carried out with the required level of independence. The College Scientific Research Programs Committee will be required to conform to the University's regulations.

7.3.4 Monitoring progress of research

The progress of postgraduate students towards successful completion within approved time periods will be reviewed regularly.

The Research Supervisor is expected to manage the supervisory process such that at least one supervisor(s) is in contact with their postgraduate student as appropriate and at least once per month. A formal record of each meeting will be made and provided to (all) the supervisor(s) and student.

In addition, once per year each student and the Research Supervisor, acting on behalf of all supervisors where relevant, should complete a separate statement of progress. Each College will review each student's progress, using the supervision reports, the annual statement of progress and such other material as is available.

7.3.5 College Ethics Committee

Each Department in the College will appoint an Ethics Champion from amongst its staff (to formulate the College Ethics Committee, including ethics of scientific research). The Champion will have the following responsibilities:

- To advise the Head of the Department on any matters relating to the implementation of the University's Ethics Policy requiring his or her attention.
- To advise staff in the Department of the University's Ethics Policy.
- To arrange and deliver staff development activities to ensure the effective implementation of the University's Ethics Policy.

7.4 COMMUNITY RELATIONS

7.4.1 Community Engagement

JU defines community engagement as a two way relationship between itself and its wider community. Its mission, vision and goals stress the importance of serving the community in which it operates in its third strategic direction "Delivering social and economic impact". The University is very clear about the importance of community engagement. It reflects its approach against the NCAAAA standard 11 (Relationships with the community) at the level of the institution and programs. To deliver the program standard aspect of the NCAAAA standard 11, the University tailors its teaching, learning and research to serve community needs and seeks to use community resources for its own benefit thereby achieving mutual enrichment.

7.4.2 Policies on Community Relations

The University, through the Deanships, Colleges and appropriate Departments, seeks to be inclusive of its wider community in all of its operations. It intends to specify clearly how its staff, students, programs and courses demonstrate a commitment to the community. It strives to do this in various ways, including:

- Design and planning of programs
- Advisory committees for all programs

- Student internships and projects
- Staff appraisal and promotion criteria
- Dedicated courses and training to meet community needs
- Community relevant research
- Central data base of all community related activities

To deliver this agenda and to demonstrate the strengths of the University against NCAAA standard 11, the University includes all the above items as its institutional policy. To ensure the effective delivery and appropriate monitoring, the following procedures will be adopted:

7.4.2.1 Design and Planning of Programs

Each college study plans and curriculum committee, in designing a program or conducting a periodic review, will carefully consider the way in which the program, in the context of the broad discipline area in which the program exists, is able to make an effective contribution to community engagement. Program specifications and associated learning, teaching and assessment approach would pay specific attention to the consideration made to community engagement.

7.4.2.2 Advisory Committee for all Programs

College study plans and curriculum committee will set up and operate an Advisory Committee drawn from relevant sectors of the community, noting that the University has defined the community in a broad and inclusive way. The size of the Advisory Committee will vary, depending on the size and scale of the program, but will not normally be less than 4 members. Proposals for membership will be approved by the Dean. Each Annual Program Report must include a statement of the Advisory Committee inputs over the previous academic year and attach notes/ minutes of the meetings held.

7.4.2.3 Student internship and projects

The active participation of students in community engagement will have a massive impact on what can be achieved and delivered. Whilst individual contributions are always welcome, the profile and visibility of group contributions can have a major impact on the community's perception and respect for the university.

7.4.2.4 Staff appraisal (and promotion criteria)

The annual staff appraisal will include the recording of each individual's contribution over the past year to the community engagement approach. The individual may use the appraisal record in any application for promotion when demonstrating how they have contributed to the University's strategic plan. Whilst not every individual staff member will have a direct contribution, and hence it will not be a measure of staff performance, the expectation of program teaching teams or support areas making a contribution holds true, so individuals should be making an indirect or supporting contribution.

7.4.2.5 Dedicated courses and training to meet community needs

Each Deanship will include in its strategic plan whether and how courses and training can be delivered to the community. Deanships will annually reflect on the central database of the previous years' activities, to identify areas of good practice developed by others, and plan ahead so that any resource implications can be established and embraced. In reporting on progress of their strategic plan, each Deanship will include a progress report on the activities achieved and those proposed.

7.4.2.6 Community relevant research

Each College (could be the Scientific Research Programs Committee in the college) will ensure that the research environment within the college is supportive of the community engagement goals of the University and that research which is relevant to the community is given due consideration. This policy approach will be included in the research strategy of each of the research centers or colleges. Each community engagement contribution will be reported to the Quality Unit Coordinator (either in colleges or in other University units) who are responsible for maintaining a database of all such activity. This data will also be sent to the Deanship of Community Services as responsible for establishing the central database of JU on community services.

7.4.2.7 Central database of all community related activities

Jazan University will hold a central record of all community engagement activities through the Deanship of Community Service. This will be visible on the University intranet so that all colleges can see the contributions of other colleges and areas of the University towards community engagement, thus providing an environment in which good practices can be identified and shared.

The University Council will receive an annual report at the end of each academic year from the Deanship of Community Service, outlining comparative performance and contribution from each of the areas of the University, and making comparison of achievements against any initiatives which are defined by JU Strategic Plan: Vision 2020, for the delivery of the community engagements.

7.4.3 Interactions with the Community

Relationships with the community should be established, publicized and recorded. Such contributions should be appropriate to the needs of the community and draw upon the knowledge, experience and resources of the University and its staff. Ways in which this commitment is met include:

- Continuing contact with schools in the region
- Open days for potential students and members of the community
- Invitations to employers and professionals to engage with programs
- Community based research
- Student voluntary activities
- Partnerships with the community
- Sharing University facilities with the community
- Dedicated services provided for the community
- Publicity and media releases directed to the community
- Dedicated section of the colleges' web site for community relations
- Monitoring and evaluation of community engagement

7.4.4 Alumni

The Office of Alumni Affairs has been established at the University (also, Alumni units in colleges) to foster lasting relationships with, and between, former students. It hopes to generate a sense of pride in, and commitment to the work of the University leading to an on-going relationship with the University. The vision of the alumni in Colleges and University is both to build a strong and active link between the University and its alumni and between the University and its community. It works with the colleges and departments throughout the University to fulfill this vision.

The objectives of Alumni unit in each College and academic programs will be:

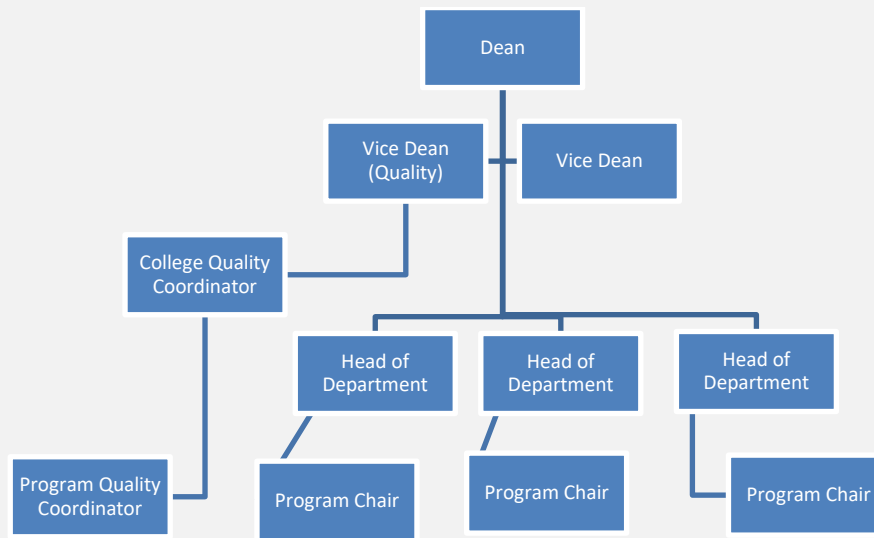
- Fostering positive relationships between colleges/ programs and its alumni
- Keeping an online data base of alumni and their activities
- Facilitating interaction between alumni
- Providing relevant benefits and services for its alumni community
- Assisting current students in their search for employment
- Helping alumni to update their skills in their chosen field of employment
- Running professional education courses and training sessions
- Receiving feedback from alumni for benefit to the academic programs.

CHAPTER 8

8.0 QUALITY MANAGEMENT SYSTEM AT COLLEGE

8.1 Higher Quality Committee at College

The quality committee of the college is responsible for overseeing the development of quality procedures and processes to ensure quality provision, and for their implementation across academic, research and administrative areas of college, departments and programs. It also provides appropriate counseling and recommendations on various topics and issues related to assurance of quality in college. The organizational structure of Quality Committee at College level is shown in chart below.



The organizational structure of the quality in the college.

8.2 Responsibility of College Dean

Basically, the Dean has responsibility for the educational and administrative business of the faculty and its departments. Accordingly, Deans are the primary accountable officer for management and delivery of teaching and learning in their college.

Dean's responsibilities include:

- Coordinating the development of and implementing the college's Vision, Mission and Goals.
- Leading college efforts towards achieving University goals.
- Developing a college budget.
- Leading and coordinating college strategic planning and curriculum development.
- Supervising, evaluating, and supporting Departments in a manner that promotes excellence in instruction, scholarly and creative productivity, and service.
- Leading and coordinating the governance of the college.
- Leading the processes of college administrator selection and overseeing the processes of faculty and staff selection and retention.
- Coordinating the professional development of college administrators and staff.
- Evaluating college administrators and staff.
- Evaluating Department Chairpersons with Departmental faculty and staff.
- Evaluating overall Departmental productivity in teaching and learning, research, and service responsibilities.
- Advising the University manager on University policies and procedures.

Vice Deans (Quality)

Vice Dean (Quality) is responsible for quality affairs in the college under delegated authority from the Dean. Vice Deans (Quality) have responsibilities for:

- Providing advice to the Dean on all matters relating to quality in the college.
- Monitoring the Quality Unit performance and develop communications within their faculty and entities on quality issues.

8.3 Responsibility of Department Head

Head of Department, as executive officers of the academic department, contributes to the achievement of the University and faculty strategic plans by providing effective management and academic leadership within the department. These responsibilities include quality assurance of all programs, maintaining documentation relating to courses, monitoring staff performance, appraisal of teaching staff, and providing opportunities for individual staff development. They are also responsible for providing appropriate resources to support all teaching undertaken by the academic department.

Specific responsibilities are:

- Responsible and accountable for setting and advancing the academic strategy of the Department in line with Faculty and University strategic plans and direction.
- Oversee, organize and develop the core activities of teaching, research, examining, advising and other service activities and knowledge transfer, consulting with all departmental colleagues.
- Refresh and develop new programs in order to attract new students and markets.
- Ensure the highest levels of quality, integrity and ethics in teaching, learning and research within the department.
- Ensure that staff performance is managed appropriately and that fair workload allocation processes are in place.
- Ensure all staff has access to the necessary support to enable them to contribute fully and develop their skills and experience.
- Ensure a safe and healthy environment for both staff and students, and full compliance with health and safety requirements.
- Ensure that University equipment/ facilities under the department's control are properly maintained and serviced as required.
- Comply with auditing, quality assurance and risk management procedures, both internal and external.
- Ensure that Program specification and report, Courses specification and report, Program self-evaluation scale and Program Self-study report are going according to the latest versions of NCAAA and in the right way.
- Enhance the quality and volume of research by encouraging and enabling demonstrable research achievement within the department.

8.4 Responsibility of College Quality Unit Coordinator

The Quality Unit Coordinator in the college provides a comprehensive and efficient administrative support service to the Vice Dean (Quality Affairs) of the College. Main responsibilities are:

- Assist the College Dean/ Vice Dean (Quality) with planning, implementing and monitoring of quality within the college.
- Provide organizational support to the Vice Dean (Quality) to ensure the efficient implementation and monitoring of the teaching and learning observation process.

- Develop quality improvement systems and processes in order to continuously improve standards of teaching and learning, student success rates and the overall quality of the learner experience
- Support the planning, organization and delivery of a comprehensive range of staff development activities and ensure these activities are thoroughly tracked, monitored and evaluated.
- To participate in the College's Professional Development Review process and to undertake appropriate training and development activities.
- Participate in any College staff review/ performance management processes involving the identifying and meeting of training needs for self and others.
- Support the collation and distribution of data analysis from Student Surveys, Staff Surveys, quality audits and activities and monitor follow up quality improvement actions.
- Administer the consistent implementation of NCAAA quality assurance and performance improvement systems and processes in line with JU operational and strategic objectives.
- Develop the College Strategic plan, Annual College report, ensuring that the latest NCAAA template for all quality practices in Programs and College are used in the right way.

8.5 Responsibility of Program Quality Coordinator

Program Quality Coordinators are responsible for facilitating the assessment of student learning in their programs.

- Develops and manages the program's/ department's assessment plan and data collection including: developing program goals and student learning objectives, developing a program curriculum matrix and assessment activities matrix, developing and implementing direct and indirect assessment methods appropriate for the program, collecting data about the program and student learning.
- Providing semi-annual updates of progress and/ or achievements (at the end of each semester) to the department chair, college dean for the Assessment of Student Learning.
- Provide documents and evidence for Program accreditation based on NCAAA and/ or other related accreditation bodies (mainly, program specification, course specification, course report, program report, Self-Evaluation Scales of the Program (SESP) and the Self-Study Report of the Program (SSRP).

CHAPTER 9

9.0 QUALITY MANAGEMENT SYSTEM AT SUPPORTING DEANSHIPS, RESEARCH CENTERS AND ADMINISTRATIVE UNITS

9.1 SUPPORTING DEANSHIPS:

9.1.1 Quality Practices for QMS at Deanship of Admission and Registration (DAR) according to NCAAA Standards 4 & 5

The Deanship of Admission and Registration (DAR) is responsible for the process of admission, registration and optimum utilization of the University's capacity as well as for providing services for students via modern technologies. The DAR also provides guide to applicants as how to apply to the JU and define the admission and registration conditional procedures. Some important tasks of the DAR are finding a seat in the University for student who fulfill the admission requirements, attract the best high school graduate students to the University, documentation of students' academic records and work on constantly updating them electronically, documentation and expedite finalizing the student graduation procedures within the period specified in the University calendar.

Standard 4 (Learning and Teaching) and 5 (Student Administration and Support Services)		
Criteria	Evidence	Responsibility
	<ul style="list-style-type: none"> Deanship strategic plan Deanship annual report 	Dean of DAR
4.4	<ul style="list-style-type: none"> Central data management system for all academic data Data on student completion rate for all courses and programs Data on year to year progression rates and program completion rates Action for improvements of the Central Data System 	
5.1	<ul style="list-style-type: none"> Process mapping of student admission/ registration Process improvement initiatives Online admission and registration system Copy of the online admission/ registration system Evidence that the computerized systems used for admission processes are linked to data recording and retrieval systems Benchmark system with other Universities 	
5.1	<ul style="list-style-type: none"> Student handbook/ college catalogue Student handbook for admissions rules Web tutorial on admission/ registration 	
5.1	<ul style="list-style-type: none"> Admission process Website publishing admission requirements 	
	<ul style="list-style-type: none"> Rules of credit transfer Transfer policy Transfer refusal policy Transfer to JU procedures Procedure after approval of transfer Policy for equivalence of courses for external transfers to JU 	
5.1	<ul style="list-style-type: none"> Handbook for blended programs offered 	
5.1	<ul style="list-style-type: none"> Policy on student fees Undergraduate handbook Graduation requirements rules 	
5.1	List of student admission advisors	
5.1	<ul style="list-style-type: none"> New student orientation committee Modules for orientation 	
5.2	<ul style="list-style-type: none"> Security procedures for students record Policies determining the content of student records and their 	

	retention and disposal	
5.2	<ul style="list-style-type: none"> List of student quality data Analysis and Improvement plan 	
5.2	<ul style="list-style-type: none"> Samples of the statistical data from the system, used in quality assurance, reports and planning for departments, colleges, quality center and senior managers 	
5.2	<ul style="list-style-type: none"> Policies and procedures for uploading the students' results and updating of students records Time table for report, results uploading and updating of students records Flowchart for processing students' results 	
Tasks for JU Strategic Plan		
Goal 6	Obtain data on projected high school graduates for the coming 5 years for admission planning	
	Reform program admission standards to maximize the annual retention rate	
	Offer orientation programs for high school students	
	Conduct open day for high school students	
KPI:		
JU KPI	Rate of enrolment of new students annually	
	Percentage of students entering programs who successfully complete first year	
	Increase in enrolment rate for future requirements	

9.1.2 Quality Practices for QMS at Deanship of Student Affairs (DSA) according To NCAAA Standard 5

The Deanship of Student Affairs (DSA) is responsible for students' needs at the University, and plans programs for campus life. The DSA provides plans and directs university activities related to student services and campus life at JU. In general, the DSA is concerned with student affairs outside the classroom and is responsible for extra-curricular activities to improve the student's physical, mental and behavior abilities by recommending and implementing programs and activities that help in absorbing the course materials in an active way. The activities evolve around social, cultural, literary, sports activities as well as the scouts and people with special needs. These activities help the students to communicate and interact with their colleagues in other universities, to build a balanced personality, which helps the students in investing their free time in working towards achieving excellence in academia.

Standard 5 (Student Administration and Support Services)		
Criteria	Evidence	Responsibility
5.1	<ul style="list-style-type: none"> Strategic plan for student services in line with JU SP DSA Annual Report Facilities planning and budget allocation for student activities 	DSA Dean
5.3	<ul style="list-style-type: none"> Student Handbook Handbook on student support services Procedures to conduct disciplinary actions Statistics on student disciplinary and types Procedures to prevent punitive action or discrimination Procedures on student misconduct 	
5.4	<ul style="list-style-type: none"> Appointment of head of student services (Dean and responsibilities) Structure organization and JTOR 	
5.4	<ul style="list-style-type: none"> Approved list of services and resources allocated to students Action and improvement plan of the services % of student using the services Report of survey on student satisfaction on services and facilities provided periodically Improvement plan for the services provided 	
5.4	<ul style="list-style-type: none"> Policy and procedures for student organization, for example student union Reports on financial issues of student body 	
5.4	<ul style="list-style-type: none"> Policy and procedures of student publication Sample of student publications 	
5.5	<ul style="list-style-type: none"> Procedures for student counseling Career planning 	
5.6	<ul style="list-style-type: none"> Extra-curricular handbook Policy and incentives to organize and encourage students to get involved in extracurricular activities Policies for Consultative Council of student List of facilities for extracurricular activities Islamic activities and facilities offered 	
5.6	<ul style="list-style-type: none"> Encouragement policy for sports participation JU participation in sports in KSU and internationally 	
5.6	<ul style="list-style-type: none"> Benchmarking for student sharing in extra-curricular activities (internal and external) Improvement plan to accomplish the target 	
	From JU Strategic Plan	
JU SP Goal 4	Expand community participation in campus culture, including the arts/ performing arts, speaking engagements, and related events	DSA Dean
JU SP Goal 4	Develop a process identifying and implementing celebration activities, employee development programs, and year-end ceremonies	
JU SP Goal 6	Improve the student community environment such as housing, meals, transportation, etc.	
JU SP Goal 13	Conduct career day annually	Head of Alumni Unit
JU SP Goal 14	Identify the roles and responsibilities of JU alumni units	Head of Alumni Unit
JU SP Goal 14	Establish effective mechanisms to communicate with alumni	Head of Alumni Unit
JU SP Goal	Develop alumni database system	Head of Alumni Unit

14		
JU SP Goal 14	Create an alumni advisory board at all levels	Head of Alumni Unit
	KPIs	
JU KPI	Survey results on student satisfaction on services and facilities provided periodically	
	Number of participations in community activities	
	Number of social activities in JU	
	Number of joint activities conducted by JU and alumni	
	Number of colleges with alumni advisory board	
NCAAA 15	Proportion of students participating in extra-curricular activities	
	Proportion of total operating funds (other than accommodation and student allowances) allocated to provision of student services	

9.1.3 Quality Practices for QMS at Deanship of E-Learning and Information Technology (DELDE & IT) according to NCAAA Standards 2, 5, 7

The Deanship of E-learning and Distance Education and Information Technology (DELDE & IT) was established in JU to support the development of educational process through the implementation of the latest means of e-learning and distance learning adopted in the best universities of the world. The Deanship should emphasize scientific planning, and teaching and learning according to the strategic plans, to achieve the vision and mission of the University in the transition from traditional learning methods to making it accessible to all through e-learning. The DELDE & IT should promote the use of the latest scientific techniques and technology of modern education, especially based on the World Wide Web (Internet). Main tasks of the DELDE & IT are: The provision of modern infrastructure in teaching and learning, improve e-learning and distance education as a strategic option for the University, adopt the latest scientific methods and modern technology in e-learning, design of the electronic curriculum interactive and distinct, using the latest methods for technical support and training for faculty members and students.

Standard 2 (Management and Administration), 5 (Student Administration and Support Services) and 7 (Equipments and Instruments)		
Criteria	Evidence	Responsibility
	<ul style="list-style-type: none"> Strategic Plan of deanship in line with JU SP Annual Report of deanship 	DELDE Dean
2.3	<ul style="list-style-type: none"> Central Data depository system to track and monitor planning implementations 	IT Dep. Manager
5.1	<ul style="list-style-type: none"> Handbook for blended programs offered (if any) Blended programs information: Special skills or resources needed to study in these modes Handbook for distance education clarifying the skills and resources needed as described by NCAAA for e-learning Standards for Quality Assurance and Accreditation of Higher Education Programs offered by Distance Education 	DELDE Dean
5.1	<ul style="list-style-type: none"> Number of workshops offered by E-learning for student study by distance learning or have courses through e-learning % of students attending workshops 	DELDE Dean
5.1	Policy on distance learning student fees	DELDE Dean
5.1	Web tutorial on admission/ registration	IT Dep Manager
7.4	<ul style="list-style-type: none"> List of computing equipment (desktop, Notebooks, wi-fi, 	IT Dep Manager

Standard 2 (Management and Administration), 5 (Student Administration and Support Services) and 7 (Equipments and Instruments)		
Criteria	Evidence	Responsibility
	broadband) <ul style="list-style-type: none"> • Adequacy of computing equipment survey results • PC usage handbook for students • Technical support team list • Feedback from faculty on ICT purchase • Hardware/ software policy on ICT • JU firewall/ IT security system record • JU Cyber Law handbook 	
7.4	Training programs on IT <ul style="list-style-type: none"> • Training modules • Training calendar • Training records • Feedback from participant 	IT Dep. Manager
7.4	Survey on ICT usage	IT Dep. Manager
7.4	Internal information systems compatibility and integration with external reporting	IT Dep. Manager
Tasks from JU Strategic Plan		
JU SP Goal 1	Reinforce awareness of security and protection information	IT Dep. Manager
JU SP Goal 2	Provide integrated technological system for all university departments	IT Dep. Manager
JU SP Goal 2	Reinforce the use of automated systems to enhance the performance of financial units	IT Dep. Manager
JU SP Goal 4	Establish social media platforms for the university, operating through identified regulations and policies to facilitate collaboration and communication	IT Dep. Manager
JU SP Goal 4	Adopt new technologies and tools for internal communication improving collaboration and building a new work culture of transparency	IT Dep. Manager
JU SP Goal 4	Conduct a Social Network Analysis (SNA) to examine and assess the existing practices in information sharing	IT Dep. Manager
JU SP Goal 4	Disseminate regularly new information amongst the university community	IT Dep. Manager
JU SP Goal 4	Develop an accessible knowledge management system	IT Dep. Manager
JU SP Goal 5	Provide necessary technical support and software	IT Dep. Manager
JU SP Goal 5	Provide incentives for best practices for e-presence	IT Dep. Manager
JU SP Goal 5	Provide training sessions on e-management skills	IT Dep. Manager
JU SP Goal 5	Provide exclusive access-points in all colleges	IT Dep. Manager
JU SP Goal 5	Link of the learning management system with the digital resources	DELDE Dean
JU SP Goal 5	Provide better access to the e-learning resources	DELDE Dean
JU SP Goal 5	Digitize learning resources and expand the digital repository	DELDE Dean
JU SP Goal 5	Develop electronic courses covering the needs of the university according to approved criteria	DELDE Dean

Standard 2 (Management and Administration), 5 (Student Administration and Support Services) and 7 (Equipments and Instruments)		
Criteria	Evidence	Responsibility
JU SP Goal 5	Enhance participation in the Open Educational Resources Initiative and to facilitate access to its resources for university employees	DELDE Dean
JU SP Goal 5	Provide appropriate facilities and software supporting e-learning practices	DELDE Dean
JU SP Goal 5	Implement training programs for students on the use of virtual classrooms	DELDE Dean
JU SP Goal 5	Have agreement with local IT companies to provide students with reduced-priced TABLETS or PC sets	DELDE Dean
JU SP Goal 7	Encourage benchmarking the e-learning practices with other universities	DELDE Dean
JU SP Goal 7	Cooperate with the National Center for E-learning and Distance Learning in Riyadh to achieve the best practices in e-learning	DELDE Dean
JU SP Goal 7	Support initiatives and innovations of Jazan University faculty for quality online programs	DELDE Dean
JU SP Goal 7	Promote e-learning and distance education activities to improve the quality of e-learning	DELDE Dean
JU SP Goal 7	Periodic evaluation and update of the e-learning content	DELDE Dean
JU SP Goal 7	Provide support to the infrastructure of networks, devices and information systems	DELDE Dean
JU SP Goal 7	Develop classrooms and laboratories with information technology by providing modern technical equipment	DELDE Dean
JU SP Goal 7	Improve and activate student services places, such as the registers, bursar, library services, bookstore, IT, etc.	DELDE Dean
JU SP Goal 7	Provide proper wired/ wireless connectivity in all campus	DELDE Dean
JU SP Goal 7	Provide instructional design support	DELDE Dean
KPIs:		
NCAAA 20	Annual expenditure on IT budget, including: a) Percentage of the total Institution, or College, or Program budget allocated for IT; b) Percentage of IT budget allocated per program for institutional or per student for program; c) Percentage of IT budget allocated for software licenses; d) Percentage of IT budget allocated for IT security; e) Percentage of IT budget allocated for IT maintenance	
NCAAA 21	Stakeholder evaluation of the IT services. (Average overall rating of the adequacy of: a) IT availability, b) Security, c) Maintenance, d) Accessibility, e) Support systems, f) Software and up-dates, g) Age of hardware, and h) Other viable indicators of service on a five- point scale of an annual survey.)	
NCAAA 22	Stakeholder evaluation of a) Websites, b) e-learning services, c) Hardware and software, d) Accessibility, e) Learning and Teaching, f) Assessment and service g) Web-based electronic data management system or electronic resources (for example, institutional website providing resource sharing, networking & relevant information, including e-learning, interactive learning & teaching between students & faculty on a five- point scale of an annual survey).	

9.1.4 Requested Quality Practices for QMS at Deanship of Community Service and Continuing Education (DCS) according to NCAAA Institutional Standard 11

The Deanship of Community Service and Continuing Education (DCS) is established with the aim of realizing the University's vision and mission pertaining to community service as well as developing a deanship strategic plan in line with the community's needs and aspirations. The DCS should coordinate with the JU's colleges as well as the community in the implementation of community service programs.

A strategy of interaction and involvement with members of the University, including faculty, students and the administration as well as members of the community should be implemented and the DCS should act as a bridge between JU and the community. Main tasks of the DCS at JU are to plan strategic partnerships with public and private sector leaderships, in order to serve and develop our community, dissemination of culture, knowledge, scientific and technological awareness to the largest possible section of the community, preparing highly well-qualified and trained manpower and well-aware educational leaders, fulfilling the community's needs and demands inside and outside the University, and participating in solving the community problems.

Standard 11 (Community Relationships)		
11.1 Institutional Policies on Community Relationship		
Criteria	Evidence	Responsibility
11.1.1	<ul style="list-style-type: none"> - Workshop documents and data related to JU community services activities. - DCS strategic plan about community service should be established in alignment with JU Vision 2020 plan. - All activities about community service should be gathered in the DCS annual report. 	Dean of DCS
11.1.2	<ul style="list-style-type: none"> - Regulations and policies about community service should be established by DCS. - DCS should have a clear organizational structure. 	
11.2 Interactions with the Community		
11.2.1	- Data base on interaction with community at the level of all community service units of JU colleges.	
11.2.2	- List of community support agencies relevant to the needs of the community at the level of institution.	
11.2.3	- List of educational courses provided in areas of society's interest and needs.	
11.2.4	<ul style="list-style-type: none"> - List of local industries and employers who assist programs delivery (such as placement of students for work-study programs, part time employment opportunities and identification of issues for student project activities). - Meetings minutes, approved by local industry and employers. 	
11.2.5	<ul style="list-style-type: none"> - List of advisory committees including local employers and members concerning programs and other institutional activities. - Minutes of approved meetings of these committees. 	
11.2.6	<ul style="list-style-type: none"> - List of schools receiving assistance and JU services. - List of types of provided assistance. 	
11.2.7	- Rules and policies of communication between DCS and JU alumni to arrange data about graduated students and community stakeholders.	
11.2.8	- List of providers (funders & grants) giving financial and other support for programs and institutional developments .	
11.2.9	<ul style="list-style-type: none"> - Shared central database records on community services between DCS and JU colleges and units. - Highly effective and informative website for the DCS. 	

11.3 Institutional Reputation		
11.3.1	<ul style="list-style-type: none"> - Media management plan to improve the reputation of DCS as a JU representative. - Media policies and procedures of Deanship of Community Service to improve the reputation of the services provided by them to the community. - Examples for publication in newspapers, magazines and programs for university community services activities. 	
11.3.3	- Staff guidelines for rules dealing with media agencies about community service.	
11.3.5	<ul style="list-style-type: none"> - Surveys assessing the external community on services carried out by the JU Deanship of Community Service. - Use the results of evaluation of the external community in future improvement plans of Deanship of Community Service. 	
11.3.6	- Examples of certain issues, problems and fears raised in public forums about community service, and dealt with immediately and objectively by DCS.	
	KPI:	
NCAAA 32	Proportion of full time teaching and other staff actively engaged in community service activities.	
NCAAA 33	Number of community education programs provided as a proportion of the number of departments.	

9.1.5 Quality Practices for QMS at Deanship of Scientific Research (DSR) according to NCAAA Standard 10

The Deanship of Scientific Research (DSR) at Jazan University is responsible for the planning, management, promotion and support of research activities that are carried out by the university communities through internal and external funding. The functional responsibilities of DSR include research activities, such as, funded research projects, professional conference attendance, research scholarship programs and research awards. Some important tasks of DSR are to propose a plan for the University's annual research, propose regulations, rules and procedures of scientific research, and coordination of work between research centers at the university.

The DSR should provide documentation and evidence of the existence of the institution research management and administration systems detailing financial needs and requirements of the institution, the policies, procedures, sources and uses of the research budget, teaching staff and student research involvement and development, commercialization of its research and research practices or systems and mechanisms applied in the planning and evaluation of the institution research management assuring its institutional quality research management system assessment and assurance practices.

Standard 10 (Scientific Research)		
10.1 Institutional Research Policies		
Criteria	Evidence	Responsibility
10.1.1	Strategic Plan of DSR consistent with JU Mission and JU Strategic Plan Vision 2020	Dean of DSR
10.1.2	Specify the research development plan and benchmarks for performance targets <ul style="list-style-type: none"> • DSR General Policies and Regulations in research 	
10.1.3	Specify researches consistent with international standards <ul style="list-style-type: none"> • Policies for research follow international standards 	
10.1.4	Prepare and publish Annual Reports that contain research performance and records of the research activities of individuals, departments and colleges <ul style="list-style-type: none"> • Data base of research papers published in high-impact international journals 	
10.1.5	Encourage cooperation with local industry and with other research agencies <ul style="list-style-type: none"> • Policies for research cooperation with local industry and with other research agencies 	
10.1.6	Establish mechanisms to support collaboration and cooperation with international universities and research networks <ul style="list-style-type: none"> • Policies for research collaboration and cooperation with international universities • Process flowchart for research collaboration • List of partners 	
10.1.7	Provide policies for the establishment, accountability, and periodic review of research institutes or centers <ul style="list-style-type: none"> • Policies deal with the autonomy and privacy of DSR 	
10.1.8	Provide policy that the establishment of research institutes will not inhibit research activity by other organizations <ul style="list-style-type: none"> • Policy to encourage campus wide research culture 	
10.1.9	Establish a high level committee to monitor compliance with ethical standards and approve research projects with potential impact on ethical issues <ul style="list-style-type: none"> • List of Research Committees • Committee members' list and JTOR 	
10.1.10	Propose an adequate research budget to enable the achievement of research plan <ul style="list-style-type: none"> • Policies and rules that deal with the research projects' funding • Budget approved for research • Grants amount 	
10.2 Teaching Staff and Student Involvement in Research		
10.2.1	Specify expectations for teaching staff involvement in research and scholarly	

Standard 10 (Scientific Research)		
10.1 Institutional Research Policies		
	activities <ul style="list-style-type: none"> • Performance in relation to these expectations considered in performance evaluation and promotion criteria 	
10.2.2	Provide support for junior teaching staff in the development of their research programs through mechanisms such as mentoring by senior colleagues <ul style="list-style-type: none"> • Initiative decision for supporting junior teaching staff in research 	
10.2.3	Provide support for junior teaching staff in the development of their research programs through mechanisms such as mentoring by senior colleagues <ul style="list-style-type: none"> • Mechanism to support junior teaching staff in research 	
10.2.4	Provide opportunities for postgraduate research students to participate in joint research projects <ul style="list-style-type: none"> • Policy and guidelines for postgraduate involvement in research projects 	
10.2.5	Encourage participation of research students in joint research projects. <ul style="list-style-type: none"> • Reward and recognition for students involved in research 	
10.2.6	Assist teaching staff to develop collaborative research arrangements with colleagues in other institutions and in the international community <ul style="list-style-type: none"> • List of collaborative research arrangements with colleagues in other national or international institutions, research centers 	
10.2.7	Encourage teaching staff to include information about their research and scholarly activities that are relevant to courses they teach	
10.2.8	Introduce strategies for identifying and capitalizing on the expertise of teaching staff and postgraduate students in providing research and development services to the community and generating financial returns to the institution <ul style="list-style-type: none"> • List of research and development services to the community and generating financial returns to the institution • Strategic planning to commercialize research 	
10.3 Commercialization of Research		
10.3.1	Regulations for research in Jazan university Establishment of DSR: <ul style="list-style-type: none"> • Charter for establishment of DSR • Structure of Organization • CVs of staff members 	
10.3.2	<ul style="list-style-type: none"> • Evaluate ideas with potential for commercial development • Obtain advice from experienced persons from industry and relevant professions before investment by the institution is authorized • Road map for commercialization 	
10.3.3	<ul style="list-style-type: none"> • Establish policies for ownership of intellectual property • Provide clear procedures for commercialization of ideas developed by staff and students. 	
10.3.4	Encourage a culture of entrepreneurship throughout the institution, with particular emphasis on teaching staff and postgraduate students <ul style="list-style-type: none"> • Culture of entrepreneurship development • Courses in entrepreneurship offered at JU • Events to promote entrepreneurship 	
10.3.5	Establish regulations that require disclosure of pecuniary interest and avoidance of conflict of interest in activities related to research <ul style="list-style-type: none"> • Code of conduct to avoid conflict of interest 	
10.4 Research Facilities and Equipment		
10.4.1	Provide adequate laboratory space and equipment, library and information systems and resources to support the research activities of teaching staff and students in the fields in which programs are offered <ul style="list-style-type: none"> • List of infrastructures for research 	
10.4.2	Propose an adequate budget for conduct of research (including research equipment and facilities) in all departments and colleges <ul style="list-style-type: none"> • Budget allocation for last 3 years 	
10.4.3	Policy for joint ownership or shared access to major equipment items within the	

Standard 10 (Scientific Research)		
10.1 Institutional Research Policies		
	institution, and with other organizations <ul style="list-style-type: none"> • Policy & guidelines of co-ownerships of research equipments 	
10.4.4	Establish effective security systems to ensure safety for researchers and their activities, and for others in the institutional community and the surrounding area <ul style="list-style-type: none"> • Safety regulation documents 	
10.4.5	Establish policies the ownership and responsibility for maintenance of equipment obtained through research grant applications, commissioned research or other cooperative ventures with industry or other external sources <ul style="list-style-type: none"> • Policy & guidelines on ownership and maintenance schedules and calibration 	
	KPIs:	
NCAAA 26	Number of refereed publications in the previous year per full time equivalent teaching staff (publications based on the formula in the Higher Council Bylaw excluding conference presentations)	
NCAAA 27	Number of citations in refereed journals in the previous year per full time equivalent faculty members	
NCAAA 28	Proportion of full time member of teaching staff with at least one refereed publication during the previous year	
NCAAA 29	Number of papers or reports presented at academic conferences during the past year per full time equivalent faculty members.	
NCAAA 30	Research income from external sources in the past year as a proportion of the number of full time faculty members	
NCAAA 31	Proportion of the total, annual operational budget dedicated to research	

9.1.6 Quality Practices for QMS at Deanship of Library Affairs (DLA) according to NCAAA Standard 6

Learning resources are considered to be the backbone of teaching and learning processes. The easiest way to assess learning resources is by focusing on the provisions of library collections and services. The Deanship of Library Affairs (DLA) at JU is the main source of evidence to assess the quality practices related to NCAAA standard 6.

University libraries play an important role as one of the most prominent sources of knowledge for students, faculty members and researchers. University library provides sources of reference, information and knowledge, through textbooks whether in print or in electronic format. Therefore, the DLA at JU has important task to provide adequate learning resources for academic programs and for the progress of research and development activities, in order to elevate these programs to the highest levels. The DLA is responsible for developing its own strategic plan in line with JU Strategic Plan to achieve university goals, especially in field of learning resources.

Standard 6 (Learning Resources)		
6.1 Planning and Evaluation		
Criteria	Evidence	Responsibility
6.1.1	<ul style="list-style-type: none"> • Mission and Vision of DLA in line with JU Mission and Vision • Strategic Plan of DLA in line with JU Strategic Plan for Learning Resources • Library Annual Report 	Dean of DLA
6.1.2	<ul style="list-style-type: none"> • DLA Development Plan linked to JU Strategic Plan 	
6.1.3	<ul style="list-style-type: none"> • Report of biannual evaluation on the adequacy of library and resources center materials • Improvement plans 	

Standard 6 (Learning Resources)		
6.1 Planning and Evaluation		
6.1.4	<ul style="list-style-type: none"> • Perform evaluation/ surveys dealing with teaching staff and student satisfaction about consistency with requirements of teaching and learning and range of services • Benchmarks provision and user satisfaction of library with other comparable institutions 	
6.1.5	<ul style="list-style-type: none"> • Perform evaluation or surveys to get feedback from users (student and faculty) about (a) adequacy of the library & media center, (b) adequacy of the digital library • Record number of borrowed materials for each subject or program 	
6.1.6	<ul style="list-style-type: none"> • Record of feedback or advice obtained from faculty (survey result and suggestion from teaching staff to support teaching and learning) 	
6.1.7	<ul style="list-style-type: none"> • List of reserve books and reference materials • Review record of reserve books and other reference materials • Feedback from faculty about adequacy of access to reserve and reference materials 	
6.2 Organization		
6.2.1	<ul style="list-style-type: none"> • Policy for working hours of libraries and allocated time for female students • Feedback from users about working hours of main library and branches 	
6.2.2	<ul style="list-style-type: none"> • Verification that cataloguing meets international standards • Cataloguing management systems 	
6.2.3	<ul style="list-style-type: none"> • Formal agreement documents/ cooperation with other libraries or centers • Record of interlibrary loans • Record of sharing of resources and services 	
6.2.4	<ul style="list-style-type: none"> • Guideline/ procedures on loans/ returns/ follow-up • Library management systems for recording loans, returns and follow up for overdue materials • Feedback from users about reliability of systems 	
6.2.5	<ul style="list-style-type: none"> • List of reserve collection categories 	
6.2.6	<ul style="list-style-type: none"> • List of online databases • List of online journals • Feedback from users about reliability and efficiency of access to online databases. 	
6.2.7	<ul style="list-style-type: none"> • Code of conduct of library • Policy or rules for behavior in library 	
6.2.8	<ul style="list-style-type: none"> • DLA security systems • IT security systems • Record or verification on lost materials and inappropriate use of the internet 	
6.3 Support for Users		
6.3.1	<ul style="list-style-type: none"> • All conducted orientation and training programs especially for new users should be documented (record of orientation program/ schedule, list of participant, orientation modules, feedback from participants about effectiveness of orientation program, and analysis of feedback) 	
6.3.2	<ul style="list-style-type: none"> • Updated list of available systems in conducting searches • List of library staff to assist users in conducting searches and in locating and using information 	

Standard 6 (Learning Resources)		
6.1 Planning and Evaluation		
	<ul style="list-style-type: none"> • Training record of library staff 	
6.3.3	<ul style="list-style-type: none"> • Adequate number of qualified librarians and staff should be available at main library and branches to help the users • List of qualified librarians • Training record of librarians (CVs, certificates, etc.) 	
6.3.4	<ul style="list-style-type: none"> • Updated list of electronic and other automated systems to assist in locating resources within the institution and elsewhere • Number of computer terminals with search facilities 	
6.3.5	<ul style="list-style-type: none"> • List communication media to update users on library news and updates • Media effectiveness study 	
6.3.6	<ul style="list-style-type: none"> • Printed or electronic guides on library to help users find materials or in using databases 	
6.3.7	<ul style="list-style-type: none"> • Library organizational structures • List of all library staff members (main library and branches) • Qualified librarians • Skilled IT staff • Training record of all library staff • Benchmark sufficiency of qualified librarians and skilled IT staff 	
6.4 Resources and Facilities		
6.4.1	<ul style="list-style-type: none"> • Budget plan for acquisitions, cataloguing, equipment, and for services and system development • Annual budget for library for the last 3 years • Library expenditure 	
6.4.2	<ul style="list-style-type: none"> • Statistics on printed library collections for last 3 years 	
6.4.3	<ul style="list-style-type: none"> • Updated list of facilities to house collections 	
6.4.4	<ul style="list-style-type: none"> • Type, model and year of computer facilities • List of software used to support electronic access to resources 	
6.4.5	<ul style="list-style-type: none"> • Payment mechanism for copying facilities in the JU libraries 	
6.4.6	<ul style="list-style-type: none"> • Report on use of personal laptop in the Central Library & branches • Availability of Wi-Fi service and electric power ports in the Central Library & branches 	
6.4.7	<ul style="list-style-type: none"> • Number of books, journals and other materials in Arabic • Number of books, journals and other materials in English (or other languages) 	
6.4.8	<ul style="list-style-type: none"> • Facilities for individual and group study (number of seats for individual and group study facilities, etc.) 	
6.4.9	<ul style="list-style-type: none"> • Benchmark on the level of provision of facilities and resources with similar good quality institutions 	
KPIs		
NCAAA 17	Stakeholder evaluation of library and media center (average overall rating of the adequacy of the library & media center, including: a) Staff assistance, b) Current and up-to-date c) Copy & print facilities, d) Functionality of equipment, e) Atmosphere or climate for studying, f) Availability of study sites, and g) Any other quality indicators of service on a five- point scale of an annual survey)	
NCAAA 18	Number of web site publication and journal subscriptions as a proportion of the number of programs offered	
NCAAA 19	Stakeholder evaluation of the digital library (average overall rating of the adequacy of the digital library, including: a) User friendly website b)	

Standard 6 (Learning Resources)		
6.1 Planning and Evaluation		
	Availability of the digital databases, c) Accessibility for users, d) Library skill training, and e) Any other quality indicators of service on a five- point scale of an annual survey)	

9.1.7 Quality Practices for QMS at Deanship of Academic Development (DAD) according to NCAAA Standards 1, 3, & 4

The Deanship of Academic Development (DAD) is established to help the university community, particularly the faculty members, to increase their effectiveness in teaching and learning, to insure the highest quality in academic programs, and to utilize the latest technologies in teaching. The DAD is focus for the emphasis on academic matters such as teaching excellence, program development, and quality assurance at JU. Therefore, the DAD has become one of the most important deanships along with others involved in the development, specialized education, teaching and serving faculties, administrators and students.

Standard 1. (Mission, Goals and Objectives)		
Criteria	Evidence	Responsibility
1.2	<ul style="list-style-type: none"> Action plan to implement JU Strategic Plan: Vision 2020 Results of JU Strategic Plan Implementation (results vs targets) Report on JU KPI results Self-Study Report for Institution Record/ copy of Self-Study Report for Programs Improvement Plan of implementation results Project Management in Quality, Accreditation and Academic Development 	DAD Dean
1.5	<ul style="list-style-type: none"> List of KPI committee Approved KPIs for NCAAA and Strategic Plan KPIs 	
Standard 3. (Management of QA and Improvement)		
3.1	<ul style="list-style-type: none"> DAD Strategic Plan DAD Annual Reports JU Annual Reports All proposal for Quality Assurance All proposal for self-study List of quality policies All colleges quality plan List of QA unit head at colleges Quality forum reports Delegation system at DAD Minutes meeting of DAD Minutes meeting of DAD with colleges and higher administrations for improvement Feedback to colleges and higher administrations 	
3.2	<ul style="list-style-type: none"> Policy on staff participation in QA processes Record of participation of JU staff in QA processes List of quality councils 	

Standard 1. (Mission, Goals and Objectives)		
Criteria	Evidence	Responsibility
	<ul style="list-style-type: none"> • List of steering committees • Training records of steering committee members • Accreditation roadmap • Process flowchart of annual SSR Institution • Process flowchart of annual SSR Programs • Process mapping workshops • List of JTOR for all Accreditation committees • Report on Accreditation Committee meetings • SSR and Continuous Improvement Activity reports • Official letter of appointments from Rector/ Council Structure of organization • Minutes of Steering Committee meetings • Guidelines to ensure gender equality issues are addressed 	
3.3	<ul style="list-style-type: none"> • CV of DAD dean, vice deans, consultants • CV of all vice deans for quality at colleges • DAD charter and establishment • DAD organizational structure • Process flow between DAD and QAU • Proposal on Quality Cycle, PDCA • Implementation of PDCA cycle • NCAAA implementation strategy and improvements plan or QMS • Preview of QMS document • List of Reviewers Members or Internal Auditors • Report on Quality Assurance Training programs • Self-study Manual handbook for Program and Institution • External Reviewers contract • All common forms and surveys in JU • E-QMS Report • Database of Training programs conducted by DAD 	
3.4	<ul style="list-style-type: none"> • Policy to ensure consistency in KPI administration and benchmarking • Approval from JUQC on KPI and benchmarking • KPIs committee • Internal benchmarking set forth 	
3.5	<ul style="list-style-type: none"> • List of Internal Reviewers • List of External Reviewers • Results of surveys on quality practices of all standards by stakeholders at JU • Survey methodology and analysis verification 	
Standard 4. (Learning and Teaching)		
4.1	<ul style="list-style-type: none"> • List of common quality issues at department and college levels • Minutes of meetings of JU Quality Unit every Semester • Report of DAD visit to quality units in colleges periodically 	
4.7	<ul style="list-style-type: none"> • Policy on training for staff development program • Training Need Analysis (TNA) file • Annual schedule for academic and professional Development • Orientation program for new teaching staff • Report on Student Learning Outcome workshops • Professional Development training 	

Standard 1. (Mission, Goals and Objectives)		
Criteria	Evidence	Responsibility
	<ul style="list-style-type: none"> List of training on using technology in teaching and learning Total number of lecturers trained Report on Workshops conducted 	
4.8	<ul style="list-style-type: none"> Excellent Teaching Award Criteria List of Excellent teaching Staff and token given 	
	KPIs	
NCAAA 3	Students' overall evaluation on the quality of their learning experiences (average rating of the overall quality on a five-point scale in an annual survey of final year students).	
NCAAA 4	Proportion of courses in which student evaluations were conducted during the year.	
NCAAA 5	Proportion of programs in which there was an independent verification, within the institution, of standards of student achievement during the year.	
NCAAA 6	Proportion of programs in which there was an independent verification of standards of student achievement by people (evaluators) external to the institution during the year.	

9.1.8 Requested Quality Practices for QMS at Deanship of Graduate Studies (DGS)

The Deanship of Graduate Studies (DGS) is established at JU and the Dean will report to the Vice-Rector for Graduate Studies and Scientific Research. The Deanship will supervise all programs of graduate studies in the University; coordinate them; recommend their approval where appropriate; and, subject them to periodic reviews.

Main objectives of Graduate Studies are:

- Contribute to the enrichment of human knowledge in all fields through specialized studies and research in order to make new scientific and applied contributions and create innovative discoveries;
- Provide opportunities for undergraduate students to pursue their graduate studies locally;
- Develop qualified scientific and professional human resources;
- Encourage qualified scientists to keep pace with the rapid developments in science and technology to direct their research towards the solution of problems in Saudi society; and
- Continue with the improvement of undergraduate programs in order to interface efficiently with graduate studies/ programs.

SUBSTANDARD		
Criteria	Evidence	Responsibility
1	<ul style="list-style-type: none"> Vision, mission and objectives of deanship consistent with JU SP Strategic Plan of the Deanship of Graduate Studies in line with the JU SP Vision 2020 Implementation of the deanship strategic plan DGS structural organization JTOR 	Dean of DGS
2	DGS Annual Report	
3	Guidelines to approve new graduate programs by the University Board based on the recommendations of the Council of the DGS	
4	Policy on plagiarism	
5	Regulations for graduate studies and their executive rules	

	<ul style="list-style-type: none"> • Graduate Studies Regulations • Guidelines for Graduate Studies Student 	
6	Quality policy of graduate studies	
7	Academic calendar for graduate studies	
8	The council within the DGS <ul style="list-style-type: none"> • The graduate councils • Members list • Duties of graduate councils 	
9	List of graduate programs offered with duration (Higher Diploma, Master, PhD degree, etc.)	
10	Admission Guidebook for Graduate Studies <ul style="list-style-type: none"> • Application form for Graduate Studies • Recommendation form for Graduate Studies 	
11	Generally required for admission to the Graduate Studies programs <ul style="list-style-type: none"> • Required documents • Application processes • Online registration guidelines • Registration processes 	
12	<ul style="list-style-type: none"> • Scholarship student guide • Scholarship regulation • Scholarship form 	
13	System for monitoring progress of graduate studies students	
14	Academic supervision guidebook <ul style="list-style-type: none"> • Concept of supervision • Rules and duties of Academic supervisor 	
15	Advisory panel <ul style="list-style-type: none"> • Student Advisory Committee • Objectives of the Advisory Committee • Members of the Committee • Advisory services/ tasks • Consultant form for Postgraduate Program 	
16	Research collaboration with industrial, commercial, professional policies	
17	General framework of writing thesis and dissertation	
18	Operational rules for the comprehensive exam procedures	

9.2 RESEARCH CENTERS

9.2.1 Quality Practices for QMS in Research Centers according to NCAAA Standard 10

The Research Center is an establishment endowed for doing research. Research center may specialize in basic research or may be oriented to applied research. Although the term often implies natural science research, there are also many research centers in the social sciences as well, especially for sociological and historical research purposes.

The Research Centers should provide documentation and evidence of the existence of the center's research management and administration systems detailing financial needs and requirements of the institution, the policies, procedures, sources and uses of the research budget, staff and student research involvement and development, commercialization of its research and research practices or systems and mechanisms applied in the planning and evaluation of the center's research management assuring its center quality research management system assessment and assurance practices

Substandard		
10.1 Institutional Research Policies		
Criteria	Evidence	Responsibility
10.1.1	Strategic Plan of Research Center consistent with JU Strategic Plan: Vision 2020	Dean/ Head of Research Center
10.1.2	Specify indicator and performance targets in research center development plan	
10.1.3	Ensure the researches are consistent with international standards	
10.1.4	Prepare and publish Annual Report	
10.1.5	Encourage cooperation with local industry and with other research agencies	
10.1.6	Establish mechanisms to support collaboration and cooperation with international universities and other research centers	
10.1.7	Provide policies for the establishment, accountability, and periodic review of research center	
10.1.8	The establishment of research center should not inhibit research activity by others not involved in those organizations	
10.1.9	Establish a high level committee to monitor compliance with ethical standards and approve research projects with potential impact on ethical issues	
10.1.10	Budgeted plan for research to enable the achievement of its research plan	
10.2 Teaching Staff and Student Involvement in Research		
10.2.1	Specify expectations for researcher/ teaching staff involvement in research	
10.2.2	Provide support for junior researcher/ teaching staff in the development of their research programs through mechanisms such as mentoring by senior colleagues, inclusion in project teams, etc.	
10.2.4	Provide opportunities for postgraduate research students to participate in joint research projects	
10.2.5	Encourage participation by research students in joint research projects	
10.2.6	Assist researchers to develop collaborative research arrangements with colleagues in other institutions and in the international community	
10.2.7	Encourage researchers to include information about their research and scholarly activities that are relevant to courses they teach	
10.2.8	Introduce strategies for identifying and capitalizing on the expertise of researcher/ teaching staff and postgraduate students in providing research and development services to the community and generating financial returns to the institution	
10.3 Commercialization of Research		
10.3.1	Identify and publicize expertise and commercial development opportunities Assist in developing proposals and business plans	
10.3.2	Evaluate the ideas with potential for commercial development	
10.3.3	Set up a clear procedures for commercialization of ideas developed by staff and students	
10.3.4	Encourage a culture of entrepreneurship	
10.3.5	Establish regulations that require disclosure of pecuniary interest and avoidance of conflict of interest in activities related to research	
10.4 Research Facilities and Equipment		
10.4.1	Provide adequate laboratory space and equipment to support the research activities	
10.4.2	Propose an adequate budget for conduct of research	
10.4.3	Provide guidelines of opportunities for joint ownership or shared access to major equipment items within the center, and with other organizations	
10.4.4	Establish effective security systems to ensure safety for researchers and	

	their activities	
10.4.5	Establish policies on ownership and responsibility for maintenance of equipment obtained through research grant applications	
	KPI:	
JU KPI	Number of refereed publications per year	
	Number of citations in refereed journals	
	Number of research project grants per year	
	Number of completed research project per year	
	Total amount of obtained research grants per year (indicate internal grants and external grants separately)	

9.3 ADMINISTRATIVE UNITS

9.3.1 Requested Quality Practices for QMS at Maintenance and Services Administration according to NCAAA Institutional Standard 7

The Department of Maintenance and Services is responsible to provide leadership and best practices in managing facilities, supplies, security and resource conservation, maintenance, and other support services to all units within the University in a safe, reliable, and efficient manner. The Department follows procedures that, at a minimum, provide for replacement and selection of equipment; purchase of equipment, supplies and materials; maintenance and operations budget criteria.

The Department of Maintenance and Services at JU is responsible to ensure that the maintenance and services administration at the University carries out all its tasks following the highest standards of quality and state-of-the-art techniques. Main tasks of the Department of Maintenance and Services are:

- Implementation of the general policy of the University with regard to operation and maintenance.
- Preparation of the annual plan for preventive maintenance, and emergency maintenance, implementation and coordination with the security and safety management with respect to matters of safety and natural disaster.
- Conduct periodic examinations of the buildings and facilities of the University.
- Preparation of necessary action plan to maintain the facilities and to take the necessary measures to ensure its implementation.
- Plan for modernization and improvement of the maintenance work in general.
- Provide operation and maintenance services and cleanliness of the buildings, equipment, appliances and furniture.
- Preparation of conditions and specifications of the operating and maintenance contracts.

Standard 7		
7.1 Policy and Planning		
Criteria	Evidence	Responsibility
7.1.1	<ul style="list-style-type: none"> Strategic Plan for capital development and maintenance Action Plan 	Facilities Manager
7.1.2	<ul style="list-style-type: none"> Strategic Plan: major acquisitions Budget allocation 	
7.1.3	<ul style="list-style-type: none"> Survey results from users Feedback from users through web 	
7.1.4	Equipment compatibility policy	
7.1.5	Business plan sample	
7.1.6	Proposals for Leasing and Outsourcing	
7.2 Quality and Adequacy of Facilities and Equipment		
7.2.1	<ul style="list-style-type: none"> Maintenance contract Introduce 5S (Housekeeping) committee Introduce ISO 14000 (clean environment) 	
7.2.2	<ul style="list-style-type: none"> OSH committee Go for ISO 18001 (safety and occupational health certificate) 	
7.2.3	OFI action plan	
7.2.4	Benchmarking activities	
7.2.5	Consultancy facilities (faculty-student)	
7.2.6	Facilities for Islamic activities	
7.2.7	<ul style="list-style-type: none"> List of outlets Number of outlets Feedback from users 	
7.2.8	<ul style="list-style-type: none"> List of disable compliance facilities Number of disabled students and staff 	
7.2.9	List of facilities for cultural, sports and extra-curricular activities	
7.3 Management and Administration		
7.3.1	Complete equipment inventory	
7.3.2	Appointment of senior administrator for environment and safety	
7.3.3	Inspection/ assessment and maintenance schedule	
7.3.4	<ul style="list-style-type: none"> Safety system Safety records 	
7.3.6	<ul style="list-style-type: none"> Monitoring space utilization records Facilities reallocation records 	
7.3.7	e-booking (booking, reservation and cancelation)	
7.3.8	Policy on underutilized facilities	
7.4 Information Technology		
7.4.1	List of computing equipment (desks top, notebook, printer, Wi-Fi, broadband)	
7.4.2	Adequacy survey results	
7.4.3	PC usage handbook for students	
7.4.4	Technical support team list	
7.4.5	Feedback from faculty on ICT purchase	
7.4.6	Hardware/ software policy on ICT	
7.4.7	JU firewall/ IT security system record	
7.4.8	JU Cyber Law handbook	

7.4.9	<ul style="list-style-type: none"> • Training modules • Training calendar • Training records 	
7.4.10	Survey on ICT usage	
7.4.11	Compatibility and integration issues	

7.5 Student Residences		
7.5.1	Benchmarking standard	
7.5.4	Residents handbook for students	
7.5.5	Organizational structure and staffing	
7.5.6	Planning and action plan	
7.5.7	<ul style="list-style-type: none"> • List of facilities for Islamic facilities • Record of maintenance 	
7.5.8	list of residences and area	
KPIs		
NCAAA 20	Annual expenditure on IT budget, including: a) Percentage of the total Institution, or College, or Program budget allocated for IT; b) Percentage of IT budget allocated per program for institutional or per student for programmatic; c) Percentage of IT budget allocated for software licenses; d) Percentage of IT budget allocated for IT security; e) Percentage of IT budget allocated for IT maintenance	
NCAAA 21	Stakeholder evaluation of the IT services. (Average overall rating of the adequacy of: a) IT availability, b) Security, c) Maintenance, d) Accessibility, e) Support systems, f) Software and up-dates, g) Age of hardware, and h) Other viable indicators of service on a five- point scale of an annual survey.)	
NCAAA 22	Stakeholder evaluation of a) Websites, b) e-learning services, c) Hardware and software, d) Accessibility, e) Learning and Teaching, f) Assessment and service g) Web-based electronic data management system or electronic resources (for example: institutional website providing resource sharing, networking & relevant information, including e-learning, interactive learning & teaching between students & faculty on a five- point scale of an annual survey).	

9.3.2 Requested Quality Practices for QMS at General Administration and Financial Affairs (GAFA) according to NCAAA Institutional Standards 2 & 8

The General Administration of Administrative & Financial Affairs (GAFA) is a main unit for all JU agencies. The GAFA is responsible for overall supervision that relates to the administrative and financial affairs. Its responsibilities include all administrative matters pertaining to employee decisions, leaves and their extensions. It is also responsible for financial matters, such as, paying employees' salaries, dues, contractor fees, and other financial matters.

The GAFA at JU provides all administrative and financial services to various administrative units at the University. Main tasks of the GAFA are implementation of the relevant regulation for all administrative and financial affairs, supervise the staff in the various subdivisions of the departments and follow up the progress of all tasks. The GAFA is also responsible to develop the plans for the activities of the public administration in line with the general objectives and policies of the University and follow up their implementation. GAFA is responsible to impose the application of the laws, rules and regulations, instructions and decisions and orders applicable

within the scope of supervision. Supervise the preparation of the annual budget of the University and the follow-up implementation after approval. Directing the administrative staff to develop their skills and assess the efficiency of their performance. Follow-up and coordination with all relevant authorities in matters relating to the interests of management and the scope of its work. Follow-up to the development of the organizational structure of the University in line with business requirements and with the participation of stakeholders.

Standard 2 & 8		
Criteria	Evidence	Responsibility
2.3.10	<ul style="list-style-type: none"> • Budget Planning • Budget Process for JU 	Finance Manager
2.4.3	Records of budget allocation to female against male counterpart	
2.8.2	Administrative and financial relationship agreements between the controlled entities and the institution	
2.8.4	Audit reports and Review meetings on the financial affairs of the controlled entities	
2.8.6	Documents on outsourcing	
8.1 Policy and Planning		
8.1.1	Strategic Plan for General Administration and Financial Affairs: Budget and resources allocation	
	Financial Department Annual Reports	
	Rules of JU Financial Affairs	
	Financial rules from the government (Handbook)	
	JU Annual Budget	
	Budget draft submitted to the Ministry (sample)	
	Budget draft from cost centers (sample)	
8.1.2	Sources of budget (ministry, donations, grants, revenues, etc.)	
8.1.3	Budget Committee members	
8.1.4	Budget process flow	
	Budget proposal process flow	
8.1.5	Cost sharing guidelines and policies	
8.1.6	<ul style="list-style-type: none"> • Data on loans, debt, and equity • Benchmarking data on loans, debt, and equity 	
	Financial-ratio data (salaries/ total expenditure)	
8.1.7	Financial-ratio data (salaries/ total expenditure)	
8.1.8	Long term loan data (if any)	
8.1.9	Strategic Financial Planning to diversify revenues (grants, donation, commercialization of research, etc.)	
8.2 Financial Management		
8.2.1	<ul style="list-style-type: none"> • Organizational structure of Financial Management Division • JTOR of Financial Management Division 	
	Delegation or empowerment guidelines	
8.2.2	Delegation or empowerment guidelines	

8.2.4	Cost center guideline in budget planning	
8.2.5	<ul style="list-style-type: none"> GAAP compliance (GAAP=general accepted accounting principle) Annual Financial Reports for JU 	
8.2.9	Conflict of interest regulation	
8.2.10	<ul style="list-style-type: none"> Flexibility of carry forward provisions Expenditure records 	
	Income from distance learning and community services activities	
	<ul style="list-style-type: none"> Sample meeting minutes for budget and planning committees Sample minutes for envelope opening committees 	
	<ul style="list-style-type: none"> Financial sections of Higher Ed. Regulations General standards for JU internal auditing Payment instructions 	
8.3 Auditing and Risk Assessment		
8.3.1	<ul style="list-style-type: none"> Financial risk assessment 	
8.3.2	<ul style="list-style-type: none"> Risk management strategies Data on cash reserves 	
8.3.3	<ul style="list-style-type: none"> List of internal audit team Internal auditing guidelines Flowchart for internal auditing administration Report (internal auditing) Sample of decisions for auditing committees Audit trail of internal financial audit Improvement initiatives 	
8.3.4	<ul style="list-style-type: none"> List of external audit team External auditing guidelines Flowchart for external auditing administration External audit reports Guidelines for data exchange between Ministry of Finance and the financial units 	
From JU Strategic Plan		
Goal 1	Enhance processes involving projects tendering and execution	GAFa manager
Goal 2	Institute policies, procedures and structures to promote world class management practices	
	Establish a finance office at all university units	
	Setting in mechanisms for financial administration compatible with the policies and procedures of the university	
	Reinforce the use of automated systems to enhance the performance of financial units	
	Provide support in a manner ensuring continuous revision and evaluation for the effectiveness of financial operations of the proposed offices	
Goal 3	Review the existing regulations related to job descriptions	
	Formulate committee/s for preparing a job-description draft collaborating with professional expertise	
	Conduct a review on the job description draft for improvement and develop a final manual	
Goal 4	Review important minutes and communications as well as bylaws to compile an administrative guide	
	Classify topics in the guide for easy reference	
	Formulate recommendations for assessment and measurement	

	Update the directory and guide on a periodic basis	
	Create a policy with guidelines for all colleges to produce their own guides as part of their internal evaluation	
	Recommend initiatives that build relationships and foster a collaborative work environment for decision-making and planning across the institution	
	KPIs	
JU KPI	Number of finance offices established	
	Rate of efficiency in budget management	
	Rate of performance of financial units	
	Orientation and training sessions conducted for finance officers	
	Completed administrative guide	
	Average processing for administrative procedures	

9.3.3 Requested Quality Practices for QMS at Human Resources Development Administration (HRD) according to NCAAA Institutional Standards 1, 2, 9

The Department of Human Resources Development (HRD) provides timely and responsive leadership, resources, and services to fully support the University in the recruitment, management and retention of a high-performing workforce. The HRD conducts recruitment activities; provides guidance and support for personnel actions; classifies positions based on duties and responsibilities; ensures compensation of employees at proper pay levels; supports the collective bargaining process; directs effective employee-employer relations; administers workers' compensation benefits; and ensures a safe and healthy work environment. The HRD is also responsible to improve the knowledge, ability, skills, performance, and other talents of their employees. While employees are often expected to know about their jobs or have a specific degree or level of education upon hire, much of what an employee learns about their job is developed over the course of doing the job.

The Department of HRD at JU was established with the specific aims of developing human resources through a good combination of education, training and development, improved work environment and simplifying human resource development techniques and procedures. The HRD at JU is responsible to develop the skills and performance of the University staff through the provision of appropriate training programs and improved hiring policies. The HRD at JU is also responsible to develop staff careers, and work towards achieving a high quality of life, and to encourage progress and development through conducting studies related to human resources.

Standard 1, 2 & 9		
Criteria	Evidence	Responsibility
1 Mission Goals and Objectives		
1.4.3	<ul style="list-style-type: none"> Staff allocation Resources distribution 	HRD Manager
2. Governance and Administration		
2.2.1	<ul style="list-style-type: none"> Job descriptions, or JTOR for all administrators Organizational structures for every department 	

2.2.2	<ul style="list-style-type: none"> • Work processes established • Risk Management workshops • Out of situation plan 	
2.2.3	<ul style="list-style-type: none"> • Document on performance standards • Performance measurements • Benchmarking activities 	
2.2.8	<ul style="list-style-type: none"> • Policy on Delegation from MOE and JU 	
2.2.9	<ul style="list-style-type: none"> • Delegation forms and procedures 	
2.2.10	<ul style="list-style-type: none"> • Approved delegation process and procedures 	
2.2.11	<ul style="list-style-type: none"> • Leadership program for administrators • Policy and Guidelines on rewards for administrators 	
2.2.12	<ul style="list-style-type: none"> • Appraisal system • Feedback process for staff development • Career Path document 	
2.4.3	Records of allocation to female against male counterpart	
2.5.1	Code of ethics for teaching staff, administrators, and students or Handbooks	
2.6.2	<ul style="list-style-type: none"> • List of major committees, top administrative and academic positions • JTOR for the above <p>*JTOR=job term of reference</p>	
9.1 Policy and Administration		
9.1.1	<ul style="list-style-type: none"> • Human Resources Strategic Plan in line with JU SP Vision 2020 • Human Resources Annual Report • Recruitment policy and process • Recruitment mechanism • Talent development • Retention strategies 	
9.1.2	Workforce analysis and improvement	
9.1.3	<ul style="list-style-type: none"> • JU staff handbook • Employment Act and regulation handbook from the Ministry of Labor KSA 	
9.1.4	Succession process flowchart for senior post	
9.1.5	<ul style="list-style-type: none"> • Policy and guidelines on teaching loads • Faculty handbook 	
9.1.8	List of KPIs for HR	
	Benchmarking	
	Human Resources Annual Record (minimum 3 years)	

9.2 Recruitment		
9.2	<ul style="list-style-type: none"> Recruitment guidelines and process Recruitment channels Manpower planning 	
	Policy and guidelines on internal promotion	
	<ul style="list-style-type: none"> Equal opportunities employment policy Sample of recruitment drive advertising Web-based/ online applications processing 	
	<ul style="list-style-type: none"> Info pack about city, campus and job description to potential employer JTOR for all positions advertised Salary and all fringe benefits 	
	Verification process/mechanism of candidacy to ensure genuineness of documents	
	Recruitment process guidelines for professional programs	
	<ul style="list-style-type: none"> List of supports for new faculty (Saudis or non-saudis) Orientation program for new faculty Feedback on orientation effectiveness Improvement plan 	
	<ul style="list-style-type: none"> Data number of students and faculty members Ratio of student to faculty Number of faculty with PhD degree Benchmarking ratio of student to faculty (internal and external benchmarks) 	
9.3 Personal and Career Development		
9.3.1	<ul style="list-style-type: none"> Annual performance evaluation system Performance evaluation handbook Distribution and awareness training 	
9.3.2	Consultation with supervisor: Process and guidelines	
9.3.3	Improvement process for poor performance	
9.3.4	Guidelines to ensure confidentiality	
9.3.5	<ul style="list-style-type: none"> Excellence performance criteria List of winners Reward and recognition schemes available Communication to all staff 	
9.3.6	Faculty handbook on equal opportunity	
	Talent pool program and action plan	
	<ul style="list-style-type: none"> Professional program development module Professional program development activities offered by HR 	
	<ul style="list-style-type: none"> Professional program development for faculty List of staff going for PD courses 	
9.4 Discipline, Complaints and Dispute Resolution		
	Code of conduct to settle disputes	
	Process flow to settle disputes	
	Code of conduct handbook for staff	
	Process of appeal	
10.4.1	Manpower need in DSR	
11.1.4	Promotion and staff assessment to include community services	
	KPI:	
NCAAA 24	Proportion of teaching staff leaving the institution in the past year for reasons other than age retirement.	
NCAAA 25	Proportion of teaching staff participating in professional development activities during the past year.	

CHAPTER 10

10.0 BENCHMARKING

10.1 WHAT IS BENCHMARKING?

Benchmarking is a way to go backstage and watch another company's performance from the wings, where all stage tricks and hurried realignments are visible. In Joseph Juran's 1964 book *Managerial Breakthrough*, he asked the question: *What is that organizations do that gets result so much better than ours?* The answer to this question opens door to benchmarking, an approach that is accelerating among many firms that have adopted the total quality management (TQM) philosophy.

The essence of benchmarking is the continuous process of comparing a company's strategy, products, processes with those of the world leaders and best-in-class organizations. The purpose is to learn how they achieved excellence, and then setting out to match and even surpass it. The justification lies partly in the question: "Why reinvent the wheel if I can learn from someone who has already done it?" However, Benchmarking is not a panacea that can replace all other quality efforts or management processes.

10.2 THE EVOLUTION OF BENCHMARKING

The method may have evolved in the early 1950s, when W. Edward Deming taught the Japanese the idea of quality control. Other American management innovations followed. The best example is Toyota Motor Corporation's following the footsteps of Ford Motor Corporation albeit with the adaptation of the Ford's Just-in-case system into Toyota's Just-in-time system. The term "benchmarking," however, was not coined by that time.

The term "benchmarking" emerged when the idea took ground in US during 1980s when Xerox, Ford and Motorola became the pioneers of benchmarking in USA. Robert Camp, the logistics engineer who initiated Xerox's benchmarking program and who is generally regarded as the guru of the benchmarking movement, defines it: "Benchmarking is the search for industry best practices that lead to superior performance". There are three levels of benchmarking:

1. Internal benchmarking (within the company).
2. Competitive or strategic benchmarking (Industry and competitors).
3. Benchmarking outside the industry.

10.3 BENEFITS OF BENCHMARKING

What benefits have been achieved by the organizations that have successfully completed their benchmarking programs?

There are three sets of benefits:

1. Cultural Change
2. Performance Improvement
3. Human Resources

1. Cultural Change: Benchmarking allows organizations to set realistic, rigorous new performance targets, and this process helps convince people of the credibility of these targets. It helps people to understand that there are other organizations who know and do job better than their own organization.

2. Performance Improvement: Benchmarking allows the organization to define specific gaps in performance and to select the processes to improve. These gaps provide objectives and action plans for improvement at all levels of organization and promote improved performance for individual and group participants.

3. Human Resources: Benchmarking provides basis for training. Employees begin to see gap between what they are doing and what best-in-class are doing. Closing the gap points out the need of personnel to be trained to learn techniques of problem solving and process improvement.

10.4 BENCHMARKING MODEL

What theoretical model would you suggest to implement a benchmarking program?

Organizations that benchmark, adapt the process to best fit their own needs and culture. Although number of steps in the process may vary from organization to organization, the following six steps (Fig. 10-1) contain the core techniques:

1. Decide what to benchmark.
2. Understand the current performance of your organization.
3. Do proper planning of what, how and when of benchmarking endeavor.
4. Study others well (the practices or system you wish to benchmark).
5. Gather data and learn from it.
6. Use the findings.

10.4 BASIC BENCHMARKING METHODOLOGY (PLAN - ANALYZE - ACT)

PLAN:

1. What to benchmark?
 - Identify critical processes.
 - Collect internal data for comparison (how measure performance; Understand strengths and weaknesses of current process).
2. Who to benchmark?
 - Internal Units (comparison within an institution).
 - Other Colleges and Universities (comparison across institutions).
 - Functional Comparisons (across diverse settings - higher education, corporate, industry, etc.).
 - Best in Class (compare with exceptional performers).

ANALYZE:

3. Collect data
 - Collect comparative data (qualitative/ quantitative).
 - Calls, surveys, site visits, interviews, review of websites.
 - Systematic collection.
4. Analyze data
 - Gap between performance (Are others better? Why are they better?).
 - New strategies/ practices for adoption (What practices could we adapt and adopt?).

ACT:

5. Implement improvements
 - Action plan for change.
 - Implement changes.
 - Measure results for effectiveness.

10.5 JU PLAN FOR BENCHMARKING

JU has visited a few top universities in the Kingdom to learn and imitate best practices and accelerate JU progress towards accreditation. Dammam, Taif and Al Mogamaa Universities were selected for benchmarking.

It is suggested that the JU Council should take the decision of selecting the partner University (in the future) for the benchmarking of JU plan. An agreement should be signed between both partner universities to protect the rights of both universities.

10.6 EVALUATION AND ASSESSMENT TOOLS

10-6-1 Explanation of PDCA Definition as used in the Evaluation of the Process Factor

The Deming Cycle was first developed by Dr. Walter Shewart (1891-1967) and initially implemented in manufacturing but also has broad applicability in business. It is called the Shewart Cycle but it is commonly referred to as the Deming cycle in Japan where it was popularized by Edwards Deming. It is a set of activities (Plan, Do, Check, and Act) designed to drive continuous improvement. The Plan-Do-Check-Act (PDCA) cycle applies the scientific method to problem solving. The key is to use this as a cyclical process. However, most often it is not. Often the only action is to decide on a modification and to do it (PD). It is a systematic process management methodology that assures that processes are maintained at the best performance level achievable, given the present design of the process. As such, PDCA is used to manage a process (NCAAA, 2008, NIST, 2008 and NIST, 2009) as follows: Plan (P), Do (D), Check (C) and Act (A).

Plan (P):

Definition: Plan refers to the establishing of the objectives and processes necessary to deliver results in accordance with the expected output. It determines what needs to be done, when, how, and by whom. It signifies a set of intended actions, through which one expects to achieve a goal affecting the output which is the focus. By making the expected output as the main focus, it emphasize on the completeness and accuracy of the specification which is also part of the improvement. In the plan phase, the problem solving team analyzes data to identify possible causes for the problem and then proposes a solution. Plan the process management system by linking the daily work to the institution, college, program or administrative unit strategy and stakeholders' requirements; determine and document the best steps for completing the work, what will be checked, how to check, how often, etc.

Do (D):

Definition: Do refer to implementing the new processes or Do the actions as specified in the plan.

Check (C):

Definition: Check refers to the analysis of the results of carrying out the plan and the measuring of the new processes and compares the results against the expected results to ascertain any differences. Check actual performance against the Process Management Plan (PMP) by measuring and reviewing the process outcomes (Y's) and key input and process variables (X's) on a regular, timely basis.

Act (A):

Definition: Act refers to analyzing the differences to determine their cause. Act when there is a gap between the "as-is" of do and the "should-be" of plan and take appropriate steps to close the gap between planned and actual results. This may require normal control activities to identify and fix what went wrong. Each will be part of either one or more of the P-D-C-A steps. Determine where to apply changes that will include improvement. After passing through these four steps does not result in the need to improve, refine the scope to which PDCA is applied until there is a plan that involves improvement.

10.6.2 Explanations of ADLI as used in the Evaluation of the Process-Based Values Criterion

Approach (A)

Definition: "Approach" refers to the methods used by the institution, college or programs or administrative units to address the Standard and Criteria and Item requirements in all the Standards. Approach includes the appropriateness of the methods to the Criteria and Item requirements.

- Is the approach systematic (i.e., with repeatable steps, inputs, outputs, time frames)?
- Is there evidence that the approach is effective – both qualitative and quantitative?
- Is this approach (or collection of approaches, system or mechanisms) a key organizational process (that provides substantial contribution)? Is the approach important to the institution, college or programs overall performance?

Deployment (D)

Definition: "Deployment" refers to the extent to which an approach is applied in addressing the Standard and Criteria and Item requirements in all the Standards. Deployment is evaluated on the basis of the breadth and depth of the application of the approach to relevant work units throughout the institution, college or programs.

- Is deployment addressed?
- What evidence is presented that the approach is in use in one, some, or all appropriate work units, facilities, locations, shifts, organizational levels, and so forth within the institution, college, programs or administrative units?

Learning (L)

Definition: "Learning", in the context of the evaluation factors, refers to new knowledge or skills acquired through evaluation, study, experience, and innovation.

- Has the approach been evaluated and improved? If it has, was the evaluation and improvement conducted in a fact-based or evidence-based, and in a systematic manner (e.g., was it regular, recurring, data driven, fact driven or evidence driven)?
- Is there evidence of organizational learning (i.e., evidence that the learning from this approach is shared with other organizational units/ other work processes through the institution, other colleges or programs or administrative units)?
- Is there evidence of innovation and refinement from organizational analysis and sharing (e.g., evidence that the learning is actually used to drive innovation and refinement of the existing Input, Process, Outputs and Outcomes, or the whole systems in institution, college, programs or administrative units)?

Integration (I)

Definition: As a process evaluation factor, "integration" covers the range from organizational "alignment" of approaches in the lower scoring ranges to "integration" of approaches in the higher ranges.

"Alignment" refers to the consistency of plans, processes, information, resource decisions, actions, results, and analyses to support key organization-wide goals. It requires the use of complementary measures and information for planning, tracking, analysis, and improvement at three levels: the organization level, the key process level, and the work unit level.

"Integration" refers to the harmonization of plans, processes, information, resource decisions, actions, results, and analyses to support key organization-wide goals. Effective integration goes beyond alignment and is achieved when the individual components of a performance management system operate as a fully interconnected unit.

- How well is the approach aligned with the organizational needs the institution, college, programs or administrative units has identified in other Standard and Criteria and Item requirements in all the Standards?
- Does the institution, college or programs indicate complementary measures and information used for planning, tracking, analysis, and improvement on three levels: the organizational level, the key process level, and the department or work-unit level?

- How well is the approach integrated with the institution, college, programs or administrative units' needs?

10.6.3 Explanations of LeTCI as used in the Evaluation of the Results–Based Values Criterion

Performance Levels (Le)

Definition: "Performance levels" refer to numerical information that places or positions an organization's results and performance on a meaningful measurement scale. Performance levels permit evaluation relative to past performance, projections, goals, and appropriate comparisons.

- What performance levels (with qualitative or quantitative evidence or indicators) are provided?
- Is the measurement scale meaningful?
- Are key results missing?

Trends (T)

Definition: "Trends" refer to numerical information that shows the direction and rate of change for an organization's results. A minimum of three data points generally is needed to begin to ascertain a trend.

- Are trends (normally at least 3 cycles data is the minimum) provided for few, many, or most Areas addressed in the Standards, Criteria and Item requirements?
- Is the interval between measures or frequencies appropriate?
- Are the trends positive, negative, or flat?
- What is the rate of change (slope of the trend—normally at least 3 cycles data is the minimum)?
- Do the trends demonstrate little, some, or much breadth in the institution, college, programs or administrative units' improvement efforts (i.e., how widely are they deployed and shared)?
- Are significant variations in trends explained in the text of the application?

Comparisons (C)

Definition: "Comparisons" refer to how the institution, college, programs or administrative units' results compare with the results of other organizations. Comparisons can be made to the results of competitors, organizations providing similar products and services, industry averages, or best-in-class organizations. The maturity of the organization should help determine what comparisons are most relevant.

- Are comparisons provided?
- Are the comparisons to key competitors, industry sector averages, or best-in-class institution, college, programs or administrative units?
- How does the applicant compare against these other institution, college, programs or administrative units?

Integration (I)

Definition: "Integration" refers to the extent to which results measures (often through segmentation) address important customer, product and service, market, process, and action-plan performance requirements identified in the Organizational Profile and in Process Items; include valid indicators of future performance; and are harmonized across processes and work units to support organization-wide goals.

- To what extent do results link to key factors and Process Items?
- Are results segmented appropriately (e.g., by key customer, patient, or student segment; employee type; process/ education program or service; or geographic location) to help the institution, college, programs or administrative units improve?

Source: Adapted from National Institute of Science and Technology (2008), MBNQA Education Criteria for Performance Excellence, Step-by-Step Instructions for INDEPENDENT REVIEW

Scorebook Preparation, 2008 and Adapted from NIST (2009), Malcolm Baldrige National Quality Award 2009 Criteria for Performance Excellence, National Institute of Standards and Technology, US Department of Commerce, Washington, D.C., Available at: www.nist.gov/ and NCAAA (National Council for Academic Assessment and Accreditation) (2008), Self-Evaluation Scales for Higher Education Institutions (June 2008).

10.6.4 Procedural Steps in assessing and scoring a Qualitative KPI or Benchmark Requirement by the assessor in their performance assessment when developing the IQAAPR and QPAR

Step 1:

Read what is expected of the Qualitative KPI or Benchmark Requirement based on the Performance levels.

Step 2:

Read the IQAAPR (Internal Quality Audit and Assessment Report) prepared by the institution, college or program self-study report.

Step 3:

Determine whether there is substantial statistics, information or data (SID) evidence in the input, processes, outputs and outcomes for that Process that a certain level of scoring criteria requirement has been met. This is normally based on the combination of the PDCA and the ADLI review and assessment to determine the level of performance.

Step 4:

Once the performance level has been determined, then determine the scoring of the performance level. Normally each of the level of performance corresponds to each of the scoring range.

Step 5:

It might be noted that in each of the range, there is about 4 ranges of percentages. It can be divided into a low end, median end and high end. If evidence substantiate that it can be awarded a high end percentage, read the next categorical range. If it does not merit a higher categorical range, then assign a high end percentage score in the same scoring criteria range. As a basic requirement for the scoring guidelines, check whether the existing evidence calls for a higher range or a lower range, either a lower or higher percentage scoring range depending on the substantial and concrete evidence rather than verbal or verbose and subjective circumstantial judgment. As a rule of thumb for determining whether it is in the low end, median end or high end percentage, use the LeTCI process criteria – if it only satisfy the (Le), then assign a low end, if it is in between (T) and (C), and evidence do not justify the learning aspect, go for a lower percentage of the median end percentage.

=====

REFERENCES

1. NCAAA Standards for Program and Institution.
2. SES for Program and Institution.
3. Template SSRp and SSRi of NCAAA.
4. JU Regulations and Policies.
5. Checklist of Evidence of All Standards.

6. NCAAA Documents: <http://www.ncaaa.org.sa/en/Pages/default.aspx>
7. NCAAA Handbook-for-Quality-Assurance-part-1 (2015).
8. NCAAA Handbook-for-Quality-Assurance-part-2 (2015).
9. NCAAA Handbook-for-Quality-Assurance-part-3 (2015).
10. National-Qualifications-Framework-for-higher-education in Saudi Arabia (2016).
11. JU Annual Reports.
12. Quality Management System of King Faisal University, Saudi Arabia.
13. Quality Management System of King Fahd University, Saudi Arabia.
14. Different Websites of National and International Universities.

APPENDICES

APPENDIX 1: Electronic Quality Management System (EQMS)

EQMS is designed to make available comprehensive, WEB-Based, Quality Management System; that provides electronic portfolios and academic assessment for all colleges and programs. It is available any time anywhere for all users who have an internet connection. It is actually 'computerizing' and controlling the self-evaluation process.

The EQMS allows to construct a report that can be used to improve the quality of NCAAA academic standards implementation.



Benefits and Features of EQMS

1. Enable the Deanship of Academic Development to monitor and evaluate the programs and institution for accreditation.
2. Paperless annual self-study for colleges, higher administration and Institution
3. Paperless filing system to store key evidence for NCAAA and KPI
4. Dashboard features of the EQMS will enable the management to make judicious decisions
5. Initiate reports which can be exported to Excel, PDF, and Word, etc.

- Wide Flexibility to upload any type of documents, as an evidence (word, pdf, scanned documents, RAR files, etc.).
- The system is designed to give the support to Users according to different roles; where each role has its own set of Permissions.

Objectives

- Profile Institution, college and program.
- Support to Strategic plan for 2020 requirements.
- Support for Accreditation
- Statistics and information faculty, enrolment, ratio, trends, graduation rates.
- KPI's and Benchmarks
- SSRP and SSRI

People Involved in Developing the Application

System analyst and developers:

- Intikhab Hussain Bhat
- Anwar H. Katrawi

Dashboard

The EQMS contains dashboard which is a monitoring interface that gives the Institution and colleges an overview of the self-evaluation process status. It has multiple indicators to different things, such as, how many standards the college has used for self-evaluation process, results and rating of self-evaluation scales overall, etc.

Year: 2014-2015

College Name: Preparatory Year

Program Name: Preparatory

Standard Wise Rating

Standard	Rating
1 Mission and Objectives	3
2 Program Administration	3
3 Management of Program Quality Assurance	3
4 Learning and Teaching	3
5 Student Administration and Services	1
6 Learning Resources	0
7 Facilities and Equipment	0
8 Financial Planning and Management	0
9 Employment Process	0
10 Research	0
11 Relationships with the Community	0

ProgramName	SubStandard Name	Item Number	Applicable/Not applicable	Rating	Year
Preparatory	Appropriateness of the Mission	1.1.1	YES	☆☆☆☆☆	2014-2015
Preparatory	Appropriateness of the Mission	1.1.2	YES	☆☆☆☆☆	2014-2015
Preparatory	Appropriateness of the Mission	1.1.3	YES	☆☆☆☆☆	2014-2015
Preparatory	Appropriateness of the Mission	1.1.4	YES	☆☆☆☆☆	2014-2015
Preparatory	Usefulness of the Mission Statement	1.2.1	YES	☆☆☆☆☆	2014-2015
Preparatory	Usefulness of the Mission Statement	1.2.2	YES	☆☆☆☆☆	2014-2015

Standard Evaluation

EQMS allows the Manipulation of Standard evaluation. It allows adding and modifying of standard evaluation from one academic year to another academic year.

Self Evaluation

Overall Assessment

KPI Evaluation

Common Reports

Evaluation Reports

Calendar

< November 2014 >

Su	Mo	Tu	We	Th	Fr	Sa
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	1	2	3	4	5	6

CHANGE TO ARABIC

Self Evaluation Comments

Year: 2014-2015

College Name*: Faculty of Computer Science Standard Name*: (1) Mission and Objectives

Program Name*: Computer Science SubStandard Name*: (1.1) Appropriateness of the Mission

See the Item and Rating Info (Show Details...)

Item Number	Item Name	Is Yes/NO/NA	Methods And Approaches Used	Upload Evidence	Rating	Remarks	Save/Update
1.1.1	The mission for the program should be consistent with the mission of the institution.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA		Documents Uploaded:0	☆☆☆☆☆		
1.1.2	The mission should establish directions for the development of the program that are appropriate for a program of its type and the needs of students in Saudi Arabia.	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA		Documents Uploaded:0	☆☆☆☆☆		
1.1.3	The mission should be consistent with	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA			☆☆☆☆☆		

KPIs

EQMS allows manipulation of KPIs. It allows adding, modifying and deleting of KPIs from one academic year to another.

Institutional KPI

Program Standards

Program Items

Program KPI

College List

Programs List

Calendar

< November 2014 >

Su	Mo	Tu	We	Th	Fr	Sa
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	1	2	3	4	5	6

CHANGE TO ARABIC

		KPI Name	Sub Standard Name
Edit	Delete	(1.1) Average rating of awareness vision and mission of the university to staff and students	(1) Mission and Objectives
Edit	Delete	(2.1) Average rating of the overall quality program and administration of the university	(2) Program Administration
Edit	Delete	(3.1) Students overall evaluation on the quality of their learning experiences at the institution. (Average rating of the overall quality of their program on a five point scale in an annual survey of final year students.)	(3) Management of Program Quality Assurance
Edit	Delete	(3.2) Proportion of courses in which student evaluations were conducted during the year.	(3) Management of Program Quality Assurance
Edit	Delete	(3.3) Proportion of departments in which there was independent verification of standards of student achievement through internal processes during the past year.	(3) Management of Program Quality Assurance
Edit	Delete	(3.4) Proportion of departments verifying achievement standards through external processes during the past year.	(3) Management of Program Quality Assurance
Edit	Delete	(4.1) Ratio of students to teaching staff. (Based on full time equivalents)	(4) Learning and Teaching
Edit	Delete	(4.2) Students overall rating on the quality of their courses. (Average rating of students on a five point scale on overall evaluation of courses.)	(4) Learning and Teaching
Edit	Delete	(4.3) Proportion of teaching staff with verified doctoral qualifications.	(4) Learning and Teaching
Edit	Delete	(4.4) Proportion of students entering preparatory program who successfully complete that program within the specified time.	(4) Learning and Teaching
Edit	Delete	(4.5) Percentage of full time undergraduate students who are eligible to proceed to second year after their first academic year	(4) Learning and Teaching
Edit	Delete	(4.6) Course completion rates for a. Full time students b. Part time students and c. Distance education students.	(4) Learning and Teaching

Membership

EQMS allows creation of Roles. Each user can have one or more roles. Each role can have one or more permissions. A user can access the application and perform those tasks which he/ she has access to.

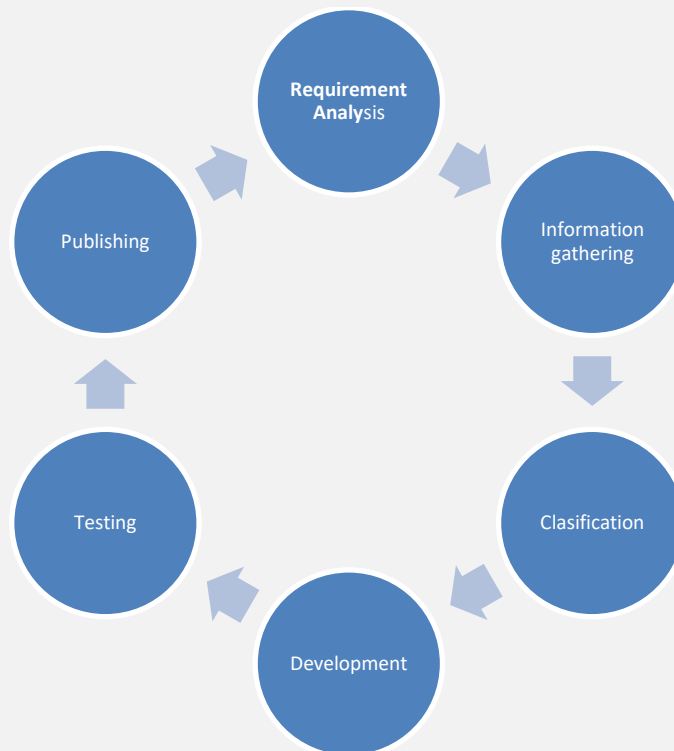
[Home](#) > [Membership](#) > Manage Roles

Manage Roles

Create a New Role: **CREATE ROLE**

	Role
Delete Role	Admin
Delete Role	College
Delete Role	DAD
Delete Role	InstStandards
Delete Role	Normal
Delete Role	Rector

Summary of Development Process



Future Development

1. SSRP (Self-Study Report for Programs)

2. SSRI (Self-Study Report for Institution)
3. Integration between SSRI and SSRP

Conclusion

To sum up, the system is to improve the overall quality assurance process at the University. Moreover, to support for applying the accreditation process. In addition, it also serves as a central depository system for NCAAA/ JU evidence.

FOR APPENDICES (2, 3, 4, 5, 6, & 7) See the following Website:
<http://www.ncaaa.org.sa/en/Pages/default.aspx>

APPENDIX 2: NCAAA Program Self-Evaluation Scale (SESP).

APPENDIX 3: NCAAA Program Self-Study Report (SSRP).

APPENDIX 4: NCAAA Program Eligibility Form.

APPENDIX 5: NCAAA Institution Self-Evaluation Scale (SESI).

APPENDIX 6: NCAAA Institution Self-Study Report (SSRI).

APPENDIX 7: NCAAA Institution Eligibility Form.