



# Procedural Manual

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*for Renewal of Program Accreditation*

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), institutions are required to achieve and sustain Accreditation of all academic programs through the Commission for Academic Accreditation (CAA or Commission). The process of Initial Program Accreditation (IPA) is described separately in the *Procedural Manual for Initial Program Accreditation (PMIPA)* and this Manual (*Procedural Manual for Renewal of Program Accreditation - PMRPA*) defines the procedures required for Renewal of Program Accreditation (RPA) on a periodic basis. Maintaining Program Accreditation is a pre-requisite for operation of post-secondary (Levels 5 – 10 in the UAE’s National Qualifications Framework *QFEmirates*) HE study programs of one year full-time equivalent or longer.

Program Accreditation applies to all of an institution’s academic programs and is one of the ways through which the CAA and the MoE ensure quality assurance for post-secondary education in the UAE. The standards, policies, and procedures adopted by the Ministry to govern the establishment and delivery of academic programs 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.

For any Higher Education Institution (HEI) that is granted IPA or RPA for a program of study, the frequency and depth of subsequent reviews will be based on the risk category of the institution as determined during licensure.

**Initial Program Accreditation (IPA):** Only after being granted Initial Institutional Licensure (IIL) may a 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 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 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 an institution is measured 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 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 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 *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 Accreditation renewed, 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 RPA 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 *SPA* in sequence and emphasizes the criteria that are applicable to the specific review for RPA. In relation to Stipulations and their sub-sections that are not fully applicable to RPA, 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 Program Accreditation is renewed.

## The Self-Study

For RPA, an institution is required to submit a Self-Study related to the program or programs for which RPA is sought. 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 academic programs, 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 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 RPA.

Accreditation 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 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 *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 Program Accreditation. The Application for the RPA 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. The Application includes all of the titles, including any changes, for the institution, the program, and any concentrations, in both English and Arabic.
  - c. An Application Letter from the Chief Executive Officer (CEO) of the institution, verifying the continuing support for the program.
  - d. 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 program and includes an identification of weaknesses and/or challenges facing the institution in relation to the program under review, 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. 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 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 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 will include 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 must be 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 such as *Annex 13: Course Syllabi* and *Annex 16: Course Files of the Standards*.

## Deadlines for Submission of the Application

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

1. Applications must be submitted at least six months prior to the expiration of the current Program Accreditation. The Commission will launch the RPA 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 RPA 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 RPA.

## Financial Commitments

1. Costs for the RPA, 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 must 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 ERT. If the program is being 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, and 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 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 program. The review of the ERT will examine the Self-Study and determine whether:
  - a. The program documentation provides evidence that the requirements of the *SPA* are continuing to be met.

- b. The program has been offered with due regard to international best practice and benchmarks associated with the discipline field.
  - c. Any professional body requirements have been referred to in the Self-Study and have been embraced within the program outcomes, if applicable.
  - d. Internal monitoring and review processes have been implemented and the results of those processes used for continuous improvement.
10. After the conclusion of the on-site exit briefing, the institution shall not contact any member of the ERT until subsequent to official approval of the Program Accreditation. 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 have its Program Accreditation 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 in the 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 conference 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 a 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 by the institution to submit its Response by the approved deadlines may result in denial of Program Accreditation.

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 a Response Report. 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. all requirements are addressed, the Commissioner will make a recommendation to the Council of Commissioners regarding whether a program is granted or denied its RPA.

## 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 by the Commission**

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 instances, 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:** RPA is granted for up to seven years and the institution is permitted to continue offering the accredited program(s) in the UAE.

**Deferred:** A final decision on the RPA is deferred pending satisfactory responses from the institution to Requirements articulated in the review report from the Commission.

**Probation:** If a program is placed on probation for failure to fully comply with requirements for Program Accreditation, the institution must correct any deficiencies noted to the satisfaction of the Commission within a specified period of time. At the end of the probationary period, the Commission makes a recommendation to the Minister, which may result in approval or in the denial or revocation of Program Accreditation. For the duration of the probationary period the institution will not be permitted to admit students to the specified program(s).

**Denied:** The program denied RPA will have its Accreditation revoked. The Institution must stop admitting students to the program(s), stop offering the program within a period of time specified by the Commission, and inform its students that its Program Accreditation has been denied. The institution must guide its students in gaining admission to a similar program or programs in other recognized or 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 program probation, or denial/revocation of Program Accreditation. For more detail, refer to the *Supplementary Guidance to the Standards 2019*.

## Conditions of Approval

The institution may receive unscheduled visits from the Commission during the period of Program Accreditation to ensure that it continues to meet the requirements of the *Standards*. Failure to meet the *Standards* may result in loss of Program Accreditation, as determined by the Minister;

**Representation of Accreditation Status:** The Ministry recognizes only CAA accredited academic programs at accredited institutions. The Ministry makes known to the public, government

agencies, and interested international parties those programs that are accredited and offered by accredited institutions in the UAE, and publishes their names on its website. Institutions with programs placed on probation or denied accreditation, may not state or imply in any of their materials including the official institution's webpage, official or unofficial, that the relevant programs are either accredited or recognized by the Ministry.

Those institutions whose programs have received approval for IPA or the 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 Self-Study

For purposes of RPA, it is an expectation of the CAA that an institution will demonstrate that it has a fully functioning continuous quality enhancement process and that it will offer concrete examples to demonstrate how that process has been continuously 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.

It is important to note that the Self-Study for RPA differs substantially from an Application for IPA in that the Self-Study for RPA provides documentation of how policies and procedures related to the assessment and evaluation of a program or programs have been implemented. It is not sufficient for the purposes of a Self-Study, for example, to state that an institution has a process for evaluating program effectiveness. The Self-Study includes evidence that each step in the process has been fully implemented and is continually operational. It is not sufficient, for example, to include blank copies of survey forms. Instead, a Self-Study includes examples of completed survey forms, summaries of evaluation results, documentation of the evaluation process and using those evaluations to formulate plans for improvement, implementation of program enhancements, and monitoring of progress of the planned improvements.

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

1. Evidence that all stakeholders have been involved in the regular and continuous review of the program or programs 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 improvement including records of formal program modifications at the departmental and institutional level.
  - e. Formal and informal student input including evaluations of the results of surveys of courses and of faculty.
  - f. Engagement with regional or international experts in the discipline such as reports of relevant conference proceedings.
  - g. Meetings with external partners such as student placement providers.
2. Timetables for regular course and program reviews.
  3. Evidence of the analysis of student performance and how that has been used for program improvement.
  4. Evidence of benchmarking against similar programs, on a local and international level and plans for future benchmarking of program performance.
  5. Evidence of ongoing faculty research and documentation of how that has been applied to the enhancement of the program.
  6. Documentation of changes in program and course level learning outcomes that have resulted from regular periodic reviews.
  7. Results of interviews and surveys of employers of graduates and an indication of how these have been applied to program improvement.
  8. Results of interviews and surveys of alumni and their application to program improvement.
  9. Forecast of student enrollments with market analysis and evaluations that confirm forecast applicant and enrollment estimates and available graduate destinations.
  10. Documentation of the regular and periodic 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.
11. 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.
12. A discussion of the effectiveness 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*.
13. The implementation of policies and procedures to evaluate teaching and learning and how the analysis has been applied to implement program improvements.
14. The implementation of the department's research policies and procedures.
15. The regular review of research output.
16. Any modifications in the resources provided for research support.

## Addressing the Standards

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

## Section 1: Quality Assurance (Standard 2)

### 1.1 Quality Assurance System

- A. The Application for RPA includes a copy of the institution's current Quality Assurance Manual (see *Annex 8: Quality Assurance Manual of the Standards*).
- B. The Self-Study demonstrates, with examples specific to the program, the way that the quality assurance unit serves the program through its routine evaluation of the achievement of program and course outcomes.

### 1.2 Continuous Quality Enhancement

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

### 1.3 Quality Assurance Unit

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

## Section 2: Educational Programs (Standards 3)

### 2.1 Program Planning and Development

- A. The Self-Study discusses the ways in which the program fills the needs both for students and society. The discussion builds from the initial Feasibility Study undertaken for the program. The discussion may include but is not limited to:
  - development of recent employment opportunities for program graduates within the Emirate, and the UAE;
  - a summary of students enrolled in the program, graduates of the program, and employment of the graduates of the program;
  - an account of whether the enrollment to date has met initial targets as presented in the application for IPA;
  - a cohort analysis (see *Annex 23: Glossary of Terms of the Standards*);

- an analysis of the ways in which the program parallels and/or differs from any competing programs at both public and private institutions in the UAE;
- an evaluation of the effectiveness of the mode of delivery of the program i.e. full-time, part-time, intensive or block delivery, or e-learning.

B. The Self-Study includes a current statement of the goals and outcomes of the program and any subsumed concentrations, and identifies any changes to the outcomes introduced since the last Program Accreditation review.

## **2.2 Budgeting for Programs**

- A. The Self-Study demonstrates the institution's capacity to sustain the program and provides a program-specific balance sheet for the previous two years of the program as well as projections for the next three years.
- B. If the program is deemed by the institution to be no longer sustainable, existing students will follow the institution's teach-out plan. The Self-Study discusses plans to phase out the program, including plans for personnel, 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 Self-Study (see *Annex 10: Program Specifications of the Standards*).
- B. Course Files must be available to the ERT during the RPA campus visit. These files will be sampled to provide evidence of compliance with the requirements of the *Standards* (*Annex 10: Program Specifications, Annex 13: Course Syllabi, and Annex 16: Course Files*) and to provide evidence of alignment with the criteria in Stipulation 3.3 of the *Standards*.
- C. The Self-Study 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.
- D. Any changes made to the curriculum since the last Program Accreditation review are identified and justified in terms of information received from internal and external review procedures.

## **2.4 National Qualification Framework (QF*Emirates*)**

- A. The Self-Study demonstrates that the program learning outcomes achieved are shown to be consistent with the defined level of the degree or award as specified in QF*Emirates*.
- B. The Self-Study demonstrates that the program is designed and delivered at the appropriate level of QF*Emirates*.

## **2.5 Graduate Programs**

The Self-Study demonstrates that the program emphasizes the development of competencies in research and scholarship appropriate to the field and the level of the program.

## **2.6 General Education**

As applicable to undergraduate programs:

- A. The Self-Study analyses the results of periodic evaluation of the General Education provision in the context of the program under review;
- B. The Self-Study discusses whether and how General Education supports the achievement of the program outcomes.

## **2.7 Remedial Courses**

The Self-Study evaluates the effectiveness of such remedial provision in preparing students for progression into the full academic program.

## **2.8 Internship or Practicum**

- A. If internships are an integral component of the program, the Self-Study includes an evaluation of the effectiveness of the internship in contributing to program goals and outcomes, and in relation to the criteria in Stipulation 3.8 and *Annex 12: Guidelines for Good Practice in Internships and Practicums of the Standards*.
- B. The required Internship Manual is provided as appended material to the Self-Study, and records of administration, delegated responsibilities, evaluation and assessment must be available to the ERT during the campus visit.

## **2.9 Teaching and Learning Methodologies**

- A. The Self-Study articulates the overarching philosophy and strategy for teaching and learning as applied to the program. This is illustrated with reference to examples of specific practice within the academic program.
- B. The Self-Study demonstrates the implementation of policies and procedures to evaluate teaching and learning within the program and how the analysis of evaluations is used to promote innovation and effectiveness of teaching and learning methodologies.
- C. The Self-Study documents that the institutional guidelines regarding optimal class size, are adopted and adhered to in the context of the program.

## **2.10 Student Assessment**

The Self-Study provides supporting evidence, through Course Files, of the deployment of a variety of assessment methodologies within the program, and presents evidence of alignment between specific assessment methods and the course learning outcomes.

## **2.11 Course Delivery**

- A. The Self-Study demonstrates that teaching strategies used in the program are effective, and evaluates whether such strategies remain current and appropriate in light of international good practice.
- B. The Self-Study discusses the methods deployed to ensure that faculty deliver the courses according to the syllabus detail, and the marking of assignments and examination scripts are accurate and consistent. Course files show evidence that they are in compliance with the requirements of the *Standards* (see *Annex 10: Program Specifications* and *Annex 16: Course Files*).
- C. Where appropriate, the Self-Study demonstrates that the delivery of courses within the program is in compliance with applicable Annexes of the *Standards* covering – *Annex 11: Joint Degree Programs*, *Annex 14: Intensive Courses and Block Delivery*, and *Annex 15: Courses Taught Through e-Learning*.

## **2.12 Course and Program Evaluation**

The Self-Study documents that the program is in full compliance with the criteria of Stipulation 3.12 of the *Standards* through implementation of appropriate policies and procedures by which



the effectiveness of all academic courses and programs are determined.

### **2.13 Program Effectiveness**

The Self-Study offers a summary and analysis of the results of program effectiveness, including a discussion of the evaluation instruments used and an indication of changes that have occurred in the program as a result of these measures. The analysis of program effectiveness will include an analysis of the employability of graduates.

### **2.14 Substantive Change for Programs**

The Self-Study provides a listing and brief description of any Substantive Changes related to the program under review and approved by the Commission since the last Program Accreditation review (see *Annex 17: Substantive Change at Program Level* of the Standards).

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

### **3.1 Strategy and Policies**

The Self-Study discusses progress in addressing the institution's research strategy in the context of the academic program under review, and provides evidence of the scholarly and research productivity of the faculty members assigned to the program, and engagement of its students in research.

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

- A. The Self-Study discusses the nature and level of support for research extended to the faculty and students in the program. This can, among other things, include details of financial support as well as forms of public recognition.
- B. The Self-Study describes the appropriateness of facilities and equipment as relevant to research in the named discipline field.

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

The Self-Study critically evaluates the extent and effectiveness of externality in its research collaborations with agencies, organizations, and institutions related to the program under review.

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

The Self-Study describes the research and scholarly expectations for faculty and students in the program and assesses the degree to which institutional goals for research have been met through the research activity in the program discipline.

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

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

## **Section 4: Faculty and Professional Staff (Standards 5)**

### **4.1 Faculty Manual**

The current Faculty Manual is submitted as a required document to accompany the Self-Study.

### **4.2 Professional Staff Manual**

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

### **4.3 Recruitment and Terms of Employment**

- A. The Self-Study discusses any particular strategies that have been deployed to recruit faculty to the program, and any difficulties that have been encountered in recruiting faculty with the qualifications and experience required to teach in the program field.
- B. The ERT requires access to faculty files during the campus visit in order to verify that institutional policies and procedures have been followed and recorded.

### **4.4 Faculty Qualifications**

- A. The Self-Study presents information showing the composition and profile of the program faculty by rank, gender, nationality, degrees earned, specialization, and length of service at the institution.
- B. The Self-Study presents evidence of the appropriate match between subject qualifications

and training of program faculty, and the teaching assignments to individual courses.

- C. The Self-Study demonstrates that there is diversity in the cultural and educational backgrounds of the faculty contributing to the program.
- D. The Self-Study provides due consideration of administrative demands on faculty demanded by the program.

#### **4.5 Graduate Faculty**

If the program is offered at the graduate level, the Self-Study explains how the distinctive requirements of graduate level faculty regarding aspects such as academic rank, research activity, graduate level supervisory experience, and high-level teaching experience have been addressed.

#### **4.6 Professional Staff Qualifications**

The Self-Study presents information showing the composition and profile of the program professional staff by gender, nationality, specialty, degrees earned, and length of service at the institution.

#### **4.7 Faculty Workload**

- A. The Self-Study evaluates the adequacy of faculty (full-time and part-time) appointments to support the program and in meeting the *Standards*, and its plans for addressing any deficiencies.
- B. The Self-Study includes a critical self-analysis of faculty workload. This includes any admin work or workload commitments outside the program.

#### **4.8 Part-Time Faculty**

The Self-Study demonstrates adherence to Stipulation 5.8 of the *Standards* with regard to the deployment and qualifications of part-time faculty contributing to the program.

#### **4.9 The Roles of Faculty**

The Self-Study demonstrates adherence to Stipulation 5.9 of the *Standards* with regard to the roles of faculty associated with the program.

#### **4.10 Professional Development**

The Self-Study shows that appropriate arrangements are operating to support faculty and staff in professional development activities associated with the program. The approved budget allocated to professional development is noted as well as the record of expenditures on such activities. Documentation includes lists of relevant professional development activities of the faculty and staff.

#### **4.11 Employee Records**

The Self-Study demonstrates adherence to Stipulation 5.11 of the *Standards* with regard to the employee records in relation to the program under review.

#### **4.12 Evaluation**

Samples of annual evaluations and resultant professional development plans are provided during the ERT's campus visit as evidence that faculty (full-time, part-time and visiting faculty) and professional staff, are evaluated/appraised annually and according to published criteria, and the outcomes are used to produce individual and institutional professional development plans.

#### **4.13 Code of Conduct**

The Self-Study demonstrates adherence to Stipulation 5.13 of the *Standards* with regard to the code of conduct for faculty and staff associated with the program.

#### **4.14 Disciplinary Actions and Appeals**

The Self-Study demonstrates adherence to Stipulation 5.14 of the *Standards* with regard to the disciplinary actions and appeals for faculty and staff associated with the program.

#### **4.15 Grievances**

The Self-Study demonstrates adherence to Stipulation 5.15 of the *Standards* with regard to the grievances for faculty and staff associated with the program.

#### **4.16 Graduate Assistants**

The Self-Study confirms that any Graduate Assistants employed for duties within the program are deployed in activities consistent with the criteria stated in Stipulation 5.16 of the *Standards*.

## **Section 5: Students (Standard 6)**

### **5.1 Catalog**

The current institutional Catalog, undergraduate and graduate as appropriate, is submitted as a required document to accompany the Self-Study.

### **5.2 Undergraduate Admission**

- A. The Self-Study details the relevant full admission requirements, demonstrating that they comply with the requirements set forth in Stipulation 6.2 of the *Standards*.
- B. The Self-Study analyzes admissions and admissions trends in relation to the program, to ensure and demonstrate that admitted students have a reasonable opportunity of success in the program.
- C. The Self-Study discusses and analyzes the impact of any changes that have occurred in the admissions criteria since the last Program Accreditation review.

### **5.3 Graduate Admission**

- A. The Self-Study details the relevant full admission requirements to the graduate program, demonstrating that they comply with the requirements set forth in Stipulation 6.3 of the *Standards*.
- B. The Self-Study analyzes admissions and admissions trends in relation to the graduate program, to ensure and demonstrate that admitted students have a reasonable opportunity of success in the program.
- C. The Self-Study discusses and analyzes the impact of any changes that have occurred in the admissions criteria since the last Program Accreditation review.

### **5.4 Transfer Admissions, Transfer Credit and Advanced Standing**

If applicable to the program under review, the Self-Study analyses the effectiveness of transfer arrangements in recruiting students that succeed on the program.

### **5.5 Recognition of Prior Learning (RPL)**

If applicable to the program under review, the Self-Study analyses the effectiveness of RPL arrangements in recruiting students that succeed on the program.

### **5.6 Registration and Records**

The Self-Study demonstrates adherence to Stipulation 6.6 of the *Standards* with regard to the registration and records for students in the program.

### **5.7 Student Support Services**

- A. The Self-Study details any particular demands that students in the program make on the range of student services, and how the institution provides for these students.
- B. The Self-Study discusses any special scholarship schemes or financial aid that is provided to students in the program and the extent of use of these supportive arrangements.

### **5.8 Advising Services**

The Self-Study evaluates the effectiveness of the advising services in preparing students for progression in the program.

### **5.9 Student Activities and Publications**

The Self-Study discusses the value of any special student activities and publications associated with the program.

### **5.10 Student Behavior and Academic Integrity**

The Self-Study demonstrates that appropriate procedures are in place for ensuring academic integrity and they are implemented consistently within the program. Case records provide evidence that procedures are effective in dealing with academic offences and appeals.

### **5.11 Student Appeals and Complaints**

The Self-Study demonstrates adherence to Stipulation 6.11 of the *Standards* with regard to appeals and complaints for students in the program.



### **5.12 Student Handbook**

The current Student Handbook is submitted with the Self-Study for the RPA.

### **5.13 Alumni**

The Self-Study evaluates the effectiveness of the Alumni Office in the institution to serve the program and draw benefit from connections with graduates from the program.

### **5.14 Feedback from Students**

The Self-Study demonstrates through examples and summary evidence, that the results of feedback from students are used to improve the program and institutional services, and that the resultant improvements are monitored and evaluated.

## **Section 6: Learning Resources Centre (Standard 8)**

### **6.1 Learning Resource Centre Facilities and Infrastructure**

The Self-Study demonstrates adherence to Stipulation 8.1 of the *Standards* in serving the program.

### **6.2 Staff**

The Self-Study demonstrates adherence to Stipulation 8.2 of the *Standards* to serve the program.

### **6.3 Operations**

The Self-Study includes detailed timed-action plans to meet any deficiencies related to the LRC support for the program.

### **6.4 Electronic and Non-electronic Collections**

- A. The Self-Study includes an evaluation of the LRC resources (print and electronic) which are available to support the program.
- B. The Self-Study demonstrates that appropriate stakeholders are involved in the development of the collection to ensure its currency and relevance to the program and related research.

C. The Self-Study presents evidence that access to the collection is meeting the needs of the program.

### **6.5 Co-operative Agreements**

The Self-Study demonstrates adherence to Stipulation 8.5 of the *Standards* in serving the program.