Procedural Manual

for Initial Program Accreditation

Commission for Academic Accreditation
Ministry of Education
United Arab Emirates

2019

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Introduction

To assure prospective students, their families, and the public that the Higher Education (HE) academic programs offered by institutions licensed in the UAE meet international standards, each individual program must be accredited by the Commission for Academic Accreditation (CAA or the Commission). The *Standards for Institutional Licensure and Program Accreditation 2019* (the *Standards 2019*) are the basis for Initial Program Accreditation (IPA) and subsequent Renewal of Program Accreditation (RPA). The process of Initial Program Accreditation is described in this *Manual*, the *Procedural Manual for Initial Program Accreditation* (*PMIPA*).

Following the granting of Initial Institutional Licensure from the Ministry of Education (MOE or Ministry), institutions may apply to the CAA to have one or more programs Initially Accredited. Initiating and maintaining Accreditation of programs is a pre-requisite for delivery of post-secondary (Levels 5 – 10 in the UAE's National Qualifications Framework QF*Emirates*) HE study programs of one year full-time equivalent or longer. Institutions which enroll students before obtaining IPA from the CAA jeopardize their Licensure as an institution operating in the UAE.

Program Accreditation is one of the ways through which the CAA and the MOE provide quality assurance for post-secondary education in the UAE. The standards, policies, and procedures adopted by the Ministry to establish and deliver programs of higher learning are designed to promote high quality experiences for students and to assure prospective students, their families, employers, and other interested parties that the qualifications offered by licensed institutions meet standards of quality consistent with current international practice and professional judgment.

Initial Program Accreditation (IPA): Only after being granted Initial Institutional Licensure (IIL) may a Higher Education Institute (HEI) apply for IPA for an educational program. IPA must be obtained before the institution may advertise that program in any media including the institution's webpage, and recruit or enrol students. The review for IPA is designed to ensure that a fully developed curriculum and support services that will allow the institution to deliver the proposed program are in place. With assistance from visiting international experts in the field (the External Review Team, or ERT), the CAA evaluates the program's structure and its constituent courses, and their requirements for specialist faculty and appropriate teaching and learning resources.

Renewal of Program Accreditation (RPA): After the program has graduated its first cohort of students, a further review for RPA is undertaken by the CAA. The review requires a critical Self-Study by the institution and a further evaluation by an ERT to ensure that the program's

anticipated outcomes are being achieved, including the maintenance of academic standards in keeping with international norms.

Risk-Based Assessment

A new addition to the *Standards 2019* is the introduction of a 'risk-based approach' to Institutional Licensure and Program Accreditation by the CAA. This context-sensitive assessment of institutional performance is determined against baseline regulatory requirements which originate from the *Standards*. The risk level of an institution is measured against the threshold risk level, as determined by the CAA, through a two-part process. The risk level form the basis for decisions related to the ongoing licensure and accreditation review arrangements for HEIs, on a schedule of 3-, 5-, or 7-year visit cycles. The CAA reserves the right to re-classify an institution's risk level as a sanction for violations of the *Standards*.

The introduction of the risk-based approach to Institutional Licensure acknowledges the level of importance the CAA attaches to the development of institutions, and the maintenance and continuous improvement of academic standards. The CAA risk-based approach is centred on offering a full understanding of the implications of the risk evaluation for different providers, their students and other internal and external stakeholders. For more detail on the risk-based assessment, refer to the *Supplementary Guidance to the Standards 2019*.

Risk Evaluation

The determination of risk is undertaken by the ERT at the conclusion to the Licensure Review, and is based on two equally weighted elements:

Part A of the Risk Evaluation considers the extent to which the HEI (during the Licensure review) has provided evidence of meeting the requirements of the *Standards.*

Part B of the Risk Evaluation evaluates the risk of strategic, operational, legal and financial, academic and international dimensions as applied to specific risk statements, which take into account the risk analysis area. The ERT will use its professional judgement in applying this structured approach to evaluate the extent to which risk is determined.

Institutional Integrity

All of the review policies and procedures of the CAA depend on the principle of institutional integrity and the conscientious application of the *Standards*. An institution is expected to be

transparent in all of its transactions with the Commission, and with students, the academic and larger communities it serves, and all its stakeholders. Evidence of withholding information, providing inaccurate information, failing to provide timely information to the Commission, or failure to conduct a candid Application in compliance with the *Standards*, and/or other similar practices, will be seen as the lack of a full commitment to integrity. Evidence of submitting material that is not substantially original to the institution and the work of the institution's officers or employees (including contract employees), shows a lack of commitment to integrity. Failure of an institution to adhere to the principle of integrity may result in the loss of Licensure.

Use of the Manual

In order to obtain IPA for academic programs of study, institutions are required to demonstrate that all *Standards for Program Accreditation (SPA)* are met. The last Section of this *Manual*, Addressing the Standards, is aimed at complementing the *SPA* in preparing for the Commission's IPA review and to identify the particular focus for attention required in the Application in addressing the criteria. The Addressing the Standards Section covers each numbered sub-section of the *SPA* in sequence and emphasizes the criteria that are applicable to the specific review for IPA. In relation to Stipulations and their sub-sections that are not fully applicable to IPA, the entries in Addressing the Standards Section will indicate the specific review process in which the criteria must be demonstrated to be fully satisfied. Matters of non-compliance with any of the *Standards*, as evident during the review process, may be subject to Requirements that need to be fully satisfied before IPA is granted.

The Application

This *PMIPA* is designed to outline the steps an institution must take to secure IPA. Institutions are required to prepare an Application that addresses the *Standards*, provides the basis for initial review by the Commission, and provides the basic documentation which will be reviewed by the ERT. The nature and content of the Application is discussed in greater detail below.

The institution must also submit documentation listed in this *Manual*. It is expected that references to the documentation in the Application will be specific as to the document and page providing the supporting evidence. It is anticipated that when representative items such as a contract, faculty file, or course file are used as evidence, only a sample will be provided. The CAA does not need nor does it expect to review every contract or file as part of the IPA.

IPA operates in the context of the published *Standards*. The *Standards* include elements described in the Stipulations and Annexes. Any reference to the *Standards* should be considered

a reference, as well, to the Stipulations and Annexes. For a copy of the latest edition of the *Standards 2019*, consult the CAA website (http://www.caa.ae) or contact the Commission.

Each institution must meet the requirements of the *Standards for SPA* for its programs as a condition of continued licensure as an institution in the UAE. The approach of the new *Standards* to program accreditation begins with the opening, high-level statements of the previous Standards*,* with some additions or changes for the sake of clarity or updating. The *SPA* contains six Standards that are applied for program accreditation, which are as follows:

1. Quality Assurance
2. Educational Programs
3. Research and Scholarly Activities
4. Faculty and Professional Staff
5. Students
6. Learning Resource Centre

Application Process and Condition

The institution must have current Institutional Licensure in order to apply for IPA. The Application for the IPA comprises the following:

1. The institution submits a complete Application, including one hard copy and three electronic copies of each of the following:

    a. The completed Application Form (available on the CAA website: http://www.caa.ae).
    b. An Application Letter from the Chief Executive Officer (CEO) of the institution. This Application Letter verifies that the information in the supporting documentation is accurate and complete and that the proposed program: a) has been approved by the institution's governing body, b) is consistent with the mission and goals of the institution, and c) will receive the necessary budget, personnel, physical facilities, and other resources to inaugurate and sustain it;
    c. The Application for the Initial Accreditation of a new academic program includes an account of how the institution is meeting each of the applicable *Standards* with reference to supporting documentation.

2. The institution submits one hard copy and three electronic copies of the following documents:

a. Organization Chart
b. Policies and Procedures Manual comprising all institutional policies
c. Catalog
d. Faculty Manual
e. Staff Manual
f. Student Handbook
g. Quality Assurance Manual
h. Program Specification
i. Course Syllabi
j. List of other relevant accreditations, institutional (such as an accrediting body from the UK, the US or Australia) as well as planned programmatic (such as ABET or AACSB).
k. Other attachments which serve as supporting documentation for the Application.

All documents should be current, and consistent between documents, at the time of the submission of the Application. If the Commission finds the Application incomplete or inadequate to warrant a full review, it will return it to the institution with an explanation and information about resubmission.

Tips for the Submission of Applications

Application materials in hard copy must be submitted in spiral bound or hard bound format. Do not send notebooks or ring-folders. In addition, the following requirements apply:

- All documents include Tables of Contents and are paginated.
- Electronic copies must be on a flash drive.
- Electronic copies must be hyper-linked.
- All documents must be current.
- All documents must be edited to ensure consistency among documents and to be free of grammatical errors.
- Appendices must be numbered and labeled.

Note: All faculty files, minutes of meetings, and other records must be available to the ERT during the IPA campus visit. These documents will be reviewed during the campus visit and the ERT expects to see evidence of compliance with the respective Stipulations and Annexes of the *Standards* such as *Annex 10: Program Specifications* and *Annex 13: Course Syllabi*.

Deadlines for Submission of the Application

An institution applying for IPA must follow the timetable for review as outlined below:

1. The Commission normally reviews completed and accepted Applications submitted by November 1 during the following spring semester.

2. The Commission normally reviews completed and accepted Applications submitted by May 1 during the following fall semester.

3. Given that there are often required responses in the IPA process, the total amount of time from Application to the completion of the process may take longer depending on the speed with which the institution responds to any queries which come from the initial ERT review.

Financial Commitments

1. Costs for the Initial Program Accreditation, including the costs for the ERT, are covered by the institution.

2. The institution will be notified about the estimated cost of the visit in advance of the campus visit.

3. The cost is to be paid to the Commission in advance of the campus visit.

4. Information on financial obligations, including application fees is available in *Annex 5: Financial Obligations* of the *Supplementary Guidance to the Standards 2019*.

Review Preparation and Process

1. The Commission will select several (typically two per program) international experts in the discipline field to constitute the ERT. The responsibility for selecting the international experts rests with the Commission. The Commission will make every effort to secure international experts who are appropriate to the program, the level of study, and to the mission of the institution, and who do not have a conflict of interest.

2. The review process will include a site visit by the CAA's ERT. If the program is intended to be offered at multiple sites, it is normal practice for more than one site to be visited.

3. The assigned Commissioner will be a member of the ERT and will work closely with the institution to ensure that the visit to the campus is appropriately timed.

4. In the case of Joint Degree reviews, the Commission may visit or request teleconferencing with the collaborating institution to ensure applicable alignment with the *Standards* (see *Annex 11: Joint Degree Programs* of the *Standards*).

5. The Commissioner is responsible for establishing an itinerary for the campus visit and ensuring logistical support for the ERT. The schedule normally involves institutional and program presentations, meetings with faculty, students, alumni and representative employers of the graduates, and other stakeholders as appropriate. The assigned Commissioner will work closely with the institution on local arrangements including, team transportation, computer support, food/beverage needs of the ERT, additional documentation, interview schedules, exit conferences, and more. Detail on these issues will be provided to the ERT and to the institution by the assigned Commissioner.

6. The Commission makes travel arrangements including accommodation and transportation to and from the UAE. The institution is normally responsible for local travel arrangements and onsite catering during the onsite review.

7. The Commissioner assigned to the program may request that additional information be provided on site. It is the expectation of the Commission that the institution will fully comply with all requests for information. It is understood that all information provided to the Commission will be handled confidentially.

8. Institutions should avoid providing gifts (other than relatively low-cost items identified with the institution) to the ERT.

9. The onsite review, hosted and funded by the institution, results in an evaluation report about the program. The review of the ERT will examine the Application and determine whether:

   a. The program documentation provides evidence that the requirements of the *SPA* for a new program are met.
   b. The program will be offered with due regard to international best practice and benchmarks associated with the discipline field.

c. The program is aligned with the appropriate level descriptors (program outcomes) articulated in QF*Emirates*.

d. If applicable, any professional body requirements have been referred to in the Application and have been embraced within the program outcomes.

10. After the conclusion of the onsite exit conference, the institution shall not contact any member of the ERT until subsequent to official approval of the IPA. All communications should be via the CAA and the Commissioner.

11. The report and the Commission actions will be conveyed in writing to the institution.

Report from the Commission and Institutional Response

1. The ERT will produce a draft report on the program prior to departing the UAE. Reports have a consistent format to them in that they are aligned with the sequence and section titles of the *Standards*, and present summary statements of compliance or non-compliance with the *Standards*.

   a. The report may include those matters not in compliance with the *Standards* which are addressed through 'Requirements', and will identify actions the institution must take in order for the program to be initially accredited.

   b. The report may also include 'Suggestions' which are advisory, but which must be addressed by the institution.

   c. The report may also include constructive narrative with ideas for improvement in the proposed program.

2. The ERT draft report is submitted to the Commission for approval before being sent to the institution as the Final Report. The essence of the ERT report will be shared with appropriate campus officials during the exit briefing on the last day of the site visit where the main findings of the ERT will be shared and clarified.

3. After receiving the ERT report, the institution must submit a written Response to the report. Typically, institutions have up to two months from receipt of the report to submit their written Response. Extensions on the submission of a Response are permissible but requests for extension must be made in writing (e-mail) to the Director of the Commission. Failure of the institution to submit its Response by the approved deadlines may result in denial of IPA.

4. The Response will be reviewed by the Commission. The review will likely involve further consultation with the ERT.

5. After review of the Response, the institution will be sent an Assessment of the Response Report. An institution will only be allowed an opportunity for three separate follow-up Responses.

6. After all requirements are addressed, the Commissioner will make a recommendation to the Council of Commissioners regarding whether a program is granted or denied IPA.

Outline for Institutional Responses

Institutional responses to CAA reports should follow the following outline:

1. **Introduction**. This section is used to summarize the institution, the nature of the report as sent by the CAA and the nature of the response.

2. **Responses**. As in the examples below, the institution should re-state the Requirement (including number) and then offer its response. Responses should be accompanied by supporting documentation as appropriate. Documentation may be presented either in the text of the response or as numbered and clearly labelled appendices to the response.

Examples of Responses

Requirement 1: [Name of Institution] is required to …

Institutional Response: [Name of Institution] accepts this requirement and has taken the following steps to address the concern of the ERT. The outcome of this review and follow-up on this requirement is documented in Appendix 1 of this report.

Suggestion 1: The ERT suggests that [Name of Institution] …

Institutional Response: [Name of Institution] found this suggestion most helpful (or not) and is undertaking the following steps…

Note: Institutions are not required to adopt suggestions. It is expected, however, that institutions indicate whether or not the suggestion is adopted and provide a rationale for non-adoption.

Tips for Completing Responses

1. Be sure to respond to each and every Requirement and Suggestion.

2. Supply appropriate documentation and clearly identify which documentation supports which institutional response.

3. Be aware of deadlines.

4. Submit one hard (paper) and two soft copies (flash drives) of the report.

5. Send the report and a cover letter to the CAA Director.

Evaluation of the Response

The Commission's evaluation of the response will be organized in terms of the Requirements and Suggestions. Those requirements which are satisfactorily addressed will be indicated as "Requirement Met." Those that are not satisfactorily addressed will be indicated as "Not Met" or "Partially Met" with a narrative or action statement to indicate what is still needed. A decision of "In Progress to be Met" can also be made where there is sufficient evidence that plans are in plans to meet the Requirement but the plans have not yet been fully enacted, and the CAA has sufficient confidence that the institution will implement the plans. In such circumstances, it is normal for the Response Report to place a requirement for a future report on progress or monitoring. Suggestions which have been addressed will be indicated as "Suggestion Adopted", "Partially Adopted", or "Suggestion Not Adopted."

Follow-Up Responses

After the review of the initial response by the Commission, there may be a need for further information, documentation or another response. Institutions will be notified on the requirements that need further response. An institution will only be allowed an opportunity for three separate follow-up Responses. Institutions should use the format described above for these follow-up responses. Institutions are urged to follow-up on only those Requirements where a response is requested in the Commission's evaluation report.

Actions by the Commission

The applicant institution will be notified in writing of the actions of the Commission as follows:

Approved: Given a favorable review with all Requirements met, the program is Initially Accredited and remains in effect for up to one year after the institution graduates the first cohort of students from the program, unless otherwise specified by the Commission.

Deferred: The decision concerning IPA is delayed until the institution rectifies a problem, provides additional information, or resolves an issue concerning the proposed program.

Denied: If the institution fails to satisfy the Commission's requirements within the stipulated time frame, and not exceeding six months following notification from the CAA of the Requirements for compliance with the *Standards*, the program will be denied IPA. The institution must not advertise the program or enroll students until the program is formally approved by the Commission. An institution must not admit students to a program that has been denied IPA.

Appeal on CAA Actions

An institution may challenge a negative action by the Commission by directing its appeal to the Director of the CAA. The decisions which are subject to appeal include program probation, or denial/revocation of Program Accreditation. For more detail, refer to the *Supplementary Guidance to the Standards 2019*.

Conditions of Approval

1. If warranted by the review, the Commission may schedule another visit or visits during this period of IPA.

2. If the start of the program is delayed for more than two years from the date of formal notification of approval, the institution must re-apply for IPA before offering the program.

3. After the prescribed initial period of Accreditation, a program's Accreditation must be renewed periodically based on the outcome of the risk-based assessment (see separate *PMRPA*).

4. The program may receive unscheduled visits from the Commission to ensure that it continues to meet the requirements of the *Standards*. Failure to sustain the requirements and meet the *Standards* may result in putting the program on probation, or the loss of Accreditation, as determined by the Commission.

5. Those institutions whose programs have received approval for IPA or RPA must use the following statement whenever the accreditation status of their programs is stated:

"[Name of Institution] located at [address] has earned Accreditation through the Commission for Academic Accreditation of the Ministry of Education for the following degree [s]: Bachelor of Science in …; Bachelor of Arts in …; Master of Science in …; *etc*."

Requirements for the Application

For purposes of IPA, it is an expectation of the CAA that an institution will demonstrate that it has a fully continuous quality enhancement process and how this process will continuously be applied to the review and improvement of the program. During the review of an institution for licensure and subsequent reviews, the institution's Quality Assurance Manual will have been evaluated for compliance with all of the *Standards* related to the implementation of a system to ensure that the quality of all programs are regularly and continuously reviewed and improved.

The following is a list of examples of documentary evidence that may be included in, or appended to the Application, as evidence:

1. Evidence that all stakeholders have been involved in the planning of the program including, but not limited to, minutes or other records of:

   a. Meetings of faculty.
   b. Meetings of the program Advisory Board.
   c. Meetings of formal departmental curriculum review committees.
   d. Records of administrative involvement in program review and planning.
   e. Engagement with regional or international experts in the discipline such as reports of relevant conference proceedings.
   f. Meetings with external partners such as student placement providers.

2. Plans for course and program reviews.

3. Evidence of benchmarking against similar programs, on a local and international level and plans for future benchmarking of program performance.

4. Results of interviews and surveys of prospective employers and an indication of how these have been applied to program improvement.

5. Forecast of student enrollments with market analysis and evaluations that confirm forecast applicant and enrollment estimates and available graduate destinations.

6. Documentation of the review of resources required to support the program such as:

   a. Books, periodicals and databases planned or available through the Learning Resource Centre (LRC).
   b. Specialist resources such as laboratories, equipment and supplies, planned or available.
   c. External operational governmental or corporate sites, if applicable.
   d. Sufficiency of general teaching, social, and recreational resources to meet additional demands of the program.
   e. Cooperation agreements, planned or available with external partners as appropriate.

7. Evidence of short and long-term program level planning that includes:

   a. Short and long-term budgets that provide a rationale for the projections and clearly articulate underlying assumptions.
   b. Short and long-term faculty hiring plans that provide a rationale for the projections and clearly articulate underlying assumptions.
   c. Plans for the program that show how it fits within the departmental and institutional strategic plans.

8. A discussion of any internship program or practicum that includes reference to the elements required by *Annex 12: Guidelines for Good Practice in Internships and Practicums* of the *Standards*.

9. The implementation of policies and procedures to evaluate teaching and learning and how these policies will be applied for program improvements. A detailed account of how the program will be quality assured.

10. Department's research strategic planning, expectations of research output, and resources provided for research support.

Addressing the Standards

The Application for IPA demonstrates the ways in which the institution has met and will continue to meet the *SPA*. As applicable to the program of study, each Standard, Stipulation, and Annex should be addressed and backed with clear, detailed evidence and appropriate supporting documentation.

A more specific outline of what is expected in an Application is provided below. The outline follows the numbering and sequence of the *SPA*.

Section 1: Quality Assurance (Standard 2)

1.1 Quality Assurance System

The Application is required to include a copy of the current Quality Assurance Manual (see *Annex 8: Quality Assurance Manual* of the *Standards*).

1.2 Continuous Quality Enhancement

A. The Application explains how results of routine program reviews will be used to make improvements to the program and its constituent courses. Any planned engagement of external reviewers/examiners should be stated.

B. The Application explains both internal and external benchmarks, KPIs and targets that will be used to assess the effectiveness of the program.

1.3 Quality Assurance Unit

The Application demonstrates that the institution has a quality assurance unit that is adequately resourced to perform all functions with the additional program(s) in place.

Section 2: Educational Programs (Standard 3)

This section of the Application is central to the application for Initial Accreditation of a new program. The Application should present sufficient detail on all applicable criteria within the *Standards*.

2.1 Program Planning and Development

A. The Application for a new program provides a convincing rationale for the program and demonstrates that it fills a need both for students and society. That rationale is based on a feasibility study that includes the detail as defined in *Annex 9, Feasibility Study, Financial Analysis, and Timed Action Plan* of the *Standards*.

B. The Application includes projections of the maximum, expected and minimum number of students over a period of four years.

C. The Application demonstrates that the institution has implemented suitable protocols for developing and approving new programs that comply with the criteria in Stipulation 3.1 of the *Standards*.

2.2 Budgeting for Programs

A. The Application demonstrates the institution's capacity to initiate and sustain the program and provides a program-specific balance sheet for the projections for the next three years.

B. If the program is deemed by the institution to be no longer sustainable, the Application discusses plans to phase out the program, including plans for personnel and specialist resources, such as equipment and laboratories specific to the program.

2.3 Program Structure and Completion Requirements

A. The Program Specifications are submitted as supporting documentation to the Application (see *Annex 10: Program Specifications* of the *Standards*).

B. The Application includes a detailed statement of the goals and intended learning outcomes of the new program and any subsumed Concentrations, consistent with the mission and goals of the institution. The outcomes should be measureable and aligned with the overall quality assurance program of the institution.

C. If the Application includes articulated qualifications in the same discipline, e.g. a post-graduate diploma within a master's qualification, the distinctive outcomes of each are presented in the Application.

D. The Application provides an exposition of the way that the program meets international expectations and/or the criteria of relevant professional bodies, for such a titled program at the specified level.

E. The Application demonstrates how the program will comply with all relevant elements of Stipulation 3.3 of the *Standards*.

2.4 National Qualification Framework (QF*Emirates*)

A. The Application demonstrates that the program outcomes achieved are shown to be consistent with the defined level of the degree or award as specified in QF*Emirates*.

B. The Application demonstrates that the program is designed and will be delivered at the appropriate level of QF*Emirates*.

2.5 Graduate Programs

For programs at the graduate level, the Application explains how the program meets the criteria in Stipulation 3.4 regarding the high level of challenge for students, appropriate qualifications and experience in the graduate faculty profile, the engagement of students and faculty in research and scholarly activities, suitable facilities and other resources. Particular attention is given to ensuring that graduate programs under development, demonstrably meet the requirements of QF*Emirates*, specifically for a research component at levels 8 – 10.

2.6 General Education

The Application demonstrates that the new undergraduate program (QF*Emirates* Levels 5 – 7) includes the required elements of general education, with appropriate and measureable learning outcomes, and that the general education component of associate and baccalaureate degrees is clearly outlined in the Catalog and other program documentation, and is in keeping with the *Standards*.

2.7 Remedial Courses

A. If remedial courses relate to the new program, the Application shows evidence that appropriate policies and procedures are in place to identify student needs for remedial courses, and they are structured, delivered, assessed and evaluated accordance with criteria in Stipulation 3.6 of the *Standards*.

B. The Application specifies the conditions for successful completion of any remedial courses and transition or onward progression in the academic program.

2.8 Internship or Practicum

In cases where the program includes an internship or practicum in the curriculum, the Application discusses the planned management and designated responsibility for this component of the program and how it will meet the conditions articulated in *Annex 7: Guidelines for Good Practice in Internships and Practicums* of the *Standards*. The required Internship Manual should be provided as appended material to the Application.

2.9 Teaching and Learning Methodologies

A. The Application articulates the overarching institutional philosophy and strategy for teaching and learning, and how it is exemplified in the new program. This may be illustrated with reference to examples from specific courses.

B. The Application includes copy of course syllabi that meet the expectations of *Annex 13: Course Syllabi* of the *Standards.*

2.10 Student Assessment

The Application discusses the approach to student assessment deployed within the new program. The ERT will seek evidence from the Program Specification (see *Annex 10: Program Specifications* of the *Standards*) that a variety of assessment methodologies have been matched to the learning outcomes of courses and of the program.

2.11 Course Delivery

The Application demonstrates that appropriate policies and procedures are in place to comply with Stipulation 3.11 of the *Standards* when the program becomes operational.

2.12 Course and Program Evaluation

The Application demonstrates that appropriate policies and procedures are in place to comply with Stipulation 3.12 of the *Standards* when the program becomes operational.

2.13 Program Effectiveness

The Application demonstrates that appropriate policies, procedures and systems are in place to comply with Stipulation 3.13 of the *Standards* when the program becomes operational.

2.14 Substantive Change for Programs

This sub-section is addressed in RPA reviews.

Section 3: Research and Scholarly Activities (Standard 4)

3.1 Strategy and Policies

The Application references the institution's research strategy and discusses the plans for research and scholarly activity in the context of the new program.

3.2 Support for Research and Scholarly Activity

A. The Application affirms the allocation of funding for research and scholarly activity in line with the requirements stated in Stipulation 4.2 (a minimum of 5% of total operational budget for undergraduate institutions and additional allocation for institutions offering graduate programs), will be inclusive of the proposed program.

B. The Application affirms and describes the planned provision of appropriate facilities and equipment as relevant to research in the named discipline field.

3.3 Collaborative Research and Scholarly Activity

As applicable, the Application discusses the extent of planned Outreach in its research collaborations with agencies, organizations and institutions.

3.4 Expectations for Research and Scholarly Activities

The Application demonstrates that program faculty are informed on the institution's expectation of research and scholarly activity.

3.5 Research and Scholarly Activity Outputs

This sub-section is addressed in Renewal of Institutional Licensure and RPA.

Section 4: Faculty and Professional Staff (Standard 5)

4.1 Faculty Manual

The current Faculty Manual is submitted as a required document to accompany the Application.

4.2 Staff Manual

The current Staff Manual is submitted as a required document to accompany the Application unless combined with the Faculty Manual.

4.3 Recruitment and Terms of Employment

The Application includes a description of the recruitment process used for faculty to be assigned to the new program and a time-table for hiring additional faculty needed to complete the program, *i.e.* a timed-action hiring plan.

4.4 Faculty Qualifications

A. The Application presents summary information showing the overall composition of the faculty members assigned to teach within the new program, by rank, gender, nationality, degrees earned, specialization, and length of service at the institution.

B. The Application analyses the faculty profile to provide reassurance that the qualifications of faculty members are appropriate to the nature and level of teaching assignments, in accordance with the criteria defined in Stipulation 5.4 of the *Standards*.

C. The Application includes any planned deployment of teaching assistants, lab assistants, or other staff to support instruction.

D. The Application demonstrates that there is diversity in the cultural and educational backgrounds of the faculty planned or already assigned to teach in the new program.

E. The Application evaluates the effect on the institution and its other programs of the re-assignment of any faculty member to the new program.

F. The Application affirms that the applicable criteria itemized in Stipulation 5.4 of the *Standards* are met and the faculty files and other supporting evidence will be available during the ERT's campus visit.

G. The Application provides due consideration of administrative demands on faculty demanded by the proposed program.

4.5 Graduate Faculty

In the context of a new graduate program, the Application discusses how the requirements for faculty with regard to research and graduate thesis and project supervisory experience are being met.

4.6 Professional Staff Qualifications

The Application presents information showing the planned composition and profile of the program professional staff by specialty and qualifications.

4.7 Faculty Workload

A. The Application discusses adjustments in Faculty Workload to reflect the workload implications of adding new programs, adding, for example, graduate level programs, and demonstrates an awareness of the workload implications of different pedagogies including studios, laboratories, internships, the e-delivery of courses, and of additional administrative responsibilities.

B. The Application documents through a comprehensive faculty workload report that the institution operates within the Faculty Workload criteria articulated in Stipulation 5.7 of the *Standards*, and will sustain compliance following addition of the new program.

4.8 Part-Time Faculty

A. The institution demonstrates that it will maintain the proportion of part-time faculty contributing to the proposed program, within the limits set by the *Standards*. The institution provides evidence that existing or planned part-time faculty will meet the academic qualifications set forth in the *Standards* (see also *Annex 107: Adjunct Clinical Faculty*).

B. The Application presents summary information showing the overall composition of the part-time faculty contributing to the new program, by rank, gender, nationality, degrees earned, and length of association with the institution.

4.9 The Roles of Faculty

    A. The Application demonstrates that existing faculty members are involved in the selection and appointment of new faculty members to the proposed program.

    B. The Application clearly identifies any new roles, responsibilities and reporting lines consequent to introduction of the proposed program.

4.10 Professional Development

The institution shows that appropriate plans are in place to support faculty and staff in professional development activities associated with the proposed program. If there are special professional development requirements for the faculty and staff of the program (such as external training opportunities or extensive international travel), these are discussed and provisions for those are delineated. The budget anticipated for professional development is defined.

4.11 Employee Records

The institution provides the ERT with access to relevant employee records during the campus visit.

4.12 Evaluation

This sub-section is addressed in RPA reviews.

4.13 Code of Conduct

This sub-section is addressed in RPA reviews.

4.14 Disciplinary Actions and Appeals

This sub-section is addressed in RPA reviews.

4.15 Grievances

This sub-section is addressed in RPA reviews.

4.16 Graduate Assistants

The Application includes an account of any intent to employ Graduate Assistants for the program and it defines their responsibilities in accordance with Stipulation 5.16 of the *Standards*.

Section 5: Students (Standard 6)

5.1 Catalog

    A. The current institutional Catalog is submitted as a required document to accompany the Application.

    B. The Application includes a draft Catalog entry with the relevant details of the new program.

5.2 Undergraduate Admission

If the program is at the undergraduate level, the Application details the relevant requirements for regular admission and any conditional admission regulations, ensuring that they comply with the requirements set forth in Stipulation 6.2 of the *Standards*.

5.3 Graduate Admission

If the program is at the graduate level, the Application details the relevant admissions requirements ensuring that they comply with the requirements set forth in Stipulation 6.3 of the *Standards*.

5.4 Transfer Admissions, Transfer Credit and Advanced Standing

    A. The Application details the transfer admissions requirements and any articulation arrangements in relation to the proposed program, including transfers within the institution (*i.e.* the applicability of credits earned in an associate degree program to a baccalaureate program) ensuring that they comply with the requirements set forth in Stipulation 6.4 of the *Standards*.

    B. The Application defines any arrangements for advanced standing in relation to the proposed program.

5.5 Recognition of Prior Learning (RPL)

The Application defines any arrangements for RPL in relation to the proposed program ensuring that they comply with the requirements set forth in Stipulation 6.5 of the *Standards*. This includes details of the timing of such arrangements in relation to the start-up of a new program.

5.6 Registration

This sub-section is addressed in RPA reviews.

5.7 Student Support Services

A. The Application identifies any special services, or features within existing student services, that will be provided and resourced in relation to the proposed program.

B. The Application details any scholarship schemes or other financial aid provided to students on the proposed program.

5.8 Advising Services

The Application discusses provision for the advising of students in the new program and demonstrates that the advising system can provide adequate service for the projected new student numbers who will enroll in the program.

5.9 Student Activities and Publications

The Application discusses the anticipated student activities associated with the new program and indicates any relevant publications which exist or which are anticipated.

5.10 Student Behavior and Academic Integrity

The Application provides assurance that relevant institutional policies will be fully implemented in the context of the new program. The institution demonstrates that it can provide the human and physical resources to fully implement the procedures required to monitor and enforce academic integrity, including detection of plagiarism.

5.11 Student Appeals and Complaints

This sub-section is addressed in RPA reviews.

5.12 Student Handbook

The current Student Handbook is submitted as a required document to accompany the Application.

5.13 Alumni

This sub-section is addressed in RPA reviews.

5.14 Feedback from Students

This sub-section is addressed in RPA reviews.

Section 6: Learning Resources Centre (Standard 8)

6.1 Learning Resources Center Facilities and Infrastructure

The Application includes a description of the Learning Resources Center (LRC) facilities required to meet the program-specific needs, and a timed-action plan for any further developments that are required.

6.2 Staff

The Application demonstrates that the LRC staff is adequate in number to provide the full range of services required for the program, and that the qualified members of staff are available to assist users during all hours of program delivery.

6.3 Operations

A. The Application includes a discussion of the involvement of the program faculty in the development of the LRC collection and the selection of periodicals, reference materials and other materials appropriate to the program.

B. The Application includes an evaluation of whether the LRC access and services will be provided in a manner which is appropriate for the program (for example, a program taught primarily in the evenings and/or on weekends must have LRC support).

C. If applicable, the Application describes the access to learning resources provided at non-campus based and auxiliary learning or training facilities (such as clinics).

6.4 Electronic and Non-electronic Collections

The Application includes a description of the LRC resources (print and electronic) which are and will be available to support this program;

6.5 Co-operative Agreements

The Application documents any cooperative agreements that will be beneficial to students and faculty on the program.