



Royal College of Surgeons in Ireland – Medical University of Bahrain



7-10 October 2024



Location
Busaiteen



Institute Type
Private



Status
Listed



No. of Students
1597

Overall Judgment

Compliant with the General Framework Standards

Standards' Judgment

Governance and Management	Human Resources Management	Quality Assurance and Enhancement
Infrastructure, ICT, and Learning Resources	Management of Academic Affairs	Teaching, Learning and Assessment
Research and Postgraduate Studies	Community Engagement	Student Support

Review Summary

The Royal College of Surgeons in Ireland-Medical University of Bahrain (RCSI-MUB) is a not-for-profit institution that awards dual degrees from RCSI-MUB and from the National University of Ireland. RCSI-MUB benefits considerably from its relationship with RCSI Dublin, a well-established and highly regarded organisation. Their partnership arrangements include a governance structure that ensures unity of purpose and alignment, leading to parity in quality and standards.

The Noble Purpose (vision) of RCSI-MUB's is to enhance health in the Kingdom of Bahrain and other member states of the Gulf Cooperation Council. This vision is supported by RCSI-MUB's Promise to stakeholders (mission) that students will become "highly sought-after and employable graduates" who "make a positive impact in healthcare". Both vision and mission are aspirational, aligned with

HI006-C3-R005



Fully Met



Substantially Met



Partially Met



Not Met

national priorities and well-communicated to stakeholders. Therefore, RCSI-MUB did not opt to revise them during the latest revision of the Strategic Plan.

RCSI-MUB has an online strategic plan monitoring system which facilitates consolidated ongoing tracking of the progress of both strategic and operational plans. The Strategic Plan of RCSI-MUB outlines institutional aims, provides an overview of general and specific objectives, and includes Key Performance Indicators (KPIs), and measures of success with specific targets for each of the five years of the Strategic Plan. This plan is operationalised through the annual operational plans of each department. However, some departmental plans lack detailed mapping to specific objectives, actions, tasks, KPIs, success measures, and targets. Enhancements could be made to ensure regular revision of RCSI-MUB vision, mission and values; maintain consistency across all operational plan formats; and ensure compliance with biannual reporting on the Strategic Plan's progress to the Board of Governors and Senior Management Team. Additionally, RCSI-MUB would benefit from clarifying the duties of the governing body and management.

RCSI-MUB has robust financial and accounting systems that ensure transparency and accuracy of financial operations, and these systems are subject to both internal and annual external audits. The institution's management of human and physical resources is comprehensive, supported by meticulous policies, procedures, and processes for selecting, recruiting, and retaining qualified and experienced academic and non-academic staff. RCSI-MUB follows a staffing framework compliant with the Higher Education Council (HEC) guidelines. The student-to-academic staff ratio meets the 2007 HEC resolution of a maximum of 1:25 for scientific disciplines. Furthermore, RCSI-MUB employs a mix of full-time and part-time academic staff, ensuring part-time staff remain below the 25% threshold set by HEC. Additionally, RCSI-MUB has effectively handled legal issues related to academic and non-academic staff through established practices and an outsourced legal firm, but there is no formal approved policy for handling legal issues, which should be developed.

RCSI-MUB's approach to managing, assuring quality and enhancing its programmes includes engaging multi-stakeholders, digitalizing processes, and utilising multiple external reference points. External stakeholders participate in meetings and decision making, including the annual evaluation of each programme's quality and standards. Frequent communication with alumni has facilitated an enduring relationship between RCSI-MUB and its graduates, enabling regular cohort analysis, monitoring employability rates, and tracking

their career progress. Additionally, benchmarking is conducted to improve the institution's core activities.

RCSI-MUB has demonstrated a strong commitment to maintaining and enhancing its physical infrastructure, ensuring that it meets the needs of its academic and administrative operations. The institutional facilities, including classrooms, libraries, and laboratories, are appropriately equipped and timetabled to meet academic and non-academic needs, ensuring optimal space utilisation and capacity planning. Furthermore, there is a comprehensive system for inducting and supporting students and faculty in using the learning management system, library, and learning resources, which ensures that all users are well-equipped to navigate and utilise digital and print learning resources available to them ethically and legally.

Academic affairs are effectively planned, managed and linked to RCSI-MUB's vision and mission. External reviews by bodies such as the Irish Medical Council and the Quality and Qualifications Ireland ensure that RCSI-MUB's programmes maintain global competitiveness. Graduate attributes and learning outcomes are achieved through well-defined mapping of module learning outcomes to programme learning outcomes and the institution's graduate profiles. There is also a comprehensive system for the design and approval of new programmes, which involves market analysis and input from internal and external stakeholders. Professionalism and ethics are central to the curricula, with academic policies and procedures accessible to both staff and students.

RCSI-MUB demonstrates a strong approach to teaching and learning, with institutional and college policies ensuring a range of appropriate teaching strategies, instructional methods, and learning resources, including e-learning, which are effectively implemented, monitored, and reviewed to achieve learning outcomes. Innovative approaches, such as case-based learning, personalised learning pathways, and simulation-based learning, are in place to enhance practical knowledge applications. To enrich the new and junior faculty with new learning and teaching approaches, RCSI-MUB has a well-established guidance and continuous support process for new full- and part-time staff, with junior academic staff are being mentored by senior faculty.

In terms of practical learning, clear policies govern clinical training, electives, and internships. Clinical rotations, conducted at RCSI-affiliated hospitals, provide students with diverse clinical exposure. Memorandum of understandings with major hospitals, the Joint Board for RCSI Bahrain and Private Hospitals, and the Affiliated Hospitals Joint Steering Committees ensure collaboration on clinical

placements. Furthermore, RCSI-MUB employs advanced systems such as the Kaizen Assessment System, Personal Tutor Programme, and Quercus system to track student progress, offering personalised support. PASS and Peer Assisted Learning programmes provide additional interventions for students needing academic assistance. Additionally, there is a well-established system to manage student records and issue certificates.

The RCSI-MUB's Research Plan highlights the key objectives and KPIs, focusing on the themes of diabetes, metabolic medicine and obesity that are major health issues in the region. Academic staff and students are both involved in research through initiatives like the Research Summer School and Research Competitions. There are detailed research policies in place that are regularly updated; they cover intellectual property regulations, research ethics, and the application for the annual internal research funding programme. All the detailed research spending is audited by the HEC annually.

RCSI-MUB has a proactive approach to community engagement and service, which is promoted, planned, well communicated and celebrated, with specific roles and responsibilities allocated at institutional and school levels. It engages staff, students and alumni, and embeds volunteering opportunities into the curricula. Engagement and cooperation with multiple local and regional entities that include government agencies, medical charities and societies are formalised through MOUs which delineate the roles of each party. The purposes of these agreements are generally closely related to the improvement of health and wellbeing in line with the RCSI-MUB's Noble Purpose.

Efficient and effective student academic and non-academic support services are provided to students and alumni. Prospective students are properly briefed on the programmes through the Prospectus and student talk initiatives. This includes providing students with information on scholarships, financial advice and support and access to transportation services through the institution's website and the Student Services Office. There are also appropriate arrangements in place to ensure that international students receive guidance and appropriate advice before and after their arrival in the Kingdom of Bahrain.

On admission, all students are properly inducted on the various academic support systems and services available to them. This is achieved through the orientation, buddy system, PathWay, and Personal Tutors programmes. In addition, students have access to career information, advice and guidance through the Careers and Alumni Office. They are also provided with opportunities to engage in wider social, recreational, community and cultural events such as Clubs and Societies,

International Night, Homecoming, International Citizenship Award and other events.

Overall, RCSI-MUB benefits from a good physical infrastructure, excellent partnerships with clinical establishments, and its key external relationship with RCSI Dublin. RCSI-MUB demonstrates a strong commitment to providing outstanding educational and professional experiences, supporting the career development of students, graduates, faculty and health professionals.

Commendations

1. There is a unity of purpose, and alignments that lead to parity of quality and standards of RCSI-MUB's operations with those of RCSI Dublin.
2. There are meticulous policies, procedures, and processes in selecting, recruiting, training and retaining qualified and experienced academic and non-academic staff.
3. RCSI-MUB uses advanced information management and tracking systems for ongoing monitoring of core operations.
4. RCSI-MUB has excellent partnerships with clinical establishments and effective communications with its alumni.
5. There is a comprehensive system for inducting and supporting students and faculty in using the learning management system, library, and learning resources.
6. There is a comprehensive system and process for the design and approval of new programmes that involves market analysis and input from stakeholders.
7. The institutional structures, services and processes actively promote and facilitate a strong ethos of community engagement and service.

Recommendations

1. Commit to review the RCSI-MUB's noble purpose, mission and values in future reviews of the Strategic Plan.
2. Maintain consistency across all operational plan formats, adhere to biannual reporting on the Strategic Plan's progress to the Board of Governors and Senior Management Team, and document these reports.
3. Ensure the separation of duties between the governing body and the management of RCSI-MUB.
4. Expedite the development and approval of policies and procedures for handling staff-related legal issues.

Standard 1 – Governance and Management

Indicator 1 - Vision, Mission and Values

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| 1.1 | The institution has a publicly displayed vision, mission and values that are approved at the governing body level, guide its activities, and well communicated to stakeholders | |
| 1.2 | The vision and mission are appropriate for the institutional type and programmes on offer; are aligned with the national priorities and strategies of the Kingdom of Bahrain; and reflect the core functions of the institution and its values. | |
| 1.3 | The institution involves internal and external stakeholders in the development of the vision, mission, and values of the institution. | |
| 1.4 | There is a process which ensures a regular review of the vision and mission that takes into account the national, regional and international context with respect to trends in higher education and programme offerings. | |

Indicator 2 - Strategic and Operational Planning

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| 2.1 | The institution has a strategic plan that was developed through a process of consultation with external and internal stakeholders. | |
| 2.2 | The strategic plan has clear objectives and key performance indicators with specific targets that are consistent with the mission and vision statements and the strategic goals of the institution. | |
| 2.3 | There is an allocated responsibility at senior management level to ensure the implementation, monitoring and review of the strategic plan. | |
| 2.4 | There are annual operational plans from which detailed action plans evolve for all academic and administrative departments in a manner that supports the strategic plan. | |

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| 2.5 | There are well-established processes for the annual monitoring and evaluation of the progress made in achieving the targets of operational plans, including data collection and reporting to senior management, with related remedial actions being clearly identified, coordinated, and executed. | ● |
| 2.6 | There is an appropriate risk management system in place that enables the institution to mitigate and address relevant strategic and operational risks. | ● |

Indicator 3 - Governance and Management Practices

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| 3.1 | There are clear terms of reference for the governance body (Board of Trustees) and any related sub-committees, in which the roles and responsibilities of the governing body members are clearly defined. | ● |
| 3.2 | There are implemented policies and procedures for the governing body to oversee the achievement of academic standards and actively support the efforts made to achieve and maintain the academic standards for face-to-face, online and blended education. | ● |
| 3.3 | The governing body and management have a clear separation of duties, both on paper and in practice and the members of the governing body are not involved in the day-to-day operations of the institution. | ● |
| 3.4 | There are implemented procedures for the appointment and induction of members of the governing body, which ensure that they understand their specific responsibilities. | ● |
| 3.5 | There are implemented mechanisms to evaluate the performance of the governing body members to ensure their efficiency and professional commitment. | ● |
| 3.6 | Appointment to senior managerial positions is transparent, based on clear and published criteria, and supported by a robust performance management system. | ● |
| 3.7 | There are formal procedures at the institutional level for scheduling and conducting meetings, and taking meeting minutes of councils, committees, and work teams. | ● |
| 3.8 | The planning and allocation of resources (including financial resources) are adequate and linked to the operations and core functions of the institution. | ● |
| 3.9 | There are approved delegations of authority for financial and management decisions that enable the managers of administrative and academic | ● |

entities (e.g., Deans, Head of Departments, Directors, etc.) to achieve their objectives and maintain high standards.

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| 3.10 | The financial and accounting systems include processes to prevent and detect fraud, including internal and external financial audits and transparent reporting. | ● |
| 3.11 | The governing body and management ensure the accuracy and currency of all published materials provided in printed form or electronically via the website or on social media, that inform students and the public about the institution, its services and activities (e.g., mission, vision, values, location, infrastructure, academic provisions, fees' structure, etc.). | ● |

Indicator 4 - Organisational Structure

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| 4.1 | There is an accurate and up-to-date organisational structure that is fit for purpose and accessible to all staff and students. | ● |
| 4.2 | Stakeholders' participation in decision-making, including students, is clear in the organisational structure, where appropriate. | ● |
| 4.3 | There is effective coordination and leadership across the institution, especially among senior management. | ● |
| 4.4 | All staff members know their roles and line of management in the institution and have clear job descriptions. | ● |
| 4.5 | The channels of communication between the governing body, senior management, staff, students and other stakeholders are clear. | ● |
| 4.6 | There is a structure for all active committees along with clearly articulated terms of reference and lines of reporting; and the effectiveness of these committees is regularly reviewed. | ● |
| 4.7 | The institution has well-structured mechanisms to ensure proper circulation of the decisions and recommendations raised by its councils, committees, and work teams. | ● |

Indicator 5 – Partnerships, Memoranda with other Institutions

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| 5.1 | For each programme where another HEI provides the curriculum and/or teaching or operates as a 'parent' institution, there is an active binding agreement between the institution operating in the Kingdom of Bahrain and the other institution, as per HEC regulations, which: | ● |
| (i) | has been entered into after due diligence to ensure the credibility of the other organisation and the programme being offered in the Kingdom of Bahrain. | |
| (ii) | states whether the programme offered in the Kingdom of Bahrain is equivalent and contextualised to a programme of the same name offered in the home country and whether graduates of the Bahrain programme are recognised in the home country. | |
| (iii) | specifies in detail the roles and responsibilities of both partners, including the teaching and assessment commitments and quality assurance arrangements. | |
| (iv) | contains a risk-management strategy to protect students, should there be any dispute or closure situation. | |
| (v) | assists the institution in the Kingdom of Bahrain to improve the academic capacities of its own staff. | |
| 5.2 | For each programme where another HEI, locally or internationally, provides some of the curriculum and/or teaching, the programme information provided to current and prospective students states clearly the institution(s) that is offering the degree, the name of the institution(s) that will be on the student's testamur, and which institution's rules and policies apply (i.e., the institution operating in the Kingdom of Bahrain or the other institution). | ● |
| 5.3 | For each programme where another HEI locally or internationally, provides some of the curriculum and/or teaching, the programme information provided to prospective and current students states clearly which course or programme elements will be taught and examined by the other institution. | ● |
| 5.4 | The HEI operating in the Kingdom of Bahrain has established processes and mechanisms that are regularly used to ensure that the partner (or parent) institution meets its obligations and, if needed, to approach the concerned authorities to ensure that the partner/parent institution meets its obligations. | ● |
| 5.5 | Where there is a memorandum of co-operation or understanding, the points of co-operation between the two institutions are clearly set out and there are mechanisms to monitor the implementation of the terms of the | ● |



memorandum, providing regular feedback, for planning, informed decision making, and continuous improvement, where applicable.

Standard 2 – Human Resources Management

Indicator 6 - Human Resources

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| 6.1 | The institution has developed and implemented a human resources management strategy and operational plans that enable it to fulfil its mission and deliver quality higher education provision. | ● |
| 6.2 | There are implemented policies and procedures for staff that include selecting, recruiting, and retaining qualified and experienced academic and non-academic staff. | ● |
| 6.3 | The institution has a published equality and diversity policy, which ensures that all staff are treated fairly. | ● |
| 6.4 | The institution has a clear policy in place regarding the handling of legal issues related to academic and non-academic staff. | ● |
| 6.5 | The institution has a published systematic, transparent, and fair process for investigating, recording and monitoring complaints, and grievances of its academic and non-academic staff. | ● |
| 6.6 | The number of qualified and experienced academic and non-academic staff is sufficient to adequately support the full range of the institution's academic and administrative functions. | ● |
| 6.7 | The institution keeps up-to-date records of the qualifications and experience of its full- and part-time academic and non-academic staff. | ● |
| 6.8 | There are implemented induction processes for all new academic and non-academic staff, whether full- or part-time. | ● |
| 6.9 | There are transparent and fair policies and procedures in place to recognise and reward staff through promotion or financial incentives. | ● |
| 6.10 | Staff satisfaction and exit surveys are regularly conducted and their results are used for quality improvements. | ● |



Indicator 7 - Staff Development

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| 7.1 | There is an effective institution-wide staff performance management plan and processes for annual evaluation and feedback on the performance of individual staff members. | ● |
| 7.2 | There are implemented policies and procedures for staff development and an institution-wide approach to the identification of staff development needs. | ● |
| 7.3 | The institution supports its staff to gain qualifications/professional certificates as a continuing professional development outcome and provides them with appropriate development opportunities. | ● |
| 7.4 | The effectiveness of staff development opportunities is evaluated by participants and the outcomes of such evaluations are being addressed. | ● |

Standard 3 – Quality Assurance and Enhancement

Indicator 8 - Quality Assurance System

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| 8.1 | There is a clear quality assurance management system that is rigorously and consistently implemented, monitored and evaluated, with processes and mechanisms to implement improvements across the institution and for which there are clear lines of responsibility and accountability. | ● |
| 8.2 | All institutional policies, procedures and regulations are clearly articulated, documented, and consistently applied and reviewed for effectiveness and enhancement, and are accessible and effectively communicated to students and staff. | ● |
| 8.3 | There is a process to regularly monitor compliance with the HEC regulations. | ● |
| 8.4 | There is an implemented mechanism to disseminate information, which ensures that academic and administrative staff members have an evident understanding of their role in quality assurance and enhancement. | ● |
| 8.5 | The institution has a mechanism in place to actively and fairly engage students, individually and collectively, in the quality and enhancement of their educational experience. | ● |
| 8.6 | The institution undertakes regular and systematic monitoring of its core operations and conducts periodic reviews of all key aspects of its performance against clearly specified and appropriate indicators. | ● |

Indicator 9 – Quality Enhancement

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| 9.1 | There is a clear and well-articulated and documented benchmarking policy, which is consistently implemented. | ● |
| 9.2 | Benchmarking takes place against other appropriate national, regional or international institutions of a similar profile for all core activities of the institution. | ● |
| 9.3 | The findings of benchmarking exercises have been used to enhance the activities of the institution, where applicable. | ● |



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| 9.4 | There are clear and documented approaches to eliciting stakeholders' feedback regularly through a variety of implemented mechanisms, including surveys to evaluate the effectiveness of the institution's services. | ● |
| 9.5 | There are mechanisms to ensure the utilisation of the received stakeholders' feedback to improve the institution's services and to inform the relevant stakeholders of any actions taken. | ● |
| 9.6 | The institution conducts regular cohort analysis and monitors employability rates to enhance the programmes' relevance to the market needs. | ● |

Standard 4 – Infrastructure, ICT and Learning Resources

Indicator 10 - Infrastructure

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| 10.1 | The institution ensures the compliance of its premises and facilities with the related HEC regulations through continuous reviews. | ● |
| 10.2 | There are registers showing that the provided classrooms, tutorial and study spaces, library, offices, laboratories, amenities, medical facilities and security services are suitably equipped, sufficient and timetabled for the academic and non-academic activities and events. | ● |
| 10.3 | There is a record of all physical infrastructure and equipment showing scheduled cleaning, maintenance, and upgrades. | ● |
| 10.4 | The institution has appropriate arrangements to ensure the security, efficiency, integrity and the availability of appropriate accommodation for conducting the examinations and other assessments. | ● |
| 10.5 | There are formal, appropriate and implemented action plans whenever there is a need to modify or expand the institution's premises, and/or facilities to satisfy the requirements of the academic and administrative operations. | ● |
| 10.6 | There are effective published policies and processes for occupational health and safety that are made available to staff, students and visitors, and comply with the laws and regulations of the Kingdom of Bahrain. | ● |
| 10.7 | Access to the premises is appropriately restricted, secured and convenient for staff and students with special needs. | ● |
| 10.8 | Where applicable, the residential accommodation offered by the institution is clean, safe, supervised and of a standard which is adequate to the needs of students, and there are arrangements in place to ensure regular inspections are conducted. | ● |

Indicator 11 – Information and Communications Technology

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| 11.1 | There is an ICT operational plan - including active disaster recovery plans, and planned maintenance and replacement of ICT resources, which is systematically implemented, monitored and revised, to ensure that systems are fit for purpose, and up-to-date and reliable ICT services are available to all students, staff and other stakeholders. | ● |
| 11.2 | There are up-to-date registers showing the provision of ICT systems and services, including the availability of sufficient hardware and software for staff and students. | ● |
| 11.3 | The institution uses appropriate management information systems to record and provide reports for the governing body, management and academic staff so that effective and informed decisions can be taken. | ● |
| 11.4 | The institution has formal arrangements to ensure that the ICT systems and services are accessible to staff and students with special needs, where applicable. | ● |
| 11.5 | There are effective arrangements that prevent unauthorised access to, and inappropriate use of, ICT resources, and provide adequate safeguards against copyright infringements of print and digital resources. | ● |
| 11.6 | The institution has appropriate policy and procedures for the use of its website and social media accounts, to effectively engage with its stakeholders and ensure the accuracy of the published information. | ● |

Indicator 12 - Learning Resources

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| 12.1 | There are appropriate and effective policies and procedures for managing the utilisation of learning resources and dealing with the misuse cases of these resources. | ● |
| 12.2 | There are implemented policies and procedures to ensure that there are effective and adequate physical and electronic library and learning resources for students and staff, including access to the learning management system, databases, books and journals. | ● |
| 12.3 | The institution has a comprehensive and well-managed learning management system, which is appropriate, sufficient to accommodate all users, and ensures the safety and integrity of personal data. | ● |



- 12.4 There is a system to ensure that students and academic staff are inducted and well-supported in the use of the learning management system, library and learning resources.



Standard 5 – Management of Academic Affairs

Indicator 13 – Academic Management and Integrity

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| 13.1 | There is academic planning derived and linked to the institution's mission and strategic goals, which clearly reflects among other aspects: a philosophy of teaching and learning; the type programmes on offer as well as the services provided to students; and the mechanisms to evaluate the achievement of strategic goals. | ● |
| 13.2 | The institution has appropriate arrangements that include provision for academic leadership at programme and individual course level, and clearly identify academic staff responsibilities, as in teaching, research, scholarly activity, consultancy, community engagement and academic administration, to ensure a balance amongst these various responsibilities in line with the related HEC regulations and international norms. | ● |
| 13.3 | The institution has appropriate arrangements to ensure the balance between the number of senior academic staff with relevant experience and high academic ranks and junior academic staff who have just started their academic career as well as demonstrating diversification among their background and qualifications. | ● |
| 13.4 | The institution employs an appropriate and effective mentoring system that provides guidance and continuous support for junior academic staff. | ● |
| 13.5 | The institution has clear and published ethical and legal regulations, policies and procedures related to academic affairs and practices, which are implemented, regularly reviewed and accessible to academic staff and students. | ● |
| 13.6 | There are effective arrangements in place to acknowledge intellectual property rights and to prevent, detect and deal with plagiarism, in addition to other forms of academic misconduct (e.g., cheating, forging of results, and commissioning others to do the work). | ● |
| 13.7 | The institution has a set of comprehensive policies, regulations and procedures in place for staff and student conduct that deal with any unacceptable behaviour and discrimination. | ● |
| 13.8 | The institution has a clear and published policy on required student attendance and punctuality, and effective procedures and systems to monitor and enforce it. | ● |

- 13.9 The institution has a published, systematic, transparent, and fair process for investigating, recording and monitoring complaints and grievances of its students.



Indicator 14 – Design and Approval of New Academic Programme

- 14.1 The institution has effective policies and procedures for the proposal, design and approval of new programmes, which take into consideration the mission of the institution, national priorities, employability skills, local, regional and international market demand including employability rates and the required infrastructure, learning and human resources to deliver the proposed programme.
- 14.2 The institution has formal and effective arrangements to ensure the involvement of internal and external stakeholders in the processes for the design and approval of new programmes and to demonstrate the compliance of newly developed programmes with the requirements of the NQF and HEC regulations.
- 14.3 The institution has formal and appropriate arrangements for benefiting from external expertise, regional and international reference points, in the design/development processes of new programmes.
- 14.4 Newly developed programmes have clearly articulated objectives/aims, learning outcomes, admission requirements, progression routes and career paths for prospective students.



Indicator 15 – Academic Programme Reviews

- 15.1 There are effective policies and procedures for the review of existing/running programmes that ensure the involvement of all internal and external stakeholders, including students.
- 15.2 There are implemented policies and procedures for annual reviews of academic programmes, which include analysis of year-on-year results relevant to student satisfaction, achievement levels, completion rates and progression to further study or employment, etc., that inform the improvement of programme quality and enhance the delivery of programmes.
- 15.3 There are implemented policies and procedures for periodic and external reviews to ensure that programmes and their curricula are up to date; reflect current research and trends in the discipline (fitness of purpose); and are relevant to the labour market and societal needs.



- 15.4 There is a clear mechanism to ensure that the results of the annual, periodic and external programme review reports and related action plans are being used by senior management for decision making and, where appropriate, being shared with all stakeholders including students.



Indicator 16 – Admissions and Certification

- 16.1 The institution has up-to-date, clear, and accurate information about its academic programmes, admission criteria, which are published and available to prospective students and other stakeholders.
- 16.2 The institution regularly reviews admission criteria taking into account stakeholders' feedback and using information on students' outcomes, to ensure that the criteria are appropriately providing equal opportunities for prospective students and are aligned with local, regional and international academic norms for the discipline.
- 16.3 The language(s) of teaching and learning in the programme is clearly stated and the admission criteria include minimum language entry requirements that must be met.
- 16.4 The institution has clearly stated regulations about the transfer of credits from one programme to another or from another institution, that are fairly implemented for all relevant prospective students.
- 16.5 There is a policy and procedure in place to support access and recognition of prior learning, which accords with the NQF requirements, and there is an up-to-date register which is kept for all recognition of prior learning assessment and admission activities/records, where applicable, and where legislation permits.
- 16.6 The institution has a procedure in place to ensure that all application enquiries are responded to in a timely and appropriate manner.
- 16.7 The institution has formal arrangements that enable prospective students to appeal against access and enrolled students against transfer decisions.
- 16.8 The institution has a published policy that is administered effectively regarding the collection of and refund of student fees.
- 16.9 The institution has appropriate arrangements to ensure that foundation studies, including access courses and bridging courses, enable students to meet the admission criteria.
- 16.10 The institution provides students the opportunity to exit a programme at a given level and transfer to another programme, while specifying the details and the level of the other available programmes to transfer to and award given (if any) at the time of exit (where applicable).





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| 16.11 | There is an effective system for the management of students' information and academic records that includes processes for accurately entering and verifying data on enrolments and grades, backup of records, and processes to preserve the integrity and confidentiality of records and protect against unauthorised access or improper use. | ● |
| 16.12 | There are effective mechanisms in place to ensure and maintain the safety and integrity of the process of certificate issuance. | ● |
| 16.13 | The institution makes students records, transcripts and certificates available to its students in a timely manner. | ● |

Standard 6 – Teaching, Learning and Assessment

Indicator 17 - Management of Teaching and Learning

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| 17.1 | There are institutional/college teaching and learning policies and procedures, which include a range of appropriate teaching strategies, instructional methods (including e-learning) and learning resources that are consistently implemented, monitored and reviewed for effectiveness to achieve the learning outcomes. | ● |
| 17.2 | The institution has an appropriate mechanism to ensure that all academic staff are consistently updating their course syllabi, which include mode of delivery, semester weekly schedule, instructional methods, and assessment types and dates, and which are made available to students on a regular basis. | ● |
| 17.3 | Where practicums, work-based learning or internships, or capstone or graduation project are in place, there are implemented policies and procedures with regard to learning agreements if applicable, assessment strategies, and the roles and responsibilities of the various stakeholders. | ● |
| 17.4 | There is a system to track and regularly monitor the student's learning experiences and progress, with mechanisms for improvement. | ● |
| 17.5 | The institution has a consistently implemented, effective system to monitor the quality of all modes of teaching and learning (including e-learning), leading to continuous improvement. | ● |

Indicator 18 – Graduate Attributes and Learning Outcomes

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| 18.1 | There are implemented effective mechanisms to ensure that graduate attributes at the institutional level and learning outcomes for all programmes and courses are clearly formulated and publicly available. | ● |
| 18.2 | The institution identifies the employability skills as per the recent trends in the labour market and ensure these skills are embedded in the graduate attributes and the learning outcomes. | ● |
| 18.3 | Benchmarks and external reference points are used to determine and verify the equivalence of learning outcomes with occupational standards, where appropriate, and with other similar programmes locally, regionally or internationally. | ● |

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| 18.4 | There are implemented mechanisms to ensure that graduate attributes and learning outcomes are achieved across all programmes. | ● |
| 18.5 | The institution regularly tracks graduate destination and uses this information to inform the development of appropriate programme and course learning outcomes and ensure academic standards are attained. | ● |

Indicator 19 - Assessment and Moderation

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| 19.1 | There are effective assessment policies and procedures that contribute to the design of appropriate formative and summative assessments in terms of their level of complexity, validity, alignment with course and programme learning outcomes, rigour, and fairness and transparency of marking and timely feedback. | ● |
| 19.2 | The assessment policies and procedures are published and systematically implemented across the institution. | ● |
| 19.3 | There are effective policies and procedures that govern the pre and post internal and external moderation of assessment and clearly state the roles and responsibilities of the moderators and the mechanism for their appointment. | ● |
| 19.4 | There is a clear and transparent grade appeal process that is communicated to students and consistently implemented across the institution in a timely manner. | ● |
| 19.5 | The institution has effective policies and procedures for the security and retention of assessment documents and records and back-up mechanisms. | ● |

Standard 7 – Research and Postgraduate Studies

Indicator 20 – Research Management and Support

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| 20.1 | The institution has clear research strategy which is aligned with the national priorities and encourages innovation and collaborative research. | |
| 20.2 | The institution has implemented an operational research plan appropriate for its type and mission, which includes key performance indicators and targets, and is regularly monitored and reviewed for improvement to support the institutions' strategic goals. | |
| 20.3 | In accordance with HEC regulations, the proportion of the institution's budget allocated for the support of research is monitored and is sufficient to support the institution's strategic goals. | |
| 20.4 | There are effective policies related to research ethics' issues, which are well-disseminated and consistently implemented. | |
| 20.5 | There are fair, transparent and implemented research policies for the awarding of research grants, conference participation, academic promotion, or other incentives to support academic staff in developing their research output. | |
| 20.6 | There is an implemented systematic approach to ensure that research and scholarly activities have a positive impact on teaching and student learning and are relevant to academic and professional fields. | |
| 20.7 | The institution has an appropriate mechanism to communicate its operational research plan to all relevant stakeholders. | |
| 20.8 | The institution has formal arrangements in place for its research output to be documented and published via printed and/or electronic forms (catalogues, journals, website, social media accounts, etc.). | |

Indicator - 21 Postgraduate Studies (where applicable)

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| 21.1 | There is a mechanism in place to ensure that the learning outcomes of the research component(s) are aligned with the programme outcomes and are assessed properly in line with the NQF requirements. | ● |
| 21.2 | The institution has implemented policies and procedures, which are aligned with HEC regulations, for the effective supervision and support of research students. | ● |
| 21.3 | There is regular monitoring and review of research students' progress and satisfaction in their programmes of study. | ● |
| 21.4 | There is a rigorously implemented mechanism involving well-experienced and qualified research supervisors, and internal and external examiners, for the assessment of the research component(s), to ensure that these are at an appropriate level and comparable to international standards. | ● |

Standard 8 – Community Engagement

Indicator 22 - Community Engagement

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| 22.1 | The institution has a clearly articulated community engagement statement, policies, and operational plan, which are aligned to its mission and strategic goals and are consistently implemented. | ● |
| 22.2 | The institution has appropriate arrangements for strengthening its links with the business community and ensuring its positive contribution to its core functions. | ● |
| 22.3 | The institution has appropriate arrangements in place for involving relevant external stakeholders, including alumni, professional bodies, and university partnerships, in community engagement activities. | ● |
| 22.4 | The institution encourages and supports staff and students to engage in community and professional activities in line with its community engagement operational plan. | ● |
| 22.5 | The institution has a database of community engagement activities that is used for planning purposes. | ● |
| 22.6 | The institution has a mechanism in place for collecting feedback on community activities from relevant stakeholders and uses it for improvement of future community engagement activities. | ● |

Standard 9 – Student Support Services

Indicator 23 - Student Academic Support

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| 23.1 | Prospective students are properly briefed on the nature and requirements of the programme(s) in which they are interested and provided with advice on choosing their programme of study. | ● |
| 23.2 | The institution has effective procedures for ensuring that all students are properly inducted on the various academic support systems and services available to them. | ● |
| 23.3 | Reasonable accommodations are made for students with special needs, including academic support, where appropriate and for different modes of learning, and these are regularly monitored and reviewed. | ● |
| 23.4 | Students have access to career information, advice and guidance, including progression to further study and any professional body exemptions that may be available. | ● |
| 23.5 | The institution has appropriate arrangements for enabling all students to have fair access to academic staff outside regular teaching and learning sessions. | ● |
| 23.6 | There are effective procedures to allocate for every student an academic advisor, who regularly follows up on and discusses the student's progress and provides them with guidance and advice in a timely manner. | ● |
| 23.7 | The institution has an effective mechanism to identify and support students at risk of academic failure. | ● |
| 23.8 | There is an effective learning environment that promotes the concept of lifelong learning and ensures equal opportunities for all students. | ● |

Indicator 24 - Student Non-Academic Support

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| 24.1 | The institution has appropriate arrangements for providing all students with information on scholarships, financial advice and support and access to transportation services, where applicable. | ● |
| 24.2 | There are appropriate arrangements in place to ensure that international students receive guidance and appropriate advice before and after their arrival in the Kingdom of Bahrain. This advice relates to travelling to and living in the Kingdom of Bahrain, information about the local culture, religious considerations, etc. | ● |
| 24.3 | The institution has appropriate formal arrangements for the selection, monitoring, and evaluation of its student recruitment agents, where applicable. | ● |
| 24.4 | The institution has appropriate arrangements for providing all students with emergency contact numbers for support outside official working hours. | ● |
| 24.5 | There is a range of effective student support services related to counselling, health, and welfare. | ● |
| 24.6 | The institution provides students with opportunities, whether face-to face or virtual, to engage in wider social, recreational, community and cultural pursuits aimed to promote their development as individuals. | ● |
| 24.7 | The institution proactively engages with its alumni and encourages their interaction with current students to provide support, mentoring and career advice. | ● |