2019

Standards

for Institutional Licensure and Program Accreditation

Commission for Academic Accreditation
MINISTRY OF EDUCATION
UNITED ARAB EMIRATES

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Introduction

Launched in December 2017, the United Arab Emirates (UAE) *National Higher Education Strategy 2030 (*the *National Strategy)* supports the *National Agenda 2021*, to build *'a more diverse economy that relies less on oil'*. Higher education provision in the UAE continues to evolve in terms of its diversity of learning environments and modes of study, and the range of specialist programs. The quality of education available to students within this knowledge-based economy will require *'a stronger, broader, more flexible higher education system,'* in which universities and colleges serve as *'a core part of the nation's innovation system'*, active in research and scholarship and creative activity, delivering high-quality programs that are *'relevant to employers in a changing global marketplace'*. Higher education institutions (HEIs) will increasingly use new learning approaches, including online and blended learning.

In order to secure and assure the consistent provision of high quality, relevant, innovative learning programs by an increasingly varied and complex higher education sector, all HEIs are expected to meet common expectations for academic and institutional quality. These common expectations are set out in clear National Standards (the *Standards 2019*). The *Standards* contain Stipulations that are supported by explanations and guidance, which take account of different providers' structures, missions and levels of maturity, and of local contexts. A coherent and consistently rigorous national system of quality assurance will enable the higher education sector's stakeholders to be confident that the *Standards* are being met. The *Standards* are based on two key parts:

The *Standards for Institutional Licensure (SIL)*
The *Standards for Program Accreditation (SPA)*

These are both evolutionary developments from the *Standards for Institutional Licensure and Program Accreditation* (2011) produced by and previously published by the Commission for Academic Accreditation (CAA or Commission).

HEIs are expected to take increasing responsibility for assuring the quality of their educational programs; they will be encouraged and supported in doing this, and in using their quality assurance data to inform and drive the enhancement of their provision. Regular reporting on higher education quality and learning outcomes will provide consistent public information about the performance of each provider and the system as a whole. This combination of the *Standards*, quality assurance, promotion of quality enhancement, and the provision of information about higher education are combined in a new approach to higher education quality for a unified national higher education sector.

A National Register of Licensed HEIs, which is maintained by the Ministry of Education (MoE) and published on the Ministry's website, will define this unified national higher education sector. Licensure and accreditation will be the gateway to the sector. By controlling entry to the Register, the CAA will assure the threshold quality of higher education provision and minimise the risks to students and to the reputation of the higher education sector and the UAE.

For this reason, licensure and entry to the Register require a prospective HEI wishing to operate within the country to demonstrate two things: First, that it is a fit and proper corporate body to operate in the UAE through compliance with the *SIL*; and second, that it meets the requirements of the *SPA* for its programs. All licensed HEIs must then demonstrate through a monitoring and review process undertaken by the CAA that they continue to meet the *SIL* and *SPA* expectations, in order to retain their licensed status and their presence on the National Register.

The CAA directs the institutional review, to determine whether the institution meets the academic and educational requirements set out in the *SIL*. Once an institutional review has confirmed that the Stipulations of the *SIL* are successfully met, it will receive the MoE's licence and be admitted to the National Register. Recognition of programs through accreditation can only take place in licensed institutions.

A new addition to the *Standards 2019* is the introduction of a 'risk-based approach' to institutional licensure and program accreditation by the CAA. This context-sensitive assessment of institutional performance is determined against baseline regulatory requirements. The risk level of institutions is identified according to the threshold risk level as determined by the CAA. The risk levels establish the ongoing licensure and accreditation review arrangements for HEIs on a schedule of 3-, 5-, or 7-year visit cycles, or they may lead to denial or probation as applicable.

The risk-based approach undertaken during institutional licensure acknowledges the level of importance the CAA attaches to the development of institutions, and the maintenance of academic standards. The CAA risk-based approach is centered on providing a full understanding of the implications of the risk evaluation for different providers, their students and other stakeholders.

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:

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

Risk Evaluation Part B: evaluates the risk of strategic, operational, legal and financial, academic and international dimensions as applied to specific risk statements. The five risk dimensions have been determined to effectively fit across the *SIL* and the *SPA*.

The ERT will use its professional judgment in following this structured approach to evaluate the extent to which an institution's risk level is determined as low, medium or high risk.

THE STANDARDS 2019

The *Standards 2019* continue the trend of transferring responsibility for quality assurance from the Commission to UAE-based higher education institutions. Effective operation of the institution's Quality Assurance/Institutional Effectiveness office is at the heart of this development. Evidence-based improvements to programs, support services and administration must be embedded in the institutional culture and its internal QA systems, and these *Standards* serve to emphasize the importance of a self-

critical approach to quality when preparing self-studies for renewal of institutional or program accreditation.

In relation to governance, financial management and academic integrity, the *Standards* require governing bodies, management personnel, faculty, students and all other institutional stakeholders to act professionally, and to uphold the highest levels of integrity and ethical behaviour.

Many of the changes introduced through the *Standards* reflect the growing maturity of higher education across the UAE, although with more institutions still wishing to establish campuses in the country, the specifications for Initial Institutional Licensure are still essential. Emphasis in these *Standards* is given to promotion of research and scholarly activity; quality assurance in the context of intensive course delivery and e-learning; alignment with the National Qualifications Framework (QF*Emirates*); and issues related to joint programs and other collaborative arrangements, and to the demands for quality assurance of clinical programs.

The *Standards 2019* also reflect initiatives of the MoE that strengthen the contributions of the education sector as a whole to the economic, social and cultural advancement of the UAE. Examples include an emphasis on developing the capacity of graduates for innovation and entrepreneurship, a recognition of the importance of sustainability in all realms of national life, and an expectation that institutions include UAE studies, Islamic Studies and the Arabic language as subjects of study for all undergraduate students.

The CAA remains committed to its mission – to promote educational excellence across diverse institutions of higher learning in the UAE. Through Institutional Licensure of colleges and universities, and Accreditation of individual programs, the Commission strives to assure high quality education, consistent with international standards. The challenge across the higher education sector, and for the Commission, is to maintain the quality of the student learning experience and raise performance standards in an educational environment that must respond to the incorporation of advanced technologies and the enhancement of the expectations of the student.

In order to demonstrate initial compliance with the *SIL*, prospective HEIs are assessed through the preliminary stages of institutional review, which focuses on the following seven elements:

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

The CAA directs the main core elements of the institutional review, to determine whether or not the institution meets the academic and educational requirements set out in the *SIL* appropriate to the nature of the program(s) it intends to offer and the targeted student body. Once an institutional review has confirmed that the *SIL* are met, the HEI will receive the MoE's licence and be admitted to the National Register

Each HEI must meet the requirements of the *SPA* for its programs as a condition of continued licensure as an HEI 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

The *Standards 2019* now include 'Stipulations' which describe good academic practice and explain to providers how each of the *Standards* can be met effectively. If adopted and applied consistently, the Stipulations and related Annexes should enable each HEI to secure the quality of all that it provides for its students. For this reason, they are of indispensable value to all HEIs.

Institutional reviews and program reviews will be required to determine whether HEIs and their programs meet the requirements of both the *SIL* and the *SPA*. This applies to all institutions as a condition of licensure and accreditation. However, review panels will use the Stipulations according to the risk assessment rating of the HEI in determining the frequency and focus of accreditation reviews.

The *Standards* will be reviewed and updated periodically, to ensure that the contents maintain currency, and to respond to developments in the national and global higher education sectors. Substantial changes (those affecting the highest-level *Standards* specifications) will only be made after due consultation with the higher education sector and must be approved by the MoE prior to becoming enforceable. However, the MoE may make incremental changes to the Stipulations, and issue new guidance documents as and when required.

PRINCIPLES OF LICENSURE AND ACCREDITATION

In the UAE, the authority to licence educational institutions to grant degrees and other academic awards, and to accredit the programs of all institutions, rests with the CAA within the MoE. Accreditation is the agreed term used for program approval. Institutional Licensure is the procedure carried out prior to issuing of a license to operate from the MoE, and inclusion on the National Register of Licensed HEIs.

The CAA is responsible for these quality assurance processes. The *Standards* that guide these processes, and the criteria that institutions must meet, are specified in this publication, available both in print and on the Commission's website (https://www.caa.ae).

The *Standards* and Stipulations are designed to promote high quality institutions and to assure prospective students, their families, employers, and other stakeholders that institutions with Institutional Licensure meet levels of quality consistent with current

international practice and professional judgment. Licensed institutions demonstrate that they adhere to standards of performance covering all activities across the institution, follow principles of continuous improvement, and provide evidence of achieving student learning outcomes.

INSTITUTIONAL LICENSURE

Institutional Licensure applies to the entire institution and all of its activities. In order to be licensed and included on the National Register of Licensed HEIs, the HEI must meet the requirements of the *SIL*, which contains seven *Standards* and their Stipulations that cover the way in which the HEI operates and is managed.

Criteria for each of the seven *Standards* determine whether the institution fulfils that *Standard*, and each criterion that must be met to achieve Institutional Licensure. The second *Standard*, Quality Assurance, relates to all other *Standards* and is at the heart of the Commission's determination to assure and enhance high quality.

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 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.

PROGRAM ACCREDITATION

For any HEI who is granted Initial Program Accreditation or Renewal of Program Accreditation 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 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, 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 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, and the nature of the student experience.

STIPULATIONS

These *Standards* provide the threshold requirements which an institution must meet for IIL, RIL, IPA, and RPA. In this publication, the *Standards* are supported by a set of 11 Stipulations along with 23 Annexes, to provide further detail and aid institutions in complying fully with the criteria of the *Standards*. The Stipulations carry the same weight as the *Standards* themselves and, if applicable to the particular institution or its programs, the Commission expects each criterion within the relevant Stipulation to be addressed in the HEI's applications for licensure and accreditation.

PROCEDURAL MANUALS

As stated above, the *Standards* are comprehensive and apply to the four review processes that have been designed by the Commission to assure the quality of institutions and their programs, from the point of initial establishment to the periodic reviews of programs and support services that are fully operational. In order to guide institutions in the preparation and documentation required for these four review processes – IIL, RIL, IPA, and RPA – the Commission has developed a set of *Procedural Manuals* (formerly *Procedural Guidelines*) linked tightly to the *Standards* and designed to help institutions prepare applications for these separate review processes. With this edition of the *Procedural Manuals*, the Commission has endeavoured to make it explicit as to the particular criteria in the *Standards* and Stipulations which must be addressed in each of the applications related to the four review processes. The following four *Procedural Manuals* are available separately from the CAA website https://www.caa.ae:

Institutional

Procedural Manual for Initial Institutional Licensure (IIL)
Procedural Manual for Renewal of Institutional Licensure (RIL)

Programmatic

Procedural Manual for Initial Program Accreditation (IPA)
Procedural Manual for Renewal of Program Accreditation (RPA)

UAE QUALIFICATIONS FRAMEWORK

All accredited HEIs in the UAE are required to demonstrate that program learning outcomes are aligned with the National Qualifications Framework (QF*Emirates*). This applies to new programs submitted for IPA, and to established programs seeking RPA. The ERTs working on behalf of the CAA are charged with ensuring the program outcomes satisfy the Level Descriptors for Knowledge, Skills and Competencies as articulated in the QF*Emirates* (see http://www.nqa.gov.ae). This process, which is embedded within the *Standards*, seeks to ensure that qualifications are meeting appropriate international expectations for the rigor and challenge of programs, in relation to their titles.

INTERNATIONAL QUALITY ASSURANCE AND ACCREDITATION

The CAA conducts its review procedures with reference to the following:

- The Guidelines of Good Practice of the International Network for Quality Assurance Agencies in Higher Education (INQAAHE)
- The Guidelines for Quality Assurance, from the European Association for Quality Assurance in Higher Education (ENQA).
- The common core standards for quality review, endorsed by the Arab Network for Quality Assurance in Higher Education (ANQAHE).

Institutions with Institutional Licensure and Program Accreditation awarded by the CAA are also expected to seek program accreditation from international professional associations, where applicable.

Institutions may also seek affiliations with overseas institutions. The number of 'branch campuses' established in the UAE and 'joint programs' with foreign institutions has grown in recent years. In the interests of the international alignment of standards and to increase efficiency, the CAA is increasingly working with other accrediting agencies and professional associations to conduct joint/concurrent reviews.

THE REVIEW CYCLE

The *Standards*, Stipulations and associated criteria are used as the basis for the processes of Institutional Licensure and Program Accreditation. Following a successful review for IIL, an HEI is expected to complete IPA of one or more of its planned programs and enrol the first cohort of students within three full academic years from the notice of IIL. Programs which receive IPA must be inaugurated within two academic years of gaining Initial Accreditation. Applications for RIL and RPA must be submitted at least nine months prior to expiration, following the requirements of the related *Procedural Manual*. Institutions who obtain IIL, but who do not enrol the first cohort of any program before the expiry of the initial licence, are required to start the complete process of IIL and IPA as if for the first time.

Special visits by the Commission may be conducted to licensed institutions. These visits may focus on specific areas of institutional activity, or concerns regarding non-compliance in areas identified in previous reviews, or may be a result of feedback from

stakeholders across higher education. Where appropriate, notice of dates and preparatory documentation requirements will be given to institutions.

A review by the CAA, as related to Institutional License or Program Accreditation, may result in one of the following decisions:

Approved: Initial Institutional Licensure is granted for three years, and subsequent Renewal of Institutional Licensure for up to seven years. This status authorizes an institution to offer accredited programs in the UAE.

Initial Program Accreditation provides approval for a period up to the graduation of the first student cohort. During the period of approval, the institution may receive unscheduled visits from the Commission to ensure that it continues to meet the requirements of the *Standards*. Failure to do so may result in loss of Institutional Licensure or Program Accreditation, as determined by the Minister (see *Supplementary Guidance to the Standards*).

Deferred: The decision on Institutional Licensure or Program Accreditation is deferred until the institution rectifies a problem, or provides additional information. If the institution fails to satisfy the Commission's requirements within six months following notification, the institution or program will be placed on probation, or denied Institutional Licensure or Program Accreditation.

Probation: If an institution or an individual program is placed on probation, the institution must correct any deficiencies noted to the satisfaction of the Commission within a specified period of time (see *Supplementary Guidance to the Standards*). At the end of the probationary period, the Commission makes a recommendation to the Minister, which may result in the approval of, or the denial or revocation of, Institutional Licensure or Program Accreditation. For the duration of the probationary period, the institution will not be permitted to admit students, either to the institution as a whole or to specified programs.

Denied: An existing institution that is denied Institutional Licensure or Program Accreditation will have its license revoked, or its program terminated. Denial of Program Accreditation prevents any new students from being admitted, and existing students will follow the institution's teach-out plan. If its Institutional Licensure is denied, the HEI must stop admitting students to any of its programs and stop offering its programs within a period specified by the CAA. The HEI must inform its students that its licensure has been denied. The institution must support its students in gaining admission to another recognized HEI. Funds held as a financial guarantee will be used to assist students in completing their educational programs and to meet other institutional obligations.

A decision to approve Institutional Licensure or Program Accreditation will result in the addition of the institution or the program to the CAA website approved listing. Denied proposals and imposition of probation also are listed on the website.

Institutions may appeal decisions made by the Commission based on defined grounds. Specific sanctions related to non-compliance with the criteria of the *Standards,* when

identified through interim CAA visits, are appended to these *Standards* (see *Supplementary Guidance to the Standards*).

PUBLIC INFORMATION

With the introduction of a risk-based approach to institutional licensure by the MoE, the risk level of institutions is identified according to the threshold risk level as determined by the CAA. The risk levels establish the ongoing review arrangements for HEIs on a schedule of 3-, 5-, or 7-year visit cycles. Successful applications for Institutional Licensure or Program Accreditation will be shown on the CAA website. One statement from each section of the Risk Evaluation Part B will be included on the CAA website to provide a public overview of the findings of the review:

1. **Strategic**
   (a)   The institution's framework for managing academic standards and quality assurance successfully meets the *Standards.*
   (b)   The institution's framework for managing academic standards and quality assurance meets the minimum baseline requirements of the *Standards.*
   (c)   The institution's framework for managing academic standards and quality assurance requires improvement to meet the *Standards.*

2. **Operational**
   (a)   The quality of the learning environment successfully meets the *Standards.*
   (b) The quality of the learning environment meets the minimum baseline requirements of the *Standards.*
   (c)   The quality of the learning environment requires improvement to meet the *Standards.*

3. **Legal and Financial**
   (a)   The legal and financial management of the institution successfully meets the *Standards.*
   (b)   The legal and financial management of the institution meets the minimum baseline requirements of the *Standards.*
   (c)   The legal and financial management of the institution requires improvement to meet the *Standards.*

4. **Academic**
   (a)   The quality of teaching and learning successfully meets the *Standards.*
   (b)   The quality of teaching and learning meets the minimum baseline requirements of the *Standards.*
   (c)   The quality of teaching and learning requires improvement to meet the *Standards.*

5. **International**
   (a)   International recognition is fully established.
   (b)   International recognition is established.
   (c)   International recognition requires improvement.

Standards for Institutional Licensure and Program Accreditation

Standards for Institutional Licensure and Program Accreditation

Standard 1: Governance and Management

i. The institution has a distinct and clearly articulated mission that is appropriate to an institution of higher education, focused upon its identity, its educational, research, and community service, and the students and communities it wishes to serve. The mission serves to distinguish the institution from others and aids in planning and resource allocation.

ii. The institution has an appropriate organization structure and a system of governance with a sufficient number of appropriately qualified faculty, administrative staff, and technical staff to meet all requirements of its programs, services, and activities. The governance system facilitates the accomplishment of its mission, furthers institutional effectiveness, and clearly distinguishes the authority, roles, and responsibilities of its governing body, administration, faculty, and staff.

iii. The institution develops and publishes clear statements of policies and procedures governing its operations.

iv. The institution has a strategic planning process which periodically reviews and updates both short-term operational and long-term strategic plans; these plans are mission-driven; include goals, objectives, performance indicators and targets; and are linked to the institutional budget.

Standard 2: Quality Assurance

i. As driven by its vision and mission, the institution demonstrates its commitment to maintenance of academic standards, quality assurance and continuous enhancement by systematically and regularly monitoring, reviewing and evaluating the effectiveness of all aspects of its operations and educational programs. It makes scrupulous and effective use of independent academic and professional advice as it evaluates its programs and courses and its academic, student, and administrative services based on evidence. It benchmarks its performance against the best equivalent practices of other local and international institutions.

ii. The institution uses the results of evaluations in planning, budgeting, establishing its priorities, and improving educational programs and services. It demonstrates how evidence-based planning has led to improvements in programs and services, to new programs and services, and to more effective and sustainable use of resources.

Standard 3: Educational Programs

i   The educational programs offered by the institution are appropriate to its mission. International educational norms are reflected in program design and composition, in the delivery of instruction, and in the assessment of student achievement.

ii   Program learning outcomes and the volume of study are appropriate to the level of qualifications awarded and are consistent with the UAE National Qualifications Framework (QF*Emirates*). There is alignment of course/module learning outcomes and their assessment to the program learning outcomes, to demonstrate that achievement of program learning outcomes can be achieved and confirmed.

iii   The institution demonstrates that it has sufficient number of appropriately qualified faculty, administrative staff, and technical staff to meet all requirements of its educational programs and courses, in order for them to be delivered as planned and in accordance with the schedule included in the approved syllabi. Research, scholarship and/or professional practice is incorporated into teaching activity.

iv   The institution operates equitable, valid, and reliable processes of assessment which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes specified for the relevant program or course/module.

v   The institution monitors and periodically reviews all programs and courses/modules at regular intervals, evaluates them in a variety of ways in accordance with its policies and procedures, and uses its evaluations to develop and enhance its provision.

vi   The institution involves relevant employers in developing and evaluating the curriculum, through formation of Advisory Groups and/or other modes of engagement and ongoing dialogue.

vii   The institution ensures that all undergraduate students (those studying for Bachelor's- and Diploma/Associate Degree-level qualifications) complete a general education requirement designed to add breadth to students' academic experience.

viii   Institutions offering programs in certain professional fields such as medicine and other health-related disciplines, education, engineering, and media/communications, or in other employment-related areas, provide opportunities for learning through workplace experience, such as internships or practicums.

ix   Institutions offering graduate programs provide evidence of their capability to deliver rigorous graduate-level studies, including research and scholarly activities appropriate to the field.

x All programs normally develop appropriate innovative and entrepreneurial capacity. Sustainability must be demonstrated as part of the student learning experience.

xi The quality of learning opportunities delivered through flexible and distributed arrangements, including e-learning, is managed effectively.

xii An HEI that wishes to make changes to any of its educational programs that significantly modify a program's key characteristics such as its goals, learning outcomes, basic structure, or mode of delivery, must seek approval from the CAA.

xiii Adequate physical educational resources, including both general classrooms and specialist teaching facilities such as laboratories, clinics, and studios, are available to effectively support each academic program.

Standard 4: Research and Scholarly Activities

i. In keeping with its mission, the institution supports research and scholarly activities directed towards the creation, integration, application, and transmission of knowledge, which must be reflected in their programs of study.

ii. The institution has a strategy for research and/or scholarship, and its physical, fiscal, and human resources, its organization, services, policies, and programs all reflect its commitment to research, scholarship, sustainability, innovation and creative activity.

Standard 5: Faculty and Professional Staff

i The institution demonstrates that it has appropriately qualified faculty, administrative staff, and technical staff, of a sufficient number to meet all requirements of its programs, services, and activities, and to achieve its mission. All faculty members and professional staff hold appropriate credentials; their preparation and qualifications are suited to the level of their instructional assignments or areas of activity.

ii The institution supports professional standards for teaching and support of learning, including appropriate professional development and fair workload policies.

iii The institution has orderly, transparent policies and processes for recruiting, developing, evaluating, promoting, and retaining faculty and professional staff, who exemplify diverse educational and cultural backgrounds.

Standard 6: Students

i The institution defines the characteristics of the students it seeks to serve, consistent with its mission, and provides an environment that contributes to their academic, cultural, social, moral, intellectual, and physical development.

ii   The institution's recruitment, selection, and admissions policies and procedures are consistent with its mission and the goals of its programs. They are transparent, reliable, valid, inclusive and underpinned by appropriate organisational structures and processes. They support the selection of students who are able to complete and benefit from their programs of study. They are clearly defined, published in relevant and trustworthy documents, and applied to all applicants consistently.

iii   The institution develops, publishes, and consistently follows clear policies for the admission of transfer students, for transfer of course credits from another institution or from one academic program to another within the institution, and for the award of advanced standing to students entering the institution with credit, and for the recognition of prior non-classroom learning, as appropriate.

iv   Personnel with appropriate preparation and experience provide effective and accessible academic and pastoral support services, social and recreational activities, student associations, and clubs for students.

v   The institution has fair and accessible procedures for handling academic appeals and student complaints about the quality of learning opportunities. It implements these procedures consistently and in timely fashion.

Standard 7: Health, Safety and Environment

i.   The institution maintains health and welfare services for both physical and mental health that are accessible to students, faculty and staff, in accordance with the requirements of the health authority in the Emirate in which it is located.

ii.   Health, welfare and safety concerns are addressed during preliminary planning for new facilities and programs, and are regularly monitored for compliance with the institution's health and safety policies and procedures, and local and national laws and regulations. These concerns include due consideration of minimization of risk and maintenance of safety and well-being in the selection and design of facilities, installation of training facilities, purchase of health and safety equipment, and other appropriate protective measures.

iii.   The physical facilities are designed and maintained to serve the needs of the institution in relation to its mission. The institution's physical facilities are fit for purpose for all users, and include a sufficient number of classrooms and other specialized physical resources to support its academic programs and research activities.

iv.   Principles of sound environmental management and sustainability underpin all policies and procedures related to health and safety.

Standard 8: Learning Resource Centre

i. The institution provides information resources and services for students and faculty that adequately support teaching, learning, and research, in ways consistent with the institution's mission and goals.

ii. Information resources and services are sufficient in quality, depth, diversity, accessibility, and currency for the institution's curricular offerings, and they meet the needs of the faculty and professional staff, students, and support personnel.

Standard 9: Fiscal Resources, Financial Management and Budgeting

i. The institution provides reliable evidence that it has the financial resources to ensure present and future financial stability, and to ensure that all enrolled students are able to complete their programs.

ii. Essential policies and procedures for budgetary planning and control, accounting, risk management, and external audits are in place.

iii. The institution has annual budgeting processes, and systems for projecting short-, medium-, and long-term budgets. These budgeting processes include provisions for program-specific annual and long-term projections.

iv. The institution demonstrates that it has sufficient insurance and indemnity cover in respect of its activities and operations.

Standard 10: Legal Compliance and Public Disclosure

i. The institution complies with all relevant legislation at federal and Emirate levels.

ii. The institution adheres to the highest ethical standards in its teaching, professional development and service; in its treatment of its students, faculty and professional staff; and in its external interactions and relationships.

iii. Both print and electronic publications for students, prospective students, and the public provide complete, clear, consistent, accurate and trustworthy information about the institution.

Standard 11: Community Engagement

i. The institution develops collaborative external partnerships leading to productive relationships that bring mutually beneficial outcomes for the community and to all the institution's faculty, staff and students.

ii. The institution seeks to identify and respond to needs within the community and engage representatives of local businesses, schools, professional bodies, government entities, alumni, ethnic communities and citizens.

Stipulations

Stipulations

Stipulation 1: Governance and Management

1.1   Vision and Mission

The institution:

1.1.1   has a vision statement that articulates the long-term aspirations of the institution;

1.1.2   has a mission statement that:

   a. describes the institution accurately, including its distinguishing characteristics, the students and other stakeholders it seeks to serve, and its relationship to the wider community;
   b. is approved by the governing body;
   c. is periodically re-evaluated to assess its currency and its usefulness in providing overall institutional direction;
   d. provides overall direction to institutional planning;
   e. is widely disseminated to the institution's constituencies;

1.1.3   involves relevant internal and external stakeholders in the review of the mission statement;

1.1.4   has institutional goals and institutional objectives; the objectives are derived from the goals and are measurable;

1.1.5   includes its approved vision and mission statements, institutional goals and institutional objectives in appropriate publications and on the institution's website.

1.2   Organization

1.2.1   The organization of the institution employs a sufficient number of appropriately qualified faculty, administrative staff, and technical staff to meet all requirements of its programs, services, and activities which support the achievement of its mission, and facilitates its effective and efficient operation in line with its institutional vision.

1.2.2   The organization of the institution is expressed in an organization chart that clearly delineates current lines of authority and institutional relationships, and is published in appropriate documents and on the institution's website.

1.2.3   Significant changes to the organization of the institution are referred to the Commission for approval (see *Annex 1: Substantive Change at Institutional Level*).

1.3   Governance

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.*

1.4   Policies and Procedures

1.4.1   The institution maintains a *Policies and Procedures Manual* that contains all the policies and procedures of the institution and meets specific Commission requirements, as included in *Annex 3: Policies and Procedures Manual.*

1.4.2   The institution has clearly delegated responsibilities for policy development, document control, review, and dissemination.

1.4.3   The *Policies and Procedures Manual* includes a record of dates of modifications to policies and procedures. Such modifications are communicated to relevant stakeholders.

1.4.4   The institution maintains the following key documents: Institutional *Catalog* (discussed in *Annex 4*), *Faculty Manual* (*Annex 5*), *Staff Manual* (*Annex 6*), and *Student Handbook* (*Annex 7*).

1.4.5   The institution provides all stakeholders with information on how to access the *Policies and Procedures Manual*, either online or in hard copy form.

1.5   Institutional Planning

The institution:

1.5.1   develops, periodically reviews, and updates both long-term strategic and short-term operational plans, which are mission-driven; include goals, objectives, key performance indicators, time frames for action, and targets; are linked to the institutional budget; and are regularly reviewed by the governing body;

1.5.2   includes in its planning processes the principles of innovation and sustainability;

1.5.3   documents its planning policies and processes to include, among others, specific strategic plans and operational plans for research, community engagement, and sustainability;

1.5.4   ensures that the results of institutional research and risk management are used to guide planning, budgeting and resource allocation;

1.5.5   involves stakeholders, advisory panels, and international practitioners in its planning, where appropriate;

1.5.6 includes in its strategic planning a plan for institutional and program international accreditation/reaccreditation, and affiliations with international institutions, as appropriate.

1.6 Risk Management

The institution:

1.6.1 has a detailed risk management plan which defines various sources of risk, such as natural disasters, failure of information technology infrastructure, loss of key personnel, financial risks arising from insufficient enrolment, loss of access to learning resources, or cessation or insufficiency of access to clinical training sites;

1.6.2 assesses the severity of specific risks, and identifies strategies to monitor, avoid, reduce, or ameliorate them;

1.6.3 has clearly delegated responsibilities for risk management;

1.6.4 has appropriate levels of insurance coverage for liability and other potential losses, or designated financial resources to provide adequate replacement protection for its physical facilities and equipment and to cover the potential liability of personnel;

1.6.5 ensures that its risk management plan is approved and monitored by the governing body on a regular basis.

1.7 Institutional Management and Administration

1.7.1 The chief executive officer has responsibility for the day-to-day operation of the institution.

1.7.2 Neither owners nor investors in the institution, nor relatives or members of their immediate families, hold administrative positions in the institution (e.g., President, Vice President, Provost, Dean) or are involved in its day-to-day operations.

1.7.3 Neither owners nor investors in the institution, nor relatives or members of their immediate families, maintain offices within the premises of the institution.

1.7.4 The chief executive officer is qualified by an appropriate level of academic preparation and administrative experience to direct the institution.

1.7.5 The chief academic officer is qualified by an appropriate level of academic preparation and experience to direct the academic affairs of the institution.

1.7.6 Administrative officers possess credentials, experience, and demonstrated competence appropriate to their areas of responsibility.

1.7.7 Academic units are effectively managed by appropriately qualified professionals.

1.7.8   Academic administrators hold appropriate credentials and are qualified for appointments at faculty rank.

1.7.9   Faculty members have sufficient opportunity to participate in decision-making on matters related to program development, curriculum, assessment, faculty recruitment, academic integrity, and quality enhancement.

1.7.10 Students have the opportunity to participate in the decision-making processes within the institution; this should include formal representation on appropriate committees related to both academic and non-academic matters.

1.7.11 All administrators and academic officers, including the chief executive officer, are periodically evaluated and are provided feedback on those evaluations.

1.7.12 Institutions maintain a record of all significant changes in the administration and operation of the institution, its services and programs, including minutes of committee meetings, memorandums and other documents that include notifications of modifications to policies and procedures.

1.7.13 Institutions record progress in meeting the goals of their short- and long-term plans, document modifications to programs, and prepare summaries of deliberations related to curricular changes.

1.7.14 All institutional personnel demonstrate the highest level of integrity, fairness and ethical conduct in all activities and operations.

1.8   Multiple Campus Institutions within the UAE

1.8.1   The governance structure, faculty and other personnel, learning resources, facilities, services, and educational programs of multiple-campus institutions ensure that students attending any campus receive an equivalent educational experience and can achieve the same learning outcomes.

1.8.2   Institutions wishing to operate at an additional location in the UAE receive approval from the Commission before commencing operations (see *Annex 1: Substantive Change at Institutional Level*).

1.8.3   An institution with multiple campuses has a manual, which may be maintained in electronic or hard copy form, for coordination of activities across its campuses.

1.8.4   The institution demonstrates that it has effective academic management for its branch campus or campuses.

1.8.5   The institution develops and implements policies and procedures to ensure effective and regular meetings between faculty members and administrators based at different campuses.

1.9   Campuses of UAE Institutions in Other Countries

1.9.1   A licensed institution based in the UAE that establishes a branch campus in a foreign country obtains approval from the Commission prior to establishing the campus.

1.9.2   The branch campus complies with the requirements of these *Standards* and is expected to comply with requirements of relevant authorities in the host country.

1.10   Branch Campuses of Foreign Institutions

A branch campus established in the UAE by an institution of higher education based outside the UAE is required to:

1.10.1 comply with applicable laws and regulations of the UAE;

1.10.2 comply with the requirements for Institutional Licensure and Program Accreditation of the Commission;

1.10.3 demonstrate that the parent institution has recognized accreditation in its country of origin;

1.10.4 provide evidence that any accredited programs at the UAE branch campus are also delivered in the country of origin;

1.10.5 provide an educational experience that ensures the achievement of learning outcomes comparable to those of the parent institution;

1.10.6 demonstrate that the governing body of the parent institution has approved the establishment of the branch campus;

1.10.7 establish a local advisory board to include representatives of the UAE community, who will advise the senior administrators of the branch campus and the senior administrators of the parent institution;

1.10.8 have local administrators who are accountable directly to the central administration of the parent institution and, ultimately, the governing body of the parent institution;

1.10.9 operate under the same name as the parent institution, with additional identification of the local branch;

1.10.10 publish a student handbook, faculty and staff manuals, and other policies and procedures, appropriately tailored for the branch campus and its location;

1.10.11 provide the Commission with a financial guarantee for the operation of the institution, including a plan for and support of a 'teach-out' arrangement should the branch campus be forced to close, or a program be discontinued;

1.10.12 provide the Commission access to the accreditation (institutional and programmatic) documents of the parent institution, as applicable;

1.10.13 work with the Commission as necessary in developing joint visits and partnerships with the accrediting bodies of the parent institution.

1.10.14 ensure that where academic credit is gained by UAE-based students through study at a non-UAE licensed HEI, it cooperates and facilitates visits by the Commission to assure the quality of the academic provision at the non-UAE licensed institution.

Stipulation 2: Quality Assurance

2.1   Quality Assurance System

The institution:

2.1.1   has a quality assurance manual that clearly sets out all quality assurance policies, procedures and activities and shows how they are integrated into a single system to continually appraise and improve the institution as a whole and its programs, services, and operations, including any joint programs. Normal contents of such a manual are set out in *Annex 8: Quality Assurance Manual*;

2.1.2   implements a system for maintaining full control of all aspects of its educational program(s), ensuring that it has primary responsibility for awarding any degree, and for the integrity, rigor, outcome, and management of its educational programs;

2.1.3   has a mechanism whereby the quality assurance unit regularly engages all relevant stakeholders in the evaluation process;

2.1.4   has clearly defined policies and procedures for the scrupulous, systematic and effective use of demonstrably independent academic and professional advisers;

2.1.5   compiles an annual summary of institutional research data, e.g. a Fact Book, to be used for monitoring performance, reporting, and institutional planning, and for reporting to the CAA;

2.1.6   uses the results of internal evaluations to inform the process of producing Self-Studies required by the CAA for Institutional Licensure or Program Accreditation, as per the requirements of the *Procedural Manuals;*

2.1.7   produces an annual evaluation report on the effectiveness of its quality assurance system, and the performance and effectiveness of its quality assurance unit.

2.2   Continuous Quality Enhancement

2.2.1   The institution has a well-designed quality assurance system that uses institutional research data to monitor, review, evaluate and continuously improve the quality of its programs and its academic, student, and administrative support units. The institution documents, in an annual effectiveness report or equivalent, improvements resulting from these regular evaluations and shows how these improvements are used in institutional planning and budgeting.

2.2.2   The institution benchmarks its quality and performance against best local and international practices, wherever possible.

2.2.3   Improvements to programs and support systems are routinely monitored and evaluated for their effectiveness.

**2.3	Quality Assurance Unit**

The institution has:

2.3.1	a separate quality assurance unit, that is responsible for implementing the institution's internal quality assurance system. The quality assurance unit is directed by an appropriately qualified and experienced individual reporting directly to the institution's senior management;

2.3.2	a director/manager of the quality assurance unit whose time and effort are directed principally to the work of the unit, with other academic responsibilities (e.g., teaching, advising, thesis supervision) representing a small minority of his/her overall workload;

2.3.3	adequate human and other resources to support its organizational research and quality assurance systems, and professional development opportunities for the staff of the quality assurance unit.

Stipulation 3: Educational Programs

3.1 Program Planning and Development

The institution:

3.1.1   thoroughly assesses the need for any new program and includes a market analysis, an analysis of competing programs, projections of resource requirements, a determination of student interest and national need, and other indicators in the needs assessment as indicated in *Annex 9: Feasibility Study, Financial Analysis, and Timed Action Plan for Program Development*;

3.1.2   demonstrates that the proposed program(s) is/are consistent with its strategic plan;

3.1.3   includes in its program plans enrolment projections by program, an identification of required facilities, human and non-human resource requirements, and both short- and long-term budgets;

3.1.4   analyzes enrolment trends and resource demands in its decisions to terminate programs;

3.1.5   seeks input and advice related to the proposed program and its learning outcomes from potential employers and relevant advisory committees;

3.1.6   involves faculty in the development of new programs including curricula;

3.1.7   includes the results of benchmarking in the development of programs;

3.1.8   ensures that all programs and curricula are approved by the governing body.

3.2 Budgeting for Programs

3.2.1   The annual budget process involves input from unit and department heads and faculty.

3.2.2   Program budgets, both short- and long-term, are in place and based on enrolment projections, faculty hiring plans and an assessment of the human and physical resources needed to support each program.

3.3 Program Structure and Completion Requirements

3.3.1   The institution develops a program specification for each program that complies with the requirements of *Annex 10: Program Specifications*.

3.3.2   Each program has well-articulated and measurable outcomes that are consistent with the institution's mission.

3.3.3 If applicable, each concentration within any program has clearly articulated and measurable outcomes.

3.3.4 Each program requires for completion a number of credit hours, or equivalent (see *Annex 23: Glossary of Terms* for definition of credit systems) consistent with the best international practices for similarly-named programs.

3.3.5 Program and course learning outcomes should contain elements that promote competencies in innovation and entrepreneurship, and imbue the principles of sustainability. These outcomes may be incorporated into a single course, or else embedded into different courses within a program's structure.

3.3.6 All program outcomes are accurately described in appropriate publications including the institution's *Catalog*.

3.3.7 Course learning outcomes are specific, measurable and aligned with the program learning outcomes.

3.3.8 The curriculum of each program comprises a progression and mix of courses, modules or units (such as general education, introductory, advanced, and elective courses with pre-requisites) that:

a. are internationally recognized in terms of content, coverage, level, and practice;
b. conform to the requirements of any national guidelines for curriculum issued in the UAE for the relevant discipline or specialization;
c. are consistent with the program learning outcomes; and
d. comprise a defined amount and quality of work of sufficient rigor.

3.3.9 The institution does not award credit for duplicated courses, or for courses offered by higher education institutions in the UAE that are not recorded in the National Register of Licensed HEIs.

3.3.10 The institution has a clearly stated policy regarding the use of independent study (defined as a learning mode in which a student is individually supervised by a faculty member in order undertake a learning opportunity which is otherwise unavailable; see *Annex 23: Glossary of Terms),* or other alternative modes of delivery of a course, for the purpose of facilitating students' completion of a program's degree requirements. Independent study is only allowed for undergraduate studies, and only in rare cases. Independent study normally will only be permitted for one course in a student's program, except with prior approval from the CAA.

3.3.11 Joint degree programs, delivered in collaboration with an external institution, allow no more than fifty percent (50%) of the program curriculum to be delivered by the partner institution. All elements of the joint degree program are required to be delivered in accordance with *Annex 11: Joint Degree Programs.*

3.3.12 The institution applies international best practice with respect to the number of hours of monitored work in a laboratory, studio, or experiential placement that is deemed equivalent to one credit hour.

3.3.13 Where a program utilizes e-learning as an element in program delivery, the institution demonstrates that the learning experience is equivalent to the credit value attributed to traditional modes of delivery.

3.3.14 An additional undergraduate degree from the same institution may be awarded only when a student meets the admission requirements for the second degree and upon completion of the requirements of the additional degree, which must include at least 30 credit hours that are distinctive to that particular program/major and not taken to meet requirements of the first degree.

3.3.15 An additional Master's degree from the same institution may be awarded only when a student meets the admission requirements for the second degree and upon completion of the requirements of the additional degree, which must include at least 15 credit hours of courses (excluding thesis credits) that are distinctive and not taken to meet requirements of the first degree.

3.3.16 Master's degrees offered by any institution must include no less than 15 credit hours that are distinctive to that particular Master's program.

3.4 National Qualifications Framework (QF*Emirates*)

3.4.1 Qualifications are titled in terms that comply with the conventions articulated in the QF*Emirates*.

3.4.2 The institution demonstrates how program learning outcomes are aligned with the appropriate Level Descriptors of the QF*Emirates* (see https://www.nqa.gov.ae/en).

3.4.3 Total program credit hour requirements are consistent with the requirements of the QF*Emirates.*

3.5 Graduate Programs

3.5.1 A graduate program emphasizes the development of competencies in research and scholarship appropriate to the field and the level of the program. All graduate programs must have a significant research component that meets the applicable requirements of Levels 8-10 of the QF*Emirates* (https://www.nqa.gov.ae/en).

3.5.2 The institution has a separate *Graduate Catalog* or a discrete section of the main *Catalog*, that includes all of the policies and procedures related to graduate programs as defined in *Annex 4: Catalog*.

3.5.3 The faculty involved in development and delivery of any graduate program have a terminal degree and are well qualified in terms of an extensive record of research, including recent refereed publications or equivalent output appropriate to the discipline, and experience in the field including project and/or dissertation supervision.

3.5.4 The institution offering graduate programs provides evidence that it has well-developed policies and procedures governing research, thesis supervision and examinations, and provides adequate long-term funding for both faculty and student research (see *Standard 4: Research and Scholarly Activities*).

3.5.5   Institutions offering graduate programs have a demonstrable record of sustained academic excellence and strong support for research and scholarship.

3.5.6   The institution demonstrates that it enforces a policy of limiting class sizes for graduate courses to ensure effective learning at a graduate level.

3.5.7   The institution demonstrates that it provides appropriate classrooms, laboratories, IT hardware and software, clinical resources (where applicable) and e-learning support systems to serve the demands of graduate level instruction and learning.

3.5.8   The institution has a comprehensive collection of bibliographic resources to support the research of students and faculty in all graduate programs, and in all specializations within those programs.

3.5.9   The institution demonstrates that it limits principal supervisor thesis supervision to appropriately qualified and experienced, full-time faculty of the awarding institution, and enforces a policy of limiting the number of thesis students being supervised by faculty members at any one point in time. Thesis supervision is required to be included in the institutional faculty workload model.

3.5.10 The institution requires, for a Postgraduate Diploma, at least one year of study and at least 24 credit hours of study beyond the Bachelor's level.

3.5.11 The institution requires, for a Master's degree program, the equivalent of at least one year of study and at least 30 credit hours of study beyond the Bachelor's level, training in research skills and methodology, and preferably a research thesis unless otherwise agreed with the CAA.

3.5.12 The institution requires, for a Doctoral degree program, the equivalent of at least three years of study, with at least 54 credit hours or equivalent of study, which includes a minimum of 24 credits or equivalent of advanced courses that are distinctly more challenging than Master's-level courses in the same discipline; training in research skills and methodology; and a research thesis/dissertation appropriate to the field. The program must require the passing of a comprehensive exam to be taken at the end of formal coursework, which must include a comprehensive assessment of coursework taken, and a defence of the doctoral research proposal and the completed thesis. The thesis/dissertation must be of a publishable standard and represent an original contribution to knowledge in the relevant field. A thesis defence must be conducted by at least two doctorally-qualified experts in the field, one of whom must be independent of the HEI.

3.6   General Education

3.6.1   The General Education Program for a Bachelor's degree includes the equivalent of at least 21 credit hours of course work throughout the curriculum, that provides a broad-based education and must include at least one course in each of the following:

   a.   English language;

b. Arabic language;
c. Islamic studies;
d. UAE studies.

3.6.2   A course in innovation, entrepreneurship and sustainability should be incorporated into the General Education program, unless it is addressed in other courses across the institution's programs.

3.6.3   For a Diploma/Associate degree or Higher Diploma, the General Education program must include at least 15 credit hours of course work including the four subjects specified in clause 3.6.1.

3.6.4   The institution clearly defines the learning outcomes of the General Education program, and regularly evaluates students' achievement of those outcomes.

3.7   Remedial Courses

The institution:

3.7.1   may offer non-credit remedial courses to undergraduate or graduate students who lack a sufficient background in one or more educational areas;

3.7.2   ensures that its remedial courses have clear, measurable learning outcomes that students must achieve;

3.7.3   permits enrolment in non-credit remedial courses only for a specified period of time, after which a successful student may be fully admitted to a credit-bearing program, and an unsuccessful student who has not completed the courses will leave the institution;

3.7.4   allows graduate students to register for credit-bearing courses in a graduate program only after they have successfully completed non-credit remedial courses, if required.

3.8   Internship or Practicum

As appropriate, and consistent with best international practice in the award of degrees in the relevant fields, institutions are expected to provide opportunities for workplace experience in fields apart than those in which such experience is a requirement. Any practicum or internship adheres to the requirements listed in *Annex 12: Guidelines for Good Practice in Internships or Practicums*.

3.9   Teaching Methods

The institution:

3.9.1   employs teaching methods that are supported by appropriate technology, and teaching and learning materials and tools, and are appropriate to the subject being taught and the mode of delivery;

3.9.2   has policies and procedures for regularly providing guidance on monitoring and evaluating faculty teaching methods;

3.9.3   ensures that faculty are regularly, both formally and informally, provided information about best practices in teaching and learning;

3.9.4   actively involves students in their own learning;

3.9.5   ensures an appropriate balance between theoretical foundation and practical applications;

3.9.6   integrates key employability skills such as innovation, entrepreneurship, teamwork, and leadership into the content of courses, as appropriate;

3.9.7   integrates principles and practice related to issues of sustainability into the content of theoretical and practical classes, as appropriate;

3.9.8   ensures that class sizes are consistent with international best practice, and maintains a student/faculty ratio appropriate for the pedagogy applied and the level of the course, whether undergraduate or graduate;

3.9.9   provides learning support for students with special needs (people of determination);

3.9.10 ensures that course syllabi include information necessary for students to clearly understand what will be included in the course on a weekly basis and what is required of them (see *Annex 13: Course Syllabi* for a list of the elements required to be in all course syllabi).

3.10   Student Assessment

The institution:

3.10.1 uses a variety of appropriate assessment tools to ensure that students acquire the specified knowledge, skills and competencies and meet the specified learning outcomes of the course, unit, or module;

3.10.2 ensures that assessment tools are valid and aligned with course learning outcomes and the level of the course;

3.10.3 develops and implements rubrics for all assessment tools;

3.10.4 implements methods for the moderation and assessment of student work in which more than one individual independently marks or moderates an assessment or evaluates student performance;

3.10.5 includes methods for authenticating students' work;

3.10.6 provides clear, written guidance, for faculty, staff and students, on assessment methodologies, tools and grading, in order to ensure comparability of academic standards and consistency with the approaches to teaching, learning and assessment;

3.10.7 ensures that assessment methodologies are appropriate for the nature and level of the program and course, and their content and mode of delivery, in order to demonstrate achievement of the learning outcomes.

3.11 Course Delivery

The institution ensures that:

3.11.1 each course includes sufficient time for preparation, reflection, analysis and the achievement of learning outcomes;

3.11.2 courses are delivered over a period of time consistent with international norms, such as the generally accepted practice of delivering courses over a semester of 15 weeks of instruction (excluding assessment) or its equivalent;

3.11.3 it seeks approval from the CAA prior to enrolling students for any exceptional form of course delivery in concentrated periods of time, such as condensed terms. The program or courses comply with the requirements of *Annex 14: Intensive Courses and Block Delivery*;

3.11.4 courses and programs offered through distance learning modes apply international best practices used in e-learning, and comply with the requirements of *Annex 15: Courses Taught Through e-Learning*;

3.11.5 all courses offered as part of a joint degree program follow the delivery requirements articulated in *Annex 11: Joint Degree Programs*.

3.12 Course and Program Evaluation

3.12.1 The institution involves faculty, both formally and informally, in the regular evaluation of the effectiveness and the currency of content of all programs and courses. In the case of joint degree programs, faculty of the partner institution should also be involved in program development and evaluation.

3.12.2 Members of external advisory committees or industry representatives for each field or program, as appropriate, are involved in the periodic review of curricula.

3.12.3 Students are provided both formal and informal opportunities to evaluate programs, courses and the quality of instruction, and teaching and learning methodologies.

3.12.4 Institutions maintain updated files for each course of instruction that include all of the elements identified in *Annex 16: Course Files,* and that contain sufficient information on each of the last two presentations of the course so that faculty or other persons who evaluate program effectiveness can determine whether the course is meeting its learning outcomes, and whether changes to the course are appropriate.

3.12.5 There are clearly articulated policies and procedures for the evaluation of courses and programs, and for approving modifications and enhancements.

3.13   Program Effectiveness

The institution:

3.13.1 regularly evaluates all educational programs according to its quality assurance policies and procedures, with the results analysed to show that students meet the specified program learning outcomes. The institution demonstrates that such evidence is used for organizational planning;

3.13.2 uses both direct and indirect evaluative tools;

3.13.3 develops and implements indicators to reflect program effectiveness, such as feedback from program stakeholders, cohort analysis, attrition rates, completion rates, and employability of graduates;

3.13.4 demonstrates how it uses the results of its program effectiveness instruments to enhance the quality of programs;

3.13.5 surveys the employment of its graduates and maintains records of first destinations and longer-term employment, using the information to inform curriculum development;

3.13.6 uses the results of its reviews of program effectiveness in its Self-Studies for external reviews and accreditations.

3.14   Substantive Change for Programs

3.14.1 An institution required to do so under the terms of the *SPA* specification seeks approval from the CAA for changes to its educational programs that significantly modify a program's characteristics such as its goals, learning outcomes, basic structure or mode of delivery (see *Annex 17: Substantive Change at Program Level*).

3.14.2 Institutions must inform the CAA of changes that:

   a. substantially change the aims or learning outcomes of a program;
   b. establish instruction in a significantly different format (such as an intensive term) or method of delivery (such as e-learning);
   c. introduce or close one or more concentrations within a program;
   d. increase or decrease the number of actual or notional learning hours awarded for successful completion of a program or the length of the program.

3.14.3 An institution proposing a Substantive Change must give the CAA a report, at least six months before the date on which the change is to be implemented, including:

   a. a description of the proposed changes;
   b. the rationale for the proposed changes;

c. evidence of authorization by the governing body and other relevant parties, and a projection of any developments anticipated as a result of the change. The following information should be included:

- any substantial additional faculty or support staff and/or learning resources and facilities required;
- evidence that the institution has taken account of the requirements articulated in *Annex 15: Courses Taught Through e-Learning* if the proposed change involves offering e-learning programs or courses.

Stipulation 4: Research and Scholarly Activities

4.1 Strategy and Policies

4.1.1 The institution has a clearly articulated and detailed strategy for research, scholarly activity and innovation, in keeping with its mission, and developed with input from faculty and other relevant constituencies, which details its strategic direction, priorities, available resources, key performance indicators, target levels and timelines for implementation. It publicizes this strategy in appropriate documents.

4.1.2 The institution has:

a. policies that define its understanding of the nature and purpose of research, and a research strategy with KPIs and target levels that is approved, monitored and reviewed by the governing body;
b. policies that define its understanding of the nature and scope of scholarly activity, including professional development in relevant vocational domains, the maintenance of academic and professional currency, and the development of learning and teaching approaches appropriate to higher education;
c. policies and procedures relating to the institution's support for research, scholarly activity, creative activity and innovation, that are communicated clearly to faculty and staff;
d. policies that make explicit reference to the promotion of research that integrates and demonstrates principles of sustainability;
e. policies related to ethical considerations in research, including, as appropriate, the use of human and animal subjects;
f. a policy governing intellectual property rights conforming to UAE laws and regulations;
g. policies to encourage and recognize the involvement of students in research, as appropriate to the level of study.

4.2 Support for Research and Scholarly Activity

The institution supports research and scholarly activity by:

4.2.1 developing a detailed plan to ensure that faculty are engaged in research and/or scholarly activity;

4.2.2 budgeting a minimum of 5% of the total operational expenditure to support faculty research, innovation, creative and scholarly activities on an annual basis in undergraduate-level institutions, and budgeting a higher amount of funding in institutions offering graduate-level programs, and providing evidence that funds are used for that purpose;

4.2.3 establishing a clear set of procedures for securing research support;

4.2.4 ensuring that all faculty are regularly informed of research opportunities;

4.2.5 providing appropriate administrative support, equipment and facilities to support research for programs offered at an advanced level.

4.3 Collaborative Research and Scholarly Activity

As appropriate, the institution encourages collaborative relationships for research, scholarship, and creative activity with external entities.

4.4 Expectations for Research and Scholarly Activity

The institution defines its expectations for faculty research and scholarly activity, and embodies these in appointment criteria, faculty performance evaluations and criteria for promotion.

4.5 Research and Scholarly Activity Outputs

4.5.1 Research output from institutions is well documented, and includes a record of external grants and contracts awarded, the number and quality of peer reviewed international journal articles and conference papers published, and patents issued.

4.5.2 The results of faculty and postgraduate student research are applied to the development and revision of curricula, and are utilized in serving the community and in support of national goals.

4.5.3 The institution regularly evaluates the output of its research, scholarly activity, creative activity and innovation, in relation to the institution as a whole and in terms of program activity, and takes any necessary action to develop and enhance the quality of its research and scholarship.

Stipulation 5: Faculty and Professional Staff

5.1 Faculty Manual

The institution maintains a *Faculty Manual* and distributes it to all full-time and part-time/adjunct faculty members.

5.2 Professional Staff Manual

If policies and procedures governing professional staff are not included in the *Faculty Manual*, the institution maintains a professional *Staff Manual* and distributes it to all members of the professional staff.

5.3 Recruitment and Terms of Employment

The institution:

5.3.1   has effective polices and processes for advertising, recruiting, and appointing faculty and professional staff members, and maintains records of these processes;

5.3.2   has an assigned individual to coordinate and process matters relating to the appointments of faculty and staff; including residence visa and work permits, benefits, evaluation of non-faculty appointees, and maintenance of personnel files;

5.3.3   provides faculty and staff members with letters of appointment, contracts, and other documents that clearly describe the terms and conditions of employment;

5.3.4   defines the probationary period and the terms of the contract, including its renewal and termination;

5.3.5   demonstrates that it offers adequate salaries and benefits to attract and retain suitably qualified faculty of diverse cultural and educational backgrounds. Salaries and benefits are sensitive to market demands and are at a level that is at least comparable to those faculty employed elsewhere in the UAE in similar disciplines;

5.3.6   informs faculty of salary ranges, and the criteria for each level of appointment and for salary increases;

5.3.7   demonstrates that it offers adequate salaries and benefits so as to attract and retain quality non-faculty staff that can support the institution in its mission. It informs staff of salary ranges and criteria for salary increases;

5.3.8   has policies, procedures, and criteria for faculty and staff promotion which are implemented consistently and fairly;

5.3.9   has provisions for extending a contract after the probationary period, or offering a rolling contract, that provide a reasonable degree of security and foster loyalty to the institution and its students;

5.3.10 has policies in place covering nepotism, inappropriate employee relationships, and other policies appropriate under UAE labor and employment laws;

5.3.11 has a clear policy regarding the handling of legal issues relating to the employment of faculty and professional staff;

5.3.12 has a structured orientation system in place for newly appointed faculty and professional staff, which includes orientation to UAE national identity and local customs.

5.4 Faculty Qualifications

The institution demonstrates that:

5.4.1 the preparation and qualifications/credentials of all faculty members, both full-time and part-time, are appropriate to the field and the level of their assignments, and meet the minimum qualifications required for each level. Faculty members must hold degrees earned from internationally recognized HEIs;

5.4.2 it employs a sufficient number of faculty to ensure that the core program areas and all specialization courses are taught by faculty with qualifications in the field;

5.4.3 for branch campuses, there is an appropriate number of full-time resident faculty;

5.4.4 qualifications of all faculty are documented through official transcripts, certificates, and certificates of equivalency from the UAE MoE;

5.4.5 faculty files are maintained and include passport and visa information (for non-UAE nationals), credentials, and up-to-date *curriculum vitae* in a consistent organizational format;

5.4.6 faculty teaching undergraduate-related remedial courses have a minimum of a baccalaureate degree in a discipline related to the subject taught, and either teaching experience in that subject or graduate-level training in remedial or developmental education;

5.4.7 faculty teaching credit courses in Certificate, Diploma, or Associate Degree programs not offered in conjunction with a baccalaureate degree program have a minimum of a Master's degree with a major in the discipline taught, and one of the following:

  a. five years of teaching experience in the discipline;
  b. a combination of five years of experience in teaching and other employment related to the field;
  c. the equivalent of eighteen semester credits of graduate study in the field beyond the Master's degree;
  d. an internationally recognized professional credential (such as certification as a public accountant);

5.4.8   at least one faculty member teaching in a Certificate, Diploma, or Associate Degree program not offered in conjunction with a baccalaureate degree program holds a terminal degree in a relevant discipline;

5.4.9   faculty teaching general education courses included as part of a baccalaureate degree curriculum have a minimum of a Master's degree with a major in the discipline taught, and one of the following:

   a. five years of teaching experience in the discipline;
   b. a combination of five years of experience in teaching and other employment related to the field;
   c. the equivalent of eighteen semester credits of graduate study in the field beyond the Master's degree;
   d. an internationally recognized professional credential (such as certification as a public accountant);

5.4.10 faculty teaching courses in baccalaureate degree programs; in Certificate, Diploma or Associate Degree programs offered in conjunction with a baccalaureate degree; or in Higher Diploma programs requiring three years or more of study beyond secondary school have a terminal degree or equivalent in the teaching discipline, usually a doctorate or equivalent;

5.4.11 exceptions to the requirement for a terminal degree are limited to no more than 20% of all faculty teaching in any specific program; and are also limited to faculty members in applied fields who have a minimum of either:

   a. a Master's degree in the teaching field or a doctorate in a related field, and who also have extensive senior level experience in the applied field (such as corporate management or accounting); or
   b. experience in the applied field coupled with internationally recognized professional association certification (such as medical board certificate or Certified Public Accountant);

5.4.12 applications for exceptions to the requirement for a terminal degree are reported to the Commission as exceptions for approval prior to the start of the semester in which the faculty member will teach. Reports to the Commission must include the name of the faculty member for whom the exception is requested, the highest degree earned and the conferring institution, the area of specialization, the justification for the exception, and a listing of the courses assigned;

5.4.13 for adjunct clinical faculty, the institution adheres to the minimum qualifications specified in *Annex 18: Adjunct Clinical Faculty*;

5.4.14 faculty teaching online courses have an appropriate level of experience and training in the use of online instructional technology, as stated in an institutional policy approved by the Commission;

5.4.15 faculty members are competent in the language of instruction in the programs to which they are assigned;

5.4.16 there is diversity of cultural and educational backgrounds, and of gender, within its faculty, staff and administration.

5.5   Graduate Faculty

The institution:

5.5.1   demonstrates that faculty members who instruct in graduate programs hold a terminal degree earned from an internationally recognized institution of higher education, and either evidence a strong record of active engagement in research and scholarship, including recent publications, or have significant professional experience in applied fields as practitioners;

5.5.2   appoints principal supervisors of student research theses from the full-time faculty employed at the institution who are research-active in their field, and have prior supervisory experience at graduate level;

5.5.3   clearly articulates and disseminates the eligibility requirements for faculty members teaching graduate courses as distinct from undergraduate courses;

5.5.4   ensures that faculty teaching and supervising theses/dissertations in doctoral programs have an extensive record of research and have experience in supervising graduate theses/dissertations.

5.6   Professional Staff Qualifications

The qualifications and experience of all professional staff members are appropriate to the level of their appointment and the duties to which they are assigned.

5.7   Faculty Workload

5.7.1   The institution employs a sufficient number of faculty members to effectively deliver the programs it offers, both credit-bearing and non credit-bearing, in line with its mission and international norms.

5.7.2   There is a clear and accessible faculty workload policy appropriate to the nature and mission of the institution, which is consistently and transparently applied.

5.7.3   Workload assignments are equitable and reasonable and include the entire range of a faculty member's responsibilities, such as instruction, advising, project supervision, internship supervision, independent study, committee work, thesis/dissertation supervision, guidance of student organizations, research, service, and curriculum development. Assignments take into account the number of course preparations, the level of courses taught, student enrolments, subject matter, support from clerical and other staff or teaching assistants, and administrative responsibilities.

5.7.4   The institution adheres to the following maxima with regard to faculty teaching assignments:

a. 30 credit hours or equivalent per academic year (typically no more than 15 credit hours per semester) for non-terminal degree holders teaching in undergraduate Certificate, Diploma, Associate Degree and baccalaureate programs;

b. 24 credit hours or equivalent per academic year (over the period of the first and second semesters combined), and typically no more than 12 credit hours per semester, for faculty members with terminal degrees teaching in undergraduate programs;

c. Teaching during summer or other condensed terms is optional and should be compensated separately;

d. 18 credit hours or equivalent per year (typically no more than 9 credit hours per semester) for faculty only teaching in graduate programs, or pro-rata for faculty teaching a mix of undergraduate and graduate courses;

e. 6 credit hours, or equivalent, per semester for part-time faculty.

5.7.5   Institutions must not routinely or persistently assign teaching loads to faculty in excess of the above limits. In exceptional circumstances where teaching assignments in excess of the above requirements (overloads) are unavoidable, the overload is limited to one three-credit course per faculty member per year, and faculty must be compensated.

5.7.6   Workload assignments provide for a minimum release time as follows:

a. at least three credit hours per semester for program coordinators and department chairs that are cumulative;

b. at least six credit hours per semester for deans;

c. appropriate release time for other major administrative and research assignments.

5.7.7   The institution recognizes that laboratory, studio, clinical training, graduation projects, internship and other forms of pedagogy must be differently accounted for in faculty workload calculations. The calculation of workloads includes any classes that are split into sections, and takes into account the workload implications of classes taught in the evenings and/or on weekends.

5.7.8   The institution has, and implements, a policy to establish a faculty workload limit for thesis supervision and for student advising, as part of the normal teaching load.

5.8   Part-time Faculty

The institution ensures that:

5.8.1   normally no more than 25% of the instructors, by headcount, teaching courses in a given program are part-time faculty;

5.8.2   part-time faculty meet the same qualification requirements for appointment as full-time faculty;

5.8.3   part-time faculty are employed on the basis of well-documented job descriptions and clear, equitable contracts;

5.8.4 policies and procedures, including provisions related to office hours, that apply to full-time faculty apply equally to part-time faculty;

5.8.5 part-time faculty of partner institutions teaching in joint degree programs have experience and qualifications as required by this *Standard*; see also *Annex 11: Joint Degree Programs*.

5.9 The Roles of Faculty

5.9.1 The organizational structure of the institution makes clear the reporting relationships of faculty.

5.9.2 Faculty participate in institutional decision-making processes.

5.9.3 Faculty participate in the development of curricula.

5.9.4 Faculty participate in the recruitment of additional faculty.

5.9.5 Non-resident faculty participate in program-related and institutional activities including routine appraisal, professional development and training, relevant committees, and curriculum development.

5.9.6 The institution makes clear its expectation that faculty will carry out their duties in a professional, ethical, and collegial manner that respects the culture of the UAE and enhances the mission of the institution.

5.9.7 Faculty are required to supervise all program-related workshops or laboratory work performed by students.

5.10 Professional Development

The institution:

5.10.1 provides faculty development activities that support teaching, research, and scholarship;

5.10.2 provides appropriate support services and professional development and training programs for faculty members, including part-time faculty, in a variety of instructional strategies and technologies in order to foster active and lifelong learning;

5.10.3 provides adequate training and support for faculty members in using software related to meeting educational goals;

5.10.4 demonstrates, as relevant to its mission, that faculty members receive adequate opportunities and resources for research and scholarship; for example, publishing or presenting research papers; organizing and participating in national, regional, and international conferences, workshops, seminars, or exhibitions; leaves for sabbaticals and training;

5.10.5 demonstrates that the results of annual faculty and professional staff evaluations contribute to the production of individual and collective professional development plans;

5.10.6 provides professional staff development activities that support staff members' roles and improve performance; these activities are evaluated to ensure they are appropriate and effective;

5.10.7 allocates an adequate budget to support the professional development of its faculty and professional staff, and provides evidence that funds are used for that purpose.

5.11   Employee Records

The institution:

5.11.1 has policies regarding the content and maintenance (including backup) of personnel files, and guaranteeing appropriate employee access to his/her personnel file, including the right to review the file and correct erroneous information;

5.11.2 maintains a record onsite for each full-time faculty, part-time faculty, and professional staff member, such as certificates, official transcripts of academic preparation, the signed contract, and all documents required by the Ministry of Human Resources and Emiratization, and the Labor Law of the UAE.

5.12   Evaluation

5.12.1 The institution conducts annual evaluations of the performance of all full-time, part-time, and visiting faculty members, and professional staff members at all locations, using a variety of measures.

5.12.2 The criteria, methods, and procedures for faculty and professional staff evaluation are equitable and disseminated to all faculty and professional staff members.

5.12.3 Feedback on evaluations is given to personnel, discussed by both parties, and used to inform staff development as appropriate.

5.13   Code of Conduct

The institution's *Faculty* and *Staff Manuals* identify expectations for faculty and staff conduct that reflect its mission and purpose, recognizing the need for faculty and staff to carry out their duties in a professional, honest, ethical and collegial manner and to respect the culture of the UAE.

5.14   Disciplinary Actions and Appeals

The institution's *Faculty* and *Staff Manuals* have policies and procedures that allow disciplinary action to be taken against faculty and staff who violate the expected standards of conduct. These policies identify the range of possible actions available to the institution, and specify the procedures for regulating the processes of disciplinary action and for appeal by faculty and staff against disciplinary actions.

5.15   Grievances

The institution establishes a grievance policy and associated procedures; these are available to all faculty and professional staff members.

5.16   Graduate Assistants

The institution ensures that its use of graduate students as assistants in teaching and instruction takes account of their other education responsibilities. Graduate students may support the faculty by aiding with class activities (such as practical sessions and tutorials), facilitating group discussions and team-based learning, and offering technical support. Graduate assistants may grade student work if they do so under the supervision of the faculty course coordinator, and if they have received formal training for this role.

Stipulation 6: Students

6.1 Catalog

6.1.1 The institution's *Catalog* is the basic reference document about the institution and its programs for prospective and enrolled students. It is readily available online or in hard copy (or both). An institution offering graduate programs may have a separate *Graduate Catalog*.

6.1.2 The *Catalog* is considered as a contract between the institution and its students so that the rules, regulations, and program completion requirements in effect at the time of a student's initial enrolment remain consistent throughout a student's program of study.

6.1.3 Past copies of all *Catalogs* are archived and accessible online to all relevant stakeholders for a minimum of ten years from the date of publication.

6.2 Undergraduate Admission

6.2.1 The governing body determines the characteristics and number of students, and the general admissions policies; these are implemented by the faculty and administration.

6.2.2 The institution complies with applicable directives of the CAA regarding limitations (caps) on total enrolment, or enrolment in specified programs.

6.2.3 The institution does not compromise its admissions standards or academic progress policies to achieve a desired enrolment.

6.2.4 The institution specifies all admission requirements including acceptable documentation of secondary school completion, letters of reference, portfolios of completed work, photographs, background checks and/or other requirements that may affect the admissions decision.

6.2.5 The institution's requirements for undergraduate admission:

   a. include qualitative and quantitative measures as appropriate to the program, completion of secondary school, and other preparation that is consistent with the current Ministerial decrees;
   b. require for programs taught in English a minimum score of 1100 on the English language portion of the EmSAT examination, or its equivalent on other national or internationally-recognized tests that are approved by the CAA, such as TOEFL scores of 173 CBT (Computer-Based Test), 61 iBT (Internet-Based Test), 500 PBT (Paper-Based Test), or 5.0 IELTS, or others as identified in *Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency*;
   c. require for certain programs taught in Arabic a minimum score of 950 on the English language portion of the EmSAT examination, or its equivalent on other national or internationally-recognized tests that are approved by the CAA, such as TOEFL scores of 139 CBT, 51 iBT, 450 PBT, or 4.5 IELTS, or others as

identified in *Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency*;

d. specify higher admission standards to programs which have higher proficiency requirements in areas such as mathematics, English language and/or the sciences;

e. establish deadlines for admissions which are adhered to by the institution;

f. establish policies for notification of students regarding admissions decisions;

g. identify circumstances which may result in conditional enrolment, and the requirements that a student must meet to progress from conditional/provisional status and advance into the full academic program;

h. may allow conditionally admitted students to take no more than 12 semester credits (or equivalent) of appropriate General Education course work to contribute towards an undergraduate degree; or such other broadly comparable limits on credits as are available in the system in use within particular institutions;

i. allow conditionally admitted students to take General Education credit-bearing courses only in subjects for which they have the preparation, knowledge, and skills to enable them to achieve the course learning outcomes.

6.2.6   Admissions standards for programs, and for the institution, are regularly evaluated and such information is used in enrolment planning.

6.3   Graduate Admission

Institutions offering graduate programs:

6.3.1   have entry conditions designed to admit students to pursue graduate degrees who show a potential for a high level of performance, based on their previous academic record and other indicators of ability;

6.3.2   include in their admissions criteria qualitative and quantitative measures, as appropriate to the program;

6.3.3   require official transcripts of all earned undergraduate credits;

6.3.4   require, for Master's programs, a recognized Bachelor's degree earned in a discipline appropriate for the prospective graduate degree, with a minimum cumulative grade point average (CGPA) of 2.5 on a 4.0 scale or its established equivalent;

6.3.5   require for programs taught in English a minimum score of 1400 on the English language portion of the EmSAT examination, or its equivalent on other national or internationally-recognized tests that are approved by the CAA, such as TOEFL scores of 213 CBT, 79 iBT, 550 PBT, or 6.0 IELTS, or others as identified in *Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency,* with the exception that a native speaker of English who has completed his/her undergraduate education in an English-medium institution may not be required to provide certification of English language proficiency;

6.3.6   may conditionally admit students with a recognized Bachelor's degree and an EmSAT score of 1250 or its equivalent on another standardized test approved by the

CAA, such as TOEFL scores of 197 CBT, 71 iBT, 530 PBT, or 5.5 IELTS, to a Master's program. Such a student must meet the following requirements during the period of conditional admission or be subject to dismissal:

a. must achieve an EmSAT score of 1400 or equivalent, by the end of the student's first semester of study;
b. may take a maximum of six credit hours in the first semester of study, not including intensive English courses;
c. must achieve a minimum CGPA of 3.0 on a 4.0 scale, or its established equivalent, in the first six credit hours of credit-bearing courses studied for the Master's program;

6.3.7 require for graduate programs taught in Arabic a minimum score of 950 on the English language portion of the EmSAT examination, or its equivalent on other national or internationally-recognized tests that are approved by CAA, such as TOEFL scores of 139 CBT, 51 iBT, 450 PBT, or 4.5 IELTS, or others as identified in *Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency*;

6.3.8 where relevant, require organizational publications to contain clear guidelines for conditional admission, separately approved by the CAA, including time limits and the requirements for moving from conditional to full admission;

6.3.9 ensure that admissions policies and the basis for graduate admissions decisions are consistent with the institution's mission and the goals of its programs; these policies are clearly defined, applied to all students equally, and are published appropriately in the *Catalog* and the institution's website;

6.3.10 ensure that the number of students admitted to a graduate program requiring a thesis is appropriate to the number of faculty qualified and eligible to supervise theses;

6.3.11 at its own discretion, may:
a. raise its admissions requirements above the levels indicated in these regulations;
b. impose additional admissions requirements for individual programs;

6.3.12 require for admission to Doctoral level programs the completion of a Master's degree in a discipline appropriate for the doctoral degree, or academic distinction at the baccalaureate degree with a CGPA above 3.7 on a 4.0 scale;

6.3.13 require for admission to Doctoral level programs a minimum CGPA of 3.0 on a 4.0 scale, or its established equivalent, in the applicant's Master's degree program;

6.3.14 require for admission to Doctoral level programs a minimum score of 1400 on the English language portion of the EmSAT examination, or its equivalent on other national or internationally-recognized tests that are approved by the CAA, such as TOEFL scores of 213 CBT, 79 iBT, 550 PBT, or 6.0 IELTS, or others as identified in *Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency*, with the exception of applicants who have studied Master's degree programs taught in English that required for admission an EmSAT score of 1400 or equivalent;

6.3.15 for doctoral level programs taught in Arabic, require a minimum score of 1100 on the English language portion of the EmSAT examination, or its equivalent on other national or internationally-recognized tests that are approved by the CAA, such as TOEFL scores of 173 CBT, 61 iBT, 500 PBT, or 5.0 IELTS, or others as identified in *Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency*.

6.4 Transfer Admissions, Transfer Credit and Advanced Standing

The institution:

6.4.1 establishes a committee that includes staff of the registration unit and subject matter specialists in making decisions regarding transfer admissions, transfer of credit and advanced standing; records of all decisions and related documents are maintained;

6.4.2 specifies that only students transferring from UAE institutions recorded in the National Register of Licensed HEIs, or other organizations in the UAE approved by the CAA, or recognized institutions of higher learning located outside the UAE, are eligible for transfer admission;

6.4.3 requires all entering transfer students to present valid certification (EmSAT, TOEFL, IELTS or other certification approved by the CAA) demonstrating the required language competency scores for full admission;

6.4.4 requires that students transferring from other institutions into a program in the same field of study are in good academic standing (for undergraduates, a minimum CGPA of 2.0 on a 4.0 scale, or equivalent), based on the teaching, learning and assessment system employed in the organization at which they initially enrolled, demonstrated by certified transcripts or other evidence;

6.4.5 permits external or internal students who are not in good academic standing to transfer only to a program in a field distinctly different from the one from which the student is transferring;

6.4.6 transfers undergraduate program credits only for courses relevant to the receiving degree that provide equivalent learning outcomes and in which the student earned a grade of C (2.0 on a 4.0 scale) or better;

6.4.7 accepts only transfer students in good academic standing (a minimum CGPA of 3.0 on a 4.0 scale in graduate level course work, or equivalent) to graduate programs;

6.4.8 if intending to admit students with advanced standing, establishes policies and procedures, consistent with international norms and approved by the CAA, specifying the maximum number of courses to be waived and the minimum grades or examination scores required to qualify for waivers;

6.4.9 requires the submission of official transcripts showing all post-secondary work attempted at all institutions attended;

6.4.10 requires that transfer students meet all of the admission requirements of the receiving institution and program, and does not allow, under any circumstances,

transfer students to be admitted under the provisions stipulated for conditional admission;

6.4.11 treats work taken under an articulation agreement with another institution as transfer credit;

6.4.12 limits the number of transfer credits which may be applied to a specific undergraduate degree program; the limit may not exceed 50% of the total number of credits which are required to complete a degree;

6.4.13 limits transferred credits for Master's programs to a maximum of 25% of the total credits required for the program (or whichever equivalent measure is used in determining course or program requirements);

6.4.14 transfers graduate program credits only for courses relevant to the degree that provide equivalent learning outcomes and in which the student earned a grade of B (3.0 on a 4.0 scale) or better;

6.4.15 does not grant credit twice for substantially the same course taken at two different institutions;

6.4.16 allows the transfer of credits for clinical training only when done in the UAE or in exceptional circumstances, upon review and approval of a waiver to this requirement by the CAA;

6.4.17 does not allow credits for graduation projects and theses to be transferred;

6.4.18 provides for timely written notification to the student, prior to admission, of the transferability of credit, how much credit is granted, and how the accepted credit will be applied to the degree program of the receiving institution.

6.5 Recognition of Prior Learning (RPL)

6.5.1 An institution wishing to award credit for experiential or other non-classroom based learning must have a policy, approved by the CAA, regarding exemptions from courses and/or the grant of course credit on the basis of certified earlier learning. The policy may include requirements for portfolio development or other means of assessing prior learning, in keeping with sound international practice.

6.5.2 Except for credits awarded through advanced placement or credit transfer, in order to grant credits on the basis of informal or non-formal learning a challenge exam will be required in all cases prior to the awarding of credit for RPL. The institution's policy must specify a limitation on the number of such credits that may be applied to a specific degree program. See *Annex 20: Recognition of Prior Learning.*

6.6 Registration and Records

The institution has an adequately staffed registration office that:

6.6.1 ensures that students are properly registered;

6.6.2   has policies and procedures in place to ensure the accuracy and authenticity of certificates and transcripts;

6.6.3   has appropriate policies governing the collection, maintenance, storage, and disposal of all official and original student records, including provision of secure fireproof/catastrophic event storage;

6.6.4   has policies and procedures to ensure that critical student records, such as transcripts and degree completion authentications, are securely stored with defined access rights, either in soft or hard copy, and are accessible for a period of not less than fifty (50) years;

6.6.5   has off-site continuous electronic backup for all electronic student records;

6.6.6   has policies concerning what constitutes the permanent student record, who may manage and update records, who has access to them, how long they are to be retained, and what may be disposed;

6.6.7   has a policy concerning the release of information to the public that respects the rights of individual privacy, the confidentiality of records, and serves the best interests of students and the institution;

6.6.8   has policies and procedures for degree audits and for approving and changing student grades and other student academic records, with proper notification of any changes made;

6.6.9   ensures that all records of student course work and grade changes are maintained in the student record.

6.7   Student Support Services

6.7.1   A designated administrative unit is responsible for planning and implementing academic and other support services for students, which is headed and staffed by personnel with appropriate preparation and experience.

6.7.2   Professionally qualified counsellors provide personal counselling services.

6.7.3   The institution provides access to health services and health education programs consistent with the needs of its community.

6.7.4   To assist students in career planning and finding appropriate employment, career development services - career testing, information, and counselling, interviewing and other employment skills, job placement, and follow-up activities - are available to students beginning with their first enrolment.

6.7.5   If the institution offers financial aid, all awards, including scholarships, are centrally coordinated and awarded according to published criteria.

6.7.6   All funds for financial aid programs are audited in compliance with UAE laws and regulations.

6.7.7   The services for students are systematically evaluated using a variety of methods that include user surveys. The evidence is evaluated and used in planning.

6.8   Advising Services

The institution provides students with an effective system of advising that includes:

6.8.1   orientation and induction for new students;

6.8.2   policies and procedures governing the assignment of faculty advisors to assist students with their study plans, and identify the learning needs of differing categories of students;

6.8.3   a process for providing guidance for advisors on advising practices and how to advise students on program and course choices;

6.8.4   a process for ensuring that career guidance is provided by advisors and career counsellors;

6.8.5   provisions for advisors to access student records;

6.8.6   a policy limiting the number of students assigned to any one advisor;

6.8.7   a policy for keeping records of advising sessions, and of any actions and follow-up required for students;

6.8.8   a process for identifying and providing assistance and support to students exhibiting poor academic performance;

6.8.9   a process for evaluating the effectiveness of the advising system.

6.9   Student Activities and Publications

The institution has:

6.9.1   policies and procedures governing the establishment, conduct, and supervision of student activities;

6.9.2   provisions for the establishment and operation of a student council, as required in relevant Ministerial decrees;

6.9.3   a program of student activities, including a range of appropriate student-led clubs, commensurate with its mission and the students enrolled;

6.9.4   terms of reference for its student clubs that imbue the principles and practices conducive to sustainability;

6.9.5   a written policy guiding the institution's responsibility for any media operated by students.

6.10   Student Behaviour and Academic Integrity

The institution has:

6.10.1 a clear published statement of students' rights and responsibilities;

6.10.2 policies and procedures governing student behaviour;

6.10.3 a statement regarding academic integrity that clearly identifies types of academic offenses (including plagiarism);

6.10.4 a regulatory framework, including definition of the authority of judicial bodies and organisational administrators, for investigating disciplinary and academic offenses;

6.10.5 secure records of all actions related to student disciplinary actions and grievances.

6.11   Student Appeals and Complaints

6.11.1 The institution provides clear and accurate advice and guidance for students making an appeal or complaint, and for staff involved in handling or supporting appeals and complaints.

6.11.2 Advice and guidance encourages constructive engagement with the appeals and complaints procedures, and offer opportunities for early and/or informal resolution.

6.11.3 Students are able to raise matters of concern without risk of disadvantage.

6.11.4 Appeals and complaints procedures are conducted in a timely and fair manner.

6.11.5 The institution ensures that appropriate action is taken following an appeal or complaint.

6.11.6 The institution maintains formal records of appeals and complaints, and can demonstrate that its procedures are implemented consistently.

6.12   Student Handbook

The institution distributes to all students a *Student Handbook*.

6.13   Alumni

The institution has an Alumni Office that maintains contact with alumni, develops an alumni club, coordinates alumni activities and, specifically, tracks the employment of alumni. This information is used as a part of the evaluation of the effectiveness of programs.

6.14   Feedback from Students

6.14.1 The institution takes deliberate and systematic steps to gather feedback from students about the HEI's educational provision. It actively encourages students to express their views in a constructive manner.

6.14.2 Formal arrangements are made for the representation of the collective student voice at institutional, program and course levels. Student representatives are trained for their role.

6.14.3 Students have regular opportunities, through student representation on at least two designated institutional management committees, to express their views about the HEI's educational provision at institutional and program/course levels.

6.14.4 The institution takes account of, and responds to, student feedback and representations.

Stipulation 7: Health, Safety and Environment

7.1   Occupational Health and Safety

The institution's buildings, grounds and facilities include sufficient space designed for educational purposes to meet administrative, operational, program, health and welfare needs at all relevant levels. In making this provision, the institution:

7.1.1   ensures that health, welfare and safety concerns are addressed in all stages of operational planning and implementation;

7.1.2   ensures that its facilities provide a healthy, safe and secure environment for the campus community, and meet UAE legal requirements for health and safety;

7.1.3   ensures that its facilities and physical resources enable students or employees with special needs (People of Determination), as required by UAE law, to access services and programs;

7.1.4   provides health and safety orientation and periodic training for the campus community that addresses safety measures, and regularly tests emergency evacuation procedures;

7.1.5   designs facilities that are safe and accessible to all users, and ensures that appropriate safety equipment is available in workshops, laboratories and other areas where hazardous materials are used;

7.1.6   makes appropriate provision for the safe storage, distribution, use and disposal of any hazardous materials used in laboratories, workshops, patient care clinics or elsewhere on campus;

7.1.7   assesses health and safety risks in relevant areas of its operations such as laboratory practical classes, workshop activities, patient care clinics, internships and off-campus placements;

7.1.8   ensures that there is sufficient signage to warn all faculty, staff, students, visitors, and patients of potential dangers and risks, which complies with local and federal UAE laws;

7.1.9   provides first aid training for instructors and students as appropriate;

7.1.10 designates a trained Health and Safety Officer as the responsible person for implementing health and safety policies;

7.1.11 publishes and disseminates to all faculty and staff a *Health and Safety Manual* that includes all health and safety policies and procedures;

7.1.12 ensures that the health services that it maintains are available for a sufficient number of hours to address any student, faculty or staff issues that may occur.

7.2 Facilities

The institution has:

7.2.1   sufficient space designed for educational purposes in its buildings and grounds to meet administrative, operational and program needs at all relevant levels;

7.2.2   core facilities in its buildings and grounds consistent with student needs, which may include adequate parking, classrooms, social, recreational and sports facilities, general offices, appropriately configured faculty and staff offices, computer laboratories, technical and specialized laboratories, studios, workshops, learning centres, prayer rooms, and effective first aid facilities;

7.2.3   for institutions that offer programs or courses through e-learning, adequate facilities to support the programs' teaching and learning, and student assessment (see *Annex 15: Courses Taught Through e-Learning*);

7.2.4   facilities that recognize and accommodate the special needs of both male and female students;

7.2.5   sufficient human and physical resources for the effective operation and maintenance of facilities;

7.2.6   adequate access of students and faculty to facilities and services outside of core hours, e.g. where there is evening or weekend use;

7.2.7   policies that integrate the principles and practice of sustainability into all its operations related to campus facilities;

7.2.8   long-range and annual planning and budgeting that include routine, preventive, planned and deferred maintenance of all property.

7.3 Residence Halls

If the institution has residence halls, whether operated by itself or outsourced to an external provider, it has policies and procedures governing residence halls to ensure that students are provided with:

7.3.1   a healthy, safe, and secure living environment that includes special consideration for female students;

7.3.2   a healthy, safe, and secure living environment that includes special consideration for People of Determination;

7.3.3   a learning environment in the residence halls that supports the educational mission of the institution;

7.3.4   services appropriate for residential facilities such as health services, laundry and catering facilities;

7.3.5   the support of a sufficient number of suitably trained operational and administrative staff.

7.4   Technology Infrastructure

The institution has:

7.4.1   equipment and appropriate licensed software that is current and of sufficient capacity to support administrative, operational, student services and educational program activities, and includes an electronic Learning Management System (LMS);

7.4.2   for institutions with multiple campuses in separate locations, video communication facilities across all campuses to facilitate interaction and distance meetings;

7.4.3   adequate access for all students, faculty, and staff to Wi-Fi;

7.4.4   classrooms and workshops/laboratories that are equipped with current technology and equipment, software, and educational media appropriate to the type and level of the programs they support;

7.4.5   a reliable and secure network infrastructure accessible to all administrative and professional staff, faculty and students;

7.4.6   an off-site electronic database backup system capable of storing essential student and institutional records securely, and which performs the backup function regularly;

7.4.7   appropriate security measures that protect the integrity and confidentiality of instructional systems, administrative systems and institutional networks;

7.4.8   published policies and procedures governing the use of technological resources;

7.4.9   a policy and an implementation plan to maintain and upgrade hardware and software to keep them consistent with current technology;

7.4.10 a policy and an implementation plan to maintain and upgrade equipment and other resources in specialist teaching areas such as workshops, studios and laboratories.

Stipulation 8: Learning Resource Centre

8.1 Learning Resource Centre Facilities and Infrastructure

The Learning Resource Centre (LRC) or library has:

8.1.1 adequate space, conducive for study and research, for collections, equipment, staff offices, and individual and small group study;

8.1.2 sufficient and appropriate equipment, such as workstations, printers, electronic imaging equipment, projectors, and white boards, to allow students, faculty, and LRC staff to access electronic databases, perform searches, copy materials (within limits prescribed by copyright laws), and study;

8.1.3 a budget sufficient to acquire adequate learning resources to support all of the institution's programs.

8.2 Staff

8.2.1 A sufficient number of professionally qualified staff administer the institution's LRC services, and its instructional and information technology support functions, so that professional staff are available during all hours of operation.

8.2.2 The LRC Director normally has at least a Master's degree or equivalent in library/LRC science, and substantial experience in LRC resource administration.

8.2.3 Other professional staff members have relevant professional qualifications in library/LRC sciences, and training and experience with electronic resources.

8.3 Operations

8.3.1 LRC staff provide students, faculty and professional staff with orientation programs, workshops, personal assistance and other services so that they develop the key skills of information literacy, and can locate, evaluate and use knowledge and information available on line, in print or in other media.

8.3.2 The LRC is open for a sufficient number of hours to meet the needs of faculty, professional staff and students.

8.3.3 The LRC provides appropriate services, including efficient book and periodical circulation, acquisitions, access to electronic resources, and interlibrary loan services.

8.3.4 The institution ensures the proper use of its technology systems and resources by LRC users, and ensures compliance with image reproduction and copyright law.

8.3.5 The operations and services offered by the LRC are regularly evaluated by the LRC users.

8.4 Electronic and Non-electronic Collections

8.4.1 The LRC collection, including books, manuals, periodicals, databases, and other learning resources in both traditional and electronic form, is adequate for the education, research and service programs of the institution.

8.4.2 Faculty and other stakeholders are involved in the development of collections, including electronic databases; in the assessment of the acquisitions policy; and in decisions regarding the weeding of outdated or obsolete materials.

8.4.3 The LRC collection reflects the level of qualifications offered by the institution.

8.4.4 The collection is catalogued according to accepted bibliographical formats and conventions.

8.4.5 The institution provides students and faculty with convenient access, both on and off campus, to learning resources including electronic databases, as appropriate to their program, level and mode of study.

8.5 Co-operative Agreements

8.5.1 The institution seeks co-operative agreements with other learning resource centres and agencies.

8.5.2 Co-operative agreements are formalized and are subject to periodic evaluation.

8.5.3 Co-operative agreements may serve to provide students and faculty with access to additional resources, but do not replace the institution's own collection.

Stipulation 9: Fiscal Resources, Financial Management and Budgeting

9.1   Fiscal Resources

The institution has fiscal resources, held in its own accounts, to fund both capital and operating expenditures, and sustain all of its services, operations and programs.

9.2   Student Protection Plan/Teach-out Reserve

The institution has in place a bank financial guarantee as an indemnity against it ceasing to operate, as determined by the Minister of Education.

9.3   Organization and Administration

9.3.1   Financial functions are centralized in an office headed by an appropriately qualified chief finance officer.

9.3.2   The institution has a clear organizational structure and systems for ensuring regular and accurate reporting of financial transaction data from those with delegated authority for expenditures to the chief finance officer.

9.4   Budgeting

9.4.1   The annual budget involves input from all key constituencies and is approved by the governing body.

9.4.2   The annual budget reflects short and longer-term institutional planning and studies of institutional and program effectiveness, and is based on demonstrably prudent estimates of enrolment and other sources of revenue.

9.4.3   The institution's overall budget accurately reflects individual program and departmental budgets.

9.4.4   The annual budget is transparent and presented in a standard accounting format, including itemized details of revenues and expenditures for individual units, and contingency funding.

9.4.5   All budgets, both short- and long-term, are based on realistic income projections and staff hiring plans, and an assessment of the human and physical resources needed to support each activity.

9.4.6   The institution has long-range and annual planning and budgeting that include routine, preventive, planned and deferred maintenance of all its education-related premises, whether owned or rented.

9.4.7   The institution has a formal process for regular expenditure monitoring against plan, for revising the budget if necessary, and for approving and modifying allocations.

9.5   Expenditures

9.5.1   Overall institutional responsibility for approving and controlling expenditures rests with the CEO or equivalent.

9.5.2   The institution operates within its policies and procedures that ensure control over purchasing and inventory management, including consideration of sustainability, and disposal of assets.

9.5.3   Authority for specific expenditures within the approved budget for the unit is delegated to unit heads.

9.6   Financial Management

9.6.1   The institution maintains financial accounts in its own name at a UAE-based financial institution.

9.6.2   Adequate policies and procedures exist for the receipt, deposit and safeguarding of the institution's funds.

9.6.3   The institution's fees collection and refund policy adheres to generally accepted practices in the education community and is published in relevant documents. The institution actively informs students of these policies.

9.6.4   The institution publishes a list of tuition and all other fees in its *Catalog*/student guide or equivalent, and in other relevant publications (see *Annex 4: Catalog*). Students must be informed of all fees. The published fee schedule must include a maximum annual limit for any fee increases.

9.6.5   The institution strictly adheres to its published fee schedules, including the limits on any annual increases to fees.

9.6.6   Income-generating activities operated by or for the institution such as bookstores, residence halls, food service operations, printing and duplicating services, child care, and transportation services, adhere to the same budget and reporting practices as the rest of the institution.

9.6.7   Revenues and costs related to auxiliary enterprises are accounted for separately and included in regular financial reporting.

9.6.8   Revenues in excess of expenses for auxiliary services are used in a manner consistent with the institution's policies to improve student and training services, such as scholarships and support for student activities.

9.6.9   The institution has a detailed framework to define, assess, and manage its risks, including programmatic and financial risks.

9.6.10 The institution manages its financial risks by evaluating them, developing strategies to avoid or reduce them, obtaining appraisals of facilities and equipment, and insuring them.

9.7 Accounting and Auditing

9.7.1   The accounting and auditing system is administered by appropriately qualified personnel, and follows generally accepted principles and practices for accounting.

9.7.2   The institution has the necessary information technology tools to maintain accurate accounts and generate timely reports.

9.7.3   The institution maintains revenue/expenditure reports, either independently certified in the audit report, or included as supplemental data in the audit report.

9.7.4   The chief finance officer prepares regular financial reports for organizational officers, the governing body, and, if requested, the MoE or the CAA.

9.7.5   The institution demonstrates that it has an effective process of internal auditing and financial control that complements the accounting system and the annual external audit.

9.7.6   Independent, certified public accountants, chartered accountants, or registered auditors appointed by the governing body, and not associated personally or professionally with the institution, conduct an annual, fiscal year audit and provide a management letter, which is submitted to the governing body.

9.7.7   The institution ensures freedom from interference or intrusion into the auditing process by officials of the institution or others.

9.7.8   The institution is proactive in ensuring that its financial transactions are free of all forms of bribery and corruption, and operates a strategy of zero tolerance for any such offences.

9.8 Financial Reporting to the MoE

The institution provides the MoE or the CAA, as requested, with all budgets, financial statements, reports and external audits, and prepares additional financial reports if requested.

9.9 Insurance

The institution has appropriate levels of indemnity and insurance cover for liability and other potential losses, or designated financial resources to provide adequate replacement protection for its physical facilities and equipment and to cover the potential liability of personnel.

Stipulation 10: Legal Compliance and Public Disclosure

10.1 Institution Name and Program Titles

10.1.1 The institution's name accurately reflects its status, scope, and affiliations.

10.1.2 Programs have titles which are appropriate and consistent with the QF*Emirates* and with international norms for naming programs. Program titles are specified in both Arabic and English.

10.2 Legal Compliance and Contracts

10.2.1 The institution meets all legal requirements of the UAE and of the Emirate or Emirates in which it is located.

10.2.2 In developing contractual relationships, the institution's representatives take responsibility for anything undertaken in its name. It ensures that the range of activities that may form the basis of a contract meet the *SIL*. Such activities may include: co-operation in planning and developing programs, courses and teaching and learning material; delivering such programs, courses or teaching and learning materials; exchange of faculty and professional staff, students and administrators; co-operation in consultancy and research activities, and internship opportunities; or receiving services.

10.2.3 The institution submits any prospective contract or memorandum of understanding that will impact on its programs of study to the CAA for review and approval before signing it.

10.2.4 Notwithstanding any given contract, the institution maintains full control of all aspects of its educational programs and services, ensuring that it has primary responsibility for awarding any certificate, diploma or degree recognized in the UAE and for the integrity, rigor, outcome and management of the educational program, and its compliance with the *SPA*.

10.2.5 Notwithstanding any outsourcing of services, the institution remains responsible for the quality and timeliness of the services provided, for protecting confidentiality, and for ensuring that such services meet the requirements of the *SIL*.

10.2.6 If a contractual relationship involves an educational organization as a partner, the institution offers evidence of the partner organization's quality, ensuring that it is either licensed in the UAE or respected internationally.

10.2.7 The institution regularly evaluates its contractual relationships for effectiveness and uses the results of the evaluation for improvement.

10.2.8 Institutions associated with separately incorporated entities such as radio or television stations, foundations, hospitals, businesses, corporations, trusts or governmental organizations provide details of the nature of the relationship, describing the benefits and obligations of each party, particularly the ways in which the association furthers the institution's mission.

10.2.9 In health programs with clinical components, the institution has a written agreement with approved teaching hospital(s)/health care unit(s) in the UAE that offer clinical experiences for students.

10.2.10 Teaching hospitals comply with particular requirements for higher education in medicine and health professions (see *Annex 21: Criteria for Teaching Hospitals/Healthcare Units within the UAE*).

10.3   Public Information

In the management of its public information, the institution:

10.3.1 ensures that all print and electronic publications are internally consistent, consistent with one another and accurately portray the institution;

10.3.2 ensures that its recruiting activities, print and electronic publications, and advertisements accurately and truthfully portray the institution, its licensed and registered status, its programs and their accreditation status, and the program fees, so that students and their families may make informed decisions about enrolment;

10.3.3 maintains an active web presence that includes essential, accurate and up-to-date information about the institution and all its activities (see *Annex 22: Website Content*);

10.3.4 maintains a *Catalog* or equivalent publication which is available online or in hardcopy (or both).

10.4   Integrity and Transparency

In the interests of integrity and transparency, the institution:

10.4.1 makes no unsubstantiated claims for itself, for the employment prospects of students who pursue its educational programs, or for its relationships with other institutions, agencies, or employers, or otherwise portrays itself in ways that are other than clear, truthful and substantiated by evidence;

10.4.2 takes all reasonable measures to foster academic honesty and ethical behaviour in its policies and practices, including the determination and reporting of student grades;

10.4.3 demonstrates through its policies and practices its commitment to the free pursuit and dissemination of knowledge, consistent with the institution's mission and goals;

10.4.4 implements its policies and procedures on matters such as conflict of interest, research ethics, intellectual property, and grievances, and publishes these in relevant documents that are readily accessible;

10.4.5 ensures it complies with copyright provisions related to its licenses for software and other proprietary systems, textbooks and other copyrighted material.

10.5   Relationship with the MoE

In order to maintain an appropriate relationship with the MoE, the institution:

10.5.1 provides the CAA, and other departments of the MoE as appropriate, access to information as requested including enrolment figures, faculty and professional staff data, budgets, personnel information, and all reports of its operations; and accurate information about the institution including proposed contracts or MOUs, and reports from any licensure, auditing, external reviews or other accrediting agencies;

10.5.2 co-operates with the CAA in preparing for and conducting site visits or other meetings;

10.5.3 facilitates, at its expense, on-site visits by a panel of experts when requested by, and under the supervision and direction of, the CAA; these may include visits to related facilities such as clinical training locations or internship placements;

10.5.4 fosters an open, co-operative, and collegial relationship with the CAA.

Stipulation 11: Community Engagement

11.1   Community Engagement Strategy

11.1.1 In accordance with its mission, the institution develops a strategic plan specifically directed at its chosen areas of community engagement, including initiatives aimed to enhance the environment and address issues of sustainability. The plan should involve appropriate stakeholders in its development.

11.1.2 The institution defines and evaluates its mechanisms for developing and maintaining productive relationships with the community.

11.1.3 The institution has policies and procedures governing external relationships.

11.2   Relationships with Employers

11.2.1 The institution has advisory committees for its fields of study, and incorporates the needs of employers and professional bodies in its curriculum development process in order to contribute to local economic growth and to society as a whole. The advisory committees may also provide input on the availability of internships and opportunities for practical experience, and advise on career pathways. The institution assesses the effectiveness of its advisory committees.

11.2.2 The institution seeks to develop other informal and formal relationships with employers and details the nature of these relationships, describing the benefits and obligations of each party, particularly the ways in which the association furthers the institution's mission.

11.3   Relationships with other Education Providers

Where applicable, the institution seeks to establish relationships with schools, TVET providers, and other institutions of higher learning, for instance to provide opportunities for progression into higher education and to further studies upon graduation. Such relationships that contribute to the mission of the institution are formalized where possible, and agreements are evaluated for their effectiveness at appropriate intervals.

11.4   Relationships with Alumni

Institutions establish clear lines of communication with their alumni. This should include updating of an alumni database, appropriate allocations of staff time in alumni relationship development, alumni professional development, organizing events, development of an alumni networking infrastructure, and assessing the employability of graduates.

11.5   Continuous Education

Institutions are required to have a policy on continuous education and lifelong learning as part of the *Policies and Procedures Manual*.

11.6 Evaluation

In all cases the effectiveness of community relationships is evaluated periodically, through surveys and any appropriate direct measures, to ensure that mutual benefits result.

Annexes

Annexes

Annex 1: Substantive Change at Institutional Level

Initial Institutional Review determines whether an institution has established the organizational and academic policies, procedures, personnel, programs and other conditions to fulfill its mission. Because institutions change constantly, periodic institutional reviews confirm that the institution continues to adhere to the *SIL* and to fulfill its mission. Some organizational changes, however, may have an immediate effect on the nature, scope, quality, integrity or effectiveness of the institution. Any such substantive changes initiated after the Initial Institutional Review, or subsequent reviews at the CAA's discretion, must be reported to the CAA and reviewed for approval before they are made.

Institutions must discuss prospective substantive changes with the CAA before implementing them. The CAA will determine the type and extent of review the change warrants. Some changes are sufficiently limited in nature and scope that they may be approved with minimal review; others require an extensive review.

1. Types of Substantive Change at Institutional Level

Institutions must inform the CAA of any planned or actual changes of the kinds listed below, or others similar to them. They include, but are not limited to, those that:

    a. change the legal status or form of control of the institution, including a change in ownership or a merger with another institution;
    b. significantly alter the mission or goals of an institution;
    c. relocate the primary campus, or establish instruction at a new location such as a branch or additional campus;
    d. close one of the institution's locations;
    e. close one or more of the institution's programs;
    f. make significant changes in the organizational structure, such as separating one unit or institution into two, or joining two separate units;
    g. establish a contractual relationship with another organization to provide teaching and learning services;
    h. offer non-credit courses or other activities that affect the mission, or alter faculty or professional staff workload.

2. Notice to the CAA

a. *Before the change*: An institution considering a substantive organizational change must notify the CAA early in its planning, and meet with a member of CAA staff shortly thereafter. This provides an opportunity for the CAA to counsel the institution about the potential impact of the change to its status, if any, and the procedures that need to be followed.

b. *Upon deciding to initiate the change*: The institution must give the CAA a report at least four months before the date on which the change is to be implemented. The report must provide the necessary information and analysis in as concise a

presentation as possible, preferably fewer than 25 pages; a one-page executive summary must be attached. Reports are to include: 1) a justification of the change with a detailed description and analysis of it, evidence of the need for it, and authorization by the governing body and other relevant parties; and 2) a projection of any developments anticipated as a result of the change. The following information must be included:

- rationale for change, and relationship of change to mission;
- descriptions of proposed changes;
- any substantial additions to faculty or professional staff, or to learning resources and facilities, required by the change;
- any physical plant expansion required by the change;
- projection of other needs over the next several years, including estimates of the additional costs.

3. Evaluation by the CAA

When it receives the report, the CAA will review the change, determining the scope and type of evaluation required. The CAA may decide to:

- approve the change without conditions;
- approve the change with specified conditions;
- require an on-site visit by the CAA;
- require an on-site visit by an external team;
- defer consideration;
- deny the proposed change.

4. Notification and Status

The CAA will determine the scope and type of evaluation required, and inform the institution of this, no more than three months after receipt of the institution's report on the proposed change.

Only after the CAA has notified the institution that the change is acceptable may it assume that the change has not affected, and will not affect, its license and registration, or its program accreditation. If the institution proceeds with the change without CAA approval, it risks jeopardizing its licensed and registered status.

Annex 2: By-Laws of the Governing Body

The By-Laws of the governing body regulate the constitution, responsibilities and procedures of the governing body. A clear distinction is drawn between the policy-making and fiduciary functions of the governing body and the responsibility of the administration and the faculty and professional staff to administer and implement policy; this is evident both in the governing documents and in the operation of the governing body. The governing body is responsible for all of the By-Laws of the institution. These By-Laws include the following items.

1. Membership and Protocol

The governing body:

a. consists of at least five members, excluding *ex officio* members, duly appointed or elected in accordance with the institution's policies and procedures;
b. has a membership that ensures an appropriate balance of individuals with the range of expertise, including academic expertise, necessary to guide the policies and strategic planning of the institution;
c. has members representing the broader UAE community;
d. ensures that no more than one-third of the governing body's members have a financial interest in the institution;
e. designates one member as chair of the governing body, who is not an owner, investor or shareholder and has no other financial interest in the institution;
f. stipulates the term of office for governing body members;
g. establishes a policy concerning conflict of interest, including prohibitions and limitations on financial dealings between governing body members and the institution;
h. is not involved in management decisions or the day-to-day operation of the institution;
i. takes active measures to ensure that it operates with the highest levels of integrity, honesty and ethical behaviour in all its dealings and decision making;
j. meets at least twice annually; and
k. maintains official records/minutes of all meetings.

2. Responsibilities

The governing body:

a. appoints the CEO or equivalent, and evaluates his/her performance;
b. approves all the institution's policies;
c. approves the institution's By-Laws;
d. approves and periodically reviews the institution's mission and vision statements;
e. approves the institution's strategic plan, and monitors progress in its achievement;
f. reviews and evaluates reports on all aspects of the institution's performance, to enable it to assure itself, and other stakeholders, that appropriate academic standards and quality of provision for students are being maintained;

g. approves educational programs of a quality consistent with the institution's mission;
h. confers, or authorizes the conferring of, all qualifications;
i. secures financial resources to support the institution's goals adequately;
j. approves the annual budget;
k. approves major facilities, contracts and campus plans unless otherwise delegated;
l. approves the selection of an external financial auditor and receives, and follows up on, the auditor's report and management letter;
m. evaluates its own effectiveness and uses that evaluation for improvement.

Annex 3: Policies and Procedures Manual

The institution is required to develop policies and procedures that enable it to meet all of the conditions and Stipulations specified in the *SIL*. As applicable to the particular characteristics of the institution, the list below includes the topics to be covered by these policies and procedures. This list should be considered as a minimum requirement, and should be supplemented by policies and procedures required to regulate any significant activity or process that impacts the institution's stakeholders.

The *Policies and Procedures Manual* may be maintained in either print or electronic form. The current version of this manual must be clearly identified and dated. All previous editions of the *Manual* must be archived.

All changes to policies and procedures must be approved by the relevant authorities and recorded in the policy documents. Changes made to policies and procedures must only be introduced at appropriate times that do not disadvantage existing students, faculty, staff or other stakeholders.

1. **Governance and Management**

    a. Mission Development, Approval and Review.
    b. Organization.
    c. Terms of Reference of Standing Committees.
    d. By-Laws of the Governing Body.
    e. Board Appointments, Term of Office and Replacement.
    f. Policies Development, Document Control, Review and Dissemination.
    g. Institutional Planning, and specific plans for Community Engagement, Research and Scholarly Activity and Sustainability.
    h. Risk Management.

    As applicable:
    i. Multiple Campus Coordination.
    j. Campuses of UAE Institutions in Other Countries.
    k. Branch Campuses of Foreign Institutions.

2. **Quality Assurance**

    a. Quality Assurance/Institutional Effectiveness.

3. **Educational Programs**

    a. Program Planning and Development.
    b. Program Specifications.
    c. Undergraduate Completion Requirements (as applicable).
    d. Graduate Completion Requirements (as applicable).
    e. Course Substitution.
    f. Joint Degree Programs (as applicable).
    g. e-Learning (as applicable)
    h. Additional Degree from the Same Institution.
    i. Thesis/Dissertation Supervision and Examination (as applicable).

j. Academic Progress.
k. Grading and Assessment.
l. Examinations.
m. Curriculum Approval and Revision.
n. Internship/Practicum.
o. Teaching and Learning Methodologies.
p. Course Syllabus.
q. Course File.
r. Class Size.
s. Intensive Modes of Course Delivery.
t. Academic Misconduct.

4. Research and Scholarly Activities

a. Research Support.
b. Ethical Research.
c. Student Involvement in Research.
d. Commercialization of Research Output.

5. Faculty and Professional Staff

a. Faculty and Professional Staff Role.
b. Employment.
c. Compensation and Benefits.
d. Leave of Absence.
e. Faculty/Staff Personnel Records.
f. Professional Development for Faculty and Staff.
g. Faculty Workload.
h. Professional Requirements for Teaching.
i. Faculty/Staff Evaluation.
j. Nepotism/Employment of Relatives.
k. Faculty/Staff Discipline.
l. Faculty and Professional Staff Appeals.
m. Faculty and Professional Staff Grievances.
n. Graduate Assistants (as applicable).

6. Students

a. Undergraduate Admissions (as applicable).
b. Graduate Admissions (as applicable).
c. Transfer Admissions.
d. Advanced Standing.
e. Recognition of Prior Learning.
f. Student Records.
g. Information Release.
h. Degree Audit.
i. Grade Approval and Change.
j. Career Services.
k. Residential Life (as applicable).
l. Student Finance.

m. Student Discipline.
n. Student Attendance.
o. Gender Segregation (as applicable).
p. Student Activities.
q. Student Council.
r. Student Publications and Media.
s. Student Rights and Responsibilities.
t. Student Counseling.
u. Health Services.
v. Academic Advising.
w. Student Academic Integrity.
x. Student Appeals.
y. Student Grievances.
z. Alumni Relations.

7. Health, Safety and Environment

a. Health and Safety.
b. Equipment and Software Replacement.
c. Data Security.
d. Appropriate Use of Technology Resources.
e. Equipment and Software Technical Support.

8. Learning Resource Center

a. LRC/Library Policy, Procedures and Regulations.

9. Fiscal Resources, Financial Management and Budgeting

a. Internal Audit.
b. External Audit.
c. Budgeting.
d. Financial.
e. Purchasing and Inventory Control.
f. Cash Management.
g. Financial Risk Management.
h. Auxiliary Enterprises.

10. Legal Compliance and Public Disclosure

a. Conflict of Interest.
b. Anti-Corruption and Bribery.
c. Copyright and Intellectual Property.
d. Teach-Out.
e. Publications.
f. Institutional Relations.
g. Co-operative Agreements and Contractual Relationships.
h. Website.

11. Community Engagement

    a. Community Engagement.
    b. Advisory Board(s).
    c. Continuous Education and Lifelong Learning.

Annex 4: Catalog

The institution must have a *Catalog* or student guide, which is published and disseminated in printed and/or electronic form. If the institution offers graduate programs, the *Catalog* may include a section specifically tailored for graduate students and faculty, or the institution may publish a separate *Graduate Catalog*. The *Catalog* is required to include the following core material:

a. the current year's academic calendar with clear indications as to dates of instructional periods, examinations and institutional holidays;
b. a brief statement of the institution's history;
c. statements of vision, mission and institutional goals;
d. a statement about Licensure, conforming to the requirements of the MOE: "[Name of Institution], located in the Emirate(s)of [insert name(s)], is officially Licensed from [day, month, year] to [day, month, year] by the Ministry of Education of the United Arab Emirates to award degrees/qualifications in higher education";
e. any international accreditations held by programs;
f. an organization chart of the institution and of the college or unit;
g. brief descriptions of the institution's resources and physical setting;
h. any cooperative relationships with other educational, cultural or community organizations;
i. programs and degrees offered with exact titles, organized by the college or unit under which they are offered; also joint degrees or degrees offered in partnership with other institutions;
j. admission requirements and procedures including application fees, admissions deadlines, required documentation, policies on the transfer of credit, remedial courses and joint degrees;
k. policies regarding registration, withdrawal and readmission, probation and dismissal;
l. financial policies, including all costs (tuition, fees and other required program costs), schedule for payments, policies and procedures for the refunding of fees and charges to students who withdraw, policies regarding changes to tuition and other fees, and a description of financial aid opportunities and policies; scholarships and other financial aids available;
m. a list of tuition and all other fees; the published fee schedule must include a maximum annual limit for any fee increases;
n. a description of the availability of student services (discussed in more detail in the *Student Handbook*);
o. a statement of student rights and responsibilities (sometimes referred to as a "Code of Conduct"), including rules for maintaining order on campus;
p. appeals and complaints, and the process for resolving them;
q. a statement about academic integrity, including definitions of plagiarism and other academic offences;
r. the institution's definition of a credit hour or equivalent unit;
s. the definitions of academic terminology such as major, minor, or area of concentration, and the minimum number and level of credits/units required for each; core courses and electives;

t. degree and program completion requirements, including the curricula, program learning outcomes at the appropriate level, and how these learning outcomes are aligned with the QF*Emirates*;

u. for undergraduate *Catalog* sections, a description of the General Education requirements or program, including learning outcomes;

v. any required sequencing of courses within programs;

w. information about course offerings, including course descriptions, number of credits, number of classroom and other hours required and, if appropriate, prerequisites; identification of core courses and electives;

x. academic regulations including the grading system, policies regarding academic progress, opportunities for appeal by students;

y. listing of the faculty with degrees held and the conferring institution;

z. listing of senior administrators and their titles;

aa. list of governing board members and their affiliations;

bb. contact information and location.

Graduate Catalog

The institution may have a *Graduate Catalog* or *Catalog* section for graduate programs which should, in addition to the above, also include the following:

a. a statement on the research policy of the institution;

b. policies and procedures on projects, theses and dissertations, including registration, proposal submission and approval, selection of principal supervisor, graduate committees, seminar requirements, external readers, final examinations/defences, revisions, award of degree, intellectual property rights and copyrights;

c. research interests, degrees held and conferring institution, and experience of the graduate faculty.

Annex 5: Faculty Manual

The institution is required to develop and maintain a *Faculty Manual* which is required to include provisions addressing all the requirements of *Standard* 5. As applicable to the institution, the following list of contents for the *Manual* should be covered:

a. an organization chart clearly showing the place of the faculty with respect to departments, schools, colleges and the administration of the institution including the governing body;
b. a statement of faculty roles and responsibilities in the institution, including those in academic affairs, curriculum development and review, teaching, student support, academic advising, research and/or scholarship, management and administration, and governance;
c. the definition of academic freedom as it applies to the institution and the faculty employed by the institution;
d. statements of professional ethics for faculty;
e. intellectual property guidelines;
f. conditions of employment for full-time faculty, including:
   - workload policies;
   - expectations for office hours;
   - academic ranks and qualifications for those ranks;
   - faculty orientation;
   - probationary periods;
   - performance review systems and the effect of performance reviews on employment;
   - supervision and organizational issues affecting faculty;
   - professional development policies and procedures, and the institution's support for professional development;
   - leaves of absence including annual or vacation leave, maternity, sabbatical, training, emergency, Hajj or sick leave;
   - research expectations including administrative responsibilities for grants received;
   - regulations regarding consultancy or outside employment;
g. policy regarding provisions made in case of the faculty member's death during the term of the contract;
h. provisions for promotion, including application procedures, the contents of applications including portfolio requirements, if any, and review procedures;
i. job descriptions for faculty members;
j. provisions indicating that the required qualifications for full- and part-time faculty are identical;
k. compensation ranges and benefits, including compensation (if any) associated with promotion;
l. policies regarding faculty overloads;
m. regulations and/or conditions regarding summer employment (if applicable);
n. disciplinary procedures including grievances and appeals;
o. policies specifically affecting graduate assistants (if applicable);
p. policies specific to part-time faculty, including those instances where qualified professional staff have teaching assignments, and any limits placed on those assignments.

Annex 6: Staff Manual

The institution is required to develop and maintain a *Staff Manual*. This may be combined with the *Faculty Manual,* but must include the following in addition to sections above that apply to both faculty and staff:

a. definitions of the categories of staff (professional, support, academic, non-academic staff; full-time and part-time);
b. definitions of the work week for staff and information on overtime;
c. leave policies including vacations, maternity, Hajj, emergency and bereavement leave;
d. procedures for the supervision and evaluation of staff;
e. staff compensation ranges and benefits;
f. terms of service for staff including probationary periods, length of contracts and procedures for contract renewal;
g. policy regarding provisions made in case of the staff member's death during the term of the contract;
h. role of staff in governance and participation on committees;
i. employment/personnel records maintained for staff;
j. staff grievance and/or appeal policies and procedures;
k. promotion policies for staff;
l. access for staff to professional development opportunities and other services including, but not limited to, counseling services, career services and registration for courses at the institution.

Annex 7: Student Handbook

The institution must develop and maintain a *Student Handbook* which should include the following:

a. a statement of student rights and responsibilities;
b. arrangements through which students participate in the governance of the institution;
c. rules/guidelines for the organization, development and conduct of student clubs or associations, including fiscal control and the role of faculty/professional staff advisors;
d. information about the LRC/Library and its resources, including electronic resource services;
e. information on student services and facilities, including:
   - learning support centers;
   - personal counseling;
   - academic counseling;
   - career counseling;
   - career placement services;
   - prayer rooms;
   - computer laboratories;
   - recreational facilities;
   - residence halls (as applicable);
   - dining services;
   - health services;
   - orientation;
f. information on the appropriate and proper use of the institution's facilities and electronic resources, including Internet connections;
g. guidelines regarding student-run media, including radio/television programs or stations, student newspapers, student generated websites or other social networking sites linked in any way to the institution's technology infrastructure or using the institution's resources, trademarks, logos or brands;
h. expectations for students regarding personal codes of conduct, such as dress codes and no smoking regulations;
i. expectations for student academic integrity, including penalties for plagiarism;
j. student disciplinary policies, and grievance and/or appeal procedures with timelines;
k. information on safety issues such as safe uses of laboratories, hazardous materials and fire safety;
l. information on the content of student records, and the privacy protections which the institution has in place as well as the circumstances under which a student's record can be released;
m. academic policies, including admissions policy, requirements for academic progress, financial aid, attendance, grading policies; etc. If these policies are in the institution's *Catalog* they need not be repeated in the *Student Handbook*, but there should be clear cross-referencing such that a student may readily review such policies;
n. Contact information for offices providing student services.

Annex 8: Quality Assurance Manual

The institution develops and maintains a *Quality Assurance Manual* which includes the following:

a. the organization of the institution's Quality Assurance unit and its place on the organization chart;
b. the roles of the Quality Assurance unit in strategic planning, operational planning and preparing annual reports;
c. the role of the unit in ensuring that the institution, and individual program and operational units, conduct Self-Studies*;*
d. the timetable for the periodic review and update of the mission, vision and strategic plans for the institution;
e. KPIs to evaluate the performance of all units and services;
f. the processes and established timetables used to evaluate all programs, courses, processes and services;
g. the instruments to be used and the type of evidence to be collected and analysed;
h. the entities responsible for each aspect of evaluation and quality assurance;
i. the process for reviewing the results of evaluation in the development of approved action plans that include projections of required budgets and resources;
j. the process for disseminating the results of evaluation, including what will be disseminated and to whom;
k. the process for monitoring the implementation of improvement plans;
l. provisions to ensure that the quality assurance mechanisms apply to branch campuses, joint degree programs and other collaborative arrangements, so that they are in compliance with policies and procedures of the UAE institution, the *SIL* and the *SPA* ;
m. the process of benchmarking its quality and performance against best local and international practices.

Annex 9: Feasibility Study, Financial Analysis and Timed Action Plan

1. Feasibility Study

In determining whether to recommend the grant or renewal of an institutional license, or the accreditation or re-accreditation of a program, among the most important questions for reviewers and the MoE are whether the mission and programs proposed by the institution meet a need in the community and the UAE, and whether a sufficient number of prospective students is interested in those programs and available to sustain them. A well-designed feasibility study is therefore a key document in the proposal, as it provides substantial detail about the institution's business case. At the very least, the study should provide evidence in the form of market data and other studies that responds to the following questions:

   a. the need for the program(s), based on market surveys of prospective students and of prospective employers of graduates;
   b. the potential student profile, including numbers, origin, backgrounds and other pertinent information;
   c. identification of competing institutions offering comparable programs in the same geographic area;
   d. the likely motivation of students to select the proposed institution or program rather than its competitors;
   e. the need for graduates who have the learning outcomes the program(s) propose to provide.

2. Financial Analysis

Another major consideration in licensing a new institution is whether it has the financial resources to sustain its operation over time, particularly should the forecast of student numbers prove overly optimistic. The required financial analysis covers at least four years of operation and should include the sources of anticipated revenues, and all anticipated expenses including the costs of meeting institutional and program review requirements, capital expenses, operating expenses including personnel costs, and a contingency fund. Sufficient detail is included so that the basis of calculation of each item is clear. The analysis also offers three different revenue forecasts – maximum, expected, and minimal – based on student intake, which in turn should be based on the analysis of the potential market and the competition within it.

3. Timed Action Plan

Applicants for Initial Institutional Review submit a *timed action plan*, a plan that documents step-by-step – with dates and deadlines – everything necessary to realize the institution's mission and the delivery of its proposed programs, from the time of the initial application through the first four years of the institution's operation. The plan includes:

   a. each faculty and professional staff position required to plan, organize, and operate the campus and its programs;
   b. deadlines for submitting educational programs for initial program review;
   c. the dates of planned appointments;

d. each of the developmental steps so that the necessary facilities, infrastructure, programs, library, equipment, instructional technology, services and other resources are in place prior to the intended date of enrolling students.

Annex 10: Program Specifications

A program specification is the definitive statement of information on a program's aims, learning outcomes, structure, admission requirements, approaches to teaching and learning, assessment and quality assurance.

For each program offered, an institution must provide a comprehensive specification document that:

a. is a primary source of information for students and prospective students seeking an understanding of a program; what students need to have achieved in order to enter the program, what will be expected of them during the program, and what they will have achieved having taken the program;
b. assists those involved in program curriculum development to appreciate the structure of the program and its learning outcomes;
c. allows internal and external reviewers to understand the program's learning outcomes, structure and approach;
d. is a source of information for employers, particularly about the skills, knowledge and aspects of competencies that they can expect from graduates of the program;
e. assists institutions in communicating essential program information to external stakeholders, such as professional bodies;
f. is a guide for receiving feedback from students on the extent to which they perceived that the opportunities for learning were met.

Each program specification should include:

a. program title and program code/number;
b. authoring team;
c. date document prepared;
d. dates of initial accreditation of the program and, where appropriate, subsequent renewal of accreditation of the program;
e. dates of international accreditation and subsequent renewal of accreditation, if applicable;
f. academic unit(s) delivering the program;
g. in cases of interdisciplinary or jointly offered programs, the academic unit primarily responsible for the program;
h. delivery support partner (as applicable);
i. delivery mode(s);
j. educational aims of the program;
k. program learning outcomes;
l. completion requirements;
m. program structure;
n. support for students and their learning;
o. criteria for admission;
p. facilities, including laboratories, studios or other specialist resources supporting the program;
q. methods for evaluating and improving the quality and standards of teaching and learning;
r. assessment plan for program learning outcomes;

s. indicators of quality and standards;
t. program matrices or schematic showing:
- the schedule of delivery;
- program learning outcomes mapped to course learning outcomes;
- program learning outcomes mapped to descriptors of the QF*Emirates* for the appropriate program level;
- teaching and learning methods;
- assessment methods.

Annex 11: Joint Degree Programs

In a joint degree program students study at two or more institutions, and upon completion of the program receive a single degree certificate issued by all the participating institutions. A joint degree program is a program that is designed and delivered in conjunction with one or more partner institutions. The partner(s) may or may not be based in the UAE. Typically, a joint degree program will be established to access the partner institution's specialized knowledge and experience.

When delivering a joint program institutions are required to:

a. ensure that each institution in the partnership is recognized and/or accredited as a HEI in the higher education system in which they operate;
b. ensure that institutions offering programs jointly with other institutions based outside the UAE assume primary responsibility for the programs' compliance with the *SPA*, while also meeting the requirements of the partner institutions;
c. ensure that each partner HEI should be legally allowed to offer the joint program, even if the joint degree is to be awarded by a partner;
d. ensure that the joint program is offered in accordance with the legal frameworks of the relevant (sub) national higher education systems involved in the partnership;
e. demonstrate that faculty of partner institutions teaching in joint degree programs have the experience and qualifications as required by the *SPA;*
f. allow no more than fifty percent (50%) of the program curriculum to be delivered by the partner institution;
g. ensure that if the courses offered by the partner institution are delivered through e-learning or distance teaching, an appropriate portion of each course is delivered face-to-face by a qualified faculty member;
h. have a *Quality Assurance Manual*, or a section within a *Manual*, that clearly describes how all quality assurance activities are integrated into a single system to continually appraise and improve the institution as a whole, and specifically any joint programs;
i. ensure that faculty of the partner institution are involved in program development and evaluation, utilizing both formal and informal mechanisms to gain information to evaluate the program;
j. ensure that students visiting a partner institution, as part of the joint degree program, are afforded the same learning experience and safeguards as detailed in the *SPA*;
k. establish policies and procedures to ensure that visiting faculty from main campuses and partner institutions are available for an adequate period of time on campus to facilitate an appropriate level of interaction with students outside of the classroom;
l. ensure that the joint degree is awarded in accordance with the legal frameworks governing the awarding institutions, and is recognized as a joint degree in the higher education systems of the awarding institutions.

Annex 12: Guidelines for Good Practice in Internships or Practicums

An institution that incorporates internships, practicums, cooperative placements, and similar experiential learning into some or all of its curricula is required to:

a. publish an *Internship Manual* that brings together the institution's policies and procedures relating to internships and other experiential learning;

b. ensure that official agreements are in place for all internships and other forms of experiential education, and that agreements are signed by both parties in advance of placement of students, kept current and are on file. Such agreements should define the responsibilities of the institution, the student and the provider or placement site;

c. ensure that the internship is of sufficient duration that allows a student to meet the internship (course) learning outcomes;

d. ensure that the providers or external supervisors commit to enabling students to meet their learning outcomes, through provision of a job description and suitable assignments throughout the duration of the internship;

e. ensure that students enrolling in internships or other forms of experiential education have access to a syllabus which provides clear guidance as to the expectations for student learning, student assignments, student evaluation and faculty/provider supervision;

f. ensure that the internship (course) learning outcomes are articulated and in writing, and at an appropriate level aligned with the requirements of the QF*Emirates*;

g. have an effective mechanism for matching students with potential providers;

h. provide an orientation for students as to the skills, behaviours and knowledge which they need to succeed in the work environment;

i. ensure that prospective internship or experiential education sites:
   - are safe and reputable environments for students;
   - provide pertinent work experiences;
   - meet all national employment and other relevant laws and regulations;

j. have a designated office or an individual who is specifically given responsibility for internships and other forms of experiential learning. The office may be central for the entire institution, or it may be departmentally or programmatically centered;

k. have effective means for monitoring the employment site and gathering feedback from students and the provider;

l. ensure that there is faculty or academic supervision from the department or program offering the internship;

m. delineate the responsibilities of the faculty or academic supervisor, the provider and the student;

n. delineate the academic credit, if any, to be earned, the placement of the internship in the curriculum or program of the student, the methods used to evaluate the internship and whether a grade will be assigned or a pass/fail grading mechanism used;

o. provide an opportunity for students to reflect, in writing and/or through an oral presentation, on their achievement of the course learning outcomes;

p. ensure that the internship or experiential learning course, as a whole, is regularly evaluated, in terms of both student experiences and employer satisfaction, and

that the results of these evaluations are used to improve the course and attendant program(s).

Annex 13: Course Syllabi

For each course offered, an institution must provide a comprehensive syllabus, containing sufficient information to ensure that:

a. those involved in curriculum development understand any pre-requisites or co-requisites, and the learning outcomes of the course;
b. students and external reviewers understand the course's contribution to the program and its connection to other courses in the curriculum;
c. students who take the course understand what they need to have achieved in order to take the course, what will be expected of them during the course, and what outcomes they will have achieved having successfully completed the course;
d. sufficient information on the course is available for the purposes of course and program review (program effectiveness).

Each course syllabus should include:

a. course title and course code/number;
b. credit hours (or equivalent);
c. pre-requisites (if any) and co-requisites (if any);
d. name and contact information of instructor(s);
e. brief course description (as in the *Catalog*);
f. intended learning outcomes of the course;
g. linkage and contribution of course learning outcomes to the program outcomes;
h. course topics and contents on a week-by-week basis, including sessions for assessments;
i. scheduling of laboratory, studio, external visits and other non-lecture sessions, including online sessions, as appropriate;
j. information on out-of-class assignments with due dates for submission;
k. methods and dates of examinations and other student assessments, including the relative weight of various assessment elements in determining the course grade;
l. teaching methods, including any use of online instruction;
m. course texts and recommended readings listed in standard bibliographic detail, and any other learning resources.

Annex 14: Intensive Courses and Block Delivery

1. Intensive Mode Delivery

The term "intensive mode of delivery" refers to courses that are offered over a shorter duration than the generally accepted period of a standard semester (15 to 17 weeks) or quarter (9 to 12 weeks). These may include: a short course of a few weeks' duration, or courses offered in a shortened term (such as a summer session).

In instances where an institution wishes to deliver a course or program in a mode substantially different from the delivery mode approved at the time of the most recent program review, it will be required to submit a request to the CAA for approval of a Substantive Change. The request must comply with the provisions of *Annex 17: Substantive Change at Program Level*.

When a course is offered via an intensive mode, the institution must ensure that:

  a. delivery is underpinned by sound pedagogical principles;
  b. the accredited course syllabus is adhered to;
  c. both instructional (class- or laboratory-based) and independent learning hours (cumulatively – total course learning hours) are met;
  d. the delivery pattern allows for sufficient time for:
  - class preparation;
  - reflection;
  - analysis;
  - assessment;
  - achievement of course learning outcomes;
  e. wherever possible, the students sit the same assessment as their counterparts who do not study the course via an intensive mode. Where this is not practical, internal moderation and quality assurance systems must be sufficiently robust to ensure parity of rigor and standards for all students;
  f. students are fully informed of any modifications to course/program delivery that may have been made;
  g. all student services such as LRC/Library access and support, IT laboratories and IT support, catering, health services and recreational facilities are available during the intensive delivery period.

Given the considerations listed in (d) above, some courses would not be suitable for an intensive mode of delivery, for example internships and major student projects.

2. Summer Delivery

The opportunities for, and the duration of, course delivery during summers must take account of the need for student reflection on course learning materials and full understanding of topics, supported by research and independent studies.

A summer teaching session must be a minimum of 6 weeks in duration. Institutions are reminded that a course offered in such a period of delivery constitutes a course offered in intensive mode.

The CAA's policy is to allow institutions to offer summer courses without specific application to the CAA for prior approval, but the pattern and intensity of course delivery should be articulated and approved by the CAA as a general model to be applied by the institution in its summer session.

The CAA, however, provides specific requirements regarding courses offered in summer sessions:

a. the number of credit hours/units that a student can take during a summer session of six weeks is limited to six credits;
b. institutions are required to comply with conditions a-g listed above under Intensive Mode Delivery.

3. Block Delivery Including Weekends

Condensing classroom contact into a shortened period, for example a weekend, is often referred to as 'block delivery'. Students attending at weekends are often part-time, working students taking a limited selection of courses each semester. A course using block delivery may or may not involve the shortening of the semester or quarter, and therefore does not necessarily qualify as intensive mode delivery. Nevertheless, institutions using block delivery are required to comply with conditions a-g listed above under Intensive Mode Delivery. The mode of delivery should be approved by the CAA. A Substantive Change request to introduce block delivery must comply with the provisions of *Annex 17: Substantive Change at Program Level*.

The following class contact limitations are imposed on block delivery:

a. a two-day block or weekend delivery period cannot exceed 9 class contact hours for undergraduate programs;
b. a two-day block or weekend delivery period cannot exceed 6 class contact hours for graduate programs.

Institutions must be mindful of the total learning hours required, and allow sufficient time between block delivery classes for reflection and assessment. In addition, there must be a reasonable limitation on the number of courses that student are permitted to take during block delivery.

Block delivery of courses must be included in the calculation of a faculty member's workload.

Annex 15: Courses Taught Through e-Learning

1. Planning

The institution has developed and implemented an e-learning strategy that:

a. identifies the role of e-learning in the institution's short-term and long-term strategic plans, and its alignment with the educational mission;
b. identifies responsibility for the oversight, development, evaluation and support of the institution's e-learning program;
c. is developed with the participation of relevant stakeholders;
d. is approved by the governing body;
e. is reviewed annually by program leadership, informed by direct and indirect measures of performance that result in a process of continuous improvement.

2. Support Sites for Campuses of UAE Institutions in Other Countries

a. A licensed institution that makes use of physical sites, such as tutorial or examination centres, in foreign countries to support the delivery of e-learning programs and courses must obtain approval from the CAA for those sites before enrolling e-learning students who will use them.
b. If an e-learning support site is located in a foreign country, it is expected to comply with requirements of relevant authorities in the host country.

3. Learning Resources

The institution:

a. develops and maintains an e-learning environment, consisting of a learning or course management platform, related communications tools (e.g., for e-mail, videoconferences or blogs), and support resources/services (e.g., electronic library resources), which is adequate to meet the demands of its e-learning programs and courses, and of the faculty members and students involved in e-learning;
b. maintains sufficient internet bandwidth, server capacity and staff to support the operation of the e-learning environment;
c. provides training to faculty, staff and students involved with e-learning programs and courses in the operation of the e-learning platform;
d. ensures that faculty members teaching in e-learning courses have the necessary equipment, software, communications tools and internet connectivity and bandwidth to develop and deliver the courses they teach, and to communicate with students;
e. provides sufficient technical support to students and faculty to ensure the effective delivery of e-learning programs and courses;
f. ensures that all e-learning students have access at all times to the e-learning environment, and to library and other learning resources accessible through it.

4. Learning Environment

The institution:

a. demonstrates that it has short- and long-range plans for the evaluation of performance, upgrading and enhancement of the e-learning environment;
b. provides an equipment and software replacement plan and associated budget for the e-learning environment.

5. Budgeting for Programs

The institution clearly specifies in its budget the financial arrangements relating to e-learning programs and courses, including anticipated revenues and expenditures attributable to its e-learning operations.

6. Program and Course Delivery

The institution:

a. ensures that programs and courses delivered face-to-face or through e-learning/blended learning have the same learning outcomes, and require equivalent rigor and quality of student performance;
b. designs its e-learning programs and courses to facilitate interaction among students and between students and faculty, in either asynchronous or synchronous modes as appropriate, and maintains an effective and reliable e-learning environment to support this interaction;
c. ensures that all students enrolled in e-learning courses, regardless of their geographical location, benefit from effective access to learner support, including academic advising and tutors;
d. assures the integrity of student work in the e-learning environment by demonstrating the steps taken to limit the possibility of fraud and academic dishonesty, including, where appropriate, limited residency requirements, proctored examinations and effective means of authenticating student work;
e. ensures that sites used as examination centres have rigorous measures in place to:
   • ensure the authenticity of the test taker;
   • maintain the security of the test;
   • employ up-to-date administrative measures and technological advances to prevent fraud and cheating;
f. maintains appropriate class sizes (student/faculty ratios) in e-learning courses that ensure the effective participation of all students, and for interaction among students and between students and faculty;
g. evaluates the effectiveness of e-learning programs and courses according to its program of institutional research;
h. assumes responsibility for the quality of e-learning courses provided by partner institutions or other organisations, and has procedures in place for the evaluation and review of such courses.

7. Faculty

The institution:

a. ensures that full-time and part-time faculty teaching in e-learning programs meet the requirements of *Standard 5* in relation to their qualifications, training and experience;
b. ensures that a program delivered by e-learning has core faculty and support staff who are resident full-time employees;
c. ensures that decisions concerning e-learning curricula and program oversight involve faculty who are qualified both academically, to teach the subject, and technically, through e-learning skills;
d. provides faculty with support in instructional design and development of course materials, including, as appropriate, graphic designers, multimedia specialists, programmers, librarians and others;
e. clearly specifies to faculty the expectations for faculty engagement relating to online teaching and student support;
f. adjusts faculty members' workload appropriately to account for time spent in developing and delivering e-learning course or program materials, and in on-line interaction with students;
g. provides opportunities for professional development for e-learning faculty, focused on advances in e-learning pedagogy and technology;
h. ensures that e-learning faculty located off campus participate in the development and evaluation of e-learning programs and courses.

8. Preparation for Courses

An institution offering courses by e-learning should offer remedial instruction or training programs to enrolled students who lack sufficient information technology skills to succeed in the course.

9. Admission to Programs

Institutions delivering programs or courses wholly or partly by e-learning ensure that:

a. students entering the programs are informed of the nature and potential challenges of learning in an online environment;
b. students are evaluated to determine whether they have the necessary information technology skills to succeed in an e-learning program;
c. students are informed as to the minimum requirements for hardware, software and internet connectivity for the program or course;
d. students are informed of the expectations for their participation in the program's or course's online community of learners, including interacting with other students and with faculty or tutors, and the channels through which interaction takes place;
e. students are aware of the library and other learning resources available to e-learners, and as necessary receive training in their use;
f. students are aware of all support services relevant to e-learning available to them, to include tutoring, academic advising and financial aid;

g. students are informed as to what portions of the program require their physical presence, if any, including face-to-face course meetings, tutorials or help sessions, field activities and examinations; and the date, time, location and arrangements provided for these.

10. Student Records

The institution documents that it has appropriate security measures to protect the integrity and confidentiality of student data and all course data and analytics within the e-learning platform, and of student information maintained within the comprehensive e-learning environment.

11. Student Services

The institution:

a. makes all its student services, including career planning services, available to students enrolled in e-learning programs and courses, adapted when necessary to students' local context;
b. ensures that students enrolled in e-learning programs and courses can access institutional publications, including the *Catalog* and *Student Handbook*, and official institutional communications from the administration;
c. invites students enrolled in e-learning programs and courses to participate whenever possible in campus events, student activities and student clubs or organizations.

12. e-Learning Manual

An institution which offers academic programs and courses through e-learning must develop and maintain an *e-Learning Manual,* which must include the following:

a. an organization chart illustrating the responsibility for e-learning programs and courses, including materials development, program delivery, learner support and evaluation;
b. a statement of faculty roles and responsibilities in the development and implementation of e-learning programs and courses;
c. information on the mode of delivery adopted by the institution for e-learning programs and courses (e.g., wholly online or blended mode; synchronous or asynchronous interaction among learners; media used for course delivery);
d. procedures and processes relating to the continuous development of e-learning materials for the institution, including overall project management, instructional design, content creation, design of assessments, etc.;
e. assessment policies relating to e-learning, focused on maintaining the integrity of student work in the e-learning environment;
f. characteristics of the e-learning environment, including both its hardware and software components;
g. the location of physical sites established to support delivery of e-learning programs and courses;
h. information on the systems and procedures for security of testing and authentication of examinees;

i. copyright and intellectual property policies relating to e-learning materials developed by or for the institution.

Annex 16: Course Files

Institutions maintain updated files for each course of instruction. These must contain sufficient information on each presentation of the course so that the faculty or other persons who evaluate program effectiveness can determine whether the course is meeting its learning outcomes, whether the course is being delivered in accordance with the syllabus, and whether changes to the course are appropriate.

Course files must be readily accessible to faculty and include the following information,

a. syllabi for the current and most recent previous offerings of the course, including any summer session offerings;
b. copies of all instructor teaching materials;
c. copies of all assessment instruments;
d. instructor worked answers and marking schemes for all assessment instruments;
e. examples from across the range of student performance of graded responses to all assessment instruments;
f. student attendance data;
g. a comprehensive instructor review of the presentation of the course, covering:
   - appropriateness of the course learning outcomes;
   - extent to which the syllabus was covered;
   - extent to which learning outcomes were met (with evidence);
   - appropriateness of textbooks and other learning resources;
   - appropriateness of assessment instruments in relation to learning outcomes;
   - appropriateness of the balance of assessment;
   - appropriateness of prerequisites;
   - general comments on any problems encountered with the course;
h. quantitative analysis of student performance including individual student grades, both cumulative and for each assessment, and grade distribution;
i. summary of student feedback on the evaluation of the course;
j. instructor's proposals for any course improvements;
k. summary of actions taken to improve the course.

Annex 17: Substantive Change at Program Level

An institution must seek approval from the CAA for changes to its educational programs that significantly modify a program's key characteristics: its goals, intended learning outcomes, basic structure and mode or place of delivery.

1. Notice to the CAA: Before the Change

An institution considering a change to one or more of a program's key characteristics (identified above) should notify the CAA early in its planning and meet with an officer of the CAA shortly thereafter. This provides an opportunity for the CAA to counsel the institution about the potential impact of the change to its status, if any, and the procedures that need to be followed.

The CAA will determine the type and extent of review which the change warrants, whether it is to be an on-site review by a member of the CAA or involve external reviewers. Some changes are sufficiently limited in nature and scope that they may be approved with minimal review, or distance or desk review; however, others may require an extensive on-site review.

2. Notice to the CAA: Having Initiated the change

The institution must give the CAA a report at least four months before the date on which the change is to be implemented. The report should provide the necessary information and analysis in as concise a presentation as possible. A one-page executive summary should be attached. The report must include:

a. a rationale for the change, with evidence of the need for it, and authorization by the governing body and other relevant parties;
b. a detailed description of the proposed change;
c. any additional faculty or professional staff and other personnel needed to implement changes, and their qualifications;
d. any additional Learning Resource Centre materials, and other learning resources and facilities required by the change;
e. any physical plant expansion and additional equipment required by the change;
f. projections of other needs over the next several years, including estimates of the additional costs;
g. evidence that the institution has adhered to *Annex 15: Courses Taught Through e-Learning* if the proposed change involves offering e-learning programs or courses.

3. Evaluation by the CAA

When it receives the report, the CAA will review the change, determining the scope and type of evaluation required. The CAA may decide to:

a. approve the change without conditions;
b. approve the change with specified conditions;
c. require an on-site visit by the CAA or an external team;
d. defer consideration;
e. deny the proposed change.

4. Notification and Status

Only after the CAA has notified the institution that the change is acceptable may it assume that the change has not affected, and will not affect, its license and registration or its program accreditation. If an institution proceeds with the change without CAA approval, it risks jeopardizing its status.

Annex 18: Adjunct Clinical Faculty

In Schools/Colleges of medicine, dentistry or other health sciences, adjunct clinical faculty are often appointed to supplement the full-time teaching faculty. Adjunct clinical faculty are normally qualified health professionals of appropriate distinction, whose primary employment is external to the academic institution.

Responsibilities of Adjunct Clinical Faculty

a. Teaching and training of students and interns at the institution, and in its affiliated hospitals and health facilities.
b. Consulting or engaging in academic activities that enhance scholarship and professionalism within the institution.
c. Supporting the mission, goals, policies and activities of the institution.
d. Adjunct clinical tutors and clinical lecturers are expected to help in demonstrations and to provide assistance to clinical faculty in their teaching, training and academic activities.

Ranks and Qualifications

The criteria for the appointment of adjunct clinical faculty are based on professional qualifications, academic and educational experience, and clinical experience.

1. Adjunct Clinical Tutor

Qualification:

a. Bachelor's degree in the health profession in which the faculty member is teaching.

Clinical experience:

a. at least three years post-internship experience in the concerned health profession.

2. Adjunct Clinical Lecturer

Qualification:

a. Bachelor's degree in the health profession in which the faculty member is teaching;
b. Postgraduate professional degree (Master's or equivalent) recognized by the institution, Ministry of Health and Prevention (MoHP), and MoE, in a relevant specialty.

Clinical experience:

a. at least five years clinical experience;
b. at least three years holding a Specialist position or equivalent.

3. Adjunct Clinical Assistant Professor

Qualification:

a. highest professional postgraduate degree and professional recognition from professional medical bodies such as the Royal Colleges of the UK, Ireland, Canada, Australia, and New Zealand (e.g., MRCP, FRCS, MRC Psych, FFARCS, MRCOG, FRCR), or
b. terminal medical degree and certification by a US medical board; or
c. terminal medical degree and certification by the Arab Board of Medical Specialization; or
d. other terminal qualifications recognized by the institution as equivalent to the PhD in Basic Sciences, which allow the holder to be appointed as a Consultant in the MoHP or other recognized health care organizations.

Academic and educational experience:

a. previous experience in teaching either undergraduate or postgraduate level courses in Medical/ Dental/ Health Sciences.

Clinical experience:

a. at least three years of clinical experience obtained after receipt of the highest professional degree;
b. holder of a Consultant position, or equivalent.

4. Adjunct Clinical Associate Professor

Qualification:

a. same as for Adjunct Clinical Assistant Professor.

Academic and educational experience:

a. at least five years of experience in teaching undergraduate or postgraduate courses in Medical/ Dental/ Health Sciences;
b. contributions to research, evidenced by publishing at least five scientific papers in peer reviewed journals (first author in at least three papers);
c. significant evidence of scholarship at national level.

Clinical experience:

a. at least ten years of clinical experience obtained after receipt of the highest professional degree;
b. at least five years as holder of a Consultant position;
c. excellent clinical reputation at a national level.

5. Adjunct Clinical Professor

Qualification:

a. same as for Adjunct Clinical Assistant Professor.

Academic and educational experience:

a. at least ten years of experience in teaching undergraduate or postgraduate courses in Medical/ Dental/ Health Sciences;
b. contributions to research, evidenced by publishing at least eight scientific papers in peer reviewed journals (first author in at least five papers);
c. significant evidence of scholarship at national/international levels.

Clinical experience:

a. at least fifteen years of clinical experience obtained after receipt of the highest professional degree;
b. at least ten years as holder of a Consultant position;
c. excellent clinical reputation at a national, regional and international level.

Annex 19: Equivalent Scores on Approved Tests of English Language Proficiency

English Language Proficiency Requirements for Admission

Sections 6.2 (Undergraduate Admission) and 6.3 (Graduate Admission) of the *Standards* mandate that original, valid certifications of test scores of English language proficiency are required for admission to undergraduate or graduate programs. The certifications of test scores on national or international tests approved by the CAA, as shown below, must be issued as valid originals by the testing organization upon request by the student, specifying the college or university where the certifications are to be forwarded.

Requirements

a. For undergraduate programs taught in English, a minimum EmSAT score of 1100, TOEFL score of 500 PBT, 173 CBT, 61 iBT, 5.0 IELTS, or their equivalents on another standardized nationally- or internationally-recognized test that is approved by the MoE.
b. For certain undergraduate programs as specified by the CAA and taught in Arabic, such as Mass Communication, a minimum EmSAT score of 950, TOEFL score of 450 PBT, 4.5 IELTS, or their equivalents on another standardized nationally- or internationally-recognized test that is approved by the MoE.
c. For graduate programs taught in English, a minimum EmSAT score of 1400, TOEFL score of 550 PBT, 6.0 IELTS, or their equivalents on another standardized nationally- or internationally-recognized test that is approved by the MoE.
d. For some graduate programs taught in Arabic, a minimum EmSAT score of 950, TOEFL score of 450 PBT, 139 CBT, 51 iBT, 4.5 IELTS, or their equivalents on another standardized national or internationally-recognized test that is approved by the MoE.

MoE Approved Tests and Equivalent Scores

The following tests and related scores are approved by the MoE.

Table of Equivalent Scores on Tests of English Language Proficiency*

EmSAT	TOEFL	IELTS
950-1075	450 (139 CBT, 51 iBT);	4.5
1100-1225	500 (173 CBT, 61 iBT)	5.0
1250-1375	530 (197 CBT, 71 iBT)	5.5
1400-1525	550 (213 CBT, 79-80 iBT);	6.0

* Note: Score equivalents are provided by testing organizations.

Contact Information for Parent Testing Organizations

The MoE does not provide information about testing or test centres. This information may be acquired by contacting the parent test organizations. All questions regarding tests or testing centres should be directed to the appropriate organization.

Annex 20: Recognition of Prior Learning

Institutions which award academic credit for prior learning, commonly known as Recognition of Prior Learning (RPL), do so according to defined and published policies and procedures which have received the approval of the CAA.

RPL regulations apply to all forms of recognition of prior learning, including transfer of academic credit and admission with advanced standing (see *Standard* 6.4). Special requirements apply to the recognition of experiential or non-classroom-based prior learning.

RPL assessments must be of a comparable rigor to those in the delivery and assessment of the institution's own qualifications; must be evidence-based, transparent and accountable; and must be subject to the same quality assurance processes used to ensure the standard and integrity of assessments within the institution.

1. Principles

    a. The evidence provided by the student seeking RPL credit must directly relate to the competency, unit, module, course, or qualification for which credit is sought.

    b. The evidence must show that the student has the knowledge, skill or competency for which recognition and credit is sought.

    c. The evidence must demonstrate that the student has achieved all of the learning outcomes of the course/module/unit for which credit is sought. Partial recognition is not acceptable.

    d. The RPL process must be transparent, provide students with time and support to assemble sufficient evidence and complete an application, and be consistently applied for all students and across all programs, disciplines, units, courses and competencies.

    e. Not more than 50% of the credit for all courses in an individual undergraduate program may be awarded through the RPL process, including credit transfer, and not more than 25% for graduate programs. (See *Standard* 6.4.12 and 6.4.13).

    f. Approval of RPL credit must occur prior to the student's enrolment in the program.

    g. No grades may be assigned for RPL credit granted, nor can RPL credit be used in the calculation of cumulative grade point average (CGPA).

    h. Institutions must adhere to all CAA requirements for admission to all programs as specified in the *SPA*. In no case may RPL policies and procedures substitute for admissions requirements.

2. Forms of Assessment

The forms of assessment used in an RPL process must include challenge exams and may include the following:

    a. examinations or tests that are used by an institution to assess the achievement of learning outcomes or qualifications in its own programs, modules, courses, or units;

b. a portfolio of evidence which includes documents such as qualification certificates, official transcripts of previous study, official job descriptions or statements of duties and responsibilities, letters of reference from employers detailing a student's relevant skills and experience, or samples or statements of work performed;
c. direct observation of demonstrations of the skill or competence;
d. reflective papers, journal articles or similar documents that relate past learning to the learning or competency outcomes of the course or qualification in which the student is enrolling;
e. reviews of courses/units/modules taken at another provider, to demonstrate achievement of learning outcomes or qualifications 0f the provider's own programs, modules, courses, or units;
f. combinations of any of the above.

3. Assessment Processes

An institution establishing a system for awarding academic credit for prior learning must establish an assessment process that includes the following elements:

a. a list of units, courses, or competencies for which RPL may be awarded;
b. a list of the learning outcomes for each unit, course or qualification;
c. for each unit, course, or competency subject to RPL assessment procedures, the qualifications and experience required of the individual or individuals performing the assessments;
d. a comprehensive and detailed list of the types of evidence that may be submitted with the application for RPL for a particular course, unit, or competency;
e. a detailed application guide for use by students seeking RPL;
f. identification of an administrative unit/RPL Centre within the institution responsible for developing, implementing, managing and recording the results of the RPL process;
g. an outline of the way in which RPL policies, processes and evaluations are subject to the institution's quality assurance procedures.

4. Information and Support for Students

The institution is required to publish in all relevant documents:

a. information and advice to students about the subjects, courses, units and qualifications for which RPL credit can be earned;
b. information for students about how to apply for RPL, who to contact for further information concerning the process, who to contact for support in preparing their application, and information about timelines, appeals processes and fees;
c. an outline of the learning or competency outcomes against which students will be assessed;
d. advice to students as to the nature of the RPL assessment process, the kind of evidence that can be used, the forms in which it can be presented, and, where appropriate, guidelines as to what is considered sufficient and valid evidence;
e. information about administrative processes for receiving RPL applications, administering assessments, recording results, advising students of the outcome, and administering appeals processes.

5. Appeal Process

An institution establishing a system for awarding academic credit for prior learning must include a detailed description of the process for appealing a decision regarding awarding of RPL credit. The description of the process must include:

a. the timelines involved in the appeals process including submitting the appeal, acting on the appeal, rendering a decision and providing information to the student;
b. a detailed description of the elements required to be included in the appeal;
c. information about where to submit the appeal.

Annex 21: Criteria for Teaching Hospitals/Healthcare Units within the UAE

1. Introduction

It is acknowledged that the clinical experiential learning of health professional students may take place in many types of clinical facilities such as local pharmacies, community clinics, private offices, etc. This document addresses only hospitals/healthcare units (HCUs) and is not meant to apply in its entirety to other types of clinical facilities that may be utilized in health professional education.

Teaching Hospitals/HCUs are a critical and important component to the preparation of healthcare providers. Hospitals are focused on patient care, whereas teaching hospitals/HCUs are focused on both education and patient care. Hospitals/HCUs must meet certain criteria which assure that students preparing to be healthcare providers will have adequate supervised learning experiences in the clinical experiential learning of their program of study. This Annex outlines the general parameters for a teaching hospital/HCU, and the standards that must normally be met by a hospital/HCU (whether public or private) to be considered as a suitable clinical learning site.

2. General

a. A teaching hospital for medical students must have at least four (4) qualified departments, two of which must be in the 'core' specialties of (i) medicine, (ii) obstetrics/gynecology, (iii) pediatrics, (iv) surgery, (v) family medicine or (vi) psychiatry, and have clinical resources sufficient to ensure breadth and quality of ambulatory and bedside teaching of its medical students and interns. On the other hand, a specialized hospital or HCU may have one qualified department in the core specialties of medicine, but is expected to maintain clinical resources sufficient to ensure breadth and quality of ambulatory and bedside teaching of its medical students and interns.

b. A teaching hospital for other healthcare providers must have departments that offer the breadth of clinical experiences that is essential in the education of the student.

c. A teaching hospital should be in geographic proximity to the HEI where the health professional program is housed, to facilitate the integration of basic and clinical science in the curriculum.

d. A teaching hospital will normally have adequate and sufficient facilities and staff to receive health professional students from one or more HEIs. This will encourage and facilitate student-to-student mentorship and collegial learning. The maximum number of students that the hospital/HCU can receive will depend on the capacity of the facilities, and the dedicated faculty assigned as instructors, mentors or preceptors. Clinical faculty are defined as hospital healthcare professionals who are responsible for both patient care and student education.

e. A teaching hospital/HCU must have an organizational structure that supports health professional education and patient care, and sufficient resources and commitment to excellence meeting international standards in both. An ethical,

professional and educational environment in which curricular requirements, scholarly activity and general competencies can be met must be demonstrated.

f. A teaching hospital/HCU must demonstrate regular assessment of the quality of the clinical experience, the performance of clinical faculty and the use of outcome assessment results for program improvement.

g. To be considered as a suitable clinical learning site, the hospital/HCU must demonstrate the necessary educational, financial and human resources to support its educational mission.

3. Cooperative Agreement

A written, signed cooperative agreement between each respective HEI and the hospital/HCU must exist and be made available to the MoHP and the MoE. At a minimum, the agreement must include the following provisions.

a. The educational programs for health professional students, including interns, remain under the control of the HEI.

b. The evaluation of health professional students is shared between the HEI and clinical faculty, while the evaluation of medical interns is kept under the control of clinical faculty.

c. The roles and responsibilities of each party related to the educational program must be defined.

d. There must be an orientation program for clinical faculty to become familiar with the educational objectives of the health professional program, including the clinical education objectives and the internship, and how the adjunct clinical faculty will be prepared for their roles in teaching and evaluation of health professional students.

e. The appointment/assignment of adjunct clinical faculty, and their duties and responsibilities in the clinical education program and in curriculum review for the health professional students, must be delineated.

f. There must be a commitment to ensure that adjunct clinical faculty have sufficient time in their working schedule to facilitate the education of health professional students and interns.

g. The agreement must specify the evaluation process for an adjunct clinical faculty member to continue to be associated with the health professional education program, to include, at a minimum, an annual assessment conducted by both the hospital/HCU administrator assigned to oversee the clinical education program and the responsible administrator at the HEI who oversees the health professional education program. This assessment should be informed by the students' evaluations of the adjunct faculty member. A remediation plan for those with inadequate performance must be included.

h. The financial obligations of each party to the training of health professional students and interns must be delineated, including benefits and payments to adjunct clinical faculty, if appropriate.

i. The responsibility for treatment and follow-up of health professional students and interns who are exposed to infectious or environmental hazards and other occupational injuries must be stated. This includes a mechanism to ensure the physical health (including immunization status) of health professional students before entering the hospital.

j. The agreement must specify who is responsible for liability insurance for health professional students and interns.
k. The rights and responsibilities of the students must be delineated, including policy for addressing student grievances.
l. The rights and responsibilities of adjunct clinical faculty in relation to the HEI must be delineated; for example, honorary appointments, library and database access, etc.
m. The agreement must facilitate adjunct faculty engagement in professional development, particularly in teaching and learning, and in assessment.

4. Additional Hospital/HCU Requirements

a. The hospital/HCU must maintain a Wide Area Network (WAN) for patient and MoHP administrative purposes, with adjunct clinical faculty, health professional students and interns having access on a 'need to know' basis. Policies must be in place to regulate the access of adjunct clinical faculty, concerned staff, health professional students and interns to patients and their records.
b. The hospital/HCU must develop and maintain a medical library, accessible to the health professional students, interns and adjunct clinical faculty involved in the health professional education programs at the hospital/HCU.
c. The hospital/HCU must respect the privacy of health professional students and interns and adjunct clinical faculty.
d. The hospital/HCU must undertake to provide intern positions for all medical graduates of the HEI, to allow them to complete their training according to the regulations of the MoHP.

5. Administration of Hospitals/HCUs

a. There must be a designated officer who has authority and responsibility for the oversight and administration of the hospital/HCU program, who works in conjunction with the designated HEI officer in charge of health professional education. This individual must have appropriate qualifications and experience, and responsibility for monitoring and advising on all aspects of the clinical experiences at the hospital/HCU.
b. The hospital/HCU must have written policies and procedures in place for health professional students and interns, to guide their role, responsibility and authority while in the hospital/HCU. These should include, but are not limited to the following: duty hours that support the physical and emotional well-being of the students; promotion of an educational environment that facilitates patient care; disciplinary regulations and grievance processes; and regulations covering substance abuse, sexual and other forms of harassment, etc.
c. The hospital/HCU must have in place a quality improvement process to assess the hospital's performance and drive necessary improvements.
d. The hospital/HCU must have in place a Continuing Professional Education Program, accredited by MoHP, which is accessible to adjunct clinical faculty, health professional students and interns as appropriate.
e. The hospital/HCU must demonstrate access to appropriate and confidential counseling and medical and psychological support services for health professional students and interns.

6. Adjunct clinical faculty

The hospital/HCU must appoint and retain a broadly experienced and diverse adjunct clinical faculty who can serve as role models, are well trained and are enthusiastic about teaching.

a. Clinical faculty must meet the qualification and experience requirements for their appointment set by the MoE (see *Annex 18: Adjunct Clinical Faculty*).
b. There must be at least one clinical specialist of senior rank, and an appropriate number of specialist health care providers with appropriate qualifications and experiences, for a department to be designated for clinical education.
c. A hospital/HCU must indicate the numbers of practicing healthcare providers, by specialty, that are qualified to be awarded clinical faculty status and their respective assignable ranks. This must be confirmed by the HEI.
d. Criteria to be used to judge adjunct clinical faculty should be based on the following:
- ability to teach, including having participated in a teaching program to understand new methodologies for practice-based education, feedback and evaluation, or a commitment to participate in a teaching methodology program organized by the HEI;
- an appropriate ongoing level of research/scholarly activity;
- lifelong learning through CME/CPD programs;
- a minimum of five (5) years clinical experience that evidences effective patient care.

7. Physical Facilities

A hospital/HCU that serves as a site for health professional students or interns must have appropriate support space, instructional facilities and information resources.

It must provide documentation on the following:

a. sufficient areas for student study, based on numbers of health professional students and interns;
b. sufficient teaching space (classrooms) for the anticipated numbers of health professional students and interns;
c. sufficient lecture, large group discussion and conference facilities for health professional students, interns and clinical faculty;
d. sufficient and appropriate space within each department for small group meetings;
e. a well-maintained medical library of sufficient size and breadth, and with sufficient information resources, to support the education program and other missions, including access to leading biomedical, clinical and other relevant periodicals, either physical or electronic;
f. sufficient numbers of computers equipped with appropriate education software and self-instructional materials, designated for health professional students and interns, that allow access to the Internet;
g. sufficient communication resources and IT support for the education program and other missions;

h. sufficient training equipment for the educational objectives of the health professional education program to be met;

i. sufficient numbers of on-call rooms for clinical students and interns;

j. sufficient numbers of observation/examination/operatory rooms for health professional students and interns;

k. secure space, e.g. lockers, for health professional students and interns to store personal belongings;

l. patient support services, such as pathology and radiology services, intravenous services, phlebotomy services and laboratory services appropriate to and consistent with educational objectives and patient care, that support timely and quality patient care;

m. a medical records system that documents the course of each patient's diagnosed illness and care, which is available at all times and adequately supports quality patient care, quality assurance activities and sufficient resources for scholarly activity;

n. pagers and uniforms for the health professional students and interns, if appropriate;

o. available food service for health professional students and interns.

8. Patient Data

The hospital/HCU must perform an analysis and summary of patient data, which demonstrates that health professional students and interns will get appropriate exposure and experience to patients.

a. The hospital/HCU must demonstrate a sufficient number of, and types of, patients in terms of acuity, age, gender and nationality for the hospital as a whole and for each department.

b. The hospital/HCU must provide data on admissions, both elective and emergency.

c. The hospital/HCU must provide data on the average number of admissions to each department on a daily basis.

d. The hospital/HCU must provide the numbers of beds in the hospital and in each department. This must be accompanied by patient occupancy data.

e. The hospital/HCU must provide data on the average number of outpatient and emergency visits for the previous six (6) months.

f. The hospital/HCU must provide data on the average number of surgical cases, both major and minor, for the previous six (6) months, by type of surgery.

g. The hospital/HCU must provide data on the average number of lab and radiology requests for the previous six (6) months.

h. The hospital/HCU must ensure security and confidentiality of patient records, and that appropriate and adequate provisions are made for backup of all patient records.

9. Additional HEI Requirements

a. The HEI must provide expected outcomes for the clinical experiences of its students.

b. The HEI must provide and maintain specialized teaching equipment for the health professional education program and the intern program.

c. The HEI must provide and maintain an independent and physically separate IT network as part of the institution's WAN, to provide access to its library and online resources and learning materials.

d. The HEI must make available to the hospital/HCU its campus facilities for conferences and exhibitions.

e. The HEI must cooperate with the clinical faculty to undertake joint research of common interest, providing opportunities for students to also engage in the research process.

f. The HEI may appoint senior academics who will also be clinicians in relevant disciplines, who also meet the MoHP requirements for appointment, to "top up" designated health care providers in the hospital/HCU, so as to designate a department as meeting criteria for designation as an approved department to fulfil the needs of health professional students and interns.

Annex 22: Website Content

Institutions are expected to maintain a public website that includes information on the organization and structure of the institution, and its portfolio of programs and services. The content of the website is sufficient for all stakeholders, particularly prospective students and their families, to make informed decisions on their choice of higher education institution. The following information at institutional and program levels is considered to be the minimum that should be provided on the website:

1. **Institutional level**

    a. brief introduction to the institution;
    b. Vision and Mission;
    c. Goals and Objectives;
    d. information on the governing body;
    e. information on the senior management team;
    f. organization chart;
    g. current and previous *Catalog*(s);
    h. *Student Handbook*;
    i. academic calendar;
    j. admission requirements;
    k. information on General Education;
    l. student services and facilities;
    m. organizational activities and news;
    n. information on branch campuses or campuses in other countries, if applicable;
    o. oontact information and location;
    p. date of last website update.

2. **Program level**

    a. list of programs offered and local accreditation status;
    b. international accreditation (if applicable);
    c. for each program:
        - chair/program coordinator;
        - program learning outcomes;
        - curriculum structure, credit hours and graduation requirements;
        - study/guidance plan;
        - course descriptions'
        - cost of studying in the program;
        - information about faculty serving the program (name, rank, highest qualification and name of awarding institution, major/specialty).

Annex 23: Glossary of Terms

Because the UAE has an international mix of HEIs, and because those institutions reflect different traditions (for example, traditions of the United Kingdom, Australia, India, Canada, or the United States as well as the UAE), there can at times be confusion over the meaning of terms. This Glossary is provided to help UAE institutions better understand the common meanings of these terms as applied by the MoE.

Institutional Names

An institution's name should accurately convey its scope and type. A national name should not be included in an institution's title as a marketing tool. Such names imply that the institution has active and formal affiliations and follows the educational norms of another nation's institutions of higher education. The public thus expects that an institution called "British" or "American," for example, is comparable in most ways to the academic institutions of those nations, and that credits and degrees earned would be transferable to and/or recognized by institutions in the other country.

1. University
A large, diverse institution of higher education and research that offers both undergraduate and graduate degrees. Universities are typically composed of a number of *colleges* or *schools* devoted to the study of closely related disciplines or a single discipline, such as the College of Engineering or the School of Public Health.

2. College
A smaller institution of higher education typically focused on undergraduate or vocational education, although some colleges offer a limited range of graduate programs. *College* is also a term for a unit within a university, synonymous with a *Faculty*, such as the College of Business Administration or the Faculty of Business Administration.

3. School
The term *school* may refer to a unit within a university, as noted above, or it may refer to an educational establishment that offers education at a secondary or lower level, such as the British School or the Indian School.

4. Institute
An *institute* is an organization created for a specified purpose, usually research or the promotion of a cause. An educational institute tends to be usually devoted to defined technical fields.

5. Academy
In higher education the term *academy* is used for a post-secondary educational institution devoted to a single field of study, such as an academy of arts, military academy, or police academy. The term also may refer to an establishment offering education at the secondary or high school level.

6. University College
The term *university college* has many different meanings in different countries and in different contexts. In the US, a university college provides continuing or adult

education, or serves as the academic home for lower division undergraduate students. In Canada, the UK, and elsewhere the term *university college* may be applied to a constituent college of a university or to an independent institution of higher education.

Qualifications/Degrees/Academic Awards

The Commission recommends that UAE institutions follow the practice typical of the English-speaking world in naming qualifications. The following are the most common qualifications offered, and are referred to in the UAE's National Qualifications Framework (QF*Emirates*).

Undergraduate qualifications

1. Associate Degree/Diploma (QF*Emirates* Level 5)
"Associate Degree" and "Diploma" are synonymous in the UAE, although the title of Diploma is often used for strongly vocational qualifications. An Associate Degree/Diploma usually requires a minimum of two years of full-time study, with a minimum of 60 semester credits (or equivalent) and a maximum of 72 semester credits (or equivalent). In the UAE, a common degree title is "Associate Degree in …" or "Diploma in …", where the name of the relevant academic field is inserted. Elsewhere, typical degrees include the AA, Associate of Arts; AS, Associate of Science; AOS, Associate of Occupational Studies; ABA, Associate of Business Administration; and AGS, Associate of General Studies.

2. Higher Diploma (QF*Emirates* Level 6)
A Higher Diploma usually indicates a vocational program of study of three years in a specialized field. While credit requirements may vary, most Higher Diploma programs will require a minimum of 90 semester credits (or equivalent).

3. Baccalaureate or Bachelor's degree (QF*Emirates* Level 7)
In the UAE, a Bachelor's degree normally requires at least four but no more than five years of full-time study, with a minimum of 120 semester credits (or equivalent). The maximum number of hours may vary, but many Bachelor's degrees in professional fields, such as engineering or dentistry, require five years of study and at least 150 semester credits (or equivalent).

The most common undergraduate degrees are the Bachelor of Arts and the Bachelor of Science. Many institutions typically award the BA for academic programs in the humanities, and the BS (or BSc) for programs in areas such as mathematics and the natural or physical sciences. In other institutions the BA is typically awarded for those programs which emphasize language, literature and theory, while the BS is awarded in those disciplines which are more quantitative in nature. Some institutions award the BA for all academic (rather than pre-professional) subjects. Institutions that offer professional training, such as nursing or accounting, often reserve the BS degree for these subjects. In awarding a baccalaureate degree, an institution typically awards a BA in English or a BS in Biology, not a Bachelor of English or a Bachelor of Biology.

Other common bachelor's degrees include:

- BArch   Bachelor of Architecture

- BBA   Bachelor of Business Administration
- MBBS   Bachelor of Medicine, Bachelor of Surgery
- BSS or BSSc   Bachelor of Social Sciences
- BFA   Bachelor of Fine Arts
- BM or BMus   Bachelor of Music
- BSE   Bachelor of Science in Engineering
- BEng   Bachelor of Engineering
- BSN   Bachelor of Science in Nursing
- LLB   Bachelor of Laws

(Note that the US law degree is a postgraduate professional degree, the JD or Juris Doctor.)

For some first professional degrees, particularly in health sciences fields, the term "Doctor" appears in the degree title although the degree is at the baccalaureate level (QF*Emirates* Level 7). Examples are Doctor of Dental Surgery (DDS) and Doctor of Pharmacy (PharmD).

Graduate Qualifications

Most graduate degrees in the UAE are "taught" degrees, which include a significant component of coursework in addition to any supervised research or practice.

1. Postgraduate Diploma (QF*Emirates* Level 8)
A Postgraduate Diploma typically includes one year of full-time study, or at least 24 semester credits (or equivalent) of course work beyond the Bachelor's degree.

2. Master's degree (QF*Emirates* Level 9)
A Master's degree typically requires at least one year of full-time study, or a minimum of 30 semester credits of course work (or equivalent) beyond the Bachelor's degree. The minimum credits are not inclusive of any non-credit bridge courses which may be required. (See "Bridge Program", below). A Master's degree often, though not always, requires a substantial research paper, a thesis, or a project. As is the case for the baccalaureate, the Master of Arts (MA) and Master of Science (MS or MSc) are the basic degrees awarded in the subject, such as an MA in English (not Master of English or Master of English Literature), or an MS in Chemistry (not Master of Chemistry).

In some cases, such as the Master of Fine Arts (MFA) or Master of Social Work (MSW), the Master's degree is considered the "terminal degree" in the field.

3. Doctorates (QF*Emirates* Level 10)
A Doctorate degree typically requires at least three years of full-time study, with at least 54 semester credits (or equivalent) beyond the Master's level. There are several recognized distinctions among those degrees which are generally labeled "doctorate." The biggest distinction is between those doctorates which are "earned" and those which are "honorary." See the description for "honorary doctorates" below. Other distinctions are discipline specific and are usually conveyed through the name of the degree.

   a. Academic doctorate. In the UAE, an academic doctorate requires one or more years of coursework beyond the Master's degree, as well as academic research.

Doctorates are nearly always awarded in recognition of academic research that is of a publishable standard (even if not actually published) and that represents some original contribution to human knowledge. The research is usually assessed by submission and defence of a doctoral thesis or dissertation. The usual degree title is the PhD (Doctor of Philosophy).

b. **Professional doctorate.** A professional doctorate requires a minimum of one year of coursework beyond the Master's degree and independent research. The emphasis of the degree is on research skills and advanced professional knowledge in an applied field of specialization. Examples include the Doctor of Education (EdD), Doctor of Psychology (PsyD), and Doctor of Business Administration (DBA).

c. **Honorary doctorate**. As the name implies, this degree – for example, "Doctor of Letters (DLitt)" – is to honor an individual and carries no academic standing. It is not considered an "earned doctorate" even though the individual being honored may have undertaken significant work in the discipline for which they are being honored. Only institutions who currently have doctorate programs may award honorary doctorates. Institutions are required to inform the CAA of any intent to award an honorary doctorate, and supply the justification of the award for the recipient.

Joint and Dual Qualifications

While the terms for various arrangements in which students study simultaneously for two degree programs are not entirely consistent among nations and institutions, the definitions below are used by the Commission.

1. Joint Qualification
A single degree awarded by two institutions, where students study a curriculum that is agreed between the two institutions.

2. Dual Qualifications
Two degrees awarded by two institutions, to students who have met the requirements for completion of both degrees.

Faculty Titles

The term *faculty* or *faculty member* refers to those employees of a HEI whose responsibilities are mainly in teaching and/or research. In some institutions the terms "academic staff" or "teaching staff" are used. Administrators, such as Deans, often concurrently hold appointments as faculty members.

Term of Appointment

1. Part-time
A part-time faculty member is one whose major commitment is not to the institution concerned. Although part-time faculty members are subject to the same requirements for employment as full-time faculty, their teaching assignment is limited to a maximum

of six credit hours per semester (or equivalent). The term "adjunct faculty" is often used as a synonym for "part-time faculty."

2. Full-time
A full-time faculty member is one whose primary employment is with the institution concerned, and who receives a contract as a full-time employee with a primary assignment in teaching and/or research.

3. Rolling Contract
In a "rolling contract", a faculty member's favorable annual evaluation is followed by an extension of the contract, so that it remains valid for the same period as the original contract. In this fashion, an individual has reasonable job security as the contract does not expire. "Rolling contracts" assume that other conditions of employment, including residency requirements of the UAE, are met.

Academic Ranks

1. Professor
An appointment requiring an earned doctorate or terminal degree, or equivalent, and demonstrated, sustained high quality teaching, wide recognition for scholarly activities, and substantial service to the university and appropriate outside communities. Appointment at the rank of Professor is usually made only after extended service as an Associate Professor.

2. Associate Professor
An appointment requiring an earned doctorate or terminal degree, or equivalent, and demonstrated high quality teaching, recognition for scholarly activities, and service to the university and community. Appointment at the rank of Associate Professor is usually made only after extended service as an Assistant Professor.

3. Assistant Professor
An appointment requiring an earned doctorate or terminal degree, or equivalent, and potential for excellence in teaching and research. This is typically the entry-level appointment for an individual who holds a terminal degree in his/her field.

4. Principal Lecturer
An appointment requiring an earned doctorate or terminal degree, or equivalent, and an established record of excellence in teaching, research and scholarship. The rank of Principal Lecturer is substantially equivalent to Professor or an experienced Associate Professor. Appointment to the rank typically assumes extended service at the rank of Senior Lecturer.

5. Senior Lecturer
An appointment requiring an earned doctorate or terminal degree, or equivalent, and demonstrated high quality teaching, research and scholarship. The rank of Senior Lecturer is substantially equivalent to an either an Associate Professor or an experienced Assistant Professor. Appointment at the rank typically assumes extended service at the rank of Lecturer.

6. Lecturer

In the US system, "Lecturer" refers to an appointment below the Assistant Professor level, and is sometimes synonymous with "Instructor". A Lecturer appointment normally requires at least a Master's degree or equivalent professional qualifications. In the UK system and in some Arab countries, a Lecturer appointment normally requires a terminal degree and is equivalent to Assistant Professor.

7. Instructor

An appointment requiring a Master's degree, or a Bachelor's degree and equivalent professional qualifications.

8. Clinical Faculty

"Clinical Faculty" typically refers to an individual employed by a hospital and/or other professional entity, whose appointment to the educational institution is for the sole purpose of supervising a clinical rotation or practicum. In medical education, for example, clinical faculty often provide supervision and instruction through what are termed hospital or clinical rotations.

9. Part-time/Adjunct (Professor, Associate Professor, Assistant Professor, or Principal Lecturer, Senior Lecturer, Lecturer)

A part-time appointment is offered to persons not regularly or primarily employed within the academic unit to which the appointment is made. The modifier "adjunct" can be used in connection with any rank and is synonymous with "part-time" in most cases. Because of training, experience, credentials and interest, part-time faculty are invited to participate to varying degrees and for different periods of time, in the teaching, research and/or instructional programs of academic departments.

10. Visiting (Professor, Associate Professor, Assistant Professor, or Principal Lecturer, Senior Lecturer, Lecturer)

A guest appointment normally offered to a faculty member from another institution for a limited time period, for example one academic year, and appointed at the rank held at that institution. Responsibilities are normally similar to those of full-time faculty in the department to which the appointment is made.

Programs, Courses and Qualifications

1. Advanced Standing

The granting of credits (for a program/course/module) indicating that the learner is deemed to have satisfied the requirements for which the credits have been awarded. It may include exemption where applicable.

2. Articulation

The documented relationship between qualifications and programs, agreed through a process of comparison between qualifications and their respective outcomes, often with a view to facilitating learner progression.

3. Assessment

The processes used to evaluate achievement of the expected learning outcomes (knowledge, skills and competences), leading to certification of a qualification or part of a qualification.

4. Benchmarking

The process of measuring and comparing performance, services or practices with comparable systems or institutions both inside and outside the UAE, for the purpose of continuous improvement.

5. Blended Learning

A method of educating that uses e-learning techniques, such as online delivery through the web, discussion boards and e-mail, combined with traditional face-to-face lectures, seminars and tutorials.

6. Bridge Program

A program intended to "bridge the gap" between a student's prior work and the background required for the program he/she is entering. Typically, such a program would be needed, for instance, by students entering graduate business education where the student's undergraduate major was in an area other than business, or graduate engineering programs where the student's major was in a different engineering specialty. The courses in a bridge program typically do not carry degree credit. Institutions may choose to require enrolment in bridge programs as a condition of admission. The term "bridge program" is also used in nursing to refer to a Bachelor's degree "top-up" program whose entry level is a Diploma in Nursing.

7. Clinical Training

A program of learning established by cooperation between appropriate departments of an institution and hospitals or other allied health providers serving as the institution's partners. Clinical training is structured with an appropriate learning plan, expected outcomes, and ongoing assessment and evaluation.

8. Cohort Analysis

An analytical tool for tracking students from a common starting entry point through to graduation, often presented as a visual chart representing progression and attrition at various milestones between admission and graduation. Used for identification of obstacles and challenges in the progression of students, through the institution as a whole or in relation to specific programs of study.

9. Competency

The proven ability to use knowledge, skills and other abilities, within a context of a system of values, to perform a function against a given standard in work or study situations, and in professional and/or personal development. In the *QFEmirates*, 'competence' is described in terms of autonomy and responsibility, self-development, and role in context.

10. Composite Award

An award for formal recognition of learners who achieve a cohesive set of learning outcomes, but not the full combination of learning outcomes required for a Principal Qualification.

11. Concentration

A concentration is best thought of as a grouping of courses which represent a sub-specialization taken within the major field of study. For example, a student majoring in

biology might have a concentration in genetics, or a student in electrical engineering may have a concentration in telecommunications or instrumentation and control. A concentration may be specified on the diploma or in the student's academic record (transcript). For undergraduate programs, the CAA requires a concentration to include at least 15 credits of study, or equivalent, in the specialized field in order to be recognized by the MoE and included in the listing on the CAA website. For graduate programs, a concentration must have a minimum of 9 credits of distinctive courses to justify the specialization.

12. Conditional Admission

Conditional admission of a student to a college or university is dependent upon the individual successfully completing coursework, or meeting other specified criteria, in order to progress into the full set of courses within the academic program.

13. Course or Module

A *course* consists of a number of instructional activities over a prescribed period of time. It deals with a single subject and is commonly described by title, number, credits, and expected learning outcomes in the institution's *Catalog*. A *module* sometimes refers to a sub-division within a course covering a topic or part of a topic. In the British system, the term *module* is synonymous with *course*. In systems based on American higher education, the term *module* typically refers to a course which is offered in a more concentrated framework, such as an "8 week module." Note that in the UK and in other systems adopting terminology used in the UK, the word *course* is often used to refer to what the *Standards* term a *program*.

14. Credits and the Credit System

The academic credit provides a basis to measure the amount of engaged learning time expected of a typical student. A credit, or credit hour, is a unit of measurement defining the student's overall effort towards attaining a qualification.

In the US system, which is adopted by most UAE institutions, 1 semester credit equals approximately 1 hour of time in class per week over a semester of 15 weeks or longer. (See "Semester" below). It is assumed that a student spends two hours outside of class in independent learning or specific course assignments for every hour in class. This implies that one academic credit equates to a 45-hour commitment to learning over a semester. For laboratory or studio-based courses, the allocation of credit differs; 1 semester credit normally is given for two hours of laboratory or studio time per week over a 15-week semester.

The UK system considers a single credit to be equal to 10 "learning hours", of which approximately one-third may be class contact time, and the remainder divided between directed and independent learning. On this basis the normal full load for a semester is 60 credits.

Resulting from the Bologna Process in Europe, and aimed at facilitating student mobility in higher education, the ECTS (European Credit Transfer and Accumulation System) represents another alternative credit definition. In the ECTS system, 60 credits are allocated to the workload of a full-time academic year, 30 credits are normally allocated to a semester and 20 credits to a trimester. Qualifications that have formal

programs lasting three full-time academic years in Europe are allocated 180 ECTS credits.

15. Credit Transfer
A system whereby successfully completed units of study contributing towards a degree or diploma can be transferred from one program to another.

16. Curriculum
The term refers both to the range of courses offered by an institution, and to a set of related courses constituting an area of specialization, such as the computer science *curriculum* or the civil engineering *curriculum*.

17. E-learning
E-learning is a term applied to any form of learning which is electronically based. The requirements for a course delivered through e-learning are the same as those that apply to any credit-bearing course. Electronically delivered courses must have learning outcomes, a syllabus or outline of study, regular and systematic assessments and an opportunity for students to interact with the faculty member teaching the course. The student-instructor and student-student interaction may be entirely electronically based, or it may include bringing students together physically from time to time. The latter is often referred to as a *hybrid course* or *blended course,* in that it combines electronic learning with traditional classroom learning (see *Annex 15: Courses Taught Through e-Learning*).

18. Electives
Courses which are not compulsory for students. *Electives* may be *free*—selected by the student from any course offerings, or *restricted*—chosen from a pre-determined list of options.

19. Experiential Learning
This term applies to those learning experiences which involve the application of learning typically outside of the classroom. Experiential learning encompasses such experiences as internships, practicums, field study, or clinical learning.

20. Foundation Program
A developmental or remedial program specifically intended to enable UAE secondary school graduates to qualify for admission to higher education.

21. General Education
General education is that aspect of an undergraduate curriculum intended to provide students with critical thinking skills; a broad understanding of the approaches to knowledge such as the humanities, the arts, the social sciences or the sciences; a common core of understanding among students (such as in Islamic studies or other cultural studies); and a level of skill appropriate to higher education in mathematics, information literacy, the application of technology and communications (oral and written).

22. Independent Study
A course in which a student is individually supervised by a faculty member, which enables a student to undertake a learning opportunity which is otherwise unavailable.

Independent study courses must have an appropriate learning plan (typically a syllabus), learning outcomes, end of term evaluations and appropriate assessment. The *SPA* limit the amount of such credit that can be applied to an undergraduate qualification.

23. Internship
The term applies to an experience in which a student has a program-related assignment involving attachment to a recognized business, agency or organization. The internship must be appropriate to the major or program of study of the student. The term "practicum" is usually synonymous with internship. See *Annex 12*: *Guidelines for Good Practice in Internships or Practicums*.

24. Learning Outcomes
In the context of QF*Emirates*, this refers to knowledge, skills, and aspects of competence that a learner is expected to know and be able to do at each level of a qualification (see https://www.nqa.gov.ae/en).

25. Level
An indication of the relative complexity and/or depth of achievement, and the autonomy required to demonstrate that achievement by the learner. There are ten [10] levels in the QF*Emirates*; they differ from one level to another with the greatest complexity at Level 10 (see https://www.nqa.gov.ae/en).

26. Level Descriptors
Generic statements which specify the learning outcomes and the purpose of a qualification at a given level, defined in terms of knowledge, skills and competence. The descriptors can be used for describing and comparing qualifications (see https://www.nqa.gov.ae/en).

27. Major
The *major* is the field of study in which a student specializes at the baccalaureate level. The term is not typically used in qualifications below the baccalaureate and is only occasionally used in graduate programs. The major usually requires that a student complete a minimum of 30 semester credits (or equivalent) that are specified for the major and distinctive to that subject area. To earn a *double major*, a student must meet the subject-area requirements of each of the two majors. Typically a student receiving a degree with a major will be issued a diploma that includes the name of the major: for instance, Bachelor of Arts in History or Bachelor of Science in Biology.

28. Minor
A minor is a separate field of study outside the major or concentration in which a student has a secondary area of specialization, requiring less course work than the major. Minors usually require that students earn 12-18 semester credits in subject area courses.

29. Practice Teaching
A supervised part of an education curriculum involving a student's placement in an educational institution, designed to prepare teachers for work in primary and secondary schools. In some institutions the term "student teaching" is used. Practice teaching is typically a full-time experience in the semester in which the student is engaged in it.

30. Program

The set of courses and other formally established learning experiences which together lead to a qualification (see *Curriculum*, above). *Program* may also refer to a specific aspect of the curriculum, such as the General Education *program* or a study abroad *program*.

31. Qualifications Framework for the UAE (QF*Emirates*)

The instrument for the classification of qualifications according to a set of criteria for specified levels of learning outcomes that need to be achieved, enabling qualifications to be described and compared. The framework of qualifications aims to integrate and coordinate certification subsystems within the UAE, and improve the transparency, access, progression, transferability and quality of such qualifications in relation to the employment sectors and other structures in civil society. A framework of qualifications has particular relevance as an aid in the recognition of foreign qualifications (see https://www.nqa.gov.ae/en).

32. Remedial Courses or Programs

Such courses or programs prepare a student for enrolling in a regular program, and aid the student in rectifying an area or areas of deficiency. Remedial courses are non-credit courses and do not count toward the requirements of an academic qualification.

33. Research

The systematic investigation into and study of materials and sources, in order to establish facts and reach new conclusions.

34. Research Support

The provision of supervision, technical facilities and advice, and appropriate library resources/reference materials that enable postgraduate research students to study effectively.

35. Scholarly Activity

Creative work that is peer reviewed and publicly disseminated. There are several basic forms of scholarship, including discovery of new knowledge; development of new technologies, methods, materials or uses; and integration of knowledge leading to new understanding.

36. Semester and Term

A *semester* is a period of time, typically a minimum of 15 weeks, during which an institution offers courses. Some courses may be offered in a time-shortened period, often called a *term*, such as a *summer term or January term*, which nonetheless offers class contact time and out-of-class assignments equivalent to a semester course. Some institutions use a calendar that divides the academic year into quarters (10-week instructional periods) rather than semesters.

37. Teaching and Learning Methodologies

The principles and methods used for instruction, to be implemented by teachers to achieve the desired learning by students. These strategies are determined partly by the subject matter to be taught, partly by the nature of the learner, and partly by the intended learning outcomes to be achieved. For a particular teaching method to be appropriate

and efficient, it must relate to the characteristics of the learner and the type of learning it is supposed to bring about.

38. Transcript

A record, normally printed, detailing, for a given qualification/award, formally recognized 'parcels' of learning outcomes achieved against the standards/requirements set by the relevant accreditation/awarding body.