



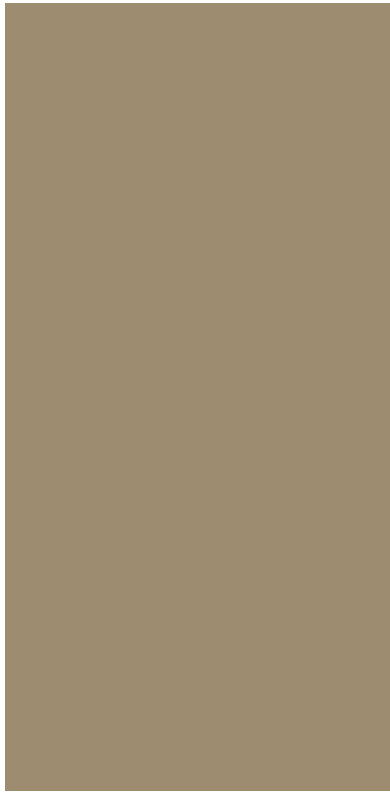
University of Bahrain
Quality Assurance and Accreditation Center

Quality Manual

Version 3
June 2024



Preface



PREFACE

Welcome to the Quality Assurance Manual of the University of Bahrain (UoB). This manual is a comprehensive guide designed to support our ongoing commitment to academic excellence, continuous improvement, and operational efficiency. It outlines the University quality management system, structure and procedures that govern quality assurance and compliance across all facets of our institution.

At the UoB, we recognize that quality education is the cornerstone of our mission to cultivate knowledgeable, skilled, and ethical graduates who can contribute positively to society. To achieve this, we have developed a robust quality management framework that ensures all our academic programs, administrative processes, and support services meet the highest standards of quality and integrity.

The purpose of this manual is to serve as a comprehensive guide for the deans of colleges, department heads, and faculty members. It covers the various management functions at different levels, from department councils to college councils, and up to the University council. Additionally, the manual details the University's quality system, which encompasses three primary functions: compliance, assessment, and accreditation. These functions are carried out through three key processes: the program and Course Assessment Cycle, the Self-Evaluation Cycle, and the Improvement to Action Cycle.

At the UoB, quality and management are intrinsically linked. This manual outlines the quality management system and its integration with the councils, as well as the responsibilities of chairs and deans in maintaining this system. The quality management system comprises well-defined structures, roles, and descriptions. It is governed by a set of policies and procedures that delineate its operations. Additionally, the system includes both direct and indirect internal quality assurance tools, which support the three main processes. Achieving targets is part of closing the loop, but the system also emphasizes ongoing measurement and continuous improvement action plans.

This manual serves multiple purposes:

- **Guidance and Reference:** It provides clear and concise information on our quality management practices, helping faculty, staff, and administrators understand their roles and responsibilities in maintaining and enhancing quality.
- **Continuous Improvement:** By outlining systematic processes for monitoring, assessing, and improving our operations, the manual fosters a culture of continuous improvement and innovation.

- **Compliance and Accountability:** It ensures that our practices comply with national regulations and international standards, enhancing our credibility and accountability to stakeholders, including students, employers, and accrediting bodies.
- **Transparency and Communication:** The manual promotes transparency by detailing the mechanisms for quality assurance and the criteria for evaluation. It encourages open communication and collaboration among all members of the UoB community.

The UoB quality management system focuses on the following:

- **Strategic Planning:** Alignment of quality assurance activities with UoB's strategic goals and vision, ensuring that quality management initiatives support the UoB long-term objectives.
- **Stakeholder Involvement:** Active participation of students, faculty, alumni, employers, and other stakeholders in quality assurance processes to ensure relevance and responsiveness to their needs.
- **Internal Quality Assurance:** Policies and procedures for self-evaluation, internal audits, and feedback mechanisms to monitor and improve academic functions.
- **External Quality Assurance:** Engagement with external accrediting bodies, national authorities and adherence to global benchmarks to validate the UoB standards and practices.

As we strive to uphold the UoB reputation as a leading institution of higher education in Bahrain and beyond, this manual is an evolving invaluable resource. It reflects our dedication to excellence and our unwavering commitment to providing a transformative educational experience for all our students.

We urge all members of the UoB community to acquaint themselves thoroughly with the contents of this manual. Active participation in our quality assurance processes is crucial to ensuring that UoB consistently delivers the highest standards of academic quality and fosters innovation in higher education.

The Quality Assurance and Accreditation Center
University of Bahrain



Contents



CONTENTS

PREFACE.....	1
CONTENTS.....	4
Chapter 1: Introduction	6
Chapter 2: Quality Assurance and Accreditation Center (QAAC)	8
2.1. QAAC Quality Mandates:	8
2.2 QAAC Mission.....	8
2.3 QAAC Vision	8
2.4 QAAC Values.....	8
2.5 QAAC Objectives and Initiatives.....	9
2.6 QAAC Organization Structure.....	10
Chapter 3: UoB Quality Management System (QMS)	12
3.1 Quality Management Model.....	12
3.2 Academic Quality Assurance Management Structure	13
3.3 Academic Leadership Role	25
3.4 Quality Assurance Framework (QAF).....	33
Chapter 4: Internal Academic Quality Assurance System	39
4.1 Documentation: Manuals, Policies, and Procedures.....	39
4.2 Academic Quality Assurance Processes.....	44
4.3 Internal Academic Quality Instruments.....	51
4.4 External Quality Assurance Instruments	63



Chapter 1

Introduction

Chapter 1: Introduction

The Quality Manual is an invaluable resource for UoB staff, providing a comprehensive overview of the Center's policies, procedures, and instruments. Its primary aim is to define and describe the quality system, outlining the authorities and responsibilities of management personnel involved in its operation. Additionally, it offers a general description of all processes that constitute the quality system.

This manual also aims to inform stakeholders about the quality system at the UoB, detailing the specific controls implemented by the QAAC to ensure high standards.

The manual is structured into four chapters, each further divided into sections that represent the main processes of the quality system.



Chapter 2

Quality Assurance and Accreditation Center (QAAC)

Chapter 2: Quality Assurance and Accreditation Center (QAAC)

The Quality Assurance and Accreditation Center (QAAC) was created during the academic year 2009-2010. This manual represents an essential guide that stands for University of Bahrain (UoB) commitment to improving institutional performance, academic excellence and compliance. This manual is outlined in alignment with UoB's strategic plan, to ensure synchronized efforts that meet the standards of higher education both regionally and globally.

2.1. QAAC Quality Mandates:

Quality Assurance and Accreditation Center at University of Bahrain is committed to:

1. develop and improve performance of the UOB through the development of academic performance in the field of education and learning, scientific research and community service.
2. meet the requirements and needs of all stakeholders in order to provide educational service of high quality.
3. instill a culture of quality in the UoB employees and increase their efficiency through continuous training.
4. follow-up and review periodically the quality and compliance objectives to ensure the continuity of the improvement and development of the quality system.

2.2 QAAC Mission

To empower organizational performance and academic excellence through innovative quality assurance practices, collaborative efforts, ensuring internal and external compliance and improving stakeholder satisfaction.

2.3 QAAC Vision

Striving to be a key player in quality assurance and compliance, influencing excellence and setting relevant standards in organizational effectiveness.

2.4 QAAC Values

The QAAC values are considered the base of all quality systems and processes which

contributes to the achievement of its vision. The following are the values of the QAAC:

1. **Innovation:** Continuously pursuing creative solutions for quality, compliance and enhancement.
2. **Compliance:** Ensuring adherence to regulatory standards, policies, and bylaws.
3. **Sustainability:** Emphasizing lasting quality assurance and compliance practices to ensure organizational resilience and ongoing adaptation, thereby maintaining high standards over time.

2.5 QAAC Objectives and Initiatives

In line with the vision, mission, and values of the UoB, QAAC is responsible to achieve the following objectives:

1. **Innovative Quality Enhancement:** Tailored to the position of QAAC as a key influencer in quality assurance, one of the key objectives of the Center is to take advantage of innovative and creative quality solutions available to facilitate and enhance the quality assurance and compliance processes and operations.
2. **Ethical and Transparent Practices:** Aligns with the vision of influencing excellence by ensuring that all quality assurance practices are conducted with integrity, and transparency, to reflect a credible and authentic view of the academic quality processes and operations, that sustain best practices and enhance the areas for improvements.
3. **Compliance and Standards Adherence:** Directly contributes to setting relevant standards in organizational effectiveness, ensuring QAAC not only complies with existing norms but also influences the development of new standards.
4. **Sustainable Quality Assurance Practices:** Emphasizes the long-term role of QAAC within the university, ensuring that its approach to quality assurance remains effective today and continues to set standards in the future. This is grounded in the recognition that compliance with quality assurance requirements and practices significantly contributes to sustaining the effectiveness of both academic and institutional quality.

2.6 QAAC Organization Structure

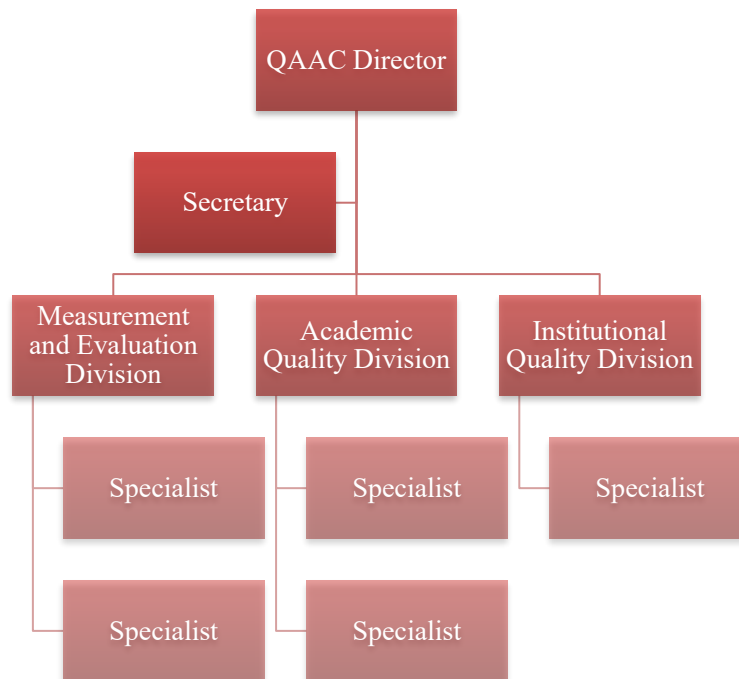
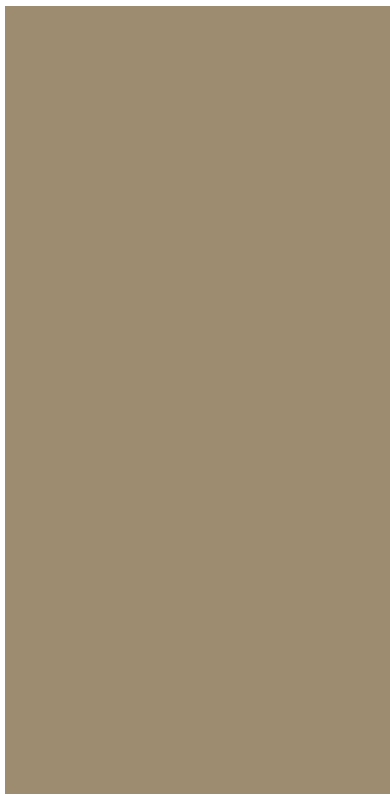


Figure 1: QAAC Organization Structure



Chapter 3

UoB Quality Management System (QMS)



Chapter 3: UoB Quality Management System (QMS)

3.1 Quality Management Model

University of Bahrain shall adopt continuous improvement as an essential component of its quality management system, which aims to improve institutional performance over time. The continuous improvement cycle has four interrelated phases that referred to the Plan, Do, Check, Act cycle:

1. **PLAN:** Establish the goals and actions necessary to implement the institutional plan and its related performance improvement.
2. **DO:** Implement planned processes and allocate the appropriate resources.
3. **CHECK:** Monitor, measure and report on the effectiveness of results and processes.
4. **ACT:** Incorporate the ideas for improvement into the next plan and maximize areas where there have been successes.

The quality management model in Figure 2 is based on the conceptual framework of the ISO 9001 Standard. It recognizes that stakeholders play a significant role in defining requirements as inputs, and it emphasizes the necessity of monitoring satisfaction to evaluate and validate whether these stakeholder requirements have been met.

The ISO 9001:2008 standard model requires satisfying the five key elements applicable to every process within the Quality Framework:

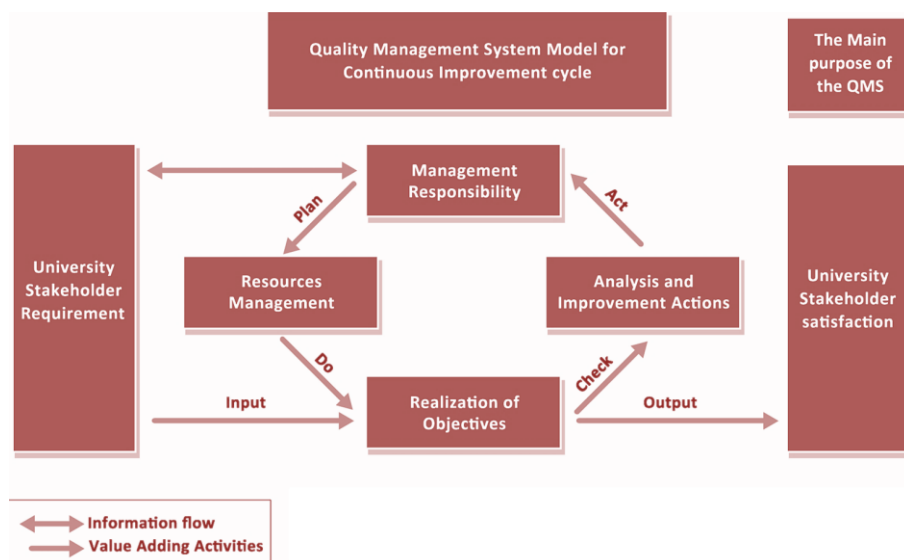


Figure 2: UoB Quality Management Model

1. Documentation
2. Management responsibility
3. Resource management
4. Realization of objectives (product) through planning and defined processes
5. Analysis and improvement.

Acknowledging the general orientation of adopting the Approach, Deploy, Results and Improve (ADRI) Model for assessing quality management across higher education institutions, there are notable commonalities between the PDCA and ADRI when comparing the two models, this is demonstrated through the alignment of each stage in both models: 'plan' aligned to 'approach', 'do' aligned to 'deployment', 'check' aligned to 'results' and 'act' aligned to 'improvement', where both, characterizes systematic methods to assess institutions' quality performance. Such parallelism highlights the effectiveness of both models in enhancing the quality assurance processes within institutions (Gray et al., 2022)¹

3.2 Academic Quality Assurance Management Structure

The internal quality assurance processes at UOB encompass several methods towards implementing quality enhancement. This includes commitment to quality assurance, formulation of the structure of the quality business to ensure continuity and continual improvement and UOB's approach to quality assurance. Figure 3 shows the Quality Assurance Management structure within the University. It shows the various units and positions affiliated with Quality Management within the University.

¹ Gray, J. L., Ross, J., & Badrick, T. (2022). The path to continual improvement and business excellence: compliance to ISO standards versus a business excellence approach. 27(4). <https://doi.org/10.1007/s00769-022-01503-0>

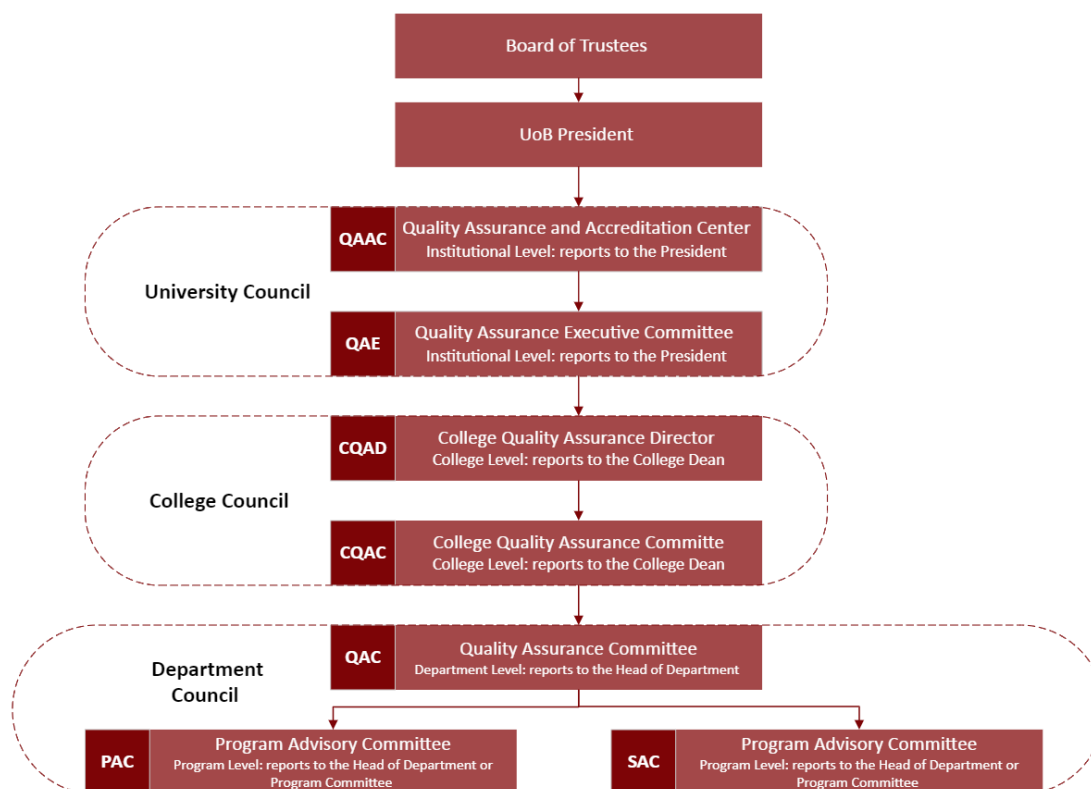


Figure 3: QMS Governance and Structure

UoB shall maintain the following boards, councils and formal teams. These organized bodies shall serve as the quality management structure of the University, performing different but well-coordinated tasks, towards achieving institutional goals. Each of these bodies shall adopt its own Terms of Reference (TOR), which shall be reviewed and revised as per the University Bylaws.

Board of Trustees

The highest governing body of UoB is the Board of Trustees (BoT). The Supreme President of UoB, His Majesty the King, appoints the Board of Trustees, comprising of government ministers, high-ranking government officials, representatives from the private sector, in addition to international independent directors.

Regulated by Legislative Decree No. (17) of 2021, UoB Board of Trustees is formed by a decree, and consists of a chairman and a number of members not exceeding 12 members including the chairman of the Board, who serve for four years on a renewable basis. This council generally supervises the University.

The duties and responsibilities of the Board are clearly defined in the Amiri Decree No. 12/1986, and these were further amended by the Amiri Decree No. 18/1999. The Board delineates the general strategies and policies and appoints members of the University council (Vice Presidents and Deans) upon recommendations from the University President.

University Council

Reporting directly and next to the Board of Trustees in organizational hierarchy is the University Council (UC). The University Council is the executive authority, which helps the University's President to effectively manage the academic and administrative affairs as well as propose and amend the University regulations and pass them on to the Board of Trustees for approval. The Council shall review and make recommendations on issues of university-wide importance including, but not limited to facilities and finance, planning and assessment, community relations, health, safety and environment, campus culture and communications, and policies and procedures. The Council should also carry out approving study plans, granting scholarships and contracting with teaching personnel.

UoB University Council is chaired by the University President and includes all Vice Presidents, in addition to all Deans as members, and a maximum of three other external experts' members nominated by the UoB President and approved by the Board of Trustees for three years for a one-time renewable term.

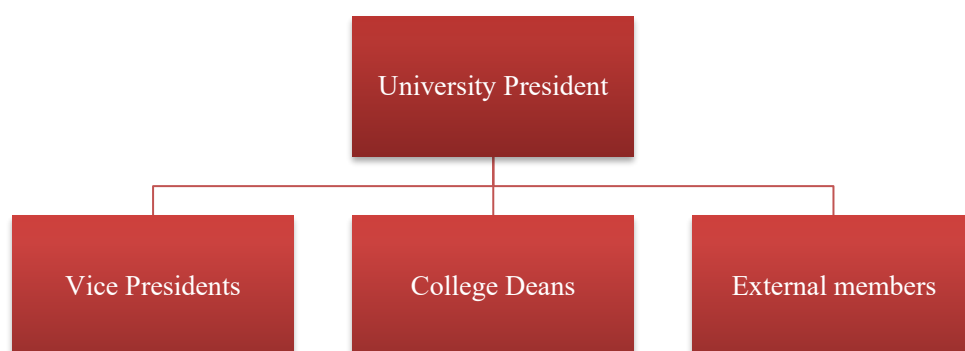


Figure 4: UoB University Council

College Council

Each college has its own College Council (CC). This council is chaired by the College's Dean and comprises all departmental heads, a senior professor as a representative from each department and a maximum of three external members. Department representatives are assigned by the University's President according to their seniority and academic ranks. In addition, three public or private sector members are nominated by the Dean and approved by the Board of Trustees for a three-year renewable term, considering their knowledge of the college programs.

The College Council is the most supreme in the college. The council should supervise its academic programs, and the work of its academic departments. It should also concern with student issues, quality development and implementation of resolutions of the University authorities, particularly resolutions made by the Board of Trustees and University Council. The Council should review and make recommendations on issues of college-wide importance. The College Council should facilitate transparent dialogue and communication by creating an integrated voice and utilizing the expertise of the entire college community. The Council should focus on excellence from a college-wide perspective.

Department Council

Each academic department in the University has its own council. The Department Council consists of academic staff (associate professors, assistant professors, lecturers, and instructors) and holds regular meetings chaired by the respective heads of the department.

The council should be concerned with managing the department, initiating ideas and making proposals regarding the organization of study activities, study and research topics, examinations, and other educational, cultural and extra-curricular issues.

Quality Assurance Executive Committee (QAE)

The Quality Assurance Executive Committee (QAE) at the University level shall be composed of the following members: QAAC Director (as a chair) and comprises all Quality Assurance Offices Directors/Coordinators.

The Quality Assurance Executive Committee should meet regularly to oversee matters that pertain to institutional and program quality reviews, both internal and external, as well as

accreditation. Terms of Reference of the Quality Assurance Executive Committee are as follows:

Key Functions of the QAE:

- 1. Performance Reporting:** Responsible for collecting and synthesizing performance data from various colleges. This data focuses on the implementation and effectiveness of quality assurance instruments, providing a comprehensive view of how quality standards are maintained, complied with and improved across the University.
- 2. Knowledge Sharing Platform:** A unique aspect of the QAE is its role as a hub for knowledge exchange. Directors of Quality Assurance Offices from different colleges are part of this committee, sharing experiences, strategies, and insights. This collaborative environment fosters a culture of continuous learning and mutual support among quality assurance professionals.
- 3. Enhancing Quality Assurance Practices and Compliance:** By leveraging the collective expertise of its members, the QAE actively works to refine and enhance quality assurance practices university wide. This includes suggestions to improving policies and regulations. It assesses existing processes, proposes innovative approaches, and ensures that quality assurance activities are aligned with the University's strategic goals.
- 4. Feedback Integration:** The committee places a strong emphasis on integrating feedback from various stakeholders into the quality assurance processes. This approach ensures that the University's quality assurance strategies are responsive to the needs and expectations of the academic community and external stakeholders.
- 5. Setting Comprehensive University Targets:** The QAE is responsible for setting comprehensive University targets related to quality assurance. This includes scheduling program reviews, programs lifecycles, and placement plans on the national qualification framework. Members of the QAE, who are representatives from each college, liaise with their respective colleges to ensure these targets are met and aligned with the University's strategic objectives.
- 6. Communication of Important Decisions:** The QAE college representatives communicate important decisions, plans, and policies to colleges. This ensures that all colleges are informed and aligned with the University's quality assurance goals and

initiatives. Clear communication helps maintain consistency and coherence in implementing quality assurance practices across the University.

Quality Assurance and Accreditation Centre (QAAC)

The Quality Assurance and Accreditation Centre (QAAC) is the heart of the internal quality assurance structure. The President of the University is responsible for the appointment of the QAAC Director every two years, renewable once. The QAAC overall manages the quality assurance structure and ensures that every unit satisfies all quality requirements. The QAAC heads the Quality Assurance Executive Committee, which follows on all activities of academic quality activities.

The Director of QAAC reports to the President on appropriate academic and management structures to implement the quality assurance and improvement strategy within the University as well as for liaison with external agencies, including BQA, or other national and international bodies, for the purposes of quality assurance and improvement. The QAAC has three main areas of responsibility: assessment, compliance and accreditation.

College Quality Assurance Office Director (CQAD)

The College Quality Assurance Office Director (CQAD) is assigned to a critical role of implementing the quality assurance system at each college within the University. The President of the University is responsible for the appointment of the CQAD in each college every two years, renewable once. As a key figure in academic management, the CQAD navigates day-to-day academic operations, ensuring alignment and compliance with overarching quality standards.

The CQAD is a member of the Quality Assurance Executive Committee (QAE) representing his/her respective college. The CQAD should execute and monitor QA activities within the colleges, including compliance, assessment and accreditation activities. The Director of the College Quality Assurance Office should meet with the chairs of the Department Quality Assurance Committees (QAC) to make sure that all internal and external quality assurance instruments are implemented to satisfy the processes of program and Course Assessment Cycle (PCAC), in addition to Self-evaluation and Improvement Action Cycle.

Selection Criteria: Candidates with effective communication, and visionary leadership skills are preferable selections for holding CQAD position. Their proficiency may include but is not limited to, understanding the development and assessment of educational objectives, survey

methodologies, and implementation of improvement actions. Candidates who have been members of relevant committees within the college for example but not limited to: Quality Assurance Committee, Curriculum Committee and Postgraduate Committee, are preferable, since they have been closely exposed to the quality assurance and compliance relevant policies and procedures. While previous involvement of the abovementioned committee is valued, potential in candidates who have demonstrated comparable leadership and strategic planning skills in other relevant roles is also recognized. Such candidates could bring innovative perspectives and approaches to the role, enhancing the dynamism and effectiveness of quality assurance efforts.

Key Functions:

- 1. Committee Involvement:** The CQAD is a member of the QAE, representing their respective college and contributing to university-wide quality assurance strategies. The CQAD also chairs the College Quality Assurance Committee (CQAC), that involves the chairpersons of Department Quality Assurance Committees' (QAC) in the college ensuring a cohesive approach to quality across departments.
- 2. Execution and Monitoring:** The CQAD oversees and executes quality assurance activities within the college, focusing on compliance, accuracy and updates where relevant.
- 3. Collaborative Engagement:** Regular meetings with the CQAC to guarantee the comprehensive implementation of internal and external quality assurance instruments and adherence to program lifecycles and course assessment in addition to self-evaluation protocols. The CQAD assists (faculty, students, etc.) to perform QA activities within the College (course portfolio, benchmark, assessments, etc.).
- 4. Reporting and Coordination:** The CQAD maintains an active reporting line to the College Dean, providing insights and updates on quality assurance activities within the college. Further, the CQAD is responsible for updating the College Dean, Heads of Departments and members of the CQAC on all matters discussed in the QAE. Ensuring that the college is kept well informed of all important updates and that the decisions taken by the QAE take into account the opinion of the college.

5. **Records Keeping:** The CQAD is responsible for documenting QA activities within the colleges, reporting these activities to the QAAC, and maintaining records related to academic programs, QA activities, and the implementation of QA instruments.
6. **External Liaison:** As a liaison with the QAAC, the CQAD ensures coherence in quality assurance activities across the college, through dissemination of the latest policies and procedures, and cultivating quality assurance culture through compliance and commitment to the approved policies, procedures, and practices.

College Quality Assurance Committee (CQAC)

The College Quality Assurance Committee (CQAC) acts as a centralized hub for quality assurance and accreditation activities within the college. This committee plays a pivotal role in facilitating effective communication and collaborative discussion among the college's departments and the CQAD.

Membership: Chaired by the CQAD, the CQAC includes the chairs of Department Quality Committee in each department, ensuring the implementation of internal quality assurance instruments and compliance with internal quality policies and standards and external regulatory bodies, across the College.

Key Functions:

1. **Best Practices Implementation:** Discusses and determines best practices for consistent compliance and implementation of internal quality assurance across departments.
2. **Performance Review and Reporting:** Reviews and reports on departmental performance in implementing quality assurance instruments, identifying areas needing support.
3. **Program Improvement Plan Follow-up:** Oversees the implementation of program improvement plans. In addition to reviewing academic programs, ensuring that they are up to date, in compliance with the UoB's regulations, and international standards.
4. **Accreditation Preparation:** Coordinates preparations for upcoming program reviews and accreditation processes.

5. **Obstacle Management:** Reviews obstacles reported by departments, suggesting action plans for the identified challenges.
 6. **Comprehensive Timeline Development:** Establishes timelines for departmental submissions related to quality assurance and accreditation and communicating them with the QAE after obtaining approval at the College level.
- **Reporting:** Collaborating with the QAAC Director, the chair of the committee reports to the College Dean on a regular basis, representing the outcomes and the recommendations relevant to key functions of the committee to be discussed on a college level through the College Council.

Quality Assurance Committee (QAC)

The Quality Assurance Committee (QAC), formerly known as Department Accreditation Committee (DAC), is the steering force behind the Program and Course Assessment Cycle (PCAC) process. It coordinates the quality assurance and accreditation activities and responsible for organizing and reviewing the program outcomes, objectives, course portfolios, assessment and surveys data, as well as writing the self-evaluation report, which is part of the Self Evaluation process. The committee should assist the Department Chairperson to develop an improvement plan, based on self-evaluation process. The committee should also recommend training sessions to ensure performance of program. The training sessions should be discussed in the QAE committee, where a training program is developed to provide capacity building workshops. The QAC should manage two quality committees that support the Program and Course Assessment Cycle, namely the Program Advisory Committee (PAC), and the Students' Advisory Committee (SAC).

The department chairperson is responsible for the appointment of the QAC committee in each college every year.

The selection of a QAC Chair is based on the following criteria:

1. The QAC Chair should understand the philosophy of quality in education and its influence on academic life.
2. The QAC Chair should have been a QAC member to be able to run the training sessions, revising portfolios, having the knowledge of assessing Program Educational Objectives (PEOs) and Program Intended Learning Outcomes (PILOs), etc.

3. The QAC Chair should have a good understanding of the tasks of the main committees in the program, such as the Curriculum Committee.
4. The QAC Chair should be able to coordinate, having good management and communication skills.
5. The QAC Chair should be an active member.

Program Advisory Committee (PAC)

The PAC serves as an influential advisory body for the academic program and its continual evolution. Comprising industry experts, academics, and representatives from key stakeholder groups such as businesses, government agencies, and other relevant sectors, the PAC brings external perspectives vital to the program's relevance and quality. Regular meetings, ideally once per semester and at a minimum annually, ensure timely and effective input.

Committee Structure: The committee's size and composition are tailored to meet the program's educational, economic, social, and cultural obligations. An optimal committee size is typically 6-12 members, ensuring diverse perspectives without hindering effective decision-making. The QAC nominates PAC members, subject to approval by the department council, with appointments reconsidered annually.

Selection Criteria for PAC Members:

1. **Expertise and Experience:** Extensive experience in their respective fields, whether in industry, academia, or other relevant sectors and up-to-date knowledge of current trends and advancements in their industry. Members should have an active local or regional employment status at the time of selection.
2. **Relevance to Program:** Direct relevance of their professional and/or academic background to the academic programs being advised.
3. **Diversity:** Representation from various sectors, including businesses, government agencies, non-profit organizations, and academic institutions.
4. **Commitment and Availability:** Willingness to actively participate in PAC meetings and contribute time and effort to the committee's activities. In addition to their availability to attend regular meetings (typically once per semester or annually) and engage in ongoing discussions and initiatives.

5. **Independence and Ethical Standards:** PAC members should not have a relative who is a student or staff member (up to the second degree²) in the department. Members should have high ethical standards and integrity to ensure that recommendations and feedback are in the best interest of the program and its stakeholders.

Key Roles and Contributions:

1. **Advisory Support:** Offers advice and support to academic programs, ensuring their alignment with current market needs, external standards, and expectations.
2. **Quality Assurance:** Assists in defining program specifications to maintain graduate quality and relevance to current employability skills.
3. **Program Growth and Development:** Suggests improvements for program expansion and evolution.
4. **Employer Alignment:** Ensures that technical and occupational programs align with employer needs and industry standards, in addition to enhancing the program's employability skills.
5. **Community Needs:** Proposes adjustments to align the program's educational objectives with community requirements.
6. **Research Collaboration:** Advocates for collaborative research programs between the University and relevant external stakeholders.
7. **Program Review:** Effectively participates in discussions about the current programs' revisions and strategic adjustments to align the programs with recent labor market trends.
8. **Strategic Planning:** Aids in formulating short and long-term strategies for future program initiatives.

² A first-degree relative of a person is any of the following: that person's spouse, children, stepchildren, siblings, half-siblings, stepsiblings, parents, or stepparents. A second-degree relative of a person is any first-degree relative of one of that person's first-degree relatives. A relative who is both a first-degree relative of a person and a first-degree relative of a first-degree relative of that person is deemed to be a first-degree relative of that person. A relative up to the second degree means any first or second-degree relative.

Student Advisory Committee (SAC)

The Student Advisory Committee (SAC) is composed of junior and senior students currently enrolled in each program. The SAC members are students from the second, third and fourth years and are elected among their peers. The committee should serve as a representative of the students as stakeholders in the program. The SAC should meet ideally every semester and at least once a year. The QAC organizes and chairs the meeting of the SAC committee to review aspects of the program's curriculum. The SAC members may be also invited to attend the periodical meeting held with the PAC.

The role of Student Advisory Committee includes the following:

1. Provide advice to the programs' owners with the aim to improve the program.
2. Provide their feedback & inputs into courses, programs educational objective and services, and to ensure their high relevance to student interests.
3. Provide students' input on various curriculum issues, including the development and evaluation of the program educational objectives.
4. Advises the department on matters such as ideas for new courses and programs, proposal for improvement of instructions or faculty advising in the department, and suggestions for changes in the requirements of the major, proposes pre-requisite changes, etc.
5. Advises the program administrator about students' concerns and helps to coordinate extracurricular activities to benefit the students.

The QAC committee should nominate SAC members, who are to be reviewed and approved by department council. It is recommended to select the students from each academic year, as well as covering the range of GPAs from 2 to 4, preferably above 2.5. The period of nomination is for one year, revisited each year mainly to replace inactive and senior students who graduate with other students.

If the program includes students with special educational needs and disabilities (SEND), at least one SEND learner must be a member of the SAC to ensure that their perspectives and needs are adequately represented. In cases where the program includes more than one type of special educational need, representation from each category of need should be ensured within the committee to promote inclusivity and equitable participation in decision-making processes.

The inclusion of SEND learners in the SAC is mandatory. Their membership shall be

additional to the standard number of committee members and shall not replace or reduce the regular student representation. This ensures that SEND learners are represented without affecting the committee's intended size, structure, or balance.

3.3 Academic Leadership Role

The University's key academic leaders related to the quality of academic programs are the Vice President for Academic Programs and Postgraduate studies, College Deans, Heads of Departments, Program Coordinators, and the Faculty Members. Their duties and responsibilities are outlined as following:

President:

1. Supervises enforcement of the University's law, bylaws, and regulations, and monitors the implementation of the Board of Trustees' resolutions.
2. Chairs the University Council, calls for its meetings, approves its agenda, organizes its affairs, and issues executive orders based on its resolutions.
3. Takes necessary measures to ensure the enhancement of the quality of education at the University and achieves academic progress and excellence.
4. Supervises the preparation of the University's operational plan, the implementation of the approved University budget, the preparation of its organizational structure, and obtains the necessary approvals for its adoption in accordance with the law and civil service regulations.
5. Supervises all academic units and technical and administrative bodies at the University, ensures their completion of equipment and tools, and meets the University's needs for faculty members, administrative staff, technicians, and other supporting categories.
6. Issues executive orders regarding the appointment, promotion, secondment, deputation, leave, and granting of bonuses and incentives to faculty members, after obtaining approval from the Civil Service Bureau in accordance with the law and civil service regulations.
7. Appoints department heads, center directors, managers, program coordinators, and editors-in-chief of academic journals, whether academics or administrators, after obtaining approval from the Civil Service Bureau.

8. Signs employment contracts for faculty members, their assistants and associates, consultants, experts, administrative and technical staff, and clerks, whether external or local contracts, after obtaining approval from the Civil Service Bureau, and resolves implementation issues before referring them to any other authority.
9. Appoints and promotes employees, transfers and deposes them, grants bonuses and incentives, and appoints consultants and assistants with expertise and specialization, in accordance with the rules approved by the University Council and after obtaining approval from the Civil Service Bureau.
10. Forms administrative, technical, advisory, cultural, academic, sports, or other committees to perform specific tasks or to carry out work, activities, or services within the scope of the University's objectives.
11. Forms investigation committees for academic, administrative, and financial violations committed by university affiliates in accordance with the regulations stipulated in the law and civil service regulations and according to the penalty authority stipulated in the laws and regulations.
12. Awards scientific prizes in accordance with a special system approved by the University Council.
13. Signs contracts and agreements in which the University is a party, implements the University's budget, and issues disbursement orders for University expenses in accordance with financial regulations.
14. Submits an annual report to the Chairman of the Board of Trustees, after being presented to the University Council, at the end of each academic year on the follow-up of education, scientific research, and other activities at the University, evaluates, reviews, and develops them along with any proposals deemed beneficial for the advancement of the University.

Vice President for Academic Programs and Postgraduate Studies:

1. Acts as the chair of the University Curriculum Committee, and Postgraduates Studies Council.
2. Develop academic regulations, policies, and procedures.

3. Maintains and updates the implementation status of all University academic programs concerning reviews, placements, accreditation, and study plan updates.
4. Supervise the implementation of UOB's academic programs and scientific research.
5. Contribute to the development and identification of program offerings.
6. Coordinate and assist Colleges' Deans in implementing academic affairs.
7. Manage the professional development of academic staff.
8. Oversees the development and implementation of the University's academic strategic planning to ensure alignment with the institution's goals and objectives.
9. Additional responsibilities as assigned by the President.

College Dean/Institute or Center Director

1. Chairs the College Council.
2. Supervises the educational process, ensuring quality and academic excellence.
3. Oversees scientific research and supports research and publication.
4. Prepares and revises strategic plans for the college and its departments.
5. Endorses and initiates processes for accreditation, moderation, and external examinations.
6. Endorses the list of candidates for graduation.
7. Oversees academic program assessments and internal/external reviews.
8. Evaluates and recommends needs for positions, facilities, equipment, and resources.
9. Manages personnel matters, including recruitment, evaluation, promotion, and workload plans.
10. Evaluates staff performance and recommends promotions, contract renewals, and other employment actions.
11. Ensures smooth operation of the college, maintaining order and coordination with university authorities.
12. Coordinates between departments and other university units.

13. Maintains effective communication with students, faculty, and university units.
14. Liaises with professional associations and accrediting agencies.
15. Oversees student activities in coordination with the student affairs department.
16. Ensures college policies align with university policies.
17. Manages budgetary needs, resource allocation, and facility use.
18. Approves purchase requests for textbooks and instructional materials.
19. Oversees class schedule preparation and maintains student records.
20. Submits an annual report on the college's education, research, and activities to the President.

Department Chair

1. Chairs the Department Council.
2. Proposes and assigns teaching loads and other university work among faculty members.
3. Processes recruitment, paper screening, and interviewing of candidates for associate faculty employment.
4. Conducts new faculty orientation sessions.
5. Develops and implements performance reviews and appraisals and supervises faculty and staff performance.
6. Handles faculty, staff, and student complaints.
7. Prepares reports on program needs, activities, and outcomes.
8. Prepares bulletins to keep faculty and staff informed.
9. Endorses requests for purchasing textbooks, supplies, and instructional materials.
10. Manages departmental programs to ensure achievement of objectives and outcomes.
11. Leads curriculum development and revisions with department faculty.
12. Monitors class enrollments and recommends opening or closing class sections.

13. Supervises lessons and lectures, ensuring quality and regularity.
14. Oversees academic supervision and student advisement on majors and careers.
15. Evaluates grade sheets and candidates for graduation.
16. Oversees practical training of students.
17. Encourages faculty and staff participation in community and social organizations.
18. Identifies funding sources for program development and operation.
19. Develops postgraduate studies and research plans.
20. Manages internal moderation, quality reviews, and accreditation activities.

Program Coordinator

The Department Chairperson is usually the program coordinator, only if no designated program coordinators are assigned. The following are the duties of the program coordinator:

Leadership and General Administrative Duties

1. Provide the general leadership for the program, which results in a productive and positive work climate, enhanced intellectual vitality, and collegial relations among faculty, faculty and staff, faculty and students.
2. Develop and implement program strategic goals, objectives, and plans that are linked to department, college and University plan.
3. Recommend course schedules and faculty assignments, which are designed to meet student needs, and which result in maximum utilization of existing resources.
4. Plan and schedule program meetings and events.
5. Organize program office schedules and the work of the administrative and office staff, ensuring that faculty office hours are posted.
6. Attend program activities, such as exhibitions, conferences, seminars, graduation ceremonies, etc.
7. Monitor the budget.

8. Prepare reports, inventories, and surveys providing such information as requested by the Dean /Chair or other University officials.
9. Chair all meetings of the program and to serve as its advocate and liaison.
10. In conjunction with appropriate University offices, the program coordinator ensures that area classrooms, labs and other instructional/storage spaces are safe, sanitary and comply with University regulations.
11. Initiate, develop, coordinate, and maintain the currency of contracts with multiple agencies such as accreditation agencies and external reviewers and examiner.
12. Ensure that all required program correspondence is completed in a responsible and timely manner.
13. Create and maintain area databases.
14. Prepare written annual evaluations of faculty and staff, which comply with University policies and administrative guidelines/timelines.
15. Process grievances regarding faculty, students and staff.
16. Negotiate with Chairs /Deans for faculty schedule and load.
17. Encourage the professional growth of all faculty and staff.
18. Coordinate the search and screening process of new faculty with the Chair/Dean and other university personnel offices.

Academic Duties

1. Recommend courses, academic degrees and/or curricula to the Chair/Dean and other appropriate units, to enhance and improve academic offerings.
2. Plan and coordinate appropriate and timely responses through the Chair /Dean for the preparation and publication of required accreditation and/or university data and reports.
3. Monitor and coordinate requests for texts, supplies and other instructional resources.
4. Prepare program brochures and newsletters as requested/directed by the Chair/Dean.
5. Monitor program quality and integrity and bring any issues to attention of the Chair/Dean.

6. Where applicable, coordinate the implementation of special exams and independent study for students, and report the results as requested or required by the Chair/Dean.
7. Where applicable, provide peer observation for faculty when requested by them or by the Chair/Dean.
8. Manage the assessment process, which includes curriculum, courses, advising, placement and internships.
9. Conduct market research and needs assessment.
10. Liaise with professional associations/advisory committees.
11. Prepare and send training proposals.

Students

1. Actively search for opportunities to improve student diversity.
2. Establish and supervise a system of effective academic student advisement by the faculty.
3. Receive, address, and process student queries, criticisms, and grievances regarding faculty, and promptly inform the Chair or Dean of any significant issues or trends.
4. Monitor and audit student progress towards program enrolment/graduation, ensuring all requirements have been met.

Community Relations

1. Coordinate and direct the program linkage/liaison to external agencies/constituencies in cooperation with the Dean's Office.
2. Coordinate with industries and companies.
3. Serve as the official spokesperson for the program within or out of the campus.

Other Duties

Perform other duties such as those assigned by the Chair/Dean or other appropriate University officials.

Faculty members/ Course Coordinators

1. Prepare for and meet teaching responsibilities for every class, ensuring the delivery of courses using varied and appropriate teaching and learning methodologies and strategies.
2. Develop learning outcomes and assess student learning in various forms to evaluate the extent of achievement of intended learning outcomes.
3. Ensure that assessment follows agreed policy, procedures, tools, and forms.
4. Conduct examinations, prepare test questions for both formative and summative assessments, and update course files.
5. Evaluate and guide students, supervise their research, scientific, practical, and social activities, and provide academic, educational, and professional guidance.
6. Carry out and act on the results of student feedback surveys, assessment, and review results, and implement actions in relation to courses and curriculum.
7. Serve as student academic advisers and meet with each assigned student advisee, scheduling own office hours.
8. Participate in training and professional development programs to enhance skills and abilities, aiming to elevate academic and professional standards.
9. Participate in university councils, committees, and departmental meetings, assisting in various academic and administrative processes through involvement in committees.
10. Participate in activities relating to university programs, courses, governance, or community activities that impact the University and contribute to the growth and development of students, the university, and the community.
11. Engage in scholarly activity, such as producing articles or delivering professional presentations.
12. Conduct and publish scientific studies and research, and participate in conferences, seminars, and scientific forums.
13. Recommend textbooks and other resources for purchase by the University.
14. Maintain effective communication and cooperation with colleagues, superiors, and students, and complete assigned tasks in a timely manner.

15. Preserve the University's properties and funds, ensuring that behavior aligns with university traditions and customs, and uphold the ethics and honor of the profession.
16. Dedicate oneself to academic duties at the University, exerting maximum effort to advance its academic mission, and maintain high standards in scientific research, publishing, authorship, teaching, guidance, and administration.
17. Contribute to community service and environmental preservation.
18. Perform other duties as may be assigned by the department chairperson or college Dean.

3.4 Quality Assurance Framework (QAF)

To ensure a robust QMS, UoB maintains its academic standards through a framework comprising two components: internal and external quality assurance and compliance where these components implement the ADRI quality assurance model adopted by UoB. The structure and mechanism of quality assurance at UoB are governed by the Quality Assurance Policy. This policy emphasizes the importance of continuous improvement and enhancement, supported by various policies, procedures, and toolkits. Different committees, entities and faculty members oversee these efforts, providing comprehensive oversight and facilitating effective actions at various levels.

Integrating both internal and external quality assurance and compliance components is crucial for maintaining academic quality in a university setting. Together, these create a robust framework for quality assurance, ensuring that the University meets the required standards and strives for excellence in its academic offerings. These integrations are evident in the UoB Evaluation and Enhancement Processes (Figure 5) and Programs Lifecycle (Figure 6).

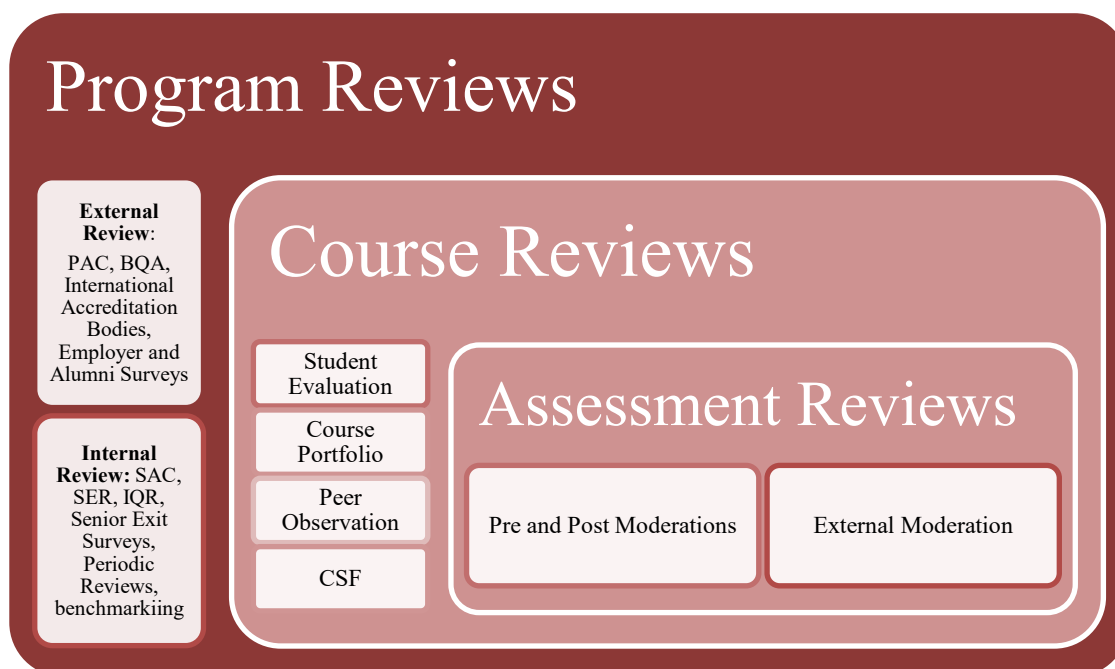


Figure 5: UoB Evaluation and Enhancement Processes

The UoB Academic Program Lifecycle (Figure 6) was developed and approved in 2024 aiming to streamline and organize the quality assurance and compliance processes and operations, making quality processes more transparent and manageable for the academic departments. This approach reduces the burden on colleges and ensures that essential information is uniformly disseminated across the University. Reflecting the ADRI model and incorporating both internal and external quality and compliance processes, the Program Lifecycle for a four-year length program as an example is divided into five stages, those stages are adjusted according to the length of the program:

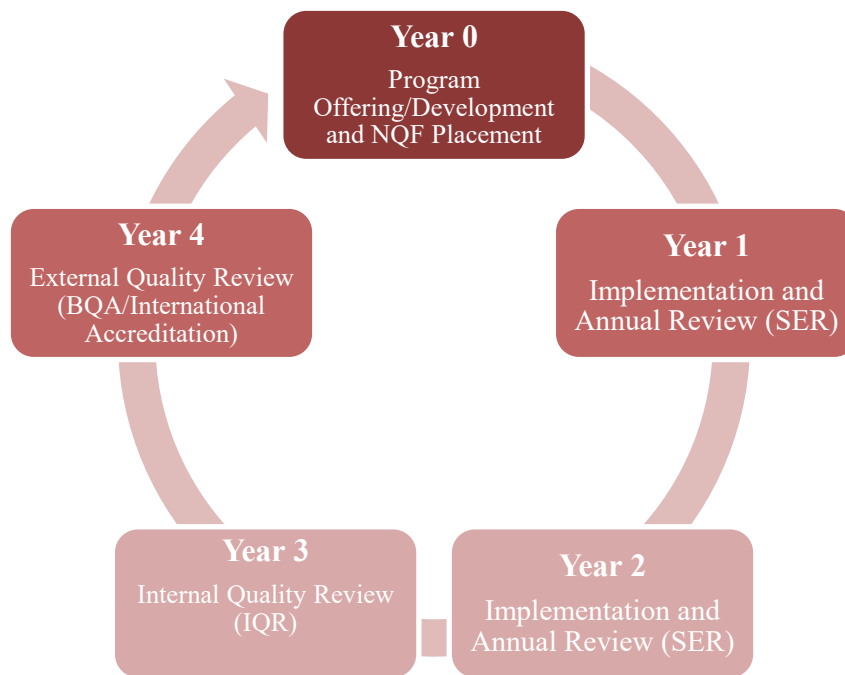


Figure 6: An Example of the UoB Academic Program Lifecycle for a Four-Year Length Program

1. Year Zero: Program Offering and NQF Placement

When a program is developed, UoB regulations for offering and developing academic programs is utilized, along with the Program Proposal Toolkit. This toolkit includes several facilitating forms, such as Benchmarking forms and Market Study forms, which are governed by relevant policies and guidelines including, but not limited to, the Benchmarking Policy, Market Study Guidelines, and the Credit Hours Assignment to Academic Courses Policy. To obtain comprehensive feedback from different perspectives, this stage involves analyzing the findings of conducted surveys, including Employer and Alumni Surveys (for existing program revisions) and conducting stakeholder meetings and student surveys (for new program offerings). Additionally, to align with national requirements and initiatives, the program is placed on the National Qualifications Framework at this stage. This process is further supported by the UoB Guide to NQF Placement, Assuring Learning Guide, and NQF Placement Toolkit.

2. Year One: Implementation Inception

After the program is approved and placed on the NQF, the first stage of the program's implementation begins. This involves offering the program for registration and enrollment and applying quality assurance instruments and toolkits where applicable. Examples include forming the PAC and SAC, developing course portfolios, and creating the SER at the end of the year. The SER is submitted to the CQAD, who reviews it and provides recommendations for improvement on a yearly basis.

3. Year Two: Continuous Implementation

This is the stage where the program continues its implementation, and the expected outcomes are clarified and magnified using various toolkits and relevant policies. The program also benefits from external feedback, with the PAC and SAC conducting their meetings in accordance with their specified terms of reference, providing valuable insights into the program's strengths and areas for improvement.

Throughout the previous two stages of program implementation, several practices and quality instruments are applied on an ongoing basis. This includes developing and submitting the SER, which contains critical and technical information about various academic aspects of the program. The SER includes, but is not limited to, PAC and SAC meeting recommendations and actions taken, statistical information, and summaries of PILO assessments and moderation reports.

Assessing the achievement of CILOs is crucial for making relevant and informed decisions based on students' performance. This process is regulated by the Student Outcome Policy and facilitated by the CILO-PILO Assessment Toolkit, which supports informed decision-making that contributes to the achievement of CILOs. These ongoing operations are illustrated in Figure 5.

4. Year Three: Internal Quality Review:

In preparation for external reviews/accreditation and given the program's maturity in its third year of implementation, it will undergo an internal review according to the Internal Quality Review Policy and Procedures. The internal quality review subjects the program and academic staff to settings and meetings similar to those of actual external reviews and accreditation processes. This exposure familiarizes them with the nature of these reviews, highlights areas for improvement, and identifies best

practices adopted within the program and college, which are then shared across UoB through the CQADs.

In addition to the review in Year 3, Internal Quality Reviews are also a tool to monitor and enhance programs that have undergone external BQA reviews, accreditation processes, and NQF placement but did not meet the required standards. These reviews can also be conducted in year zero of the cycle to assist in the readiness of these programs. They help evaluate the measures taken and their effectiveness in addressing the gaps and deficiencies identified before the program's implementation in Year one.

5. Year Four: External Review and Accreditation

At this stage, the program is prepared and sufficiently matured to undergo external reviews, such as those conducted by the BQA and international accreditation bodies. During its lifecycle, the program receives various inputs and feedback from different internal and external stakeholders. This feedback highlights areas for potential improvement and strengths to be maintained, including alignment with market needs. The program will undergo a thorough revision incorporating all these inputs and feedback. Additionally, more external feedback will be included at the different revision stages, as well as benchmarking and thorough market study according to the Regulations for Offering and Developing Academic Programs and Courses, facilitated by the Program Proposal Toolkit.



Chapter 4

Academic Quality Assurance Framework

Chapter 4: Internal Academic Quality Assurance System

4.1 Documentation: Manuals, Policies, and Procedures

A. Quality Assurance Policy

The University of Bahrain is committed to excellence through its Quality Assurance policy, which delineates the institution's strategies for ensuring continuous enhancement across academic and administrative realms. This policy outlines the University's principles and standards, guiding its pursuit of excellence in both educational and operational spheres. To uphold these standards, meticulous procedures are established, facilitating a perpetual cycle of improvement. Academic endeavors are rigorously evaluated, encompassing all aspects of program management, while administrative affairs, spanning management, services, support, and resource allocation, undergo thorough scrutiny to ensure efficiency and efficacy.

Therefore, the purpose of this policy is:

To define the University approach to quality assurance and continuous improvement across the University 's core areas of teaching, research, community services, governance and operations.

Details of the University Quality Policy are found in the UoB's website, <https://www.UoB.edu.bh/about/bylaws-regulations-and-policies/>

B. Program Quality Assurance and Enhancement System

The University of Bahrain adopts a Quality Assurance Policy, which defines all activities, methods, procedures and instruments aimed at systematically and purposefully developing and documenting the quality of different aspects of the University.

The Policy outlines the University's comprehensive approach to ensuring and enhancing quality across its core areas of teaching, research, community services, governance, and operations, as the scope of this policy includes all staff and committees within the University and emphasizes an inclusive, continuous improvement methodology.

Relevant to the academic programs, the policy aims to define, ensure, and enhance the evaluation process for student achievement of learning outcomes and program goals. It focuses on using evaluation data to improve the program, provides documentation for the core activities of university programs, and supports the University's educational strategy.

This is supported by many principles such as:

1. The University continuously improves the quality of teaching, learning, research, administrative services, and community engagement.
2. Quality in teaching, learning, and research is essential to the achievement of University's mission, goals and activities.
3. University's quality assurance methods are evidence-based; where measures, Key Performance Indicators (KPIs), outcomes and feedback from internal and external stakeholders (including students, staff, employers and the community) will provide the basis for analyses and conclusions on which improvements are planned.
4. Overall responsibility for quality assurance and its documentation is carried out in collaboration between the management, staff and students.
5. The prerequisite for successful systematic quality assurance is that the specific objectives contained in related sub-policies are interpreted, clarified and carried out by the involved parties at all levels of the organization on the basis of a clear division of responsibilities. The relevant management level must ensure that the necessary resources are available in relation to execution and evaluation of quality assurance.

In order to implement this policy, the QAAC implements procedures that includes the following main steps:

1. **Monitoring, reporting and collection, evaluation and communication of students and stakeholders' feedback:** arrangements for monitoring of students' progress and achievement, including provisions for collecting, analyzing and using relevant information for the effectiveness of delivery of programs and curricula. In addition to the collection and analysis of staff and students' feedbacks on the quality of provision being monitored.
2. **Periodic review and validation:** a periodic review focused on validity and currency of PEOs, PILOs and CILO, the extent to which intended learning outcomes of the program are being achieved by the learners, and the effectiveness of curriculum and teaching, learning and assessment methods in the actual achievement of PILOs.
3. **Defined Responsibilities and Capacity Building:** responsibilities for monitoring and review are clearly defined, and the staff involved are informed, and where necessary, appropriately trained.
4. **Frequency and range:** The frequency of review, meetings, conducting surveys, audit, reporting, etc. are defined and the monitoring and review processes have the approval and commitment of the University.
5. **Selection and appointment of external reviewers:** external stakeholder participation are used at key stages of the monitoring and review process through paper/electronic based (surveys) or direct involvement with the Program Advisory committee (PAC).
6. **Submission for External Review and Validation:** periodically obtaining broader view of the continuing validity and relevance of UoB programs and awards by undertaking/ using market research and needs analysis to reflect any changes in the subject field, and/or employers' expectations and occupational standards, and/or meeting with the PAC, and/or conducting employer/alumni surveys.

7. **Follow up on reviews and validation process:** recommendations for action from previous reviews are followed up and action is taken to remedy shortcomings; The Program that underwent the review should develop and process action plan/s to remedy the shortcomings.

C. Quality Handbook (IDEAS)

In an effort to develop an institution-wide assessment process and at the same time to satisfy the requirements of the BQA, as well as various international accreditation agencies (e.g. ABET, AACSB, etc.), the QAAC developed a handbook, named “IDEAS”, which outlines the QA processes and provides many uniform data-collection instruments to be used by all colleges.

The University-wide Assessment Handbook, IDEAS, presents an outline and a rationale for an institution-wide, outcomes-based assessment process, in addition to offering a step-by-step implementation plan. The Handbook includes:

1. An overview of the assessment process and more specifically outcome-based assessment and the concept of Intended Learning Outcomes (ILO's).
2. The development of the assessment model, including procedures that can assist programs and support units in developing their mission, objectives and intended learning outcomes are discussed in detail.
3. Criteria for selecting appropriate assessment methods.
4. Overview of how to document and use the assessment results to develop a program improvement plan.
5. Program assessment process by describing a procedure for assessing administration and support units.

D. QAAC Quality Manuals

For management purposes, the QAAC develops manuals to organize the work at the center. The QAAC Quality Manual is the guide that explains the work of the QAAC, job descriptions, tasks, process maps, timelines, forms etc. The QAAC manual documents the responsibilities of the QAAC center; QAAC mission, vision and values; quality forms, procedures and process maps.

E. College Quality Assurance Director (CQAD) Manual

For management purposes, the QAAC developed CQAD manual to organize the duties of the college quality directors. The CQAD manual covers the responsibilities/duties of the CQAD, selection criteria and the hand-over procedure; provides an example of a meeting agenda of the QAC committees, illustrates members responsibilities and explain the criteria for selecting the QAC chairs. In addition, the manual covers all issues related to the PAC: general purpose for PAC committees, roles of advisory committees, size of committee, selection of members, orientation of new members, communication and meetings, frequency of meetings, meeting agenda, and meeting minutes. The manual also provides an overview of the SAC committee and specify the: duties and function of SAC, selection of SAC committee members, code of student advisory committee, frequency of meetings and agenda of meeting.

F. Quality Master Index

The QAAC is the sole owner of the Quality Master Index. The Quality Master Index is a master list of all documents that are used and implemented in the Quality Management System. The Quality Master Index keeps a track and update of all documents, such as quality processes, quality forms and process maps. This is to ensure that all documents are standardized and are controlled.

G. Quality Roadmap

The QAAC also developed the quality roadmap through the Operational Plan, to support the follow-up on the quality system of the programs through the CQAD. The Quality Roadmap includes the following main phases:

1. Preparation Phase, which includes the review of the course portfolios, at all levels from program to college; the new action plans based on the annual program review, and update of quality key committees (PAC, SAC, QAC). This phase implementation is followed up by the Operational Plan.
2. Follow-up and Training Phase, which includes training of nominated faculty members for the direct and indirect tools for the assessment of the outcomes. This phase is conducted at the middle of every semester, supported by conducting relevant capacity building events by the CQAD.

3. Assessment and Evaluation Phase, which includes the assessment of course and program outcomes, using direct and indirect measures.
4. Evaluation and Reporting Phase, which includes the submission of self-evaluation report/ action plan.

4.2 Academic Quality Assurance Processes

A. Responsibilities

There are three main academic IQA responsibilities:

Compliance: The purpose of the compliance responsibility is to ensure compliance of the academic programs and the University as whole with UoB's bylaws, regulations and policies and the requirements and criteria set by the national regulators and international accreditors. At college and program level, the CQAD should coordinate with the departments to ensure compliance with the requirements of UoB regulations and policies, program reviews, qualification placements on the NQF etc. At the University level, the QAAC manages the preparation for the institutional reviews, institutional listings or any other compliance functions towards national criteria within the quality assurance field.

Assessment: The purpose of the assessment responsibility is to maintain continuous improvement of the courses and programs. The assessment responsibility overall should be managed by the QAAC at the University level and should be directly managed and implemented at the college level by the CQAD and the QAC. The University adopts the University-wide Outcomes –Based Assessment Concept to implement and enhance the quality of the programs. The University-wide Outcomes - Based Assessment Concept covers three levels of assessment: university, program and classroom. There are three types of assessment within the context of the UOB-QAAC assessment plan:

University Wide-Outcomes Based Assessment:

University-wide assessment involves the assessment of campus-wide characteristics and issues, to ensure that:

1. Programs' graduates satisfy the Graduate Attributes (GAs) and University's Intended Learning Outcomes (UILOs), which are the minimum skills, knowledge and attribute any student at UOB must satisfy at the time of graduation.

2. Programs and services are sufficient to accomplish its objectives.
3. Specific objectives and outcomes are consistent with the institution's vision and mission.
4. Institutional effectiveness and quality enhancement are achieved.

Program Assessment:

Program assessment involves the assessment of the students' knowledge, skills and attributes, as a group, which are represented as Program Intended Learning Outcomes (PILOs). The assessment of the PILOs utilizes both direct and indirect tools to measure the success of the PILOs.

Classroom Assessment:

Classroom assessment involves the assessment of the students' knowledge, skills and attributes, as individuals, which are represented as Course Intended Learning Outcomes (CILOs). The classroom teaching and assessment activities (assignments, tests, exams, etc.) are designed to achieve the CILOs.

Accreditation: As part of the strategic goal of achieving institutional excellence, the QAAC overall manages the process of accreditation, as well as utilize its expertise to provide direction, data, evidence, and training. The UoB decided to go through international accreditations for its programs to develop a mechanism to ensure that it is continually working to improve the quality of education and the implementation of its various processes. By that, the University established a reliable mechanism to sustain and improve the quality of academic services it offers and achieve a level of organizational competence that is comparable to other international academic programs.

UoB obtains accreditations from various international accrediting bodies as such Accreditation Board for Engineering and Technology, (ABET), the National Architectural Accrediting Board (NAAB), The Association to Advance Collegiate Schools of Business (AACSB) and The Canadian Society for Chemistry (CSC). In any accreditation, coordination between the CQAD and the QAAC is necessary. The Centre must certify the readiness of the Program before it undergoes any external accreditation.

B. Processes

For the purpose of achieving the three main responsibilities, the QAAC developed three main

processes: the Program and Course Assessment Cycle (PCAC), the Self-Evaluation Process, and the Improvement-Action Cycle. The QAAC developed the Program and Course Assessment Cycle (PCAC), to be directly managed by the CQAD and Departmental QAC, who work closely with college/units, departments, programs, faculty and administrators.

The QAAC also developed the Self-Evaluation Process that is performed annually by every program. The outputs of the PCAC cycle should be used as inputs in the Self-Evaluation Process. The Self-Evaluation Process results in a group of improvement actions. Those improvement actions should be managed towards implementation through the improvement action to close the loop. The Program and Course Assessment Cycle, Self-Evaluation process, and the improvement action cycle, rely on direct and indirect assessment tools, such as CILOs and PILOs assessment, surveys, internal program data of students, faculty and facilities, and statistics needed for the assessment process.

The Overall Quality Assurance Process Framework that includes the three main processes is shown in the following figure:

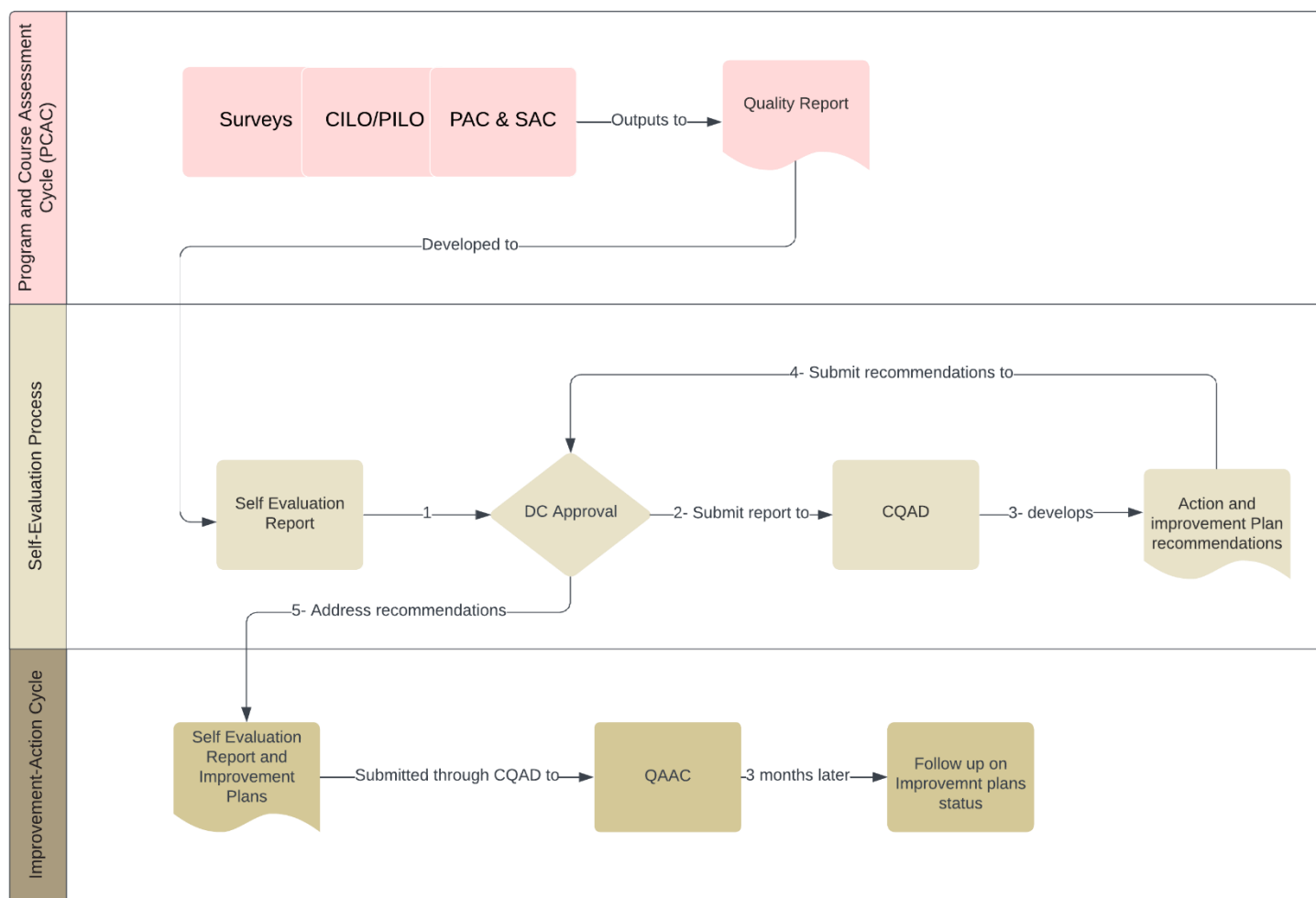


Figure 7: Overall Quality Assurance Processes

A. Program and Course Assessment Cycle

As part of the Program and Courses Assessment Cycle, all programs are required to develop and assess their Program Educational Objectives (PEOs), Program Intended Learning Outcomes (PILOs) and Course Intended Learning Outcomes (CILOs). The Program and Course Assessment Cycle is shown in Figure 7 and Figure 8.

As shown in Figure 7, the programs have arrangements for monitoring student's progress and achievement through the assessment of Course Intended Learning Outcomes (CILOs), Program Intended Learning Outcomes (PILOs) and the Program Educational Objectives (PEOs). Every faculty member is responsible to assess their CILOs and should submit a Course Portfolio (CP) every semester. The QAC should audit the CP and ensures that it satisfies the requirements. Specifically, the assessment process, the QAC should assess their PILOs every year. The QAC should run alumni and employer surveys at least every two years to obtain information on the effectiveness of program and curricula.

The QAC should also meet with the PAC and the SAC once per semester or at least once per year. The PAC and SAC take active parts in assessing the PEOs and PILOs, hence participating in designing and reviewing the curriculum, as well as participating in course delivery enhancement. The meetings results reflect on the effectiveness of program and curricula, and hence come up with findings that are included in the Self Evaluation Report (SER).

The CQAD should meet monthly with the QAC chairs, to ensure that all programs satisfy the Program and Course Assessment Cycle. The QAAC with the Deanship of Admission and Registration should run the Senior-Exit survey. All information from advisory committee meetings, surveys, assessment of outcomes, whether direct or indirect, should be analyzed and should be included in the annual SER. The results of the SER should be followed up by an improvement action plan, as shown in Figure 7 and Figure 8

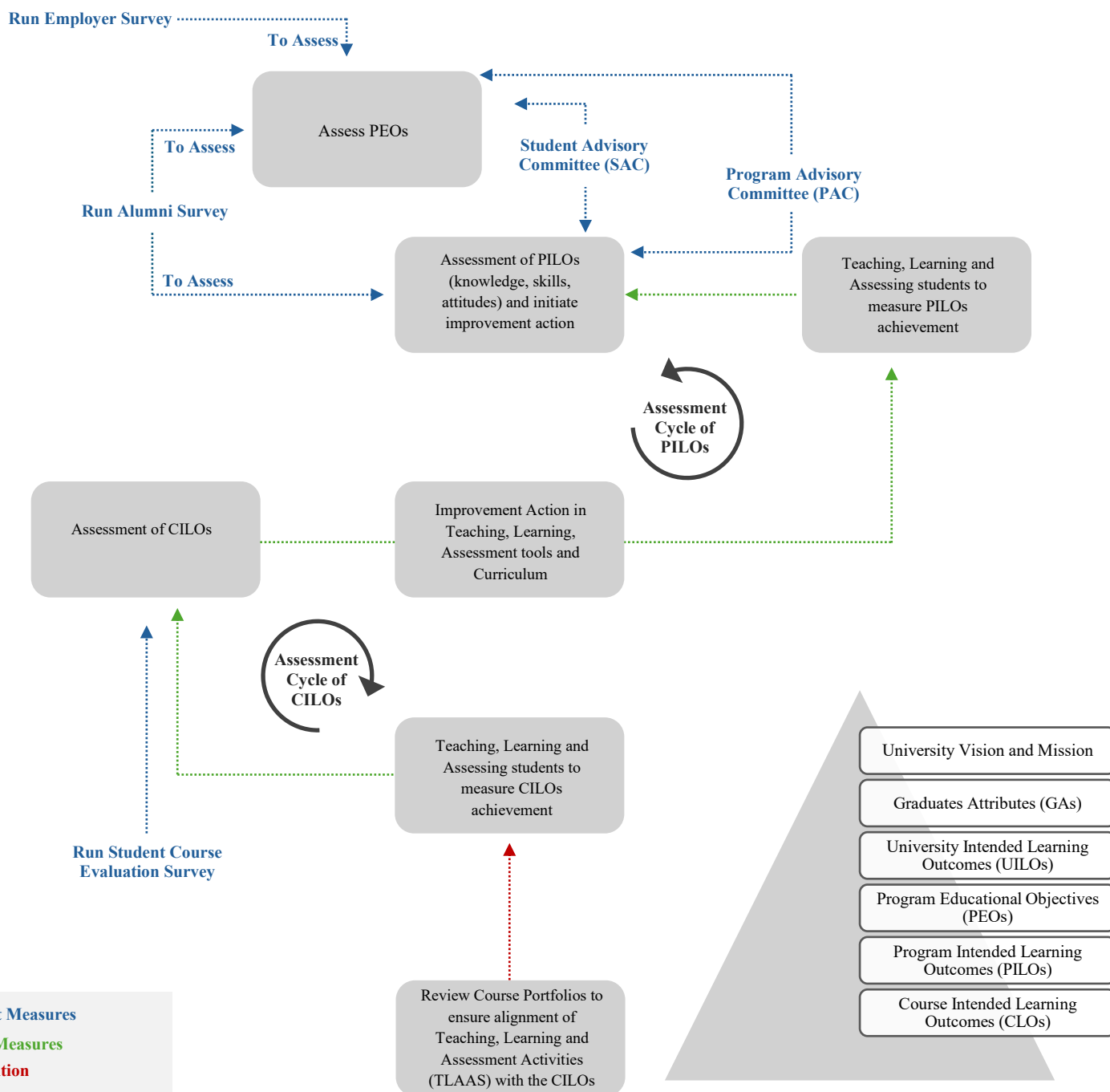


Figure 8: Program and Course Assessment Cycle

B. Self-Evaluation Cycle

The UOB process for academic program review and improvement is based on self-evaluation process. Therefore, each program owner should collect data every semester about the self-evaluation elements, including program Profile, Student Profile, Faculty Profile, Research, Program Evaluation, Feedback and Opportunities for improvement. The SER and improvement plan should produce annually.

The QAAC informs the CQADs about the initiation of the self-evaluation process, which is every year. The CQADs should inform the QAC chairs about the self-evaluation process in their monthly meeting. The QAC should coordinate the process of self-evaluation cycle and informs the department chairperson to distribute the tasks for the preparation of the SER. The QAC should coordinate the evaluation and write-up process of the self-evaluation elements. All self-evaluation elements should be collated in the SER and should be discussed in the department council, where improvement actions are suggested. The improvement actions should be included in an action plan template, which is part of the SER report. The SER and improvement action plan should be submitted by the department to the Dean and CQAD. The CQAD should follow up with the department the implementation of the improvement plan and reports back to the QAAC about the overall improvements in the college programs, where QAAC follows up on the improvement 3 months post SER submission to ensure compliance and continuous improvement.

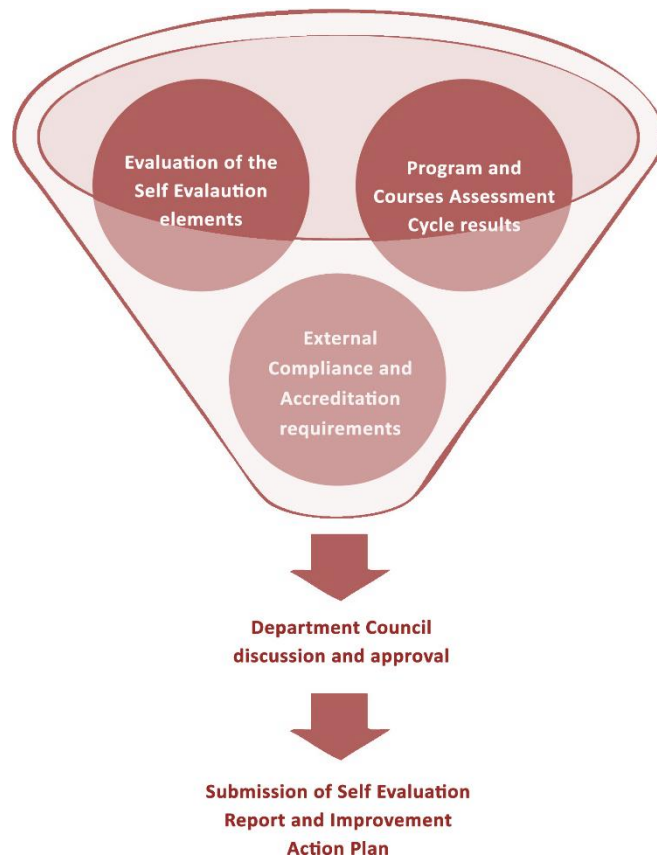


Figure 9: Process for producing the SER and Improvement Plan

4.3 Internal Academic Quality Instruments

Program development, monitoring & enhancement, modification, and periodic review are key processes within the University and are fundamental to the setting and maintaining of standards and the quality of learning opportunities. Most academic and administrative staff have an involvement in these processes at some point. The University maintains policies & procedures such as: The Regulation for Developing/Offering Academic Programs and Courses, Credit Assigning to Academic Courses Policy, Moderation of Assessment Policy, Study and Exam Regulations, Quality Assurance Policy and Benchmarking Policy. These policies explain the rationale and processes involved in the development, enhancement & modification, assessment and periodic review of programs.

A. Curriculum Development and modification

The development of new academic programs, including the revision of existing ones, should be done by the college and department according to “The Regulation for Developing/Offering

Academic Programs and Courses”. Curriculum development or modification process should include the following steps:

Initial Proposal: Proposals for new programs are progressed through the Dean to the University Council for an initial approval. This initial stage involves drafting a proposal that includes the program’s name, educational objectives, outcomes, and benefits. The proposal is presented to the Department Council for discussion and recommendation. If the Department Council's recommendation is positive, it is forwarded to the College Council for further consideration and recommendation before submission to the University Council by the Dean.

Upon receiving the initial approval from the University Council, the program will undergo the following:

Department and College Council Review: The Department and College Councils evaluate the proposal against set criteria, ensuring that:

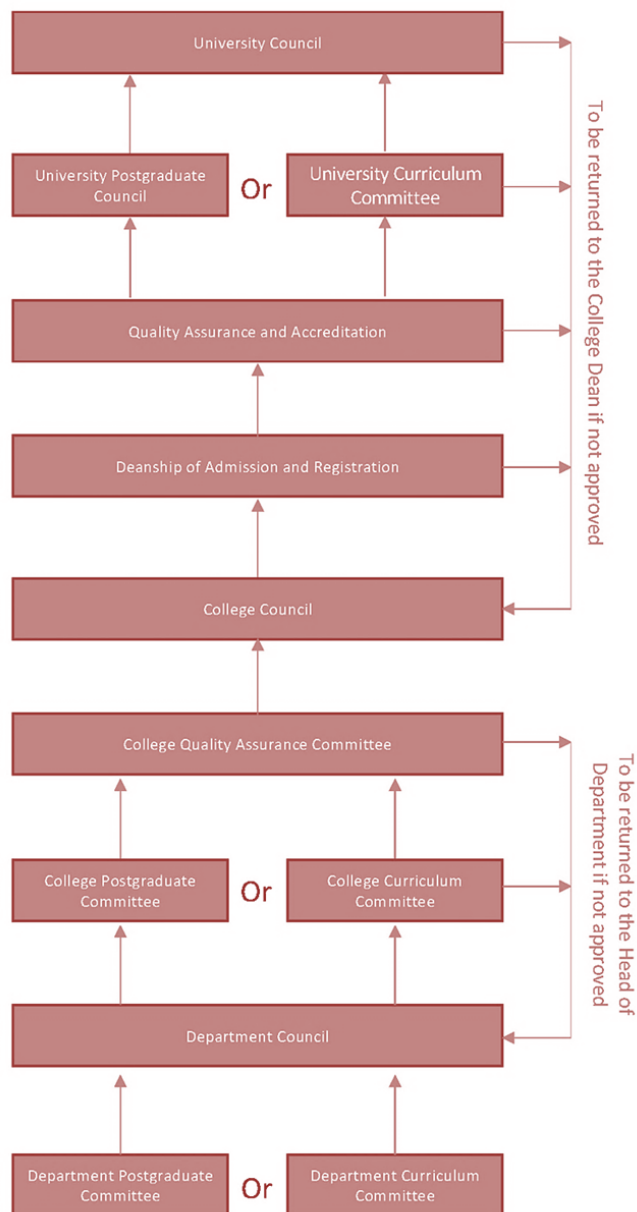
1. The program fulfills a community need and aligns with the mission and strategic direction of the University.
2. The proposed level of qualification and academic rationale are appropriate.
3. There is adequate academic expertise and sufficient resources within the University to support the program’s development and delivery.
4. The program does not conflict with other similar offerings within the University.
5. There is a comprehensive market study analysis reflecting the real need in the market.

Program Validation: All documents submitted to the Curriculum Committee or Postgraduate Council undergo thorough validation at all levels, from the department to the college and finally at the university level. The University Curriculum Committee and Postgraduate Council reviews all documents, and the QAAC is specifically tasked with validating all aspects, including the curriculum, benchmarking, objectives, outcomes, and mapping. In addition, the Deanship of Admission and Registration checks that the program adheres to the admission and registration guidelines of the university and that it is not in conflict with any other academic offering.

University Council Approval: The University Council is responsible for the final review of the program’s offering or development proposal. The council decides whether the proposal is approved, and if so, the program is then officially adopted and implemented as part of the University's academic offerings.

The approval chart for this process is illustrated in the figure below:

Process of Offering, Developing, Closing or Terminating Programs and Courses at the University of Bahrain (New)



- The program is processed within two weeks from the date of its receipt at each stage in the administrative hierarchy.
- In the event that the academic program is not approved, it is returned, according to the administrative hierarchy, to the department or the college, depending on the stage, for further study, taking into account the recorded comments.
- The department is responsible for translating the program, proofreading it, and preparing its brochures and introductory guides.

Figure 10: Curriculum Development and modification Approval Chart

B. Program Assessment

Program assessment is the assessment of the program, which includes the assessment of the program as a whole, including admission, facilities and learning resources, and in specific, the student performance through the assessment of program intended learning outcomes and program educational objectives. The department chairperson should manage the processes of program assessment, which includes assessment tools that fall into two broad categories:

1. Tools relying on direct evidence,
2. Tools relying on indirect evidence

Tools relying on direct evidence or direct assessment methods are those intended to provide direct examination or observation of the student knowledge, skills and competence against measurable learning outcomes. The faculty member should conduct direct assessments of student learning (ILOs assessment) using tools such as exams, quizzes, assignments, case studies and reports or projects. These assessment tools provide a sampling of what students know and/or can do and provide evidence of student learning. These direct methods are considered to be the primary assessment tools for the PILOs. The direct assessment methods through which the achievement of program outcomes will be assessed, should be documented within the course portfolio.

In details, the following are the direct assessment methods adopted by each department.

First: Using Course Intended Learning Outcomes (CILOs) to assess the Program Intended Learning Outcomes (PILOs)

The faculty member is the direct responsible person to undergo the assessment process of CILOs and PILOs every semester. In this method, all the CILOs of all courses are mapped to the appropriate PILOs. This method ensures that all the PILOs are addressed by more than one course in the Program. The course assessment matrix is prepared for each course to map the grades (performance) of the students in different course assessment components (e.g., midterm exam, quizzes, assignments, projects, final exams, etc.) with CILOs. The mapping of CILOs to PILOs will then indicate which of the PILOs have been met or not in a particular course. Finally, by using

the Articulation Matrix, the achievement of the PEOs will be assured through their relationship with the PILOs as shown in Figure 11.

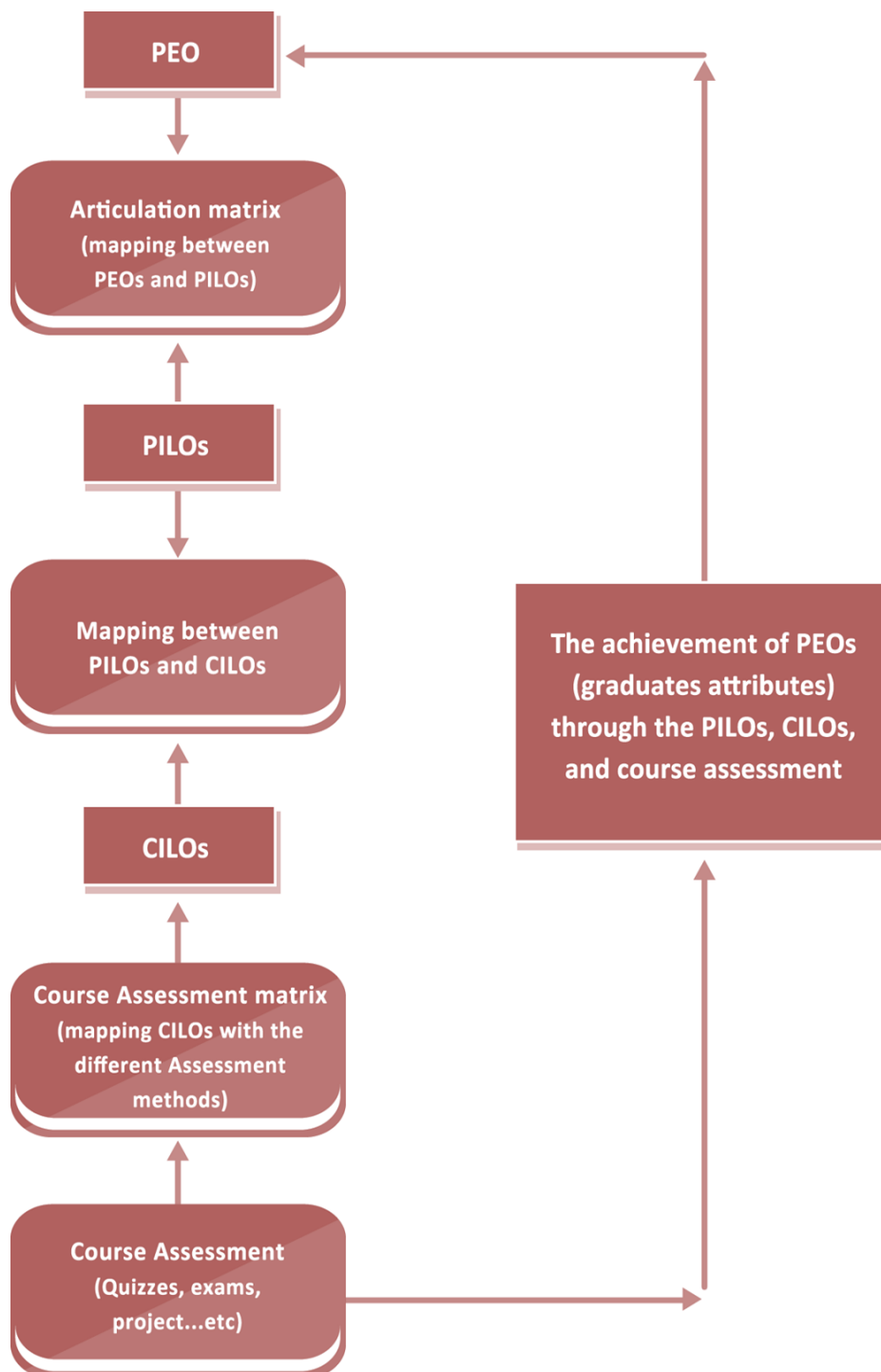


Figure 11: The Achievement of PEOs through PILOs, CILOs and Course Assessment

Second: Using Performance indicators, measurements and assessment methods to assess the Program Intended Learning Outcomes (PILOs)

The QAC should coordinate the assessment of PILOs using Performance Indicators every year, yet the faculty is still the direct person to do the assessment process. In order to measure the performance of the students' achievement against the intended learning outcomes, Performance Indicators (PIs) are assigned for each intended outcome. Each indicator includes a definition of acceptable performance levels (success criteria) that can be used to identify whether the Program outcomes are achieved. The success criteria will be associated with an assessment method to measure the PI. Each PI can have multiple assessment methods, which describe how and where within the delivery of the academic program this indicator is measured.

Tools relying on indirect evidence or indirect assessment methods are conducted by surveys and evaluations, which determine the learning experiences of the graduates. Surveys and evaluations assess feedback about student knowledge, skills, or competence. Indirect measures can provide information about student perception of their learning and how this learning is valued by different constituencies. This can be done by mapping the surveys and evaluation forms directly to the PEOs or indirectly through the PILOs. The indirect method is considered to be a primary assessment tool for the PEOs. The results of these assessments are tabulated and distributed to faculty for their responses to determine what course of action may be warranted to continuously improve the course and to ensure that course outcomes are met in future surveys. The QAAC program surveys are some of the indirect assessment methods. These surveys are conducted as indirect assessment of the PEOs and provide indirect information for the achievement of the PILOs.

C. Defining Graduates Attributes and University Intended Learning Outcomes:

Defining and reviewing graduates' attributes and university intended learning outcomes is a comprehensive and rigorous process integral to academic quality assurance. It begins with a regular consultation with external stakeholders, including industry leaders, employers, and professional bodies, to ensure that the skills and competencies acquired, are aligned with current and future professional and market demands. After the consultation, a benchmarking process against peer institutions and international standards is conducted, providing a comparative context that helps ensure relevance, maintain competitiveness, and uphold high

standards of educational excellence. After finalization, the approval process involves a series of internal chain of approvals to ensure thorough evaluation and institutional alignment.

The review of GAs and UILOs should be aligned with the University overarching strategy, ensuring that they contribute to the strategic objectives and mission of the University. To ensure broad awareness and adoption, these attributes and outcomes should be communicated and disseminated among all relevant stakeholders through a media campaign. This campaign utilizes various channels to reach faculty, students, industrial stakeholders, and the broader community, reinforcing the institution's commitment to excellence and continuous improvement, these channels could be but not limited to the QAE, PAC, SAC, in addition to email outreach campaign. Through these continuous quality assurance processes and strategic communications, UoB can ensure that our graduates are well-prepared to meet the challenges of a dynamic and globalized world, thereby enhancing UoB's reputation and the employability of our graduates.

D. Internal Surveys

The University established a system to identify, collect and analyze data to determine the appropriateness, suitability and effectiveness of the quality management system and the necessary improvements to be made in consonance with its quality objectives. QAAC Programs' surveys from the student (senior exit student), alumni, faculty and employer perspectives, are designed to be an indicator of learning and teaching practices. They are an important source of information to inform individual and general teaching practice, decisions about teaching duties, and course and program curriculum design. They enable the QAAC to assess how effectively its learning environments and teaching practices facilitate student engagement and learning outcomes.

Responsible individuals, committees, programs, or departments are expected to conduct regular surveys in accordance with Table 1, which outlines the responsibilities and time frequency for initiating and analyzing the surveys.

Table 1: Responsibilities and time frequency for conducting internal surveys:

Type of QAAC surveys required	Responsibility to initiate and analyze QAAC surveys	Timeline
Faculty Experience Survey	Initiate: QAAC Analyze: QAAC	Every two years
Senior Exit Survey	Initiate: QAAC Analyze: QAAC, CQAD	Ongoing survey
Course Evaluation Survey	Initiate: QAAC Analyze: QAAC	End of every semester
QAAC Evaluation Survey	Initiate: QAAC Analyze: QAAC	Annually
Graduates' Attribute and University Intended Learning Outcomes Survey (Internal and External)	Initiate: QAAC Analyze: QAAC	Every five years
Market Study survey	Initiate: CQOD Analysis: CQOD, QAC	Every 3-4 years
Graduate Destination Survey	Initiate: CQAD Analyze: CQAD, QAC	Program level every three years
Students Dropouts survey	Initiate: CQAD Analyze: QAAC	Upon request

The Senior Exit Survey: The QAAC should conduct this survey every semester involving all senior students who are about to graduate. The purpose of this survey is to measure if the program outcomes are fulfilling the needs of the students before they join the workplace, as well it reflects the senior students' satisfaction on advising, admission and registration system, curriculum and instruction, facilities and learning resources, and overall program experience. This survey solicits students' assessment of the acquired knowledge and skills as a result of taking the different courses in the program. This in turn, will give an indication of whether

program outcomes have been significant in equipping the students with the necessary abilities for the workplace. Similarly, the senior exit survey results should be included in the self-evaluation report.

Faculty Survey: The QAC is responsible to conduct the survey for its faculty members, every two years, for the purpose of getting feedback on their academic profile, professional development, teaching and assessment activities, and their satisfaction on facilities, support and services. This survey generates significant data that should be included in the self-evaluation process.

E. Student Advisory Committee

The SAC is composed of junior and senior students currently enrolled in the program. The SAC members are students from the second, third and fourth years and are elected among their peers.

This committee serves as representative of the students as stakeholders in the program. The main function of the SAC is to provide their feedback & inputs into courses, programs educational objective and services, and to ensure their high relevance to student interests.

The SAC committee provides advice to the programs' owners with the aim to improve the program. The SAC advises the department on matters such as ideas for new courses and programs; proposes improvement of instructions or faculty advising in the department; suggests changes in the requirements of the program curriculum; proposes pre-requisite changes, etc. The SAC advises the program administrators about students' concerns and helps to coordinate extracurricular activities to benefit the students.

The SAC meets once every semester or at least once a year and provides students' input on various curriculum issues, including the development and evaluation of the program educational objectives. The QAC should organize and chair the meeting of the SAC committee. The SAC members are also invited to attend the periodic meeting held with the PAC.

The results of the SAC meeting should be utilized in monitoring the program, as shown above in the Program and Course Assessment Cycle, and the Self Evaluation process.

F. Course Portfolio

To ensure efficiency and effectiveness in the delivery of courses, the University maintains a regularly updated portfolio for each of the courses offered in the various colleges. The Course Portfolio is a file that should be submitted by faculty members by the end of every semester. A course portfolio is used to document the planning, process, and outcomes of a single course. A course portfolio is intended to: a) document teaching and assessment activities; b) show level of achievement of the course; c) reference for review and audit; d) enhance a course's effectiveness; and e) make public and share pedagogical insights. The Course Portfolio includes the following documents & records:

1. Course Specification Form.
2. Course assessment (Mapping of CILOs to PILOs, PILO Assessment Matrix Form, CILOs Assessment Form, PILOs Assessment Form, Assessment results, CILOs and PILOs improvement plans).
3. Sample of Student Work.
4. Exams and Model Answers.
5. Grade Distribution.

G. Course Assessment

The course assessment involves the assessment of the CILOs, teaching, learning and assessment activities and resources. It also involves the audit of all course materials, assessment and activities that are summarized in the course portfolio. It consists of three instruments, CILOs assessment, Course Evaluation Survey and Course Portfolio Audit. The department chairperson manages the processes of course evaluation every semester.

H. CILOs Assessment

The CILOs assessment should be conducted by the faculty member every semester as explained above. The CILOs assessment results are used by the faculty member to develop the course. The CILOs assessment results are included as one of the main documents in the course portfolio.

I. Course Evaluation survey

The course evaluation should be conducted every semester by QAAC. It is applied to all colleges. It includes evaluation and analysis of items related to the student, course and faculty. Related to faculty, there are items that are related to course specification, outcomes, assessment, teaching and learning activities, etc. The results of the course evaluation survey

are accessed by the department chairperson and the response rates by the Dean, who directs faculty members on improving their performance and their courses. This tool is also used for the contract renewal of the faculty member.

J. Course Portfolio Audit

Course portfolio file includes the following documents & records: Course Specification Form, Course Assessment (Mapping of CILOs to PILOs, PILO Assessment Matrix Form, mechanism used to assess student learning, CILOs Assessment Form, PILOs Assessment Form, assessment results, CILOs and PILOs improvement plans), Sample of Student Work, Exams, Model Answers, Grade Distribution.

Each course portfolio verifies that students are assessed on achievement of course outcomes. All departments should maintain a portfolio for each course as a systematic mechanism for documenting teaching and learning activities. It is an effective way of demonstrating excellence in both teaching and learning. Through the course portfolios, the department can investigate the intersection between pedagogy and learning, and to determine relationships between what we do as teachers and what students do or achieve as learners. It also offers significant potential for the purpose of ILOs assessment, whether for the evaluation of departmental teaching performance during program reviews, or for accreditation purposes.

Through such a portfolio, faculty members document the design and execution of a particular course, including collection of student work, representing student activities, accomplishment and achievement over specific period of time. Based on the analysis of data collected from the aforementioned assessment tools, some issues regarding the achievement of the PILOs should be identified. The faculty member may decide to tune the assessment process, rephrase or update the course learning outcomes, change the course assessment methods, or open possibilities for reflection and formative feedback. By the end of every semester, the QAC should undergo the course portfolio audit process, which is used as an indication for the achievement of the course outcomes, as well as the achievement of the PEOs based on the direct relationship between PILOs and PEOs. Based on the achievement level of the PEOs, decision will be taken by the department council to restructure the program curriculum, strengthen courses, or introduce new pre-requisites.

K. Program Internal Quality Review

Internal Quality Reviews (IQR) are conducted as a key internal instrument of the quality

assurance process. This ongoing peer review program assesses both academic programs and quality management systems at the College and Department levels. Each academic year QAE begins with to determine which programs will undergo internal review, based on criteria such as, but not limited to, the program lifecycle, the number of enrolled students, feedback from internal and external evaluations, and upcoming external reviews.

An internal review panel, consisting of QAE member CQAD, a representative from the QAAC, and attending as an observer, the concerned CQAD of which his/her college's program/s being internally reviewed. The CQAD prepares the review schedule and compiles the necessary report and supporting evidence, such as course portfolios, student achievement records, moderation forms, and other relevant documents. The IQR Panel examines this evidence carefully to formulate questions for the review day.

During the review, the panel meets with the program's faculty and committee members, as well as the Head of Department, to discuss the provided evidence and reports. This ensures a thorough triangulation of information. At the end of the review, the panel offers verbal feedback to the Head of Department and Program Coordinator, highlighting best practices and recommending improvements.

The QAAC then finalizes a written report with these findings and shares it with the concerned CQAD, who begins addressing the recommendations. The QAAC follows up three months after the review to check on the progress of implementing these improvements, ensuring that programs continue to meet the required standards of quality and effectiveness.

L. Program Self-Evaluation Report

The Program self-evaluation is the process of evaluating the program in various different areas. The purpose of the program self-evaluation is to evaluate the self-evaluation elements, including program and courses assessment results, curriculum, faculty, students, facilities, research, strategic plan, management and partnership to measure its performance toward achieving the program's objectives and outcomes, and produces a self-evaluation report and improvement plan every two years. The chairperson should manage the submission of the SER report to the QAAC. The QAC coordinates the evaluation and write-up process of the self- evaluation elements. All self-evaluation elements are collated in the Self Evaluation Report (SER). The SER is submitted to the College Dean and CQAD at the end of each

academic year. The CQAD follows up on the recommendations with the concerned department in the first semester of the following academic year and reports to the QAAC on the achievement of the improvement plans.

M. Moderation of Assessment (Internal Moderation)

UoB adopts and implements Moderation and Assessment policy and the Study and Exams Regulations that ensures the moderation process. The moderation process aims to ensure that all assessments are applied consistently. The QAC is responsible to participate in the moderation process by the end of every semester. For multi sections, the coordinator should ensure the moderation of exams.

Moderation processes' principles at UOB include:

1. The internal moderation practices are valid and reliable.
2. The internal moderation procedures are fair and open.
3. All assessments activities are valid, appropriate and fit for purpose.
4. Feedback and outcomes of internal moderation support further development of good practice.

4.4 External Quality Assurance Instruments

There are various external quality assurance instruments, managed by different entities at the University. These instruments are explicitly demonstrated below:

A. The Program Advisory Committee

The Program Advisory Committee (PAC) is made up of employers, academics, alumni and representatives from market. They meet at least once per year in face-to-face meeting and several times per years via email with the QAC, faculty and the Student Advisory Committee (SAC).

The role of the PAC includes advising, assisting, supporting and advocating the academic programs. PAC provides specifications for a program and help to ensure the quality of program graduates. An advisory committee's role is to offer suggestions for improvements that will help the program grow and expand and they propose suggestions to match the program educational objectives with the needs of the community. PAC proposes strategies for developing mutual collaborative research programs and discuss modifications and adjustments to the program. PAC plans and carries out series of tasks/actions that aligns the technical/occupational program with employers' needs.

The results of the PAC meeting should be utilized in monitoring the program, as shown above in the Program and Course Assessment Cycle, and the Self Evaluation process.

B. The Employer Survey:

This survey should be conducted periodically, ideally every two years, involving many organizations in the Kingdom of Bahrain where the graduates of the Program are working. This survey measures how the graduates are responding to the needs of their employers and how they are adapting to the work environment. This also measures if the graduates were equipped with the necessary skills and knowledge to fulfill their tasks as they join the work field. The Departmental QAC is responsible to conduct the employer survey once every two years. The results of the employer survey should be analyzed to measure the level of the graduates in terms PILOs and PEOs, and their satisfaction on their knowledge and skills related to their performance in field. The employer survey results should be included in the self-evaluation process.

C. The Alumni Survey:

The QAC in collaboration with the Alumni Club is responsible to conduct the survey for its alumni, every five years, for the purpose of getting feedback from the graduates themselves, in terms of the level of PEOs and PILOs achievement. The survey is intended to solicit information regarding whether graduates are competently equipped with the necessary knowledge and skills they need in order to become competitive in the workplace. This survey generates significant data that indicates whether the program outcomes fulfill what the students need in the workplace. Also, the alumni survey results should be included in the self-evaluation process.

D. Moderation of Assessment (External Moderation)

In addition to internal moderation, assessments are subjected to External Moderation as outlined in the comprehensive Assessment Moderation Policy. This policy establishes a robust framework of procedures and principles designed to ensure that the assessment process yields rigorous and reliable outcomes. It identifies the selection criteria for appointing external moderators, ensuring that relevant and qualified experts are chosen. Furthermore, it details a thorough set of procedures to effectively seek and implement external feedback on assessments. This dual-layered approach not only enhances the credibility of the assessment

process but also ensures continuous improvement and adherence to high academic standards.

E. External Review

The Directorate of Higher Education Reviews (DHR) at the BQA enhances the quality of higher education in Bahrain, by conducting reviews of both institutions and the programs offered, and reporting on the findings of these reviews that includes opportunities of improvement and areas of strength. There are two reviews that QAAC should react and manage with the BQA in collaboration with members of the QAE: Academic Programs Review in and Institutional Reviews.

F. Accreditation by Higher Education Council

The Higher Education Council (HEC) in collaboration with the BQA had set standards for academic accreditation at higher education establishments in Bahrain. The HEC framework and BQA framework for institutional accreditations are now aligned and Higher Education Institutions now undergo one process of accreditation by the two entities.

G. Academic Programs Reviews

The Program review by BQA is usually conducted for all programs within the college and is now aligned with the NQF Placement.

Program reviews are carried out using four indicators each of which has a number of sub-indicators:

1. The Learning Program.
2. Efficiency of the Program.
3. Academic Standards of Students and Graduates.
4. Effectiveness of Quality Management & Assurance.

Program Review should be coordinated through the QAAC initially, then direct links and coordination are managed with the CQAD. The College CQAD should coordinate with the Dean, Program Coordinator and Head of Department. The DHR Academic Program Review process starts with the correspondence from the DHR Executive Director sent to the University informing a scheduled quality review based on an initial discussion with the QAAC to ensure alignment with programs lifecycles.

The College Council should then immediately initiate the process of drafting the SER. The write-up of the SER and the full preparation of the visit is provided with full support of QAAC, to make use of the knowledge share through various experiences of reviews. The program should prepare the SER and submit to the DHR a review portfolio that includes the SER and supporting evidence at least, two months before the scheduled site visit. Following the review, a report is produced, which makes judgments about whether or not each of the programs meet minimum standards as well as make recommendations for the enhancement of the program.

Three months after publication of the review report the department through the CQAD should submit to the DHR an Improvement Plan that shows how the recommendations contained within the review report will be addressed. The DHR analyses the plan and has a meeting with the concerned college to discuss the plan in terms of viability. Follow-up visit(s) for program receiving ‘Limited Confidence’, to evaluate the program’s progress towards ‘Confidence’ or remaining “Limited Confidence” is conducted after 6 months.

H. Institutional Review

DHR Institutional Review subjects the whole of the institution to a quality review that assesses the effectiveness of the institution’s quality assurance arrangements against a predefined set of quality indicators and identifies areas of strengths and opportunities for improvements. UoB was subjected to DHR Institutional Review, twice, in 2010, and 2019, receiving “**Meets quality assurance requirements**” judgement. The UoB will undergo another Institutional Review in November 2024 for which an SER was submitted in June 2024.

I. National Qualification Framework

The General Directorate of National Qualifications Framework (GDQ) at the BQA is responsible to manage the NQF, to administrate and maintain the NQF in line with the NQF General Policies in order to provide well design, match and clarity to Bahrain’s qualifications by assuring the quality of these qualifications. The NQF is an instrument for the classification of qualifications according to a set of criteria for levels of learning outcomes and allows for horizontal and vertical articulation of all national and international qualifications to be aligned with the 10 NQF levels as described in Figure 12.

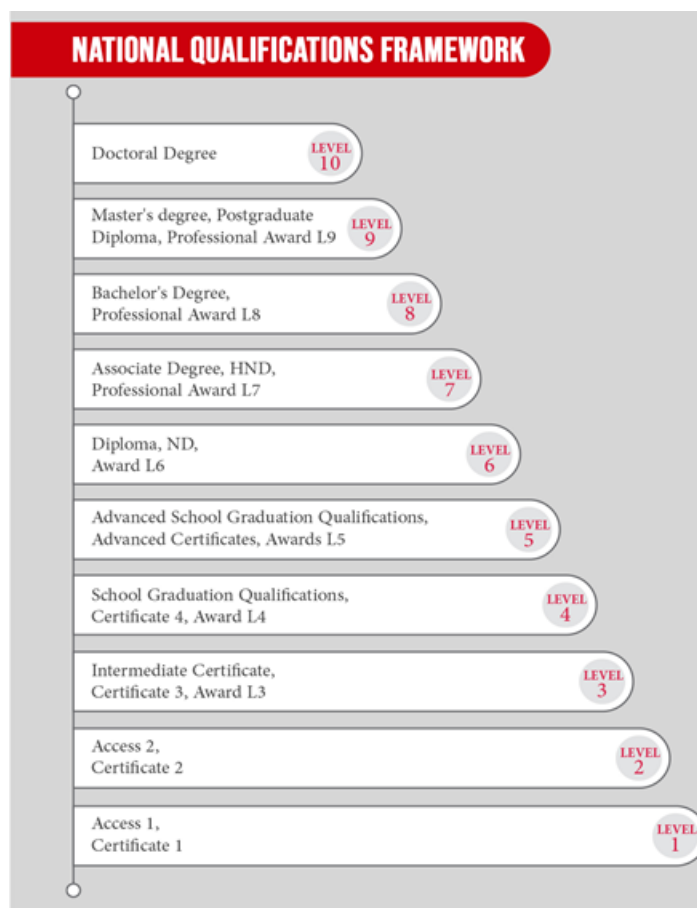


Figure 12: National Qualifications Framework

The main purpose of the NQF is to meet the national and foreign requirements by developing an integrated, coherent and easy-to-understand national qualifications system and improving quality, transparency, access and progression. Wide range of stakeholders includes private and public institutions, employers and government bodies have been fully engaged in the development of the NQF. The NQF comprise two main processes:

I. Institution Listing (IL)

This process aims to ensure that an institution has established proper formal arrangements to maintain the standards of their national qualifications placed on the NQF. The Institutional Listing Standards and processes are elicited in the NQF Handbook, published on BQA website.

Institutional Listing shall be the responsibility of the University President, with direct

involvement of the Vice Presidents, in coordination with the QAAC. The President shall appoint membership based on the Institutional Listing standards.

UoB has showed its adherence to all the Institutional Listing Standards, resulting in an overall judgement of “**Listed**”. This recognition, formally identified by the listing ID: **IL15-007**, was documented in the Institutional Listing Report dated 22 September 2015.

II. Qualification Placement

This process aims to map a national qualification on the NQF after fulfilling the validation standards to ensure that a qualification is credible and fit-for-purpose, according to the following validation standards:

1. Standard 1: Justification of Need
2. Standard 2: Qualification Compliance
3. Standard 3: Qualification Design, Content and Structure
4. Standard 4: Assessment Design and Moderation
5. Standard 5: NQF Level and Credit

UoB is keen on placing its qualifications on the NQF, ensuring their linkage with the labor market, this is facilitated mainly through articulating that newly offered and developed programs should submit NQF applications as part of the internal regulations of approving developed and newly offered programs. In addition, developed the UoB Guide to NQF Placement that describes the processes followed at university level, for placing qualifications on the NQF, and the responsibilities of the different stakeholders involved in placement activity.

The Guide involves the following key steps:

- 1. Mapping Panel and Process:** This stage involves the initial preparation of course syllabi and mapping scorecards by the Mapping Panel with the assistance of Course Coordinators/Instructors.
- 2. Confirmation Process:** This multi-stage process involves thorough review and validation by various curriculum committees and councils at different institutional levels (Department, College, and University).

- 3. Submission and Final Approval:** This final stage includes submission to the Vice President for Academic Programs and Graduate Studies, followed by verification, validation, and eventual placement on the NQF by the BQA.

As part of the QAAC role in facilitating the placement and revalidation of qualifications, the QAAC reviews NQF applications to ensure the availability of evidence and compliance with approved policies and procedures. Additionally, it ensures that all designated requirements, as outlined in the NQF handbook and guidelines, are met.

These steps are illustrated through the figures below:

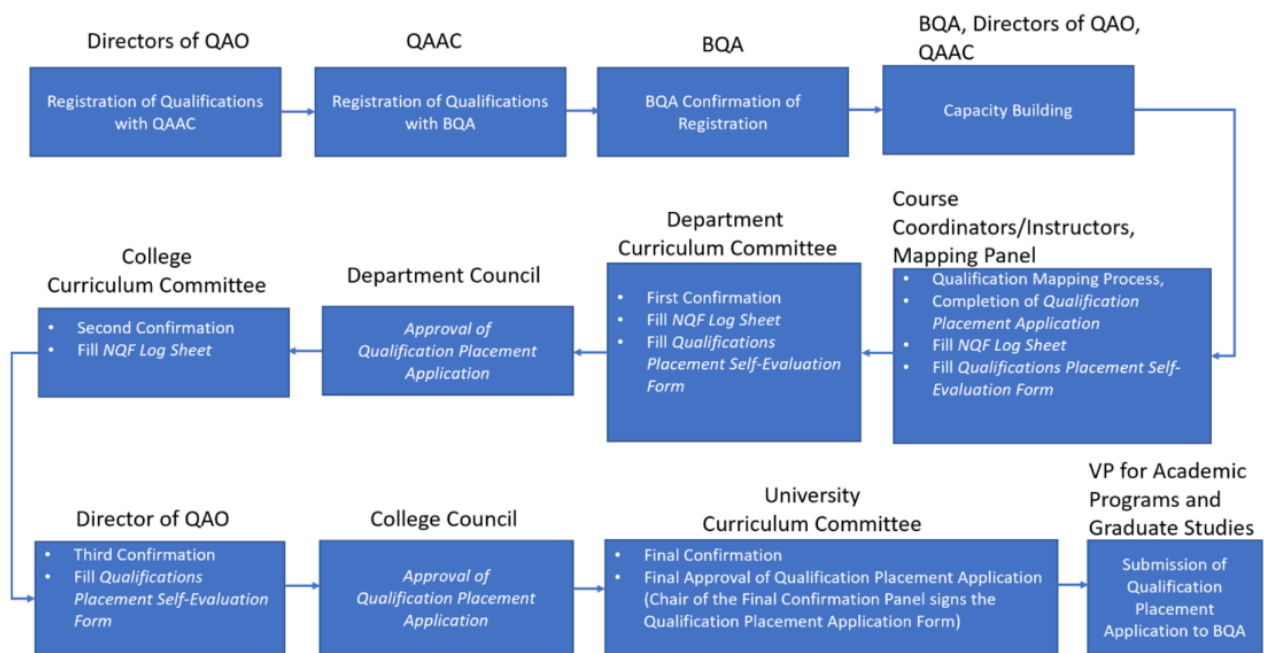


Figure 13: NQF Placement Process for Undergraduate Programs

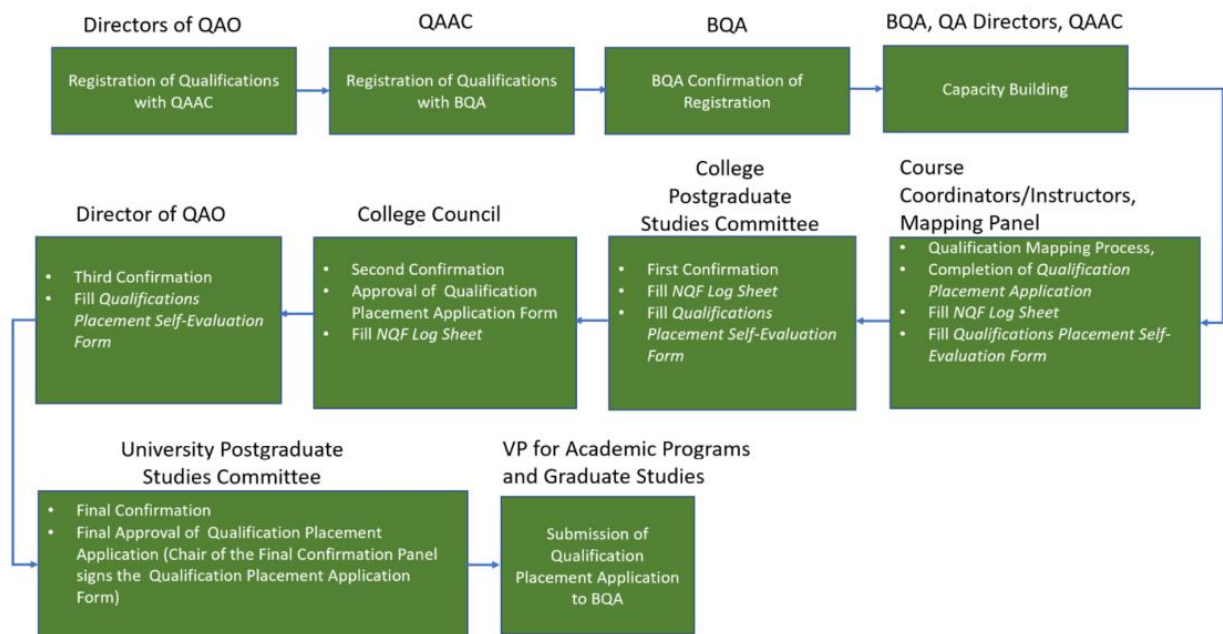


Figure 14: NQF Placement Process for Postgraduate Programs