



هيئة جودة التعليم والتدريب
Education & Training Quality Authority

Higher Education Institutional Review Handbook

Kingdom of Bahrain
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ABBREVIATIONS

BQA	Education & Training Quality Authority
CQI	Continuous Quality Improvement
DFO	Directorate of National Framework Operations
DGS	Directorate of Government Schools Reviews
DHR	Directorate of Higher Education Reviews
DNE	Directorate of National Examinations
DPS	Directorate of Private Schools and Kindergartens Reviews
DVR	Directorate of Vocational Reviews
GDR	General Directorate of Education and Training Institutes Reviews
HEC	Higher Education Council
HEI	Higher Education Institution
ICT	Information and Communications Technology
NQF	National Qualifications Framework
P/CE	President/Chief Executive
RPL	Recognition of Prior Learning
SER	Self-Evaluation Report
SM	Supporting Material

GLOSSARY OF TERMS

Academic Integrity	A commitment and compliance with ethical and professional principles, standards and practices by individuals or institutions in education, research, and scholarly work.
Academic Planning	Planning that outlines a university's or a college's overall academic goals and how those goals will be met. Academic planning identifies long-term and short-term objectives to match the mission of an institution with the needs of students. It covers working on academic programme planning for new and existing programmes.
Academic Standards	Discrete levels of intellectual performance, the attainment of which results in the award of academic credit, leading invariably to the conferment of an academic qualification.
Assessment	The wide variety of processes, methods or tools that are used to evaluate, measure, and document the academic readiness, learning progress, skill acquisition, or educational needs of students, which ultimately help determine whether they have achieved the intended learning outcomes set for a specific course or academic programme.
Benchmarking	The process of self-evaluation and self-improvement through a systematic and collaborative comparison of institutional practices and arrangements with similar institutions against established criteria, to identify strengths and weaknesses and to set new targets to improve performance.
Blended Education	The practice of using both online and in-person experiences when teaching students or when learning; it is also known as hybrid learning and mixed-mode learning.
Branch Campus	A campus of a college or a university that is located separately from the main or 'home' campus.
Certification	The formal documentation process that records the successful achievement of a qualification.
Credit	The value assigned to the amount or volume of learning required to complete a course or achieve a qualification.
Credit Transfer	A process that allows credit awarded by one higher education institution to be recognised and included towards the requirements for a programme at another higher education institution; or that allows credit gained on a particular academic

	programme to contribute towards the requirements of a different one.
Employability Skills	A set of achievements, skills, understanding and personal attributes that makes graduates more likely to gain employment and be successful in their chosen occupations.
External Reference Points	The standards/ criteria set by recognised local, regional, or international entities against which performance can be measured.
Formal Learning	Learning that is organised and generally occurs in structured learning environments, whereby the student's objective is to obtain knowledge, skills and/or competence leading to recognition in the form of a certificate.
Formative Assessment	Assessment with a developmental purpose, designed to help students learn more effectively by giving them feedback on their performance and how it can be improved and/or maintained.
Graduate Attributes	Skills, abilities, and attitudes identified by higher education institutions that their graduates will have to develop through meaningful experiences, the processes of learning and reflection during their studies, and participation in student life. Listed attributes might include critical and reflective thinker, effective communicator, creative problem solver, resilient and self-reliant individual.
Informal Learning	Learning that is not organised or structured, has no set objective in terms of learning outcomes and is never intentional from the student's viewpoint. Typical examples are learning which is gained through work-related, social, family, hobby or leisure activities and experiences.
Institutional Accreditation	A process for verifying or approving a higher education institution by an authorised external organisation which, if successful, enables an institution to be recognised as meeting pre-determined standards.
Institutional Listing	A process which ensures that an institution has established suitable formal arrangements to maintain the standards of their qualifications.
Learning Environment	The diverse physical locations, contexts, and cultures in which students learn.
Learning Outcomes	Statements that describe significant and essential skills, abilities, knowledge, or values that students should be able to

	demonstrate as a result of successfully completing a learning experience, such as a course or a programme.
Lifelong Learning	Learning that is undertaken throughout life and improves knowledge, skills, and competencies within the individual's personal, civic, social and/or employment-related contexts.
Licensing	The process by which an institution gets approval from the relevant regulatory body to provide education or training services.
Moderation of Assessment	The process that is used to ensure that an institution's assessments are valid and reliable, and that the assessment is being fairly and consistently marked across all students. Internal Moderation refers to the process of internal checks that the institution has in place to ensure the suitability and consistency of assessment. External Moderation is carried out by independent external moderators/verifiers/examiners to ensure suitability, consistency, and objectivity in assessment decisions.
National Priorities	Essential actions and activities that serve national interests, which are identified in documents such as the National Strategy for Higher Education in the Kingdom, the 2030 Vision of a Knowledge Economy, the National Plan for the Advancement of Bahraini Women, etc.).
National Qualifications Framework	An instrument for the classification of qualifications according to a set of criteria for specified levels of learning achieved. It integrates and coordinates national qualifications sub-systems and improves quality, transparency, access, and progression.
Non-Formal Learning	Organised education and training outside formal education or training systems, which lacks common Formal Learning elements such as: curriculum, syllabus, or accreditation. Non-Formal Learning may be assessed but does not typically lead to formal certification. Examples for Non-Formal Learning include learning and training activities undertaken in the workplace or voluntary sector and through community service programmes.
Parent Institution	A higher education institution having some of its programmes hosted by other institution(s) internationally, regulated through formal agreements.
Periodic Reviews of Academic Programmes	A comprehensive internal review of a programme of study, undertaken periodically (typically following the graduation of each cohort), using external reference points and benchmarks, to confirm that the different aspects of the programme such as admission requirements, learning outcomes and curriculum are

	fit for purpose and that the programme meets market needs. Internal and external stakeholders are expected to be substantially involved in the periodic internal reviews.
Qualification	A package of courses/modules judged to be worthy of formal recognition in a certificate issued by an institution.
Quality Assurance System	A collection of multiple sustainable processes for systematic monitoring, review, and continuous improvement of the institution's educational provision and support services.
Recognition of Prior Learning	The assessment of an individual's knowledge, skills, and competence acquired through previous Non-formal and Informal Learning, the results of which are used to grant status or credit towards a qualification.
Review Indicators	The elements that make up each review standard within the Institutional Review Framework, where the results of their evaluation, based on related expectations that identify certain requirements, performance trends and actions that need to be taken, contribute to determining whether the standard is being met or not.
Review Standards	The main areas specified in the General Framework through which the overall performance of a higher education institution is evaluated based on the extent to which the institution fulfills the related indicators and expectations falling under each area.
Self-Evaluation Report	A report submitted by a higher education institution, assessing its own performance against pre-defined review standards, covering all the applicable review indicators and expectations, and providing the relevant evidence supporting its assessment claims.
Summative Assessment	Assessment tasks and activities that are given at the conclusion of a specific instructional period (e.g., chapter, unit, mid-semester, course), and are generally evaluative, meaning that they are used to determine learning achievement, evaluate the effectiveness of educational programmes, or measure progress toward set goals, as well as providing evidence for credits and awards.
Students with Special Needs	A group of students that have restricted capacity to participate in or benefit from education due to having advantaged or disadvantaged physical, intellectual, social or emotional capabilities.

INTRODUCTION

The Education & Training Quality Authority (BQA) was established by a Royal Decree No. 32 of 2008 as an independent national authority attached to the Cabinet of Ministers in the Kingdom of Bahrain to ensure that the quality of education and training in the Kingdom of Bahrain meets international standards and best practice in accordance with the Economic Vision 2030. As per the most recent updated organisational structure, the BQA comprises two general directorates: The General Directorate of Education and Training Institutes Reviews (GDR) and the General Directorate of National Qualifications Framework & National Examinations. The latter comprises of two directorates: the Directorate of National Framework Operations (DFO), and the Directorate of National Examinations (DNE). The GDR consists of four directorates: the Directorate of Government Schools Reviews (DGS), the Directorate of Private Schools and Kindergartens Reviews (DPS), the Directorate of Vocational Reviews (DVR), and the Directorate of Higher Education Reviews (DHR).

In the higher education sector, the first two pilot institutional reviews were carried out during 2007. In light of the feedback from the pilots as well as consultative workshops with stakeholders, the processes were revised, and a manual entitled 'Institutional Quality Review Handbook 2009' was developed. In 2012, the first cycle of institutional reviews was completed in line with the processes prescribed in the 2009 Handbook. Institutional reviews at that time were formative in nature aiming to identify areas of improvement, whilst pointing out areas of strength, as well. In 2015, the institutional review processes were revised, and review judgements were included. A new framework entitled 'General Framework of Higher Education Institutional Review' was developed and approved by the Cabinet of Ministers (Resolution No. 38 of 2015). The BQA represented by DHR completed the second cycle of institutional reviews in 2020, as per the processes prescribed in the 2015 framework.

The revision process of the General Framework of Higher Education Institutional Review began in 2021, based on the results of benchmarking with similar regional and international frameworks and in light of feedback received from HEIs operating in the Kingdom of Bahrain and from local, regional and international experts. The Higher Education Council (HEC) participated in the development of this Framework, which was approved by the Cabinet of Ministers on the 3rd of April 2023 and published on the 7th of August 2023 as per the Cabinet's Resolution No. 55 of 2023.

This Handbook was updated to reflect the changes that were incorporated in the General Framework of Higher Education Institutional Review. It serves two main objectives. First, it gives institutions an overview of the review process. Second, it gives Review Panel members details about the review process to ensure they understand their role in the review. The Handbook is divided into two sections. **Section 1** gives an overview of institutional reviews in the Kingdom of Bahrain. **Section 2** outlines the institutional review process.

1. Overview of Higher Education Institutional Reviews

1.1 The Framework

The General Framework of Higher Education Institutional Review¹ consists of nine Standards comprising 24 Indicators for which there will be summative judgements. The Framework incorporates the Institutional Listing Standards of the National Qualifications Framework (NQF) and combines the standards and processes of the BQA's higher education institutional reviews and the institutional accreditation of the HEC into one document.

According to the Framework, any HEI that is to be institutionally reviewed, is evaluated through a single review conducted jointly by the BQA and the HEC. This review results in a single published institutional review report with comments, recommendations, and judgements on the overall performance of the HEI against the Framework's Standards and Indicators. This report is one of the main sources of input for granting the institutional accreditation. Institutions that pass the institutional review will be listed or maintain this status if it was previously listed in the NQF Register.

The institutional review will lead to an overall judgement – 'Compliant with the General Framework Standards', or 'Partially Compliant with the General Framework Standards', or 'Not Compliant with the General Framework Standards'. Table 1 briefly describes the outcomes of the institutional review's overall judgements.

Table 1: Overall Judgements and Outcomes

Overall Judgement	Outcomes
Compliant with the General Framework Standards	<ul style="list-style-type: none">▪ The judgement will be final, and the institutional review report will be published on the BQA website.▪ The institution will be listed or remain listed in the NQF Register.
Partially Compliant with the General Framework Standards	<ul style="list-style-type: none">▪ The judgement will not be final, and in this case only the judgement will be published on the BQA website.▪ The institution will be subject to an extension visit in less than two years after the institution and the concerned entities are notified with the initial review judgement.▪ Based on the extension visit, the overall judgement may change to 'Compliant' or 'Not Compliant' with the General Framework Standards, and the institutional review report will be published on the BQA website.
Not Compliant with the General Framework Standards	<ul style="list-style-type: none">▪ The judgement will be final, and the institutional review report will be published on the BQA website.▪ The institution will be re-reviewed after one year from the publication date of the institutional review report.

¹ The Framework can be accessed on the BQA website or by using the link below:
<https://www.bqa.gov.bh/En/Publications/Pages/manuals.aspx>

	<ul style="list-style-type: none"> ▪ Based on the institutional re-review, the overall judgement may change to 'Compliant' or 'Not Compliant' with the General Framework Standards. ▪ The HEC will take the necessary actions towards the institution that receive an overall judgement of 'Not Compliant with the General Framework Standards' after the extension visit or the re-review. ▪ The listed institution in the NQF Register will be archived from the NQF Register.
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1.2 Objectives of Institutional Reviews

The three main objectives of institutional reviews are:

1. To enhance the quality of higher education in the Kingdom of Bahrain by conducting reviews to assess the performance of the HEIs operating in the Kingdom, against predefined set of standards and indicators, and provide a summative judgement while identifying areas in need of improvement and areas of strength.
2. To ensure that there is public accountability of higher education providers through the provision of an objective assessment of the quality of each provider, which produces published reports and summative judgements, which will be utilised by HEC for the purpose of accrediting these providers, as well as being made available to students, parents, and other relevant bodies.
3. To identify good practice where it exists and disseminate it throughout the Bahraini higher education sector.

1.3 Approach to Institutional Reviews and Conducting the Process

The review process respects the autonomy and identity of the institution and its specific mission, while applying the standards and indicators that are included in the General Framework of Higher Education Institutional Review. The institutional review process is guided by each HEI's own self-evaluation and carried out by peer professional reviewers, who are usually senior academicians with vast experience in universities locally, regionally, and internationally or specialists with substantial expertise in some aspects of quality assurance relevant to higher education. The review process may also include students in the review visits.

The conduct of external institutional reviews of HEIs in the Kingdom of Bahrain is in line with standards and good practices of regional and international higher education quality assurance and accreditation entities. To ensure an effective, rigorous, fair and transparent process, all parties are obliged to exhibit professional conduct and integrity at all times throughout the institutional review process. The BQA will fulfil this obligation. In turn, the BQA expects that institutions will behave proficiently in interactions with them and in their approach to the review process.

1.4 Steps in the Institutional Review Process

The DHR in coordination with the Directorate of Accreditation and Licensing of the HEC, identifies the HEIs that will be scheduled for institutional review. The DHR prepares the schedule of institutional reviews. The review starts with the institution being notified by the DHR of the intended site visit date. The institution submits a review portfolio (Self-Evaluation Report (SER) and Supporting Material (SM)) on the specified date to the DHR. The rest of the process is:

- A desk-top analysis of the institution's submission, followed by a Portfolio Meeting
- A site visit that lasts four days, typically
- An extension-visit for the institution that has received a 'Partially Compliant with the General Framework Standards' Judgement
- A review report published by the BQA
- The re-review of the institution that has received a 'Not Compliant with the General Framework Standards' Judgement
- The submission of the accreditation application form to the HEC by the institution that has received a 'Compliant with the General Framework Standards' Judgement
- The submission of a progress report to the HEC by the accredited institution
- Interim visit(s) that are conducted by the HEC in cooperation with the BQA to the accredited institution.

1.5 Scope and Form of Institutional Reviews

1.5.1 Higher Education Institutions

The DHR carries out institutional reviews of public and private HEIs that are subject to the HEC licence and/or accreditation processes and operating in the Kingdom of Bahrain for at least four years; this includes 'branch' campuses and affiliates of overseas institutions (see section 1.5.3). Where an HEI offers vocational education and training programmes as well as higher education academic programmes, the DVR may be involved in the institutional review process.

1.5.2 A Whole-Institution Review

A higher education institutional review takes the form of a 'whole-institution' review. The scope of the higher education external institutional review is to examine all activities carried out in the Kingdom of Bahrain, whether it is by the institution itself or through another partner, as for example when an overseas provider offers a degree programme at the institution. The review will also assess how these activities are governed and supported by the infrastructure and human resources to ensure the integrity of the institution and its different functions.

1.5.3 Overseas Partner or Parent Institutions

Several HEIs in Bahrain have a relationship with an overseas university(s) in the form of a 'parent-branch campus' relationship or a 'foreign-backed university' model. Other HEIs in Bahrain offer programmes from overseas institutions on a partnership basis.

While such arrangements can contribute to the improvement of higher education in Bahrain, they are not without risks to students and academic standards.

For this reason, institutional reviews will investigate thoroughly the relationships and quality assurance arrangements between the HEI and its overseas 'parent' or partners. This will include investigating whether the overseas institution is accredited by the concerned external quality agency in its home country and whether this accreditation covers academic activities in Bahrain. In the process of the investigation, the BQA and/or HEC representatives may visit the overseas parent or partner as well as the overseas external quality agency.

Over time, some cooperation may be agreed upon with the external quality assurance agency in the overseas institution's home country with respect to reviews of branch campuses. For example, if the home country's external quality agency reviews the branch campus located in the Kingdom of Bahrain as part of its review of the institution as a whole, the BQA will seek to cooperate with the other agency, to reduce duplication in processes. However, the BQA reserves the right to conduct a full-fledged review of the branch campus.

1.5.4 Use of Standards and Indicators

The Standards and Indicators of the General Framework of Higher education Institutional reviews are based on international good practices for HEIs. Each indicator includes 'what is expected of HEIs operating in the Kingdom of Bahrain'. These expectations are intended to provide assistance in interpreting the indicators. The institution must comment on all applicable expectations in their self-evaluation report and may choose to add their own practices, where applicable. The review report will include judgements about the extent to which the institution's performance meets the expectations listed under each indicator and hence the review indicators and standards. The review report will identify areas of good practice as well as areas where improvement is required. Accordingly, institutional reviews have formative and summative components:

- **Formative:** in that the process assists institutions to improve their performance through self-reflection and evaluation. The review report, while it contains judgements, also recommends how the institution may improve its performance in the three core functions of teaching and learning, research and community engagement, as well as in governance and management. This is the developmental aspect of institutional reviews.
- **Summative:** in that the review judgements will state how the institution is performing with regard to international good practices and will judge whether the institution meets the expectations of each indicator or not and, hence, provide an overall judgement relevant to how the institution is compliant with the standards of the General Framework of Higher Education Institutional Review.

1.6 Support from the Directorate of Higher Education Reviews

Each institution being reviewed will have as their main contact person within the BQA a Review Director, who reports to the DHR Director. A Senior Quality Specialist from DHR will also be assigned for each review.

All HEIs in Bahrain will be advised of the schedule for reviews. In addition to formal correspondence regarding the review of a particular institution, the DHR Director and Review Directors will meet with HEIs individually and/or in groups (if needed) to provide an extended briefing on the review process and what is expected of the HEI in preparing for an institutional review. The DHR will also hold workshops for HEIs on institutional reviews, particularly on preparing a self-evaluation.

The designated Review Director for each review will advise the HEI nominated contact person throughout the duration of the review about the review process, but not about how the institution should manage its internal activities. Neither the Review Director nor anyone else in the BQA may give advice that would amount to 'consulting' for the HEI. To do so would compromise the independence and integrity of the review process.

2. The Institutional Review Process

2.1 Selection and Appointment of the Review Panel

An expert Review Panel will be appointed for each institutional review. The Panel will have three to five members. One member will be appointed to chair the Panel.

Panel members will be drawn from the DHR's register of experts. The register comprises local, regional, and international experts on higher education and/or quality assurance relevant to higher education who have substantial experience of university reviews and/or who have been trained in the tools and techniques of institutional reviews.

Care will be taken to ensure an appropriate balance of expertise on each Panel that is relevant to the nature of the institution being reviewed. The DHR will provide the HEI with the list of proposed Panel members. The HEI is asked to comment on Panel members who should not be appointed because of a potential conflict of interest, but the HEI cannot advise on its preferred membership.

Panel members will be required to sign a declaration that they will keep confidential all information received in the course of a review, in accordance with the BQA policy. They will need to declare formally any matters that could pose a conflict of interest in their serving as a Panel member. If the BQA agrees that a matter of conflict exists, the Panel member will be replaced. The HEI will be informed of the final composition of the Panel and provided with brief biographical details.

All communications between a HEI and the Review Panel are through the assigned Review Director by the DHR. HEIs are not permitted to contact any Panel member directly.

2.2 Undertaking the Self-Evaluation

Each institutional review will be based on a critical self-evaluation by the institution. Such a self-evaluation not only enables the institution to supply the information required but has the potential to lead to improvements. This emphasis on meaningful self-evaluation has several merits, including:

- Recognition of the institution's autonomy and responsibility
- Recognition of the diversity of HEIs
- Initiation and/or maintenance of a process of critical self-development
- Production of information, some of which may not normally be evident.

There is no single model for self-evaluation but the experience of many HEIs internationally reveals some key features of good self-evaluation, which may be useful for institutions in the Kingdom of Bahrain. These features are:

- One senior person with good experience in quality assurance is responsible for the entire process.
- An internal committee or steering group is established to plan the process and to guide the institution's critical reflection.
- The self-evaluation process is not limited to collecting evidence and data. Sufficient time should be allocated for analysis and critical reflection, as well as time to identify areas of strength and areas that require more attention and improvements.
- The self-evaluation process is well planned; the time frame, participants in the process, and the necessary resources must be determined.
- The self-evaluation process starts by examining the review indicators and considering what types of evidence are appropriate and/or available. Evidence is what supports the claims made by institutions.
- The method used for collecting information from academic and administrative units is clearly outlined. In some institutions, academic and administrative units conduct their own self-evaluation, which then contributes to the overall self-evaluation. Alternatively, a small team visits each unit to discuss and collect information.
- The purpose of the self-evaluation must be carefully explained to academic and administrative staff, as staff may be anxious about how information will be used. It should be emphasised that the primary aim is to help the institution enhance its performance.
- Consideration should be given to involving students in the process.
- Once an area for improvement has been identified, the HEI should not be tempted to implement a solution immediately. The self-evaluations usually reveal many areas for improvement, and it is better not to change everything at once. The HEI should develop a plan to implement changes gradually.

2.3 The Self-Evaluation Report

The self-evaluation process provides the information from which the HEI writes its SER, which is the main formal document submitted by the institution to the DHR. It is expected that there should be a broad understanding of, and commitment to, the self-evaluation process within the institution.

The most important feature of the self-evaluation process is honesty and accuracy. The SER should provide a genuine account of the extent to which the institution meets the review standards and indicators. This gives the Review Panel confidence that the HEI is capable of effective self-reflection. An accurate SER also demonstrates that the institution is focused on internal quality improvement, not merely on compliance with external requirements. Conversely, an account that falsely claims the institution is fully meeting a particular indicator when it clearly is not, suggests to the Review Panel that the institution has neither a good understanding of the review standards and indicators nor academic integrity.

The institutional review process is evidence-based. HEIs must not simply copy words from an indicator and claim they meet the expectations listed under the indicator. The SER should clearly describe the situation at the institution and the evidence to show that each of the applicable indicator's expectations is being met. HEIs are encouraged to keep descriptions as brief as possible, and to use diagrams and flowcharts where appropriate.

The SER should be written in English and submitted with the SM electronically to the BQA by the specified date, with an accompanying cover letter from the President/Chief Executive (P/CE) of the HEI addressed to DHR/BQA, certifying that the SER has been prepared after a process of thorough self-evaluation and that each statement in the report is factually accurate.

2.3.1 The Main Parts of the Report

The SER should contain a title page, list of figures, list of tables, and list of abbreviations in addition to the institution's profile information specified in Appendix A.

It starts with an introduction to the institution undertaking the self-evaluation which should include basic information about the institution: when established; mission; parent or partner institutions; level and types of degrees awarded; and how the self-evaluation was undertaken.

The part which includes the review standards and indicators is the most important part in the SER. It should provide an accurate evidence-based account of the ways in which the expectations listed under all the applicable indicators are met. This part should also identify the areas of strength and any areas where the HEI recognises that improvements are needed.

The SER appendices should include a list of SM indexed as specified in Appendix B.

2.3.2 Supporting Material

The SM should be provided in English. Where documents and minutes of meetings are available only in Arabic, the institution needs to provide an English summary of the SM's content. If the SM is provided in portable document format (PDF), the file should be searchable. Moreover, the file should not be protected in such a way that it is not possible to search this entire file.

2.3.3 Confidentiality and Privacy of Information

The BQA and the Review Panel will treat the SER and SM as confidential, in accordance with BQA policy. Nonetheless, any confidential SM, such as commercial-in-confidence documents, should also be clearly labelled by the HEI as 'confidential'.

It is possible that the Panel may wish to see certain documents that an institution would regard as 'confidential'. Access to these documents would be negotiated with the

institution's P/CE or the nominated contact person. The Review Panel would usually view these documents on site.

The Panel may ask to see details of students' records but would expect the institution to provide these by student number, not by name, to protect individuals' privacy. The Panel will not seek to view or ask to see the personnel record of any individual.

2.4 The Portfolio Meeting

2.4.1 Arrangements

Once the SER and SM are submitted electronically to the DHR, the Review Panel members are notified and given access to these documents. Panel members are required to undertake individual desktop analysis of these documents and include their initial findings in a preliminary report.

Approximately four to five weeks before the site visit, the Review Panel in coordination with the Review Director will hold a virtual meeting to:

- Discuss the SER and SM in detail
- Decide which information or additional evidence is needed in advance of, and which at, the site visit
- Decide whether information and evidence will be sought from partner institutions and how this will be obtained.

Following the Panel meeting, a provisional site visit schedule and the list of additional information and evidence required by the Panel are sent to the institution for discussion at the preparatory meeting undertaken by the Review Director and the Senior Quality Specialist. Appendix C provides a sample site visit schedule.

2.4.2 Sampling and Triangulation of Evidence

A Review Panel's work depends on well-chosen sampling to gain the maximum information from the provided evidence. The selection of samples occurs at two levels.

The first level arises from the Panel's analysis of the SER, during which particular areas may be identified as, for example, significant or problematic, and therefore selected for further investigation. This process is sometimes called 'scoping'. The Panel may also choose to track some key issues across or through the institution. This process is called 'Tracking' or 'Trailing'.

At the second level, the Panel agrees on the documentary or oral evidence (interviews) it needs to sample within these areas, taking account of the need to triangulate evidence. A full document trail may be sought, or only selected documents examined, depending on the range of issues to be explored.

The Panel also seeks to triangulate evidence, especially through the site visit. Triangulation is the technique of investigating a topic by considering information from

different sources. For example, the Panel may discuss selected policies and their implementation with senior management, with other staff and with students to see if the various opinions and experiences of the policy and its workings are consistent. Where conflicting information is received from different sources, the Panel must decide how to investigate further the topic, so it can reach a final view.

2.5 The Preparatory Meeting(s)

Approximately three to four weeks before the site visit, there is a preparatory meeting with the institution. This is conducted by the Review Director, accompanied by the Quality Specialist assigned to this review. The purposes of the preparatory meeting are:

- To discuss the provisional site visit schedule — check the appropriateness of selections and combinations of interviewees and ensure that the schedule for the site visit meets the Panel’s needs while being feasible for the institution
- To discuss the further information required by the Panel — this might typically include questions of clarification (to which there are usually relatively short answers) and requests for further documents
- To check whether there are any sensitive issues of which the Panel should be aware of
- To review the logistics for the site visit (including viewing the proposed meeting rooms; see section 2.6.2).

2.6 The Site Visit

The site visit is the culmination of the review process through which the Review Panel reaches its findings. The main purposes of the site visit are to allow the Panel to verify the claims made in the SER, to triangulate evidence and to acquire further insight into the institution’s operation through first-hand investigation. The visit also allows the Panel to obtain further evidence and to interpret and judge the evidence it has been given.

The length of the site visit is typically four days, including a tour of the main campus. The site visit schedule is sufficiently flexible to give time for the provision of further information or for the Panel to arrange further interviews with specific people if needed. Interviewees can reasonably be expected to be asked about anything within the scope of the review of which they have experience.

Review Panel members are not permitted to accept gifts from institutions. This also applies to BQA and HEC representatives that will attend the site visit. External observers may also attend the site visit in line with BQA policy and procedures.

2.6.1 Panel Preparations and Discussions

The day before the formal interviews start, the Review Director and the Senior Quality Specialist meet with the Panel to prepare for the site visit. This meeting aims at:

- Providing the Panel with a face-to-face briefing on the Bahraini context for the institutional reviews, and giving them the opportunity to ask about relevant issues and facts
- Discussing the additional material received since the Portfolio meeting
- Reviewing arrangements for the site visit and the requirements for professional conduct by the Panel
- Planning the interview sessions in detail, especially those for the first day.

During the site visit, a Panel-only review session is held each day to review the site visit evidence and discuss the key points raised in the interview sessions. At the end of the day, the Panel meets to discuss the day's overall findings and plan for the next day's interviews. There is a longer Panel-only meeting on the final day of the visit, to discuss findings before the end of the visit. It is important to reach consensus, so that the review report reflects the opinion of the whole Panel, not just individual members.

2.6.2 Higher Education Institution Preparations

Hosting the site visit requires good organisation by the HEI. In the first place, the institution's community needs to be informed about what is happening, although only a small proportion of staff and students will be interviewed.

Staff and students should be told that the site visit is not a forum for hearing individual complaints or grievances and that interview sessions will be a formal process. Institutions are strongly advised not to 'coach' staff or students about answers to questions. Also, institutions often ask each group of interviewees about their experience immediately after their interview with the Review Panel. This 'debriefing' is normal, but it is not appropriate for a debriefing meeting to ask interviewees to divulge their or their colleagues' specific responses to panel questions, as these responses are provided in confidence.

In addition, the logistics of the visit must be planned. The Panel will require a large, private room for several days. There must also be additional rooms for the parallel interview sessions. Moreover, interviewees will need a waiting area. These requirements will be discussed with the institution at the preparatory visit. The institution is expected to respect the privacy and confidentiality of the interviews and Panel discussions.

2.6.3 Interview Sessions

The site visit includes:

- A tour of the campus and facilities
- A tour to other external facilities used by the institution to deliver its programmes
- Interviews with individuals
- Interviews with small groups
- Interviews with large groups, such as students and alumni

- Flexible/call-back sessions (see section 2.6.4) and *ad hoc* sessions (see section 2.6.5)
- Panel-only meetings

Interviews are held in confidence and no comments in the review report will be attributed to any individual. Staff members are interviewed separately from their supervisors to ensure they can express their views freely.

During the site visit, the Review Panel mostly work together but may split up especially for meetings with larger groups. The interview sessions are formal but friendly. The interview sessions will be conducted in English for the most part, although other arrangements (including interviews in Arabic) may be required.

The Review Panel will be briefly introduced but there is no time in group interviews to introduce and greet all interviewees. Each interviewee should be provided with a large name card to ensure the Panel knows the name and role of each person.

After the Panel Chairperson opens the session, Panel members will then ask questions to one or more of the interviewees. Once the Panel has heard enough information, they move to the next question. Interviewees often feel a little frustrated at the conclusion of a review interview session, as they may feel they have not been able to talk about their specific area of interest or are not sure why the Panel asked a particular question. Interviewees can also be concerned that they have somehow given ‘the wrong answer’. The institution helps manage these feelings by encouraging interviewees to respond openly and honestly and by reassuring interviewees that the Panel is collecting information from many different sources, so the words of one specific individual do not carry undue weight.

At the end of the site visit, the Panel holds a brief ‘exit meeting’ with the P/CE of the institution, and any other persons the P/CE wants present. At this meeting, the Panel Chairperson provides short oral feedback indicating in general terms the flavour of the Panel’s observations and conclusions. At this exit meeting, the P/CE can make some comments about the institution’s experience of the review process, but the Panel will not discuss its findings beyond the oral feedback.

2.6.4 Flexible/Call-back Sessions

The Panel may also decide to utilise the ‘flexible/call-back session’, which is a period set aside in the site visit schedule to meet individual staff members and seek a response to issues that have arisen during the site visit. Each individual staff is allocated a short (typically 10-minute) session with the Panel to clarify specific issues and this session is normally at the end of the site visit.

2.6.5 Ad hoc Interviews

Ad hoc interviews are conducted with staff and students from the institution, independent of the institution’s influence. To achieve this, during the site visit, Panel members will tour the campus and seek to speak with students and staff randomly. The

institution should ensure that its staff and students are informed about the review site visit and the *ad hoc* interviews. The following rules apply to these *ad hoc* interviews:

- The Panel member will introduce him/herself to the interviewee, the purpose of the interview, and request his/her permission to conduct the interview
- Interviews should be conducted in confidence and the duration of each interview should not exceed 10 minutes
- Panel members will not intrude on teaching sessions
- *Ad hoc* interviews may be conducted in staff offices and in common areas such as the library, the cafeteria and public meeting rooms
- Findings of *ad hoc* interviews need to be triangulated in order for them to be used in the review.

2.7 Preparation of the Review Report

A review report will be prepared for each reviewed institution. The report will be written in English. It will be structured according to the review standards and their corresponding indicators, and it will set out the Review Panel's overall findings and its judgements about each of the review indicators and the institution as a whole. These judgements are arrived at through careful consideration of the evidence provided.

The review report does not comment on individual people, it contains only statements that can be substantiated. The review report will also comment on areas of good practice and matters for improvement. Significant good practices will be highlighted as '**commendations**', while the most important matters for improvement will be presented as '**recommendations**'.

A **commendation** refers to demonstrated good practice that goes beyond the expectations contained in an indicator. Simply meeting the indicator or a particular element within an indicator is not enough for the HEI to earn a commendation. Not all favourable comments in a review report are significant enough to be counted as commendations.

Recommendations tell an institution what improvements are needed. Institutions are free to determine how to bring about these improvements.

The review report is drafted by the Panel members. Several drafts are usually required to ensure complete accuracy and balance in findings and consistency in judgements. The final draft, once prepared, is sent to the Review Director for comments. Once the comments are addressed by the Panel, the review report becomes a report of the BQA.

2.8 Factual Accuracy and Appeals

When the DHR Academic Committee approves the institutional review report, it becomes a 'definitive draft'. This draft will be sent to the HEI so that it can identify any errors of fact in it and comment on emphasis or expression. This is not an opportunity for the HEI to revise the report, to enter into a dialogue with the BQA about the content

of the review, or to provide new evidence. For comments other than the correction of typographical errors, it is helpful if the institution provides, for each of its comments: a precise reference to the relevant text in the report; an explanation of the point at issue; the background reasoning or evidence to support the comment (i.e., reference to the previously submitted evidence, not new evidence), and (where appropriate) a suggested re-wording.

The institution's comments (other than the correction of typographical errors) will be sent to the Review Panel members of the relevant HEI, who will convey, in writing, their reply in this regard. The DHR will study both the HEI comments and the Panel's reply and send formal feedback on the submitted comments to the institution. This process will be in accordance with BQA procedures.

The institution may submit a Stage 1 Appeal within five working days from receiving the definitive draft of the review report, through the BQA online appeal form (available on BQA website) and supported by relevant evidence. The institution will be notified in writing that their appeal has been received and has been accepted or otherwise.

The ground of this appeal should be based on the lack of adherence to the published framework/handbook which led to unfair processes and/or conduct. On investigation, the appeal could then amend judgements if this is applicable.

If Stage 1 Appeal is accepted, the institution must pay the service charge, within five working days and submit the receipt to BQA to start the service. The institution will receive a formal letter indicating the result of the appeal within 20 working days of BQA's receipt of the service charge of the Stage-1 Appeal.

The institution is eligible for a Stage-2 Appeal, if it is dissatisfied with the decision of the Stage-1 Appeal. The Stage-2 Appeal should be submitted through the online appeal form within five working days of receiving the Stage-1 Appeal decision. A formal written receipt of the appeal will be acknowledged and sent to the institution.

If Stage 2 Appeal is accepted, the institution must pay the service charge, within 5 working days and submit the receipt to BQA to start the service. The institution will be informed through a formal letter of the outcome of the Stage-2 Appeal within 30 working days of BQA's receipt of the service charge of the Stage-2 Appeal.

2.9 The Extension Visit

In the cases where the overall judgement is 'Partially Compliant with the General Framework Standards', the institution will receive a list of recommendations that will be extracted from the standards that are 'Partially Met' by the institution. After receiving the recommendations, the institution will need to submit a progress report and evidence showing how these recommendations have been addressed.

After the submission of the progress report and evidence, the institution will be subject to an extension visit based on which the final judgement will be either 'Compliant with the General Framework Standards', or 'Not Compliant with the General Framework Standards'. The institutional review report will be a composite of

the results of the findings of the original site visit and the findings of the extension visit.

2.10 Publication of the Review Report

The final review report is sent to the Board of the BQA for approval, after which it is submitted to the Cabinet of Ministers for endorsement and then is published on the BQA's website.

The HEI will be advised when a review report has been approved for publishing and the expected date of public release. This allows the institution to inform senior staff and its governing body and to prepare any public comment it wishes to make on the report or its findings.

Each review report belongs to the BQA, not to the expert Panel or its members. The Panel acts on behalf of the BQA, and Panel members are not allowed to make public comments on the report or the review process and findings.

2.11 Institutional Accreditation and Interim Visits

All HEIs that have received a 'Compliant with the General Framework Standards' Judgement are required to fill in the institutional accreditation form and to submit it to the HEC within one month after the publication of the review report. The approved and published institutional review report is then considered by the HEC's Academic Accreditation Committee as one of the main sources of input for granting the institutional accreditation, in line with the HEC regulations and procedures.

Within 18 months of receiving the institutional accreditation, accredited HEIs are required to submit to the HEC a progress report and evidence showing how the recommendations related to institutional review and HEC regulations have been addressed.

Accredited institutions will be subject to at least one interim visit during the institutional accreditation period. These visits will be organised by the HEC and carried out by a joint HEC-BQA team. The main purpose of interim visits is to monitor the progress made by accredited HEIs with respect to the recommendations listed in their institutional review reports, to ensure full compliance with the General Framework of Higher Education Institutional Review's standards and to investigate any related complaints made against the accredited HEIs.

Based on the outcome of the interim visit(s), the joint HEC-BQA team may recommend the suspension or the withdrawal of the accreditation by the HEC in non-compliance cases.

3. Appendices

3.1 Appendix A: Institution Profile

INSTITUTION PROFILE

Institution Name				
Year of Establishment				
Location				
License/ Decree Number				
External Affiliations/ Partnerships/Accreditation(s)				
Institutional Listing Status on the National Qualifications Framework				
Names of Colleges/Faculty/School				
Number of Undergraduate & Postgraduate Programmes				
Programmes' Placement/ Alignment Status on the National Qualifications Framework				
Number of Enrolled Current Students				
Number of Graduates since Inception				
Number of Academic Staff				
Number of Administrative Staff				
Numbers of Students in Undergraduate Programmes per College/Faculty/School				
College/Faculty/School	Gender		Nationality	
	Male	Female	Bahraini	Non-Bahraini
1.				
2.				
3.				
Numbers of students in Postgraduate Programmes per College/Faculty/School				

College/Faculty/School	Gender		Nationality	
	Male	Female	Bahraini	Non-Bahraini
1.				
2.				
3.				
Numbers of Graduating Students in the Last Five Years per College/Faculty/School				
College/Faculty/School	Undergraduate Programmes		Postgraduate Programmes	
	Male	Female	Male	Female
1.				
2.				
3.				
Number of Academic Staff per College/Faculty/School				
College/Faculty/School	Gender		Nationality	
	Male	Female	Bahraini	Non-Bahraini
1.				
2.				
3.				
Numbers of Administrative Staff				
Academic and Administrative Departments/ Units	Gender		Nationality	
	Male	Female	Bahraini	Non-Bahraini
1. Academic Departments				
2. Administrative Departments				

3.2 Appendix B: Supporting Material²

Standard	Indicator	Required Evidence
Governance and Management	SM1 Vision, Mission, and Values	A) Approach SM1.1 Documents displaying the institution's vision, mission and values SM1.2 Policies, procedures or guidelines related to development and revision of vision, mission and values B) Deployment SM1.3 Evidence of the formal approval of the institution's vision, mission and values (e.g., university council resolutions) C) Review & Improvement SM1.4 Evidence of the revision of vision, mission & values in consultation with internal and external stakeholders (e.g., surveys, minutes of meetings, etc.)
	SM2 Strategic and Operational Planning	A) Approach SM2.1 The current strategic plan SM2.2 Sample of operational plans and the related action plans from different academic and administrative entities SM2.3 Risk management documents (e.g., policies, procedures, register, action plans) B) Deployment SM2.4 Evidence of annual monitoring and evaluation of the progress made in achieving the targets of operational plans (e.g., minutes of meetings) C) Review & Improvement SM2.5 Evidence of the revision of the last strategic plan in consultation with internal and external stakeholders (e.g., surveys, minutes of meetings, etc.) SM2.6 A sample of performance indicators' achievement reports on the institutional level SM2.7 A sample of performance indicators' achievement reports from different academic and administrative entities SM2.8 Examples of actions taken based on the results of the performance indicators at the institution level
	SM3 Government and Management Practices	A) Approach SM3.1 The terms of reference of the governing body SM3.2 Policies and procedures related to appointment, induction and evaluation of the governance body SM3.3 Policies and procedures related to the appointment of senior managerial positions

² The institution's SM list should be guided by Appendix B, which might differ based on the nature and arrangements within each institution.

		<p>SM3.4 Procedures related to scheduling and conducting meetings at the different levels in the institution</p> <p>SM3.5 Procedures related to financial planning and allocation of resources</p> <p>B) Deployment</p> <p>SM3.6 The composition of the governing body (e.g., the members board of trustee, their CVs, appointment decisions, etc.)</p> <p>SM3.7 Senior managerial positions' appointment decisions and CVs</p> <p>SM3.8 Evidence of the evaluations of the members of the governing body and senior managerial positions</p> <p>SM3.9 Evidence of approved delegations of authority for financial and managerial decisions</p> <p>SM3.10 Evidence related to planning and allocation of financial resources (e.g., approved annual budgets, minutes of meetings of the related councils and committees)</p> <p>SM3.11 Evidence related to scrutiny and approval of published materials</p> <p>C) Review & Improvement</p> <p>SM3.12 Minutes of meetings/ decisions related to maintaining and improving academic standards for face-to-face, online and blended education</p> <p>SM3.13 Evidence related to internal and external financial audits (e.g., audit reports)</p>
	SM4 Organisational Structure	<p>A) Approach</p> <p>SM4.1 The latest approved organisational structure of the institution by the governing body</p> <p>SM4.2 Terms of reference of the different councils and committees</p> <p>SM4.3 Job descriptions of the different managerial posts</p> <p>SM4.4 Mechanisms used for the circulation of decisions</p> <p>B) Deployment</p> <p>SM4.5 Evidence showing stakeholder's participation in decision making, including students (e.g., committee compositions, sample of minutes of meetings)</p> <p>C) Review & Improvement</p> <p>SM4.6 Examples of decisions/actions taken for quality improvements</p> <p>SM4.7 Committees' and councils' evaluations and action(s) taken to improve their performance</p>
	SM5 Partnership & Memoranda with other institution(s)	<p>A) Approach</p> <p>SM5.1 Policies and regulations that manage and guide partnerships and memoranda with other institutions</p> <p>SM5.2 Agreement(s) with other institutions</p> <p>B) Deployment</p>

	(Where applicable)	<p>SM5.3 Sample of student's testimonial</p> <p>SM5.4 Sample of documents related to programme/curriculum information provided to prospective and current students (e.g., programme documents, brochures, etc.)</p> <p>SM5.5 Mechanisms used to monitor the implementation of partnership agreements and memoranda of understanding with other institutions</p> <p>C) Review & Improvement</p> <p>SM5.6 Mechanisms used to revise and improve partnership agreements and memoranda with other institutions</p>
Human Resources Management	SM6 Human Resources	<p>A) Approach</p> <p>SM6.1 Human resources management strategy and its associated operational plans</p> <p>SM6.2 All policies and procedures related to recruitment, induction, equality and diversity, handling legal issues, promotion and financial incentives, disciplinary actions, complaints, and grievance of academic and non-academic staff</p> <p>B) Deployment</p> <p>SM6.3 Evidence of the implementation of the human resources policies and procedures including, recording and monitoring complaints, and grievances of academic and non-academic staff</p> <p>SM6.4 Lists of the full- and part-time academic and non-academic staff for the last three years showing their position and affiliation</p> <p>C) Review & Improvement</p> <p>SM6.5 Evidence of a regular use of exit and staff surveys for quality improvements (e.g., sample of filled surveys (names should be deleted or crossed out), meeting minutes, examples of changes/actions taken based on the analysis of these surveys, etc.)</p>
	SM7 Staff Development	<p>A) Approach</p> <p>SM7.1 Policies and procedures related to staff annual evaluations and professional development</p> <p>B) Deployment</p> <p>SM7.2 Evidence of the implementation of staff performance management and professional development plans (e.g., sample of filled appraisal forms (names should be deleted or crossed out), lists of annual professional development opportunities offered to academic and non-academic staff for the last three years, etc.)</p> <p>C) Review & Improvement</p> <p>SM7.3 Evidence demonstrating the effectiveness of staff development opportunities (e.g., sample of gained qualifications/ professional certificates by academic and non-academic staff, evaluation surveys of the conducted training workshops, examples of</p>

		changes in the staff development plans based on the received feedback, etc.)
Quality Assurance and Enhancement	SM8 Quality Assurance System	<p>A) Approach</p> <p>SM8.1 Quality assurance manual, policies and procedures</p> <p>SM8.2 Organisational structure of the entity responsible for quality assurance at the institutional level, and the profile and job description of its staff</p> <p>SM8.3 Mechanisms used to disseminate policies, procedures and other information</p> <p>SM8.4 A list of student council/committees, list of members, terms of reference and minutes of meetings (from various academic departments within the institution)</p> <p>SM8.5 A sample of programme advisory boards, list of members, terms of reference and minutes of meetings (from various academic departments)</p> <p>SM8.6 Mechanisms used to implement improvement across the institution</p> <p>SM8.7 Mechanisms used to monitor compliance with HEC regulations</p> <p>B) Deployment</p> <p>SM8.8 Evidence of regular implementation of quality assurance processes (e.g., minutes of meetings of the relevant entities/committees, quality assurance audit reports, etc.)</p> <p>SM8.9 Evidence of regular monitoring of the institution's administrative and academic operations (e.g., minutes of meetings of the relevant committees, quality assurance audit reports, etc.)</p> <p>C) Review & Improvement</p> <p>SM8.10 Evidence of conducting periodic reviews of the institution's administrative and academic operations against clear and appropriate performance indicators</p> <p>SM8.11 All improvement/action plans associated with quality assurance audits and periodic reviews of performance against the specified indicators</p>
	SM9 Quality Enhancement	<p>A) Approach</p> <p>SM9.1 Benchmarking policy and procedures</p> <p>SM9.2 Mechanisms used to elicit stakeholders' feedback</p> <p>B) Deployment</p> <p>SM9.3 A sample of benchmarking reports at the institutional, college and programme levels covering different administrative (e.g., policies, procedures, facilities) and academic aspects (e.g., curriculum).</p> <p>SM9.4 A sample of employer surveys eliciting feedback about the quality of academic programmes, with their analysis reports (from various academic departments)</p>

		<p>SM9.5 A sample of alumni surveys eliciting feedback about the quality of academic programmes and the different services provided by the institution, with their analysis reports (from various academic departments)</p> <p>SM9.6 A sample of student surveys eliciting feedback about the quality of academic programmes and the different services provided by the institution, with their analysis reports (from various academic departments)</p> <p>SM9.7 A sample of faculty surveys eliciting their satisfaction levels, with their analysis reports (from various academic departments)</p> <p>SM9.8 Sample of graduate destinations and employability reports of different programmes (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM9.9 All improvement/action plans associated with the benchmarking reports submitted, with evidence of implementations of some of the improvements included in them</p> <p>SM9.10 All improvement/action plans associated with the surveys submitted, with evidence of implementations of some of the improvements included in them</p> <p>SM9.11 All improvement/action plans associated with graduate destinations and employability reports submitted, with evidence of implementations of some of the improvements included in them</p>
Infrastructure, Information and Communication Technology and Learning Resources	SM10 Infrastructure	<p>A) Approach</p> <p>SM10.1 Policies and procedures related to assets management, operation, maintenance and health & safety, including laboratory safety regulations</p> <p>SM10.2 Examination and invigilation regulations/arrangements relevant to face-to-face and online assessments</p> <p>B) Deployment</p> <p>SM10.3 Virtual tour video of all the institution's facilities</p> <p>SM10.4 Evidence of the compliance of the institution's premises and facilities with HEC regulations</p> <p>SM10.5 Registers of all HEI available physical infrastructure (classrooms, tutorial and study spaces, library, offices, laboratories, amenities, medical facilities and security services)</p> <p>SM10.6 A list of facilities and equipment for special needs students, staff and visitors</p> <p>SM10.7 A list of health & safety equipment on campus</p> <p>SM10.8 A list of emergency response team members and their qualifications</p>

		<p>SM10.9 A sample of security guards service contract</p> <p>SM10.10 A sample of maintenance plans, schedules, checklists, service reports, contracts, etc.</p> <p>SM10.11 A sample of health & safety plans</p> <p>SM10.12 Evidence of fire drill</p> <p>SM10.13 List of health & safety activities</p> <p>SM10.14 Evidence of health & safety training by civil defense</p> <p>SM10.15 Basic first aid lectures & certificates</p> <p>SM10.16 Evidence of regular maintenance and inspections of residential accommodations</p> <p>C) Review & Improvement</p> <p>SM10.17 All improvement/action plans associated with stakeholders' feedback on infrastructure, with evidence of implementations of some of the improvements included in them</p> <p>SM10.18 Action plans associated with the identified needs to modify or expand the institution's premises and/or facilities, if applicable</p>
	<p>SM11 Information and Communication Technology (ICT)</p>	<p>A) Approach</p> <p>SM11.1 ICT policies and procedures</p> <p>SM11.2 Policies and procedures related to the protection against copyright infringements of print and digital resources</p> <p>SM11.3 Policies and procedures related to disaster recovery and backup & restoration</p> <p>SM11.4 Policies and procedures related to the use of the institution's website and social media accounts</p> <p>B) Deployment</p> <p>SM11.5 A sample of ICT operation plans</p> <p>SM11.6 Register(s) of ICT resources</p> <p>SM11.7 Maintenance/repair and replacement plan for ICT resources</p> <p>SM11.8 Profile and job description of ICT staff</p> <p>SM11.9 A sample of activity report of ICT induction for students and faculty</p> <p>C) Review & Improvement</p> <p>SM11.10 A sample of ICT usage reports and related action plans</p> <p>SM11.11 A sample of ICT audit reports</p> <p>SM11.12 A sample of ICT risk management plans</p> <p>SM11.13 A sample of improvement/action plans associated with stakeholders' feedback on ICT, with evidence of implementations of some of the improvements included in them</p>
	<p>SM12 Learning Resources</p>	<p>A) Approach</p> <p>SM12.1 Policies and procedures related to learning resources and library</p> <p>B) Deployment</p> <p>SM12.2 A demonstration of the learning management system platforms (demo session or screenshots)</p>

		<p>SM12.3 A sample of book requisitions/ purchase requests</p> <p>SM12.4 A list of library print and online resources and e-databases</p> <p>SM12.5 A sample of activity reports of library induction for students & faculty</p> <p>SM12.6 Profile and job descriptions of library staff</p> <p>C) Review & Improvement</p> <p>SM12.7 A sample of library utilisation reports and related action plans</p> <p>SM12.8 A sample of improvement/action plans associated with stakeholders' feedback on learning resources, with evidence of implementations of some of the improvements included in them</p>
Management of Academic Affairs	SM13 Academic Management and Integrity	<p>A) Approach</p> <p>SM13.1 A sample of the operational plans of the institution's colleges and academic departments</p> <p>SM13.2 Organisational chart for each college within the institution</p> <p>SM13.3 Job descriptions for academic faculty and leadership positions</p> <p>SM13.4 Academic regulations/bylaws</p> <p>SM13.5 Ethical and legal regulations</p> <p>SM13.6 Student disciplinary regulations/code of conduct</p> <p>SM13.7 Staff code of conduct/disciplinary policy</p> <p>SM13.8 Student attendance policy/regulations</p> <p>SM13.9 Student academic appeals' regulations</p> <p>SM13.10 Student complaints/grievance procedures</p> <p>B) Deployment</p> <p>SM13.11 Detailed faculty members' profile for every college within the institution organised in a separate table per college (including year of employment, area of specialty, the highest qualification achieved, position, academic rank, full time/part time, courses they teach, number of publications, administrative duties if any)</p> <p>SM13.12 Evidence of mentoring and support provided to junior academic staff</p> <p>SM13.13 A sample of plagiarism detection software similarity reports (from various academic departments)</p> <p>SM13.14 A sample of plagiarism cases with actions taken on them (from various academic departments)</p> <p>SM13.15 A sample of student misconduct cases with actions taken on them (from various academic departments)</p> <p>SM13.16 A sample of staff misconduct cases with actions taken on them (from various academic departments)</p>

		<p>SM13.17 A sample of academic appeal cases and decisions made regarding them (from various academic departments)</p> <p>SM13.18 A sample of student complaints/grievance cases and how they were handled (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM13.19 Evidence demonstrating the mechanisms used to evaluate the achievement of academic goals (e.g., performance indicators achievement reports for the last three academic years)</p> <p>SM13.20 Evidence demonstrating the mechanisms used to evaluate the effectiveness of support and mentoring provided to junior academic staff</p> <p>SM13.21 Evidence of regular revision and improvement of the policies and procedures relevant to the management of academic affairs within the institution</p>
	<p>SM14 Design and Approval of New Academic Programmes</p>	<p>A) Approach</p> <p>SM14.1 Policies and procedures related to the proposal, design and approval of new programmes</p> <p>B) Deployment</p> <p>SM14.2 A sample of labour market studies and decisions made in new academic programmes based on their results (from various academic departments)</p> <p>SM14.3 A sample of minutes of meetings from different committees and/or councils discussing and/or approving new academic programmes (from various academic departments)</p> <p>SM14.4 Evidence demonstrating the compliance of newly developed academic programmes with NQF requirements</p> <p>SM14.5 A sample of benchmarking reports of new academic programmes against relevant professional standards and reference points, with the changes made in the programme based on the benchmarking results (from various academic departments)</p> <p>SM14.6 A sample of programme specifications of newly developed academic programmes from the last three years (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM14.7 Evidence related to monitoring and evaluation of the process of designing and approving new academic programmes, including any internal and/or external stakeholders surveys conducted to elicit feedback on the process (with their survey analysis reports and associated improvement plans)</p>
	<p>SM15 Academic Programme Reviews</p>	<p>A) Approach</p> <p>SM15.1 Annual review policy and procedures of academic programmes</p>

		<p>SM15.2 Periodic review policy and procedures of academic programmes</p> <p>B) Deployment</p> <p>SM15.3 A sample of annual review reports of academic programmes (from the last three years from various academic departments)</p> <p>SM15.4 A sample of periodic review reports of academic programmes from the last three years (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM15.5 All improvement/action plans associated with the submitted annual review reports, with evidence of implementations of some of the improvements included in them (from various academic departments)</p> <p>SM15.6 All improvement/action plans associated with the submitted periodic review reports, with evidence of implementations of some of the improvements included in them (from various academic departments)</p> <p>SM15.7 All committee/council minutes of meetings relevant to discussions/approvals of changes/decisions made in the academic programmes based on the annual and periodic review reports submitted as evidence</p>
	<p>SM16 Admissions and Certification</p>	<p>A) Approach</p> <p>SM16.1 Student recruitment policy and procedure</p> <p>SM16.2 Admission criteria for the different programme levels and specializations</p> <p>SM16.3 Procedures for authenticating transcripts and certificates submitted for admission to the HEI</p> <p>SM16.4 University admissions committee terms of reference and a sample of its meeting minutes</p> <p>SM16.5 Admissions department organisational structure</p> <p>SM16.6 Transfer of credit policy and procedures</p> <p>SM16.7 Regulations for the recognition of prior learning</p> <p>SM16.8 Policy and procedures related to appeals against admission decisions</p> <p>SM16.9 Collection and refund of student fees policy and procedures</p> <p>SM16.10 Student foundation/orientation arrangements</p> <p>SM16.11 Programme exit and transfer procedures</p> <p>SM16.12 Student records policy and procedure</p> <p>SM16.13 Graduation policy and procedures</p> <p>SM16.14 Certificate issuance policy and procedure</p> <p>B) Deployment</p>

		<p>SM16.15 Evidence showing that all application enquiries are responded to in a timely and appropriate manner</p> <p>SM16.16 A sample of filled admission tools (e.g., interview sheets, entrance examinations, if any, etc.) from the last three years</p> <p>SM16.17 A sample of completed credit transfer forms and decisions made regarding the credit transfer requests from the last three years (from various academic departments)</p> <p>SM16.18 A sample of completed recognition of prior Learning cases and decisions made regarding them from the last three years (from various academic departments), if applicable</p> <p>SM16.19 A sample of cases of appeal against admissions decisions, with the decisions taken on them, from the last three years</p> <p>SM16.20 A sample of cases of refund of student fees from the last three years</p> <p>SM16.21 Study plans/specifications of all student foundation/orientation programmes</p> <p>SM16.22 Outcomes' achievement analysis reports with related enrolment decisions for all student foundation programmes for the last three years</p> <p>SM16.23 A sample of cases of students exiting one programme and transferring to another from the last three years, with evidence of how they were handled (from various academic departments)</p> <p>SM16.24 A sample of wall certificates from the last three years (from various academic departments)</p> <p>SM16.25 A sample of students' transcripts from the last three years (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM16.26 A sample of committee/council minutes of meetings relevant to discussions/approvals of revisions made to the admission criteria based on regular reviews of them (both reviews of the admission criteria at the institutional level and reviews of admission criteria at the programme/college level)</p>
Teaching, Learning and Assessment	SM17 Management of Teaching and Learning	<p>A) Approach</p> <p>SM17.1 Institutional/college teaching and learning policies and procedures</p> <p>SM17.2 E-learning policy and procedures</p> <p>SM17.3 Rules and regulations related to internships</p> <p>SM17.4 Policies and procedures related to learning agreements with external training providers, if applicable</p> <p>SM17.5 Undergraduate prospectus</p> <p>SM17.6 Post Graduate prospectus</p>

		<p>SM17.7 Mechanisms used to ensure that the course syllabi are consistently updated</p> <p>SM17.8 Mechanisms used to monitor the quality of teaching and learning (including e-learning)</p> <p>B) Deployment</p> <p>SM17.9 A sample of academic programme specifications (from various academic departments)</p> <p>SM17.10 A sample of course specifications (from various academic departments)</p> <p>SM17.11 A sample of course files of different programmes (from various academic departments)</p> <p>SM17.12 A sample of reports on students' progression in different programmes (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM17.13 Course file audit reports (from various academic departments)</p> <p>SM17.14 Examples of actions taken based on stakeholders' feedback to improve the student learning experiences inside and outside classrooms, internships, etc. (from various academic departments)</p> <p>SM17.15 Examples of actions taken based on student progression reports (from various academic departments)</p>
	<p>SM18 Graduate Attributes and Learning Outcomes</p>	<p>A) Approach</p> <p>SM18.1 Policies and procedures related to the formulation, revision and approval of graduate attributes at the institutional level</p> <p>SM18.2 Policies and procedures related to the formulation, revision and approval of learning outcomes at the programme and course levels</p> <p>SM18.3 Mechanism used for identifying employability skills and embedding them in graduate attributes and learning outcomes</p> <p>SM18.4 Mechanisms used to ensure that graduate attributes and learning outcomes are achieved across all programmes</p> <p>B) Deployment</p> <p>SM18.5 A Sample of mapping programme learning outcomes against (1) graduate attributes, (2) employability skills and (4) professional standards (from various academic departments)</p> <p>SM18.6 A sample of mapping course learning outcomes with programme learning outcomes (from various academic departments)</p> <p>SM18.7 A Sample of mapping panel and confirmation panel reports (from various academic departments)</p> <p>SM18.8 A Sample of programme learning outcomes achievement matrix (from various academic departments)</p> <p>C) Review & Improvement</p>

		SM18.9 Examples of revision and improvement of programme learning outcomes based on graduates' destination tracking reports and feedback received from internal and external stakeholders (from various academic departments)
	SM19 Assessment and Moderation	<p>A) Approach</p> <p>SM19.1 Institutional/college assessment policies and procedures</p> <p>SM19.2 Pre and post internal moderation policy and procedures</p> <p>SM19.3 Selection and appointment mechanism of internal moderators</p> <p>SM19.4 Pre and post external moderation policy and procedures</p> <p>SM19.5 Selection and appointment mechanism of external moderators</p> <p>SM19.6 Grade appeal policy and procedures</p> <p>SM19.7 Policies and procedures related to the security and retention of assessment documents and records and back-up mechanisms</p> <p>B) Deployment</p> <p>SM19.8 A sample of formative assessment in different courses/programmes (from various academic departments)</p> <p>SM19.9 A sample of summative assessment in different courses/programmes (from various academic departments)</p> <p>SM19.10 A sample of students' marked assessment in different courses/programmes (quizzes, mid-term examinations, final examinations, assignments, projects, etc.), including those conducted online (from various academic departments)</p> <p>SM19.11 A sample of students marked assessment with instructors' feedback in different courses/programmes (from various academic departments)</p> <p>SM19.12 A Sample of pre and post internal moderation reports/filled forms in different courses/programmes (from various academic departments)</p> <p>SM19.13 A Sample of pre and post external moderation reports/filled forms in different courses/programmes (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM19.14 Examples of implemented changes in assessment papers and student grades based on pre and post internal moderators' feedback (from various academic departments)</p> <p>SM19.15 Examples of implemented changes in assessment papers and student grades based on pre</p>

		and post external moderators' feedback (from various academic departments)
Research and Postgraduate Studies	SM20 Research Management and Support	<p>A) Approach</p> <p>SM20.1 Institutional/ college/ department research strategy, plan and priorities</p> <p>SM20.2 Institutional/ college/ department operational research plans</p> <p>SM20.3 Research policies and procedures related to research ethics, research grants, academic promotion, research incentives etc.</p> <p>SM20.4 The institution's research catalogues</p> <p>SM20.5 A list of the institution's research journals, if applicable</p> <p>SM20.6 Organisational structure of the entity responsible for monitoring research at the institutional level, and the profile and job description of its staff</p> <p>B) Deployment</p> <p>SM20.7 Evidence of compliance with HEC research regulations</p> <p>SM20.8 A sample of applications for research grants, conference participation and academic promotion</p> <p>SM20.9 A list of research publications in the last three years</p> <p>SM20.10 A list of active research projects of faculty members</p> <p>SM20.11 A list of research conferences organised by the institution in the last three years, if applicable</p> <p>SM20.12 A list of research capacity building activities for academic staff in the last three years</p> <p>C) Review & Improvement</p> <p>SM20.13 A sample of research performance indicators' achievement reports on the institutional and college levels</p> <p>SM20.14 Examples of actions taken based on the level of achievements of the research performance indicators at the institution, college and department levels</p> <p>SM20.15 Examples of actions taken to enhance the research and scholarly activities impact on teaching and student learning</p>
	SM21 Postgraduate Studies (where applicable)	<p>A) Approach</p> <p>SM21.1 All, policies, procedures and regulations related to postgraduate programmes, including research supervision, assessment and student support</p> <p>B) Deployment</p> <p>SM21.2 A sample of postgraduate degrees' programme specifications (from various academic departments)</p>

		<p>SM21.3 A sample of postgraduate degrees' course specifications, including research methods courses (from various academic departments)</p> <p>SM21.4 A sample of postgraduate degrees' thesis/project (from various academic departments)</p> <p>SM21.5 A list of thesis supervisors/internal examiners organised in a separate table per college (including academic rank, years of experience, area of specialty, full time/part time)</p> <p>SM21.6 A list of thesis/project external examiners organised in a separate table per college (including academic rank, years of experience, area of specialty, position/affiliation)</p> <p>SM21.7 Evidence of compliance with HEC regulations related to postgraduate programmes</p> <p>SM21.8 A list of published research papers by postgraduate students organised in a separate table per college for the last three years, if applicable</p> <p>SM21.9 A list of facilities and resources available for postgraduate students</p> <p>SM21.10 A sample of programme learning outcomes achievement matrix (from various postgraduate programmes within the institution)</p> <p>C) Review & Improvement</p> <p>SM21.11 A sample of thesis/project progress monitoring reports</p> <p>SM21.12 A sample of cohort analysis from different postgraduate programmes within the institution</p> <p>SM21.13 Example of actions taken based on cohort analysis and the feedback received from internal and external stakeholders to improve the postgraduate programmes' learning outcomes, supervision, resources, assessment, etc.</p>
Community Engagement	SM22 Community Engagement	<p>A) Approach</p> <p>SM22.1 Institutional/ college/ department community engagement strategy, plan and priorities</p> <p>SM22.2 Institutional /college/ department operational community engagement plans</p> <p>SM22.3 All policies, procedures and regulations related to community engagement</p> <p>SM22.4 Organisational structure of the entity responsible for monitoring community engagement at the institutional level, and the profile and job descriptions of its staff</p> <p>B) Deployment</p> <p>SM22.5 Partnerships and memoranda of understanding with businesses and other HEIs related to community engagement activities</p> <p>SM22.6 A list of community engagement activities conducted by academic staff for the last three years</p>

		<p>SM22.7 A list of community engagement activities conducted by students and alumni for the last three years</p> <p>C) Review & Improvement</p> <p>SM22.8 A sample of community engagement performance indicators' achievement reports on the institutional and college levels</p> <p>SM22.9 Examples of actions taken based on the level of achievements of the community engagement performance indicators at the institution, college and department levels</p> <p>SM22.10 Examples of actions taken to enhance the impact of community engagement activities on research, teaching and student learning</p>
Student Support Services	SM23 Student Academic Support	<p>A) Approach</p> <p>SM23.1 Student induction policy and procedures</p> <p>SM23.2 Academic advising policy and procedures</p> <p>SM23.3 Career advising policy and procedures</p> <p>SM23.4 Identification and support of students with special needs policy and procedures</p> <p>SM23.5 Identification and support of students at risk of academic failure policy and procedures</p> <p>SM23.6 Organisational structure of the entity responsible for students' career support at the institutional level, and the profile and job descriptions of its staff</p> <p>B) Deployment</p> <p>SM23.7 Briefing material available for prospective students in relation to the offered programmes and career paths</p> <p>SM23.8 A sample of students' induction programme and material</p> <p>SM23.9 A sample of filled academic advising reports/ minutes of meetings (from various academic departments)</p> <p>SM23.10 A list of special need students organised in a separate table per college (including student number, gender, year of study, types of support provided)</p> <p>SM23.11 A sample of at-risk students' tracking reports/ statistics in different programmes (from various academic departments)</p> <p>SM23.12 A list of academic activities that enhance the students' learning experience such as industry visits, guest speakers, competitions or contests etc. for the last three years (from various academic departments)</p> <p>C) Review & Improvement</p> <p>SM23.13 Examples of actions taken based on internal and external stakeholders' feedback to improve the academic support and career advising services (from various academic departments)</p>

	<p>SM24 Student Non-Academic Support</p>	<p>A) Approach SM24.1 Briefing material available to prospective local and international students about the facilities and services provided (e.g., residential accommodations, transportations, scholarships, financial support, etc.) SM24.2 Organisational structure of the entities responsible for non-academic support services at the institutional level, such as counseling, health, recreational and financial services as well as the profile and job descriptions of staff responsible for these services B) Deployment SM24.3 A list of student recruitment agents, if applicable SM24.4 A list of emergency contact numbers available to students SM24.5 A list of student and alumni clubs and societies SM24.6 Reports and statistics related to the percentage of students benefiting from the different non-academic support services including counseling, health and financial supports for the last three years SM24.7 Reports and statistics related to the percentage of students participating in extracurricular activities for the last three years SM24.8 Reports, and statistics related to alumni participation in academic and extracurricular activities for the last three years C) Review & Improvement SM24.9 Evidence of monitoring and evaluation of recruitment agents (surveys, evaluation forms, reports etc.) SM24.10 Examples of actions taken based on internal and external stakeholders' feedback to improve the non-academic support services</p>
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3.3 Appendix C: Site Visit Schedule (Sample)

This is an outline of a typical four-day site visit schedule of the institutional review.

DAY 0		
Session	Time	Activity/Interviewee(s)
0.1	9:00 -11:00	Panel meet at BQA premises and further discuss the BQA's review framework within this review context
0.2	11:00-13:00	For each standard, panel discuss main initial findings, areas for further investigation in the light of the extra evidence provided
	13:00-14:00	Lunch Break
0.3	14:00-16:00	Panel discuss and finalize interview sessions' question sheets
DAY 1		
1.1	9:00-9:15	Courtesy Meeting
1.2	9:15-10:00	President/Chief Executive of the institution (Standard 1)
1.3	10:00-10:30	Members of the governing body (Standard 1)
1.4	10:30-11:30	Review (Panel only)
1.5	11:30-12:15	Vice Presidents (Standards 1,2&5)
1.6	12:15-13:00	Deans of Faculties or Colleges (Standards 1,2&5)
	13:00-14:00	Lunch Break
1.7	14.00-16:00	Campus Tour
1.8	16:00-16:30	End of Day Discussion (Panel only)
DAY 2		
2.1	9:00-9:45	Staff responsible for human resources and professional development (Standard 2)
2.2	9:45-10:30	Staff responsible for quality assurance and accreditation (Standard 3)
2.3	10:30-11:30	Review (Panel only)
2.4	11:30-12:15	Staff responsible for the library, ICT and facilities (Standard 4)
2.5	12:15-13:00	Heads of Academic Departments (Parallel sessions may be conducted)

		(Standards 5&6)
	13:00-14:00	Lunch Break
2.6	14:00-14:45	Academic Staff (Parallel sessions may be conducted) (Standards 5&6)
2.7	14:45-15:30	Alumni (2-3 Parallel sessions) (Standards 4,5,6&9)
2.8	15:30-16:30	End of day discussion (Panel only)
DAY 3		
3.1	9:00-9:45	Staff responsible for admission, student records and certification (Standard 5)
3.2	9:45-10:30	Academic Staff (Parallel sessions may be conducted) (Standards 7,8&9)
3.3	10:30-11:30	Review (Panel only)
3.4	11:30-12:15	Staff responsible for student support (Standard 9)
3.5	12:15-13:00	Students (2-3 Parallel sessions) (Standards 4,5,6&9)
	13:00-14:00	Lunch Break
3.6	14:00-14:45	External Reviewers, Examiners & Moderators (Standards 5&6)
3.7	14.45-15:30	Advisory Boards' Members & Employers (Standards 5&6)
3.8	15:30-16:30	End of Day Discussion (Panel only)
Day 4		
4.1	9:00-9:45	Staff responsible for research (Standard 7)
4.2	9:45-10:30	Staff responsible for community engagement (Standard 8)
4.3	10:30-12:30	Review (Panel only)
4.4	12:30-13:00	Call Back session, if needed
	13:00-14:00	Lunch Break
4.5	14:00-15:00	Review (Panel only)
4.6	15:00-15:30	Exit Meeting