REQUIREMENTS

for

OMAN'S SYSTEM OF QUALITY ASSURANCE

IN HIGHER EDUCATION

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INTRODUCTION

This document contains the requirements for a new system of Quality Assurance in Higher Education in the Sultanate of Oman.

PART ONE sets out the standards for Oman's system of Quality Assurance and places these standards in an international context. The first section of Part One, on Oman's standards, organised into three chapters, describes in detail:

1) What kinds of institutions are recognised (**Chapter One:** *Classification of Institutions of Higher Education*)**;**

2) What awards they may offer and what outcomes are expected (**Chapter Two:** *Oman's National Qualifications Framework*); and

3) How institutions are established and legitimised (**Chapter Three:** *Procedures for Approval and Accreditation.*

The second section of Part One, in Chapter Four, places the standards for Oman's system of Quality Assurance in the context of international standards of good practice. It describes sample performance indicators for all significant areas of activity to be benchmarked against the performance of appropriate international institutions.

PART TWO contains two procedural handbooks to guide both Institutions and External Review Panels through the requirements for:

1) Institutional Accreditation
2) Programme Accreditation

The guidelines are designed to ensure a common understanding of expectations by institutions and external reviewers. An equally important function is to assist institutions in their internal planning and quality assurance arrangements.

An Annex contains definitions of the key terms used in the document.

The Appendices contain application forms for establishing and accrediting institutions and programmes; for changing the classification of an institution and for major and minor changes to programme offerings.

Oman's system of Higher Education is coming of age; and, as recognised in the opening speech for the University of the 21st Century Conference:

"Education has become … a basic pillar of Oman's future vision of economic and social development in addition to other major social and cultural roles that target establishment of an enlightened society with an awareness of its duties and rights.

Building on this, the Sultanate has given attention to structuring an effective and distinguished higher education system through development of appropriate policies and mechanisms and the provision of resources required for the achievement of the ambitious objectives."

Now that the structure of the system of Higher Education has been established with more than fifty institutions offering programmes to approximately forty thousand students, the Sultanate is appropriately turning its attention to the quality of that system in the context of the challenges of our globalised world with its rapidly accelerating knowledge economy based on information technologies.

PART ONE: SECTION I:

STANDARDS FOR QUALITY ASSURANCE

In Higher Education in The Sultanate Of Oman

Chapter One:

Classification of Institutions

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PART ONE: SECTION I:

STANDARDS FOR QUALITY ASSURANCE IN HIGHER EDUCATION IN THE SULTANATE OF OMAN

Chapter One: Classification of Institutions

i.   Background to the Classification System

The classification system sets the standards for recognition of an institution as meriting the designation of "Institution of Higher Education". It further specifies what kinds of institutions may be recognised as: 1) Universities, 2) University Colleges and 3) Colleges of Higher Education. The system includes a careful distinction between the criteria for Universities and for University Colleges, both of which offer graduate degrees.

The *university* designation must be supported by evidence of rigorous standards. One of the key defining characteristics is substantial engagement in the conduct of research. In the global environment, research is essential for competitive economic development and has been given priority in the Sultanate's Five Year plans. Credible research activity is important also for the external reputation of the system of Higher Education as a whole, since Universities are at the top of the system and the international standing of Universities is heavily dependent on the quality of their research.

A *University* must have at least three major fields of study and a significant research component. Because of the need for equitable access throughout the Sultanate, new private Universities were approved for the major regional cities of Sohar, Nizwa and Salalah, as well as for the capital, Muscat.

A *University College* is expected to share some of the key characteristics of a University. These characteristics include research activity relevant to local and national needs; appropriate research facilities; and, programmes up to and including the Master's degree in at least two broad fields of study.

To merit the University College designation an institution must have reasonable investment in research equipment and laboratories, as well as staffing to support the research function.

The term *College of Higher Education* is used generically to refer to teaching institutions which offer programmes up to and including the Bachelor's degree,

though such institutions are not always called "Colleges". They may be termed "Institutes" or "Academies" or similar.

ii.   Diversity of Institutions

Higher Education programmes are offered by a variety of institutions in Oman, both public and private. Some have partnership arrangements with outside institutions, while others operate independently. Some institutions offer a wide range of programmes and others specialise in certain fields.

This diversity has the advantage of offering a range of choice for students. At the same time, diversity also creates the possibility of confusion, unless the nature and responsibilities of different types of organisation are clearly understood.

Within their different mandates, institutions of Higher Education have common responsibilities. All institutions of Higher Education must accept primary responsibility for the quality and relevance of their programmes and services. This responsibility remains with the institution itself, regardless of any partnership that institution may have with external organisations.

In the exercise of this responsibility to ensure quality and relevance, all institutions of Higher Education must develop *Quality Improvement Plans*. All Institutions are required periodically to conduct and report on self-assessments which include compliance with standards of good practice, and comparisons of their own performance with that of recognised institutions of similar type in Oman and abroad. They must be able to demonstrate to independent External Review Panels the effectiveness of their quality assurance arrangements.

The standards of student achievement required for a given academic award are the same regardless of the type of institution offering the award. These standards are specified in the Oman Qualifications Framework in Chapter Two of this document. Institutions must establish mechanisms to ensure that the expectations of the Framework are met, that standards of student achievement are comparable to those of appropriate international universities, and that programmes of professional education provide the knowledge and skills required for professional practice in Oman and abroad, as appropriate

While the requirements for given academic awards are the same for all categories of institution, there are differences in the range of programmes offered by different categories of institution; in the level of awards which can be offered; in the degree to which accreditation of programmes may be delegated; in expectations for scholarship and for research; and in the resources necessary to support scholarship and research.

The sections below summarise characteristics of the three types of higher education institution: Colleges of Higher Education, University Colleges, and Universities.

iii.   Characteristics of Colleges of Higher Education

a) Introduction

Higher Education Colleges are primarily teaching institutions, offering programmes up to and including the Bachelor's degree. Some offer a variety of programmes, while others are specialist institutions, offering programmes in one or two professional fields, such as teaching, nursing, engineering or business studies. Note that the term *"College"* is used in a generic sense and includes institutions of Higher Education which have names such as "Academy" or "Institute" and which match the description of Higher Education Colleges.

In addition to formal award courses, Higher Education Colleges frequently provide courses in areas such as English Language, Business and IT. These may be stand-alone courses, or may contribute towards a diploma or degree offered by the institution. The concentration on teaching in Higher Education Colleges means that the quality of teaching and learning should be high.

The chief executive officer of a Higher Education College should meet standards required for a senior academic appointment, including substantial academic and administrative experience. The usual title for the chief executive officer is *Dean.* The titles of President, Rector or Vice Chancellor should not be used for the head of a Higher Education College.

Standards for the Bachelor's degree require students to acquire knowledge and skills that are up-to-date with the latest developments in their disciplines. This means that academic staff must keep abreast of research and professional practice in their field.

While a Higher Education College would not normally have an established research role, scholarship expected of staff would include activities such as:

- Part time study for a Master's degree or Doctorate through a university;

- Reading, and providing reports on current research in their field;

- Teaching courses to employed professionals on the latest developments in their field;

- Short term outside professional secondments to enable staff to keep up-to-date with developments in professional practice;

- Authorship of articles and textbooks;

- Attendance at courses or conferences in a subject discipline, or in teaching-related fields, such as curriculum and assessment;

- Action research projects in cooperation with industry or the profession; and,

- Involvement in projects to transfer relevant skills and technologies to organisations in the community.

b) Main Characteristics of a Higher Education College

1. Level and Range of Programmes

- May be accredited to offer programmes up to and including the level of the Bachelor's degree;

- May conduct undergraduate programmes in one or more broad fields of learning; and,

- May offer a wide range of community and professional courses at the undergraduate level, on a flexible basis to meet community requirements and support lifelong learning.

2. Accreditation of Programmes

- Accepts responsibility for its own awards and standards of quality. This may be in association or partnership with a recognised university.

- Ensures that programmes incorporate the latest professional and technological developments, as well as insights from research in the major fields of study at the college.

- May be delegated responsibility for minor changes to accredited programmes, subject to conditions established by the Accreditation Board.

3. Scholarship and Research

- Ensures that academic staff are engaged in scholarly activities and remain up-to-date with the latest developments in their field;

- Provides services to professional groups and local communities, drawing on the academic and professional expertise available in the institution;

- Implements a staffing structure in which at least 75% of all academic staff, and all staff teaching at levels three and four have Master's or Doctoral degrees, and about two thirds of academic staff are employed full time on contracts of at least three years.

4. Scale of Activity

- There is no specific size requirement, but the scale of operation must be sufficient for the College to meet the specified quality standards in all areas of activity.

iv. Characteristics of University Colleges

a) Introduction

University Colleges have a strong commitment to excellence in teaching. They offer postgraduate programmes up to and including Master's degree studies and are required to engage in research. The resources and infrastructure required to adequately support University College research and postgraduate programmes are such that University Colleges are usually larger and more expensive to operate than Higher Education Colleges. In particular, library holdings, including journals and internet access to research networks must be substantially greater. Equipment and facilities for staff and student research must be more extensive.

Master's degree programmes at University Colleges may include research degrees. Academic staff for Master's research degree programmes should be involved actively in research at the forefront of their discipline and should be proficient in utilising international research networks. Where advanced professional programmes are offered, the academic staff involved should have extensive relevant professional experience at a senior level, as well as appropriate academic qualifications.

The chief executive officer of a University College should meet standards required for a senior academic appointment, including substantial academic and administrative experience. The head of a University College would normally be designated as *Dean*. The title of President, Rector or Vice chancellor should not be used.

The research undertaken by a University College may vary according to the nature of the programmes offered and the research interests of staff. Nevertheless, the research profile should be consistent with the fields of study offered, the development requirements of the region in which the institution is

located, and the mission of the institution. Subject to these variations, research undertaken by a University College will normally have the following characteristics. It is:

- applied, rather than basic;
- unlikely to require substantial high capital cost resources;
- related mainly to professional practice;
- of local and national significance; and,
- relevant to the community served by the institution.

The scholarly activities of staff must be such that there is confidence that they are actively engaged with latest developments in their academic or professional fields, and that they apply knowledge gained for the benefit of students and the community. In addition to scholarly activities, the following activities might be expected of staff of a University College:

- post-doctoral research;
- relevant consultancy;
- publication of articles in refereed journals and conference proceedings;
- presentation of papers to national and regional academic conferences;
- writing and broadcasting on relevant matters from their discipline for lay audiences;
- examination of Master's dissertations for external students; and,
- design and delivery of elements of undergraduate and postgraduate programmes based on individual research.

b) Main Characteristics of a University College:

1. Level and Range of Programmes

- Offers accredited programmes up to and including the Master's degree level;

- Conducts undergraduate programmes in at least two broad fields of study; and postgraduate programmes in at least one;

- May offer a range of professional courses up to the equivalent of the Master's level on a flexible basis to meet professional requirements and support lifelong learning; and,

- Ensures effective integration of research and teaching in postgraduate programmes.

2. Accreditation of Programmes

- Accepts responsibility for its own awards and quality standards. This may be in association or partnership with a recognised university.

- May have delegated responsibility for specific types of changes to accredited programmes, subject to conditions established by the Accreditation Board.

- Uses external examiners for dissertations written by Master's research degree students.

3. Scholarship and Research

- Has a clearly defined research strategy relevant to the fields of study in which postgraduate programmes are offered, as well as in areas relevant to the local community. Provides regular reports on the implementation of the research strategy.

- Provides adequate facilities, including library and learning resources, laboratories and equipment, for research to be carried out by academic staff and students in the fields in which major programmes are offered.

- Ensures that academic staff are engaged in advanced scholarly activities.

4. Scale of Activity

- It is expected that, unless generous funding is available, an institution with less than 1,250 equivalent full time students of whom at least 1000 are in higher education award courses, would face major difficulties in meeting the requirements for University College status, especially the range of programmes and research activity. A minimum enrolment of 2,500 students is usually necessary to achieve an economy of scale.

v. Characteristics of Universities

a) Introduction:

Universities have a demonstrated commitment to the development and transmission of knowledge through research, scholarly publication, teaching, and community service, in all fields in which they operate.

Teaching at all levels should reflect the latest developments in research, as well as the application of knowledge with new educational techniques. Teaching and research are seen as interdependent functions.

The frame of reference for a University is national and international, and this should be reflected in the nature of research and scholarly inquiry. Adequate resources and facilities must be available to support advanced inquiry so that staff and students can contribute to development of knowledge in the national and international contexts. Staff are actively involved in international research networks. Substantially greater resources are required for library holdings, linkages with the international research community, and for research equipment.

The university administration reflects the academic maturity and intellectual independence of the institution. Considerable academic authority is given to an academic board and rigorous mechanisms must be in place to ensure that high academic and professional standards are maintained.

The chief executive officer of a University should meet standards required for a senior academic appointment, including substantial academic and administrative experience. The title accorded a chief executive officer of a University would normally be President, Rector or Vice Chancellor.

Research undertaken by universities normally will:

- include basic, as well as applied research;
- involve some activity that requires high capital cost resources;
- not be limited to particular occupational or professional fields;
- have national and international significance; and,
- support national development priorities.

The scholarly activities of staff reflect this broader agenda. In addition to the activities described above in relation to University Colleges, the following activities are expected normally of University staff:

- Publication in internationally recognised academic journals;
- Presentation of papers to international academic conferences;
- Involvement in international research partnerships with scholars in appropriate outside universities;
- Conduct of basic research in the main fields in which the university offers postgraduate programmes, including some fields requiring high capital investment;
- Development of inter-disciplinary approaches to research; and
- Provision of expert advice and senior consultancy to government departments, in Oman and elsewhere, as well as to appropriate international organisations.

b) Main Characteristics of a University

1. Level and Range of Programmes

- Offers accredited programmes up to and including the masters and or doctoral level;

- Conducts undergraduate and postgraduate programmes in faculties representing at least three broad fields of learning;

- Arranges conferences and other programmes in advanced professional practice in cooperation with international professional bodies; and,

- Ensures effective integration of research and teaching in all programme areas through independent verification procedures.

2. Accreditation of Programmes

- Accepts responsibility for its own awards and quality standards. While the initial development of a university may involve sponsorship or a supportive affiliation with a partner institution, any continuing relationship should be one of equal partnership and mutual benefit. A University will normally have a number of different collaborative arrangements with research agencies and international universities.

- May be delegated substantial responsibility for accreditation of its own programmes and academic awards, subject to conditions established by the Accreditation Board.

- Uses external examiners for dissertations, theses or major projects by higher degree students.

3. Scholarship and Research

- Has a clearly defined research strategy relevant to national requirements and to the mission of the University, establishes benchmarks of performance, and provides regular reports on implementation of the strategy.

- Provides adequate facilities, including library resources, laboratories and equipment, for research to be carried out by academic staff and students.

- Ensures that all academic staff are engaged in scholarly activities of an advanced nature appropriate to a university, and remain up-to-date with latest developments in their fields.

- Provides services to local, national and international communities, drawing on research networks and the advanced academic and professional expertise available in the institution.

- Implements a staffing structure in which at least 75% of all academic staff, and all staff teaching at the degree level have Doctorates. In professional programmes, part time staff without doctorates but with extensive professional experience may be included where appropriate in teaching teams. About two thirds of academic staff should be employed full time on contracts of at least three years.

   4. Scale of Activity

- It is expected that unless generous funding is available an institution with less than 2,500 equivalent full time students of whom at least 2,000 are in Higher Education award courses would face major difficulties in meeting the requirements for the University range of programmes and research expectations. Normally a minimum enrolment of 5,000 students is required to realise the benefit of economy of scale.

Vi Note re Professional Associations

A professional association or similar body established outside of Oman may make arrangements with a local organisation (not an institution of Higher Education) to serve as a local delivery agent for an international organisation to offer a technical or professional programme in Oman. Where this occurs, the association and the local agent may not be regarded as a Higher Education institution of Oman.

No programme carrying a degree designation may be offered in Oman unless the Accreditation Board is satisfied that it meets all the requirements of the Qualifications Framework for the award, including standards for teaching and learning resources available to students in Oman.

Vii Procedures for Changing the Classification of an Institution

a) Changes in Higher Education College and University College Status

An institution may apply for a change in its classification from College of Higher Education to University College (or, in unusual cases, from University College to College of Higher Education).

A change from College of Higher Education to University College requires the approval of the Council of Higher Education. Before an application can be considered by the Council, a report on the application must be provided by the responsible Ministry through the Ministry of Higher Education. An external review will be conducted by a Review Panel appointed by the Accreditation Board to assess whether or not the institution meets the requirements of the new category. The recommendations from both the Accreditation Board and the Ministry of Higher Education will be considered by the Council.

Initial accreditation in a new classification, if granted, will be provisional. If accreditation at the new level is denied or revoked by a decision of the Council of Higher Education on the recommendation of the Accreditation Board, the institution will revert to its former classification. Students enrolled in programmes which the institution is no longer authorised to offer must be relocated appropriately at the expense of the institution.

Applications from existing institutions for a change to the University College designation will be considered only in cases where there is an exemplary record, with high standards of student achievement over an extended period of time and where the institution has demonstrated its ability to meet the higher requirements of a University College. This should involve completion of one full five year cycle of successful external review.

University Colleges which were approved under the previous regulations, and which cannot meet the new requirements, must revert to Higher Education College status. Within 12 months of the effective date of the new regulations, University Colleges wishing to retain the University College designation will be assessed against the new requirements; and will be given accreditation only if the expert review panel is confident that they meet the new criteria.

b) Establishment of a University Incorporating Colleges

An institution may not be upgraded to the status of a University through the process described above for the achievement of University College status by a College of Higher Education. Establishing a University is considered as a major new undertaking. Nevertheless, a proposal to establish a new University may involve incorporation of existing institutions of Higher Education into a new university organisation.

A proposal for a private University must be assessed by the Ministry of Higher Education who will submit a report to the Council of Higher Education. The assessment by the Ministry will include advice from experienced senior academic administrators from appropriate international universities. The proposal and the report from the Ministry will be considered by the Council of Higher Education, and a decision made on whether the University should be established. If the

Council of Higher Education approves the establishment of the new University, the institution and its programmes must be accredited according to the procedures described in Chapter Three of this document.

Where a proposal for a new University involves incorporation of one or more Colleges of Higher Education or University Colleges, the quality and resources of those institutions will be assessed. All the requirements for programmes, resources and administrative systems necessary for a University must be fully described and documented in the proposal for the new University.

In cases where existing institution(s) of Higher Education are to be incorporated into a new university, as has been suggested for some of the current institutions in Muscat, first the University should be established as a structural shell based on detailed planning for a fully functional, integrated university. Then the existing college or colleges must be upgraded to meet university standards before being merged as elements into the structure of the new university. In other words, a new university must be a new entity with the full character of a university, not simply an amalgamation of existing colleges.

viii. Changes in Level or Range of Programmes Within an Existing Classification

a) Change in Fields of Study

An institution may apply to make a major change affecting its mandate; for example, to change from a single purpose to a multi purpose institution; or, to introduce a new field of study. Approval must be obtained through an application, following the steps outlined in Chapter Three, Figure 1.0. This includes approval by the Council of Higher Education, as well as accreditation of the institution, and any new programmes, by the Accreditation Board.

b) Programme Changes for Colleges of Higher Education and University Colleges

A College of Higher Education may be approved to offer programmes in specified fields of study from level 1 to level 4 (certificate to Bachelor's degree). A University College may be approved to offer programmes in specified fields of study from level 1 to level 5 (certificate to Master's degree). It should be noted that approval is required both for the levels at which programmes may be offered and for the programmes at each level. Depending on the significance of a proposed change, approval may be required from the responsible Ministry, or from that Ministry and the Council of Higher Education.

A private Higher Education College or University College wishing to expand its mandate within the range of the category to which it belongs, or to offer programmes in a new field of study, should apply in the first instance to the Directorate-General of Private Universities and Colleges. The Directorate-General will assess the need for programmes in that field and the level of resources available.

The Directorate-General will also assess other matters it considers relevant to the capacity of the institution to offer programmes in the field and at the level proposed. Following this assessment, the proposal is then referred to the Council of Higher Education which may then grant conditional approval to operate at the higher level or in the new field. If approval is granted, the licence of the institution will be modified accordingly by the Minister of Higher Education, subject to accreditation following the steps outlined in Chapter 3, Figure 1.0.

The provisional standing of the institution regarding a new level and/or new programmes may be removed following assessment within 12 months by the Accreditation Board, or it may be extended for one or two years, or revoked.

Where a government institution wishes to extend its mandate within the range of its classification, the relevant Ministry will assess the need for additional programmes, the level of resources available and other matters it considers relevant. The Ministry concerned may then grant approval to operate at the new level, subject to accreditation by the Accreditation Board. Where a government institution wishes to offer programmes in fields that go beyond the jurisdiction of the concerned Ministry, the proposal would have to be approved by the Council of Higher Education.

c) Programme Changes for Universities

Universities may be approved to offer programmes from level 1 to level 6 (Certificate level to Doctoral degree). The approval given by the Council of Higher Education for a University to be established will specify the fields of study and the levels at which programmes can be provided. This approval is subject to accreditation. If the University wishes to increase the level of its offerings in any field beyond the levels for which approval has been given, or to extend the range of its programmes to an additional field, it must first obtain the approval of the Council of Higher Education.

An application by a Private University should be made in the first instance to the Directorate-General of Private Universities and Colleges. The Directorate-General will study the application and make a report for the Minister of Higher Education, with recommendations to be forwarded, along with the application, to the Council of Higher Education.

Universities must be granted a licence to operate by the Minister before programmes can be offered. Provisional accreditation is considered on application within the first 12 months of operation.

I X Changes in Programmes

a) Amendments to an Accredited Programme

If an institution wishes to make changes to an accredited programme, the Ministry responsible must be informed at least one semester (minimum of four months) before the change is implemented.

If the change is a major one, in additional to the prior approval of the concerned Ministry, the approval of the Accreditation Board must be obtained. Approval of the Higher Education Council may also be required. Full documentation in support of the change will be required.

A proposal to upgrade an existing programme; for example, to change a Diploma programme to a Bachelor's degree programme will require accreditation. The procedures to upgrade an existing programme are the same as for renewal of programme accreditation, including a self-study. Upgrading is not simply a matter of adding additional units at a more advanced level; the structure of the total programme should be reviewed in order to ensure coherence.

b) Major and Minor Changes

Changes involving more minor matters, such as the title of a programme or the length of a programme or the addition of new courses within an approved programme, require approval of the responsible Ministry. The Accreditation Board is to be informed through the Ministry of Higher Education.

A major change would involve the approval of the Accreditation Board in addition to the approval of the responsible Ministry. Examples of major changes would be the addition or deletion of a major area of study; eg., Marketing within a Business degree; introduction of programmes to prepare students for a different occupation or profession within an approved field; eg, the addition of cosmetic surgery within Medicine; or, a change in the name of the university or in the title of an award; eg., BSc to B Eng. The responsible Ministry is to consult the Technical Secretariat of the Accreditation Board with respect to whether a change is to be considered as major.

Having outlined in this Chapter a classification system for Oman's Institutions of Higher Education and specified the standards for different types of institutions,

we now continue the specification of standards underlying Oman's new system of Quality Assurance by setting out the requirements for a National Qualifications Framework in Chapter Two. This will be followed in Chapter Three by specification of the procedures and standards for Accreditation. Chapter Four places Oman's standards in the international context by describing International Standards of Good Practice.

PART ONE *continued*

Chapter Two

National Qualifications Framework

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2. OUTCOMES FOR LEVEL TWO: DIPLOMA

a) *Knowledge*
b) *Cognitive Skills*
c) *General Competencies*
d) *Qualities of Holders of Diplomas*

3. OUTCOMES FOR LEVEL THREE: ADVANCED DIPLOMA

a) *Knowledge*
b) *Cognitive Skills*
c) *General Competencies*
d) *Qualities of Holders of Advanced Diplomas:*

4. OUTCOMES FOR LEVEL FOUR: BACHELOR'S DEGREE

a) *Knowledge*
b) *Cognitive Skills*
c) *General Competencies*
d) *Qualities of Holders of the Bachelor's Degree:*

OUTCOMES FOR LEVEL FOUR: GRADUATE DIPLOMA

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c) *General Competencies*
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b) *Cognitive Skills*
c) *General Competencies*
d) *Qualities of Holders of Doctoral Degrees*

Chapter Two: National Qualifications Framework

i) Introduction

Oman's National Qualifications Framework is a key part of the new system of Quality Assurance, as it sets the standards for academic awards for all categories of institutions as described in Chapter One.

The Qualifications Framework is designed to provide consistency in programme requirements and award titles, as well as to provide equivalence of standards in comparison with respected international institutions of Higher Education. The framework is designed specifically for the Oman context and establishes policy regarding the learning outcomes expected in Higher Education, with particular emphasis on thinking and problem solving.

The Qualifications Framework is based on the assumption that students entering Higher Education will have completed a full programme of Secondary Education and will have acquired the knowledge and skills to participate effectively in their chosen field of study in Higher Education.

In order to meet the admission requirements for Higher Education, it will be necessary for some students to complete Foundation studies.

Foundation studies are undertaken prior to admission to Higher Education programmes, and are not considered part of Higher Education programmes.

All students applying for entry to an institution of Higher Education must meet the entry requirements of that institution, including the minimum required grade point average.

Students who have completed advanced studies beyond Year 12 in Secondary School (whether or not there is a formal transfer arrangement between the new institution and the institution at which the student completed advanced studies) and can demonstrate to the receiving institution that they have completed equivalent work with required competencies should be granted Advanced Standing by the receiving institution; that is, be given credit for work previously completed that is equivalent to specific components of a Higher Education programme. It should be noted that the concept of Advanced Standing is based on the idea of Transfer Credit for a formal course of studies, NOT on Credit for Prior Learning, which could involve credit for informal self-study or for work experience.

ii) Levels of the Framework

The Qualifications Framework contains six levels of post secondary education, including four undergraduate and two postgraduate levels.

The term "Level" is used to refer to a degree of achievement in academic progress on a scale, with gradations representing the extent of acquisition of knowledge, conceptual understanding, competencies and practical skills. The scale below starts with learning outcomes expected of students in their first year of post secondary education at Level One and progresses to Level Six, which specifies the advanced scholarship expected of graduates from Doctoral programmes.

Undergraduate

Level	Credit Points	Credit Hours	Normal Minimum Time	Award Title
Level 1	120	30	1 Year	(Certificate)
Level 2	240	60	2 Years	Diploma (includes Associate Degree)
Level 3	360	90	3 Years	Advanced Diploma (includes Scottish Degree)
Level 4	480	120	4 Years	Bachelor's Degree
	120	30	1 Year at Level 4	Graduate Diploma

Postgraduate

Level	Credit Points	Credit Hours	Normal Minimum Time	Award Title
Level 5	150-180	30-45	1–2 yrs after Bachelor's	Master's Degree *
	120	30	1 Year at Level 5	Postgraduate Diploma
Level 6	300	75	2 – 4 Yrs after Master's	Doctorate

- Note: *A duration of 180 credit points (45 credit hours) is the norm for the Master's Degree; however, students who have completed a bachelor's programme in the same discipline may be allowed to reduce their Master's programme to 150 credit points ((30 credit hours).*

The framework utilises a credit point system (with the equivalent in credit hours shown for explanatory purposes). One credit point represents the learning outcomes expected to be achieved by an average learner at the level concerned in 10 hours of work. 120 has been selected as the number to be used for the equivalent of one year's full time academic work. Widely used in the UK and US systems, this equivalence (120 credit points = one year full time academic work) is easily divisible into semesters or quarters or individual subjects.

The emphasis on credit points rather than credit hours puts the focus appropriately on what has been learned (the outcome) rather than how long it takes (the input).

Studies at each level should lead to achievement of the knowledge and skills required for that level, and also provide the foundation for progression to the next level.

Where an intermediate exit award is granted, for example at Level 2 (Diploma) in a 4 year programme (eg., Bachelor's degree), the award should be regarded as a worthwhile qualification in its own right, and students should have useful knowledge and marketable skills on exit. The adoption of a four year undergraduate programme structure culminating in a Bachelor's degree is consistent with common practice in the region and abroad.

The Graduate Diploma normally is taken after completion of the Bachelor's degree at the same level as the Bachelors degree (Level 4), but in a different speciality or in a new field. The Postgraduate Diploma is taken *in the same field* after completion of the Bachelor's degree. Postgraduate Diploma studies are at the Masters level (Level 5), but do not involve the completion of a thesis.

iii) Generic Competencies

A brief statement of expected outcomes based on best practice internationally is included at each level of the Qualifications Framework.

These statements are generic descriptions grouped under the headings: Knowledge, Cognitive Skills, and General Competencies. These include making appropriate use of Information Technology.

The Framework does not encompass subject specific outcomes, which are to be defined by the institution for each programme.

Student assessment methods should provide evidence of achievement of both generic and subject specific programme requirements.

Outcomes should also reflect the policy priorities of Oman's system of Higher Education, including familiarity with Omani cultural traditions and reconciliation of those traditions with the need to compete effectively in the global economy.

Graduates should have the ability and commitment to engage in lifelong learning.

Iv) Implementation

Institutions offering programmes that are not consistent with the Framework will be expected to achieve compliance for any new student intakes commencing after the adoption of the new Framework.

Students who are currently enrolled in a noncompliant programme should be permitted to complete the programme according to the structure in place at the time they originally enrolled in the programme

V) Overseas Universities Operating in Oman

In order to receive an academic award issued by an external partner institution, students must meet all the requirements of the external institution.

At the same time, *all* programmes offered within Oman, including those offered through external institutions, must meet the requirements specified in this document.

Where an institution in Oman offers programmes in partnership with an overseas university and the awards conferred are those of the overseas university, the award title of the overseas university may be used, provided that the overseas university's regulations for degrees do not fall below the requirements described in the Oman Qualifications Framework.

vi) Verification of Standards

It is part of the internal quality assurance responsibility of all Higher Education institutions, and a pre-requisite for accreditation to obtain independent verification that standards are consistently achieved.

Strategies used to verify standards should include specific, objective measures such as check marking of student assignments, external reviews of departments and programmes, assessment of programmes by students and graduates, and reports from employers on the skills of graduates.

vii) Outcomes

Note that all levels include subject specific learning outcomes as defined by the institution for the particular field of study.

1. OUTCOMES FOR LEVEL ONE: CERTIFICATE

Studies at Level One are more advanced than studies in the final year of Secondary School. The Level One certificate is an award carrying 120 credit points (30 credit hours), following one year of full time study in Higher Education *after* completion of Secondary Education; and, if applicable, after the Foundation Year.

This award should be regarded as a worthwhile qualification in its own right, and students should have useful knowledge and marketable skills on exit.

a) Knowledge

Knowledge outcomes include familiarity with, and the ability to interpret, significant information, major issues and contemporary events in the field.

b) Cognitive Skills

Cognitive skills include an understanding of, and ability to apply, concepts, principles and theories in the analysis of issues and to solve uncomplicated problems.

Cognitive skills are evidenced by familiarity with the major techniques of enquiry, and the ability to gather, analyse and report on qualitative and quantitative data.

c) General Competencies

General competencies include the ability to communicate effectively, orally and in writing, both for personal communication and for formal reports.

Students should have sufficient mastery of mathematical concepts and the skills to analyse data and solve problems

2. OUTCOMES FOR LEVEL TWO: DIPLOMA

The Level 2 Diploma is an award carrying 240 credit points (60 credit hours), following two years of full time study in Higher Education and may cover a

number of subject fields or focus on one or two fields of specialisation. It includes recognition of the Associate Degree designation.

Normally more than 50% of studies are in the specialised field, with additional studies in related areas, general skill development, and general education.

All programmes should facilitate general skills in thinking, problem-solving and communication, as well as knowledge and skills in the core subject areas.

a) Knowledge

Expected outcomes include knowledge of significant bodies of information in the general field as well as in some areas of specialisation.

Students' knowledge should include the scope and nature of the field of study and of the subjects within it, and of principal relationships between the field and other areas of knowledge, as well as critical understanding of well-established principles of enquiry.

Students must have an awareness of major issues within the field and how those issues might be addressed.

b) Cognitive Skills

Cognitive skills include an understanding of the central underlying concepts, principles and theories of the field of study, and the ability to apply them in a new context, including, where appropriate, in an employment context.

It is important that students gain awareness of the limits of their knowledge, and of how this influences interpretations based on that knowledge.

c) General Competencies

General competencies include the ability to use information and communications technology in accessing, analysing and reporting to diverse audiences on relevant information.

Students must be able to identify and initiate responses to their own learning needs and to work effectively, both independently and in groups.

d) Qualities of Holders of Diplomas:

Holders of diplomas should have the ability to use a range of established techniques to analyse information and to propose solutions to clearly defined

problems. They can draw conclusions based on valid evidence and communicate the results of their analyses accurately and reliably.

3. OUTCOMES FOR LEVEL THREE: ADVANCED DIPLOMA

The Level 3 Advanced Diploma is an award carrying 360 credit points (90 credit hours) following three years of full time study.

Programmes should provide a broad understanding of the subject or discipline field as a whole and provide more advanced work in at least one area of specialisation, perhaps with a vocational focus.

Students should understand, and be able to apply to new situations, the concepts and principles that provide the theoretical underpinning of knowledge in their field.

a) *Knowledge*

Knowledge outcomes include mastery of the significant bodies of information within a given field, and in-depth understanding of the major specialisations, including awareness of key issues, and of how to address them.

Students must understand the way in which new knowledge is developed and should be aware of significant relationships between their field of study and related areas of knowledge.

b) *Cognitive Skills*

Cognitive skills include the understanding of, and ability to apply, key concepts and principles in interpreting information and addressing issues in, and outside, the original learning context. They should have a critical understanding of the principal methods of investigation and how to apply them to new problems.

Students should have an awareness of the provisional nature of knowledge and an ability to take this into account in the interpretation, analysis and resolution of problems.

c) *General Competencies*

Students should have the ability to communicate information effectively, to develop arguments and analyse data in a variety of forms appropriate to different issues and audiences. The ability to make effective use of information technology is critical.

Students should have leadership capability and teamwork skills.

d) *Qualities of Holders of Advanced Diplomas:*

Graduates should have the ability to take initiative in identifying problems requiring resolution and to take appropriate remedial action.

They should be able to undertake further training on their own initiative in order to develop new skills and remain up to date with developments in the field.

4. OUTCOMES FOR LEVEL FOUR: BACHELOR'S DEGREE

The Bachelor's degree is an award carrying 480 credit points (120 credit hours) following four years of full time study or equivalent.

The Bachelor's degree programme should provide a balance of breadth and depth, with at least one, and preferably two, main subjects or disciplines taken to completion at Level 4, along with lower level studies broadly related to the field of study.

Some programmes may have a vocational focus intended to qualify graduates to practice in a profession.

Graduates are able to communicate effectively orally and in writing.

Graduates should understand the culture and traditions of Oman in general and in relation to their academic studies.

a) *Knowledge*

Knowledge outcomes include comprehensive understanding of the field of study as a whole, including links to related knowledge in other disciplines and professional areas.

Graduates should have general familiarity with the latest developments at the forefront of the field and detailed knowledge of at least one significant area.

Knowledge outcomes include an understanding of the provisional nature of knowledge and of the way in which new knowledge is developed and applied in the analysis and resolution of problems.

Where studies involve professional preparation, graduates should have knowledge of relevant Omani laws, regulations and conventions. They should also understand in general the similarities and differences between Omani requirements and those in effect in appropriate jurisdictions abroad.

b) Cognitive Skills

Cognitive skills include the ability to apply established concepts, theories and modes of enquiry in a given discipline or professional field, in synthesizing and interpreting information and evaluating possible conclusions.

Cognitive skills involve the ability to analyse problems independently, drawing on conceptual skills, while taking into account the provisional nature of knowledge. Graduates should have the ability to devise solutions to complex problems and to communicate and explain findings effectively.

c) General Competencies

Students must acquire the ability systematically to gather, analyse and interpret relevant qualitative and quantitative data from a range of sources, including original sources, and scholarly or professional literature.

Graduates should have the ability to communicate effectively and to develop persuasive arguments, using different modes of communication in the language of instruction.

It is critical that graduates have the routine ability to use the most appropriate communications technology in gathering, interpreting and communicating information.

d) Qualities of Holders of the Bachelor's Degree:

Holders of the Bachelor's degree should be able to take responsibility for managing their own learning and should be able to keep up to date with new developments in their fields.

They should be able to make sound judgments about complex issues, drawing on the knowledge and skills developed in their programmes, and to communicate conclusions effectively.

They should be able to take initiative in the analysis and resolution of problems in ways that demonstrate creativity in formulating problems, evaluating evidence, and developing persuasive arguments and sound solutions.

OUTCOMES FOR LEVEL FOUR: GRADUATE DIPLOMA

The Graduate Diploma is an award for studies of one academic year and includes 120 credit points (30 credit hours), after completion of a Bachelor's

degree or an Advanced Diploma.   The award is intended for graduates who wish to undertake additional work to ensure familiarity with the latest developments in their field or to extend their studies to a different area.

The outcomes expected are comparable to those of graduates from the Bachelor's degree programme.

5. OUTCOMES FOR LEVEL FIVE: MASTER'S DEGREE

The Master's degree is an award carrying a minimum of 180 credit points, (45 credit hours) normally following at least one year, and up to three years, of advanced study. The prerequisite is completion of a Bachelor's degree in a related field.

Work at this level requires familiarity with the latest advances in knowledge in a given field; advanced skills in independent enquiry; and the capacity to apply knowledge effectively in new and unpredictable situations. A Master's programme may involve undertaking a dissertation or major supervised research investigation; or, it may involve a combination of coursework and a major project. The Master's research project must involve the application of knowledge to a matter of significance.

The Masters degree may be primarily research oriented or may involve substantial coursework, as well as the completion of a major project.

a) Knowledge

Expected knowledge outcomes include acquisition of a substantial body of knowledge, including critical awareness of current problems, theories and developments.

Graduates are expected also to have acquired knowledge of the outcomes of recent research and to understand its impact on the store of established knowledge. Graduates should be aware of new issues emerging as a result of discoveries in recent research.

b) Cognitive Skills

Cognitive skills include the ability to evaluate critically recent research, assess its validity, reliability and significance; and, where relevant, the ability to propose alternative interpretations and directions for further research.

It is important that cognitive skills include the ability to apply relevant concepts, principles and research techniques to new issues and problems in creative ways.

c) General Competencies

General competencies include the ability to use a range of research and problem solving techniques. Graduates should have knowledge of how research techniques are best used and of how to adapt research techniques to create, interpret and apply new knowledge.

General competencies also encompass the ability to develop comprehensive reports and concise public communications, as well as to report effectively on complex interpretations and make recommendations.

Graduates should have the ability to lead teams to effectively address and resolve complex and/or controversial issues.

d) Qualities of Holders of Masters Degrees:

Holders of Master's degrees should have the ability to act independently and creatively in analysing problems. They should be able to apply their knowledge and skills in the investigation of problems and development of solutions.

Holders of Master's degrees should have the ability to make sound judgments on complex issues and communicate their conclusions effectively to specialist and non-specialist audiences.

Successful graduates accept responsibility for their own learning and future professional development. They are characterised by commitment and the ability to work in cooperation with others in identifying issues and resolving problems.

POSTGRADUATE DIPLOMA: LEVEL FIVE

The Postgraduate Diploma is an award for studies of one academic year with 120 credit points (30 credit hours). The prerequisite for admission is the completion of a Bachelor's degree. This programme is for graduates wishing to update or broaden their academic background, or to convert their area of expertise to a different field.

Postgraduate Diploma programmes normally do not include a dissertation requirement (in contrast to the Master's degree), but may include a major or minor project.

The outcomes expected are comparable to those for a Master's degree, except for the demonstrated capacity to carry out and report on a major research project.

6. OUTCOMES FOR LEVEL SIX: DOCTORATE

The Doctoral Degree is an award carrying at least 300 credit points (75 credit hours) for a programme of advanced studies. The Doctoral degree is normally taken over at least two years and up to four years, following completion of a Master's degree.

Doctoral programmes require advanced independent scholarship involving the creation, interpretation and application of new knowledge, as well as understanding of the most recent developments in a major field of enquiry. Advanced research skills and comprehensive reporting skills are critical.

A doctoral programme may be based on a major research project, or a combination of advanced coursework and thesis.

The award granted for a research degree is normally a PhD. The term PhD is not used for programmes in professional fields. Professional doctoral degree programmes include a substantial coursework component and the award title usually includes reference to the professional field involved. Examples are: DEng, (Engineering) DBus (Business), DBA, (Business Administration, and EdD (Education).

a) Knowledge

Knowledge outcomes include acquisition of a substantial body of knowledge at the forefront of a given field, as well as its relationship to relevant other fields.

b) Cognitive Skills

Cognitive skills include the ability to identify a problem, the resolution of which will result in new knowledge or a significant development in professional practice. Doctoral students must be able to analyse the various dimensions of a problem through the application of relevant theories, principles and concepts. They must be able to design and carry out an investigation of the problem at a level of performance which satisfies experienced practitioners in the field.

c) General Competencies

General competencies include the ability to apply relevant research techniques to significant new developments; and, where necessary, to refine and extend existing research techniques.

Doctoral students must develop the ability to communicate results and explain the significance of original research or of advanced scholarship, so that the product is of sufficient quality for publication in a reputable journal.

d) Qualities of Holders of Doctoral Degrees:

The Doctoral graduate should have the skills and ability to undertake original research at an advanced level, independently and as a member of a team. Research should contribute significantly to the development of new knowledge, techniques or professional practice.

The graduate should be able to make informed judgments on complex issues requiring application of concepts and insights from their own field and related fields. They must be able to communicate conclusions effectively to specialist and non-specialist audiences.

Successful graduates of Doctoral programmes accept responsibility for their own learning and professional development. They are characterised by commitment and the ability to work in cooperation with others in resolving problems of mutual interest.

Having set out the standards for academic awards in the context of a National Qualifications Framework in this chapter, we now complete this section of PART ONE on standards with Chapter Three on the procedures for approval and accreditation of Institutions of Higher Education. The second section on standards, Chapter Four, contains a description of best international practices to be applied to the Oman context.

PART ONE *continued*

Chapter Three

Procedures for Approval & Accreditation

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Chapter Three: Procedures for Approval & Accreditation

i.   Introduction:

This Chapter provides an overview of the processes for approval and accreditation of Higher Education Institutions in the Sultanate of Oman.

Procedures are based on previous ordinances and regulations established by Royal Decrees, but modified to provide for the role of the Accreditation Board. The material in this chapter is an elaboration of a proposal put to the Higher Education Council in 2001. This resulted in the issuance of Royal Decree 74/2001, establishing the Accreditation Board.

The roles of the main government agencies in the accreditation process are described in this document and the stages of approval and accreditation are explained in detail. The accreditation and approval process is summarised in flow chart form in *Figure 1.0.*

Individual higher education institutions are expected to establish rigorous procedures to ensure that quality is maintained and improved, in comparison with standards of quality in recognised institutions in Oman and abroad.

An institution must be accredited provisionally within the first 12 months of operation. Confirmed and continuing accreditation of both institutions and programmes is conditional on positive reports from external quality audits, to be undertaken once every five years. Before the external audit, institutions are required to undertake an internal self-review of their performance. The self study report will be examined carefully by the external review panels.

The Accreditation Board will maintain a database with information on the results of their activities in ensuring quality in the system of Higher Education and an annual report will be published to guide institutions and the government in planning and development activities.

ii.   Agencies Involved in the Accreditation Process

a) **The Council of Higher Education** has responsibility for public policy on Higher Education. As part of this responsibility, the Council determines the number and location of institutions, and approves proposals for the establishment of new institutions, as well as changes in the classification of existing institutions. These approvals are subject to accreditation of the institutions and their programmes.

b) **The Accreditation Board** accredits higher education institutions to offer programmes at specified levels; and, similarly, accredits individual programmes. The Accreditation Board thereby certifies that all institutions and programmes in Oman's system of Higher Education meet required standards.

If approved standards are not maintained, the Accreditation Board may withdraw accreditation or decline to renew the accreditation for a programme. However the Accreditation Board does not investigate complaints or impose penalties for inadequate performance; rather, the Ministry with administrative responsibility for the institution concerned would undertake any necessary investigative or punitive action.

c) Under the direction of the relevant Minister, **Ministries** may, with the approval of the Council of Higher Education, and subject to accreditation by the Accreditation Board, establish higher education institutions to offer programmes in an approved field of activity. Such institutions are responsible administratively to their Ministries, but the Accreditation Board monitors the quality of their performance through institutional quality audits and through the process for renewal of programme accreditation.

d) **The Directorate-General of Private Universities and Colleges** in the Ministry of Higher Education has responsibility for the supervision and accountability of all private Higher Education institutions in the Sultanate. In addition, the Directorate provides the technical secretariat for the Accreditation Board. The Accreditation Board monitors the quality of the performance of private institutions and of their programmes according to the same procedures used for government institutions.

e) **Relationship Between Ministry and Institution**

Higher education institutions have been established and/or are regulated by different Ministries, including mainly: the Ministry of Higher Education, the Ministry of Manpower, the Ministry of Defence, the Ministry of Health, and the Ministry of Commerce and Industry. For implementation of the new arrangements, it is anticipated that each Ministry will work with the institutions for which it has responsibility.

While the Accreditation Board will focus particularly on activities at the institutional level, the Board will take interest in, and may make comments on, the regulations and activities of the Ministry concerned, insofar as they affect the quality of Higher Education.

iii. Stages in Approval and Accreditation of Institutions and Programmes

The approval for new higher education institutions to operate in the Sultanate of Oman involves four stages.

a) **The First Stage: Proposal:** The first stage includes the development of a comprehensive proposal and feasibility study. The proposal may be submitted by a government ministry for a government institution, or by a private person or group for a private institution. The proposal for a private institution should be made to the Directorate-General of Private Universities and Colleges, where it will be studied and a report prepared for the Council of Higher Education.

Before a proposal for a new government institution is submitted to the Directorate-General of Private Universities and Colleges, the requesting Ministry should consult the Ministry of Higher Education for guidance. In the case of both government and private proposals, the report to the Council of Higher Education will include comment on conformance with regulations; quality of academic provision, learning and support resources; and, financial viability. Attention is paid particularly to the need for the new institution, including potential impact on other provision.

b) **The Second Stage: Conditional Approval and Licensing:** The second stage involves conditional approval or rejection by the Council of Higher Education. If approval by the Council of Higher Education is granted, the Minister of Higher Education grants the institution a license to commence operations for a period of 12 months after completion of facilities and full mobilisation of all required resources. This is followed in the third stage by supervision by the Ministry of Higher Education in the case of private institutions, and by the relevant Ministry in the case of public institutions.

c) **The Third Stage: Provisional Accreditation and Renewal of License:** The third stage occurs during the first year of operation and involves application to the Accreditation Board for provisional accreditation of both the institution and its programmes. A self evaluation with a full report and external audit are required and must be provided within a maximum of 12 months after commencement of operations. The results of the self study and external audit are evaluated by the Accreditation Board, with advice from special panels appointed by the Board.

If provisional accreditation is granted on the basis of the performance of the institution during its first year of operation and its plans for the next four years, official notification is given to the Minister for Higher Education who then renews the license, enabling the institution to continue operating for another four years. During this time, the institution is monitored by the

Accreditation Board in order to ensure that commitments have been met and programmes are delivered as proposed.

d) **The Fourth Stage: Full Accreditation:** The fourth stage involves full accreditation and occurs before the end of the first five year period of operation. If the Accreditation Board is satisfied as a result of the second self study and external review that commitments have been met and quality is being maintained as proposed, the provisional designation is removed, and the institution is considered to be fully accredited.

(insert Figure 1.0 "Process of Accreditation")

iv.   Application of Accreditation Regulations to Existing Institutions

a) General Considerations

Institutions which are in operation as of the effective date of the new regulations are deemed to have approval to operate under their existing classification, subject to accreditation within 12 months. Licenses will be issued for existing, approved institutions to continue to operate, subject to subsequent review and accreditation.

The new regulations regarding classification of institutions involve changes to the requirements for University College status. Where an existing University College falls short of the new requirements, an opportunity will be given to the governing board of the University College to make the changes necessary to meet fully the new requirements for University College status. If the governing board declines the opportunity, the institution, by a decision of the Council of Higher Education on the recommendation of the Accreditation Board, will revert to College of Higher Education status.

Existing approved institutions are given a period of one year to develop a quality improvement plan and to complete a full institutional and programme self study and to submit a report to the Accreditation Board. If the assessment of the Accreditation Board is satisfactory, accreditation is granted. If the Accreditation Board is not satisfied, the relevant license(s) may be revoked or an extension of time may be given for deficiencies to be remedied.

b) Accreditation of a New Programme

Institutions approved by the Council of Higher Education to offer programmes in given fields of study may apply for accreditation of new programmes within their jurisdiction.

Before a new programme can be accredited, the Accreditation Board must be confident that the intended outcomes will be achieved. Representatives of the institution should begin by meeting with staff of the Technical Secretariat to discuss requirements for accreditation.

A detailed application should be prepared, with information provided as specified in the *Guide for Programme Accreditation* included in PART TWO of this document. The information required includes a description of: student outcomes; how student outcomes are to be achieved and evaluated; how course will be kept current; and how quality will be monitored and improved. It is the responsibility of the applicant to provide convincing evidence that the necessary standards and requirements will be met.

Advice on the application may be provided by the staff of the Technical Secretariat. However any advice given by the Technical secretariat will be without prejudice to the opinions of the review panel, or to subsequent decisions by the Accreditation Board.

The application should be submitted to the Technical Secretariat of the Accreditation Board at least 9 months before the new programme is scheduled to commence. The application will be checked by the Technical Secretariat. If the application is deficient in any way, it will be returned for amendment.

c) Premature Commencement

Making representations to the public or to potential students that institutional or programme approval or accreditation has been granted before the fact, or commencing operations or implementing changes before the necessary licenses have been granted, will be regarded as serious offences and appropriate penalties will be imposed.

v. Self-Study

a) Institutional Responsibility

The primary responsibility for ensuring the maintenance and improvement of an institution and its programmes rests with the institution. Judgments about approval and accreditation are based partly on whether the institution is deemed to have the capacity to exercise independent responsibility.

It should be noted that there are specific requirements for Quality Assurance as well as for procedures in external verification. Details of the requirements for self study and reporting are described in the *Procedural Guides* in PART TWO of this document.

b) Internal Quality Systems

Institutions are expected, on a continuing basis, to assess the current level of their performance, including the quality of programmes. They are expected to develop Quality Improvement Plans (QIPs) which reflect their mission, priorities, local and national needs. Institutions must define performance indicators, set benchmarks and monitor performance accordingly. All institutions are expected to document procedures, record outcomes and report internally on the effectiveness of Quality Assurance systems. These activities will serve to prepare institutions to meet the requirements of the periodic *formal* self studies which are to include official reports on quality of performance.

Though self study reports are primarily for use by institutions in strategic planning and quality improvement processes, they also serve as a basis for external verification of institutional quality.

c) Quality Improvement Plans

Quality Improvement Plans (QIPs) should be developed for all major areas of activity. The QIP should include a summary plan for the institution as a whole. Quality Improvement Plans are to be submitted to the relevant Ministry and the Accreditation Board. The QIP for a given institution must reflect its mission and objectives, specifying performance indicators and benchmarks.

d) Involvement of other Organisations in Verifying Standards

Institutions of Higher Education are encouraged to involve other higher education institutions, members of professions, and employers in their internal assessments. A wide range of strategies should be adopted for support and for independent evaluation of standards and activities. These strategies may include, where appropriate, academic partnerships with other institutions, or joint activities with other institutions or cooperative arrangements with a Directorate or Ministry. The Accreditation Board regards such strategies involving external organisations as part of the institution's internal quality assurance system.

vi. External Review of Institutions

Institutional reviews are conducted normally every five years by External Review Panels appointed by the Accreditation Board. The panels, composed of representatives from Oman and abroad, will examine the institution's self-study report, meet with staff and students, and conduct an intensive review of activities before preparing a report which will be made available to the institution, the Accreditation Board and the concerned Ministry.

The main purpose of the external review process is to verify that the quality of the institution is maintained and improved, and to identify any areas where improvement is required or desirable. If significant weaknesses are identified, an opportunity may be given for the institution to address problems before the next external assessment takes place. The granting of such an opportunity will be at the discretion of the Accreditation Board. If the problems identified are not resolved, the institution's accreditation may be revoked and students relocated at the expense of the institution.

vii. Renewal of Accreditation for Programmes

Programmes are normally accredited for a period of five years, by which time accreditation must be renewed. The process of monitoring and reviewing programmes is similar to that used for the institution as a whole.

When a new programme is to be considered for accreditation, a proposal must be submitted to the technical secretariat with details of how programme quality is to be monitored, specifying performance indicators and benchmarks. The proposed procedures must be followed and records kept of performance as well as of action taken in response to feedback received in evaluations.

In preparation for renewal of accreditation a formal programme evaluation is carried out internally and a report prepared. This report is submitted to the Accreditation Board, which will appoint an external review panel to assess the programme and to advise on whether accreditation should be renewed. This panel will include experienced academic staff from other institutions. In the case of programmes that prepare students for professional employment, the panel will include representatives of the professions concerned and/or of industry as appropriate.

The Accreditation Board will coordinate the timing and administration of institutional quality audits in consultation with relevant Higher Education institutions.

Having described the internal standards for Oman's new system of Quality Assurance, next, in Chapter Four we complete the discussion of standards by placing Oman's standards in the context of best practice internationally.

PART ONE: SECTION II

Chapter Four

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Chapter Four: Standards of Good Practice in Higher Education Institutions

a) Introduction

This chapter describes what is generally considered good practice in quality assurance in Higher Education internationally and includes suggested quality indicators and performance measures.

Sample performance indicators are described and institutions are expected to suggest benchmarks that they believe to be appropriate to their mission and circumstances. Ministries may propose performance indicators and benchmarks for the institutions for which they are responsible. All institutions will be expected to implement indicators and benchmarks that provide evidence of performance at levels comparable to recognised international institutions. The effectiveness of the indicators and benchmarks selected by an institution will be assessed in the initial external review.

Some performance indicators will not be optional, but required by the Accreditation Board and used consistently across the system. Examples of system-wide required indicators might include, for instance, programme effectiveness ratings by graduates; job placement rates; ratings of graduates by employers; degree of faculty involvement in scholarly activity, and performance of graduates in further study.

The standards of good practice reflect current international standards appropriately customised for Oman. For instance, the learning resources standards include reference to inter library loan systems, the development of which is essential in Oman with its system of small, geographically separated institutions.

Some staff in Oman's institutions of Higher Education may require special professional development to shift from an emphasis on memorisation towards creative thinking. Development of the capacity for independent inquiry and creative thinking is imperative. The main responsibility for professional development should rest with the institution as part of its quality assurance system, rather than with a partner institution or the concerned Ministry.

The indicators selected by the Accreditation Board will function both as a standard point of comparison among institutions, and as a source of data on the effectiveness of the Higher Education system as a whole. An important task for the permanent committees of the Accreditation Board (supported by the Technical Secretariat) will be to select a set of indicators that reflect national needs or system-wide priorities to be used in establishing benchmarks for Oman's system of Higher Education.

As data on the performance of institutions and of the Oman system of Higher Education become available, the Accreditation Board will identify a set of key performance indicators on which information will be required regularly. Common benchmarks may then be established for groups of similar institutions

b) Description of Standards

This description of standards for accreditation is intended to provide guidance to higher education institutions in quality assurance activities, including planning, self review, and quality improvement. This section is designed also to assist external panels in carrying out independent reviews of institutional performance.

The proposed quality indicators are given in broad terms and are meant to be illustrative, rather than specific prescribed requirements. Institutions should identify the specific indicators that are appropriate for their particular mission and objectives. It is important that each institution identify performance benchmarks that are both challenging and appropriate to the unique circumstances of that institution.

In assessing standards for the purpose of accreditation, reliance is placed on the advice of experienced professionals in the field of Accreditation, taking into account the mission and objectives of the institution.

Standards relate to facilities and resources, as well as to institution-wide procedures, including procedures used in the development and review of programmes. Student outcomes are assessed in the process of programme accreditation, which includes assessment of compliance with the Qualifications Framework. Where applicable, the knowledge and skill requirements for professional practice are also taken into account in assessing student outcomes.

i. Mission, Goals and Objectives

The institution should have a succinct Mission Statement which encapsulates its purpose in principal policy objectives. The Mission Statement is used as a guide for detailed planning designed to implement the Mission Statement and ensure its effectiveness. The concept of institutional effectiveness should be central to all operations and activities of an institution.

The Governing Board is responsible for approving the Mission Statement and for ensuring that it is kept up to date and adapted effectively in changing times. The Governing Board should take great care in the execution of this central duty.

The Mission Statement should be used to establish strategic priorities for effective institutional development and improvement. Setting priorities is a key element in the quality assurance process. The Mission Statement should be the fundamental touchstone in all activities related to planning, evaluation and resource allocation. The Mission must be consistent with the mandate of the institution, and realistic in relation to the capacity of the institution to operate in its particular economic and demographic environment. It must be powerful enough to generate a sense of ownership across the institution. At the same time, the Mission Statement should present challenges for the effective development of the institution while encouraging continuous improvement.

Institutional goals are derived from the Mission. Goals are used to establish general directions for overall institutional planning as well as for departmental planning.

Objectives are derived from institutional goals and are operationalised through the strategic planning process. Objectives are much more specific than goals, which in turn are more specific than the Mission from which both goals and objectives are derived. Wherever possible, objectives should include target levels of performance to be achieved within a stated time period.

Standards related to the Mission are used to evaluate the way the Mission Statement has been developed and is expressed through goals and objectives. Performance measures are used to gauge the effectiveness of the Mission, goals and objectives in guiding all activities of the institution, particularly the development and improvement of the institution and its programmes.

1. Good Practice in Establishing Mission, Goals and Objectives

1.1 Appropriateness of the Mission

1.1.1 The Mission Statement is consistent with the charter of the institution and with the expectations for an institution of its type.

1.1.2 The needs of the communities served by the institution are clearly reflected in the Mission.

1.1.3 The Mission Statement is accompanied by a thorough analysis of the relevant environment or catchment areas. The mission is linked clearly to the environment by a rationale justifying the relevance of the mission.

1.2 Mission Statement Quality

1.2.1   The Mission Statement is sufficiently specific to provide an effective guide in making choices among alternative development strategies.

1.2.2   The Mission Statement is broad enough to be relevant in application to the key activities of an institution.

1.2.3   The core values of the institution are clearly reflected in the Mission Statement.

1.2.4   The Mission Statement describes accurately and truthfully the institution and its characteristics. It reflects accurately and consistently the actual posture of the institution and its practices.

1.3 Development of the Mission Statement

1.3.1   Major stakeholders within the institution and the community have been consulted and found to support the Mission.

1.3.2   The governing body of the institution formally approves the Mission Statement.

1.3.3   Reviews are conducted periodically to confirm or amend the Mission in the light of changing circumstances.

1.4 Use of the Mission Statement

Goals and objectives for development across the institution are clearly derived from the Mission Statement.

The Mission Statement is accurately described in publications; and is known to, and supported by, staff and students.

The Mission Statement is used consistently as a basis for decision making in strategic planning for the institution as a whole and for each major administrative unit.

Decisions on resource allocation within the institution clearly reflect the Mission.

Consistency with the Mission is listed among the criteria for approval of all programme and project proposals.

Goals

Goals for all major areas of institutional activity are clearly related to the mission.

Goals are stated with sufficient clarity to guide planning and decision making effectively.

Each administrative area reviews and modifies its goals regularly in the light of changing circumstances.

1.6 Objectives

1.6.1 Objectives are expressed in specific terms which include appropriate performance indicators, and identifies target levels to be achieved within specified time periods.

1.6.2 Demanding, but achievable, objectives are established by each administrative unit.

1.6.3 Objectives are consistent with the Mission and clearly linked to it through the strategic planning process.

1.6.4 A consistent format is used for specification of objectives for all administrative units.

Indicators of the effectiveness of the Mission Statement include:

- Key stakeholders perceive the relevance and significance of the Mission and Goals of the institution

- Ratings by the governing body and key decision makers confirming the usefulness of the Mission Statement are used as a guide in decision making

- Staff and students are aware of and support the Mission

- Significant policy decisions are determined by valid reference to the Mission

- Criteria specified for assessment of programme proposals include consistency with the Mission

Proposed Benchmarks *(To be suggested by the institution)*

ii. Governance and Administration

Systems for governance and administration should be clearly defined and appropriate to the mission of the institution. In addition, governance and administrative systems should be regularly evaluated and improved.

While variations in institutional arrangements are appropriate, a number of principles of effective administration apply in all instances. The roles of the governing body, the chief executive officer and the senior academic committees should be clearly differentiated and defined in the regulations and administrative procedures of the institution.

The governing body should be responsible for determining key policies and strategic directions. The governing body is responsible for major decisions including approval of the institution's budget and appointment of the chief executive officer and senior staff. The governing body establishes accountability frameworks and monitors the performance of the institution. The chief executive officer is held accountable for keeping the governing body informed of major issues, though the governing body should not interfere with academic judgments or management decisions.

Mechanisms for effective coordination of planning should be in place. Goals and objectives consistent with the Mission and with the overall institutional goals and objectives should be established by all administrative departments. Mechanisms for Quality Assurance should be integral to the planning process. A senior member of staff should be assigned the responsibility for Quality Assurance.

2. Good Practice in Governance and Administration

2.1 Governing Body

2.1.1   The governing body has as its primary objective the effective development of the institution in the interests of students and the nation.

2.1.2   Membership of the governing body ensures an appropriate balance of individuals with the range of perspectives and expertise necessary to guide the policies of the institution. (In the case of a private institution, not more than one third of the members should be investors in the institution.)

2.1.3   Members of the governing body are familiar with the institution's range of operations. New members are given a thorough orientation and induction.

2.1.4   The governing body periodically reviews the mission, goals and objectives of the institution, and ensures that the mission, goals and objectives are reflected in detailed planning and institutional activities.

2.1.5   Sub committees of the governing body include members of senior staff, and outside persons as appropriate. Sub committees are established to consider and provide advice *at the policy level* on major matters such as finance and budget; staffing policies and remuneration; strategic planning; and facilities.

2.1.6   The governing body establishes appropriate mechanisms for the accountability and performance evaluation of the chief executive officer.

2.1.7   Regulations provide for declaration of pecuniary interest as well as a mechanism for avoidance of conflict of interest in relation to particular issues and proposals.

2.1.8   The governing body monitors and accepts responsibility for the total operations of the institution, but avoids interference in management decisions or with the judgments of internal academic bodies.

2.1.9   The governing body regularly reviews its own effectiveness in governing the institution, directs an assessment of the effectiveness of the management of the institution, commissions a report, and plans for improvement.

2.2 Chief Executive Officer

2.2.1   The Chief Executive Officer provides effective leadership for the institution, identifying issues and developing solutions for direct implementation or for recommendation to the governing body, as appropriate.

2.2.2   The Chief Executive Officer delegates administrative responsibilities within a clearly defined structure, including an appropriate reporting and accountability framework.

2.2.3   There are clear lines of responsibility and accountability, with regular performance evaluation and feedback.

2.2.4   The Chief Executive Officer provides opportunities for initiative in the exercise of responsibilities by subordinates. Advice and support are made available to subordinates in a manner which contributes to their development.

2.2.5   The Chief Executive Officer ensures that submissions to the governing body for approval of academic and administrative matters are fully documented and that recommendations on policy issues are presented in

a form that clearly identifies policy issues for decision and the consequences of alternatives.

2.3 Internal Regulations

2.3.1 Regulations are communicated clearly and are accessible to all affected.

2.3.2 Internal regulations clearly establish responsibilities and operating procedures; and, where appropriate, the criteria for decisions for major committees, administrative units and positions within the institution

2.3.3 The institution has a programme for the periodic review and amendment of regulations with specified timelines.

2.3.4 Mechanisms for monitoring and evaluation of the performance of each unit or major committee are established by regulations.

2.3.5 Regulations are in place to establish a framework for formal delegation of responsibility and mechanisms for reporting and accountability.

2.4 Quality Assurance and Improvement

2.4.1 The quality assurance and improvement strategy involves all parts of the institution, is led by a senior staff member as a major responsibility, and includes staff from all areas.

2.4.2 The institution's quality assurance system is fully integrated into the normal planning and development strategies in a defined cycle of planning, implementation, assessment and review.

2.4.3 All administrative units and sections within the institution, including the governing body, are included in the process of quality assurance and improvement.

2.4.4 Procedures involve continual monitoring of achievement of objectives as well as periodic self evaluation with results reported.

2.4.5 Each administrative unit establishes appropriate and challenging objectives which reflect the mission and are linked to specific performance indicators.

2.4.6 Performance evaluation includes comparisons with comparable institutions selected to provide appropriate benchmarks for significant activities.

2.4.7   The self review process incorporates feedback from individuals external to the institution in a planned programme of reviews.

2.5   Associated Companies

Where institutions establish or control subsidiary corporations for matters such as service provision, publication, or development of intellectual property there is:

2.5.1   Consistency between the functions of the entity and the charter and mission of the institution.

2.5.2   Clear specification of the responsibilities and relationship of those entities to the institution.

2.5.3   Effective oversight or the purposes, functions, and activities of the subsidiary by the governing body.

2.5.4   Provision of audited financial reports and detailed consideration of those reports by the relevant committee of the governing body.

2.5.5   Protection for the institution against financial or legal liabilities arising from the activities of the entity.

2.6   Institutional Research

2.6.1   Institutional research is developed as an effective function in collecting and analysing data and disseminating results important for the effective operation of the institution

2.6.2   Institutional research is incorporated as an integral part of the institution's planning and evaluation process

2.6.3   Administrative responsibility is assigned for conducting institutional research

2.6.4   Adequate resources are allocated to allow access to relevant information

2.6.5   Institutional research includes: ongoing timely collection, analysis and dissemination of data; use of external studies and reports; design and implementation of internal studies related to students, personnel, facilities, equipment, programmes, services and fiscal resources; development of databases suitable for longitudinal studies and statistical analysis

Indicators for Standards of Good Practice in Governance & Administration

- Number of incidents of attempted Board interference in the management of the institution

- Smooth functioning of Board committees as indicated in informal surveys

- Morale of senior administrators and mangers as measured in confidential surveys

- Turnover rate for Administrative staff

- Performance Appraisal is supported by effective professional development programmes as indicated in administrative staff feedback re professional development opportunities

- Annual audited reports indicate a balanced budget, preferably with 1% contingency reserves, and evidence of proper internal financial procedures, and proper controls over associated companies

- Quality and effectiveness of Institutional Research

- Number of Health, Safety and Environment incidents as recorded in monthly reports

Proposed Benchmarks *(to be suggested by the institution)*

iii.   Learning and Teaching

Learning should be at the heart of an educational institution.

Insofar as possible, attention should be focused on the quality of learning outcomes, with other functions assessed according to the extent to which they contribute (or are likely to contribute) to those outcomes.

It is important for an institution to define carefully the special characteristics which graduates are expected to exhibit; to plan and implement strategies to develop those characteristics; and, to assess critically the extent to which competencies are developed. The focus on student outcomes has significant implications for teaching strategies, as well as for assessment. The characteristics identified by institutions for student outcomes should be consistent with the Qualifications Framework which gives priority to the application of conceptual skills in creative thinking and problem solving; communicating effectively; and, commitment to lifelong learning.

This standard relates principally to the quality of learning and teaching. It covers instructional support activities, including assistance for students, procedures for development and review of programmes, as well as for evaluation and improvement of teaching. Attention is paid to the role of partner institutions in quality assurance, and to distance education.

An academic partnership arrangement may contribute significantly to the quality of learning and teaching, but this is not sufficient as a guarantee of quality. The focus is on the quality of learning services and resources available directly to students in Oman.

3. Good Practice in Teaching and Learning

3.1 Student Outcomes

3.1.1 The focus on Student Outcomes is consistent with the Qualifications Framework and with requirements for professional practice in Oman.

3.1.2 Special attributes that students should acquire before graduating are clearly defined; strategies for developing these attributes are implemented across all programmes, and mechanisms for assessing and reporting on achievement are in place.

3.1.3 Procedures have been established for benchmarking quality of learning in comparison with standards at comparable institutions.

3.1.4 Performance of graduates continuing in Higher Education is monitored.

3.1.5 Employers of graduates are surveyed regularly to gauge the relevance and adequacy of skills of graduates.

3.2 Support for Student Learning

3.2.1 Teaching staff are available at scheduled times for consultation and advice to students.

3.2.2 Sufficient tutorial assistance is provided to ensure understanding and ability to apply learning.

3.2.3 Systems are in place for monitoring and coordinating student workload.

3.2.4 The progress of individual students is monitored; and, assistance and/or counselling is provided to those facing difficulties.

3.2.5 Year to year progression and completion rates are monitored for the institution as a whole, for different programmes, and for particular categories of students. Progression rates are assessed with reference to appropriate benchmarks and action taken when problems are identified.

3.2.6 Feedback on performance and results of assessment are given promptly; and, if required, accompanied by mechanisms for assistance.

3.3 Quality of Teaching

3.3.1 Teaching staff are familiar with the academic administrative systems in use at the institution.

3.3.2 Teaching staff have qualifications and experience appropriate to their assignments

3.3.3 A comprehensive system for evaluation of teaching effectiveness is in place. Teaching staff develop strategies for improvement of course content and delivery methods. They maintain a portfolio of evidence regarding evaluations, noting strategies for improvement.

3.3.4 Incentives and rewards are given for outstanding teaching, to encourage innovation and creativity, as well as improvement.

3.3.5 Support and advice are provided for staff to improve teaching through procedures which include induction programmes for new staff; mentoring; supervision and appraisal; and opportunities for professional development.

3.3.6 There is an appropriate mix of full time and part time staff according to the needs of different programmes - sufficient to ensure continuity, staffing flexibility, availability of advice to students, and professional relevance of course material.

3.3.7 Teaching is up-to-date and reflects the latest developments in the field, including an understanding of how knowledge is developed and of the tentative nature of knowledge.

3.3.8 Course descriptions are available before courses commence and clearly specify the knowledge and skills to be developed, as well as work requirements and assessment procedures. The conduct of courses is consistent with course descriptions.

3.3.9 Methods of teaching are designed to develop specific student attributes and skills, rather than simply to transmit information. Teaching methods

are reviewed regularly in light of their effectiveness in producing the required outcomes.

3.3.10 Assessment practices are clearly communicated to students at the commencement of courses. Evaluation methods cover all the objectives of the course and adequately assess the required outcomes.

3.4 Programme Development and Review

3.4.1 New course proposals are formally assessed and approved or rejected by the Academic Board or equivalent committee.

3.4.2 Factors considered in new course proposals include: the purpose of the course and its relevance to the institution's mission and goals; consistency with the Qualifications Framework; recommendations from experienced practitioners in industry or relevant professions; availability of qualified staff and resources, including equipment and learning resources; demand for graduates; relationship to, and likely impact on, other courses; and, appropriateness of teaching methods and assessment procedures.

3.4.3 Existing courses are evaluated regularly through a planned cycle of reviews in order to ensure continuing relevance and quality.

3.4.4 Programme reviews include assessment by academics from other institutions and; where appropriate, experienced practitioners from relevant industries and professions. The review process includes interviews with staff and students, and evaluation according to the criteria specified for this standard.

3.4.5 Quality indicators for all courses are reviewed at least annually by senior administrative staff and by the Quality Review Committee(s) responsible to the Academic Board.

3.4.6 Advisory panels are established for all professional programmes in order to provide advice on the content and quality of courses. Advisory panel membership includes leading practitioners from the relevant professions.

3.4.7 The programme of reviews and other matters listed in this standard are incorporated into a comprehensive Quality Improvement Plan. This plan forms a major component of the institution's overall Quality Assurance system, and is evaluated in the institutional self study.

3.5 Partnership Arrangements

3.5.1 Responsibilities of the local institution and the partner are clearly defined in formal agreements which are regularly reviewed with respect to the effectiveness of the partnership arrangements.

3.5.2 Briefings and consultations on course requirements are adequate, with mechanisms available for ongoing discussion of issues as they arise. Staff from the partner institution who are familiar with programme content visit the institution at least once annually to consult on course details and standards of assessment.

3.5.3 Where arrangements involve assessment of student work by partner institutions, final assessments are completed promptly and results made available to students no later than one month after submission.

3.5.4 Where programmes are based on those of the partner institution, courses, assignments and examinations are adapted to the local environment, using examples and illustrations relevant to Oman.

3.5.5 Courses are consistent with the requirements of the Oman Qualifications Framework. Professional programmes include relevant regulations and conventions appropriate to the local environment.

3.6 Distance Education

3.6.1 Course materials are designed appropriately for the mode of delivery.

3.6.2 Adequate tutorial assistance is available, with rapid response time for student enquiries, and opportunities for direct interaction with students.

3.6.3 The number of teaching staff per student is specified, benchmarked against comparable institutions, and implemented.

3.6.4 Retention and completion rates for individual courses and programmes are monitored, benchmarked, and reported regularly to the Academic Board and the governing body.

3.6.5 Learning resources are readily available, preferably with key documents in electronic form.

Indicators for Standards in Teaching and Learning

- Results of survey ratings by students on the relevance and quality of course content; and, staff expertise and availability.

- Ratings by students on effectiveness of courses in developing generic competencies defined by the institution.

- Employer assessment of quality of graduates, and their competence, including ability to apply generic skills.

- Student/staff ratios overall and by fields of study.

- Employment rates for graduates.

- Transition rate from the first to the second year of study.

- Rates of course completion according to minimum time and also within one year of the minimum time.

- Completion rates in courses delivered by distance education.

- Proportion of students accepted for admission to postgraduate study at recognised universities.

- Amount of staff time scheduled for individual student consultations.

- Assessment of course quality and relevance by advisory panels drawn from industry and from leading institutions.

Proposed Benchmarks *(To be suggested by the institution)*

iv.   Student Administration and Support Services

Responsive, reliable, secure and accessible systems for student administration, record keeping and support services are essential for the effective operation of an institution. Students and others seeking help should be responded to courteously, immediately, and reliably by staff who are familiar with the regulations of the institution.

Institutions have responsibility for the provision of a range of support services adequate to ensure a safe, healthy and secure environment for students, and to contribute to their cultural, social, moral and physical development.

The range and extent of student services for a particular institution may vary according to the mission and the nature of the student population. Details of the

services offered should be planned carefully as an integrated element in instruction and instructional support. Student Services should be adequately publicised, evaluated regularly and progressively improved as part of the quality assurance process.

Student organisations may offer some services to supplement or to extend the range of student services offered by the institution. Student organisations can provide useful learning experiences for students and can assist in ensuring that services are responsive to students' perceived needs. Where student organisations are involved, the institution has responsibility to ensure fair and equitable provision for all students, proper standards of service, and financial accountability.

The services classified as student services for the purposes of this standard include, but are not limited to: registration; assessment and learning assistance; counselling; academic advising; career guidance; employment placement services; student accommodation; cultural and sporting activities; student publications and medical services.

4. Good Practice in Student Services

4.1 Planning and Evaluation of Student Services

4.1.1 The range of services provided and the resources devoted to them are explicitly related to the Mission of the institution and to the special requirements of the student population.

4.1.2 A senior member of staff is assigned responsibility for management and development of student services.

4.1.3 Regular reports are made to the governing body on the extent and effectiveness of services provided.

4.1.4 Students are involved appropriately in the planning and review of services.

4.1.5 The effectiveness and relevance of services is monitored regularly through procedures which include surveys of student utilisation and satisfaction. Services are modified in response to evaluation and feedback.

4.2 Administration of Student Services

4.2.1 Adequate facilities and financial support are provided for required services.

4.2.2 Where services are provided through student organisations, managerial and organisational assistance is given, if required. There is effective oversight and reporting of financial management of student organisations.

4.2.3 Services requiring professional skills, such as medical services and student counselling, are provided by staff with the necessary professional qualifications. For student publications, there are clear guidelines defining standards, editorial policy, and the extent and nature of supervision by the institution.

4.2.4 Wherever appropriate; for example in medical and counselling services, there are effective mechanisms for follow up to ensure student welfare and to allow proper evaluation of quality of service.

4.2.5 Students are made aware of the range of services available and of how to gain access to services through user-friendly documents and effective orientation programmes.

4.2.6 Staff are familiar with the range of services available and refer students to the appropriate service when needed.

4.3   Student Residences

4.3.1 Residences must be of a good standard, providing a healthy, safe and secure environment for students. Residences for women should reflect cultural norms.

4.3.2 Adequate facilities are available to ensure privacy and to facilitate individual quiet study.

4.3.3 Clearly defined codes of behaviour are established, with the formal agreement of students.

4.3.4 Residences are effectively supervised by staff with the experience, expertise and authority to manage the facility as a learning environment.

4.3.5 Adequate medical facilities and satisfactory services for catering, laundry and communication are provided or are conveniently accessible.

4.3.6 Residences are on or near the campus, or transport facilities are provided to ensure easy access.

4.4 Student Discipline

4.4.1   A code of conduct is approved by the governing board and made widely

available within the institution. The code specifies rights and responsibilities of students, as well as procedures for complaints, discipline, and appeal

4.4.2 Regulations specify action to be taken for breach of student discipline, including the responsibilities of relevant officers and committees, and penalties which may be imposed.

4.4.3 The procedures for student appeal against disciplinary action are clearly specified and fairly administered by persons or committees independent of the parties who initiated the disciplinary action

4.4.4 Disciplinary action is taken promptly. Full documentation, including details of evidence, is retained in secure institutional records

4.5   Student Records

4.5.1 Effective MIS systems are in place to track student data. Central files containing cumulative records of student enrolment and performance are maintained in a secure area. Back up files are maintained in a separate, secure location, preferably in a different building.

4.5.2 Formal policies establish the content of permanent student records and rules for retention and disposal.

4.5.3 Clear rules are established and maintained for governing privacy of information and for controlling access to individual student records.

4.5.4 Timelines for reporting and recording results and updating records are clearly defined and adhered to.

4.5.5 Results are finalised, officially approved, and communicated to students no later than one month after completion of requirements.

4. 6   Student Admissions

4.6.1 Admission and student registration procedures are efficient and use appropriate computerised systems, linked to data recording and retrieval systems adequate for reporting requirements.

4.6.2 Student advisors familiar with details of course requirements are available to provide assistance prior to, and during, the student registration process.

4.6.3 Student fees are paid at the time of registration. Where institutional regulations provide for deferral of payments, the conditions and dates for payment are clearly specified in a formal agreement, signed by the

student and witnessed. Opportunities for financial counselling are provided.

4.6.4 Rules governing admission for advanced standing are clearly specified. Opportunities for student advising are provided before, or at the time of, admission. Decisions on exemptions or advanced standing are made known to students prior to registration

Indicators for the Student and Administrative Services Standard

- User surveys regarding the range and quality of student services.

- Usage rates for specific services.

- Proportion of operating funds allocated to student services.

- Number of student disciplinary hearings and outcome.

- Number of appeals against student discipline decisions.

- Turn around time for information requests from students and members of the community.

- Time taken in finalising and communicating results of student assessments.

- Percentage of on-time payments of student fees and of non payment of fees.

Proposed Benchmarks *(To be suggested by the institution)*

v.   Learning Resources

Adequate learning resources, including library and instructional support services are essential to the success of programmes designed to develop the capacity for independent learning and creative application of ideas. Educational technologies and other learning resources, both on and off line, must be up-to-date and regularly enhanced as new material becomes available. There must be convenient access to information through interlibrary loan and the internet.

Learning resource collections should reflect the basic requirements of programmes offered by the institution, but must go well beyond immediate needs to provide access to research in journal and internet publications that capture the

latest developments in relevant areas of inquiry. In institutions offering postgraduate studies and conducting research (Universities and University Colleges), these requirements are substantially greater than is the case for predominantly undergraduate institutions.

Institutions must keep pace with the rapid development of information technology and advances in flexible delivery of courses. Libraries are now advanced Learning Resource Centres, no longer simply collections of books and periodicals. Libraries should be gateways to global information for advanced research and investigation in an international context.

In order to provide information services to the community, new partnerships are evolving among professional staff - in teaching, in resource centre activities, in technical areas and in research. Conventional indicators used to assess adequacy of resources, such the number of books and journals in the Learning Resource Centre collection should be re-evaluated in light of the importance of rapid access to information systems, including turn-around time and rate of information retrieval.

Adequate resources must be provided for the acquisition, maintenance and upgrading of educational technologies and the development of learning resources. Evaluation and improvement of learning facilities and resources should be prominent in institutional self studies, and in strategies for quality improvement.

5. Good Practice in the Provision of Learning Resources

5.1 Planning and Evaluation

5.1.1 Clear policies are established for the development of learning resources and support services as part of institutional planning for quality improvement.

5.1.2 Evaluation of services includes measures of user satisfaction, extent of usage; consistency with requirements of teaching and learning; and range of services.

5.1.3 Priorities are established for acquiring learning resources and developing services consistent with the needs of users.

5.1.4 A cross-section of staff and students is involved in establishing priorities, in planning, and in evaluation.

5.2 Organisation

5.2.1 Learning Resource Centres offer extended hours to ensure convenient access.

5.2.2 Learning resources are situated appropriately and catalogued according to established practice to ensure quick access to both physical resources and electronic databases.

5.2.3 Cooperative agreements are established with other institutions for interlibrary loan and sharing of resources and services. Reliable systems are in place for recording data on loans and returns, with efficient follow up for overdue materials.

5.3 Support for Users

5.3.1 Orientation and training programmes are provided for new users in order to facilitate access to facilities and services.

5.3.2 Assistance is provided to users in conducting searches and analysing or applying information.

5.3.3 Mechanisms are in place for rapid response to inter library loan requests. Search facilities are available to assist in locating resources internally and externally.

5.3.4 Learning Resource Centres are staffed by a sufficient number of qualified staff with experience in relevant fields of Librarianship and Information Technology.

5.3.5 Reserve systems ensure adequate access to necessary learning resources for all courses offered.

5.3.6 Adequate arrangements are in place for distance education students to access required materials.

Indicators for the Learning Resources Standard

- Range and quality of Learning Resources available, especially IT and educational technologies

- Capacity and effectiveness of Library Management Information Systems

- Number and effectiveness of learning resource staff

- Utilisation rates and results of user satisfaction surveys.

- Success rates for users in accessing reference material.

- Internet access and average response time in obtaining materials through interlibrary loan systems.

- Number and quality of publications and journals in the full range of fields of study.

- Proportion of total budget expenditure on provision of learning support resources.

Proposed Benchmarks   *(To be suggested by the institution)*

Vi Facilities and Equipment

Specific requirements for facilities and equipment will vary according to the institution's classification and its mission, programme offerings and scale of operation. Facilities and equipment, including IT and educational technologies, should meet the requirements of high quality teaching and learning as well as provide an attractive, safe and healthy environment for staff and students.

Effective management of capital assets involves choices among alternatives, often contested by internal groups with legitimate, conflicting needs. Such conflicts should be resolved within a framework of clearly defined policy which takes into account such factors as: the need for up-to-date learning resources and facilities, new programmes, requirements for research, new capital development; environmental management; minor works; maintenance; and replacement of plant and equipment.

Current provision of computers and information technology systems is an issue for all institutions. While it is important to respond to new developments in educational technologies, new IT acquisitions should not be at the expense of the facilities and resources required for conventional instruction. The pressure to adopt expensive new technologies in conflict with conventional budget priorities is usually greater for institutions engaged in advanced research where access to state-of-the-art equipment is critical.

Many institutions have adopted strategies for leasing or sharing expensive IT equipment, or for outsourcing capital financing. Such strategies should be embedded in a comprehensive financial plan based on the long term interests of the institution, with short term flexibility.

6. Good Practice in Managing Facilities and Equipment

6.1 Policy and Planning

6.1.1 The institution has a long term master plan approved by the governing board. The master plan provides for maintenance of facilities, capital development, major equipment acquisition, servicing and replacement.

6.1.2 Physical facilities, grounds and landscaping provide an attractive environment with adequate resources for the full range of institutional activities.

6.1.3 Equipment planning provides for regular upgrading and replacement, according to a planned schedule within a policy framework which ensures compatibility of equipment across the institution.

6.1.4 Business plans are prepared prior to acquisition of major equipment, with evaluation, where appropriate, of alternatives for leasing or shared use with outside agencies.

6.1.5 Proposals for leasing of major facilities and for outsourced construction and management of facilities are evaluated in the long term interests of the institution. Contracts are managed in a way that ensures effective quality control and financial benefits

6.2 Quality of Facilities

6.2.1 Facilities meet health & safety requirements with adequate provision for the personal security of staff and students.

6.2.2 Standards of provision for classrooms and related facilities, laboratories, and equipment for teaching, learning and research are benchmarked against equivalent standards at comparable institutions.

6.2.3 Provision is made for regular preventative and corrective maintenance.

6.2.4 Quality assessment procedures include feedback from principal users and mechanisms for considering and responding to their views.

6.3 Management & Administration

6.3.1 A complete inventory is maintained for equipment owned or controlled by the institution, including equipment assigned to individual staff for teaching and research.

6.3.2 Services such as cleaning, waste disposal, maintenance, safety, and environmental management are provided efficiently and effectively under the supervision of a senior administrative officer.

6.3.3 Effective security is provided for specialised teaching and research facilities and equipment, with responsibility clearly defined among individual staff members, departments or faculties, and central administration.

6.3.4 Scheduling of general purpose facilities is managed through an electronic booking and reservation system. The extent and efficiency of usage is monitored and reported

6.4 Research Equipment

6.4.1 Cooperative arrangements are made, where appropriate, with other agencies for shared ownership or shared use of research equipment.

6.4.2 In institutions with responsibility for research, basic equipment and laboratory facilities are available for faculty and student research in all relevant fields.

6.4.3 Clear policies are established regarding ownership, control and maintenance of research equipment, including equipment acquired through research grants.

6.5 Information Technology

6.5.1 Adequate annual budgets are provided for staff training, acquisition and replacement of equipment, and systems development.

6.5.2 Effective use is made of information technology for administrative systems and for internal and external communications.

6.5.3 An institution-wide acquisitions and replacement policy for software and hardware is implemented to ensure compatibility of systems and equipment.

6.5.4 Instructional and learning support facilities, equipment and services are accessible to all staff and students.

6.5.5 An adequate infrastructure is provided to support servicing and maintenance of systems and equipment.

6.5.6 Security systems and firewalls are implemented to protect sensitive institutional information, and to protect against viruses.

6.5.7 A code of conduct is established to deal with inappropriate use of material on the internet.

6.5.8 Staff professional development programmes are available to ensure effective development of IT skills.

6.5.9 Internal information systems are compatible with external reporting requirements.

Indicators for the Facilities and Equipment Standard

- Utilisation rates for teaching facilities, including ratios of hours booked to hours used.

- Usable floor area per full time student, with rates for particular functions, such as teaching space and laboratory space.

- User satisfaction surveys regarding classroom, laboratory, learning resource and IT facilities.

- Existence of sound business plans for acquisition of major equipment.

- Reports on condition of buildings and equipment and follow-up systems.

- Regulated and quantified maintenance reporting systems and percent expenditure on corrective maintenance.

- Replacement rate for IT equipment.

Proposed Benchmarks

(Suggestions to be made the Institution)

vii Financial Planning and Management

Institutions must have sufficient financial resources to support the full operation of the institution. Financial resources should be at a level comparable to standards set by recognised external institutions with a similar profile. Financial

resources are to be used effectively and efficiently for the maximum benefit of students, as well as for the long term growth and development of the institution.

Annual budgets and financial reports should be approved by the governing board, and the board kept informed of levels of expenditure in relation to established budgets. A board committee should monitor closely the budget planning process and levels of expenditure to ensure that the board properly exercises its responsibility for financial control.

Responsibility for overall budgeting, accounting and financial management systems should rest with the Central administration, with appropriate delegation of authority to heads of department for specified levels of expenditure within their costs centres. Regular management reports should be provided to cost centre managers, and preferably available on line through the MIS, so that budget managers can monitor their budgets efficiently.

7. Good Practice in Financial Planning and Management

7.1 Financial Planning and Budgeting

7.1.1 Budget planning and resource allocation reflect the mission and goals of the institution.

7.1.2 Annual budgets are developed within the context of long term projections for revenue and expenditure, adjusted in the light of experience.

7.1.3 Budget proposals are developed by senior administrative staff in consultation with cost centre managers. Proposals are reviewed by a board sub-committee and then presented to the full board for approval.

7.1.4 Private institutions operate primarily to serve society through the provision of education. Their main purpose is not to make a profit.

7.1.5 Proposals for new ventures, programmes, equipment or facilities are accompanied by business plans, an explicit development strategy, independently verified cost estimates and analysis of relevant cost impacts in the short and longer terms.

7.1.6 Debt and liquidity ratios are monitored and benchmarked against commercial practice and equivalent ratios in appropriate outside Higher Education institutions.

7.1.7 The ratio of expenditure on salaries to total expenditure is planned and monitored, taking into account variations for departments with different cost structures.

7.1.8 Borrowing is used sparingly as a strategy to improve capacity, rather than to meet short term operating costs. Obligations are to be met from realistically expected additional revenue, or from known existing revenue sources.

7.1.9 Financial planning should be based on diversification of revenue through a range of activities consistent with the charter and mission of the institution.

7.2 Financial Management

7.2.1 High level management of budgeting and accounting is through a centralised business office headed by a senior administrative officer.

7.2.2 The delegation of financial authority is clearly specified. Conformity with regulations and reporting requirements is confirmed through official audit procedures.

7.2.3 Cost centre managers are consulted in the budget planning process, and are held accountable for expenditure within their approved budgets.

7.2.4 The accounting system provides for accurate monitoring of expenditure and commitments against budgets, with monthly reports prepared for each cost centre and for the institution as a whole. Variations from estimates of expenditure are tracked and accounted for. The impact on annual budget projections is assessed.

7.2.5 Accounting systems comply with accepted professional accounting standards; and, insofar as possible, costs are attributed to particular activities.

7.2.6 The accounting and reporting systems ensure that funds provided for particular purposes are used exclusively for those purposes.

7.2.7 Where possibilities of conflict of interest exist, either actual or perceived, the persons concerned declare their interest and refrain from participation in related decisions.

7.2.8 Financial carry forward provisions are sufficiently flexible to avoid rushed end-of-year expenditure and interference with long term planning.

7.3 Auditing and Risk Assessment

7.3.1 Planning procedures include independently verified risk assessment and sensitivity analysis. Risk minimisation strategies are in place and

adequate reserves maintained to meet realistically assessed financial impacts.

7.3.2 Accounting and business managers are not involved in internal audits. Accountability flows directly to the chief executive officer or to the chair of the relevant sub-committee of the governing body.

7.3.3 External audits are conducted annually by a reputable external audit firm which is independent of the institution, of senior staff in the institution, and of members of the governing body.

Indicators for the Financial Management and Planning Standard

- Proportion of total funding from different funding sources.

- Comments in external audit management reports.

- Amount of revenue from commercial activities.

- Net return on equity in commercial activities.

- Disposable asset/debt ratio.

- Liquidity ratio.

- Trend data for operating surplus or deficit in relation to financing strategies.

- Ratio of loan and interest payments to total revenue.

- Staff salaries as a proportion of total revenue.

Proposed Benchmarks *(To be suggested by Institutions)*

viii. Staffing and Employment Policies and Practices

The effectiveness of any institution is highly dependent on the performance of staff. While the quality of staff that an institution can attract depends on the

salaries that are offered and the availability of qualified personnel, employment policies and practices can make a significant difference. Hence employment policies and practices are an important part of the Quality Assurance process.

Institutions should have a comprehensive set of policies and procedures for recruitment, retention, staff development, and succession planning. Institutions should provide the conditions conducive to satisfying and professionally rewarding careers. Staffing policies should be considered as part of the general strategy to achieve the mission of the institution, taking into account relevant circumstances in the environment.

An important element in employment strategy is the development of an ideal staffing profile including the desired mix of age, gender, qualifications, experience, and diversity of background. The profile should reflect broader policy considerations such as Omanisation.

Regular evaluation of staff performance with support for improvement should be universal. It is equally important that institutions assess regularly the effectiveness of their staffing policies and procedures. This requires monitoring and benchmarking performance by senior administrative staff. Annual reports on staff performance should be prepared for presentation to the governing board.

8. Good Practice in Staffing and Employment Procedures

8.1 Staffing and Employment Policies

8.1.1 A staffing profile appropriate to the mission of the institution is approved by the governing body. The profile includes appropriate qualifications and experience, age structure, gender balance, classification levels, cultural mix, educational background, and Omanisation levels. Progress in achieving the staffing profile is monitored regularly.

8.1.2 A comprehensive set of policies and regulations published in an employment manual is distributed throughout the institution. The manual includes rights and responsibilities of staff, as well as procedures for: recruitment; supervision; support and counselling; institutional services; performance appraisal; professional development; complaints; discipline; and appeals.

8.1.3 Effective strategies for succession planning are implemented.

8.1.4 Staffing and employment processes are administered centrally, with appropriate delegation of authority to managers at various levels in the organisation. There is provision for: effective supervision of staff; reward

for outstanding performance; and adequate professional development opportunities.

8.1.5 Indicators of successful implementation of staffing and employment policies are clearly specified. Performance is benchmarked against successful practice elsewhere. At least annually, the chief executive officer reports to the governing board on staffing and employment practices, including regarding performance appraisal results.

8.2 Recruitment

8.2.1 The chief executive officer is appointed by the governing board, on the recommendation of a selection committee that includes both board members and experienced senior staff. Responsibility for advertising, reference checks and verification of qualifications is assigned to senior staff of the institution or outsourced to a reputable independent recruitment firm. Normally, the search for candidates involves public advertising specifying qualifications, skills and experience relevant to the mission and nature of the institution.

8.2.2 The governing board approves appointments of senior staff as specified by policy. Members of the board participate in selection committees with internal representatives (and, if appropriate, external representatives). The chief executive officer or delegate is responsible for the process. Measures to avoid potential conflict of interest are observed strictly.

8.2.3 Senior academic appointments are made on the recommendation of committees which include, if possible and appropriate, external senior academics able to benchmark against appropriate international standards of scholarship and research.

8.2.4 Where appointments are to be made through internal promotion or transfer, approval is given on the basis of a clear rationale reflecting the agreed staffing profile and hiring policies.

8.2.5 Where appointments are to be made either from within or from outside the institution, positions are advertised publicly and internal candidates are given adequate opportunity to apply.

8.2.6 Candidates are provided with full position descriptions and conditions of employment, as well as general information about the institution, its mission and programmes. The information provided includes details of employment expectations, as well as details of performance appraisal procedures.

8.2.7 Short-listed candidates are interviewed by appropriate selection committees. References are consulted and statements of experience and qualifications are verified. Assessment of qualifications includes verification of the standing and reputation of the institutions from which qualifications were obtained.

8.2.8 Assignment of particular responsibilities to newly appointed personnel is in keeping with their qualifications and experience.

8.2.9 New staff are given an effective orientation to ensure familiarity with the institution, its services, programmes and priorities.

8.3 Personal & Career Development

8.3.1 All staff are appraised annually. The supervisor discuses the implementation of the performance appraisal scheme with each staff member before he or she is evaluated, clearly specifying the performance criteria. Confidential formal consultations regarding the results of evaluation are held with each staff member and are supportive. Where performance is considered less than satisfactory, clear requirements for improvement are established.

8.3.2 Formal performance assessments are documented and retained confidentially. Staff members have the opportunity to put their own comments on file, including points of disagreement.

8.3.3 Outstanding academic or administrative performance is recognised and rewarded.

8.3.4 Promotion criteria relate to the mission of the institution. In the case of academic staff, criteria include: quality of teaching; achievement of learning outcomes; continuous improvement of performance; service to the institution; and service to the public.

8.3.5 Supervisors discuss with their staff strategies for development of skills and career advancement. Supervisors assist in arranging professional development activities, including upgrading of qualifications.

8.3.6 As part of succession planning, junior staff with leadership potential are identified and given experience appropriate for future career development.

8.3.7 The institutional professional development plan includes the development of new programmes and policy initiatives.

8.3.8 The procedures for performance appraisal are applied to the chief executive officer. In this case, the chair of the governing board acts as supervisor.

8. 4 Discipline, Complaints and Dispute Resolution

8.4.1 Procedures for dealing with complaints, and resolving disputes are clearly specified in institutional regulations.

8.4.2 The initial step in resolving disputes is through conciliation by an independent party, with referral, where appropriate, to a committee or senior officer for decision.

8.4.3 Disciplinary procedures, regarding, for example, neglect of responsibilities, failure to comply with instructions, or inappropriate behaviour, are clearly specified in the regulations.

8.4.4 The regulations for disciplinary matters provide for the right of appeal to a person or committee at least one level above that at which the dispute occurred.

8.4.5 The governing board has established procedures for complaints or disputes involving the chief executive officer; or. for matters which the chief executive officer may wish to refer to the board for resolution.

8.4.6 Serious disputes should be addressed through quasi judicial procedures, including verification of evidence and impartial judgment by expert(s).

Indicators for Staffing and Employment Procedures

-   Rates of turnover for academic and administrative staff.

-   Number of applications in response to employment advertisements.

-   Number/proportion of staff holding official positions in recognised academic, research or professional organisations.

-   Number of formal complaints or disputes brought against staff members as a proportion of total staff.

-   Breadth and diversity of background of academic staff as indicated by the country where the highest qualification was obtained, ethnic background and other relevant criteria.

- Proportion of academic staff holding doctoral degrees.

- Proportion of preferential staff in specified employment categories; eg, proportion of Omani nationals; women in senior positions.

- Proportion of staff rating the institution positively on confidential opinion surveys.

- Proportion of staff participating in formal professional development programmes.

- Assessment of the value of orientation programmes by new staff.

- Staff assessment of the value of performance appraisal systems.

Proposed Benchmarks *(to be suggested by Institutions)*

ix.   Research

In order to operate in the Sultanate, Universities and University Colleges are required to have substantial involvement in research. High calibre research activity is essential for the academic standing of a University or University College as well as for effective teaching of post graduate research programmes.

While staff in the Colleges of Higher Education usually are not required to conduct research, they should be encouraged to do so; and, at a minimum, should be familiar with the latest developments in their fields. Action research in undergraduate programmes should be promoted, in order to help ensure high quality teaching and scholarship, as well as to advance career development.

Universities and University Colleges must invest significantly in research infrastructures, including scholarly resources, IT and internet communication facilities, laboratories, research space and equipment. Adequate research resources should be available for all postgraduate students as well as staff. It is expected that basic research resources will be supplemented over time by advanced and specialised equipment acquired through research grants.

The research function also has important implications for staffing. In order to develop an effective research programme, the staffing complement must include a critical number of senior academics who conduct research at the forefront of their disciplines and also provide leadership for their junior colleagues.

Academic research is important because of its potential to contribute to both regional and national economic development; accordingly, priorities for research should reflect relevant government economic priorities. At the same time motivation for research arises naturally from the interests of faculty whose individual creative efforts can result in long term benefits to the institution and to the nation. Research development strategies, therefore, should accommodate legitimate individual priorities as well as regional and national priorities.

The international reputation of Universities and University Colleges is largely dependent on the extent and quality of their research activity. That reputation in turn is a significant factor in the capacity of institutions to attract and retain high quality academic staff, and to access international research networks. Consequently it is vitally important to ensure that quality in research can be demonstrated clearly in terms appreciated by the international academic community. Universities and University Colleges should have clearly specified research development plans linked to the institution's mission, with performance indicators benchmarked against appropriate international institutions. Annual reports on the results of research should be provided to the governing board.

9. Good Practice in Research in Higher Education

9.1   Institutional Policies

9.1.1   A research development plan consistent with the nature and mission of the institution and the economic development needs of the region is developed, published and appropriately distributed.

9.1.2   The research development plan includes clearly specified indicators and benchmarks of performance. Reports on overall institutional performance are published annually.

9.1.3   For new or expanding Universities and University Colleges, ambitious but achievable targets are set for development of research activity.

9.1.4   Cooperation with local industry and with other research agencies is actively encouraged.

9.1.5   Mechanisms are established for collaboration and cooperation with leading international universities and research networks.

9.1.6   A high level committee is established to monitor compliance with ethical standards and to approve research projects.

9.1.7   The research programme includes investigation of significant aspects of institutional activities with a report to the chief executive officer and to the governing board

9.2   Commercialisation of Research

9.2.1   Before investment by the institution is authorised, ideas with potential for commercial exploitation are critically evaluated by experts from industry and from relevant professions.

9.2.2   Strategies are developed for capitalising on the expertise of faculty and postgraduate students in providing services to the public and in generating funds. This may involve establishment of a research development office to identify institutional expertise and commercial development opportunities; to assist in developing proposals and business plans; to prepare contracts; and to develop spin-off companies.

9.2.3   Intellectual property policies define ownership; establish procedures for commercialising ideas developed by staff and students; and, ensure equitable sharing of returns to the inventor(s), and to the institution.

9.2.4   A culture of entrepreneurship is actively encouraged throughout the institution, especially for academic staff and postgraduate students.

9.3   Facilities and Equipment

9.3.1   Sufficient laboratory space and equipment, as well as library and information resources are available to support the core research activities of staff and students in all major fields.

9.3.2   An adequate budget is provided for funding research equipment and facilities.

9.3.3   Security systems ensure safety for research activities and for the academic community.

9.3.4   Policies are established to make clear the ownership and responsibility for maintenance of equipment obtained through faculty research grants or through commissioned research.

Indicators for Standards of Research

-   Proportion of academic staff with specified levels of research output.

- Number of refereed research publications per full time academic staff member.

- Success rate in competitive research grant applications and proportion of staff holding competitive research grants.

- Average number of research citations per full time academic staff member.

- Funds generated through research grants.

- Funds generated through commercialising intellectual property

- Number of patents per full time academic staff member.

- Number of joint Research and Development (R&D) projects in cooperation with industry or with staff in international or national institutions.

- Proportion of students enrolled in postgraduate research programmes.

- Student completion rates for postgraduate research programmes.

Proposed Benchmarks   *(to be suggested by institutions of Higher Education)*

x.   Community Relationships

The relationships between higher education institutions and the communities they serve are important for a number of reasons.

As influential members of the community, Higher Education institutions have a general obligation to cooperate with other members of the community for mutual benefit. In addition, institutions of Higher Education have as their central responsibility the provision of educational services to meet the needs of the community. Most government institutions; for example, the Colleges of Education and Colleges of Higher Technology are fully supported by government funding and most private institutions benefit from government scholarships and grants for students.

Higher Education institutions have a special capacity to contribute to the community because of their resources in qualified and experienced staff covering a range of academic or professional fields, and because of their facilities for teaching, research and cultural activities. As a result, it is common for institutions of Higher Education to encourage staff to participate in community life as relevant

to their professional expertise; to develop research or consultancy programmes focusing on local requirements; and, to provide services for the benefit to of the community, including access to cultural activities.

The role of Higher Education institutions in providing assistance and support to other educational institutions, especially schools, can be of great benefit to the institutions involved and can also result in attracting more and better qualified students to Higher Education.

The concept of community should be interpreted broadly, to include not only the geographic region in which the institution is located, but also the academic and professional communities with which it interacts. The institution can not only contribute to the development of academic and professional communities but also benefit from their expertise and resources.

The way an institution presents itself to the community is important. Successful institutions work hard to ensure that their activities are valued by the community, that their services are widely publicised and understood, and that they have a good reputation. The reputation of the institution is a vital factor in attracting and retaining high quality students and staff, in securing funding and endowments, in attracting research projects, and in ensuring community support.

10. Good Practice in Developing Community Relationships

10.1 Community Relationships

10.1.1 Policies on the service role of the institution are formally established by the governing board, and are reflected in its mission, goals and objectives. Policies are evaluated systematically. The contribution of the institution is quantified and presented in annual reports.

10.1.2 Staff are actively encouraged to contribute to wider community activities and their contributions are reflected in staff performance appraisal and in promotion criteria.

10.1.3 The institution arranges or participates in regular forums for discussion of significant community issues with influential members of the community.

10.1.4 Key staff participate in regional strategic planning activities and cooperate in the implementation of new initiatives.

10.1.5 Drawing on the expertise of members of academic staff, the institution cooperates in the establishment of community support for professional service agencies relevant to the needs of the community.

10.1.6 Strong positive relationships are established with local industries and employers in order to assist with placement of students in work study programmes, to secure part time employment opportunities, and to identify problems for student projects.

10.1.7 Local employers and professional staff are invited to join appropriate programme and institutional advisory committees.

10.1.8 The institution maintains continuing contact with schools in the region, arranging enrichment activities; offering assistance and support in areas of specialisation; and providing information about higher education and career opportunities.

10.2   Reputation in the Community

10.2.1 A comprehensive strategy for monitoring and improving the reputation of the institution in relevant communities is developed and implemented, with regular assessment against predetermined benchmarks.

10.2.2 Clear policy guidelines for speaking publicly on behalf of the institution are established. Normally public comments are restricted to the chief executive officer or a media officer responsible to the chief executive officer.

10.2.3 Clear policy guidelines are established for public comments on community issues by staff, where such comments could be associated with the institution.

10.2.4 An institutional media office manages media communications, seeks information about internal activities of potential interest, and arranges for publication.

10.2.5 Community views of the institution and its activities are systematically gathered and analysed. Strategies for improving perceptions of the institution are developed.

10.2.6 Issues or concerns about operational matters raised in the public forum are dealt with immediately and objectively by the chief executive officer or delegate.

Indicators of Good Practice in Developing Community Relations

-   Proportion of positive and negative media comment about the institution.

- Community opinion of institutional quality and reputation as expressed in surveys.

- Community views of the institution's contributions to the community.

- Senior secondary students' knowledge of the institution and its programmes.

- Proportion of school leavers from the region seeking entry to the institution.

- Proportion of top performing regional secondary school students who indicate the institution as their first choice for further study.

- Employer willingness to participate in cooperative education and work-based learning programmes.

- Number of community-oriented events or special activities attended by external members of the community.

- Number and proportion of alumni participating in institution sponsored activities.

- Level of sponsorship and financial contributions by the community.

Proposed Benchmarks *(Suggested by the Institution of Higher Education)*

PART TWO:

Procedural Guides for Accreditation

- *Guide for Institutional Accreditation*

- *Guide for Programme Accreditation*

GUIDE

for

Institutional Accreditation

PART TWO: PROCEDUREAL GUIDES FOR ACCREDITATION

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INSTITUTIONAL ACCREDITATION

.   **Introduction**

This guide covers the stages in the Accreditation process when an institution has:

- been approved by the Council of Higher Education as a new institution, or as a different type of institution, and is seeking accreditation; or

- has been granted provisional accreditation, and is seeking removal of "provisional" status; or

- has been accredited and is seeking renewal of accreditation in the five year cycle.

In addition to the requirements set out in this document, for private institutions the *Ordinances and Regulations for Private Higher Education in Oman* should be consulted. This publication may be obtained from the Directorate General of Private Universities and Colleges in the Ministry of Higher Education.

For government institutions, the requirements include any regulations published by the Ministry concerned.

.   Institutional Accreditation

Institutional Accreditation involves the formal recognition by the Accreditation Board that an institution meets the standards required for an institution of its type. These requirements are broadly described in PART ONE of this publication. The standards of learning required for particular academic awards are generally the same for all institutions, though variations for different classes of institutions are explained in PART ONE, Section I, *Classification of Higher Education Institutions*.

The approval by the Council of Higher Education for the establishment of an institution is based primarily on consistency with government strategic planning priorities; the value of its contribution to the Sultanate; impact on existing provision; the adequacy of facilities; and sufficiency of financial provisions.

Accreditation is based on assessment of the standards for, and quality of, the institution's activities after one year of operation.   Evidence satisfactory to the Accreditation Board must be provided, showing that standards equivalent to those of comparable reputed international institutions will be achieved. The initial accreditation is provisional, subject to full accreditation within the first five year cycle.

If an established institution wishes to change the level at which it is accredited to offer programmes, or to change its classification, the Accreditation Board will consider evidence based on past performance, as well as plans for future development. With respect to a change in classification, initial accreditation will be provisional. Once the Accreditation Board is satisfied that plans have been implemented effectively, the provisional designation is removed.

Institutions are required to monitor the quality of their activities, and to undertake self-studies prior to each external review. In conceptualising the self-study process it is instructive to consider the higher education process in terms of **inputs**, **processes**, and **outcomes**.

Inputs include the resources that support the activities of an institution, such as facilities, libraries, laboratories, funds, and staff. Resources must be provided at levels comparable to those established for recognised international institutions.

Processes are the means to achieve the goals of an institution and include facilities development and maintenance, administrative procedures, instructional delivery methods, student and instructional support activities, strategies for monitoring and improving quality, and procedures for appointing, supporting and developing staff. The most critical processes are those designed to promote student learning.

Outputs are the results of the institution's activities expected to achieve the mission of the institution. Outputs include skills and abilities developed by students, the results of research, and contributions made to the community and the nation.

Judgments in the accreditation process for a new institution are based on evidence regarding the adequacy of *inputs*; evaluation and improvement of internal *processes*; and the appropriateness and effectiveness of planned *outputs*. Of the three elements (inputs, processes and outputs), outputs are the most important. Inputs and processes are the means to the end or the desired goal of quality outputs. Institutional evaluation procedures should be designed specifically to measure outcomes.

.   Policy Matters

The following general principles and organisational arrangements apply to the institution's planning methods, internal quality review procedures and self-studies, as well as to the external review process.

)   Flexibility in Meeting Requirements

The requirements of the *Standards of Good Practice* (Chapter Four below) must be met in appropriate ways. Methods will vary to suit the classification, size and complexity of the institution, its mission and priorities. The process of self-study should lead to changes in strategic planning, in administration and teaching, as well as in the self-study process itself.

)   Responsibility for Evaluation

The responsibility for Quality Assurance lies with the institution. Institutions are required to assess their current level of performance, plan for improvement, monitor activities, and provide annual reports. They are required to undertake formal self-studies geared to self-improvement. External reviews are designed to assess the effectiveness of internal processes, and to verify the results. The self-

study report must provide appropriate information for audit by the external review panel.

) Scope and Orientation of Internal Quality Assurance

The approach to self study should be comprehensive, with special attention given to areas of priority. An institution's quality assurance procedures should cover all aspects of performance as set out in the *Standards of Good Practice for Higher Education Institutions* in PART ONE, Section III of this document.

) Priorities

The central priority for all institutions of Higher Education is learning. For Universities and University Colleges, research is also a high priority. Other priorities may emerge from the Mission of the institution, from strategic objectives, and from identified areas of weakness.

In addition, the responsible ministry, the Accreditation Board or the Council of Higher Education may request institutions to pay special attention to particular matters reflecting special concerns or national priorities. Such requests may relate to individual institutions or classes of institutions, or to all institutions.

) Acknowledging Problems

Institutions should be frank and transparent in reporting on issues. The emphasis should be on the identification of problems for the purpose of developing and implementing solutions.

An atmosphere of openness and trust during the external review is essential to the success of the review and can be facilitated by a constructive and supportive relationship with external reviewers.

) The Role of Ministries and Partner Institutions in Quality Assurance

Quality assurance procedures may be carried out cooperatively among institutions of a similar type; or, individually, with the responsible Ministry providing guidance and supervision.

Institutions with external academic partnership arrangements may implement quality assurance procedures jointly with the partner; nevertheless, responsibility for quality assurance remains with the Omani institution. Attention should be paid to the role of the academic partner, the methods used for evaluation, and the internal standards of the academic partner. Certification of quality by a partner institution is subject to scrutiny according to Oman's standards as specified in this publication.

. Use of Performance Indicators and Benchmarks

Assessment of quality should be based on solid evidence, not on general impressions or descriptive statements. Performance Indicators (PIs) are measurable sources of data that can be used as evidence of quality. It is important that performance indicators provide specific information, and cover all important outcomes of the educational process.

Benchmarks are levels of performance selected for comparison and are directly linked to performance indicators. Benchmarks may relate to a given institution's past performance or to performance at external institutions selected for comparison. In order to meet the requirements of the Accreditation Board, a critical percentage of benchmarks must be measured against respected external institutions. To meet the objective of quality improvement, benchmarks should require improvement over current levels of performance.

Chapter Four in PART ONE of this document, *Standards of Good Practice in Higher Education Institutions,* provides a comprehensive set of sample performance indicators to guide institutions in selecting appropriate performance indicators. Sample benchmarks are not provided; rather, Institutions are asked to propose benchmarks related to their particular objectives, capacity and aspirations.

) Output Measures

While indicators and benchmarks will relate to a range of inputs and processes, the most significant are those which relate to outputs, especially to student outcomes. Consequently, special attention should be given to indicators regarding the quality of student learning and its adequacy in relation to international standards and professional requirements.

) Common Performance Indicators

Institutions should note the intention of the Accreditation Board to gather data on certain key performance indicators for the system of Higher Education as a whole. It will be necessary for this data to be collected in standard form through common procedures.

Responsible ministries may establish common performance indicators for their institutions, and may set benchmarks for certain items of interest or concern.

) Performance Indicators for Internal Units

Objectives, performance indicators, and benchmarks must be specified for institutions as a whole, and also for key areas of internal activity. Benchmarks will normally be formulated against more than one external institution.

) Interpretation of Performance Indicators

Performance Indicators should provide evidence that is as direct as possible. Where outputs are difficult to measure directly; indirect evidence is used. A good example of indirect evidence of the quality of a programme would be the employment rate of graduates, taking into account factors such the variation in employment conditions by location and economic conditions.

It is important to recognise that Performance Indicators (PIs) are forms of evidence that require interpretation. The specification of PIs should be accompanied by a brief rationale explaining the value of the indicator and its relationship to the selected quality factor. If possible, interpretations should be verified by additional evidence, perhaps from related Performance Indicators.

) Evaluation of Performance Indicators and Benchmarks

Quality assurance procedures should include regular evaluation of performance indicators and benchmarks to ensure they offer objective, valid evidence that continues to be relevant and appropriate.

.   Quality Assurance Administration Procedures

A higher education institution should be first and foremost a learning organisation, continually evaluating internal performance and planning for improvement. Specific strategies are necessary to facilitate improvement. Such strategies involve the whole institution, and should be fully integrated into the institution's regular planning and evaluation procedures.

Quality assurance procedures should involve staff throughout the institution in assessing relevant levels of performance, in planning for improvement, and in evaluating performance and reporting on the results. While the quality assurance process should be led by senior staff, quality assurance is to be regarded as a total institution function, rather than as purely the responsibility of central administration.

Institutions should feel free to vary their approach to quality assurance to suit their particular administrative arrangements. The administrative strategies suggested below are based on international experience and should be adapted to local circumstances.

)   Leadership

Responsibility for leadership, coordination, and management of institution-wide activities should be assigned to a senior staff member in central administration.

)   Quality Committee

A quality committee should be established, with membership from senior and influential staff in all major internal units.

)   Sub Committees

Sub-committees should be established as working parties for all major areas of activity. These may: (1) coincide with existing academic and administrative units; (2) relate to functions across existing units; or, (3) be a combination of (1) and (2).

Where the sub-committees coincide with academic or administrative units under review, care must be taken to ensure a constructively critical appraisal, with

appropriate benchmarks and performance targets. Where the units and sub-committees do not coincide, cooperative arrangements between the sub-committees and administrative units under review must be established and monitored.

) Procedures Manual

The Quality Committee should develop a procedures manual specifying the requirements for quality assurance and improvement. This manual should include details of the role and mode of operation of the sub-committees and the relationship between unit activities and institution-wide activities. It should identify institutional objectives and specify a common format for indicators and benchmarks. The approval process for unit plans and evaluation procedures should be specified.

) Involvement of the Total Organisation

Quality Assurance (QA) planning should occur at all levels within the institution, with appropriate performance indicators and benchmarks identified for each unit.

The approach should be consultative, with institutional priorities determined by the governing body. QA Initiatives and specific strategies for improvement must be identified at all levels of the institution. The Quality Committee should ensure consistency in approach**.**

) Retention and Access to Information   (Quality Office)

It is recommended that a Quality Office be established in a central location to house quality assurance information and facilitate operations. The office will make provision for the systematic collection, storage and retrieval of data on performance indicators and benchmarks, as required for analysis and reporting. Information, retained in a database should be analysed to assess the progress of the Quality Improvement Plan (QIP).

) Relationship of Institutional and Internal Department Quality Assurance Processes

Quality Assurance reporting should occur at both the institutional and departmental levels. The two levels should be linked in fulfilment of the mission. The institutional assessment will involve aggregations of data reflecting institution-wide priorities and hence may not give full attention to each department. This is compensated for in the departmental assessments.

) Reports on Quality Assurance Processes

The assessments, quality improvement plans and evaluation reports for individual departments need not be reported externally, though an external review panel may request occasional access to such reports.

Institutional reports should be provided to the responsible Ministry and to the Accreditation Board at each stage. This includes a situational analysis, the quality improvement plan, annual reports, and a comprehensive self-study.

) Quality Responsibility in Position Descriptions

Quality Assurance roles and requirements should be included in position descriptions and terms of reference for all administrative units.

. The Monitoring and Evaluation Cycle

Quality Assurance should involve a continuous cycle of planning, monitoring, and evaluation, with periodic reassessment of the mission and of conditions in the internal and external environments. Classic phases in the development of a quality assurance strategy are described below.

0. Situational Analysis

The first phase in the process involves a situational analysis of the environmental context and the current levels and quality of internal institutional activity. This will be based largely on existing data and should be a rigorous assessment, taking into account data from students and staff, views of employers and of relevant community groups, as well as evidence of particular successes and problems.

The outcomes of the analysis should be recorded in a report setting out an objective assessment of strengths and weaknesses, as well as opportunities for development.

0. Developing a Quality Improvement Plan (QIP)

The second phase involves development of a Quality Improvement Plan setting out objectives and strategies for improvement, reflecting the mission priorities and the outcomes of the situational analysis. During phases one and two,

performance indicators and benchmarks should be identified and objectives established. In addition, key indicators reflecting the priorities of the responsible ministry, of the Accreditation Board or of the Council of Higher Education should be included, as appropriate.

Universities and University Colleges should provide Quality Improvement Plans for research. The research QIP will address the volume and quality of research and scholarly activity as it relates to academic and professional objectives, effective teaching, and community requirements.

Quality Improvement Plans should be presented in summary form and should relate to the institution as a whole. The QIP should include a statement of the Mission of the institution and make brief reference to key points from the environmental analysis. It should specify learning outcomes, major strategies for improvement, performance indicators, and benchmarks to be achieved within a specific period of time (normally three to five years).

0. Performance Monitoring

The third phase involves ongoing monitoring of performance with strategic adjustments made as data relating to indicators and benchmarks become available. Adjustments should be made flexibly and any changes should be documented, along with a rationale for each major change.

Monitoring should be formalised through reports made annually to the responsible Ministry and the Accreditation Board. Annual reports should include specific reference to action taken to ensure maintenance of standards in teaching and learning.

0. Self Study

The fourth phase involves a comprehensive self-study, which should be undertaken at least once every five years, normally commencing one year prior to external review. This comprehensive evaluation gives attention to all the areas identified in PART ONE Chapter Four of this document, *Standards of Good Practice,* as well as to the priorities of the institution, and any other areas for special consideration identified by the responsible Ministry, the Accreditation Board or the Council of Higher Education.

) Activities in Self-Study

The self-study should include a current assessment of the external environment and re-evaluation of the appropriateness and effectiveness of the Mission in the light of the changing environment.

The self-study will consider the pattern of evidence from performance indicators and benchmarks in order to assess their continuing adequacy and appropriateness. The tasks of sub-committees should include interviews with representative samples of students and staff not involved in the review. Information on objectives, performance indicators and benchmarks should be consolidated. There should be additional investigation to provide independent verification of conclusions.

These activities should make it possible to consider the extent to which quality improvement objectives have been achieved. Areas of strength and weakness, and opportunities for improvement should be identified. Comments on the effectiveness of interim changes made through the continuous self improvement process should be included, along with proposals for future action.

b) Continuing Cycle of Review

The comprehensive self-study and external review constitute a new situational analysis, which becomes the basis for a further cycle of quality improvement planning, monitoring and evaluation.

b) Self-Study Report

The self-study report should be made available to the Accreditation Board at least six weeks prior to the external review. The self-study report should include the following elements:

INTRODUCTION

The application should include an introductory section providing the salient features of the history of the institution, followed by an analysis of the external environment including an analysis of the major economic, cultural and demographic features of the local region and a summary of its contribution to the community.

This analysis should provide a rationale for the mission, goals and objectives of the institution and an assessment of the value and significance of its contribution. Also included should be a summary statement regarding the effectiveness of the institution's administrative structure.

This section is completed with a summary of principal objectives, priorities for development, and areas of weakness requiring special attention.

Section 1: Quality Assurance System

This section should include a description of the structure and procedures for Quality Assurance (QA), including committee membership, terms of reference and the relationship of committees to the administrative structure of the institution.

It also should provide a summary of the institution's situational analysis, its Quality Improvement Plan, as well as summary data on performance indicators and benchmarks.

Section 2: Policy Priorities

This section includes a summary of achievement in relation to the objectives of the Quality Improvement Plan, with information about any modifications made as a result of monitoring procedures. Information should be quantified and validated by objective data or by expert assessment.   General assertions of "good" outcomes are not acceptable. Data relating to programme evaluations should be included where appropriate.

Also included are matters identified for special consideration by the responsible Ministry, the Accreditation Board or the Council.

Specific consideration must be given to the methods used by the institution to ensure that the requirements of the *National Qualifications Framework* (Chapter Two in this document) regarding student learning outcomes are achieved. The

requirements for Learning and Teaching in Chapter Four, *Standards of Good Practice* must also be met.

Section 3: Detailed Performance in Relation to Quality Standards

This section includes a description of the quality of performance in relation to each of the sections in Chapter Four, *Standards of Good Practice.*

Section 3 may include Information about any activities considered by sub-committees not already dealt with, together with the results of verification procedures regarding quality of performance. Information from programme reviews or from evaluations by academic partners may also be included.

Wherever possible, information should be presented in the form of objective evidence relating specifically to performance indicators and benchmarks.

The following specific sections are to be included:

0.   **Mission, Goals and Objectives**

- Concise statements of the mission and goals of the institution and the major objectives to be achieved within the five year cycle; and,

- A summary of performance indicators used in assessing the relevance and usefulness of the mission and procedures to be used in evaluation and review of the mission with reference to the results of the self study.

- Procedures to be used in assessing the relevance and usefulness of the mission.

NOTE:

) The mission and vision of the institution must be consistent with the status that is sought.

b) The mission must be specific, achievable and measurable.

c) The mission must be known and understood throughout the institution, and used as a basis for planning and resource allocation.

d) There must be a five-year business plan setting out specific objectives that will facilitate continuing implementation of the mission, and indicators to determine whether each objective has been met.

5.   **Governance and Administration**

- Descriptions of the governance, administrative and academic structures of the institution, providing relevant statistics (numbers of full time and part time faculty, staff, and administrators) defining the roles, responsibilities and relationships between senior administrative positions, and committees and boards;

- A statement making clear distinctions between the policy making and accountability functions of the governing board, the responsibilities of senior academic committees, and the leadership and organisational roles of senior administrative staff, including the chief executive officer;

- A copy of the constitution or articles of governance for the institution, together with regulations defining terms of reference for the major committees and boards, position descriptions, criteria and selection procedures for senior appointments;

- Organisation charts and descriptions of the major responsibilities of faculties, departments, centres and all administrative units; and

- A statement setting out organisational arrangements, responsibilities, procedures and timelines for institutional quality assurance.

NOTE:

There should be evidence that:

a) The institution's governance, administration, financial control and quality assurance arrangements are stable, sufficient to manage the responsibilities that are sought, and have the capacity to respond to development and change.

b) The roles and responsibilities of major boards, committees and positions are clearly and appropriately defined, with effective systems for delegation and accountability.

0.   **Management of Quality Assurance and Improvement**

- A statement setting out organisational arrangements, responsibilities, processes and timelines for institutional quality assurance, and,

- a list of key indicators of performance for learning and teaching, and other major areas of activity.

NOTE:

There should be evidence that:

) The institution regards itself, and is considered by staff and students, as a learning organisation that is self-aware, reflective, and intellectually creative.

) Systems for self-assessment, improvement planning and evaluation of performance are applied in all parts of the organisation and integrated into normal planning processes.

) The institution has clear and consistently applied mechanisms for the approval of programmes submitted for accreditation, for ensuring that programme outcomes are maintained at the appropriate level, and for promoting continuous improvement in the quality and effectiveness of the learning opportunities made available to students.

0.   **Learning and Teaching**

(Note: This section deals with institutional processes and arrangements. The accreditation of individual programmes is dealt with separately in the application for programme accreditation.)

- List of programmes with current and projected numbers in each year of the programme and proposed exit points and awards consistent with the Qualifications Framework;

- Student admission requirements;

- Institutional processes for assessing quality of student learning. This should include a statement of special attributes for graduates, processes

for developing those attributes and mechanisms for assessing achievement for individual students and for the institution as a whole;

- Systems for support of student learning, including regulations governing staff workloads and availability for counselling and advice, tutorial assistance, and mechanisms for monitoring student progress and workload;

- Details of the staffing profile for the institution; and, where the institution incorporates an existing institution or institutions, a summary of existing staff in relation to that profile and the strategy for transition;

- Details of the level and source of qualifications of existing staff and the proportion of Omani nationals. The profile should include levels of appointments and staff/student ratios for the institution as a whole and for each faculty or major academic unit;

- Systems for evaluating and improving teaching effectiveness;

- Details of regulations, procedures and opportunities for staff professional development;

- Institutional processes for course development and review, including academic approval procedures, employer and student feedback, industry and professional advice;

- Where a new institution incorporates an existing institution or institutions, details of transition arrangements to ensure opportunities for current students to complete programmes;

- Copies of any contracts establishing partnership or sponsoring arrangements; and, for an established institution involved in a partnership arrangement, a report evaluating the effectiveness of that relationship, and,

- Where programmes are to be offered by distance education, details of student support arrangements, staffing provisions and procedures, performance indicators and benchmarks.

NOTE:

There should be evidence that:

)   The institution has defined the student attributes to be developed and the methods through which those attributes will be achieved.

) The institution has a clear and effective teaching and learning strategy that is related to the objectives of the institution and to the learning outcomes of programmes.

) Course descriptions clearly define learning outcomes and the instructional approach designed to achieve those outcomes.

) There are effective procedures for the periodic monitoring and review of programmes, and evidence that recommendations are acted upon.

) Feedback on programmes is sought from students, graduates and employers, and is acted upon.

) Procedures for student assessment, verification of results, and comparability of standards, are robust, secure and applied consistently across the institution

) Good practice in the design of programmes and assessments is promulgated within the institution.

) There is effective management of partnerships with other institutions, with responsibilities clearly defined and effectiveness in achieving quality evaluated.

0.   **Student Administration and Support Services**

- Details of administrative arrangements and funding provisions for student services, and indicators of quality of provision;

- Where student residences are provided, details of supervision arrangements and facilities and services available; and

- Copies of regulations dealing with the following matters:

    ✓ Registration and admission procedures
    ✓ Security and privacy of student records
    ✓ Communication and publication of results
    ✓ Student progress rules
    ✓ Student discipline procedures
    ✓ Fee collection and refund policies
    ✓ Student appeal procedures
    ✓ Codes of Conduct
    ✓ Assessment for advanced standing on admission

NOTE:

There should be evidence that:

) The institution has effective practices for the selection of students, ensuring a good match between the abilities and aptitudes of students, and the demands of their programmes.

) Student administration is accessible, efficient and responsive to the needs of students and the requirements of academic programmes.

) Procedures for student discipline and for dealing with grievances and appeals are clearly understood, and fairly administered.

) The institution has in place effective arrangements to provide individual academic and pastoral support to students.

0.   **Learning Resources**

- Policy on nature and extent of learning resource provision;

- Details of planning and evaluation processes, and performance indicators and benchmarks; and

- Sufficient information should be provided about budget, organisation and user support for an independent assessment of adequacy of provision. The submission should include reference to established standards and level of provision at comparable international institutions offering similar programmes.

NOTE:

There should be evidence that:

) The institution has a clear strategy for the allocation of resources in accordance with its objectives, and the needs of programmes.

) The effectiveness of learning resource provision is regularly monitored as part of the quality assurance process.

) There is adequate access to computer resources learning technologies for staff and for students

) Learning resources include traditional materials as well as suitable technology are appropriately utilised in all programmes and enable required learning outcomes to be achieved by all students.

0.   Facilities and Equipment

- Educational specifications and architectural brief for capital development, including plans and timelines for buildings and site development;

- Summary of space ratios and anticipated utilisation rates for educational activities in classrooms, laboratories, learning centres and other areas, based on established international norms.

- Space ratios and utilisation rates for services areas such as the cafeteria, student centre, residences.

- Independent report or reports on adequacy of equipment for administrative and teaching requirements, and (for a university or university college) adequacy for post graduate studies and for the implementation of the research development plan;

- Details of budget provision for buildings and equipment, including provisions for maintenance, replacement and depreciation;

- Description of management and administrative procedures for facilities management, security, maintenance, and scheduling;

- For a university or university college, policies and regulations for ownership and maintenance of research equipment; and

- Copies of information technology policies and associated regulations including codes of conduct, security, compatibility of software and hardware, and staff professional development in IT.

NOTE:

There should be evidence that:

) A master plan for development of facilities and major equipment has been prepared, is consistent with programme requirements, is kept up to date, and includes mechanisms for evaluation and review of the adequacy of provision.

) Facilities and equipment for all programmes are adequate for programme requirements.

) A comprehensive strategy for acquisition and use of IT in teaching and administration is effectively implemented and modified as required. Sufficient IT equipment is available for effective programme delivery.

7. Financial Planning and Management

- Details of administrative arrangements and procedures for management of budgeting accounting and audit functions;

- Statement summarising levels of financial delegation;

- Revenue and expenditure estimates showing major sources of funds and budgets for expenditure on academic and general staff salaries, student support services, learning resources, and laboratory and other equipment for the first three years; and

- Current risk assessment report.

- Details of proposed indicators and benchmarks to be used in evaluating the effectiveness of financial planning and management.

NOTE:

There should be evidence that:

) Financial resources are sufficient for the effective delivery of programmes and the provision of necessary equipment and learning resources.

) Financial administration provides flexibility where necessary and clear lines of delegation and accountability.

Adequacy of financial planning and management will be assessed by specialist evaluators. External review panels may wish to comment on these matters if they believe there are concerns which impact directly on quality of programme delivery.

8. Staffing and Employment Procedures

- Planned staffing profile, including academic/student and administrative staff ratios, with anticipated timelines;

- Five year projections of staff numbers by level of position;

- Policies and regulations for senior staff appointments, including criteria for appointment, membership structure for committees, and procedures to be followed;

- Policy and regulations on supervision, evaluation and professional development of staff and mechanisms for recognising and rewarding outstanding performance; and

- Policies and regulations for dispute resolution, discipline and appeal procedures.

NOTE:

There should be evidence that:

) Across the full range of the activities of the institution, there is adequate depth and breadth of academic leadership.

) Academic staff are appropriately qualified and experienced.

) A significant proportion of academic staff has experience of teaching, curriculum development, and, in the case of universities and university colleges, research and research management experience gained in other higher education institutions.

) The institution has an effective system of staff development.

0. Research

(For universities and university colleges only; however Colleges of Higher Education should have policies that encourage faculty to engage in teaching-oriented action research, as well as discipline-based research. Appropriate higher level courses in colleges of Higher Education should include research skills as student outcomes)

- Research development plan, including administrative arrangements, priority fields for development, mechanisms for cooperation with relevant organisations, and timelines for implementation;

- Policy on staff participation in scholarship and research;

- Budget and equipment provision, and policy on maintenance and management of equipment obtained through research funding;

- Strategy and timelines for development of higher degree research programmes;

- Policy on student participation in faculty and institutional research;

- Policy and regulations on intellectual property and commercialisation of innovation; and

- Summary of indicators and benchmarks to be used in evaluating research activity.

NOTE:

There should be evidence that:

- All academic staff teaching higher education programmes are engaged in research or an appropriate form of equivalent advanced scholarship.

- The institution undertakes research appropriate to its mission, establishes performance standards benchmarked against other high quality institutions of similar type, and reports regularly on its performance.

- The institution has a research development strategy appropriate to its mission and profile, and monitors and reports regularly on the outcomes and effectiveness of that strategy.

- The institution exercises prudent and strategic management of its research and consultancy activities.

- All academic staff teaching higher education programmes are engaged in research or an appropriate form of equivalent advanced scholarship

10. Community Relationships

- Community relations strategy, including policy and mechanisms for encouraging staff involvement in community activities;

- Policy on community access to facilities and to activities initiated by the institution;

- Policy and procedures for dealing with media communications on behalf of the institution;

- Strategy for developing and enhancing the reputation of the institution; and,

- Indicators and benchmarks to be used in evaluating the quality of community relationships.

NOTE:

There should be evidence that:

) The institution has a clear and effective strategy for involvement with the local community, and actively promotes the transfer of mutually productive connections with the community.

SECTION 5: CONCLUSIONS

This section includes a summary comment on strengths, weaknesses and opportunities for improvement, with details of action proposed, including specification of indicators and benchmarks relevant to those actions.

APPENDICES

Appendices are to contain contact details for key people, location maps, details of partnership arrangements, the Quality Improvement Plan, and a list of relevant documents, such as annual reports.

Programme descriptions and all course outlines should be provided; or, in the case of an institution offering a substantial number of programmes, reference made to sources for all programme descriptions.

Language of the Report

Where the report is presented in Arabic, an English translation should be provided.

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Phases in Institutional Self Study

Activity		Reports For:
Situational Analysis	⟹	Governing Board
⇩		
Quality Improvement Plan	⟹	Governing Board Ministry Accreditation Board
⇩		
Monitor Performance (Annual Reports)	⟹	Governing Board Ministry Accreditation Board
⇩		
Self Study	⟹	Governing Board Ministry Accreditation Board
⇩		
External Review		
⇩		
Situational Analysis	⟹	Governing Board
⇩		
Quality Improvement Plan	⟹	Governing Board Ministry Accreditation Board
⇩		

vii.   External Review Process

The external review process is designed to provide independent verification of the effectiveness of the institution's internal mechanisms for quality assurance, and to ensure that its operations and programmes remain up to date, in keeping with the changing environment, as well as with relevant national and international developments. The self-study report will be the major focus of attention in this verification process.

The verification must be based on **evidence**, with the most important evidence being that which relates to the **outputs** of the institution, particularly the conceptual skills, general competencies and professional expertise developed by students; and, for Universities and University Colleges, the quality of scholarship and research. Much of the evidence relating to the effectiveness of programmes should be considered as part of the institutional review process.

The adequacy of **inputs**, including the staff, libraries, learning resources equipment, and facilities, are important, as are the **processes**, including appropriate methods of instructional delivery, student assessment, and administrative procedures.

The most important audience for the external review is the institution itself since the institution has the direct responsibility for Quality Assurance. At the same time, the reports on external review are also important to the Accreditation Board in overseeing the quality of the system as a whole; to the responsible ministries; and, importantly, to students, employers, and the wider community.

b) Scheduling of External Reviews

The Accreditation Board will determine the dates for the review in consultation with the institution involved. Where appropriate; for example, in small, single-purpose colleges, programme and institutional reviews may be combined.

b) Scope of External Reviews

External reviewers will examine the self-study report carefully, giving attention to all the areas of activity covered in Chapter Four, *Standards of Good Practice in Higher Education Institutions.*

The reviewers will pay particular attention to matters identified by the institution, including the priorities set out in the Quality Improvement Plan. Matters identified for special consideration by the Accreditation Board will be covered, as well as areas of weaknesses or difficulty identified in previous internal or external reports.

The quality of learning and teaching is the main focus of the External Review and is evaluated according to the learning outcome requirements set out in Chapter Two, *National Qualifications Framework.*

The achievement of targeted learning outcomes will be considered in the programme review. Institutional and programme reviews are clearly related, and reports on previous programme reviews should be made available to the institutional review panel

b) Preparing for an External Review

Representatives of the institution should meet with staff of the Technical Secretariat to discuss requirements for the self-study report and the external review. This should occur at least 12 months before the review is scheduled to commence.

Advice on the materials to be prepared may be sought from the staff of the Technical Secretariat. Such advice will be without prejudice to the opinions of a review panel.

Final documentation should be submitted to the Technical Secretariat of the Accreditation Board at least six weeks before the review. In the case of an application for a change in the classification of an institution, a six-month period is required. The material submitted will be checked by the Technical Secretariat. If the information provided is inadequate; or, if insufficient information is provided, the submission will be returned for amendment.

Applicants should discuss with the Technical Secretariat the number of copies required and the language(s) to be used.

b) Preliminary Visit

A preliminary visit to the institution will be made by a representative of the Accreditation Board. Normally the representative will be a member of the Technical Secretariat. The visit will occur approximately six weeks before the review is to take place. During this visit the Accreditation Board representative will meet with the CEO and/ or the institution's Quality Coordinator to:

-   Confirm dates for the review.

-   Arrange for provision of any necessary documents and material prior to the review.

-   Discuss organisational arrangements for the review, including: any necessary arrangements for accommodation, meetings with staff and

students; a meeting and work room for the review panel; visits to facilities; and other matters as required.

- Arrange for the institution to assign a member of staff to assist the review panel with organisational arrangements during the visit. This person should not be present at meetings of the panel members with staff or participate in the panel's confidential discussions.

- Brief the institution on any special issues for consideration identified by the Accreditation Board.

During this discussion the institution should provide information on priorities for development and any other matters requiring special attention, which should be made known to the panel.

b) Conflict of Interest Involving Panel Members

Members of the External Review Panel will be appointed by the Accreditation Board. In making appointments to the Panel, the Board will be sensitive to issues of potential conflict of interest, as well as to other matters raised by the institution in the preliminary discussion.

No-one should serve on a review panel who has personal or business connections with the institution under review, or with any of its students, senior staff, governing board; or, in the case of private institutions, with the directors, shareholders or members of the company which owns or funds the institution. As a general rule, the Accreditation Board will avoid appointing staff from a competing college to assess a given private college.

Prior to appointment, members of External Review Panels will be asked to sign a form declaring that they do not have a conflict of interest and undertaking to maintain the confidentiality of all proceedings.

b) Review Activities

This sequence of activities is not prescriptive. It may be varied to meet particular circumstances, provided there has been discussion and agreement with the Technical Secretariat and/or the External Review Panel.

b) Preliminary Meeting

Whenever possible, an informal preliminary meeting should be held just prior to the review so that members of the External Review team can meet informally with members of the Quality Committee and senior staff. To facilitate the development of a collegial and supportive relationship, it is recommended that the meeting be more social than business-oriented, with only brief introductory

comments by a senior official of the Institution and the chair of the External Review Panel.

b) Review Meetings

Usually the programme will begin with a private organisational meeting of the panel, followed by a preliminary meeting of the panel with the CEO or delegate. Next the panel will usually break up into smaller groups to investigate different areas. Normally this will involve visits to the Learning Resource Centre, as well as to laboratories and classrooms to engage in discussion with staff, observe operations, and examine resources, facilities and equipment. Discussions should take place also with the Quality Coordinator and those responsible for major institutional activities.

Material relevant to the review, including, for example: course outlines, handbooks, regulations, internal quality reports, data on indicators and benchmarks, reports on accreditation and programme reviews, and samples of student assignments, should be made available conveniently for reference.

The External Panel will normally meet with staff and students. Arrangements for these meetings should be discussed in advance with the Technical Secretariat.

The purpose of these meetings is to give staff and students an opportunity to comment freely on how they view the institution and its programmes. Their comments serve as one means of validating the results of the self study. The purpose is not to solicit complaints. Panel members are asked not to become involved in disputes or matters of a personal or confidential nature. If any critical comments are made that suggest the existence of a general problem, the matter should be brought forward to appropriate officials, while preserving the anonymity of those involved.

b) After the Review

A draft copy of the report will be provided to the institution as soon as possible after the visit to the institution, so that the factual accuracy of the report can be checked. This draft will not include any specific recommendations.

Following completion of each review, the Accreditation Board will invite the institution to provide confidential comments on the value and effectiveness of the

review process and to assess the contribution of individual panel members. These comments will be used by the Accreditation Board in reviewing its own procedures, and in selection of personnel for future reviews.

The review panel report may include suggestions for change or improvement. Though these suggestions are not binding, they must be seriously considered by the institution and information provided on the extent to which the suggestions have been followed, or reasons given as to why they have not been accepted.

b) Release of the Report

After consideration by the Accreditation Board, the report of the panel on renewal of accreditation will be made available to the institution and to the responsible ministry. The report will then be publicly available, normally on the Accreditation Board website.

. Applying for Accreditation (New Institution)

An institution may not commence operations, including enrolling students or incurring any obligations to the public, until a licence has been issued by the Minister.

A new institution must complete a self study and undergo an external audit within the first year of operation. The external review will examine all the areas covered in PART ONE above on standards, any matters identified for special consideration by the Accreditation Board, and priorities for development identified by the institution. The review panel must satisfy itself that existing operations and future plans, along with the resources and support services available, meet the requirements of Oman's system of Quality Assurance.

As soon as possible after the licence to commence operations has been granted, representatives of the institution should meet with staff of the Accreditation Board Technical Secretariat to discuss requirements for accreditation.

A detailed application should be prepared with information provided as specified in Appendix I. Much of the information required is derived from Chapter Four above, *Standards of Good Practice*, and the material therein should be used as a basic reference in developing the application for accreditation.

The required regulations, administrative structures, and procedures should be described in sufficient detail for an External Review Panel to judge their appropriateness and adequacy. Provisional accreditation will not be granted until

the Accreditation Board is satisfied that a complete set of operating procedures and regulations is in place.

Regulations and procedures may be adapted from those of another institution. In such cases the source of the material must be identified, and modifications made to meet the needs of the local environment, including compliance with relevant Omani regulations. Unedited copies of another institution's documents are not acceptable.

Key information should be provided regarding all facilities, major equipment and funding, along with a schedule for acquisition, construction and contingency plans in the event of delays. A detailed mobilisation plan including timelines for initial appointment of staff must be submitted.

Advice on the application may be sought from the staff of the Technical Secretariat. Such advice will be without prejudice to the determinations of the review panel, or to a subsequent decision by the Accreditation Board.

Specific application must be made for the accreditation of the initial set of programmes to be offered by the institution. The application form is provided in Appendix III, attached hereto.

The application will be checked by the Technical Secretariat and returned for amendment if any required information is not provided.

Applicants should discuss with the Technical Secretariat the number of copies required and the language(s) to be used.

. Applying for Accreditation in a New Classification

For consideration of an application for accreditation in a new classification, attention will be given to both the quality of the institution's performance, and to whether it meets the requirements for an institution in the new classification.

The initial accreditation in the new classification will be provisional, and a further review will be required to assess whether the requirements have been met. If the review panel has doubts about whether the requirements will be met, the application should be denied, and the review panel may recommend specific conditions to be met before a further application should be considered.

The institution should complete a self-study, prepare a self-study report, and complete the application requirements. Copies of recent programme review reports should be made available as well as a copy of the report of the previous external evaluation, and all correspondence and reports relating to any conditions or recommendations made at that time.

For removal of provisional standing, the institution should provide a copy of the report of the External Review Panel at the time provisional accreditation was granted, correspondence from the Accreditation Board granting provisional accreditation, and copies of any reports relating to conditions or recommendations made at that time.

.   Preparing for Assessment

The Technical Secretariat will discuss with the institution arrangements for assessment of the application. This will involve appointment of an External Review Panel by the Accreditation Board, and normally a visit to the site of the institution by the panel. The panel will need to be satisfied that all necessary facilities, equipment and resources are in place.

I)   Meetings with Applicant

The agenda for the meetings will be discussed in advance with the Technical Secretariat. A room where the panel can meet with privacy should be provided.

The institutional experts on resource planning and implementation will attend meetings and provide documentary evidence of the adequacy of provision.

The decision on provisional accreditation will not be made known to the applicant until it has been released by the Accreditation Board.

I)   Provisional Accreditation

The initial accreditation of a new institution during the first year of operation will be provisional, pending a full review after 3 to 4 years of operation, allowing a full cycle for all programme durations. The Accreditation Board will require annual reports on the development of the institution will monitor the performance of the institution.

I)   Conditions and Recommendations

The Accreditation Board may establish conditions to be met if the institution is to be accredited and may recommend that it be accredited to offer programmes only up to certain specified levels within the range of its classification. Any such conditions must be complied with or the accreditation will be denied or revoked.

The Accreditation Board may give the institution a list of suggestions for improvement recommended by the External Panel. These suggestions are not binding; however the institution must take them seriously and provide information on the extent to which they have been met, or give valid reasons for non-compliance.

I) Release of Report

The Accreditation Board will make the report of the External Review Panel available only to the institution and to the responsible ministry. The report will not be released publicly.

GUIDE

for

Programme Accreditation

PART TWO: PROCEDUREAL GUIDES FOR ACCREDITATION *cont'd*

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ATTACHMENT 1

CRITERIA TO BE USED IN EVALUATING PROGRAMMES

Learning Outcomes

Curriculum

Assessment

 Learning Opportunities and Teaching Methods

Student Support and Progression

Learning Resources

Programme Evaluation

Accreditation of Higher Education Programmes

3. Introduction

Accreditation means *to give credit to;* and, when used in the context of Higher Education programmes in Oman, it is the formal recognition by the Accreditation Board that a programme meets required standards. Standards for student outcomes, curriculum, instruction, learning resources, and related equipment and facilities must be equivalent to those of appropriate international institutions.

The term "programme" refers to a coherent course of study in an academic or professional field, the successful completion of which results in an academic award. A programme may have exit points at different levels; for example, a four year bachelor degree may include an optional exit point with the award of a diploma after two years. A postgraduate programme must be separate from an undergraduate programme offered in the same field.

Programme titles are not synonymous with award titles. In many cases, particularly in the case of business, science, arts, or engineering, the same award title (eg., BSc, BA) may be used for programmes in different fields of study, which must nevertheless be separately accredited. However an institution may apply for joint accreditation of programmes in closely related areas.

A programme must be accredited within the first year that it is offered. This initial accreditation is provisional. Full accreditation is applied for towards the end of the first accreditation cycle, that is, within three to four years after provisional accreditation is granted.

The Accreditation Board may set conditions for accreditation. The Board may also require that accreditation be renewed earlier in the cycle than five years. During the period between provisional accreditation and full accreditation the Accreditation Board may require progress reports on the development of the programme, and may establish mechanisms to monitor the quality of programme delivery and student learning.

The accreditation process is designed to ensure that:

- Conditions for student learning meet the requirements of the *National Qualifications Framework*, especially with regard to generic skills (thinking, problem solving, teamwork and communication), local relevance, and student outcomes;

- All specified standards, including the requirements for infrastructure and resources to support learning are achieved (equivalent to those of appropriate international institutions as described in Chapter Four, *Standards of Good Practice);* and

- Requirements for professional practice in the relevant field(s) are met.

3. GENERAL REQUIREMENTS

This document represents firm policy of the Accreditation Board. All institutions must adhere to the requirements specified herein.

3.9 Outcome Focus

Programmes should be focused on student outcomes; that is, on the knowledge and skills to be acquired by students. Standards of service delivery, such as staff qualifications, and the quality of learning resources, are evaluated as means to the end of effective student learning. The quality of learning should be the major focus of attention.

2.2 Standards of Achievement

The benchmarks for standards of student achievement are to be based on the standards of recognised international institutions.

Students in professional programmes should meet international standards for professional practice in their specialisation. Accordingly, accreditation of a programme by international academic or professional authorities is encouraged, though this does not replace the requirement for accreditation in Oman.

1.2 Generic Skills

Generic skills include critical thinking, problem solving, teamwork, communication and interpersonal skills. Methods of instruction and student assessment must reflect the importance of students learning to think and apply knowledge rather than relying on memorisation of factual material. Internal programme review procedures should provide evidence of the ability of students to apply knowledge in new and unfamiliar situations.

Evidence of achievement of generic skills may be in part indirect; for example, through course evaluations by students or through employers' assessment of graduates. Where indirect indicators are used, the interpretation should be explained.

1.2 Responsibility of the Institution

The institution is responsible for the quality of its programmes regardless of any relationship with a partner institution. Arrangements with other institutions to, for instance, monitor standards, check marking of assignments, or conduct quality reviews, can be useful as part of the institution's internal quality assurance mechanisms and may provide appropriate benchmarks. There must be evidence that the partner institution's contribution to the development of quality is in accordance with local requirements.

An externally accredited programme adopted by an institution will not automatically qualify for accreditation in Oman. Such programmes must meet the requirements of the Accreditation Board. Consideration will be given to the relevance of the programme for Oman as well as to the quality of instruction and services provided locally.

2.5 Programme Accreditation and Institutional Accreditation

Programme accreditation and institutional accreditation are closely related. Institutional accreditation involves consideration of the resources and functions of the institution as a whole. Programme accreditation involves application of relevant institution-wide systems (such as learning resources) to a particular programme area.

Reports on institutional reviews will be made available to programme review panels, and vice versa. In appropriate circumstances; for example, where institutions are small, institutional and programme reviews may be combined.

Where a *new* institution is seeking accreditation, the applications for institutional accreditation and programme accreditation will be considered concurrently.

2.6 Relevance to Oman

The quality of learning and instruction must be benchmarked according to appropriate international standards. The development of new knowledge must be seen in a global context. At the same time, the particular requirements of Oman must be reflected in curriculum development and in instructional delivery.

Offering special separate course modules with relevance to Oman is not likely to be sufficient; rather, locally relevant applications must permeate the entire

curriculum. There should be specific mechanisms in place to ensure Omani content across the curriculum.

There should be mechanisms to ensure that expatriate instructional staff understand and make appropriate reference to local cultural traditions. All staff should be aware of Oman's national strategies for cultural and economic development, and should understand local regulations.

2.7 Consistency with Professional Requirements

Programmes for professional education must meet the requirements of professional practice. The standard procedure in quality assurance for professional programmes throughout the world is to seek advice from leading professionals and employers regarding curriculum and desired student outcomes. Accordingly, systems for consultation with professionals in the field must be included in programme proposals. Internal programme evaluation must include a rigorous assessment of the adequacy of the skills of graduates.

This principle applies not only to private sector employment, but also to students who will practice in public sector professions. For example, it is essential that teacher education programmes give high priority to the skills required to implement the new Basic and Secondary Education reforms in Oman's schools. All instructional staff in Higher Education institutions must be appropriately qualified and adequately experienced.

1   THE STEPS IN PROGRAMME ACCREDITATION

As is the case for institutional review, for programme review, the main factors can be seen in terms of inputs, processes and outcomes. Again, the most important of these factors is the outcomes.

Outcomes are the competencies that result from successful completion of a programme. Student Outcomes include:

- high level conceptual and cognitive skills for solving complex problems, and for decision making, including in unique or unpredictable circumstances;

- general competencies required for employment, such as communication skills, team working abilities, and leadership skills;

- mastery of a particular body of knowledge and a set of skills essential to success in a field of advanced study or professional practice.

These competencies are important to employers and necessary for career progression. Standards for competencies should be set in accordance with appropriate international standards as described in Chapter Two, *National Qualifications Framework*.

3.1 Self-Study Prior to Accreditation

In the self-study process, the evaluation of teaching strategies, assessment procedures, and the content and structure of programmes should take into account the results of an environmental analysis, information on indicators and benchmarks, as well as the views of students, employers, and experienced external academic staff.

The self study review should include documentation of requirements set out in Chapter Four, *Standards of Good Practice* regarding learning and teaching, learning resources, and related activities such as staff development and research. This will involve selection of performance indicators and benchmarks.

3.2 Selection of Performance Indicators

Performance Indicators (PIs) should be identified in advance. The most important performance indicators are those that provide evidence of outcomes. What evidence is there that students are developing the necessary skills and abilities? Evidence may include grades, assessments, and progression rates, provided such measures allow direct evaluation of the desired attributes at the standard required. Validation involves corroboration from other sources.

In order to evaluate the effectiveness of strategies for achieving outcomes, the quality of resources and facilities should be examined, as well as the systems and procedures involved.

In selecting indicators and designing strategies to achieve outcomes, Chapter Four of this document, *Standards of Good Practice,* should be consulted, especially the sections therein regarding standards for learning, teaching, and provision of support for learning.

Programmes designed to prepare students for the practice of a profession must be evaluated on the extent to which the professional and employment requirements are met. This includes new technological requirements, as well as relevant policies and/or regulations from the private and public sectors. The assessment of adequate preparation for employment should occur for the total programme and for any certified level (eg diploma) in the programme structure.

3.3 Interpreting Performance Indicators and Validating Interpretations

The indicators used to assess learning outcomes should be as direct as possible. Immediate evidence can be gained from analysing the results of tests, assignments and project work. Equally important are outcomes related to students' application of knowledge and skills in settings outside the institution, where direct measures are not always feasible. Appropriate measures of outcomes assessing student's abilities in practical application include employment rates, employer ratings of the skills of graduates, and graduates' assessment of course quality and relevance.

Such indirect measures require interpretation in light of the particular circumstances, and care must be taken to avoid misinterpretation or rationalisation. Particular attention should be paid to independent validation of the extent to which indicators measure the capacity for problem solving and application of ideas.

3.4 Self Study Report

A report on the internal self-study is required in preparation for the external review prior to accreditation of a programme or programmes. The self study report should include the following sections with data for each programme area.

1.1.1 **Programme Summary:** A summary statement regarding the purpose, structure and history of the programme, including: brief descriptions of content of the programme when it was last reviewed and any subsequent development; numbers of students enrolled; progression rates; completion rates; and, a list of current staff with a brief statement of the qualifications and experience of each.

1.1.2 **New Conditions Affecting the Programme:** A statement summarising new conditions relevant to the programme, including: significant new theories; discoveries or technological developments; changes in government policies or in the economic and cultural environment; and, any changes in professional employment requirements. For each new condition identified, information is to be provided on appropriate adjustments in programme content, methods of instruction, or assessment procedures.

1.1.3 **Good Practice in Learning and Teaching:** A statement providing specific information on each of the points included in Good Practice in Teaching and Learning in Chapter Four, *Standards of Good Practice.*

1.1.4 **Generic Competencies.** A summary of evidence on current and planned student learning outcomes, with particular reference to the generic competencies referred to in the National Qualifications Framework.

5.3.0 **Performance Indicators and Benchmarks**. A summary of progress in the gathering of data on performance indicators and benchmarks. This should include information from student/graduate evaluations of the programme, assessment of graduate skills by employers, and evidence of comparability with appropriate international standards.

5.3.0 **Changes to the Programme:** A summary of changes proposed for the programme as a result of ongoing review and recommendations in the self-study report.

The self study report must be made available to the Accreditation Board at the same time as the application for accreditation is submitted.

5   ACCREDITATION OF A NEW PROGRAMME

Institutions approved by the Council of Higher Education may apply for accreditation of new programmes within their jurisdiction.

The process for upgrading an existing programme; for example, developing a diploma programme into a Bachelor's degree programme, is subject to accreditation and includes a self-study and external review. The structure of the total programme should be reviewed to ensure internal coherence. Upgrading is not simply a matter of adding additional units at a more advanced level.

> **Before a new programme can be accredited, the Accreditation Board and the External Review Panel must be confident that the intended outcomes have been, or will be, achieved.**

Criteria to be used in evaluating a programme are described in Attachment 1. The criteria summarise the main expectations of the *National Qualifications Framework* (Chapter Two) and the relevant sections of *Standards of Good Practice* (Chapter Four).

Applying for Accreditation of a New Programme.

4.1 Application

Representatives of the institution should first meet with staff of the Accreditation Board Technical Secretariat to discuss requirements for accreditation.

A detailed application should be prepared and information provided as specified in Appendix III. This information includes not only a description of the required student outcomes and how the outcomes are to be achieved and assessed, but also details of how the course will be kept current, and how quality will be monitored and improved. It is the responsibility of the applicant to provide convincing evidence that the necessary standards and requirements have been, or will be, met.

Advice on the application may be provided by the Technical Secretariat staff. Any such advice will be without prejudice to the opinions of the review panel, or to the subsequent decisions by the Accreditation Board.

At least 9 months before the programme is scheduled to commence, the application should be submitted to the Technical Secretariat who will check it for completeness. If the application is found deficient in any aspect, it will be returned for amendment. Applicants should consult the Technical Secretariat on the number of copies required and the language(s) to be used.

When an application for accreditation is received, a member of the Technical Secretariat will meet with the institution to discuss the application, provide information on assessment procedures, and make preliminary arrangements for a site visit by a review panel. Additional information may be requested from the institution.

Following this visit, the Technical Secretariat will prepare a preliminary draft of a report on the application, based on documentation provided by the institution and any other relevant information. This draft, together with the application and supporting material provided by the institution, will be provided to the External Panel prior to the review.

4.1 Planning for External Review

Normally External Review Panels will consist of a maximum of five members as well as a representative from the Technical Secretariat who will have responsibility for preparing the draft report of the review. Membership will include appropriate academic experts as well as quality assurance experts familiar with standards of provision in Oman. The Accreditation Board will appoint one of the members of the panel to serve as chair.

Approximately six weeks before the external review is to take place, a member the Technical Secretariat staff will discuss arrangements for the external review

with the Programme Head. At this meeting the Technical Secretariat staff member will:

- Confirm dates for the review;

- Discuss organisational arrangements for the review including: arrangements for accommodation if applicable; meetings with staff and students; a meeting and work room for the review panel; and visits to the main facilities;

- Arrange for the institution to assign a member of staff to assist the review panel with organisational arrangements.

- Brief the institution on any special issues identified by the Accreditation Board;

- Hear about priorities for development and any other relevant matters considered important by the institution;

- Hear comments on any issues relevant to the conduct of the review or the selection of persons to participate in the review. (Note that selection of reviewers will be made by the Accreditation Board, with sensitivity to any issues raised in advance by the institution).

- Arrange for relevant documents to be made available in a timely fashion. These materials should include student handbooks, course outlines, reports on internal programme evaluations, advice from programme advisory bodies, reports by partner institutions, student questionnaire data, samples of student work (test, assignments and projects) across a range of performance levels, and student assessment documentation with specific reference to the learning outcomes of the programme.

Following the meeting with the institution, the Accreditation Board Secretariat will finalise membership of the review panel and advise the institution.

At least three weeks before the review, the institution should provide a draft schedule for meetings and visits to facilities, as well as maps and any other material required by the Accreditation Board.

The Accreditation Board Secretariat will prepare a summary programme profile. This document will include:

- A brief summary of the history and structure of the programme, including student numbers, progression and completion rates, any conditions established for accreditation, relevant comments from any partner

institution, and any comments relevant to the programme arising from an institutional review.

- A description of internal programme monitoring and review procedures; a summary of information on indicators; benchmarks; and any other relevant evidence of quality.

- A list of any additional matters for special attention during the review, including matters identified by the Accreditation Board, or arising from government policies or changes in the economic or cultural environment.

This profile, together with the institution's programme self-study report and application for accreditation, will be provided to the review panel prior to the review.

Arrangements for conduct of the review should be discussed and agreed with the Chair of the External Review Panel.

4.3 Scope of the Review

The primary focus of the review is on student outcomes, that is, the extent to which students demonstrate the knowledge and skills that the programme is intended to develop.

The review must examine:

- the consistency of learning outcomes with the requirements of the *National Qualifications Framework;*

- the requirements of the relevant professional field;

- the effectiveness of methods of instruction and assessment in achieving desired outcomes;

- the effectiveness of the internal processes of programme monitoring and review, especially in identifying and resolving problems; and

- whether the standards of programme delivery outlined in the *Standards of Good Practice* are met.

5.3 Institutional Visit

4.4.1 Preparation for the Institutional Visit

The scheduling of the visit will be in consultation with the institution and the agenda for the visit will be discussed in advance.

A member of staff should be assigned responsibility to assist with arrangements during the visit and a room where the panel can meet in privacy should be provided.

The programme will normally begin with a meeting of the panel, followed by a preliminary meeting with staff responsible for the programme proposal. Usually the panel will break up into small groups to investigate different issues relevant to the application. Normally this will involve discussions with learning resource centre staff, visits to laboratories and classrooms to examine facilities and equipment, discussion with the quality coordinator and discussions with staff and students familiar with the programme. Members of the panel should avoid making evaluative, judgmental or comparative comments.

If equipment and facilities for the programme have not yet been acquired, the panel should be given evidence that the necessary resources will be provided on time. In this situation, the institution will be required to report to the Accreditation Board when the resources are available for use.

4.4.2 Methods for Gathering Data during the Institutional Visit

Where an existing institution applies to offer a new programme, discussions should take place with current students regarding the quality of their learning experience, including their involvement in the institution's quality assurance processes. There should also be discussion of the institution's general academic services and activities relating to the specific programme which is being assessed.

Observation of teaching is not encouraged since, in the short and unusual circumstances of an external review, this unlikely to provide a valid or reliable view of teaching effectiveness.

The institution should provide evidence on quality of teaching. The panel should consider the arrangements made by the institution for evaluating quality of teaching, including methods for, and outcomes of, performance appraisal and staff development.

Evidence of teaching quality should address the effectiveness of strategies in developing communication skills, transfer of learning and creative problem solving as emphasized in the Oman Qualifications Framework.

The evidence provided by the institution should be verified through discussion with students, through consideration of results of programme review, surveys of graduates and their employers, and any other measures of effectiveness the institution may have introduced.

4.4.4 Guidelines for the Conduct of Discussions

As noted above, the primary purposes of the review are: to evaluate the effectiveness of the institution's internal review processes, to verify their outcomes, and to assess the quality of student learning. This requires independent evaluation from a representative cross section of the student body. A cooperative tone should be struck in discussions with students, emphasizing that the purpose is to improve conditions. It is important to balance discussion of problems with confirmation of strengths.

Arrangements should be made for structured discussions with representative groups of staff and students. In institutions where students are likely to be inhibited by a mixed gender group, separate meetings should be held for male and female students. Significant matters that come to light through discussion with students or staff should be investigated, with the anonymity of the informant preserved.

The comments of students may be restrained by cultural inhibitions such as reluctance to criticise, unwillingness to communicate with members of the opposite sex present, or by fear of consequences if critical comments are reported back to the institution, or by an impression that it is the students rather than the quality of the programme that are is under review. Reviewers should identify and try to overcome barriers to effective communication.

Individual students may have experienced personal difficulties which are not representative of the student group as a whole, and thus may make criticisms which do not accurately reflect the true situation. Critical comments should be acknowledged in a non-judgmental way, and an opportunity taken, without identifying the student concerned, to explore the concern with the appropriate institutional official.

Panel members are asked not to become involved in disputes or matters of a personal or confidential nature. If specific incidents appear to indicate a general problem, that general problem should be investigated if deemed appropriate.

Student comments on the value of the programme will serve as one means of validating the outcomes of the self study process.

At meetings with students and staff, members of the review panel should be introduced by a senior member of staff who will describe the purpose of the meeting and the basis on which the sample of students was selected. The desirability of providing representative and comprehensive comments should be

emphasized. The staff member should then leave the meeting, and return at a prearranged time to conclude the discussion.

4.4.5 Guidelines for Selection of Questions

Questions raised by panel members will be derived from matters emphasized in the review, but should also cover general areas, such as how confident students are that they are mastering the skills required for practice in their chosen profession; how much emphasis is placed on thinking and problem solving; whether staff are available for consultation; whether reference materials are available when required; and, whether the views of students are sought and considered.

Questions on particular issues might be derived from Chapter Four, *Standards of Good Practice*. A list of questions appropriate to the institution should be prepared beforehand by the members of the panel assigned to conduct the meeting

This publication and the materials provided to the reviewers should be helpful in formulating questions to raise with staff. Questions are geared to evaluating the effectiveness of the institution's internal review processes, to verification of their outcomes, and to assessment of the quality of student learning.

It will be useful to raise questions designed to establish:

-   whether staff have a clear understanding of the nature of the learning outcomes to be achieved in relation to the *National Qualifications Framework* and of the requirements for the effective practice of the profession concerned;

-   staff views on the effectiveness of teaching methods in relation to student outcomes;

-   staff views on the effectiveness of the methods used to assess learning outcomes;

-   staff views on the effectiveness of action taken to ensure currency of the curriculum vis-à-vis changing professional policies and vis-à-vis practices in Oman and abroad; and

-   the extent of staff involvement in research or professional practice and whether such involvement is adequately reflected in their teaching.

It is important that a cooperative and constructive tone is maintained throughout the review. In discussions with staff, panel members should try to be non-judgmental and should avoid making comparisons with other institutions,

including their own. Assessment of the adequacy of a programme should be based on clear evidence.

Opinions should be expressed and judgments made only in the confidential, closed meetings of the panel. Public comments about the findings of the review should be made only by the Chair in the final meetings with senior staff. Following the review, comments should be made only through the formal report to the Accreditation Board.

The review panel should be sensitive to matters that should be confidential to individual students or staff, and to matters that the institution regards as sensitive and that should not be in the public domain.

4.4.6 Guidelines Regarding Confidential Information

If access to information that the review panel regards as important is considered sensitive by the institution, the possibility of a confidential examination by selected members of the panel should be discussed with the Chief Executive Officer or the Quality Coordinator. Following a confidential examination, the selected panel members would then report back to the rest of the panel, following agreed disclosure guidelines.

If this approach is not acceptable to the institution, the review panel should indicate in its report that the information was not provided and make comments accordingly.

The Accreditation Board will make a decision on whether to require disclosure of the information. In the case of a dispute between the Accreditation Board and the institution, the matter will be resolved by the Minister.

In such a dispute the Accreditation Board's decision on renewal of accreditation must be guided by its responsibility as an independent authority to accredit, or not, on the basis of evidence. An institution that withholds, on grounds of confidentiality, information reasonably required by the panel, should be aware that the absence of vital evidence may result in denial of accreditation.

4.4.7 Guidelines for Meetings with Administration and for Panel Meetings

At an early stage during the review, members of the review panel should meet with the programme senior administrative staff and the institutional quality coordinator to discuss the results of the self study, including priorities for programme development and strategies for improvement of the programme.

The review panel should meet as a group for at least an hour at the end of each day to discuss their findings and agree on any tentative recommendations and conditions to be reported to the Accreditation Board. The precise wording of recommendations or description of conditions should be agreed before the panel members leave the meeting. Summary statements on particular matters should be prepared by the members of the panel assigned to investigate those issues, and then discussed and agreed by the panel as a whole.

4.5 Concluding the Review

Toward the end of the visit, the review panel should meet to agree on its final views and recommendations. The panel should specify clearly the evidence on which conclusions are based.

Before the panel leaves the institution, views and recommendations must be finalised and given to the representative of the Technical Secretariat.

At the end of the site visit, the panel should meet with the appropriate institutional representatives (the Chief Executive Officer of the institution or delegate, the Programme Head and the Quality Coordinator) to present an oral report. There should be a frank assessment of the strengths and weaknesses identified by the panel. The panel will not present its recommendations to the institution. Recommendations are to be made to the Accreditation Board alone.

The senior staff of the institution may wish to comment on the report or suggest additional information that might be considered by the review panel.

In the final report, the panel may recommend that the programme:

- be accredited;

- be accredited, subject to clearly specified conditions;

- not be accredited.

- not be accredited, but that the application be re-submitted after recommended actions have been taken;

The panel may make suggestions that are not conditions of accreditation. While the institution will not be required to implement such suggestions, it must report to the Accreditation Board on the reasons for accepting or not accepting them.

A programme should be recommended for accreditation only if there is evidence that standards have been met. If any significant doubts exist the programme

should not be recommended for accreditation. Specific evidence must be cited to support a negative recommendation.

4.6 After the Review

The member of the Technical Secretariat participating in the Review should complete the report and seek the endorsement of the draft from the Chair of the Review Panel.

The draft report, not including the final recommendation on accreditation, should be forwarded to the institution for comment on factual accuracy. The report will then be finalised by the Technical Secretariat and submitted to the Permanent Committee on Programme Accreditation for consideration.

The draft report, not including the final recommendation on renewal of accreditation will be sent confidentially to the Quality Coordinator or Programme Head who will be given an opportunity to verify the accuracy of factual information or to suggest amendments based on clear evidence.

The report should follow a standard format as follows:

- A one page Executive Summary

- Introduction, including the information set out in the programme profile;

- Procedures followed by the review panel;

- Comment on the programme self-study report, including evaluation of the adequacy of indicators and the extent to which benchmarks have been achieved and identified weaknesses remedied. Comment on methodology and the extent to which the conclusions of the self-study report can be validated;

- Comment on the extent to which the programme remains current, relevant and valid; on the continuing effectiveness of the curriculum, student assessment methods and on the achievement of student outcomes;

- Comment on any issues identified by the Accreditation Board for special consideration, and/or on any of the specifications in the *Standards of Good Practice* for which there is not adequate provision;

- Conclusions summarising the review panel's overall view of the effectiveness of the programme monitoring and evaluation procedures, the quality of the programme, and whether accreditation should be granted; and

- A list of recommendations in the following four sections: (I) Suggestions for improvement; (ii) Conditions, if any, which should be set for changes to be implemented by the institution; (iii) Suggestions or recommendations, if any, for consideration by the Accreditation Board or the responsible ministry; and, (iv) Recommendations on renewal of accreditation for the programme.

As soon as the Accreditation Board has considered the report and made a decision, the institution will be informed. If accreditation has been granted, the programme will be entered in a register of accredited programmes maintained by the Board, the Minister will be advised of the outcome, and a license will be issued authorising the institution to commence the programme. A programme must not be advertised, or any commitment made to offer it, until the licence has been issued.

The institution will be expected to consider the report and take appropriate action in response, as part of its normal quality assurance procedures. This action must include compliance with any conditions imposed by the Accreditation Board.

The responsible Ministry will be expected to monitor compliance with conditions set by the Accreditation Board, and provide assistance in a manner consistent with its ongoing supervisory responsibilities.

4.7 Provisional Accreditation

The initial accreditation of a new programme during the first year of operation will be provisional until full accreditation is applied for towards the end of the first five year cycle. The Board will require annual reports on the progress of the programme and will monitor its effectiveness.

Accreditation will be valid for five years (or for a lesser time if required by the Board) after which an application must be made for renewal of accreditation. Planning for renewal of accreditation should begin no later than three years after the initial accreditation.

4.8 Conditions and Recommendations

The Accreditation Board may make the accreditation subject to certain conditions. Any such conditions must be complied with or the accreditation will lapse. The Board may also pass on suggestions for change or improvement made by the review panel. These suggestions are not binding, but must be seriously considered and information must be provided on compliance, or reasons given for non-compliance.

5 MONITORING OF PROGRAMMES

Programme accreditation is granted if an institution can satisfy the Accreditation Board the required standards have been met. It is the responsibility of the institution to maintain and improve standards. This requires continual monitoring of processes and outcomes, with action to resolve problems and implement improvements. The external assessment for renewal of accreditation will evaluate progress in reaching standards. Records of monitoring activities should be retained to assist in the external audit process.

An application for accreditation of a programme must include strategies for continuing evaluation.

Each department involved in the programme should make a clearly stated contribution to the development of learning outcomes. Such contributions will involve both the subject matter to be included and the methods used to develop learning outcomes.

The on-going review of a programme should provide evidence that the planned strategies are effectively implemented and successful in developing the desired outcomes; and, (if applicable) that the standards of achievement meet the requirements of the profession concerned and are equivalent to standards at recognised international institutions.

5.1 Annual Evaluation

There should be an annual formal evaluation during which performance in relation to benchmarks is assessed and adjustments made accordingly. Records of the evaluation process, including information on indicators and benchmarks, should be retained and made available to External Review Panels.

6. RENEWAL OF PROGRAMME ACCREDITATION

Programme accreditation must be renewed within a period of five years, or earlier, if required by the Accreditation Board.

The purposes of accreditation renewal are to evaluate the internal quality assurance procedures for the programme, to verify the results, and to ensure that the programme remains up to date with national and international developments in the field of study and/or profession concerned. An assessment must be made of the extent to which the intended learning outcomes are being achieved. This should include an analysis of the effectiveness of the curriculum and instructional delivery methods in achieving the intended learning outcomes.

Before programme accreditation is renewed, an institution must submit a self-study report on the programme along with an application for renewal. The form for the application is the same as for initial accreditation. An external review of the programme will then be conducted.

> **The basis for renewal of accreditation is the same as for initial accreditation, and the procedures are similar. The emphasis is on outcomes, with assessment against criteria as specified in Attachment 1.**

6.1 Applying for Renewal of Programme Accreditation

Representatives of the institution should meet with staff of the Technical Secretariat to discuss requirements for renewal of accreditation at least 12 months before the existing accreditation expires. The discussion should deal with the preparation of a self study report and the other requirements for renewal of accreditation.

A detailed application should be prepared with information provided as specified in Appendix 1. This information includes not only the targeted student outcomes and how outcomes are to be achieved and evaluated, but also details of how the course will be kept up to date, and how quality is to be monitored and improved. It is the responsibility of the applicant to provide convincing evidence that the necessary standards and requirements have been met and will continue to be met.

Advice on the application may be provided by the staff of the Technical Secretariat without prejudice to the opinions of the review panel, or to the subsequent decision by the Accreditation Board.

The application should be submitted to the Technical Secretariat of the Accreditation Board at least 6 months before the existing accreditation expires. The application will be checked by the Technical Secretariat. If any items are incomplete, the application will be returned for amendment.

Applicants should discuss with the Technical Secretariat the number of copies required and the language(s) to be used.

6.2 Conditional or Provisional Renewal

If the Accreditation Board has serious concerns about the programme, renewal may be made conditional on specified action to be taken immediately; or on specified action to be taken over time, before provisional status can be removed.

In either case the Board will require reports on the programme and will monitor its effectiveness.

The Accreditation Board may also make non-binding recommendations on the advice of the External Review Panel. The institution must take these recommendations seriously and provide information on the extent to which they have been implemented, or reasons why they have not been accepted.

Accreditation will be valid for five years; or, for a lesser time if required by the Accreditation Board, after which time a further application must be made for renewal. Planning for accreditation should be on-going.

ATTACHMENT 1

CRITERIA TO BE USED IN EVALUATING PROGRAMMES

In considering applications for the accreditation of a programme, review panels will seek evidence that the criteria listed below have been satisfied. In applying the criteria, review panels will consult PART ONE of this publication, especially Chapter Two, *National Qualifications Framework* and Chapter Four, *Standards of Good Practice.*

Learning Outcomes

Intended Learning Outcomes should:

- Be clearly expressed, and communicated to staff and students so that both teachers and learners know what is expected of them.

- Reflect fully the expectations of the National Qualifications Framework for standards of achievement in student outcomes, including: conceptual skills, relevant knowledge, and ability to apply what is learned.

- Meet relevant professional requirements for employment in Oman and abroad.

Curriculum

The curriculum should support achievement of the intended learning outcomes, and should be effective in facilitating:

- Acquisition and application of knowledge and understanding.

- Development and application of cognitive skills.

- Development of general competencies.

The design of the curriculum should ensure academic and intellectual progression by imposing increasing demands on the learner, over time, in terms of:

- Intellectual challenge;

- Acquisition of knowledge and skills;

- The capacity for conceptualisation; and

- Learner autonomy.

The design of the curriculum should provide an appropriate balance between:

- Theoretical and practical elements

- Academic learning and personal development

- Breadth and depth of subject material

Overall, the curriculum should have: a coherence that ensures that the student's experience has intellectual integrity; and, a logic that is linked clearly to the purpose of the programme and to the achievement of its outcomes.

It should be noted that "Curriculum" includes the content necessary to develop understanding and the acquisition of knowledge, and specifies the methods used to ensure development of student outcomes, including practical skills and abilities.

Assessment

Assessment should measure effectively achievement of the intended outcomes of the programme. The assessment method selected should be appropriate to the nature of the intended outcome.

There must be confidence in the security and integrity of assessment procedures, and appropriate, independent verification of results.

There should be clear and appropriate criteria for each grade of performance. These criteria should be communicated to, and understood by, both staff and students.

Assessment undertaken during the programme should provide students with prompt and constructive feedback to facilitate learning.

Learning Opportunities and Teaching Methods

Teaching methods should be effective in conveying the curriculum content and in achieving the learning outcomes of the programme, including the competent application of skills in a variety of contexts.

The breadth, depth, pace and challenge of learning, and the variety of delivery methods used, should be appropriate to each stage of the programme, and to the needs of students.

Where appropriate, opportunities should be provided for students to learn from practical classes, fieldwork and placement.

Students should receive effective direction in their individual learning.

There should be good quality learning resources, including electronic resources and technologies, available to provide effective support to student learning.

The quality of teaching should be maintained and enhanced through effective staff induction and development techniques

Student Support and Progression

Policies and practices for the recruitment and admission of students should be designed to secure a good match between the achievement and aptitudes of students and the demands of the programme.

There should be effective arrangements for the induction of new students.

Students should receive effective personal academic support and guidance, to ensure high rates of progression and successful completion.

Learning Resources

The institution should have a strategy for the allocation of resources that will ensure adequate resources, including number and quality of academic staff, and adequacy of library, computing, and laboratory resources.

The resources provided should be deployed effectively in support of the achievement of learning outcomes.

Programme Evaluation

Effective procedures should be used for programme evaluation, including:

- Producing evidence that planned processes, including appropriate methods of teaching and assessment, are effectively implemented;

- Gathering evidence on the achievement of outcomes through specific performance indicators and data on verification of standards; and

- Using feedback from programme evaluation, and intelligence regarding changes in employment of professional requirements to make appropriate adjustments to the programme.

Annex A

Definition of Terms

Definition of Terms

Introduction

Systems for Quality Assurance and Accreditation in Higher Education have been introduced in most parts of the world. Differences in interpretation of terms such as "Quality Assurance" and "Accreditation" can cause confusion and make effective communication difficult. For the purpose of the system of Quality Assurance and Accreditation for Higher Education in Oman, the following terms will have the meanings described below.

Academic Year

A period of full time educational activity usually equated to months in a calendar year, normally about 8 months or 34 weeks in duration; or, for part time programmes, an equivalent amount of time. An academic year may be subdivided into semesters, quarters, or terms, or taken as a single time block.

Accreditation

Accreditation, meaning to certify or give official credit to, refers to formal recognition by the Accreditation Board as the official regulatory body that an institution or programme meets minimum required standards. Accreditation is normally given for a specified period of time with renewal subject to a successful self-assessment and external audit of current performance.

Accreditation is required both for institutions as a whole, applying standards to total operations, and for particular programmes offered.

Institutional accreditation usually involves judgments against specific benchmarked criteria regarding the adequacy of facilities, services and resources, including staffing, provision of academic and student support services, curriculum and delivery methods, and standards of student achievement. Requirements for accreditation are tailored to the type of institution. Accreditation may be restricted to certain levels and areas of activity; for example, a College may be accredited to offer programmes to the diploma level in business studies and information technology, and a University may be accredited to offer programmes to the doctoral level in some fields, and to the master's or bachelor's degree level in other fields. For a new institution, or an institution seeking to extend its activities or change its status, accreditation may be provisional, subject to confirmation after a review of performance.

Accreditation of programmes also involves judgments against specific benchmarked criteria that the quality and standards of a programme are appropriate for the award to which the programme leads, or for entry to a particular profession.

Universities may have or be delegated the authority to accredit their own programmes for the purpose of entitlement of graduates to a particular award. Such universities may be referred to as "self accrediting". Self accrediting universities often are required to secure external accreditation of courses through an authority such as a Government agency, a professional body or professional accrediting agency. This is the case especially in professional fields such as medicine, law, or engineering where graduates have the right to practice only if accredited by the relevant profession.

HIGHER EDUCATION INSTITUTIONS OTHER THAN UNIVERSITIES NORMALLY ARE REQUIRED TO SECURE EXTERNAL ACCREDITATION OF PROGRAMMES THROUGH AN INDEPENDENT AUTHORITY FOR ENTITLEMENT OF GRADUATES TO AN AWARD, AND FOR THE RIGHT OF GRADUATES TO PRACTICE IN CERTAIN PROFESSIONS.

Benchmarks

Benchmarks are points of comparison used to establish standards in order to assess performance. Benchmarks may reference current levels of performance at an institution; for example, the current completion rate for students in business studies; or relate to standards established by an external agency; or to standards of performance at an external institution selected for comparison; for example, the number of research publications per full time academic staff member at the University of British Columbia.

Field of Study

The term "field of study" is used to describe the content of a group of related disciplines or professional areas. The term is used to classify programmes, subjects or courses of study for purposes of academic planning, departmental structure, professional activity, programme accreditation and statistical reporting. A field of study may be broadly defined; eg., Social Sciences, and include narrower areas of study within that field; eg., Sociology, Psychology. For purposes of programme approval and accreditation, the Accreditation Board may specify the level of detail for which separate accreditation or approval is required in a given field.

Goals or Aims

Goals or aims refer to desired outcomes of action involving targets for achievement. Goals or aims are derived from the mission, apply to specific areas of activity and provide a focus for detailed planning. An example of a goal is: "To build partnerships with corporate clients and government agencies for cooperative applied research involving staff and students."

Levels

The term "Level" used in connection academic progress refers to a degree of achievement on a scale, with gradations representing the extent of acquisition of knowledge, conceptual understanding, competencies and practical skills. In the Qualifications Framework for Higher Education in Oman, the scale extends from Level One, referring to learning outcomes expected of students in their first year of post secondary education, to Level Six referring to the advanced scholarship expected of graduates from doctoral programmes.

Licence

A licence represents formal approval through the Minister of Higher Education for an institution of Higher Education to operate, or to carry out specific activities. Licensing applies to institutions conferring awards and to individuals completing professional programmes.

Licensing and accreditation are closely linked. The maintenance of the institution's license is conditional on the assessment of quality through the accreditation process. The granting of a license for a graduate to practice in a

given profession is conditional upon both successful completion of the programme and its accreditation status.

Mission Statement

The Mission Statement is a brief general statement setting out the principal policy objectives for development of the institution. While stated in general terms, a mission statement should be sufficiently precise to serve as a guide for planning and decision making at all levels of the organisation. An example of an appropriate mission statement is: "*To develop an international reputation for the quality of applied research and technology transfer, and for the creativity and entrepreneurial skill of graduates in all fields.*"

Objectives

OBJECTIVES ARE SPECIFIC STATEMENTS OF PURPOSE WHICH APPLY THE MISSION AND GOALS TO PARTICULAR AREAS OF ACTIVITY, AND WHICH SET OUT INTENDED LEVELS OF PERFORMANCE TO BE ACHIEVED WITHIN STATED TIME PERIODS. WHEREVER POSSIBLE, OBJECTIVES ARE EXPRESSED AS SPECIFIC PERFORMANCE LEVELS ON INDICATORS; FOR EXAMPLE, "*BY 2003, 80% OF FINAL YEAR UNDERGRADUATE STUDENTS WILL HAVE ACHIEVED A SCORE OF AT LEAST IELTS 5.5*". OBJECTIVES MAY BE CRITERION REFERENCED; THAT IS, BASED ON DEFINED LEVELS OF PERFORMANCE; OR NORM REFERENCED; THAT IS, BASED ON COMPARISONS OF PERFORMANCE WITH OTHER INSTITUTIONS.

Partner Institution

An academic partner is an institution with which an Institution of Higher Education in Oman has established a formal contractual relationship to provide expertise, support and quality assurance. Subject to accreditation and approval in Oman, the contract may provide for academic awards to be issued in the name of the Omani institution or of the partner institution. Contributions of a partner institution will be considered in accreditation procedures, but will not replace any requirements relating to quality of programmes, resources, facilities or services provided in Oman.

Peer Review

Peer Review involves external evaluation with a report on a programme, institution, department or service, undertaken by expert evaluators familiar with

the field of study involved and/or generally familiar with higher education programmes or administration. Evaluators should be independent of the institution they are evaluating. Their judgments are to be based on the evidence gathered and interpreted in light of published criteria, the Mission of the institution, the objectives of the programmes involved, and expert knowledge of Higher Education programmes and standards.

Performance Indicators

Performance Indicators (PIs) are criteria which can be measured objectively and taken as an indication of quality in performance; for example, the proportion of academic staff with doctorates may be taken as an indicator of quality of staff and the proportion of graduates employed in their field of specialisation may be taken as an indicator of relevance of programmes. Performance Indicators are usually derived from existing published data and often provide only indirect evidence about the quality of the variable under consideration. Consequently, several indicators are often required to assess performance fully. The information derived from performance indicators may require interpretation in the light of prevailing circumstances.

Programme

The term programme refers to a coherent course of study followed by students in an academic field. A programme may lead to an academic award or a professional qualification. A programme may have exit points at different levels. A single award title (such as the Bachelor's degree) may include a number of different programmes leading to different fields of study or professional occupations.

Quality

The term Quality is a relative term involving the idea of "value" or "worth" based on standards. Quality refers to essential features or characteristics and when used to discriminate, it refers to a fineness of grade or excellence on a scale of value relating to a set standard. In evaluating performance in higher education, value is judged according specified criteria embodied in performance indicators which are compared with external standards or benchmarks of performance

When quality is used as a general term, as, for example, with reference to *"the quality of higher education"*, it will be taken to refer to the critical factors which determine the worth of a system of education. These factors include the level of student achievement; the qualifications, experience and competencies of staff;

the effectiveness of teaching, learning and research activities; the standard of facilities, educational technologies and equipment; the effectiveness of governance, planning and administrative processes, and the relevance of programmes to the needs of students and the nation in the global economy.

Quality Assurance

Quality Assurance refers to a system of polices and procedures for review, assessment and follow up relating to quality of performance. The purpose of implementing an effective system of Quality Assurance is to:

8) Ensure that desired levels of quality are maintained, and,

8) Assure students, the Government and the wider community, including parents, professional associations, local business, industry and relevant internal bodies, that the quality of Higher Education in Oman meets appropriate international standards.

While all institutions should be engaged continuously in best practice in Quality Assurance, the credibility of Quality Assurance systems requires independent external validation by a public authority.

Quality Improvement

Quality Improvement refers to strategies used to improve quality of performance. Principal responsibility for quality improvement rests necessarily with the institution.

At a higher level, quality improvement is seen as a public responsibility and is therefore normally part of government regulatory responsibilities. Ministries responsible for Higher Education normally regulate quality assurance systems and require quality improvement plans, often backed by sanctions or incentives.

Responsible Ministry

The term "Responsible Ministry" refers to a Ministry responsible for the establishment, regulation and supervision of one or more institution of Higher Education. In the case of private universities and colleges, the responsible Ministry is the Ministry of Higher Education, with the supervisory and regulatory tasks carried out by the Directorate General of Private Universities and Colleges.

Substantial Equivalence

Substantial Equivalence refers to a judgment that an academic programme is equal in quality and equivalent in scope to an accredited programme offered elsewhere, but with appropriate modification of content and procedures to meet the requirements of the local environment.