

Quality Manual

**AUTHORED BY:
DEANSHIP OF QUALITY
ASSURANCE
AND DEVELOPMENT**



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Acronyms

CLO:	Course Learning Outcomes
PLO:	Program Learning Outcomes
KPI:	Key Performance Indicators
PI:	Performance Indicators
QAC:	Quality Assurance Center
TLC:	Teaching and Learning Center
CSI:	Center for Statistics and Information
SPDC:	Strategic Planning and Development Center
EAAC:	Evaluation of Academic and Accreditation Center
DQAD:	Deanship of Quality Assurance and Development
DAR:	Deanship of Admission and Registration
DSA:	Deanship of Student Affairs
CL:	Central Library
CSCEC:	Community Service and Continuing Education Center
IAO:	International Affairs Office
RIC:	Research and Initiative Center
IQC:	Institutional Quality Committee
IEQC:	Institutional Executive Quality Committee
ICC:	Institutional Curriculum Committee

Foreword

This Quality Manual (QM) is one of the important elements of the internal PSU Quality Management System (QMS) which demonstrates a strong commitment to embedding the culture of quality and excellence in the institution's educational practices from the academic programs and their supporting services.

The PSU-QMS is in complete alignment with the National Quality Framework, ETEC-NCAAA, and international educational standards. The highest level of quality commitment is driven by the higher management in the form of direct involvement of the President and the Vice Presidents of the University in all quality assurance activities. It further reinforces PSU's excellence in quality education.

Moreover, this manual gives an overview of the Quality Assurance Management from the higher management and the mandated tasks and activities that support the academic programs' quality practices. Furthermore, the administrative offices provide quality services to support the function of the academic departments, and this all leads to the achievement of the vision of PSU.

All PSU stakeholders are encouraged to follow the contents of this Quality Manual to ensure that the PSU quality procedures and practices at all levels are well adapted in a systematic manner.

The DQAD team is here to help support and encourage feedback on the provisions contained within this manual. The satisfaction of all stakeholders is central to our continuous improvement processes.

Acknowledgment

The Quality Manual Core Committee would like to thank the Deanship of Admission Registration(DAR), Deanship of Student Affairs (DSA), Central Library (CL), Research & initiative Center (RIC), Community Service & Continuing Education (CSEC), International Affairs Office (IAO), Strategic Planning & Development Center (SPDC), Teaching and Learning Center (TLC), Institutional Curriculum Committee (ICC), Evaluation of Assessment and Accreditation Center (EAAC), Centre of Statistics and Information (CSI), Quality Assurance Center (QAC), who contributed to the success of the physical creation to completion of the first edition of the Quality Manual.

The Committee is immensely grateful to the Deanship of Quality Assurance Development (DQAD) centers who gave detailed and constructive comments on one or more chapters of the Quality Manual.

Last but not the least, the committee would like to acknowledge with gratitude the support and trust of the Dean of DQAD who kept us going to complete the first phase of the Quality Manual.

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Introduction

Quality Management Systems (QMS) in Higher Education has been developed for a number of years to improve professional standards. As one of PSU's goals and quality culture, PSU always looks for a management concept that would direct the collective efforts of all managers and employers toward satisfying stakeholders' expectations by continually improving activities. Therefore, the establishment of the PSU QMS is essential to provide a definition of the policies, systems, and procedures as a basis for its implementation and continuous improvement.

The PSU Quality Manual provides a snapshot of the structure of the university's Quality Management System (QMS), the interrelation of the academic and administrative processes that constitute the system, and the operational arrangements which support the quality assurance standards for teaching and learning and its support services at the University. PSU's QMS is based on the ETEC-NCAAA standards at the institutional and program level and is also well aligned with the international standards of Higher Education.

This Quality manual expresses PSU's commitment to quality and continuous improvement. It gives an outline of the key processes with references to policies and procedures that comprise PSU's QMS and provides a holistic and integrative view of the quality management of the university's academic and supporting service activities and practices.

The first section-I of the Quality Manual "Institutional Context & its Commitment to Quality" describes the structure and organization of the university and how it is managed.

This is followed by section-II "Quality Assurance in Academic Programs" which gives an overview of the quality assurance framework and the practices that are implemented at PSU.

Finally, the Quality Manual is concluded by the section-III "Quality Assurance in Supporting Services", which provides comprehensive information on the considered quality assurance measures in providing services by the various administrative offices.

Section – I
Institutional Context & its
Commitment to Quality

A. University Context

Prince Sultan University (PSU) is a non-profit institution established in Riyadh, Kingdom of Saudi Arabia. It was founded in 1999 by the Riyadh Philanthropic Society for Science under the auspices of HRH King Salman Bin Abdulaziz Al-Saud and licensed by the Ministry of Higher Education. The business community of Riyadh first developed the idea of founding the university and dedicating it to former HRH Prince Sultan bin Abdulaziz Al-Saud, to celebrate his homecoming after a successful medical treatment abroad. To express his support for this significant undertaking, HRH Prince Sultan congratulated the community and gave a generous donation to the Riyadh Philanthropic Society for Science, which paved the way for the establishment of Prince Sultan University. The rapid increase in the Saudi population, the rising demand for higher education, and the enormous pressure on public institutions to educate the growing numbers of young men and women also contributed to the establishment of PSU; the first private university in Saudi Arabia. This is the driving force of PSU's commitment to achieving its vision and mission statements with values associated with it to ensure quality education, scholarly works, and outreach are available to its stakeholders.

VISION

Prince Sultan University aspires to become the leading non-profit, private university in the Middle East region, providing a quality education equal to other reputable universities in the world.

MISSION

Prince Sultan University aims to provide the Middle East with quality education to the highest international standards. In its efforts towards successful and responsible life-long learning, PSU integrates modern technology, pedagogy, and human values for the advancement of scientific research, productivity, and leadership towards a more meaningful role in society.

PSU is committed to effective management of institutional resources to optimize its multiple roles as a catalyst for new learning opportunities, national and international partnerships, continuous studies, professional growth, community service, and diversity in educational horizons for the good of humanity.

VALUES

P – Proactive

(Academic and personal integrity; effective management operations; lifelong learning among students, faculty, staff, and the at large community; respect for individuals in the community)

S – Service

(high-quality service and efficiency; positive interpersonal relations among members of the community)

U – Upbeat

(The academic environment that nurtures excellence in learning, teaching, and research; professional development and personal growth among members of the community)

B. Graduate Attributes

1. Knowledgeable
2. Critical Thinkers
3. Leaders
4. Communicators & Team Players
5. Digital Natives
6. Socially Responsible & Ethical

Institutional Learning Outcomes (ILOs)

ILO 1 - Knowledgeable: Our graduates demonstrate a comprehensive understanding of their academic studies through general education and their areas of specialization.

ILO 2- Critical Thinkers: Our graduates are curious, reflective, and critical. Able to analyze the world to solve problems creatively using innovative solutions.

ILO 3 - Leaders: Our graduates display and promote lifelong learning and seek to contribute to society. They have integrity, are prepped with entrepreneurship skills, are open to ideas, and foster sustainable and accommodating practices.

ILO 4 - Communicators & Team Players: Our graduates articulate ideas clearly to others in both oral and written forms and know how to effectively work with others to accomplish a goal.

ILO 5 - Digital Natives: Our graduates develop digital literacy skills and demonstrate proficiency encompassing a wide range of technological tools and strategies that enhance their ability to solve problems and resiliency.

ILO 6 - Socially Responsible & Ethical: Our graduates act responsibly in personal and professional relationships by engaging in the intellectual life of the university and as a member of the community in an ethical manner that reflects high moral standards.

C. Organizational Structure

To achieve the vision and mission of the university, the chart below introduces the University's Organizational Structure, supporting the academic and administrative operations of PSU. Below is a list of the key councils and units involved in the implementation of the organizational structure at PSU:

PSU Board of Trustees

University Council

Scientific Council

College Councils

Department Councils

President and Vice-Presidents' Offices and their respective subordinate units

All job descriptions and duties corresponding with the various elements in the Organizational Chart are concisely articulated to facilitate effective management of PSU. Terms of reference for the various joint committees on the institutional and college levels are also in place. The units are designed to streamline the operation of the men's and women's campuses and demonstrate the distinctive, fully integrated, and unified nature of PSU as a higher education institution.

The full information regarding the [Organizational Structure](#) and [Institutional Committees](#) can be found in the [PSU Organizational Structure Handbook](#).

The university is led by the President who is assisted by three Vice Presidents namely:

1. Vice president of Academic Affairs (VPAA) responsible for all academic affairs. All colleges report to this office.
2. Vice president Campus for Women (VP-CW) is responsible for the women campus's administrative affairs.
3. Vice President of Administrative and Financial Affairs (VPAF) is responsible for administrative or supporting units and financial affairs of the entire university.

Institutional Commitment to Quality Improvement is shown by establishing four centers underneath the Deanship of Quality and Development, establishing the institutional level committees based on the 8 ETEC-NCAA standards to strengthen the Quality improvement processes at all levels within the academic and administrative units.

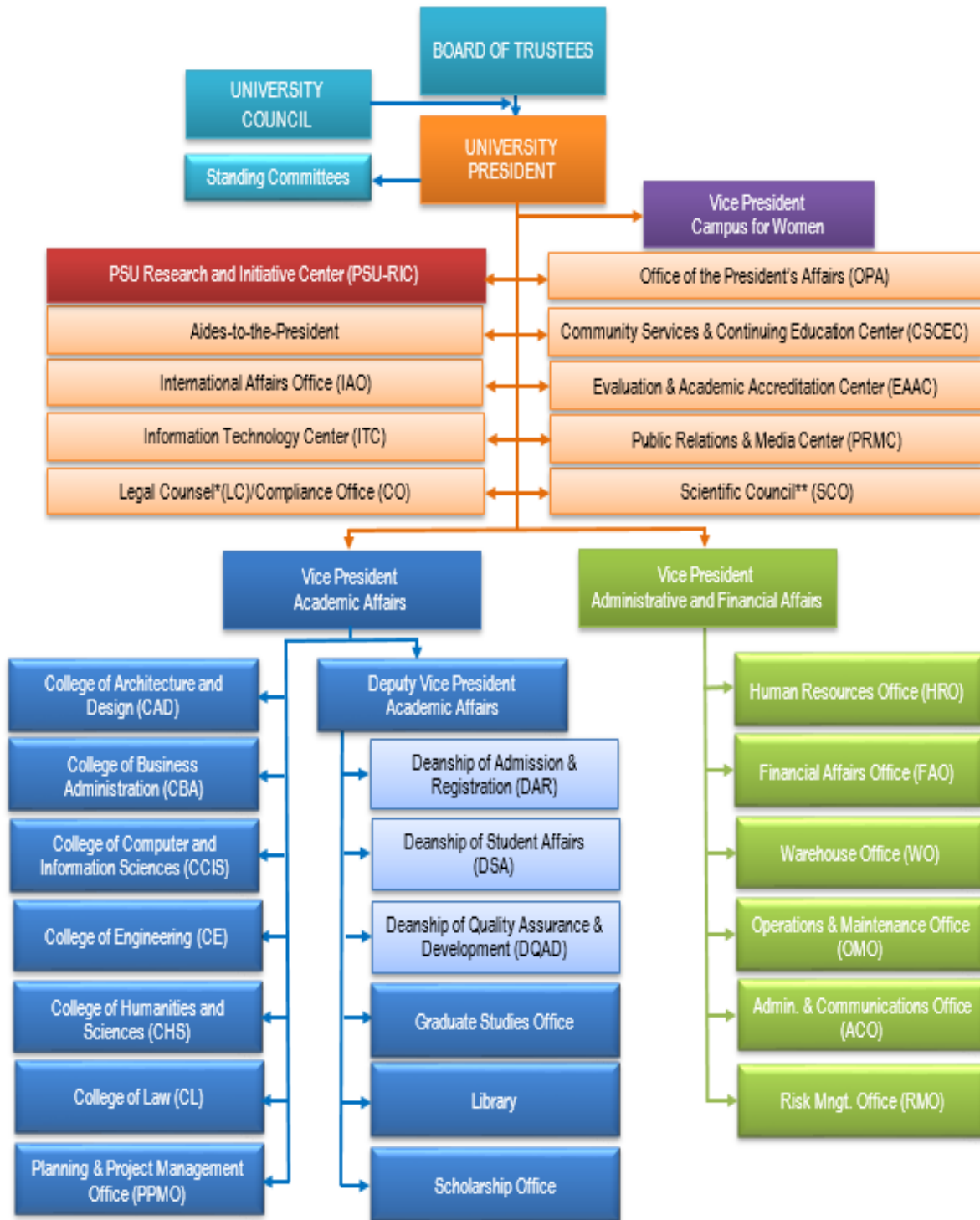


Figure 1: PSU Organizational Structure

D. Institutional Committees

Prince Sultan University always strives to maintain the quality standards in all its educational and management programs, services, systems, and operations aligned to the National Qualification Framework as well as the professional international education standards (e.g., AACSB, ABET, CIDA, NAAB). The full accreditation awarded to the institution and 13 of its programs attests to PSU's commitment and the quality of its quality assurance processes and practices. Such periodic assessments in all areas of organizational function provided feedback on quality performance. Based on this feedback, appropriate action plans have been prepared by the concerned administrative and academic offices for continuous improvement at both the institutional and program levels. This process has involved full commitment from top management down to every organizational unit within PSU with respect to conducting regular meetings facilitated by the EAAC & DQAD office to following up the recommendations given by the external reviewers and the action plans at the institutional and program level to further improve the quality in teaching and learning.

The highest level of quality commitment is driven by the higher management in the form of direct involvement of the President and the Vice Presidents of the University in all quality assurance activities.

The different institutional committees support the management of PSU, specifically on the following aspects:

implementation of the Strategic Plan

continuous improvement for quality assurance and accreditation

connecting the colleges and departments across the institution

Figure 2 below shows that all institutional committees are under the Institutional Executive Quality Committee. It highlights that all committees are mapped with:

1. [NCAAA Standards \(The new 8 NCAAA Standards\)](#)
2. [PSU's 3rd Strategic Plan themes \(with acronym EMPOWER\)](#)

All concerned colleges/departments/centers/offices and units are well represented.

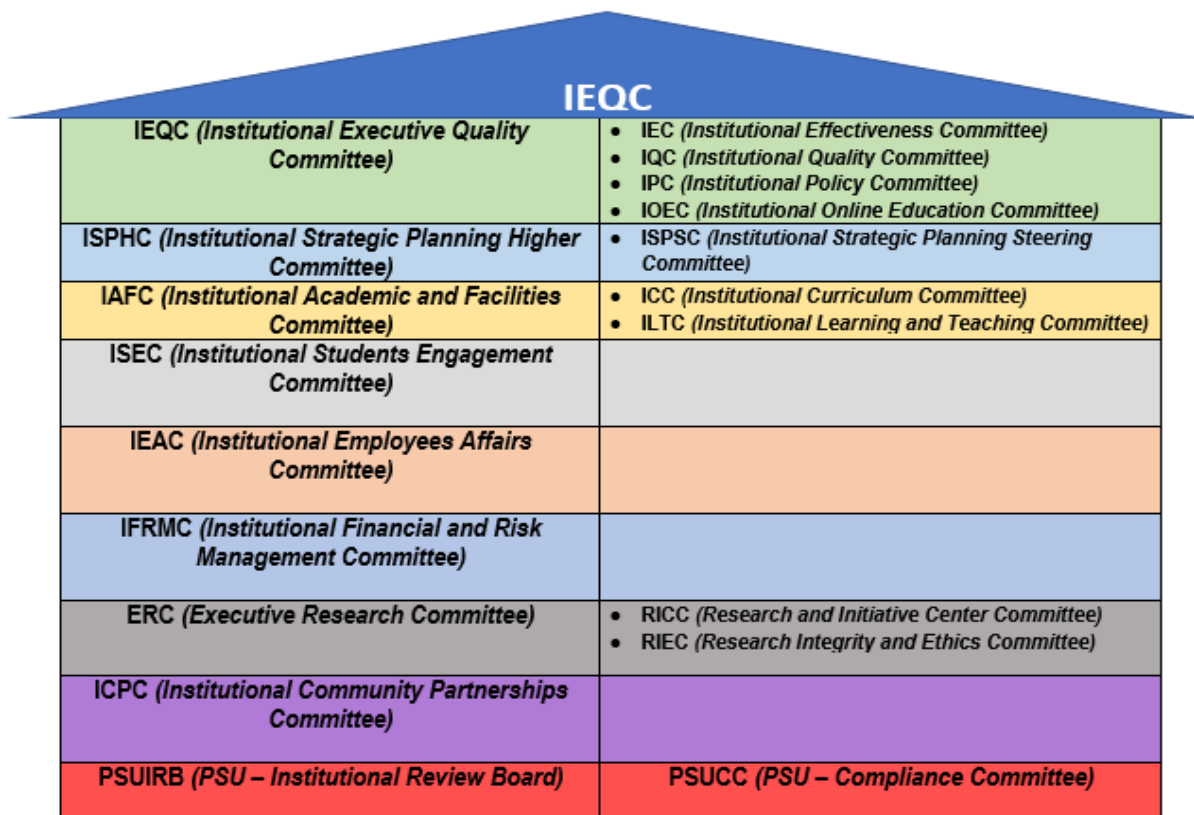


Figure 2: Institutional Committees

Figure 3 below shows the interrelationships among the institutional, college, and department-level committees. It also shows the communication flows and decision-making bodies among the three levels.

The institutional committees' chairs and all college deans are members of the Institutional Executive Quality Committee (IEQC). To ensure to disseminate the information down to their respective faculty members.

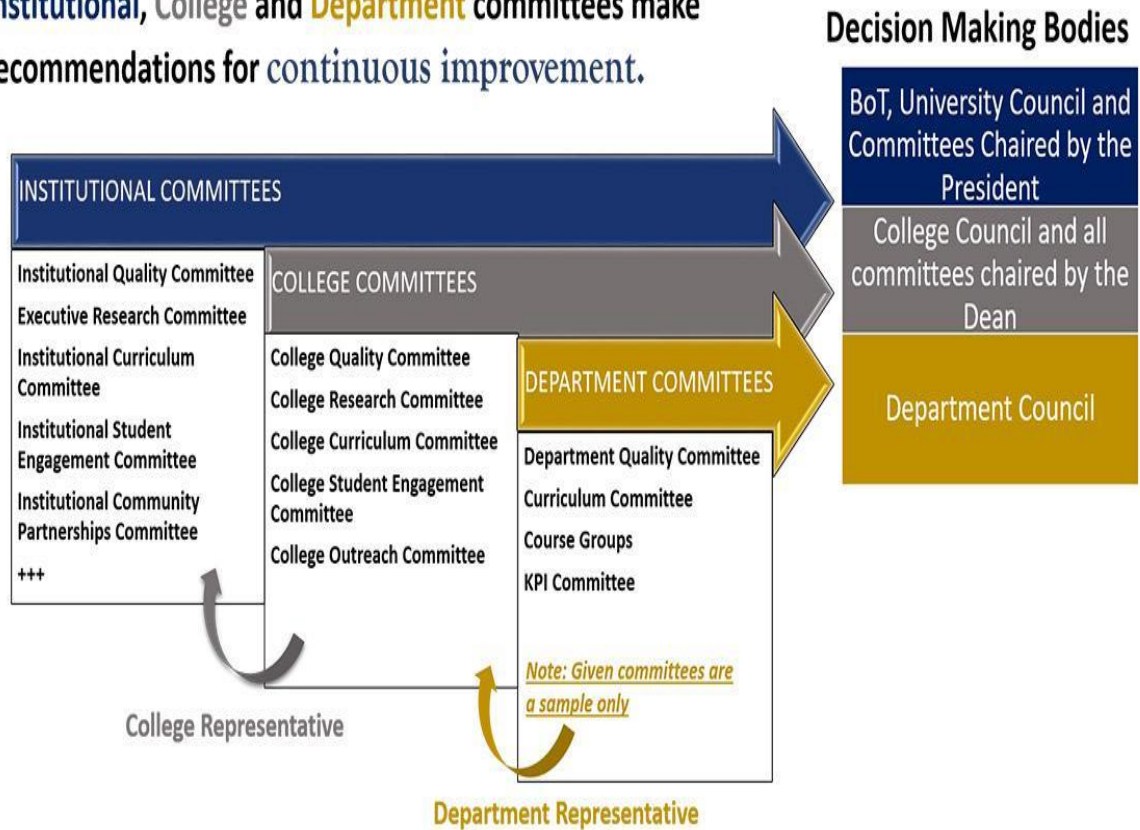
The six college-mandated committees support the institutional committees. The chairs of the college-level committees automatically become members of the institutional committees. For the other institutional committees, colleges are represented as well with their selected faculty members.

At the department level, the department heads have the discretion to form their committees based on the department's size.

The Deans/Vice Deans and Chairs/Associate Chairs (academic Directors/Associate Directors) coordinate with each other in assigning faculty members in the college and department level committees to ensure equal and fair assignments in the committee memberships.

Lastly, the Board of Trustees, University Council, and Committees chaired by the President are the bodies that can make decisions for the whole university. The College and Department Councils can make decisions that could only affect the college and department level operations based on existing institutional policies. The rest of the institutional, college, and department level committees can only make continuous improvement recommendations.

Institutional, College and Department committees make recommendations for continuous improvement.



- *Chairs of the Institutional Committees and College Deans are represented on the Institutional Executive Quality Committee*
- *Five college committees are mandatory*
- *The department heads have the discretion to form their committees based on the size of the department*

Figure 3: Interrelationships among the institutional, college, and department level committees

Table 1 lists the Committees and the respective ETEC_NCAAA Standards assigned to them to oversee.

Committee/Center	NCAAA Standards
Institutional Strategic Planning Higher/Steering Committee (ISPC)	Standard 1 – Standard 1 Mission, Vision and Strategic Planning
Institutional Executive Quality Committee (IEQC) 1. Institutional Quality Assurance Committee (IQAC) 2. Institutional Policy Committee (IPC) 3. Institutional Effectiveness Committee (IEC)	Standard 2 Governance, leadership, and Management
Institutional Academic and Facilities Committee (IAFC) 1. Institutional Learning and Teaching Committee (ILTC) 2. Institutional Curriculum Committee (ICC) Institutional Online Education Committee (IOEC)	Standard 3 – Teaching & Learning
Institutional Student Engagement Committee (ISAC)	Standard 4 – Students
Institutional Employee Affairs Committee (IEAC)	Standard 5- Faculty & Staff
Institutional Financial and Risk Management Committee (IFRMC)	Standard 6 – Institutional Resources
Executive Research Committee (ERC)	Standard 7 – Research & Innovation
Institutional Community Partnership Committee (ICPC)	Standard 8 – Community Partnerships
Institutional Financial Management Committee (IFMC)	Sub Standards: 2.6 – Internal Policies and Regulations 11.1 – Institutional Policies on Community Relationships

Table 1: Institutional Committees and the respective ETEC_NCAAA Standards assigned to them to oversee

E. Quality Assurance Management at PSU

The provision of quality education is an objective common to most universities throughout the world. Since the establishment of Prince Sultan University (PSU), assurance of quality in teaching and learning along with support services has been embedded in every activity or service provided at the unit or institutional level.

PSU management has developed a thorough and well-defined Quality Assurance Structure in alignment with the ETEC-National Qualification Framework and the 5-year PSU Strategic Plan for initiating, monitoring, and reviewing the processes and reporting them periodically for continuous improvement. PSU has adopted ETEC-NCAAA standards for quality in higher education as the choice to drive its quality assurance processes. In order for this goal to be implemented, all NCAAA instruments relevant to PSU's programs and administrative units are activated throughout the process. Experienced and dedicated members have been selected as the members of the Quality Assurance Committee at the Program, Department, College, and administrative level. Academic and Administrative unit leaders are either members of these teams or provide leadership and support thoroughly.

Strengthening the quality culture on a regular basis is the topmost priority at PSU. PSU Quality Assurance Management is structured into two divisions as shown in Figure 4..

Deanship of Quality Assurance and Administration (DQAD)

Evaluation and Academic Accreditation Center (EAAC)

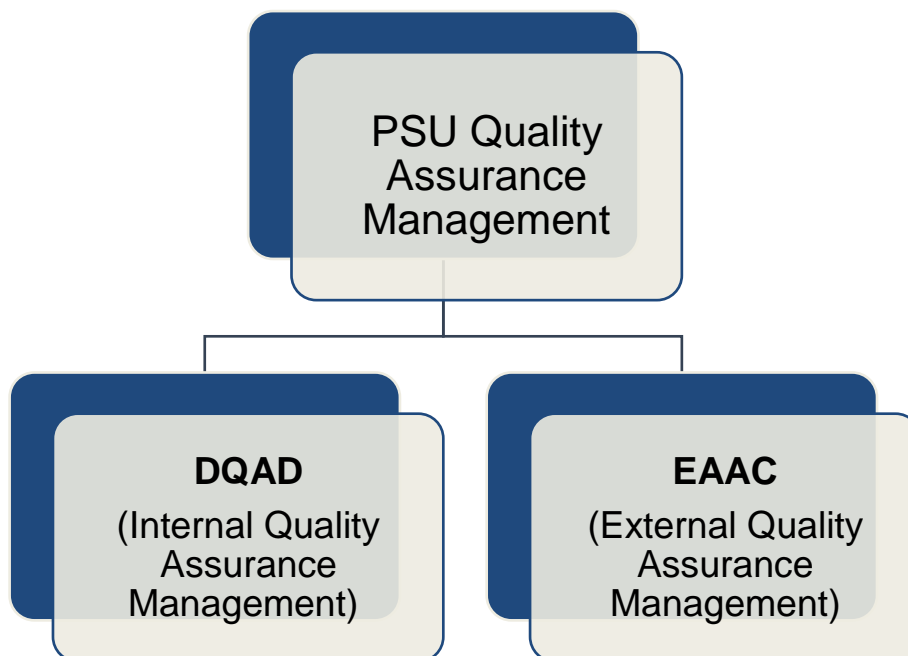


Figure 4: Quality Assurance Management @PSU

External Quality Assurance Management

The Evaluation & Academic Accreditation Center (EAAC) is responsible for the institutional effectiveness and facilitates the accreditation process at the program and institutional level.

The EAAC is responsible for coordination and guidance for the preparation of periodic self-studies for consideration within the institution and for use in periodic external reviews report directly to the President's office as shown in the organizational structure

The EAAC unit works in close coordination with DQAD centers, Colleges, and administrative units to ensure quality in all the work processes related to teaching and learning along with its support services, as depicted in Figure 5. Regular meetings are being conducted with the President for different Academic and Administrative units through EAAC to take quality initiatives for imparting high-quality education.

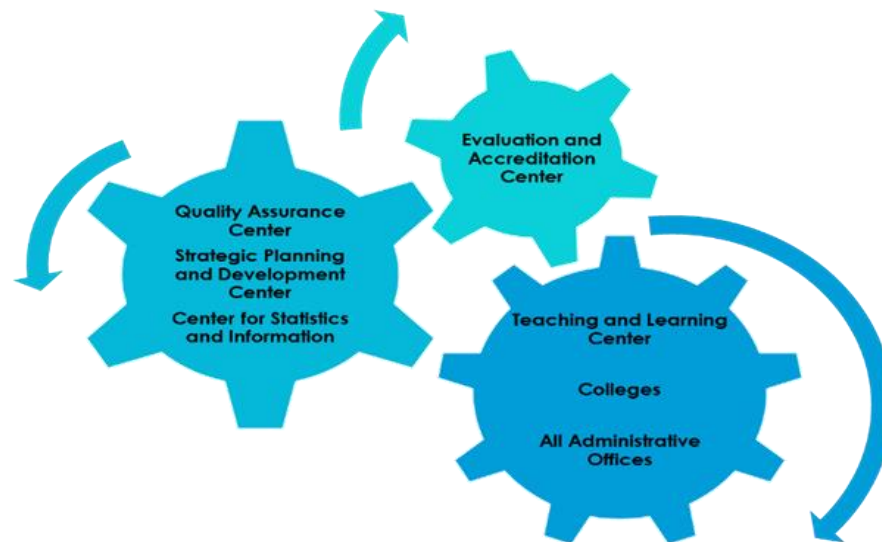


Figure 5: Coordination between the EAAC and DQAD Centers

Functions of EAAC

1. To liaise, share and disseminate information about standards of good practice with all organizational departments/units related to accreditation.
2. To revise and monitor self-assessment and evaluation processes including report requirements.
3. To coordinate and lead the preparation of periodic self-studies for consideration within the institution and for use in periodic external reviews.

4. To monitor institutional effectiveness and provide related support to the office of the President.
5. To liaise with national and international accreditation bodies.

For more details, refer to the [Terms of References of EAAC](#).

Internal Quality Assurance Management

Deanship of Quality Assurance and Development (DQAD) is responsible for the internal quality assurance management system.

The DQAD was established in pursuit of continuous transformation towards development and excellence in Prince Sultan University (PSU). PSU is aware of the urgent need and basic requirement to deal efficiently and effectively with the current era of cognitive variables, which brings with it more continuous and accelerated development, by devoting efforts and energies to develop the practices and activities of the university system with its inputs, operations, and outputs according to standard criteria in order to achieve quality, excellence, and quality in education and continuous improvement in performance to provide the best educational service and raise the quality of education.

The Deanship of Quality Assurance and Development oversees the academic and administrative quality assurance at both campuses of the University. The Deanship is responsible for the supervision and coordination of the development of the following: strategy management, quality management in teaching & learning and its support services, and statistics & information of the university as shown in Figure 6.

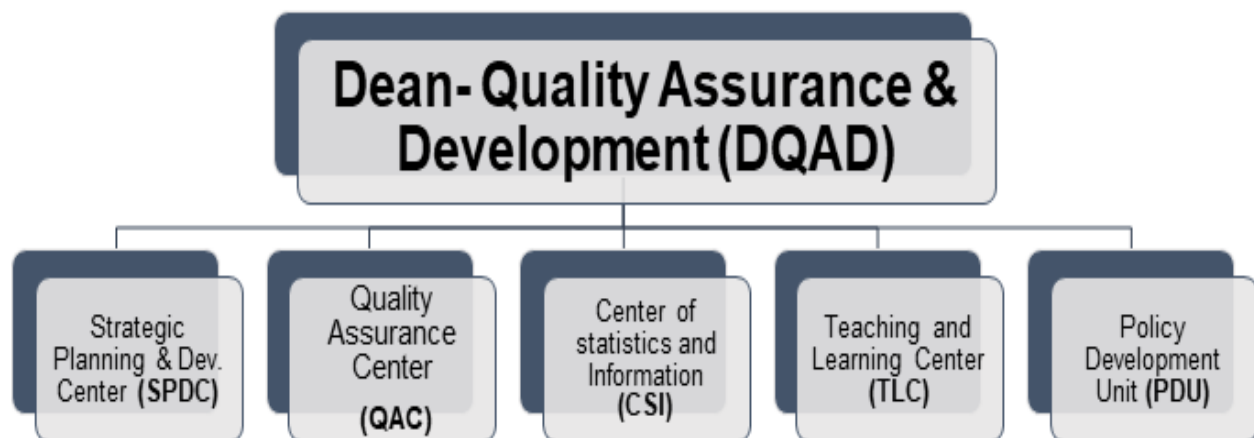


Figure 6: DQAD Organizational Structure

Quality Assurance Center (QAC)

The Quality Assurance Center is responsible for the quality assurance programs and activities of the University. The Center provides advice to Institutional management related to continuous improvement on institutional effectiveness based on the University's strategic plan. The Center also leads, and coordinates activities related to academic and administrative quality assurance.

[QAC - Terms of Reference](#)

Center for Statistics and Information - CSI

The Center for Statistics and Information provides leadership for institutional effectiveness and organizational effectiveness through statistics and information. CSI plays a major role in linking the results of all surveys of the university and providing information and analysis impacting students, human resources, strategic planning, policy formulation, and enrollment management. Also, convert these into Key Performance Indicators. It is responsible for monitoring faculty, staff, and student satisfaction surveys, and responsible for data analysis, preparation of standard reports, as well as the design, development, and implementation of an interactive data reporting system. Lastly, the Center provides relevant, timely, and accurate information to the higher management and faculty in support of the institutional and program accreditation, planning, budgeting, and decision-making process of the university.

[CSI -Term of Reference](#)

Strategic Planning and Development Center (SPDC)

The Center is part of the Deanship of Quality Assurance and Development (DQAD) and is responsible for the formulation, implementation, monitoring, and evaluation of the institutional Strategic plan of Prince Sultan University.

It collaborates with all academic & administrative leaders to support PSU's core mission and assist in building performance measurement and management capabilities. The office engages with the PSU community to advance the culture of strategic planning and continuous improvement.

[SPDC Terms of Reference](#)

Teaching & Learning Center

The Teaching and Learning Center provides leadership in promoting excellence in teaching and success in learning by providing faculty and staff with research on best practices, support for curriculum development and innovation, forums for collaboration, consulting services on pedagogy and technology, workshops, seminars, and other forms of professional development. TLC is responsible for coordinating the Steering Committee meetings with higher management and appointed members. TLC is responsible for communicating significant initiatives to all departments.

[TLC Terms of Reference](#)

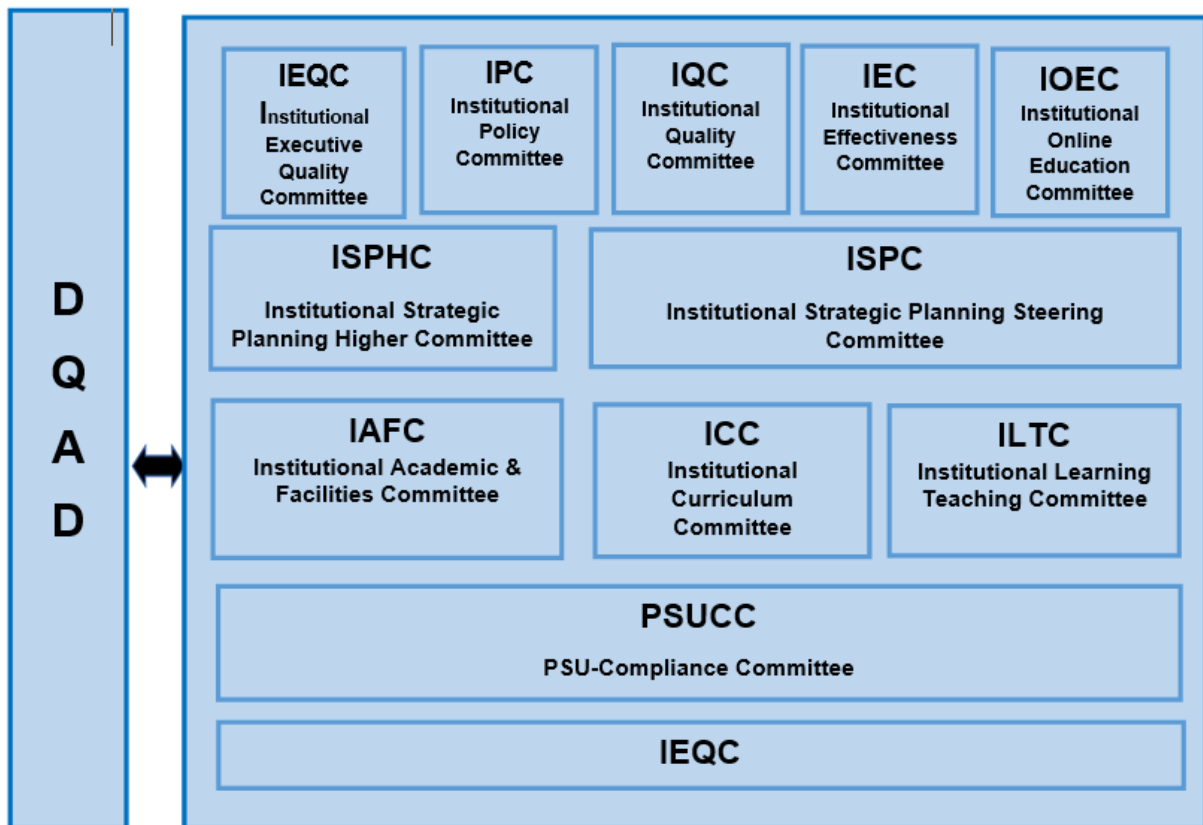


Figure 7: Interrelationships between the DQAD and the Institutional Committees

F. Quality Framework

The PSU quality framework shown in Figure 7 is based on the principle that quality cannot be achieved only by the academic units but the administrative office offering support services and facilities is equally important in achieving the high educational standards at PSU. The Quality Metrics identify the strengths and areas of improvement of the services and facilities provided by both academic and administrative units for continuous improvement and as a result, contribute to the mission of the University.

To ensure continuous quality improvement at PSU, the following quality assurance process cycle, shown in the Figure 8, is defined. Before elaborating the quality process, it is essential to highlight that the quality framework considers in its cycle inputs from the following up-to-down entities: 1) vision, mission, and values, 2) the 5-year strategic plan, 3) annual action plan, and 4) KPIs which are received from academic functions and administrative support.

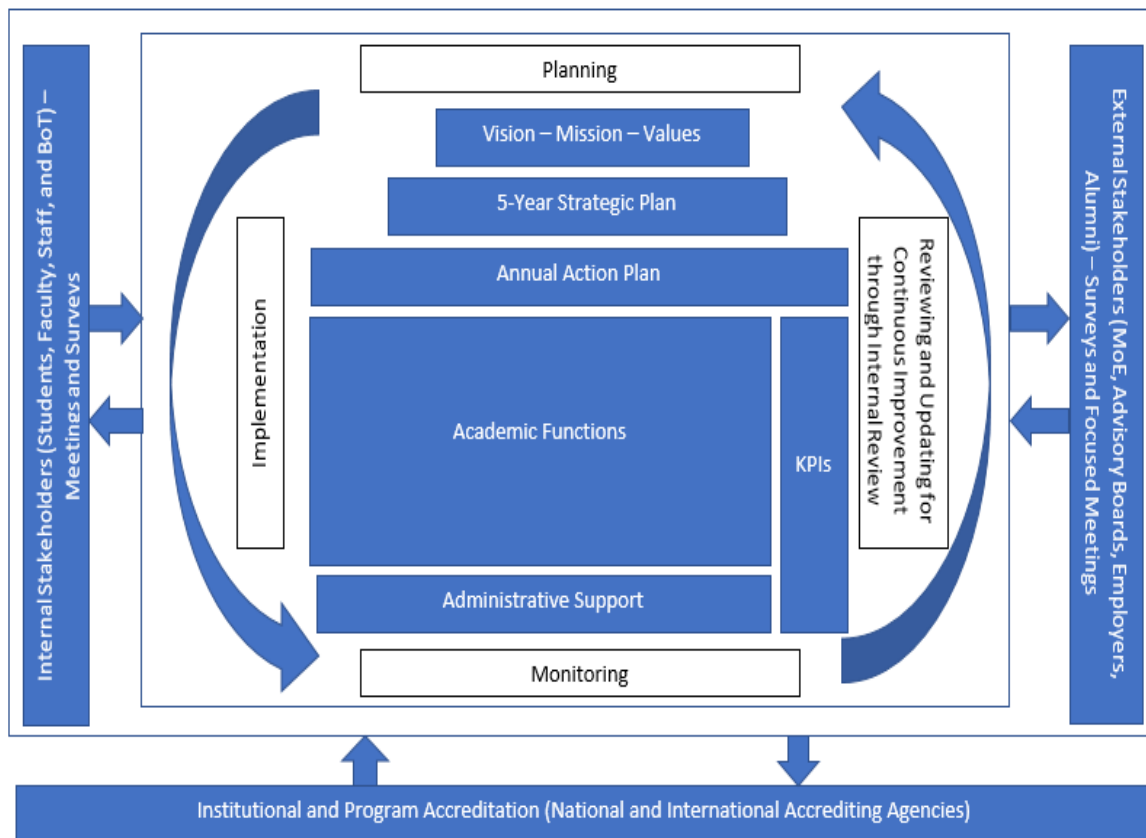


Figure 8: PSU Quality Framework

1. Develop an action plan for PSU aligned with the four entities mentioned above. This includes:
 - Define a set of actions to achieve the predefined goals and objectives.
 - Define an appropriate set of KPIs and targets for performance evaluation of the proposed plan.
 - Define timeframe for implementing the action plan.
 - Identify the beneficiaries.
 - Coordinate and discuss the plan and identify effective ways of implementing the plan.
2. Implement the action plan in coordination with various PSU units. This stage also includes seeking the opinions of internal stakeholders through meetings and surveys.
3. Monitor the action plan's achievement.
4. Review the performance using the defined KPIs and targets. Prepare annual achievement report and recommendations, and share it with the respective unit; and
5. Update the action plan based on the review findings and recommendations for continuous improvement.

G. Quality Model Adopted by PSU

The university is committed to achieving a high level of quality in all areas of academic and administrative practices. The ETEC-NCAAA's 7 Standards serve as a carefully crafted tool to evaluate quality at PSU. The Quality Assurance cycle at PSU is shown in Figure 9 for quality in teaching and learning and its support infrastructure and services.



Figure 9: Quality Model (PIMRU)

Prince Sultan mandates all supporting services to follow the PIMRU (**P**lan, **I**mplement, **M**onitor, **R**eview, and **U**date) or PDCA (**P**LAN, **D**O, **C**HECK and **A**CT) quality cycle to ensure the quality of the services provided to its stakeholders.

Plan: In this phase, all the important quality elements required by the center/office/Deanship are identified for planning the services such as:

Standards: One of the important elements of the PSU quality model is the EEC-NCAAA 8 standards at the institutional level. The standards are relevant to teaching and learning, institutional governance, and supporting services. All services are provided in alignment with the performance criteria mentioned in the standards. The specific standards will be mentioned in detail in each of the services provided by the supporting units/centers/Deanships. [\[Link to the ETEC-NCAAA standards\]](#)

Policies and Procedures: Policies and procedures are an essential part of any organization. Together, policies and procedures provide a roadmap for day-to-day operations. They ensure compliance with laws and regulations, give guidance for

decision-making, and streamline internal processes. Our university policies thus are meant to guide and enable our community members to uphold PSU's values and expectations. They are the strategic guidelines and policies that promote the success of our students, faculty, and staff in their daily work. All supporting services are being offered to PSU stakeholders in compliance with the relevant PSU Policies and procedures. In this manual, the list of policies is mentioned in each of the chapters, which validates the consistency of providing quality services to PSU stakeholders.

Risk identification: Risk management is important in key operational areas of PSU to ensure that threats and opportunities affecting the successful delivery of operating plans are appropriately addressed and effectively managed. 'Threat' in terms of risks can be termed as an uncertain event (a negative effect on the likelihood of achieving PSU's strategic goals); and on the other hand, 'opportunity' is an uncertain event (a favorable effect on the likelihood of achieving PSU's strategic goals).

PSU's view of acceptable risk is the balance between risk aversion and opportunity. In doing so, PSU follows [the Corporate Governance Regulations \(CG\) Framework 2010 issued by the Capital Market Authority, Saudi Arabia \(Resolution No. 8-16-2017\); amended 20/5/2019](#). The CG framework in Saudi Arabia entails that forecasting risks and disclosure with transparency is an important step for ensuring commitment towards effective risk management systems and internal control (Sarbanes-Oxley Act 2002 (SOX, Section 404 Guideline, page 3).

The [Risk Management Policy](#) sets out PSU's approach to risk management and the mechanisms it employs to identify, analyze, and manage risk. All unit managers are required to be responsible and accountable for managing risk.

This policy applies to all academic and non-academic departments and staff at Prince Sultan University.

Three types of risks will be identified:

- Academic Risk
- Financial Risk
- Others Risk

Strategic Plan: The purpose of university or college strategic planning, in compliance with regulations of government, professional and accrediting bodies, is to set overall goals and objectives which in turn provide guidance for long- and short-term action plans and makes sure that decisions and operations carry out the institution's mission, vision, and values. A strategic plan is typically focused on mid to long-term (5-year) goals and explains the basic strategies for achieving them.

PSU develops a new strategic plan every five years using best practices. The plan is formulated through collaboration between the Strategic Planning and Development Center, the Institutional Strategic Planning Steering Committee, and the Institutional Strategic Planning Higher Committee.

The strategic planning process has four major consecutive phases:

Strategy Formulation –conducting an environment scan to better understand the situation at PSU.

Validation and Delivery – preparing the document for presentation to the stakeholders.

Implementation and Monitoring – putting the plan into effect and overseeing the execution.

Evaluation and Feedback – providing the departments and units feedback on successful implementation and recommending corrective actions.

All academic and administrative entities are involved in preparing a 5-year strategic plan. The strategic goals and objectives and the KPIs are mentioned in each of the academic and administrative services mentioned in the Quality Manual.

Annual Action Plan: The 5-year strategic plan is cascaded into operation plans. The goals and objectives are achieved by various planned initiatives mentioned in annual operation plans. Every administrative unit and college are required to prepare an action/operational plan on an annual basis to achieve the strategic goals and objectives assigned to them. The link for the annual action plan for various academic years is shown in each of the chapters.

Documentation: A quality management system (QMS) is a formalized system that documents processes, procedures, and responsibilities for achieving quality policies and objectives and thus consistently delivering a quality product or service to the customer. All academic and PSU strictly follows

A well-designed documented system has many benefits, it ensures quality standards are routinely met, minimizes the potential for error, reduces downtime when deviations occur due to being able to quickly access relevant data and allows for easy monitoring of the processes such that process outputs are analyzed and appropriate adjustments are made. QMS documentation fulfills many functions such as communication of information, providing evidence of conformity, and sharing knowledge and as such many different types and levels of documents are needed, for example, a quality manual, quality policy, documented procedures, and work instructions.

Every academic and supporting unit maintains documentation in alignment with the PSU and ETEC-NCAA. The relevant templates for planning, implementing, and reporting are shown in each of the chapters.

Resources: The annual operational plan guides every academic and administrative entity to identify all kinds of resources to implement actions to achieve strategic plan goals and objectives. The resources can be consumable and non-consumable items used to accomplish a particular action. Accordingly, the academic and administrative units prepare an annual budget based on the operation plans and other operating costs at the end of the academic year, which is submitted to the higher management for approval. The resources are procured before the commencement of the timeline for action approaches.

Key and Operational Performance Indicators: A Key Performance Indicator is a measurable metric that demonstrates how well an organization is performing against its key business objectives and priorities. Knowing and measuring the right KPIs will help the entities achieve results faster

KPIs/PIs enable PSU management to understand the performance and health of our academic programs and the supporting services provided by various administrative offices such as HR, DAR, DSA, etc. so that the relevant academic and administrative entities can make fact-based decisions and critical adjustments in their execution to achieve the strategic goals.

PSU has adopted the ETEC-NCAAA Institutional and Program KPIs to monitor the quality of academic programs and support services. In addition to that, it has adopted many strategic KPIs to measure the strategic objectives (Mention the PIs identified by the center to monitor the performance of the services provided to the stakeholders)

Employee Evaluation:

In order to ensure the quality services provided by individual employees whether faculty or administrative staff, PSU directors conduct an annual evaluation for all the administrative staff. The performance criteria for the annual evaluation are shown in the [Administrative employee link](#) and [Faculty link](#).

Implementation:

Every academic and administrative unit provides services complying with the terms of references and implements the annual operational/action plan and communicates with the respective units or the Higher Management for their support if required to complete the required actions. The college and departmental committees are regularly contacted to implement the actions related to their scope of work.

Monitoring: The SPDC monitors the accomplishment of the action plan throughout the academic year and provides support to the respective academic and administrative units based on the requirements. The quality assurance concerns are being discussed in the regular Departmental, College, and University Council meetings in addition to the Institutional Committee Meetings, and appropriate improvement or corrective actions are taken after evaluating all the options. In addition to that, those programs which have been granted full accreditation by the ETEC-NCAAA work on all the external review recommendations to enhance the quality in all aspects and submit an annual progress report to the higher management. This is to ensure 360-degree quality at the institutional and program level.

The CSI computes and publishes the KPI results for the previous academic year and establishes the internal and external benchmarks for the next academic year.

Reviewing: The concerning academic and administrative units submit the annual accomplishment reports which reveal the accomplishment of each action in percentages

and the reasons for not accomplishing them. In addition to that, the QAC monitors the completion of the mandatory tasks in the administrative Calendar assigned to the administrative units, departments, and faculty to monitor continuous improvement. The calendar shows the reporting from the various hierarchical levels of the institution. Closing the loop process performed at various levels of PSU administration is the most important step in the Quality Assurance (QA) Cycle, which is based on PIMRU and corresponds to academic years. Faculty and staff are integral to the QA cycle. It involves aggregating the performance indicator results at the program, college, institutional level, analyzing them, and finally recommending appropriate changes to be made to the strategies to achieve measurable objectives in an effective manner.

Updating: The incomplete actions are reiterated in the upcoming academic year to close the loop. In addition to that improvement, actions are taken to further improve the delivery of the educational programs and the quality of education in general.

A compiled DQAD feedback report is prepared by the Deanship of Quality Assurance and Development (DQAD) for every program, which includes the executive summary of all the program statistics, strengths, and areas of improvement as well as the recommendations for continuous improvement. The QA report is based on the annual program reports, including KPIs, Program Assessment Reports from all the colleges, and is submitted to the concerned academic units for further improvement in achieving the mission of the university.

The SPDC also provides feedback on the action and progress reports individually to the respective units.

Section -II
Quality Assurance
in
Academic Programs

A. National Qualification Framework

The PSU Quality framework is in full compliance with the National Qualification Framework (NQF) adopted in Saudi Arabia. The NQF1 aims to provide an integrated system that incorporates a high level of quality, competitiveness, and international recognition of national qualifications. The NQF represents a comprehensive and uniform system for building, organizing, and categorizing qualifications into levels based on learning outcomes. It is a functional tool to better facilitate the transfer of knowledge, skills, and values across the various work environments at both national and international levels.

Levels:

The NQF has identified various education levels which are tiered vertical pathways graded according to the depth of learning areas and their accumulation in educational programs. They begin at early childhood education for the entry-level and end at level 8, the doctoral program. Each level has a specific Scope and depth and represents a scientific progression of the learning outcome, and each includes a description of the associated knowledge, skills, and values. Individual levels collectively form a matrix of levels of the NQF.

PSU is currently offering two levels of education: Bachelor's and master's degree programs as shown in Figure 10.



Figure10: National Qualification Framework Levels

¹ National Qualification Framework in Saudi Arabia.

Placement Requirements for bachelor's degree

All PSU undergraduate academic programs offer 4-year degree programs equivalent to more than 130 credit hours

Passing 134-138 credit hours² depending on the program

Duration of Study: 4-year academic years

Target Learning Outcomes (Knowledge & understanding, skills, and values)

Qualification level: 6

Admission Requirement: Secondary education

Placement requirements for master's degree

All PSU graduate academic programs offer a 2-year degree program equivalent to more than 30- 36 credit hours depending on the nature of the programs

Duration of Study: At least four semesters

Target Learning Outcomes (Knowledge & understanding, skills, and values)

Qualification level: 7

Admission Requirement: Bachelor's degree

Learning Domains

Learning areas describe the education which a learner needs including the necessary knowledge, understanding, skills, and values learners are expected to exhibit at a specific qualification level.

Learning outcomes detail specific requirements under a given learning area category.

They are organized according to each level specified in the Framework. These levels are progressive in terms of scope and sequence, from level 1 (early childhood education) to level 8 (doctoral education).

They are expressed in terms of cognitive dimensions, skills, and values according to the following criteria.

² Number of hours required for qualification. It is calculated by the number of hours of instruction required to achieve the learning outcomes of a qualification

NQF Old Learning Domains	NQF New Learning Areas	Detailed Explanation of New Learning Areas
Knowledge	Knowledge & Understanding	<p>This includes the knowledge and understanding of a learner in learning, work, or profession: Extensive deep knowledge, <i>understanding of facts, concepts, principles, theories, processes, and procedures</i> provided for in learning, work, or profession.</p> <ul style="list-style-type: none"> • Depth of knowledge can be general or specialized. • Breadth of knowledge can range from a single topic to a multi-disciplinary area of knowledge. • Types of knowledge range from concrete to abstract from segmented to cumulative. • Complexity of knowledge type, depth, and breadth.
Cognitive Skills	Skills	<p>The Learning area includes skills that a graduate can exhibit in applied settings (such as in school, training, internships, work, etc.). The various types of skills are Cognitive skills: These include critical thinking and problem-solving skills, inquiry, and creativity.</p>
Communication, Information Technology, Numerical	Skills	<p>Practical and physical skills: Psychomotor skills These include using appropriate materials, devices, and tools, and applying motor and manual skills with ingenuity. Communication and information technology skills: These include written, verbal, and non-verbal communication, numeracy skills, and the use and production of information and communication technology.</p>
Psychomotor	Skills	
Interpersonal Skills & Responsibility	Values, Autonomy & Responsibility	<p>These include what a learner exhibits in terms of principles, ethics, and standards for personal and professional success and well-being.</p> <ul style="list-style-type: none"> • Academic, professional values, and ethics. • Continued self-learning and autonomy. • Teamwork and responsibility.

Table 2: NQF Learning Domains

For detailed information about the NQF refer to the [Guidelines for National Qualification Framework](#)

B. Compliance of PSU Quality Assurance Framework with NQF-Saudi Arabia

PSU's Program or Institutional Assessment Process follows the NCAAA Standards. The best practices relevant are 3.1, 3.2, & 3.3 at both the institutional and program levels. Please find a diagram of the relevant best practices below as shown in **Figure 10**.

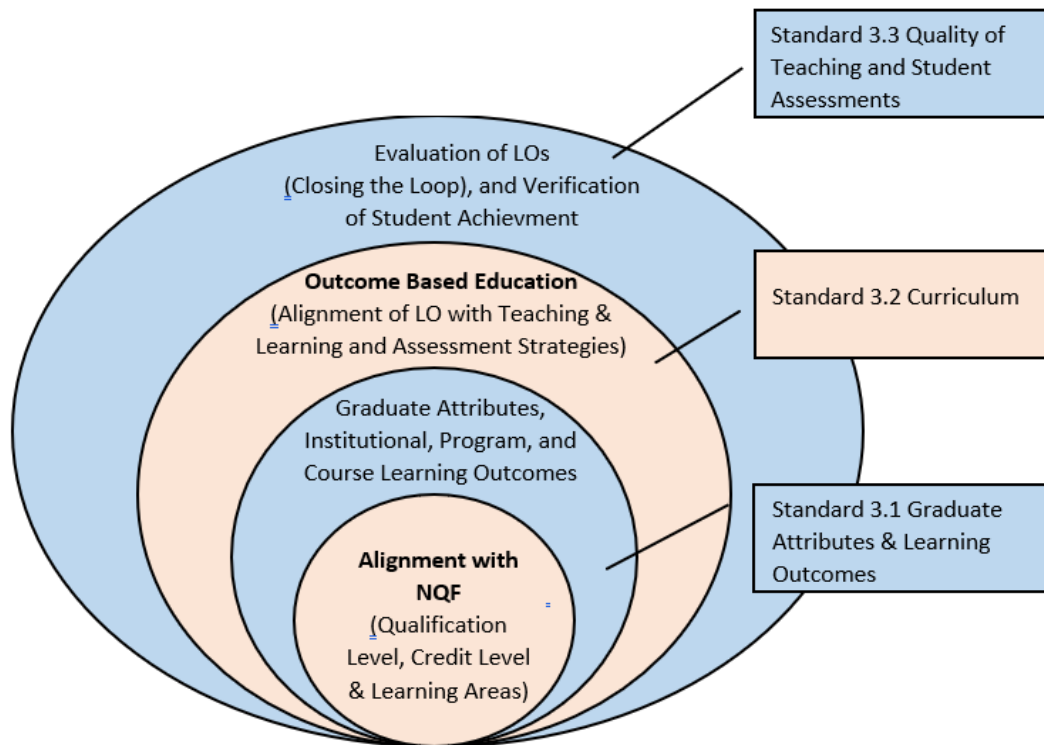


Figure 11: Compliance of PSU Quality Assurance Framework with NQF-Saudi Arabia

It is important to highlight that the quality management system (QMS) at PSU is aligned with the National Qualifications Framework as well as NCAAA's standards. The above diagram portrays this connection. The NQF is the guide for aligning our educational practices in line with the job market needs by ensuring quality practices across the educational sectors. PSU has adopted the NQF as its framework for the quality management system at the university.

For detailed information about the National Qualification Framework refer to the link [Guidelines for NQF](#)

C. NCAAA Standards for Teaching and Learning

The National Qualifications Framework and the standards established by the National Accrediting Body, NCAAA, are the key elements used for creating the quality management system at PSU. As our main business is teaching and learning, mentioning the action best practices for *Standard 3, Teaching and Learning, is relevant*. All colleges within PSU are required to ensure that these best practices are implemented.

3.1 Services provided by DQAD and the institutional Committees for the Design and Development of Academic Programs

DQAD, in collaboration with the institutional committees IQC, ILTC, and ICC, ensure all academic programs at all levels meet the standards and requirements of the National Qualifications Framework (NQF). The programs follow the approved academic plan and implement PSU Curriculum Review and Development policy in all the academic programs with the support of college and departmental level curriculum committees. The students and the faculty apply these teaching and learning policies. PSU ensures the unified curriculum plans, program, and course specifications are followed in both the campuses, which are benchmarked with the professional bodies' specifications and meet the labor market and society needs.

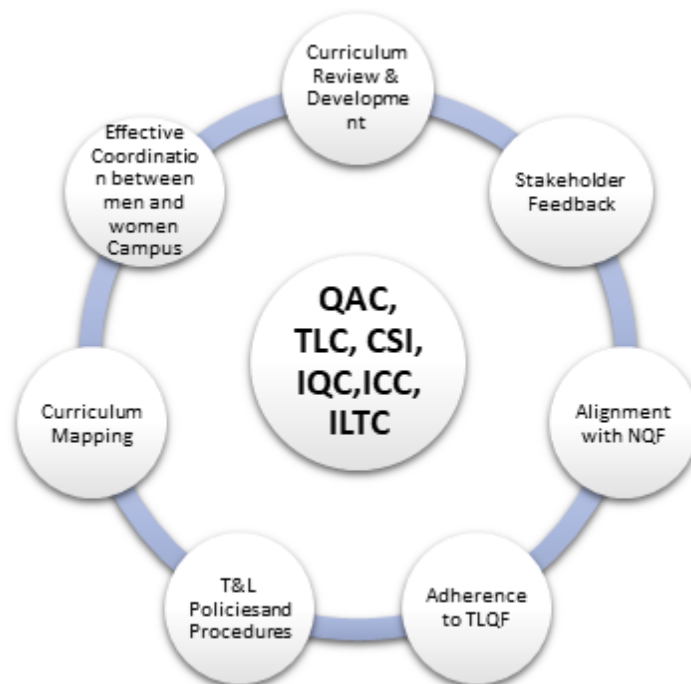


Figure 12: Design and Development of Academic Programs

3.2 Services provided by DQAD and the institutional Committees for the Graduate Attributes and Learning Outcomes

DQAD in coordination with the institutional Committees ILTC and IQC ensure the establishment of the graduate attributes in every academic program and their mapping with that of the institutional Graduate Attributes. The graduate attributes are approved and publicized based on their consistency with NQF, PSU's mission, educational goals, development requirements, and labor market.

The policies and procedures for assessing the graduate attributes and selecting assessment instruments using direct and indirect methods are documented in the [PSU Assessment Handbook](#).

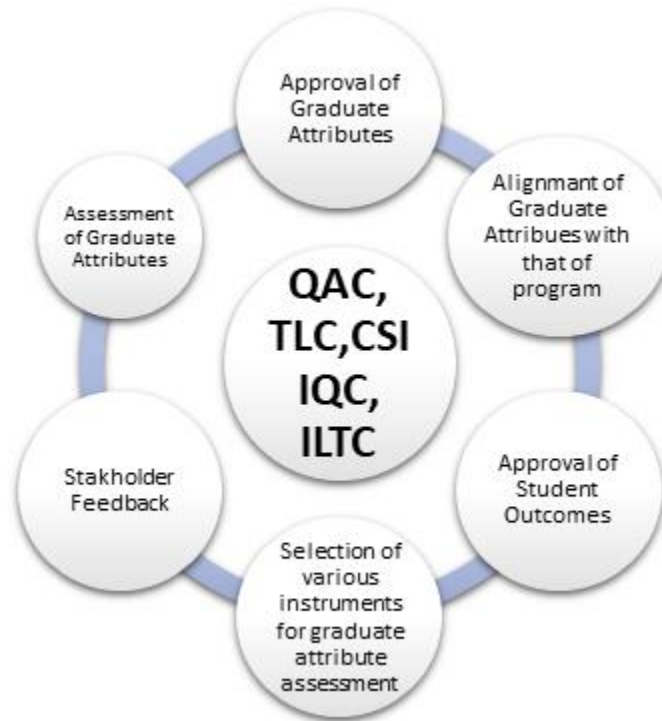


Figure 13: Graduate Attributes and Learning Outcomes

3.3 Services provided by DQAD and the institutional Committees for the Academic Programs Quality Assurance and Enhancement

DQAD in collaboration with the ILTC and IQC ensure that the updated program specifications are used, which might have changed due to major and/or minor changes in the academic program. The annual program reports prepared by the academic program are thoroughly reviewed by the QAC and updated, which helps the departments make qualitative and quantitative fact-based decisions. TLC regularly monitors the learning outcomes assessment at the institutional, program, and course level. EAAC and QAC are

responsible for the internal review of the programs after every four years. CSI helps the academic program in providing the necessary data for the preparation of the annual program reports. SPDC helps the academic program in reviewing the accomplishment of the strategic and operational plans. QAC also supports the academic programs in performing independent verification of student achievement.

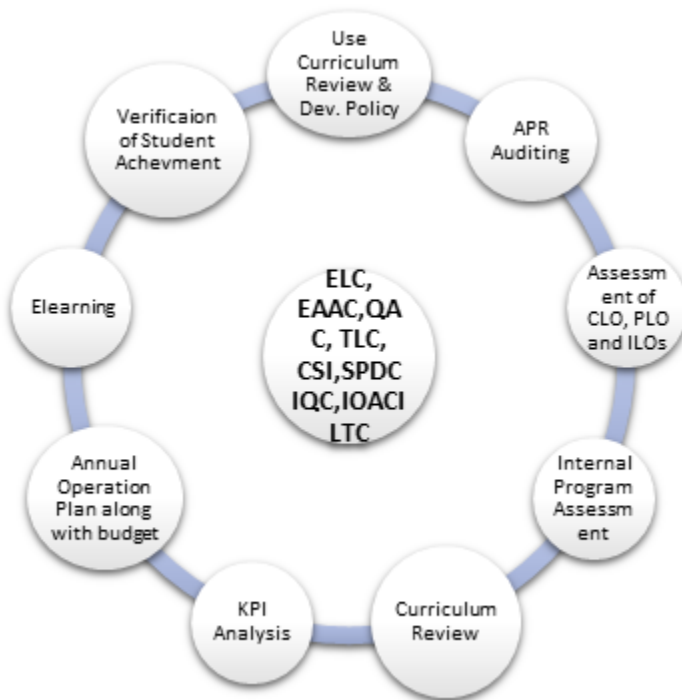


Figure 14: Academic Programs Quality Assurance and Enhancement

Refer to the [NCAAA standards for teaching and Learning](#)

D. Program Constituencies and their feedback for Program development

The stakeholders of the learning outcome assessment process have their unique perspectives and interest in the success and continued improvement of the education offered at PSU.

The main stakeholders are as follows.

1. Students
2. Alumni
3. Faculty
4. Employers/industry partners (and postgraduate universities)
5. Professional and accreditation bodies

6. Higher education institutions (Graduate Studies Program)

- 1. Students:** PSU students who are completing their last semester before graduation. Since the students are the direct beneficiaries of a quality education system, their immediate feedback through student council, exit surveys, and interviews have high importance in PSU's education system.
- 2. Alumni:** Alumni are former students who graduated with an undergraduate or graduate degree. They are expected to become competent, professionally, and socially responsible individuals after earning a bachelor/master's degree in any academic program offered at PSU. Their successful career, reputation, or professional growth demonstrates the achievement of learning outcomes. Alumni input is obtained through an alumni survey as well as the annual Advisory Board meeting (members are from the industry as well as our alumni).
- 3. Faculty:** Faculty are the academic teaching staff of a university: Professors of various ranks, lecturers, and/or researchers. Their primary educational responsibility is to create an environment for leading the students to an effective lifelong learning process. Faculty input is obtained through regular Department/College Council meetings, Curriculum Committee meetings, and course reports.
- 4. Employers/industry partners (and postgraduate universities):** Employers are those who are expected to hire new employees (graduated from PSU) who are competent, productive, self-motivated learners, team players, and have excellent communication skills.
- 5. Professional and Accreditation Bodies:** The Professional and Accreditation Bodies also play an important role in specifying the learning outcomes and/or their assessment strategies.
- 6. Higher Education Institutions (Graduate Studies Program):** The entry requirements for higher education institutions also provide a coherent source for keeping the learning outcomes up to date.

E. Advisory Board

PSU mandates every college to establish an advisory board for every academic program composed of a group of academicians and community (alumni and employers) stakeholders from various local or international institutions/organizations. Advisory boards are composed of accomplished experts offering innovative advice and dynamic perspectives in their respective specializations. Members' diverse range of knowledge(s), skills, and abilities help the college ensure the academic program offerings are current. The board members meet once a year, provide strategic direction, guide quality improvement, and assess program effectiveness. The meeting minutes are recorded, and recommendations are taken into consideration for continuous improvement.

F. Teaching and Learning Policies

The main policies for teaching and learning are listed below for easy reference:

1. [New Faculty Orientation Policy](#): It is mandatory for all new faculty members to participate in this orientation. The orientation should take place during the non-teaching week before the start of the academic semester. (Please note that if the date must be modified for some reason, then the faculty member and the department chairperson/director need to find someone to cover their courses.)
2. [Course Design Policy](#) provides general guidelines for designing courses and modules in the context of an OBE (Outcome Based Education) system. It is required for all new faculty to attend a course design institute to train them on course design according to PSU's policies and procedures.
3. [Professional Development Policy](#) emphasizes continuous improvement, requiring faculty members to remain current and up to date regarding their fields and the required T&L skills. The quality assessment- improvement cycle will not be complete without continuous support for the professional development of faculty members in all skill areas relating to Teaching and Learning. This policy describes PSU's strategy regarding the development of T&L skills.
4. [Classroom Observation Policy](#) provides guidelines on the process and procedures of classroom observations.
5. [Program Assessment Policy \(PAP\)](#) outlines the main T&L quality assessment processes at the program level, including the use of an electronic software system. The PAP uses outcome-based education as its underlying philosophy and employs several tools to assess T&L Quality and recommend improvements. The review process is cyclic, and the results are raised every year to the TLC.
6. [Curriculum Development and Review Policy](#) describes in detail the principles and procedures that should be followed to develop new curricula or review existing programs. The policy ensures that all PSU programs remain current, sound, and relevant.
7. [CO-OP Policy](#) associates modern academic studies with the business sector. The Program emphasizes theoretical studies and, at the same time, exposes the students to the practical environment of selected institutes and corporations during the training period. This method enables students to gain hands-on experience in a realistic environment. The goal of this practical stage is to enhance the students' skills and relate principles and perceptions to the practical field by allowing them to acquire new skills, getting them used to creative thinking, and permitting them to practice problem-solving and decision making.
8. [Student Assessment Policy & Final Examination Policy](#) outlines the major principles, goals, guidelines, and processes for Student Assessment. They are strongly based on the principles of Outcome-Based Education (OBE Centric).

9. [Learning Management System \(LMS\) Policy](#) enhances the quality and effectiveness of the University's LMS to provide students with access to fundamental course materials, resources, and any needful information
10. [Information Technology support Teaching and Learning Policy \(ITTL\)](#) provides IT support for faculty members to become more effective and more efficient in their teaching. It is to encourage collaboration with students and faculty members to promote high-quality educational experiences at Prince Sultan University via the use of technology in the T&L cycle in line with the Learning Outcomes. The Instructional Development Unit (IDU) and the eLearning Center support, promote, and encourage faculty and staff to apply technology in their day-to-day academic and administrative-related tasks/responsibilities.
11. [Academic advising Policy](#). All faculty members within a degree-granting program will be assigned students to advise. Academic advising is mandatory for all students to be able to register for their courses. All faculty members are required to learn about the procedures required for advising by attending the workshop sessions offered by the Teaching and Learning Center TLC and the Deanship of Admission & Registration Office DAR. The purpose of this policy is to provide guidelines on academic advising for University-Level students.
12. [Student Special Needs Policy](#) identifies problems and other difficulties with students perceived as being somewhat challenged and in need of more remediation than the norm in that group or class.
13. [Academic Integrity Policy](#) emphasizes academic honesty and the avoidance of plagiarism and all practices that contradict well-established academic integrity standards.
14. [Faculty Code of Conduct Policy](#) provides guidelines on the code of ethics of faculty members. It is intended to help maintain a high standard of professional conduct and personal integrity. It provides the grounds for informing faculty members of the acceptable behavior that is consistent with the university mission, the system of values of the society, and the universally accepted principles or norms of academic professionalism.

G. Key Performance Indicator Framework

PSU KPI Framework is in line with the National Center for Academic Accreditation and Evaluation (NCAAA).

PSU has adopted 23 NCAAA Key Performance Indicators (KPIs) at the institutional level, which are in line with the institutional accreditation standards. These indicators are annually measured to ensure the quality of the institution.

PSU has also adopted 17 ETEC-NCAAA Program Key Performance Indicators at the program level which are in line with the 6 program accreditation standards. Additionally, PSU has also adopted 19 NCAAA KPIs at the graduate program level which is in line with the 7 graduate program accreditation standards. These KPIs are annually measured to ensure the quality of the undergraduate and graduate programs.

In addition to that PSU had adopted 51 KPI at the institutional level which helped in measuring the objective of the 3rd PSU Strategic Plan.

KPI Framework Principles

To appreciate the extent to which academic programs' objectives are achieved and strategies are efficient, it is vital to define key performance indicators to tell stakeholders whether the academic program and the university are going in the right direction or not. The following principles should be taken into consideration:

1. **Relevance and Alignment with Strategy:** Each KPI is aligned with Prince Sultan University's Strategic Plan, so that it is transparently relevant to institutional goals (explicit and implicit). Key to satisfying this criterion is the need to ensure that the KPI is measuring both strategic performance and operational goals.
2. **Clarity:** The KPI provides clarity and a detailed explanation. It is also drilled down through the organization so that the PSU view contributes to the overall institutional performance.
3. **Driver to impact real change:** In order to control the performance being measured and be able to impact real change, target benchmarking is set up and is accordingly compared.
4. **Data Availability:** All selected KPIs will be calculated based on the data availability. However, in the case of data unavailability for desired indicators, the indicator should be noted as an "aspirational indicator" and actions identified to source the required data in the future.
5. **Mixture of Quantity and Quality Indicators:** PSU follows a holistic approach by measuring its performance annually, quantitatively, and qualitatively through the KPIs.
6. **Ability to cascade indicators down to the relevant College and Department (Program) levels:** The KPIs at the institutional level are cascaded down either to the college or program level.

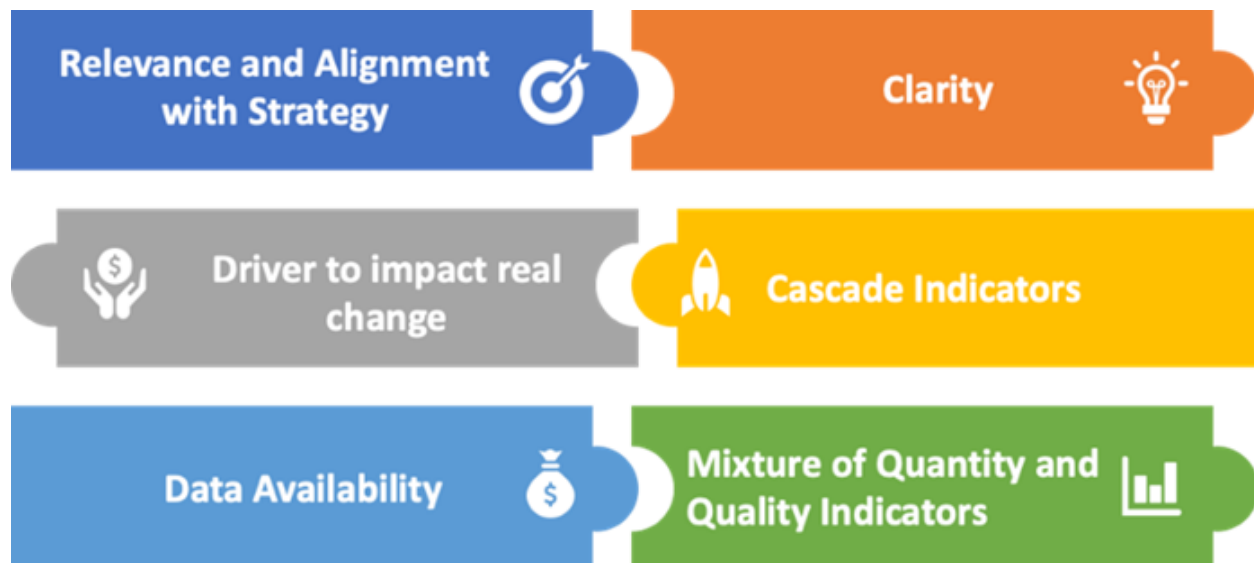


Figure 15: KPI Framework Principles

Program/Institutional KPI Terminology

For KPI Analysis, the following areas need to be highlighted:

Benchmark/KPI refers to the key performance indicators of the program/institution approved by the institution (if applicable at this time). This includes both the NCAAA suggested KPIs chosen and all additional KPIs determined by the program (including 50% of the NCAAA suggested KPIs and all others).

Target Benchmark refers to the anticipated or desired outcome (goal or aim) for each KPI. The target KPIs will be set by the KPI owners with the discussion of the KRC Committee.

Actual Benchmark refers to the actual outcome determined when the KPI is measured or calculated.

Internal Benchmarks refer to comparable benchmarks (actual benchmarks) from inside the program (like data results from previous years or data results from other departments within the same college).

KPI Analysis refers to a comparison and contrast of the benchmarks to determine strengths and recommendations for improvement.

New Target Benchmark refers to the establishment of a new anticipated or desired outcome for the KPI that is based on the KPI analysis.

PSU Data Related Policies: The overarching aim of the benchmarking and KPI policy is to contribute to the continuous improvement of PSU performance.

1. **KPI Policy**: Key Performance Indicators and benchmarking should be embedded in practice within all key areas of the University for continuous improvement and demonstrated within the formation of its standards of practice and comparators for performance. This policy mandates how the University will review and assure the achievement of performance through the comparison of external and internal benchmarking. Adherence to this policy contributes to efficient and effective evidence-based decision practices.
2. **Benchmarking Policy**: PSU compares its academic and administrative processes to analogous universities, both local and international; to track to what extent PSU is on course to achieve its vision. Prince Sultan University (PSU) believes that KPI (Key Performance Indicators) and benchmarking should be embedded in practice within all key areas of the University for continuous improvement. Adherence to benchmarking policy ensures efficient and effective evidence-based decision practices which are inevitable for this outcome. The purpose of the benchmarking policy is to provide clear guidance on all activities, warranting that the benchmarking process at PSU is advanced in a synchronized, cautious, and systematic manner.
3. **Proactive Data Collection & Management Policy**: PSU shall adopt a proactive, systematic data collection and management process to make sure that required data is available in a timely manner and with the expected levels of accuracy and integrity.
4. **Data Access Policy** establishes clear guidelines for all staff members to follow in reference to data access and to maintain the privacy of the information of all the stakeholders involved.

Data Sources of NCAAA KPIs

The KPI framework of PSU is based on several surveys and data provided by various units/centers. [The table below includes 23 Institutional and 4 Program KPIs]

Data Sources	Description	Data Collection Timeline	Data Validation & Availability
Strategic Planning & Development Center (SPDC)	Percentage of achieved indicators of the institution strategic plan objectives [1 KPI]	May-June	Aug

Data Sources	Description	Data Collection Timeline	Data Validation & Availability
Evaluation and Academic Accreditation Center	Proportion of accredited programs [1 KPI]	May	June
Center for Statistics and Information (CSI)	Faculty Satisfaction Survey (FSS) Program Exit Survey (PES) Course Evaluation Survey (CES) Employee Satisfaction Survey (EES) <ul style="list-style-type: none"> ● Students' evaluation of the quality of the programs ● Satisfaction of beneficiaries with learning resources ● Students' satisfaction with the offered services ● Satisfaction of beneficiaries with technical services ● Students' evaluation of the quality of the courses [P] [5 KPIs] 	May	June
Human Resources Office (HR)	<ul style="list-style-type: none"> ● PhD Holder percentage per department ● Faculty Retention Rate ● Percentage of teaching staff distribution [P] [3 KPIs] 	May	June
Deanship of Admissions & Registration (DAR)	<ul style="list-style-type: none"> ● Student Faculty ratio ● Retention Rate ● Graduation Rate (Completion rate) ● Average number of students per class [P] [4 KPIs] 	May	June

Data Sources	Description	Data Collection Timeline	Data Validation & Availability
Alumni Centre (Deanship of Student Affairs - DSA)	Alumni Survey Employers Survey <ul style="list-style-type: none"> • Graduates' employability • Employers' evaluation of the graduates • Students' performance in the professional examinations [P [3 KPIs] 	May	June
Vice Rector, Administrative and Financial Affairs (VR-AFA)	<ul style="list-style-type: none"> • Total Operating Expenses • Percentage of self-income of the institution [2 KPI] 	August	August
Research & Initiatives Center (RIC)	<ul style="list-style-type: none"> • Rate of Publications • Rate of Citations • Faculty contribution to Research Number of patents, innovations, and Awards • Research budget • External funding by PhD holders [6 KPIs] 	March	April
Community Services and Continuing Education Center (CSCEC)	<ul style="list-style-type: none"> • Satisfaction of beneficiaries with the community services • Rate of Community education programs [2 KPIs] 	April	April

Table 3: Data Sources of NCAAA KPIs

PSU Surveys used for calculating KPI are the Institutional and Program level

The following Figure 14 shows the type of the surveys used for calculating the following KPIs

- Students' evaluation of the quality of the programs
- Satisfaction of beneficiaries with learning resources
- Students' satisfaction with the offered services

- Satisfaction of beneficiaries with technical services
- Students' evaluation of the quality of the courses [P

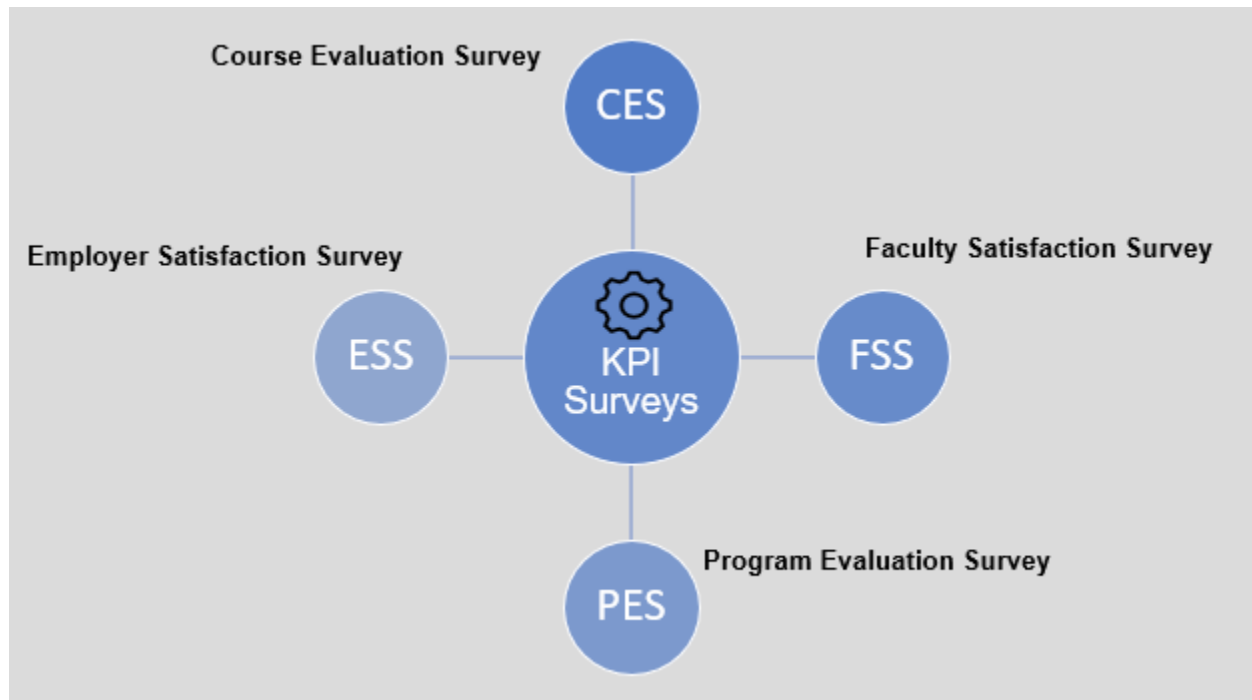


Figure 16: PSU Surveys For calculating KPI Results

Governance, Report, and Monitoring

Given the significance of KPIs, PSU conducts KPI analysis regularly for its quality assurance enhancement and continuous improvement endeavors.

The KPIs are reported annually, and improvement actions follow accordingly.

The KPI monitoring process is a continuous process. It provided as below in Figure 15 which data availability, validity, and analysis are shown including specified timeline:

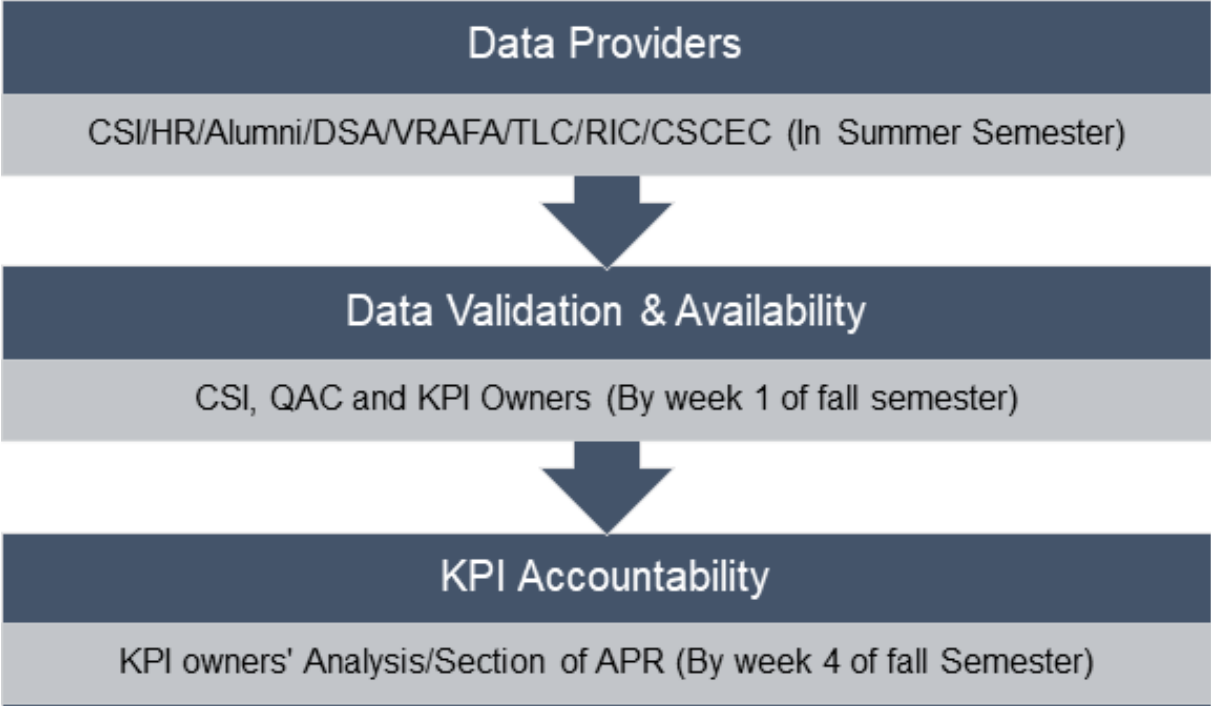


Figure 17: PSU KPI Monitoring & Governance Process

Description	KPI Owners (Institutional level)	KPI Owners (Program level)
<ul style="list-style-type: none"> Percentage of achieved indicators of the institution strategic plan objectives [1 KPI] 	Institutional Strategic Planning STEERING Committee (ISPSC)	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Proportion of accredited programs [1 KPI] 	Academic Programs (Dean & Chairs)	Academic Programs (Dean & Chairs)

Description	KPI Owners (Institutional level)	KPI Owners (Program level)
<ul style="list-style-type: none"> Students' evaluation of quality of the programs Satisfaction of beneficiaries with learning resources Students' satisfaction with the offered services Satisfaction of beneficiaries with technical services Students' evaluation of the quality of the courses [P] [5 KPIs] 	Institutional Learning and Teaching Committee (ILTC) Institutional Academic and Facilities Committee (IAFC) Institutional Academic and Facilities Committee (IAFC) Institutional Online Education Committee (IOEC)	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> PhD Holder percentage per department Faculty Retention Rate Percentage of teaching staff distribution [P] [3 KPIs] 	Institutional Employee Affairs Committee (IEAC)	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Student Faculty ratio Retention Rate Graduation Rate (Completion rate) Average number of students per class [P] [4 KPIs] 	Institutional Employee Affairs Committee (IEAC) Institutional Learning and Teaching Committee (ILTC) Institutional Students Engagement Committee (ISEC)	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Alumni Survey Employers Survey Graduates' employability Employers' evaluation of the graduates Students' performance in the professional examinations [P] [3 KPIs] 	Institutional Students Engagement Committee (ISEC)	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Total Operating Expenses Percentage of self-income of the institution [2 KPI] 	Office of the Vice President for Financial and Administrative Affairs (VPFA)	Academic Programs (Dean & Chairs)

Description	KPI Owners (Institutional level)	KPI Owners (Program level)
<ul style="list-style-type: none"> • Rate of Publications • Rate of Citations • Faculty contribution to Research Number of patents, innovations, and Awards • Research budget • External funding by Ph.D. holders [6 KPIs] 	Executive Research Committee (ERC)	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> • Satisfaction of beneficiaries with the community services • Rate of Community education programs [2 KPIs] 	Institutional Community Partnerships Committee (ICPC)	Academic Programs (Dean & Chairs)

Table 4: KPI Data Providers and KPI Owners

External Benchmarking for Institution and Program

External Benchmarks refer to comparable benchmarks (actual benchmarks) from similar programs/institutions that are outside the program/institution (national or international).

- **Competitive - Local/National/Regional**

This allows for a form of benchmarking in terms of the university’s mission; size, type of institution, research productivity, staffing levels, enrolments, and any other factors.

- **Aspirational - International**

This allows for a form of benchmarking in terms of the university's mission strategically to be envisioned by Saudi Vision 2030.

PSU has established benchmarking partnerships with the following institutions:

Local/National Partnership: Effat Uni, Alyamamah Uni, Mohammed Bin Fahd Uni,

Regional Partnership: American University of Sharjah.

PowerBI Dashboard

PowerBI Dashboards are used to provide required data and information to support academic programs, University entities, and other stakeholders. The dashboards are directly connected to the PSU database that contains data from various data sources, such as e-registration data, HR data, research data, survey data, etc. Additionally, dashboards contain the current and historical data that are presented in various visual and tabular formats to help provide insights about the metrics that guide the achievement of academic program goals and objectives. Therefore, the PowerBi dashboards are developed and used for the following main purposes:

- Automating data collection process
- Disseminating the required data with stakeholders
- Automating KPI calculation process
- Providing data and statistics for annual reports.
- Providing data for further analyses related to quality assurance processes

The links to several important dashboards are given below:

1. [Comprehensive Dashboard for the undergraduate program](#)
2. [Comprehensive Dashboard for the graduate program](#)
3. [NCAAA Institutional and Program KPI Dashboard](#)

H. Graduate Attributes and Learning Outcomes

Graduate Attributes are broader than learning outcomes and more encompassing than employability. They help in developing academic, citizenship, and career competencies. They are not orienting a framework of educational outcomes that a university community agrees its graduates should develop because of completing their studies successfully ³

Learning Outcomes:

The Learning Outcomes at the university level are classified into three categories where they must be all aligned with each other:

- Institutional Learning Outcomes
- Program Learning Outcome
- Course Learning Outcome

Institutional Learning Outcomes are those skills, values, ideas, and qualities that PSU believes are important for all undergraduates and postgraduates. Graduate Attributes are the qualities, skills, and understandings PSU agrees its students should develop during their journey within the institution. They are qualities that also prepare graduates as agents for social good in an unknown future.

[PSU-ILOs](#) (Page 48)

Program Learning Outcomes are those things each specific program finds important for its graduates to have mastered while in the program.

1. College of Business Administration
 - a. [Accounting](#)
 - b. [Aviation Management](#)
 - c. [Finance](#)
 - d. [Marketing](#)
 - e. [MBA](#)
2. College of Computer and Information Sciences
 - f. [Computer Science](#)
 - g. [Information Systems](#)
 - h. [Software Engineering](#)
2. College of Engineering
 - a. [Communications and Networks Engineering](#)
 - b. [Construction Management](#)
 - c. [Production and Manufacturing Management](#)
 - d. [Electrical Engineering](#)
3. College of Humanities & Science
 - a. [Applied Linguistics](#)

- b. [Translation](#)
- 4. College of Law
 - a. [Law](#)
- 5. College of Architecture & Design
 - a. [Architecture](#)
 - b. [Interior Design](#)

Course Learning Outcomes are what students are expected to achieve in a course. All the course learning outcomes are mentioned in the course specification. PSU adopts an outcome-based teaching and learning strategy which mandates every program to identify a list of PLOs to achieve the graduate attributes. The program learning outcomes are achieved by offering courses based on the academic plan. Every course list a maximum of 8 CLOs which are mapped with a specific PLO.

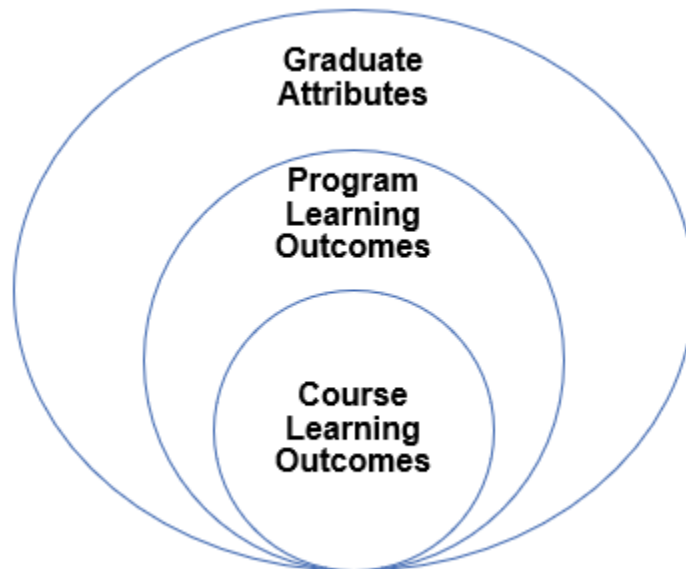


Figure 18: Achievement of Graduate Attributes through PLOs and CLOs

I. Quality Cycle (Continuous Improvement Process) of the Learning Outcomes

PSU assesses academic quality via the annual program reporting, the curricula review, and the assessment of learning outcomes every 2-4 years.

Learning Outcomes are assessed at the institutional, program, and course levels. It plays a role in the program review and quality assurance of PSU's academic practices.

The Teaching and Learning Quality Assurance and Improvement processes are based on a continuing annual cycle based on the principles of PIMRU (Plan→ Implement →Monitor →Review → Update), as shown in Figure 19 below.

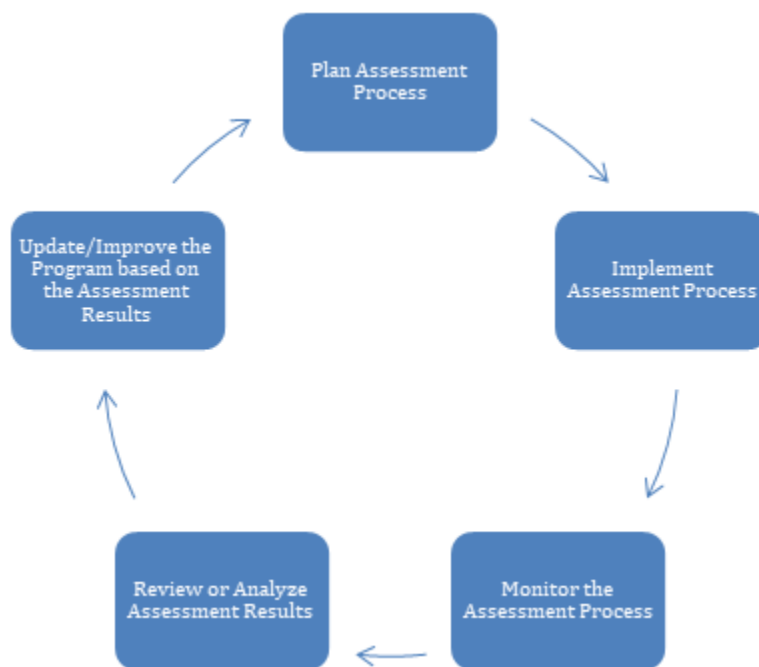


Figure 19: The PIMRU Model

Plan:

In this phase, the plan is created for academic process components to improve students' learning. Across the institution, the programs are required to prepare an Academic Assessment Plan (AP), which shows a roadmap of assessing the learning outcomes from one level to the other based on its applicability for each level mentioned below.

- a. Course Level Assessment
- b. Program Level Assessment
- c. Institutional Level Assessment

Assessment Plans are based on OBE principles and Learning Outcomes. Assessment plans should include course level and program level assessments in accordance with PSU's policies <https://www.psu.edu.sa/en/TLC-handbook-guidelines>.

Implement: Implement the assessment plan every regular semester. Conduct direct and indirect assessments.

Monitor: Monitor the Assessment Process and Compute assessment results using Direct and indirect methods. Refer to Page No.15 of the Assessment Handbook for a detailed explanation about the types of assessments.

Review: Analyze and discuss the Assessment Results.

Update/Improve: Analyze differences in expected improvements, actual improvements, and previous assessment results (if any). Based on this, determine where your next improvements will be made. Take action so we don't make those same mistakes next time. Some examples of improvement are a) Discuss curricular, learning activities, assessment strategies changes needed to meet outcomes, and b) Redefine ILO or PLOs or CLOs.

J. Assessment Plans

The assessment plan should be based on Outcome Based Education (OBE) principles and Learning Outcomes. Assessment Plans should include course level and program level assessments following PSU’s rules and regulations.

Assessment Plan of the Program Learning Outcomes

While programs are expected to engage in annual assessment cycles, it is not a requirement that every program learning outcome is assessed every year. As part of the assessment planning process, programs should identify a two- or four-year cycle.

Note: The accreditors may require programs with specialized international accreditations to assess each outcome every year and must follow the accreditation standards.)

For example, if a program has seven program learning outcomes, PLOs 1 and 2 would be assessed in the first year of the cycle; PLOs 3, 4, and 5 would be assessed in the second year; and PLOs 6 and 7 would be assessed in the third year. The assessment cycle would then be repeated. Another example of an assessment cycle for a program with 8 PLO's has been shown in Table 4 [1]. Collecting data on the selected outcomes each year provides the opportunity for programs to analyze the assessment findings, plan, and implement programmatic enhancements before the next cycle of data collection for a particular outcome, refer to Table 4 to see the activity Plan for each Program Learning Outcome.

Schedule of Assessment	Program Learning Outcomes							
	A	B	C	D	E	F	G	H
Semester 1								
Semester 2								
Semester 3								
Semester 4								
Semester 5								
Semester 6								
Semester 7								
Semester 8								

Table 5: Program Learning Outcomes

K. Levels of Assessment

PSU assesses learning outcomes at the following levels:

- i. Graduate Attributes (GA)
- i. Institutional level (ILO)
- ii. Program level (PLO)
- iii. Course level (CLO)

Types of tools used for assessing the learning outcomes

- i. Direct
- ii. Indirect

There are two types of outcome measures: direct measures and indirect measures.

Direct measures

assess the extent to which students' work meets the learning outcome performance standards. In other words, **Direct Assessment Methods** are methods for assessing actual samples of student work to provide evidence of student performance relative to the learning outcomes.

Selecting Direct measures

- *A student's course portfolio evaluation using rubrics*
- *Projects & Presentations using rubrics*
- *Exam Papers using rubrics: Faculty members will be asked to use rubrics to assess final exam questions in selected courses.*

1. Types of Courses Chosen for PLO Assessment

It is mandatory to use only the core courses for assessing the PLOs. In addition to that, it is preferable to use the courses at the mastery level for assessment purposes.

2. Assessment Instrument Used for PLO Assessment

The questions used for the final or midterm exams, which are peer-reviewed by the exam committee, should be used for CLO and, in turn, PLO assessment. For the PLOs which cannot be assessed through the exams, such as communication or teamwork, other appropriate assessment instruments should be used such as group projects, presentations, seminars, showcases, portfolios, etc.

Indirect Measures

Indirect measures compliment direct measures by providing supportive evidence, information, and student perspective. In other words, **Indirect Assessment Methods** are methods for assessing secondary information on student learning that do not rely on actual samples of student work.

Selecting indirect measures

There are many issues to consider when selecting indirect measures of learning. The institution should be creative in determining the most useful ways to measure student performance and ensure that the methods allow for meaning from interpretation and results. These methods may be quantitative or qualitative but should still address the key issues of strong measures. Examples of indirect measures can be seen below.

1. Survey questions from the institutional surveys are to be mapped to the Institutional Learning Outcomes (ILO's). These surveys are listed below:

- **Program Evaluation Survey:** conducted on final year students before they graduate.

Questions Used in the Program Exit Survey

The specific questions numbered from 41-49 in the program exit survey can be used for assessing certain PLOs.

In other cases, the academic departments can administer a survey for the graduating students, which will allow COOP students to assess the satisfaction of the Program Learning Outcomes.

- **Alumni Surveys:** alumni are asked to rate the program outcomes and give their feedback regarding their experience through a survey that will be distributed annually.
- **Employer Surveys:** Employers will be asked to rate the achievement of program outcomes through a survey that will be distributed periodically.
- **Course Evaluation Surveys:** conducted at the end of every semester and provide feedback from all students for all courses offered in the University.
- **Learning Outcomes Exit Survey:** Faculty members conduct a survey about the satisfaction of the students regarding the achievement of learning outcomes.
- **COOP Employer Feedback:** The COOP or training organization's feedback based on certain performance criteria can also be considered an indirect measure of assessing the PLOs.

L. Assessment Process of the Learning Outcomes

Assessment is an all-encompassing term that entails routine classroom assessment as well as external testing. Assessment is also the opportunity to improve the teaching and learning processes⁴. Assessment is also a term that involves the method by which data is collected to measure what students know (knowledge) and can do (skills) in connection to the learning outcomes at specific points during their learning activities, course, or program of study (Retrieved from <https://www.onlineassessmenttool.com/knowledge-center/assessment-knowledge-center/assessment-vs-testing/item10641>)

The assessment process of Learning Outcomes applies to all programs and departments on campus that have courses that contribute to a degree-granting program at the undergraduate and graduate levels. It is the systematic and ongoing method of collecting, analyzing, and using information from measured outcomes (both direct and indirect) to improve the quality practices of student learning. It is different from an individual course, student, or faculty evaluation assessment. It utilizes the data gathered to make informed decisions about the quality improvement of the program. <https://www.psu.edu.sa/en/policy-and-procedures>

Target benchmark level of the Learning Outcomes

The targets are the expected level of aggregated student achievement, for each measurement method (direct and indirect). Targets are usually expressed in terms of the number or percentages. For example, a target might be expressed as at least 85% of the students will achieve a 3 or higher on each criterion of the rubric used to evaluate the research presentation.

⁴ (Cheng & Fox, 2017)

M. Evaluation Process of the Learning Outcomes

Evaluation Process of the Course Learning Outcomes

The Course Group or Course Coordinators collect and analyze the CLO assessment results (direct and indirect) at the end of every semester, for the respective courses. The improvement actions related to learning outcomes, curriculum, and course management are discussed with the course instructors and then submitted to the Quality Committee and Curriculum Committee for approval.

The course assessment results are also recorded in the annual Quality/Assessment Report for monitoring and feedback at the program level.

These approved improvement actions are then submitted to the department chairperson to be included in the decision-making process and continuous enhancement of the program.

Evaluation Process of the Program Learning Outcomes

The evaluation process or closing the loop of student achievement (or learning) of the program learning outcomes starts after the completion of the assessment cycle which usually takes 2-4 years to complete depending on the number of the program learning outcomes. Every academic program prepares an annual program assessment report which includes an analysis of each PLO assessed along with the recommendations for improvement actions. This is followed by a comprehensive report on the achievement of learning outcomes at the end of the assessment cycle.

Evaluation Process of the Institutional Learning Outcomes

The evaluation process or closing the loop of student achievement (or learning) of the institutional learning outcomes starts after the completion of the assessment cycle which usually takes 2-4 years to complete. The institution prepares a report every 4 years on the achievement of learning outcomes.

The university assessment committee reviews the annual assessment reports and provides feedback to the programs concerning assessment methods and the use of their findings. Each program must identify two assessment coordinators who will be responsible for developing, implementing, and maintaining the program assessment efforts, coordinating meetings with faculty to discuss assessment findings, and developing and monitoring the action plans. The committee works closely with the Departments that teach the General Education courses to develop, monitor, and review their assessment plan and communicate the findings to assessment coordinators from all colleges.

Examples of improvement Actions

1. Change of CLOs

2. Change of teaching strategies
3. Change of assessment method
4. Change of course contents.
5. Adding a core course to strengthen the achievement of a PLO.

N. Process for Updating the Learning Outcomes

Course Learning Outcomes

A change in the course learning outcomes is considered as a major change in the curriculum. The course coordinator can submit a change request form to the curriculum committee at the end of the academic semester, stating the valid reason for changing the CLO along with the revised CLO-PLO mapping. The curriculum committee validates the request and then seek approval of the Department.

Program Learning Outcomes

A change in the program learning outcomes is considered as a major change in the curriculum. The Curriculum Committee Coordinator can submit a change request form to the Department Council at the end of the assessment cycle, stating the valid reason for changing the CLO along with the revised CLO-PLO/Curriculum mapping. The Department Council committee validates the request from various perspectives and then seek approval from the College Council. This request is finally sent to the Institutional Curriculum Committee (ICC) for its approval.

Institutional Learning Outcomes

A change in the institutional learning outcomes is considered as a major change at the institutional level. The Teaching and Learning Center (TLC) approaches the Institutional Curriculum Committee (ICC) with a request for changing the ILO(s) stating the valid reason. The change should be aligned with the existing Program Learning Outcomes of the current academic programs. Based on the revised PLO-ILO mapping the ICC can approve or reject the change request. This request is finally sent to the University Council for its approval.

Refer to the Assessment Handbook for the detailed process.

O. Curriculum Review and Development

PSU strives to provide high-quality educational programs that satisfy the highest ideals of the students' education and well-rounded development, while simultaneously meeting "market needs" and fulfilling the objectives of its declared mission. This requires that all academic programs should be continuously monitored, reviewed, and updated every 5 years. Five-year reviews are intended to ensure that curricula of programs continue to meet the educational needs of students and the objectives of the university. These functions encourage ongoing discussions about curricula and pedagogy, maintaining an ongoing educational assessment plan, and assuring the quality and integrity of the university's academic programs.

PSU has a [Curriculum Review and Development policy](#), which is applicable to both graduate and undergraduate programs. This policy provides an overview of the curriculum development process and suggests a series of steps to follow in Curriculum Review. This policy provides guidance on the process for changes and additions with respect to credit-bearing courses or academic programs and outlines the roles of administrators and committees at the college and university levels within this process.

This Curriculum Review and Development also identifies the university committees associated with the curriculum and their responsibilities. The Institutional Curriculum Committee (ICC) is the university committee that oversees undergraduate and postgraduate curricula and reports to the Vice President of the Academic Affairs office.

1. New Program Design Process:

The following process is followed in the introduction of a new program:

1. Prepare a feasibility document showing the need for the program and its importance.
2. Submit a request for introducing the program to the Department and College Councils.
3. If approved, start the design process as follows:
 - a. Survey existing and related programs at local (national and regional) and international levels; identify the best practices regarding program structure, courses offered, pedagogy, and evaluation.
 - b. Prepare a report showing the results collected in step (a) above.
 - c. Derive the new program structure. Build up a detailed program and course specifications.
 - d. Prepare a full proposal describing the new program.
 - e. The final program document should be prepared according to the structure below:

New Programs Report structure:

- A. Introduction
- B. Program Needs Analysis
- C. Program Objectives
- D. Program Learning Outcomes
- E. List of Courses
- F. Degree Plan
- G. Course Descriptions and Specifications.
- H. Program requirements
- I. Preliminary Implementation Plan

- f. Seek approval for the new program in the College Curriculum Review Committee in addition to the Department and College Councils.
4. Raise the new program documents to the Institutional Curriculum Review Committee.
5. The Institutional Curriculum Review Committee verifies that the raised program proposal satisfies the basic requirements, and if so, prepares a report and raises it for approval by the University Council.
6. The University Council seeks the views of at least two external reviewers before taking the final decision.
7. Based on the reports of the external reviewers, the University Council takes the appropriate decisions.
8. The final decisions are reported to the Vice President for Academic Affairs

2. Curriculum Review Process

Each program and department within the university is responsible for conducting a review of its academic curriculum every 4-5 years to meet the demands of the current market needs to be based on feedback from stakeholders (e.g., alumni, students, employers, faculty members, etc.) the College Advisory Board, and an Independent Reviewer.

All courses and requirements shall be reviewed and approved first by the College Curriculum Review Committee, the College Council, Institutional Curriculum Committee then the University Council.

Each department or program should design and conduct a review in the manner it regards as most appropriate. Any existing materials on the current curriculum may be

used as resources. Upon completion of the review, the Department Chair forwards a report to the Vice Dean/Dean of the College to be added to the College Council for approval.

This report will include the following points:

- a. An Executive Summary of the process used to conduct the review and its main conclusions. The summary will include the minutes of the meeting from the College Curriculum Review Committee.
- b. The completed form(s) (e.g., new course, course revision, new program, course deletion, etc.) are found on the PSU Policy website.
- c. A copy of the updated syllabus along with the updated course specification based on the curriculum review.

a. Major Changes

Major Reviews conducted every Five Years:

A major change is one that significantly affects the program learning outcomes, structure, organization, or delivery of a program or the basis for its accreditation. These are reviews that may lead to changes in the courses offered at different levels and categories and the general program structure. Accordingly, major reviews need to be performed using a formal process (see the Major Review Process below) and require the approval of the Department Council, College Council, and University Council. The results of these reviews should be conveyed to the Vice President for Academic Affairs & Research.

This flowchart in Figure 18 provides scientific guidance on the major curriculum review process for academic programs. Each program within the university is responsible for conducting a review of its academic curriculum every 4-5 years.

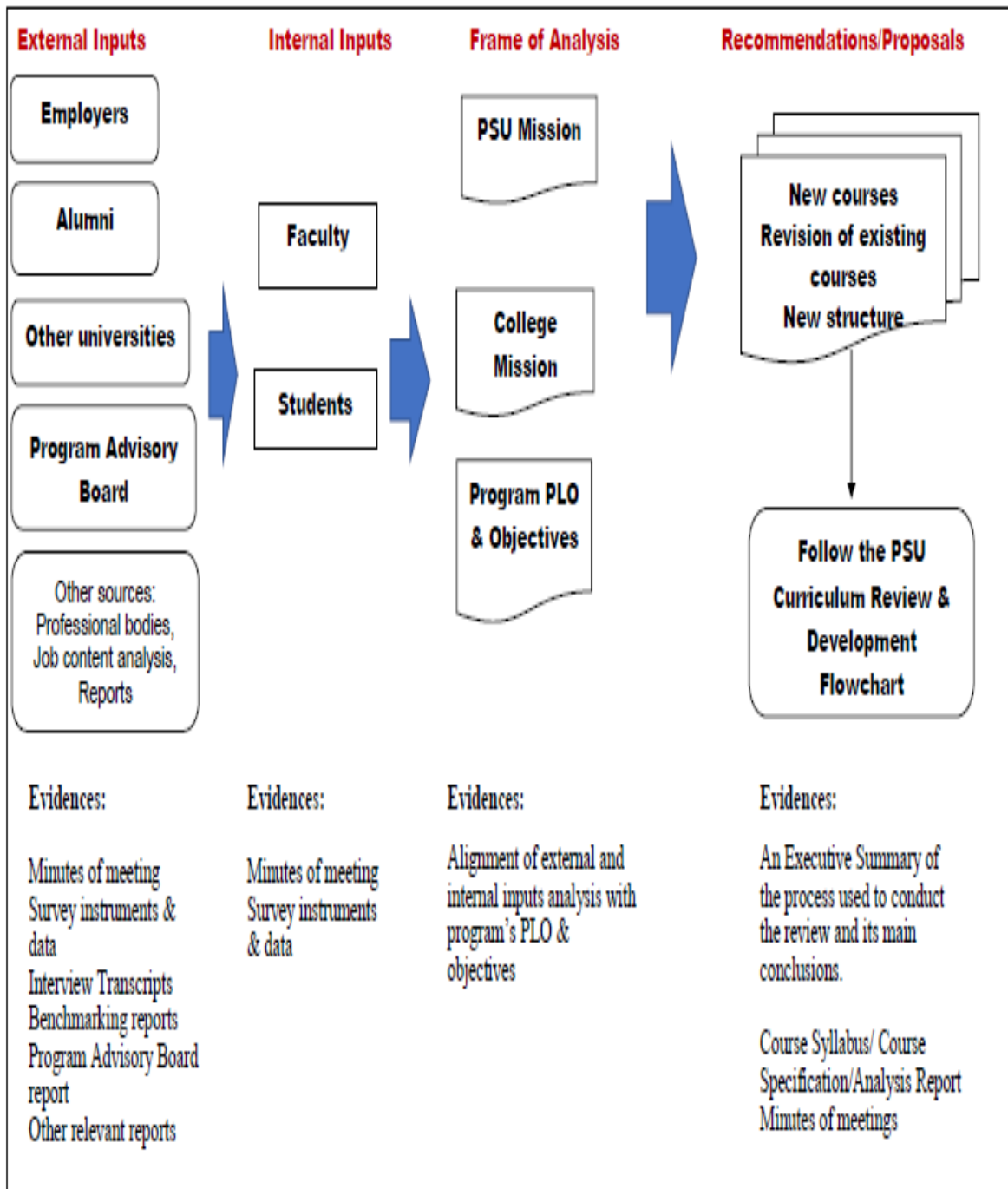


Figure 20: The major curriculum review process for academic programs

Major Program Review Process:

The following process is followed in major program reviews:

1. Collect and monitor information and feedback regarding the current program from stakeholders and related organizations. The Curriculum Review Committee in each department may use different approaches to collect information and feedback from stakeholders. Stakeholders include faculty, students, employers, industry organizations, parents, etc. Related organizations include 3 Accreditation Organizations, Standards Organizations, and Curriculum Development Organizations, local and international universities.
2. Assess the current program given the information compiled in step 1 above.
3. If there is a need for change or update, submit a "Curriculum Update" request to the Department Council.
4. If the Council approves, perform the indicated modifications, update, and submit a full document to the Department Council.
5. On approval by the Department Council, the document is raised to the College Curriculum Review Committee.
6. On approval by the College Curriculum Review Committee, the document is raised to the College Council.
7. On approval from the College Council, the updated curriculum document is raised to the Institutional Curriculum Review Committee
8. The Institutional Curriculum Review Committee ensures that the raised report is complete and has gone through the full process.
9. If the raised report is complete, the Institutional Curriculum Review Committee raises the report to the University Council for action.
10. Based on the size and level of recommended changes, the University Council seeks the views of at least two external reviewers.
11. Based on the recommendations of the external reviewers, the University Council takes the necessary action and informs the respective Department.
12. The final decisions are conveyed to the Vice President for Academic Affairs.

b. Minor Changes

Continuous Monitoring of the Curriculum for Minor Updates:

The main purpose of these reviews is to ensure that course materials are properly updated and delivered using appropriate pedagogical approaches. These reviews do not affect the program structure or introduce any major changes. Accordingly, they are informal and do not need to cross-department borders. However, the results of these reviews should be reported to the Vice Dean/Dean of the College and the College Council.

This flowchart in Figure 19 provides guidance on the curriculum review process for academic programs and outlines the roles of administrators and committees at the college and university levels within this process. It is based on the PSU Curriculum Review and Development Policy (Code: TL0001).

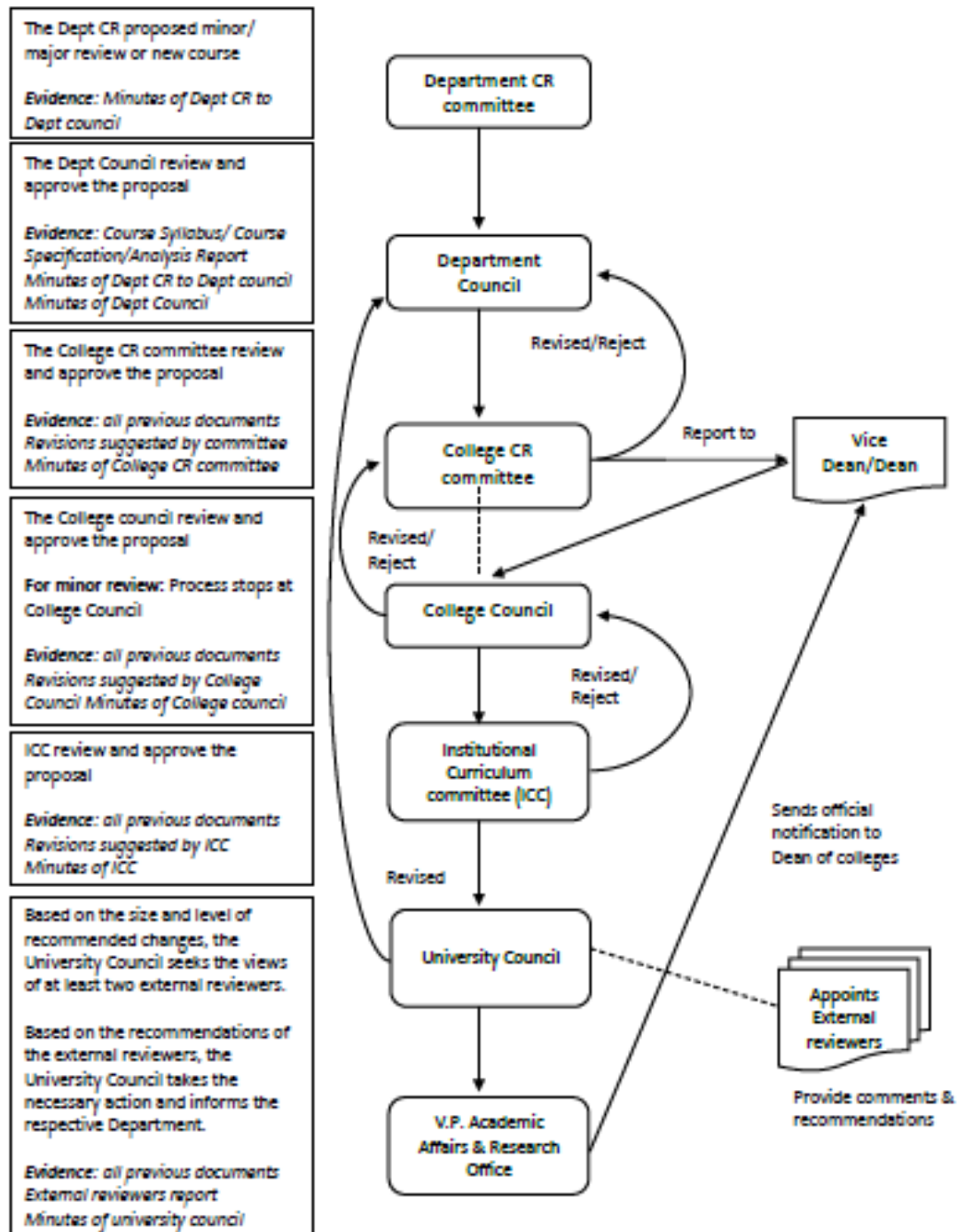


Figure 21: Guidance on the curriculum review process for academic programs and outlines

3. Templates for the Curriculum Review and/or Development Process.

1. [New Undergraduate Program Form](#)
2. [New Undergraduate Program Form](#)
3. [New graduate Program.](#)
4. [ICC-Course change form](#)
5. [ICC-Course change form](#)
6. [ICC-External Reviewer](#)
7. [ICC-External Reviewer](#)
8. [ICC-New Course Form](#)
9. [ICC-New Course Form](#)
10. [MajorChange-form-blank](#)
11. [MajorChange-form-blank](#)
12. [Minor proposal form-blank](#)
13. [Minor proposal form-blank](#)
14. [PSU CR Flowchart](#)
15. [PSU Major CR Flowchart](#)

P. Quality Assurance Administrative Calendar

All academic programs are required to follow the PIMRU (Plan, Implement, Monitor, Review, and Update) cycle for delivering a program in accordance with the quality standards established by the PSU which are in turn aligned with the national and international education standards.

PSU prepares the DQAD calendar for the Department Chairpersons and the faculty members at the beginning of the academic year which is aligned with the PSU academic calendar. The purpose of the detailed QA calendar is to keep track of the submissions of all the important documents to improve monitoring and review processes for continuous quality improvement in the field of teaching and learning.

Faculty Member

No	Name of the Document	Timeline
Beginning of the Semester (Week 1 to 2)		
1	Submission of Course Specifications to the chairs	End of Week 1 of the term
2	Upload Course Outlines to LMS	End of Week 1 of the term
3	Updating the assessment schedule on LMS	End of Week 2 of the term
4	Door Class schedules with office hours	End of Week 2 of the term
5	PSU Academic Integrity & Syllabus Acknowledgement Form	End of Week 2 of the term
During the Semester (Week 3 to 16)		
6	Submission of 20% midterm grades	Before the last day for dropping the course with W
7	A compiled report on Low GPA students	End of Week 8 of the term
8	Academic Advising Logbook	Throughout the semester
9	Maintaining Grade book on Moodle	Throughout the semester
10	DN forms (Progress Report, Attendance, and midterm grades till date)	End of Week 12 of the term
11	Submission of 60% of midterm grades on LMS	End of semester (before end of week 15)
12	Faculty Satisfaction Survey	Week 10-12 of the 2 nd academic semester or before the annual faculty evaluation

13	Update Faculty portal	This should be updated throughout the semester and submitted during week 12.
14	Submit annual faculty Evaluation evidence	Week 10-12 of the 2 nd academic semester
15	Sign annual faculty evaluation	Week 10-12 of the 2 nd academic semester
16	Submission of the final grades	Final exams will be during weeks 16-18
17	Submission of the Final Exam Student answers	Week 16-18 of the term
During the Semester (Week 17 to 18)		
18	Prepare section and combined Course Report	After the semester exam
19	Submit e-course portfolio	After the semester exam

Table 6: Quality Administrative Calendar for Faculty (Week 1 to Week18)

Department Chairpersons

The calendar helps the Department Chairpersons to maintain proper documentation for the academic programs that are responsible for.

No.	Name of the Document	Timeline
1	Annual Action Plan for the next academic year	End of the academic year
2	Program Specification <i>Note: The Program Specification should be changed in case any curriculum changes have been made in the program, otherwise old copy can be submitted)</i>	End of Week 5 of the 1 st term
3	Submission of NCAAA KPIs at program or department level for the previous year	End of Week 7 of the 1 st term
4	Annual Program Report of the previous academic year	End of Week 7 of the 1 st term
5	Updates on the Academic Advising List	End of Week 2 of each term
6	Compiled report of low GPA students	End of Week 5 of each term

No.	Name of the Document	Timeline
7	Receiving 20% midterm grades from the faculty	Before the course withdrawal date with W
8	Teaching Load (First draft)	As asked by the higher management
9	Recruitment Requirements	As asked by the higher management
10	Annual Budget	As asked by the higher management
11	List of Textbooks for the next academic semester	Week 6-7 of each term
12	Chairperson or Peer review of Classes	Week 4 onwards of the term or as arranged in the individual department but prior to week 15.
13	Faculty Annual Evaluation	End of each year. Results signed evaluations, etc. to be submitted to the Vice President's office.
14	Annual Strategic Plan Progress Report of the Program	End of each year. To be submitted to the Director Strategic Planning and Development Office
15	Department meeting minutes and closing the loop on the topics discussed in the meeting	Week 14 of each term
16	NCAAA Template -B	Week 5 of 2 nd term
17	Help CSI in preparing Alumni Database	End of Week 8 of each term
Extra-Curricular Activities for the Department in collaboration with the various Administrative Units		
18	A report on the professional development activities w.r.t teaching and learning Concerned office: Teaching and Learning Center	End of the academic year
18	A report on the research activities Concerned office: Research and Innovation Center	End of the academic year
19	Community Service Report from the Community Service Office along with the results of the relevant NCAAA KPI Concerned office: Community Service Center	End of the academic year

No.	Name of the Document	Timeline
20	A report on the extra-curricular activities (workshops, field trips, student club activities, Academic Advising) Concerned office: Deanship of Student Affairs	End of the academic year

Table 7: Calendar for Department Chairpersons

Head of the Administrative Offices

No.	Name of the Document	Timeline
1	Annual Action Plan for the next academic year	Beginning of the academic year
2	Employee Satisfaction Survey	End of the academic year
3	Annual Strategic Plan Progress Report End of each academic year.	End of the academic year
4	<i>Submission of data for calculating NCAAA KPIs at program/Institutional level for the previous year</i>	End of the academic year
5	Office meeting minutes and closing the loop on the topics discussed in the meeting when possible	End of the academic year

Table 8: Calendar for Administrative offices

Q. Template for the Program and Course Documents

The following documents are used at different levels

Institutional Level

1. [5-year Strategic Plan](#)
2. [Annual Action Plan](#) for Administrative Offices
3. [Meeting Minutes](#)
4. Key Performance Indicator results -
 - a. [Institution](#)
 - b. [ETEC NCAAA](#)
5. [Annual Accomplishment Reports](#)

College Level

1. [5 - year Strategic Plan-Colleges](#)
2. [Annual Action Plan](#)
3. [Meeting Minutes](#)
4. [Annual Accomplishment Report](#)

Program Level

1. [Program Specification](#)
2. [Key Performance Indicator results \(Program\)](#)
3. [A report on independent verification of student achievement](#)
4. [Annual Program Report](#)
5. Teaching loads
6. [Faculty schedules](#)
7. [Faculty Annual Performance Evaluations forms](#)

Course level

1. [Course Specification](#)
2. [Course Report](#)
3. [E-Course Portfolio](#)
4. [Grade Inflation Report](#)

The guidelines for writing program and course documents are available on the PSU website <https://www.psu.edu.sa/en/QAC-guidelines>

R. Monitor Quality of Core Courses Taught by other Departments (QAC)

The arrangements adopted at PSU for monitoring the quality of courses taught by the other department(s) follow a process that is aligned with the PIMRU quality cycle shown in Figure 8.

Plan: The department for which the course or courses are offered shares the course objectives to the serving department, based on which the Course Specifications are prepared including Course Learning Outcomes (CLOs), Course Contents, Teaching Strategies, and Assessment Methods.

Implement: The course specification approved by the department should be used in both the campuses, based on which the course syllabi are prepared. The CLOs, course contents, tutorials, laboratory exercises, textbooks, number of assessments, and their weightage should be the same in the course syllabi for multi-sections.

Monitor: The quality of course delivery is monitored only by the serving department.

Review: Every course instructor is required to prepare a course report for his/her section. The course coordinator prepares a combined course report based on all the course-section reports. The final improvement action plan should be agreed upon by all the course instructors teaching the course.

The serving department is required to share the combined course report with all the departments whose students enroll for the course as the core requirement for the program. They can provide suggestions for updating the course content, teaching strategies, or assessment methods.

Update: The serving department considers the requests if feasible and updates the course specification based on the recommendations from the course report or the department.

Note: This applies to only core courses of any program offered by the other department(s).

S. Quality Assurance Measurement Courses with Multiple Sections.

In alignment with providing quality education, the following procedure is applied to all courses offered by the academic programs or service departments, which results in effective and smooth coordination between the course instructors in delivering courses across the multiple sections.

A. Planning phase:

This planning phase starts at the beginning of each semester and involves the following steps:

1. The course specification should be designed by the course coordinators in the spring semester to be used for the following academic year. The same course specification can be used for at least two terms unless there is proper justification for updating it.
2. The number of exams, home assignments, and the class tutorials in a course specification should be discussed with the course committees to see if a reasonable workload is given to students in each course. The workload should not exceed the learning hours of a course. Refer to Guidelines for learning hours.
3. The assessment schema should be unified, allocating a reasonable proportion of the final grades to exams, class tutorials, discussions, home-based assessments like projects, homework assignments, and presentations.
4. The textbooks and their alternatives (if textbooks are not available) identified for a particular course should be used in all the course sections. The list of these textbooks should be submitted by each of the course coordinators to their respective curriculum committee and get approved by them.
5. The course coordinator should share the learning resources among other instructors teaching the same course. The best teaching practices should be shared as well.
6. The final exam date is recommended to be the same for courses having multiple sections offered preferably on both campuses.
7. The course coordinator chooses the assessment tools for assessing the course learning outcomes in all the course sections.

B. Implementation phase:

1. Faculty members teaching the same course should use a unified course specification, course syllabus, and textbook. *NOTE: No changes in the course*

specification are made during the academic semester unless approved by the curriculum committee and the department.

2. The course topics covered by the course instructor should be the same which will be based on the approved course specification.
3. Each course coordinator will meet every month with the course instructor to follow up on the course coverage in terms of teaching and learning strategies based on meeting the outcomes of the respective courses.
5. The course coordinator should regularly share the learning resources among other course instructors. The best teaching practices should be shared as well.

C. Assessment phase:

1. The preparation of major and final exams should be done by all course instructors (full-time or part-time) teaching the same course. They can divide the preparation of the exam by question, by topic, or by Course Learning Outcomes (CLO). The goal is to have unified major and final exams when possible.
2. In case the exam cannot be unified, several versions of the exam should be made, using the same assessment strategy.
3. Rubrics should be defined for each assessment.
4. The course coordinator/peer reviewer is responsible for approving the final version of the major and final exams along with their rubrics and answer keys.
5. The project work submitted by the students for some selected courses should be compared and evaluated by the other instructors for verification of the teaching standards.

D. Evaluation Phase

1. The post-exam phase should include the moderation of students' exams to ensure fair grading and adherence to the rubric/answer key designed for the respective major and final exams. A cross-grading scheme or a team grading scheme (**Refer to the [independent verification of student achievement process](#)**) can be implemented mainly for the courses offered simultaneously on both campuses.
2. The course instructor is responsible for preparing the course learning outcome results using direct and indirect methods and analyzing each outcome to see if each of them has achieved the attainment level. Recommendations for continuous improvement in the achievement of each CLO are made accordingly. The course coordinator is required to prepare the aggregated CLO result based on all the course sections. *Refer to the Program Assessment Handbook for CLO assessment procedures.*
3. The course report should be submitted at the end of the term by every course instructor for his or her sections, in which the concerned course instructor will analyze the problems encountered while teaching the course during the term and

possible compensating action. This will be later used by the course coordinator for preparing a combined course report. The combined course report will be discussed with all the course instructors and analysis is done at the course level. The priorities of improvement will be finalized for the course.

4. **Grade Inflation / Deflation Report**

1. The course instructor should prepare the Grade Inflation / Deflation report for his/her course section. However, the Course Coordinator will analyze the unusual distribution of grades at the course level.

The criteria for grade inflation are as follows:

For a course having more than 10 students, grade inflation is considered only if the number of students obtaining A+, A, and B+ is more than 50%.

For a course with 10 students or fewer, grade inflation is considered only if the number of students obtaining A+, A, and B+ is more than 70%.

The criteria for grade deflation are as follows:

For a course having more than 10 students, grade deflation is considered only if the number of students obtaining F, D, D+ is more than 50%.

For a course with 10 students or fewer, grade deflation is considered only if the number of students obtaining F, D is more than 70%.

The department chairs are responsible for monitoring the cases of grade inflation or deflation. Department chairs shall follow the following process:

- a. Each instructor is asked to submit justification for all courses having grade inflation/deflation.
- b. The department chair shall review all grade inflation /deflation reports (old reports and new reports) to identify the source of the case, which can be the faculty member, the course, students' behavior, etc. Based on the result of the review, the department chair should implement necessary interventional action.
- c. At the end of each semester, the department chair shall prepare a grade inflation /deflation report and submit it to the College Dean / Vice-Dean. This justification or the action that was taken for improvement is also mentioned in the Annual Program report.

T. Independent Verification of Student Achievement Process

The academic programs at PSU are required to implement the process of independent verification of student achievement once a year within the institution (internal) for at least two of the core courses offered by the department.

1. The department or course coordinators can nominate the faculty members as the reviewers/cross-graders for the courses selected in step 1 and fill the form shown in [Appendix – A](#).
2. The reviewers/cross-grade can be either an instructor from the relevant course group or instructors teaching the same course within or across the campuses.
3. The reviewers/ cross graders will randomly select students' answer sheets based on the following criteria:
 - For the number of course sections less than 3, choose 3 answer samples from each section.
 - For the number of course sections between 3 to 7, choose 2 answer samples from each section.
 - For the number of course sections more than 7, choose 1 answer sample from each section.
4. The course instructor will photocopy the student answers from the final exam before marking them and hand them over to the cross-grader/reviewer along with the answer key and the grading guidelines/rubrics.
5. The internal reviewer/ cross-grade will do the second marking of the selected sample answers based on the answer key and the grading guidelines.
6. The academic departments can use paired t-tests (optional) or any other suitable method to compare the two population means and calculate the confidence interval for the grades' mean difference. This test helps in determining the degree of confidence that all sections within a campus or across the campuses are grading the exams fairly and according to the predefined grading guidelines. If there is a major discrepancy in the marks, then other papers may also be reviewed. In some cases, the instructor) may also be asked to review or change the grades.
7. When the internal reviewer/cross–grader confirms the marks of the instructor (first marker), then a report is prepared by the Course Coordinator using a form shown in Appendix- B. The approved report with recommendations (if any) is sent to the Department Chairperson and the QA Committee at the department level.

8. The QA Committee at the department level will analyze the grading of the instructor and the internal reviewer/cross-grader and prepare a compiled report with general or specific recommendations (if any) on the verification of student achievement within the college or institution.

9. The QA Committee at the College level (CQC) in coordination with the College/Department Final Examination Committee will ensure that the department conforms to the process of student verification. The CQC will approach the DQAD-QAC in case of any quality matters raised.

[Appendix- A](#)

[Appendix- B](#)

U. Quality Assurance in the Cooperative Education Program

One of the programs offered at Prince Sultan University is the Cooperative Education Program (CO-OP) that links three major stakeholders: students, employers, and the university community. PSU COOPERative (CO-OP) education provides the opportunity for successful integration of work and study. A CO-OP is a pre-professional learning experience that offers meaningful, practical work experience related to a student's field of study or career interest. Coop allows students to apply principles and theory learned in the classroom in a professional environment and, at the same time, exposes the students to the practical environment of selected organizations during the training period. Through the CO-OP, students are provided an opportunity for career exploration and development as well as a chance to learn new skills.

The student is the major stakeholder in the success of the CO-OP program. He/she must play an important role which is divided into 3 periods of the CO-OP training program.

By participating in the COOP program, students should:

- Gain practical work experience related to their major field of study.
- Clarify their academic focus and career goals.
- Integrate/apply classroom learning in a working environment.
- Gain an understanding of professional cultures and expectations.

COOP Goals

By participating in the COOP program, students should:

Gain practical work experience related to their major field of study.

Clarify their academic focus and career goals.

Integrate/apply classroom learning in a working environment.

Gain an understanding of professional cultures and expectations.

COOP General Learning Outcomes

After completing the COOP program, students should demonstrate the ability to:

Knowledge

Recognize the need for and engage in lifelong learning.

Comprehend contemporary issues in the workplace.

Skills

Apply classroom knowledge to actual work situations

Evaluate and apply constructively professional feedback.

Demonstrate effective communication skills.
Illustrate the ability to use technology in the workplace.

Values

Recognize professional and ethical responsibility
Demonstrate the ability to work as a part of a multidisciplinary team.
Appraise & resolve conflicts in a diverse environment.
Employ job search skills & decision-making.

Rules and Regulations:

A. Enrollment Criteria:

Students from the Departments of Computer Science, Information Systems, Finance, Marketing and Accounting, Applied Linguistics, Translation, Law, Communications and Networking Engineering, Engineering Management, Architecture Engineering, Interior Design Engineering are required to approach the Department COOP Coordinator with applications for enrollment if they meet the following criteria:

1. Obtain permission from the respective department.
2. To join the Cooperative Education Program, the student shall be requested to complete all courses except the Cooperative Education course. As an exception, the student may register for the Cooperative Education course and then study one semester provided that the credit hours of the courses in this semester do not exceed the maximum of twenty (20) credit hours. Refer to Table No.9
3. When the student enrolls in the Cooperative Education Program, his/her cumulative grade point average (GPA) must not be less than 2.00 on a 4.00 scale. The cumulative grade point average (GPA) of the student may be recalculated based on the decision of the Board of Trustees if the case so requires. A grade for the Cooperative Education Program may also be surmised when calculating the GPA. Refer to **Table No.9**
4. During enrolment in the Cooperative Education Program, the student must be totally free. It should be emphasized that taking any credit hours/ courses during the period of the Cooperative Program is NOT permitted.
5. Register for the courses intended for students seeking cooperative education according to specialization.

Case	GPA without recalculation	Remaining Credit Hours to graduate excluding COOP credit hours	GPA after re-calculation ¹ , assuming COOP grade to be "A"	Decision to register for COOP	Clarification for Decision
I	Both GPA (General 2 and Specialized 3) greater than or equal 2.0 on a 4.00 scale	Less than or equal to 20	No Need to recalculate	APPROVE	This is based on the university council decision but with the discretion of the dean of the college
		More than 20	No Need to recalculate	DiS-APPROVE	The student should take some courses to reduce the remaining credit hours to 20 or lower and have the discretion of the dean of the college.
II	Either GPA (General or Specialized) less than 2.0 on a 4.00 scale	Between 0 and 20	No Need to recalculate	DiS-APPROVE	The student might not be able to raise his/her GPA after finishing the COOP and this will require him to take another semester. In this case, the student is required to take courses to raise the GPA prior to COOP
		0	Both GPA (General and Specialized) after recalculation is equal or greater than 2.0	APPROVE	Since after recalculating the GPA with the assumption of a grade "A" for COOP will make the student GPA equal to 2.0, then he/she is allowed to take COOP
		Either GPA (General or Specialized) after recalculation is less than 2.0	DiS-APPROVE	Since after recalculating the GPA with the assumption of a grade "A" for COOP will not make the student GPA equal to 2.0, then he/she is required to take additional or repeat some courses to raise GPA prior to taking COOP	

Table 9: COOP Eligibility Table for Students

¹re-calculation means taking off the effect of the failing grades from calculating the GPA in the student's transcript. The student can have up to 24 credit hours to be re-calculated until the GPA reaches 2 whichever comes first. The result of the recalculation can be obtained from the Registrar.

² General GPA is defined as the cumulative GPA for all courses throughout his/her study

² Specialized GPA is defined as the cumulative GPA for all specialized courses throughout his/her study only, i.e. In Accounting Program, specialized courses are the courses whose code is **ACC**

Note: When the student has less than 12 credit hours remaining excluding the coop, he has the right to pay by credit hours.

B. Duration of the Coop Program/Internship:

The Cooperative Education Program is a 28-week program, which is equivalent to 10 accredited academic hours. The accounting Internship program is a 12-week program, equivalent to 3 accredited academic hours. It is scheduled to be held in the following semesters:

1. The first (fall) semester.
2. The second (spring) semester.
3. The third (summer) semester.

C. Selection of Training Organizations:

The Cooperative Education Administration is responsible for directing students for cooperative education. The training will take place at the location of the selected organization inside or outside Saudi Arabia.

Students shall have the option of suggesting the place of training, subject to the Department's approval.

D. Cancellations or Alterations under the Cooperative Education Program:

This is done according to the regulations related to the Cooperative Education Program and standard University procedures.

E. The Evaluation Scale:

Grade Range	Letter Grade	Description
95-100	A+	Exceptional
90-94	A	Excellent
85-89	B+	Superior
80-84	B	Very Good
75-79	C+	Above Average
70-74	C	Good
65-69	D+	High Pass
60-64	D	Pass
Less than 60	F	Fail

Table 10: Grade Evaluation Scale

List of Standard Forms used in the COOP Program

Forms used by the students	
Form #	Description
S01-E	Coop Application Form
S02-E	Student Joining Report
S03-E	Student Progress Report
S04-E	COOP Report template
Forms used by the Training Organization	
T01-E	COOP Inquiry Form

T02-E	Student Work Plan
T03-E	Midway Evaluation Report (Organization)
T04-E	Final Evaluation Report (Organization)
Forms used by the COOP Committee	
U01-E	Field visit Evaluation
U02-E	Feedback on Student's Progress Evaluation
U03-E	Final COOP Approval Report
U04-E	COOP Advisor Final Evaluation
U05-E	COOP Examiner(s) Final Evaluation
U06-E	COOP Final Evaluation Report

Table 11: COOP Forms

COOP General Grade Distribution

Grade Distribution	Percentage	Evaluated by
1. Employer's Evaluation	50%	COOP employer
2. Field and office follow-up visit	5%	COOP Advisor
3. Progress Report No. 1	5%	COOP Advisor
4. Progress Report No. 2	5%	COOP Advisor
5. Progress Report No. 3	5%	COOP Advisor
6. Presentation	10%	COOP Examiner
7. Co-op final report	20%	COOP Examiner and COOP Advisor
TOTAL	100%	

Table 12: COOP Grade Distribution

COOP Calendar Terms: xx3-xx1 or xx2 –xx3

Seq. No.	Activity	Date
1	Starting day of COOP	
2	Last day for receiving S01 (Joining/ Commencing Letter) from the COOP students	Week 1
3	Last day for submitting the approved COOP work plan	Week 3

4	Submission of the evaluation on 1 st progress report by the COOP advisors to the coordinator (** see <i>table below for remaining reports due dates</i>)	Week 8
5	Submission of the evaluation on 2 nd progress report by the COOP advisors to the coordinator (** see <i>table below for remaining reports due dates</i>)	Week 16
6	Submission of the evaluation on 3 rd progress report by the COOP advisors to the coordinator (** see <i>table below for remaining reports due dates</i>)	Week 22
7*	<i>Start writing Final COOP Report</i>	Week 22
8	Submission of first draft of the final report to the COOP advisors	Week 28
9	Last day for submitting two copies of Modified final report to the examiners	Week 29
10	Last day of COOP	Week 28
11	Presentations	As scheduled by the COOP Coordinator

Table 13: COOP Calendar

* Students are encouraged to start writing the final report earlier than the above date.

Refer to the COOP Handbook for the COOP training [guidelines](#), detailed information about the course syllabus, final report structure, final presentation, and other related contents.

V. Electronic Course Portfolio

A well-organized course folder is very important in documenting the planning, process, and outcomes of a single course. The course instructor is required to archive the course syllabus, learning resources, assignments, assessments, grades, learning outcome Assessment Results at the end of every academic semester.

Course Portfolios: A course portfolio will be maintained for each of the taught courses. The course teacher will use the collected material to assess the achievement of course learning outcomes.

Course Portfolio Checklist

1. Course Syllabus
2. Syllabus and Syllabus Acknowledgment Form for the current semester
3. Samples of teaching materials: Course manual or notes, Lecture notes, Additions, and revisions, Support materials, Departmental resources, Expected format for assignments for current semester
4. Assessment: Assignments, Rubrics, Quizzes, Major Exams, Final Exam, and homework assignments (answer keys) for current semester
5. Samples of students' work (only 3 of each Assignment and assessment task for current semester=Best, Average, Lowest)
6. E-Register Grade Sheet (Grades and Statistics)
7. Grade Inflation and Deflation Justification
8. Assessment of Learning Outcomes:
 - a. CLO assessment,
 - b. Course Exit Survey and Results.
 - c. PLO report (depends on assessment cycle) for current semester
 - d. Course Report
9. LMS Documentation for current semester
10. Student Evaluations for the current semester

The sample of the eCourse Folder is shown in the [link](#).

W. Internal Program Review

Internal assessment is the process in which the Deanship of Quality Assurance & Development (DQAD) responsible for internal quality arrangements for academic and administrative units, assesses the level of quality assurance measures adopted and practiced by an academic program with reference to the [program eligibility](#) criteria specified by the ETEC-NCAAA.

Purpose

To assess whether an academic program is eligible for seeking program accreditation or reaccreditation.

Scope

The internal Assessment process applies to both undergraduate and graduate programs Assessing the quality assurance measures for teaching and learning and its support services.

Deliverables & Performance Indicator

The deliverables of the internal assessment process are listed below:

#	Name of the Documents	Responsible Entity
1	Internal Assessment Report Checklist	Review Committee
2	A Report on Internal Review Process	Review Committee
3	Program Improvement Action Plan	Program Chair
4	Progress Report of the Action Plan	Program Chair

Table 14: Internal Assessment Process documents

Contribution of Internal Assessment to achieve the PSU Strategic Key Performance Indicator:

The performance indicator P.S.3.1 is the proportion of programs internally assessed every year and the target is as agreed in the strategic plan

Internal Assessment Process

The following are the steps of the internal Assessment Process:

1. DQAD/QAC sends a memo to the Internal Assessment Committee Chairs about the timeline for the internal review process for the programs offered in the college.
2. DQAD/QAC sends a memo to the Dean of the College about the timeline for the internal review process for the programs offered in the college and the names of the Internal Assessment Committee members.

3. DQAD/QAC sends a memo asking the program chairs to upload the evidence based on the program eligibility checklist in the shared drive. The program chair uploads the required program documents/evidence in the Shared Drive.
4. The Internal Assessment Committee will review the program documents and confirm them with the required list of evidence. In case of any missing documents, the committee can request the Program Chair to upload them in the Shared Drive.
5. The Assessment Committee Chair will submit the first draft of the report to the Program Chairperson and discuss all the observations and recommendations with them. The Program Chair has the discretion to approve or reject any observation /recommendation provided he/she has a valid justification.
6. Based on the response from the Program Chair, the Assessment Committee Chair may revise the report.
7. The Assessment Committee Chair submits the final version of the Internal Assessment Report to the Dean- DQAD/QAC. In addition to the recommendations for the program, the report includes recommendations for the administrative offices providing supporting services.
8. DQAD/QAC will review and approve the Internal Assessment Report and share a copy of the report to the offices of the PSU President, Dean of the respective Colleges.
9. DQAD/QAC will request the Program Chairs for an improvement action plan based on the approved recommendations for the program.
10. DQAD/QAC will request the administrative office(s) to provide their action plan for the recommendations (if any) as mentioned in the internal assessment report for a program.
11. QAC will prepare a timeline to follow up with the recommendations and prepare a periodic report to the Dean-DQAD. The number of periodic reports might change based on the number of recommendations.

Guidelines for the Internal Review Committee

1. The Chair of the Internal Assessment Committee will conduct the first meeting appraising all members about the internal review process, program eligibility checklist, the expected evidence/documents, as well as their members' responsibilities.
2. The Chair will distribute the tasks among all the committee members.
3. All members use the Google Shared Drive folders prepared by the QAC and complete the template and report after reviewing the documents submitted by the program.

4. The Chair will meet again with the members, where he/she discusses the reports prepared by the members for the sections assigned to them and finalizes the report.
5. Constructive feedback must be given in the report.
6. Personal opinions should be avoided in the report. Every comment written in the report should have a reference(s) that are approved by the PSU.
7. The report should not use any external rule and regulation if it is not approved by the PSU.
8. Punctuality: The committee members must be punctual in completing the tasks assigned to them.
9. Confidentiality: The report should remain confidential and not be shared with any entity internal or external to PSU.
10. Templates: The Committee will use the following templates for reporting purposes.
 - [Internal Assessment Report Checklist -XXX PROGRAM TEMPLATE](#)
 - [A Report on Internal Review Process for the XXX PROGRAM TEMPLATE](#)
11. Institutional recommendations should be mentioned separately so that the responsible entities are involved in addressing them.

X. External Review

The Evaluation and Academic Accreditation Center (EAAC) is committed to guaranteeing that the quality of instruction and services at PSU, meet the highest excellence standards set by the national and international accreditation and certification agencies and organizations. Based on these accreditation standards, EAAC supports the mission of PSU by identifying areas of strengths as well as areas for continuous improvement in the short, medium, and long term. This is done by undertaking periodic self-evaluation of the core and supporting activities at PSU such as learning and teaching, quality assurance, research, community engagement, learning resources, and other Institutional support services. Thus, PSU is voluntary in applying for institutional and program-level external reviews. Please refer to the [External Review Policy](#).

National Accreditation

PSU is committed to the quality standards set by the National Center for Academic Accreditation and Evaluation (NCAAA) under the Education and Training Evaluation Commission (ETEC) in the Kingdom of Saudi Arabia. ETEC-NCAAA has two kinds of accreditation, namely: Institutional and Program based accreditation.

PSU adopts the NCAAA Quality Cycle in ensuring the quality culture embedded in its day-to-day operations. Figure 20 below shows the concerned DQAD Centers, EAAC, and report documentation of quality and self-study process to achieve the NCAAA program accreditation.

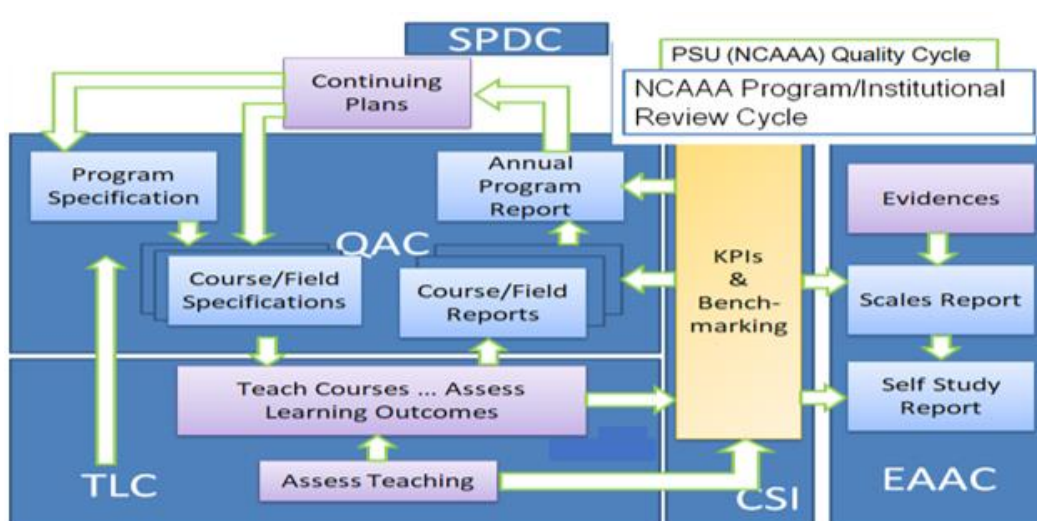


Figure 22: PSU (NCAAA) Quality Cycle

EAAC works closely with the Deanship of Quality Assurance and Development (DQAD) centers/units to ensure all the programs at PSU follow the PSU Quality Cycle. Please see table 14 below:

<u>DQAD</u> Centers/Units	Monitor the following
<u>Quality Assurance Center (QAC)</u>	Program Specification, Course/Field Specifications, Course/Field Reports, Annual Program Report
<u>Teaching Learning Center (TLC)</u>	Assessment Plan, Assessment Report
<u>Strategic Planning and Development Center (SPDC)</u>	Action Plan, Accomplishment Report
<u>Center for Statistics and Information (CSI)</u>	All NCAAA and PSU survey
<u>Policy Development Unit (PDU)</u>	Creation and monitoring of policies

Table 15: DQAD Centers and Units

Institutional Accreditation

In 2010 PSU – alongside the venerable pair of famed public universities KSU (1957) and KFUPM (1963) – were the first Saudi universities to be awarded full 7-year institutional accreditation by the NCAAA. Before 2010, PSU was already active and supportive of the initiatives of the NCAAA, and PSU was one of the universities that piloted the NCAAA Standards. Thus, PSU is taking the NCAAA Institutional Accreditation seriously, and it shows that PSU was fully accredited again by the NCAAA from 2017 to 2024.

PSU schedules the preparation for the subsequent institutional accreditation four academic years before the accreditation expires. Figure 21 below shows the relationships of EAAC with DQAD and the whole PSU community and their involvement in the effective and efficient preparation of the Institutional Accreditation.

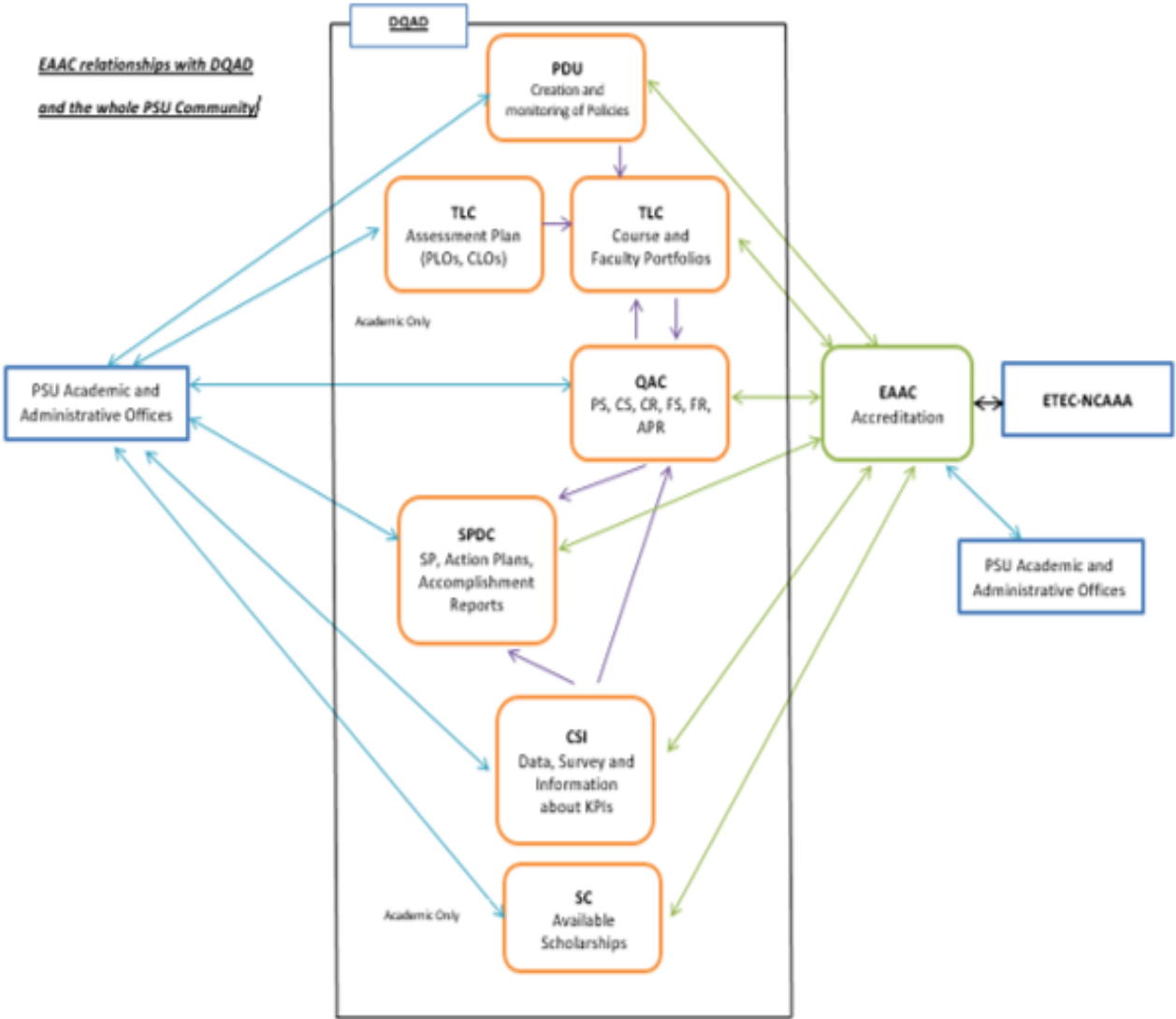


Figure 23: EAAC Relationships with DQAD and the whole PSU Community

The PSU community in coordination with the EAAC, prepare the first version of the Self-Evaluation Scales for the Institution (SESI) and the corresponding actions based on the priorities for improvement identified in the SESI. Then, these actions will be implemented before preparing for the second version of the SESI. Referring to the second version of SESI and collected evidence, the Self-Study Report for the Institution (SSRI) will be prepared and submitted to the NCAAA. Table 15 below, which contains the major tasks of accreditation is also followed for the Institutional Accreditation.

Program Accreditation

In initiating the NCAAA program accreditation, the DQAD prepares an Internal Assessment report for each program according to the official memo from the President and based on the timeline of the accreditation from the PSU Strategic Plan. The Internal Assessment report contains a checklist and detailed report that a program may or may not be ready for the self-study process. Once the program is ready, the EAAC supports the college and program concerned to prepare and complete the Self-Evaluation Scales for the Program (SESP) based on the collected evidence. If the SESP of the program has compliance levels for all standards and essential criteria set by the NCAAA, EAAC conducts the Internal Review. The program finalizes the SESP, then prepares the Self-Study Report for the Program (SSRP) and participates in a Mock Review encapsulating the Internal Review.

The program presents the results of the Internal Review to the top management to get the final approval to proceed with the External Review. If approved by the top management, the following major tasks will be prepared by the program with the support and assistance of the EAAC and NCAAA Consultant:

Tasks	Detailed tasks	Responsible
Application for accreditation	-Prepare a letter containing the approval from the president -Contract signing with the NCAAA	-Office of the President -NCAAA -EAAC
Submission of the initial eligibility documents	-Prepare all eligibility documents (Believes standards are met and availability of eligibility documents)	-College and the department of the program -EAAC and DQAD Centers
Incorporating the feedback from the NCAAA	-Revise and update all eligibility documents based on the feedback of the NCAAA -Submit the final eligibility documents to NCAAA	-College and the department of the program -EAAC and DQAD Centers

Tasks	Detailed tasks	Responsible
Preparation of the Accreditation room	<ul style="list-style-type: none"> -Identify the room -Design the room and get the approval -Implement the design of the room -Include all required evidence in the room 	<ul style="list-style-type: none"> -Top Management -College and the department of the program -EAAC and PSU Institutional Supports
Preparation for the external review visit	<ul style="list-style-type: none"> -Determine the no Conflict of Interest with the external review panel -Finalize the schedule of the visit and detailed activities of the visit -Conduct orientation for all PSU participants (Top management, academic and administrative staff, students, alumni, and employers) -Prepare for the campus tour -Send off with the top management -Arrange for the land transportation of the review panel (Receiving from the airport, PSU-hotel transfers, sending to the airport) -Arrange for the food catering -Arrange for the PR coverage (Photos, welcome digital and website banners, fresh flowers) 	<ul style="list-style-type: none"> -College and the department of the program -EAAC and the whole PSU Community -NCAAA Consultant

Tasks	Detailed tasks	Responsible
Conducting the site visit	<ul style="list-style-type: none"> -Proactive during the entire visit and alert with the additional request from the external review panel -Prepare for the exit meeting -Conduct post accreditation survey for all PSU participants for continuous improvement 	<ul style="list-style-type: none"> -College and the department of the program -EAAC and the whole PSU Community -NCAAA Consultant
Checking for the factual errors of the report of the external review panel	<ul style="list-style-type: none"> -Identify factual errors -Submit the factual errors to NCAAA 	<ul style="list-style-type: none"> -College and the department of the program -EAAC
Preparation of the action plans based on the recommendation of the external review panel	<ul style="list-style-type: none"> -Develop action plans -Get the approval of the action plans -Submit the action plans to NCAAA 	<ul style="list-style-type: none"> -Top Management -College and the department of the program -EAAC and the centers/units/offices concerned

Table 16: Major tasks of Accreditation

International Program Accreditation

As part of PSU’s mission to provide quality education to the highest international standards, PSU is also committed to the quality standards set by reputable international accreditation agencies and organizations. The institution, college, and the program’s department identify a trustworthy international accreditation agency applicable to the program or the institution. Table 16 below shows the colleges/institution’s corresponding international accreditation agencies with website links. The NCAAA program accreditation initiation above is also applicable for international accreditation preparation. One of the differences is that the communication between the accreditation agency and the program will be through the College Dean and inform the Office of the President through the EAAC. In addition, for international accreditation, PSU shoulders the hotel and airplane expenses of the review team. Other required processes of the international agency must be considered like ensuring the curriculum of the program follows the requirement of the agency and there are corresponding transcript of records showing the curriculum.

Institution/Colleges	International Accreditation Agencies and Website Links
College of Architecture and Design (CAD)	National Architectural Accrediting Board (NAAB) and Council for Interior Design Accreditation (CIDA)
College of Computer and Information Sciences (CCIS)	Accreditation Board for Engineering and Technology (ABET)
College of Business Administration (CBA)	Association to Advance Collegiate Schools of Business (AACSB)
College of Engineering (CE)	Accreditation Board for Engineering and Technology (ABET)
College of Humanities (CH)	Higher Council for Evaluation and Research for Higher Education (HCERES)
College of Law (CL)	Higher Council for Evaluation and Research for Higher Education (HCERES)
PSU	Western Association of Schools and Colleges (WASC)

Table 17: Institution and Colleges – International Accreditation Agencies

Section -III
Quality Assurance
in
Administrative Support Services

The supporting offices (Deanship/Centers) help the academic programs in delivery the programs in alignment with the institutional and National quality educational standards.

The following

1. Strategic Planning & Development Office
2. Deanship of Admission and Registration Office (DAR).
3. Deanship of Student Affairs (DSA)
4. International Affairs Office (IAO)
5. Research and Initiative Center (RIC)
6. Community Service and Continuous Education Center (CSCEC)
7. Central Library (CL)

A.Strategic Planning & Development Office (SPDC)

Introduction

The Strategic Planning and Development Center (SPDC) is responsible for facilitating all planning-related activities across the university. It collaborates with academic and administrative entities, as well as institutional committees such as the Institutional Strategic Planning Committee.

For more details, please refer to the SPDC website: <https://www.psu.edu.sa/en/sp-dc>

Organizational Structure

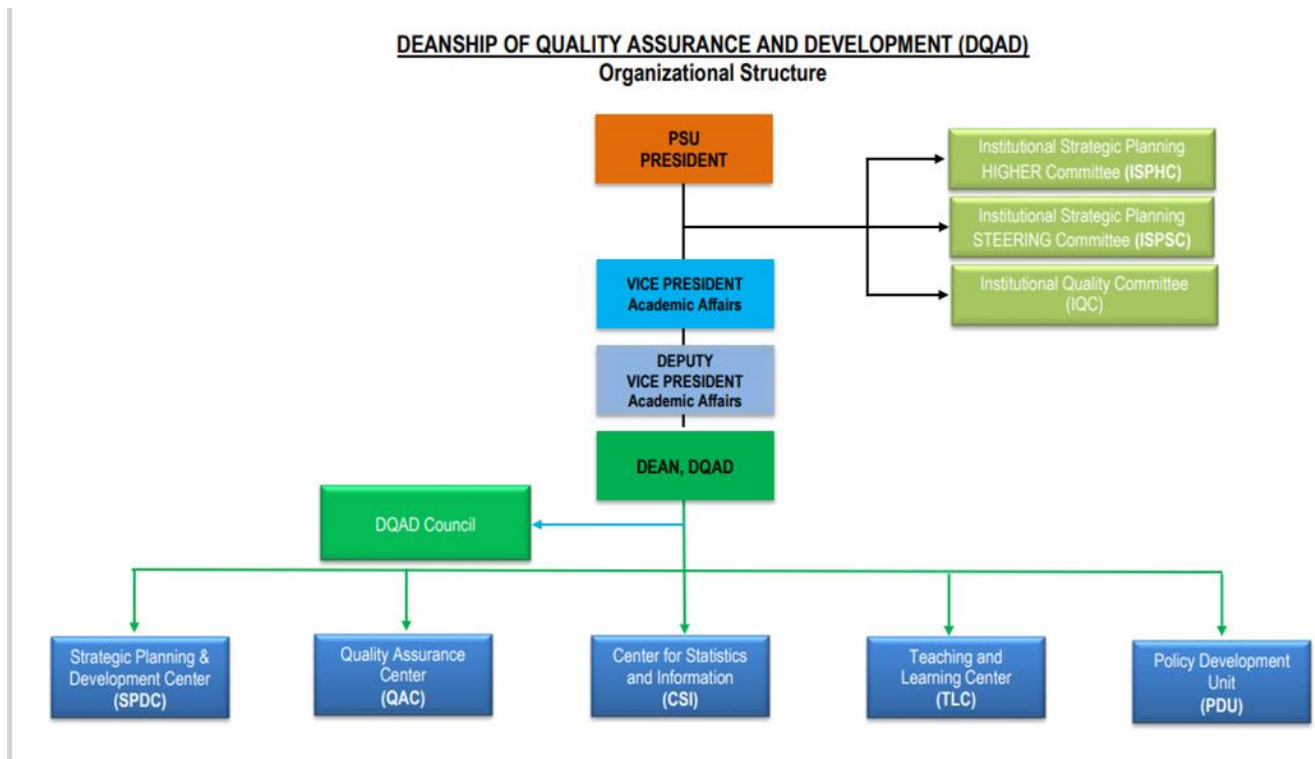


Figure 24: DQAD Organizational Structure

Quality Cycle Adopted by Center

SPDC ensures it is adhering to national and international norms to carry out its operations as laid down in PSU's Strategic Planning Policy.

Plan:

The above includes reference to guidelines and best practices set out by NCAAA in the areas of Vision and Mission setting and review, and in Strategic Plan formulation, implementation and monitoring as indicated below under 'Standards'.

In accordance with international best practice, PSU's strategic planning process has four major phases

- Strategy Formulation.
- Validation and Delivery.
- Implementation and Monitoring.
- Evaluation and Feedback

This approach is consistent with the Bryson strategic planning model (see Bryson's Strategic Planning for Public and Nonprofit Organizations, 2011).

Strategy Formulation

With regards to Strategy Formulation (Phase I), the planning team employed international best practice as a guiding principle

The PSU strategic plan formulation process was designed based on four integrated stages:

- Wide stakeholder engagement and participation.
- Multiple alignment and comparison.
- Goal and Objective setting and revision.
- Reference to the status of the 2nd Strategic plan 2012-2017 (LEADER)

Alignment with NCAAA Standards

The following NCAAA Standards 1.1 and 1.2 are compiled by SPDC.

1.1 Institutional Mission and Goals

1.1.1 The institution's mission defines the purpose of its existence; is consistent with its nature, the needs of the community, and the national trends; and is periodically reviewed. *

1.1.2 The institution's goals are linked to its mission, clear and realistic. *

1.1.3 The institution's mission and goals are formally approved by the governing body and are widely publicized.

1.1.4 The mission guides all the institution's operations (e.g., planning, decision-making, resource allocation, academic program development). *

1.1.5 The institution has values that guide the work and the behavior of its employees.

1.2 Vision and Strategic Planning

1.2.1 The institution has a clear, ambitious, and publicized vision.

1.2.2 The institution develops a well-defined, comprehensive strategic plan that is consistent with its vision and is in line with national development plans and programs (e.g., Vision 2030 and National Transition Programs). *

1.2.3 The institution's strategic plan includes clear strategic objectives, linked to specific performance indicators to measure the extent of their achievement based on targeted performance benchmarks.

1.2.4 The strategic plan includes an estimation of potential risks and mechanisms to deal with them.

1.2.5 The institution adopts operational and execution plans for all its units, for which the strategic plan represents a reference framework.

1.2.6 The institution follows up the extent to which the strategic plan is implemented through specific mechanisms; prepares periodic reports on its progress; and develops and adjusts it as required based on the results of the review, assessment process, and changing circumstances. *

The above NCAAA standards are fully integrated and adhered to in respect to PSU's strategy formulation process.

Risk identification: SPDC is a small center with many deliverables and has a few major risks:

1. Lack of manpower or unexpected unavailability of manpower
2. Lack of support form, or unavailability of software
3. Lack of training to stay up to date in the latest techniques

Lack of manpower can be mitigated to a large extent by our ability to call upon the assistance of our broader support structure within the institutional planning committees listed below. Issues with funding for software or licensing agreements are being handled through in-house development of resources to ensure technical know-how is maintained within the organization. Finally, the risk of becoming out of touch with training is resolved by seeking out several free-to-access courses every year.

Policies: Strategic Planning Policy: This [policy](#) guides the formulation of new 5-year strategic plans at the institution.

Processes: In the future, the above policy will be supplemented with a strategic planning procedure document to inform leaders of the process followed. This can also assist in mitigating the risk associated with unexpected changes. All planning activities are cascaded through the institution to ensure regular reporting reaches the Vice Presidents and the President of the University. This is achieved through the following committees and reporting structures:

1. Institutional Strategic Planning Higher Committee (ISPHC chaired by the President)
2. Institutional Strategic Planning Steering Committee (ISPSC chaired by the Dean, DQAD)
3. College Quality Committees (CQC)
4. Center and Unit Directors

Each college has its own strategic plan, which is broadly aligned to the institutional plan. The annual monitoring and reporting by each CQC then informs the overarching achievement of the institutional plan. Likewise, institutional entities such as the Central Library or the Information Technology Office monitor and report on their planning activities and how they support the institutional objectives. This process is executed through set templates that are provided by SPDC. Each entity engages with these documents at three levels:

1. At the beginning of each academic year to list their initiatives for the year
2. At certain intervals throughout each academic year to update their progress and stay abreast of opportunities and challenges
3. At the end of the year for a final status update and annual accomplishment reporting

5-Year Strategic and Annual Action Plan: SPDC facilitates and coordinates all the oversight of planning formulation, submission, and updating, in addition to accomplishment/achievement reporting.

Resources: The strategy adopted by the center to optimize expertise and buy-in is to maintain a small center while incorporating and engaging key members of the PSU senior team through the above-mentioned institutional committees.

Documentation: SPDC communicates primarily through email for direct communication with key stakeholders. However, when appropriate and required, it also uses PSU Twitter and formal publications to engage with and report to stakeholders.

Key Performance Indicators: SPDC is responsible for:

KPI-I-01: Percentage of achieved indicators of the institution strategic plan objectives

KPI-P-01: Percentage of achieved indicators of the program operational plan objectives

Though it does not have specific indicators to measure its performance, internally, performance is monitored by the direct line manager.

DO / Implement

Communication with all relevant entities stems from and is directed by the SPDC annual workflow chart below:

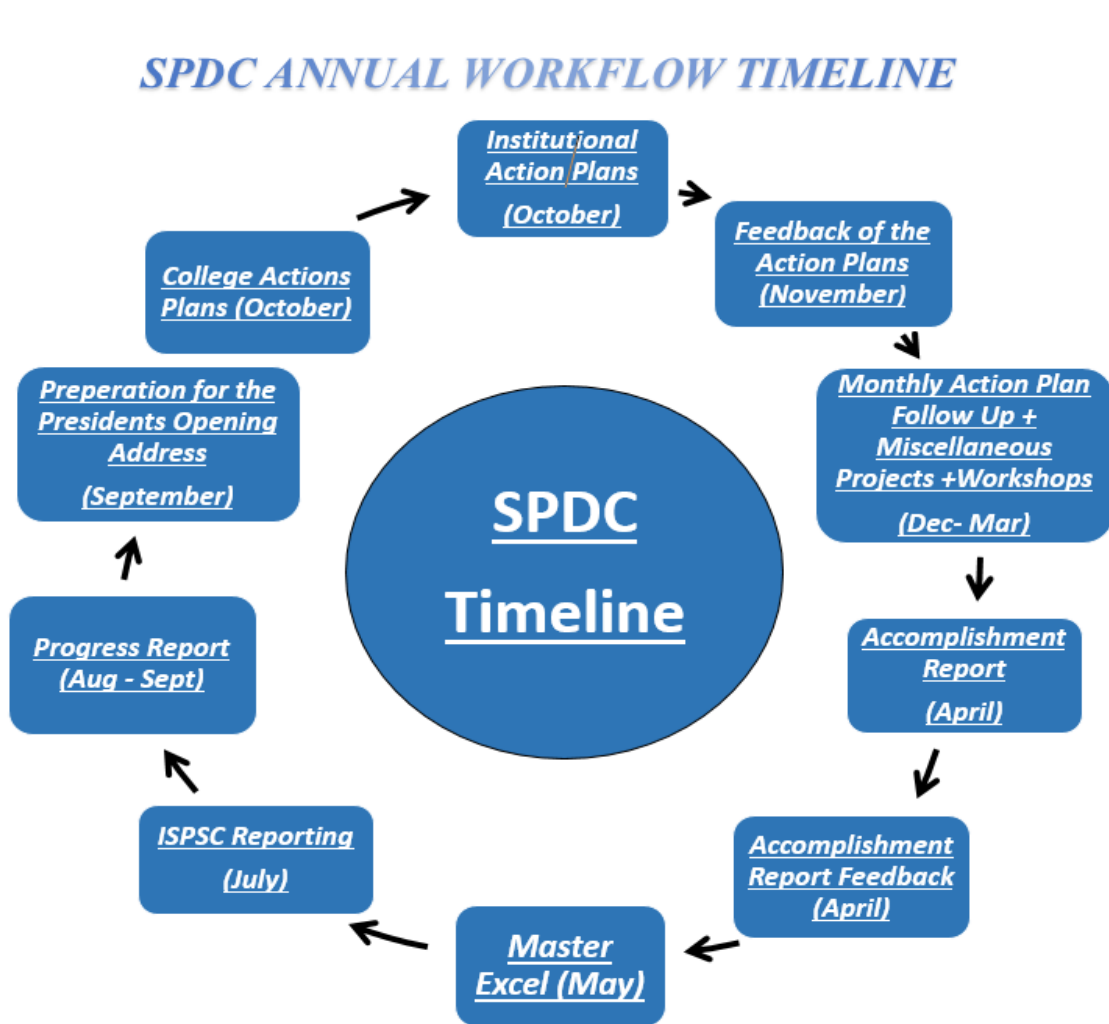


Figure 25: SPDC Annual Workflow Timeline

CHECK (Monitor & Review)

- Monitor

The center always maintains a Google sheet task list open on all center member desktops to consult, follow up and mark tasks as done in a timely and collaborative manner. This is supplemented by weekly meetings where tasks, including feedback of submissions received, are conducted through workshop sessions to work 'online', and get the input and feedback of all members spontaneously.

This is further enhanced with bi-weekly meetings with the line manager to provide updates, receive feedback and proactively tackle any concerns.

- Review

SPDC's status progress on its actions is updated monthly and at the end of the year, the accomplishment report is prepared. Although this is not a stand-alone report, it can serve as a portion, and contribute to larger institutional reports.

SPDC has multiple deliverables each year and the quality of these deliverables is judged at the highest levels of the institution. This feedback serves as the focus for SPDC to then review and act on with an appropriate and proportionate set of actions.

ACT / Update

Feedback from any given academic year is incorporated into the next year's action plan to enhance the service provided. These can result in short minor changes or larger projects

B.The Deanship of Admissions and Registration (DAR)

Introduction

The Deanship of Admissions and Registration (DAR) is the academic service unit of Prince Sultan University that administers operations in the areas of Students admission, Scheduling, Registration/Enrollment, Student Records, Graduation, Faculty Teaching Loads, and other related services.

More details about DAR services can be found in the following link:

<https://www.psu.edu.sa/en/admissions-Deanship-of-Admissions>

Organizational Structure

The Deanship of Admission & Registration (DAR) is led by the Dean on the men campus and Vice Dean on the women Campus. The services provided by the Deanship are considered as the core supporting services for the academic units. DAR is structured into 5 units namely:

1. Undergraduate Admission,
2. Registration (responsible for Course registration, transferring of students from one major to another, and course scheduling in every academic semester),
3. Graduation
4. Student Transaction (inquiries and withdrawals)
5. Student Information System (SIS) Supervising unit

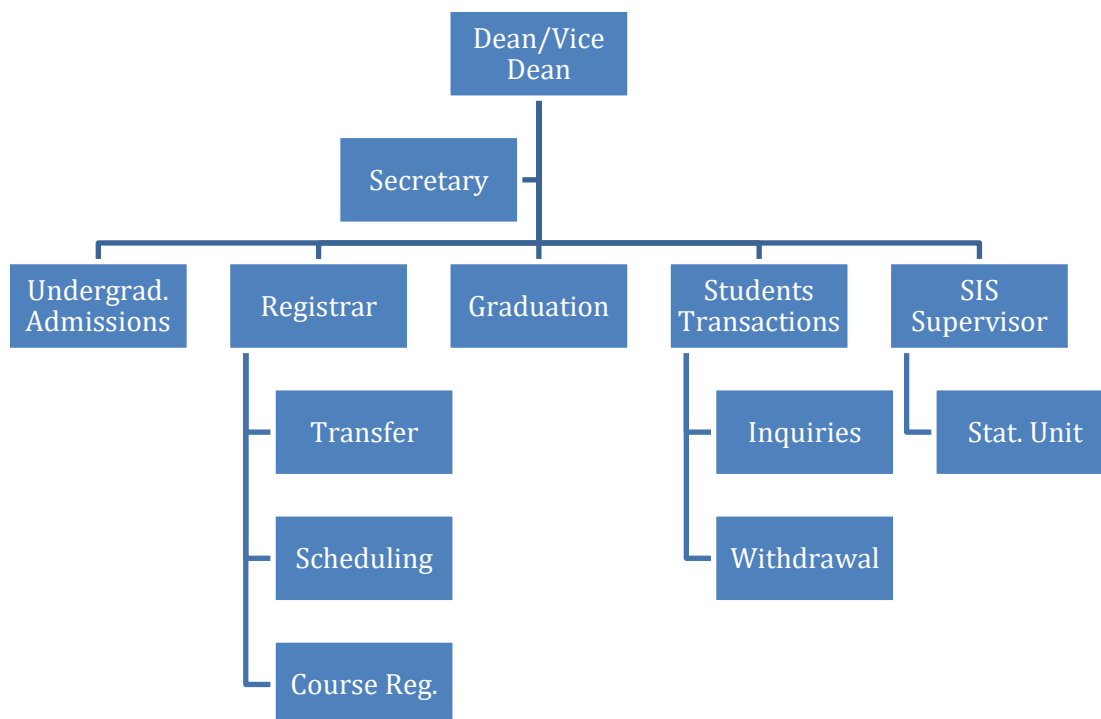


Figure 26: DAR Organizational Structure

Quality Cycle Adopted by the Deanship

DAR strives to ensure the quality of the services provided to its stakeholders through several methods. First, the annual feedback reports provided by the Deanship of Quality Assurance and Development (DQAD), the Accreditation Office EAAC, and the Institutional Student Affairs' Committee (ISAC) are reviewed. Second, feedback provided by stakeholders is continuously received by DAR officials. These reports are analyzed and room for improvement is identified. In addition, best practices are continuously evaluated. Accordingly, plans are developed for improvement depending on the resources that are made available by the PSU management. These plans are approved by the concerned bodies at PSU. Then the approved plans are implemented.

DAR PDCA quality cycle as listed below:

Plan:

The important quality elements required by DAR for planning the services include:

Alignment with NCAAA Standards

The ETEC-NCAAA standards followed by DAR are:

4.1 Student Admissions

4.1.1 The institution is committed to the implementation of policies and standards governing the students' admission and transfer, and credit equivalency; and distributes students to the academic programs according to specific, fair, and published mechanisms. *

4.1.2 The institution adopts procedures that ensure the consideration of the recommendations of colleges and academic programs regarding the number of students planned for admission to the programs and commensurate with the available resources.

4.1.3 The institution adopts an effective electronic system to manage the admission and registration processes, data retrieval, and request of statistics, to monitor students' progress during their studies, and to provide electronic services to students with the appropriate ease and speed.

4.1.4 The institution makes available all information related to the types of programs and courses it provides, and their mode of instruction, financial costs, services, etc.; and makes them accessible to everyone before the application for admission.

4.2 Student Records

4.2.1 The institution applies clear policies and rules for the management of students' records, which define their content, mechanisms of protection, preservation, confidentiality, and accessibility, with the provision of backup copies. *

4.2.2 The student record system provides the statistical data to the related parties at the institutional and program levels that are required for planning, reporting, and quality assurance processes (e.g., ratios of students who are transferred, withdrawn, under probation, droppers, and deferred).

4.2.3 The institution applies specific and appropriate procedures for updating students' records, delivering student results, and timely revealing them.

4.2.4 The institution establishes an effective mechanism for verifying that each student meets graduation requirements.

Reference Link: [Institutional Standards](#).

Risk identification: The risks related to the services provided by DAR include:

- A decline in student enrollment
- The decline in the quality of enrolled students
- Student retention
- Potential lack in the quality of student advising
- Lack of adequate space
- Lack of enough faculty members
- Recruiting additional high-quality employees
- Retention of top-performing employees
- Lack of training
- IT security issues
- Integrity issues
- Reputation issues

Strategies that are adopted to address such risks include:

- Cooperation with the PSU Risk Management Committee
- Proposing ways to attract high-quality students and for retaining them
- Supporting the Student Advising Center to improve the advising process
- Proposing ways for attracting high-quality employees and retaining them
- Coordinating with the ITCS to continuously improve security measures
- Identifying issues that might negatively affect the PSU's reputation to mitigate them.

Policies: DAR applies many relevant policies and in particular the Rules and Regulations of Undergraduate Academic Study and Examination and the associated Executive rules. These policies include admission, transfer, registration, grading, student record management, graduation, calendar, and student transactions policies. (For more details, you can visit our webpage: <https://www.psu.edu.sa/en/policy-and-procedures>, https://info.psu.edu.sa/SO4M/StHandbooks/rules_regulations/index.aspx).

Processes: The admissions process, the transfer process, the scheduling process, the course registration process, the add/drop process, the grade recording process, the graduation process, the withdrawal process, the dismissal process, and the calendar

preparation process. The steps of the processes are detailed in the DAR's Standard Operational Procedures (SOP) manual.

5-Year Strategic and Annual Action Plan:

The purpose of contributing to the PSU Strategic Plan and implementing the goals and objectives assigned to DAR through the annual action plan is to continuously improve the services provided to all stakeholders.

Resources:

The strategy adopted by DAR for acquiring resources for carrying out the functionalities effectively is based on reviewing the feedback provided to DAR and identifying gaps according to the PSU strategy. Based on these gaps, needed resources are identified and requested. The requested resources are provided to DAR based on the approval of the upper management.

Documentation:

DAR disseminates the information about the services provided to the PSU stakeholders mainly through the PSU website, email, SMSs, PSU spectrum, and exhibitions. Templates used for planning and reporting purposes are available in DAR's Standard Operational Procedures (SOP) manual.

Key Performance Indicators:

1. Average Response time in addressing students' tickets.
2. Average Response time in closing the ticket.
3. Satisfaction rating of the Graduating students for the DAR services
4. Satisfaction rating of the PYP students for the admission services.

DO / Implement

- The admission information is disseminated early in every semester for the following semester.
- The registration information is disseminated early in every semester for the following semester.
- The change of major information is disseminated regularly every semester.
- Graduation information is disseminated early in advance before the graduation ceremony.
- Updates to the Policies are uploaded to the PSU website as soon as they are approved by the University Council.
- The academic calendar is uploaded to the PSU website as soon as it is approved by the University Council.

CHECK (Monitor & Review)

Monitor

- Meetings are conducted periodically on an as-needed basis to monitor the quality of the services provided by the center. Meetings are conducted not only on the DAR level but also with representatives of other stakeholders.
- Condition monitoring is conducted by DAR and improvement is implemented in a way that does not affect the daily operations. Progress is monitored through several mechanisms internal to DAR as well as external. Adjustments are implemented and the level of improvement is measured through surveys conducted by the concerned offices.

Review

The various mechanisms with the help of which the center evaluates the quality of its services through annual satisfaction surveys and interviews with stakeholders. The accomplishments report is submitted to the PSU management at the end of every academic year to be consolidated with the overall PSU accomplishment report.

ACT / Update

- DAR prepares action plans for the next academic year based on the accomplishments as well as the improvement requirements to report considering the evolving national and PSU priorities
- Coordinate with the concerned offices to provide needed resources for the upcoming academic year
- Start the update process of relevant PSU policies
- Start the process of adding e-services or improving the current services

C.Deanship of Student Affairs

Introduction

The Deanship of Student Affairs (DSA) strives to enrich student experiences outside the classroom as persons, scholars, and citizens, by offering a wide range of extra-curricular activities, events, and dedicated units dedicated to serve the students' overall needs in the University.

Organizational Structure

- **Academic Advising Center**-- aims to facilitate students' intellectual and personal growth, enhance their academic performance, and ultimately ensure their progress towards graduation.
- **Academic Advising Unit** – counsels and guides students regarding academic complications, e.g., low GPAs, absences, and make-up exams
- **Co-Operative Education & Alumni Relations Unit** – #1 acts as an intermediary between students who are eligible for the Co-Op and companies who are interested in training students; #2 keeps in close touch with PSU alumni
- **Guidance and Counselling Unit** – addresses students' non-academic requirements and needs by offering social services and psychological counseling
- **Student Activities Unit** – responsible for organizing extra-curricular activities and events, e.g., International Culture Day and working with PSU student clubs
- **Student Services Unit** – provides students with tutoring opportunities, part-time jobs, lockers, and University ID cards

Policies

1. **Academic Support Policy:** The purpose of this policy is to provide guidelines on identifying and supporting students who are in need of support at an early stage in their academic life.
2. **Students with Special needs policy:** This policy is to provide support for any student who may need support in his/her learning experience at PSU due to any special needs.
3. **Academic Advising Policy:** All faculty members within a degree-granting program will be assigned students for academic advising. Academic advising is mandatory for all students to be able to register for their courses. All faculty members are required to learn about the procedures required for advising by attending their assigned workshop

sessions. The purpose of this policy is to provide guidelines on academic advising for all students at PSU.

4. **A Student Grievance Policy**- A policy detailing the students' rights to voice their complaints to the Deanship of Student Affairs and to have their concerns answered in a timely manner

Students' Rights & Responsibilities

1. Students Rights and Responsibilities

- All rules are clearly stated on the PSU website
- Violations and disciplinary actions are clearly stated in the code of conduct
- Committees are created to follow up on these offenses such as the Academic Affairs Committee
- The existence of clear rules on violations, and bylaws implemented on both campuses
- Unified and announced procedures on both campuses

Refer to [Student Handbook](#)

Refer to [Student Code of Conduct handbook](#).

The Student Council engages students in a real-world experience that helps them learn about leadership. Elections for the student council consist of voting for 5 positions which are:

- President
- Vice president
- Secretary
- Media
- Treasurer

Services

The Student Council provides diverse activities and events for students and the university's community. Students in the council coordinate special cultural, educational, and thought-provoking events. (Student Handbook)

2. Assisting students with special needs:

- Hotline Service: dedicated hotline for students with special needs to request assistance, whilst having their requests answered diligently and swiftly.
- Facilitates equipped with all necessary tools to facilitate navigation through the university's buildings
- Special allocation of parking for students with special needs- aimed at shortening the distance needed between the parking and the students' classes

- Certain amendments to the time, space, and privacy of students with special needs during final exams, depending on the specific case.

3. Guidance and Counselling, Academic Advising, and Career Counselling:

- The goal of Academic Advising is to solve problems that the student may face, together with specialists; the unit aims to deal with problems and other difficulties. The unit offers care to students and follows up on their education. As a result, the unit can answer all questions asked by parents /guardians. It also informs parents /guardians if the student's academic performance showed anything that should be reported. To help the student, overcome whatever obstacle they may face.
- The Guidance and Counselling Unit offers help and counseling regarding non-academic, social, and educational matters for all students. It aims to help students benefit from their skills and to graduate from the university at the expected time, provided with both educational experience and personal skills
- Career counseling is aimed at assisting university students to build a deeper understanding of their field, prepare them for the labor market, learn how to overcome all obstacles, merge them in the work environment to gain a genuine and authentic experience in a realistic atmosphere during their training in selected and distinguished companies. This is achieved through first-rate career counseling to all PSU students

4. International, Gifted, and Underachiever Students:

- A detailed policy will be created specifically designed for international students
- Gifted students receive recognition through a multitude of certificates given to them by the Deanship of Student Affairs.
- Underachiever students are contacted and monitored by the Academic Advising Center

5. Student Activities:

- Students' extra-curricular and co-curricular activities are held regularly throughout the academic year. Additionally, monitoring and rewarding said activities will be done through the Niqatti system
- Hosting guest speakers and guests from outside PSU:

Detailed info about the speaker, budget, and other requirements along with the approval letter must be submitted to the Student Activities Supervisor minimum of 4 weeks before the event date.

Booking Venue, IT request, Announcement (Email, Twitter, Instagram, SMS), Catering and Publications forms must be submitted by the club supervisors to the responsible offices for each matter.

Approval from the Dean of Student Affairs

- Events for PSU members only:

The Department Chairperson and College Dean must approve the event.

Budget and other requirements along with the approval letter must be submitted to the Student Activities Supervisor minimum of 3 weeks before the event date. The Student Activities Supervisor submits the proposal to the Dean of Student Affairs, for approval.

Booking Venue, IT request, Announcement (Email, Twitter, Instagram, SMS), Catering and Publications forms must be submitted by the club supervisors to the responsible offices for each matter.

- **Field Trips:**

Budget and other requirements along with the approval letter must be submitted to the Student Activities Supervisor minimum of 4 weeks before the trip date.

The field trip must be approved by the Dean of Student Affairs.

A detailed letter must be sent to the Vice President for Administrative and Financial Affairs

Bus request form and Announcement (Email, Twitter, Instagram, SMS), must be submitted by the club supervisor to the Vice President for Administrative and Financial Affairs

Student guardian approval must be submitted to the Student Activities Supervisor minimum of 3 days before the trip.

- **Alumni:**

Alumni are continuously contacted through all available means of communication, with their information being updated, regularly. Additionally, an Alumni portal is in developed.

An Alumni reunion is held, annually

6. Coordination with Colleges, Academic, and administrative offices:

- Continuous communication through meetings, calls, and emails occurs between the DSA and all offices, ranging from students' activities, performance, accommodations to organizing mutual events
- All the processes, services, and implementations will be continuously monitored through surveys, which will be disseminated to students, annually. Upon receiving the results of the surveys- regarding the services provided by DSA, proper action will be taken to either maintain or enhance the level of quality.

Key Performance Indicators

KPI1: Employers' evaluation of the graduates

KPI 2: Students' performance in the professional examinations

D. International Affairs Office

IAO Mandate

The International Affairs Office's (IAO) mandate is to facilitate and administrate PSU engagements with international partnering institutions and agencies. Its authorization is found in the PSU's vision and mission statements. The first announces the University's aim to be the premier private institute of higher education in the Middle East, one that offers a quality education equal to that found in strong schools elsewhere in the world. In the second, one of the means to achieve this end is via partnering with foreign schools. The work of the IAO in the main is an implementation of these directives by strategically cultivating partnerships with world-class universities and tactically engaging with analogous, nimble schools around the globe. For more details, you can visit our webpage here: <https://www.psu.edu.sa/en/international-affairs>

Organizational Structure

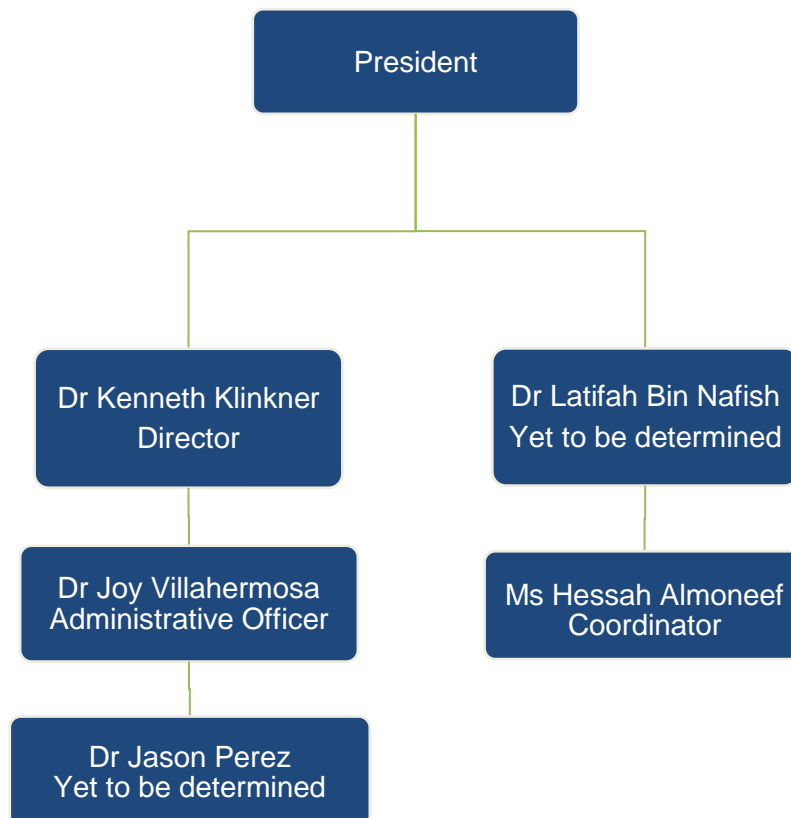


Figure 27: IAO Organizational Structure

IAO Roles, Work, Instruments & Programs

Roles

The IAO is the institutional interface between PSU senior administration and the leadership of the colleges, departments, centers, and research labs. IAO duties also include organizing and leading PSU summer trips, administering the PSU study abroad programs, **oversight of university benchmarking**, management of the Fullbridge Program, Lawyering Practical Skills Program, and performing various ad hoc assignments for senior administration.

Top-Down Work

The IAO is directly under the President's Office. The Director of the IAO meets regularly with the President to learn about, probe, digest, and critically discuss strategic planning and initiatives relating to international schools, programs, scholars, and agencies. This work usually includes the following elements:

- Research on targets, write-ups of summary notes and briefs
- Contacts and discussions with relevant PSU administrators and faculty
- Assessments and/or recommendations are written out and discussed in meetings

If a decision is made to contact the school and/or person, the IAO Director starts some correspondence with the target(s) according to reaching an understanding with the other school regarding the benefits to be gained by both PSU and the prospective partner. Once common grounds and interests are found, work is done to formalize ties via written agreements.

Bottom-Up Work

Faculty members cannot on their own make ties with foreign schools, scholars and/or agencies in the name of Prince Sultan University. Rather they must first make formal proposals for establishing institutional or the personal ties via the following process:

- Draft and edit a proposal that lists its object(s), explains how the partnership will benefit PSU, the anticipated costs of the ties target(s) contact information if any, etc.
- Proposal is first reviewed, remarked on, and approved by the College Dean, Department Chair, Center Director, and/or Research Lab Head and then forwarded to the International Affairs Office

If a college or Department support is strong and a good case can be made for the proposal, the IAO director forwards the proposal to senior administration for review, comment, and decision. If approved by the President's Office, the targeted school and/or person will be contacted as described above. If no approval, no action will be taken on proposals.

Instruments

Partnership ties with foreign schools and scholars are formalized through written and signed documents. To date, the two most common types of documents are Memorandums of Understanding (MOUs) and Memorandums of Agreements (MOAs).

MOUs formalize institutional (i.e., school to school; school to organizations, etc.) and feature general language designed to prompt both parties to look for opportunities to work together for mutual benefits. The documents are usually short and feature the following elements announcement of comity of interests between PSU and University X to explore for opportunities for partnering activities such as:

- student and faculty exchanges
- joint research programs
- design and establishments of ties and other activities of mutual interests operationalizing (roles, costs, timelines, etc.) such activities to be worked out between the two parties in the contractual form later general conditional paragraphs
- student and faculty exchange
- end ties options: time frame, 5-years and then ties are up for optional renewal; six-month notice of cancelation of ties, etc.

MOUs in effect invite both parties to find areas and activities of common interest to team together in.

Agreements are formalized relationships below the institutional level. One might be between an individual scholar and a PSU department, another between an agency and a PSU program, and so on. These often take form in a Memorandum of Agreement-MOA or in other formal documents and often list dates, conditions, responsibilities, and costs. These need to be vetted by senior administration and PSU legal counsel before MOAs or other formal documents can be acted upon and operationalized.

Programs

Student Summer Trips – SST

Starting in 2006 the IAO annually sent 12 students and 2-3 PSU admin and faculty personnel to go through a 14-day cultural experience abroad. Students stay on or near a PSU partner host campus for the first week and then the PSU group's attention shifts to exploring major cities, famed cultural sites, and trekking about the hills and valleys.

Study Abroad Programs – PYA | PSA | Apsua

Commencing in the Fall 2010 term through to Spring 2013, PSU provided 2nd-3rd year University students with the opportunity to study abroad via its PSU Year Abroad (PYA) Program. Starting in Spring 2014, the program changed into the PSU Semester Abroad (PSA) Program. Like the PYA, there is a formal application process and set of requirements to be met to qualify for selection. Starting in Summer 2019, PSU Summer

Abroad (PSuA) was launched with opportunities for PSU to take one 3-4-week intensive course listed on the 2020 PSuA list.

Studying abroad opens minds to new experiences, tempers character with new challenges, and leads to new friendships. How well the PSU students perform abroad enables the University to get a sense of its coordinates en route to providing the Middle East with quality education up to the highest international standards. Simply put, the IAO programs benefit both the students and the institution.

Fullbridge Program – FP

The Fullbridge Program is a three-week 40 hours each intensive professional skills program designed to

assist PSU students to make the transition from the university to the workplace. The program is an option for PSU students at the Co-Op level and features a challenging competitive screening process to identify and select the participants.

IAO assists for Other International Programs

Occasionally the IAO called up by Colleges and Departments to assist in facilitating faculty and student units participating in competitive events and contests. Previous examples of such include the Emirates Environmental Group [EEG] Public Speaking Competition, the Model United Nations [MUN] Conferences, Lawyering Practical Skills Program [LPSP], and Vis Moot Court [VMC] in Vienna.

PDCA Quality Cycle

Touching up and tweaking repetitive work process when warranted implement changes collect cued information on targeted assignments note need for upscaling, replacing or stay the course of the process, product, or program



IAO Plan-Do-Check-Act Examples

#1 **P:** Increase the numbers of PSU students studying abroad.

To qualify PSU students with 36-110 credits and a 2.80-3.00 (GPA) to be eligible to qualification for studying abroad must have an advanced high level of proficiency in English. * For some students the costs of taking the IELTS (SR 1,300) or TOEFL (SR 800) test. For some students, the cost of the exam is a disincentive to try to meet the advanced level required to enter the second-round competition. The task is to find a recognized English proficiency exam at a much lower or free price exam. English First [EF] exams are available in the Kingdom.

D: Try this out in the FA22 competition to Study Abroad PSA and PYA in March 2022.

C: Take notes on how IELTS, TOEFL, and EF students' performance in the second round of screening in challenging reading and creative thinking exam [IST] and the argumentative essay [ISE].

A: If the EF scores match or surpass or exceed the correlation of English proficiency the EF goes up on the screening English proficiency list; all 3 of the English proficiency markings will be closely monitored from FA 2022 to SP 2023.

* - PSU partner universities set the bars in terms of English Proficiency levels & PSU GPAs up to 3.00

#2 P: As it appears that the COVID-19 pandemic is coming under control, the time has come for the IAO to invest time and thought into which countries to target for the 2022 Student Summer Trip. The model is to select two countries and identify apt universities to host visits of SST groups of 14 from each PSU campus. Prior to the pandemic, PSU usually met with representatives from the 40+ countries who visited KSA for the IECHE events, IAO personnel assigned to visit overseas in pursuit of IHEIs to partner with. The task at hand now is to identify 2-3 candidate nations, assess and identify the best fits for the 2022 summer term.

D: Spend due time factor the anticipated costs, the good fit for partnering the targeted campuses, and ensuring richness of the experiences for the PSU students. While the SST has been run well and enjoyable for all, the first task now is identifying and winning a welcome from the host campuses and with the intent of formulizing MOUs with the PSU's new partners from 2022 and beyond.

C: It is too early to analyze the results ...

A: ... the Acts follow in the fall of 2022

#3 P: Starting in the Fall 2021 term at PSU there was a reasonable possibility of running the Fullbridge Program

[FP] at the start of the Spring 2022 term at the University. A discussion on this went on between the PSU and Fullbridge, Inc over the past two months, with the IAO Director acting as the point person on that assignment. Experience showed that a good number of CoOp-ready PSU students were interested in taking the FP at the start of the SP22 semester. The IAO contacted the DAR for a list of all CoOp ready known students about the 16th running of the FP and to visit the IAO Office on each campus and that a screening program would be done on a late Saturday in November.

With the green light going on the IAO and FP agreed to run a promotional online run about the Fullbridge Program on 27 October. Given the experience that PSU has had

with the Fullbridge, there is no need to tweak it to improve it. Fullbridge, INC has a stellar record with the Fullbridge program going back to 2013. Fullbridge, INC has teamed with MISK since 2018.

Consequently, this is an example of knowing when to forego going through the **D-C-A** steps.

E. Research and Initiative Center (RIC)

Introduction

The Research and Initiative Center (RIC) is the administrative research structure at Prince Sultan University (PSU) that provides faculty members with different research services. RIC was established in September 2017, and since then RIC has continuously improved the research policies and bylaws at the university. RIC is responsible for assisting PSU researchers and providing them with the appropriate infrastructure to conduct their research activities. RIC also acts as the mediator between the colleges and higher management. RIC directly reports to the President of the university, which makes the decision process fast and effective. Furthermore, RIC is responsible for evaluating the research performance at PSU in terms of outcomes and expenditure.

For more information, kindly visit our RIC webpage: <https://ric.psu.edu.sa/about.php>

Organizational Structure

The following RIC Organizational structure shows the hierarchy of the center; RIC directly reports to the President of the University, which makes the decision process fast and effective. It acts also as the mediator between the colleges and higher management.

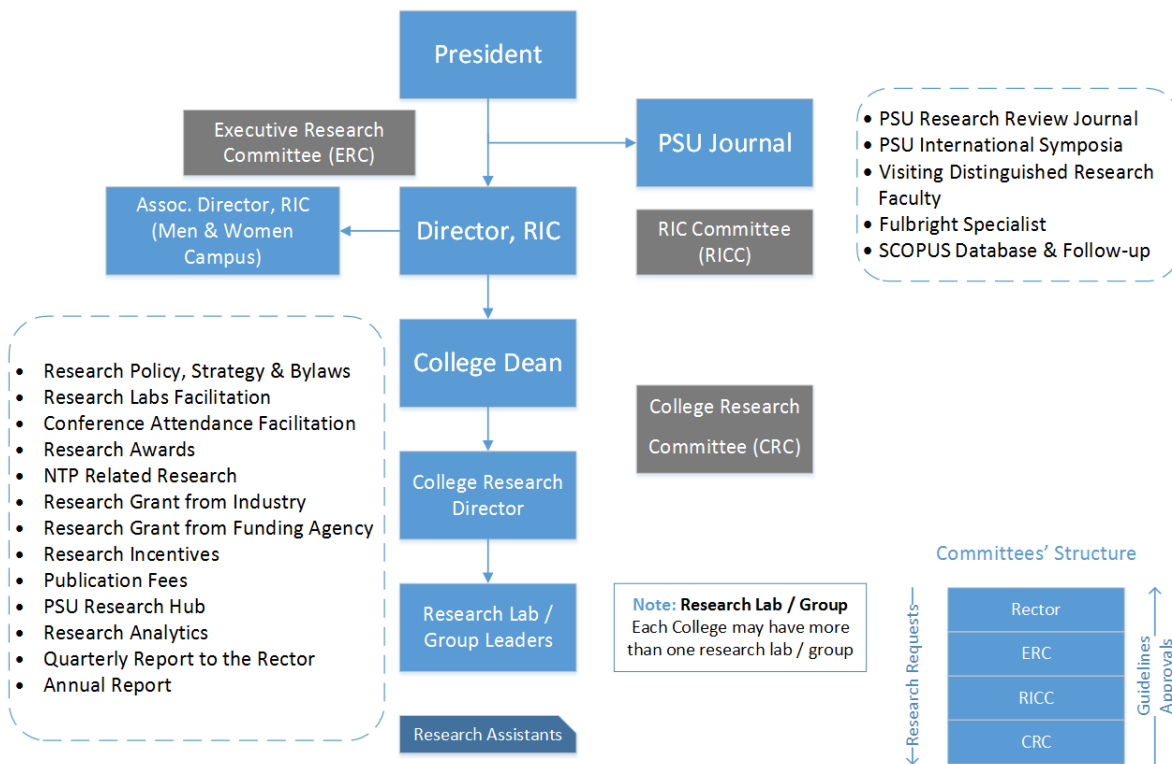


Figure 28: RIC Organizational Structure

Quality Cycle Adopted by Center/Office

In this section, we introduce the important measures and best practices taken by RIC to ensure quality of the services provided to its stakeholders. To meet the requirements and the standard that PSU follows, we have adopted the well-known quality assurance cycle (i.e., PIMRU or PDCA) which are elaborated in the following phases as shown in Figure 8.

Phase I- PLAN: The planning of all the services provided by the RIC involves

- a. Alignment with NCAAA standards
- b. Risk Management
- c. Development of Policies and Procedures
- d. Development of 5-year Research strategic plan and annual research action plan to accomplish the strategic plan
 - i. Identification of Key and operation performance indicators to achieve Research related objectives
 - ii. Estimation of budget to meet the research objectives
 - iii. Planning for acquiring resources (including staff, equipment, and facilities)
- e. Develop performance criteria for evaluating the
 - i. quality of services
 - ii. work performed by the RIC staff.
- f. Documentation

Alignment with NCAAA Standards:

RIC adopts the following **ETEC-NCAAA standards** at the institutional level to ensure adherence of all phases of the quality cycle in providing services to PSU stakeholders.

- *Planning and Management of Research*
- *Support of Research and Innovation*

Risk identification:

To provide services efficiently, it is mandatory for all the supporting units including RIC to identify risks related to the administration of the center as well as the services provided by it. These risks are categorized into financial risk, IT related risks and facility risks. The center analyses the probability and impact of these risks and develops strategies for mitigating or avoiding the risks. These strategies are included in the 5-year strategic and annual operational plans.

Policies

The following research policies have been developed by the RIC which are required to be followed by the PSU faculty and students

- **Research Policy**: This policy provides a broad course of action for the development and implementation of research activity and management in the university.
- **Participation in Scientific Conferences Policy**: This policy provides guidelines for attending scientific conferences by faculty members with master's and PhD degrees. A scientific conference is a place where researchers and scientists from various countries are gathered to discuss and exchange ideas about the results of their scientific findings.
- **Funding for Scientific Conferences Participation Policy**: This policy provides guidelines for funding the attending scientific conferences by faculty members.
- **Ownership and responsibility for maintenance of equipment Obtained Through Grants Policy**: The purpose of this policy is to ensure that equipment purchased with funds obtained from a research grant are in accordance with PSU's rules and regulations. This policy is applicable for all faculty and administrative staff who have received funding through grants.
- **Intellectual Property / Copyright Policy**: The main purpose of this policy is to regulate and assign copyright to created works based on international best practices. This policy applies to:
 - All PSU members and visitors who have an official appointment at PSU
 - PSU members who are on a paid leave and create copyrightable material during such leaves
- **Students' Research Participation Policy**: This policy provides guidelines to university students (both postgraduate and undergraduate) for participating in the scientific work and research production
- **Distinguished Research Publications and Patents Incentives Policy**: This policy provides guidelines to university faculty for paying financial incentives to the faculty members who publish research papers in scientific journals listed in high-ranking databases or produce high-quality patents.

Processes

The following processes for providing services are included in the policies

1. Process for applying for research funding
<https://ric.psu.edu.sa/apply-for-a-seed-project.php>
2. Process for applying for research incentives
<https://ric.psu.edu.sa/apply-for-publication-fees-incentives.php>
3. Process for establishing a research lab
<https://ric.psu.edu.sa/research-labs.php>
4. Process for preparing research statistics
<https://ric.psu.edu.sa/>

Annual Action Plan

RIC 5-year Research Strategy and Policies are aligned with the university strategy, policy, and governance for research.

The annual operational action plans are prepared to achieve the goals and objectives of the research strategy.

Resources

Based on the Annual action plan guided by the 5 -year strategic plan, the resources are acquired before the beginning of the academic year. These resources can be either the RIC staff, formulation of the College Research Committees, establishment of research groups or labs. In addition to that, the equipment used for research labs and the facilities is prepared for accomplishing the goals and objectives at the institutional and college level.

Documentation

As documentation is an important pillar of the internal quality management system, RIC documents action plans, forms for all the processes, and templates for accomplishment reports at various levels such as research labs reports, research statistics, etc.

These reports are submitted to the higher management on a periodic basis and discussed in the Institutional Research Committee chaired by the PSU President.

In addition to that all forms and research statistics, the status of research funding, and incentives are available on the RIC website <https://www.psu.edu.sa/en/research>

Key Performance Indicators

The following NCAAA and PSU Key performance indicators are used for measuring the objective related to Research Theme.

KPI-I-16	Percentage of publications of faculty members
KPI-I-17	Rate of published research per faculty member
KPI-I-18	Citation's rate in refereed journals per faculty member
KPI-I-19	Number of patents, innovations, and awards of excellence
KPI-I-20	Proportion of the budget dedicated to research
KPI-I-21	Proportion of the external funding for research
KPI-P-14	Percentage of publications of faculty members
KPI-P-15	Rate of published research per faculty member

KPI-P-16 The average number of citations in refereed journals from published research per faculty member in the program

Staff Evaluation In order to ensure the quality services provided by individual RIC staff, PSU directors conduct an annual evaluation for all the RIC administrative staff. The performance criteria for the annual evaluation are shown in the link.

Phase II- DO / Implement:

The RIC Directors disseminate the research policies (new and existing) at the beginning of the academic year and then regularly update the PSU stakeholder through announcements and website.

RIC webinars are conducted on a regular basis. In addition, the RIC directors meet PSU faculty and students during their prescribed office hours.

Services Provided by the RIC

Research Funding

PSU provides different funding opportunities to its faculty members, including research projects, conference attendance, journal publication fees, and incentives. RIC's responsibility is to ensure the quality standard of all research activities and contents by following approved research bylaws and policies; all policies and bylaws are available on the RIC website: <https://ric.psu.edu.sa/apply-for-a-fund.php>

Distinguished Research Programs

PSU offers different programs to attract world-reputed and active researchers. Researchers are selected based on high standards criteria to meet PSU research quality standards. More details are available on the RIC website:

<https://ric.psu.edu.sa/researchers.php>

Distinguished Research Programs

PSU offers different programs to attract world-reputed and active researchers. Researchers are selected based on high standards criteria to meet PSU research quality standards. More details are available on the RIC website:

<https://ric.psu.edu.sa/researchers.php>

Intellectual Property Management

Providing quality education is essential to recognize the intellectual achievements of the PSU community. Therefore, RIC is implementing an approved Intellectual Property Policy, which has all the information needed to maintain the tradition of sharing intellectual property ownership with the creators of that Intellectual Property. IP Policy can be found here: <https://ric.psu.edu.sa/ric-policies-and-bylaws.php>

Distinguished Research Labs

PSU supports the formation of distinguished research labs to conduct and promote quality research based on the research strength of each college at PSU.

<https://ric.psu.edu.sa/research-labs.php>

Research Repository

RIC has developed a reliable, comprehensive, and up-to-date research repository and information system (IS) that provides all kinds of data to monitor the research outcomes and expenditure. RIC IS uses this repository to apply advanced data analytics and create dashboards for different stakeholders at PSU. <https://ric.psu.edu.sa/analytics-and-statistics.php>

Monitor

All the processes, services, and implementations are continuously monitored through surveys which are disseminated to students at the end of each academic year. In addition to that RIC has regular meetings with the College Committees, research lab leaders and the PSU higher management to discuss the current situation and take fact-based decisions for improving the intellectual contribution at PSU.

Monitoring of research statistics is also done monthly.

Review

At the end of the year RIC review the services provided and the research statistic and prepares an accomplishment report based on the annual operational plan

ACT / Update

PSU conducts annual stakeholder (graduate students, faculty) satisfaction surveys to know their opinion about the quality of the services. Upon receiving the results of the surveys - regarding the services provided by RIC, proper actions are taken to either maintain or enhance the level of quality of services and research statistics. These actions are included in the annual action plan for the next academic year.

F. Community Service and Continuing Education Center

Introduction

The Community Service & Continuing Education Centre **CSCEC** at Prince Sultan University enables students, families, and the business community to improve their lives through timely job-oriented educational and training programs, projects, social activities focusing on and creating real benefits to fulfill people needs and wants.

Our **purpose** is to work to empower our community by enabling them to shape their futures through practice-based learning, training programs, and projects. Understanding the power of knowledge and its transfer through education and training, the CSCEC serves the community through a broad array of programs, projects, activities, and events. Kindly visit our webpage for further information:

<https://www.psu.edu.sa/en/CSCEC>

Organizational Structure

CSCEC serves the community via PSU faculty, staff, and students through two main categories and seven sub-categories as below in Figure 29.:

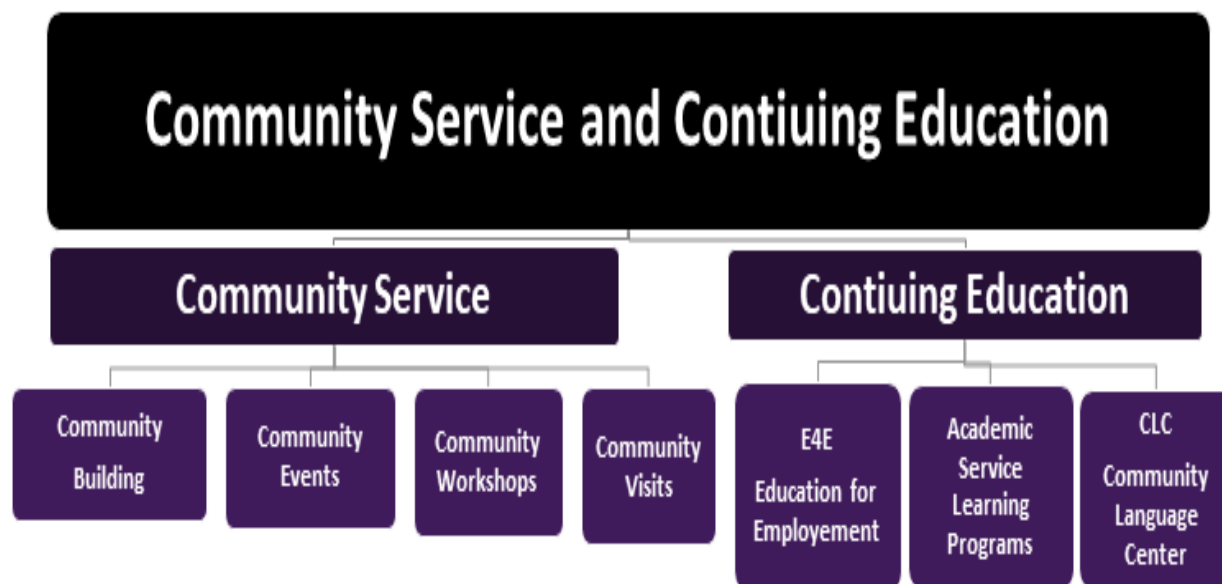


Figure 29: CSCEC Organizational Structure

Definitions used in Community Service and Continuing Education

Community Service: Conducting a workshop, event, course, or visit targeting an audience from the public.

Continuing Education: Conducting an academic program with a specific number of hours in a continuous manner requires passing specific exams to earn certain certifications targeting an audience from the public.

College Outreach: Represents the community services of a college for the college's accreditation.

CSCEC: Represents the community services of PSU for the institutional accreditation.

ICPC: Represents the institutional community committee which ensures the quality of PSU community activities outcomes from Colleges and CSCEC.

Quality Cycle Adopted by CSCEC:

In accordance with the growth of PSU, a new mechanism has been established under the supervision of DQAD "Deanship of Quality Assurance and Development" and the formation of ICPC "Institutional Community and Partnership Committee" to ensure providing the best quality of CSCEC as a center at PSU. The involvement of ICPC; "Institutional Community and Partnership Committee" (college's outreach representatives) to CSCEC will ensure the quality of performance as well as for a better recording and documentation to all PSU community services which will strengthen the collaboration between CSCEC and colleges.

Based on ETEC-NCAAA standards for Community Service and Continuing Education Center below, this new mechanism has been established.

Alignment with NCAAA Standard 8: Community Partnership

8.1 Planning and Management of Community Partnership

- 8.1.1 The institution establishes a specific plan for community partnership that is consistent with its mission, goals, and the needs of the community. *
- 8.1.2 The institution ensures the active participation of its employees and students in implementing its community partnership plan through a clear and variety of tasks and activities.
- 8.1.3 The institution implements clear policies and procedures for the provision of consultancy and services to other sectors and specifies the related rights and benefits.
- 8.1.4 The institution implements specific mechanisms for documenting, monitoring, and assessing the effectiveness of its activities in the field of community

partnership according to specific performance indicators; and prepares periodic reports that contribute to the improvement of the performance. *

8.2 Activating Community Partnership

- 8.2.1 The institution provides the opportunity to employers and professional bodies to participate actively in the planning and development of institutional and program performance and to support their activities.
- 8.2.2 The institution encourages teaching staff, employees, and students to cooperate with the community institutions, various scientific and professional bodies, and to be involved in voluntary work at the local and international levels.
- 8.2.3 The institution provides professional development and continuous education programs that contribute to meeting the community's needs.
- 8.2.4 The institution offers a variety of participatory programs and initiatives with the community that contribute to the development of entrepreneurship and pilot projects.
- 8.2.5 The institution offers cultural, awareness, and service initiatives and activities that meet the needs of the local community.
- 8.2.6 The institution allows the community to benefit from its various facilities and resources (e.g., library, sports facilities, classrooms, and laboratories).

ETEC-NCAAA standards Reference Link: [Institutional Standards](#).

CSCEC Risk Identification:

1. No coordination between the men and women campus
2. No coordination between the academic units and the CSCEC
3. Faculty and staff are not actively participating in the activities
4. Departments are not contributing to the community service activities
5. Low retention of CSCEC employees at female campus specifically.
6. Lack of dedicated facilities for conducting the CSCES programs.
7. Being unable to find classroom space for CSCEC English courses
After the pandemic, class capacity will be back to its normal size, and we will get our classes back.

All these risks have been assessed and different strategies have been adopted to avoid or mitigate the risks.

Community Service Policy:

The purpose of the Community Service Policy is to promote personal, social, and civic development of PSU students, faculty, and staff. It also aims to provide PSU students with practical experience working with community-based organizations and individuals. Moreover, this policy could foster real-time experiential learning to leverage individual skills and expertise in a service capacity.

How to conduct a Community Service at PSU?

This new mechanism aims to manage and supervise PSU Community Services on an institutional level via three phases: Planning, Implementation, and Documentation.

Planning Phase:

1. Send your proposal to the college's chairperson for approval.
2. Submit the approved letter on Community Service Application Form

on CSCEC Webpage: <https://www.psu.edu.sa/en/CSCEC>

Implementation Phase:

1. Submit a request for an announcement to **Public Relations and Media Centre** via:
PRMC@psu.edu.sa or <http://infoapp.psu.edu.sa/PRMC/>
2. CSCEC Coordinators will contact you for providing logistical support (Warehouse, Maintenance, IT, etc.)

Note: Due to Covid-19 regulations, this is limited to on-campus activities and must be approved in your submitted proposal.

Certification Phase:

1. Send a list of committed attendees' emails addresses to an assigned CSCEC Coordinator.
2. CSCEC will send them the unified official survey for PSU Community Services.
3. CSCEC Coordinator will issue e-certificates for organizers, volunteers, and attendees.

"The attendees who have filled the survey to ensure monitoring the outcomes of PSU community activities."

[This is the link on monitoring and tracking the flow of projects which have been received on the application form:](#)

[Monitoring the progress of the projects](#)

Documentation Phase:

1. Submit the exact number of hours, attendees, participants, and participating colleges/programs to the CSCEC Coordinator.
2. CSCEC Coordinator will fill the accomplishment form including the survey average to close the project to ensure accuracy of the submitted data for computing KPI results.
3. The Centre for Statistical Information CSI will generate a Dashboard for Community Service Data from survey results and documented data in the accomplishment form.

PSU Community Services Process Flowchart

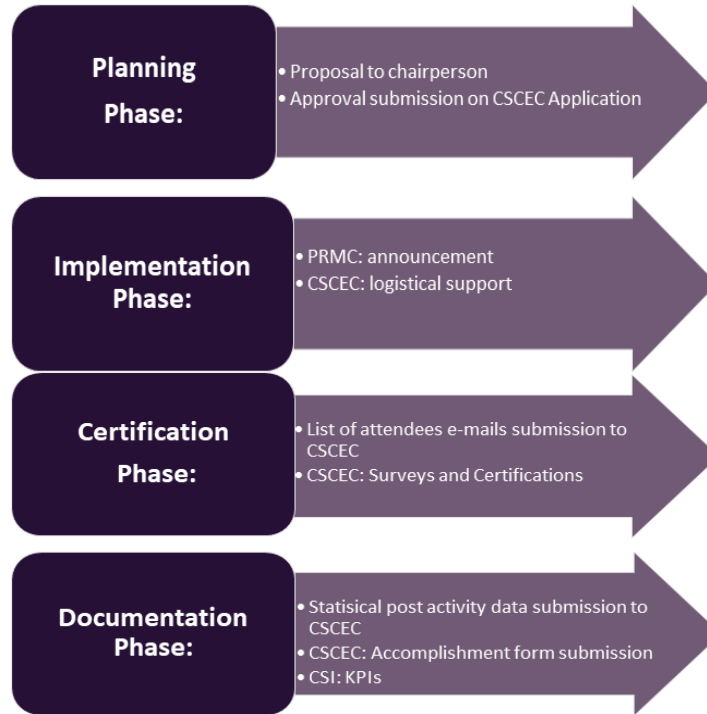


Figure 30: PSU Community Services Process Flowchart

5-Year Strategic and Annual Action Plan:

CSCEC belongs to all goals of Theme 4: Outreach, Marketing, and Partnership in PSU 5-year Strategic and Annual Action Plan (EMPOWER) and is related to most of its objectives as below:

Goal 1 Develop and improve PSU community service and continuing education programs and initiatives.

Objective 4.1.1 To increase faculty and student involvement in community service events and programs.

- Introduce a community service award for faculty and students.
- Raising awareness of community service opportunities among faculty and students.
- Recognize and publicize in the media, faculty, and student contributions to community service.
- Support and host events and activities in collaboration with community-based organizations.
- Strengthen the collaboration of CSCES with colleges in designing and delivering training programs.

Objective 4.1.2 To strengthen engagement with third parties to support and sponsor community service and continuing education initiatives.

- Increase marketing of community service and continuing education projects.
- Increase participation in community-related network events.
- Expand continuing education programs in collaboration with government and private institutions.

Objective 4.1.3 To expand community services.

- Expand online courses for the community.
- Expand collaboration with other universities through joint community activities.
- Promote the use of facilities for community service purposes.
- Expand the Interscholastic and Community Service tournaments.

Goal 2 Promote PSU nationally and internationally.

Objective 4.2.1 To enhance PSUs Image nationally, regionally, and internationally.

- Participate in national and international higher education events.

CSCEC Resources:

CSCEC has established a new building for the E4E program as well as other huge programs which have agreements with most governmental institutions. In addition to that, a whole area of new labs has been rebuilt, furnished, and installed with the most up-to-date PCs to meet the requirements for E4E programs which provide the highest standard of technical courses as Cisco, Oracle, VMware, Redhat, and Microsoft. The labs have also been provided with a special internet broadband speed specifically for E4E programs. As CSCEC has agreements with most governmental institutions in the kingdom as well as the well-known international companies in the field of Technology, we always provide these programs with dedicated full-time teachers for CSCEC programs. Cooperation with PSU faculty members has always been an opportunity at CSCEC programs as well. At the female campus, a specific academic coordinator for CLC courses, under the umbrella of CSCEC has been assigned who is always targeting, contacting, and providing CLC courses with PSU faculty members.

CSCEC Documentation:

A whole new mechanism for PSU community services has been initiated, created, implemented among all PSU colleges and offices just to ensure the accuracy of documentation.

See the mechanism above.

CSCEC Performance Indicators

CSCEC Ensures spreading surveys for all programs' beneficiaries on the last day of the activity. As an encouragement of filling the surveys by most of the beneficiaries, CSCEC requires that as a condition to receive the certificate.

The evaluations cover all logistical areas of any CSCEC activities. PSU issues two unified official surveys, one for Community Service and the other one for continuing education. These two surveys are the only accepted ones to be used for PSU Community Services to ensure and meet the required PSU Community and Partnership KPIs below:

Community Service Satisfaction Survey: [Link](#)

Continuing Education Satisfaction Survey: [Link](#)

Based on NCAAA standards, Community Service new standard is #8 and below are the required KPIs:

KPI-I-22: Satisfaction of beneficiaries with the community services (Average of beneficiaries' satisfaction rate with the community services provided by the institution on a five-point scale in an annual survey)

KPI-I-23: Rate of community programs and initiatives (Average community programs and initiatives provided by each academic program during the year) [total number of community programs and initiatives provided to the total number of academic programs]

CSCEC in collaboration with ICPC analyzes the survey's results to evaluate the further possibility of participation in any activity organizer. An activity can be approved/disapproved based on the activity organizer's feedback from beneficiaries.

DO / Implement

CSCEC has assigned specific coordinators for each PSU activity received on the application form. The coordinator will follow up with the activity organizer on which logistical support might be needed. The process of mechanism will be taken to implement the activity.

CHECK (Monitor & Review)

Monitor

CSCEC has a shared sheet called "Projects timeline" where all CSCEC members can track the received projects effectively. On the male campus, daily monitoring and tracking for the programs are taking place there. Receiving complaints or suggestions from participants and solving them directly.

CSCEC has a weekly internal meeting to discuss the flow of productivity and solve any occurred issues. These discussed issues are raised to ICPC members in monthly regular meetings and submitted to the president's office in any support needed.

Review

A monthly meeting with closed projects is conducted to discuss the previous activities if they were already documented by the organizer if we have received the data if we have provided them with the surveys and certifications.

Strategy:

Link the received activities and initiatives to the faculty evaluation to ensure documenting the accurate data. Reviewing will have its best outcomes when it's done from an external entity rather than CSCEC itself.

CSCEC closes the academic year by providing to the president's office a summary infographic describing the projects created by the center and highlighting the main accomplishments of that year. CSCEC also updated the action plan every new academic semester since most of the projects are still running in the summer.

ACT / Update

- Preparing CSCEC action plan for the next academic year based on the accomplishment of the current year and the continuous improvement in the quality of the services, considering national and institutional priorities.
- CSCEC discussed the progress of its action plan with ISPSC for supervision and advice along with the PSU strategic plan.

G. Central Library

Central Library's operations are carried out in line with the vision and mission of PSU. Thanks to the Prince Sultan University's status ranked as one of the top-tiered accredited universities by international accrediting associations, Central Library functions as a resource center with quality collections, including print, electronic, and A/V materials. Besides, Central Library supports learning by providing study rooms to students who prefer to work together on collaborative assignments within the library.

Central Library plays a critical role in hybrid learning at Prince Sultan University. The library users can gain access to the learning resources on and off the campus. Due to the availability of Wi-Fi, users can also use the library services via mobile and QS modes, of which are gaining popularity among students and faculty.

Through the website, Central Library presents a host of information about library policies, regulations, resources, research tools, and the like for the purpose of provision of the best possible resources and services to the PSU community. The library website can be accessed at: <https://www.psu.edu.sa/en/Central-Library>

Organizational Structure

The Central Library is organized in a hierarchy with four units. Library staff are assigned various duties and report to the director of the library daily. The Director of the Central Library regularly reports to the Deputy Vice President for Academic Affairs. The organization structure of Central Library is displayed below:

Quality Control Adopted by Central Library

In this section, more details are presented about essential measures practiced at the Central Library to ensure the quality of services for faculty, students, and staff. To satisfy community needs for quality sources and services, Central Library has implemented the quality assurance method, **PDCA**, according to the following phases:

PLAN:

The planning of services by the Central Library involves:

- a. Alignment with NCAAA standards
- b. Risk Management
- c. Development of Policies and Procedures
- d. Development of a 5-year strategic plan. Development of annual action plan of Central Library to accomplish the strategic plan
- e. Performance criteria for evaluation

f. Documentation

Alignment with NCAAA standards

Central Library adopts the following ETEC-NCAAA standards at the institutional/program level to ensure adherence to all quality cycle phases in providing services to the PSU community.

- o Learning resources for teaching, learning and research (Institutional)
- o Learning Resources for study and research (Program).

Risk Management

Central Library strives to provide a safe learning environment for the students, faculty, and staff. However, risk management is always one of top agendas at Central Library. For example, fire safety is considered as paramount important. The Central Library makes sure that fire extinguishers function and emergency exits work as well. Moreover, surveillance cameras have been installed within and at the entrance of the library to monitor activities and safeguard library property. Central Library, besides, provides facemasks and hand sanitizers to all the users to mitigate the spread of Covid-19 as student group activities return to normal inside the library.

Policies

The following policies have been developed by the Central Library which are required to be followed by the library users and staff.

1. [Access & Use Policy](#): is to provide the guidelines on access to information resources at Central Library.
2. [Cataloguing & Classification Policy \(Foreign Languages\)](#): is to provide a framework to maintain a uniform and appropriate standard of cataloging and classification.
3. [Cataloguing & Classification Policy \(Arabic Language\)](#): is to define and present the policy and procedures for cataloging, and classification of Arabic information resources.
4. [Circulation Policy](#): to provide guidelines about standardized and efficient circulation service.
5. [Collection Development and Acquisition Policy \(Foreign Languages\)](#): is to provide PSU Central Library staff, and PSU community with clear procedures of collection development and acquisition.

6. [Collection Development and Acquisition Policy \(Arabic Language\)](#): is to define and present the policy of acquisitions procedures for Arabic information resources. ·
[Computers and Internet Use Policy](#): is to provide guidelines for using computers and equipment at the Central Library.
7. [Document Delivery and Interlibrary Loan Policy](#): to help obtain materials unavailable via Central Library.
8. [Food & Drink Policy](#): to maintain the cleanliness in the library and provide an attractive and conducive environment for study and research.
9. [Reference Service Policy](#): to offer a uniform standard of reference service at Central Library.
10. [Noise Policy](#): to maintain a conducive and welcoming environment for reading and learning at the library.
11. [Scanning, Printing and Photocopying Policy](#): to track usage of library scanners, printers, and photocopy machines.

Processes

The following procedures for library services are included in the policies: -

Request for reference services

<https://www.psu.edu.sa/en/Library-Policies>

Request for computers and internet use

<https://www.psu.edu.sa/en/Library-Policies>

Recommend a book

https://www.psu.edu.sa/en/Library_FAQs

Search for library materials

https://www.psu.edu.sa/en/Library_FAQs

Donate books to the library

https://www.psu.edu.sa/en/Library_FAQs

5-Year Strategic and Annual Action Plan:

Central Library's strategy and policies are aligned with the university strategy, policy, and governance for provision of learning resources and facilities.

The annual action plans are prepared to achieve the goals and objectives of the Central Library strategy.

Resources:

In alignment with the 5-Year Strategic Plan, Central Library offers information resources (books, journals, reports, manuals, handbooks, electronic resources, etc.) for the PSU community. The information resources are acquired based on recommendations of faculty and students. Central Library coordinates with academic departments and Al-Shegry bookstore to provide the recommended textbooks. Equipment and furniture are purchased according to the library policy and feedback of the library users.

Central Library also collaborates with the human resources department regarding recruiting library staff commensurate with their educational qualifications and professional experience.

Key Performance Indicators:

The following NCAAA Key performance indicators are used for measuring the objectives related to Learning Resources.

- **KPI-I-07:** users' satisfaction with learning resources on a five-point scale of annual survey in terms of:
 - adequacy and diversity (references, journals, databases... etc.)
 - support services for users to access learning resources
- **KPI-P-17:** users' satisfaction with adequacy and diversity of learning resources (references, journals, databases... etc.) on a five-point scale of annual survey

Performance Criteria for Evaluation

To ensure the quality services provided by individual Central Library staff, PSU management conducts an annual evaluation for all the Central Library administrative staff.

f. Documentation:

To disseminate information and to keep users aware of the services and facilities of the library, Central Library publishes monthly newsletter, updates information on learning resources via the library website, sends email alerts to faculty, students, and staff about orientation programs and in-class lectures, services, and among other things. Central Library revises the handbook and policies regularly, reports to the higher management regarding library vital data, and maintains the archived documents concerning the stakeholders involved.

DO / Implement

Central Library disseminates the information among the PSU community about library resources and services throughout the academic year through regular announcements, library newsletter, and website. In addition to that, the library staff provides in-person and online workshops on library resources and services to PSU faculty, students, and staff all year round.

Services Provided by the Central Library

Circulation Service

Circulation Services includes borrowing and returning library materials for library patrons. Circulating materials are checked out or in via self-check stations inside the library. Reference and reserve materials are also borrowed from the library for a limited time.

Current Awareness Services

Central Library regularly informs users of the fresh arrivals of reference, textbook, databases and so forth by the library website, social media, displays of new arrivals to keep users abreast of the important development and acquisitions at the Central Library.

Information Literacy Service

Central Library is committed to enhancement of information literacy skills for the PSU community and helps users command skills to find, evaluate, and use information with ease and accuracy. User-based information literacy, workshop and orientation are provided throughout the academic year.

Reference Service

The Central Library is here to help faculty and students with research, teaching and learning needs. Librarians provide ready reference and in-depth service in response to requests for information demands. To take an example, Ask A Librarian. Such a service is accessible in person, through emails, and by telephone.

Document Delivery & ILL Services

Document Delivery and Interlibrary Loan service provides the users with books, research papers and items unavailable through PSU Libraries from local libraries.

In-Library Use

Non-circulating materials like reference works, periodicals and Co-Op reports are only available for viewing inside the library. Moreover, these special collections may be checked out with restrictions and limits.

Textbook Service

Central Library staff offer textbook services to students, faculty, and staff by working together with the Al-Shegrey Bookstore and academic departments of PSU to ensure timely delivery of the needed textbooks for instruction and study.

CHECK (Monitor & Review)

Monitor

Central Library's directors on both campuses communicate with the stakeholders regarding library services and resources during the academic year. The library staff, meanwhile, provide data about library resources and services monthly. Library policies, procedures, and practices are also monitored and evaluated through surveys, by KPIs, and related standards.

Review

Central Library reviews and revises the learning resources based on library survey, feedback from QAC and stats of the Center for Statistics and Information (CSI). Annual report about the Central Library affairs is submitted to the office of Deputy Vice President for Academic Affairs at PSU.

ACT / Update

Central Library takes appropriate actions and steps to improve the quality of the library collections and services according to users' recommendations and feedback. The adopted actions are exemplified with annual and 5-year action plans for the library operations.

References

1. National Qualification Framework of Saudi Arabia
2. ETEC_NCAAA Institutional and program Standards and Accreditation Forms
3. PSU Policy Manual
4. PSU Assessment Handbook
5. PSU Teaching and Learning Quality Framework
6. PSU KPI Framework
7. 3rd PSU 5-year Strategic Plan
8. Program Organizational Structure Handbook
9. PSU Institutional Committees