



# Procedural Manual

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*for Renewal of Institutional Licensure*

Commission for Academic Accreditation  
Ministry of Education  
United Arab Emirates

**2019**

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## Introduction

In order for higher education (HE) qualifications in the United Arab Emirates (UAE) to be recognized by the Ministry of Education (MOE or Ministry), HE institutions (HEIs) are required to achieve and sustain Institutional Licensure through the Commission for Academic Accreditation (CAA or Commission). The process of Initial Institutional Licensure (IIL) is described separately in the *Procedural Manual for Initial Institutional Licensure*. IIL is granted to HEIs that have demonstrated that they are fit and proper corporate bodies to operate in the UAE and that they comply with the *Standards for Initial Licensure (SIL)*. Following IIL, an HEI is entered into the MoE's National Register of Licensed HEIs and can apply for Initial Program Accreditations (IPAs) 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. In order to gain program accreditation, the institution has to demonstrate compliance with the *Standards for Program Accreditation (SPA)*.

Maintaining Institutional Licensure is a pre-requisite for the maintenance of program accreditation, for renewal of program accreditation and for new applications for IPAs.

Institutional Licensure applies to the activities and operations of the entire institution and 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 operate institutions of higher learning are designed to promote high quality in institutions and to assure prospective students, their families, employers, and other interested parties that Licensed institutions meet standards of quality consistent with current international practice and professional judgment.

IIL and entry to the National Register is granted for a limited period of time as determined by the CAA's evaluation of institutional risk at the time of initial licensure. In order to maintain licensure and its entry in the National Registry, an HEI must apply periodically for Renewal of Institutional Licensure (RIL). This *Procedural Manual for Renewal of Institutional Licensure* defines the procedure required for RIL on a periodic basis. The periodicity of RIL is also determined by subsequent risk assessments determine the frequency and depth of program accreditation reviews.

**Initial Institutional Licensure (IIL):** Licensure signifies that the institution has a mission appropriate to higher education and possesses the governance structure, by-laws, regulations, policies and procedures, physical, technological and financial resources, educational programs, faculty and other personnel, and quality assurance measures sufficient to accomplish its mission.

For newly established institutions, IIL is granted for three years. The process of IIL is designed to ensure that robust plans are in place to provide human and physical resources appropriate to the intended programs in a timely manner, and that essential policy and administrative structures have been developed such that programs and support units will function effectively, and the financial basis of the institution is sound. Much of this process is based on detailed documentation and plans submitted by the institution.

**Renewal of Institutional Licensure (RIL):** Before the expiry of the period of its IIL, an institution must apply to renew its licensure. An analytical Self-Study is required. A review for RIL will evaluate the institution's performance in meeting the *SIL* during its period of licensure, and will require critically reflective, clear, detailed evidence and appropriate documentation that the institution is accomplishing its mission and offering and delivering educational programs of high quality, consistent with current international practice. RIL may be granted for a period of 3, 5, or 7 years from the date of expiry of the IIL.

## Risk-Based Assessment

A new addition to the *Standards for Institutional Licensure and Program Accreditation 2019* (the *Standards*) 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 institutions is identified according to the threshold risk level, as determined by the CAA, through a two-part process. The risk levels 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 status 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 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 External Review Team (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 (at the time of 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 utilise use its professional judgement in the following this structured approach to evaluate risk.

## 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 Self-Study 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 have licensure renewed, institutions are required to demonstrate that all *SIL* are met. Last Section of this *Manual*, Addressing the Standards, is aimed at complementing the *SIL* in preparing for the Commission's RIL review and identify the particular focus for attention required in the Self-Study in addressing the criteria. The Addressing the Standards Section covers each numbered sub-section of the *SIL* in sequence and emphasizes the criteria that are applicable to the specific review for RIL. In relation to Stipulations and their sub-sections that are not fully applicable to RIL, the entries in the Addressing the Standards Section indicate the specific review process in which the criteria are 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 Institutional Licensure is renewed.



## The Self-Study

Before the expiry of the period of its IIL, an institution must apply to renew its licensure. An analytical Self-Study is required. The Self-Study is a self-critical, evidence-based and analytical document which clearly shows the ways in which the institution is addressing the *Standards*, identifies strengths and weaknesses of the institution, and outlines plans for addressing the weaknesses. The nature and content of the Self-Study is discussed in greater detail below.

The institution must also submit documentation as listed in this *Manual*. It is expected that references to the documentation in the Self-Study 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 RIL.

Licensure 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 *SIL* as a condition of continued licensure as an institution in the UAE. The approach of the new *Standards* to Institutional Licensure begins with the opening, high-level statements of the previous Standards, with some additions or changes for the sake of clarity or updating. The *SIL* contains seven Standards that are applied for institutional licensure, which are as follows:

1. Governance and Management
2. Quality Assurance
3. Research and Scholarly Activities
4. Health, Safety, and Environment
5. Fiscal Resources, Financial Management, and Budgeting
6. Legal Compliance and Public Disclosure
7. Community Engagement

## Application Process and Condition

When an institution is granted IIL, the first RILP is normally due after three years. Subsequent to the first RIL, the Commission will inform the institution of the next period of Licensure and when RIL will be due, which may be up to a maximum of seven years. The Application for the RIL comprises the following:

1. The institution submits a complete Application, including one hard copy and three electronic copies of each of the following:
  - a. Completed Application Form for RIL (available on the CAA website <http://www.caa.ae>).
  - b. An Application Letter from the chairman of the Board and/or CEO [usually the President or Chancellor but sometimes the Provost] requesting the RIL through the CAA. The letter verifies that the institution has maintained the Accreditation of all of its academic programs.
  - c. A Self-Study which addresses the criteria outlined in the Addressing the Standards Section of this *Manual*. The Self-Study is expected to be a critical analysis of the institution and includes an identification of weaknesses and/or challenges facing the institution, but also which steps, on the basis of the Self-Study, the institution is taking to address those weaknesses/ challenges.
2. The institution submits one hard copy and three electronic copies of the following documents:
  - a. Mission, Goals and Objectives (unless included in the Catalog)
  - b. Institutional Fact Book
  - c. By-Laws of the Governing Body (unless included in the Policies and Procedures Manual)
  - d. Organization Chart
  - e. Minutes of the Board of Trustees and of institution-level standing committees for the past two years
  - f. Policies and Procedures Manual comprising all institutional policies (additional hard copy to be made available to the Review Team during the campus visit)
  - g. Faculty/Staff Handbook
  - h. Catalog
  - i. Student Handbook
  - j. Annual Financial Reports for two previous fiscal years (including most recent Auditor's Report and Management Letter)
  - k. Evidence of financial guarantees

- l. Governing Board-approved Strategic Plan with any associated institutional-level operational plans
- m. Research strategy and any associated operational plans
- n. Facilities Master Plan with commentary
- o. Quality Assurance Manual
- p. List of Accredited Programs
- q. List of Programs with pending Accreditation and any non-accredited programs
- r. List of other Accreditations, institutional (such as an accrediting body from the UK, the US or Australia) as well as programmatic (such as ABET or AACSB)
- s. Other attachments which serve as supporting documentation for the Self-Study. This may include Minutes of relevant board and committee meetings; summary data from reviews, surveys and evaluations; benchmarking data; lists of resources and activities; samples of contracts and letters of appointment, plans, reports and strategic documentation, contracts and MoUs, and Institutional Advisory Board minutes.

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 returns the Application with an explanation and information about resubmission.

## **Tips for Submission of the Application**

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:

1. All documents must have Tables of Contents and are paginated.
2. Electronic copies must be on a flash drive.
3. Electronic copies must be hyper-linked.
4. All documents must be current.
5. All documents must be edited to ensure consistency among documents and to be free of grammatical errors.
6. Appendices must be numbered and labelled

**Note:** Student records, faculty files, course files, minutes of meetings and other records will be



made available to the ERT during the campus visit. A sample of these documents will be reviewed during the campus visit and the ERT expects to see evidence of compliance with the respective *Standards*, *Stipulations*, and *Annexes*.

## Deadlines for Submission of the Application

1. Applications must be submitted at least six months prior to the expiration of the current Institutional Licensure. The Commission will initiate the RIL process as quickly as possible after the receipt of the Application.
  - a. The Commission normally reviews completed and accepted Applications submitted by November 1 during the following spring semester.
  - b. The Commission normally reviews completed and accepted Applications submitted by May 1 during the following fall semester.
2. Given that there are often required responses in the Renewal of Institutional; Licensure 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.
3. The institution is responsible for monitoring deadlines related to the RIL.

## Financial Commitments

Costs for the RIL, including the application fee and costs for the ERT, are covered by the institution (see *Supplementary Guidance to the Standards 2019, Section 13: Financial Obligations*). The estimated cost is notified to the institution and is expected to be paid in full in advance of the campus visit.

## Review Preparation and Process

1. The Commission will select several (typically at least two) international experts 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 review and who do not have a conflict of interest.

2. The review process will include a site visit(s) by the CAA's ERT. If the institution operates across multiple sites or campuses, several or all of these locations will normally 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 institutions offering Joint Degrees, 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 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 ERT 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 the ERT's 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 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 a relatively low-cost item identified with the institution) to the ERT.
9. The onsite review, hosted and funded by the institution, results in an evaluation report about the institution. The review of the ERT will examine the Self-Study and determine whether:
  - a. The documentation and visit provides evidence that the requirements of the *Standards* are continuing to be met.
  - b. The institution's practices pay due regard to international best practice and benchmarks.

- c. Internal monitoring and review processes have been implemented and the results of those processes used for continuous improvement.
10. The ERT will also separately document its conclusion on evaluation of institutional risk and its recommendation for the period of RIL
  11. After the conclusion of the on-site exit conference, the institution shall not contact any member of the ERT until after official approval of the Institutional Licensure. All communications should be via the CAA Office and the Commissioner.
  12. 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 institution prior to departing the UAE. Reports have a consistent format 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 institution to have its Institutional Licensure status renewed.
  - 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.
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 meeting 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 the receipt of the report to submit the 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 RIL.

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 CAA's assessment of the Response. This document will provide an evaluation of the institution's Response and determine which Requirements are or are not met and which Suggestions have received sufficient consideration and been adopted or not. If it is determined that there are unmet or partially met Requirements, the institution will be informed of this and invited to submit a Second Response to address the outstanding matters. An institution will only be allowed an opportunity for a total of three Responses.
6. When all requirements are addressed, the Commissioner will make a recommendation to the Council of Commissioners regarding whether RIL is approved or denied. If the Council of Commissioners endorses a recommendation for RIL, this will be communicated to H.E. the Minister of Education who will make final decision on the outcome of the application.

## 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 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 (with evidence of the adoption) 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 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 place to meet the Requirement, but the plans have not yet been fully enacted, and the CAA has sufficient confidence that 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", "Suggestion Partially Adopted", or "Suggestion Not Adopted".

## **Follow-Up Responses**

After the review of the first 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 institution will be notified in writing of the actions of the Commission as follows:

**Approved:** RIL is granted for up to seven years and the institution is permitted to retain its entry in the National Register.

**Deferred:** The decision on Institutional Licensure is delayed until the institution rectifies an identified problem or provides additional information. If the institution fails to do this within six months following notification it will be put on probation.

**Probation:** If an institution is placed on probation, the institution must correct any deficiencies noted to the satisfaction of the Commission within a specified period of time. For the duration of the probationary period the institution will not be permitted to admit students to the institution as a whole or to specified programs. At the end of the probationary period, the Commission makes a recommendation to the Minister, which may result in renewal or revocation of Institutional Licensure or continuation of probation.

**Denied:** An institution denied RIL has its License revoked. It must stop admitting students to any of its programs, stop offering its programs within a period of time specified by the Commission, and inform its students that its Institutional Licensure has been denied. The institution must guide its students in gaining admission to other licensed institutions of higher education. Funds held as a financial guarantee will be used to assist students in completing their educational programs (teach-out) and to meet other institutional obligations.

## **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 probation, or denial/revocation of Institutional Licensure. For more detail, refer to *Section 12 of the Supplementary Guidance to the Standards 2019*.



## Conditions of Approval

1. A licensed institution is required to identify its status as Licensed by the Ministry of Education in its publications and advertising.
2. A licensed institution must comply with the Commission's requirement for reporting data and submitting other required reports typically on a semi-annual basis.
3. The institution may receive unscheduled visits from the Commission during the period of Institutional Licensure to ensure that it continues to meet the requirements of the *Standards*. Failure to meet the *Standards* may result in loss of Institutional Licensure, as determined by the Minister.
4. Institutional Licensure does not imply the Accreditation of any programs. Program Accreditation is a separate process; each academic program must be Accredited before the institution may admit students to it or offer its curriculum. The RIL does not imply that all currently offered programs of the institution are Accredited through the CAA.
5. Representation of Institutional Licensure status: The Ministry recognizes only CAA Accredited academic programs at Licensed institutions. The Ministry makes known to the public, government agencies, and interested international parties those institutions that are included in the UAE National Register and publishes their names on its website. Institutions that are denied Institutional Licensure may not state or imply in any of their materials, official or unofficial, that they are either licensed or recognized by the Ministry. Only licensed institution may state or imply in their publications and advertisements that they are recognized in the UAE by the Ministry. When an institution's License is approved, it may refer to its status as "Licensed" by the Ministry of Education. It must note its status in the Catalog, prospectus, the institution's website and other publications intended for the public, using this statement:

*[Name of Institution] located at [address], is officially Licensed from [day, month, year] to [day, month, year] by the Ministry of Education of the United Arab Emirates to award qualifications in higher education.*

## Requirements for the Self-Study

The Self-Study for the RIL demonstrates the ways in which the institution has met and will continue to meet the *SIL*. As applicable to the institution, each *Standard* and Stipulation should be addressed and backed with clear, detailed evidence and appropriate documentation.

A Self-Study for the RIL demonstrates that the institution delivers academic programs and courses; pursues other activities such as service, research and scholarship; provides relevant academic, student, and administrative services; and that all of these activities are adequately planned, resourced and quality assured, consistent with the institution's mission. It is important to note that the Application for RIL differs substantially from an Application for IIL in that the Application for RIL provides documentation of how the operations of the institution have been implemented, monitored and enhanced. It is not sufficient for the purposes of a Self-Study, for example, to state that an institution has a process in place: The Self-Study includes evidence that the process has been fully implemented, is continually operational and that its effectiveness is regularly reviewed with identification and implementation of actions for improvement that inform institutional planning.

It is an expectation of the Commission that the Self-Study is a critical analysis of the institution. The institution should, as it addresses each of the *Standards* and relevant Stipulations, assess strengths and weaknesses of the institution and, as appropriate, discuss steps that will be taken to address weaknesses.

The Self-Study should include appropriate longitudinal data to demonstrate changes which have occurred since the last Institutional Licensure review. This may include information from the institutional Fact Book.

## Addressing the Standards

The Self-Study should be presented using the sequence and headings of Sections and relevant Sub-sections within the *SIL*. A more specific outline of what is expected in a Self-Study is provided below; the outline follows the numbering and sequence of the *SIL*.

### Section 1: Governance and Management (Standard 1)

#### 1.1 Vision and Mission

- A. The Self-Study demonstrates that the institution has a Board-approved vision statement. Changes that may have occurred in the vision statement since the last Institutional Licensure review are discussed.
- B. The Self-Study demonstrates that the mission statement has provided direction to institutional planning. Any changes that have occurred in the institutional mission since the last Institutional Licensure review have been approved by the Board and the rationale

for such changes are discussed. There are associated goals and objectives. The achievement of objectives is measurable and measured.

C. The Self-Study demonstrates that the vision and mission have been evaluated periodically and the process has involved appropriate internal and external stakeholders.

D. The vision and mission are widely and consistently disseminated.

## **1.2 Organization**

A. The Self-Study presents the rationale for any changes to the organizational structure since the last Institutional Licensure review and documents such changes with a current and approved organization chart, indicating filled and unfilled positions.

B. The Self-Study articulates the way that the organizational structure supports its mission, and facilitates its efficient operation.

C. Significant organizational changes have been referred to the CAA for approval..

## **1.3 Governance**

A. The governing body provides leadership and strategic direction to the institution and operates under By-Laws which comply with the requirements specified in *Annex 2: By-Laws of the Governing Body*.

B. The Self-Study discusses any changes in the overall composition of the Board since the last Institutional Licensure review and the rationale for such changes.

## **1.4 Policies and Procedures**

A. The Self-Study describes the process for policy development, document control, review and dissemination, and indicates the assignment of responsibilities for these functions.

B. The Self-Study records and discusses new policies which have been developed and implemented since the last Institutional Licensure review.

C. Key institutional documents (*Catalog, Faculty and Staff Manuals, Student Handbook*) meet the expectations of the *Standards*.

## **1.5 Institutional Planning**

- A. The Self-Study demonstrates that the institution institution, through a process that involves a broad stakeholder participation, periodically reviews its short-term operational plans and long-term strategic plans that are supportive of the institution's mission and which are inclusive of goals, objectives, performance indicators and targets for completion.
- B. The Self-Study offers evidence with examples to demonstrate that the results of institutional research are used to guide planning, budgeting and resource allocation.
- C. The Self-Study offers evidence that planning operates both institutionally and at the unit level, and that planning appropriately involves stakeholders, advisory panels and international practitioners. There are specific strategic and operational plans for research, community engagement and sustainability, and strategic planning for international recognition and affiliations is in place as appropriate.

## **1.6 Risk Management**

- A. The Self-Study describes and analyzes the effectiveness of the comprehensive risk management plan of the institution including provisions for insurance against liability.
- B. The Self-Study identifies the responsibility for risk management in the institution.
- C. The Self-Study provides evidence that the institution operates mechanisms to identify, monitor and ameliorate risks across all institutional activities and programs, and the plan is approved and monitored by the governing body on a regular basis.

## **1.7 Institutional Management and Administration**

- A. The Self-Study provides evidence that all senior managers, academic leaders, administrators, and unit heads are suitably qualified and experienced to perform their duties effectively.
- B. The Self-Study affirms that all staff holding significant positions of responsibility are evaluated on an annual basis, and feedback on performance is shared and used to enhance effectiveness of the various roles.
- C. The Self-Study evaluates and documents the ways in which the faculty and students are involved in the decision-making of the institution.

- D. The Self-Study provides evidence of effective record keeping pertaining to all policy and procedural changes, progress in achieving planned targets, and significant decisions made at all levels in the institution.

## **1.8 Multiple Campus Institutions within the UAE**

The Self-Study references the supporting documentation to describe the mechanisms for co-ordination across campuses and provides an evaluation of the effectiveness of the institution's co-ordination activities across multiple campuses.

## **1.9 Campuses of UAE Institutions in Other Countries**

- A. The Self-Study documents that the institution has received approval from the Commission for the operation of a branch campus in a foreign country.
- B. The Self-Study includes evidence that the branch campus is in compliance with the *Standards*, and complies with the requirements of authorities in the host country.

## **1.10 Branch Campuses of Foreign Institutions**

- A. The Self-Study discusses and evaluates any changes in the relationship with the parent institution since the last Institutional Licensure review.
- B. The Self-Study provides evaluation of the ongoing efforts to ensure equivalency of student educational experience at the parent and branch campus.
- C. The Self-Study provides evaluation of the ongoing effectiveness of the local Advisory Board.

# **Section 2: Quality Assurance (Standard 2)**

## **2.1 Quality Assurance System**

- A. The Application for Renewal of Institutional Licensure includes a copy of the current Quality Assurance Manual that meets the expectations of Stipulation 4: *Quality Assurance Manual*.
- B. The Self-Study documents that there is a process in operation by which the quality

assurance unit is regularly evaluated by relevant stakeholders and that the results of evaluation are used to improve the work of the unit.

- C. The Self-Study includes and analyses institutional level summaries of completed satisfaction surveys or other performance surveys for programs, and for both administrative and academic support units.
- D. The Self-Study submits summary information regarding institutional effectiveness either as part of a regularly published Fact Book or as an appendix to the Self-Study.
- E. The Self-Study evidences the use of external references in determining the effectiveness of its performance.
- F. The Self-Study identifies and analyses performance indicators such as, but not limited to, student-faculty ratios, retention and attrition, graduation rates by cohort, or enrollment trends.
- G. The Self-Study provides evidence that the Quality Assurance processes have been fully operational.

## **2.2 Continuous Quality Enhancement**

The Self-Study demonstrates through summary evidence, that the results of institutional research are used to improve programs and services, that benchmarking is used as part of continuous quality improvement, and that the resultant improvements are monitored and evaluated.

## **2.3 Quality Assurance/Institutional Effectiveness Unit**

The Self-Study demonstrates that the institution maintains a quality assurance unit that is appropriately staffed and adequately resourced to perform all functions and appropriately evaluated.

# **Section 3: Research and Scholarly Activities (Standard 4)**

## **3.1 Strategy and Policies**

The Self-Study includes the institution's documented Research Strategy and related policies, and provides documentation of its implementation, regular performance review, and any modifications or enhancements that have been made as a result of the institution's ongoing



review.

### **3.2 Support for Research and Scholarly Activity**

The Self-Study demonstrates that institutional support of research and scholarship is adequate and in compliance with criteria in *Standard 4.2*.

### **3.3 Collaborative Research and Scholarly Activity**

The Self-Study discusses how the institution encourages collaborative relationships for research, scholarship, and creative activity with external entities and critically evaluates the effectiveness of research collaborations.

### **3.4 Expectations for Research and Scholarly Activity**

The Self-Study describes the research and scholarly expectations for faculty and professional staff (if any) and evaluates the degree to which institutional goals for research are met.

### **3.5 Research and Scholarly Activity Outputs**

The Self-Study documents the research and scholarly activity output across the institution and critically evaluates its contribution to the development and revision of curricula and how it is utilized in serving the community and in support of national goals.

## **Section 4: Health, Safety and Environment (Standard 7)**

### **4.1 Occupational Health and Safety**

- A. The Self-Study includes a description of how it meets the health, safety, welfare and accessibility needs of its students, employees and visitors and a critical evaluation of how effectively these needs are met.
- B. The Self-Study demonstrates that health and safety issues are an integral and high priority in all institutional planning, and they are the assigned responsibility of an appropriately trained campus administrator.
- C. The Self-Study demonstrates that the policies and procedures relating to health, safety, and security, are appropriately disseminated, adhered to and regularly evaluated.

- D. The Self-Study documents the training and orientation programs related to health and safety practices, and the scope of risk assessments.
- E. The Self-Study documents that the institution has an emergency evacuation plan for its campus which is regularly tested.

## **4.2 Facilities**

- A. The Self-Study includes a summary description of the current facilities of the institution and indicates changes to the inventory of physical spaces since the last Institutional Licensure. Documentation should include whether such facilities are owned or leased, the number of classrooms, laboratories, offices and other spaces used to support the institution.
- B. The Self-Study evaluates the extent to which the campus meets the needs of the institution.
- C. The Self-Study discusses anticipated changes to the campus with regard to major facilities or including, if applicable, campus re-location.
- D. The Self-Study demonstrates that the physical environment provides appropriate access, including parking.
- E. The Self-Study documents that the institution complies with appropriate UAE law regarding the provision of facilities for those with disabilities, and that the institution has appropriate physical facilities to accommodate the needs of both male and female students.
- F. The Self-Study discusses implementation of the institutional plan for addressing the maintenance of facilities, the replacement of technological or laboratory equipment as well as other instructional or support equipment as appropriate.

## **4.3 Residence Halls**

- A. The Self-Study documents that if residence halls are provided, the learning environment in the halls supports the educational mission of the institution.
- B. The Self-Study demonstrates that residence halls provide a healthy and safe environment for resident students, with appropriate services and operated and administered by appropriately trained staff.

#### **4.4 Technology Infrastructure**

- A. The Self-Study provides evidence of adequacy, reliability, and regulation of the its information systems which enables all members of the institutional community to use information technology and to access information resources.
- B. The Self-Study demonstrates, through appropriate multi-year budgets, that technology resources are adequately supported financially.
- C. The Self-Study demonstrates that there is an adequate number of appropriately qualified technical staff supporting the institution's programs, services, institutional research and planning.
- D. The Self-Study documents that the institution has provided appropriate levels of training to faculty, staff and students in the use of technology.
- E. The Self-Study demonstrates that technology functions and services are regularly evaluated and that the results of such evaluations are used to enhance its effectiveness.
- F. The Self-Study documents the implementation of short and long-range plans for the replacement and upgrading of technology resources.
- G. The Self-Study documents that the institution operates appropriate security measures to protect the integrity and confidentiality of academic systems, administrative systems and institutional networks.
- H. The Self-Study demonstrates adequate off-site back-up of digital information.
- I. The Self-Study documents that the institution operates effective communication technologies to allow for interaction among faculty and students outside the classroom and for communication between campuses.
- J. The Self-Study demonstrates that the institution has, and effectively deploys, a Learning Management System.

## **Section 5: Fiscal Resources, Financial Management and Budgeting (Standard 9)**

### **5.1 Fiscal Resources**

- A. The Self-Study summarizes the financial picture of the institution, demonstrating both present and future financial stability, an awareness of financial risks, and assessing the adequacy of the financial resources to offer the approved programs and services of the institution.
- B. The Self-Study includes any significant changes in policies and procedures relating to fiscal resources as outlined in *Standard 9*.

### **5.2 Teach-Out Reserve**

The Self-Study documents the contingency funding arrangements and the adequacy of reserve funds to deal with any future necessity for teach-out.

### **5.3 Organization and Administration**

- A. The Self-Study documents that appropriately trained individuals have responsibility for fiscal matters, and that appropriate controls are in place to maintain fiscal integrity and also inform key stakeholders of the financial status of the institution and the programs therein.
- B. The Self-Study describes the extent of delegated authority for financial matters within the institution and evaluates the effectiveness of such delegation.

### **5.4 Budgeting**

- A. The Self-Study documents financial stability through evidence of short and long-range budgeting.
- B. The Self-Study describes the budgeting process with evidence of sample budgets at institutional level and for subsumed budget units.
- C. The Self-Study demonstrates, with examples, that budgeting is connected to both short and long-term institutional planning.

## **5.5 Expenditures**

- A. The Self-Study demonstrates that its financial policies and procedures for expenditure are implemented through sound practices.
- B. The Self-Study provides evidence of where the responsibility rests for expenditures in the institution, including the mechanisms operating for delegation of any elements of expenditure.

## **5.6 Financial Management**

- A. With reference to published institutional documentation, the Self-Study demonstrates the institution's compliance with all matters related to student fees, as detailed in *Standard 9.6*.
- B. The Self-Study describes and provides evidence of the financial reporting of auxiliary enterprises such as non-credit training programs, bookstores, residence halls, food service operations, printing and duplicating services, child care and transportation services. all income generating activities and auxiliary enterprises are accounted for and revenues are utilized in activities that accord with the institutional mission.

## **5.7 Accounting and Auditing**

- A. The Self-Study demonstrates that the internal accounting and auditing system is administered by appropriately qualified personnel and the accounting system follows generally accepted principles and practices for accounting.
- B. The Self-Study discusses the institutional compliance with all criteria stated in *Standard 9.7*.

## **5.8 Financial Reporting to the MoE**

The Self-Study reflects on the responsiveness of the institution to any requests from the Commission for financial data.

## **5.9 Insurance**

The Self-Study demonstrates the continuing adequacy of the institution's indemnity and insurance coverage.

## Section 6: Legal Compliance and Public Disclosure (Standard 10)

### 6.1 Institutional Title and Program Titles

- A. The Self-Study discusses any changes in the name of the institution since the last Institutional Licensure review and the rationale for such changes.
- B. The Self-Study reflects on the titles of its programs in relation to international norms, and the alignment of titles with the conventions of QF*Emirates*.

### 6.2 Legal Compliance and Contracts

- A. The Self-Study provides reassurance that all significant contracts and agreements with external organizations meet the requirements of local Emirate and Federal UAE laws.
- B. The Self-Study describes significant contractual relationships of the institution and assesses the degree to which the institution benefits from such relationships.
- C. The Self-Study provides evidence of periodic evaluation of all significant contracts and agreements to ensure that they remain aligned with the mission of the institution and the objectives of strategic plans.

### 6.3 Public Disclosure

- A. The Self-Study provides affirmation that all institutional and programmatic documentation available to the public in print or electronic form is current, consistent and accurate.
- B. The Self-Study describes how its website has been developed since the last licensure and critically evaluates the institution's compliance with Annex 22 of the *Standards: Website Content*.

### 6.4 Integrity and Transparency

The Self-Study affirms that appropriate policies and practices are implemented to ensure that the institution's community is honest, transparent in all its dealings and pursues academic integrity at all times.



## **6.5 Relationship with the Ministry of Education and the Commission**

The Self-Study reflects on the interactions with the Commission over the licensure period and the institution's response to requested information, and the opportunities for reviews and associated campus visits.

## **Section 7: Community Engagement (Standard 11)**

### **7.1 Community Engagement Strategy**

- A. The Self-Study evaluates the success of its community engagement strategy in meeting institutional benchmarks in community engagement.
- B. The Self-Study documents the range of community activities and evaluates the degree to which all are in keeping with the institutional mission and the community engagement plan.

### **7.2 Relationships with Employers**

The Self-Study describes and evaluates the extent of success of employer engagement through focus groups, advisory boards and in other ways, across the full portfolio of academic programs.

### **7.3 Relationships with other Education Providers**

The Self-Study documents the formal and non-formal relationships and activities with other education providers, and considers the mutual benefits derived from the arrangements.

### **7.4 Relationships with Alumni**

- A. The Self-Study describes the resourcing of alumni initiatives and current status of the alumni data base.
- B. The Self-Study documents the activities derived from the relationship with the alumni community and the mutual benefits resulting from the relationship.

### **7.5 Continuous Education**

The Self-Study demonstrates the evaluation of effectiveness of its continuing education and life-long learning policies.

## **7.5 Evaluation**

The Self-Study demonstrates the evaluation of community relations with employers, other education providers and alumni, and how results are used to monitor progress in the implementation of the institution's community engagement plan.